# *Talent Development and Executive Compensation Committee*

**Committee Members**

Lisa Sutter – Chair
Eric G. Bing
Vincent Hall
Farida Minner, RN
Elizabeth Palacios, MD

Agenda for the ***Talent Development and Executive Compensation Committee*** meeting of the Dallas County Hospital District is scheduled for ***Friday, January 30, 2026, at 11 AM or directly following the Board Governance meeting***, at 5200 Harry Hines Blvd. (WISH Building), Dallas, TX 75235, Executive Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) A quorum will be physically present at the location of the meeting. Videoconferencing access is also possible via Webex. That application is available at https://www.webex.com/downloads.html.Also, teleconferencing access is possible by calling +1-408-418- 9388 or +1-469-210-7159. Both access forms require inputting (meeting number: 2309 222 7139, meeting password: 1234) to join the meeting. The ***Talent Development and Executive Compensation Committee*** reserves the right to exercise discretion and may convene in Executive Session as permitted by Texas Government Code §§551.071 (consultation with attorney), 551.072 (deliberations regarding real estate), 551.074 (personnel matters), 551.076 (deliberations regarding security devices or security audits), 551.078 and/or 551.0785 (deliberations by medical committee or by governmental body that administers a public insurance, health or retirement plan regarding individuals' medical or psychiatric records), 551.085 (deliberation by governing board of certain providers of health care services), 551.087 (deliberation regarding economic development negotiations), 551.088 (deliberation regarding test item); Texas Government Code §418.183 (deliberation of information under §§418.175 – 418.182 for purposes of disaster management or disaster planning); Texas Health & Safety Code §161.032 (medical committee or medical peer review committee records, information or reports; and/or medical committee or medical peer review committee proceedings under Tex. Health & Safety Code Chapter 161 and/or Tex. Occ. Code Chapters 151 and 160); and/or as otherwise authorized by law on any item listed below. The ***Talent Development and Executive Compensation Committee*** may consider any of the agenda items in open or executive session and may continue the meeting as necessary to accomplish the business at the time and place designated by the Chair to reconvene.

| | PAGE | TIME (min) | PRESENTER(S) |
|---|---|---|---|
| **I. Declare a Quorum Present/Callto Order/Mission Statement**<br>*Advance Wellness \| Relieve Suffering \| Develop and Educate*<br>**ICARE**<br>**I**ntegrity **C**ompassion and Collaboration **A**ccountability **R**espect **E**quity | | | Chair |
| **II. Public Comments Regarding Agenda Items**<br>*See public comment registration information and rules at https://www.parklandhospital.com/board-of-managers* | | | |
| **III. Reports Requiring Deliberation(s) or Approval(s)** | | | |
| A. Office of Talent Management ("OTM") Overview on Department Goals & Commitment | *4* | 5 minutes | Felicia Miller |
| B. Workday Go-Live Updates | *7* | 10 minutes | Delancey Johnson<br>Stacy Dorsey |
| C. Benefits Update | *11* | 10 minutes | Delancey Johnson |
| D. Executive Succession Planning 2026 Implementation Timeline, Guiding Principles, and Soliciting Input on Executive Profiles | *17* | 45 minutes | Stephanie Speights |

| | PAGE | TIME (min) | PRESENTER(S) |
|---|---|---|---|

**V. Possible Deliberation of Documents Submitted to Committee**

A. Metrics Review *42*

B. People Metrics (Detailed Pages) *44*

C. Communications Schedule of OTM Activity to Employees *56*

**V. Executive Session**

A. Discussion Regarding Executive Succession Plan
*Tex. Gov't Code §551.074*

**VI. Action Items**

A. The Board may take action on any above agenda item(s).

**VII. Closing Remarks** Chair

**VIII. Call to Adjourn** Chair

# Board TDEC Meeting

*January 30, 2026*

# Office of Talent Management (“OTM”) Overview on Department Goals & Commitment

**Felicia Miller, MBA, SPHR, SHRM-SCP, CHHR**
EVP& Chief Talent Officer

# Reminder: Our 2025 Goals (2026 in Progress)

## TRUST

- Maintain or improve Press Ganey's Patient Experience Survey overall system metric, Likelihood to Recommend (LTR) score
- Maintain or improve Press Ganey's One Survey item, "I am involved in decisions that affect my work"
- Maintain or improve Press Ganey's One Survey item, "There is a climate of trust within my work unit/this hospital/clinic"

## PEOPLE

- Achieve FY25 Overall Turnover Target (13.6%)
- Maintain or improve Press Ganey's One Survey Engagement Indicator (EI) score for Employee, Hospital and Clinic Provider groups
- Achieve FY25 milestones for Service Excellence model
- Achieve FY25 milestones for Development
- Achieve FY25 milestones for Dallas College Master Affiliation Agreement

## ACCESS

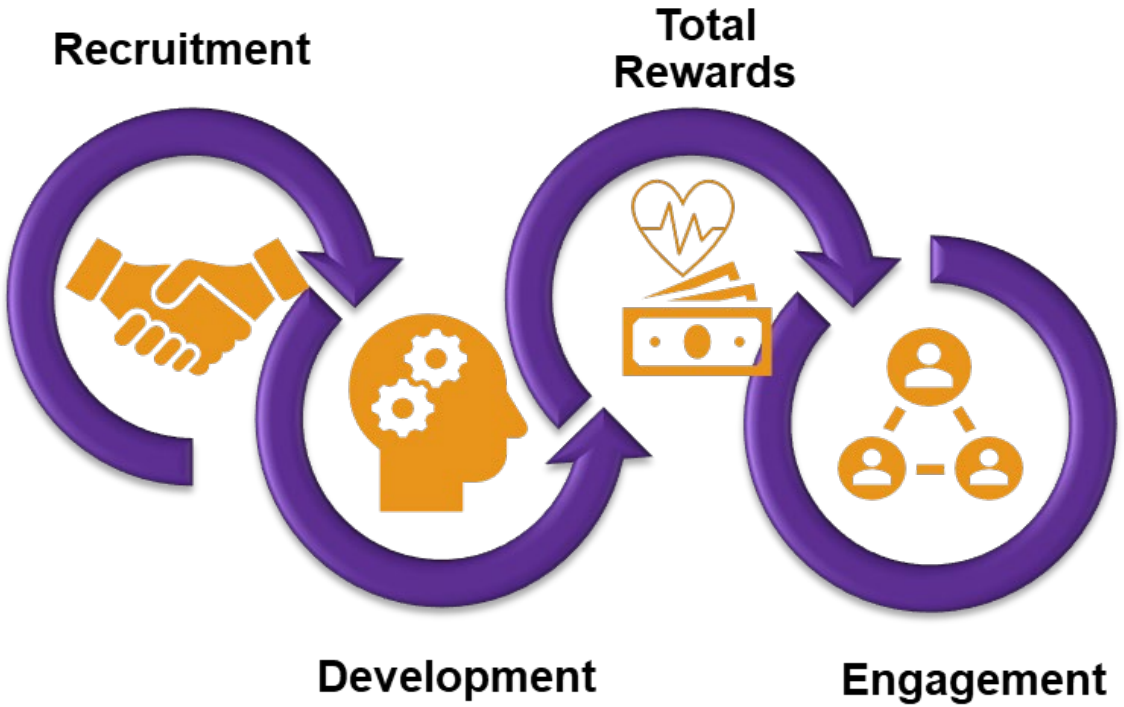
- Achieve FY25 milestones for Workday (Human Capital Management Project)

FY25 Cascaded Productivity Goal

Achieve less than 6.7 FTE per AOB

# Parkland's Commitment

To be the employer of choice for those with a calling to serve through a transformational experience.



