

5-2006

Barriers to a Consistent Philosophy: An Analysis of the Department of Health and Human Services Division of Licensing and Regulatory Services

Emily R. Hoberg

University of Southern Maine, Muskie School of Public Service

Follow this and additional works at: https://digitalcommons.usm.maine.edu/muskie_capstones

Recommended Citation

Hoberg, Emily R., "Barriers to a Consistent Philosophy: An Analysis of the Department of Health and Human Services Division of Licensing and Regulatory Services" (2006). *Muskie School Capstones and Dissertations*. 30.

https://digitalcommons.usm.maine.edu/muskie_capstones/30

This Capstone is brought to you for free and open access by the Student Scholarship at USM Digital Commons. It has been accepted for inclusion in Muskie School Capstones and Dissertations by an authorized administrator of USM Digital Commons. For more information, please contact jessica.c.hovey@maine.edu.

Barriers to a Consistent Philosophy:
An Analysis of the Department of Health and Human
Services Division of Licensing and
Regulatory Services

Emily R. Hoberg
Health Policy and Management Program
University of Southern Maine

Gino Nalli, Capstone Advisor
Beth Kilbreth, Second Reader

May 2006

Table of Contents

Executive Summary

Introduction

Goals and Objectives

Background/Literature Review

Methodology

Survey Instrument Results

Interview Results

Analysis of Results

Recommendations

Study Limitations

Conclusions

Integration of HPM Coursework

Acknowledgments

Bibliography

Attachments

Appendix A-Interview Protocol for Department and Division Representatives

Appendix B-Interview Protocol for Provider Representatives

Appendix C-Survey Instrument

Appendix D-Analysis of Survey

Appendix E-IRB Approval

Executive Summary

In 2004, under the directive of the Governor and the Legislature, Maine's Department of Human Services and department of Behavioral and Developmental Services merged to form the Department of Health and Human Services. As a result of the merger, the Division of Licensing and Regulatory Services was created to coordinate all licensing activities of the newly merged department. This report focuses on the merger of the two licensing divisions and identifies the barriers to the development of a consistent philosophy, focusing on the development of a consistent culture. Through interviews with Department and Division representatives and representatives of the provider community, the principal barriers to reaching a consistent culture became apparent. The principal areas of concern were the need to determine what the role of licensing is; difficulties merging two cultures into one; the difficulty of embracing a new culture; and issues revolving around communication. After an analysis of the barriers, recommendations were developed. Recommendations include: development of a task force to study the role of licensing; development of a task force to re-examine the licensing regulations; re-evaluation of staffing hours and other work conditions; development of a universal database system and additional technical upgrades; need for a single physical location; and improvements in communication.

Introduction

In his January 2003 Inaugural Address, Governor of Maine John E. Baldacci promised that his Administration would implement comprehensive reform efforts to improve government services to the citizens of Maine. Subsequently, the Governor established the Advisory Council for the Reorganization and Unification of the Department of Human Services and the Department of Behavioral and Developmental Services. The Council determined that "a merger was absolutely essential if Maine's Human Service systems were to achieve improved service, increased efficiency and improved relations with clients."¹ On July 1st, 2004 under Public Law Chapter 689, the Department of Health and Human Services ("DHHS" or "Department") was established by reorganizing and merging the former Department of Human Services ("DHS") and the former department of Behavioral and Developmental Services ("BDS"). The law established the new Department as a cabinet level department with full responsibility for all programs previously served by DHS and BDS.

The Governor and the Legislation's objective in creating the new Department was to establish "a system of human services that is cost effective, of the highest quality, and responsive to the needs of consumers."² The law required that attention be paid to: "(a) improved client-covered services, (b) increased efficiencies; and (c) improved relations with community organizations."³ The mission of DHHS is to "provide health and human services to the people of Maine so that all persons may achieve and maintain their optimal level of health and their full potential for economic independence and personal development."⁴ The statutory philosophy of the new Department is to "improve the health and well-being of Maine residents; treat consumers with respect and dignity; treat

service providers with professionalism and collegiality; value and support department staff as the critical connection to the consumer; involve consumers, providers, advocates and staff in long-term planning; use relevant, meaningful data and objective analyses of population-based needs in program planning, decision making and quality assurance; and deliver services that are individualized, family-centered, easily accessible, preventive; independence-oriented, interdisciplinary, collaborative, evidence-based and consistent with best practices.”⁵ The programs and services of the Department include among others, economic assistance and employment support services; mental health and behavioral health services; mental retardation and developmental disability services; physical health services; public health services; substance abuse services; child welfare services; and long-term care services.

The objectives of the consolidation were to: “standardize processes; standardize standards and terminology; leverage synergies; manage interactions with Fire Marshal’s office; maximize efficiency; eliminate duplication of effort and conflicting requirements; ‘one-stop’ shopping for licensure; sharing of information across disciplines; and implement “deeming” as appropriate.”⁶ As a step to reach these objectives, the Department was divided into the following units: the Health, Integrated Access and Strategy Unit; the Operations and Support Unit; the Finance Unit; and the Integrated Services Unit.⁷

Prior to the merger, both DHS and BDS had individual licensing divisions. The Restructuring and Unification Council recommended that all licensing activities be consolidated into a single unit to achieve the guiding principles of DHHS.⁸ The single unit would coordinate licensing activities by applicant and would coordinate and

consolidate licensing visits. The goal of the new Division of Licensing and Regulatory Services ("Division") would be a 'one-stop' licensing center for the new Department.

Prior to the merger, the two separate departments licensed and certified different organizations and services. DHS consisted of the following divisions: Office of Management and Budget; Bureau of Family Independence; Bureau of Medical Services; Bureau of Health; Bureau of Child and Family Services and the Bureau of Elder and Adult Services. BDS licensed agencies and organizations that served adults and children with mental illness; mental retardation; developmental disabilities; autism and addiction disorders.⁹ In addition, the Office of Substance Abuse was under the umbrella of BDS. Title 22 of the Maine State Legislature outlined the rules for the former DHS while Title 34-B outlined the rules for the former BDS. The two sets of titles, which outline specific obligations for the covered agencies, are still in use today despite the merger of the two departments.

The new Division of Licensing and Regulatory Service is located under the unit of Operations and Support. The Division has four principal subunits which are the Medical Facilities Unit; Community Services Programs; Institutional Abuse Unit and the Certificate of Need Unit. The Medical Facilities Unit currently certifies and licenses 1,572 active providers. The Community Services Programs currently licenses 3,800 active providers. Entities licensed by the Medical Facilities Unit include hospitals, hospice and rural health centers as well as others. The Community Services licensing unit surveys and licenses providers such as assisted living centers, mental health programs and day care programs.

The recently developed mission statement for the Division states that “the purpose of the Division of Licensing and Regulatory Services is to support access to quality and effective health care and social services for Maine citizens by developing and applying regulatory standards that help people have safe and appropriate outcomes.”¹⁰ In addition to the mission statement, guiding principles for the Division have been developed. As of April 12, 2006, the guiding principles of the Division are:

- Broadly accepted regulatory standards are achieved by collaboration with policy experts, providers, consumers and families.
- To the extent possible, standards incorporate practices which research shows are effective in helping people have safe and appropriate outcomes.
- The regulatory process is flexible, and promotes and rewards actions that improve quality and incorporate accepted best practices.
- Before a requirement is adopted, the burden imposed by the requirement is measured against its benefit.
- The degree to which standards are designed to minimize or eliminate risks is based on the nature and potential severity of the risk.
- Redundancy of regulation, including duplication of requirements imposed by non-state licensing/certification authorities, is avoided.
- Technical assistance is provided, when requested and as appropriate, and providers are allowed a reasonable amount of time to achieve compliance when violations do not constitute an immediate risk of harm.
- Enforcement measures are proportional to the scope and severity of the violation.
- Whenever an immediate risk of harm is identified, immediate action must be taken to mitigate the risk.
- Regulatory requirements are applied in a consistent, fair and predictable manner, and ample opportunity for discussion about the meaning of rules is provided.
- Cultural sensitivity is reflected in licensing rules and operating procedures.
- Providers have formal and informal opportunities to challenge findings and conclusions.¹¹

Prior to the merger, the different licensing units within the Division applied different approaches toward licensing and these differences have been carried into the new merged Division.¹² These different approaches may be due to statutory requirements, different licensing responsibilities or a different cultural attitude towards

licensing. In this situation, culture refers to the relevant practices and values in which the Department conducts its business, both within the Department and externally. For instance, a licenser from one department may view their job as simply checking to make sure that the agency is in compliance whereas another licenser may feel that there is a component of instruction in their job, in addition to the licensing function. An additional issue may be that the different licensing units apply different and inconsistent vocabulary, standards and measures of quality.¹³ Due to these differences, the various licensing units within the Division have inconsistent approaches toward their licensing responsibilities.

In 2005, legislation was passed by the One Hundred Twenty-Second Maine State Legislature to assist in the transition for the new Department. PL 2005 CH 12, Part NN was intended to reduce regulatory and administrative burdens for health and human service providers.¹⁴ The law instructed the Commissioner of Health and Human services to organize and implement work groups with a goal to achieve a reduction in the costs of regulatory and administrative processes in each group area. Three departmental specific workgroups were formed: a) auditing; b) contracting/billing and c) licensing. In addition, an Administrative Process Oversight Group oversaw the process and developed the final work product. The workgroups examined the administrative burdens and developed recommendations to reduce or eliminate those burdens. Members of the workgroups delivered a report in February 2006 to the joint standing committee of the Legislature having jurisdiction over health and human services matters and the joint standing committee of the Legislature in appropriations and financial affairs. Various recommendations were made.¹⁵ The recommendations of the auditing workgroup were:

- a) Ensure consistent application of MAAP compliance reporting and accurate representation of contract activity specific to MAAP compliance within

community agencies (CAs). Ensure that MAAP and Federal Single audits are conducted in accordance with applicable standards.

- b) Coordinate or develop uniform reporting requirements for Medicaid and MAAP. Assign an audit with a designated lead auditor that uses a coordinate scheduling process to reduce multiple interpretations and duplication of work, requests and reports. Streamline the number of required reports and their varying deadlines by reporting on all funding services in one report.
- c) Revise selected sections of the MAAP Statute and Rules to reduce unnecessary inconsistencies in audit requirements across state and federal audits and streamline processes so that they (i) are consistent with and complementary to A133 federal audit requirements where appropriate and (ii) reduce burdens to state Office of Audit (OA), Independent Public Accountants (IPAs) and community agencies while maintaining accountability.

