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Orientation to Mission:

Assessing the Perceptions of Effectiveness of an In-House Orientation Program Focussed on Mission, Vision and Values Within a Large-Scale, Not-for-Profit, Private Hospital.

Keith McNaught and Geoffrey Shaw

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Abstract

St John of God Healthcare (SJGHC), as a large Catholic, not-for-profit, healthcare provider, has explicit statements which reflect the Mission, Vision and Values of the organisation. New employees receive a comprehensive induction and orientation program, part of which includes ensuring new recruits are conversant with the Mission, Vision and Values. This program is deemed as formation, rather than training, to reflect a desire for the input to have a direct and personal impact on new employees, to increase their motivation and engagement with the ideals of the organisation. This research attempted to measure the perceived efficacy of the Mission component of Orientation at one particular SJGHC site, the hospital located in Subiaco, Western Australia, through both participant surveys and interviews. The results of 120 surveys were analysed and 16 semi-structured interviews were used to validate and probe information obtained from the participant surveys. Importantly, the research demonstrated that the session was perceived as valuable by participants and showed an increase in knowledge. This research has led to further ongoing research to determine if the perceptions of patients and their visitors align with staff perceptions of the way Mission is integrated in to the life of this hospital. The latter work will provide an important adjunct to this project since the work of hospital staff is ultimately not measured by individual staff members' knowledge, attitude or intentions, but by how their work impacts on the patients and their visitors.

An Overview of St John of God Healthcare (SJGHC)

St John of God Hospital, Subiaco, Western Australia, was the first hospital established (in 1898) by the Sisters of St John of God, a Catholic Religious Order originating in Ireland. The Sisters of St John of God (SSJG) were formed in 1871 and began their work with the poor and marginalised in Wexford, Ireland. Once in Australia, the Sisters continued to establish hospitals and facilities in response to need, quickly spreading across the country. The Sisters were buoyed by an era when religious life attracted large numbers of men and women, through until the 1970s, when the tide of entrants came to an almost complete end (Stark & Finke, 2000). In response to declining numbers of Sisters, and an ageing population of those within the Community, St John of God Health Care Inc (SJGHC) was established in Australia in 2004, to manage the facilities and services previously run directly by the Sisters. SJGHC is now involved in public and private hospitals, home nursing, hospice, disability services and social outreach in New South Wales, Victoria, Western Australia and New Zealand, with 13500 staff. SJGHC is a Not For Profit (NFP) entity, where all surpluses are reinvested in services and community outreach programs and projects.

SJGHC was established with bicameral governance structures (Trustees and a Board) and operates as a Ministry of the Catholic Church through its legal status under Canonical Law. The Trustees of SJGHC are entrusted with ensuring that the Mission, Vision, Values and Heritage of SJGHC reflect and honour the founding story of the organisation, and the charism of St John of God (1495 – 1550), the Sisters who used his name, and the Brothers of St John of God, the Order he had established in Spain. Though sharing a common name, the Sisters of St John of God had no affiliation with the Brothers of St John of God. The Brothers' charism was primarily to provide care and accommodation for people with disabilities and mental illness, who were residents in the facilities they created. The Sisters were trained nurses, and primarily established acute care hospitals. The Brothers had a limited footprint in Australia from 1947, and eventually SJGHC included their facilities within the operational structure and continued to operate their established facilities. The Trustees are also responsible for ensuring, as prescribed in Canon Law, that the organisation is an authentic Ministry of the Catholic Church, by ensuring congruence with Church teaching.

As a NFP healthcare organisation, established under both Canon and Civil Law, SJGHC self-determines that it will operate within a particular framework, with a focus on Mission, Vision and Values. This characterises the way care is provided to patients and residents across the organisation's divisions.

