EVALUATING THE COMMUNICATION CHAMPION EXPERIENCE: DEVELOPING COMMUNICATION PATHWAYS IN A HIERARCHICAL ORGANIZATION

by

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Abstract

The presence of effective communication pathways in a healthcare organization can enhance client care. A unique approach to improving communication pathways was undertaken by one such organization, through a program called the “Communication Champion strategy”. The goal of this program was to add a formal communication pathway to a hierarchical organizational structure. The key to the strategy is the use of Communication Champions, who are responsible for creating and disseminating information to staff. This project evaluates the concept and design of the Communication Champion strategy on the basis of current organizational communication literature; the strategy is found to be congruent with the use of change agents, establishment of formal communication pathways, and promotion of organizational communication. Existing Communication Champions were interviewed and the respondents’ comments were categorized based on major thematic components, such as organizational supports, team development, ability of the strategy to overcome geographic barriers, and employee engagement.
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1.0 Introduction

Communication is the cornerstone of all human interactions; in the workplace, communication is increasingly important to organizational cohesiveness and the achievement of organizational goals. Past studies indicate that internal strategic capabilities are gained through effective and efficient organizational communication systems (Tucker, Meyer, & Westerman, 1996).

Organizational communication can be both formal (transmitted through traditional hierarchical organizational structures and defined pathways) and informal (among colleagues); both formal and informal communication systems are becoming increasingly complex in today’s technologically enhanced workplaces. Indirect links exist between morale building and managerial effectiveness, on the one hand, and organizational communication, on the other hand (Litterst & Eyo, 1982). An important question in the modern workplace is how organizations can overcome the many emerging challenges to having effective communication, including geographic barriers, meaningful two-way communication, hierarchical complexities, and timeliness of information dissemination.

Traditional hierarchical organizations have clear lines of communications, both top down and bottom up, but what happens when you move outside those boundaries and break down the structural silos? This evaluation will examine a departmental communication strategy employed within an established healthcare organization with a traditional hierarchical structure. This evaluation has two goals: first, to assess the program’s validity on the basis of program information, current organizational communication, and “change agent” literature, and second, to evaluate the experience of the Communication Champions participating in this communication strategy. In this instance, change agent is defined as “individuals, either internal or external to the
agency, who promote innovation and its diffusion” (Lerch, James-Andrews, Eley, & Taxman, 2009).

The congruency between current literature and the program information will be examined in detail, as will the experiences of the Communication Champions in their role. This latter task will include evaluation of the Communication Champions’ individual experiences with organizational support, team dynamics, geographic barriers, and employee engagement; it will also take a look at where those who are currently in the program see it going in the future. The ideology of the Communication Champion role will be compared to current literature specifically on organizational communication, organizational leadership, and change agents.

1.1 Communication Champion Strategy

Structurally, Public Health is divided into three distinct areas: Population Health, Public Health Protection and Preventive Public Health. Each area effectively operates independently under its own management and leadership structure. In an effort to integrate these three areas and remove the operational silos of the three departments without fundamentally changing their organizational structure, senior leadership developed communication pathways across the departments. This shift resulted in the implementation of the Communication Champion strategy in 2012. A key feature of the strategy is to have a Communication Champion in a defined geographic area, whose role is to introduce new information to Public Health staff. At the time of the present study, there were twelve Communication Champions providing coverage for the various office locations, which span the Health Authority. The main purpose of this communication strategy was to increase knowledge sharing about new developments, resources, knowledge and initiatives underway in Public Health, while developing a cohesive, integrated
Public Health department. To achieve this, the strategy needed to overcome both timing and geographic barriers to communication.

The Communication Champion strategy involved frontline staff as communicators (the Communication Champions), working in conjunction with a variety of internal leaders and knowledge experts to understand new ideas and promote the uptake of new knowledge to peers (see Appendix 1: Public Health Communication Champion Overview). The skill set for the Communication Champion position, articulated in the overview in Appendix 1, is as follows:

- Ability to quickly understand information and convey it to other people
- Comfortable presenting to a group and facilitating discussion
- Clear understanding of the change management process
- Ability to foster effective working relationships
- Ability to self-manage two way accountability
- A positive attitude towards change
- Strong two way communication skills
- Ability to work within the scope of a defined role with limited oversight

Many of the above-mentioned skills are also skills needed by supervisors and managers. The Communication Champion overview also provides a guideline for the organizational supports in place for the program, as articulated in Appendix 1. It describes a senior leadership role designed to provide support for the Communication Champion position, and includes references to working with co-workers and managers. The mentor placed in the senior leadership role is also responsible for providing some of the information to be disseminated by the Communication Champions, holding regular Communication Champion meetings, clarifying information with
the Communication Champions, and providing orientation and ongoing support to the Communication Champion role.

An “expression of interest” notice was sent to all Public Health staff in February 2012 to request self-nominations for the Communication Champion role (see Appendix 2: Communication Champion Expression of Interest). The position of Communication Champion is a voluntary one, filled by a frontline employee based on interest, communication skills, and geographic area. The organization’s service area spans over 900 kilometers and includes approximately thirty Public Health community offices; the strategy required twelve or thirteen Communication Champions to cover these offices, with many Communication Champions covering more than one location/town.

The Communication Champion was required to have the support of his or her direct supervisor and/or manager in order to self-nominate for the role. Communication Champions were initially selected from those who self-nominated based on geographic distribution and their knowledge of the required skills. This group of volunteers were then formally brought together in early 2012 for a leadership forum, where they were provided with additional leadership and communication skills needed for their new role. Since the leadership forum, the Communication Champions have met on a regular basis to continue to define their role and prepare the ongoing Communication Champion messages they share with peers.

2.0 Literature Review

Current literature does not specifically support the type of formal communication strategy discussed here; which uses frontline staff to disseminate information to their peers in a healthcare environment or other business setting. The original intent of the Communication Champion
program was to improve organizational communication through the use of change agents. The goal of the present evaluation is to examine and assess various aspects of the Communication Champion’s experience as it relates to the Communication Champion strategy, including organizational support, team dynamics, overcoming geographic barriers, and employee engagement. The first part of this project reviews the relevant literature on organizational communication, the use of change agents during organizational change and organizational leadership communication. Review of this literature positions us to analyze the current program alignment with current theories in the latter part of this project.

2.1 Organizational Communication

Communication within an organization is complex at best; within a geographically large organization comprising various structural silos, it becomes an increasingly complicated web of communication channels. It is well known that an organization’s competitive advantage relies on effective organizational communication (Pipas, 2013) (Tucker, Meyer, & Westerman, 1996). Effective communication can help predict, manage, and control organizational behaviour, which can result in a competitive advantage for the organization (Pipas, 2013). There is no single key component that defines effective communication; it is dependent on a variety of factors within the organization, including leadership, structure, culture and others. In Nordin, Halib and Ghazali’s (2011) investigation into specific organizational structures that promote effective communication within an organization, they found that centralization and formalization have a positive impact on organizational communication. They also stressed the importance of a match between organizational communication and organizational structure (Nordin, Halib, & Ghazali, 2011).
Effective organizational communication has a number of benefits; one of these is a financial benefit, which in turn can produce a competitive advantage for the organization. Tucker, Meyer and Westerman (1996) found that the development of effective organizational communication, particularly through the reduction of barriers to communication, influences financial outcomes positively.

Many barriers to communication exist in a healthcare organization, including geographic barriers, timeliness barriers, and coordination barriers (the need to have the right information provided to the right people). Several frameworks exist to analyze the effectiveness of organizational communication. One such framework, introduced in Greenbaum (1974), assesses the alignment between organizational policy and communication strategies within an organization. Long-term organizational success relies on providing information to the right people and getting the right people together to exchange information (Gomez & Ballard, 2013). Defining who the right people are to receive and exchange this information, however, can be a challenge.

Trust amongst all levels in an organization determines how communication occurs; it also determines how effective communication is. There must be trust among everyone involved in the process. When a hole occurs in a line of communication, the person who fills that hole must have the trust of both the management and the information recipients in order to succeed (Droege, Anderson, & Bowler, 2003). To develop this trust, encouraging relationship growth among peers and management is important.

The structures that facilitate the development of worker relationships are also integral to creating a competitive advantage. When an organization requires intellectual capital, certain conditions
must be met. Nahapiet and Ghoshal (1998) suggest that it is a combination of access to the right people, anticipation of the value of the communication, motivation to use knowledge collaboratively, and the ability to combine knowledge effectively that leads to the successful development of a company’s competitive advantage by means of human capital. Nahapiet and Ghoshal’s proposal (1998) is congruent with Tucker, Meyer and Westerman’s (1996) finding that effective communication systems lead to the improvement of organizational capabilities.

Organizational communication is complex, but if accomplished effectively, it can help an organization develop a competitive advantage. Organizational communication is most effective when (a) there is alignment between the systems and processes of the organization and the goals of the company, and (b) trust is established between information disseminators and information receivers.

2.2 Organizational Change and Change Agents

A goal of the Communication Champion strategy was to overcome structural organizational barriers through the implementation of a new formal communication pathway making use of modified change agents. Knowledge diffusion is the main benefit of using a change agent; however, change agents can also act as neutral arbitrators of a message (Lerch, James-Andrews, Eley, & Taxman, 2009). This must be consistently done in conjunction with the organization’s leadership; Lerch et al. (2009) found that, in order to motivate staff to participate willingly in organizational change, leaders must work together with the change agent to reinforce the importance of the change.

Organizational change can also negatively influence employees personally; this in turn negatively affects department productivity. In a study conducted by Decker (2001) on a
integration process involving three hospitals, it was found that employees believed quality had been sacrificed in the integration; the employees' resentment of top-down decision making also negatively impacted departmental productivity. This again illustrates the need for consistency within the leadership in reinforcing the change agent message.

