

Mission Matters

Produced for the Affiliates of
SISTERS OF CHARITY OF LEAVENWORTH HEALTH SYSTEM

INDUSTRY ISSUE



MISSION & PEOPLE

We will promote
a culture that strengthens
our Mission and Values:
makes tangible
the presence
of God's healing love;
improves the health
of the communities
we serve; and
broadens access
for the underserved
population to
appropriate health
care providers.



The need to cultivate future leaders

Wanted, needed and in great demand: leaders to sustain the Catholic health care ministry in the spirit of its founders and in the face of tremendous change.

Why is it
important
to develop
future
leaders?

Baby boomers are aging. The complexity of the health care industry is growing exponentially. Market pressures are mounting daily. The pool of skilled business leaders is not keeping pace with the demand. Catholic health care faces the additional challenge of developing lay leaders to carry on the Mission as the number of women religious (sisters) declines.

Ministry formation, leadership development and organizational development are the key strategies the Sisters of Charity of Leavenworth Health System (SCLHS) has adopted to address these challenges and to ensure sustainability of the Mission and the ministry.

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SYSTEM STRATEGY

Mission key focus of strategic direction

Throughout the history of the Health System, our Mission has remained a key focus of our strategic planning.

We will, in the spirit of the Sisters of Charity, reveal God's healing love
by improving the health of the individuals and communities we serve,
especially those who are poor or vulnerable.

A sense of Mission permeates the *FY 2007-2009 Strategic Plan for Ministry* and is addressed specifically through the Mission and People Goal. This Goal provides the core strategy and framework to help ensure that the Hospitals, Clinics and staff live up to who we say we are and what we profess to do. This edition of *Mission Matters* highlights objectives and initiatives related to leadership development and to sustaining our health ministry as Catholic.

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Welcome back to *Mission Matters*,

the publication of the Sisters of Charity of Leavenworth Health System (SCLHS) that has been redesigned to probe strategic issues facing the health care industry and being addressed by our Catholic health ministry.

The timing and featured topics of this edition – ministry formation, leadership development and organizational development – are on target as we introduce the Common Calling Leadership Model across SCLHS. This leadership model centers on our Mission and Core Values and the interdependence of Affiliate Hospitals, Clinics and the System Office. The model stresses that none of us can be successful without the other – that all of our interests are mutual and must be aligned toward the success of the System as a whole.

Mission is the source of our Common Calling. At the same time, sustaining the Mission is the reason we must heed this call with a revitalized and highly focused leadership model.

In support of this, the Health System is strongly committed to developing our human resources. We believe that this is essential to fulfilling our Mission mandate.

We are excited about efforts underway throughout SCLHS and about sharing them with you in this publication. We look forward to your feedback and comments.

Bill Murray
William M. Murray
President/CEO



The need to cultivate future leaders

(From page 1)



▲ Providence Medical Center

Putting the issue in perspective

Catholic health care in the United States has its origins in the pioneer spirit of communities of women religious. Six years after the Sisters of Charity came north to what would become Kansas, they founded Saint John Hospital, Leavenworth, in 1864. Their health care ministries spread west and started in house-like settings but soon required larger hospitals to meet growing demands.

In the spirit of St. Vincent de Paul, the 17th century priest to whom they trace their roots, the sisters partnered in their ministry with lay people and clergy. They started nursing schools and employed skilled staff.

Over time, what had begun as a ministry became institutionalized as health care delivery grew in complexity, scope and specialization. The “birth” of the health insurance industry ushered in “third party payment” for health services. Catholic hospitals began to incorporate as legal entities separate from the religious communities and to develop lay advisory boards. Medicare legislation, enacted in 1965, irrevocably changed the landscape of reimbursement and regulation with the federal government as the major purchaser of major health care services.

Tidal waves of change

As the sisters managed and adapted to these changes, an event of tremendous proportions occurred in the Catholic Church in the 1960s. The Second Vatican Council, a meeting of the world’s Catholic bishops, brought the Catholic Church into the modern world and expanded ministry opportunities for sisters and laity.