# Workday Go-Live Updates

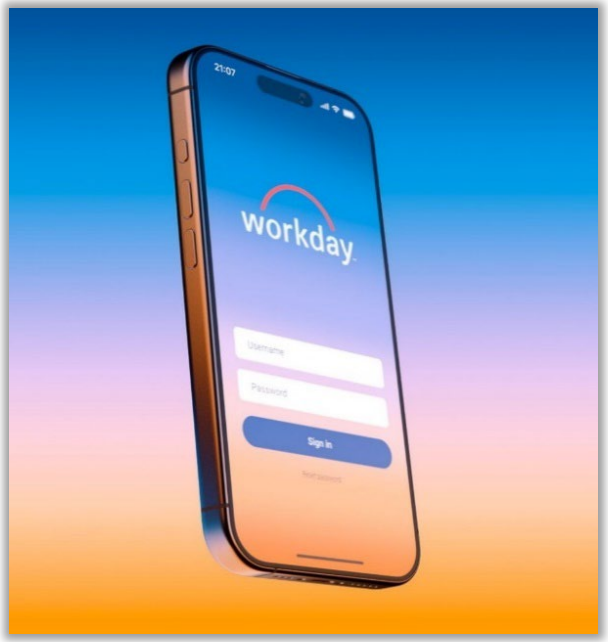
**Dr. DeLancey Johnson, DBA, SPHR, SHRM-SCP, sHRBP**
SVP and Associate Chief Talent Officer

**Stacy Dorsey, SHRM-SCP**
SVP & Chief Workforce Officer

# Key Milestones

As of Jan. 14:

- **12,446 employees have logged into Workday.**
- **3,697 employees have completed their "Welcome to Workday" training.**
- **1,127 Workday tickets have been submitted and 728 tickets have been closed.**




## Top Workday-Related Tickets Submitted Since Go-Live

- Direct Deposit/Payroll
- Mobile App
- Opting in and out of notifications
- System and Physical Access-Related Issues
- Manager Self-Service Activities

**Support:** We provide continued status updates and expected turnaround time to employees who have submitted a Workday-related ticket.

# Operational Plan: Next 90 Days

## Go-Live – Day 30: Stabilize

**Key Themes**

- Hypercare
- Payroll, Direct Deposit
- Integrations
- Frequent and transparent communications

**Expected Outcomes**

- System usable and trusted for HR/payroll
- Critical issues under control
- Project mode to ongoing operations.

## Days 31-60: Standardize

**Key Themes**

- Process tuning
- Integrations
- Security
- Undefined workflows
- Access control refinement

**Expected Outcomes**

- Reduced ticket volume
- Faster cycle times
- Clearer ownership

## Days 61-90: Optimize

**Key Themes**

- Operating Model
- Analytics
- Automation
- Roadmap
- Optimization-focused communication

**Expected Outcomes**

- Formal Support model
- Initial optimization
- Defined Roadmap

# Change Management & Communication Plan: Next 90 Days

## Go-Live – Day 30: Stabilize

- Support Through Dedicated Workday Command Center
- Real-time communication to employees impacted by transition
- Update resources based on employee feedback (FAQs, Job Aids, etc.).

## Days 31-60: Standardize

- Continue real-time impact communications (email, newsletter, intranet banner, WebEx Sessions, Town Halls).
- Highlight helpful resources and features in the Workday platform.
- Socialize roles and responsibilities of key processes to organization

## Days 61-90: Optimize

- 2026 Roadmap/Lookahead
- Review of bi-annual enhancements made to platform
- Continued comms support of tickets submitted and requests

# Benefits Update

**Dr. DeLancey Johnson, DBA, SPHR, SHRM-SCP, sHRBP**

SVP and Associate Chief Talent Officer

# Executive Summary

## Action plan to curb self-funded health plan spending.

Administrative – Dr. Johnson, Tawana & Charlotte

- Develop benefit programs and health plan designs that are financially sustainable and improve the health and wellbeing of members – Focus on industry standard and best-practices.
- Partner with Parkland finance to establish realistic budgets and monitor performance of actual expenses instead of accrual to budget.
- Expand data integration for improved insights and return-on-value assessment.
- Advance domestic steerage strategy through plan design changes and programs – Focus on impact of clinical outcomes, member experience, and cost.
- Ensure operational compliance and performance compared to industry benchmarks and best-practices.
- Partner with vendor solutions and consultants, as needed, to identify cost savings opportunities and/or clinical gaps in care.

Clinical – Dr. Johnson, Ryan & Dr. Shah

- Partnering with clinical leadership and internal subject matter experts.
  - ✓ Dr. Joe Chang
  - ✓ Dr. Brett Moran
  - ✓ Dr. Monal Shah
  - ✓ Dr. Greeshma Naini
  - ✓ Carrie Berge
  - ✓ Shannon Bradley
- Focus on preventative care and disease management program development.
- Expand access and navigation efforts to transition care to Parkland.
- Utilization management of high-cost claimants, site of care, and fraud-waste-abuse.
- Maximize 340b pricing advantage for high-cost medications.
- Establish improved controls on provider network and formulary.

# FY26 Action Plan Timeline

## Nov – Dec 2025

**Establish key performance indicators and prepare to monitor/report into new plan year.**

**Establish formal wellness committee to guide program development and benefit design.**

**Start weight management program at Employee Health Center.**

**Expand access to infusions and cancer care services at Parkland.**

## Jan – Apr 2026

Enhanced risk stratification and data insight to develop proactive case management programs for high-cost care.

Explore narrow network and alternative plan designs for plan year 2027.

Annual review and plan design strategy sessions with Cigna, MMA, and Parkland leadership.

## May – Jun 2026

Advance population health efforts, navigation and domestic steerage, and utilization management in partnership with clinical leadership taskforce.

Better understand Cigna case management efforts and improve programs.

Finalize new health plan design and program changes.

## Jul – Aug 2026

Expand weight management program at Employee Health Center.

Expand disease management programs and preventative care utilization.

Complete open enrollment and targeted communication efforts.

## Sep – Oct 2026

Implement new health and wellness education/engagement strategy to promote healthy behaviors and personal health accountability.

Continue expanding access to Parkland services and other targeted specialties.

## Nov – Dec 2026

Explore fraud, waste, and abuse programs and other vendor solutions.

Improve controls on formulary, generics, and rebates.

# FY26 Action Plan Deliverables

**SWHR Contract Negotiations**

- Started groundwork for Direct to Employer contract with SWHR.
- Agreement established between SWHR and Cigna resulting in a three-year contract renewal and no disruption to the Parkland Employee Health Plan.

**Wellness Committee**

- Voice of the customer initiative
- Member experience, education and awareness, and utilization strategies underway.

**Strategic Planning**

- Meeting bi-weekly with Employee Health Center leadership, benefits, and Dr. Shah to establish a multi-year strategic benefits roadmap.
- Presenting to Chiefs on Feb 3, 2026.

