



 SOCIETY FOR
Healthcare Strategy & Market DevelopmentSM
of the American Hospital Association

BRIDGING WORLDS

THE FUTURE ROLE OF THE
HEALTHCARE STRATEGIST
SECOND EDITION



SOCIETY FOR
Healthcare Strategy & Market DevelopmentSM
of the American Hospital Association

Dear Colleague:

I am pleased to share with you the second edition of *Bridging Worlds*, just released by The Society for Healthcare Strategy & Market Development (SHSMD), a professional membership group of the American Hospital Association. This report includes fresh input from recent leadership interviews, updates to the evolving healthcare landscape, new strategic opportunities, case examples, and refinements to the strategic implications, skills, and attributes for strategy professionals.

SHSMD first released *Bridging Worlds: The Future Role of the Healthcare Strategist* in 2014 to help strategy professionals and other healthcare leaders navigate their organizations through radical transformation. *Bridging Worlds* identified the attributes and skills needed for future success, and was distributed to thousands of healthcare strategy leaders across the country, including CEOs, strategic planners, business developers, marketers, communicators, and physician strategists.

It received wide acclaim and served as the genesis for SHSMD ADVANCE™, a comprehensive roadmap for skill development. Since its inception in 2016, SHSMD ADVANCE has resulted in hundreds of self-assessments and targeted educational activities to grow individual and team skill sets, helping to shape our future workforce.

This latest edition is a valuable tool for any healthcare strategy leader serving as a change agent or leading innovative organizational transformation.

Please share this resource with your colleagues. The electronic version is available at no cost at shsmd.org/BridgingWorlds. To purchase print copies, or for information on SHSMD ADVANCE or other related resources, please contact SHSMD at shsmd@aha.org.

SHSMD invites your questions, comments, and ideas as you begin to read and use this document to drive change in your organization. Please share them at: shsmd.org/BridgingWorldsSurvey.

Sincerely,

Rick Pollack
President and CEO
American Hospital Association





Executive **SUMMARY**

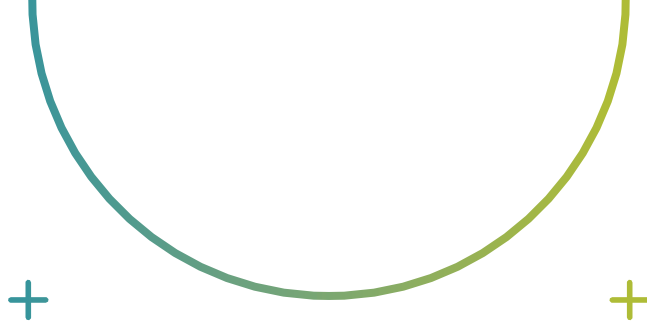
Healthcare continues to undergo radical transformation, and the rate of change is accelerating across every type of organization in the field. Politics and legislation, technical and scientific developments, and shifts in consumer thinking and expectations are creating greater uncertainty, clouding one's ability to clearly see the future for hospitals, health systems, and other organizations.

Strategic thinking is not the domain of any one particular individual or discipline. Rather, it is a critical skill for all healthcare leaders. Healthcare strategists—including planners, marketers, communicators, physician strategists, and business developers—play a central role in helping their organizations manage the constant and complex forces of change to both shape and successfully execute the strategic vision. Regardless of title or role, the future belongs to those who are able to discover, plan for, communicate, and adapt to the evolving healthcare landscape.

The emerging role of the healthcare strategist is multifaceted; strategists serve as agents of change, recognizing what needs to be done to transform their organizations and prepare for the future.

Healthcare strategists must add increasingly greater value to their organizations, to broaden the impact of their roles, and to shape the future of our field.

Bridging Worlds: The Future Role of the Healthcare Strategist was first published in 2014 to help strategy professionals successfully navigate their organizations through turbulent times with the specific toolkit of skills and attributes necessary for future success. The report resonated not only with SHSMD members, but was met with a positive



response from healthcare leaders across the nation. Thousands of copies were requested and downloaded from the SHSMD website. This report hit a chord for SHSMD members and interested parties throughout healthcare seeking the best way to position themselves and their organizations for success in the years ahead.

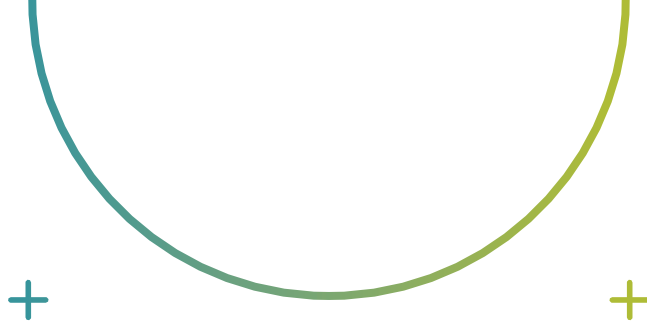
In the three years since *Bridging Worlds* was released, SHSMD has heard from numerous organizations that have embraced these uncertain times and internalized the report's key insights and implications to translate the concepts into significant transformations. In the new edition of the report, you will find a sampling of stories from these teams, highlighting how they have increased their resiliency and adaptation, redefined competencies, created new roles, and adopted lessons from other industries. They have applied *Bridging Words* concepts—such as agile strategy, rapid prototyping, and co-opetition—to their work and have achieved significant results.

This update to *Bridging Worlds* incorporates fresh input from new leadership interviews, review of current trends, new case studies and examples, and refinements and validation from sounding boards. It has brought more clarity and definition to many of the concepts to support action and usability. In the second edition of *Bridging Worlds*, you will find:

- Updated synthesis of critical emerging trends impacting the healthcare landscape
- Reconstructed implications for the strategist with relatable applications
- Refreshed skills and behavioral attributes key to the strategist's role
- Examples of how individuals and organizations are using *Bridging Worlds* to help close skill gaps and strengthen strategic performance
- Expanded resources and case studies available at shsmd.org.

“What do I say to my CEO colleagues? This report is worth a read. There is a lot in there that will be helpful to us all as we strive to lead our organizations.”

*— James Skogsbergh
President and Chief Executive Officer,
Advocate Health Care,
Past Chairman, American Hospital
Association Board of Trustees*



A notable addition since the initial release of *Bridging Worlds* is SHSMD ADVANCE™, a comprehensive roadmap for career and team development. This companion to *Bridging Worlds* has three components, which are designed to help you, your team, and your organization enhance strategic performance.

- **SHSMD ADVANCE™ | Assess** is a 15-minute, online self-assessment of over 60 skills and attributes to identify strengths and gaps, and generate a personalized online development plan.
- **SHSMD ADVANCE™ | Skill Builder** contains a library of over 500 articles, books, courses, and tools tailored to the self-assessment results.
- **SHSMD ADVANCE | Credentials** is a selection of intensive certificate courses available to you and your team.

A Look Inside the Second Edition

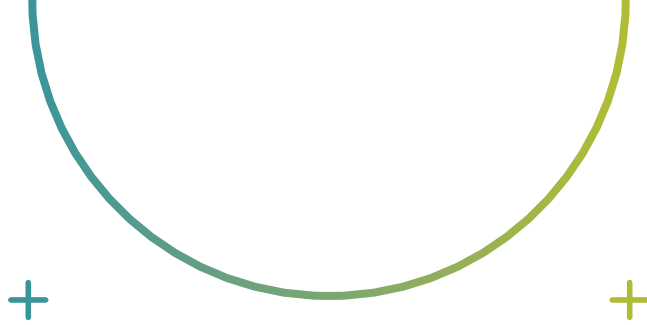
While written primarily for senior leaders and strategists, this report is relevant to anyone who contributes to the development or deployment of healthcare strategy in any form. Whether discovering ways to differentiate and focus, or shaping the future of an organization more globally, the practice of strategy is universal, though the application of strategy may vary by discipline.

This body of work is intended to inspire discussion and debate among healthcare leaders. It should serve as a discussion guide, rather than a prescriptive recipe for healthcare strategy.

Bridging Worlds paints a vision of how the role of the strategist is evolving. Recognizing the scale of organizational types and sizes, SHSMD intentionally makes no recommendations on a preferred approach. Rather, the society suggests paying more attention to the implications, skills, and tools that healthcare strategists will need.

“Now, we’re driving how we design our services and systems around the patient, around the family, and around the community. That’s new to healthcare, frankly.”

— *David Brooks*
President and Chief Executive Officer,
St. Joseph Mercy Health
Ann Arbor and Livingston Hospitals



The updated report begins with an overview of the emerging healthcare landscape and articulates significant forces that characterize the changing environment today. It discusses five implications and 18 key takeaways for the healthcare strategist. Collectively, the implications and takeaways form a point of view on the future role of healthcare strategy. Here is a summary of *Bridging Worlds* implications, which are explored in depth in the complete report.

Be Nimble to Exceed the Rate of Change:

Healthcare strategists need to evolve as fast as their environment. They must frame problems, ask provocative questions, and move the organization to action.

Create Consumer Experiences. Tell Powerful

Stories: Understanding needs and motivations is key to influencing consumer behavior through stories and experiences.

Integrate and Co-create: Healthcare strategists must facilitate conversations within multilayered and complex organizations, create coalitions, and seek out diverse inputs.

Erase Boundaries of Business: Strategists must help develop accessible, integrated systems of care, assembled through new means, such as partnerships and technology.

Generate Data-Driven Insights: Data is only valuable if it can deliver insights and better decisions. Strategists must identify the best tools to collect, interpret, and communicate information.

Finally, *Bridging Worlds* offers roadmaps of the skills, attributes, and tools that will help prepare healthcare strategists to face the future head-on. These lists are intentionally provocative. Many technical skills and areas of knowledge that are considered a baseline expectation—including business, financial, and technology acumen; communication skills; and project management—are not included. Instead, the report sets an aspiration for the additional behavioral qualities and advanced skills healthcare leaders need for success, both now and in the future. They are intended to challenge and inspire strategy professionals to take the next step in their development and knowledge.

“Healthcare is highly consolidated and competitive. We are looking for a competitive advantage every day. Our new competitors are Walmart, CVS, and direct-to-consumer primary care.”

— Pete Celano
Director of Consumer Health Initiatives, MedStar



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Evolving Health Landscape 2

General trends emerging in the healthcare field are presented as a foundation to examine the potential impact on healthcare strategy, even though the details of these trends are not yet fully known.

Implications for Strategy Leaders 10

This section presents ideas about the future of healthcare strategy in light of the evolving health landscape. The implications include:

- 1. **Be Nimble to Exceed the Rate of Change** 11
- 2. **Create Consumer Experiences. Tell Powerful Stories** 20
- 3. **Integrate and Co-create** 29
- 4. **Erase Boundaries of Business** 37
- 5. **Generate Data-Driven Insights** 47

Each implication delves into a level of granularity to move strategists toward action and execution. These subsections include:

Take Action identifies how strategists might respond to the implication.

Present Focus / Future Focus outlines anticipated changes in process.

Thought Provoker presents analogies, real life examples, and applications.

Skills, Attributes, and Tools presents key competencies and resources for the healthcare strategist.

Skills and Attributes of the Healthcare Strategist 55

Included in this section is a comprehensive synthesis of all skills and attributes identified in the implications, capturing an image representing the future role of the healthcare strategist.

SHSMD ADVANCE™ Roadmap 58

This section presents a five-step comprehensive framework for individuals and teams to assess and build strategic competencies to lead healthcare’s transformation. Also included are case examples of how to apply *Bridging Worlds* in an organization.

Glossary 63

This section lists and defines the skills, attributes, and tools identified in this document.

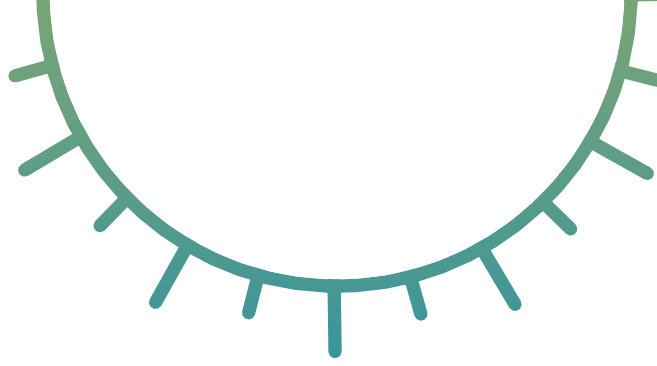
Case Studies and More...

Bridging Worlds is a living, ever-expanding document. Visit shsmd.org/BridgingWorlds for additional case studies, CEO profiles, blog posts, and resources.



Driven by payer reform, technology, scientific advances, and consumer demands (among others), the healthcare field is undergoing unprecedented transformation. As this landscape changes, the fundamental work of strategists must also change, both in response to and in anticipation of emerging trends. The themes below represent some of the changes that are transforming the work of strategists.

CHANGING UTILIZATION PATTERNS	NEW COMPETITION
ADVANCED SCIENCE OF MEDICINE	PARTNERS AND COLLABORATORS
TECHNOLOGY	CONSUMERISM AND RETAIL-IZATION
BIG DATA	ENGAGEMENT AND BEHAVIOR CHANGE
UNCERTAINTY IN PAYMENT MODELS AND POLICY	HOLISTIC VIEW OF POPULATION HEALTH



“You’re going to see a health system that’s focused on human longevity and aspirational living versus focused on the reduction of misery and suffering.”

— Roger Jansen

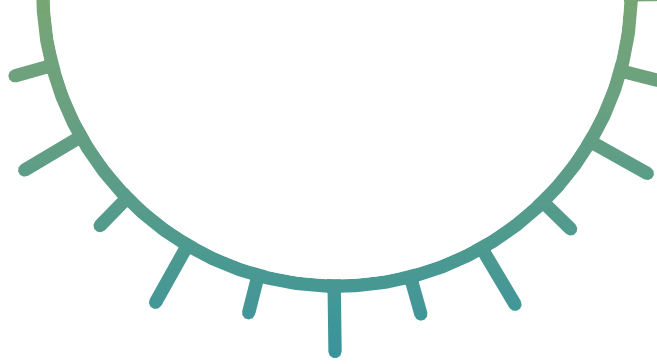
Chief Strategy Officer, Spectrum Health

Changing Utilization Patterns

Services and procedures that previously were delivered only in acute care hospitals are now provided in ambulatory, community, virtual, and home settings. Driven largely by value-based changes in reimbursement, the need for cost control, and advances in technology and procedural technique, this trend will continue. While the rate of growth for outpatient encounters outpaces inpatient cases in nearly every organization today, many hospitals and health systems still see inpatient revenue as a major economic driver. Some organizations are investing in networks of integrated services that extend far beyond the hospital locale. As value-based care becomes the norm, healthcare providers, payers, communities, and government are expanding their focus on prevention and addressing social determinants of health. Many organizations are experiencing dramatic changes in the acuity of cases and the erosion of volume.

Advanced Science of Medicine

As the science of health advances and the cost of technology decreases, the discovery of biomarkers and biologic pathways accelerates. The influence of “-omics” (e.g., genomics, proteomics, metabolomics, microbiomics) and comparative analytics on therapies and disease mechanisms provide improved predictions of disease susceptibility, earlier detection, and tailored therapies. Healthcare providers on the cutting edge of clinical research are seeking new translational models to better integrate research with clinical care. Organizations that can actively leverage knowledge, advancements, and ongoing education to both physicians and patient populations create competitive advantage.



Technology

Technology must be a central consideration of strategy development and an element of strategy execution. Technology drives efficiency and scale, and enables transformation and shifts in market dynamics, service models, and consumer engagement. Healthcare tools and delivery models must keep up with the development and convergence of the Internet, digital devices, portable technologies, artificial intelligence, and social networking, while ensuring security and privacy. Since the rate of technology innovation regularly outpaces the ability to integrate it meaningfully into operations and care delivery, healthcare organizations often struggle to prioritize investment and determine how technology enables long-term goals. Consumers, based on their experiences outside of healthcare, expect quick and intuitive interactions.