While much good came from this transformational event, there were repercussions as well. Sisters began to pursue diverse ministry opportunities other than health care and education – their traditional roles. In a society that increasingly emphasized individualism and personal freedom, a number of sisters left religious life, and fewer women entered religious communities – a trend that has continued. At the same time, lay men and women became more involved in leadership roles in ministries of the Church, including Catholic health care.

The net result

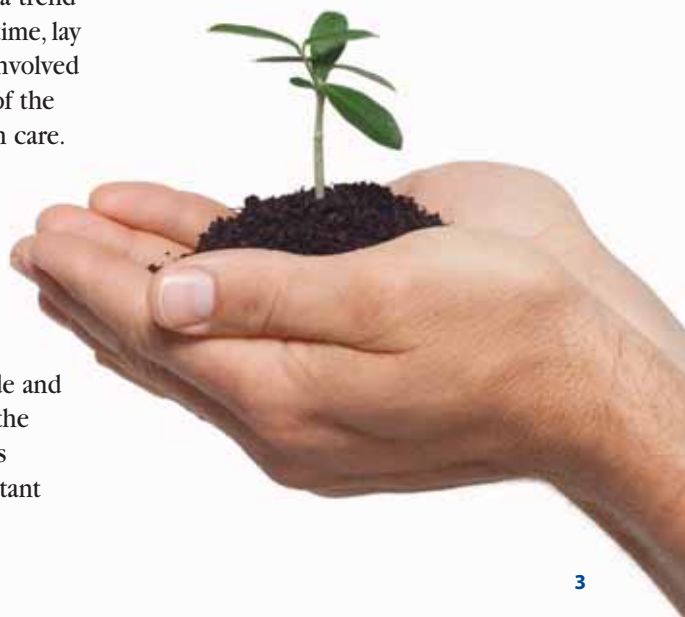
As the disciplines of business management and health care administration produced a new generation of lay leaders, these individuals have worked alongside and been mentored by the sisters in the health care ministry. Today, sisters continue to serve in many important

capacities in Catholic hospitals with their greatest representation on boards of directors, in spiritual care departments and as mission leaders.

Yet, what was once perceived as the abiding presence of sisters in Catholic hospitals continues to diminish. Many of the lay leaders who have ministered with the sisters are baby boomers who are aging themselves. These lay leaders bear increasing responsibilities for developing the next generation of Catholic health care leaders.

Author Peter J. Giammalvo, Ph.D., asks the question: “How do we form leaders who have not experienced working directly with religious?” How does Catholic health care form what he calls the “second generation” of ministry leadership? (*Health Progress*, September-October 2005, Volume 86, Number 5)

The Sisters of Charity of Leavenworth Health System has asked and expanded upon that question: how do we cultivate the next generation of leaders of the ministry who are also leaders in the industry? How do we integrate ministry formation and leadership development to ensure continuity of the mission?





Formation of leaders in the spirit of Catholic health care ministry

The Health System is committed to ensuring the development of System leaders who will preserve the Catholic health ministry into the future.

Sister Judith Jackson, S.C.L., SCLHS vice president, sponsorship, emphasized the importance of integrating ministry formation and leadership development.

“We want leaders who blend their expertise in the business of health care with their understanding and commitment to the foundational principles of Catholic health care,” she said. “This means that our leaders apply Mission, Vision and Core Values at every level of decision making across the organization. They also ‘find a voice’ to continue to lead the ministry dimension of the organization into the future.”

Equipping leaders with the background and skills to accomplish this is the focus of a collaborative ministry formation program which SCLHS has helped develop and fund.

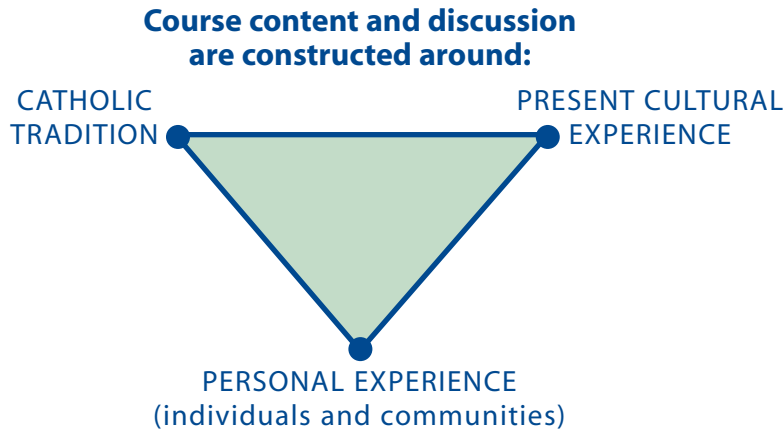
Ministry Leadership Center fosters ‘formation’