Formal communication channels can be used to diffuse information throughout the organization; however, this is not the only means of information dissemination. It is important to recognize that social networks can be used similarly to diffuse information (Lerch, James-Andrews, Eley, & Taxman, 2009). An interesting concept that has recently gained interest in healthcare environments is to have 'nobody in charge', but instead rely on the existing staff and the competencies of a distributed population of change agents (Buchanan, Addicott, Fitzgerald, Ferlie, & Baeza, 2007). Let us address the ramifications of this concept in more detail in the next section.

2.3 Organizational Leadership and Communication

There is a trend in organizational leadership today to replace hierarchical commands by leaders with a more conversational communication style. In order to make this type of shift successful, it is essential to foster emotional or mental proximity among all staff members regardless of their place in the hierarchy (Groysberg & Slind, 2012). In order to gain emotional or mental proximity to their employees, leaders must gain trust, listen well, promote dialogue, and encourage the expansion of certain employees' roles beyond their job descriptions to include being brand ambassadors, thought leaders, and storytellers (Groysberg & Slind, 2012). Effective leadership is characterized by an alignment between the values of the leader and the values of the organization, when this alignment is present, the probability of successful leadership increases (Hoffman, Bynum, Piccolo, & Sutton, 2011). This observation fits with Adler, Heckscher and
Prusak’s (2011) finding that creating a shared purpose for a group, promoting organizational collaboration, and intentionally aligning processes in order to connect people are all factors that contribute to an organization’s overall success. To promote success within the organization, therefore, those individuals involved in the process or change must be constantly engaged in understanding their shared mission and how it is communicated (Adler, Heckscher, & Prusak, 2011).

Responsibility for achieving effective communication systems ultimately rests within the various layers of management, as it is executives and organizational leaders who are responsible for organizational policies and strategies. Greenbaum (1972) indicates that management is responsible for the communication of policies, activities, and performance and measurement standards; in addition, operating managers are responsible for ensuring efficient communication with the frontline staff in everyday management functions. Organizational leadership plays an important role in the overall success of internal organization communication.

Encouraging two-way communication in healthcare settings is important, not only for the development of trust between management and workers, but also because a lack of upward feedback has been found to have adverse effects on patient care and health outcomes. Senior management can help employees’ voices be heard in healthcare settings by being approachable, being consistently visible and available, and encouraging a cultural focus on continuous quality improvement (Adelman, 2012).

The communication format is another factor that affects the overall success of organizational communication. Quach (2013) found that in today’s organizations, communication most commonly occurs via email, while the least common form of communication was delivery
through a direct intermediary. Elements used to measure communication effectiveness include individual leadership competencies, technological communication channels, organization climate, and timeliness (Quach, 2013). Therefore it is important that leaders choose the form of communication to match the intent and meaning of the message; email for instance, is a passive form of communication.

2.4 Organizational support

Organizational support is important for any project or function within the company to be successful. Orientation and training are important components of organizational support often provided for new employees (Kammeyer-Mueller, Wanberg, Rubenstein, & Song, 2013); a similar approach to organizational support can be adopted for teams as well, since in the formative stages, teams, like recently-hired employees, are new entities within the company structure. Orientation alone is not enough; however, peer support during the orientation period is essential for the successful transfer of new skills (Chiaburu & Marinova, 2005). Salas, Sims, and Burke (2005) identify five main factors contributing to team success: team leadership, mutual performance monitoring, backup behaviours, adaptability, and orientation of members to the team. In contrast, Dhar (2012) proposes that materialistic support, supervisor support, building reciprocal relationships, organizational justice, and intentions to leave are the most important factors affecting successful teams.

An additional factor leading to team success and performance outcomes in healthcare settings is the behaviours and attitudes displayed by teams (Richter, Dawson, & West, 2011). Cohen and Bailey (1997) found that team success is positively correlated with group cohesion. When employees feel as though they do not have organizational support, they will distance themselves from the organization and this will affect performance (Zagenczyk, Gibney, Few, & Scott, 2011).
Kanaga and Browning (2003) suggest that team effectiveness can be monitored by ensuring that strong organizational support is in place throughout the lifecycle of the team. Common types of organizational support are leadership support, materialistic support, and orientation and learning support.

2.5 Team dynamics

Team dynamics play an important role in the outcome of any project or program. There is a positive relationship among teamwork, staff attitudes, and performance outcomes (Richter, Dawson, & West, 2011). Pentland (2012) indicates that differences in patterns of communication are why some teams outperform others. Specifically, communication patterns affect the team’s energy and engagement outside of formal meetings (Pentland, 2012). According to Pentland (2012), the most valuable form of communication is face-to-face, followed by phone or videoconference (a form of communication that becomes less effective as more people become involved), and email as the least effective form of communication. An increased number of face-to-face interactions accounted for a 35% increase in team performance in Pentland’s study (2012). Both the type and method of communication are thus important considerations in team dynamics.

Clarity in role and scope is important to team dynamics. Brenegan (2003) suggests the following for team success: know your scope, design your team, know your team, define the team goals, define the roles on the team, define your rules, have a process for conducting team business, know your leader, and align your team’s goals with the organization’s goals. Preston (2005) indicates that the following strategies to build successful teams are as follows: scheduled team-building sessions, team-building exercises involving trust, and realization of individual contribution to the team. Teams can be positively influenced by the deliberate planning of what
Lawson and Bourner (1997) called “events”; which are activities that encourage officemates to interact and talk together and according to their study, the introduction of ‘events’ into the work environment consistently helps to increase work productivity.

2.6 Geographic Barriers

The overarching purpose of the Communication Champions strategy was to ensure that important organizational messages were being communicated in a consistent and clear manner across the geographically dispersed health organization. The goal of management in implementing this strategy was to bring the three departments of Public Health together without changing the organizational structure. In today’s workplace, there are many new technologies available to support communication across a geographically dispersed organization, and the use of these new communication technologies can lead to changes in organizational form (Fulk & DeSanctis, 1995). One way to overcome geographical barriers is to use virtual teams. The Communication Champion team meets Berry’s (2011) criteria for a virtual team: its members function interdependently, are responsible for outcomes, manage relationships across organizational boundaries, are geographically dispersed, and rely on electronic communication. Virtual teams must understand team dynamics, harness knowledge from the organization, use standardized data storage, and require management time (Berry, 2011).

Leadership within any team is important; however, with a virtual team, it is particularly essential that managers foster interpersonal relationships among members. Various technologies are available to help create a virtual water cooler or ‘hang out’ after work (Malik, 2012). Other factors that affect virtual team communication include location, culture, the use of nonverbal communication, and trust; the interplay between these factors ultimately influences whether a team will achieve their common objective (Chihay & Kleiner, 2013). Geographic barriers often
determine what channels of communication are used; email and teleconferencing become the preferred methods. Web conferences allow team members to see and interact with each other, which can remove the perceived barriers of distance. The use of video conferencing technology also facilitates team members’ ability to measure and observe each other’s body language. Managers should utilize whichever framework that permits their team members to communicate most effectively (Chihay & Kleiner, 2013). In particular, it has been shown that virtual teams are most effective when they share high initial trust at the forming of the group, although of course there is no single pathway to meeting this goal (Chihay & Kleiner, 2013).

Effective virtual teams also display reliable and timely communications, and have an involved leader (Chihay & Kleiner, 2013). Trust, awareness of cultural differences, comfort with various communication methods, familiarity with a set of established communication norms, strong social skills, and a clear goal or objective for the team are all elements that contribute to an effective virtual team (Brandt, England, & Ward, 2011). Geographic distance between team members can make the growth of effective communication and team cohesion more challenging, but these barriers can be overcome.

2.7 Employee Engagement

Communication in a healthcare environment is challenging and Adelman’s (2012) survey of healthcare CEOs suggests a range of new approaches that can be helpful in the process of creating communication pathways. In particular, Adelman (2012) found that when CEOs develop a culture of continuous quality improvement built around transparent information flow, the feeling among employees that their voices are being heard improved significantly. Two-way communication can be fostered by using informal communication approaches to promote culture and information flow; Adelman (2012) suggested the following examples of this strategy:
hosting events where leaders serve meals to staff, encouraging town hall type meetings, and providing informal, relaxed environments in which discussion of issues is encouraged.

Successful formal communication strategies include formal reporting structures, cross-functional team meetings and local team meetings (Adelman, 2012). However, there may be drawbacks to using a cross-functional approach; for instance many employees express a fear of losing their places in their home departments while participating in a cross-functional team (Preston, 2005).

Furthermore, setting up a formal communication pathway is not enough to ensure successful communication (Bisel, 2010). In Abugre’s (2011) study, a positive relationship was found between effective organizational communication and increased worker satisfaction; worker satisfaction is also positively related to the level of trust they feel with coworkers, their satisfaction level with supervision, and the scope of influence each employee has over their role. Conversely, worker satisfaction is negatively related to information withholding amongst any levels of the organization (Abugre, 2011). Employees who are satisfied in their role exhibit more vertical communication than those who are not satisfied (Abugre, 2011).

Employee engagement is an important factor to consider, as a greater degree of employee engagement leads to improved organizational performance (Lakshmi, 2012). Two factors, employee-internal and employee-external, can help to increase employee engagement. Job satisfaction is an internal factor that is moderately linked to employee engagement. Job satisfaction can be affected by the benefits, recognition, fairness, and performance management that an employee receives, as well as by the nature of the job itself (Abraham, 2012). Kowalski (2003) identifies the additional relevant internal factors include empowerment, recognition, respect, self-development, creativity, achievement, advancement, and peer relationships as elements that when fulfilled through an employee’s job, increase that employee’s engagement.
Employee-external, or organizational, factors can be equally important for employee engagement. Employees feel more valued, and therefore more engaged, when managers use direct and discursive communication (Reissner, 2013), when information flows freely, and when management is adaptable and accountable (Lakshmi, 2012). Managers can also encourage employee engagement through effective performance management, specifically where managers act as ‘coaches’ to the employee and support them to achieve goals (Gruman & Saks, 2011).