Big Data

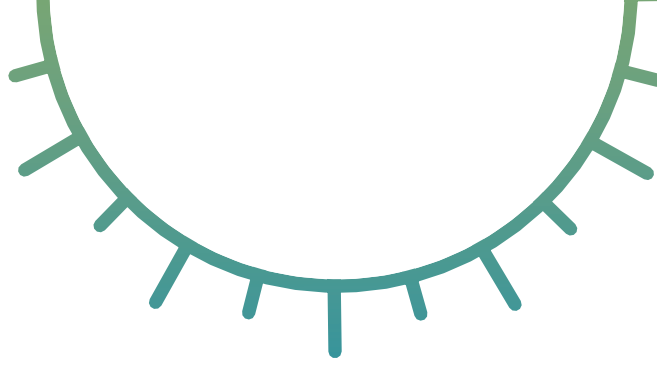
The rapid adoption of technology by consumers and business operations has created an ever-increasing flood of interaction and transaction data. While the technology industry hype around big data has been in full force for nearly a decade, many organizations struggle to manage “little data,” much less to integrate data across systems. The four Vs of big data—volume, velocity, variety, and veracity—present additional challenges to the technology infrastructure and the analytics talent of healthcare organizations. Most importantly, data is only useful if it generates insights that enable better decision making. New tools, including

predictive models and artificial intelligence, allow regular users to connect and visualize large volumes of data from multiple sources in ways that generate actionable insights.

Uncertainty in Payment Models and Policy

In general, reimbursement systems are largely shifting from volume/production-based to outcome/value-driven or capitated models. This presents a significant conflict in the current state. Healthcare organizations must find a way to build operations, infrastructure, and leadership capabilities as payment models continue to shift to value- and risk-based payment, while still operating in today’s fee-for-service model, where incentives reward output. The uncertainty around healthcare policy and Medicare/Medicaid reimbursement makes this transition even more challenging. Gaining traction for emerging outcomes-based strategies like population health is particularly difficult when economic incentives and specific bottom-line impacts of emerging models are difficult to quantify.

Additionally, as employers and consumers raise concerns about affordability, appropriateness, and quality, players in the healthcare marketplace will compete on the total value proposition, transparently explaining their complex cost and quality data.



New Competition

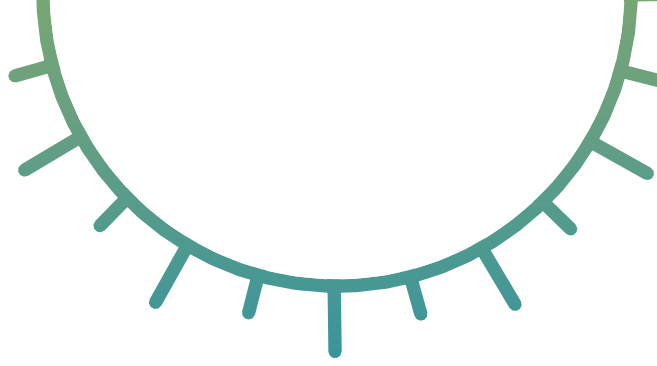
While competition across the healthcare field used to focus on local providers, today's healthcare entities face new competition on numerous fronts. National health systems are moving into regional and local markets through mergers, acquisitions, and partnerships. Competition for consumers can emerge from anywhere, from startups to freestanding urgent care to retail chains. Venture investment dollars are flooding into the healthcare market to fund new entrants, which focus on profitable aspects of healthcare, offering consumers convenience, integrated technology, ease of use, and a close fit with their daily routines. New players offer highly consumer-oriented and designed services that elevate the healthcare experience. While these solutions are somewhat disconnected from the continuum of care, the "tipping point" is nearing as new entrants move rapidly to close gaps between their offering and the traditional healthcare enterprise. Healthcare organizations must determine where they will openly compete, collaborate, or innovate to maintain their position and optimally determine new market opportunities.

Partners and Collaborators

Healthcare is both labor and capital intensive. Healthcare organizations must explore all possible avenues to not only reduce operating costs, but also lower their overall cost structure. To compete in value-based reimbursement environments, organizations must leverage economies of scale achieved through a combination of creative partnerships, including mergers, acquisitions, clinical integration efforts, operating efficiencies, and new models of collaboration. The demand for cost-neutral or even cost-saving solutions that still demonstrate a solid return on investment is growing. This may include divesting unprofitable areas of business and executing these services through outsourcing or partnerships. Many healthcare providers are working with local government agencies, social services, and faith-based organizations toward a common goal of population health. Each partner organization executes their core competency in coordination with other partners to achieve a greater collective impact.

"We are moving away from scheduled episodic care and emergent care to focus upstream around prevention, wellness, and lifestyle."

*— Roger Jansen
Chief Strategy Officer, Spectrum Health*

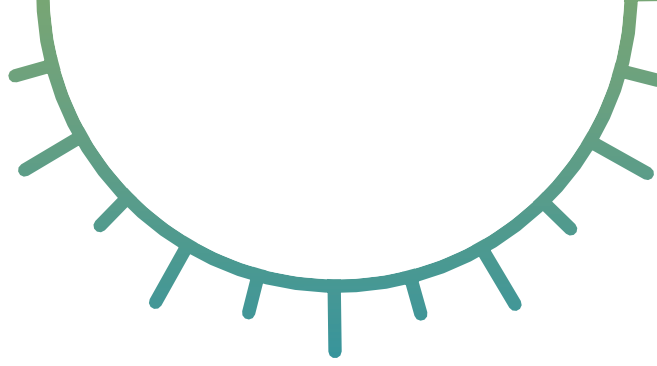


Consumerism and Retail-ization

Based in part on maturing consumer expectations, the “retail-ization” of healthcare is already well underway. Consumers are increasingly able to direct how their healthcare dollar is spent. More importantly, expectations of service and quality garnered from experience with other industries influence their expectations. Anytime/anywhere availability, upfront price transparency, and an intentionally designed consumer experience are hallmarks of successful non-healthcare service offerings like Netflix, Nordstrom, and Apple. Consumers now expect this from healthcare. The incursion of traditional retail providers—like CVS Health, Walmart, and Walgreens—into the healthcare delivery space has called attention to this trend, but other more subtle forces are shaping retail health models as well. The move toward price transparency associated with insurance exchanges is one such force. Telehealth models that offer customers a choice between accessing a physician by phone or video chat—priced using an upfront flat rate—are another. As retail thinking continues to permeate the healthcare landscape, consumers will increasingly expect advanced, personalized, and self-directed care options executed through an array of websites, apps, and wearable devices, which may or may not be connected to their physician (or health system).

Engagement and Behavior Change

General societal trends like globalization, cultural diversification, the aging of the baby boomers, and the millennial generation influence both consumer expectations and service delivery models. The integration of healthcare, lifestyle, retail, and community services are becoming the norm as healthcare organizations look toward more holistic models that engage consumers in multiple, personalized ways. Different generations have different expectations of healthcare interactions; traditional approaches may not resonate with millennials, for example. Engagement is a cornerstone of population health management. Strategies include technology-enabled care coordination, personalization enabled through advanced content management and business intelligence, 24/7 access models, behavioral economics, and social media that leverages peer-to-peer influence. These approaches seek to improve overall health by altering behavior, establishing new routines, and creating accountability.



Holistic View of Population Health

Though the World Health Organization (WHO) for decades has defined health as more than the “absence of disease,” the ways in which healthcare providers help patients achieve this expanded definition are now more varied and complex—with significant financial incentives to measurably improve population health outcomes. Over the past century, medical breakthroughs and preventative medicine have reduced or eliminated many acute episodic diseases and extended human life. As a result, today’s most prevalent diseases are chronic conditions requiring behavior and lifestyle changes as well as ongoing medical management.

Additionally, providers must now consider and address the upstream impact of social determinants of health. Research shows that social, behavioral, economic, and environmental factors account for about 70 percent¹ of a person’s total health status. Healthcare organizations must think beyond episodic interactions within their facility to address issues within the fabric of communities that affect health and deploy solutions to resolve them.

Improving health outcomes requires a “whole person” model of care that integrates all facets of a patient’s physical, mental, and emotional health. Further, across all states of wellness, consumers are increasingly seeking complementary and alternative treatments as a supplement to—or replacement of—traditional healthcare.

As the connections between mind and body receive increasing attention, behavioral health has likewise garnered significant focus among provider and community-based organizations. A fuller understanding of how best to address behavioral health issues—from reducing the social stigma associated with diseases of the mind to greater integration with primary care—sits atop the agenda for many organizations.

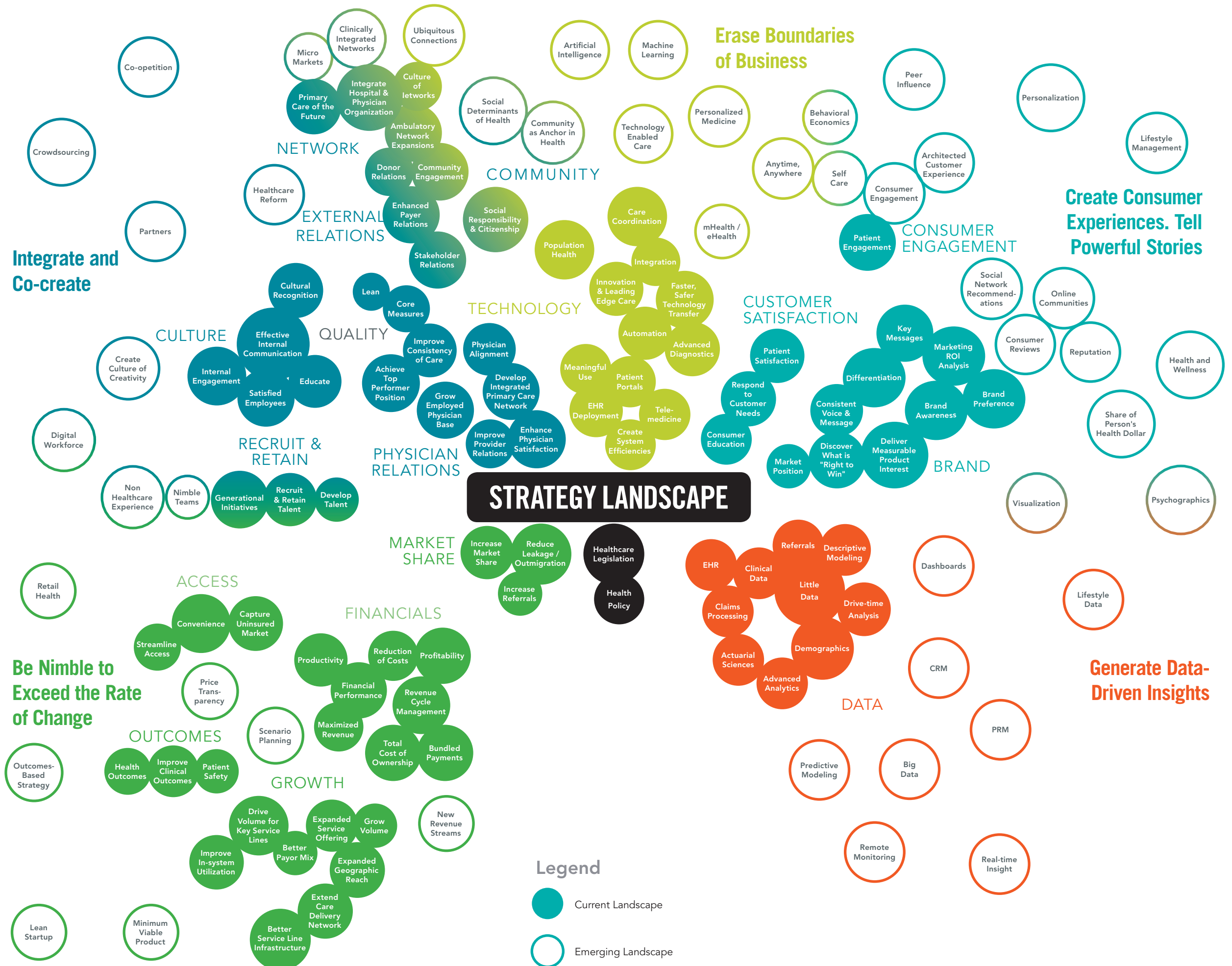
“I’ve seen a change in terminology, moving from the phrase ‘population health’ and flipping those words around to ‘healthy populations.’ That gives you a much broader range of activity and the ability to mix the social and business missions of organizations.”

*— Mark Parrington
Vice President of Strategic Transactions,
Catholic Health Initiatives*

This mind map depicts a variety of business objectives in healthcare today that are top-of-mind for healthcare strategists. Objectives closer to the center represent the current state; those farther out represent an emerging landscape with areas of focus that are increasingly important. As the mind map illustrates, connections can be drawn between concepts nearer the periphery and those viewed as major themes defining the future of healthcare strategy.

“The strategy landscape is an indispensable tool. It helps start the discussion, providing a look at the overall healthcare environment. It improves our ability to focus on the challenges we will need to confront going forward.”

— Jeffrey Kraut,
Executive Vice President, Strategy and Analytics, Northwell Health



Implications

1
Be Nimble to Exceed the Rate of Change

2
Create Consumer Experiences. Tell Powerful Stories

3
Integrate and Co-create

4
Erase Boundaries of Business

5
Generate Data-Driven Insights

1
**Be Nimble to
Exceed the Rate
of Change**



Be Nimble to Exceed the Rate of Change

Healthcare strategists need to evolve as fast as or faster than the external environment. They must frame problems, ask provocative questions, and courageously move the organization to action.

12

It can be difficult to be nimble in any large organization; layers of decision making and complicated processes can result in slow and incremental progress. Healthcare organizations must respond to a dynamic environment fueled by increasing consumerism and a myriad of disruptors. To do this, they need to use a more streamlined approach to strategy. In non-healthcare organizations, strategy is conceived as a process with continuous, rapid iterations. Following this lead, healthcare strategists can leverage principles from other industries—such as the Lean Startup movement, rapid prototyping, and agile software development—to help their organizations develop smart strategies quickly, while simultaneously connecting with the consumer more effectively. Ultimately, strategists will need to be able to connect the dots between human experience, raw data, and strategic initiatives.

Thriving in this new world of constant change will require strategists to take on responsibilities not traditionally within their realm. They need to drive swift and innovative action to turn ideas into reality. Healthcare organizations cannot afford to “wait and see.” Strategists must take an active role to drive exploration and action.

This calls for the right balance of subject matter expertise and entrepreneurial acumen. This combination challenges the status quo and requires the discovery of meaningfully different ways to approach the business, while simultaneously accounting for healthcare’s must-haves like safety and clinical quality. People with this kind of expertise-based entrepreneurial orientation quickly evaluate opportunities and assemble agile teams to implement them.



Present Focus	Future Focus
Siloed thinking	Systems thinking
Operational mindset	Consumer mindset
Standing committees	Nimble teams
Fixed responsibilities	Permeable role boundaries
Bulletproof concepts and extensive pilot projects	Hypothesis testing; pivot on the fly; fast track implementation
Mitigating all risk	Willingness to test; deliberate risk-taking
System-wide strategy	Micro strategy
Traditional business model	New business models and revenue streams
Fully vetted business plans	Minimum viable product; just enough funding
Decision by consensus	Decision by merit

[SHSMD ADVANCE™](#) | Skill Builder contains a library of resources to help you become familiar with new concepts in the Future Focus, such as pivot on the fly and systems thinking.

“We need the agility to think quickly, to move quickly. We need the ability to respond to competitive situations and to think ahead of those situations.”