The language of “ministry formation” is becoming real and pragmatic to the senior leaders of Catholic health systems participating in the first sessions of a program offered through the newly formed Ministry Leadership Center. Five Catholic health systems with hospitals on the west coast sponsor the Center: Catholic Healthcare West, San Francisco, Calif.; Daughters of Charity Health System, Los Altos Hills, Calif.; Providence Health System, Seattle, Wash.; St. Joseph Health System, Orange, Calif.; and SCLHS.

Leaders participate in a rigorous three-year program that includes spiritual, intellectual and emotional formation. The Ministry Leadership Formation program incorporates readings, reflection and ritual, lectures, online learning/interaction, skills and tools needed for integrating content into daily hospital operations, on-site mentoring and continuous evaluation with outcome measures.



▲ ABOVE PHOTO: Sister Judith Jackson and Winifred Williams discuss the Ministry Formation and Leadership Academy programs.



Perspectives on the program

James Kiser, CAO, St. James Healthcare, Butte, Mont., has found the Ministry Formation Program relevant both personally and in his leadership position. “This program has helped reaffirm my work as a calling and therefore raised the stakes. It has helped me recognize the importance of ensuring our organization’s ministry into the future for the people and communities we serve.

“As senior leaders, we set the tone and model the behavior we wish to establish throughout our organizational culture,” James said. “I have become more comfortable in expressing the business side of our ministry with the mission as one language.”

Better understanding the Catholic health care ministry has been a benefit to Winifred Williams, SCLHS director, organizational development and education. She has been impressed with “the way in which the five Catholic health care systems have combined both commitment and resources to address an inevitable challenge of preserving the ‘tradition’ in Catholic health care.”

Winifred added, “The diversity of thought among the participants has been quite impressive. I have also gained deeper insight into my personal spirituality and how to balance the tensions that may exist between values, spirituality and business demands.”

From his vantage point at Saint John Hospital, Leavenworth, Kan., Greg Madsen, administrator, has felt an increased sense of responsibility due to his participation in the program. “I realize that I will need to be fully capable of teaching the heritage, Mission and Core Values to future generations of the hospital employees,” Greg said. “The Mission must continually be taught, supported and, most importantly, lived by those of us entrusted with leadership in this very important ministry.”

2005-2008 PARTICIPANTS

- Ed Barker, vice president, general counsel, SCLHS
- Jack Bell, chief operations officer, St. Vincent Healthcare, Billings, Mont.
- Michael Dorsey, chief operations officer, St. Francis Health Center, Topeka, Kan.
- Shirley Heintz, vice president, patient care services, St. Francis Health Center, Topeka, Kan.
- Sister Judith Jackson, vice president, sponsorship, SCLHS
- James Kiser, chief administrative officer (CAO), St. James Healthcare, Butte, Mont.
- Greg Madsen, administrator, Saint John Hospital, Leavenworth, Kan.
- Greg Nielsen, chief administrative officer (CAO), Holy Rosary Healthcare, Miles City, Mont.
- LaTisha Starbuck, vice president, mission integration, Saint John’s Health Center, Santa Monica, Calif.
- Terry Weinburger, vice president, mission and organizational effectiveness, St. Mary’s Hospital and Medical Center, Grand Junction, Colo.
- Winifred Williams, Ph.D., director of organizational development and education, SCLHS