Additional factors that increase employee engagement include infrastructure, communication (both cross-functional and with other employees), feedback, and orientation (Vaijayanthi, Shreenivansan, & Parbhakaran, 2011). Conversely, factors that inhibit employee engagement include insufficient interaction with peers, lack of organizational accountability, and insufficient communication (Vaijayanthi, Shreenivansan, & Parbhakaran, 2011). Remote locations, distanced from the corporate organization, contribute negatively to employee engagement (Vaijayanthi, Shreenivansan, & Parbhakaran, 2011).

Overall, common themes that emerge as keys to employee engagement are empowerment, development of peer relationships, recognition, feedback from supervisors and/or managers and the presence of sufficient communication. Decker (2001) indicates that organizational changes, including integration among teams, can reduce job satisfaction, while factors such as skill development can motivate and preserve job satisfaction during times of change.

From the above literature on organizational supports, workgroup dynamics, geographic barriers, and role satisfaction the following hypotheses were developed:
Hypothesis 1: In order for the Communication Champion program to be successful, the organization needs to provide the following supports: leadership, materialistic support, and team orientation.

Hypothesis 2: In order to be considered successful, developed and mature workgroup dynamics should be identified among the Communication Champions, as illustrated by the presence of sufficient role clarity, trust amongst members, group cohesion, and established communication patterns.

Hypothesis 3: The Communication Champions will have successfully overcome geographic barriers if they have developed a framework for team communications, fostered interpersonal relationships, and provided timely communications.

Hypothesis 4: The Communication Champion strategy will be successful if the Communication Champions are satisfied with their role. Common themes that positively contribute to employee engagement are peer relationships, recognition, feedback from supervisors/managers and sufficient communication. If these items are present, then the employees should be engaged in their role.

3.0 Methodology

An evaluation of the Communication Champions program was completed through a confidential interview with current Communication Champions. Based on the information gleaned through the interviews, an assessment of the Communication Champion program was conducted and a comparison with current literature on organizational support, team dynamics, overcoming geographic barriers, and employee satisfaction/engagement were made.
This evaluation used a qualitative research method conducted through face-to-face or telephone interviews with current Communication Champions. The interviews were conducted without identifiers in order to maintain the confidentiality of the Communication Champions and encourage free discussion. The student researcher did not prompt conversation provided by the Communication Champions; rather to stay neutral, asked interviewees only the interview questions indicated below, confirmed the interviewee had nothing else to say prior to moving to the next question, and in some instances asked the Communication Champions for clarification on the statements they gave.

In total, there were twelve Communication Champions involved at the beginning of this evaluation, although during the evaluation process one volunteer withdrew from the Communication Champion program. There was a response rate seven out of twelve to the interview process and the interviews were conducted over a two-week period, beginning in December 2013.

Each interview was recorded and then transcribed by the student researcher. Personal references and identifiers were removed during the transcription process to maintain the confidentiality of the Communication Champions and others mentioned by name during the interviews.

Current literature provided the basic framework for categorizing themes from the interviews. The hypotheses were developed using current literature as a framework by identifying recurring themes as they related to the topic from the literature and then used these themes to categorize the Communication Champions responses.

The interviews were then individually reviewed; statements supporting or not supporting the hypothesis were gathered for each of the four hypotheses. In some cases additional reoccurring
themes were prevalent outside of those identified through literature in the hypothesis. These recurring themes were added to the literature framework for each the corresponding hypothesis and presented in the results. The results were themed based on each of the responses by the interviewees for each related questions as follows.

In order to assess the types of organizational supports and presence of sufficient organizational support (Hypothesis 1) for this communication strategy respondents were asked to:

1. Describe the organization supports in place, for your role as a Communication Champion?

To identify role clarity, trust, group cohesion and communication patterns amongst the Communication Champions as indicators for the type of workgroup dynamics (Hypothesis 2) in place they were asked to answer:

1. How does the communication between members of your Communication Champion workgroup happen?
2. Comment on clarity of their role?

The following indicators and aspects of geographic communication barriers (Hypothesis 3) were assessed, timely communications, the presence of a framework for communications, and the presence of interpersonal relationships:

1. Is the process for delivering a communication message across diverse geographic area working?

Satisfaction (Hypothesis 4) was assessed by asking the participants to comment on their overall satisfaction with their role:

1. Describe your overall satisfaction in your role as Communication Champion?
2. What have been the benefits and barriers of being a Communication Champion?

3. What are you perceptions of the communication messages and are they meaningful to the audience?

In addition to the satisfaction questions above, the Communication Champions were also asked to comment on the evolution of the role in the future to provide insight to where the experts think the program requirements should shift in an effort to assess value of the program to participants:

1. What is the next phase for the Communication Champion role?

4.0 Results

The results from the Communication Champion interviews are presented in the following format:
(i) the hypothesis under evaluation is stated; (ii) assessment of the hypothesis based on the interview data is made (or, if there is insufficient data to assess the hypothesis, that insufficiency is reported); (iii) additional items missing or found are reported.

4.1 Organizational Support

Hypothesis 1: In order for the Communication Champion program to be successful, the organization needs to provide the following supports: leadership, materialistic support, and team orientation.

Organizational leadership support. Six out of seven respondents indicated there was sufficient leadership support for the Communication Champions. This leadership support came from a number of sources, including direct supervisors, the Communication Champion lead, senior management, and other supervisors. Several interview statements indicating sufficient leadership support are provided below:
• “good support from the lead”
• “I know that I could talk with the direct supervisors”
• “organizationally, management was taking a look in the direction we were going and provided feedback”
• “support from my internal management to take this additional role”
• “encouragement and the support that we get to take that information and make it our own”

In contrast, one of respondents indicated there was insufficient leadership support over time.

• “I found that there was less support over time”

**Materialistic support.** The Communication Champions indicated that sufficient materialistic support was in place for the program, including access to a variety of communication tools such as videoconference, teleconference, and email. In addition to these items, the Communication Champions also identified prescribed communications and speaking notes as a materialistic support. Five respondents indicated that they felt that the material support provided was sufficient, while the remaining two respondents gave no comment or response concerning the sufficiency or insufficiency of this type of support structure.

• “full access to the videoconference and teleconference, have the computer and the projector, all those different pieces of hardware”

• “presentations and the power points were developed”

**Orientation.** Learning and orientation were themed together when analyzing the results, as there is a considerable amount of interaction between the two factors. One interview participant
responded both positively and negatively to this question, indicating a lack of orientation, but then acknowledging that there had been opportunities for learning. For the majority of respondents (6 of 7) learning and orientation was sufficient.

- “lead tries hard to add each meeting to bring some sort of learning opportunity, talked about facilitation skills, good place for learning opportunities”
- “training with content expert and that was on how to facilitate discussions and that was really helpful”
- “teleconferences to orientate us to the whole process”
- “leadership workshop over two days in Prince George”
- “leadership forum, since then there is a formal orientation, a mentor”

One participant complained of a lack of orientation at the start of the program and one participant indicated that the leadership training provided was not useful to them.

- “lack of orientation, trying to figure it out as we went along”

In addition to the presence of sufficient leadership, sufficient materialistic supports and sufficient learning and orientation, additional themes of peer support, time, and role clarity were identified as organizational supports.

*Peer support* was a theme that arose in interviews with five of the respondents. Peer support took many forms for the Communication Champions, including the leads following up with Communication Champions through emails, support from other Communication Champions, and support from other colleagues.

- “following up lots through email and conferences”
- “when I wasn’t able to attend a call, they made every effort to include me in a different time”
- “Able to ask questions throughout the process”
- “people that we could just contact and get back to you as quickly as you can expect”
- “fill each other in on the meetings, had more than one Communication Champion in office”

One respondent indicated that, during the beginning of their time as Communication Champion, there was sufficient peer support, but that as time went on, this support and their associated engagement waned.

- “so I felt very supported and encouraged in the beginning and I felt like it was more the Communication Champion had more of a say in what was going on and ideas were valued”
- “soon became kind of boring [the Communication Champion role] because I felt less valued as a leader when you’re told what to do and when to do it and don’t really have a say”

The respondent who identified insufficient peer support indicated that this insufficient support came from colleagues and frontline staff.

**Time** was identified as important to the respondents in being able to appropriately fulfill the Communication Champion role. There were mixed results for this factor, with no clear consensus from the group regarding whether the time allocation was sufficient or insufficient. Three participants each indicated both sufficient and insufficient time allocation. The challenge with insufficient time allocation is seen below:
• “challenge was the scheduling, organizers were very cognizant of the fact that we were all busy and seem to make alternate plans as well”
• “I think her time has been really really impacted, time that we meet together as a group for discussion has been helpful”
• “No fault of the organization, rather priority list with all the other things that are going on, managers were aware and can support you to attend meetings and fit within your workload”

There were also mixed results, with the same respondents indicating both time was sufficient and that time was not sufficient. Overall, including the mixed responses, six respondents indicated that time allocation was sufficient:

• “given the freedom to arrange my work plan to accomplish the work”
• “within reason I can shift the work around”
• “figure out how to accommodate that work”
• “managers were aware and can support you to attend meetings and fit within your workload”
• “not usually time-consuming”

Of the respondents, five mentioned the challenge with prioritizing the work, making time to meet, struggling with unfinished projects, and trying to complete this work on top of regular workload.