— Michael Slusarz
Vice President of Marketing and Business Development,
Cape Regional Medical Center

Taking Action

1 + Be an Internal Consultant

The best consultants act as strategic partners to executives; they are trusted advisors who can help organizations properly frame problems, diagnose issues, formulate a sound plan of action, build necessary consensus, and assist in implementation. Increasingly, the most valued strategists are those who act as a trusted, internal consultant. The critical abilities include helping others think differently, creating new approaches to applying expertise, and developing an analytic framework that offers true understanding of a problem. Such expert strategists must master ambiguity. The specialist-generalist tension is inherent in developing this consulting mentality. Some consultants are considered experts in a particular area (e.g., service line expert) and others are considered generalists who are at ease working through a number of business challenges. In either case, strategists need to help connect the dots across organizational silos and drive action.

“I’ve asked my team to go out and be active listeners, critical thinkers, and drivers of actions.”

— Tamara Austin

*Executive Director and Vice President of
Strategy and Growth,
HCA Healthcare UK*

2 + Execute Ideas Faster

Strategy is more than a plan or a static document. It must drive action, change behavior, and produce measurable results. Strategy fails unless it closes the “idea to execution” gap. According to research on strategy models across a diverse array of global companies conducted at the Harvard Business School, 70 to 90 percent of internal execution efforts fail.² Why? Identifying an opportunity and gaining leadership support is the easy part. The development and execution of the strategy are often left in the hands of employees who conceived of it. This underestimates the appropriate resources, time, and focus it takes to fully implement a solution; these employees’ time is already fully committed by the organization. The result is promising ideas fail to become viable solutions; they either never progress or are implemented at a considerably slower pace. Healthcare strategists must consider how a strategy will be implemented while formulating the strategy without getting mired in operational considerations. Identify the right team to execute the plan, develop a solid work plan and progress measurements, and create accountability.

3 + Create Agile Strategy

Traditional strategists search diligently for the “perfect” and “well-reasoned” plan. Instead, they need to streamline the approach to respond to today’s environment of accelerated change. Many leaders mistakenly believe that supporting new initiatives requires significant financial investment and thus they fail to act. The Lean Startup³ movement, in contrast, embraces the constraint of limited resources because it forces a bootstrapping approach that fosters innovation. Entrepreneurial management practices encourage creative ways to recombine knowledge or resources. The overarching philosophy should be to provide minimal funding and maximize learning, not allocate large sums at the outset. Provide just enough planning and investment to test a concept, and then move ahead or pivot, based on what you learned from testing.

Bridging Worlds in Action



In 2009, Ben Silbermann saw that people might want to use their phones for shopping. He created an app, Tote, to let people take photos of their favorite outfits from prominent retailers, such as American Eagle and Anthropologie, and sign up for alerts on sales. He noticed, though, that people were focusing on curating collections of their favorite looks, so he pivoted into a new service—letting people save and share photos of things they liked, regardless of the source. You probably know the app under the new name he gave it: **PINTEREST.**

“We’re creating an integrated team of professionals who are very good at what they do, who are leaders, who flawlessly execute, and who can swarm to the priority projects.”

— Kristen Wevers
Chief Marketing and Communications Officer,
UC Health

4 + Accelerate and Innovate

Entrepreneurs and technology startups disrupt healthcare by actively seeking innovative product offerings that meet the evolving needs of consumers. Inventors, entrepreneurs, and venture capitalists are flooding the healthcare and direct-to-consumer markets. Hospitals and health systems are responding by creating accelerators, incubators, and innovation centers to stimulate nimbleness and integrate new solutions. Healthcare organizations should not necessarily be solution developers. Instead, they should nurture employee innovation, gain early access to new technology, recruit entrepreneurs to solve critical issues, and influence the evolution of potential solutions. The key is to create an idea pipeline—whether it is internal, an external entity, or a consortium of partners. Strategists must be willing to change the status quo and apply their understanding of the organization to determine innovation and investment priorities.

Bridging Worlds in Action

To encourage intrapreneurship and innovation, **ADOBE** developed the Kickbox toolkit for incubating ideas. Kickbox contains tools to help employees develop, refine, prototype, and validate their ideas with customers. Each box contains instructions, tools for developing ideas, \$1,000 seed money to validate ideas, and a Starbucks gift card for caffeine. Adobe has released their toolkit as open-source, allowing anyone to use the Kickbox process, modify it, and deploy it across an organization at scale. Find more information at kickbox.adobe.com.



The Kickbox process consists of five sequential cards:

- 1. [Start Here]**: A card with a green background and a white arrow pointing down. It includes a 'Welcome to Kickbox' message and a list of 'Kickbox goals'.
- 2. Ideate**: A card with a green background and a white gear icon. It contains 'Ideation guidelines' and a 'Kickbox ideation process' flowchart.
- 3. Improve**: A card with a green background and a white gear icon. It includes 'Improvement guidelines' and a 'Kickbox improvement process' flowchart.
- 4. Investigate**: A card with a green background and a white gear icon. It contains 'Investigation guidelines' and a 'Kickbox investigation process' flowchart.
- 5. Iterate**: A card with a green background and a white gear icon. It includes 'Iteration guidelines' and a 'Kickbox iteration process' flowchart.

Thought Provoker

This Thought Provoker provides a way to “limber up” the mind and begin to apply the concepts in each implication. The **THINK** section of each Thought Provoker gives an example of successful execution that illustrates the thinking. Focus on the characteristics that make it successful and consider how these could be applied to the context of your organization and role. The **DO** section provides a series of directed activities that can be completed alone or in a group.



Think



INTERMOUNTAIN HEALTHCARE

announced a partnership with healthcare startup accelerator **HEALTHBOX** at the end of 2014. The collaboration is structured to support both employee innovation and provide seed investment for early-stage startups. This stimulates collaboration among employees, inventors, entrepreneurs, and healthcare experts. Intermountain Foundry is the employee innovation pipeline. It uses an eight-week curriculum to help employees develop ideas, test their viability, and scale solutions. Healthbox is embedding its curriculum, expertise, and resources inside Intermountain to create a place for the collision of internal and external perspectives.

Healthbox also helps administer Intermountain’s Healthcare Innovation Fund. The fund identifies, evaluates, and invests in startups aligned with Intermountain’s mission, “Helping people live the healthiest lives possible.” “Collaborating with Healthbox provides us not only with the foundation to expand the impact of their solutions, but the means to form relationships with entrepreneurs and their technologies that will improve quality and reduce the cost of care for our patients,” says Bert Zimmerly, chief financial officer at Intermountain Health.⁴

Bridging Worlds in Action



In early 2017, **MARY WASHINGTON HOSPITAL**, the flagship hospital for Mary Washington Healthcare, was experiencing increasing wait times in the emergency department. The project management team implemented a design-thinking approach to map drivers to outcomes and initiated an iterative loop of rapid prototyping. “We are presenting ‘what ifs’ not ‘solutions’ to the ED team,” explains Cody Blankenship, vice president of project management for Mary Washington Healthcare. “Essentially, we pull a lever, check the response, and determine if that lever affects outcomes.” But they aren’t doing it alone. The project management team includes Six Sigma belt leaders. Each prototype iteration produced hands-on learning. The success of the prototyping across five metrics—walk-out rate, length of stay for admit, length of stay for treat and release, door to doc, and HCAHPS—inspired the nursing units to adopt additional design-thinking tools. The biggest challenge for the project management team has been the complexity in deploying staff in new ways and getting the right staffing mix in response to their findings.

Thought Provoker

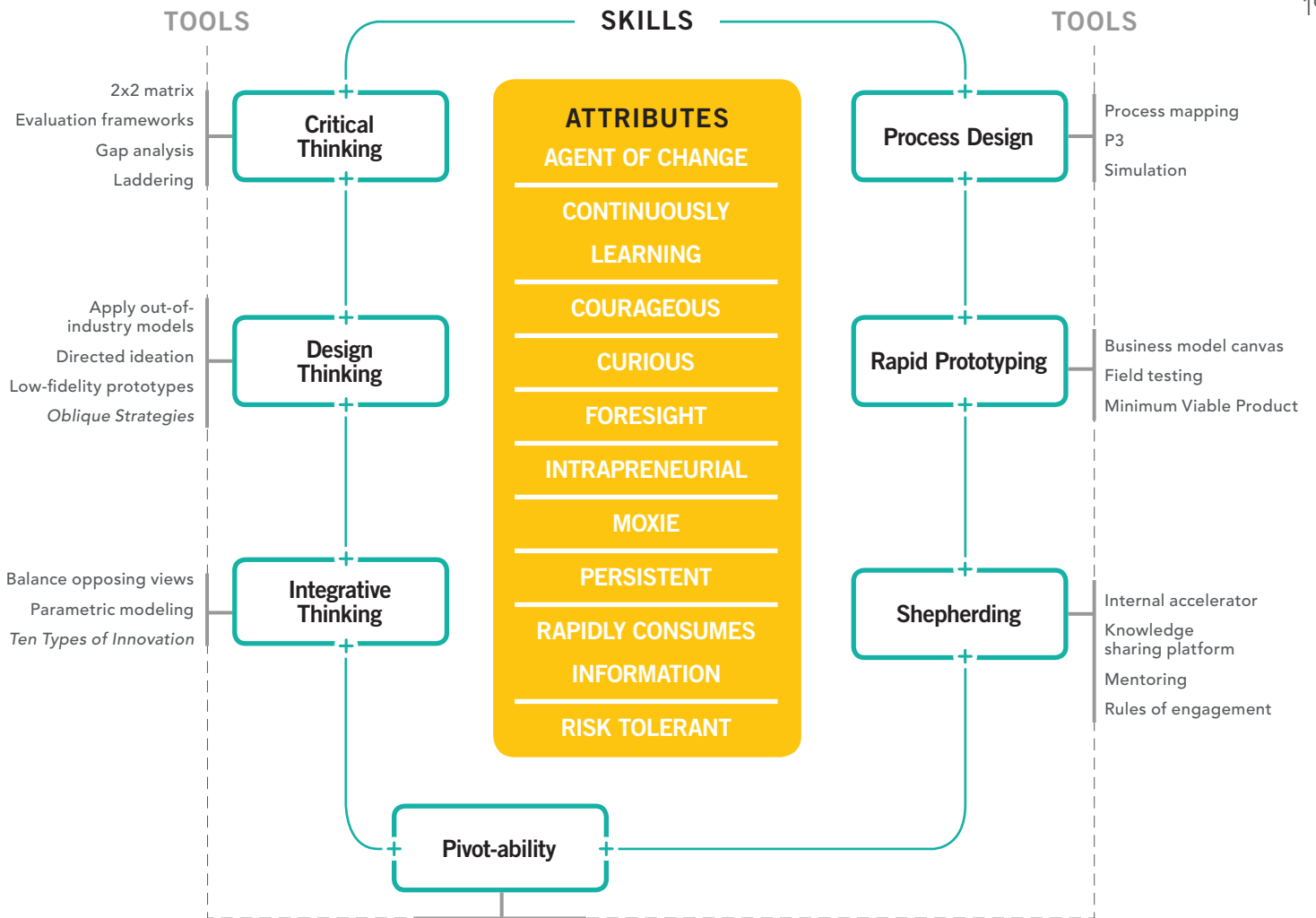


Scenario:

Your marketplace is demanding that healthcare be more convenient, accessible, and personalized. Nontraditional organizations have made forays into your market as stand-alone entities and through partnerships. Many of your traditional competitors are also experimenting with unique ambulatory care options to push care to lower cost settings and create new access points for patients who might not have sought out their system in the past. All of these competitors—traditional and nontraditional—have already deployed services, are planning more, and have shown an ability to move more quickly than your health system has in the past.

- Instead of considering your strategic response as a project, consider it as a series of experiments. Make a list of five things that you must discover for this effort to succeed.
- Identify your core audiences. List 10 ways to get direct feedback from consumers, patients, and internal stakeholders quickly. Think both small scale and large scale.
- Consider how you might design, build, and test your potential solutions so that you engage with prospective customers early in the process. Can you test prototype solutions in one month's time as opposed to a year? List the resources and expertise needed to build prototypes, measure, and learn.
- Facilitate a group exercise: Engage a group of key stakeholders. Ask one group to imagine that the implementation of the solution you are considering was an epic failure. Then, ask them to identify the specific reasons why things failed. Have a second group imagine the solution was an unqualified success. Ask this group to identify factors that led to a successful outcome. Compare the factors from both groups and identify any common themes.

Skills, Attributes, and Tools



Definitions for these skills, attributes, and tools can be found in the Glossary.

Lean Startup model
Agile development methodology
Oblique Strategies

Align professional development with SHSMD ADVANCE™, a comprehensive framework designed to help strategy professionals assess their skill strengths and gaps, expand their knowledge, and develop new skills to lead healthcare’s transformation. Visit shsmd.org/ADVANCE for more information.

Featured Resource from SHSMD ADVANCE™ | Skill Builder
[“How to Design Your Own Innovation Accelerator: A Checklist”](#)





2

**Create Consumer
Experiences. Tell
Powerful Stories**



Create Consumer Experiences. Tell Powerful Stories

Demographics, statistics, and clinical data do not translate into a thorough understanding of an individual's needs and motivation. The power of accessible technology, analytics, and personalization, as well as the intentional design of experiences are critical parts of meeting consumers' expectations and influencing their behavior, especially in this age of enhanced consumerism.

The practice of healthcare touches intimate and often emotional elements of our humanity. Health is one of the most—if not the most—personal aspects of our lives. Connecting to the emotional aspects of people's motivations is vital to forging a relationship. The one-size-fits-all approach to consumers often produces the opposite effect.

In many respects, healthcare systems lag behind more quickly evolving industries in building consumerism strategies that purposefully forge, maintain, and engage these emotional connections. If consumer products can evoke an emotional response and positive brand affinity, so too should healthcare experiences. Many organizations have taken steps in this direction by using patient testimonials or life stories as part of advertising campaigns. These strategies are certainly a positive step, but need to be part of a more comprehensive strategy.

Companies in many industries have found ways to connect customer relationship management technologies that integrate traditional, digital, and social media content along with product design and bricks-and-mortar solutions to create a personalized consumer journey. Engaging consumers to take an active role in their own health, and ultimately to change their behavior, is a foundational mandate of healthcare. In many ways, the influence of a consumer's peer group and social network is stronger than any marketing campaign.

Understanding the issues important to each consumer helps strategists deliver customized stories and solutions based on their interests and actual healthcare behaviors. Consider how marketing automation can connect individuals quickly to key resources, people, or care. Whether their primary concern is affordability, quality, or access "anytime or anywhere," content management systems can tell the right story in the right way to each individual.



Present Focus	Future Focus
Transactional communication	Behavioral influence
Segmentation	Influential storytelling
Acute, episodic interactions	Personalization
Patient satisfaction	Health and wellness journey; longitudinal relationships
Provider-centric program development	Discover and anticipate consumer needs; architected customer experience
One-way communication	Consumer-centric program development
Siloed communication channels	Continuous consumer interaction and feedback
Static content	Omnichannel experience
Transactional communication	Adaptive content refined through continual testing

[SHSMD ADVANCE™](#) | Skill Builder contains a library of resources to help you become familiar with new concepts in the Future Focus, such as behavioral influence, personalized content, and omnichannel experiences.

“The most effective marketers are capitalizing on opportunities when consumers invite the brand to participate in the everyday moments in their lives, because it makes their lives better.”

— Rose Glenn
Senior Vice President of Communications
and Chief Marketing Officer,
Henry Ford Health System

Taking Action

1 + Discover Consumer Needs

Healthcare organizations use a variety of methods to quantify and understand patients' needs. While some healthcare organizations struggle to meet today's known needs, many are following successful retail and technology brands that have pushed further to discover the unarticulated needs of their customers. Ethnographic immersions, consumer preference studies, direct observation, and rich segmentation are all time-tested approaches to uncovering hidden need without asking consumers directly. In addition, digital analytic tools can be used to understand consumer behavior and generate real-time insights.

