



Together for Leadership

*Creating High Performing
Teams*

An Essential Component of Success

Are you looking forward to tomorrow?

Yes

No

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Jan Bazow is the Founder and Chief Executive Officer of Fortis Group. Jan’s “heart” for helping emerging leaders ensures that they develop into effective leaders that can meet the challenges of today’s business environment, as well as ensures seasoned leaders continue to develop in their leadership journey.

Jan pursued her undergraduate studies in business (BBA) at Western Michigan University. Jan was accepted into the Masters of Arts in Education program at Union Presbyterian in Richmond. Jan is Ken Blanchard certified to teach Situational Leadership, certified in the MBTI (Myers-Briggs Inventory) and 5 Languages of Workplace Appreciation.



Ray Fisher CPA, CGMA, MS – Is Managing Director & Principal of Walker Healthcare Services Group CPAs, a firm dedicated to providing audit and advisory services to the senior living industry. Ray has over 25 years of experience gained at the executive level within the context of Fortune 1000 for profit, nonprofit and senior living organizations. His experience includes financial & strategic planning, mergers acquisitions & alliances, economic projections, debt placement & covenant negotiation, governance optimization, and teambuilding. He is a graduate of Washington & Jefferson College and earned an MS- Finance from the University of Baltimore. He has instructed at VCU, UVA and University of Baltimore

- Your perspectives
- Why creating high performing teams *is* important
- The scope of organizational impact
- Elements essential to success
- The process
- How to make this part of your organizational DNA
- A case study
- Where are you now

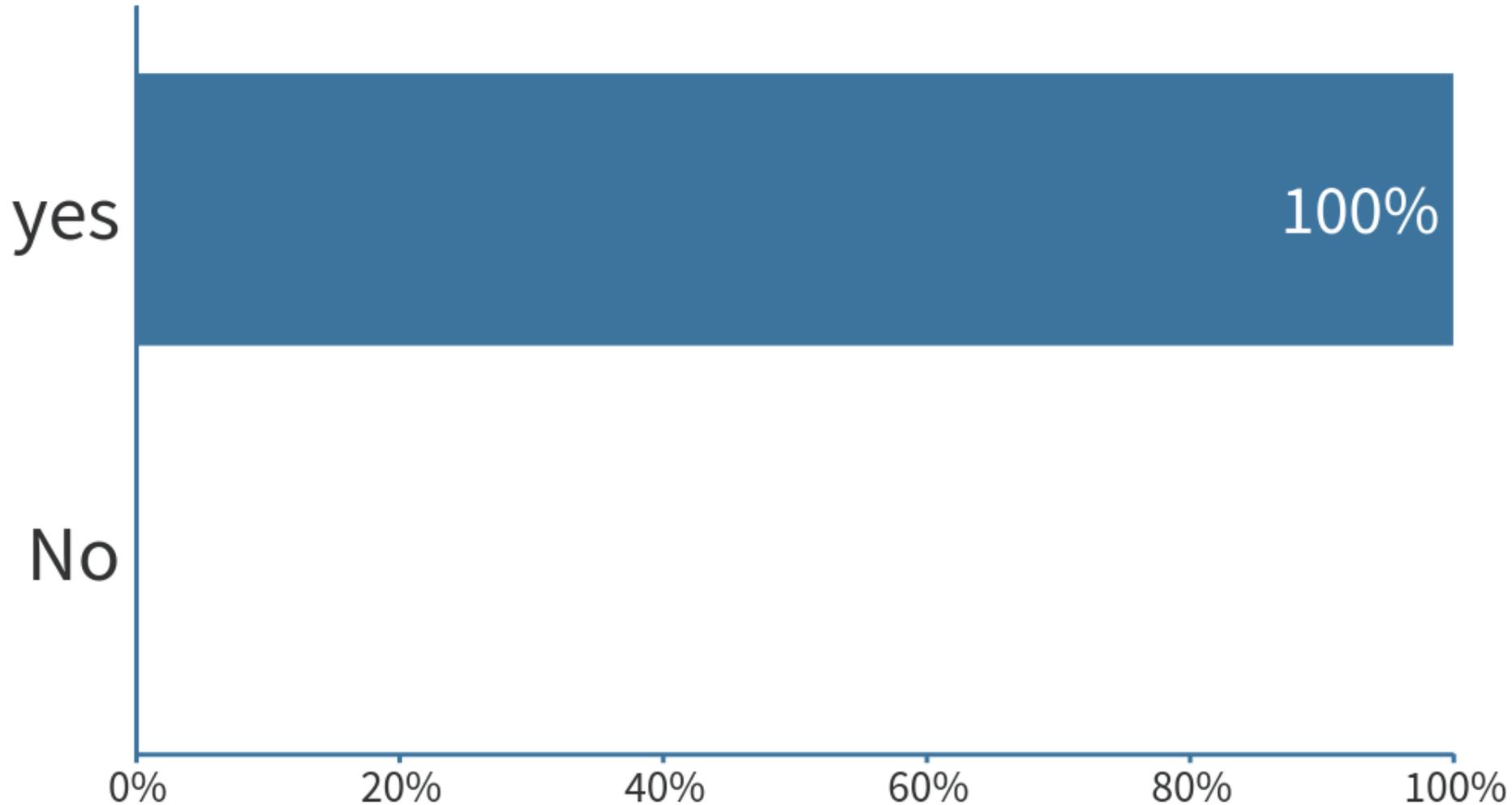
Have you tried team building?



When poll is active, respond at PolleEv.com/raymondfishe153



Text **RAYMONDFISHE153** to **22333** once to join

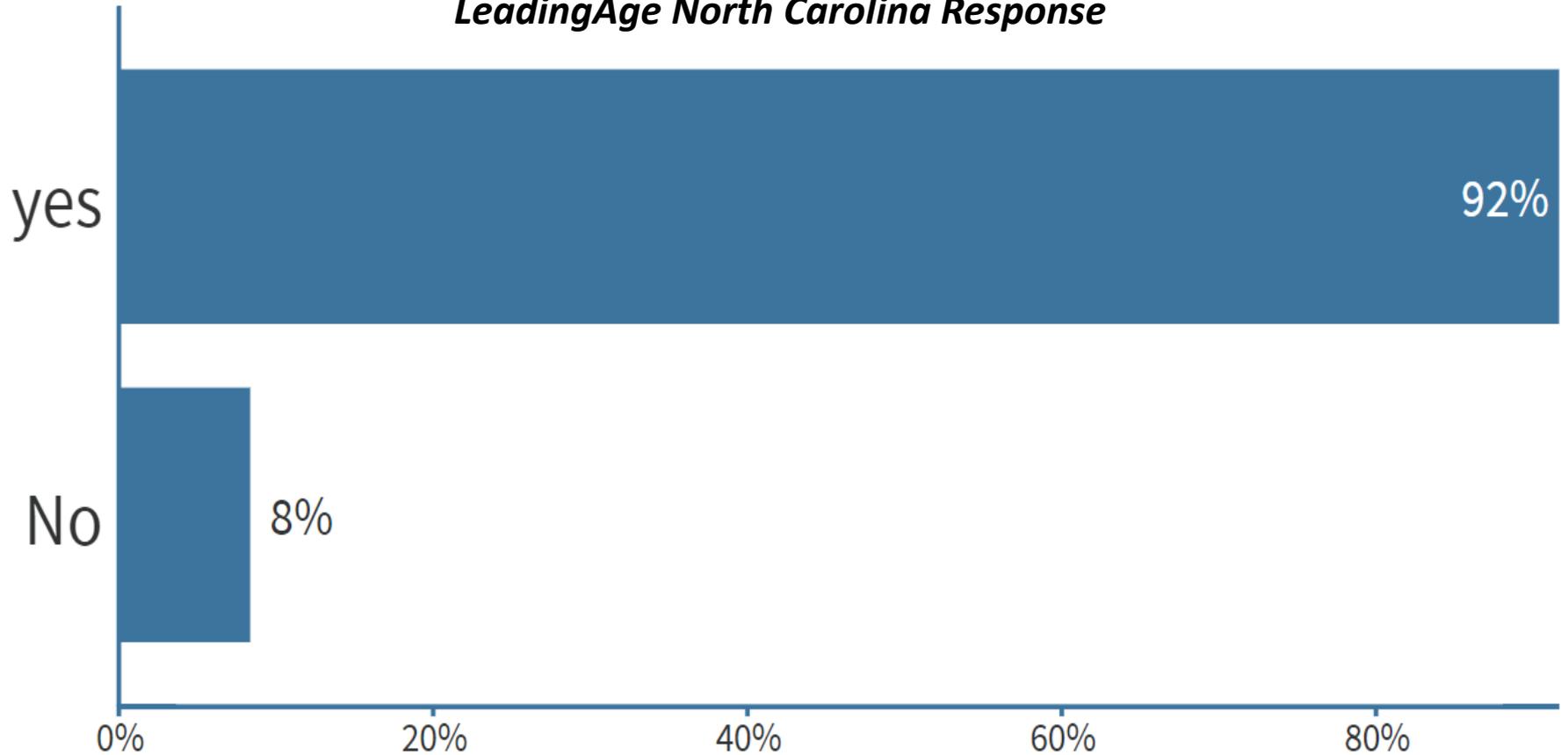


Have you tried team building?

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LeadingAge North Carolina Response



Was it successful?



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LeadingAge VA Response

Yes

50%

No

50%

0%

10%

20%

30%

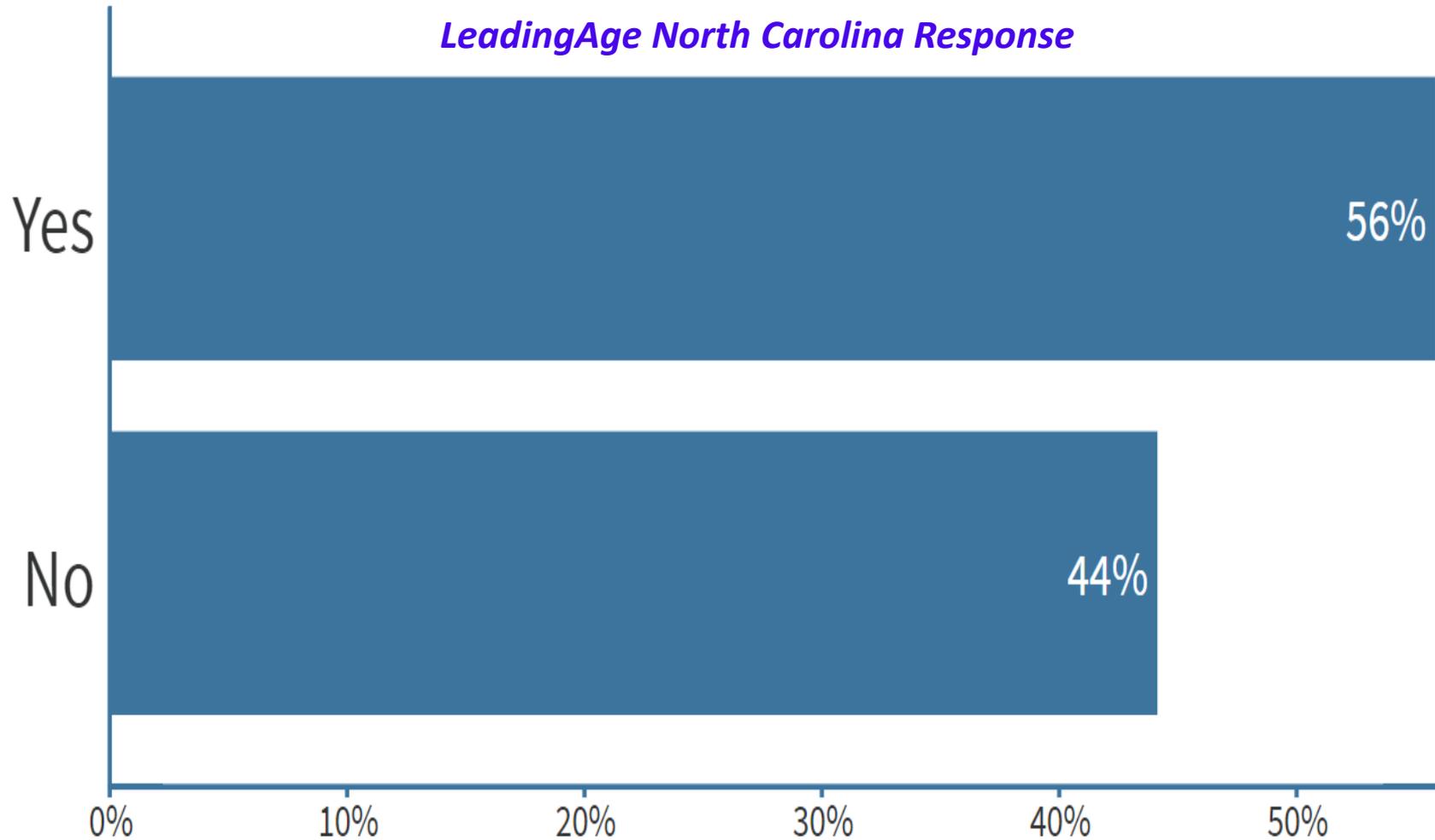
40%

50%

Power of Purpose

Was it successful?

LeadingAge North Carolina Response



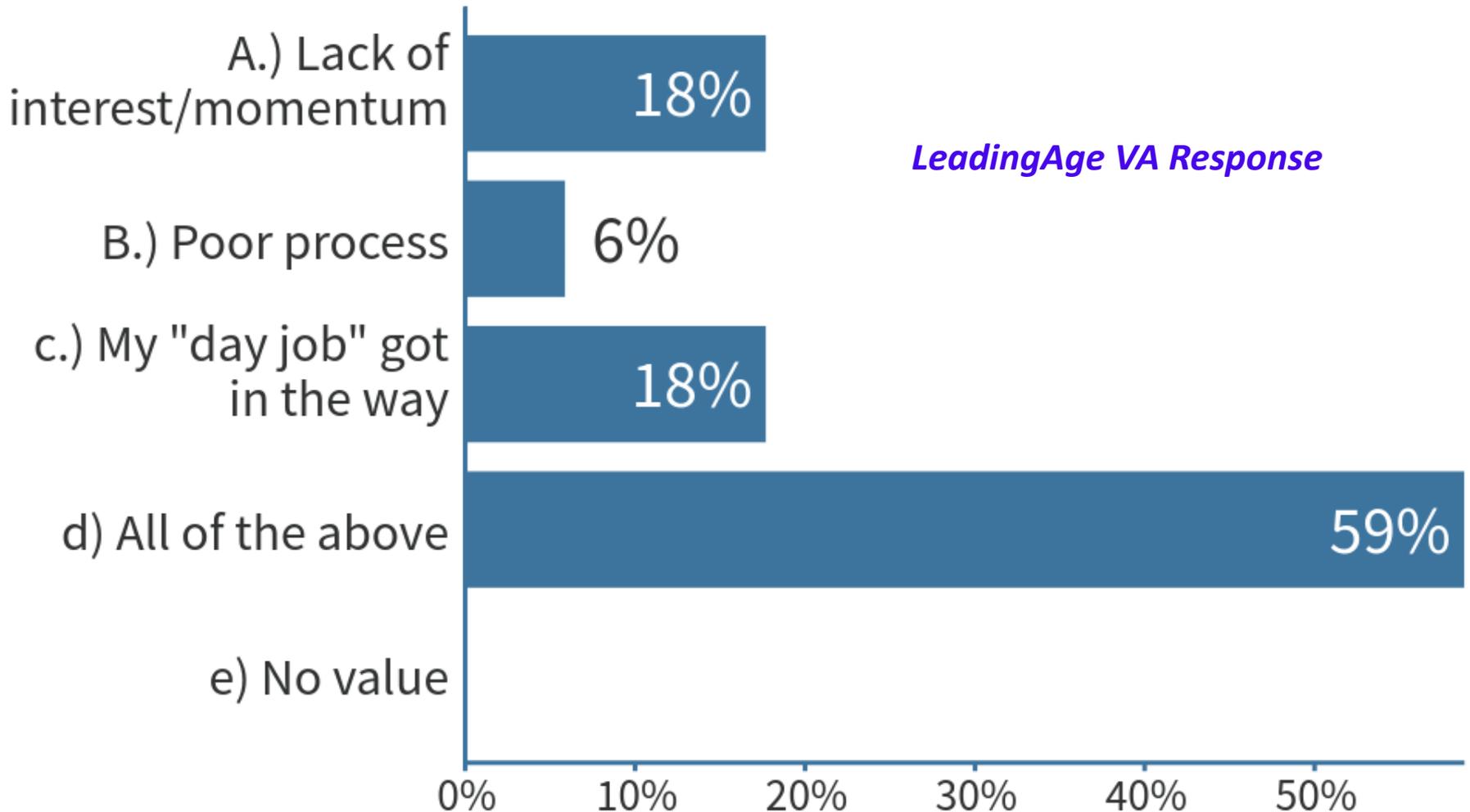
If not successful why?



