

Principled Leadership
In Mental Health Systems and Programs:
A Guide for Teachers and Trainers

*“Leaders are born and made: being born is the
more mysterious part.”*

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Forward

It was a chance encounter between the author and one of the co-authors of the book, “Principled Leadership in Mental Health Systems and Programs,” Dr. William Anthony, that lead to the creation of this guide. Both were on the agenda of the Second Annual USPRA Leadership Institute in the fall of 2008. Dr. Anthony was presenting on his book (co-authored with Kevin Ann Huckshorn) and the author of this guide was prognosticating about the future of psychiatric rehabilitation.

During a break, the two began talking about the book. How could they bring utility and life to the eight important principles outlined in the book, they mused? Dr. Anthony, reverting to his lifetime of experience in developing training tools for the field of psychiatric rehabilitation, suggested a training guide. Both believed that individuals could learn the skills necessary to be principled leaders. Hence, this attempt to do that for the thousands of individuals who work in mental health systems and programs who are invested in improving the quality of services and facilitating recovery for persons with psychiatric disabilities. It is hoped that this guide becomes a tool that assists leaders in overcoming some of the significant systemic barriers to excellence.

Many thanks go to Kevin Ann Huckshorn, the National Association of State Mental Health Program Directors, and the Substance abuse and Mental Health Services Administration for supporting this effort. They are commended for having the vision to see that such a tool might have far reaching benefits in the field.

In Dr. Anthony’s time-honored tradition of “telling, showing and doing,” this Guide for Teachers and Trainers takes each of the eight principles of leadership outlined in “Principled Leadership,” explains each principle (telling) and proceeds to provide examples in case studies about how the principles are utilized or not utilized (showing). The guide then tests the reader’s

comprehension of the principle in practice. The hope is that the process will facilitate the use of the principle in one's own job site (doing) and that the trainee will gain the skills to "pass them forward" to future leaders. As Anthony and Huckshorn observe in their book, the point of "Principled Leadership" was not only to improve the quality of services to individuals with severe mental illnesses but it is "also a call for the development of a new kind of leader."

We only need to look at nonprofit budget cuts, increased staff turnover, and recruitment difficulties in the social service world to know that their call is "spot on."

Anthony and Huckshorn suggest that there are three ways that leaders can learn: "1) trial and error, 2) from other people 3) from education and learning." This author suggests a fourth: affirmation of intuition. Proven, natural leaders do not always get the affirmation they need to implement their special talents. This guide was prepared with the notion that there are current leaders in the field who care enough about enhancing the path to recovery that they are willing to learn new skills or confirm extant skills. It was prepared with the belief that those leaders also have the vision and the passion to prepare a new cadre of leaders, willing and able to perfect that path in the future.

Perhaps the grandest endorsement for this Guide for Teachers and Trainers comes from a quote from "Principled Leadership:"

Until and unless business creates a cause, bigger and more embracing than enhancement of the shareholders, it will have few great leaders. We are more likely to find them in the nonprofit arena. If that is so, than (sic) that sector may yet become the training ground for business and perhaps even politicsⁱ.

ⁱ Handy, C., "The new language of organizing and its implications for leaders", in F. Hesselbein, M. Goldsmith & R. Berkhard (Eds.), *The leader of the future* (pp. 3-9), San Francisco, Jossey Bass, 1996.

Introduction:

Suggestions on How to Use this Training Guide

This document is designed to serve as a companion guide to the text: Anthony, W.A. & Huckshorn, K.A. (2008). *Principled leadership in mental health systems and programs*. Boston: Boston University Center for Psychiatric Rehabilitation.

The teacher/trainer can make best use of this guide by having the learner read the relevant chapter in the “Principled Leadership” text, review the main points in the guide text, read the case studies and then complete answers to the Post-test questions.

Trainers can use this as a self-directed course of study, by having the learner fill out Post-tests as they complete their chapters/principles at their leisure. Feedback on Post-test responses can be in hard copy or electronic. This approach might work best with a dispersed workforce that does not have access to computer network response.

The training could be accomplished in a one-on-one or group setting. In a one-on-one session, the teacher/trainer might assign the reading of a chapter, and then during the next session do an overview of that principle, allow the student to review the case studies, and then ask the learner to respond to the post-test in writing. The teacher/trainer could then discuss the responses with the student.

The ideal course would be to have a group training session on the principles. The teacher/trainer could assure that participants have reviewed the essential elements of the text and would provide an overview of those principles. The teacher/trainer would provide an opportunity for participants to review the case studies. The teacher/trainer then might facilitate a group discussion about the case studies. The teacher/trainer could use the Post-test questions as vehicles for precipitating the discussions. Group processes should focus on what is happening in

the organization, in the moment, to facilitate the principles and then, what might be done to implement the principles in the organization if the principles were not operant in the organization.

This participative process should facilitate a successful completion of “questions related to practice” in a trainee’s organization. Nevertheless, the teacher/trainer should prompt the trainees to complete the post-test exercises. *Appendix A* includes sample answers to some post-test questions. Some questions are introspective and are available for the benefit of management and training.

Chapter/Principle 1

Leaders communicate a shared vision

Just as President Kennedy communicated a vision for a comprehensive, community mental health system and a vision to land a man on the moon by the end of the 60's (some would say his vision was enacted more successfully in the latter than the former), principled leaders either create and disseminate a vision or exhaustively promote an existing vision in their organization. Leaders need not be a CEO to communicate a shared vision. Leaders at all levels have the capacity to communicate an organization's vision. In fact, it is an imperative for an excellent organization to have its vision spread as thoroughly and as often as possible. A shared vision guides program development and strategic planning. It shapes hiring practices and staff training programs. It facilitates internal communication by helping to create a common language within the organization. A principled leader "sells" the vision to other employees by examining the possibilities of the vision and promoting the benefits of a constant movement towards the vision. Leaders who are successful in promoting a shared vision create a backbone for excellence in their organization.

Case Study I

Sarah came to Western Community Mental Health Center with boundless energy and several years of experience as a program director at another community mental health center. Her programs had been extremely successful in facilitating the recovery of hundreds of individuals with psychiatric disabilities. She believed that it was in part

because her boss constantly communicated a recovery vision to everyone he talked to. She shared that vision with the board search committee and her ability to articulate that vision had been one of the reasons she had been hired for the position.