"We have been able to weave together both the qualitative data—hearing people's stories in their own words—and quantitative utilization data for high need areas. The two together are a pretty powerful combination."

— Jodie Lesh

Senior Vice President of National Delivery
System Strategy, Planning, and Design,
Kaiser Permanente

Bridging Worlds in Action



STATE FARM insurance opened a storefront coffee shop and community center called **NEXT DOOR**. Located in a hip, mixed-income neighborhood to cater to millennials and entrepreneurs, it offers free financial counseling, workshops, Wi-Fi, whiteboards, and meeting space. Next Door was conceived as an inviting, nonthreatening consumer research engine. The State Farm brand is intentionally downplayed to focus on the needs of consumers, allowing them to forge meaningful relationships and generate consumer insights through one-on-one financial coaching sessions. There is never a hard sell, simply a great experience.



2 + Design Experiences

Healthcare organizations invest considerably in measuring and improving patient satisfaction. However, a satisfied patient does not necessarily imply a good consumer experience. Consumers want to have some measure of control over their health journey. Experience design draws on multiple disciplines and methods to intentionally organize consumer touchpoints. The key component is empathy—the ability to see the experience from the end user’s point of view by understanding their motivations and pain points. The aim is to create a personalized experience that combines both physical and virtual interactions. Healthcare strategists need to think beyond the patient journey to develop relationships with consumers long before they ever seek healthcare.

“It’s imperative to connect the dots between all the different care settings to make sure that we have a cohesive, coordinated, great experience for our patients.”

*— Sven Gierlinger
Chief Experience Officer,
Northwell Health*



Bridging Worlds in Action

Larry Keeley, co-founder of the Dublin innovation firm, developed the **COMPELLING EXPERIENCE MODEL**. This framework, also known as the 5Es, illustrates how user experience begins before a patient arrives at a healthcare facility and extends beyond their stay. Use the 5Es—entice, enter, engage, exit, and extend—to shift focus from clinical interactions at a healthcare facility to the broader health journey. Use the consumer’s point of view to map the journey from their perspective, instead of defining the patient by health condition or acuity level. Learn more by reading the section “Compelling Experience Map” in [101 Design Methods: A Structured Approach for Driving Innovation in Your Organization](#) by Vijay Kumar.

Entice —> **Enter** —> **Engage** —> **Exit** —> **Extend**

“The healthcare strategist really needs to be part of an integrated approach to the consumer journey.”

*— Christine Albert
Vice President of Marketing,
LCMC Health*

3 + Tell Stories for Impact

Healthcare organizations often focus solely on the technical component of medicine in their storytelling. Content such as quality metrics, affiliations to research, and credentialed staff are used to express strengths to the consumer when, in fact, consumers care mostly about their experience. While expertise and areas of proficient skill are still important, strategists must put those in the context of each individual’s experience or story to make it more meaningful. Transforming consumer interests and stories into digital intelligence enables the organization to communicate in a way that can use emotional engagement to affect behavior change. This emotional connection is essential to influencing health behaviors.

4 + Personalize Your Brand

An organization’s brand is an expression of the unique value proposition that the organization offers. Healthcare organizations cannot allow their brands to remain static; positioning and messaging must be dynamic to align with

evolving consumer needs and expectations. Digital platforms are one way to create more efficient and personalized service experiences. Healthcare organizations can create an ongoing learning environment, track consumer behavior, and find opportunities to customize experiences and anticipate needs. The effectiveness of engagement efforts can be measured and adjusted in real time by incorporating technology throughout the consumer journey. These increasingly sophisticated insights into human behavior, coupled with data, enable large-scale predictive marketing that personalizes content to the individual consumer. The healthcare strategist should drive this vision of technology integration across disciplines and stages of the care continuum.

Bridging Worlds in Action



The **CLEVELAND CLINIC’S** social media strategy focuses on highly relevant content on its Health Hub blog, where visitors can find in-depth information and start a conversation. The health system’s consumer-facing app, called Today, provides comprehensive tools for interacting with Cleveland Clinic. Proprietary software gives researchers privacy-compliant access to health data across the system, accelerating the path to discovery. All this information comes together for the consumer in personalized medicine initiatives that combine patient data, genomic data, and family history to provide customized treatment plans tailored to the individual.

Thought Provoker

This Thought Provoker provides a way to “limber up” the mind and begin to apply the concepts in each implication. The **THINK** section of each Thought Provoker gives an example of successful execution that illustrates the thinking. Focus on the characteristics that make it successful and consider how these could be applied to the context of your organization and role. The **DO** section provides a series of directed activities that can be completed alone or in a group.



Think



Signage and wayfinding is a significant element of the patient experience at any healthcare facility. A cross-functional team at the **UNIVERSITY OF VERMONT MEDICAL CENTER (UVMC)** had been studying wayfinding issues for several months. Two user experience (UX) designers on the team suggested holding a “design sprint” to rapidly design and test solutions. The design sprint is a methodology developed by Google Ventures to address strategic business challenges in only five days, though UVMC condensed the process further to three days. The process consists of a set of distinct steps each day: map, sketch, decide, prototype, and test.

The sprint started out by mapping and prioritizing all the known wayfinding problems identified in research. In the course of voting, a “super problem”—clear and consistent naming of zones of the hospital—emerged. Participants generated ideas to solve the question, “How might we create a naming convention that helps patients

understand where they are and where they need to go?”⁵ By the end of Day One, the team had narrowed their focus to three promising solutions. Day Two was spent refining the initial concepts and selecting one robust solution to test in the hospital.

On Day Three, the team created paper prototypes of their three-zone navigation scheme and placed them throughout the hospital. Team members stood near the entrance, watching for visitors needing directions, and asked if they would like to try out their navigation prototype. The team then followed the visitors through their journey to observe their behavior and collect feedback.

This first design sprint was considered a success. Ideas were generated, prototyped, and tested in only three days. Team members were energized by the validation from patients, visitors, and staff. They also uncovered some nuances to address in future design efforts.

Thought Provoker

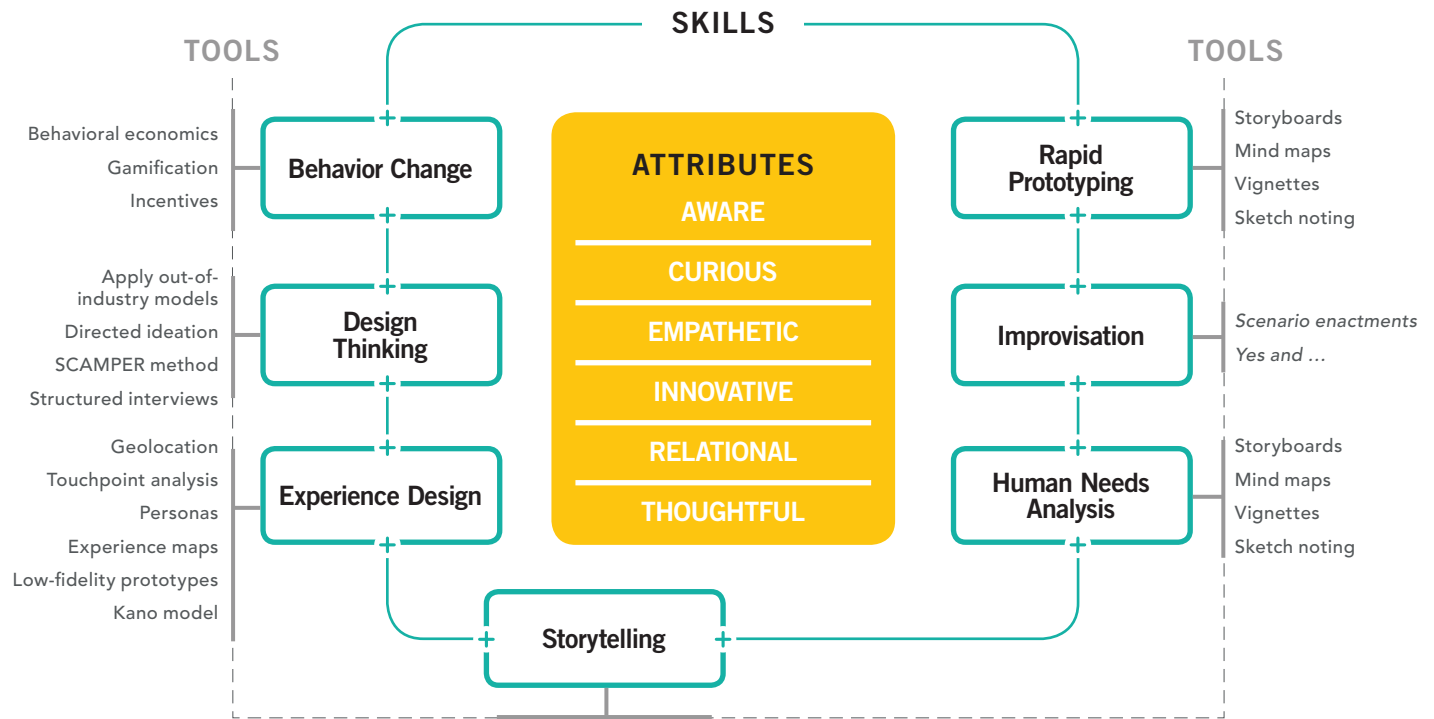


→ While an organization may be united by vision and values, there are a variety of perspectives on the core business. A shared purpose is one of the hallmarks of a high-functioning culture. Engage a group of strategic thinkers to define your organization’s value proposition using a simple “mad lib” format. The Starbucks value proposition example will help them get started. You will find a wide spectrum of interpretations—good, bad, or otherwise. Facilitate a discussion about the points of alignment and the conflicting viewpoints across the responses. Identify the attributes that differentiate your organization and create value for consumers.

Starbucks
 is a Coffee experience that is “accessible” but feels high end
 product / service
 For People willing to spend a little more on coffee and food
 target customer
 That will Transform the coffee market from “consumer based” to “experience based” and increase shareholder value
 ultimate benefit
 Because they
 1) Have a consistently high quality product that’s tightly managed from harvest to delivery
 proof point
 2) Focus on service, where every customer feels a sense of “intimacy” & “personal connection”
 proof point
 3) Design store environments that feel local and encourage a “stay & linger” mentality
 proof point

- Identify a list of at least 10 lifestyle details—such as language, culture, and interests—that align with the attributes identified in Step 1. For each item, identify three ways your organization can personalize service offerings, messaging, and experiences.
- Spend half a day or more observing a particular service or product by embedding someone acting as a consumer within the environment in which the experience occurs. Focus on pain points, reoccurring themes, unspoken issues, and variation in experience. Identify needs that are not being met or that could be improved upon.
- Consider what analytics or data points could enhance your knowledge of wants, needs, and actual behaviors. Apply this knowledge as you consider redefining the experience.
- Select three of the consumers you identified in the observation phase. Expand upon their experience until you have created an individual journey for each throughout the healthcare system. Pay attention to points where physical space, service interaction, and technology could enhance their experience/journey. Consider the experience before and after the consumer has encountered your organization. Which of the elements do you do well now? Are there any shortcomings? How might you make things easier for them?

Skills, Attributes, and Tools



Definitions for these skills, attributes, and tools can be found in the Glossary.

The Seven Basic Plots
 Pixar Rules of Storytelling
 Answer "Why" first, then "What" and "How"
 Sketch noting
 Storyboards
 Mind maps
 Vignettes

Align professional development with SHSMD ADVANCE™, a comprehensive framework designed to help strategy professionals assess their skill strengths and gaps, expand their knowledge, and develop new skills to lead healthcare's transformation. Visit shsmd.org/ADVANCE for more information.



Featured Resource from SHSMD ADVANCE™ | Skill Builder
["Sprint: How to Solve Big Problems and Test New Ideas in Just Five Days"](#) by Jake Knapp

3
**Integrate and
Co-create**

Integrate and Co-create

Hospitals and health systems are complex and multilayered organizations. The healthcare strategist should facilitate conversations across these boundaries, create coalitions, and drive decisions forward. The effective practitioner will maintain momentum while harnessing the value gained from leveraging diverse perspectives, both inside and outside their organizations.

30

Healthcare strategists hold a unique position within organizations, because their relationships and influence span many organizational functions and groups. They cultivate executive sponsorship for initiatives. They support business unit leaders. They build engagement from frontline staff to implement strategies. They understand the ever-expanding components that define the organization, including key partners and contracted service providers. They continuously monitor the pulse of internal audiences, the consumer, the marketplace, and the national landscape. This connection to diverse elements of their organizations—and to broader external influences—puts strategists in a position to both encourage and integrate divergent viewpoints.

Organizational strategy fails when it doesn't drive day-to-day actions and decisions. Healthcare strategists must build the connection between strategy

and action across all the distinct parts of the organization. Stakeholders—including leadership, frontline staff, physicians, partners, and consumers—speak different languages and have different priorities. The strategist is the universal translator and communicator, who engages this diverse array of constituents, facilitates the exchanging ideas, helps turn insights into solutions, and enables everybody to participate in execution.

Ideas can come from anywhere. Companies that stay most competitive over the long-term look outward—using inspiration, ideas, and opportunities from other industries. Additionally, strategists cannot be bound by the legacy of “the way things have been done,” but should continually be curious about how things could be done, often looking far beyond their own organization, discipline, and industry to find those opportunities.



Present Focus	Future Focus
Structured annual planning process	Dynamic, transformative planning process
System-wide strategy	Microstrategy
Organizational silos	Diverse coalitions
Siloed functional teams	Nimble, cross-functional teams; facilitated collaboration
Mitigate all risk	Willingness to test; deliberate risk-taking
Stakeholder input	Crowdsourcing; manage dissenting viewpoints
Decision by consensus	Decision by objective merit
Static authority based on rank	Dynamic authority based on expertise

[SHSMD ADVANCE™](#) | Skill Builder contains a library of resources to help you become familiar with new concepts in the Future Focus, such as coalition building, crowdsourcing and microstrategy.

“The more uncertain the situation or the issue, the more you actually need to be inclusive and diverse. The natural inclination is to streamline, figure it out, and plow ahead. I think that’s the wrong approach to uncertainty.”

— David Brooks
 President and Chief Executive Officer, St. Joseph Mercy Health
 Ann Arbor and Livingston Hospitals

Take Action

1 + Encourage Diversity of Thought and Experience

Good strategy is becoming less about expertise and more about curiosity, open-mindedness, and diversity of thought and experience. Strategists must tap into distinctly different worldviews and experiences, particularly when opposing thoughts can be merged into a more optimal solution than compromise alone can yield. These creative collisions often produce novel insights and lead to competitive advantage, if managed well. Healthcare organizations need to develop teams that reflect the visible and invisible attributes of diversity of the consumer populations they serve. Integrating diverse thinking isn't easy, but the results can be powerful. Diverse teams don't have just the advantage of more ideas; they're actually better at making decisions.

2 + Manage Change through Collaboration

To move ideas from concept into real-world solutions, strategists must create and lead change. Being a true leader of change involves, at least in part, mobilizing stakeholders around a common goal. Co-creation—the practice of engaging stakeholders in the design of solutions—is valuable for building broad organizational support prior to implementation. Take time to listen to others and incorporate their feedback. Participants who have been heard and have contributed to the refinement of solutions will be more passionate about bringing them to reality. Healthcare strategists should deliberately socialize new ideas through both formal and informal social networks in the organization, building a case for change and a sense of urgency. This concept of “spread” has been written about widely in both management and healthcare leadership texts, but many organizations remain challenged to successfully deploy ideas and strategy.

“We need to be able to collaborate with all those different entities across the health system to drive meaningful change.”