The recommendations of the contracting/billing workgroup were:

- a) Provide consistent, timely and accurate communication/technical assistance to all contracted providers.
- b) Ensure that agreement formats are consistent and streamlined to contain only essential information.
- c) Ensure that agreement processes are clear, streamlined and consistently implemented. Agreement processes allow adequate time for providers to meet deadlines.
- d) Ensure that service, performance and financial reporting processes are efficient and useful to both parties.
- e) Payment and financial settlement processes are clear, efficient and consistently implemented.

The recommendations of the licensing workgroup were:

- a) Streamline the licensing process by: coordinating the licensing standards across the Department and across collateral surveyors (e.g. Fire Marshall, Rights of Recipients, etc); deeming a provider in compliance (in whole or in part) with state licensing requirements when the provider is in compliance with comparable standards applied by a nationally recognized and state approved accrediting body or by the federal government, to the extent feasible; and streamlining standards and the survey process to minimize

duplication and ensure that state standards add value to the licensing function for federally certified providers.

- b) Allow licensing greater feasibility in determining the appropriate scope, frequency and focus for periodic surveys, depending on provider performance.
- c) DHHS leadership should champion the implementation of recommendations to streamline and create consistency and expand DHHS capacity to fulfill its licensing responsibilities.
- d) Assure the consistent applications of licensing requirements within and across programs, appropriately balancing the Division's enforcement responsibility with its responsibility to improve provider quality by providing technical assistance; define clear boundaries between other department functions (e.g. contracting and MaineCare) and ensure that the approach and standards are consistent and mutually supportive across these functions.

After the recommendations were drafted, the workgroups developed work plans and timetables to assist in the implementation of the various recommendations.

Goals and Objectives

The final recommendation of the licensing workgroup is the focus of this capstone. The workgroup's intent for the recommendation is to reach a consistent practice as reflected in a consistent philosophy ("Consistent Philosophy"). The hypothesis of this capstone is that by creating a Consistent Philosophy, the various units of the Licensing Division will have a clear understanding on what their role should be in the future. The Consistent Philosophy will articulate the manner and practices that the new Division will utilize in all of its functions. There are multiple inputs to reaching a Consistent Philosophy. These inputs include statutory requirements; past history; the impact of different agencies and advocacy groups and the culture of the various units. The focus needs to be placed on the need of DHHS to establish a consistent culture ("Consistent Culture") to achieve a consistent practice for licensing services. By

developing a Consistent Culture and, in combination with other factors, a Consistent Philosophy, the Department will see many benefits including cost savings by acting consistently and the Department's accountability will be strengthened by having a consistent understanding of the Division and by consistent and coordinate application of licensing standards.¹⁶

The focus of this capstone is on the merger of the two licensing departments and identifies the barriers to the development of a Consistent Philosophy, focusing on the development of a Consistent Culture. After an analysis of the information, recommendations are made on how the new Licensing Division can achieve a Consistent Culture to reach a Consistent Philosophy. This capstone examines the following questions:

- a) What were the reasons for the merger?
- b) What were the attitudes and feelings from both departments prior to the merger?
- c) What has been the reaction since the merger?
- d) How are these issues being addressed?
- e) Is there the presence or absence of a Consistent Philosophy?
- f) What factors are permitting or limiting the presence of a Consistent Philosophy?
- g) What are the recommendations to achieve a Consistent Philosophy?
- h) Is there the presence or absence of a Consistent Culture?
- i) What factors are permitting or limiting the presence of a Consistent Culture?
- j) What are the recommendations to achieve a Consistent Culture?

Background/Literature Review

To understand the complexities of the merger of DHS and BDS into DHHS, basic components and characteristics of mergers need to be understood. Mergers in the private sector occur for various reasons. The rise of merger activities has been attributed to: "increased competition, the search for economies of scale, the influence of social networks and personal relationships, attempts to gain market power, the quest for financial and operational synergies, empire building by corporate leaders, response to economic disturbances, and shifts in the enforcement of antitrust laws."¹⁷ Mergers may not have a positive effect on business. Less than half of mergers are successful among private companies.¹⁸ Barriers to implementation of a merger may include resistance to change; doing things the way they have always been done; the wish to protect jobs and status; federal funding streams and requirements; lack of resources and the lack of authority to effect change.¹⁹ The barriers that often cause these mergers to fail are also found in mergers of non-profit organizations or departments.

Key stages in a merger include deciding to merge the departments; planning the merger; implementing the merger; and following up on the merger.²⁰ During the planning and the implementation stages, many organizations are not sufficiently focused upon factors such as the pace of activity within the new organization or department; the methods of oversight; the human resources considerations; communication and obtaining acceptance of everyone involved of the entire merger integration process.²¹ Issues that must be taken into account and looked at when two organizations/departments merge are differences in leadership style, managerial decision making, measuring employee performance and internal business strategies.²² Lessons learned from various public

sector mergers include: learn lessons from previous mergers in different sectors; identify benefits of the merger beyond cost savings; communicate openly; find clear benefits for employees; and be clear about the mission and the desired results.²³

Frumkin argues that the five critical areas to focus on during a merger of government agencies are: "choosing targets wisely; communicating effectively; implementing quickly; creating a new culture; and adjusting over time."²⁴ As indicated, the cultures of the prior organizations/departments and the newly formed unit are crucial to the success of the merger. Galpin argues that cultural components include: "rules and policies; goals and measurements; customs and norms; training; ceremonies and events; management behaviors; rewards and recognition; communications; physical environment; and organizational structures."²⁵

Cultural issues that may arise should be examined and studied as soon as feasibly possible. Culture can help define how an organization or department "translates its business strategy into customer value; manages and rewards its people and structures day to day work activities."²⁶ An additional definition of organizational culture includes "what is valued, the dominant leadership style, the language and symbols, the procedures and routines, and the definitions of success that characterizes an organization."²⁷ A key component of an organization's culture is communication. In addition, an organization's culture may be affected by many factors including the "founder's personalities, the original business environment and the initial successful ways of doing things".²⁸

The starting cultures of the two merging organizations or units should be determined. Whereas a broader spectrum can be utilized, the culture of the organization can be described as either weak or strong. A weak culture may be characterized by the

following: "a lack of clarity about goals; confusion or confrontation over values and management styles in the same organization."²⁹ Arguments for developing a strong culture in the resulting department include: "speed of decision making; emotional attachment of employees; and the ability to avoid post-merger confusion through well-articulated and well communicated norms and standards."³⁰ By understanding the culture of the starting organizations, it can be determined how well the newly merged organization will function. For instance, if the two merging organizations both had strong cultures, it might be difficult for a consistent practice to emerge. Another potential issue is if one of the organizations has a significantly stronger culture than the other, the stronger culture might be dominant over the other in the newly formed merged organization.

Schreyogg describes the issue of how to handle culture along the following four dimensions and their related questions: a) consistency-what degree of cultural consistency is required across the two cultures to make the merger a success?; b) diversity-what degree of cultural diversity is preferred; c) realization-up to what degree can long-standing cultures be made subject of a transformative change at all?; and d) dominance-is one of the two cultures in question intended to become the dominant one.³¹

The starting cultures of the organization can be analyzed to determine what is the cultural goal of the new organization. During this analysis, the resistors to the change will become apparent. This analysis can be utilized to determine the variance and will produce recommendations to create a consistent culture. A crucial factor in an organization's culture and the success of a merger is communication. The culture of an organization can either be communicative or non-communicative. There is a greater

possibility of failure of the merger and organizational cultural difficulties if the organization is considered to be non-communicative.

A barrier to reaching a Consistent Culture within an organization is the potential resistance to change. Friskin argues that "a critical element in institutionalizing change is the construction of a new organizational culture, one that is different from those existing in any of the merged agencies. Breaking free from existing routines, traditions and customs does not mean obliterating everything and starting anew. Instead, it requires the selective adoption of those cultural artifacts that are positive and the elimination of those that are counterproductive."³² Organizational change must be managed for the employees to 'buy-in' and support the change. The stages of implementing organizational change are: identifying the need for and nature of necessary changes; planning for implementing organizational changes; implementing organizational changes; and evaluating organizational changes.³³ People may resist change due to their background and prior experience. Additional reasons for resistance to change can include insecurity, inconvenience, resentment of control, and potential social and economic losses.³⁴ Resistance can be reduced through various techniques including education and communication; participation and involvement; facilitation and support; negotiation and agreement; manipulation and co-optation; and explicit and implicit coercion.³⁵ Each technique has advantages and disadvantages and can be applied to specific situations.

The literature describing the various cultural components and what makes public sector mergers successful served as important background information for the analysis of the information received during this study. A report issued by the United States General Accounting Office provided a methodology for this capstone. The report issued in 2003

entitled. "Results-Oriented Cultures Implementation Steps to Assist Mergers and Organizational Transformation" suggests key practices and implementation steps that should be taken for a successful merger.³⁶ The key practices are listed below with related questions to the merger of the DHHS licensing departments:

- a) Ensure top leadership drives the transformation.
- b) Establish a coherent mission and integrated strategic goals to guide the transformation.
- c) Focus on a key set of principles and priorities at the outset of the transformation.
- d) Set implementation goals and timeline to build momentum and show progress from day one.
- e) Dedicate an implementation team to manage the transformation process.
- f) Use the performance management system to define responsibility and assure accountability for change.
- g) Establish a communication strategy to create shared expectations and report related progress.
- h) Involve employees to obtain their ideas and gain their ownership for the transformation.
- i) Build a world class organization.

The literature review provided a background to understand the complexities of mergers and the difficulties of combining cultures. The literature and the GAO Report assisted in the development of interview questions.

Methodology

A literature review was conducted concerning mergers of private and public organizations and the complexities of combining two organizations' cultures into one cohesive culture. After the literature review, a set of interview questions was developed for semi-structured interviews with internal representative of the Department and the Division. Top leadership and middle management staff were interviewed. The GAO framework formed the basis for the development of interview questions. The questions highlighted the key points of the GAO Report. An additional set of interview questions

was utilized to interview representatives of the provider community, trade associations and advocacy groups that have a significant amount of interaction with the Division. The related interview protocols are attached as Appendices A and B, respectively. A total of fourteen semi-structured interviews were conducted: ten with representatives of the Department and Division and four with provider representatives. The identities of both the interview subjects and the survey subjects will not be revealed in this report.

A survey instrument was utilized to supplement the semi-structured interviews. The licensors and surveyors of the Medical Facilities Unit and the Community Services Unit of the Division were surveyed to determine their perspectives concerning the merger and the quest for a Consistent Culture. Employees of the Division participated in a phone survey concerning issues related to the merger of the DHS and BDS licensing divisions. Program specialists and community care workers from the Assisted Housing, Adult Day Care unit, Mental Health/Substance Abuse, Children's Residential, Children's Day Care South and Children's Day Care North from the Community Services Licensing division were surveyed. Licensors/surveyors from the central office, the Augusta district office, the Bangor district office and the Portland district office of the Medical Facilities Unit were surveyed. The table below indicates who was surveyed from each unit.