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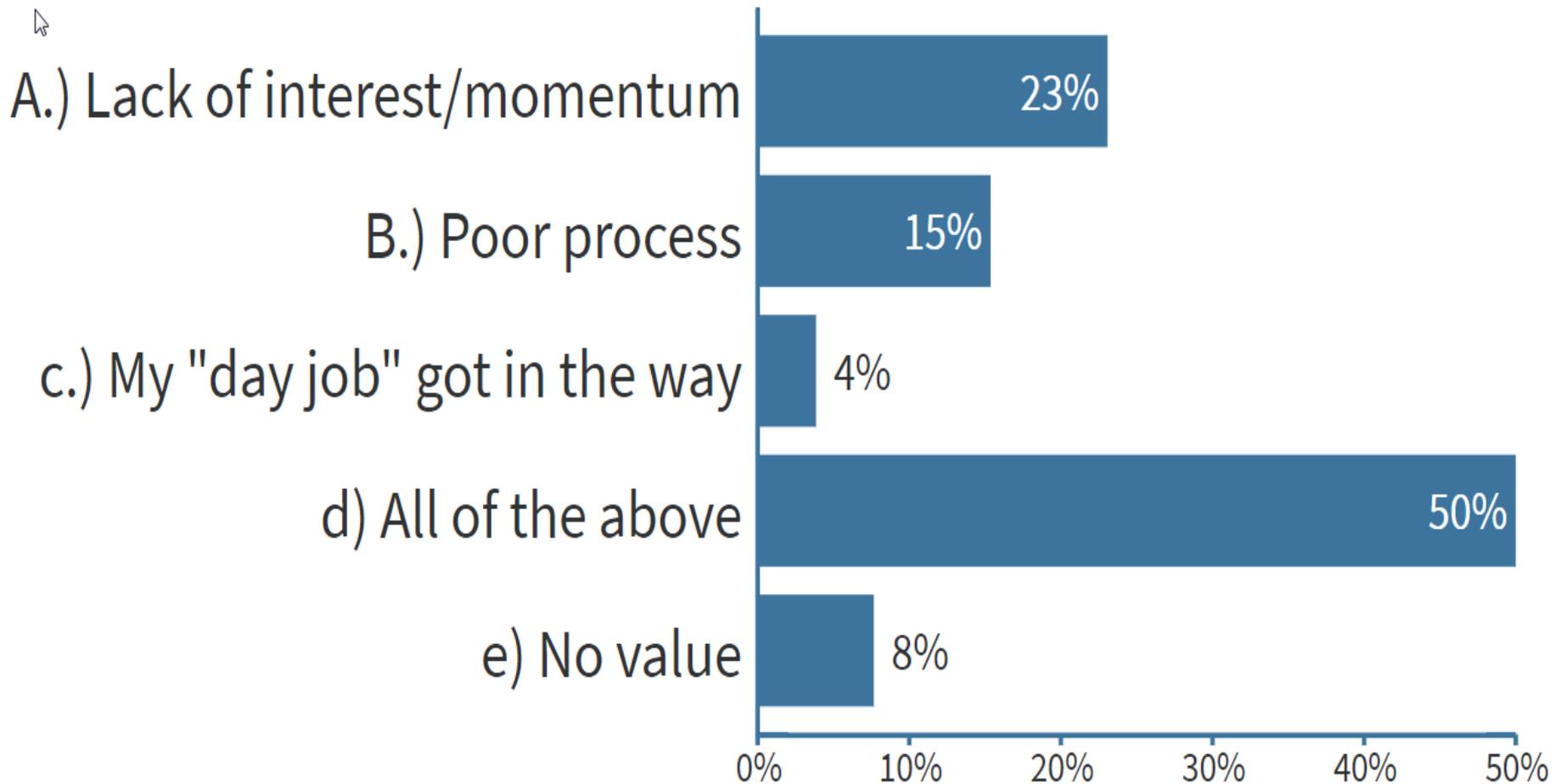


LeadingAge VA Response

Power of Purpose

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LeadingAge North Carolina Response

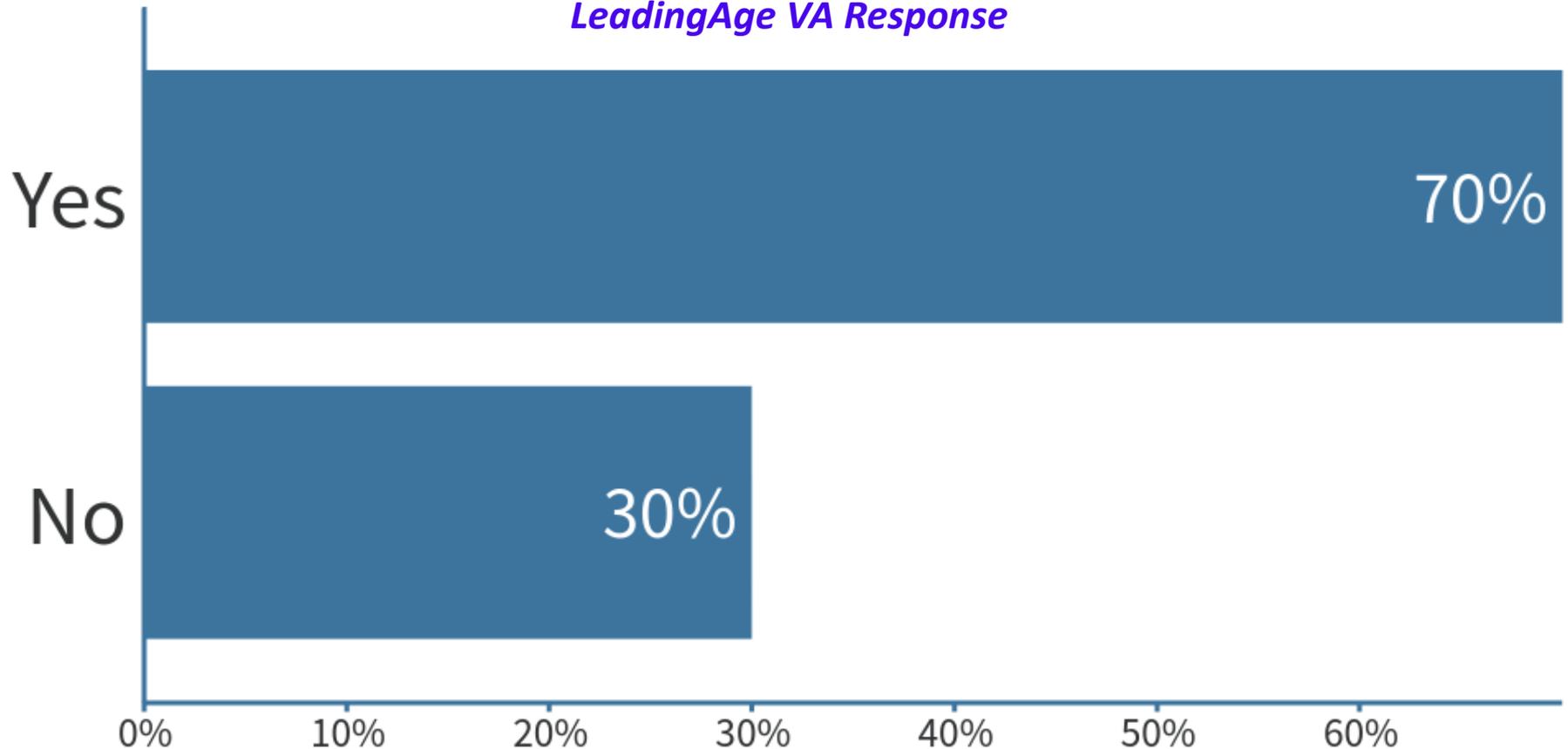


Do you view team building as primarily a "warm & fuzzy" activity?

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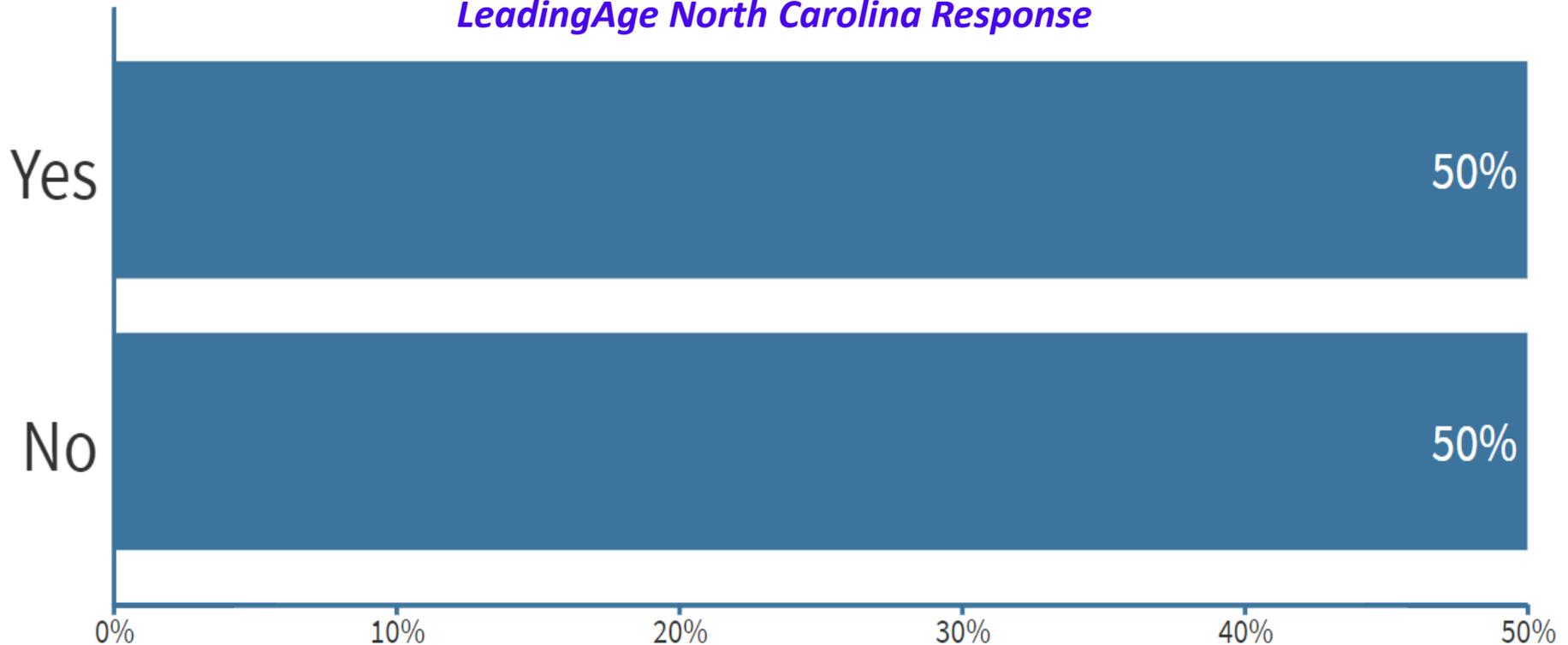


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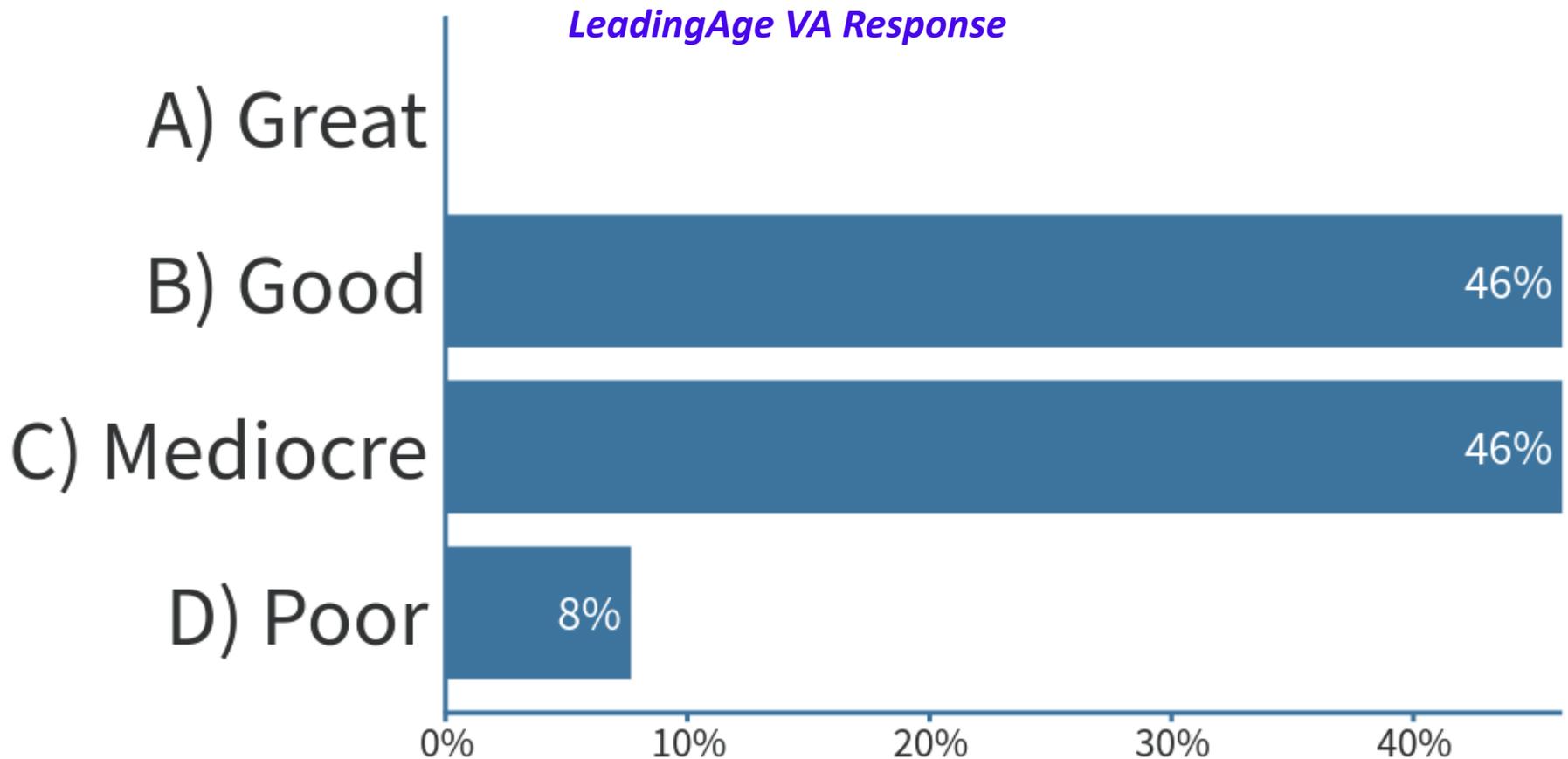
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What has been your experience with team building exercises?

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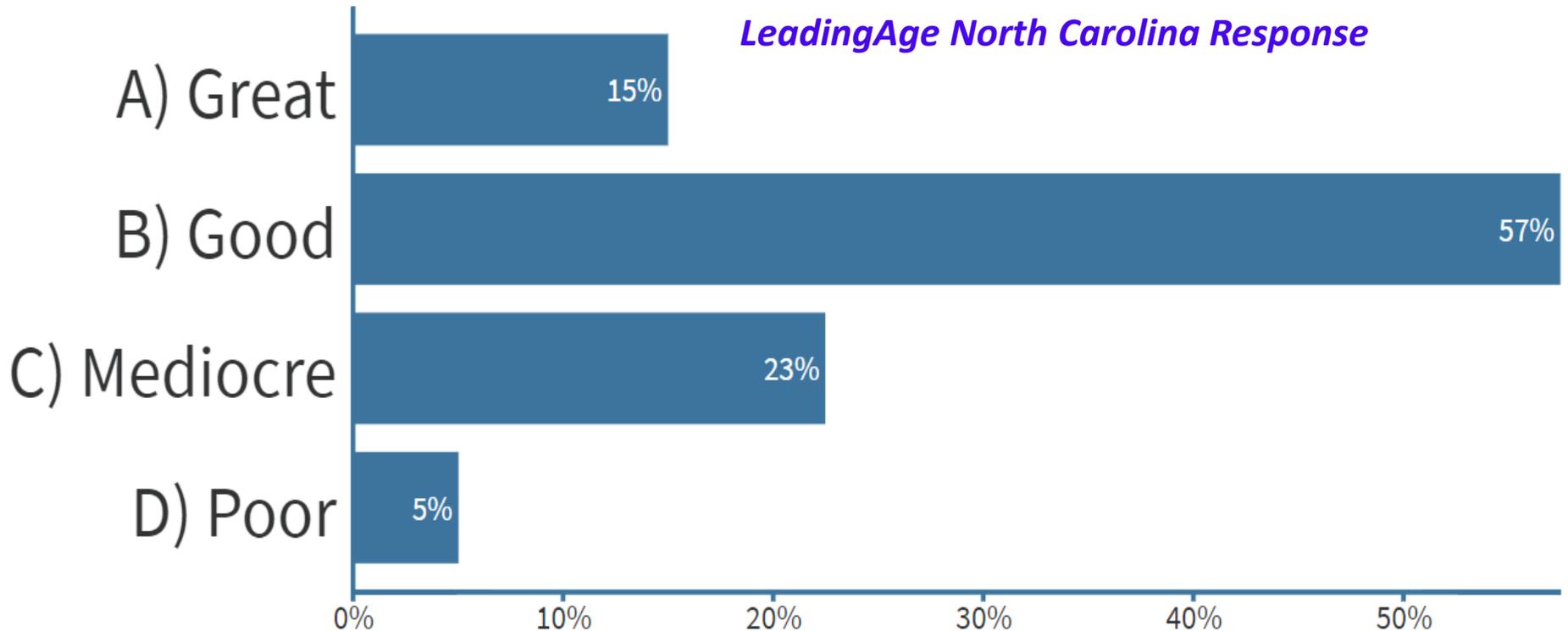


