

CREATING COMMUNITY AT NIAOM

Fred Lanphear, Ph.D. - April 15, 1998

There is a principle in Oriental medicine that says if you want healthy individuals then you have to create healthy communities - in that same context, healthy communities are balanced, harmonious communities. Yet, the journey to achieve balance sometimes looks and feels quite unbalanced and unharmonious. As a community concerned with health and wellness we have been working at what it means to embody the principle of creating a healthy community.

The Northwest Institute of Acupuncture & Oriental Medicine, known by its acronym NIAOM, works at being and sustaining balanced community. The intent of this article is to share some models and learnings that have been revealed on our journey towards becoming a healthy community. There have been a variety of books in recent years that present different models and strategies for organizational development. Perhaps this is because the workplace has become a primary social support group for a large number of citizens. The social sciences is still in the early stages of developing models and tools for measuring the health of organizations. The particular window or perspective that is presented here is based on a model developed by the Institute of Cultural Affairs (ICA) in the '70's and integrated into an organization with an Asian cultural context.

Background: NIAOM was founded in 1981 as an academic institution to train professional acupuncturists and to provide affordable acupuncture in a community teaching clinic. I was hired as CEO in 1989. At that time NIAOM was operating in a year-by-year survival mode. We were enrolling 20 to 25 students per year in a three-year graduate level program leading to a Masters of Acupuncture degree. The annual dilemma was in August when we hoped we had enough money left from the previous academic year to stay afloat and that we had enough students coming in to make it into the next academic year. We now take in 70 students per year or three times the earlier enrollment. Our budget during this eight year period has grown from about 300K to over 1.5 million dollars. There have many learnings along the way in our "bumpy" journey to achieve community.

When I was hired as CEO I was expected to provide administrative leadership and raise lots of money, with the emphasis on the latter. What I hoped to accomplish was to build an administrative team and support forces that would fulfill these expectations. What I brought into this role was 17 years of experience with the Institute of Cultural Affairs in facilitating community and organizational development. Ten years of this experience was in Kenya and India. I did not have any training or even exposure to acupuncture when I took the position. My intent was to facilitate a participatory style of management with the five part-time members of the administration, two of whom were then students of NIAOM. The challenge was how to nurture this fledgling organization, while catalyzing change in a relatively hostile environment, towards becoming an established institute of higher learning and a healing community.

In the first two years it became clear that there was not a consensus to create a team approach and that the prevailing style of strong individualistic initiative was the order of the day. I resigned after two years but continued at NIAOM as Provost where I was able to be a supportive team player but now in a more traditional hierarchical style of management. Within six to eight months the hierarchy began to crumble and I was asked to help design a participatory model of management. It was a situation in which a crisis was also an opportunity. I will now outline the model that was designed out of this struggle and describe how it has served us over the past five years. Before the new model was put in place the hierarchy did crumble and I was asked to resume the position of CEO and to make it work.

A Consensus-based Management Model: In this initial model (see Figure1), created in 1992, an Executive Council consisting of an elected Faculty Chair, the Academic Dean, an elected administrative representative, and myself as CEO selected by the Board of Directors, served as the primary administrative decision-making group in place of the traditional hierarchical structure. We met every two weeks and responded to input from all facets of the institution. We set up cross-discipline management teams which we hoped would be sensitive to the various needs and perspectives of the various members of the community that would be affected. Each contingent was encouraged to develop a sense of cooperativeness and to realize the power of collective action. As we grew from a staff of six to our present size of over 20, we have evolved an organic structure that is designed to encourage involvement and cooperation, and to maintain the qualities of the small team. This was achieved by creating four administrative teams as shown.