<u>Unit</u>	<u>Office/Sub-Unit</u>	<u>Number of Licensors/Surveyors who responded to survey</u>
Medical Facilities Unit	Central Office-Augusta	9
	Augusta	3
	Bangor	6
	Portland	5
Community Services Unit	Assisted Housing Adult Day Care	4
	MH/SA Children's Residential	3
	Children's Day Care South	3
	Children's Day Care North	3

Due to the nature of their job and being away from the office conducting surveys, there was difficulty in reaching all of the licensors/surveyors. Due to this issue, not all of the licensors/surveyors were surveyed for this capstone.

The survey focused on how the employees feel about the Department and the Division and whether they believe that the Department and the Division are working efficiently. The survey questions were asked to gauge the employees' thoughts on whether or not a Consistent Philosophy is currently present and whether or not there is a need for a Consistent Philosophy. The survey instrument is attached as Appendix C.

Survey Instrument Results

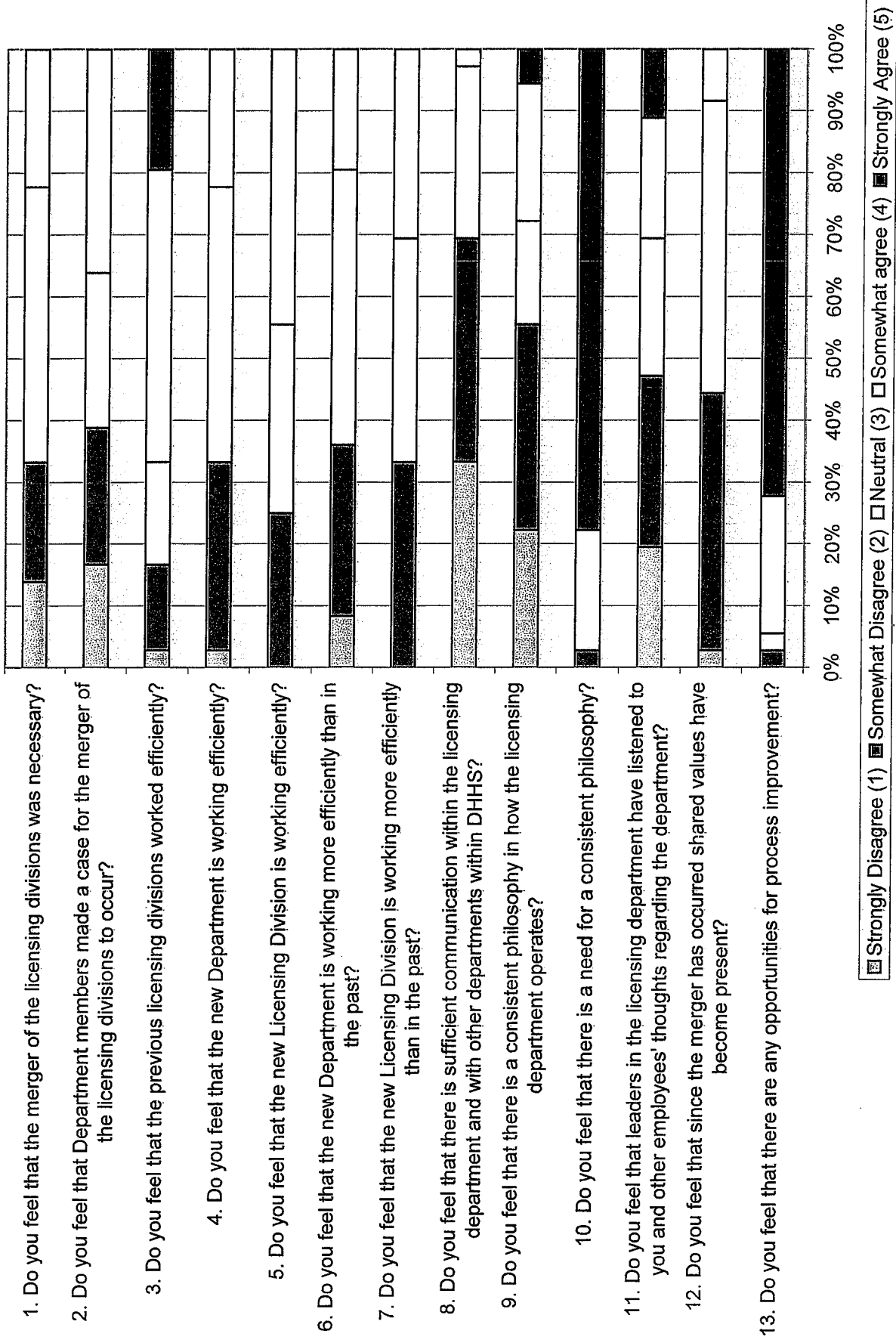
Respondents answered the survey questions using the following rating system: a score of 1 indicated strong disagreement; score of 2 indicated mild disagreement; score of 3 indicated neutrality; score of 4 indicated mild agreement and a score of 5 indicated strong agreement. Thirty-six individuals participated in the survey; twenty-three from the Medical Facilities Units and thirteen from the Community Services Units.. The results

were organized by location and particular licensing unit. (Appendix D) Below is a chart reflecting the overall results of the survey.

Overall Results

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Mean	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	5	7	16	8	0	2.75	0.9673
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	6	8	9	13	0	2.81	1.1166
3. Do you feel that the previous licensing divisions worked efficiently?	1	5	6	17	7	3.67	1.0420
4. Do you feel that the new Department is working efficiently?	1	11	16	8	0	2.86	0.7983
5. Do you feel that the new Licensing Division is working efficiently?	0	9	11	16	0	3.19	0.8333
6. Do you feel that the new Department is working more efficiently than in the past?	3	10	16	7	0	2.75	0.8742
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	12	13	11	0	2.97	0.8102
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	12	13	10	1	0	2.00	0.8619
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	8	12	6	8	2	2.56	1.2293
10. Do you feel that there is a need for a consistent philosophy?	0	1	0	7	28	4.72	0.6146
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	7	10	8	7	4	2.75	1.2956
12. Do you feel that since the merger has occurred shared values have become present?	1	15	17	3	0	2.61	0.6878
13. Do you feel that there are any opportunities for process improvement?	0	1	1	8	26	4.64	0.6825

Below is a pictorial analysis of the overall survey results:



As indicated in the chart, responses were varied. A few respondents felt that they had not been with the Division long enough to provide an adequate answer. In this situation, many provided an answer of neutral. In addition, some respondents seemed apprehensive about participating in the survey. On most questions, there was not a consistent answer. However, as can be indicated by the above graph, certain questions elicited a strong reaction. A significant amount of variation was found on the questions regarding the efficiency of the Department and the Division. A consensus cannot be reached on these questions. Seventy percent of the respondents felt that communication within the Division and other departments of DHHS was not sufficient. Fifty-five percent of respondents felt that a consistent philosophy was lacking. A significant majority (eighty percent) indicated that they feel that a consistent philosophy is needed for the licensing division. While many of the responses appear to be negative, seventy percent stated that in their opinions there were opportunities for process improvement in the future.

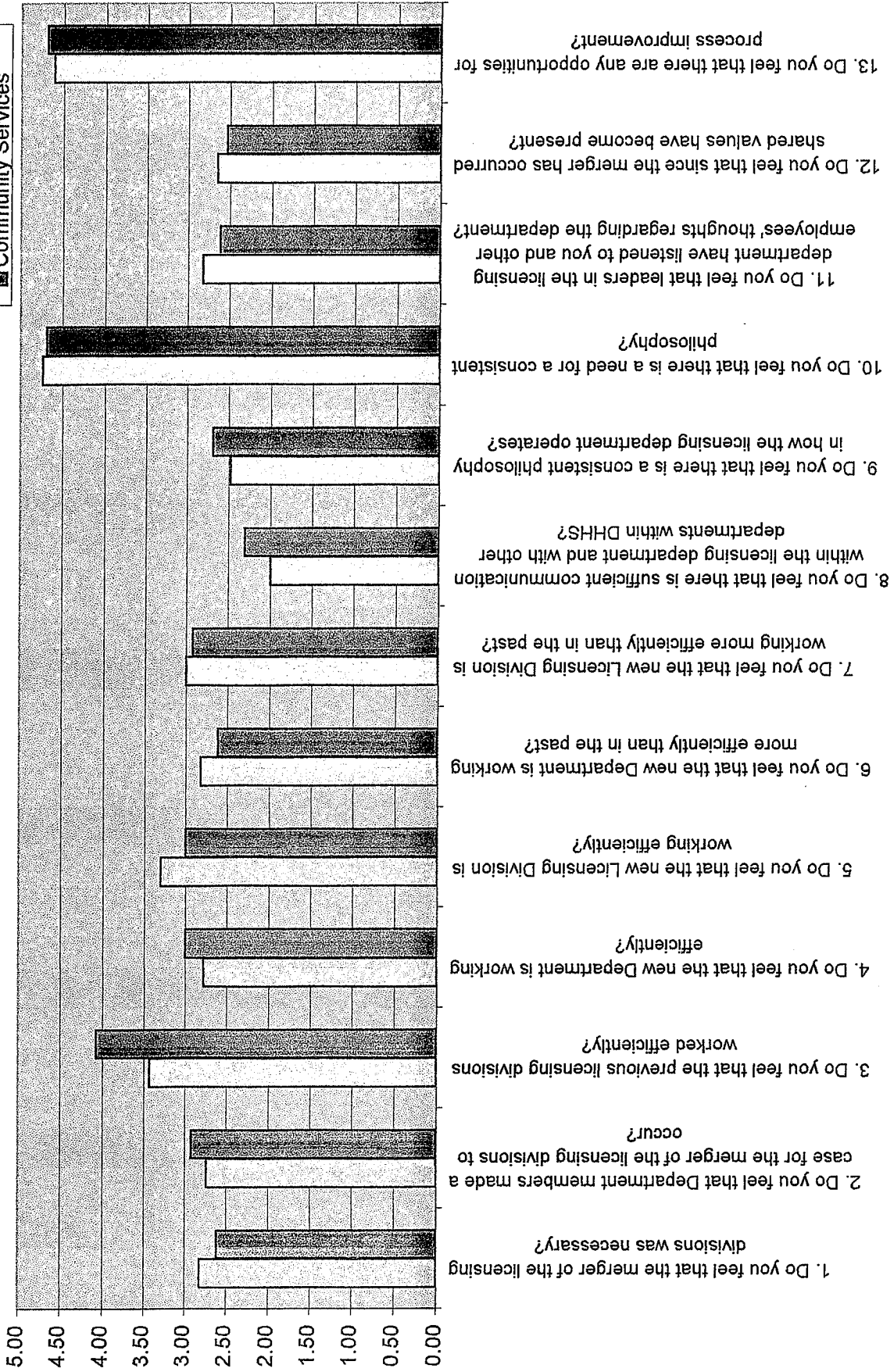
When compared, the responses from the former DHS and the former BDS units were similar and did not vary to a strong degree. The chart below compares the mean scores of the two former departments.