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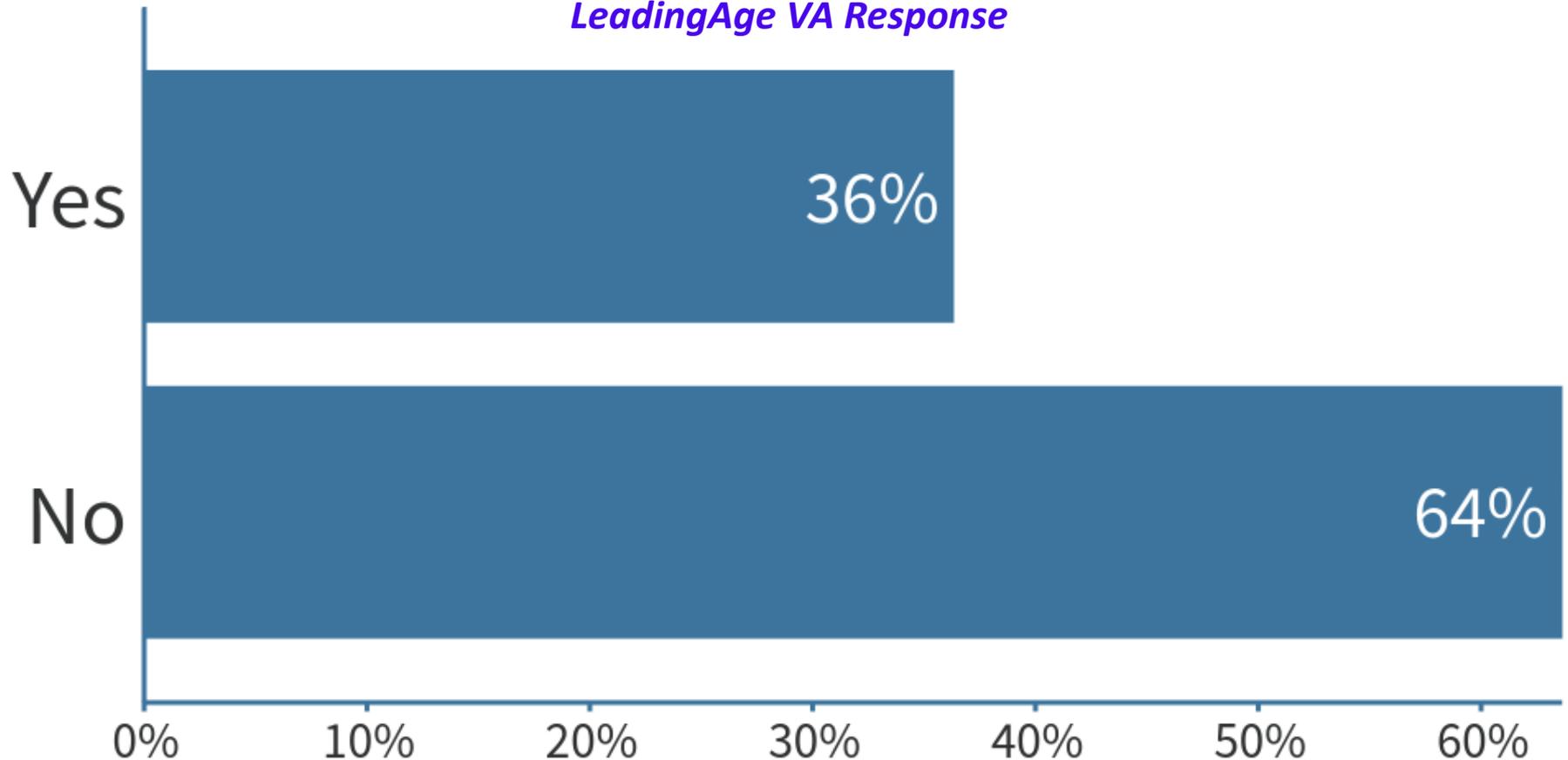


Did these efforts make a meaningful difference for the organization?

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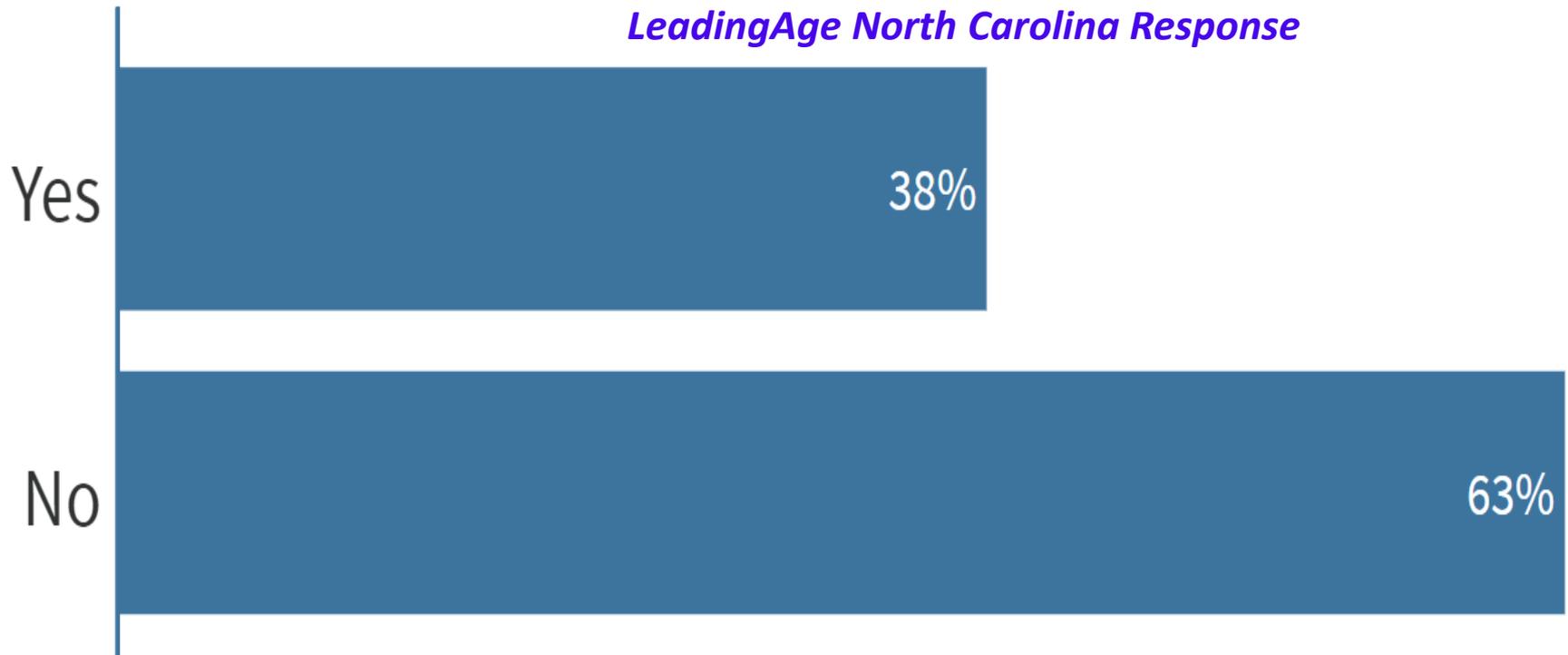


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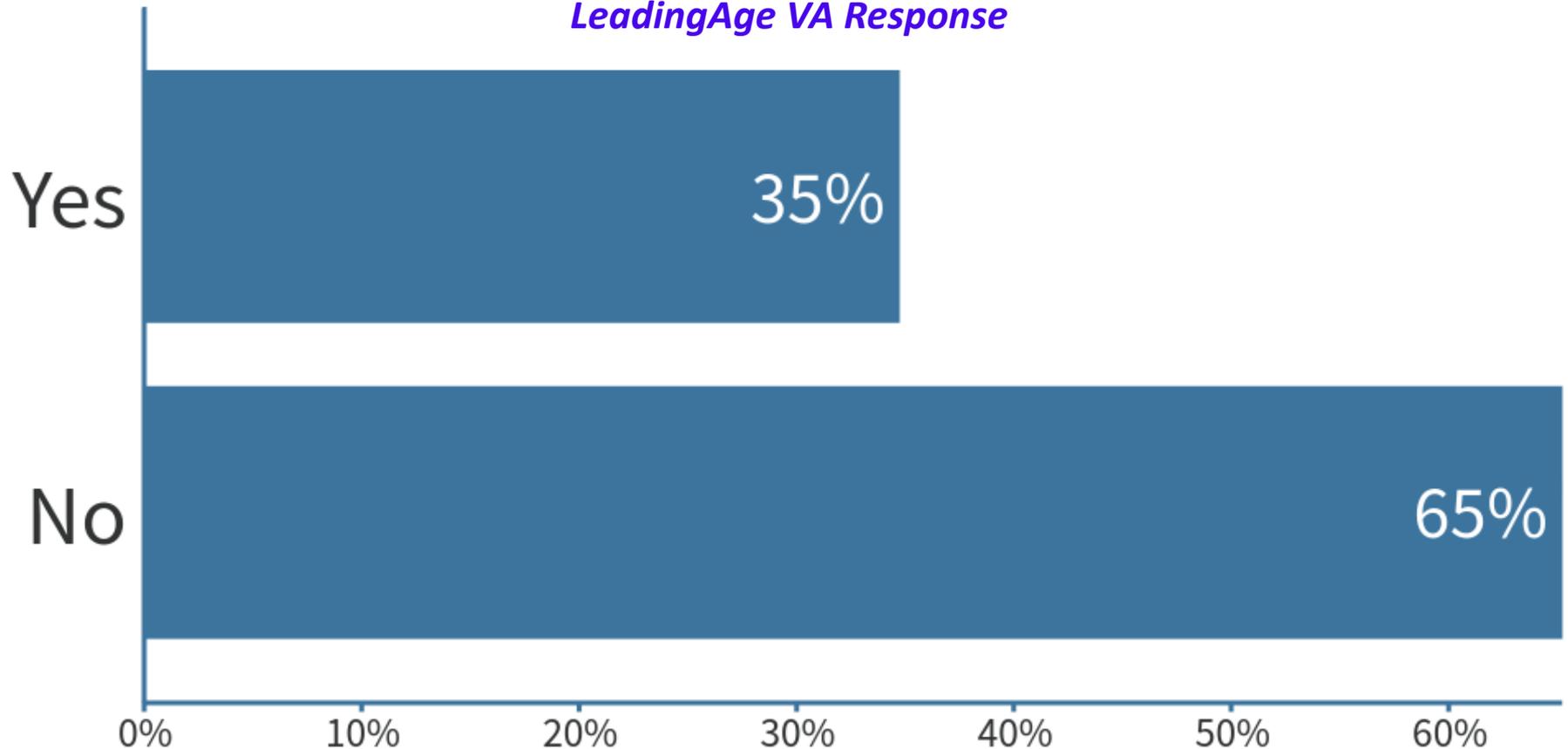


Do your employees communicate effectively?

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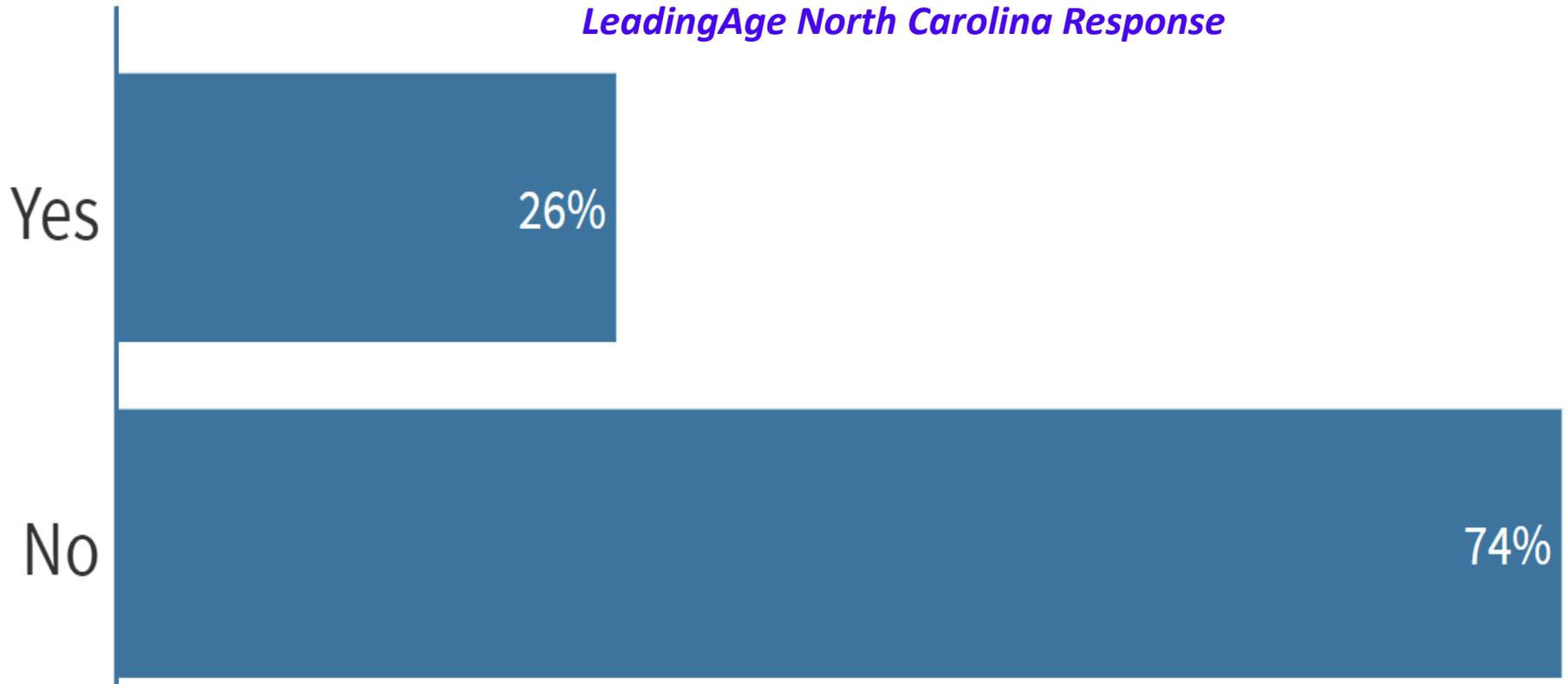


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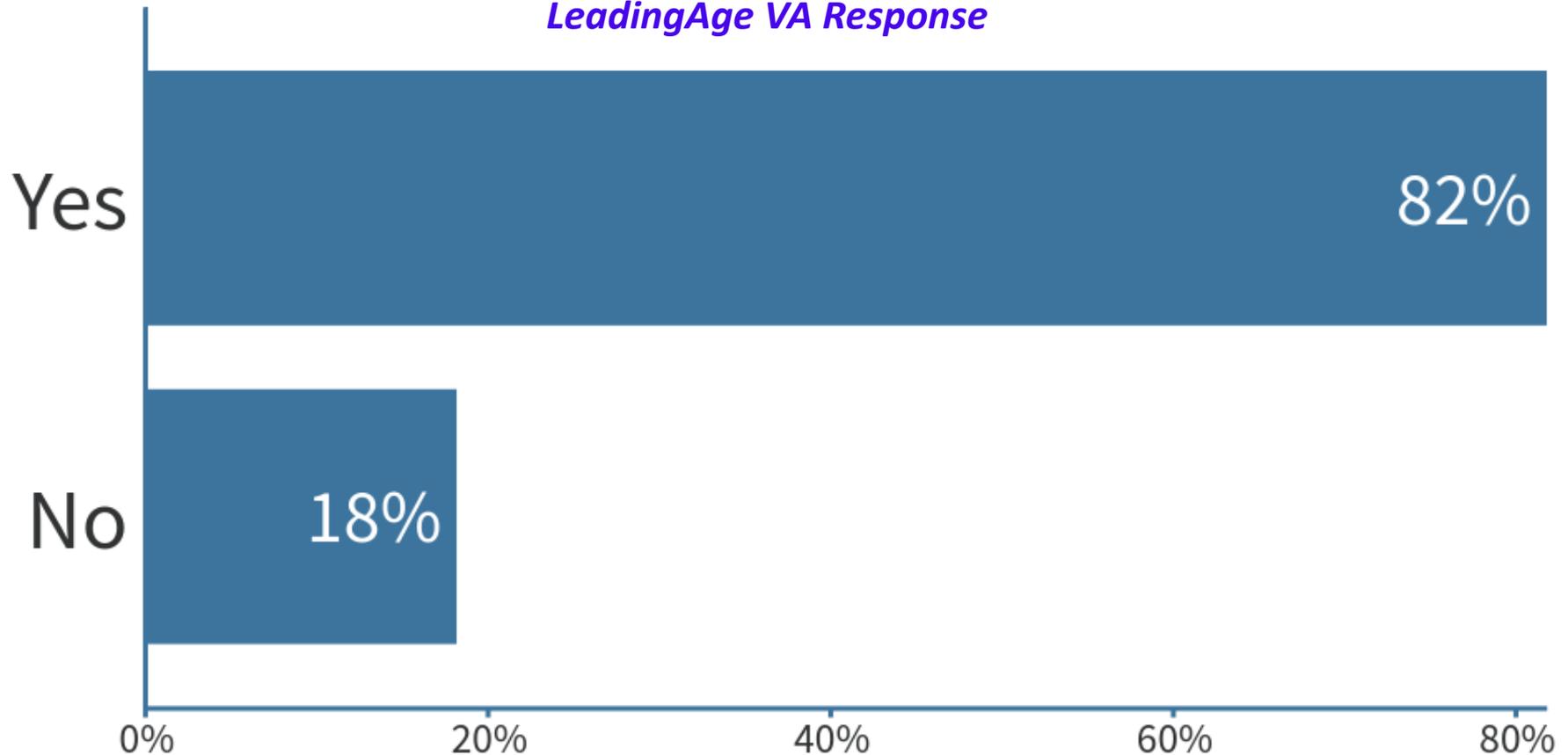


Are passive aggressive behaviors an obstacle in your organization?

