

Denise Dunn

From: Barbara Morrison [Barbara.Morrison@rayberndtson.ca]
Sent: Monday, November 01, 2004 3:15 PM
To: Dr. Robert Williams
Subject: as mentioned, Fraser Health Authority, VP Quality & Medical Leadership



FHA VP Quality -
TOR (Main).doc...

Dear Dr. Williams,

Thank you very much for your voice message. I have attached a document re. the Fraser Health Authority, Vice President, Quality & Medical Leadership position, that may help further in understanding the Authority, the Position Description and the Candidate profile.

Please feel free to pass this information on to your contacts and if you or your contacts have any questions please give me a call or email.

Thank you very much for your time, consideration, and help with this search. This is great opportunity for the right candidate.

Regards,

Barbara Morrison
Research Associate

Ray & Berndtson / Tanton Mitchell
Global Leaders in Executive Search
Suite 710 - 1050 West Pender Street
Vancouver, B.C. Canada V6E 3S7

Email: <barbara.morrison@rayberndtson.ca>
Phone: (604) 685-0261
Fax: (604) 684-7988
Web: www.rayberndtson.ca
<<FHA VP Quality - TOR (Main).doc>>

www.fraserhealthauthority.com

Dr. David Morrison

604-587-4658



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Organization Profile



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Better health.
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Fraser Health Authority is one of the largest health authorities in Canada serving 1.47 million people with a budget of \$1.7 billion. The opportunity exists for the new Vice President, Quality & Medical Leadership to have significant influence on the evolution of a major health system and, in doing so, to make a real difference in the delivery of health services.

- FHA is looking forward to 10 years of growth and development. It is already the fastest growing of the six health authorities in B.C. In 2002, Fraser Health's population grew by more than 26,000 people, more than half the total growth in the province. By 2010, the population is expected to increase by over 210,000 to 1.65 million. Population based funding models ensures a corresponding increase in funding while the growth in population continues.
- FHA has the ambition to be a leader in the country in terms of health services delivery. FHA has undergone 2 years of integration, restructuring and budget management issues since it was initially established in December 2001. It is now poised for growth and development.
- FHA is led by a strong and cohesive leadership team and has 20,000 employees and 2,000 physicians who share a bold vision: *"Better Health, Best Health Care in Canada"*.
- This role has a dual, but complementary, focus. The Vice President, Quality & Medical Leadership provides leadership for quality and risk management strategy across the Authority and, in collaboration with the Vice President, Academic Development and Clinical Innovation, for the effective leadership, delivery and direction of clinical programs and services. Within a multidisciplinary setting and working in conjunction with the Professional Practice Leader and Chief Nursing Officer, the Vice President, Quality & Medical Leadership develops plans, goals and objectives to ensure the support for strategic initiatives of the organization through innovative clinical performance systems, quality improvement strategies and clinical leader mentorship in the pursuit of quality objectives.



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Organization Profile (cont'd)



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1.0 British Columbia's Health System at a Glance