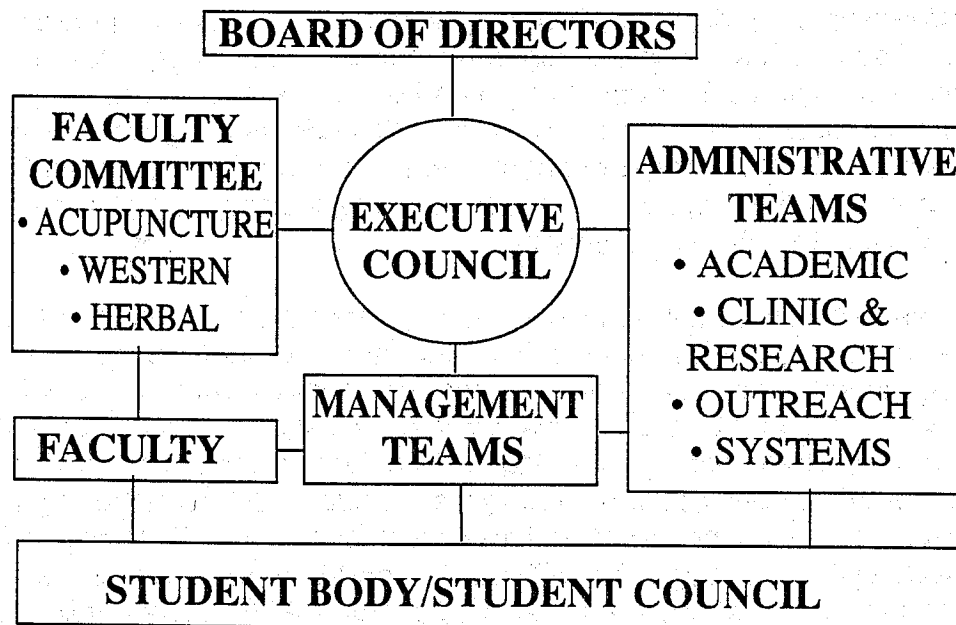


Figure 1. NIAOM's participatory and consensus-based organizational model.

A Social Process Model: What I have just described is the organizational structure we use in our ongoing quest for balance and harmony in the NIAOM community. If we had relied only on this participatory mode of management to guide us during the last five years I can assure you we would look very different today. In addition, we relied on a model derived from the ICA's Social Process and Corporate Process Triangles which recognizes that in any social grouping there are three basic elements that are in dynamical relationship to each other (see Figure 2). There is the enterprise or foundational dynamic, without which there is nothing. It represents the basic elements that give it form and substance; that which sustains the whole process. In the case of NIAOM, this is the enterprise of educating acupuncturists and providing clinical services to clientele. Then there is the organizational element which brings a sense of order to NIAOM's interactions. Finally, as described above, there is the cultural or informing dynamic; that which gives identity, values and purpose to NIAOM. As you look at the activity under each of these, there are sub-levels, each with three sub-elements that follow a similar rationale of the foundational, organizational, and informing aspects.