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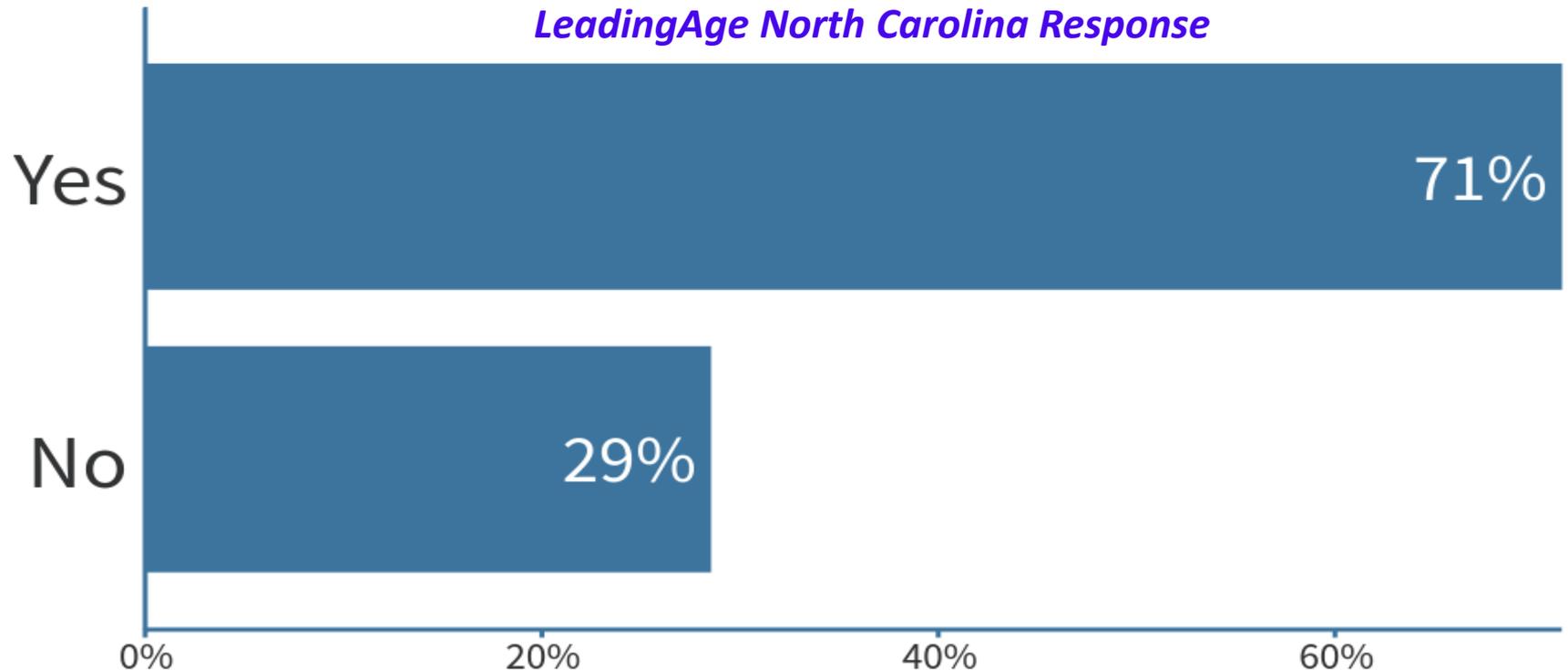
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Are passive aggressive behaviors an obstacle in your organization?

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LeadingAge North Carolina Response



Do employees have the skills for your organization to succeed today and tomorrow?



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Yes

52%

No

48%

0%

10%

20%

30%

40%

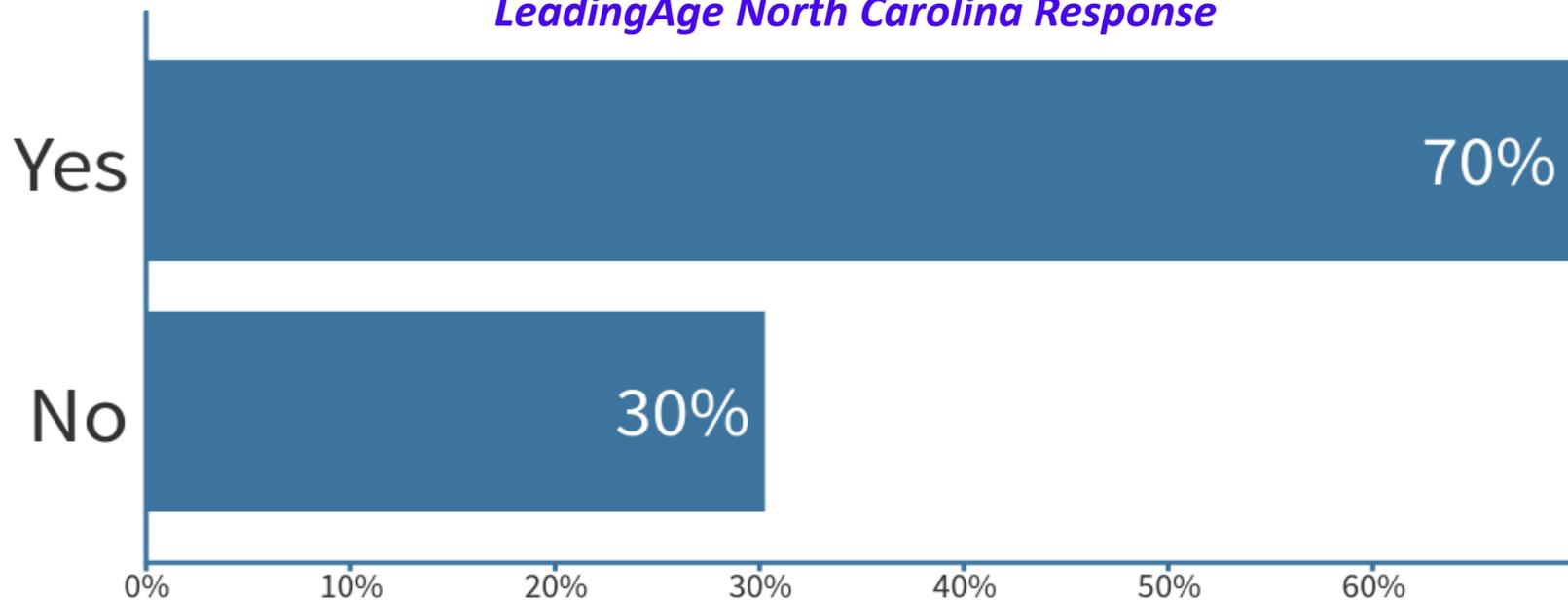
50%

Do employees have the skills for your organization to succeed today and tomorrow?

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Is talent retention a concern for your organization?

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Yes

91%

No

9%

0%

20%

40%

60%

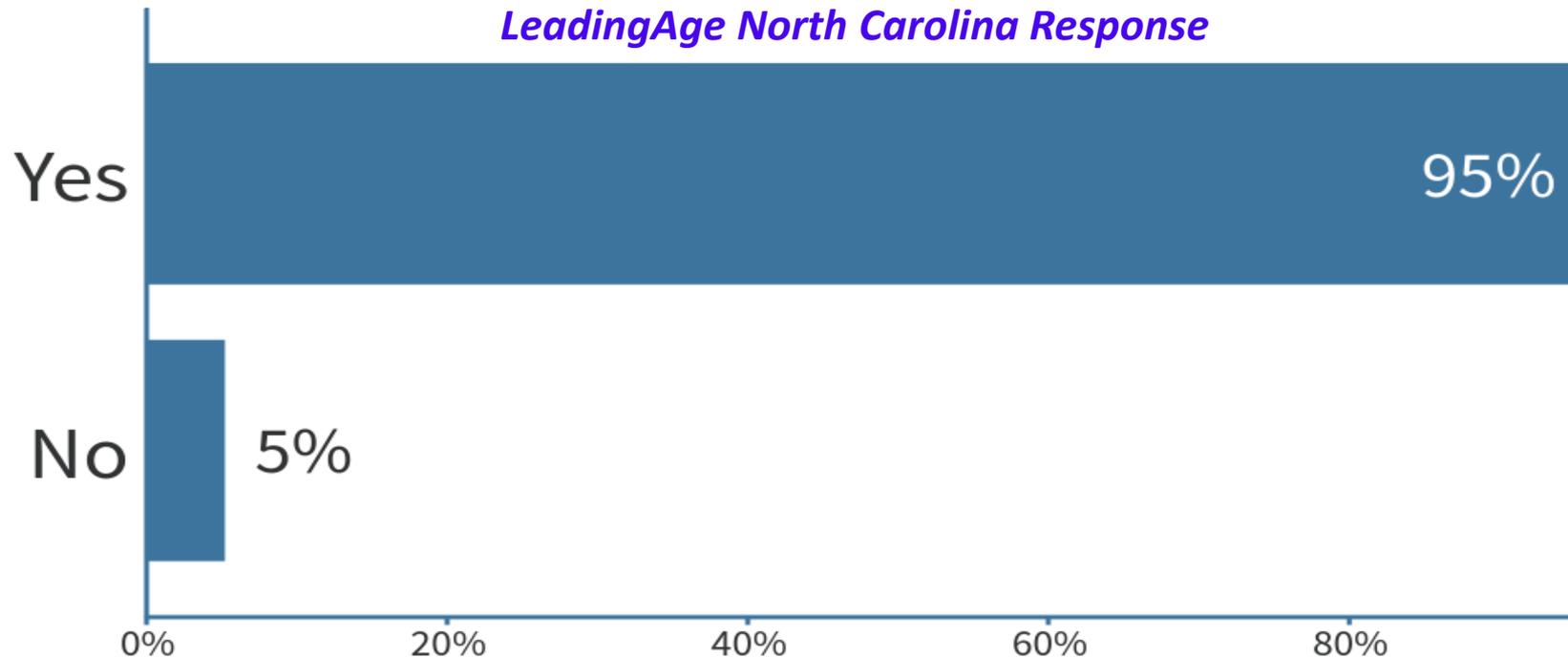
80%

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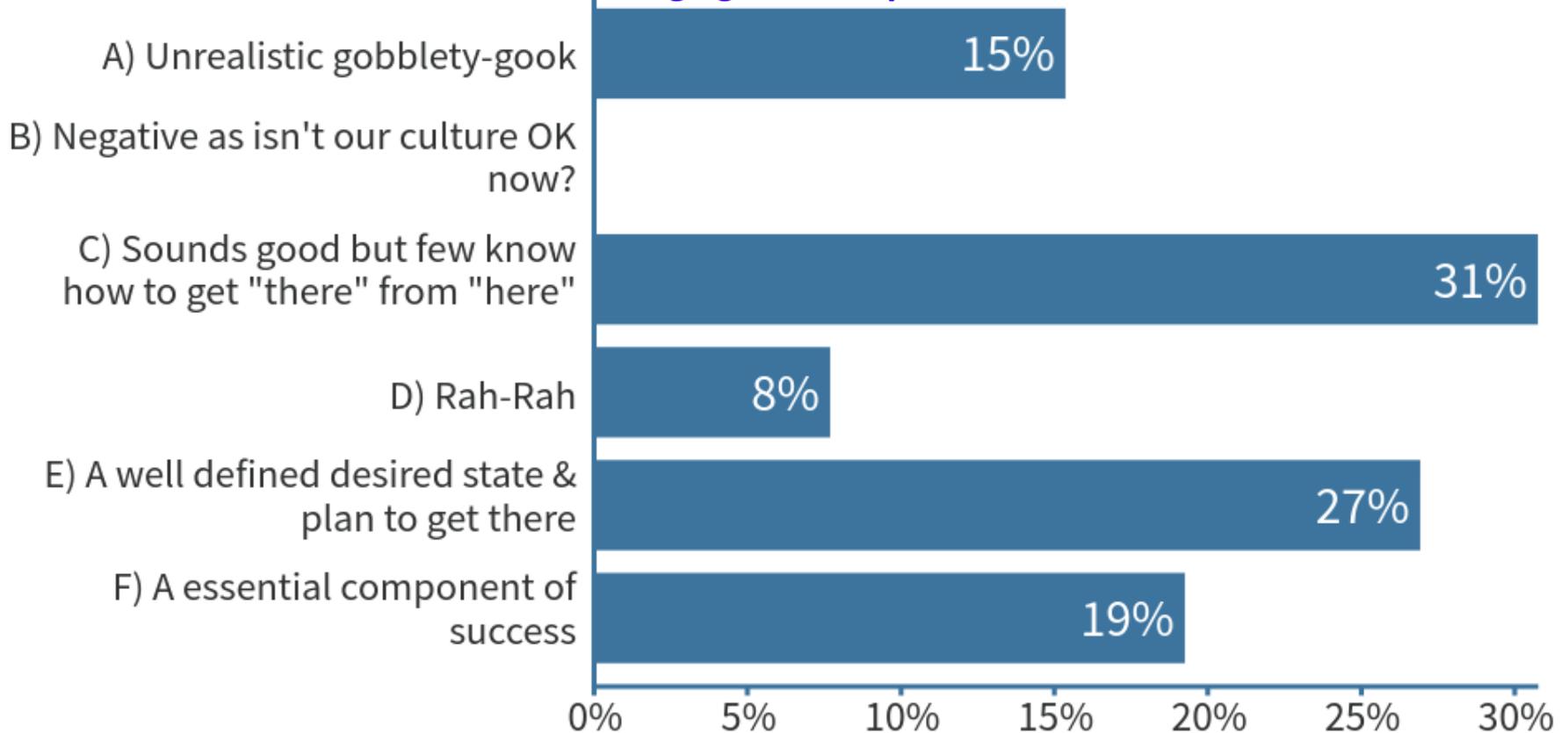


What do you first think of when you hear "culture change"

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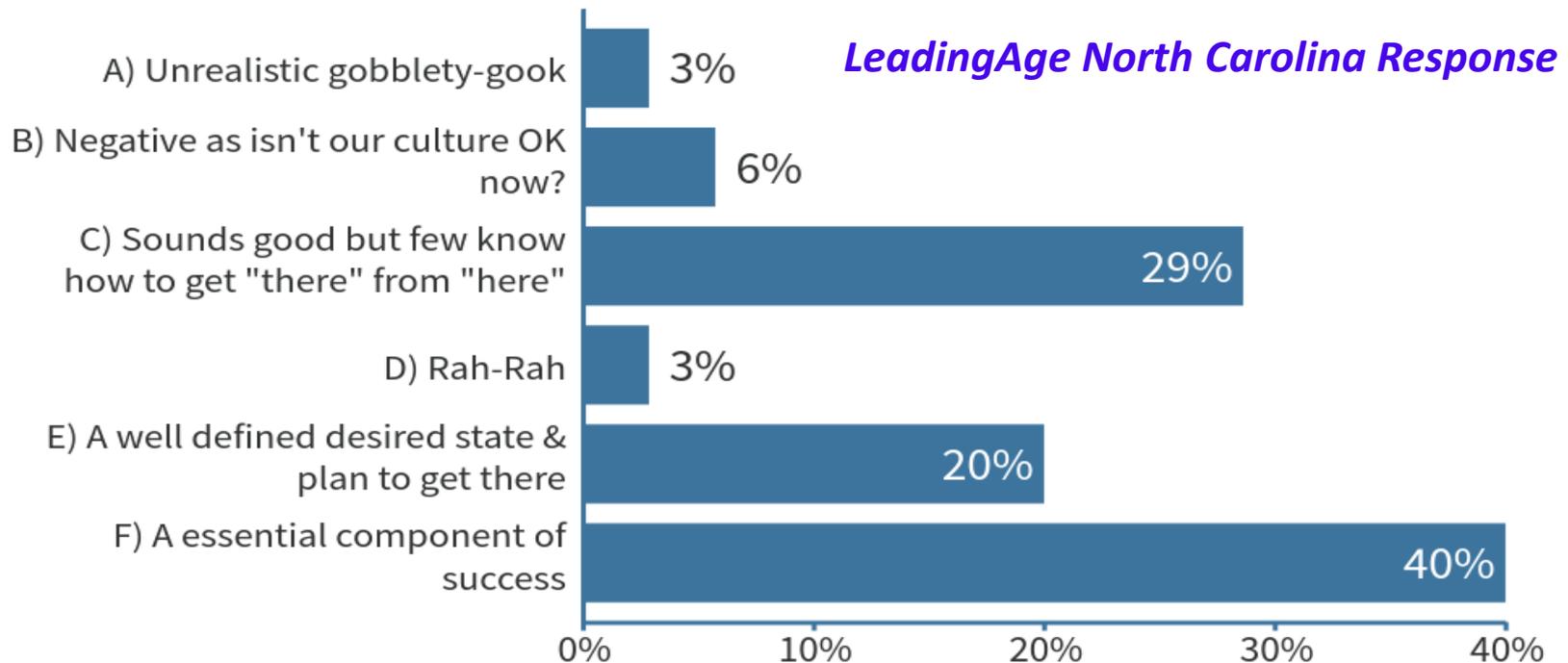
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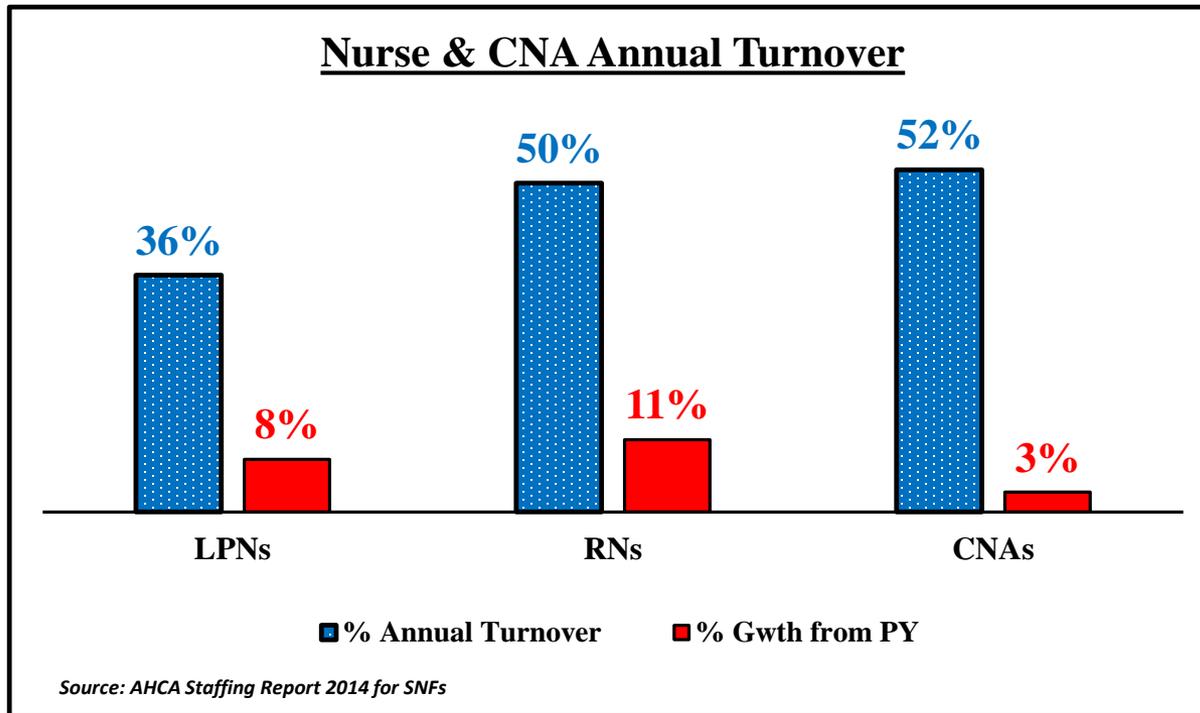


What do you think?