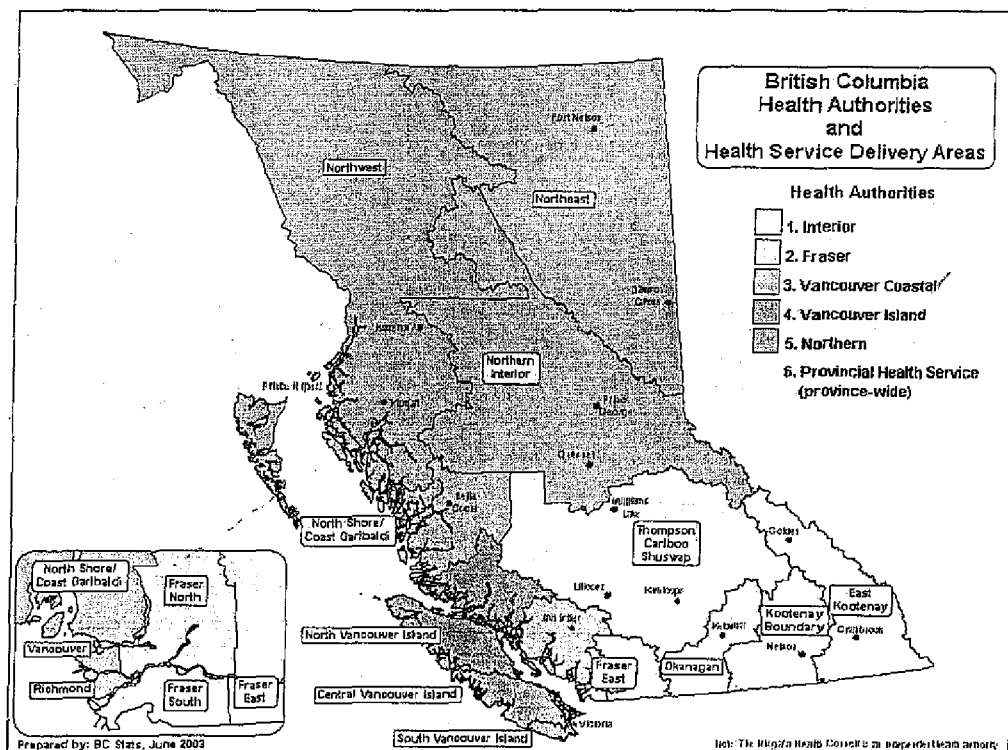
On December 12, 2001, the B.C. Government restructured the delivery of health care, reducing the previous 52 regional health boards, councils and societies to six (6) health authorities; one provincial and five geographic.

The five regional health authorities are:

- Northern
- Interior
- Fraser
- Vancouver Coastal
- Vancouver Island

The geographic health authorities are primarily responsible for identifying regional health needs, planning appropriate programs and services, and ensuring that programs and services are properly funded and managed.

The sixth governing body is the Provincial Health Services Authority (PHSA). PHSA's primary role is to ensure that B.C. residents have access to a coordinated network of high-quality specialized health care services. By planning, coordinating and evaluating specialized health services, PHSA is working with the other health authorities across B.C. to provide equitable and cost-effective health care for people who need provincial services like cancer treatment, management of a complex mental health problem or cardiac care.





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Organization Profile (cont'd)



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2.0 Overview - Fraser Health Authority

2.1 Operational Highlights

- Oversees the operation of 12 acute care hospitals, including about 1,863 acute care beds. The twelve acute care hospitals are: Surrey Memorial, Langley Memorial, Peace Arch, Delta, Royal Columbian, Ridge Meadows, Eagle Ridge, Saint Mary's, Burnaby, Mission Memorial, MSA, Chilliwack and Fraser Canyon.
- Maintains about 7,400 community residential beds and serves 1,500 clients in 19 adult day program centers.
- Serves a total population of 1.47 million.
- Encompasses 13 major municipalities and a number of smaller communities that make up the Greater Vancouver Area to the east and south of Vancouver.
- Accounts for about one-third of the population of British Columbia.
- One of the largest health care organizations in Canada and the fastest growing region in B.C.
- Is a blend of urban and rural: 28% of the Fraser Valley population is considered rural.
- Has 22,000 employees; about 2,000 doctors.
- Has a total budget of \$1.7 billion.
- Receives 393,070 emergency visits (03/04 fiscal year).

2.2 Demographic Highlights

Population	2004	% of Region Pop.	2007 projected
Under 19	348,494	24%	349,627
19 - 44 yrs	573,801	39%	587,798
45 - 64 yrs	372,956	25%	421,847
65 +	175,668	12%	193,261
TOTAL	1,470,919	100%	1,552,533



Organization Profile (cont'd)


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3.0 Governance and Management

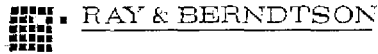
3.1 Board of Directors

The Fraser Health Board of Directors meets bimonthly and at the call of the Chair. To assist them in conducting business, there are three committees of the Board - Finance and Audit, Governance and Human Resources, and Quality Performance. In addition, the Board works at self-development sessions that include an orientation to the Fraser Health and all of its programs.

The Board works with management to ensure appropriate community consultation. It also holds open meetings for the public. The purpose of these meetings is to receive community presentations concerning health status, health service and health needs of the population.

