From Many into One at Cedars-Sinai: Building a Cohesive Culture and Departmental Identity



Mark Vrahas, MD, MHCDS'17

Levin/Gordon Distinguished Chair in Orthopaedics In honor of Myles Cohen Professor and Chair, Department of Orthopaedics



Paul Argenti

Professor of Corporate Communication, Tuck School of Business





- Introduction to webinar and Dr. Mark Vrahas: PAA
- Quick review of One Company Strategy: PAA
- Overview of "The Problem": MV
- Cedars-Sinai Case Discussion: MV
- Using Corporate Communication to execute strategy: PAA

Definition of One-Company

"Those companies that keep their employees central to their business strategy enhance their position by creating a One-Company culture. A One-Company culture involves deep employee engagement, an entrepreneurial spirit across all levels of an organization, and authentic relationships between managers and employees.

That critical connection—the point at which employee selfinterest and corporate interests fuse—is the cornerstone of a One-Company culture."

-Argenti & van Riel, "Developing a One-Company Culture"

Three Principles of One-Company Cultures

- Organizational cultures must be rooted in the principles of:
 - Action: employees are engaged in and regularly drive corporate strategy
 - Accountability: employees think, act, and demonstrate respect for the corporation, embracing ownership
 - Authenticity: employees believe in corporate values and strategy strongly enough to adopt them as their own moral and strategic compass in the workplace

Steps to Developing One-Company

- Step 1: Taking Values from Page to Practice
- Step 2: Trickling Messages Down, Up and Sideways
- Step 3: Recognizing that One-Company never involves one-way communication
- Step 4: Using technology to build communities organically
- Step 5: Getting it measured and done
- Step 6: Never losing sight of the complexities of One-Company
- Step 7: One-Company requires a joint effort





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- In 2014 the Cedars-Sinai Health Systems (CSHS) finalized an agreement with two prominent orthopaedic groups in the LA area (Kerlan-Jobe (KJ), and Santa Monica Orthopaedic Group (SMOG)).
- Both groups known for sports medicine and together covered most of the professional teams in the LA area including the Rams, the Dodgers, the Lakers, the Clippers and the Galaxy.
- Kerlan-Jobe was well published, and has trained most of the prominent sports medicine specialists in the country.



Cedars-Sinai's interest in the affiliation agreement:

- Geographic expansion –Gave CS a foot print in Santa Monica and the south coast.
- Provided specialists to fill Marina Del Ray Hospital (next to Santa Monica) which CS had just purchased.
- Defensive play to prevent UCLA from acquiring groups.
- Fund raising potential.
- Potential marketing opportunities (health care to professional athletes).
- Further geographic expansion in The Valley through the acquisition of other groups into Kerlan-Jobe.



Kerlan-Jobe and SMOG interest in the agreement

- Financial solvency Kerlan-Jobe was close to insolvency and SMOG was not far behind.
- Achieving a grand vision for a global sports science institute.
- Financial support for increasingly costly deals to function as team physicians for professional sports teams.

Expectations from KJ & SMOG

- Would maintain an identity independent from CS.
- Would continue to run as an independent group with financial backstop from CS
 - CS would pay overhead of clinic management but operations would be managed by their own management company (not CS).
 - CS would fund their educational and research missions.
 - KJ and SMOG would not have to deal with CS bureaucracy or operational mandates from CS (typical large organization imperatives).
 - Would not answer to the Dean for their education and research.
- CS would pay marketing deals with professional sports teams.
- CS would fund program expansion (Sports Performance Center, Concussion Center, Sports Neuro Rehab), and global expansion (China, Las Vegas, etc.)
- CS development would raise money for the KJ and SMOG foundations.
- CS would do a marketing campaign for KJ and SMOG.



2014 Expansion - In a rush to make a deal, expectations poorly defined.

CS expectations

- KJ and SMOG would Identify as CS.
- KJ and SMOG would dissolve their foundations and cooperate with the CS Foundation Development team to raise money for research and education.
- KJ and SMOG would absorb other groups in the Valley to increase geographic expansion.