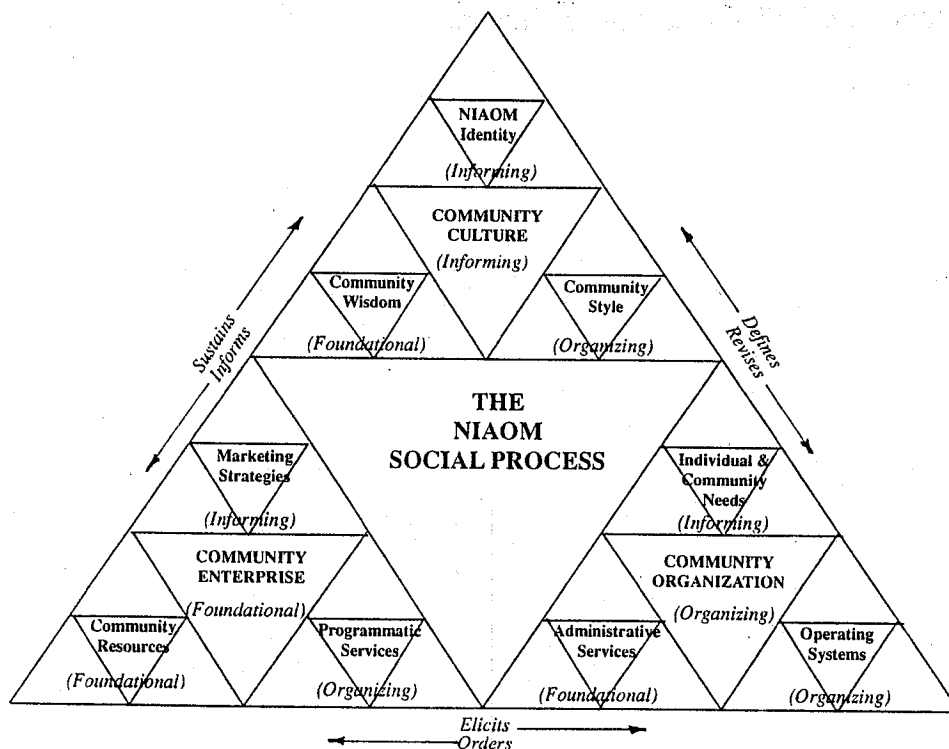


Figure 2. The dynamic rationale of the NIAOM Social Process Model.

The key to balance and harmony which engenders trust, fosters commitment, and elicits risk, is when each of these dynamics are in place and functioning. Frequently, (see Figure 3) one will become dominant and tyrannize the whole process, usually supported by one of the others as an ally, and usually at the expense of one that has collapsed. When this happens, the challenge is to tonify the dynamic which is collapsed and restore balance. *Imbalances are a natural phenomenon that*

accompanies change, whether that change is growth and development, or a shift in the market environment.

Currently, the growth of NIAOM's enterprise is dominating, and some would say tyrannizing, the social process. What has collapsed is the organizational dynamic - that which allows for the smooth and orderly functioning of the process. This is not unexpected in a time of rapid expansion, but it does require attention. The cultural is supporting this growth with a strong sense of purpose and justification for the growth, although there is a sense that there is "a loss of intimacy". However, this is not related to a change of values or purpose, but rather an inability for faculty and staff to connect with students personally because of the increased number of students to relate to. This contradiction is being addressed, initially by hiring a full-time Dean of Students, and more recently by arranging faculty to have office hours for consulting with students one on one. In the 1998-99 academic year, seminar classes with 15 or less students will be scheduled to allow for enhanced dialogue in these specific classes. They will be designed to help students integrate the theory and techniques that are presented in the first year of classes.

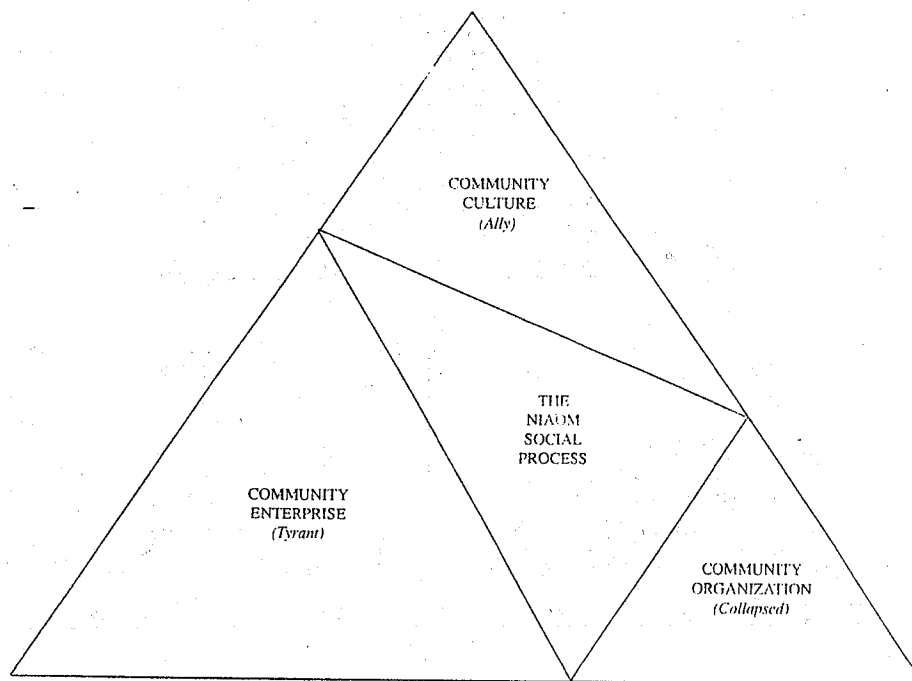


Figure 3. Current imbalance of the NIAOM Social Process.