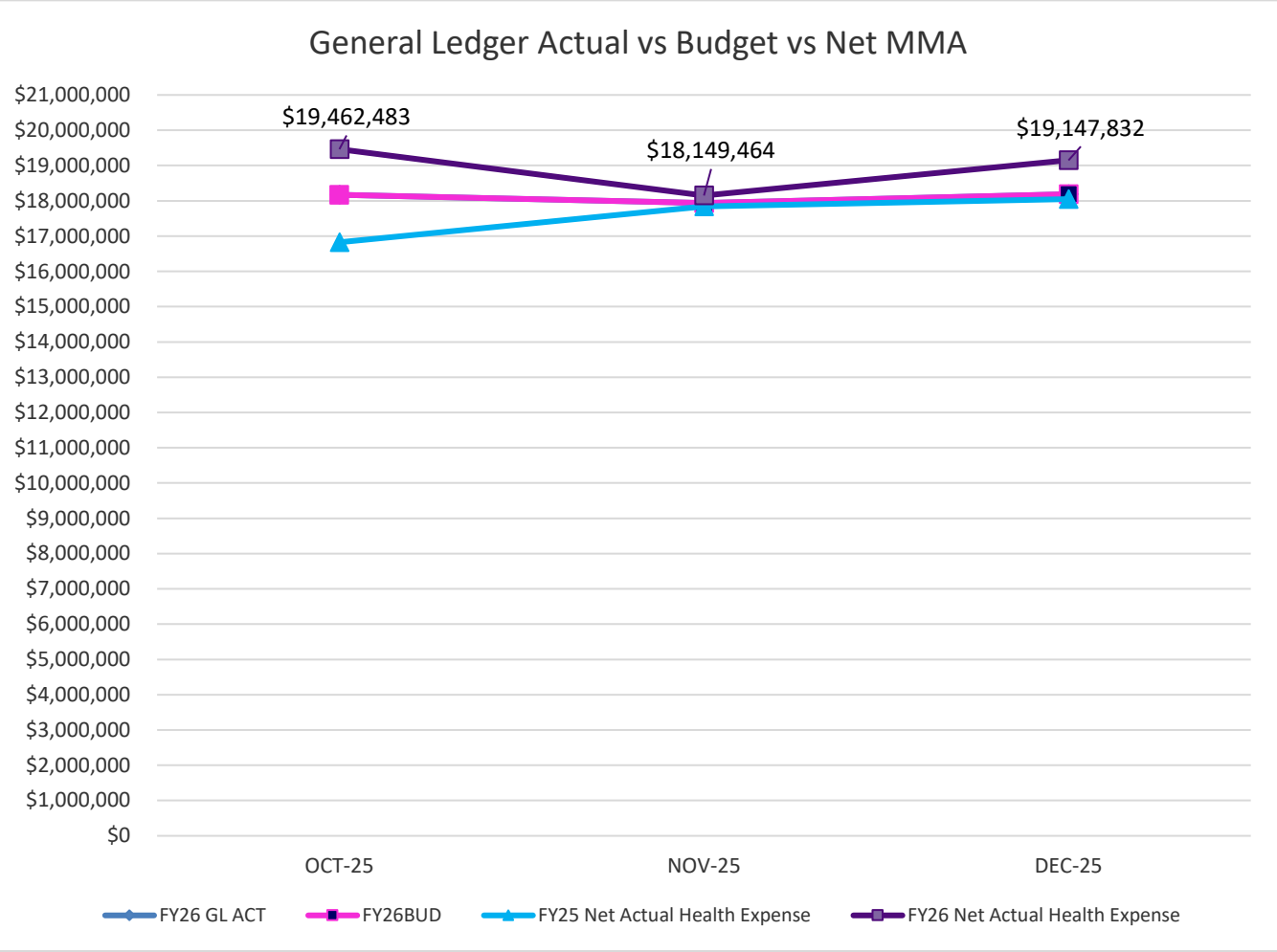
**KPI and Reporting**

- Established PMPM targets for FY26.
- Developing executive dashboard for additional KPI tracking – includes medical/Rx spend, steerage %, physicals, primary care utilization, preventative exams, ER utilization, high-cost claimants, outpatient services, dental care, and onsite wellness activity.

**Oral Wegovy (GLP-1) Medication**

- Oral Wegovy was approved and become available in January 2026.
- Cigna is formulary partners have confirmed that although oral Wegovy has hit the market, it has yet to be added to our drug pricing file and is expected within the next two weeks.

# FYTD Performance Trend



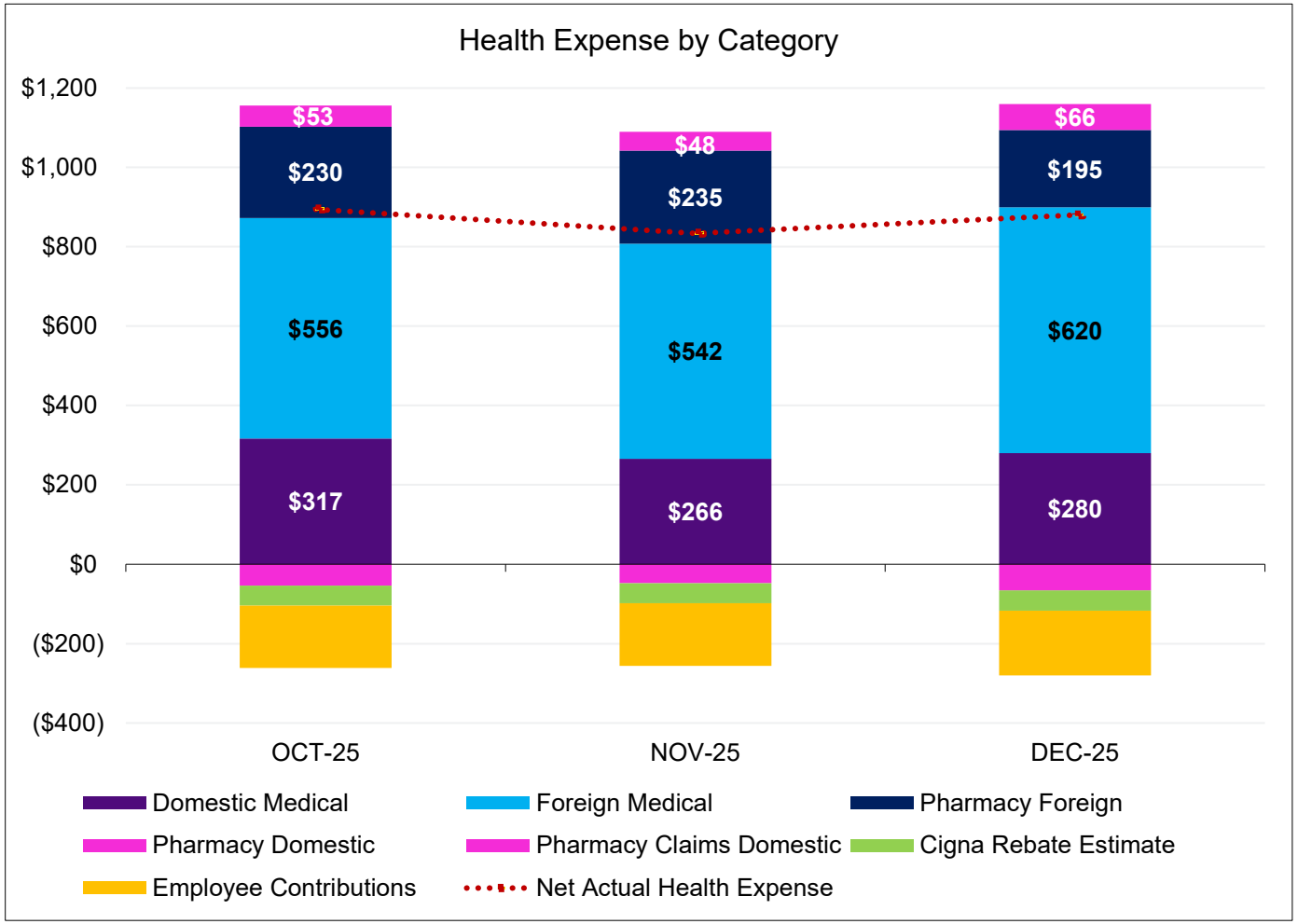

- Q1 GL = $54,292,587 (Accruing to budget)
- Q1 Actual Expense = $56,055,989
- Remaining FY26 liability balance = $26,032,551
- Q1 rebates favorably overperformed accrual by $703,789 (total = $4,003,789)
- Plan year 2025 performance guarantees = $100,000
- 2025 Plan size = 22,035 members (2024 = 21,450)
- Plan year 2025 high-cost claims over $500k = 37 (2024 = 15)

*Note: Financial reporting a month in arrears.*



PARKLAND EMPLOYEE
HEALTH & WELLNESS BENEFITS

# FYTD Performance Trend




- **Total PMPM**:
  - Avg. = $869
  - Avg. = $1,084 (Less premium and domestic pharmacy credit)
- **Medical PMPM**:
  - Avg. Domestic = $288
  - Avg. Foreign + Affiliate = $572

  (Affiliate = UTSW services at Parkland)
- **Pharmacy PMPM:**
  - Avg. Domestic = $56
  - Avg. Foreign = $220
- **FY 26 Targets:**
  - Total PMPM: $755 (FY25 baseline - $760)
  - Foreign + Affiliate Medical = $407 (FY25 - $517)
  - Foreign RX = $105 (FY25 - $200)

*Note: Financial reporting a month in arrears.*

# Executive Succession Planning 2026

**Stephanie Speights, PhD**
SVP, Talent Management Development & Chief Learning Officer

**Felicia Miller, MBA, SPHR, SHRM-SCP, CHHR**
EVP& Chief Talent Officer

# Strategic Alignment: What is Succession Planning?

## Formal Process vs. Leader Competency

### Succession Planning (Process) – "big S"

Succession planning is a strategic, structured, collaborative process that ensures organizational continuity by 1) identifying key roles, 2) assessing talent for internal candidacy, and 3) preparing internal candidates for key roles through development experiences and programs.