*— Sven Gierlinger
Chief Experience Officer,
Northwell Health*

3 + Create a Culture of Transparency

Highly effective teams possess a culture of transparency, collaboration, and resiliency. Healthcare strategists, who are continually working across organizational boundaries, have a unique opportunity to model and develop a culture of collaboration. Cultural fit is a particularly important consideration in acquisitions, mergers, and partnering relationships. Transparency and inclusiveness are key to building trust, especially when facing significant uncertainty. Create an environment for safe and open dialogue, where ideas are considered based on merits, not positional authority. Ideas often emerge from unexpected places—internally, externally, from experts, and from novices. The challenge for the healthcare strategist is to design mechanisms to solicit this kind of robust feedback, and then to translate it into action.

“If you can listen to people, incorporate their ideas, and be explicit about it, you are basically connecting ideas to build something much bigger. People feel like you have lived it with them.”

*— Jodie Lesh
Senior Vice President of National Delivery
System Strategy, Planning, and Design,
Kaiser Permanente*

“It doesn’t matter what your rank or station inside the organization is. You can be a driver of integration and collaboration.”

*— Dan Miers
Chief Strategy Officer,
SPM Marketing & Communications*

Thought Provoker

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Think



KAISER PERMANENTE Southern California has developed a field-testing methodology to refine technology and process solutions. Strategists, information technology (IT), and frontline staff come together to develop and test solution prototypes. This rapid prototyping approach works well for problems where there is a clear need and the solution is a combination of technology and process (e.g., streamlined patient check-in or wait-time notifications). The process begins with observation in the clinical environment to better understand the context of the issue and make sure the right problem is being addressed. Next, participants generate ideas and create paper prototypes for potential solutions. A prototype is a simplified representation used to communicate an idea of how the solution works and collect feedback for improvement. Frontline staff then test the most promising concepts in a mock-up space by running various scenarios and refining the prototype. The mock-up space simulates the clinical environment, but is easily changed and

reconfigured. IT staff make changes to the technology “on the fly.” After each round of testing, the team huddles to evaluate the testing results and plan the next steps. Finally, the solution is tested in a clinical environment with real patients. This entire process can be completed in a week.

The field-testing methodology recognizes the strong connection between technology and operations. Importantly, some of the staff who will ultimately use the new technology are part of the design and development process. This involvement eases change management; the staff involved in field testing are the “super users” who help implement the new solution. IT staff, who are often several steps removed from the clinical environment, are able to see the impact of their work in real time. This shortens the technology development cycle and ensures the solution meets user needs.

Thought Provoker

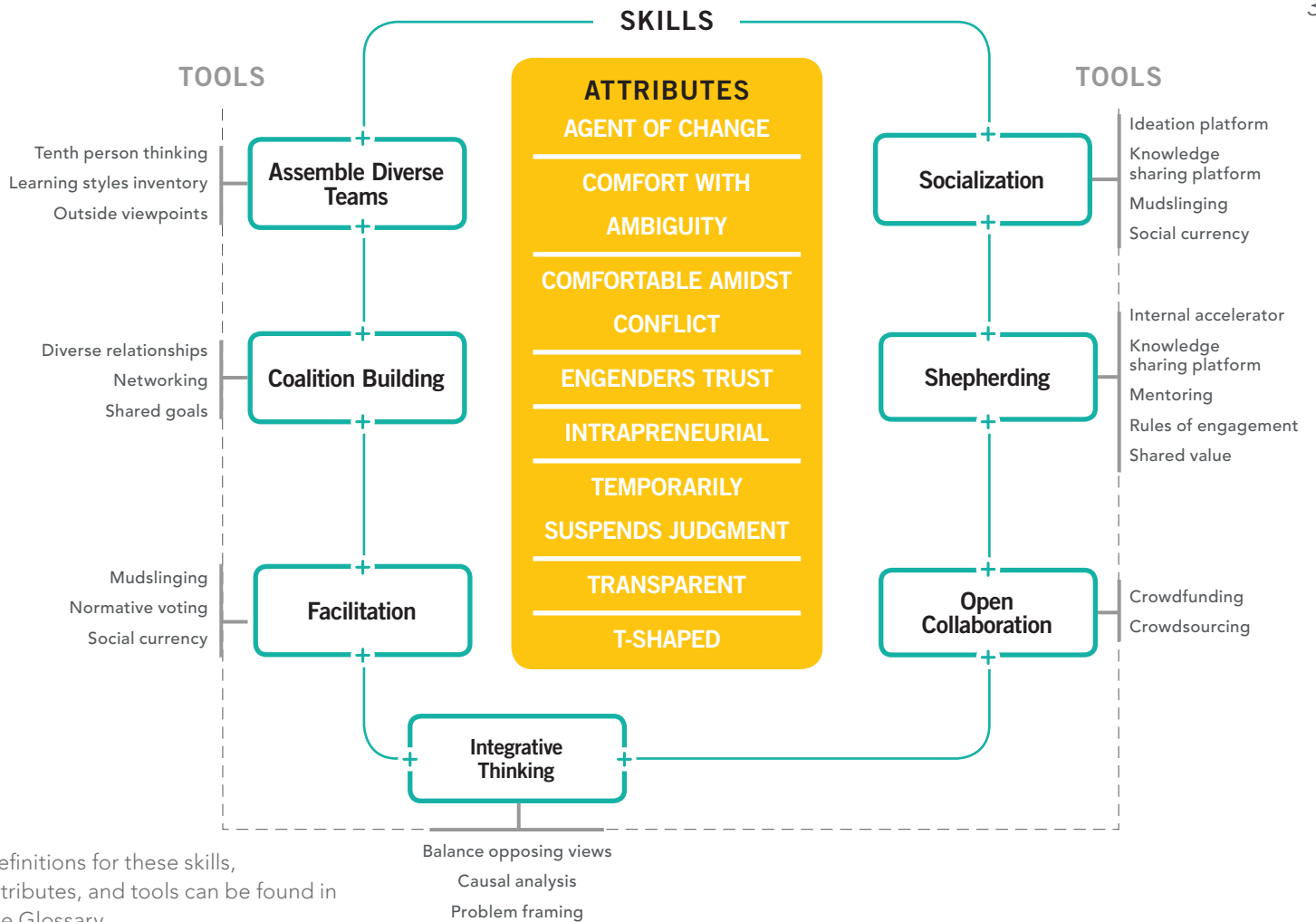


Think about a current problem in your organization that is particularly complex or vexing. Write a short description of the problem and the current approach to addressing it.



- Identify individuals within the organization who could help you more fully understand the problem. Consider how many individuals within that group have completely different world views, backgrounds, and experiences than you and from each other.
- List three out-of-healthcare organizations or brands that inspire you. List the core strategies that make each brand unique and successful. Describe how each brand might approach your problem.
- Consider individuals outside the organization whose perspective might be both unique and beneficial. How might you engage their point of view? How might consumers and patients be used to help?
- Engage a diverse group of stakeholders to “sling mud” at a concept under development. Have them identify all the flaws, barriers, and pitfalls. Next, have them prioritize these issues and clearly articulate the five most significant barriers to overcome. Finally, ask them to propose four solutions for each of the top five problems.

Skills, Attributes, and Tools



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Featured Resource from
SHSMD ADVANCE™ | Skill Builder
[Leading Change \(Step 2\) – Create the Guiding Coalition](#)

4

Erase Boundaries of Business

Erase Boundaries of Business

Healthcare organizations must develop accessible, integrated systems of care that are convenient, affordable, and intuitive. Importantly, they do not need to own all the system components. These systems can be assembled through partnerships and virtually through technology.

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Consumers have long relied on the healthcare system to provide them with the entirety of their healthcare, from routine doctor visits and treatment of episodic illnesses to chronic disease management and end-of-life care. In the past, having a trusted physician, hospital, or health system gave patients a clear and immediate course of action for health concerns, and simultaneously created a loyal customer base. This is no longer entirely the case.

New competitors and disruptors in the market are taking advantage of increasing consumerism by co-opting parts of the care continuum. Retail health models, mobile and E-health options, and new provider-patient relationships are challenging the old system model. Progressive organizations are designing platforms that offer tailored solutions, allowing the consumer to select from an array of services to address their specific health needs in ways that are more immediate and appropriate for them, and that offer anytime/anywhere access. Most hospitals and health systems have a long way to go before such solutions are fully realized and integrated with existing systems of care delivery.

In today's entrepreneurial environment, competition emerges from anywhere. An inexperienced person with a great idea and some crowdfunding, for example, can develop a concept, bring it to market, and siphon off aspects of the business that healthcare organizations previously controlled. These types of startups are able to infiltrate the market and adapt quickly, because of their willingness to challenge the perceived status quo and because of their basis in technology, rather than a strong dependence on people. Enlightened consumers are open and willing to consider innovative products from nontraditional healthcare sources.

The challenge for healthcare organizations is to think more like these startup competitors while simultaneously finding ways to create end-to-end solutions that connect back to the healthcare enterprise. A truly integrated system of care can connect all aspects of a consumer's health and wellness portfolio in accessible and frictionless ways.



Present Focus	Future Focus
Acute, episodic interactions	Health and wellness journey; longitudinal relationships
Service areas	Micromarkets
Market share	Covered lives and targeted populations
Facility-based care and asset organization	Technology-enabled care; anytime, anywhere service offerings
Mission-driven community benefit	Culturally competent care; health equity
Healthcare as a monolithic system	Health as an ecosystem of customized offerings from a variety of entities to meet specific needs
Wholly owned system of care	System of care executed through partners
Patient-to-physician relationship	Consumer-centric relationship to the system and its many parts, including those outside the acute care setting
One-way communication, product or service	Omnichannel experience; consumer interaction and feedback

[SHSMD ADVANCE™](#) | Skill Builder contains a library of resources to help you become familiar with new concepts in the Future Focus, such as culturally competent care and micromarkets.

“The dilemma of disruptive products is they need disruptive channels. Am I taking a disruptive product and putting it through the traditional channel? If I’m not careful, I might do that.”

— Pete Celano
Director of Consumer Health Initiatives, MedStar

Take Action

1 + Develop Technology Investment Roadmaps

Healthcare organizations are challenged to deploy consumer-facing technology to compete with more agile technology startups. The best technology applications enable improved service models and seamlessly integrate into operational processes. Successful consumer-facing technology requires a keen understanding of user needs and behaviors. Healthcare strategists are not expected to be technology experts. However, they can help set strategic priorities, identify the areas where technology is a critical enabler, facilitate workflow changes, and develop a framework for technology integration and deployment, maximizing the value and impact of technology initiatives.

2 + Seek Partnership over Competition

The relationships and partnerships necessary to survive in healthcare's next evolution are more complex and nuanced than ever before. The notion of "co-opetition"—entities may be partners in one market and direct competitors in others—is central to this concept. Models such as affiliations, joint ventures, physician networks, and clinically integrated networks create access to key markets and a better bargaining position with payors, plus the opportunity to avoid expensive service duplication. While the alliances are formalized in specific markets, the individual health systems remain competitors in others. Healthcare strategists should understand these nuances, the short- and long-term implications, and how to structure novel partnerships to create a foundation for future success. As partnerships develop, the savvy strategist connects the best routes toward integration of cultures, workflows, and service design.

40

"In partnerships, sometimes your organization is the driver. There is also opportunity to grow as a key partner for others, even if we aren't the lead organization that is assembling the pieces."

— Lisa Crockett
Senior Director of Strategy and Planning,
Providence Health & Services

3 + Apply Different Planning Models

As the business model shifts from episodic care to population health, organizations must rethink traditional planning models and test more granular approaches that emulate other industries. Retail planners, for example, have developed sophisticated tools to identify specific intersections with the greatest volume and revenue potential by analyzing psychographics, social media check-ins, traffic flow, and consumer behavior. These tactics shift services to become more relevant to how today’s consumers live, work, and play. Through the creation of so-called “micromarkets” in healthcare, planners are focusing more specifically on the unique characteristics of neighborhoods to make strategic decisions. Organizations also need to think differently about what data feeds its business models. For example, drawing on purchasing and lifestyle data paints a more inclusive picture of a community’s overall health and provides visibility into actual choices. Healthcare strategists should understand new planning models, data sources, and their applications in the healthcare market.

4 + Align Social and Business Missions

Hospitals and health systems are often the largest employer in their community. They can use their influence, convening power, and assets to lead change and economic development. Business strategy and community benefits can no longer be considered as separate initiatives. Seventy percent of a person’s total health is influenced by nonmedical correlates of health,⁶ including access to education, employment, safe housing, healthy food, transportation, and safe neighborhoods.⁷ It is no longer enough to conduct a community needs assessment. New partnerships with agencies, social services, community groups, and competitors are essential to addressing these complex issues. Additionally, as hospitals take on additional capitation, there is direct business benefit to managing overall healthcare outcomes.

“There can be no quality without health equity. The social mission of healthcare is a way of doing business. This is a business strategy, a clinical strategy, and a community strategy.”

— Tomas Leon
Senior Vice President of Marketing and Strategy, Equality Health

Healthcare organizations can align all aspects of business activity, from employment to supply chain, to make a positive impact in the local community. By combining diversity and inclusiveness practices with community partnership strategies, healthcare providers can develop a workforce capable of delivering culturally competent care. Healthcare strategists should lead their organization to partner with local communities to co-design the healthcare delivery system that makes sense for that community and creates a sustainable business model.



Bridging Worlds in Action

Over the course of its 85-year history, **LEGO** evolved from a simple toy to an open-ended play experience. Lego is committed to developing a “system of play” with every product. The product line follows the progress of child development: Duplo for preschoolers, Lego sets for grade school, Technic for advanced vehicle models, and MINDSTORM for programmable robots. Licensing deals give Lego popular characters, including Star Wars, Lord of the Rings, Harry Potter, DC Comics, Marvel Comics, and Minecraft. The product appeal carries over into adulthood through nostalgia, collectable-themed sets, and a rapid prototyping tool for the “maker movement.” Lego has expanded beyond toys to include experiences that reinforce imaginative play, including an animated TV series, movies, retail stores, and video games.

5 + Design Ecosystems

Systems like the one developed by Lego are often called “ecosystems,” meaning a series of complex interconnections among different components. In general, ecosystems include: service model, physical environment, virtual environment, operations/process, user experience, technology enablers, on-ramps to service, accessories, and brand.⁸ As hospitals and health systems shift their focus toward the health and wellness journey of consumers, strategists should consider how to design ecosystems of products and services that include acute care service lines, health and wellness offerings, and services that extend beyond the traditional boundaries of business. This requires thinking about the interplay among the ecosystem’s parts, considering new constructs and interrelated components, as well as evaluating which are best owned or executed through a partner.

Thought Provoker

This Thought Provoker provides a way to “limber up” the mind and begin to apply the concepts in each implication. The **THINK** section of each Thought Provoker gives an example of successful execution that illustrates the thinking. Focus on the characteristics that make it successful and consider how these could be applied to the context of your organization and role. The **DO** section provides a series of directed activities that can be completed alone or in a group.



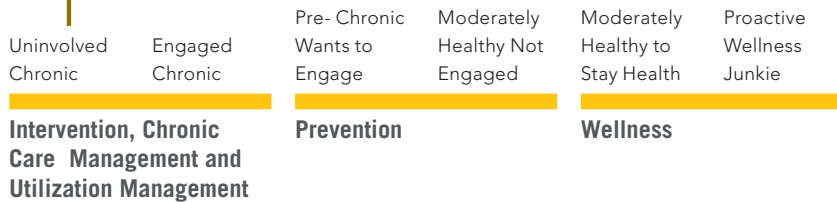
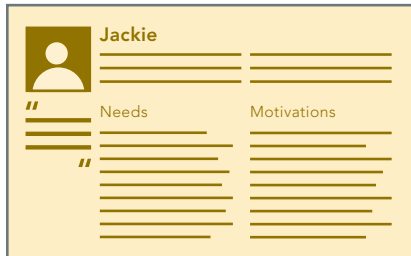
Think



The **AIRLINE INDUSTRY**, like the healthcare field, is highly regulated, capital intensive, and relies on the expertise of a diverse array of human resources. Many airlines need to extend coverage to smaller, non-hub markets, while reducing overall cost structure. Historically, major carriers were unable to serve shorter regional routes with reasonable cost efficiency. Southwest Airlines and others have built their business models around serving regional markets. These regional players provide a clear value proposition to consumers: lower fares, on-time flights, and extraordinary customer service. In response, the major airlines extended their reach through regional carriers that operate under the parent brand in a DBA (doing business as) arrangement.