Let's take a moment to summarize...

Why it's important:

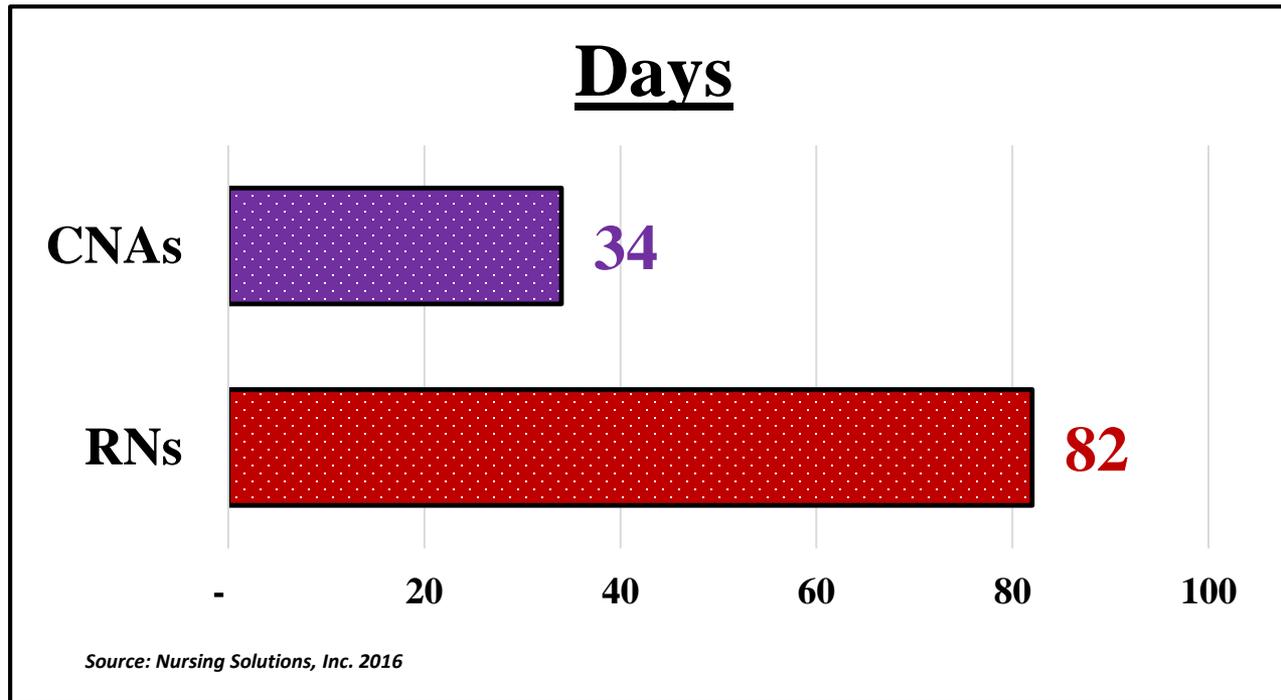
Is employee (Nurse/CNA) turnover important to your organization?



Significant and Growing

Why it's important:

Average time to fill vacancy...



- Pressure on existing staff
- Causality for overtime and contract labor

Why it's important:

What does a vacancy cost to fill? *(Minimums)*

- Incremental “hard” \$
 - CNAs \$1,200
 - RN/LPN \$3,200 - \$5,000
- So 150 CNA's at 40% turnover = \$72,000
- At an 8% margin = \$900,000 in revenue

*How much work/investment required to grow
revenue by almost \$1 million?*

Why it's important:

And what *are* the qualitative costs?

- Reducing turnover from high levels is associated with increased care quality *
- Conversely – High turnover is associated with poor quality

*Source: Castle, Engberg and Men Nursing Home Compare Study 2007

Why it's important:

So why do they *leave*?

- Have high job/mission satisfaction*
- Low *organizational* satisfaction*
 - Management/Supervisor/Co-worker “*disrespect*”
 - Expectations are “*unrealistic*”
 - Perceive management to be “*incompetent*”
 - Lack of “*mentorship*”
 - Inadequate “*education*”
 - Not feeling “*valued*”

* Source - University of Pittsburgh CHCW study

Why it's important:

So why do they *leave*?

- Strategy du jour - Management changes direction often, employees are reluctant to act for fear of efforts being wasted
- Nurse management is overworked and no one knew until their exit interview
- You're the best! (*at your old job*)

* Source - University of Pittsburgh CHCW study

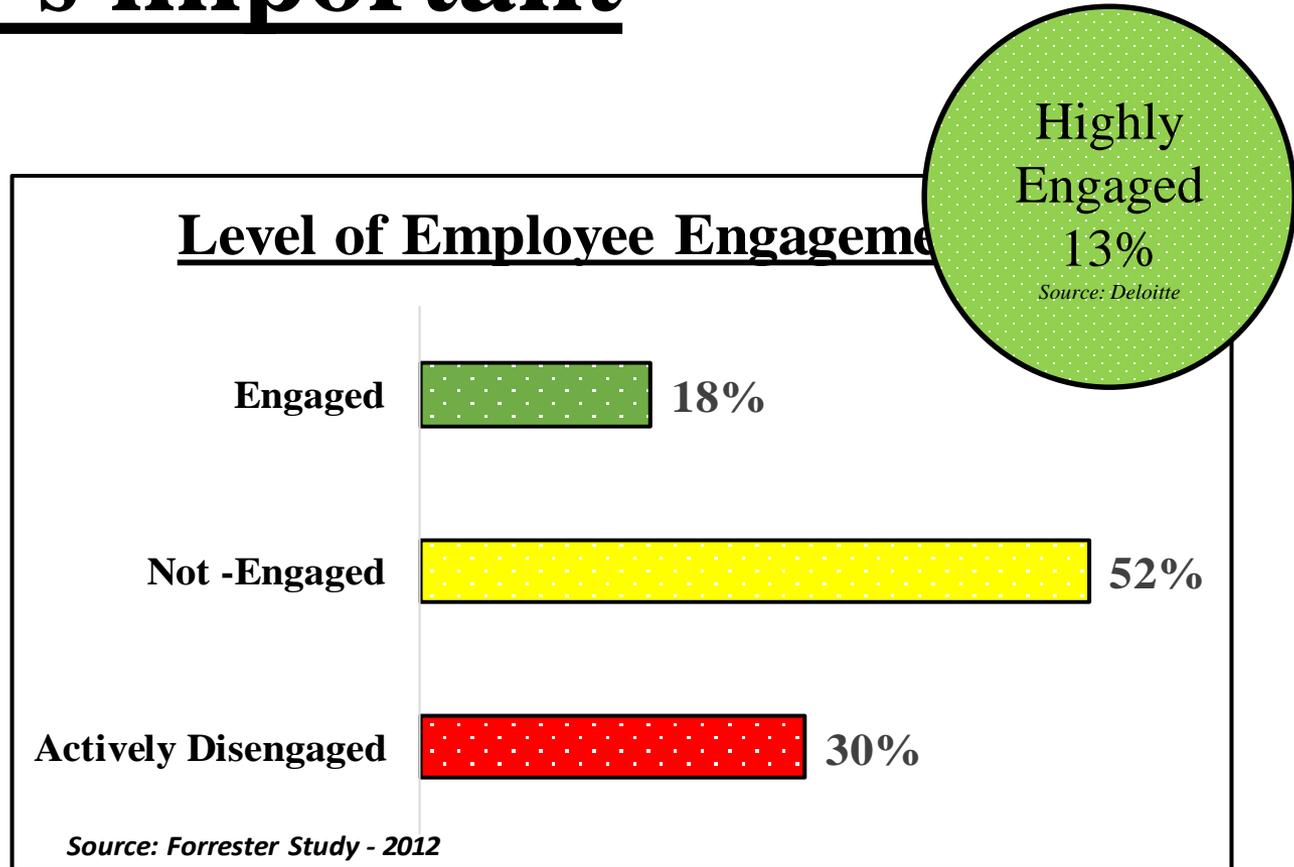
Why it's important:

- What do these have in common?
 - *Disrespect*
 - *Unrealistic*
 - *Incompetent*
 - *Low mentorship*
 - *Little education*
 - *Not valued*



The Three Types of Employees	
1	ENGAGED employees work with passion and feel a profound connection to their company. They drive innovation and move the organization forward.
2	NOT-ENGAGED employees are essentially "checked out." They're sleepwalking through their workday, putting time -- but not energy or passion -- into their work.
3	ACTIVELY DISENGAGED employees aren't just unhappy at work; they're busy acting out their unhappiness. Every day, these workers undermine what their engaged coworkers accomplish.

Why it's important



Why it's important:

Employee satisfaction VS. engagement...

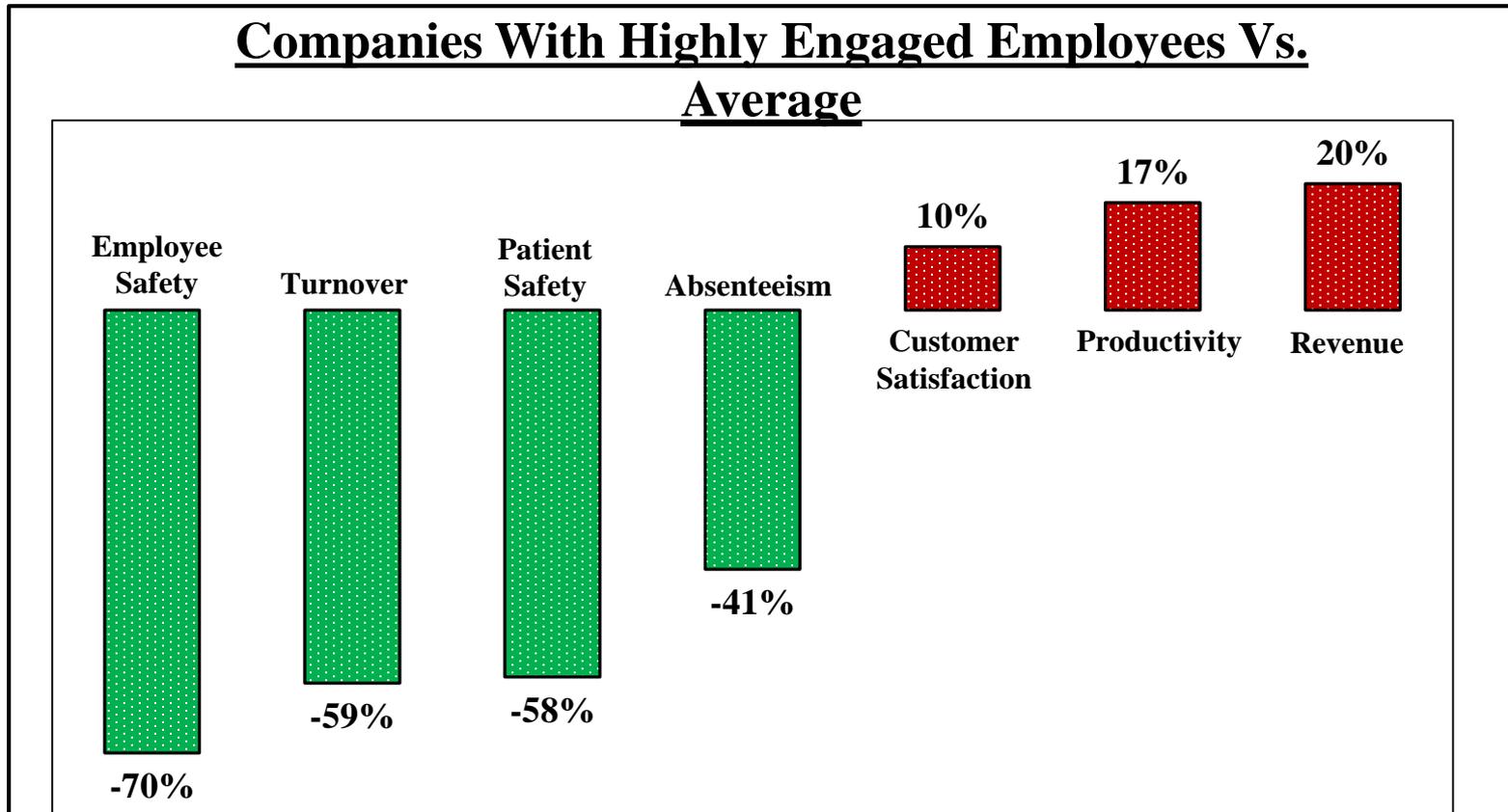
- The terms “employee engagement” and “employee satisfaction” are often used interchangeably, but in fact they are quite different...So what's the difference?

Commitment

- While satisfied employees are committed to showing up every day so that they get paid, they are not necessarily committed to the success of the organization.
- Satisfied employees are more concerned with their own personal and career growth than the organizations. Engaged employees on the other hand, are more concerned about successful business outcomes, and they see this as being equal to personal and career growth.

Why it's important:

- A significant positive impact for your stakeholders...



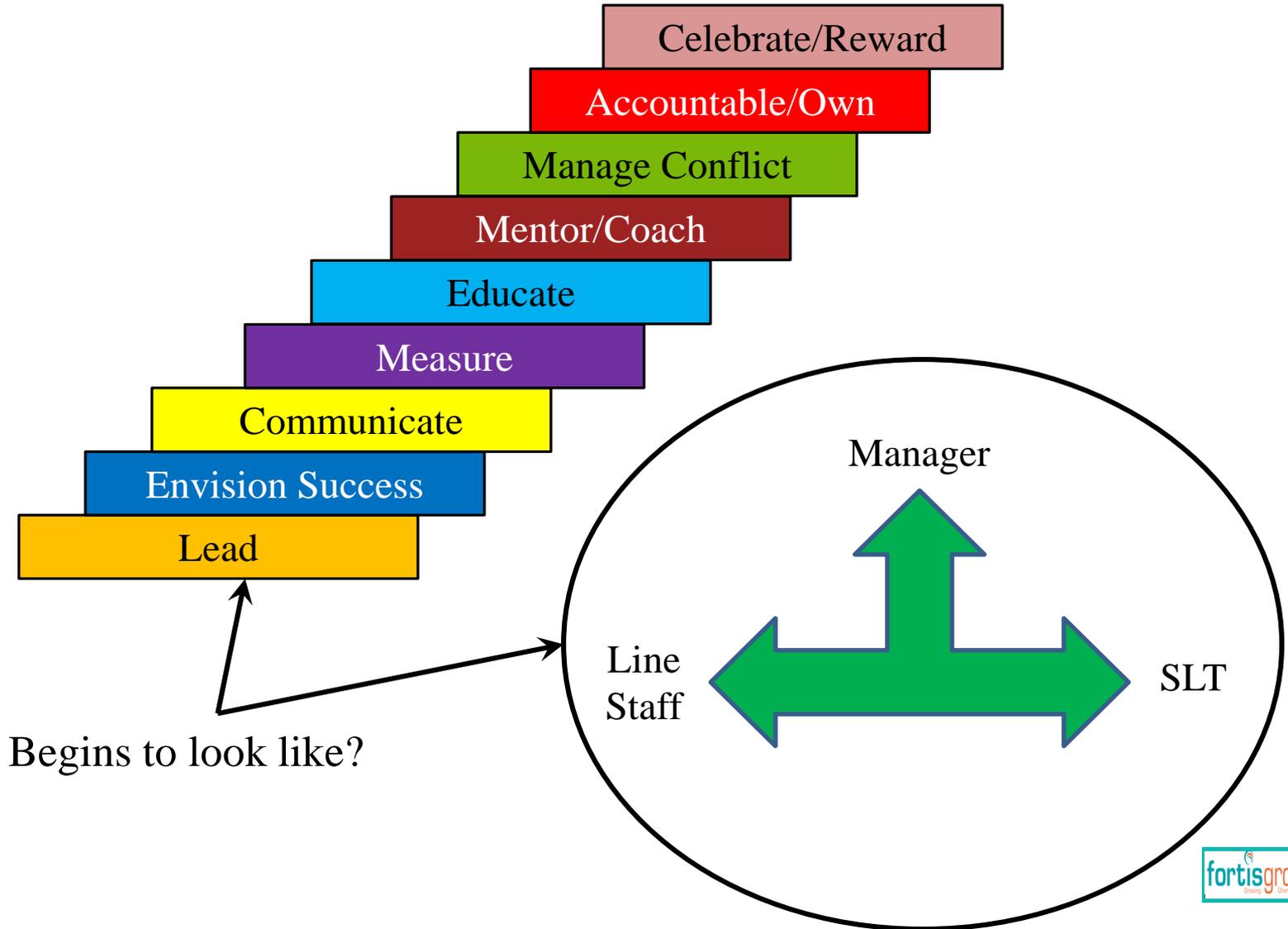
Source: Gallup 2016 Workforce Survey

Why it's important:

- Multiple research studies have confirmed that effective teamwork among healthcare professionals leads to higher staff job satisfaction, increased patient safety and increased patient satisfaction...