### Succession Planning (Leader Competency) – "little s"

Succession planning is a **skill and practice** demonstrated by leaders. Succession planning often includes the following continuous practices:

- Personalized development conversations and feedback
- Cross training to ensure reliable redundancy
- Continuous development for workers through challenging assignments and intentional reflection
- Frequent assessment of team talent against forecasted priorities and changes

## Why Succession Plan?

**Initiating a formal process *and* building leader competency** among the ranks guard against operational disruptions, loss of expertise, and maintains organizational stability during talent transitions. Instead, these efforts enable smooth transitions, reduce risks, nurture future leaders, and boost employee morale and retention.

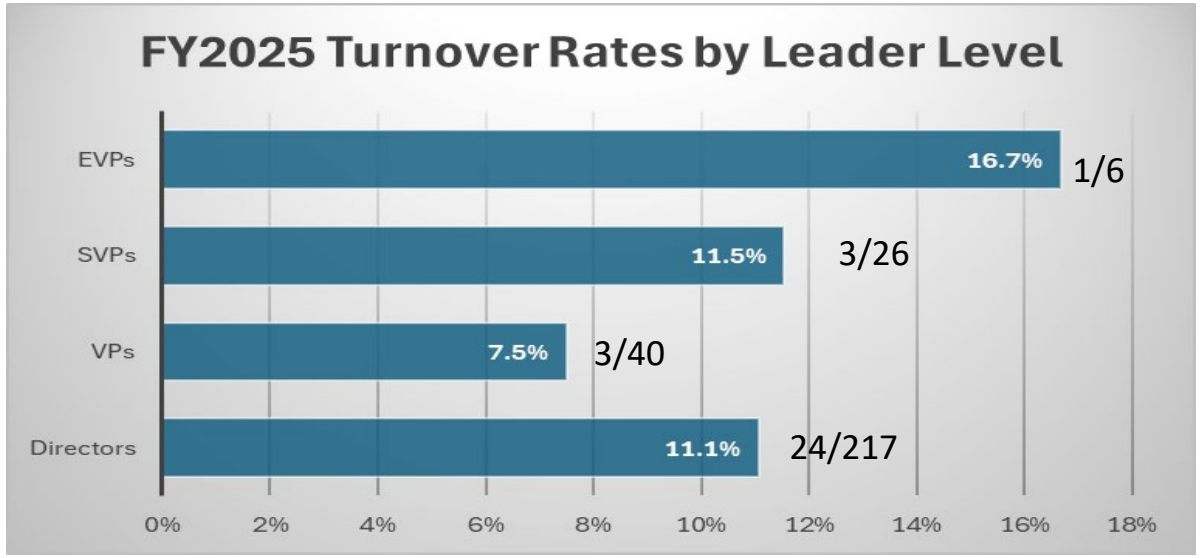
Jennifer Sokolowsky, Succession Planning: What It Is & Why It's Important, Chronus Blog, Aug 9, 2024
https://chronus.com/blog/why-succession-planning-important

# Strategic Alignment: Why focus *first* on Succession process?

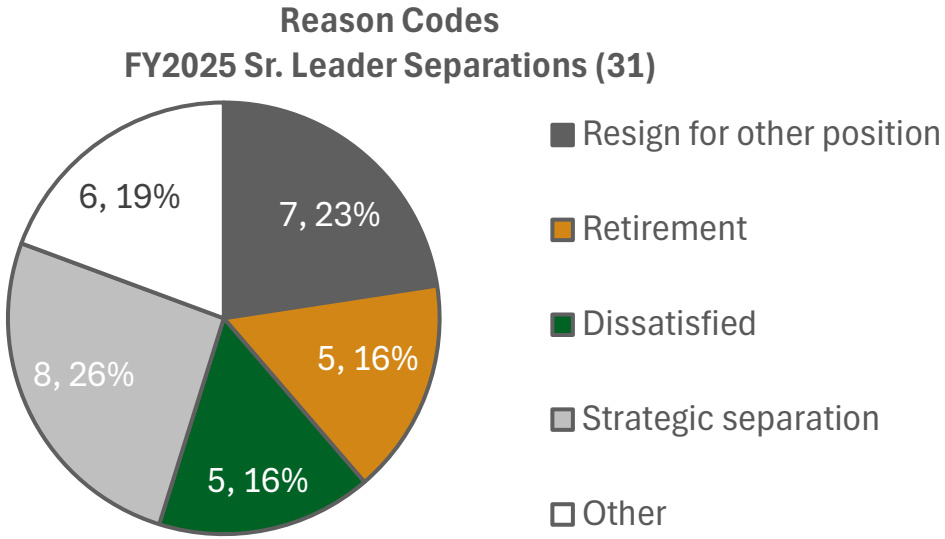
Parkland Health's *primary objective* with succession planning is to mitigate business risk and prepare for a change-ridden future, while also keeping our commitment to support meaningful development and internal career advancement. Additionally, Parkland's Board of Managers has prioritized succession planning at the Chiefs level for FY2026.

**Focused Turnover Data, Directors and Above**

- The FY2025 turnover data below includes directors and above ("senior leaders") since this audience represents both the target roles and the likely candidate pool for Chiefs positions.
- While the overall turnover rate (10.7%) for senior leaders is lower than the overall Parkland average (12.1%), it is higher than the benchmark for healthcare leader turnover (9.8%),* reinforcing the timeliness of this work.




**Parkland's FY2025 all leader turnover, which includes managers and supervisors, was 9.1%.*



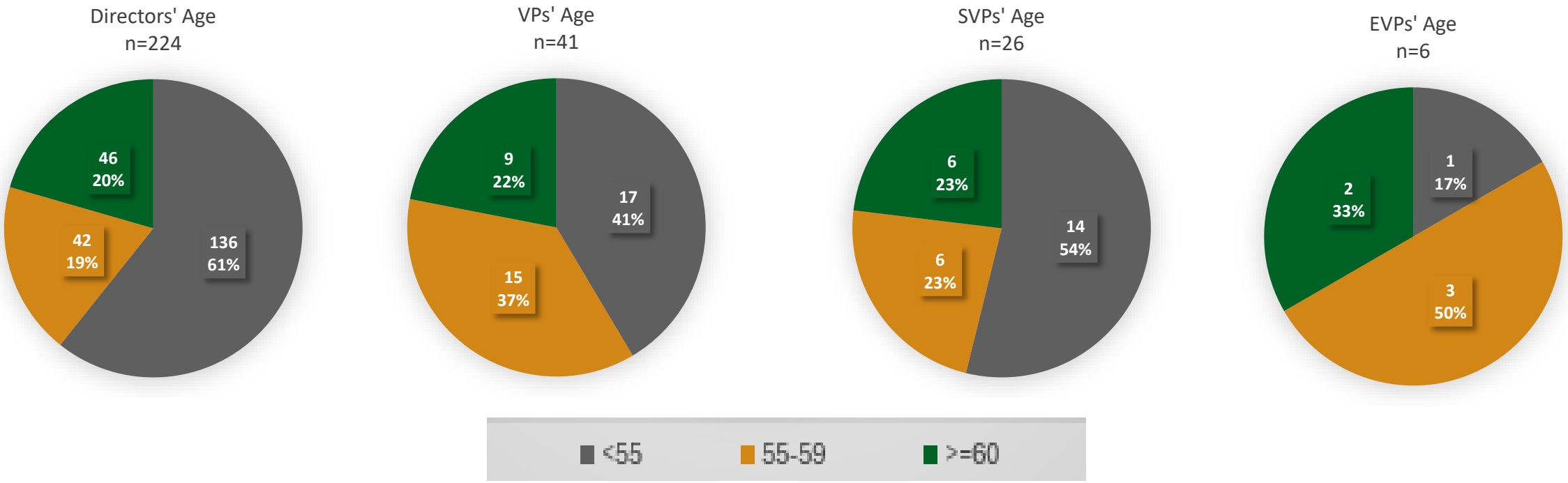

"Dissatisfied" combines responses noting dissatisfaction with work environment, opportunity for advancement, and coworkers.

# Strategic Alignment: Why Now?

Turnover data provides a backward perspective. To more effectively evaluate the urgency and vulnerability of leadership roles, we must also forecast using factors like age, retirement plan status, industry recruitment activity, and planned organizational changes.