Question	Medical Facilities (DHS)		Community Services (BDS)	
	Mean	Standard Deviation	Mean	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	2.83	0.9367	2.62	1.0439
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	2.74	1.0962	2.92	1.1875
3. Do you feel that the previous licensing divisions worked efficiently?	3.43	1.0798	4.08	0.8623
4. Do you feel that the new Department is working efficiently?	2.78	0.7952	3.00	0.8165
5. Do you feel that the new Licensing Division is working efficiently?	3.30	0.7648	3.00	0.9129
6. Do you feel that the new Department is working more efficiently than in the past?	2.83	0.7777	2.62	1.0439
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	3.00	0.7977	2.92	0.8623
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	2.00	1.0445	2.31	1.0316
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	2.48	1.1627	2.69	1.3775
10. Do you feel that there is a need for a consistent philosophy?	4.74	0.4490	4.69	0.8549
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	2.83	1.3022	2.62	1.3253
12. Do you feel that since the merger has occurred shared values have become present?	2.65	0.6473	2.54	0.7763
13. Do you feel that there are any opportunities for process improvement?	4.61	0.5830	4.69	0.8549

The following pictorial chart provides a comparison of the mean scores.

Comparison of Former DHS and Fomer BDS

Medical Facilities (DHS)
 Community Services



As indicated by the graph above, the responses of the two former departments did not differ significantly. However, on a few questions, there was variation in the responses. The former BDS employees felt more strongly that the previous licensing division worked efficiently. In addition, the Medical Facilities employees felt more strongly than the other employees that the new division was working efficiently. The former DHS employees felt that communication was a more significant problem than the former BDS employees. Overall, many surveyed indicated that they felt that over time, with increased leadership and communication, positive changes could occur.

Interview Results

Conversations with employees and providers indicated where the benefits and the weaknesses of the merger exist. These conversations shed light on what needs to be altered and changed to reach a Consistent Culture. A top leader within the Department stated that the benefits of the merger may include enabling the Division to be more efficient and effective, an ability to deploy resources more efficiently due to centralization, an ability to strengthen management, and an opportunity to improve the skills of the individuals involved in the licensing process. This individual leader hopes that, from a consumer standpoint, the merger will result in a 'one-stop' shopping experience which will result in standardization. A provider argued that the merger would be beneficial if it resulted in more resources for the Division. Another provider argued that the benefits could include making the job of licensing more manageable, providing a clearer sense of identity, potential cost savings, a sense of working together as partners, recognition of doing work that is needed to be done, and the possibility of cross training.

Some of the obstacles that were mentioned included the fact that licensing functions have developed in separate silos with different philosophical foundations. Additional obstacles include having to re-engineer staff to change how they conduct their business and asking people to leave their comfort zones and enter willingly into the unknown.

Conversations with employees of the Division and provider representatives provided insight into whether they feel that these benefits will be reached. One barrier to accomplishing these benefits is the current lack of a consistent culture. The cultural inputs in the case of the Division include the type and nature of work performed, the work environment, the attitudes of the employees and the role and ease of communication. The four main areas of concern that arose during these conversations were: a) what is the role of licensing; b) issues involved in merging two different cultures together into one; c) issues with embracing the new culture; and d) issues regarding communication.

Role of Licensing

Department and Division managers, as well as provider representatives, agreed that the principal responsibility of licensing should be the protection of the health and well-being of the general public. However, differences of opinion exist as to how the Division should serve the public. A Department representative noted that prior to the merger, there was not one clear view of what should be the purpose and role of licensing. Another individual noted that since the merger has occurred there is still no clear perception by the Division of what the role is currently or should be in the future. This individual, referred to herein as 'A', stated that there is still a struggle to determine where the new Division fits and what its role is. 'A', who holds a high level management

position within the Division, argued that there is a question as to whether licensing is an administrative or a public health function. 'A' feels that since Licensing has been placed underneath the Division of Operations and Support, it seems to have taken on more of an administrative role whereas in most other states licensing would fall under the arena of Public Health or the Bureau of Health.

The regulatory nature of licensing requires that there be a significant enforcement component. The question arises as to whether, in addition to the enforcement function, there should be a level of technical assistance. This question is important in establishing the Division's culture in that it defines how the division will work and conduct its business in the future. Views on the responsibilities of the Division vary depending on with whom you speak. Some individuals feel that it is a regulatory function and should enforce a minimum for safety. Others take the view that licensing should have a larger capacity. A provider representative stated that the policing (enforcement) approach has been a long entrenched culture for the Division. Another provider representative stated that in the past he/she felt that licensing involved finding things wrong just to find something wrong and that the Division was too 'nitpicky'. As an enforcement agency, the Division must ensure that agencies are in compliance with the regulations. Currently, some units within the Division are providing technical assistance to the providers in addition to the enforcement function.

Under DHS, there was a perception of being a more clinical division where enforcement was the principal goal and responsibility. Under BDS, a provider representative argued that there was more of a holistic viewpoint and that there is a need for technical assistance in addition to enforcement. The balance between the

enforcement role and technical assistance must be thoughtful. As indicated, there is disagreement within the Division and among provider representatives on what the role should be. A manager on the community services side of licensing indicated that there needs to be strict boundaries between the two functions since there is the potential issue of defining the services provided. This individual noted that Licensing should not go far out of the parameters because providers could feel that Licensing is telling them what services they should provide. A manager from a different unit within the Division argued that the role of Licensing should focus on treatment and not punishment. To make the situation more difficult, a provider argued that the function of licensing should be strictly regulatory. This individual argued that there is a concern that some licensors are commenting on the clinical approach of the facility when they do not have the educational or clinical background necessary to provide such information.

The regulations governing licensing are an additional complication. Currently, the agencies and providers surveyed under the former DHS are regulated under Title 22, while those who were previously under BDS are regulated by Title 34-B. These differing regulations result in confusion for the providers and the licensing staff. The enforcement rules and the application of surveys are different under each set of regulations. This is particularly an issue for providers with dual licenses, i.e., a license as a medical facility and a license under the mental health statutes. An example of where this has become an issue is provided by provider 'B'. 'B' gave an example of a treatment plan to decrease the aggressiveness of a child. The treatment plan might argue for a decrease of 50%. On the medical facilities side, the surveyor might argue, using his/her regulations, that this decrease is not enough and that the decrease should be 100%. However, on the mental

health side, the surveyor using his/her expertise and regulations might argue that this is impossible. The provider is then put in a difficult position. In addition, the surveys are conducted at different times on the medical side and the community side thereby making planning difficult for the providers.

The issue of what role licensing should take on is difficult and will require a great deal more effort and communication among all levels of the Division and input of the providers to come to a consensus assuming, indeed, if that is possible.

Merging two cultures into one

A significant challenge exists when bringing people together from different organizations and expecting them to operate thereafter on the same page. There is a great deal of variation in the types of agencies that the Division licenses. A hospital cannot be treated in the same manner as a child care center. An additional complication is that the previous DHS and BDS had different organizational cultures. To merge the two cultures into one, the work styles need to be similar, the technical components need to be the same, there needs to be a strong sense of identity, there should be one physical location and the units within licensing need to be treated equally. Currently, there are issues with each of these components. In addition, as one provider noted, as long as there is staff that worked in one of the prior departments, there will be bias against the other side. The provider stated that there was a general feeling among providers that BDS felt that DHS did not like families and that DHS felt that BDS did not accomplish anything and only sat in on meetings.

As indicated above, DHS was considered to have a more clinical approach and BDS was considered to have a more holistic approach towards licensing. These

distinctions are perceived as still existing in the merged department. As a manager from the former BDS side argued, the culture of BDS was very different from the DHS culture. One of the principal differences was the manner in which the employees worked. Under DHS, employees worked a strict 8 to 5 shift. They did not get credit for work done from home. However, under the BDS side, employees had more leeway and were able to set their own schedules and could work at home, at night and during the weekends if they needed to. The manager stated that under BDS the atmosphere was more relaxed than under DHS. After the merger, these differences still appear to exist. Management has attempted to address this issue, but a large turnover in staff resulted after the merger because some former employees of BDS were not capable or willing to change their work styles.

In addition to the issue of work hours, there were significant differences in management styles. As the merger occurred, certain positions were combined and some were eliminated. For example, there was one director who was considered not to have been effective and that person's staff did more managing than he/she did. However, within another unit, the director was much loved and did not receive the job as manager after the merger occurred. This individual retired instead of staying on with the department. The staff had strong reactions to both situations. One manager stated that he/she experienced a great amount of resistance when he/she became the manager of that unit. After the individual became the manager, the staff told him how they worked and that they would only work that way. As the provider stated, a massive exodus resulted. The manager felt that the staff created their own belief system and that they were very unprofessional.

In order for cultures to merge and blend together, the staff must feel that they are part of a unified organization. This has not yet occurred. Some feel that there has been a name in change only. In general, there seems to be a lack of cohesiveness. One critical issue is that currently the employees are not all located in the same location. There are offices at the old AMHI campus, at 221 State Street and at 442 Civic Center Drive in Augusta. In addition, while many of the Licensing employees are located at the Civic Center location, the medical facilities unit and the community services unit are separated within the building. The separate locations allow the old cultures of BDS and DHS to remain intact and it will be more difficult for the cultures to blend in the future.

The technical components and systems used influence the culture of the organization. Currently, there are multiple database systems that are being used by the various units within Licensing. At this point, these systems cannot be used interchangeably. The question is raised as to how can you cross train if all of the systems are different. This hinders the ability of the various units to interact and work together effectively if at all.

A related issue, that may be more unintentionally significant than it might first appear, is that the departmental signs have not all been changed. The exterior sign at 221 State Street in Augusta says 'Department of Health and Human Services'. However, a sign discussing interpretation services that is located within the lobby says 'Department of Human Services'. Of particular concern, the signs located at the old AMHI campus all say 'Bureau of Developmental Services'. The employees of DHHS and particularly the Division will not feel unified if the signs they see on their way to work each day indicate the name of the department they used to work for.