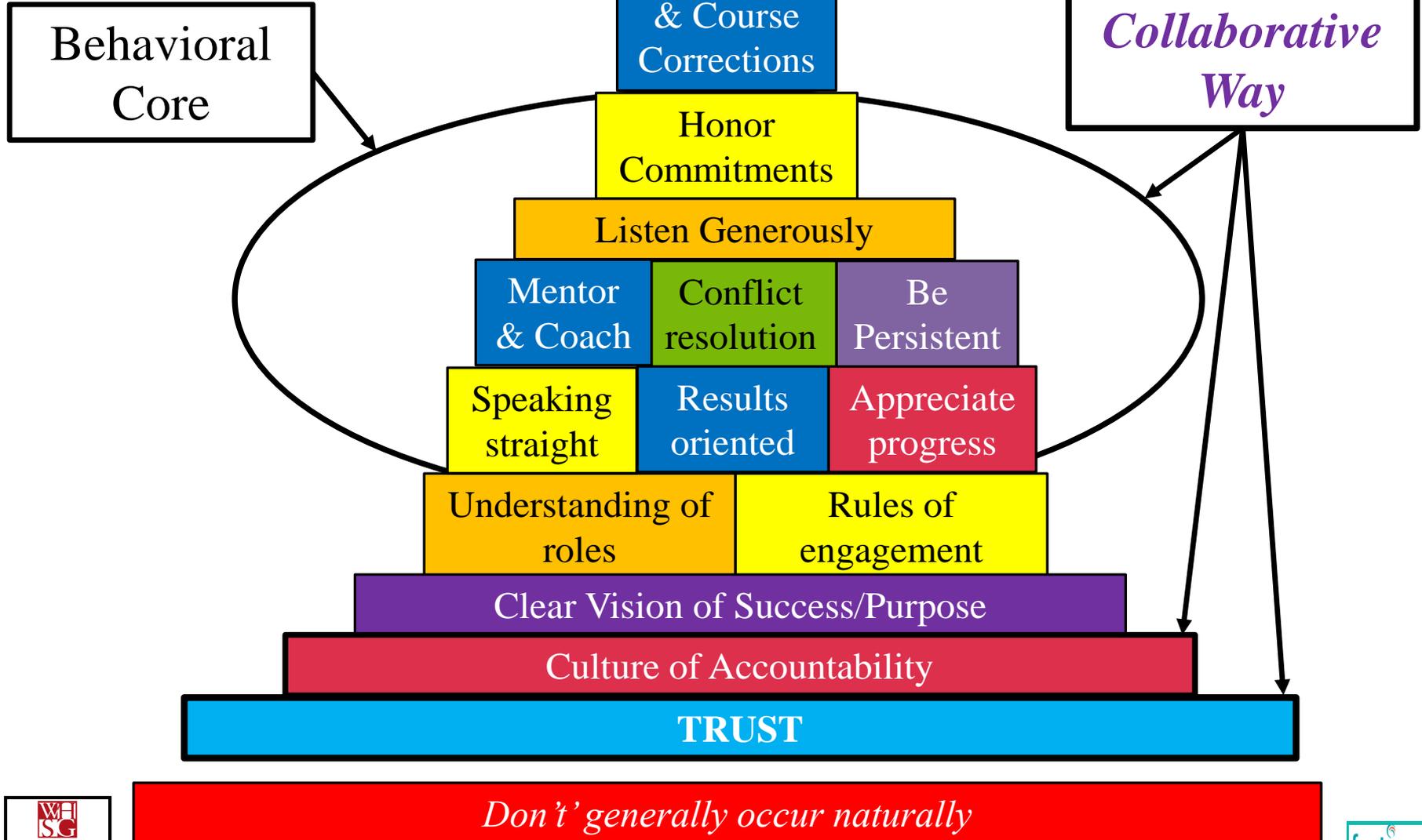


Scope of Organizational Impact:



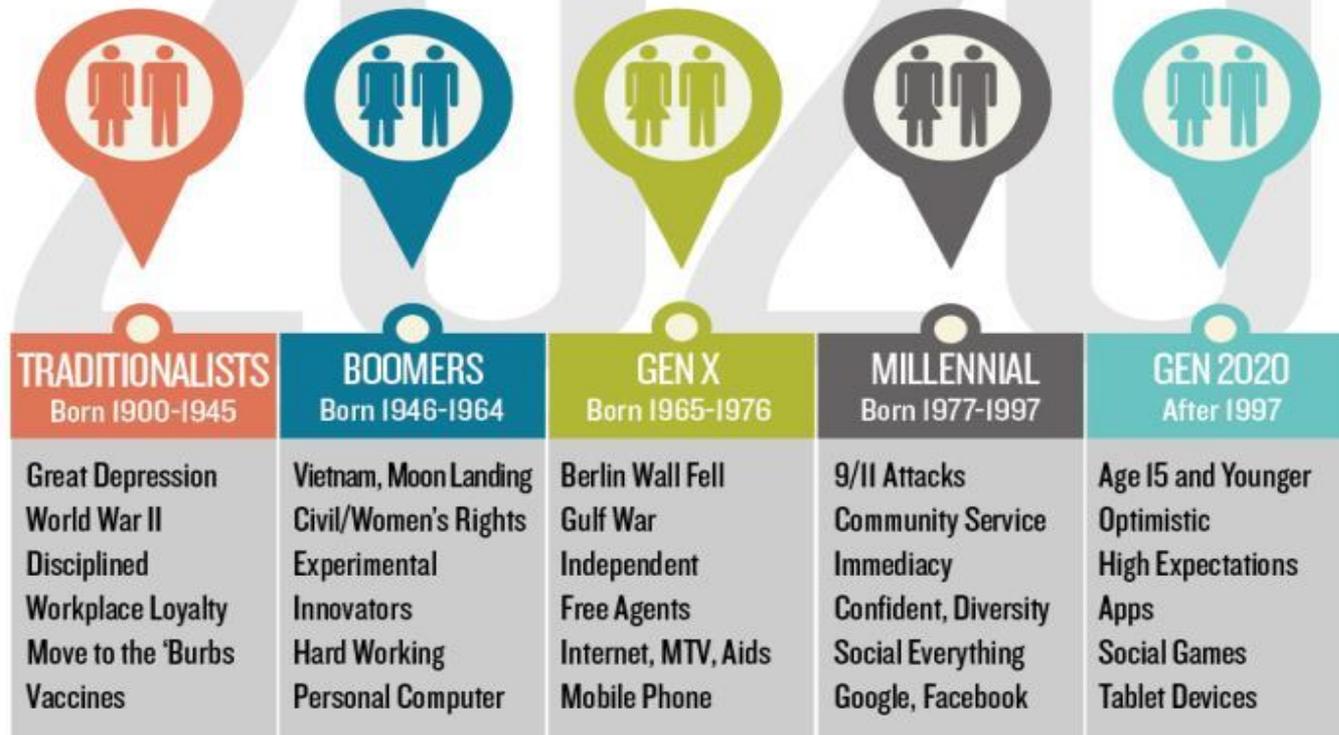
So what's required for successful

teams?



MULTIPLE GENERATIONS @ WORK

Five Generations Working Side by Side in 2020



TRADITIONALISTS Born 1900-1945	BOOMERS Born 1946-1964	GEN X Born 1965-1976	MILLENNIAL Born 1977-1997	GEN 2020 After 1997
Great Depression World War II Disciplined Workplace Loyalty Move to the 'Burbs Vaccines	Vietnam, Moon Landing Civil/Women's Rights Experimental Innovators Hard Working Personal Computer	Berlin Wall Fell Gulf War Independent Free Agents Internet, MTV, Aids Mobile Phone	9/11 Attacks Community Service Immediacy Confident, Diversity Social Everything Google, Facebook	Age 15 and Younger Optimistic High Expectations Apps Social Games Tablet Devices

Each generation brings its own view of the world, which creates both opportunities and threats to businesses. **This demands Generational Intelligence!**

Power of Purpose

Collaborative
mind-set

- Inclusive decision making
- Genuine solicitation of feedback

Developer of people

- Mentors and coaches
- Provides straight feedback

Digitally competent

- Uses technology to connect employees and customers

Global citizen

- Has a diverse mind-set
- Is generationally intelligent

Anticipates and
builds for the future

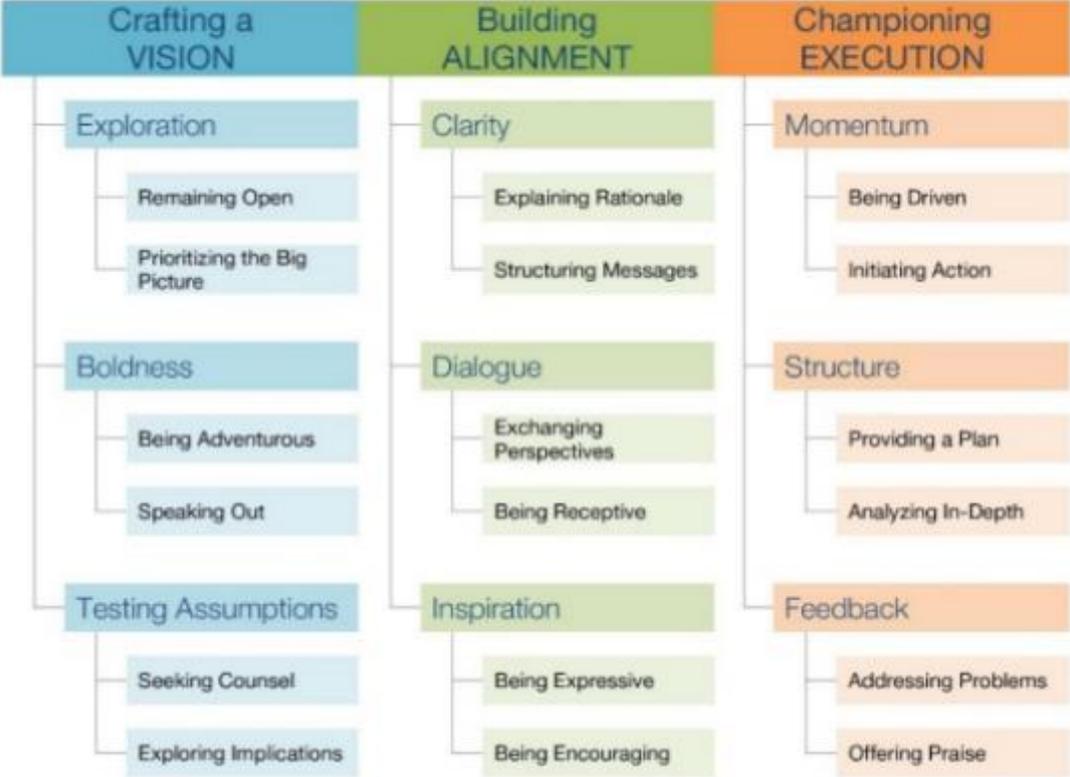
- Builds accountability across levels
- Champions innovation



Work of Leaders model

“... leaders have three fundamental responsibilities: They craft a *vision*, they build *alignment*, and they champion *execution*.”

Work of Leaders



Fostering Trust

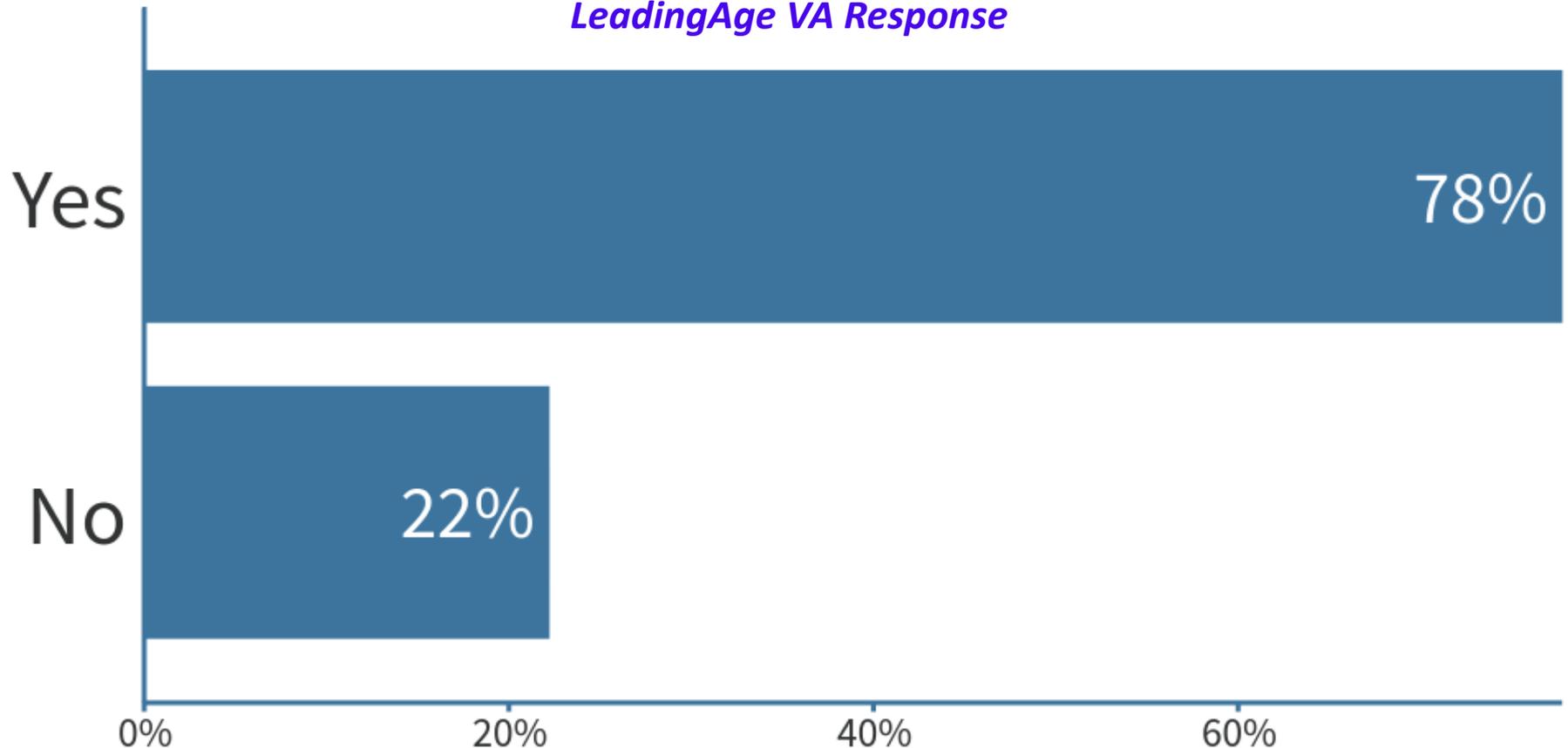
- The 3 C's of workplace trust
- Communication-Character-Competency
- Vulnerability Trust

At times does a lack of trust (presence of fear) keep you from speaking?

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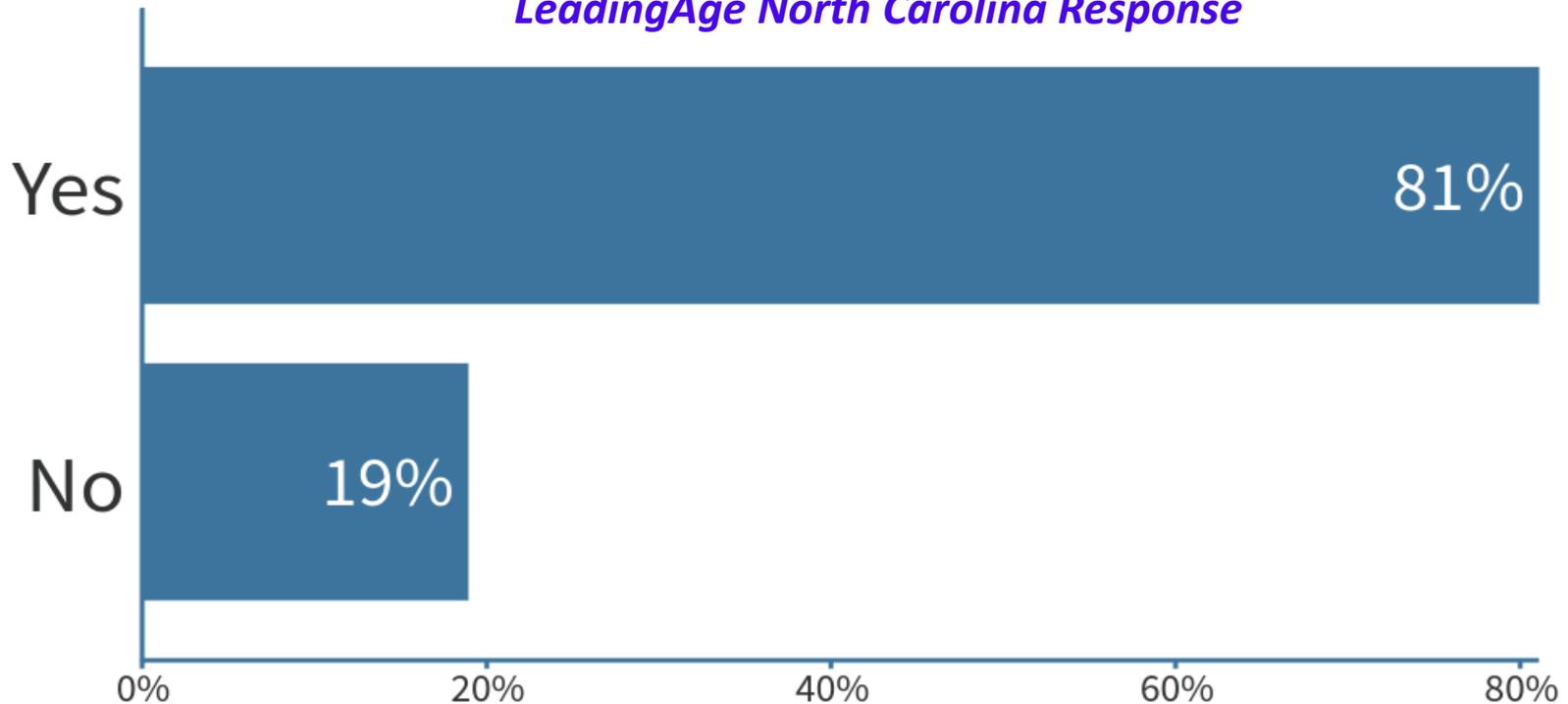


At times does a lack of trust (presence of fear) keep you from speaking?