With this background of the NIAOM Social Process Model, let's look at these elements one at a time as they are described down to the third level in Figure 4.

NIAOM as Community Enterprise: The heart of NIAOM is its Programmatic Services, i.e. the academic and clinical programs which gives order and form to NIAOM as an enterprise and is the service it provides. Sustaining these programs are the

Community Resources; the Financial, Human, and Technical-Cultural Resources. Informing the enterprise is the Marketing Strategies which in turn is informed by Market Analysis and has as its foundation, Promotion and Recruitment dynamics which are organized around a selected Media and Audience Focus.

If we were to do an analysis on the imbalances of the elements at the second level of **Community Enterprise**, we might conclude that the Programmatic Services is the dominant force, supported by the Community Resources. Marketing Strategies is the weakest dynamic at this level. This is being addressed by hiring a full-time Public Affairs Officer who will analyze and coordinate marketing.

NIAOM as Community Organization: As already discussed, one uniqueness of NIAOM is the way in which it is organized and the Consensus-based Decision process and Participatory Management approach as shown in Operating Systems. The Executive Function in this dynamic is a shared responsibility as described in the Management Model. If This requires mechanisms for the various contingencies of the NIAOM community to have input and get feedback.

With students, there is an active Student Council and quarterly student forums where students are asked to identify what's working and where there is need for improvements. This input is taken very seriously and responses are formulated and communicated through the Student Council and a montly newsletter that goes to everyone in the NIAOM community. This input has been extremely creative and resulted in great changes in teaching approaches as well as the establishment of external clinics. Students are reminded of their role as contributing participants in the school, not just beneficiaries, from day one. An important part of the NIAOM story is the role that the students played in raising the monies to keep the school afloat at the end of its third year when it was going to be closed because of insufficient finances.

Faculty input is equally important but more difficult because of the part-time nature of the faculty. Quarterly meetings are held along with monthly meeting of elected department heads and faculty chair. It has been extremely challenging to enlist faculty participation at these meeting. We have used a variety of techniques, including compensation, great food, and sometimes arm-twisting. Recent successes have been the weekend retreats which have been held two years in a row.

Orchestrating input from the administrative team was much easier when we only had six staff in comparison to our present size of about 20. As we have grown we have evolved an organic structure that is designed to reduce adversarial interactions and encourage cooperation (see Figure 5). To keep everyone in the communication loop we now meet all together monthly and also as administrative units. Inter-unit meetings are becoming necessary as our interdependence becomes more obvious. The key is meeting on a regular basis and not just when there is an issue.

If I was to identify the current imbalance within **Community Organization**, it would be that Individual and Community Needs is currently dominant and supported by Operating Systems. Administrative Services is still trying to catch up.

NIAOM as Community Culture: This is the soul of NIAOM and I believe in any organization. It is frequently the aspect of an institution that gets neglected. We are very intentional about creating NIAOM's community culture.

It is guided by an emphasis on NIAOM's Community Identity which has its mission and organizational statements as the foundation. Collaborative Partnerships is an operating style, both internally and externally. Creating a Professional Image that also embraces our Asian cultural connection has been very important for our public profile as well as our internal corporate image. One way we do this is through our publications which reflect a professional quality as well as communicating our Oriental medical cultural context. Another way we do this is by paying very close attention to the Feng Shui (spatial design) of our interior space. When you visit our facility you are impacted by plants and artwork as well as professional signage. Even notices are done with graphic finesse. All of this communicates a sense of care.

At the foundation of NIAOM's **Community Culture** is its Community Wisdom, opportunities for Innovation in all areas of the operation, and a focus on the Values and Philosophy that guide and provides the context that permeates our very being as an organization. We utilize a variety of ways to rehearse this, including NIAOM Notes, our in-house newsletters, The Meridian, our external newsletter, and periodic publications like the 10th and 15th Anniversary publications that provided an opportunity for a number of our faculty, board members, and staff to articulate who we are as a school, a profession, and what our vision is for the future.