Context to this Research

St John of God Subiaco Hospital (Subiaco) has an extensive and proud record of clinical research. There has, however, been very little non-clinical research undertaken within the institution; this is seen as an area of need. Non-clinical dimensions of care are important in a patient's therapy. The present research seeks to extend the Hospital's research program into the non-clinical space, especially in relation to the Hospital's enactment of its Mission, Vision, Values, and also Service Ethos. This research is primarily seeking to gain a preliminary understanding of the effectiveness of the orientation program in influencing the professional behaviour of new Hospital employees (Noe et al., 2010).

The project has ethics approval from SJGHC and from the University of Notre Dame (UNDA, reference 016014F).

Induction and Orientation Programs

Many organisations use Induction and Orientation programs as a 'first step' in assimilating new employees in to the desired culture of an organisation (Bradt and Vonnegut, 2009), and often use Orientation as an opportunity to ensure these new employees have a functional knowledge of the Mission, Vision and Values of the organisation.

SJGHC conducts a comprehensive induction and orientation program, with engagement mandated in Policy. Participants in the Mission session are usually on their second day of employment, in a two-day program of induction and orientation.

SJGHC overtly seeks to attract, recruit and retain staff who are considered a 'mission fit'. Accordingly, induction and orientation are pitched on the premise of at least an initial alignment and genuine desire to work within the SJGHC ethos. In turn, this means that there is a preliminary expectation that recruits will respond positively to the subject matter of the sessions. The comments of one of the participants in this project confirmed this expectation: "I feel -as already discussed - that we were given jobs because we have these values so the session was only reinforcing them". The goal of this orientation session is to provide an understanding of St John of God's original, sixteenth century, ministry; to show how the values implicit in his ministry were incorporated by the SSJG and brought to nineteenth century Australia; and how all of this background informed the establishment of services which have become St John of God Health Care. The further goal is that an understanding of this historical information and the ideas foundational to SJGHC will permeate the professional performance of employees, leading to a unique provision of health care.

The session is intentionally planned to be relationship building (e.g. using a game to have participants meet and get to know each other) with a focus on story, and use of story telling as a narrative approach. Narrative has gained credibility over several decades as a means of understanding and describing complex social circumstances. "Through stories, narrative becomes an instrument to construct and communicate meaning and impart knowledge. Stories told within their cultural contexts to promote certain values and beliefs can contribute to the construction of individual identity or concept of community." (Mitchell and Egudo, 2003. P5) The session has been developed around the principles of adult learning (Merriam, 2015).

This context led to these Research Questions being developed:

1. Is the orientation program meeting its objectives (i.e. understanding of the SJG ministry, of its history and guiding principles; and its unique approach to care)?

- 2. Do participants report an increased level of knowledge of the key topics covered?
- 3. How do participants rate the orientation program?
- 4. Is Orientation helping new employees find meaning and purpose in their work?
- 5. Is Orientation encouraging new employees to behave in ways aligned to SJGHC Values and practice?

Mission, Vision and Values

Peter Drucker is attributed with the pithy comment that "Culture eats strategy for breakfast" (Whitzman, 2016). Like virtually all major organisations, SJGHC recognises the importance of culture as pivotal to its success. However, the integration of Mission, Vision and Values, as the core of workplace culture, is a complex phenomenon to measure. The often-cited line from Erik Berggren: "Make important stuff measurable and not what is easy to measure important" (Hallowell & Berrgren, 2007, p 12) reminds us that the attempt should be made.

Sawhill and Williamson (2001, p. 1) note that "non-profit missions are notoriously lofty and vague" and that they "...will never resemble businesses that can measure their success in purely economic terms." They argue, however, that any organization needs three kinds of performance metrics – to measure its success in mobilizing its resources, its staff's effectiveness on the job, and its progress in fulfilling its mission. Further, "The third kind of metric – measuring the success of an organization in achieving its mission – is considerably more difficult to create, but...it is also the most crucial" (p. 2).

Klemm, Sanderson and Luffman (1991) argued that mission statements brought benefits in the areas of staff motivation and management leadership. Bart and Baetz (1995. p. 16), examining 136 respondent businesses from the top-listed 500 industrial corporations in Canada for 1993, found that, subject to "...the quality of the mission statement, the quality of the mission development process and the degree of mission-organization alignment... the performance implications of mission statements can be profound." Like Bart and Baetz, Darbi (2012, p 95) also suggested an indirect link between mission statements and performance benefits when he argued that "...mission and vision statements can be used to build a common and shared sense of purpose and also serve as conduit through which employees' focus are shaped."