## Retirement eligibility and “vested” status

- Approximately 21% of senior leaders are 60 years or older, making them eligible for full retirement within 5 years.
- Of these 64 senior leaders, 47 (73%) are fully vested in the Parkland retirement plan, with tenure greater than 5 years.
- *Data below was pulled December 9, 2025; headcount is 298 and includes President/CEO. Data excludes PCCI.*



# Guiding Principles for Succession Planning

**Strategic Focus**
Focus on the evolving demands of the position, not the scope or credentials of the incumbent.

**Balanced Calibration**
Evaluate potential and readiness with open-mindedness and pragmatism.

**Experiential Development**
Invest in and activate development strategies that build critical capabilities.

# Future of Healthcare and Public Health (Trends)

## What do we mean by a “change-ridden” future?

### Rapid innovations in technology

- Cyber threats, wearable devices, AI solutions for patient/customer interactions/diagnostic protocols.
- Investments in technology resources, virtual care solutions
- Solutions for equipping patients & employees to use virtual options
- Employees need continuous skill building as basic tasks are absorbed by AI
- Continuous change, requires agile leaders who embrace change and can quickly translate change into action

### Baby boomers- Aging patient and employee population

- Higher volumes of geriatric patients
- Sicker and financially strained; Unprepared for retirement
- Longer health intervention requirements, including drug management
- More employees are caregivers for aging parents
- Employees need longer employment while also facing personal health challenges

### Higher health care costs

- Employed patients paying higher %age of medical coverage/costs
- Demands for healthcare navigation support increase
- Competition for limited talent drives up costs

### Physician/clinician shortages

- Increased cost of university/medical education, with decrease in financial reward
- Burnout, job dissatisfaction associated with bureaucratic complexities of medicine
- Slowing birth rate in US, growing population in Texas
- Slowing immigration

### Hospitals suffer due to poor funding

- Struggling systems fold, get absorbed
- Gutted government reimbursement programs create complexity: (Two-tiered Medicare?)
- Commercial payors reduce reimbursements

See Appendix for sources

# Future Healthcare Executive Profile: General

| Critical Capabilities | Valuable Experiences |
|---|---|
| 1. Stays abreast of healthcare technology trends and risks.<br>2. Effectively negotiates beneficial partnerships and contracts.<br>3. Makes difficult decisions and takes calculated risks.<br>4. Through credibility and character, builds strong, trusting relationships.<br>5. Uses influencing skills to drive state and federal policy that impacts patients and employees.<br>6. Advocates for employee well-being, including wages and benefits, to differentiate Parkland in the market.<br>7. Listens empathetically and communicates with wisdom, accuracy, and compassion.<br>8. Is technologically savvy and curious; a capable user.<br>9. Introduces and implements strategies that boost productivity, reduce costs, and improves patient experience.<br>10. Ensures cost savings are passed along to the patient.<br>11. Models high-accountability leadership, creating a positive, desirable work environment.<br>12. Builds open, reciprocal relationships; solicits and applies input to improve work conditions; creates connectivity to mission, reduce bureaucracy.<br>13. Invests personal time and organizational resources into strategies that create a talent pipeline for the future.<br>14. Identifies and acts upon opportunities to improve services and /or attract and retain strong talent. | 1. Key stakeholder/ Operational owner of major technology implementation (RFP, Contracting, change management, implementation, evaluation)<br>2. Stood up a new service line, product, or facility, from business case to sustainability.<br>3. Lobbied, testified, or served as SME to state or federal committee; contributed to healthcare policy development.<br>4. Created and presented a business case resulting in a multi-million dollar change for an organization.<br>5. Acted as the primary face and voice for a significant culture change initiative, responsible for key messages and successful adoption.<br>6. Executed strategies that resulted in higher productivity, lower costs, or improved services.<br>7. Directed significant budget changes based upon strategic vision or external pressures.<br>8. Restructured a leadership team for better alignment or strategic growth/consolidation.<br>9. Initiated and sponsored a reduction in force, taking responsibility for staffing decisions.<br>10. Developed an external partnership and collaborated to address a shared problem.<br>11. Supported or actively sponsored a national job search (built profile, questionnaire, interview processes, etc.)<br>12. Presented at industry conferences using data, storytelling, insights that can benefit other organizations.<br>13. Took responsibility for a functional area with little-to-no background in that industry |
| **Differentiating Capabilities** | **Personal Styles, Behaviors and Network** |
| 1. Clinical license/ background<br>2. Deep analytics interpretation and storytelling skills<br>3. Excellent writing, dynamic presentation skills<br>4. Multi-lingual | 1. Accessible interpersonal communication style<br>2. Strong Dallas connection<br>3. Multicultural network of business and community stakeholders<br>4. Cultivated network of health system leaders, boards, clinicians |

# Succession Planning Process

## Assess Our Needs; Identify and Evaluate Candidates; Develop Successors

### *Profile the Roles*

1. Work with incumbents and stakeholders to profile current and future requirements for the role based on business strategy, including the top capabilities that will be most important in the selection decision.

### *Conduct a Talent Review*

2. Work with the executive leadership team to conduct a talent review of all potential succession candidates from across the organization to compare them against the role profiles.

### *Create Development Plans*

3. Work with the executive leadership team to create tailored experience-based development plans that close the highest priority capability gaps for each identified successor.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# FY2026 Succession Planning Scope

**Positions prioritized for Round One, 2026**

1. Chief Executive Officer (CEO)
2. Chief Operating Officer (COO)
3. Chief Financial Officer (CFO)
4. Chief Nursing Executive (CNO)
5. Chief Legal Officer (CLO)
6. Chief Talent Officer (CTO)

**Stretch Goal, 2026**

7. Chief Medical Officer (CMO)
8. Chief Health Officer (CHO)

**Deliverables for each position**

1. Role Success Profile
2. Emergency coverage plan for each position
3. Roster of internal succession ‘candidates’ in order of readiness
4. Development plan priorities/investments needed for each internal candidate

# FY2026 Succession Planning Timeline

## Nov - Dec 2025

During CEO performance calibration, introduce succession plan scope and schedule

**Build alignment on key components of the process**

## May - Jun 2026

Socialize succession opportunities with candidates

Create development plans, budget for investments, coordinate experiential learning, & determine job reassignments for FY27

## Sep - Oct 2026

Publish final version of plans

Identify positions for FY2027 succession planning

Prepare messaging for calibrations

## Jan – Apr 2026

Create Success Profiles for Group 1 positions

Prepare Workday platform and launch potential assessments

Initiate Succession Calibrations

Identify development investments

## Jul – Aug 2026

Review with chair, Present to TDEC in Aug for feedback

Apply feedback from TDEC

Establish cadence for review, process for updates

## Nov - Dec 2026

Introduce scope and schedule

Launch 9-box “talent review” for select audience

# Role Success Profile Template

**Role:** [Title of Position]

| Role Impact | Principal Responsibilities |
|---|---|
| • What short-term and long-term impact is expected from this role?<br>• What potential scenarios may cause this role to have increased or decreased impact on the organization?<br><br>Interview questions for stakeholders. | • What are the primary short-term priorities for this role?<br>• What are the primary long-term priorities for this role?<br>• What potential scenarios may cause the responsibilities of this role to change?<br><br>Interview questions for stakeholders. |
| **Critical Capabilities** | **Optional Capabilities** |
| • What previous leadership experiences are necessary for success in this role?<br>• What market, technical, and organization-specific knowledge or skills are necessary for success in this role on day one?<br><br>Draft for validation/feedback from Stakeholder interviews. | • Which experiences, knowledge and skill are nice-to-have or can be developed on the job?<br>• Should aspects of this role be fulfilled by the collective work of a team or technology?<br><br>Draft for validation/feedback from Stakeholder interviews. |
| **Current State vs. Desired Future State** | **Personal Styles, Behaviors and Network** |
| • Does success in this role require optimization of current priorities or driving significant change?<br>• What would success in this role look like in 2-5 years?<br><br>Interview questions for stakeholders. | • What personal styles or behaviors will enable or derail success in this role?<br>• What relationships does a successful candidate for this role need to form within their team, across the organization or outside the organization? Should candidates have these relationship prior to the role, or do they have the mindset to build these relationships?<br><br>Draft for validation/feedback from Stakeholder interviews. |

# Role: Chief Talent Officer

## Role Impact

- What short-term and long-term impact is expected from this role?
- What potential scenarios may cause this role to have increased or decreased impact on the organization?

## Principal Responsibilities

- What are the primary short-term priorities for this role?
- What are the primary long-term priorities for this role?
- What potential scenarios may cause the responsibilities of this role to change?