It became readily apparent when she “landed” at Western that the organization was “visionless.” The organization had wandered over the last few decades delivering mediocre outcomes and struggling financially. Sarah felt the need to communicate the recovery vision she had learned in her last job.

She went about creating a vision statement and presented it for discussion at her first board meeting. After the board’s approval she began disseminating it broadly: on the organization’s inter and intranets, in the new staff newsletter, in employee paycheck envelopes, framed signs in all organizational facilities and on the back of employee ID cards. She then proceeded to schedule “community meetings” at the organization’s facilities so that she could introduce herself to employees and persons served. As a part of her introduction, she introduced the vision statement and asked for feedback and discussion.

Sarah then worked with her Director of Human Resources to create a values-based questionnaire that would be used to screen employees. She helped to revise the organization’s personnel policies that had not been revised in a decade. She planted the vision statement in the policies and revised staff benefits to better support staff in working towards the vision.

She did not stop there. She began working on staff and consumer satisfaction surveys with questions about how satisfied respondents were with movement toward the

vision and a question about what could be done to move the organization along toward the vision.

After Sarah's first year at Western, the vision had a life of its own and Western was well on its way toward reaching Sarah's recovery vision.

Case Study II

John just got back from a national conference and his direct reports and their direct reports were cringing. John had been President & CEO at Union Psychiatric Rehabilitation Services for ten years and every year he brought back the latest "magic bullet" for staff to implement. Quality Circles, six sigma, balanced scorecard were just a few of the management tools that John had brought back and attempted to implement. He usually established a task force that was given little information and even less direction except to implement the new concept. The task force members were not told why the new concept was being implemented, just that they needed to do it.

What usually transpired is that task force members spent dozens of hours away from their regular responsibilities to research the concept. They then had to devise an implementation plan that included staff training, implementation schedules, a budget and staff assignments. Then, with only a little fanfare from John about the concept, the task force was charged with implementing the concept.

Staff were generally confused about the rationale for the new concept. "Why have we dropped the last concept and why is this any better?" they asked. The training kept them from their regular jobs, as well.

All of this was set against a backdrop of consumers increasingly complaining of wait times for clinical services, rehabilitation groups that were stale and boring and their inability to get any one-on-one time with rehab staff.

Everyone was asking, “What’s he going to make us go through now?”

4) If you have a shared vision in your organization, how is it communicated?
Are there other communication vehicles that should be implemented to share the vision?

5) If there isn't a shared vision in your organization what do you think the vision should be and how should it be communicated?

Chapter/Principle 2

Leaders centralize by mission and decentralize by operations

Principled leaders ensure that the mission of the organization is the hub of the wheel of the organization. Everything revolves around the mission. Whereas, a vision describes where the organization is going in the future, the mission is the role the organization takes in getting to that future. A mission is an organization's *raison d'être*.

Principled leaders ensure that program development, operation of programs and expected consumer outcomes are in alignment with the mission. The leader sets clear expectations about these issues then gets out of the way. Operations are decentralized and operational leaders are given the authority to implement the mission for the benefit of persons served. Leaders who keep an eye on the mission and the implementation of the mission but don't micromanage the implementation, create better environments for operational leaders and achieve better consumer outcomes.

Case Study I

The management team members at Central Counseling Center were not used to this. Their new CEO, Charles, was not the assertive, directive individual they had been used to for the last fifteen years. They had been used to running to the prior CEO, who had retired recently, with every operational question that ever came up. He had wanted and demanded that kind of control and they had become very dependent on him. When team members approached Charles with the same questions, he repeatedly pointed to the

newly framed mission statements that hung plentifully throughout the organization's facilities and asked, "What would the mission suggest you do?"

Initially, the management team members struggled with this seeming lack of direction. However, as they began to report the results of their deliberations in management meetings they appreciated the affirmations received from Charles. "Yes, that would seem to be consistent with the mission statement. Your decision is also consistent with the level of authority that is outlined in your job description. I do have a question, however. How are you going to measure whether your decision's impact on outcomes is consistent with the statement?"

"What outcomes?" they asked.

"I see we have some work to do here," Charles responded.

Over the next few months, Charles worked assiduously with the management team to extract the outcome indicators that pointed to whether the organization was meeting its mission. He asked them to query their direct reports and front line staff regarding how they viewed program success. Their research ultimately resulted in a quarterly scorecard that the management team analyzed and passed on to the Board of Directors and to all staff in the organization.

When the management team members began seeing that their own decisions were having a positive impact on program outcomes they began to feel liberated and enthusiastic about their work. This exuberance was not lost on staff at all levels as the mission-consistent outcomes were shared with them, as well.

As one clinician put it, "Central Counseling Center rocks!"

Case Study II

Jane was into everything at STAR Services and she had been ever since she was hired as the Executive Director five years ago. She met with her management team daily. She expected reports on the events of the previous day's operations. She reviewed all plans for programmatic changes before they were implemented. She expected to be advised on all purchases over \$50 that were made in the organization. She demanded to review all external correspondence before it was sent and freely marked up copy in red before returning it to her direct reports.

Her direct reports were obviously frustrated and disgruntled. Not only did they feel that they were wasting valuable time but they felt the organization was running on a treadmill. Jane was so overwhelmed most of the time that some valuable strategic opportunities were not getting addressed. In addition, Jane's attention to detail and her need to control caused dangerous inconsistencies in policies and procedures within the organization. Her direct reports often felt they were running into each other carrying out Jane's dictates.

To make matters worse, STAR was anticipating a visit from a national accrediting organization in the near future and the first thing on their list of documents they wanted to see was STAR's mission statement. Jane didn't know where it was. Neither she nor the Board of Directors had seen it or reviewed it in the five years she had been there.

Chapter/Principle 3

Leaders create an organizational culture that identifies and tries to live by key values.

Leaders need to understand that their organization has a culture and that they have the potential to impact that culture by the creation and/or practical implementation of organizational values. The leader uses the values as guides for making decisions and evaluates performance of the organization on how that performance impacts the organizational values.

Because external and work environments change, the principled leader must be vigilant in ensuring that adaptations are consistent with the values of the organization. Similarly, the leader should be vigilant in determining whether values, new or existing, conflict with other values.