The Board of Directors is comprised of:

Barry Forbes	President & CEO, Westminster Savings Credit Union
Brad Bond	President, Barrier Management Inc.
Jane Darville	Board Member, Dr. Peter Centre & The Vancouver Chamber Choir
Glen Grant	Managing Director HR, Colliers International
Mathew McKechnie	COO, Co-operators Development Corp.
David MacLean	Director of the Institute for Health Research & Education, Simon Fraser University
Palbinder K. Shergill	Lawyer, Peterson Stark Scott
Donna Telep	President & CEO, Seville Mortgage Corp.



Organization Profile (cont'd)



3.2 Leadership Team

Bob Smith	President and Chief Executive Officer
Brian Woods	Vice President, Corporate Services and Chief Financial Officer
Betty Ann Busse	Chief Operating Officer, Fraser East
Joanne Konnert	Chief Operating Officer, Fraser South
Kathy Kinloch	Chief Operating Officer, Fraser North
Mary Ackenhusen	Vice President, New Business Development and Facilities
Keith Anderson	Vice President, Health Planning and Systems Development
Geoffrey Crampton	Vice President, Human Resources and Organizational Development
Dr. Peter Hill	Vice President, Academic Development and Clinical Innovation
Dr. David Matheson	Interim Vice President, Quality
Terry O'Donovan	Vice President, Communications and Public Affairs
Marc Pelletier	Vice President, Clinical Support, Health Protection and Evaluation
Dr. Lynn Stevenson	Leader, Professional Practice and Chief Nursing Officer

3.3 Culture of Leadership Team

Words that have been used to describe culture of this team include enthusiastic, bright, fun, organized, cohesive, hard working, collaborative, creative and supportive. The team has a "can do" attitude and takes pride in being on the cutting edge. There is vitality amongst the team. They meet every Tuesday for a half-day to deal with operational issues and monthly for a day focused on strategic issues.



Organization Profile (cont'd)



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4.0 Fraser Health Strategic Plan

The Fraser Health Strategic Plan outlines the vision and values that will guide its decisions going forward. The Plan describes at a high level the organizations current initiatives and the plans that will be put in place to build a sustainable, high quality health and increase its focus on building a healthier population. The Strategic Plan will guide the development of Fraser Health's detailed 3-year operating plan, and will help it set priorities when allocating resources.

Developed with input from many individuals who work at Fraser Health, the plan builds on the vision and the goals of the Ministry of Health Services. In addition it supports the planning work completed during and subsequent to Fraser Health's clinical services directional planning process. It also reflects the knowledge gained through ongoing monitoring of the external environment, in particular, the federal/provincial discussions on health care funding and targets.

4.1 Vision, Purpose and Values

Vision

- Better Health, Best in Health Care

Purpose

- To improve the health of the population and the quality of life of the people we serve.

Values

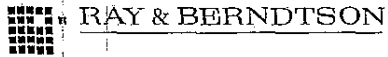
- Respect, caring and trust characterize our relationships.

Commitment

- To be passionate in pursuit of quality and safe health care.
 - To inspire individual and collective contribution.
 - To be focused on outcomes, open to evidence, new ideas and innovation.
- To embrace new partners as team members and collaborators.
 - To be accountable.