A top level manager indicated that there is an issue with the various units not being treated equally. Employees will not 'buy in' to a new culture if they do not feel that they are valued or respected. Some units are being provided with more resources than others. One manager discussed how the surveyors of some units are provided with cell phones, some have beepers and some have neither yet all have the same pay grade. This is an example of what one manager referred to as a culture of complacency. Many issues are not being addressed when they need to be and staff members are feeling slighted which might result in additional staff turnovers.

Embracing the new culture

In order for staff to embrace a new culture, you must form a new culture. This has not yet occurred. As indicated previously, there has been resistance and difficulty in merging the two prior cultures. In general, the managers of the various units interviewed felt that they were still part of the previous departments. Two individuals interviewed argued that they felt the strongest culture present was one of complacency. The word bureaucracy was often used in interviews to explain why certain changes had not occurred. One individual argued that the current Division is fragmented and also has a concern that there is a sense of dictatorship. One individual argued that politics has had too much of a role in the merger of the division. In addition, roughly thirty-five percent of those surveyed did not feel that the merger was necessary. Forty percent felt that Department leaders did not make a case for the merger to occur. If the employees do not understand why the merger is occurring, they will not be able to embrace it.

A factor in not reaching a new culture is that middle management feels that they are being stretched in too many directions. In addition to their normal workload, they

have been asked to perform additional tasks. Since the merger occurred, there have been staffing issues. By being stretched too thin, they are not given the opportunity to become part of a cohesive unit. In addition, according to the survey results, the licensors/surveyors in general are not clear as to why the divisions were merged in the first place. A new culture cannot be formed until it is understood why the merger occurred.

A significant issue is that despite the goal of creating a one stop licensing unit, some managers feel that there is limited if any interaction between the units. Some feel that the 'silos' that existed before the merger still exist. One individual interviewed from a unit licensing child care services felt that the merger hurt their division more than helped it in that they are now removed from other related services such as child protection and welfare services. Some units simply feel that they have not really been affected by the merger and they are still doing things as they always have. Both situations indicate that a new culture has not been fully developed.

Communication

As indicated previously, an organization can either have a communicative or a non-communicative culture. Communication is a critical component to the success of any merger. After conducting both the interviews and the survey, the critical complaint was a lack of communication. Communication is an issue in all aspects of the new Division. There are issues regarding communication from top management down the chain, from the bottom of the chain up to the top management and laterally across the units.

Until recently, there was not a director for the Division. The lack of a director created a handicap in regards to communication. There is hope that communication will be improved now since a director for the Division has been hired. One manager argued that there is not enough communication on any level. Two managers indicated that they felt that the significant issue rested with communication from top down. One manager discussed how embarrassing situations can occur when middle management is left 'out of the loop'. An example was provided of how a provider went directly to upper management and upper management did not relay this information back to the middle management staff. The manager in this situation felt that proper channels of communication are not being used. A different manager felt that middle management is often the last to know about significant changes and issues. This manager discussed how in some cases providers have brought issues to licensing staff that licensing staff should have already known about but did not. Situations such as this cause providers to distrust or lack confidence in the Division.

Communication is not just an issue from the top-down, but it is also an issue from the bottom-up. Some managers indicated that they did not feel comfortable raising issues with top management within the Division and the Department. As indicated by the survey results, the majority of the respondents indicated that they felt that communication was a significant concern and that their thoughts and ideas are not always regarded and heard.

A significant concern is the lack of interaction among the various units. Several individuals argued that they see hardly any communication between the units particularly between the old DHS units and BDS units. For instance, the Office of Substance Abuse

seems to have very limited interaction with the other units of the Division. Managers from the child care side did not see communication as a significant issue mainly due to the fact that they remain on their own and do not interact to a great extent with the other units.

In addition, communication with providers has been altered. Prior to the merger on the community services side, when a licensor/surveyor conducted a survey and sent a letter regarding that survey to the agency, the surveyor signed the letter. However, a recent change has resulted in the manager of the division now signing the letter, not the surveyor. By doing this, a wall has been put up between the Division and the agency and the surveyor has lost a fair amount of ground with the agency. In general, providers feel that their communication with the Division is good but can sense that there are issues regarding communication within the Division.

Improving communication will not be a simple task. One manager argued that communication channels will be difficult to establish since historical connections have been broken. The issue that there are multiple locations has exasperated the issue of poor communication.

Positive Steps

Conversations with Department and Division representatives indicate that additional steps need to be taken by the Department and the Division for the merger to be successful, but recently there have been steps in the right direction. The recent hiring of a Division director will help the Division determine its future role. The development of a mission statement and guiding principles will assist the employees of the Division in determining what their role is and will assist in developing a new culture for the Division.

The recent decision to integrate all complaints into one complaint center will help the Division become more unified. In addition, the Department and Division leaders are aware of many of the current problems within the Division and are making a concentrated effort to address them.

Analysis of Results

The principal issues that have arisen since the merger of DHS and BDS are not exclusive to this situation. Utilizing the literature on mergers and the GAO Report, the key issues mentioned in these conversations can be analyzed. Many of the potential issues raised by the literature on mergers have become apparent with the creation of the new Department and the new Division. As indicated by Friskin, the key stages to a merger include the planning of the merger, implementing the merger and following up on the merger. Based on conversations with Division representatives and the survey results, many employees were not made aware of the reasons for the merger. In addition, the planning of the merger did not seem completely thought out given the amount of time utilized post-merger to hire a Division director. However, at this stage, the Department does seem to be following through with the merger by making positive steps such as the hiring of a director and the recent steps that the director has taken.

The issues that have arisen since the merger, including the different manners in conducting work and the different leadership styles, are echoed in Stein's arguments in "Managing Culture in Mergers and Acquisitions." The issues related to the question of enforcement versus technical assistance indicate that there are differences in decision making across the licensing units. Prior to the merger, it appears that the starting cultures

of DHS and BDS were not analyzed. The resistance of employees to change their manner of work and not to embrace a new work ethic may be due to fear and a resistance of change. The questions raised by Schreyogg on the four dimensions of culture (consistency, diversity, realization and dominance) were not addressed prior to the merger. Through conversations with representatives of the Division and the provider community, it appears that the questions would be answered after the merger occurred and not analyzed and answered before the merger took place.

As indicated, the GAO Report entitled "Results-Oriented Cultures Implementation Steps to Assist Mergers and Organizational Transformations" provides a framework for implementing a successful merger. Upon analysis of the results of conversations with the Department and the Division and the survey results, it becomes evident that some of the key practices mentioned in the framework have not been met. As indicated in the chart presented below, key practices 5 through 9 were not met prior to the merger or during the implementation of the merger. The chart shows what the key practices mentioned in the report are and how they relate (if they relate) to the key issues/concerns raised in these conversations.

Key Practice	Concern: Role of Licensing Division	Concern: Merging two cultures	Concern: Embracing a new culture	Concern: Communication
Ensure top Leadership drives the transformation	Top leadership has not addressed this issue in a formal manner. Leadership of the Department and the Division are aware that the role has not been clearly defined.	Top leadership has not addressed all aspects of this issue in a formal manner. Leadership is aware that the work environments are different, that the technical systems are different, that a central location is needed and that there is an issue with different units being treated differently. However, it does not appear that top leadership is addressing all of these issues at this time.	At this stage, top leadership has not had an active role in this issue.	Top leadership acknowledges that communication could be improved. However, at this stage significant improvements in communication have not been made.
Establish a coherent mission and integrated strategic goals to guide the transformation	The next steps regarding this issue have not yet been developed.	A mission statement and guiding principles have recently been developed that will help address some of these issues.	A mission statement and guiding principles have recently been developed that will help address this issue.	A mission statement and guiding principles have recently been developed that will assist in improving communication but additional steps are necessary.
Focus on a key set of principles and priorities at the outset of the transformation	This concern has been discussed since the merger has occurred but at this stage a key set of principles and priorities regarding the issue has not been developed.	Many employees felt that key principles and priorities that relate to this concern were not addressed prior to the merger. Employees feel like some issues are started to get addressed at this point but there needs to be a clear explanation of what the principles and priorities are.	Many employees felt that key principles and priorities were not addressed prior to the merger.	Many employees felt that communication should be a key priority of the new Division. Communication should be developed and improved.
Set implementation goals and timeline to build momentum and show progress from day one.	Implementation goals and a timeline were not created by leadership on this issue prior to the merger.			
Dedicate an implementation team to manage the transformation process.	An implementation team was not developed.			
Use the performance management system to define responsibility and assure accountability for change.	A performance management system as described by the GAO Report was not developed.			
Establish a communication strategy to create shared expectations and report related progress.	Employees felt that a communication strategy in regards to the merger and this issue was not developed and put into place.			
Involve employees to obtain their ideas and gain their ownership in for the transformation.	Prior to the merger, employees feelings regarding this issue were not obtained. In order for the issue to be resolved, employees must be involved.			
Build a world class organization.	The new Division will be improved once the role of licensing is determined.	The new Division will be improved once the various issues related to the merging of two cultures are resolved.	The new Division will be improved once a Consistent Culture is developed and embraced.	The new Division will be improved once communication is improved on all levels and among units.

As indicated by the analysis of the GAO Report, many key practices to a successful merger were not implemented before or during the merger of the two former departments. The responses of Division representatives show that there is a general feeling among employees that the merger was not completely thought out before it was implemented. In order for the merger to be a success, the Division should implement the key practices indicated in the GAO Report that may be useful to the Division.

Through conversations with the Division representatives, the cultural differences between the two former departments became apparent. These conversations revealed internal cultural barriers, such as different work styles and structural differences. External cultural barriers are also present. An example of an external cultural barrier is that the licensing of a hospital is different than the licensing of a child care center. Both the internal and the external barriers are preventing the Division from reaching a Consistent Culture. Due to their nature, the external cultural barriers will be difficult if not impossible to overcome. Some of the internal cultural barriers, such as physical location and multiple databases, may be overcome despite the presence of the external barriers. For example, despite the agencies being different, the databases used to license and survey those agencies can be the same. To address and overcome these barriers, the Department and the Division must understand where the barriers are and be open and communicate about how to resolve them.

From conversations with provider representatives, the issue of enforcement versus technical assistance is the most significant cultural issue for the Division. Based on conversations with Division representatives, this cultural difference can be overcome but it will be difficult. As discussed in the recommendations section below, a task force

should be developed to discuss what the role of licensing should be in the future. The task force must be mindful of the various types of agencies that licensing oversees. In order for a consensus to be reached, Titles 22 and 34-B must be analyzed and combined where appropriate. The cultural difference is currently being driven by the differences in agencies as well as the different training of the licensors/surveyors. A middle ground can be reached if regulations and the training and education of licensors/surveyors are consistent. To achieve this middle ground, communication must be open and providers should be involved in the process.