SJGHC Subiaco advertises its Vision, Mission and Values on a dedicated page of its website.

As a Ministry of the Catholic Church, St John of God Health Care models its service delivery on the healing Mission of Jesus Christ. As a leading health care provider this means offering hospitality, hope and healing to all in our care and to all who choose to work with us.

Our Vision Is to live and proclaim the healing touch of God's love where we invite people to discover the richness and fullness of their lives, give them a reason to hope and a greater sense of their own dignity.

Our Mission

Is to continue the healing mission of Jesus Christ through the provision of services that promote life to the full by enhancing the physical, emotional, intellectual, social and spiritual dimensions of being human.

Our Values

The core Values reflect our heritage and guide our behaviours: Hospitality; Compassion; Respect; Justice; Excellence. (St John of God Health Care n.d. *a*)

Curiously, there are no direct references to either (the person of) St John of God or the Sisters in this statement, although the statement of the Service Ethos does refer to "the great story of service entrusted to us by our founders". Yet it could well be argued that the man and the Sisters are essential elements of the conception of SJGHC and, as such, would be invaluable indicators of the uniqueness of SJGHC within the hospital environment. They would also provide a valuable conversion of abstract ideas into concepts with a substantive, human base.

This can be indicated by comparing the statements of vision and mission of six major private and public hospitals in the Perth metropolitan area, as shown in their websites. private retrieved May 6, 2017).¹

It is notable that there is much in common in the language used to articulate mission and vision among the six hospitals: they relate to quality health care, caring approach, service, outcomes and size, and use terms such as "amazing", "excellence" and "highest quality". However, one of the benefits of mission and vision statements is said to be their portrayal of the organisation's uniqueness (Darbi, 2012).

SJGHC's statements stand out with regard to its references to Christianity, which are foundational to the articulation of its standards and commitments. It seems likely that this uniqueness could be emphasised with reference to the real individuals whose actions and philosophies guided the early development of SJGHC. Those individuals and their contributions are not explicitly mentioned in these statements but are addressed in the Orientation program. The immediate question is whether their inclusion in the Orientation program appears to impact on new employees at the hospital.

Methodological Approach

To address this question, a mixed-methods approach to research has been used, employing both surveys and interviews. When the orientation session content was completed at each session over five months in 2016, the presenter left the room. Another officer then explained to participants that they had the opportunity to provide feedback on their session, and that the feedback would also be used in a research project. The Chief Investigator, a member of group management, saw no data until they had been collated and anonymised by the co-researcher. Responses in the questionnaire would allow the development of a Grounded Theory (Strauss & Corbin, 1997) relating to the applicability of information about St John of God, the Sisters and the Hospital to new recruits' approach and understanding of the mission, vision and values underpinning their work.

Subsequently, a number of participants in the orientation sessions were randomly ⁱⁱ approached to participate in later semi structured interviews, as described by Kvale & Brinkmann (2009). These took place after the employees had been in their roles for some months. It was emphasised that participation in the interviews was also voluntary and anonymous and because of the anonymity with which the questionnaires were completed, they could not be correlated with the interviews.

It should be emphasised here that a researcher who had no role in the organisation and therefore was not in a position to reward or penalise interviewees for their answers undertook the interviews. Nevertheless, we must acknowledge the possibility of respondents exhibiting a form of the Hawthorne Effect where experimental subjects adjust their behaviour simply because they are being studied, and adjust their responses to what they assume is hoped for by the researchers (McCambridge, Witton, & Elbourne, 2014). The unhelpfulness of answering according to assumptions about what the project was trying to achieve was stressed for each interviewee. However, that cannot guarantee that the effect was avoided.