• “hard to get together”
• “outside of my regular day-to-day work”
• “started a poster project and a bunch of things and I don’t really know what happened to them and they fell to the side of the table”

**Role clarity** was identified as an additional organizational support for the Communication Champions by five respondents. There was mixed results, with equal numbers of respondents indicating the sufficiency and insufficiency of their role clarity.

• “we did take that opportunity to do the norming storming visioning and helped create the vision of what communication champs are going to do”
• “there was a written documents about what is the role”
• “they walked us through what kind of role it is going to be”
• “one point it was broad and the role may change”
• “bring them to that one person who would be able to find the information for everyone to make sure everyone is on the same page”

Based on the collected interview responses, we can conclude that there were sufficient organizational supports in place for the Communication Champions in the areas of leadership, materialistic supports and learning and orientation. Three additional supports were identified by the Communication Champions as organizational supports for their program: peer support, time, and role clarity. Feedback indicated that sufficient peer support was provided, but the results concerning time allotment and role clarity were mixed and did not support a conclusion one way or the other concerning sufficiency.

### 4.2 Team Dynamics

Hypothesis 2: In order to be considered successful, developed and mature workgroup dynamics should be identified among the Communication Champions, as illustrated by the presence of
sufficient role clarity, trust amongst members, group cohesion, and established communication patterns.

**Role clarity.** As was seen above in the context of organizational supports, responses on the topic of role clarity were mixed. It is not clear from the interview results whether or not sufficient role clarity was provided for the Communication Champions.

- “There was a lot of ambiguity in trying to avoid having a hidden agenda”
- “call for interest and they had the specific criteria change directions halfway through”
- “maybe more clarity about what kind of messaging we were meant to be working with”

**Trust.** Likewise, there was not sufficient information to glean whether the levels of trust among the Communication Champion group were satisfactory.

**Group cohesion.** Three respondents (out of seven) indicated that there was sufficient group cohesion among the Communication Champions.

- “Communication Champions [were] coming together, we had the videoconferences [and] we were meeting fairly regularly”
- “it was a great opportunity [getting together for the leadership forum], there is some real teambuilding happening”
- “[I can] speak to another Communication Champion in my building because we just run into each other more often face-to-face and we have more informal discussions”
- “and I’m lucky enough that I have a counterpart in this office who also is a Communication Champion”

One respondent indicated a lack of group cohesion.
"So it really doesn't feel as cohesive as it had been beginning and there are holes in Communication Champion coverage."

There was not enough information to determine if there was sufficient or insufficient team cohesion in this case.

**Communication patterns.** Six out of seven respondents indicated that the communication patterns in place were sufficient.

- "talking about overall to Communication Champion group we do have that formal meeting structure"
- "we meet initially when we first started, regularly if I remember meeting monthly, we met by videoconference initially and then we decided that it was easier to teleconference so that's how we met – teleconference, about monthly – and then we started getting into the presentations"
- "[meet] informally, ad hoc, and as needed"
- "coordination of communication at the same time"
- "I think so, as long as you get people together"
- "usually by teleconference or webinars or office communicator. We had one face-to-face sort of. But mostly teleconference and videoconference."

Based on the interview results, it is necessary to conclude that there is not enough information to support the presence of mature, well-developed team dynamics among the Communication Champions. Role clarity was insufficient, and there was not enough information to determine the level of trust or the cohesiveness of the group. However, communications patterns within the group did seem to be sufficiently established.
4.3 Geographic Barriers

Hypothesis 3: The Communication Champions will have successfully overcome geographic barriers if they develop a framework for team communications, foster interpersonal relationships, and provided timely communications.

**Team communications.** Six out of seven of the Communication Champions indicated that there were frameworks and methods of communication in place both for their team meetings and for disseminating the messages to Public Health staff.

- “do this by teleconference, bringing different communities together”
- “standard message and that it’s getting out there to everybody”
- “I’m able to meet with all the people I have to present [to] face-to-face”
- “live meeting in front of people, presentation it has the basic core information”
- “person-to-person all the time that would be ideal”
- “[staff will] say if there’s something off but it’s more about the presentation than about yourself”
- “offered at staff meetings or via teleconference”
- “Power Points to guide us and give us the messages”
- “started have some videoconference capabilities”

**Interpersonal relationships.** Only two out of seven of respondents indicated that their interpersonal relationships with their teammates and their information recipients were sufficient.

- “I can imagine the struggle and have heard it from the other Communication Champion”
- “if we want to be effective, we want to be good listeners, want to be genuine”
Timely communications. Interview results concerning the timeliness of communications were mixed. One participant indicated that the messaging was timely—“message has been getting to the staff fairly consistently”—while two other respondents indicated there were challenges with providing a timely message:

- “I can imagine the struggle and have heard it from the other Communication champion trying to connect with people who are in different communities”
- “challenging to get everyone together even at this level, everyone has their own workload they have to juggle that that’s beyond their locus of control, people feel like they don’t have enough time to get to them [the presentations]”

In addition to timely communication, communication frameworks, and the development of trust, the Communication Champions also identified three other factors related to geographical barriers: sufficiency of messaging, degree of manager support, and access to appropriate tools for communication.

Insufficient messaging, defined here as both the delivery of the message and the meaningfulness of the message, was identified by five out of seven of the respondents as a barrier to communication.

- “Filling all the Communication Champion positions, holes in Communication Champ coverage”
- “I think the intended audience is not that interested”
- “it is a workload thing and people are so busy it’s a low priority”
- “the audience is still a little confused they always associate Communication Champions with Changing Times ”
• “I think the problem lies with the audience just not being interested in it anymore, or really engaged”
• “communicate messages that are going to be meaningful to the staff; it [would] be better to make it less formal so that we can be engaged with that”

The communication delivery method had been identified by six out of seven of the respondents to be working effectively. Among the major contributing factors was flexibility in allowing effective delivery methods.

• “allowed some flexibility, adaptability is a strength”
• “sounds like is working smoothly, think the process in thinking about the structure is working”
• “There are constraints that get in the way, trying to get everyone together in the organization, other than that everything’s good”
• “we’ve had the flexibility to do it [communication messages] and [in the way we] present”

On the topic of overcoming geographical barriers, one respondent, who was one of two Communication Champions in the same office, indicated that disseminating the information was “really tough over [a] large geographical area”; this person went on to speculate that communication would be much smoother if there were “two Communication Champions in all areas.”

Overall, the Communication Champions indicated the communication structures in place were working.
4.4 Employee Engagement

Hypothesis 4: The Communication Champion strategy will be successful if the Communication Champions are satisfied with their role. Common themes that positively contribute to employee engagement are peer relationships, recognition, feedback from supervisors/managers and sufficient communication. If these items are present, then the employees should be engaged in their role.

Peer relationships. The statements from the Communication Champions indicated many positive links between their role as Communication Champions and their development of peer relationships with each other and with other frontline staff; this would appear to be a significant benefit to the communication strategy. Six out of seven of the Communication Champions interviewed indicated sufficient peer relationships:

- “working with other people in the North and getting to know different programs from all over Public Health, so that’s unique to come together and know people”
- “I think that it made it easier for them to take the information from me and come to me afterwards and come to me for some questions. I was really happy about that part of that”
- “[there are] two Communication Champions in this office and we always had each other to bounce ideas off of each of the other”
- “the benefits has been with meeting with a different group of people, in the networking and partnership with people across different areas in different towns in different disciplines is really helpful, especially when we are brainstorming on how to deliver message[s]. We’re learning from each other, willing [to] give each feedback on what happened, what we liked, what would we do differently, whether it’s a written format and is posted on a shared board or it’s shared verbally”
• “another side benefit from this is that when other people from other disciplines that I
don’t normally mix with on a regular basis come together and we get to know each other
on a different level. We need to collaborate on something else for my programming, we
can easily go and approach each other down the hallway and talk out or plan together for
an event in the community, and eight collaborate easier just because you know each
other, so I think that[’s] the side benefit that’s really really awesome”

• “benefits for myself have been just more interactive relationships with the people who are
involved, and you can find out what the common concerns are related to the topic and
feed them back”

• “benefit for sure was getting the leadership training, getting to be with other people
within the organization, getting out to meet new faces and see what other people are
doing. That’s probably the best thing about it”

• “engaging with some of my colleagues I don’t get a chance to work with on a day-to-day.
I think it has been good. People are more willing to pass around communications and it’s
not just this top-down thing where I have to wait till my manager says something until it
is legitimate”

Two of the Communication Champions indicated that it was a challenge to create these peer
relationships: “I haven’t made [it] a purposeful part of my job to meet with people” and “we
have to make an effort to jump the barriers ourselves and go and be in an area where we
wouldn’t normally be in. Or go engage someone in a discussion [in the] hallway or have lunch,
where people don’t normally still lunch at work.” These comments indicate that challenges exist
in developing peer relationships across the pre-existing operational silos. Overall, however, the
Communication Champions indicated that there were sufficient peer relationships in place.
Recognition. There were mixed results for recognition, with an equal split between sufficient recognition in place and insufficient recognition. The following comments are representative of those Communication Champions who felt they received insufficient recognition from their peers:

- “dissatisfying when you put a lot of effort into presenting and only a small percentage of the staff come to it. So that’s a disappointment”
- “trying to fit within our work schedules well and that one day where we had a presentation when one person showed up and we expected 28”

These comments contrasted with other respondents’ feelings that recognition from peers was satisfactory: “I think that there is always a percentage of people in the room that really really appreciate it.”