## Critical Capabilities

**Healthcare Leadership Experience**
The CHRO must have deep expertise in clinical operations and regulatory environments within healthcare delivery settings.
**Talent Management Skills**
Strong background in managing complex systems and aligning HR strategy with organizational performance is essential. Has delivered a talent management platform that reflects a holistic approach around all aspects of talent acquisition, development, performance, total rewards, and engagement/retention at Parkland.
**Workforce Transformation Leadership**
Leading initiatives such as AI integration, talent strategy, and organizational redesign is critical for the CHRO role. History of identifying capability gaps which helps define the scope and breadth of the organization's talent stewardship efforts.
**Executive and Board Advising**
Success advising executives and boards on culture, talent, and succession demonstrates strategic insight and influence.

## Optional Capabilities

**Diverse Healthcare Settings**
Experience in public, private, and for-profit healthcare models enhances adaptability and strategic insight for CHROs.
**Global Perspective**
History of navigating external factors and partnerships to influence strategic plan.
**Partnership HR/Operations Practices Exposure**
Exposure to HR and Operational practices in health insurance, community services, and partnerships enriches workforce engagement and compliance strategies.
**Technology Familiarity**
Familiarity with emerging HR technologies, AI tools, and digital health platforms supports innovation and operational efficiency.
**Geographic and Regulatory Experience**
Managing dispersed teams or navigating regional healthcare regulations adds strategic value and broadens perspective.

## Current State vs. Desired Future State

- Does success in this role require optimization of current priorities or driving significant change?
- What would success in this role look like in 2-5 years?

## Personal Styles, Behaviors and Network

**Enabling Leadership Behaviors**
Empathetic leadership, strategic thinking, and resilience empower CHROs to foster a positive culture and navigate challenges.
**Derailing Behaviors to Avoid**
Resistance to innovation, siloed thinking, and poor board engagement can disrupt strategic initiatives and success. Lack of political savvy or diplomacy.
**Strategic Relationship Building**
Cultivating networks with clinical leaders, boards, and external partners supports collaboration and drives transformation.
**Trust and Collaboration Mindset**
A focus on trust-building and cross-functional collaboration is vital for long-term organizational achievement.

DRAFT Example

# Role: Chief Executive Officer

## Role Impact

- What short-term and long-term impact is expected from this role?
- What potential scenarios may cause this role to have increased or decreased impact on the organization?

## Principal Responsibilities

- What are the primary short-term priorities for this role?
- What are the primary long-term priorities for this role?
- What potential scenarios may cause the responsibilities of this role to change?

## Critical Capabilities

**Healthcare Leadership Experience**
Demonstrated deep expertise in clinical operations for complex systems.
Implemented programs proven to improve care of a population (e.g., enrolled in health plan or geographically defined)
Negotiated difficult, multi-million agreement/decisions and taken calculated risks that benefited a large organization.
Executed strategies resulting in higher productivity, lower costs, or improved services.
**Workforce and Engagement**
Acted as the primary face and voice for a significant culture change initiative, responsible for key messages and successful adoption.
History of soliciting and applying input to improve work conditions; creates connectivity to mission by reducing bureaucracy.
Ensures alignment through prioritization and clear messaging
**Political Advocacy**
Influenced state and federal policy that impacted patients and employees.

## Optional Capabilities

**Diverse Healthcare Settings**
Experience in public, private, and for-profit healthcare models enhances adaptability and strategic insight for CHROs.
**Global Perspective**
History of navigating external factors and partnerships to influence strategic plan.
**Technology Familiarity**
Familiarity with emerging clinical and revenue cycle technologies, AI tools, and digital health platforms supports innovation and operational efficiency.

## Current State vs. Desired Future State

- Does success in this role require optimization of current priorities or driving significant change?
- What would success in this role look like in 2-5 years?

## Personal Styles, Behaviors and Network

**Enabling Leadership Behaviors**
Empathetic, authentic leadership, strategic thinking; agility and resilience.
**Derailing Behaviors to Avoid**
Resistance to innovation, conflict avoidance, siloed thinking, and poor board engagement can disrupt strategic initiatives and success. Lack of political savvy or diplomacy.
**Strategic Relationship Building**
Continuously cultivating community and political networks, collaboration with clinical leaders, boards, and external partners supports organizational brand and community good will.
**Trust and Collaboration Mindset**
A focus on trust-building and cross-functional collaboration is vital for long-term organizational achievement. Models high accountability.

Draft for Input

# Interview Questions for TDEC Members
# Consider the Chief Executive Officer (CEO)

- What short-term and long-term *impact* is expected from this role?
- What potential scenarios influence your view of this role?
- What potential scenarios could change what is needed in this role?
- What are the primary short-term priorities for this role?
- What are the primary long-term priorities for this role?
- Does success require optimization or driving significant change?
- What would success in this role look like in 2-5 years?

# Appendix

p.16: Correlated Executive Leadership Competencies – Parkland Competency Model

p.17: Steps for Sourcing and Assessing Successor Candidates

pp. 18-19: Gartner HiPo Model and Evidence-based Guidance for assessing potential

pp. 20-22: Calibration Tools: 9-Box, Talent Profile template, Readiness guide

p. 23: Board Summary template

p. 24: Scalable Success Management: The Next Three Years

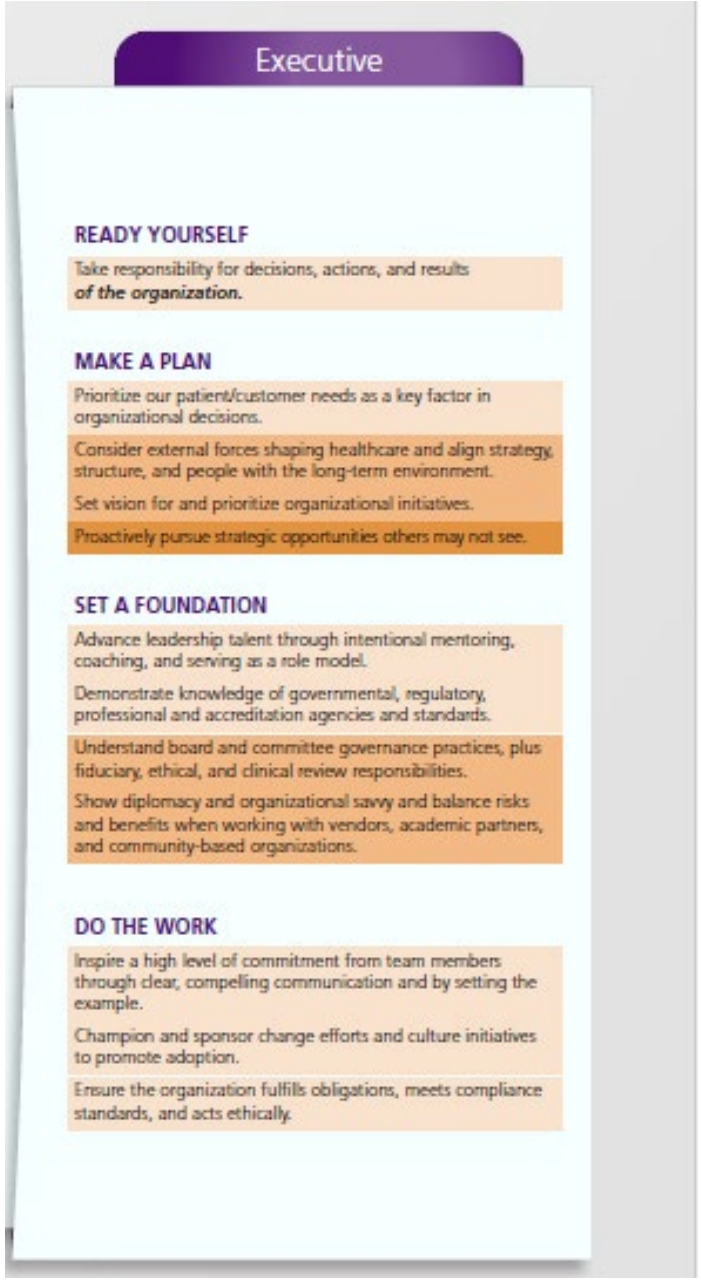
# Correlated Parkland Competencies: Executive

**Ready Yourself**
Take responsibility for decisions, actions, and results of the *organization*.

**Make a Plan**
Consider external forces shaping healthcare and align strategy, structure, and *people with the long-term environment*.