4.2 Strategic Priorities

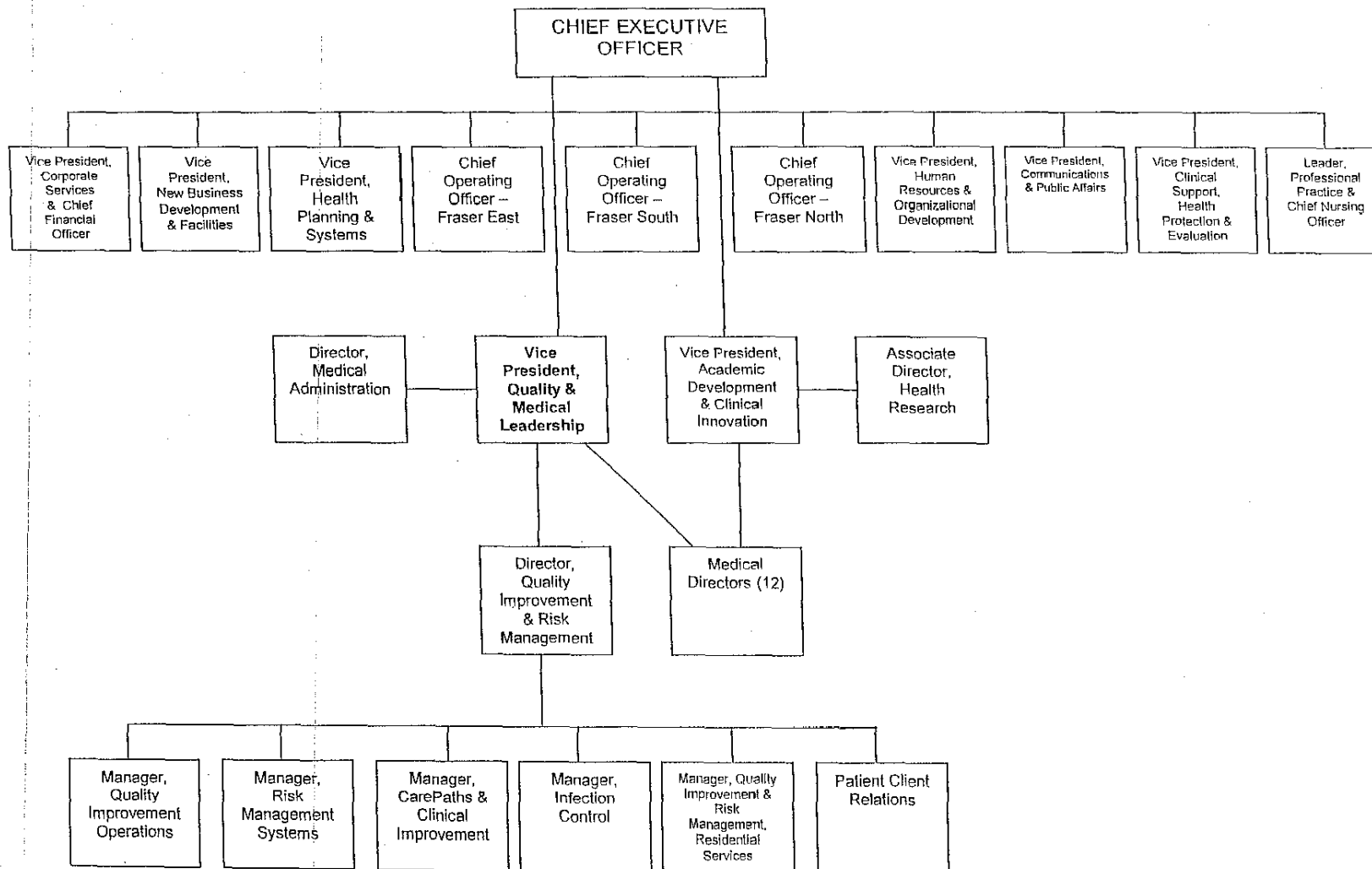
The Strategic Priorities are described in **Appendix I**.

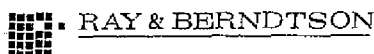


DRAFT Organization Profile **(cont'd)**



5.0 Organizational Chart - Management Team





Organization Profile (cont'd)



6.0 2003 Financial Highlights

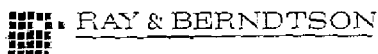
FRASER HEALTH AUTHORITY

Statement of Financial Position

(Tabular amounts expressed in thousands of dollars)

March 31, 2004

	2004	2003 (restated - note 7(b))
Assets		
Current assets:		
Cash and cash equivalents (note 3)	\$ 84,518	\$ 176,527
Short-term investments (note 3)	30,204	41,267
Accounts receivable (note 4)	36,543	26,004
Inventories	7,662	7,230
Prepaid expenses	15,634	1,248
	174,561	252,276
Long-term investments (note 3)	92,610	-
Capital assets (note 5)	474,135	469,230
	\$ 741,306	\$ 721,506
Liabilities and Deficiency in Assets		
Current liabilities:		
Accounts payable and accrued liabilities (note 6)	\$ 154,861	\$ 165,899
Current portion of deferred operating contributions (note 8)	11,229	11,661
Current portion of long-term debt (note 9)	4,502	4,934
Current portion of accrued sick leave and severance benefits (note 7(a))	8,962	6,647
	179,554	189,141
Deferred operating contributions (note 8)	1,715	1,528
Accrued sick leave and severance benefits (note 7(a))	68,804	68,302
Accrued long-term disability benefits (note 7(b))	47,565	38,843
Long-term debt (note 9)	3,696	12,043
Deferred capital contributions (note 10)	529,260	498,614
Deficiency in assets:		
Investment in capital assets (note 11)	26,850	22,027
Internally restricted	-	298
Externally restricted	1,092	969
Unrestricted	(117,230)	(110,259)
	(89,288)	(86,965)
	\$ 741,306	\$ 721,506