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How to engender trust

Power of Purpose

The Collaborative Way...So what is it?

- **TCW** is a set of commitments that people in organizations intentionally live out in their day-to-day interactions with colleagues
- Demonstrating these behaviors is always in the context of learning

So why The Collaborative Way?

- To be a smarter organization
- To be a more agile organization
- To be more successful & effective organization
- To develop ironclad trust throughout your organization

1. Generous Listening

- Show others you are genuinely interested
- Stay open with a curiosity to learn
- Repeat back what they have said

2. Speak Straight:

- Voice concerns and assume positive intent
- Set aside assumptions and address difficult issues
- Speak directly to others, instead of going around them

3. Be For Each Other:

- Commit to each other and those you serve
- Intervene in gossip
- Assume positive intent, initiate timely clean-ups

4. Be Accountable & Honor Commitments:

- Accept responsibility for mistakes
- Provide a heads up, and follow up
- Learn from mistakes

5. Acknowledge & Appreciate:

- Understand the value of appreciation, praise in public
- Provide specifics
- Receive compliments generously

6. *Lead The Collaborative Way*

- Leadership is not a position, it is a way of being
- Model the way
- Invite *accountability*

The Path of Least Accountable

I am waiting for approval
I am too busy
I told him, I told them
She dropped the ball
The CEO did not tell us
My boss did not tell me
I am travelling
I didn't get the email
Because _____ said



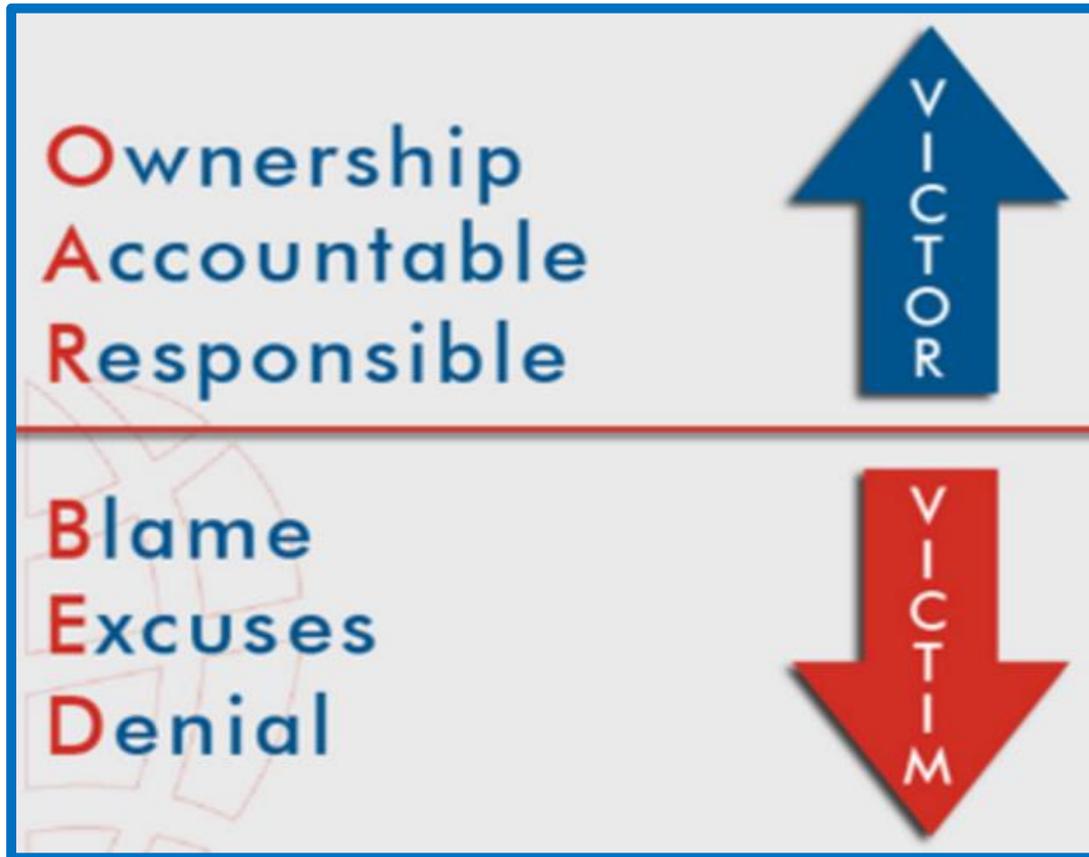
Personal Accountability...

A personal *choice* to rise above one's circumstances and demonstrate ownership necessary for achieving desired results---To See It, Own it, Solve It, and Do it.

The Oz Principle

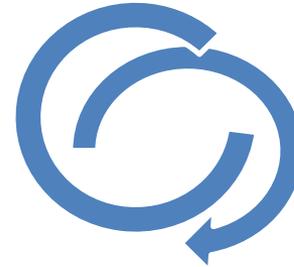
Power of Purpose

Above or Below the Line?



**Being
"Stuck"**

The Victim Cycle



You May Be Stuck If...

- 1) You feel a lack of control over your circumstances
- 2) You don't listen or care about feedback
- 3) You focus more on can't vs can
- 4) You bash your boss or peer
- 5) You tell the same old story about how you were mistreated
- 6) You find yourself blaming or justifying

How to move (and stay) above the LINE

1. Take time to reflect
2. Gain perspective
3. Be a generous receiver of feedback
4. Be open and candid in your communication
5. Ask and offer feedback
6. Be willing to hear (and say) the hard things
7. Be personally invested
8. Learn from success and failures
8. Act on the feedback
9. Constantly ask: What else can **I** do?

Focus on Results...

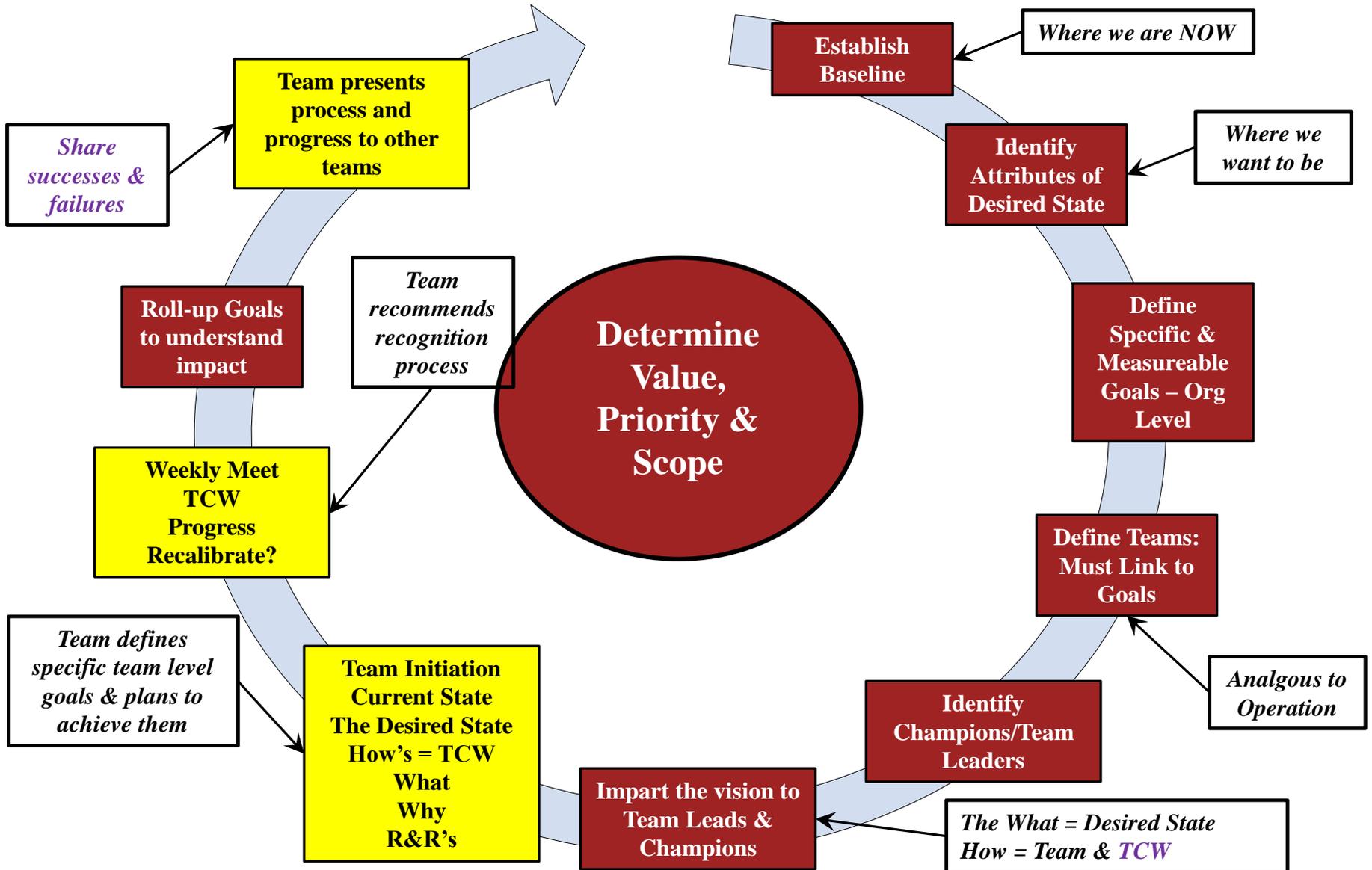
- Great teams are those that *accomplish* the results they set out to achieve
- To *avoid distractions*, everyone must make team results the priority
- To *stay focused*, team can publicly clarify its desired results and keep them visible

ask yourselves: are we behaving above the line?

*are we practicing **TCW**?*

Process Overview

Forum of Purpose



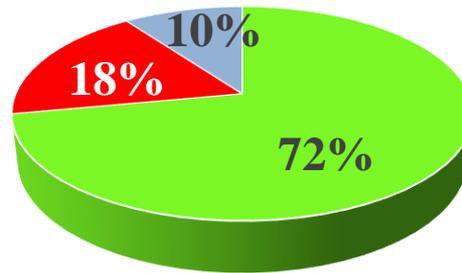
The Process – *A Case Study*

Power of Purpose

Setting the Stage - The Context:

- 155 Bed skilled nursing facility (“SNF”)
- Urban environment
- Part of a CCRC with mostly type B Contracts

SNF Payor Mix



■ Private Pay ■ Medicare A ■ Medicaid

- Single site, faith based community
- Planning SNF replacement & Rehab Center

The Process – A Case Study

Power of Purpose

Our Approach...

SLT & SNF Management

- Determine need, priority & commitment (Time & \$\$)
- Identify other initiatives which may be...
 - Assistive, duplicative, distracting...free up resources
- Performed gap analysis – *Defined the current & desired states*