**Set a Foundation**
*Advance leadership talent* through intentional mentoring, coaching, and serving as a role model.

**Do the Work**
Ensure the organization *fulfills obligations*, meets compliance standards, and acts ethically.

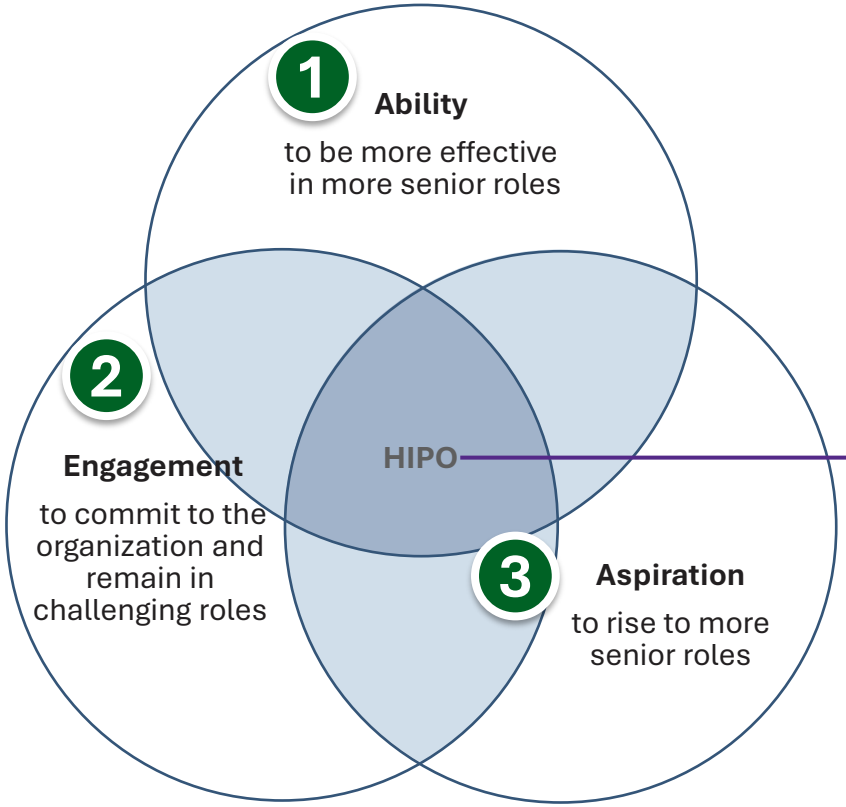


# Steps for Sourcing and Assessing Successor Candidates

1. Immediate supervisors conduct **potential** assessment for directors and above for initial “placement” on the **9-box**.
2. For each C-suite position prioritized for succession planning, solicit a broad list of **“top box”** director and above candidates (**boxes 1, 2, or 3)**.
3. Build **talent profiles for each candidate** and conduct a **talent review:**
   Talent Review objectives:
   - align on 9-box placement
   - define candidate readiness *per guidelines*
   - estimate retention risk

4. Hold confidential discussions with top 2 - 4 candidates to confirm motivation and developmental priorities.

# Gartner's Model of High Potential: HIPO Assessment Criteria (3 steps)




**HI • POs**

Employees with the potential to rise to and succeed in **more senior, critical positions.**

**Evaluate YES/NO**

1. Ability – If not evident, do not proceed
2. Engagement – If not evident, identify barriers
3. Aspiration – If not evident, inquire

Source: Gartner

# Guidance: Finding Evidence of High Potential

**ABILITY** to be more effective in more senior role

1. Called upon frequently to help solve complex or nuanced issues with a reputation for assessing, planning, and executing effectively.
2. Effectively identifies pertinent stakeholders and collaborates with a clear commitment toward the best outcome or idea, vs personal credit or authority.
3. Positively influences peers and superiors through sound judgment and communication.
4. Demonstrates learning agility:
   - Keeps a growth mindset, inviting opposing perspectives with a willingness to change course
   - Effectively "pivots" based upon new, validated factors. Brings others along with support and coaching.
   - Communicates a clear business case for change in direction, transparently acknowledging what we know and *what we don't yet know*.

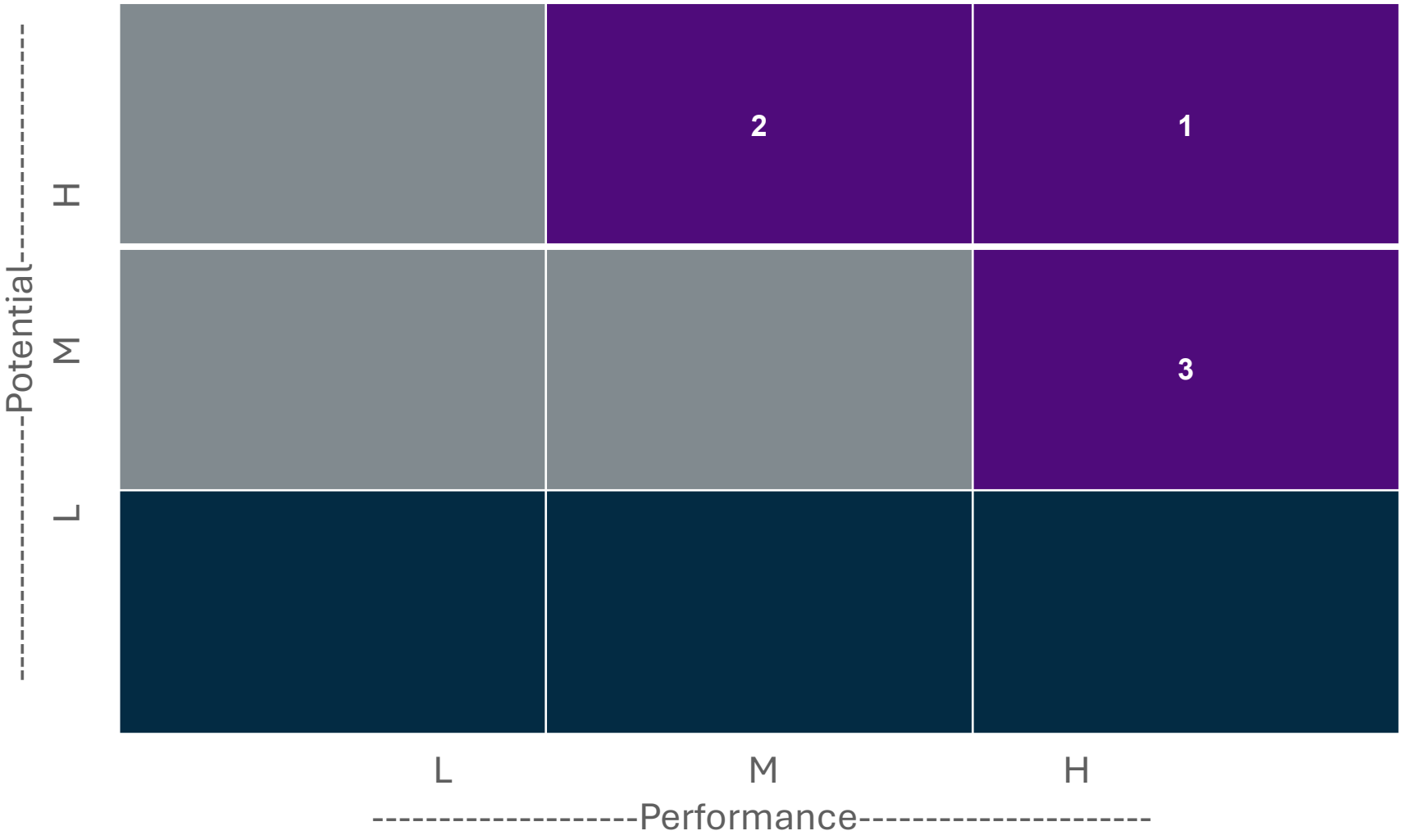
**ENGAGEMENT** to commit to Parkland and remain in challenging roles

1. Appears clear-eyed about Parkland's challenges but still expresses pride in the mission and professional association.
2. Has turned away external recruiting efforts by other organizations seeking to fill a similar role.
3. Embraces challenging assignments based upon the potential for positive impact on the organization (or patients, or members, or community).