Organization Profile (cont'd)



6.0 2003 Financial Highlights (cont'd)

FRASER HEALTH AUTHORITY

Statement of Revenue and Expenses
(Tabular amounts expressed in thousands of dollars)

Year ended March 31, 2004

	2004	2003 (restated - note 7(b))
Revenue:		
Contributions from the Ministry of Health Services	\$ 1,354,911	\$ 1,334,817
Other Contributions	35,549	31,232
Patients, clients and agencies (note 13)	133,178	125,374
Investment	4,776	4,642
Other	37,581	30,323
	<u>1,565,995</u>	<u>1,526,388</u>
Expenses:		
Compensation and benefits	976,667	950,768
Supplies	142,949	136,409
Equipment and building services	27,930	21,344
Health service provider contracts	370,350	364,832
Referred out services	12,340	10,855
Sundry	36,161	33,275
	<u>1,566,397</u>	<u>1,517,483</u>
Excess (deficiency) of revenue over expenses before undernoted items	(402)	8,905
Investment in capital assets:		
Amortization of deferred capital contributions	54,909	49,884
Amortization of capital assets	(56,386)	(51,427)
Loss on disposal of capital assets	(444)	-
AHCC project planning costs (note 14(b))	-	(13,557)
AHCC project deferred capital contributions (note 14(b))	-	13,557
	<u>(1,921)</u>	<u>(1,543)</u>
Excess (deficiency) of revenue over expenses	\$ (2,323)	\$ 7,362



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Organization Profile (cont'd)fraserhealth Better health.
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7.0 Strategic Issues Facing the New Vice President, Quality & Medical Leadership

- In collaboration with the Vice President, Academic Development & Clinical Innovation, provide the leadership that will result in physicians throughout the Authority being engaged in self-governance and service delivery.
- Ensure an effective infrastructure for medical leadership and administration is in place to facilitate and support physician engagement.
- Develop an overall interdisciplinary vision and strategy for Quality at FHA that enables it to be seen as a leader in this field.
- Ensure that FHA has in place an effective structure to support the achievement of its quality goals.
- Effectively engage the members of the executive team, medical staff and employees throughout the Authority in pursuing the Quality agenda.
- Play a role with other FHA leadership in supporting physician participation across the continuum of care and in the community at large.



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Organization Profile (cont'd)

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APPENDIX I*The Plan, How Fraser Health Will Achieve Its Vision*

To achieve its vision, Fraser Health will focus on the following Strategic Priorities:

I. An Integrated Health System: Improving and Sustaining Care

Both the people, who work in the health system, and those who depend upon it, recognize that the current health system is under tremendous pressure. Demand for services is increasing as the population grows, ages, and as new treatments become available.

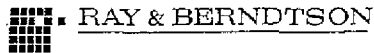
Health care needs are changing and include the requirement for ongoing care across a full continuum of services delivered in hospitals, physicians' offices, community settings and individuals' homes.

The current system makes transitions between types of care difficult. Fraser Health's goal of building an integrated health system is aimed at ensuring there are networks of acute, community and primary care linked together to support a whole system approach to improving health.

Four goals have been set for the development of an integrated health system. Together they paint a picture of health services that are available to people when they need them, provided in the most appropriate setting by skilled and professionals and coordinated so that services work together in an effective and efficient way.

Fraser Health's Goals

1. Improved health of population.
2. A sustainable, responsive and integrated health system.
3. A high-quality and safe health care system, focused on the needs of patients, clients and residents.
4. Equitable access to care.



Organization Profile (cont'd)



APPENDIX I (cont'd)

The Plan, How Fraser Health Will Achieve Its Vision (cont'd)

I. An Integrated Health System: Improving and Sustaining Care (cont'd)

Four overarching strategies will be used to achieve the goals for an integrated health system. These strategies will provide direction to leaders and teams across Fraser Health and will be reflected in initiatives across all communities and across the continuum of care.