Feedback. There was not enough data collected to support a claim of either sufficient or insufficient feedback from supervisors and/or managers. One Communication Champion indicated that a benefit of the program for them was the establishment of a communication pathway between the Communication Champion and the management: “I think some other benefits are I feel very comfortable talking to management about some of the stuff that’s going on now. I feel comfortable going to management and I feel that management are really receptive, knowing that I am a Communication Champion” “so they’re very willing to answer any questions I have, where some people might feel that management are on a different level and intimidating or whatnot. It’s sort of an opportunity to interact in a vertical rank rather than just [with] people who are on the ground with you as well”.

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Job satisfaction. When asked about their overall satisfaction with their role as Communication Champions, respondents gave mixed results. Five out of seven respondents indicated they had sufficient satisfaction:

- “initially was really positive I felt like I was bringing some good information I felt the positivity from the group and I still feel it from the people who are there, that people are appreciating the time and appreciating information and in one sense I feel very satisfied”
- “I’m relatively satisfied personally with the role as Communication Champ… given the content of the presentation, all the factors that go into doing the Communication Champion presentation and maintaining the role, from coming out on a 10 point scale would be an eight. So reasonable, good, moderate, not the most exciting thing I do in my work nor is it the worst part. It’s definitely positive”
- “I thought that we would be at the forefront for this and hopefully it will help me to deal with the change better, and that has proved to be the case, so that was a huge benefit for me. Another benefit would be the confidence for me in presenting the information and being in a little bit more of a leadership role; it was kind of what I expected”
- “on a scale from 1 to 10, I would say it’s about a nine most the time, being very very good. I like it”

However, some of those same respondents also indicated some aspect of dissatisfaction with their role. Ultimately, the mixed result means that no definite conclusion can be reached concerning employee satisfaction for the Communication Champions’ in their role. The following comments indicate areas where employees felt dissatisfaction or a mixture of satisfaction and dissatisfaction with the role:
- "I have mixed feelings of satisfaction. When [I] actually get out there into the presentation I feel good afterwards, and I get great feedback. But then overall there's a bit of dissatisfaction, I don't feel like I'm doing the best that I could in this role because of attendance and interest from the overall group"

- "Umm, there was a lot of cynicism in presenting some of this stuff. Well, not a lot – I should say there was some, by a select few [referring to frontline staff]"

- "[satisfaction is] not very good honestly at the beginning it [satisfaction] was good and had good support. I felt like my opinions and ideas mattered or were sought in the beginning of the Communication Champion process. And towards the end I felt like I was just a little pawn that had to go and communicate"

- "I would say I'm not fulfilled in the role. It didn't turn out the way I thought it would turn out to be, but it's really given me really good experience, as I've learned a lot the process because I've been there from the beginning, so in general I'd say moderately satisfied"

- "The larger grand possibilities of the role as it was initially introduced and described on paper didn't materialize, so that's okay. That was my visioning of it and I didn't understand the organization's vision of it. So bit of a disappointment on that level"

Related to satisfaction, the Communication Champions identified the following factors as indicators of satisfaction with their experience: message meaningfulness, personal benefits, and priority of work.

*Message meaningfulness.* There were Communication Champions who indicated either that the message (or part of the message) was meaningful or that the audience did not relate to the message. First, those who indicated that the messages being disseminated were meaningful:
• "being aware of direction and shifts that Public Health is wanting to go, so that for me has been a benefit. And on some communications [I am] getting some new knowledge"

• "Things that I might not think to be important to the audience often are. That’s really good that we just had this nice package that is standardized that we present, and we love the dialogue happened at the outside the actual meeting and also generates even more value-added [for my experience]"

• "Putting the position papers into action I felt like there was definite interest from the staff while it spurred a lot of communication and people really wanted to think differently and incorporate these upstream messaging to prevent chronic disease"

• "even some of those practical suggestions they were able to come up with in discussion was really really beneficial to the presentations that we gave"

• "to be able to talk about some of the things that are important in my department like the position papers and integrating the position paper work. That’s something that population health is been working a lot with. It’s important work for me and it’s really interesting for me"

• "it is interesting to me that some of the Public Health nurses didn’t know anything about what was all going on in the background, for them as I thought it was really beneficial to share that some of the work that we’ve been doing and involved with and have it mean something and have them respond to and want to put it to work"

• "I think it does improve some of that communication barrier there, where it’s okay to get messages from different areas and take them and so to clarify them and make sure that a consistent message"
However, as noted above, the Communication Champions expressed mixed feelings about how meaningful the message was to those involved. Respondents indicated the following:

- "broad messaging, information we are presenting to this point has been pretty general. In the role that I currently do it hasn’t really been new information"
- "I think it’s beneficial and I don’t think some people totally understand the context behind it"
- "I think it will be more impactful over time. I guess it’s not to say that it’s not impactful now, I think it just becomes more and more impactful during every presentation"
- "one current barrier would also be direct application to the job. So, we learn things all the time, and we need direct links to ‘How can I use this to better my performance?’"
- "[the] first two presentations [were] much to do about nothing, nothing new or exciting for the audience"
- "I think the intended audience is not that interested"
- "I would say that the way that [the communication] was tended to be offered, at staff meetings or via teleconference or whatever, means that the Communication Champions could do it. I think that we’ve had the flexibility to do it and present it the way we can. I think the problem lies with the audience just not being interested in it anymore – really engaged – and I think that a lot of the frontline of the organization is really disengaged with the whole idea of Changing Times. I think that if they associate Changing Times with the Communication Champions the interest may not be there"
- "I think in general the messages are less meaningful to frontline staff that we’re delivering, which is why we’ve encountered some frustrations of people attending the presentations"
• “I simply think that the messages we are delivering are a bit of a barrier”
• “there was a lot of frustration – ‘We’re getting these presentations about nothing’ It wasn’t nothing in reality, but in comparison they wanted to know what’s going on with Changing Times, what’s going on with Primary Care, what our jobs can look like next year. They were more interested in those types of questions and to get people to come out to the presentations is difficult”

**Personal benefits.** The Communication Champions indicated a number of personal benefits that they accrued as a result of their participation in this program:

• “continue for myself to learn and to continue to feel more comfortable speaking in large groups and to also learn facilitation skills”
• “the opportunities are there for me to learn”
• “been parts that have helped me to bring things that are happening a little bit better together in my head and that has been a benefit to work”
• “I think doing these things always builds my personal skills in communicating, in organizing and planning events. It always improves and becomes more efficient when you do it”
• “there a lot of personal benefits: being more comfortable getting up and talking about things I didn’t really know much about. You know, just increase in my own skill in delivering presentations”

This is congruent with the results from organizational supports, where it was indicated that there was a sufficient level of organizational support for orientation and learning.
Priority of work. The other theme that emerged once again in this section was the insufficient time and priority for the work of the Communication Champions:

- “At the same time, recognizing that there are a lot of things going on at work and there are lots of different types of messaging, and even within Public Health, lots of different working groups promoting Public Health work. So I do think that there are some who think it’s hard for the staff to feel connected with the Communication Champion stuff as it’s just another thing to have to find time to do”

- “for myself a barrier is one of finding the time. Even with the support of management thought structure to do the work, it’s carving out the time between multiple agendas – my own, the recipients’ – be able to get that information to them. That’s really probably the primary barrier I see for me, the most significant one”

- “the barriers would be, maybe, time – a little bit more time – or more people being able to come to the calls to increase the richness of the debriefing forums and getting ready to do the next ones”

- “my satisfaction is really good for doing it could probably be improved just by having a bit more time or giving more time without taking away from other roles”

- “I don’t know if it’s a workload thing and people are so busy it’s a low priority. I think also the audience is still a little confused; they always associate Communication Champions with Changing Times”

- “[the] meetings, they were not that long either, just my workload is too crazy and it was low on the priority list”

There is not enough information to indicate that the Communication Champions are sufficiently satisfied with their role and therefore are more engaged as a result.
5.0 Discussion

5.1 Organizational Communication

Nordin, Halib, and Ghazali (2011) highlight the importance of a good match between organizational communication and organizational structure. Within the healthcare organization under discussion in this project, the structure is a traditional hierarchical, but the Communication Champion strategy was lateral (peer-to-peer). This discrepancy might explain some of the role confusion seen in organizational supports amongst the Communication Champions: the strategy, although formal, does not use hierarchical lines of communication. On the other hand, the alignment in formality between the Communication Champion strategy and the traditional organizational communication structure is expected to have a positive effect on departmental communication, as shown by Nordin, Halib, and Ghazali (2011) however, the present study did not evaluate this factor. A future area of evaluation would include a study on whether this communication strategy has had a positive impact on departmental communication; this could be done using the framework proposed by Greenbaum (1974), which assesses the alignment between organizational policy and the communication strategies used.

The Communication Champion strategy uses frontline staff to relay information in a formal fashion; the selected employees must cultivate trust in order to provide effective communication to their peers. As Droege, Anderson and Bowler (2003) indicate, the person who fills an existing communication gap requires trust from both management and information recipients in order to be successful. This may be an area of continued development for the Communication Champions. Although the present evaluation did not assess the level of trust the recipients and managers had in the Communication Champions themselves, there does seem to have been sufficient support on the side of the Communication Champion from both peers and
management, which indicates a level of trust. The Communication Champion experience shows elements of mismatch between their lack of decision-making authority (inability to answer frontline staff questions) and their superficially authoritative role.

Litterst and Eyo (1982) indicated there was no link between formal communication channels and productivity, arguing instead that information dissemination and goal clarity are better measures of program effectiveness. In the case of the Communication Champions, role clarity and program intent were themes that came up more than once throughout the interview process, although there was insufficient consistency in the results to make an assessment. Clarification of the intent of the strategy could increase overall effectiveness; the Communication Champion strategy should also explore how to leverage informal communication channels to disseminate information, in addition to the formal ones used.