Finally, the principled leader walks the talk. The leader's communication and behavior must be consistent with organizational values. The leader's strategies for achieving the mission must be consistent with the organizational values. Finally, the principled leader must ensure that values are applied fairly and equitably throughout the organization.

Case Study I

CareMore Center's administration touted its primacy as a recovery center and had instilled recovery principles in its organizational values for a decade. Involvement of

consumers in decision-making, self-direction for persons served and community integration were hallmarks of CareMore's values and program operations.

Robert, the CEO of CareMore, was exceedingly proud of the organization's reputation for supporting consumers in their recovery journey. He was, however, brought up short by an edict he received from his state's mental health authority. The state was going to mandate, in its new contract with CareMore, that CareMore hire a peer specialist and that the peer specialist had to be a person in recovery. "How dare they dictate who we hire? And how dare they dictate something that goes against our professional principles?" he asked to himself.

He brought the matter before his management team the next day and spoke at length about the ethics of the dictate. The management team was in accord with his concerns. Robert subsequently fired off a letter to the state expressing the organization's concern about the state's expectation. The response was as expected. CareMore would hire a person in recovery as a peer specialist and would do so by the end of the month or face contractual sanctions.

"Ok, if that's how they want it, we'll hire a peer specialist but it will be part-time so we don't have to pay benefits. How in the world are we going to deal with the ethical dilemma of a consumer seeing other consumer medical records?" he mused.

Case Study II

Jack was in a values-quandary. As CEO of a struggling, non-profit, mental health center, Cedron, Inc., his organization was being presented with a significant financial opportunity. The state had increased the rate for psychosocial programming fairly

significantly. If he focused staff attention on incorporating psychosocial rehabilitation in individuals' rehabilitation plans, Cedron might get back its financial health.

Unfortunately, or fortunately, one of the values of Cedron was its emphasis on person-centered planning. Cedron's staff were to discern what consumers wanted and needed to get better and they attempted to get what people wanted and needed – no more, no less.

“What should we do?” Jack asked.

After sleeping on it, Jack convened a special general staff meeting to discuss the issue.

“As most of you know,” Jack said, “the state has given us a significant incentive to enroll as many of our consumers in psychosocial day services as possible. Doing that would go a long ways towards making us whole, financially. However, doing that would violate one of our corporate values – to individualize, to the extent that we rationally can, the rehabilitation services we provide to consumers. We will carry on, as we have been, to provide the best possible services we can in a completely individualized manner. Ultimately, that will be in the best interest of our staff, our organization and, most importantly, the folks we serve. Thank you.”

Jack left the dais to thunderous applause from his staff.

Principle 3: Post-Test

1. In what ways did Robert violate the values of his organization?
2. Did CareMore have conflicting organizational values? Explain.
3. In what ways did Jack “walk the talk” related to his organization’s values?

4. Does your organization have a set of organizational values? Are they published?

Are there any conflicts in your organizational values? Are values applied equitably in your organization?

5. Can you give examples of how you or leadership at your organization behave and communicate in accordance with your organizational values?

Chapter/Principle 4

Leaders create an organizational structure and culture that empowers their employees and themselves.

Principled leaders understand the value of creating an organization that helps their employees achieve their professional goals and understand that those achievements are beneficial to the employee, consumers and the leader. Employees, then, are given room to aspire, to grow, to learn and to accomplish with various supports fostered by the leader. Additionally, employees are empowered to use their innate abilities to shape their jobs to the best interest of the organization; this includes taking risks without fear of retaliation if the risk doesn't work. The principled leader readily recognizes the contributions of empowered employees in the organization and does whatever necessary to retain these "stars." Finally, principled leaders are not above taking time to reflect on their own performance and are not shy about having those reflections with trusted mentors. The circle of continuous quality learning is embodied in the organization.

Case Study I

Jeff was stubborn about the hiring process at NuLife and he had been since its inception. He attributed the organization's positive outcomes to this stubbornness. His direct reports were often irritated by Jeff's refusal to lower expectations at the organization's front door. "We have vacant positions to fill and people to serve," they often cried. Jeff felt the tug but he also knew that if NuLife was careful about the hiring

process, making sure that applicants passed a values-based interview and had the right energy and confidence, then services would be positively impacted and continuity of care would be positively impacted, as well.

Jeff wasn't just committed to making the right hires, either. He believed in **"TIE"**ing employees to the organization after their hire. His organization had developed an extensive staff-training program over the years and he **T**trained the heck out of all of his staff. He also made sure **a**ll staff got the **I**nformation they needed to be effective in their jobs – information about the organization's performance (outcome and financial data), program information (success and financial indicators) and personal performance indicators (frequent and accurate performance evaluations). He also made sure that everyone had clear **E**xpectations about what the organization, programs and people were supposed to do. This meant sharing strategic and operational plans, budgets, program goals and objectives and job descriptions with **a**ll staff. Once staff had been **"TIE"**d to the organization, Jeff made sure that management and the organization got out of their way to do their jobs, to take risks, to grow and to learn.

Jeff was not hypocritical about learning. He drove himself to improve his management skills and knowledge by continuous reading and by attending management workshops. His direct reports sometimes groaned at the new ground he continually hoed for them but they actually loved the opportunity to share his learnings – they found it made their jobs easier.

Did Jeff's stubbornness result in positive outcomes? Yes, and NuLife made sure everyone knew, too. Low staff turnover, low state hospital recidivism rates for persons in recovery, high employment rate for those same individuals and extremely high

satisfaction rates for both staff and persons served in regular satisfaction surveys.

Stubbornness pays off.

Case Study II

Stan was an old-timer. He had worked in the community mental health system since the advent of the Community Mental Health Center Act in the 1960's and had worked himself up through the ranks at Sunstream CMHC to his current position as Executive Director, which he had held for twenty-five years. He had seen everything, every fad, every "magic bullet," every efficiency technique, every organizational development strategy – everything. After years of trying the fads, he had given up and implemented "his way."

His way was to "eat staff up and spit them out." Applicants for case management, therapist and rehab staff were plentiful in his university town. Sunstream had no problem filling the numerous positions that opened every month. New hires were sent directly to the line, with only the minimum state-required training provided to them at orientation. "Got to get them out there to bill," Stan thought.