2006-2009 PARTICIPANTS

- Bob Boysen, chief information officer, SCLHS
- Jeff Gollaher, vice president, financial services, Holy Rosary Healthcare, Miles City, Mont.
- Susan Kerschen, vice president, patient care services, St. James Healthcare, Butte, Mont.
- Mike Kongs, vice president, finance and information services, St. Francis Health Center, Topeka, Kan.
- Lou Lazatin, president/CEO, Saint John’s Health Center, Santa Monica, Calif.
- Richard Lopes, M.D., chief clinical transformation officer, SCLHS
- William M. Murray, president/CEO, SCLHS
- James T. Paquette, president/CEO, Providence Medical Center and Saint John Hospital, Kansas City and Leavenworth, Kan.
- Michael Rowe, vice president, finance, SCLHS
- Juanita Roy, vice president, finance, Providence Medical Center and Saint John Hospital, Kansas City and Leavenworth, Kan.
- Steve Shandera, vice president, clinical and support services, St. Vincent Healthcare, Billings, Mont.
- Jerry Spicer, vice president, patient services, St. Mary’s Hospital and Medical Center, Grand Junction, Colo.



Nationwide trends point to an expected growth in leadership positions to meet demands in the health care industry.

The Advisory Board, a national research and think-tank organization, projects that management, business and financial positions will account for 31 percent of the growth in health care jobs through 2012.

("Maximizing Return on Leadership Development," 2004, The Advisory Board Company)

SCLHS has implemented both leadership development and succession planning initiatives to be able to fill these positions, when possible, with highly qualified internal candidates.

SCLHS committed to development of our future leaders

Today's health care environment is becoming increasingly complex and demanding. As a result, there is a growing need to broaden the perspectives, skill-sets, and competencies of SCLHS leaders to prepare for the future. To address this impending need, the Health System has initiated an exciting new program called "The Leadership Academy Fellowship" through The Advisory Board.

"This is a landmark event for our System and is a part of our strategic initiative to identify and prepare key talent using a consistent and structured format to further develop our future leaders,"

said Winifred Williams, Ph.D., SCLHS director of organizational development and education. "SCLHS is committed to talent development, and the Leadership Academy directly supports this." Participant Tracy O'Rourke, manager, strategic development, said "I appreciate having this opportunity for professional development."

Thirty-three leaders from across the System were nominated to participate in the program by each Affiliate Leadership Team and the System vice presidents with final approval by William M. Murray, System president/CEO. The first session of the SCLHS Leadership Academy was held at the System Office in October 2005 and included a tour of the Mother House of the Sisters of Charity of Leavenworth. Future classroom sessions will rotate to different Affiliate locations to maximize System exposure for program participants.

The Health System envisions starting additional "classes" of emerging leaders



each year with the next session targeted for fall 2006. The Academy is a two-year program that includes three components: classroom courses, coaching and on-site projects focused on addressing key System initiatives.

Winifred said that the Health System has a "private label" arrangement with The Advisory Board. "As we proceed with the first group through the program, we are tailoring the content for SCLHS and to encompass our heritage."

Succession planning: investing in our future

SCLHS is increasing its rigor around a process known as succession planning. Succession planning is a strategic and deliberate activity to

identify and develop talent from within the organization to meet the needs of the future. It is the development of a group of well-trained, broadly experienced, well-motivated people who are ready and able to step into key positions as needed.

"In short," Winifred said, "succession planning is an investment in the organization's future."

Each year, SCLHS leaders from across the Health System engage in the succession planning process to identify individuals who might potentially assume roles of increasing responsibility in the future. In this process, the Affiliate leadership teams and the System Office executives

present succession talent to the System CEO and the System vice president of human resources for review. Current leaders assume responsibility for helping develop our future talent. While there are no guarantees of promotions, individuals are able to take advantage of opportunities to grow and expand their experiences.

"The System's ability to identify and prepare future leaders is critical for continued viability, growth and organizational capability to fulfill our Mission," Winifred concluded.