Nahapiet and Ghoshal (1998) point out that simply having communication channels in place for the exchange of knowledge is not enough to ensure a competitive advantage; rather it is the configuration of those communication channels which is also important. The important components of their model comprise structural elements, including networks and the configuration of those networks, cognitive elements including shared experiences and shared use of language, and relational elements characterized by trust and organizational norms (Nahapiet & Ghoshal, 1998). In the instance of the Communication Champion strategy, the combination of the three Public Health operational areas has the potential to lead to the building of additional networks and the development of relationships between those in attendance at the communication sessions. This would be another reason to explore the use of informal communication channels for the Communication Champions. There is an opportunity to use the Communication Champion presentations and communication sessions to further develop the
social capital necessary for the creation of a competitive advantage, by encouraging the
development of additional networks. One element present in Nahapiet and Ghoshal’s (1998)
model that is missing from the Communication Champions program is the “motivation to
combine/exchange intellectual capital”. The interview data suggest that the Communication
Champions themselves felt a sense that the messages they were imparting were not meaningful
to their audience, this would account for the lack of motivation of staff to attend information
sessions and ultimately led to a decrease in the overall success of the Communication Champion
strategy. Also notable is the fact that the Communication Champion strategy relies on the
combination of three Public Health operational areas, each of which had its own localized set of
group norms and group identification. According to the model presented by Nahapiet and
Ghoshal (1998) group norms and the level of trust are elements under the relational dimension of
the social capital that is required to create a competitive advantage when using networks.

5.2 Organizational Change and Change Agents

internal or external to the agency, who promote [an] innovation and its diffusion”. There is
congruence between the role of a change agent and the Communication Champion role:
Communication Champions are individuals internal to the healthcare organization who promote
new Public Health initiatives. Although no organizational structure changes occurred within the
healthcare organization during the course of the present evaluation, change was an anticipated
outcome of the strategy. There is also congruence between the intended role of the
Communication Champions and the use of change agents as neutral arbitrators to diffuse
information. In terms of organizational support for the program, the Communication Champions
felt that there was sufficient supervisory/management support; this coincides with Lerch et al.'s (2009) caveat that leaders must reinforce the work of change agents.

There is room for improvement in the Communication Champion strategy to ensure that it promotes two-way communication among staff and management, and that the strategy avoids top down decision making. Decker (2001) illustrated that top down decision making can negatively affect productivity. The messaging that the Communication Champion is disseminating must be relevant to the recipient and use plain language to avoid management jargon. Since the Communication Champion is not necessarily the supervisor or manager of the staff they are conversing with, this allows a peer to peer interaction. Additionally, alignment between messaging from managers and supervisors and messaging from the Communication Champions is essential to enhancing and supporting the strategy.

Strengthening the Communication Champion network would assist in the diffusion of information. One way to achieve this would be to increase the number of Communication Champions. This would allow for a more complex network of communication channels and strengthen the overall access to the Communication Champion by frontline staff, and strengthen the reach of the Communication Champion. This type of strategy has been used previously in healthcare organizations, where there is often a large network of change agents promoting organizational goals (Buchanan, Addicott, Fitzgerald, Ferlie, & Baeza, 2007). Increasing the number of Communication Champions may also address the concern some interviewees had shared where they indicated there was not sufficient time to feel satisfied in their role. The increase in the number of Communication Champions would effectively decrease the overall amount of work.
5.3 Organizational Leadership and Communication

The Communication Champion strategy does encourage a more conversational communication style among all staff, in as much as it is the Communication Champions’ role to disseminate the topic area’s key points; it is also their role to engage staff in discussion about the identified topic. There is a movement in organizations towards a more conversational style of leadership (Groysberg & Slind, 2012). However, it is unclear if the Communication Champions are viewed as leaders by the frontline staff. Regardless of the level the Communication Champion is at in the hierarchy of the organization structure a conversational communication style would be appropriate for this strategy.

Two-way communication is facilitated by efforts to make leaders accessible and approachable (Adelman, 2012). This is especially important in a healthcare environment, as a lack of upward feedback can negatively affect client care (Adelman, 2012). An anticipated outcome of the Communication Champion program was to promote two-way communication; one of the skills required for each Communication Champion was the ability to “self-manage two-way accountability to Public Health teams” (Appendix 2: Communication Champion Expression of Interest). However, without the Communication Champion role being perceived as a leadership role, this may not be a realized outcome. More than one Communication Champion indicated frustration with not being able to answer the frontline staff’s questions or have a mechanism to promote that feedback about questions to senior management. This is an important area of further exploration, as there is considerable incongruence between current literature and the use of frontline staff to develop two-way communication.

In order to align with the organization, Public Health needs to link the values and information being presented back to the organizations goals (Hoffman, Bynum, Piccolo, & Sutton, 2011).
The data provided in Appendix 1: Public Health Communication Champion Overview indicates that the Communication Champions were intended to help strengthen connections between the strategic direction of the organization and the work of Public Health, but this capability was not evaluated in the present study. Adler et al. (2011) found that a sense of shared purpose promotes organizational collaboration. This finding again highlights the importance of organizational and leadership goal alignment, and clarity of messaging amongst the members of the organization to the success of the Communication Champions program.

In addition to alignment with the organizational goals, the Communication Champions indicated there was not an effective two-way communication pathway and the frontline staff attending the communication forums where not receiving the information they hoped “one current barrier would also be direct application to the job” and “communicate messages that are going to be meaningful to the staff; it [would] be better to make it less formal so that we can be engaged”. The Communication Champion strategy will need to have a way for frontline staff to provide input on the communication topics. Gomez and Ballard (2013) found that providing the right information to the right people was also essential to a long-term communication strategy; the comments from the Communication Champions’ about their experience with attendees to their forums indicate the frontline staff are not receiving the ‘right’ information. Frontline staff could be asked for their input to the communication topics or what is of local interest by the Communication Champions and they could set up more tailored communication forums. The Communication Champions could also feed the information on communication topics back to their senior manager lead to come up with topics that are relevant to all regions. These suggestions would also require having the local management involved to ensure continuity of the messages throughout the department.
5.4 Organizational Support

The interview respondents indicated there were sufficient levels of organizational support in the areas of leadership support for the program, materialistic support, and learning/orientation support. A positive outcome of sufficient organizational support is employee engagement (Biswas & Bhatnagar, 2013); this will be further examined when the overall satisfaction of the Communication Champions with their role is discussed in a later section.

Having sufficient leadership support for the program is congruent with the leadership role as defined in Appendix 1: Public Health Communication Champion Overview. This role description indicates that the “lead” for the Communication Champions, a senior-level manager, is responsible for providing information for dissemination to the Communication Champion, chairing the Communication Champion meetings, communicating with the other Public Health managers and supervisors, and provide ongoing orientation support. Much of the support the Communication Champions receive is from this lead role. However, the Communication Champions identified not only the senior leadership level support, but also support from their own managers and from other managers and supervisors, as being sufficient.

Lerch et al. (2009) found that, in addition to simply providing sufficient leadership, leaders must work together to reinforce the importance of a change. To this end, all managers and supervisors in the three Public Health departments need to be engaged in the process so they not only support the Communication Champions, but also reinforce the messages relayed by the Communication Champions in their daily communications with staff. If messages are not aligned or there is not equal commitment from all managers, insufficient leadership support may become a problem in the future; it is important that the good work in this area continue.
Sufficient materialistic supports for the Communication Champions were provided; in other words, the necessary tools were made available for the Communication Champions to effectively perform in their role. One area not addressed in this evaluation was the level of comfort the Communication Champions felt with using the various technologies and tools available to them; this could be an area for future evaluation.

There was sufficient organizational support in place for the initial orientation of the Communication Champions and their continued learning during the program, although some respondents' comments indicated confusion about the orientation process and supports in place. In Appendix 1: Public Health Communication Champion Overview, details are provided that illustrate what the orientation support looks like. Ongoing orientation in the future will be done by the senior lead and include seven hours of paid work time (for a new Communication Champion) to review program documentation, potential mentoring by a current Communication Champion, and conference calls with the Communication Champion Lead. In addition to having this support in place, supporting the acquisition of new skills by the Communication Champions could lead to increased job satisfaction; Decker (2001) found that job satisfaction is frequently improved when employees are permitted to learn new skills and contribute in new ways during a change.

Additional supports identified by the Communication Champions were peer support, time, and role clarity. The Communication Champions indicated there was sufficient peer support available to them, not only within their group, but also with other coworkers. Although peer support is not necessary for team success, it seems in this case it plays an important role for this group.
There was no consensus among the Communication Champions about whether the time allocation was sufficient or not. The mixed results indicate a divide, and suggest that there was support from supervisors, but that the Communication Champions had difficulty making time for the work associated with the role. The anticipated time commitment was not heavy—in Appendix 1: Public Health Communication Champion Overview, it is indicated that the Communication Champions were expected to attend a 1.5-hour teleconference and facilitate communication forums every second month, for a total time of approximately two hours a month. The mixed results around the time allocation suggest that although the Communication Champions feel supported by their managers, they may need to revisit how they make time for this role. Even though both the Communication Champions and the lead were flexible about the time, it was still a barrier; as one interview respondent noted, this is “no fault of the organization, rather priority list with all the other things that are going on”.

Role clarity was identified by the Communication Champions by five of the respondents as an organizational support; there were mixed results on this topic, with the result that it is unclear whether there was sufficient role clarity for the Communication Champion position. Role clarity is integral to team dynamics and will be discussed further in the next section.

5.5 Team Dynamics

Team dynamics influence whether a project or program will be successful. The interview results did not provide enough information to support the claim that there are mature well-developed team dynamics in place within the Communication Champion team. Within the context of team dynamics, it was also clear that role clarity for the Communication Champions was insufficient. Role clarity is important not only for the Communication Champions themselves, but also for their audience. The lack of clarity indicates the need to more clearly define the role and scope of
the Communication Champions and communicate this information widely throughout Public Health. Role clarity is one of the points that Brenegan (2003) attributes to team success. The role description for the Communication Champion is laid out in the expression of interest; although initial timing of the development of the Communication Champions seems to have led to the confusion with another Public Health initiative, Changing Times.