He provided them information – what was their billing quota for the month. That was enough. Other than that, he liked the "mushroom" approach – keep them in the dark and feed them almost nothing. Fewer questions, more work, is what he told himself.

His direct reports had been with him for decades and he ruled with an iron fist. His way or the highway was what he had instilled in them. He was really angry about their constant health problems – way too much time off.

The new managed care entity was on him about client satisfaction, access issues, critical incidents, etc. “So what?” Stan thought to himself. “Sunstream was the largest, most financially successful CMHC in the state. What could they do? Impose another fad?” Stan believed that he knew best.

Principle 4: Post-Test

1. Give some examples of how Jeff empowered his employees at NuLife.
2. What organizational barriers had Stan put in place to hinder employee empowerment?
3. Cite some examples of how the empowered employees at NuLife might have a positive impact on the quality of services.

4. Is Jeff's "stubborn" hiring philosophy appropriate? Why or why not?

5. Provide some examples of how your organization empowers employees or how it might do so in the future.

Chapter/Principle 5

Leaders ensure that staff are trained in a human technology that can translate vision into reality.

Principled Leaders understand the difference between human technology training and the imparting of knowledge through workshops, conferences and guest speakers. They understand that the imparting of human technology allows for change in the behavior (what staff do) of practitioners, a change essential to positive outcomes with consumers.

Flowing from the organization's mission, the leader ensures that the culture of the organization is imbued with the value and importance of human technology training. Conversely, the leader understands that successful implementation of human technology training is essential for the organization to meet its mission.

The leader understands that the capacity of employees to access and practice the technologies taught to them is more important than the credentials and roles of those employees. Finally, leaders understand that human technology training is an investment in the success of the organization and the investment needs to be protected during difficult times.

Case Study I

It had been a tough three years since Susan arrived at Franklin Mental Health Services as the CEO. There had been a lot of resistance to the staff-training program she

had implemented. “Thank goodness,” she thought, “I was able to talk Karen into coming with me when I moved here.” Karen had been her Training Director at her last stop and was a certified psychiatric rehabilitation trainer. Karen’s persistent, steady presence as a trainer, in addition to Susan’s constant, visible support for the training program, had finally worn down the staff resistance. As a matter of fact, a recent staff satisfaction survey indicated a strong level of satisfaction with the technologies staff were being taught.

Susan was dismayed by Franklin’s training program when she arrived. It was a hodgepodge of state mandated workshops, with a sprinkling of trainings on the silver-bullet topic du jour and supplemented by Franklin’s employee attendance at conferences. It was inefficient, did not particularly change staff behavior and hardly, if at all, contributed to the mission of the organization, which was to enhance the quality of consumers’ lives in the community.

Karen had excised the mandated trainings from the hodgepodge and incorporated them into her psych rehab curriculum. The curriculum was made up of semesters of various skill trainings for staff. Susan implemented a values-based employee interview questionnaire that heavily emphasized questions about training. She emphasized and re-emphasized to program managers and supervisors that individuals’ abilities to intellectually access, retain and implement the skills they were being taught was more important than the applicants’ credentials.

Karen instituted a pass/fail system for her trainings. Employees were held accountable for passing all trainings and their supervisors were held accountable for their direct reports’ success or failure in the trainings. Susan got the Board to implement a

change in the organization's personnel policies indicating that repeated training failures might be cause for discipline. It had been. Over the three years, staff had been supported in their job search efforts or had selected themselves out of the organization.

It had been difficult overcoming the resistance but gradually staff began to embrace the trainings; they expressed more confidence in their ability to work with consumers; they were seeing recovery principles actually work and staff burnout had dropped precipitously. It was working.

“And now this,” Susan thought. Susan had just gotten word of an impending ten percent cut in state funding. One of the easy targets would be Karen and her training budget. Cutting the training budget would go a long way towards dealing with the anticipated deficit.

“What am I going to do?” Susan asked herself.

Case Study II

Tom had been with Centennial Health Care for eighteen months and he wasn't sure he was going to last another month. He didn't know what he was doing in his work with the folks on his caseload. How was he supposed to help them? He wasn't particularly good at finding out what they needed to improve their functioning or their quality of life. He did not have the faintest idea what kind of interventions he needed to make their lives better. Every day was just a series of hit-or-miss interactions with the folks he worked with. It was so frustrating and he was beginning to feel hopeless. He had read about these symptoms. He was getting burned out. He dreaded coming to work every day.

He really didn't get much help from his supervisor or the administration. His supervisor told him not to worry about it, just document how he spent his time with the folks he served so that he could justify the bills the organization sent out on a daily basis. The trainings the organization provided were nice and important: cultural competence, health and safety, critical incident reporting and ethics, but they didn't particularly help him help the folks on his caseload. Every time he looked at Centennial's mission statement in the lobby, he got more and more disheartened. "The Mission of Centennial Health Care is to help individuals with psychiatric disabilities achieve their recovery vision." "How in the world am I supposed to do that?" Tom asked himself, miserably. "I need to check out the help-wanted ads tonight."

Principle 5: Post-Test

1. Is human technology training ingrained in the culture of Franklin Mental Health Services? If so, give some examples.
2. What should Susan do about her impending funding cut? Why?
3. How might the implementation of a human technology-training program benefit someone like Tom at Centennial?

Chapter/Principle 6

Leaders relate constructively to employees.

Principled leaders promote a culture in which staff are valued for their ideas, skills and contributions. The leader develops an ongoing process to publicly recognize the leader's appreciation for those assets.

The leader listens before talking and then expresses value for staff's contributions by demonstrating understanding of a suggestion or comment and then, hopefully, doing something constructive because of feedback.

The leader consistently treats all staff fairly, equitably and professionally, modeling exceptional interpersonal skills at all times with staff.

The public expressions of value, the ability to listen and respond to staff and the professional equitable treatment of staff all lead to the engendering of trust by the staff in the leader.

Case Study I

Jackie stared at the card that had been pinned to her bulletin board in her office for over three years. "I caught you doing something great!" it said and went on to explain what she had been caught at that was deemed to be exemplary. Moreover, it was signed by James Hunter, CEO. She still remembered the day that she had received it. Goose bumps and tears were the reactions of the moment. Upon receipt, she had dutifully taken the card to headquarters, where James actually greeted her, lead her to the gumball

machine to get her gumball. Hers turned out to be white and that meant an extra \$50 in her next paycheck.

