■ What's Up?

Reporting relationships -- Now that the organizational structure for Lehigh Valley Health Network has been defined at the senior management level, the next step will be decisions regarding reporting relationships at the next level. An interim set of reporting relationships has been defined so that there will be continuity of leadership and organizational direction. Over the coming months, each department/function/process will be examined. From this examination (which will be conducted by those operating those departments) a structure will continue to evolve that will assure a successful integration, resulting in an even stronger team than either organization had before. Again, none of these decisions will be implemented until after the merger closing, which is scheduled for Thursday, Nov. 20.

Cultural integration -- Department directors from LVH and MHC attended a workshop in change management on Monday, the latest in a series of activities to educate and support staff throughout the process of merger and integration. Larry Fox, a specialist in organizational development, presented information and led small-group work designed to help managers anticipate and deal with individual and operational issues that arise when organizations merge. Some of the group's findings:

- Resistance is a natural part of major change. To some degree, we will all be working differently in the future, and that's uncomfortable until we learn and adapt.
- Whether an individual's response to a major change like the merger is positive or negative, many of the same principles apply to help people work through it: Acknowledge concerns, talk about why the change is necessary, explore options and opportunities, respect people's feelings, and communicate, communicate, communicate.

The members of the merger transition team that are guiding the cultural integration process are: from MHC, Melissa Wright and Dave Dylewski; and from LVH, Mary Alice Czerwonka, Mary Kay Gooch, Diane Carpenter and Linda Durishin. Next steps include naming an advisory team comprising staff from MHC and LVH to provide input for future programs and advice in the communication of important information throughout the network.

■ Rumor Control -- Call 402-CARE

Heard a rumor? Unsure what is fact, what is fiction? Call 402-CARE with your question or drop a card in any one of a number of "Rumor?" boxes

(continued on back page)

placed at all sites. You may leave your name and phone number and we'll get back to you individually. Or be anonymous if you wish, and if the issues has general interest, the response will be printed in Merger Update.

■ Physicians' Team

Although LVH and MHC will maintain their own medical staffs after the merger, the goal is to move toward a single medical staff over time, probably within two years. Members of the medical staff transition team presented the rationale for a merger to members of both medical staffs. Those rationale include:

- To have a rational medical staff structure that will relate well with the administrative structure of the new hospital entities.
- To simplify the decision-making process for the medical staff.
- To forge a new entity built on the synergies of the current medical staffs.
- To develop a new body that will permit organizational commitment to the medical staff on the part of the new hospital entities.
- To enhance efficiency and reduce time burdens on physicians by reducing the number of meetings.
- To assure that quality standards are uniform across the new hospital structure.
- To assure uniform credentialling standards across the new hospital.
- To facilitate program development.
- To most efficiently and effectively address manpower issues of the medical staff.
- As a completion of the symbolic gesture begun by the hospitals of having "one clinical entity" spanning the Valley.

From MHC, members of the medical staff transition team are Hugo Twaddle, M.D., Gavin Barr, M.D., Marc Granson, M.D., and John Lang, D.O. From LVH, they are Bob Laskowski, M.D., Bob Murphy, M.D., Jack Fitzgibbons, M.D., Chuck Hoover, M.D., and David Caccese, M.D. Staff to the committee are Vince Tallarico, MHC, and John Hart, LVH.

■ A Line or 2 from Lou

We're now in the final countdown. It's literally only hours until the merger of LVH and MHC is finalized. But we're still months away from being a fully integrated organization. And we really shouldn't expect a flip of a switch on some magic date. To have a respectful, effective process that fully involves the people affected, we must proceed in an orderly way, function by function, department by department. Integration and the changes it causes will be carefully planned and thoroughly communicated. There's a careful balance we are working hard to achieve: on the one hand, moving quickly and decisively and making full use of our marketplace advantage; on the other, being organized and deliberate about our decisions and our actions, to ensure we're doing the right things in the right way for the right reasons on behalf of our work force and the communities we serve.

Lou Liebhaber

Chair, Merger Transition Team

COO, LVHN