There was not sufficient information to determine the level of trust or the cohesiveness of the Communication Champion team, although one respondent indicated a lack of team cohesiveness. However, the pathways and means of communication within the Communication Champion team were clearly established. Nevertheless, overall, there is insufficient information to support the conclusion that there are mature team dynamics in place. To develop a better-formed sense of team, the Public Health management should consider creating and scheduling team-building sessions where the Communication Champions are given an opportunity to develop team goals and discover their individual role(s) on the team.

5.6 Geographical Barriers

An organization that spans 900 kilometres will always have to deal with geographic barriers to communication. This evaluation looked at the challenges in overcoming such barriers to create clear and timely communication structures. The Communication Champion strategy relies on timely communication between the Communication Champions and their peers; this is one of the key points outlined in Appendix 2: Communication Champion Expression of Interest.

The Communication Champion team is something of a hybrid between a virtual and a face-to-face team. Although each Communication Champion has an expected time commitment as a member of the team, the virtual aspect of the team allows individual flexibility and permits
members to fulfill their time commitment to this volunteer position when and where they are able. The geographic barrier has not been completely overcome using the Communication Champion strategy; there are communication frameworks in place to support the strategy, but challenges in developing trust and ensuring the timeliness of the messaging still remain. Having a framework for communication is a key component in successfully overcoming a geographic barrier (Chihay & Kleiner, 2013). As the Communication Champions’ experience in interacting with their audience indicates, a clear sense of the meaningfulness of the message still seems to be lacking.

Part of the intent of the Communication Champion program was to develop a pathway for information flow for all of Public Health. It is unknown if a promotion of employee voice and development of a culture of continuous improvement is possible when the information flow is not initiated by senior leadership.

5.7 Employee Engagement

The development of communication pathways between the Communication Champions and management might be an unintended outcome of this communication strategy. One Communication Champion indicated the value of additional opportunities for vertical communication: “I think some other benefits are I feel very comfortable talking to management about some of the stuff that’s going on now” and “[management are] very willing to answer any questions I have where some people might feel that management are on a different level and intimidating”. This development of vertical communication pathways was not part of the evaluation or part of the Communication Champion strategy, but results indicate that a larger network of Communication Champions could be used effectively to promote employee voice to management. Installing a Communication Champion in each office location (approximately 30),
or two in the larger centers that cover more than one location (where currently there may be one covering more than one area), could help facilitate the development of this communication pathway. This aligns with the program’s stated goal of promoting vertical communication pathways with management and is congruent with facilitating mental and physical proximity amongst workers and management (Groysberg & Slind, 2012). Additionally, since employee satisfaction is positively related to level of trust (Abugre, 2011), it seems reasonable to expect an increase in overall departmental satisfaction to accompany increased vertical communication pathways. Expanding the Communication Champion team in this way would also allow additional peer relationships to develop, increasing employee engagement and job satisfaction.

Sufficient peer relationships were identified by six out of seven of the respondents; this is a valuable outcome of the Communication Champion strategy. Although in theory the formal communication pathway may provide opportunities for all staff to develop additional peer relationships, it remains to be seen whether in practice this benefit extends to all frontline staff or remains solely within the Communication Champion team. The creation of these peer relationships is a direct benefit of the Communication Champion strategy, since it provides crossover between all three departments and promotes the work of Public Health. It is here that the strategy is most clearly doing what it was intended to do, in removing interdepartmental boundaries and promoting collaboration among the three areas.

One expected outcome of the Communication Champion program was the beginning steps to integration of the three areas of Public Health; the act of implementing an additional communication pathway is not enough to ensure a successful communication strategy (Bisel, 2010). The strategy requires organizational supports, congruency with organizational communications, and leadership support to name a few that have been previously evaluated in
this project. As seen in the results section on organizational supports, sufficient supports were provided by the organization to the Communication Champions. Biswas and Bhatnagar (2013), indicate that a positive outcome of sufficient organizational support (in more general terms, not specifically to the communication strategy) is employee engagement. Biswas and Bhatnagar (2013) also find a positive correlation between employee engagement and an employee’s organizational commitment. Job satisfaction and therefore employee engagement, is found where sufficient peer relationships, supervision/feedback from supervisors, recognition, and sufficient communication are present. There was not enough data to support the conclusion that the Communication Champions are satisfied with their role, although in the specific domains of organizational learning and peer relationships the strategy appears to be successful. It is suggested that the Public Health management look further into means of providing recognition to the Communication Champions, both formally and informally. From the perspective of the Communication Champions themselves, the value of the Communication Champion strategy was found in the networking and relationship opportunities they received. This observation supports Johnson, Donohue, Atkin and Johnson’s (1994) finding that informal communication opportunities are highly regarded by employees.

Linking messaging that occurs with the organization to organizational goals is important for developing a competitive advantage (Tucker, Meyer, & Westerman, 1996). As one Communication Champion articulated, “one current barrier would also be direct application to the job. So, we learn things all the time and we need direct links to, ‘How can I use this to better my performance?’” This quote and others like it collected during the interviews indicate a need to connect the needs of the individual recipient to departmental communication and organizational message, to make communications more meaningful for the audience.
The Communication Champions interviewed indicated that the meaningfulness of the new communication pathway was not well articulated to the frontline staff. This type of failure in communication can create confusion around roles and responsibilities. Clarity around roles and responsibilities will not only create a more cohesive team, but may also improve employee engagement, according to Vaijayanthi et al. (2011) who found that feedback and orientation were two factors that increased employee engagement.

It is clear that, before the Communication Champion program can be considered a successful communication strategy, changes are needed. If the priority of the work cannot be made apparent to the Communication Champions, management, or the frontline staff, perhaps it is best to discontinue the strategy. There is not presently sufficient information to support the conclusion that the Communication Champions are sufficiently satisfied with their role and therefore have improved employee engagement as a result.

6.0 Conclusion

This evaluation has identified a number of areas of improvement and some recommendations, based on an in-depth interview evaluation and literature review, to increase the effectiveness of the Communication Champion strategy. The foremost recommendation is to increase the number of Communication Champions. Doing so will strengthen the communication network and demonstrate departmental commitment to this program. Increasing the number of Communication Champions aligns with the findings of Groysber and Slind (2012) that organizations are moving toward a less formal approach to communications, for which mental and physical proximity is the key. The role of the Communication Champions must be clarified and disassociated with Changing Times (another Public Health initiative), as there seems to be
confusion and frustration among both the Communication Champions and the frontline staff. Improving role clarity is an important step in increasing job satisfaction and, ultimately, employee engagement for the Communication Champions.

In addition, it is important that the goals of the organization align with the information disseminated to staff by the Communication Champions. The formal communication pathway introduced through the Communication Champion strategy needs to integrate aspects of organizational communication, networking, and team building. There is some congruency between the Communication Champion strategy and current literature on organizational communication in terms of the use of networks to communicate throughout the department. Future evaluative work should examine the possibility of having the Communication Champion role be filled by a supervisor/manager so there is congruency between the organizational hierarchical structure and the Communication Champion’s formal communication role. Although there is sufficient managerial support, the culture of the department has not changed from a traditional hierarchical one, and it is not clear that the present structure can sufficiently support key communications from someone other than the direct manager.

The Communication Champion program had sufficient organizational supports in place; the results of the present evaluation indicated sufficient leadership support, sufficient materialistic support and sufficient learning and orientation support. Peer support, time, and role clarity are areas that require additional investment of Public Health resources. Time constraints were identified as a major barrier by the Communication Champions and came up more than once during the evaluation. Time allocation for this program should be reassessed in order to ensure that both managers and the Communication Champions are clear on their roles and the requirements of those roles, and can support the time commitment in place. It is also important to
ensure congruency between communications delivered by the Communication Champions and
the messaging from management; further richness will be gained by also aligning that messaging
with the organizational goals.

Overall, the Communication Champion strategy’s strength currently lies in promoting peer
relationships, providing additional learning opportunities to the Communication Champions, and
providing appropriate organizational supports.
Bibliography


Appendix 1: Public Health Communication Champion Overview

Public Health Communication Champion (CChamp) Overview & Orientation Resource

Last Updated January 10, 2013

BACKGROUND

The need to advance internal/departmental communication in new and innovative ways was identified in the summer and fall, 2011. Anecdotal evidence and data collected from leader-managers was utilized in this identification process. Contributing factors to communication challenges include the vast amount of change and ways of communicating in the 21st century, competing priorities, figuring out how to advance a population health approach, to name a few. This prompted a brief literature review on communication in times of change and the role of change agent.

Subsequently, the role of Communication Champs (CChamps) was born. This role was conceptualized to foster the two-way flow of information unilaterally within the Public Health department and be fulfilled by staff members closer to frontline service delivery. The role was introduced through an expression of interest process in February, 2012 whereby CChamps self-identified themselves, and support was garnered from their managers.

The following overview is meant to serve as a guiding framework to bring further definition and parameters to the role, and to support the CChamps in realizing and communicating this to their co-workers and the managers they work with.

WHAT IS COMMUNICATION CHAMPIONSHIP?