She stared at the card again. James must have sent out hundreds of these since he instituted the practice five years ago. She realized that the “I caught you...” card was really symbolic of how James treated all employees at Recovering Lives. There was the Employee of the Month and Year awards – with the winner of the employee of the year award going to a prestigious annual conference. Despite the size of the staff, James made sure that there were monthly staff meetings that people could participate through teleconference, if they couldn’t make it physically. But those that did were fed like royalty after the meeting. Then there was always the “Ask the CEO” segment of each meeting. Staff were encouraged to ask whatever was on their minds and James was frank and candid with his responses. He actually asked for staff opinions on issues and he actually implemented peoples’ suggestions. Amazing.

And the communication in the organization was just awesome. Intranet, monthly staff newsletter, broadcast emails, posters, staff meetings, a yearly staff satisfaction survey, an electronic suggestion box, James’ open door policy and, yes, “I caught you...” cards. James had even conducted a communication audit last year to determine which communication vehicles were most appreciated and to determine if any other vehicles were needed. He actually implemented several staff suggestions.

Despite the hard work and the lean salary, Jackie really couldn’t imagine working anywhere else. Recovering Lives was a great place to work.

Case Study II

Don hated these gatherings and had, ever since he came on board as CEO at Southside CMHC three years ago. The staff meetings were a relic left over from the last CEO and the Board had directed Don to maintain them. As a matter of fact, Board members sometimes attended so that they could gauge the mood of the staff. That infuriated Don. It was not their business to gauge the mood of the staff. It wasn't even his business. He had told his direct reports from day one that it was not Southside's business to promote employee morale. Southside was in business to provide as many services as possible to as many people that needed it and to provide those services efficiently.

Don hated the portion of the agenda called Feed-In, when staff got to provide comments and suggestions. It was his responsibility to make decisions and he didn't need their help. He used his "gut feelings" to run the organization and that was based on what he thought was right. So far, it had worked out quite well. Last fiscal year the organization had turned a ¾ million-dollar profit. Not too shabby. Unfortunately, they had to waste their time and money on these meetings. People should be providing billable services instead of gabbing.

It had become his practice to sit back and observe the meetings. He let his COO run the meetings. She answered any questions that came from the staff. Don didn't want to be bothered and actually resented the questions because the content usually was none of the staff's business. "When is this interminable thing going to be over?" Don asked himself. "I've got to get back to the office and look at last month's P & L's."

Principle 6: Post-Test

1. What methods did the CEO of Recovering Lives use to constructively relate to the organization's employees?
2. Can you give examples of how the leadership at your organization relates constructively to employees?
3. What impact do you think Don's behavior has on the quality of services provided by his employees?

4. Please list the various modes of communication you use in your organization.

Which ones are most effective?

5. Do you believe that Don's obsession with the "bottom line" is more important than relating constructively to his employees? Why or why not?

Chapter/Principle 7

Leaders access and use information to make change a constant ingredient of their organization.

“Leaders covet change.” The authors lead off Chapter/Principle 7 with this exclamation. Leaders are constantly collecting and analyzing data regarding consumers, programs, systems and the operating environment in order to manage and improve services. They are adept at questioning the reliability of the data they see and are as equally adept at processing and gleaning meaning from accurate data. Leaders are constantly asking “why or why not” based on the data they review. “Why is this happening?” “Why can’t we have an impact on this?” “Why isn’t this program having the desired impact on people’s lives?” Leaders process these questions with others then take any answers, and rather than repeatedly process those answers, they **act** on them. Then they collect and analyze data on the impact of the changes.

Finally, leaders don’t necessarily require consensus to effect change despite their efforts to “sell, tell or jell” a new direction. As one leader put it, “some things are not negotiable.” Leaders know that they are dealing with the quality of lives and that commitment to change that positively influences that quality must be a constant.

Case Study I

The sign on Rebecca’s desk was her mantra: “Do It Now!” and was completely descriptive of Rebecca’s management style. Rebecca was brilliant and a whirlwind of activity. She had implemented a “balanced scorecard” at HOPE when she started as CEO and used the scorecard to continually bring performance data to the fore so her

management team could review it. She made sure that there were indicators of effectiveness, efficiency, access and satisfaction for each program that HOPE operated. The data the organization collected had repeatedly benefited HOPE's continuous quality improvement program.

Rebecca insisted that the management always ask "Why" when key indicators changed. Concerning trends required action plans that Rebecca pushed into play. Management team members were sometimes overwhelmed by the constant flurry of activity but they couldn't argue with the results. Since Rebecca's arrival, the implementation of the scorecard and the initiation of the continuous quality improvement process, much had changed – for the better. State hospital recidivism was down to 1% a year, employment was up to 25% of caseload and consumers were receiving their first visit in half the time than it had taken before Rebecca's arrival.

The last two scorecards had borne some disturbing statistics, however. Discharges to nursing homes were rising dramatically. It made some sense. HOPE's target population of individuals with severe psychiatric disabilities was aging. Folks were dealing with the typical effects of aging, arthritis, cardiovascular difficulties, etc., but they were also experiencing, perhaps, difficulties with diabetes, COPD, weight gain and other side effects associated with some of the atypical antipsychotic medications they were on. HOPE just didn't have the physical or staff resources to deal with these issues.

Letting HOPE's consumers live out their last days in an institution was not acceptable for Rebecca, however. She had witnessed consumers crying when they had to leave their homes for nursing homes.

“Here’s what I propose,” Rebecca said. “I want to develop a specialized residential program for this target population staffed with LPN’s and nurses aides. I want to apply for a permit to run a medical daycare program, also staffed with the requisite RN and techs. We’ve got to find a way of getting on top of these medical issues on a daily basis. I’m tired of watching our folks go off to nursing homes to die.”

“But, Rebecca, nobody in the state has done anything like this. There’s no operational data to pull from to support this,” Sam, her VP of Programming, said.

“But we’ve got data saying that an increasing number of our consumers are leaving for nursing homes and national data showing that these folks die 25 years earlier than people without psychiatric disabilities,” Rebecca replied. Then, pointing to the sign on her desk, she said, “Do It Now!”