Based on the literature review and from conversations with Department and Division representatives, the Division was not equipped for the merger at the implementation stage. The cultural differences were not dealt with at the beginning. For the merger to be a success and for the Division to fulfill its mission, the cultural differences must now be addressed. The recommendations mentioned below will assist the Department and the Division leadership in eliminating some of these differences and achieving a successful merger.

Recommendations

After discussing the issues with the Department and Division staff and the provider representatives, this capstone developed recommendations to address the key issues that are preventing the new Division from establishing a Consistent Culture. In some cases, these issues are already being addressed by the Division.

Role of Licensing

A taskforce should convene to reach a consensus on the issue of enforcement versus technical assistance. Representatives from the various units, both medical facilities and community side, as well as providers should be on the taskforce. There is a possibility that a consensus will not be reached. It should be determined whether the role should be different for hospital licensing versus child care licensing. The Division should work together as a whole to determine what the role of licensing should be for each unit. Even though the role may be different for the various units, by working together, the Division will be acting cohesively.

A task force should be convened to re-examine the regulations and to determine how Titles 22 and 32B can be merged to better serve the Division. The director of the Division has proposed the hiring of a strategic planner to address this issue. The hope is that the outside consultant will work with the Division and help develop new regulations and determine which regulations are inconsistent and need to be altered. While performing this analysis the concerns of providers must be taken into account. Many providers utilize the regulations to structure their business. The issue of dual licenses should be evaluated at the same time. By addressing this issue, one of the inputs to a Consistent Philosophy will be addressed.

Structural Recommendations: Merging two cultures into one

To merge successfully the two former cultures into one new consistent culture, the past cultures must be understood. The Director of the Division as well as upper level and middle management should discuss with their staff what the principal complaints and issues are. One manager indicated that he/she would like to see more flexibility in regards

to work hours for surveyors/licensors. Due to the nature of their job, the surveyors/licensors are away from the office for long periods of time. The former work cultures of BDS and DHS should be examined to determine what if any from the former cultures can be brought together to create a new culture.

A new database system should be developed. Having three separate databases does not allow continuity and cross training. The Division has begun to look at this issue. In addition, the Division has also proposed and begun to create a central complaint center. By having one complaint center, the medical facilities and the community services side will need to interact more with each other. The Division has utilized the Lean Management technique to develop this program. This technique could be utilized for other issues and in other areas that are affecting the Division.

An employee of the Division stated that the principal issue facing the division is the lack of a central location. The opportunity to have all units of the Division under one roof should be explored. Until this occurs, signs should be purchased and displayed in front of the necessary locations that state the name of the Department and not the former departments. By taking this first step, the employees will understand which organization they are working for.

In addition, there needs to be a detailed examination of what units are receiving certain services and equipment. All units should be treated appropriately. Managers of each department should develop a list of what their unit currently receives. The manager's supervisor should then examine the list and an inventory should be made. When possible, the units that are not receiving the needed services and equipment should have them provided.

Communication

As indicated, the principal complaint regarding the Division and an essential tool in developing a Consistent Culture is communication. The communication issues must be addressed. A system should be developed in the satellite offices where they feel that their ideas are being heard. Managers should visit the satellite offices periodically to show the staff that they are interested in what is occurring at that office. Middle management must be kept in the know when important events regarding licensing occur. For example, if the guiding principles of the Division change, the managers should be made aware of what the changes are. Communication needs to improve from top down as indicated. Leadership of the Department and the Division should periodically meet with middle managements. Minutes or summaries of those meetings should be made available to the staff when applicable and appropriate.

One of the critical issues facing the new Division is the lack of interaction among the units, particularly among the community services and the medical facilities sides. Even though these units license different types of entities, there are potential areas of common interest. A program could be established where, once a month, a representative from one of the units would choose a licensing related topic and present that topic during a brown bag lunch which will be open to all staff of the Division. By allowing the staff to socialize more, their work morale will improve.

Additional Recommendations and Concerns

Additional suggestions include increased training, establishing better integration of best practices into the role of licensing and increasing educational opportunities. However, these recommendations cannot be implemented unless another issue is

addressed. Given the nature of State Government, there is a lack of resources available to the Division. The lack of resources is not simply inadequate funding but also inadequate staff numbers. These recommendations are dependent on an increase in funding as well as human resources.

Study Limitations

The principal limitation on this study was time. If there had been additional time for data collection, the sample size could have been larger which would have added another element to the study. Due to time limitations, representatives from the Internal Abuse Unit and the Certificate of Need program, which interact with the Licensing Division, were not interviewed. The inability to reach all of the licensors/surveyors was an additional limitation.

Conclusions

As indicated previously, the objectives of the merger were to standardize processes, standards and terminology; eliminate duplication of effort and conflicting requirements; create a one-stop shop for licensure and sharing of information across disciplines. At this stage in the merger, based on the conversations with Department and Division representatives and the survey results, these objectives have not yet been met. However, there is progress. The new Division has become a one-stop location for licensing. As indicated, the hiring of a director for the Division will assist in reaching these objectives in the future. The recent development of a central compliant system will assist in standardizing processes.

For the remaining objectives to be reached, the Department and the Division must address the key issues raised in this report. A Consistent Philosophy must be achieved for the merger to be a success. As indicated in the survey results, an overwhelming majority of eighty percent felt that a Consistent Philosophy is needed for the future success of the Division. A Consistent Culture must be reached for the merger to be a success. At this point, a Consistent Culture does not exist within the Division. The internal and external cultural barriers affecting the Division must be addressed. As indicated by the survey, the employees feel that improvement can occur within the division. Over time with leadership and open communication and the other recommendations mentioned herein, a Consistent Culture can be reached by the Division. Once a Consistent Culture is reached, the Division will be one step closer to a Consistent Philosophy.

Integration of HPM Coursework

The knowledge and information gained through the Health Policy and Management Masters program fueled the interest and the success of this project. Information gained from Andrew Coburn's course, the American Health Care System, provided a valuable background of the health care system and the nuances of licensing. Gino Nalli's course on Fundamentals of Healthcare Management provided information regarding organizational culture, management styles, resistance to change, as well as other related topics. Elise Bolda's Healthcare Advertising and Marketing course helped provide insight into how projects and ideas should be marketed to an audience. The Health Law class provided knowledge of how what the legal requirements are and how mergers occur. Additional insights were provided by interactions with the Health Policy

and Management faculty as well as other courses taken throughout the duration of the program.

Acknowledgments

I would like to thank the following people for their assistance and insight during this project: Gino Nalli, Beth Kilbreth, the HPM faculty, Eileen Griffin, Sue Ebersten, Steven Roy, Timothy Hoberg, Caryl Yzenbaard and those who were interviewed.

-
- ²⁵ Galpin, T. *The Human Side of Change: A Practical Guide to Organization Redesign* Jossey-Bass Publishers. San Francisco. 1996. P. 54
- ²⁶ "How Far apart is your actual culture from your ideal one?" Mercer. Retrieved on March 29, 2006 from www.hercerhr.com/service/details.jhtml?idContent=1150590.
- ²⁷ "An Organizational Culture Assessment Using the Competing Values Framework: A Profile of Ohio State University Extension". *Journal of Extension*. April 2003 Volume 42 Number 2. Retrieved on March 29, 2006 from <http://www.joe.org/joe/2003april/a3.shtml>
- ²⁸ "How Far apart is your actual culture from your ideal one?" Mercer. Retrieved on March 29, 2006 from www.hercerhr.com/service/details.jhtml?idContent=1150590.
- ²⁹ Schein, L. "Managing Culture in Mergers and Acquisitions". The Conference Board. P. 49
- ³⁰ Schein, L. "Managing Culture in Mergers and Acquisitions". The Conference Board P. 50
- ³¹ Schreyogg. "The Role of Corporate Cultural Diversity in Integrating Mergers and Acquisitions." *Mergers and Acquisitions: Managing Culture and Human Resources*. Edited by Stahl, G. and Mendenhall, M. Stanford Business Books. Stanford. 2005
- ³² Frumkin, P. "Making Public Sector Mergers Work: Lessons Learned" *Transforming Organizations Series*. IBM Center for The Business of Government. August 2003. P. 5
- ³³ Longest, B. Rakich, R., Darr, K. *Managing Health Services Organizations and Systems*. Health Professions Press. Baltimore. 2000. P. 593.
- ³⁴ Longest P. 602
- ³⁵ Longest P. 603
- ³⁶ "Results-Oriented Cultures Implementation Steps to Assist Mergers and Organizational Transformations" United States General Accounting Office. Report to Congressional Subcommittees. July 2003.

Endnotes

¹ Commissioner's Implementation Advisory Team Final Report. Final Recommendations Prepared for the Commissioner by: Superior Service Work Group; High Performing Staff Work Group; Integrated Services Work Group; Provider Partnerships Work Group; and Effective Administration Work Group. January 27, 2005. P. 5

² "Mission Statement of the New Department of Health and Human Services." State of Maine Department of Health and Human Services. Retrieved on October 11, 2005 from <http://www.maine.gov/dhss/dhssnews/creation/mission.html>

³ Commissioner's Implementation Advisory Team Final Report. Final Recommendations Prepared for the Commissioner by: Superior Service Work Group; High Performing Staff Work Group; Integrated Services Work Group; Provider Partnerships Work Group; and Effective Administration Work Group. January 27, 2005. P. 5

⁴ Department of Health and Human Services. Retrieved on March 15, 2006 from <http://www.maine.gov/dhhs/aboutus.htm>

⁵ Department of Health and Human Services. Retrieved on March 15, 2006 from <http://www.maine.gov/dhhs/aboutus.htm>

⁶ Powerpoint Presentation entitled DHHS Licensing Unification Council Findings and Recommendations. Provided by Lou Dirogi.

⁷ Maine Statutes Title 22-A Health and Human Services. Chapter 1: Departmental Organization and Operation. Received February 23, 2006 from <http://janus.state.ume.us/legis/statutes/22-A/title22-Asec201.html>

⁸ Health and Human Services Restructuring Opportunities and Challenges. March 12, 2005. Retrieved on December 11, 2005 from <http://www.maine.gov/tools/whatsnew/index.php?topic=HouseDems+News&id=1970&v=Article>

⁹ Maine State System-Department of Behavioral and Developmental Services. AccessMaine. Retrieved on January 23, 2006 from http://www.accessmaine.org/MEStateSystem/mestate_BDS.htm.