- Involves frontline employees as communicators
- Enables information flow in a new and non-traditional way
- Spreads and promotes the uptake of new knowledge, tools and processes that may appear high level or foreign to local teams
- Requires openness to, and adoption of, new ideas and changes
- Fostering connectivity to strategic direction of the organization and public health leaders
- Working with a variety of internal leaders, experts and knowledge holders, acting as knowledge brokers
CCHAMP SKILLSET

- Ability to quickly understand information and convey it to other people.
- Comfortable presenting to a group and facilitating discussion
- Clear understanding of change management process
- Ability to foster effective working relationships
- Ability to self manage two way accountability i.e. to PH leadership and local teams
- Positive attitude towards change
- Strong two way communication skills
- Ability to work within the scope of a defined role with limited oversight

ROLE DESCRIPTIONS (Senior Leadership and CChamps)

Role of Senior Leadership

- Develop PowerPoint and information sheets for update with Communication Champions
- Share PowerPoint and info sheets with managers prior to CChamp update meeting
- Present information at CChamp update meeting, responding to questions and ensure CChamps are clear on information being shared
- Complete an orientation and provide ongoing support

Role of the CChamps

- Attend update related meetings or presentations organized for CChamp orientation purposes, asking questions and providing feedback to ensure they are able to take the information back to their office/community.
- Work with local managers to set up meetings with staff from their office/community to share information they heard at the update.
- Review information provided at update in preparation for meeting with staff from their office/community.
- Engage in informal conversations with staff around updates, ensuring that any questions outside of the uptake material are referred back to their manager.
- Summarize discussion, questions, concerns etc. shared to keep leaders informed.

EXPECTED COMMITMENT OF CCHAMPS
CChamps are expected to attend a 1-1.5 hour teleconference monthly. They are also expected to organize and facilitate local communication forums every other month by coordinating a meeting time with local managers. After this meeting a summary of learnings/feedback will be prepared by CChamps and shared with the CChamp lead/leader. The time anticipated for this forum and feedback activity is 2 hours per month.

DEVELOPMENTAL SUPPORT FOR CCHAMPS

The first group of CChamps had a 2 day in-person workshop in October, 2012. This workshop is undergoing evaluation for future workshop/planning purposes. New CChamps coming on after December 31, 2012, will be provided with seven hours of orientation during regular work hours. This will include reading materials, conference calls or meetings with the CChamp lead or co-leads, and potentially connecting with CChamps in their HSDA.

CCHAMP ESTABLISHMENT AND COMMUNICATION PLANS INTO 2013

- First videoconference (formation) meetings May-September, 2012
- First face-to-face time and developmental workshop in October, 2012
• Further refinement of role and communication tools and documents to help public health understand role November-December, 2012
• First communication “blitz” (meetings, electronic information and exchanges) in January-February, 2013. Topic: CChamp Role
• Second communication blitz. Topic: Position Papers – purpose, status, proposed use in March-April, 2013

CCHAMP TAG-LINE & LOGO

A tag-line or phrase and logo signifying the purpose of the CChamps was identified through a three-step process. First, the CChamps were provided some preliminary tagline and logo ideas of which they added to or built upon. Next they voted on their tagline preferences with the CChamp’s overall top three preferences being brought forward to the public health operations council (PHOC). PHOC (senior/excluded leaders in public health) members voted on their top (and only) tag-line preference. Subsequently, the CChamp tag-line is as follows:

CChamps: Communicating for the Future

Frequently Asked Questions

• **Who is the CChamp in my office?**
  [Link to CChamps by Location]
• **What do CChamps do?**
  CChamps introduce new information to public health staff in their local area or region.
  This includes new developments, resources, knowledge and initiatives underway within the department. CChamps offer opportunity for staff across various disciplines and service areas within public health to learn together about such topics at the ground level, and to hear the same information that is being shared in other communities or areas in an informal manner. Complementary information mediums will be utilized in addition to CChamp forums (e.g. via email, on the CChamp public health clinical resource site). However face-to-face communication is a focal point.

• **What is the relationship between my CChamp and my manager?**
  It is acknowledged that the CChamp and manager relationship is an important one which will evolve and build over time. CChamps will be communicating and working with managers at the local level in order to successfully organize and
how CChamp forums. CChamps will be engaging in informal conversations with staff but will ensure that questions outside of the content area they are speaking to are referred back to the respective manager. Managers will be informed of the CChamp forum/meeting topics and information in advance (in tandem with the CChamps receiving new information). Managers will attend and participate in CChamp communication forums just like any other public health employee.

- **How do I know the information I receive will be current, relevant and accurate?**
  CChamps will receive a presentation on the topic at hand in advance of hosting a CChamp forum in your office. The information will be delivered to the CChamps by the individual that was involved in the new development or initiative, or involved in the development of a new resource for example. CChamps will be provided with standardized/common communication tools.

- **What are CChamps connection to changing times?**
  The idea of engaging frontline staff to host public health communication forums for staff was presented to senior leaders by Dr. Ronald Chapman prior to changing times planning being undertaken. The changing times teams furthered the concept with the phase II team developing and disseminating a CChamp expression of interest to all public health staff in February, 2012. The CChamp role is meant to be sustained whereas changing times will come to conclusion. Thus, the relationship between changing times and the CChamps is effectively no different than any other initiative or development underway in public health. CChamps will not be relaying information on organizational or structural change for example. This is the role of excluded management.

- **How will I receive information from the CChamp in my area?**
  CChamps will host communication forums or meetings at your worksite. If you do not have a CChamp situated in your office, a CChamp in your HSDA will host such meetings either by visiting your site or utilizing technology such as videoconference or Live meeting to connect with you. CChamps will also utilize other communication formats such as updates or newsletters disseminated electronically and housed on iportal in the public health clinical resource site: <<<insert link>>.

- **What if I am interested in becoming a CChamp?**
  If you are interested in becoming a CChamp or learning more about the role, please contact the senior manager supporting the CChamp team. Currently, Jacquie Hakes (jacquie.hakes@northernhealth.ca) and Val Waymark (val.waymark@northernhealth.ca) are co-leading the CChamps. Also, the CChamp role is a voluntary one. Thus, individuals could step down from the role or take up employment outside of public health. In this case, expression of
interest would be circulated to formally recruit a CChamp in your area. Please watch for these opportunities!

Link to CChamp Site
Appendix 2: Communication Champion Expression of Interest

OPPORTUNITY FOR
PUBLIC HEALTH STAFF

Communication Champion
Expression of Interest

We understand you are interested in becoming a Communication Champ (CChamp).

CChamps introduce new information to public health staff in their local area or region. This includes new developments, resources, knowledge and initiatives underway within the department. CChamps offer opportunity for staff across various disciplines and service areas within public health to learn together about such topics at the ground level, and to hear the same information that is being shared in other communities or areas in an informal manner. Complementary information mediums will be utilized in addition to CChamp forums (e.g. via email, on the CChamp public health clinical resource site). However, face-to-face communication is a focal point.

Who can apply to be a Champion?

✓ Any interested Regular full-time (1.0 FTE) Public Health employee**

What are we looking for in a Champion?

✓ The ability to quickly process and translate key information through effective communication skill and style
✓ Comfort and confidence in group presentation and facilitating discussion
✓ A general understanding of change process
✓ A positive attitude regarding the redesign of public health
✓ Interest in engaging with public health partners and fostering effective working relationships
✓ Ability to self-manage conflicting emotions and ideas
✓ Ability to self-manage two-way accountability to Public Health teams and regional public health leadership

What will a Champion be asked to do and what will the time commitment be?

✓ Communication Champions will share information and updates across set program clusters via structured meetings and informal conversations. In turn, they will provide feedback from the teams to the Communication Champion Lead and/or appropriate contacts.
✓ The anticipated time commitment is 3 hrs per month (time commitment may fluctuate during times of change)
✓ Orientation to the CChamp role will require 7-10 hours for orientation teleconference or Live meetings,
✓ Champions will continue to operate in their current roles (e.g. this is a role that will be embedded in one’s current position)

Please review the time commitment with your manager to ensure availability prior to applying.

Interested team members: please complete the attached Expression Of Interest and return to vai.waymark@northernhealth.ca and jacqui.halves@northernhealth.ca

**Full time (1.0FTE) is preferred but part-time (0.75FTE or greater) will be considered dependent on availability**
<table>
<thead>
<tr>
<th>Community Cluster applying for (see list)</th>
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<tr>
<td>Why are you interested in fulfilling the role of Communication Champion?</td>
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<tr>
<td>Please provide a brief overview of your experience, strengths and areas for growth as related to the Communication Champion role.</td>
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<td>As part of the expression of interest process, please consult with your supervisor and peers. Provide your manager’s name and the names of 2 co-workers we would be able to talk to in relation to your capacity to fulfill the role of Communication Champion.</td>
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Communication Champion Expression of Interest Checklist

☐ I am a full time (1.0 FTE) public staff member

☐ I am prepared to support public health individuals and teams within the assigned cluster

☐ I have consulted with my manager about this opportunity and have support to take on this role

☐ I understand the role of the Communication Champion

☐ I have completed the Communication Champion Expression of Interest form

Please submit your completed documents to: val.waymark@northernhealth.ca and jacquie.hakes@northernhealth.ca

Overview of CCChamp Coverage:

Northern Interior – 6 CCChamps
Quesnel (health unit/hospital) → 1 CC
Vanderhoof/Fraser Lake/Burns Lake/Fort St. James → 1 CC
McBride/Vailemount/Mackenzie/Native Friendship Centre/Needle Exchange → 1 CC
Northern Interior health Unit → 1 CC
SCAN/HSBC/UNHBC → 1 CC
Project Parent North/Centre for Health Living/FRC → 1 CC

Northeast – 2 CCChamps
Fort Nelson/Fort St. John → 1 CC
Dawson Creek/Tumbler Ridge/Chetwynd → 1 CC

Northwest – 4-5 CC
Masset/GCC → 1 CC
Prince Rupert (hospital and health unit) → 1 CC
Terrace/Klitmat → 1-2 CC
Hazelton/Houston/Smithers → 1 CC