That which gives order to our culture is the Community Style or patterns which are uniquely NIAOM. We not only embrace Diversity in all aspects of recruiting and hiring, we utilize it in making sure we have many perspectives and skills at work. Personal Development is a major focus in the dynamics of our community. We use a variety of opportunities to encourage individuals to share their vision and reflect on their past. One afternoon each month the staff gather to celebrate the birthdays for that month. We ask each person who has a birthday to share with us their age, an event or image of the year, the challenge for the coming year, and how the community can be supportive. At our staff retreat this year, we had each staff person articulate their personal vision. Personal Development and transformation is at the heart of preparing students to be healers and staff to realize their full potential. To be a healer, a person has to go through their own healing process. That which guides our Community Style is Comprehensive Care. We have very few people who work 40 hours a week and many only work 20 to 32 hours. The reason for that is not so we don't have to pay benefits on those individuals, because we do. The reason is because most individuals want that extra time to do other things that helps to achieve balance in their personal lives. For some it may be an acupuncture practice while others may just want more time at home. Every student and patient is treated with

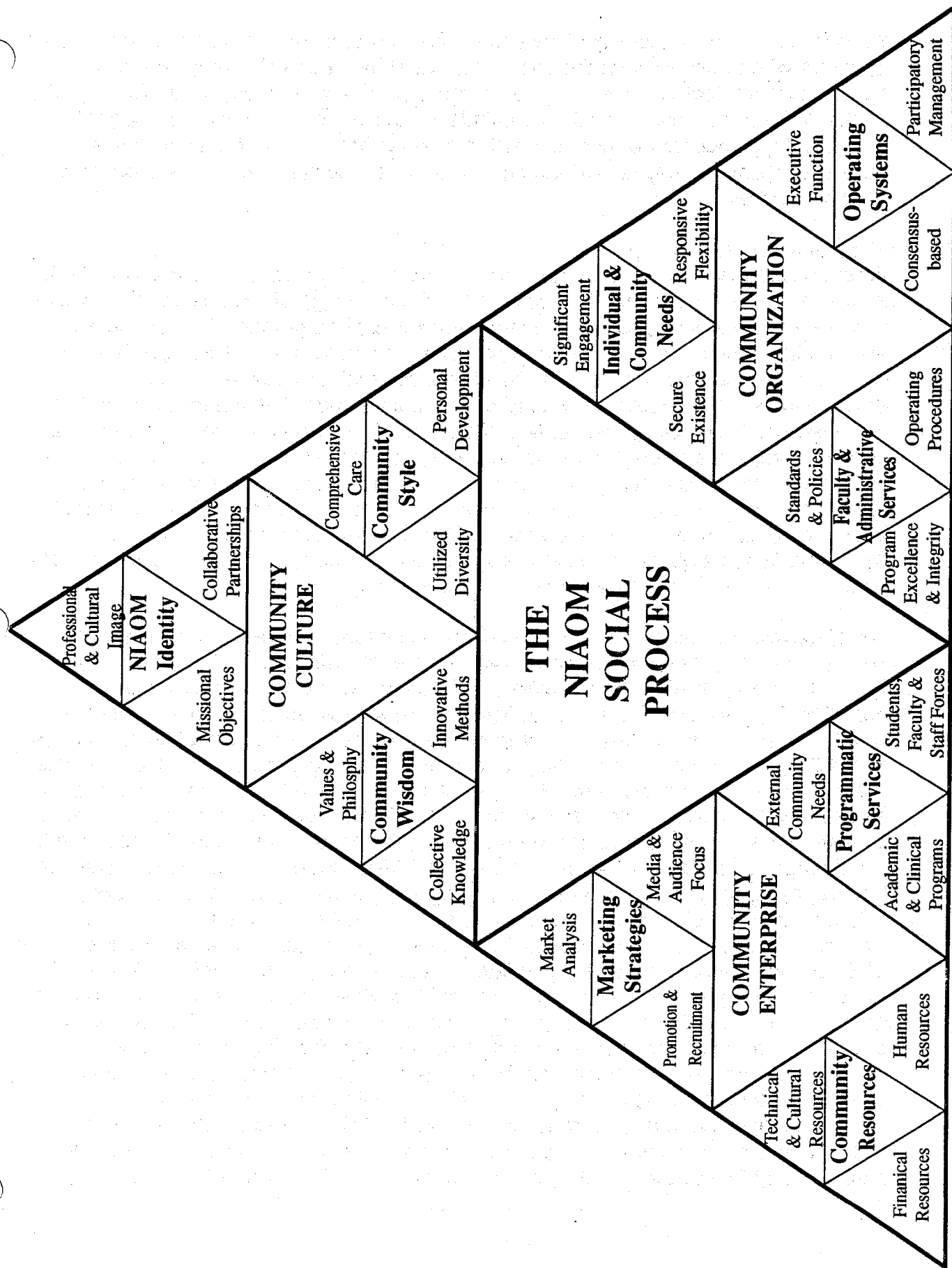


Figure 4. The NIAOM Social Process Model

special care. One of the ways I care for students is to learn and address each student by name when I see them in the hall. That wasn't much of a challenge when we only had 75 students but as we are now over 200 it does require a discipline. Nancy, who works at the front desk in our clinic reminds me that we cannot grow any bigger than the number of students whose names I can remember. But then she knows each patient by name as they come into the waiting room and we have over a thousand patient visits per month.

The System in Operation

What I would like to do on the other side of this overall view of the dynamics of NIAOM is to share how the community responded to the challenge of expansion. Four years ago we found ourselves faced with more student applicants than we could accept assuming we honored our principle of limiting the class size. The Executive Council looked at this and came to the consensus that it was time to open up a daytime track which would allow us to double the number of students we accepted. We presented this plan to the administration and discovered that we did not have a general consensus to do this; in fact, we had great resistance for various reasons - we would compromise our quality, we would lose our intimacy, and we were not ready. Now we could have tried to impose this plan on the staff but I was clear that there would be limited ownership and therefore motivation to make it work. So, we asked the obvious question - what would it take to be ready in a year because it was fairly clear that this was a trend we were experiencing.