¹⁰ Division of Licensing and Regulatory Services. Department of Health and Human Services. Mission Statement. Provided by Cathy Cobb, Director of the Division of Licensing and Regulatory Services.

¹¹ Division of Licensing and Regulatory Services. Department of Health and Human Services. Mission Statement. Provided by Cathy Cobb, Director of the Division of Licensing and Regulatory Services.

¹² Oral communication.

¹³ Administrative Processes Advisory Group. Work Group Recommendations and Work Plan. APOC 1/23/2006. P. 1

¹⁴ Public Laws First Regular Session of the 122nd. Retrieved on November 18, 2005 from http://janus.state.me.us/legis/ros/lom/LOM122nd/1Pub1-40/Pub1-40-80.htm#P11808_702700

¹⁵ Administrative Processes Oversight Committee. January 31, 2006. Final Report Presented by the Administrative Processes Oversight Committee to Geoffrey W. Green, Deputy Commissioner, Operations and Support Department of Health and Human Services.

¹⁶ Administrative Process Advisory Group. Work Group Recommendations and Work Plan. APOC 1/23/2006. P.2

¹⁷ Frumkin, P. "Making Public Sector Mergers Work: Lessons Learned" Transforming Organizations Series. IBM Center for The Business of Government. August 2005. P. 7

¹⁸ Kramer, R. *Post-Merger Organization Handbook* The Conference Board. P. 5

¹⁹ Oral Communication.

²⁰ Frumkin, P. "Making Public Sector Mergers Work: Lessons Learned" Transforming Organizations Series. IBM Center for The Business of Government. August 2005. P. 27-28

²¹ Kramer, R. *Post-Merger Organization Handbook* The Conference Board. P. 5

²² Schein, L. "Managing Culture in Mergers and Acquisitions" The Conference Board. P. 79

²³ Frumkin, P. "Making Public Sector Mergers Work: Lessons Learned." Transforming Organizations Series. IBM Center for The Business of Government. August 2005.

²⁴ Frumkin, P. "Making Public Sector Mergers Work: Lessons Learned." Transforming Organizations Series. IBM Center for The Business of Government. August 2005. P. 4-5

Bibliography

Administrative Processes Oversight Committee. January 31, 2006. Final Report Presented by the Administrative Processes Oversight Committee to Geoffrey W. Green, Deputy Commissioner, Operations and Support Department of Health and Human Services

“An Organizational Culture Assessment Using the Competing Values Framework: A Profile of Ohio State University Extension”. *Journal of Extension*. April 2003 Volume 42 Number 2. Retrieved on March 29, 2006 from <http://www.joe.org/joe/2003april/a3.shtml>

Commissioner’s Implementation Advisory Team Final Report. Final Recommendations Prepared for the Commissioner by: Superior Service Work Group; High Performing Staff Work Group; Integrated Services Work Group; Partnerships Work Group; and Effective Administration Work Group. January 25, 2005

Department of Health and Human Services. Retrieved on March 15, 2006 from <http://www.maine.gov/dhhs/aboutus.htm>

Division of Licensing and Regulatory Services. Department of Health and Human Services. Mission Statement. Provided by Cathy Cobb, Director of the Division of Licensing and Regulatory Services.

Frumkin, P. “Making Public Sector Mergers Work: Lessons Learned”. Transforming Organizations Series. IBM Center for The Business of Government. August 2005

Galpin, T. The Human Side of Change: A Practical Guide to Organization Redesign. Jossey-Bass Publishers. San Francisco. 1996.

Health and Human Services Restructuring Opportunities and Challenges. March 12, 2005. Retrieved on December 11, 2005 from <http://www.maine.gov/tools/whatsnew/index.php?topic=HouseDems+News&id=1970&v=Article>

Kramer, R. “Post-Merger Organization Handbook”. *The Conference Board*

Longest, G., Rakich, R., Darr, K. Managing Health Services Organizations. Health Professions Press. Baltimore 2000.

Maine State System-Department of Behavioral and Developmental Services. AccessMaine. Retrieved on January 23, 2006 from http://www.accessmaine.org/MEStateSystem/mestate_BDS.htm

Maine Statutes Title 22-A Health and Human Services. Chapter 1: Departmental Organization and Operation. Received February 23, 2006 from <http://www.janus.state.ume.us/legis/statutes/22-A/title22-Asec201.html>

Mercer. "How far apart is your actual culture from your ideal one?" Retrieved on Marcy 29, 2006 from www.mercerhr.com/service/details.jhtml?idContent=1150590

Powerpoint Presentation entitled DHHS Licensing Unification Council Findings and Recommendations. Provided by Lou Dirogi.

Public Laws First Regular Session of the 122nd. Retrieved on November 18, 2005 from http://janus.state.me.us/legis/ros/lom/LOM122nd/1Pub1-40/Pub1-40-80.htm#P11808_702700

"Results-Oriented Cultures Implementation Steps to Assist Mergers and Organizational Transformations" United States General Accounting Office. Report to Congressional Subcommittees. July 2003.

Schein, L. "Managing Culture in Mergers and Acquisitions" *The Conference Board*

Schreyogg. "The Role of Corporate Cultural Diversity in Integrating Mergers and Acquisitions." Mergers and Acquisitions: Managing Culture and Human Resources. Edited by Stahl, G. and Mendenhall, M. Stanford Business Books. Stanford 2005

State of Maine Department of Health and Human Services. "Mission Statement of the New Department of Health and Human Services." Retrieved on October 11, 2005 from <http://www.maine.gov/dhss/dhssnews/creation/mission.html>

Interview Protocol for Department and Division Interviews

- a) A number of factors might play a role in shaping the role of licensing. For example, some of these factors might include the governing statutes, the type of entities being licensed and the related professional disciplines of the licensing staff, the role a department program has played in cultivating the development of different providers and so on. Do you agree with this statement? I would like to talk more about some of these factors during this interview.
- b) A factor that I would like to focus on is the way an organization's culture influences the role of licensing. For the purposes of this conversation, culture will refer to the attitudes and practices (especially the soft side such as practices related to leadership/attitudes/priorities) within an organization. Do you agree with this statement?
- c) What was the role of licensure you saw in the pre-merged department?
- d) Do you know if the role of licensure has changed in the new Department and Division? If so, how?
- e) Talking in general about the factors that influence the role of licensing, what do you think are the factors that influence your ability to implement the intended role of licensing? (hard side)
- f) Talking again about organizational culture, what do you think are the factors that shape, the attitudes and practices within licensing?
- g) Are you aware of a system to define responsibility and to assure the accountability for change that resulted from the merger?
- h) Do you believe that such a system would be beneficial to the division? If so, why? If not, why?
- i) Do you feel that at the beginning of the merger, leaders made a statement regarding the importance for the change importance of changing the role of licensing? If so, what statement did they make? (specifically to licensing)
- j) Do you feel that issues that have occurred since the merger are being addressed?
- k) What do you think are the key priorities and principles of the licensing division currently?

- l) What do you feel should be the key priorities and principles of the licensing division?
- m) Do you feel that the new division and the new department are working efficiently? If not, why?
- n) Do you feel that there is sufficient communication within the licensing division and within the other division of DHHS?
- o) Do you feel that your thoughts and concerns regarding the merger and the role of licensure as well as other issues are welcomed by the leadership of the division?
- p) Do you feel that there is a consistent practice of licensing in how all licensing units operate?
- q) If you feel that this does not exist, do you feel that there is a need for a consistent practice?
- r) What barriers do you feel exist to reaching this consistent practice?
- s) Do you feel that these barriers can be addressed?
- t) What recommendations do you have to addressing these barriers?
- u) What do you feel can be done to assist the licensing division in achieving success?

Interview Protocol for Provider Community, Trade Association,
and Advocacy Groups

- a) What do you feel are the principle responsibilities of the Licensing Division?
- b) Do you feel that the responsibilities of the pre-merger licensing divisions were clear? If not, why?
- c) What do you believe the role was pre-merger?
- d) Do you feel that the role of the Licensing Division in the new Department has been clearly stated?
- e) What do you feel is the definition of the role post-merger?
- f) If the definition has changed, how do you feel the practice of licensing should change?
- g) If you do not perceive a changed role, how should the practice of licensing change?
- h) What do you feel are the largest obstacles facing the Licensing Division in terms of developing a common and consistent culture?
- i) What do you feel will be the greatest benefits to the Licensing Division resulting from the merger? What benefits do you feel will there be towards the culture of the division?
- j) What do you feel the role of the Licensing Division should be?

Please answer the following questions.

The key is:

1 = strongly disagree

2=somewhat disagree

3=neutral

4=somewhat agree

5=strongly agree

1. Do you feel that the merger of the licensing divisions were necessary?

1 2 3 4 5

2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?

1 2 3 4 5

3. Do you feel that the previous licensing divisions worked efficiently?

1 2 3 4 5

4. Do you feel that the new Department is working efficiently?

1 2 3 4 5

5. Do you feel that the new Licensing Division is working efficiently?

1 2 3 4 5

6. Do you feel that the new Department is working more efficiently than in the past?

1 2 3 4 5

7. Do you feel that the new Licensing Division is working more efficiently than in the past?

1 2 3 4 5

8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?

1 2 3 4 5

9. Do you feel that there is a consistent philosophy in how the licensing department operates?

1 2 3 4 5

10. Do you feel that there is a need for a consistent philosophy?

1 2 3 4 5

11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?