Case Study II

Bob had 410 days until retirement, “but who’s counting?” Bob thought. “Let’s just not rock the boat,” he mused. Unfortunately, his management team wanted to do just exactly that. They were pushing to buy an expensive, computerized management information system with electronic health records. “We can finally collect in-the-moment, outcomes management information,” they said. “We can use the information to make significant positive changes in our programs. Consumers have been grumbling about how long it takes to get into River Street for an appointment and this software might help,” they claimed.

Bob had tried repeatedly to dampen their enthusiasm. Oh, it wasn’t about the money, despite the significant price tag of the software. River Street had plenty of

money. “It’s a significant change in how we do business, and after forty years here, I’m tired of change,” he thought. “Let’s just maintain the calm we’ve been experiencing for the last few years. Sure, they’re right, it does take a while for people to get seen here but they eventually get seen. Besides, I don’t want my legacy to be stained by a monumental software selection mistake. Let them do it after I retire.”

“I don’t know why they want more information, anyway,” Bob thought. “We’ve got stacks and stacks of client functional assessment reports that we never use. That decision cost us thousands. Besides, I’m sure that the strategic plan we drew up three years back didn’t mention anything about purchasing a new client information system. That protects my butt.”

Bob was scheduled to meet with his management team in fifteen minutes. “What excuse can I use this time? Hmmm, maybe I need to ask them to get more information about the software, how much new hardware costs will be....”

Principle 7: Post Test

1. Explain how Rebecca and the HOPE management team used data to improve the quality of care at their organization.
2. Is consensus of opinion essential to implementing change in an organization?
Explain.
3. Bob seems to have an aversion to change in his organization. Why? Is that aversion having a potential impact on consumers served by the organization?
How?

4. River Street seems to gather a lot of information about the people they serve.

What is the flaw in their collection and utilization process?

5. What kind of information do you collect at your organization? Do you use it to make change management decisions? Explain. If not, how might you use the data in the future?

Chapter/Principle 8

Leaders build their organization around exemplary performers.

Principled leaders recruit, mentor, support and grow exemplary employees. At the same time, leaders give organizational recognition to exemplars so that they are held up as positive role models in the organization. The wise leader frees exemplars from strict job duties and other organizational constraints whenever possible so that the exemplars can grow, flex their skills and use their talents for the benefit of the organization and consumers. In doing so, the leader provides a vision, support when necessary, but generally gets out of the way, understanding that it is not wise to get in the path of a star.

Leaders understand that an internal fire, that has little to do with extrinsic rewards, fuels exemplars. Exemplars feed off of the passion of the leader and are motivated by the opportunity to learn, to grow, to have an impact on quality and to see positive results. Principled leaders are not threatened by exemplars talents but understand that the achievements that come from those talents benefit all.

Case Study I

David was breathing a sigh of relief. Susan O'Keefe, Supervisor of Psychiatric Rehabilitation Programs at Iron Ridge, had just submitted her resignation. David had been convinced that Susan had been after his job. She was very bright and very energetic and very, very good at her job. Her direct reports loved her. She was so good, and had

the program running so well, that she had continually asked to take on additional tasks – trainings, research, grant writing and community relations.

David had his hands full at Iron Ridge and he initially welcomed the help. However, Susan had been successful in everything that she undertaken, even tasks she did not have any training for. He began to get concerned, however, when his Board members started mentioning Susan and her accomplishments. That had chilled him.

“What was she trying to do?” he thought. “Is she trying to make a move on my job?” In order to blunt her efforts, he decided that a cold shoulder to her requests was in order. That was about nine months ago. He had tried to avoid her, when possible. When she approached him offering help outside of her area of responsibility, he put her off, saying he’d think about it. He never did. When Board members complimented her, David did what he could to downplay her contributions.

Susan had stopped coming to him to seek additional duties three months ago. It was noticeable and now this. “What wonderful luck,” David thought, “or is it?”

Case Study II

One of her Board members had introduced him to her. He was the Board member’s tenant and helped the member with her disabled son. He intrigued Carolyn. He was obviously bright and her Board member thought very highly of him. He had apparently kicked around a lot, had some college and now was tending bar downtown. His name was Lee.

“I think there might be a place at Riverside for someone like that,” Carolyn thought. Carolyn had a nose for finding talent in strange places – real estate, sales,

construction and, yes, coffee bars. “Perhaps a road trip is in order,” she thought to herself. So over a cup of latte, Carolyn talked to Lee about his background and about his aspirations and found out he really didn’t have any.

“Have you ever thought about working with people?” Carolyn asked. “I hear you are pretty good with Norma’s son.”

“No, not really,” Lee replied.

“Well, we are trying to develop a decent on-call list, people who can come into our residential program when staff are on vacation or call in sick. No big commitment. Give it a try. If you don’t like it you can just say no when we call.”

Lee was noncommittal except to say that he would think about it.

A couple of weeks went by and Carolyn was surprised to see Lee coming out of the HR office one day.

“I decided to give it a try,” Lee said.

“Great!” Carolyn replied. “It’s good to have you on board.”

It turned out to be better than good. Lee became a rising star, but it took continual “coffee chats” to nudge him forward: permanent part-time commitment, full-time commitment, finishing his BA, taking on a supervisory role, becoming a psych rehab trainer, working on a Master’s degree, taking over as the agency’s Human Resource Director, becoming active with the state provider association, then becoming its President and finally being promoted to the position of Vice President and Chief Operating Officer.

All the time Carolyn provided support when needed but mostly let Lee take his own lead. Carolyn also made sure that Lee was recognized for his good work, Employee of the Month numerous times and the Employee of the Year one year.

And the benefits of the transition and Lee's good work were immeasurable. Carolyn was freed to raise funds, plan strategically and network in the community, things essential for the long-term success of the organization. And services were working spectacularly well. And one thing had occurred to Carolyn recently. Stars beget stars.

Lee had just pointed out someone at a staff meeting. "New employee in case management – hotter than a firecracker – an up and coming star."

Principle 8: Post Test

1. David was obviously threatened by Susan's competence in her job at Iron Bridge. How did his feelings affect his ability to manage Iron Bridge and how do you feel it affected Iron Bridge's effectiveness as a mental health organization?
2. Describe how Carolyn led Lee rather than managed him at Riverside.
3. Imagine what might have motivated Lee in his journey at Riverside. How do you think Carolyn facilitated that motivation?