Fraser Health's Strategies

1. Standardized based on evidence/best practice.
2. Target services for populations at risk.
3. Redesign clinical services to achieve a continuum of care and ensure the right care is provided in the right location.
4. Focus on chronic disease management, health promotion and strategies to build a healthier community.

II. People Development: Healthy People, Healthy Workplaces

One of Fraser Health's strengths is its focus on patients, residents, and clients as well as its willingness to adapt to meet their changing health needs. This will require far-reaching changes in how care is delivered, how individuals and communities interact with the health system, and how changes are led and implemented. Effective, sustainable and results-oriented strategies that engage leaders and team members in continuous improvement can only be accomplished when leaders and team members are committed to making this happen. Building on this capacity will require people development strategies that are proactive and focus on organizational wellness and the needs of its employees, physicians and volunteers.



Organization Profile (cont'd)



APPENDIX I (cont'd)

The Plan, How Fraser Health Will Achieve Its Vision (cont'd)

II. People Development: Healthy People, Healthy Workplaces (cont'd)

This will require an ongoing commitment from Fraser Health to the following three principles:

1. People are Fraser Health's most important asset and its success will rely on the intelligence, understanding, skills and experiences of its people;
2. Fraser Health will create readiness for and embrace change within its organization Health through effective leadership and organization development strategies that will bring about sustainable cultural change; and
3. Fraser Health will redesign the workplace to ensure that physician, volunteer, nursing, paramedical professional, administrative and support roles are focused on achieving the organization's vision in the most effective manner. It will be proactive in its integrated approach to organizational wellness.

The successful implementation of the following six strategies will ensure Fraser Health achieve its goals in creating its Healthy People, Health Workplace vision:

1. Enable individuals to engage, influence, lead, and actively participate in achieving organizational goals;
2. Find creative, innovative and flexible ways to link its people and services;
3. Collaborate internally and externally to retain and attract the best people;
4. Foster knowledge development to achieve individual and organizational goals;



Organization Profile (cont'd)



APPENDIX I (cont'd)

The Plan, How Fraser Health Will Achieve Its Vision (cont'd)

III. Partnerships: Working Together for Better Health

Traditionally, the bias in health care has been to provide the majority of services from within the organization. However, in today's world of growing demand and shrinking budgets, Fraser Health plans to create partnerships with other organizations and individuals in the public and private sector to gain expertise, promote clinical education and research, provide access to operating and capital resources, and increase its influence with its stakeholders.

Fraser Health will strengthen and develop partnerships to achieve the following goals:

- Partnerships that add expertise and attract financial resources to Fraser Health;
- Partnerships that engage community stakeholders and support Foundation objectives; and
- Partnerships that build a strong academic and research role in Fraser Health.

In order to achieve these goals, Fraser Health will develop partnerships by:

- Creating partnerships with the private sector;
- Better integrating Foundations into Fraser Health through the Foundation Council;
- Developing and implementing a community engagement strategy; and
- Enhancing the academic and research activity in our hospitals.

IV. Performance Improvement: Providing the Tools to be the Best

Improving ones performance, using new knowledge and demonstrating effectiveness are all important to becoming a leading health care organization. Across Canada and the world, clinicians, researchers and others are finding innovative ways of delivering care that improve quality, effectiveness and efficiency. The challenge becomes applying this new knowledge.



Organization Profile (cont'd)



APPENDIX I (cont'd)

The Plan, How Fraser Health Will Achieve Its Vision (cont'd)

IV. Performance Improvement: Providing the Tools to be the Best (cont'd)

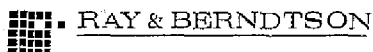
Fraser Health also recognizes that there is a need for health care to be more accountable to the public—the payers and consumers of the system, and to government. To do this, it needs better systems to track what is done and measure the costs, benefits, and outcomes.

Performance improvement will involve management strategies, processes and programs that will expedite the continuous improvement of care and service, and facilitate accountability.

Performance improvement is an essential component of Fraser Health's moral and business imperative to continuously improve care and service. The organization also has a legal imperative to demonstrate continuous improvement, including financial stewardship.

The following strategies will support Fraser Health in performance improvement:

- Use of information management and technology to improve quality and achieve productivity gains;
- Implement a performance assessment and reporting system; and
- Actively pursue process improvement, redesign and reengineering opportunities.