1 2 3 4 5

12. Do you feel that since the merger has occurred shared values have become present?

1 2 3 4 5

13. Do you feel that there are any opportunities for process improvement?

1 2 3 4 5

Medical Facilities Unit-Central Office

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	1	1	4	3	0	3.00	1.0000
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	1	2	3	3	0	2.89	1.0541
3. Do you feel that the previous licensing divisions worked efficiently?	1	2	3	1	2	3.11	1.3642
4. Do you feel that the new Department is working efficiently?	0	4	3	2	0	2.78	0.8333
5. Do you feel that the new Licensing Division is working efficiently?	0	2	2	5	0	3.33	0.8660
6. Do you feel that the new Department is working more efficiently than in the past?	0	2	3	4	0	3.22	0.8333
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	2	3	4	0	3.22	0.8333
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	2	4	3	0	0	2.11	0.7817
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	1	4	2	1	1	2.67	1.2247
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	2	7	4.78	0.4410
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	1	3	2	1	2	3.00	1.4142
12. Do you feel that since the merger has occurred shared values have become present?	0	4	4	1	0	2.67	0.7071
13. Do you feel that there are any opportunities for process improvement?	0	0	0	3	6	4.67	0.5000

Medical Facilities Unit-Augusta

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	0	2	1	0	0	2.33	0.5774
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	0	2	1	0	0	2.33	0.5774
3. Do you feel that the previous licensing divisions worked efficiently?	0	1	0	2	0	3.33	1.1547
4. Do you feel that the new Department is working efficiently?	0	1	2	0	0	2.67	0.5774
5. Do you feel that the new Licensing Division is working efficiently?	0	0	3	0	0	3.00	0.0000
6. Do you feel that the new Department is working more efficiently than in the past?	0	1	2	0	0	2.67	0.5774
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	3	0	0	0	2.00	0.0000
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	2	1	0	0	0	1.33	0.5774
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	2	0	1	0	0	1.67	1.1547
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	2	1	4.33	0.5774
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	1	0	2	0	0	2.33	1.1547
12. Do you feel that since the merger has occurred shared values have become present?	0	2	1	0	0	2.33	0.5774
13. Do you feel that there are any opportunities for process improvement?	0	0	0	2	1	4.33	0.5774

Medical Facilities Unit-Bangor

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	0	0	4	2	0	3.33	0.5164
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	0	0	3	3	0	3.50	0.5477
3. Do you feel that the previous licensing divisions worked efficiently?	0	1	2	3	0	3.33	0.8165
4. Do you feel that the new Department is working efficiently?	0	1	3	2	0	3.17	0.7528
5. Do you feel that the new Licensing Division is working efficiently?	0	1	1	4	0	3.50	0.8367
6. Do you feel that the new Department is working more efficiently than in the past?	0	1	5	0	0	2.83	0.4082
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	0	4	2	0	3.33	0.5164
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	1	2	0	3	0	2.83	1.3292
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	0	1	2	3	0	3.33	0.8165
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	1	5	4.83	0.4082
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	0	2	1	2	1	3.33	1.2111
12. Do you feel that since the merger has occurred shared values have become present?	0	1	4	1	0	3.00	0.6325
13. Do you feel that there are any opportunities for process improvement?	0	0	0	2	4	4.67	0.5164

Medical Facilities Unit-Portland

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	2	0	3	0	0	2.20	1.0954
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	3	1	0	1	0	1.80	1.3038
3. Do you feel that the previous licensing divisions worked efficiently?	0	0	0	4	1	4.20	0.4472
4. Do you feel that the new Department is working efficiently?	1	1	3	0	0	2.40	0.8944
5. Do you feel that the new Licensing Division is working efficiently?	0	1	2	2	0	3.20	0.8367
6. Do you feel that the new Department is working more efficiently than in the past?	1	2	2	0	0	2.20	0.8367
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	2	2	1	0	2.80	0.8367
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	4	1	0	0	0	1.20	0.4472
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	2	3	0	0	0	1.60	0.5477
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	1	4	4.80	0.4472
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	2	1	1	1	0	2.20	1.3038
12. Do you feel that since the merger has occurred shared values have become present?	0	3	2	0	0	2.40	0.5477
13. Do you feel that there are any opportunities for process improvement?	0	0	1	0	4	4.60	0.8944

Assisted Housing Adult Day Care

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	0	1	0	3	0	3.50	1.0000
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	0	0	2	2	0	3.50	0.5774
3. Do you feel that the previous licensing divisions worked efficiently?	0	0	0	4	0	4.00	0.0000
4. Do you feel that the new Department is working efficiently?	0	2	2	0	0	2.50	0.5774
5. Do you feel that the new Licensing Division is working efficiently?	0	2	1	1	0	2.75	0.9574
6. Do you feel that the new Department is working more efficiently than in the past?	0	2	1	1	0	2.75	0.9574
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	2	1	1	0	2.75	0.9574
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	1	3	0	0	0	1.75	0.5000
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	1	2	0	1	0	2.25	1.2583
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	0	4	5.00	0.0000
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	2	2	0	0	0	1.50	0.5774
12. Do you feel that since the merger has occurred shared values have become present?	1	1	2	0	0	2.25	0.9574
13. Do you feel that there are any opportunities for process improvement?	0	1	0	0	3	4.25	1.5000

MH/SA Children's Residential

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	1	1	1	0	0	2.00	1.0000
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	1	1	0	1	0	2.33	1.5275
3. Do you feel that the previous licensing divisions worked efficiently?	0	0	0	1	2	4.67	0.5774
4. Do you feel that the new Department is working efficiently?	0	2	1	0	0	2.33	0.5774
5. Do you feel that the new Licensing Division is working efficiently?	0	2	1	0	0	2.33	0.5774
6. Do you feel that the new Department is working more efficiently than in the past?	2	0	1	0	0	1.67	1.1547
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	2	1	0	0	2.33	0.5774
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	2	0	1	0	0	1.67	1.1547
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	2	0	0	1	0	2.00	1.7321
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	0	3	5.00	0.0000
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	1	1	0	1	0	2.33	1.5275
12. Do you feel that since the merger has occurred shared values have become present?	0	1	2	0	0	2.67	0.5774
13. Do you feel that there are any opportunities for process improvement?	0	0	0	1	2	4.67	0.5774

Children's Day Care South

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	1	1	1	0	0	2.00	1.0000
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	1	0	0	2	0	3.00	1.7321
3. Do you feel that the previous licensing divisions worked efficiently?	0	0	0	2	1	4.33	0.5774
4. Do you feel that the new Department is working efficiently?	0	0	1	2	0	3.67	0.5774
5. Do you feel that the new Licensing Division is working efficiently?	0	1	0	2	0	3.33	1.1547
6. Do you feel that the new Department is working more efficiently than in the past?	0	1	1	1	0	3.00	1.0000
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	1	0	2	0	3.33	1.1547
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	0	0	2	1	0	3.33	0.5774
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	0	0	1	2	0	3.67	0.5774
10. Do you feel that there is a need for a consistent philosophy?	0	1	0	1	1	3.67	1.5275
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	0	1	2	0	0	2.67	0.5774
12. Do you feel that since the merger has occurred shared values have become present?	0	2	1	0	0	2.33	0.5774
13. Do you feel that there are any opportunities for process improvement?	0	0	0	0	3	5.00	0.0000

Children's Day Care North

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Average	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	0	1	2	0	0	2.67	0.5774
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	0	2	0	1	0	2.67	1.1547
3. Do you feel that the previous licensing divisions worked efficiently?	0	1	1	0	1	3.33	1.5275
4. Do you feel that the new Department is working efficiently?	0	0	1	2	0	3.67	0.5774
5. Do you feel that the new Licensing Division is working efficiently?	0	0	1	2	0	3.67	0.5774
6. Do you feel that the new Department is working more efficiently than in the past?	0	1	1	1	0	3.00	1.0000
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	0	2	1	0	3.33	0.5774
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	0	2	0	1	0	2.67	1.1547
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	0	2	0	0	1	3.00	1.7321
10. Do you feel that there is a need for a consistent philosophy?	0	0	0	0	3	5.00	0.0000
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	0	0	0	2	1	4.33	0.5774
12. Do you feel that since the merger has occurred shared values have become present?	0	1	1	1	0	3.00	1.0000
13. Do you feel that there are any opportunities for process improvement?	0	0	0	0	3	5.00	0.0000

Overall Results

Question	Strongly Disagree (1)	Somewhat Disagree (2)	Neutral (3)	Somewhat agree (4)	Strongly Agree (5)	Mean	Standard Deviation
1. Do you feel that the merger of the licensing divisions was necessary?	5	7	16	8	0	2.75	0.9673
2. Do you feel that Department members made a case for the merger of the licensing divisions to occur?	6	8	9	13	0	2.81	1.1166
3. Do you feel that the previous licensing divisions worked efficiently?	1	5	6	17	7	3.67	1.0420
4. Do you feel that the new Department is working efficiently?	1	11	16	8	0	2.86	0.7983
5. Do you feel that the new Licensing Division is working efficiently?	0	9	11	16	0	3.19	0.8333
6. Do you feel that the new Department is working more efficiently than in the past?	3	10	16	7	0	2.75	0.8742
7. Do you feel that the new Licensing Division is working more efficiently than in the past?	0	12	13	11	0	2.97	0.8102
8. Do you feel that there is sufficient communication within the licensing department and with other departments within DHHS?	12	13	10	1	0	2.00	0.8619
9. Do you feel that there is a consistent philosophy in how the licensing department operates?	8	12	6	8	2	2.56	1.2293
10. Do you feel that there is a need for a consistent philosophy?	0	1	0	7	28	4.72	0.6146
11. Do you feel that leaders in the licensing department have listened to you and other employees' thoughts regarding the department?	7	10	8	7	4	2.75	1.2956
12. Do you feel that since the merger has occurred shared values have become present?	1	15	17	3	0	2.61	0.6878
13. Do you feel that there are any opportunities for process improvement?	0	1	1	8	26	4.64	0.6825

IRB Protocol Number: IRB#012306-11

TO: Emily Hoberg

CC: Gino Nalli

FROM: Office of Research Compliance

DATE: February 10, 2006

RE: Barriers to Consistent Philosophy: An Analysis of the Department of Health and Human Services Licensing Department

Notice of Evaluation- EXEMPT [45 CFR 46.101 (b) (2)]

The Office of Research Compliance (ORC) has evaluated the project named above. According to the information provided, you intend to focus on the merger of the DHHS and BDS Licensing Departments and identify the barriers to the development of a Consistent Philosophy. Various stakeholders will be interviewed on their feelings about the need for a consistent culture. Representatives from the Department and the Division will be the principal interview subjects. A letter of approval has been given by the DHHS Licensing Department to conduct this project. This is a minimal risk study.

This project has been granted an exemption from USM IRB review in accordance with 45 CFR 46.101 (b) (2) which provides for exemption for research involving the use of survey and interview procedures, unless (i) the information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation. This designation is based on the assumption that the materials that you submitted to the IRB contain a complete and accurate description of all the ways in which human subjects are involved in your research.

This exemption is given with the following conditions:

1. You will conduct the project according to the plans and protocol you submitted;
2. No further contact with the ORC is necessary unless you make changes to your project or adverse events or injuries to subjects occur;
3. If you propose to make any changes in the project, you must submit the changes to the ORC for IRB review; you will not initiate any changes until they have been reviewed and approved by the IRB;
4. If any adverse events or injuries to subjects occur, you will report these immediately to the ORC;

The University appreciates your efforts to conduct research in compliance with the federal regulations that have been established to ensure the protection of human subjects in research.

Date of Exemption: February 10, 2006

Sincerely,

Ross A. Hickey, J.D.
IRB Designee
Human Protections Administrator