4. Can you think of reasons why the support and promotion of exemplary performers like Lee are beneficial to an organization? Please elaborate.

5. Can you think of ways that your organization builds itself around exemplary performers? Can you think of additional ways it could do so?

Appendix I

Suggested Responses to Select Post-Test Questions

Principle 1

1. Which leader did the best job of establishing a clear vision for their organization?

Why?

Sarah did a much better job of establishing a clear vision for her organization.

John seems to manage by caprice rather than vision. He grabs the latest fad and implements the fad through fiat. Not only did Sarah actually create a vision for her organization but she did a great job of disseminating it and weaving the vision into the culture of the organization.

2. What is John's biggest problem in communicating a shared vision within his organization?

John has not created a vision for Union let alone communicate the vision within his organization. John manages by fad and is quirky and inconsistent. This lack of vision wastes time, resources and demoralizes staff.

3. What vehicles did Sarah use to communicate her recovery vision in her organization? Explain why they might or might not be effective?

Sarah used as many communication vehicles as possible to communicate her recovery vision at Western including the organization's inter and intranet, staff newsletter, paycheck envelopes, hallway signs, personnel policies and employee ID cards

to name a few. She also met with staff and personally talked about the vision. She used the vision statement to create a values-based employment-screening tool so that employees would get a sense of the vision before they were hired.

Although the use of the organization's intranet might be inconsistent and employees might not necessarily see the vision there, Sarah understood that if she used enough communication vehicles, consistently, then the vision would take hold and it did.

Principle 2

1. Which executive did the best job of decentralizing operations? Give some examples to substantiate your answer.

Charles did the best job of decentralizing operations. Jane was way too controlling and obviously had not attended to the mission statement since she couldn't find it. Charles encouraged his direct reports to become less reliant on him and continually redirected their requests for guidance to the organization's mission statement. He also helped his management team develop outcome measurement tools to help reinforce their decisions.

2. How does the proliferation of an organization's mission statement provide consistency in quality in an organization? Provide some examples from Charles' case study.

It's a classic case of everyone singing from the same hymnbook. Managers didn't have to rely on the whim of the CEO, they discovered. They could just look on a wall and get guidance from a consistent mission statement. When outcome measurement

standards were created they flowed from the organization's mission statement – what indicators would show them that their programs were meeting the organization's mission? Actual performance indicating success in meeting the mission provides management with reinforcement for good decisions or causes for tweaking. Sharing outcome data steeped in the mission provides clarity for all staff in an organization.

3. How did Jane's centralizing of operations cause her to lose control of her organization?

Jane spent so much time immersed in detail at STAR and demanded so much reporting to her that she couldn't see or work on the big picture. She couldn't centralize by mission since it was a missing mission. Her direct reports spent more time attending to her needs than attending to program operation. Since there was no shared perception of what the organization, there were significant differences in vision, direction and operations between programs. Her behavior frustrated and demoralized her direct reports giving her even less control over outcomes.

Principle 3

1. In what ways did Robert violate the values of his organization?

CareMore Center's espoused values promoted recovery, person-centered planning and community integration. Robert's opposition to hiring a consumer in recovery as a peer support specialist because of dual role issues certainly ran contrary to those values. Ultimately, his decision to deal with the state mandate to hire a peer support specialist by not treating the position as equal to others in the organization

diminished the perceived and actual value of the position. The diminishment of the position by making it part-time, without benefits, ran contrary to the values of the organization.

2. Did CareMore have conflicting organizational values? Explain.

Yes. The organization's stated values promoted equality, recovery and full community organization for persons served, yet the organization refused to live up to those values in its hiring practices by refusing to hire individuals in recovery, or at least hire them in a non-discriminatory fashion.

3. In what ways did Jack "walk the talk" related to his organization's values?

Cedron's emphasis was on person-centered planning, finding out what people wanted and needed to achieve their recovery goals and then attempting to provide the services and resources necessary to achieve those goals, "no more, no less." Jack's decision to forgo a billing mill, despite the fact that doing so would solve the organization's financial problems, was consistent with the organization's values.

Principle 4

1. Give some examples of how Jeff empowered his employees at NuLife.

Knowledgeable and skilled employees are empowered employees in that they are confident about their abilities to positively impact lives. Jeff believed that training was essential to the empowerment process. Employees without information about their organization, how well the organization is doing, how well their own program is doing and how they are performing are powerless. Jeff believed in disseminating information

on performance to all staff, regardless of function. Finally, Jeff believed that if staff did not have clear expectations about what they, their program and their organization was supposed to be about, then they would be confused and directionless and therefore not empowered. Jeff was all about sharing strategic and operational plans, budgets, program objectives and job descriptions with all staff. Finally, Jeff was not shy about sharing the positive outcomes related to the organization's empowerment practices, thereby reinforcing the organization's attempts at empowerment.

2. What organizational barriers had Stan put in place to hinder employee empowerment?

Stan had become such a cynic about the value of staff to the quality of services provided by his organization. The bottom line was more important than staff morale. He was not invested in staff training. He was not interested in providing valuable information to his staff nor was he interested in hearing from them. He obviously had little regard for the well-being of his direct reports. These were significant barriers that Stan put in place to hinder employee empowerment. They were completely disempowered, one reason why Sunstream had such a high staff turnover rate.

3. Cite some examples of how the empowered employees at NuLife might have a positive impact on the quality of services.

Jeff made sure that the organization's values were used as one of the bases for hiring. Staff came to NuLife with the values necessary to interact successfully with consumers. They came from day-one, empowered. Because NuLife employees were provided with the skills they needed to be successful, they were empowered to do a good job. The employees were also provided the feedback necessary to improve their

performance on an ongoing basis. Jeff made sure that NuLife employees were not frustrated about what they and the organization were to do. This lack of frustration also empowered them and allowed them to conduct their responsibilities without baggage. The sum total of all of the organization's supports for employees had a dramatic impact on the quality of services provided to consumers.