A total of 120 surveys was analysed. These were taken across five sessions, over five months, and with the sessions conducted by two different presenters. The survey (see Appendix One) was trialled with an earlier orientation group before it was used in the project.

The survey comprised nine questions. The first six related to the participant's knowledge about (a)

St John of God's life; (b) the history of the SSJG, and (c) the history of the SSJG in Subiaco, the location of their first hospital. The last three questions related to more general considerations of the effectiveness of the session and asked: "Do you feel your own formation will be enriched by today's session?" "How valuable did you find your interactions with other participants?" and more broadly, "How valuable has this session been for you?"

The first six questions sought to determine how much each participant had increased his or her knowledge on the three entities, St John of God, the SSJG and the Sisters' hospital in Subiaco on the basis of the Orientation sessions. These required comparisons of knowledge levels before and after the orientation sessions. The post-session survey forms used 'retrospective pre-testing' (Siegel & Yates, 2007) rather than a traditional pre-test/post-test methodology. Participants were asked, at the end of the session, both how much they now knew on the subject and how much they had known before the session. Retrospective pre-testing has been validated as a more sensitive and valid measure than traditional pre/post assessment by a range of researchers (e.g. Skeff, Stratos & Bergen, 1992; Mueller, 2015). The principal benefit comes down to the fact that it is only after undertaking learning that an individual understands the field. Before undertaking the learning, the individual does not recognize how much or what there is to know and learn.

Data

For each session (1-5) the respondents rated their knowledge about (i) St John of God; (ii) the Sisters of St John of God and (iii) the St John of God Hospital in Subiaco, both before (k1) and after (k2) the Orientation session on a 5-point Likert scale. The difference in each participant's before and after knowledge (k2- k1) ratings was found and then the mean of all participants' k2- k1 was calculated. This mean is shown for each session in Column 2 of Table 1. The number of participants in the session is shown in Column 3, Na (actual) and the fourth column shows the number of participants who provided a valid response (Nv).

In a small number of instances, participants submitted an invalid response: the participant completed a rating for after-session knowledge but not for before-session knowledge, or vice versa. The total number of surveys received was 120. The total number of participants in the five sessions was 134, a survey completion rate of 90%.

	Mean of diffs (k2-k1)	Na (actual)	Nv (valid)
Knowledge of the life of	2.30	120	119
St John of God			
Knowledge of the SSJG	2.59	120	117
Knowledge of the history	2.48	120	116
of SJoGH Subiaco			

Table 1: Mean difference in the rating of pre- and post- session knowledge

This shows that the orientation participants judged that they had increased their knowledge about St John of God, the Sisters, and the hospital significantly as a result of the sessions. The mean increases across all valid responses were, respectively, 2.3, 2.6 and 2.5. In view of the fact that the Likert scales were of 5 points, these increases seem substantial. One tailed t-tests were performed on each of the data sets, confirming that the differences in self- assessment ratings before and after attending the orientation sessions were, in fact, statistically significant. That is, there is a mathematically confirmed relationship (i.e. beyond pure chance) between the self- assessment scores recorded prior to and after attending orientation.

It was also interesting to note that the vast majority of individuals whose survey responses did not indicate any increase in their knowledge had rated themselves as having a high level of knowledge prior to attending the program (i.e. it wasn't possible for their self-assessment scores to increase, based on the structure of the survey). As these individuals were included in our analysis of the differences in self-assessment ratings pre and post orientation (that is, these individuals would have had a difference between their pre and post self-assessment responses of nil), this suggests that the significance of the differences in self-assessment ratings as detailed above may actually be understated.

During the interview phase of the study, conducted some months after the orientation sessions and surveys, self-assessments of the increase in knowledge before and immediately after the session confirmed the tabulated data. In fact, the interviewees generally estimated their knowledge increase as being greater than the survey figures. This would at least be taken to mean the survey participants had not exaggerated their sense of knowledge increase in a flush of after-session enthusiasm.