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- CS marketing wanted KJ and SMOG names to go away as they did not think it was valuable.
- KJ physicians had a real loyalty to the name and believed it to be extremely valuable.
- KJ and SMOG refused to take on a Cedars-Sinai identity and became Kerlan-Jobe (A Cedars-Sinai Affiliate) and SMOG (A Cedars-Sinai Affiliate). Consequently, marketing refused to spend any marketing money on Kerlan-Jobe or SMOG because they were not identified as CS.
- KJ did not shut down their foundation and refused to cooperate with CS development to raise money.
- KJ had taken care of the Lakers for 30 years. For the first time, the Lakers tied the right to be team physicians to a sponsorship deal. Lakers wanted 60 million. CS refused.
- KJ and SMOG blackballed other groups that could have increased geographic expansion.



In 2016 Cedars-Sinai Orthopaedics was elevated from division to Department

- National search for a Chair.
- I was nominated and accepted the position.
- I was charged with making some useful whole of the sum of the parts.

In 2016 Cedars-Sinai Orthopaedics was elevated from division to Department

In addition to the complications related to the affiliation with these two groups, the Cedars-Sinai orthopaedic program was fragmented with 4 different employment models











MEDICAL NETWORK



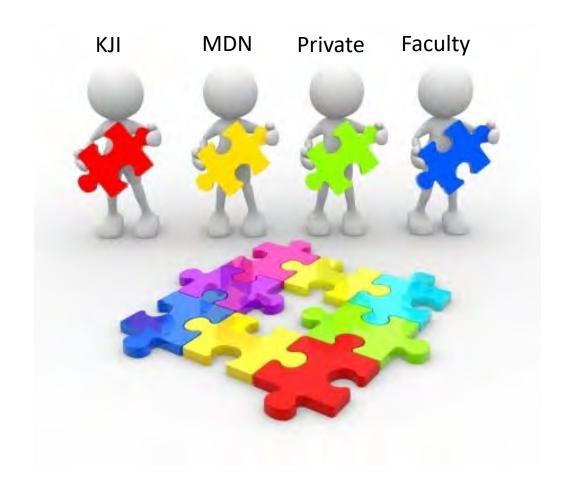


Orthopaedic Update

Vision...

To be the International leader in patient care, innovation, and education.

Orthopaedic Update





One Department Vision

My Advantages

- I was the first chairman of a new department surgeons were excited to have direct representation.
- Among the potential candidates, I was the first choice of each of the factions including KJ and SMOG (in fact KJ had submitted my name to the search committee).
- I had known the KJ leadership for many years and had trained some of their younger physicians.
- Had a history uniting factions at Harvard.
- Neither CS, KJ or SMOG wanted the relationship to fail (They were in the 3rd year of a 5 year contract with neither side very happy).
- Shortly after my arrival KJ and SMOG joined to become the Kerlan-Jobe Institute (a Cedars-Sinai Affiliate)
- All physicians were dedicated to education and research.

One Department Vision

Concerns

- Really bad blood between CS Marketing and Development and KJI (Kerlan-Jobe Institute).
- Continued lack of clear delineation of expectations from CS and a desire to make everything workout without being heavy handed.
- KJ and SMOG's inflated belief of the importance of the Kerlan-Jobe name and their importance to CS.
- Based on marketing research, the Marketing and Development departments did not believe that the Kerlan-Jobe name was important.
- KJ and SMOG physicians had no experience in working in a large system with extensive bureaucracy.
- CS had just expanded as a network and had no experience working as an integrated system.

Establishing a One Department Concept

- Introduced the idea that we were all one with the goal of becoming the nation's best.
- Personal meet and greets with all active department members.
- Identified opinion leaders from each of the factions.
- In all communication, both up and down, I eliminated language that made reference to physician's employment category; everyone was part of the department.
- Focused efforts on research and education since these were areas where all believed we should collaborate.
- I developed a structure that reflected this organization. Subspecialty leaders were picked by ability rather than their employment.
- Charged division leaders with establishing system wide education conferences.
- Assumed responsibility for representing all factions to administration.
- Off-site retreat including all factions to discuss vision and a strategic plan for research and education.