4. Is Jeff's "stubborn" hiring philosophy appropriate? Why or why not?

Jeff's "stubborn" hiring philosophy is appropriate for several reasons. The best way to avoid a staff resignation or termination is to take the time to make a good hire. Jeff's value screening and emphasis on energy and confidence in the screening process increase the likelihood that new employees will be successful. Additionally, employees who have these strengths and are empowered can better manage times when there are staff vacancies.

Principle 5

1. Is human technology training ingrained in the culture of Franklin Mental Health Services? If so, give some examples.

Certainly. Susan had thought human technology training so important that she had recruited her training director, Karen, from her previous employer to join her at Franklin. Susan and Karen had intentionally imposed the training regimen into the life of Franklin's services and ultimately received kudos from staff for the training support. Karen taught that the ability to access, retain and utilize course curricula was more important than individual employee credentials. Successful employment at Franklin was based on successful completion of all training.

2. What should Susan do about her impending funding cut? Why?

Although training budgets are usually one of the first line items to take hits during budget crises, actions to do so are shortsighted. Poorly trained workers are going to be less efficient and less effective and in the long run cost an organization even more money than the cost of training. Susan should not cut the training budget.

3. How might the implementation of a human technology-training program benefit someone like Tom at Centennial?

A human technology-training program would help clarify work expectations for Tom, namely what he is supposed to do and what he should expect as the various outcomes from his interventions. He then could possibly understand the connection between his work and the organization's mission. Additionally, if the human technology-training program were agency-wide and integrated into the organization's culture, it would help him communicate more effectively with his colleagues and his supervisor.

4. Is it important that a leader be personally invested in the operation of a human technology-training program?

A leader must be personally invested in the operation of a human technology-training program. There are too many opportunities for other agendas to get a higher priority without the leader's support of the program. It is also important that all employees get a sense that the training program is a vital part of the organization's culture. Finally, a leader's investment insures that there are organizational consequences for employees' failure to complete required trainings.

Principle 6

1. What methods did the CEO of Recovering Lives use to constructively relate to the organization's employees?

James utilized public praise and modeled exceptional interpersonal skills when interacting with employees. He made Jackie feel special by actually meeting with her when she came to collect her reward. He also treated everyone as if they were equally as important. James created a variety of different ways to recognize employees. He also created a myriad of opportunities for staff to communicate with him and employees were assured that he actually listened.

3. What impact do you think Don's behavior has on the quality of services provided by his employees?

Employees' perception of Don's management style probably ranges from demoralization to anger. Don's detachment from the staff meetings devalues the meeting and its obvious worth as a communication vehicle. Even if Don does not say it publicly, the fact that Don does not feel it is his job to consider the morale of the staff to be important, the staff probably sense it. Don's behavior can lead to frustration, lower productivity, burnout and high turnover, all of which have an impact on quality of services.

5. Do you believe that Don's obsession with the "bottom line" is more important than relating constructively to his employees? Why or why not?

No. Don's obsession with the bottom line and billing probably leads staff to feel that they are just disposable billing machines. His obsession can cause staff to take away their attention from the quality of service to quantity of service. Employees who have

committed to the field for socially responsible reasons may well be demoralized by Don's obsession.

Principle 7

1. Explain how Rebecca and the HOPE management team used data to improve the quality of care at their organization.

The leadership used data from their scorecard to prompt the implementation of improvement plans within the organization. They also used the data related to discharge to nursing homes to create a new intervention with the intent of influencing the disturbing trend.

2. Is consensus essential to implementing change in an organization? Explain.

No. Although consensus is admirable, sometimes the effort to achieve consensus gets in the way of achieving positive, necessary outcomes. A principled leader must have the skill to make an appropriate call on these occasions.

3. Bob seems to have an aversion to change in his organization. Why? Is that aversion having a potential impact on consumers served by the organization? How?

Bob is more focused on his retirement and ensuring that nothing happens to make his passage to retirement unpleasant. He did not want to be seen as making a mistake regarding a software system that might mar his legacy. By not taking a risk, he was compromising the efficiency and effectiveness of his staff, taking away time and energy from services to consumers.

4. River Street seems to gather a lot of information about the people they serve.

What is the flaw in their collection and utilization process?

Although River Street's management team causes the collection of a significant amount of data regarding the functioning of consumers they serve, the organization does not have a process for analyzing the data and using the analysis to improve service delivery. This effectively wastes scarce resources in collecting the data in the first place.

Principle 8

1. David was obviously threatened by Susan's competence in her job at Iron Bridge.

How did his feelings affect his ability to manage Iron Bridge and how do you feel it affected Iron Bridge's effectiveness as a mental health organization?

David's feelings of insecurity definitely hindered his ability to manage his organization. Rather than do what was necessary to allow Susan to grow, David grew concerned about how his board members perceived Susan's performance. His decision to essentially ignore Susan's requests to do extra tasks ultimately led to her frustration and departure. If David has a continued pattern of this kind of behavior with exemplary employees, the organization is going to continue to lose talent it cannot afford to lose. Losing talent has a negative impact on the quality of services provided to consumers.

2. Describe how Carolyn led Lee rather than managed him at Riverside.

Carolyn provided opportunities, encouragement and recognition to Lee. She let his natural talents evolve and took advantage of them in more progressively responsible positions, to everyone's benefit.

3. Imagine what might have motivated Lee in his journey at Riverside. How do you think Carolyn facilitated that motivation?

Lee may have been motivated by the opportunity to learn new skills. He might have been motivated by the opportunity to take on more responsibilities or being able to

see how his actions resulted in positive outcomes in people's lives. Carolyn facilitated the motivation by being confident in her own abilities and not stifling Lee's advancement due to insecurity. Instead, she continued to take advantage of his talents, nurture those talents and provide significantly more responsible ways to use those talents.

4. Can you think of reasons why the support and promotion of exemplary performers like Lee are beneficial to an organization?

Just as the loss of talent at Iron Bridge hurts the quality of services, the retention and growth of talent like Lee has a positive impact on the quality of services. If individuals realize that they are in an environment where they can grow and continue to exercise progressively more responsibility, they are apt to stay employed. This has a lasting positive impact on the quality of services. Additionally, Carolyn was able to take advantage of Lee's growth to allow her to attend to the growth of the organization, which included planning, and raising funds. Finally, Carolyn constantly modeled her behavior for her employees, to the extent that Lee ultimately began to recognize and grow his own "stars."