LEADERSHIP ACADEMY PARTICIPANTS

Holy Rosary Healthcare

Bev Askin, *Hospice coordinator*
Annette Ban, *manager, lab*
Janice Hirsch, *ICU clinical coordinator*

Providence Medical Center

Terry Jett, *director, rehab services/radiation oncology*
Teresa Lienhop, *director of critical care services*
Dawn Walters, *clinical supervisor*

Saint John's Health Center

Dawna Hendel, *administrative director, cardiopulmonary services*

Saint John Hospital

Jodi Fincher, *director of inpatient/outpatient services*
Marta Hudson, *administrative director, patient care services*

St. Francis Health Center

Kimberly Brown, *director, accounting, admitting and business office*
Ron Marshall, *director, laboratory and radiology*
Kirk Starr, *pharmacy operations coordinator*

St. James Healthcare

Chris Hopkins, *senior director*
Susan Kerschen, *vice president, patient care services*
Traci O'Neill, *senior director*

St. Mary's Hospital & Medical Center

Carol Applegeet, *director, perioperative services*
Sara Brown, *operations manager, inpatient therapies*
Dennis Bruens, *director of planning*

Terri Chinn, controller

Mary Crumbaker, *director, research compliance*
Sheila Goldsmith, *director of critical care and cardiac services*
Terry Stefaniak, *director, human resources and employee health services*

St. Vincent Healthcare

Steve Ballock, *regional vice president, finance/CFO*
Jim Greeley Sr., *director of operations*
Nancy Kallem, *vice president, nursing/patient care services*
Bart Rodrigues, *regional vice president, mission integration*
Donna Russell, *cook director, cardiac cath lab*
Sandi Tewell, *director of nursing*

System Office

Renee Budzenski, *system director, application systems, information services*
Ty Coup, *manager, finance and administrative systems, information services*
Cherica (C.J.) Hardeman, *functional leader, operations, human resources*
Tracy O'Rourke, *manager, strategic development*
Sharon Owens, *system director, finance/controller*
Winifred Williams, *director, organizational development and education, human resources*

DEVELOPING THE Organization

The Health System has a long tradition of valuing the talents and expertise of employees at the Affiliate Hospitals and Clinics. Irma Napoli, SCLHS vice president, human resources, said that inclusion of “organizational development” as an objective of the Mission and People Goal reinforces this emphasis on people and culture. SCLHS has invested in the development of employees through various initiatives that are System-wide or Affiliate-specific.

“The *Strategic Plan for Ministry* affirms that the Health System plans to build our internal talent pool and develop people to their full potential,” Irma elaborated. “This complements our efforts to recruit and retain employees committed to the Mission and to excellence, quality and customer service.”

Change: face it, embrace it, adapt

Preparing the organization for “seasons of change” is the thrust of “The New Reality” workshops being attended by System leaders and managers and led by Karl G. Schoemer, founder and president of VisionQuest. In *The New Reality* handbook, subtitled, “How to make CHANGE your competitive advantage,” Karl writes, “All change is about movement – individual movement, organizational movement. As individuals we must move away from danger and toward opportunity, and we must do so consistently and quickly. When we accomplish this, we function at our highest level. The organization, in turn, must be filled with people doing the same – moving quickly and consistently toward opportunity, toward the customer, toward the marketplace.”

The workshop focuses on the following messages:

- Change is here to stay.
- We need to learn adaptability and adjust and alter our mindsets to be successful.
- There are no longer any guarantees or entitlements; performance expectations need to be clear.
- Leaders’ role is to help employees anticipate and adapt to change and to communicate and share information.



St. Mary's has strategically invested significant time and energy to address needs of employees throughout the hospital and to strengthen our capacity as a learning organization.

JoAnna King



Approach that's thriving at St. Mary's, Grand Junction

Organizational development efforts at St. Mary's Hospital and Medical Center, Grand Junction, Colo., are as expansive and impressive as the Rocky Mountains that border this western slope community! This is due largely to the vision, leadership and diligence of Robert W. Ladenburger, president/CEO; Terry Weinburger, vice president, mission and organizational effectiveness; and JoAnna King, director of education.

Terry, who is vice president over areas that include human resources, education and mission, sees a natural blending and fit between organizational development, leadership development and ministry formation. "I don't think of these as separate and distinct," he explained. "To me, they are all part and parcel of ministry."

Tracing the origin of St. Mary's organizational development efforts, JoAnna summarized, "We needed to find a way to better understand who we are as a culture and tap into the human resources to give meaning to how we do our work everyday. Education and training is one way that we do this."