The interviewes were also asked to compare their knowledge of the three entities <u>at the time of the interviews</u> with their pre-session knowledge and their immediately post-session knowledge. While the majority identified some loss of knowledge in the intervening period, all considered that their knowledge at the time of the interview was greater than it had been before the session. So the orientation sessions were viewed as having a sustained effect on the participants' knowledge of St John of God, the Sisters and the SJGHC.

The next question to consider is how relevant this is to the Hospital's operations. Obviously, mere increase in knowledge is of little relevance since this is not a history class but an induction process for a working hospital. The surveys asked the question, "To what extent do you feel your knowledge of these matters will impact on you in your role at SJGHC?" Participants were again asked to respond to this on a 5-point Likert scale. The mean of these 120 responses was 4.13 and both the median and modal values were 4. This is indicative of a strongly positive response to the question; although the standard deviation of 0.84 shows that there were still a number of outliers who were sceptical about the information's application to their individual roles.

The semi-structured interviews included a focus on the degree to which these new employees considered, after a few months on the job, this environment and ethos to be unique. There was a strong preponderance amongst the interviewees, suggesting it was indeed unique, and the uniqueness derived from the historical heritage. They commonly referred to the historical background, and particularly to the Sisters and the values they represented, which it was claimed, are still prominent in the Hospital's ethos.

"There is a definite connection between (this hospital) and the Sisters regarding friendliness and care. There is a different culture, with the emphasis on how to behave right from the start."

"It is a unique environment because of its mission and values. Everyone is aware of them and has some understanding of them, more so than in other workplaces I have experienced."

The interviewees were asked whether their knowledge of the historical antecedents of the hospital had been influencing their work since joining the hospital. There was a range of points raised in discussion of this matter. It was generally suggested that the values illustrated by the lives of St John and the Sisters were a valuable base for working in the hospital. For the interview subjects, the greatest impact seems to have come from the SSJG. This was the case despite the fact that the Sisters are no longer in work roles in the Hospital. Approximately 60 Sisters still live on the same site as the hospital, and on a daily basis are seen walking through the hospital, using the coffee shops, and visiting the chapel. Many remain well-connected with current staff, and will stop and chat, so their legacy continues at Subiaco in a way which is different to other SJGHC sites. Their selfless dedication was considered "touching" and a valuable role model. While other hospitals are more practical and utilitarian, they "...would probably have these values as well, but there are probably more reminders of these values here." At the same time, one participant contended that, while the stories were interesting, they were of little practical use and did not impact on that person's approach to work.

The survey also asked whether respondents anticipated that their own formation would be enriched by the session they attended. The concept of formation had been presented during the orientation program with discussion about its being linked to finding meaning and purpose and intrinsic motivation for work, with a translation from thinking and feeling into behaviour and action.

According to the Catholic Mission (n.d.) website:

Mission Education/Formation is a transformational process. It refers to the forming or shaping of the whole person, not just the cognitive but the spiritual, to take up and carry on the mission of Jesus Christ in the world. It helps individuals explore how to be Church in their context, how to live by Gospel values and how to work so that all people have a 'fullness of life'.

The question was thus asking about the degree to which consideration and understanding of the historical antecedents of SJGHC would not only influence the individual's more superficial working habits and attitude, but would also have an impact on their deeper, spiritual outlook. If it impacted significantly, we might assume that this would have a longer-lasting and more fundamental effect on their approach to their roles. Responses to this question were very positive, with a mean response of 4.2. The modal value this time was 5 and the median again 4, with a S.D. of 0.86. These data, then, show a still stronger affirmation of the session's effect.

It is likely that, as much as the intricacies of the concept of formation were presented and elaborated on, some participants simplified it down to an identification with the history of the hospital and a

sense of continuity with this. This would not be particularly concerning. Formation is neither a commonly used nor a simple concept. Many employees in the hospital would not be adherents to any particular faith so it might be expected that any sense of formation, let alone the specific one presented by Catholic Mission or in the orientation session, would be peripheral for them. Nevertheless, if their understanding of the hospital's foundation in Vision, Mission and Values and in cultural background is consistent with a more theoretical sense of formation, the orientation purpose would seem to be being met.