SLT & SNF & Unit/Nurse Management

- Review, refine and educate

All Hands Meeting

- Review, refine and educate

Teams

- Review, refine and educate, implement, measure

Roll
Up

```
graph TD; A["SLT & SNF Management"] --> B["SLT & SNF & Unit/Nurse Management"]; B --> C["All Hands Meeting"]; C --> D["Teams"]; D --> E["Roll Up"]; E --> A;
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The Process – *A Case Study*

Setting the Stage - *The Context:*

Current State

- Occupancy 87%
- CMS 3 star – clinical
- Just implemented clinical scorecard – *not used yet*
- Nurse turnover
 - RNs  32%
 - LPNs  40%
 - CNAs  60%
- Patient satisfaction – **70%**
- Organized around “Units”
 - No measurements at this level
- 18% “Call-outs”
- Individuals doing what they believe their job to be
- Medical supplies
- Anonymous letters

Desired State (2 yrs.)

- Occupancy 92%
- CMS 4 star & Preferred Provider
- Manage to specific clinical goals
- Nurse turnover
 - RNs  15%
 - LPNs  21%
 - CNAs  26%
- Resident Centered & Satisfaction >95%
- Team=Units – Shift/Day
- Set baseline for goals - Unit
- 5% “Call-outs”
- Individuals carrying out team objectives – *Accountable*
- Supplies always on hand
- Team satisfaction - New

The Process – *A Case Study*

Power of Purpose

SLT, SNF & Nurse Management:

- Reviewed the “vision” (outcomes)
 - Agreed to the “current state” – *wrong, missing or denial?*
 - Understand and refined the “desired state”
 - Discussed “translation” to unit/household teams
 - Defined scope of team membership & time commitment
 - Discussed team support/resources
 - Reviewed and validated high level measurements
 - Discussed implementation & ownership
 - Defined R&R’s – Team Leader, Champions, member

The Process – *A Case Study*

Power of Purpose

SLT, SNF & Nurse Management:

- Absorbed *The Collaborative Way*
 - Understand the commitments and the commitment to each other
 - Discuss candidly and constructively - trust issues
 - Playing “favorites” a problem
 - How are these manifest “or not” among this group
 - Discuss - Ego, Power, Authority & Collaboration
 - The “autocrat” in the room
 - Team, sub-teams and mentorship – R&R’s
 - Fear – of failure, being wrong, being fired or “benched”
 - Identified concerns by unit/household

The Process – *A Case Study*

Power of Purpose

SLT, SNF & Nurse Management:

- *Learning*

- How to facilitate discussion – Access individual communication styles
- Team dynamics
- Conflict resolution
- How to measure progress – Outcomes & Team Dynamics
- Resident centered care & operational implications
- *TCW* contra indicators

The Process – A Case Study

Power of Purpose

All Hands Meeting :

- Reviewed the “vision” (outcomes)
 - The “*current state*” - Modified per input
 - *E.g. Shift change, scheduling, family communication, EMRs*
 - Understand the “*desired state*” – Modified per input
 - How each team “gets there” is up to them
 - Metrics may go beyond those selected – up to team
 - Each team sets specific goals over time
 - Discussed household teams & expectations – Time, learning
 - Scope of team membership & Team Facilitators
 - Discussed Team resources/Support (Fin, HR, etc.)
 - Team launch time frames & cross team sharing
 - Leadership is *conditional*

The Process – *A Case Study*

Power of Purpose

All Hands Meeting:

- Presented & Discussed *The Collaborative Way*
 - Understand the commitments and the commitment
 - Discussed trust – Why its essential
 - Trust others & yourself
 - How are these manifest “or not” - provided examples
 - Discussed Roadblocks– Ego, Authority & Collaboration
 - Discussed being “stuck”
 - Fear – of failure, being wrong, being fired or “benched”
 - Fear as the great “disabler”
 - Mentorship & Caring – Ongoing
 - **All of the above accomplished within the context of learning**
 - We will “all learn from each other”

The Process – *A Case Study*

Power of Purpose

Team Roll-out:

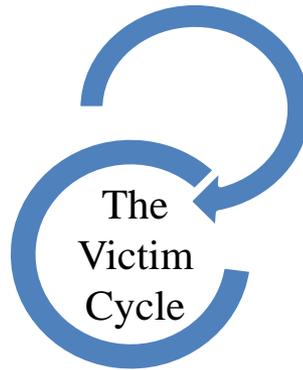
- Learning *The Collaborative Way*
- *Team initiation*
 - Reviewed the “current & desired states”
 - Reviewed purpose (serve residents, high quality outcomes)
 - Built a scorecard – what and how to measure
 - With asst from Finance, built baseline for scorecard
 - Discussed & formulated the “how” & “when” plans
 - Being “stuck”....a big problem
 - Accountability and holding each other accountable a challenge.

The Process – A Case Study

Power of Purpose

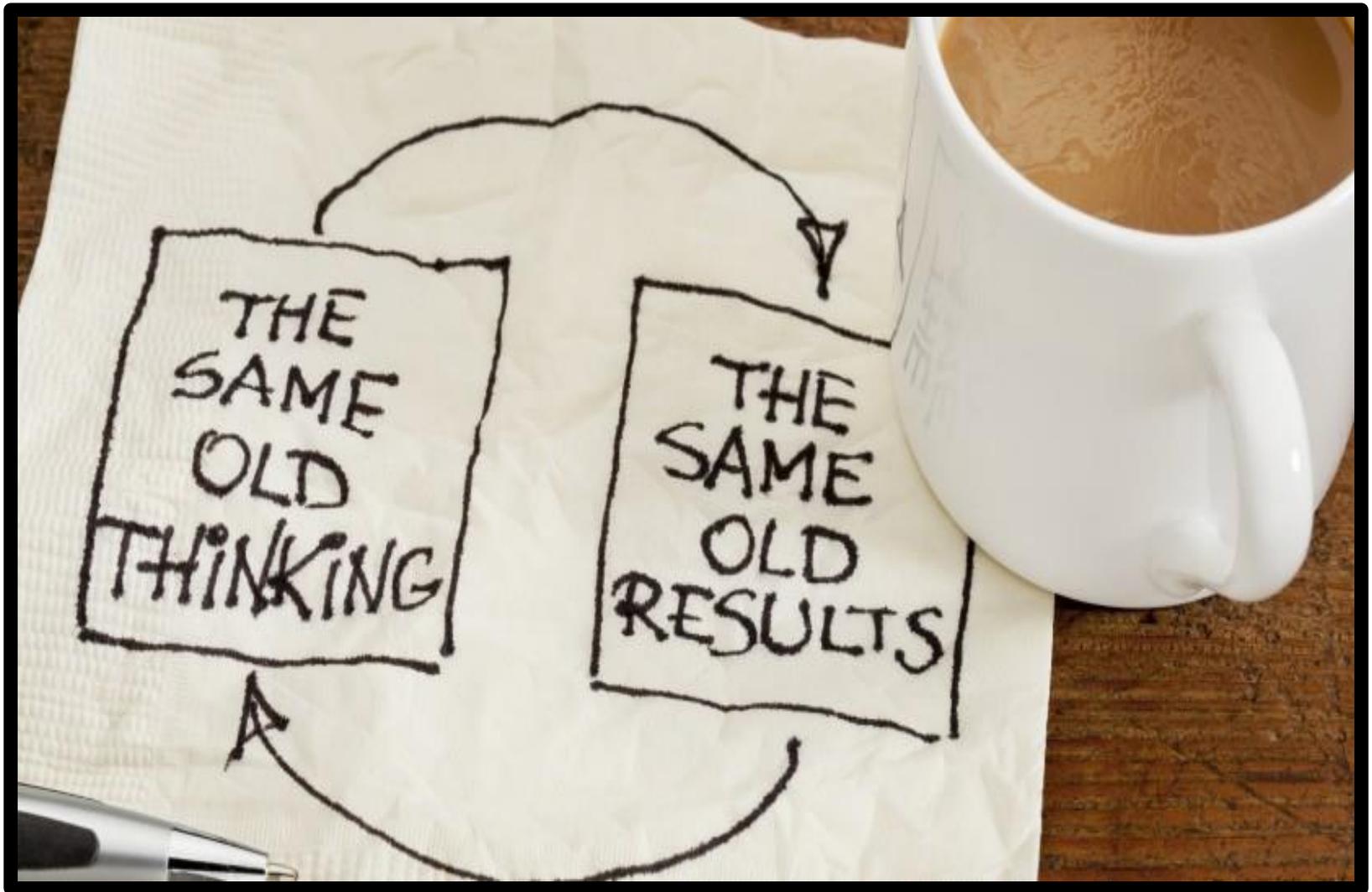
A Few Points Reinforced With the Teams

- Great teams are those that accomplish the results they set out to achieve
- Knowing when you are “stuck” below the line



- You may be stuck *IF*
 - 1) You feel a lack of control over your circumstances
 - 2) You don't listen or care about feedback
 - 3) You focus more on can't vs can
 - 4) You find yourself bashing your boss or peer
 - 5) You tell the same old story about how you were mistreated
 - 6) You find yourself blaming or justifying

Power of Purpose



The Process – *A Case Study*

Power of Purpose

A Few Points Reinforced With the Teams

How to become “un-stuck” (move above the line)

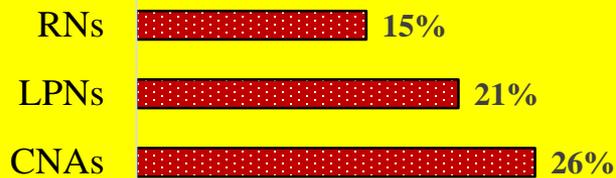
1. Gain perspective
2. Be a generous receiver of feedback
3. Be open and candid in your communication
4. Ask and offer feedback
5. Be willing to hear (and say) hard things
6. Be personally invested
7. Learn from success and failures
8. Ultimate responsibility – Unit Lead
8. Act on the feedback
9. Constantly ask: What else can I do?
10. Collaborate across the Enterprise
11. Creatively deal with obstacles
12. Take necessary risks
13. Be intentional about staying above the line & track your progress

The Translation – A Case Study

Power of Purpose

Desired State - Initial

- Occupancy 92%
- CMS 4 star
- Manage to specific clinical goals
- Nurse turnover



- Resident Centered Care & >95%
- Team Units – Shift/Day
- Set baseline for goals - Units
- 5% “Call-outs”
- Individuals carrying out team objectives - Accountable
- Team satisfaction - New

Desired State - Final

- Occupancy 95%
- CMS 4 star
- Manage to specific clinical goals: Wounds, Weight, Falls, Med Errors, Hospitalizations, Number of & antipsychotic drugs, Pain, Infections, Increased Function, Unhappy – Why’s
- Manage to resident Psycho/Social goals
 - Resident “Joy” index – 6 to 9
 - Family “Joy” index – 4 to 10
- Nurse “Joy” Index – 3 to 10
- Shift Transition errors – None
- Call response times & reduction
- 2% “Call-outs” – Plan staffing at team level.
- Team Competition and \$ rewards
- Medical Record accuracy & completeness
- Training/Develop – Job sharing
- Renew annually – continual improv.

The Outcomes – A Case Study

Power of Purpose

- *Some innovations for this provider:*
 - New skin assessment & treatment protocols & training
 - Increased Medical Director involvement:
 - Reduce numbers of meds, skin care
 - Increased groundswell for reliable volunteers
 - Baseline strength assessments & programs
 - Facility employed staffing/shift planning software
 - Preference for day/shift and backfill
 - Shift “make-up” for a household consistent
 - RN, LPN and CNA’s work sharing
 - Increased use of tablets

The Outcomes – A Case Study

Power of Purpose

- *Some innovations for this provider:*
 - Developed & Implemented logical “edits” in EMR
 - New call system
 - New communication system (I phone)
 - Bonus plan for hitting quarterly goals
 - Increased nurse/CNA/Therapist “teaming” for management of Part B and strength programs
 - Twelve hour shifts – quality for both resident and staff
 - Scholarship program and interns from nearby medical school.
 - On site dialysis center (12 bays)
 - Six month skills assessments – demonstration grant

The Outcomes – *A Case Study*

- *Some innovations for this provider:*
 - Increased MedA patient Screening
 - Each hospitalization examined for how to avoid
 - Put in place “transition” days

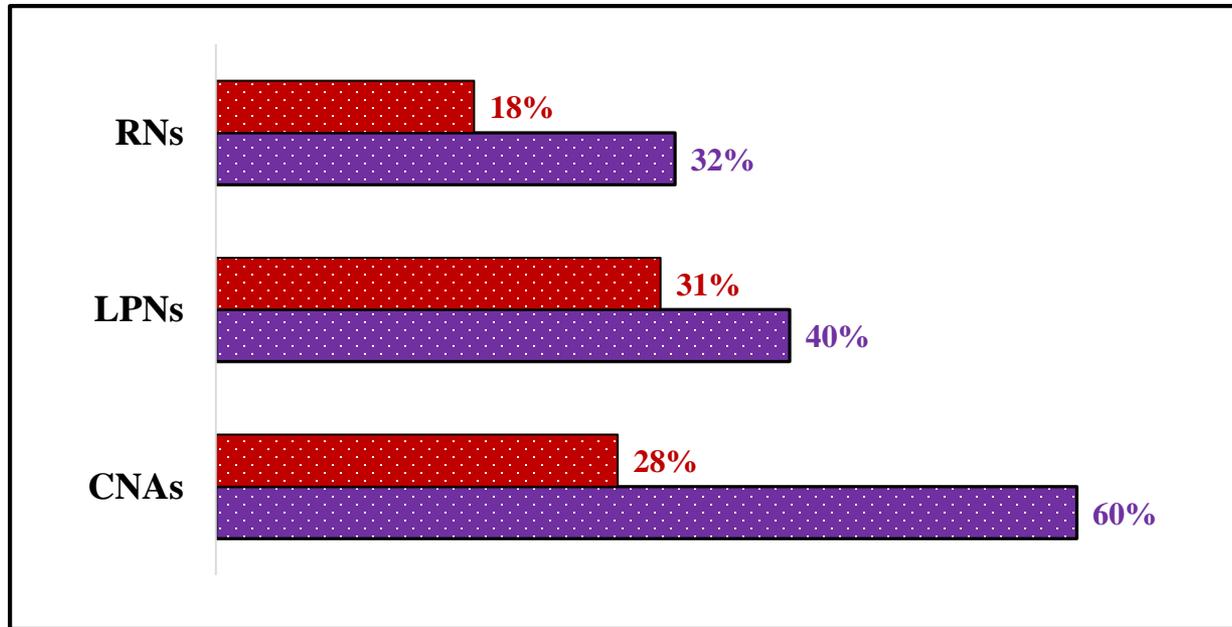
The Results – *A Case Study*

Power of Purpose

- *A year and a half later...*
 - Nurse/CNA Joy to 8.5
 - Resident Joy index to 9.0
 - Family Joy index 8.0
 - Acquired wounds reduced 29%
 - Falls down 11%
 - Readmissions down 22%
 - Weight loss down 7%
 - Occupancy 91%
 - Call-outs almost eliminated
 - Call response time from 3:30 average to 55 sec
 - Number reduced by 11%

The Results – *A Case Study*

- *A year and a half later...*



 **Original Turnover**

Some Caveats:

- Although it will contain many of these components, a plan and associated process will be unique to each organization.
- Getting started requires commitment and focus
- Once started – much easier to maintain
- Don't underestimate the talent within
- Be realistic about desired scope
- Take it as a serious component of organizational responsibility – If not up for the commitment, don't try

Has your view of this topic changed favorably?

 When poll is active, respond at Pollev.com/raymondfishe153

 Text **RAYMONDFISHE153** to **22333** once to join

LeadingAge VA Response

Yes

100%

No

0%

20%

40%

60%

80%

100%

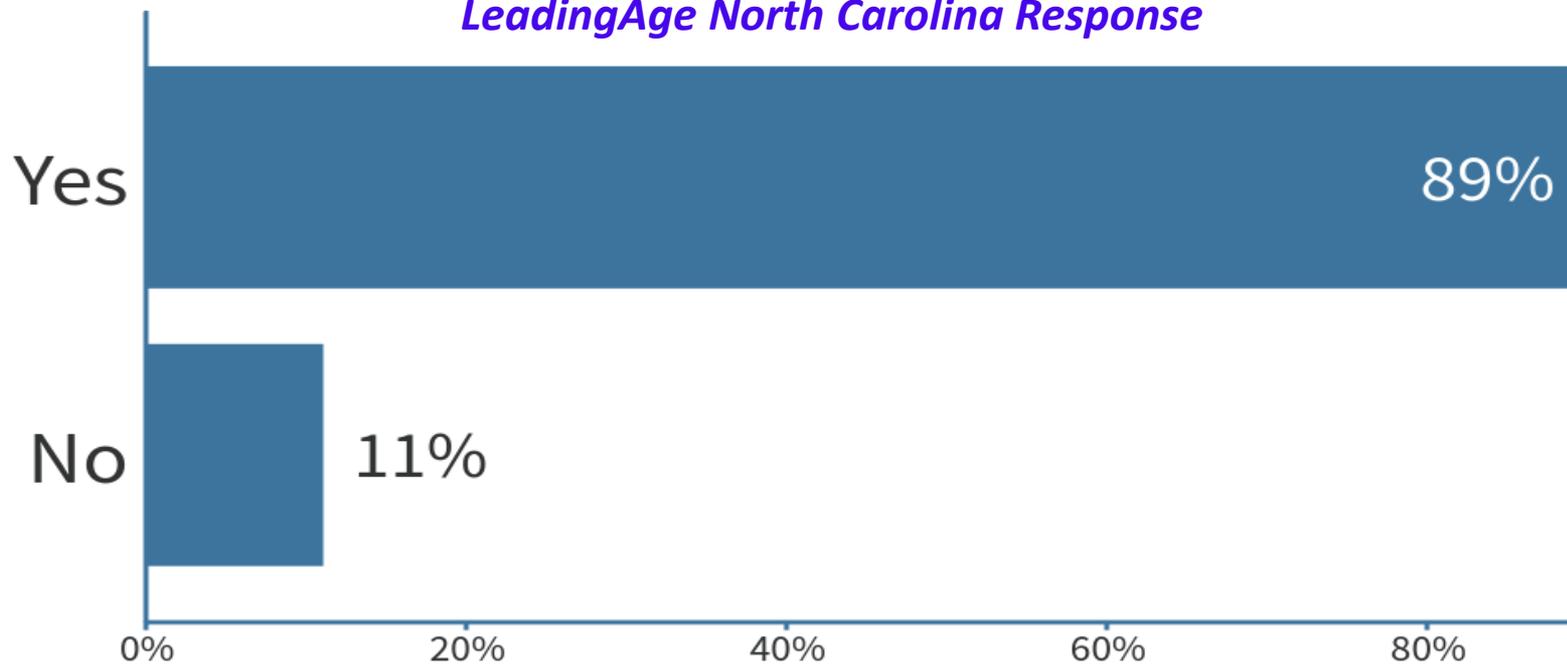


Has your view of this topic changed favorably?

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LeadingAge North Carolina Response



Will you likely implement any of these concepts?

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 Text **RAYMONDFISHER153** to **22333** once to join

LeadingAge VA Response

Yes

100%

No

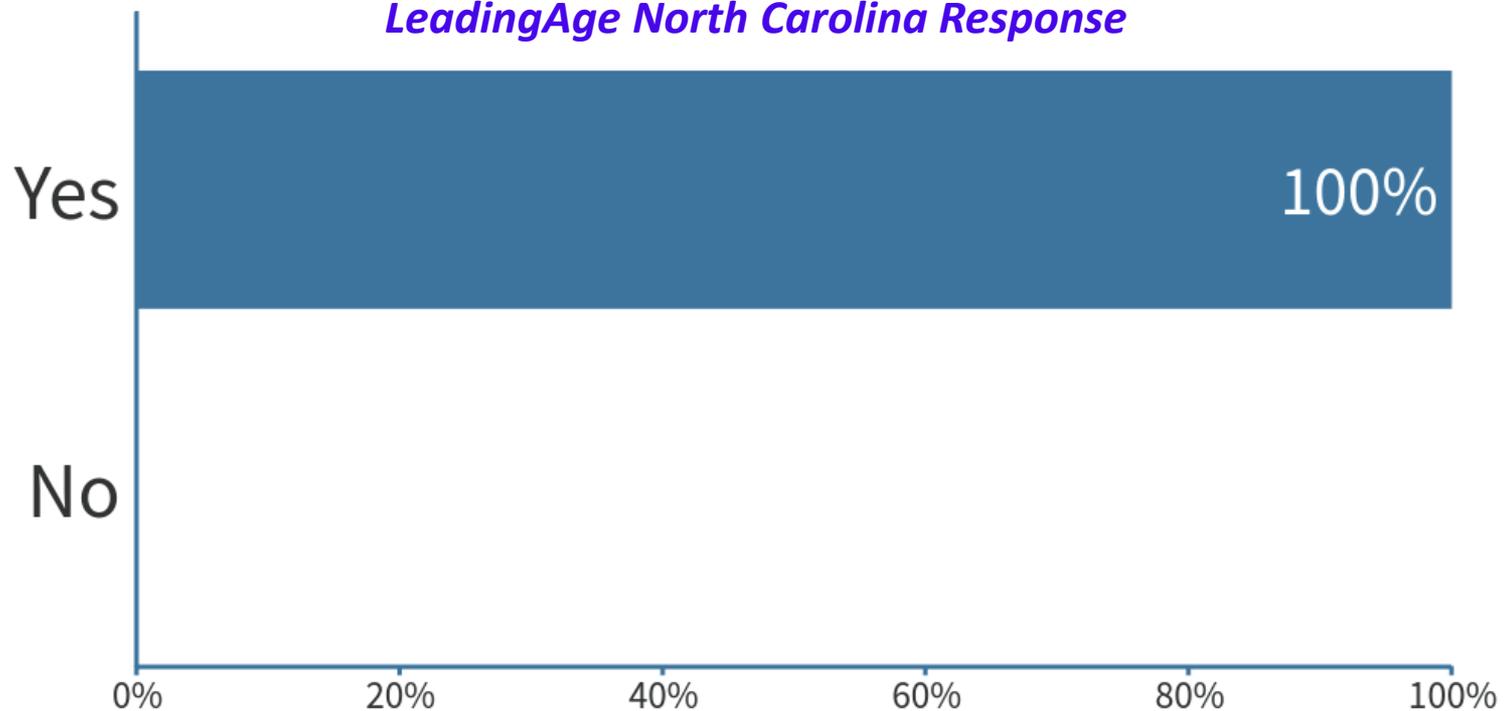
0% 20% 40% 60% 80% 100%

Will you likely implement any of these concepts?

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LeadingAge North Carolina Response



Suggested Reading:

- 1) *Employee Engagement 2.0* – Kevin Kruse
- 2) *Pulling Together* – 10 Rules for High Performing Teams – John J. Murphy
- 3) *The Collaborative Way* – Lloyd & Jason Fickett
- 4) *Leading The Collaborative Way* – Lloyd & Jason Fickett

Questions?

Power of Purpose



Together for Leadership

Thank You

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