These airlines also rely on a variety of partners for many critical aspects of the customer experience: travel agents and travel websites, government-operated security and air traffic control, use of airport facilities and amenities controlled by separate entities, and inflight food-service vendors. Airlines must strike a delicate balance between engaging the consumer directly to build loyalty and offering fares through third parties. There is no differentiation among these parts of the experience by the traveling consumer, whether it is governed by the airline, the regional carrier, or a separate entity. There is a tremendous amount of data integration that makes the booking process seamless, no matter how the reservation comes in. By offloading these aspects, the airlines are able to focus on the core of their business—transporting people from point A to point B, efficiently and safely.

Thought Provoker



Bridging Worlds in Action

SPECTRUM HEALTH'S business development team combined data synthesis, integrative thinking, human needs analysis, and storytelling to transform a collection of data into a plan to improve population health and reduce the cost of care. A large local corporation asked them to help evaluate their employee health data to determine what could be done to better manage costs and improve outcomes.

The team used health statuses (e.g., well, preventative, acute, pre-chronic, multi-chronic) or personas to categorize the data from "Linda," the uninvolved chronic, to "Jackie," the proactive wellness junkie. To better understand healthcare needs as well as lifestyle and preferences, the team added new data sources, such as purchase data from employee discount cards. With these personas, they were able to identify solutions to address common needs and health risks.

The outcome was a plan that helped the corporation better meet its employee healthcare needs while reducing costs.

Thought Provoker

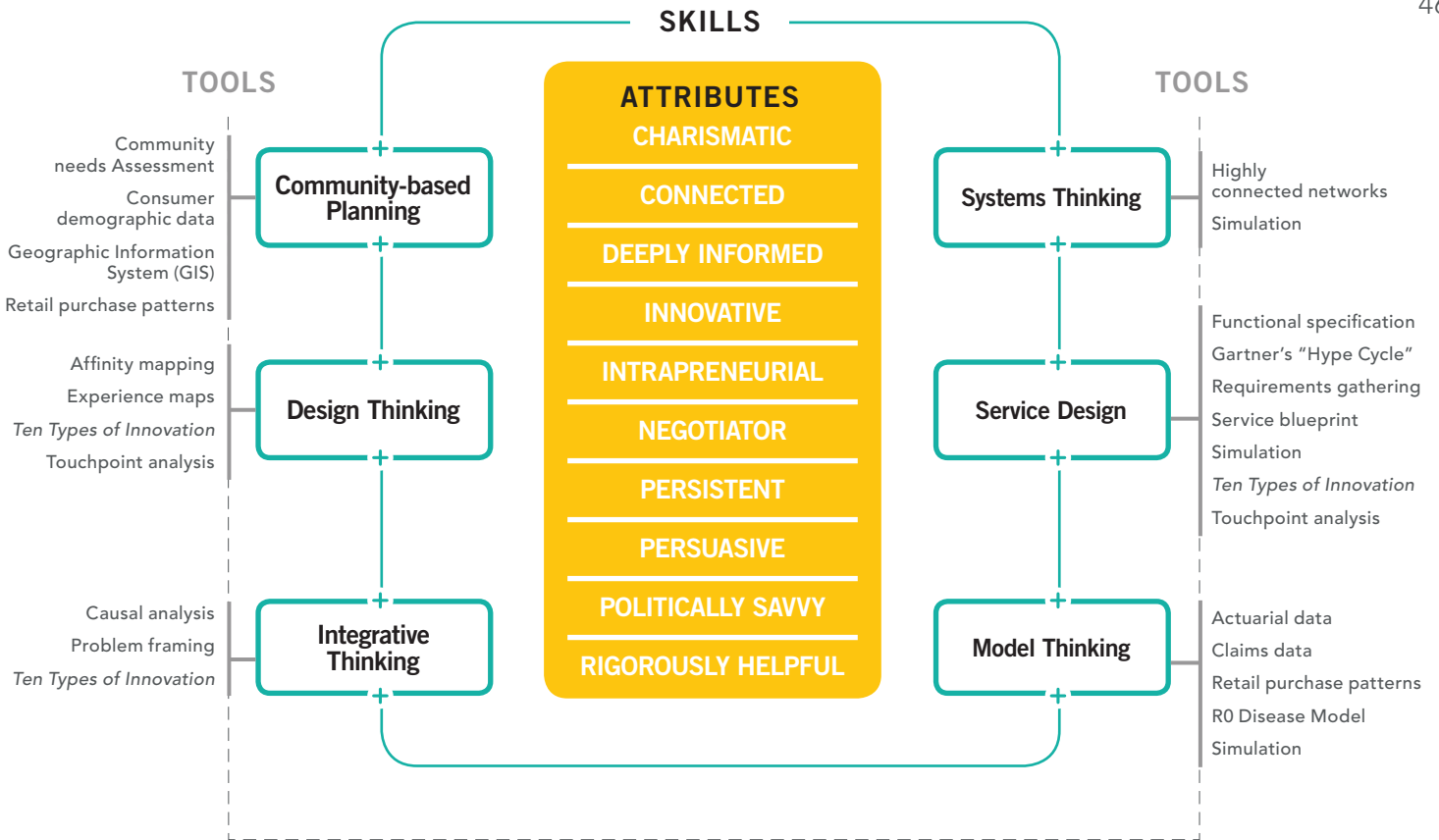


Traditionally, healthcare strategists have thought about the continuum of care in terms of facility-based solutions. As the boundaries of the system begin to fade, consider the implications of defining the continuum in terms of health status.



- Make a list of health statuses (e.g., well, preventative, acute, pre-chronic, multi-chronic, etc.). Under each health status, list potential data sources that would reveal something unique and insightful about consumers in that status. Focus on data sources that your organization may not have today. For example, insight into consumers' travel patterns, purchasing habits, and social media use could provide insight into how an organization might interact with people when they are healthy and not thinking about healthcare.
- Imagine the needs of people with each of the health statuses you identified. Under each health status, list at least five specific needs. This could be based on qualitative data, direct observation/interview, or your experience.
- For each need listed, identify one technology-based and one nontechnology-based service offering that would potentially satisfy the identified need. Push yourself to imagine new service offerings that don't exist in your organization today. If you get stuck, consider what solutions another industry— hospitality, retail, consumer packaged goods, or financial services— might design if you hired their experts as a consultant.
- Now, review your list of potential solutions. Identify the ones that must be offered, making note of those your organization has the capabilities to implement well. Which solutions could be delivered more effectively through partners?

Skills, Attributes, and Tools



Definitions for these skills, attributes, and tools can be found in the Glossary.



Align professional development with SHSMD ADVANCE™, a comprehensive framework designed to help strategy professionals assess their skill strengths and gaps, expand their knowledge, and develop new skills to lead healthcare’s transformation. Visit shsmd.org/ADVANCE for more information.

Featured Resource from
SHSMD ADVANCE™ | Skill Builder
 “The Ten Types of Innovation” by Larry Keeley

5

Generate Data-Driven Insights

Generate Data-Driven Insights

Data is only valuable if it can deliver insights and better decisions. Strategists must lead their organization to secure and build access to the best available data, ensure effective analyses, and communicate in a way that inspires decision making and action.

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“Data is the new oil,” says Kevin Plank, chief executive officer of Under Armour. Data is vital for making decisions across all industries. Many healthcare organizations lack the ability to manage—or synthesize—endless sources of data in efficient and effective ways.

Forecasts based solely on historical data are inadequate in a dynamic environment. Healthcare organizations need to understand how new service and payment models will affect operations, particularly relative to shifts in demand, changes in cost structure, and future revenue. In anticipation of these changes, strategists should make the shift to obtaining real-time data from diverse sources and building predictive models. Predictive modeling enables organizations to be ready for change.

People don’t make decisions about their health in a vacuum; what they do is affected by their environments, finances, lifestyle, and networks. To understand and anticipate consumer health behaviors, strategists must use multiple data sources that combine clinical, community, financial, and behavioral data. These sources can

include social media activity, geo-located check-ins, or purchasing data, and allow analysts to make simple correlations that reveal health behavior, interests, and decision-making processes. The results translate that data into insights about the present and future needs of individual consumers as well as local populations.



Present Focus	Future Focus
Historical data	Real-time data; forward-looking models
Simple data sets	Integrating multiple data sets, including publicly available data
Episodic relationships	Longitudinal relationships; Customer Relationship Management (CRM)
Referral tracking	Physician Relationship Management (PRM); Employee Relationship Management (ERM); Customer Relationship Management (CRM)
Databases	Predictive models; artificial intelligence
Reports	Real-time dashboards
Static charts and graphs	Dynamic data visualization
Self-reported data	Automated preference and behavioral data
Individual patient	Individual customers and their social connections

[SHSMD ADVANCE™](#) | Skill Builder contains a library of resources to help you become familiar with new concepts in the Future Focus, such as predictive models, data visualization, and dashboards.

“Knowing your customer might just be the ‘secret sauce.’ As long as we know our customers, we can devise a strategy.”

— James Skogsbergh
 President, Advocate Health Care
 Past Chairman, American Hospital Association Board of Trustees

Take Action

1 + Analyze Data Effectively

Today's business analytic models largely draw on descriptive analytics that use historical data to generate summary-based insights. The more something changes, the less valuable these insights are. Organizations must anticipate what could happen next. Predictive analytics does just that by using statistics, complex modeling, data mining, and artificial intelligence to make reasonable forecasts, based on informed assumptions about the future. Predictive models evaluate trends, forecast outcomes, and anticipate future needs.

2 + Visualize Data for Understanding

The human brain is more effective at processing visual information than numeric information. Engaging data visualizations allow leaders to quickly identify areas that need attention and to build consensus around direction. Northwell Health has developed interactive "accountable care analytics" dashboards to provide a standard interface for key metrics. The highly visual dashboards present summary data for risk stratification, patient engagement, care coordination, and performance measurement. Users can then drill into specific areas of interest for additional detail. This creates a unifying effect across the organization, where leaders of every facility and division are looking at the same data in the same way.

"Many healthcare organizations are still trying to grapple with how to really look at all of these different data sets and bring it together in a meaningful way. A good strategist is going to be able to pull out compelling insights from those disparate data sets. They are able to answer the question and focus on the issues at hand."

— Carla Bryant
Executive Vice President,
Corrigan Consulting

3 + Tell Data-Driven Stories

Stanford University professor Jennifer Aaker notes, "When data and stories are used together, they resonate with audiences on both an emotional and intellectual level."⁹ Individuals and organizations frequently struggle with information overload. Visualization has the power to turn any number of data points into single images or groups of images. Turning data into stories makes them more memorable and actionable. These approaches cut through the noise and help people focus. Recent research shows how humans rely on emotions for a

first judgment, and then how they use logic to reinforce or justify this initial impression. Images and storytelling tie into this hardwired response much more easily than raw data or lists of statistics. What was the last thing that profoundly moved you to action? The odds are good that it was a story, backed by data.

4 + Source Nontraditional Data

Healthcare organizations have a wealth of demographic and medical information about patients, but know very little about their motivations. As healthcare transitions from episodic care to population health, strategists must understand consumer behavior and decision making. Many healthcare organizations rely on consumer quantitative image and preference studies, but these methods do little to truly understand the consumer. The retail industry has developed sophisticated methods to capture consumer interactions across channels by combining tracking data from digital platforms with external spending data. Healthcare organizations can expand further by incorporating social media, remote monitoring, and activity tracking data. By having a clear picture of what consumers do in all facets of their life, strategists can draw inferences that will anticipate and influence future behavior.

“Our job as a strategist is to curate the data to tell the story. Just because we have all this data and we’re so excited about it, we don’t necessarily have to share it. We have to help people focus on what is important.”

*— Jeffrey Kraut
Executive Vice President of Strategy and Analytics, Northwell Health*

Bridging Worlds in Action

SOCIAL MEDIA can be used to forecast or “now-cast” (provide information about current happenings) a growing range of phenomena, including adverse reactions to medications, stock prices, election results, movie box office results, civil unrest, and natural disasters. As these models improve, we can expect more investment in developing increasingly sophisticated models that provide even deeper insights.

Thought Provoker

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Think



STITCH FIX is a virtual service that provides personalized fashion recommendations using preference data, algorithms, and a human connection. All aspects of its operations—from managing inventory to employee seating arrangements to making fashion recommendations—have been built on analytics. The core philosophy combines machine analytics with human judgment. New customers complete a baseline profile, which includes a visual survey about style, color, fit, and budget preferences. When a customer requests a fashion “fix”—a request for fashion help—proprietary algorithms make a preliminary recommendation of potential outfits. Each item is ranked by the likelihood the customer will buy it. Much of the analysis relies on visual

analysis to identify and recommend similar products. The request is then passed on to a personal stylist, who considers customer preferences and past requests, including what clothing was purchased or rejected. Additionally, the stylist can consult internal fashion collections, curated by other personal stylists, to find recommendations suiting the customer’s taste. The personal stylist finalizes the selection of five articles of clothing to send to the customer. Customers have the option of buying or rejecting the clothing selections, helping to further refine the algorithm and the personal stylist’s future recommendations. Stich Fix has been profitable since 2015.

Thought Provoker

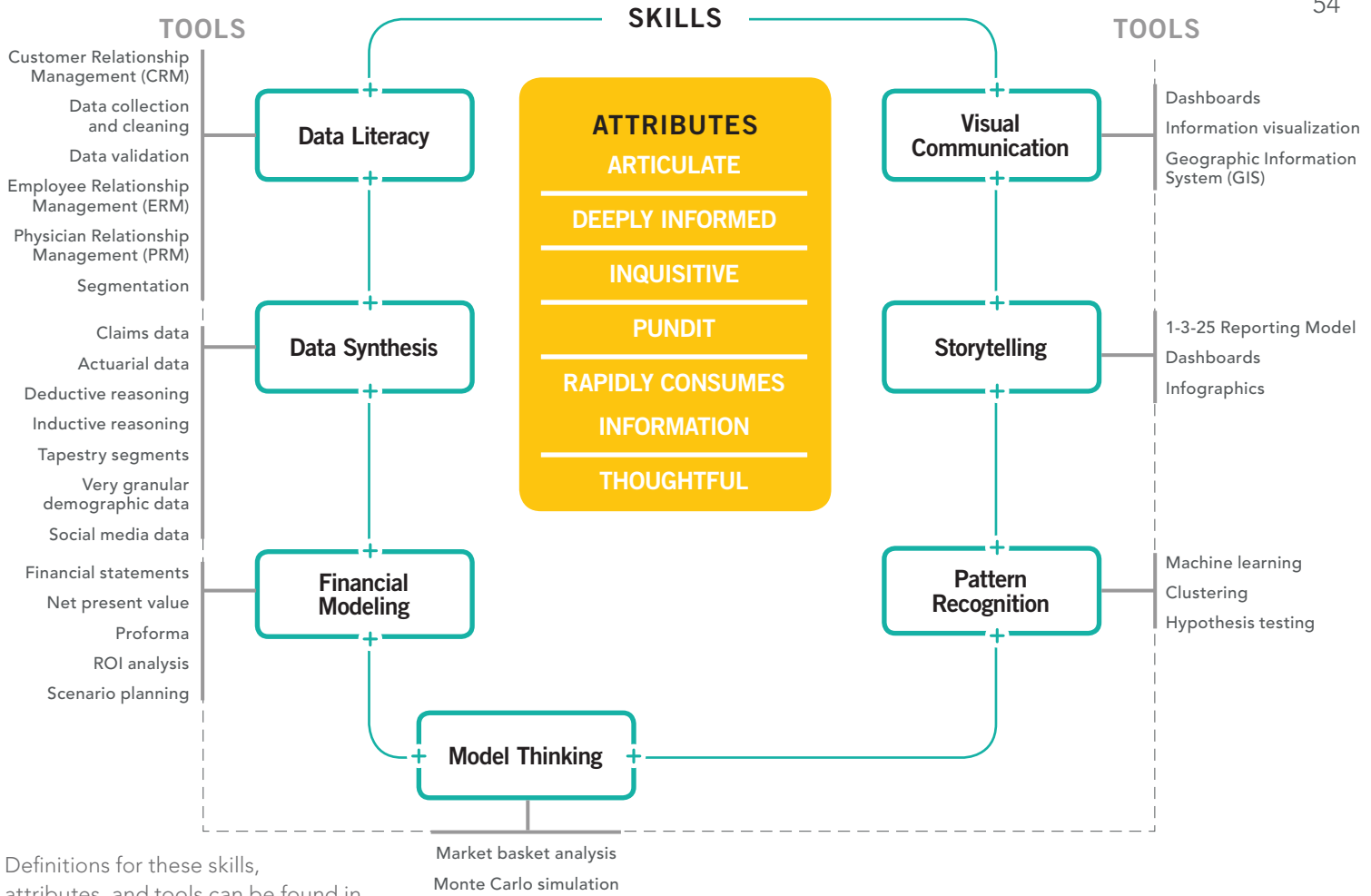


As you look at data about your market, what stories emerge? What characters, conflicts, and images come to mind as you consider specific data points?