St. Mary's has devoted considerable time to developing programs to encompass alignment with the Strategic Plan; intentionality about language, communication and collaboration; and to promote a "culture of reflection."

Highlights include:

- The Job Description Performance Planning and Appraisal system that encompasses pre-screening of prospective employees, performance expectations and periodic review and appraisal – all based on Core Values.

- A new hire selection process using specific behavioral interview skills that predict productivity based on prior performance
- Use of adult learning methods and interactive courseware to help differentiate St. Mary's as a Catholic hospital.
- New employee orientation, designed to inspire, inform and engage employees through creative experiences including: a scavenger hunt, computer enhanced "Jeopardy," and the sharing of freshly baked bread, commemorating St. Vincent de Paul, a heritage leader of the Sisters of Charity.
- "Commit to Care" initiative focused on safety, courtesy, image and efficiency. All staff make pledge statements to meet patient expectations.

Add to this an extensive list of course offerings, certified internal facilitators (16) and subject matter experts, and an enthusiastic Education Council, and it is clear that St. Mary's is committed to being a high caliber learning organization. This approach is driven by the philosophy that JoAnna explained, "Studies nationwide have demonstrated that learning drives organizational performance. Recognizing the value of our human resources, St. Mary's has strategically invested significant time and energy to address needs of employees throughout the hospital and to strengthen our capacity as a learning organization.

"For us, leadership is not a particular stratosphere," JoAnna said. "Everyone leads their position. Our goal is to help them be successful doing this."

Welcome to new SCLHS senior leaders

Please welcome our new senior leaders
who have joined or taken on new roles with SCLHS
since the fiscal year starting in June 2005.



Lourdes (Lou) Lazatin, president/chief executive officer of Saint John's Health Center (SJHC), Santa Monica, Calif. Prior to her appointment in August,

Lou served as interim president/CEO of SJHC since May 2005, and before that, was chief operating officer, starting in January 2005. Previously, Lou was employed by Tenet Healthcare for approximately five years. Prior to joining Tenet Healthcare, she served as senior vice president and chief executive officer for the Central Service Area of Sutter Health in Sacramento.



Eleanor L. Ramirez, chief operating officer (COO) at Saint John's Health Center. Ramirez came to SCLHS from Centinela Freeman Regional Medical

Center, Inglewood, Calif., where she was system chief nursing officer with responsibilities that spanned three campuses. She was involved with the successful transition of all three hospitals from Tenet Healthcare to a community, locally owned health care system. Eleanor gained significant health care experience spanning nearly 20 years at Daughters of Charity's St. Vincent Medical Center, Los Angeles, Calif.



David L. Mauss, vice president, planning and business development, Saint John's Health Center. David comes to the Health System from the California

region of Tenet Healthcare where he had been senior regional director of business development. From 1991 to 1997, he was vice president of business development with Garden Grove Hospital and Medical Center, Garden Grove, Calif.



LaTisha D. Starbuck transferred from St. Mary's Hospital and Medical Center, Grand Junction, Colo., to Saint John's Health Center, Santa Monica, Calif.,

where she is vice president, mission integration. She had served as vice president, mission integration, and corporate compliance officer at St. Mary's, Grand Junction, Colo. Tish had been at St. Mary's for nine years in other roles including chief information officer and vice president, patient services. Prior to that, she held positions in critical care and in information systems at St. Vincent Healthcare, Billings, Mont., also an SCLHS hospital.



Amy Falk, executive director of Caritas Clinics, Inc. Prior to assuming this position, Amy served as development director of Caritas Clinics, Inc.,

since 2001, with responsibilities for the Duchesne and Saint Vincent Clinics. She gained significant marketing experience spanning nearly 12 years at Martell & Associates, P.A., Kansas City, Kan., where she served in several roles from 1989 to 2001.



George M. Noonan, vice president, mission integration, St. Francis Health Center, Topeka, Kan. Prior to joining St. Francis, George served as chancellor of

the Diocese of Kansas City-St. Joseph, Mo., from 1995 to 2005. He was associated with the diocese since 1984 and held positions including ecumenical officer and director of ministries services.