The strongly positive responses to the survey questions about whether the session would impact on the individual's role and on her or his formation, along with the comments, suggest we can arrive at a clear affirmation of two of our original Research Questions:

- Do new employees believe that the orientation program is helping them find meaning and purpose in their work?
- Do new employees believe that the orientation program is encouraging them to behave in ways aligned to SJGHC values?

The objectives of the orientation program, as set out in the SJGHC training package, include enabling participants to come to "appreciate that values must be embedded in actions and behaviour" and "appreciate the importance of mission, vision, values and heritage for all caregivers". The additional comments within the survey form, as well as from the interviews, confirm a strong acceptance of the central importance of values, mission and vision and heritage in the mindset and the behaviour of employees at SJGHC. There is a clear trend within the comments, indicating that the orientation program did indeed provide a welcome foundation for both a sense of meaning and purpose as participants commenced their employment.

The emphasis on SJGHC's Mission, Vision and Values and on its historical antecedents, together with the participants' positive response to these, as reported above, give a powerful indication that the orientation program is achieving its goal of creating an alignment between the attitudes of new employees and the Mission, Vision and Values of SJGHC. The data also indicates that this effect continues beyond the first flush of enthusiasm at the end of the program and, at least, to some months later. Research currently under way should assist in establishing whether the clients of the hospital judge staff members' practice to be similarly aligned.

Conclusion

In this paper, it is posited that the non-clinical aspects of a hospital's operations are of vital importance to ensuring best practice and that the hospital's statements of Vision, Mission and Values provide a vital tool for achieving best practice. Whilst it is found that hospitals tend to have very similar statements, in the Perth environment, the SJGHC statements differ in regards to their reference to the Christian story and ministry.

The sample of employees beginning at the hospital over a five month period are shown to have been confident that they believed there are features which make this hospital unique. They believed they retained knowledge about the historical entities whose beliefs, values and practices had been fundamental to the hospital, and they believed that their own work in the hospital had a resonance with the SJoGH Mission, Vision and Values.

The strategy in this project focused on the orientation program participants' own reflections on their retention of information about the features that arguably make SJGHC unique, and on the impact of this information on their approach to their roles at the hospital. The authors are in the early stages of research about patients' and patients' visitors' responses to the work practices of the Hospital's staff. While these data, when completed, will not provide a causal link between new employees' perceptions of the efficacy of the orientation program and the quality of their practice as judged by patients and their visitors, they will usefully complement the outcomes of this project.

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Appendix One: Survey Instrument

 To what extent were you Not at all Very familiar with the biography of St John of God before 1 2 3 4 5 you attended this workshop? 2. To what extent do you Not at all Very now feel familiar with the life of St John of God? 3 5 3. To what extent were you familiar with the story of Not at all Very the Sisters of St John of God before you attended 3 this workshop? 4. To what extent do you Not at all Very now feel familiar with the story of the Sisters of St 3 John of God? 5. To what extent were you Not at all Very familiar with the history of St John of God, Subiaco 3 before you attended this workshop? 6. To what extent do you Not at all Very now feel familiar with the history of St John of God, Subiaco? 7. To what extent do you feel Little Significantly your knowledge of these matters will impact on you in your role at \$10G? 8. To what extent do you feel Little Significantly your own Formation will be enriched by today's session? 9. How valuable did you find Not at all Extremely your interactions with other participants? 1 5 Not at all Extremely How valuable has this 8 9 2 3 4 5 6 session been for you? 11. Why did you choose this rating?

Endnotes

ⁱ Bethesda Hospital; Hollywood Private Hospital; Fiona Stanley Hospital; Fremantle Hospital; Royal Perth Hospital and Sir Charles Gairdner Hospital.

ⁱⁱ The invitation to participate in an interview was not entirely random, because it was impractical to arrange an interview time for certain employees who might be called away for emergencies or other unforeseen situations. Those occupying such roles were excluded from the interview schedule. However, no other selection criteria were employed.