- Think about the current state of data analysis, insight, and communication in your organization. Make a list of barriers that prevent the use of data for informed decision making.
- Make a list of touchpoints where customers interact with your organization. Identify as many data collection opportunities as you can for each touchpoint.
- Highlight the data points that are not currently captured or used for decision making.
- Make a list of organizations or brands you personally interact with every week. Identify any interactions that influence health or could be useful in understanding consumer behavior.
- List five ways these interactions and the resulting data could be used to create stronger consumer relationships.

Skills, Attributes, and Tools



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Featured Resource from SHSMD ADVANCE™ | Skill Builder

Johns Hopkins’ nine-course introduction to data science, [“Launch Your Career in Data Science”](#)

Skills and Attributes of the Healthcare Strategist

Bridging Worlds provides an opportunity for healthcare strategists to add increasingly greater value to their organizations, to broaden the impact of their roles, and to shape the future of the healthcare field. Superior performance calls for the expansion or development of characteristics in the form of skills and attributes, otherwise known as competencies.

The skills and attributes offered in *Bridging Worlds* are relevant to both aspiring new strategists and experienced or senior level strategists. They present an opportunity to delineate learning focus and identify development opportunities for individuals and teams.

- **Skills** reflect areas of technical and specialized expertise, competencies, abilities, or aptitudes.
- **Attributes** refer to behavioral characteristics, qualities, or traits.

Excluded from the skills and attributes are knowledge areas, such as business management, healthcare IT, and financial management, since these represent foundational learnings for most healthcare professionals.

The behavioral attributes identified through *Bridging Worlds* encompass key concepts common

to healthcare leaders, such as adaptability, collaborative leadership, open communication, conflict management, continuous learning, discernment / judgment, influence, interpersonal savvy, and innovation.

“If a person has all of the skills and foundation knowledge, but is still struggling, not advancing, etc., it is a strong indication that the person’s challenges are more likely behavioral.”

— Richard Metheny
Leadership Solutions Practice Leader,
Witt/Kieffer

In 2014, the first edition of *Bridging Worlds* included its first set of skills and attributes, which have been assessed by more than 300 strategists using SHSMD ADVANCE™. Aggregate data findings have provided insights to less critical and redundant skills, which have been modified or removed in this edition. Other skills were added or modified to reflect current thinking identified through leadership interviews and recent expert input. Presented in the diagram that follows is a reflection of the most current thought leadership about strategist skills and attributes, all of which have been updated in the SHSMD ADVANCE™ platform at shsmd.org/ADVANCE.

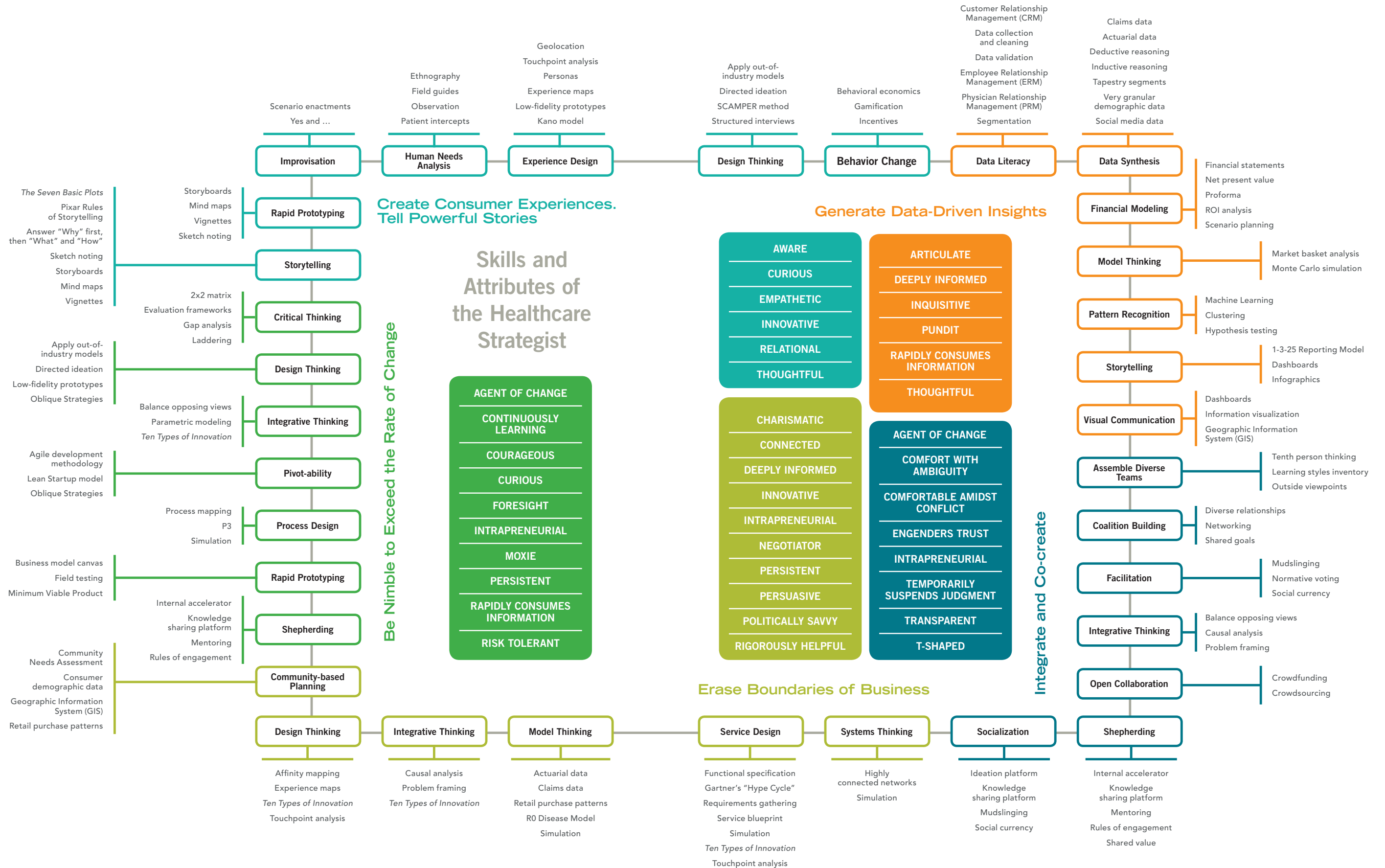
The specific application of the *Bridging Worlds* skills and attributes will vary, based on the type of organization and the individuals’ roles within it. In some instances, organizations may elect to hire for new skills and experiences not currently represented in-house. Others may elect to develop existing leaders, using emerging skills and tools of strategy as a guide to map professional growth. Some will seek out generalists—professionals who are adept in wearing multiple hats simultaneously. Others might prefer multispecialty positions staffed by employees with deep subject matter expertise in two or more specific disciplines (e.g., analytic modeling, strategy formation, design, and social media). Recognizing the scale of organizational types and sizes, SHSMD intentionally makes no recommendations on a preferred approach. Rather, the society suggests paying more attention to the implications as well as the skills and tools that healthcare strategists will need.

“We’ve used Bridging Worlds as a team read where we’ve asked our strategy team to read it, digest it, and then do some self-reflection. We actually use it for career planning for all of our team members.”

— Caryn Esten
Vice President of Strategic Planning and Performance Measurement,
Froedtert Health

Examples of tools used to successfully perform skills are also provided for consideration and further learning.

The diagram that follows presents the skills, attributes, and tools from all five implications in a single view. Use this diagram as a roadmap for professional development by identifying your areas of interest as well as any gaps in your current skills. Use SHSMD ADVANCE™ to assess and identify skill levels among individuals and teams, then build those skills using SHSMD’s online resource library containing hundreds of articles, books, courses, and tools to help you develop your abilities.



SHSMD ADVANCE™ Roadmap

Bridging Worlds is a valuable resource for every career stage and leadership role in the organization. It is intended to provoke thought, inspire discussion, and drive change. This document is the starting point for a five-step process identified by SHSMD to improve individual and team strategic performance.



Bridging Worlds is a living, ever-expanding document. Look online for additional case studies, CEO profiles, blog posts, and resources. Visit shsmid.org/Advance to continue your career development journey. To share your story of success, e-mail SHSMD at info@shsmid.org.



“Bridging Worlds is a great tool for senior strategists to be able to look at themselves and their teams, and to better understand where they need to focus on either developing these skills within their team or leveraging them across the organization.”

— Carla Bryant
Executive Vice President,
Corrigan Consulting



University of Iowa Hospitals and Clinics

Kathy Dean joined the University of Iowa Hospitals and Clinics as the chief marketing and communications officer. For Dean, SHSMD ADVANCE™ wasn't just a tool to get to know her team, but a way to hear everybody's thoughts about where they desired to go professionally. Dean was familiar with *Bridging Worlds* as an outline for future competencies, as well as a tool to raise awareness and vision. Everyone in the department took the SHSMD ADVANCE™ tool, and Dean reviewed a report of the aggregated results for the whole team, looking at the collective strengths and gaps. For the team, data science was the biggest gap. They knew that

they wanted to quantify what they were doing, use data to better target their audiences—both internally and externally—and gauge success through using data. This sparked different discussions about what the team needed to learn and how to learn it. Dean invited their CRM provider to provide a series of onsite training to all staff, based on their individual needs. Some staff needed additional training on specialized topics and they identified sources for that training, as well. One of the department's graphic designers, for example, asked for and received more training on creating infographics.

“I think Bridging Worlds is great required reading for everyone who is in leadership.”

— Linda McCracken
Senior Principal, Accenture
Faculty, Harvard University

Thomas Jefferson University Hospital 

Anyone leading a team of strategy professionals is challenged as never before to develop and activate integrated staffing models that deliver proven results and drive innovation with agility. Underlying these staffing models are position descriptions with associated competencies that accurately frame what is required of roles at various levels of seniority. At Thomas Jefferson University Hospital, Heather Prasad is using *Bridging Worlds* as a reference to build a competency and staff development model for her strategy team. She used a step-wise process:

- Review team job descriptions.
- Use skills and attributes from *Bridging Worlds* to identify competencies for each role.
- Map competencies to job levels.
- Create action plans for development and coaching with each team member that include SMART goals (defined as specific, measurable, achievable, realistic, and time-bound).

- Integrate professional development plans into existing performance management architecture. In Prasad’s case, she is melding the health system’s existing leadership development program with *Bridging Worlds* attributes.

Additionally, Prasad is using the competencies for behavior-guiding interviewing when adding a member to her team. The full article [“Essential Skills for Successful Strategists”](#) is available online.

Competency Model

Transforms	Engages	Executes
Demonstrates Adaptability	Communicates Effectively	Leads Change
Innovative Thinking	Builds Trust	Applies Business Acumen
Strategic Orientation	Motivates and Influences	Analyzes Needs and Proposes Solutions
	Partners and Networks	Manages Projects
	Develops People	

Glossary

Skills

ASSEMBLE DIVERSE TEAMS: Engage individuals with diverse skills, backgrounds, and viewpoints to build highly functional teams. (Example: Select participants according to world view and experience rather than job title.)

BEHAVIORAL RESEARCH: Understand principles of human behavior; observe and analyze behavior to understand and influence decision making. (Example: Use nudge-type interventions for better outcomes.)

COALITION BUILDING: Use shared interest and common ground to build alliances among individuals with conflicting viewpoints, leading to productive action. (Example: Identify common objectives to align strategists, physicians, and IT professionals in creating a clinical technology roadmap.)

COMMUNITY-BASED PLANNING: Analyze and plan care delivery to meet community health needs; consider socioeconomic determinants; understand how people live, work, and play. (Example: Identify potential care sites through analysis of traffic patterns, demographic data, and proximity to other amenities.)

CRITICAL THINKING: Demonstrate skill for evaluating, clarifying, prioritizing, and synthesizing information. (Example: Ask questions to assess the accuracy, relevance, and completeness of data.)

DATA LITERACY: Understand the principles of statistics, analytics, computer science, and predictive modeling to analyze and address complex problems and issues. (Example: Direct the analysis of future outcomes using predictive modeling.)

DATA SYNTHESIS: Bring together data from single or multiple disparate data sets into an overall conclusion and judgment, often around complex problems. (Example: Connect consumer spending data with patient volumes to inform planning.)

DESIGN THINKING: Solve complex problems using an approach that understands human needs, creativity, and rapid iteration. (Example: Take time to properly frame the problem to be solved; uncover the needs of end users to generate ideas for improvement.)

FACILITATION: Engage a group of people to understand their common objectives and help them to plan how to achieve these objectives; remain “neutral” and supportive in the discussion. (Example: Develop structured strategic activities and lead a group through them.)

FINANCIAL MODELING: Build a mathematical model designed to represent a simplified version of the performance of a business, project, or another investment. (Example: Assess the business impact of various scenarios within the overall strategic plan.)

HUMAN NEEDS ANALYSIS: Explore and analyze underlying human values, beliefs, and motivations to gain insights into a problem and develop solutions. (Example: Observe the flow of patients and family members at registration to identify a sequence of events and pain points.)

IMPROVISATION: Work outside of your comfort zone; spontaneously play out an idea to problem solve and collaborate. (Example: Act out what a prospective patient sees and thinks when visiting the health system’s website.)

INTEGRATIVE THINKING: Make meaningful connections between unrelated elements. (Example: Connect the health needs of a population to appropriate care services; forecast the impact on operational resources and financial implications.)

MODEL THINKING: Develop simplified constructs to solve complex problems; use multiple representations and recognize the strengths and weaknesses of each to better inform decision making. (Example: Create simulations of relocating services to calculate impact.)

OPEN COLLABORATION: Create new products or services by engaging a large number of contributors and making the results readily accessible to all. (Example: Issue an internal challenge, supplying data and success criteria, to solve a persistent problem.)

PATTERN RECOGNITION: Use inference to look within and beyond the numbers to detect underlying patterns and trends. (Example: Estimate future population health needs based on demographic and other data trends.)