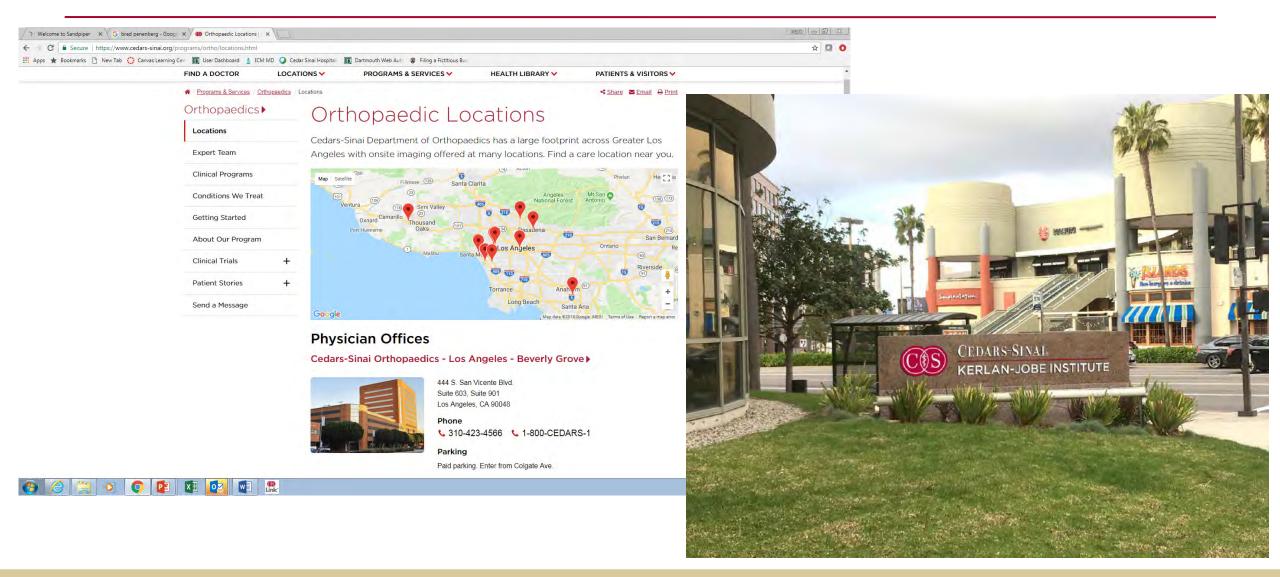
Solving the Kerlan-Jobe Institute Problem

- Made it very clear that I wanted to keep the KJI identity, but that the only way the KJI would be of value to CS is by being clearly part of CS. I was clear to the surgeons that if they were not identified as CS then they were not a benefit to me as a department chair.
- I convinced administration of the importance of keeping the KJI name and allowing them to be called an institute even though they did not officially meet the criteria.
- Made it clear that I wanted KJI to be the sports medicine division of the department and that I wanted to make it bigger and better that ever.
 - Branding as CS would unlock marketing, development and research money that would be good for everyone.
 - Branding as CS would prevent CS from focusing on the KJI balance sheet (which was not good)
- I became conduit for communication for KJI surgeons and CS Administration.
- Solved every little problem I could with KJI and the administration to help them understand that I was on their side.
- Worked very transparently with both KJI and CS administration.





Expanded Access for Patients





Orthopaedic Update























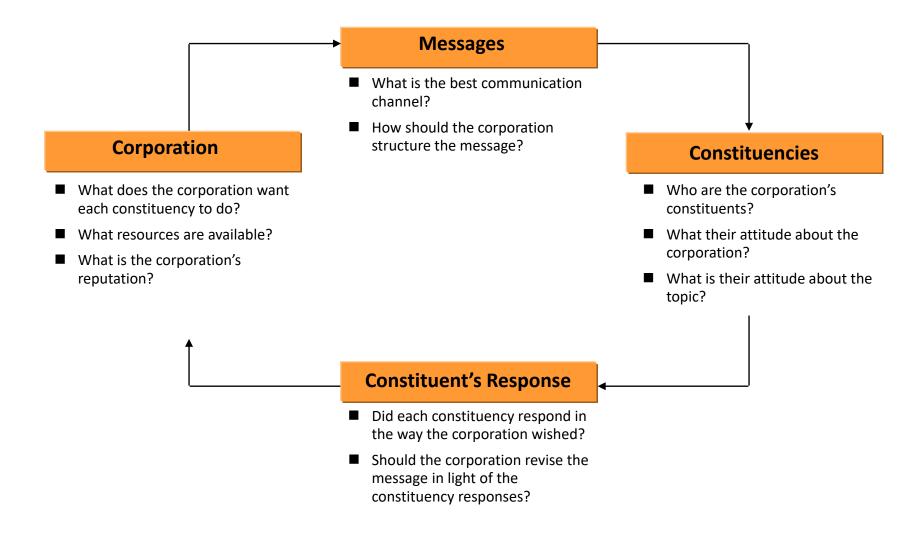






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Corporate Communication Strategy Framework





Questions?