We discovered some of the perceived changes needed were additional staff, more space, and assurance that we could maintain the intensity of our clinical training. The first two were relatively easy to achieve, but how to expand our clinical training opportunities was the greatest challenge. Perhaps it was synchronicity, or maybe it was because we encouraged our students to participate in the management process of NIAOM, or both - but during that year of preparation our first external clinic site was established at Harborview in the Refugee Clinic. This developed because one of our students was a social worker at Harborview and knew there was interest. She asked us if we would be interested and we were delighted so she went ahead and made the initial proposal to Harborview. Not only was the idea accepted, after we had been at Harborview for only a few months, the adjacent Chronic Fatigue Syndrome Clinic asked us if we would set up a clinic with them. The following years we had other external clinic opportunities come to us, often through student contacts. Each of these clinic collaborations have developed into exciting partnerships in which we recognize the pioneering path we are forging. Integration of Eastern and Western medicine has now become one of our major missional objectives. Along with this has come the decision to launch a major research effort knowing that for acupuncture to be accepted by Western medicine and the emerging managed care approach to health care, that documentation of acupuncture efficacy will be required. This was a major leap for us as we had no assurance of external funding. It was a risk that we knew we had to take because if we were going begin training more students, we had to take responsibility for creating a receptive environments for our graduates.

It was clear during the year of preparation that the administrative staff had taken ownership of the expansion concept and were ready to do whatever it would take to not only begin the doubling process but increase the quality of the program in the process. Individual staff took on new responsibilities, set up new systems, and became part of a great team effort to make it happen.

Summary: We have grown and changed considerably in the past five years. The dynamics of growth have required rebalancing the process on a continual basis. What makes it work is the collective wisdom and power of the whole community working together to make it happen. Our growth requires that we look for a new site with more space. There are many other changes ahead that will once again test our trust in ourselves, the level of our commitment to our expanded mission, and our individual and collective willingness to risk ourselves for all the demands of the next quantum leap. I believe that if we maintain our balance as a community we will be ready for the journey. We have a core of seasoned travelers who have the skills and commitment to sustain the spirit of the community.