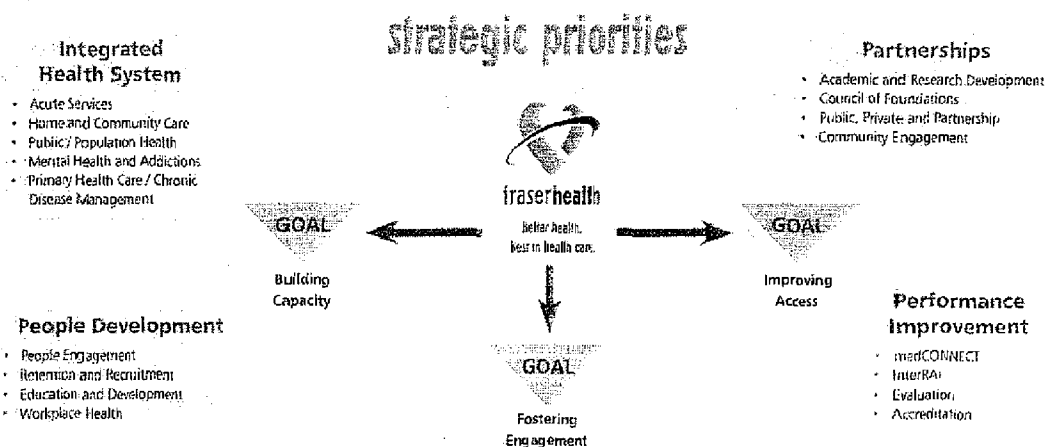


Organization Profile (cont'd)



APPENDIX I (cont'd)

The Plan, How Fraser Health Will Achieve Its Vision (cont'd)



For further information on Fraser Health's Strategic Plan, please visit www.fraserhealth.ca

September, 2004



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Position Description



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VICE PRESIDENT, QUALITY & MEDICAL LEADERSHIP

Fraser Health Authority

General

Reporting to the President & Chief Executive Officer, the Vice President, Quality & Medical Leadership provides:

- Leadership for quality and risk management initiatives across the organization;
- In collaboration with the Vice President, Academic Development and Clinical Innovation for the effective leadership, delivery and direction of clinical programs and services for a for the South and East regions of the Fraser Health Authority. Specific areas of collaboration and shared areas of responsibility include:
 - Medical Advisory Committee;
 - Physician leadership development;
 - Medical Director leadership;
 - Credentialing administration;
 - Medical Bylaws;
 - Medical staff structure development;
 - Co-leadership support to Chief Operating Officers;
 - Medical system administration.

Within a multidisciplinary setting, working in conjunction with the Professional Practice Leader and Chief Nursing Officer and Vice President, Academic Development and Clinical Innovation the Vice President, Quality & Medical Leadership develops plans, goals and objectives to ensure the support for strategic initiatives of the organization through innovative clinical performance systems, quality improvement strategies and clinical leader mentorship in the pursuit of quality objectives.

The Vice President, Quality & Medical Leadership provides leadership support to the Chief Operating Officers, Site and Service Medical Directors, MACs and Medical Staff, and represents the organization to various provincial committees. Additionally, the Vice President, Quality participates as a member of the Executive Committee demonstrating commitment to the vision, purpose and values of Fraser Health.



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Position Description (cont'd)

Specific Responsibilities

1.0 Corporate Leadership

As a member of the FHA executive team, has shared responsibility for the overall leadership of the Authority in a manner that enables it to achieve its vision, goals and objectives.

2.0 Board of Directors

Provides support to the Board of Directors and its committees in the fulfillment of its governance responsibilities.

3.0 Corporate Strategic Plan

Contributes to the development of, and has shared responsibility for, the successful implementation of FHA's corporate Strategic Plan that establishes goals, identifies key strategic priorities and sets objectives and plans.

4.0 Medical Leadership

Ensures the portfolio provides for the continued pursuit of quality and ongoing excellence in clinical outcomes and provides leadership to physicians and employees to develop management expertise.