Terry J. Weinburger, previously vice president of human resources at St. Mary's, has had his role expanded to encompass mission and

organizational effectiveness. Terry joined St. Mary's in 2000. His background includes human resource leadership positions with Mercy Health Services, Hope Network and American Dental Group. He also served as vice president, management consulting services, Right Management Consultants.



FINANCIAL STEWARDSHIP

We will maintain the System's financial strength through a combination of effective revenue enhancement, cost management and appropriate care.

Accounts payable centralization continues

As SCLHS Affiliates go live with the Lawson supply chain management feature, they are also transitioning to the centralized accounts payable function.

Providence Medical Center, Kansas City, Kan., Saint John Hospital, Leavenworth, Kan., and the System Office implemented this new system last year.

St. Francis Health Center, Topeka, Kan., made the transition, effective Feb. 1, and St. Vincent Healthcare, Billings, Mont., and Holy Rosary Healthcare, Miles City, Mont., deployed the Lawson general ledger, supply chain management and accounts payable functions on March 1.

This transition involves changes in the approval and payment of invoices and the adoption of a paperless approval process. Under the new process, all invoices from across the Health System will be forwarded to the System Office. They will be scanned, entered and rerouted to the approval source and returned via WebNow, the backbone of the new accounts payable system. Hospitals will retain responsibility for proper coding of the cost centers and accounts to which invoices should be charged.

Questions can be directed to the Accounts Payable Shared Services department by sending an email to APquestions@sclhs.net.



SCLHS issues bonds

In March, SCLHS issued \$120 million of tax-exempt bonds for capital expenditures that have been incurred in Colorado, Kansas and Montana.

The Health System continues to enjoy strong credit ratings from Standard & Poor's (AA), Fitch Ratings (AA) and Moody's Investor Services (Aa2). SCLHS has been able to use tax-exempt borrowing to fund projects at favorable interest rates.

SCLHS currently has outstanding bonds that were issued in 1998, 2000, 2002 and 2003. The total debt outstanding is approximately \$610 million with an average interest rate of 4.3 percent. SCLHS plans to issue more tax-exempt bonds in 2008 to finance several construction projects taking place in the next two years.

"SCLHS views the conservative use of tax-exempt bonds as an important way to finance hospital projects and strengthen and sustain the development of our community services," said Michael Rowe, SCLHS vice president, finance.

PHOTO TO THE RIGHT: ► Karen Chladek, customer service representative, answers billing questions.



Health Assembly to feature 'the spirit of leadership'

Rev. Robert J. Spitzer, S.J., Ph.D., president of Gonzaga University, Spokane, Wash., will be a featured speaker at this spring's SCLHS Health Assembly.

Father Spitzer will discuss "The Spirit of Leadership" as a critical element of an organization's approach to change for the common good. Father Spitzer is the former director of Gonzaga's Institute of Professional Ethics and the Institute on Character Development.

The Health Assembly is scheduled April 27-29 in San Diego, Calif. The Health System hosts the Assembly biennially as a leadership development and networking opportunity for members of System and Affiliate Boards of Directors, physician leaders and senior leaders.

IN THE
NEXT ISSUE &

Coming Soon

- ▶ Bill Murray, president/CEO, will be visiting Affiliate Leadership Teams and department directors at each hospital in the upcoming months to introduce Our Common Calling leadership model. Visits will be in tandem with Board or other scheduled meetings.
- ▶ A regular column focusing on Our Common Calling will debut in Affiliate employee newsletters starting in April. The column will explore the concepts included in the Common Calling resource guide distributed to Affiliate Leadership Teams and department directors. The purpose will be to engage all SCLHS employees in living the Common Calling model to achieve our Mission and strategic goals.
- ▶ The next issue of "Mission Matters" is planned for early in the first quarter of fiscal year 2007. We'll explore the industry issue of The New Physician Landscape, and how we're addressing that through the Preferred Provider strategy.

MissionMatters

This newsletter is published by Sisters of Charity of Leavenworth Health System to inform its constituents of strategic developments and news across the organization.

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Let us know what you
think about our first issue.

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