PIVOT-ABILITY: Adjust strategy without changing the vision. (Example: Create or adapt a product offering based on customer needs and emerging trends.)

PROCESS DESIGN: Create workflows, roles, and tools to intentionally and efficiently deliver a product or service. (Example: Evaluate and improve the discharge process.)

RAPID PROTOTYPING: Build hypotheses and working models to test ideas. (Example: Create a paper mock-up to demonstrate the sequence of interactions of a mobile app.)

SERVICE DESIGN: Visualize human reactions and responses to an interaction between a person and product or service; create value by improving the interaction between customers and organizations by using a multidisciplinary approach. (Example: Incorporate process improvement, patient experience, branding, and technology into the design of a new clinic.)

SHEPHERDING: Lead through gentle and persistent redirection toward the objective. (Example: Allow the project team adequate exploration time; discuss alternatives before selecting the way forward.)

SOCIALIZATION: Deliberately use informal communication with influential stakeholders to gauge their level of acceptance and support of new ideas. (Example: Discuss strategic initiatives with key leaders well ahead of formal meetings and decisions.)

STORYTELLING: Capture people's imagination and interest by creating a narrative that appeals to the heart (inspiring vision), mind (credible evidence), and how-to (personal evidence). (Example: Combine data insights with consumer observation to help a team envision the positive impact of a new product.)

SYSTEMS THINKING: Understand how components interrelate and create a larger whole. (Example: Analyze the related components within a highly distributed ambulatory network; identify how social determinants of health affect population health needs in your community.)

VISUAL COMMUNICATION: Communicate information in visual form for optimal comprehension and comparison; translate numerical and qualitative information into visual form for rapid comprehension and comparison. (Example: Use infographics and images to communicate quantitative data instead of charts and tables.)

Attributes

AGENT OF CHANGE: Advocate for positive change; understand how to effectively persuade and implement new solutions or improvements.

ARTICULATE: Create and convey a clear vision; express ideas fluently and coherently.

AWARE: Have realization, perception, or knowledge of conditions or problems that exist across the organization and culture.

CHARISMATIC: Connect to others on an emotional level; attract and motivate others to achieve.

COMFORT WITH AMBIGUITY: Recognize that developing new concepts involves uncertainty; be able to push forward with incomplete information.

COMFORTABLE AMIDST CONFLICT: Accept that some conflict is healthy and productive; consider different viewpoints, especially those that differ from your own; manage conflict effectively toward positive dialogue and outcomes.

CONNECTED: Cultivate an active network of relationships inside and outside of the organization; create linkages based on interest and common objectives; develop key partnerships.

CONTINUOUSLY LEARNING: Grow and change continuously across your career; acquire new skills proactively to advance your career expertise.

COURAGEOUS: Challenge the status quo; stand up and advocate for an idea or position even in the face of uncertainty and opposition.

CURIOUS: Open to exploration, always learning; ask questions, seek opinions, listen, and pursue information to become more informed; seek out and learn from new experiences.

DEEPLY INFORMED: Expand intellectual depth as a key to creativity and adaptability; understand knowledge is a pathway to finding insights in disparate data.

EMPATHETIC: Identify and understand other's situations, feelings, and motives; recognize other's concerns and needs.

ENGENDERS TRUST: Interact with others in a way that is authentic; instill confidence in one's intentions and those of the organization.

FORESIGHT: Anticipate and respond to potential consequences of internal and external events, trends, or patterns; avoid unintended consequences.

INNOVATIVE: Generate new and unique ideas; make connections among unrelated concepts; generate new thinking.

INQUISITIVE: Intellectually curious and willing to ask questions to further understanding.

INTRAPRENEURIAL: Demonstrate innovation and risk taking; observe the market and champion breakthrough opportunities within an organization; pursue new business opportunities for the organization.

METHODICAL: Approach an issue or question systematically.

MOXIE: Show charismatic boldness, assertiveness, vigor, and verve; aware of when to clarify perceptions with facts.

NEGOTIATOR: Balance multiple interests to reach a mutually satisfactory agreement.

PERSISTENT: Drive to follow through; focus on the end goal; avoid being discouraged by setbacks or competing interests along the way.

PERSUASIVE: Connect with stakeholders to activate and influence them to achieve mutually beneficial outcomes; have a knack for motivating people.

POLITICALLY SAVVY: Maneuver through complex political situations effectively and quietly; sensitive to individual and organizational motivations.

PUNDIT: Established expert; able to communicate data and recommendations effectively; show willingness to be frequently called on to give opinions to the organization.

RAPIDLY CONSUMES INFORMATION: Find, consume, and process information to become highly knowledgeable and functional in a short timeframe when faced with a new challenge.

RELATIONAL: Establish and maintain effective relationships with others through formal and informal communication inside and outside the organization; actively listen, engage, and seek to understand varied interests and perspectives; connect relevant interests to develop partnerships.

RIGOROUSLY HELPFUL: Foster a reputation for sharing knowledge; resourceful and proactively assist others to solve problems; connect others with available resources.

RISK TOLERANT: Recognize that developing new ideas involves uncertainty; analyze and acknowledge risk, mitigate it, and continue to move forward.

TEMPORARILY SUSPENDS JUDGMENT: Aware of own biases; allow concepts to develop; seek to understand before passing judgment.

THOUGHTFUL: Reflective and intentional, incorporating relevant input and data for the best possible outcome.

TRANSPARENT: Communicate with candor, consistency, honesty, and authenticity; behave in a way that is predictable; inclusive.

T-SHAPED: A generalist-specialist hybrid; broad, “horizontal” knowledge across multiple disciplines and deep “vertical” expertise in at least one subject area.

Tools

1-3-25 REPORTING MODEL: a user-oriented report format that presents the recommendations in a one-page handout and three-page executive summary; the recommendations are supported by additional details in a 25-page report and appendix. (See <http://stephanieevergreen.com/the-1-3-25-reporting-model>.)

2X2 MATRIX: a simple, visual tool to analyze elements by scoring them from low to high in two dimensions in order to draw inferences and aid in decision making.

ACCELERATOR: a selective program for entrepreneurs that provides seed investment and intensive mentoring for a fixed period of time. The program culminates with a demo-day pitch to potential investors. (See entrepreneur.com/topic/accelerators.)

ACTUARIAL DATA: demographic data used by insurance companies to assess risk.

AGILE SOFTWARE DEVELOPMENT METHODOLOGY: an approach to software development that focuses on collaboration, rapid iteration, and adaptive planning. (See the Manifesto for Agile Software Development, agilemanifesto.org.)

ANSWER “WHY” FIRST, THEN “WHAT” AND “HOW”: (See Simon Sinek’s TED Talk How great leaders inspire action, ted.com/talks/simon_sinek_how_great_leaders_inspire_action.)

BAKE OFF: a process of demonstrating, comparing, and evaluating two or more solutions to select the preferred option.

BUILD-MEASURE-LEARN LOOP: a process advocated in The Lean Startup by Eric Ries to accelerate product development by actively seeking customer feedback. (See the Lean Startup Process Diagram, theleanstartup.com/principles.)

BUSINESS CASE: a justification for allocating resources to a project that communicates the business need and expected benefits.

BUSINESS MODEL CANVAS: a visual template proposed by Alexander Osterwalder that breaks down business models into nine components: key partners, key activities, key resources, cost structure, value propositions, client relationships, customer segments, channels, and revenue streams. (See businessmodelgeneration.com/canvas/bmc.)

BUSINESS MODEL GENERATION: a book and website by Alexander Osterwalder that outlines common business model patterns and provides guidance on developing new business models. (See businessmodelgeneration.com.)

CLOUD COMPUTING: an approach to deliver computing as an on-demand service rather than managing discrete hardware, software, and network components.

CRM (CUSTOMER RELATIONSHIP MANAGEMENT): a strategy, system, and analytic tool for developing and maintaining a relationship with customers.

CROWDFUNDING: a fundraising technique that pools the money of many individuals to achieve a goal. Supporters may receive product or service benefit in exchange for their financial support, but do not have an equity stake.

CROWDSOURCING: the process of soliciting input from a large group of people, typically through an online presence.

D3 (DATA-DRIVEN DOCUMENTS): an open source JavaScript library for creating data visualizations for the web. (See d3js.org.)

DEDUCTIVE REASONING: a set of logical rules for linking premise statements to conclusions; if the premises are true, the conclusions must be true.

DIRECTED IDEATION: a form of idea generation that uses facilitated activities to guide participants toward a common purpose.

ERM (EMPLOYER RELATIONSHIP MANAGEMENT): a strategy, system, and analytic tool for maintaining relationships with employers.

ETHNOGRAPHY: a social science that examines people and culture through observational research.

EXPERIENCE MAPS: a timeline of interactions between a person and a product or service in the course of executing a task. Experience maps are used to identify gaps and pain points in order to create a better customer experience. (See the Adaptive Path's Guide to Journey Mapping, mappingexperiences.com.)

FIELD GUIDE: a short document used by ethnographic researchers to inform and structure field observations.

FUNCTIONAL SPECIFICATION: documentation used in software development that describes how a system behaves, including inputs, processing, and outputs.

GAMIFICATION: the use of competition, status, and game elements outside the context of games, especially to engage and motivate users.

GAP ANALYSIS: a tool for critical thinking that compares an actual state to an ideal state.

GEOLOCATION: technology to determine the real-world geographic position of a person or object.

GIS (GEOGRAPHIC INFORMATION SYSTEM): computer software to capture, store, analyze, and visualize geographical data, including spatial relationships, patterns, and trends.

HADOOP: a scalable open-source framework for the distributed processing of large data sets. (See hadoop.apache.org.)

HYPE CYCLE: a visual chart used by the IT research firm Gartner to evaluate the maturity and adoption of emerging technologies. The Hype Cycle consists of a technology trigger, peak of inflated expectations, trough of disillusionment, slope of enlightenment, and plateau of productivity. (See gartner.com/technology/research/methodologies/hype-cycle.jsp.)

IDEATION PLATFORM: a web application that combines elements of crowdsourcing and community to generate ideas.

INDUCTIVE REASONING: a form of reasoning that uses premises to build support for a conclusion; the conclusion is probable, but not certain.

JAVASCRIPT: a programming language commonly used in web browsers for interactivity, document manipulation, and communication.

KANO MODEL: a theory and diagram developed by Noriaki Kano to explain the relationship between product features and customer satisfaction. (See Leveraging the Kano Model for Optimal Results, uxmag.com/articles/leveraging-the-kano-model-for-optimal-results.)

LADDERING: a technique for making concepts more specific or more general in order to understand relationships and comparisons; also known as abstract laddering.

LEAN STARTUP MODEL: a set of principles for creating successful new businesses articulated by Eric Ries in the book *The Lean Startup*. The book advocates using a minimum viable product (MVP) to test and refine product offerings with real-world customers in order to have a higher certainty of success.

LOW FIDELITY PROTOTYPES: a method of refinement that uses the simplest, least expensive representation of a concept to solicit user feedback; effort is invested into improving the concept rather than the prototype.

MARKET BASKET ANALYSIS: a data analysis technique for understanding buyer behavior by examining the relationship between products purchased together.

MICROGRANT: a microfinance practice of providing minimal funding to start a new income-generating project.

MICRO MARKET: a small pocket of potential demand within a zip code.

MIND MAP: a visual method for capturing discrete information elements and the relationship between those elements.

MVP (MINIMUM VIABLE PRODUCT): a “version of a new product which allows a team to collect the maximum amount of validated learning about customers with the least effort,” according to Eric Ries.¹⁰

MONTE CARLO SIMULATION: a simulation technique that uses iterative evaluation of random inputs and probability to evaluate possible outcomes.

MUDSLINGING: a socialization technique for gaining support by allowing participants to identify potential flaws and input for resolving those flaws.

NORMATIVE VOTING: a process for building consensus by allowing participants to use a limited number of votes to select the best ideas.

OBLIQUE STRATEGIES: a card deck produced by Brian Eno and Peter Schmidt that contains over 100 aphorisms intended to break through creative blockages by encouraging lateral thinking.

OPEN SOURCE: a software development model that makes the application source code available at no cost, with permission to modify the source code and redistribute under the same license terms.

PARAMETRIC MODELING: a discipline of architecture, engineering, and product design that uses adjustable input variables and computational algorithms to produce design concepts.

PATIENT INTERCEPTS: a research method that employs brief surveys of patients within the clinical environment.

PERSONA: a composite character created to represent the motivations, goals, and behaviors of a user segment.

PERSONALIZATION: aligning service offerings and messaging to the needs and context of an individual consumer, rather than addressing the consumer as a member of a larger group.

PERTINENT NEGATIVE: a term to describe medical symptoms that are conspicuously absent, which help guide diagnosis; absent signs or indicators in a situation can help identify problems and potential solutions.

PIVOT: a “structured course correction designed to test a new fundamental hypothesis about the product, strategy, and engine of growth,” according to Eric Ries.¹¹

PIXAR’S RULES OF STORYTELLING: a list of 22 rules tweeted by former Pixar employee Emma Coats and republished by Fast Company. (See [fastcocreate.com/3018559/pixars-22-rules-of-storytelling-visualized](https://www.fastcocreate.com/3018559/pixars-22-rules-of-storytelling-visualized).)

PRM (PHYSICIAN RELATIONSHIP MANAGEMENT): a strategy, system, and analytic tool for maintaining a relationship with physicians.

PROCESS MAPPING: a methodology for documenting the inputs, sequence of steps, actors, technologies, and outputs of a process for analysis and improvement.

QLIK: a suite of applications for analytics, business intelligence, and data visualization. (See qlik.com.)

R0 DISEASE MODEL: a numerical model for the rate of infection in epidemiology; this model has wide applications in marketing, such as social media influence and net promoter score; usually pronounced “R nought.”

RULES OF ENGAGEMENT: a leadership directive that defines what is on the table for discussion and what is off limits.

SCAMPER METHOD: Bob Eberle developed a list of seven types of thinking that help generate creative ideas. These types are substitute, combine, adapt, modify, purpose, eliminate, and reverse.

SCENARIO ENACTMENTS: a method for testing processes and service models by having participants act out loosely scripted interactions.

SEGMENTATION: using demographic data to identify subsets of consumers within a market; also known as market segmentation.

SKETCH NOTING: a visual form of note taking that combines graphical typography and illustration to improve comprehension and retention. (See rohdesign.com/handbook.)

SOCIAL CURRENCY: the sense of status and trustworthiness produced by social network participation, content creation, and user feedback.

SOCIAL GRAPH: a representation of a person’s social network relationships and their level of influence.

STORYBOARDING: a process for organizing information and refining content by creating a sequence of simple illustrations.

STRUCTURED INTERVIEWS: a research method aimed at presenting each interview subject with the same questions to allow responses to be compared and evaluated.

TABLEAU: a suite of data visualization and business intelligence applications created by Tableau Software. (See tableausoftware.com.)

TAPESTRY SEGMENTS: a demographic data product from ESRI that shows changes in population growth, diversity, households, aging, and income as interactive map layers. (See esri.com/data/esri_data/tapestry.)

TEN TYPES OF INNOVATION: a framework for understanding innovation created by Adam Doblin. Doblin suggests that companies who integrate multiple types of innovation earn higher returns and are more difficult for competitors to imitate. (See doblin.com/tentypes.)

THE SEVEN BASIC PLOTS: a book by Christopher Booker that deconstructs storytelling into seven basic plots: overcoming the monster, rags to riches, the quest, voyage and return, comedy, tragedy, and rebirth.

TOUCHPOINT: an interaction between a customer or user and a product, service, or brand.

TOUCHPOINT ANALYSIS: a method for improving customer experience by evaluating the interactions between an organization and its customers; a component of experience mapping.

VIGNETTE: a brief scene or single interaction.

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To share your “Bridging Worlds in Action” example, please write shsmd@aha.org.

Endnotes

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