5.0 Program Development and Delivery

Ensures strategies, systems, programs and objectives, support key Fraser Health strategic initiatives and positions the organization to meet its operational and strategic challenges. In collaboration with the Vice President, Academic Development and Clinical Innovation and Professional Practice Leader and Chief Nursing Officer, develops and oversees implementation and assessment required for clinical services consistent with long term objectives, Clinical Services, Directional Plan and other strategic planning tools. Leads quality promotion and mentorship, clinical outcomes and efficiencies, utilization management of resources, clinical risk management. Ensures medical bylaws, appointments, credentialing and the medical staff structure supports the integrated delivery of health care services.

6.0 Leading People

Identifies, aligns and optimizes talent and resource utilization to build an effective organization. Coaches, mentors and encourages employee development.



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Position Description (cont'd)

7.0 Leading Change

Participates with the Executive Committee to ensure proactive policy initiatives and programs support current and evolving medical issues. Initiates and champions opportunities for change.

8.0 Partnerships and Communication

Works cooperatively with internal and external stakeholders to meet mutual goals. Ensures that effective and efficient communication mechanisms are developed, implemented and evaluated.

9.0 Financial Management

Ensures that the planning and management of annual operating and capital budgets for clinical/medical systems, quality and risk management affairs meet operational and service needs within the limits of established financial mandates.

10.0 Issue Identification

Identifies key issues and develop strategic and operational plans to address short, medium and long term health services and professional practice objectives, strategies, plans, and programs.

11.0 Representation

Represents Fraser Health's interests by initiating and developing co-operative relationships on Medical Advisory Committees, external committees and contacts with the Ministry of Health, community and other stakeholder groups.

12.0 Key Areas of Involvement

- Quality promotion and mentorship;
- Clinical outcome and efficiencies;
- Utilization management;
- Clinical risk management;
- Clinical performance systems;
- Infection control;
- Accreditation leadership.

September, 2004

Candidate Profile



VICE PRESIDENT, QUALITY & MEDICAL LEADERSHIP

Fraser Health Authority

PRIORITY CRITERIA

- 1.0 Education:** The candidate will be a graduate of a recognized school of medicine, ideally with additional education in a management discipline such as a Masters of Health/Business Administration, or equivalent and the completion of the Physician Management Institute.
- 2.0 Experience:** Has experience in medical administration or leadership roles in a complex health care environment. Candidate will possess a track record of success as the Vice President, Medicine, Medical Director, or Head of a Medical Department/Division or in leadership roles in advisory capacities such as Chair, MAC or in national professional or industry organizations.
- 3.0 Healthcare Knowledge:** Strong knowledge of the health system in Canada, of integrated healthcare models, current issues facing the health system, provincial healthcare policies, funding practices and related federal and provincial health statutes. Knowledge of medical staff governance structures and processes. Knowledge of quality improvement processes, methods and emerging trends.
- 4.0 Leadership:** A confident, compelling and effective leadership style that engages people in a shared vision and ensures strategies are developed and translated into action that achieves desired results. A highly effective collaborator and consensus builder; a catalyst who creates momentum by inspiring and influencing others. Demonstrated ability to enhance physician engagement in an organization's agenda.
- 5.0 Passion for Quality:** Has a passion and sense of vision for quality and possesses a broad and advanced understanding of quality processes in a large, complex organization. Has the ability to articulate this vision and its importance to the community as a whole. Can achieve buy-in from stakeholders. Demonstrated interest in evidence-based decision-making.



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Candidate Profile (cont'd)

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PRIORITY CRITERIA (cont'd)

- 6.0 **Intellectual Factors:** A systems thinker, who sees the big picture and can identify strategies that will move an agenda forward in a large, complex organization. Very focused on analysis, evidence data and measurement in looking for solutions. Sees quality as a systems management issue.
- 7.0 **Interpersonal Factors:** Is an effective team player and collaborates easily with others. Politically sensitive. Able to relate effectively with a wide range of stakeholders. Enthusiastic, approachable and positive in style.
- 8.0 **Strength of Character:** Demonstrates strength of character and integrity. Persistent; advances initiatives through challenging organizational dynamics. Very focused on achieving desired results.
- 9.0 **Communication:** Very strong communication skills -- concise, persuasive, diplomatic, effective listener, articulate. Is able to communicate effectively within an environment of continuous change. Has the ability to articulate a vision and its strategy to the organization and in doing so, will foster the engagement of people in the quality agenda.

September, 2004