**ASPIRATION** to rise to more senior roles

1. Initiates personal and professional development, grounded in thoughtful research and well-defined objectives.
2. Initiates efforts to improve conditions (processes, environment, resourcing, etc.) beyond currently defined scope.
3. Expresses a desire for additional responsibilities and brings forward ideas to help other teams be successful, always with an eye toward organizational benefit.

# Talent Review 9-Box, with preferred development approach




**Challenge**

- Develop through stretch assignments
- Enhance role complexity
- Assign strategic coach/mentor

**Engage**

- Develop within role
- Recognize and reward
- Seek input

**Support**

- Evaluate role fit
- Target improvement efforts
- Assign strategic mentor

# Sample Talent Profile Template

**Instructions:** Customize the below template to capture the criteria most important to determine fit for a critical role in your organization. Then work with the identified talent and their manager to fill out the template for the employee being evaluated.

<table>
<tr><td colspan="4"></td></tr>
<tr><td colspan="2" rowspan="3">Picture:</td><td>Name:</td><td>Performance rating: (add)</td></tr>
<tr><td rowspan="2">Designation:</td><td>Team engagement score: (add)</td></tr>
<tr><td>Career aspirations and mobility: (add)</td></tr>
<tr><td colspan="2">Accomplishments:<br>• (Add)<br>• (Add)<br>• (Add)</td><td colspan="2">Competencies:<br>• (Add)<br>• (Add)<br>• (Add)</td></tr>
<tr><td>Years in current position: (Add)</td><td>Readiness rating: high/medium/low</td><td colspan="2" rowspan="4">Critical Experiences:<br>• (Add)<br>• (Add)<br>• (Add)<br>• (Add)</td></tr>
<tr><td>Years in organization: (Add)</td><td>Retention risk: high/medium/low</td></tr>
<tr><td>Total work experience: (Add)</td><td>Interest in role: high/medium/low</td></tr>
</table>

See additional examples linked in the notes section below this slide

# Readiness Guidance

| | Critical Capabilities of Role | Optional Capabilities of Role | Style, Behaviors, Network | Investments if placed |
|---|---|---|---|---|
| **Ready Now** | All | Most | All | Frequent checks with intentional coaching/ reflection. |
| **Ready Enough** | All | Some | Most | Wrap-around support/SMEs, mentoring resources, frequent checks; intentional coaching/reflection. |
| **Ready in 2-3 Steps** | Some | Some | Some | N/A |

# Executive/Board Summary Template

## Succession Plan Roster for CXO Position

Potential: High

CXO, CYO, SVPX

Retention Risk: High

Readiness CXO: Now

- **Brianna  Robinson*** [Provide a brief overview of the successor's strengths and top skills related to the role]
- **Development opportunities.** Challenge with responsibilities that build "optional capabilities" on success profile(s); expand scope and retain!

Potential: High

CXO

Retention risk: Low

Readiness CXO: 1-2 Steps

- **Tani Ohashi*** [Provide a brief overview of the successor's strengths and top skills related to the role]
- **Development opportunities.** Create opportunity for Step 1: job swap,  expanded scope, temporary assignment that rounds out the "critical capabilities" on success profile.

Potential: Moderate

CXO, SVPY

Retention Risk: Moderate

Readiness Timeline: 2-3 Steps

- **Emmanuel Mendoza*** [Provide a brief overview of the successor's strengths and top skills  related to the role]
- **Development opportunities.** Assign and support experience tied to "critical capabilities" of SVPY role. Consider an assessment.

**All names are fictitious.*

# Individual Development Plan Template

See below an example of an individual development plan template.

| Talent: | | Manager name: | | Date of next IDP pull-up: | | |
|---|---|---|---|---|---|---|
| **Development objectives** | **Skills to develop** | **Action steps** | **Manager support** | **Success measures** | **Potential barriers to completion** | **Target completion date** |
| Objective 1 | | | | | | |
| Objective 2 | | | | | | |
| Objective 3 | | | | | | |

What will the employee do?

What skills will employee develop?

How will they do it?

What support should be provided?

How can we measure progress?

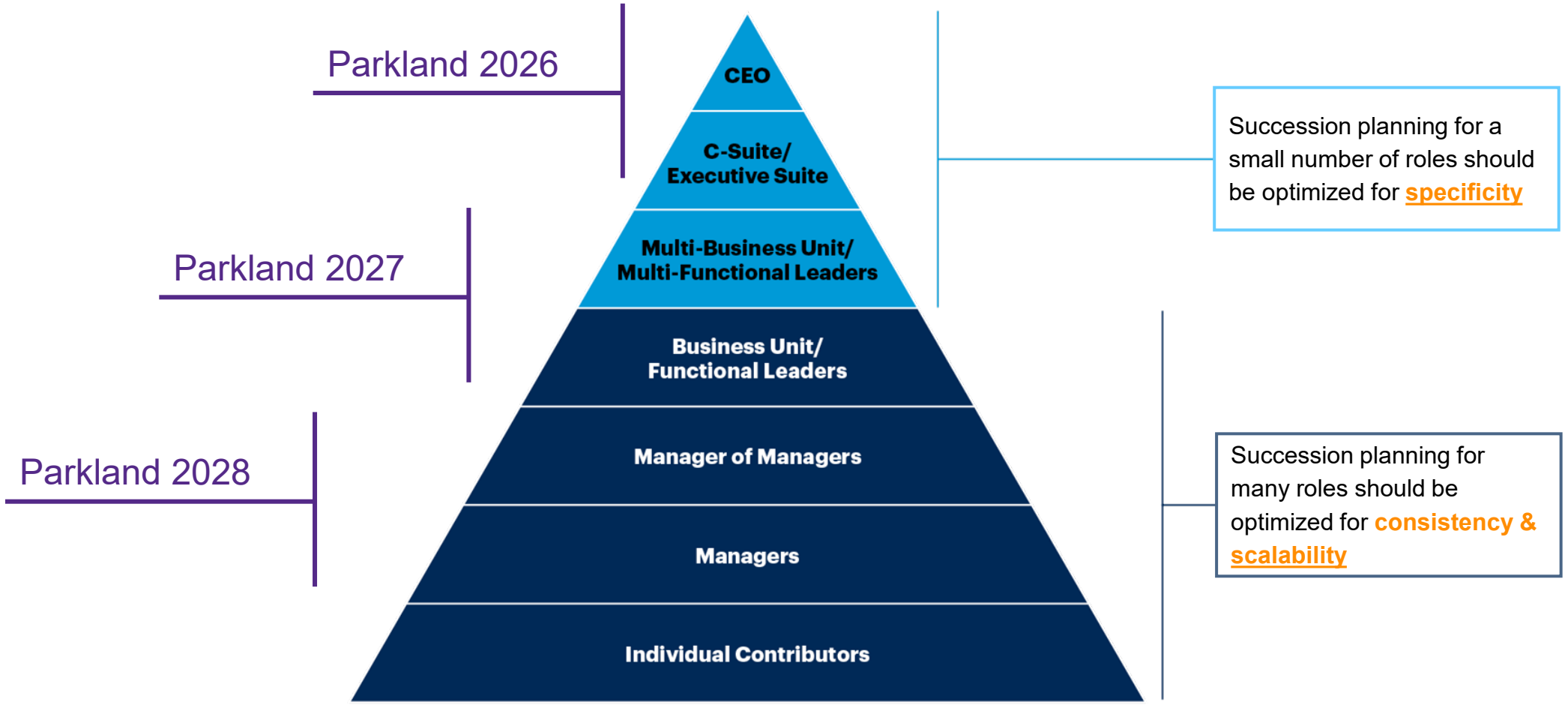
What can hinder their progress?

How long will it take?

| Development objectives | Action steps | | |
|---|---|---|---|
| | **Work experiences – 70%** (Which projects or assignments relate to this area?) | **Relationships – 20%** (Which colleagues could help build skills in this area?) | **Formal training – 10%** (Are there any relevant trainings available?) |
| | | | |
| | | | |

# What Is Scalable Succession Management?

Succession management is a **proactive process** that aims to improve leadership pool strength by **safeguarding** critical business capabilities, **accelerating** executive development, **overcoming** new hire derailers, and effectively **leveraging** strategic talent.





Gartner Tool
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# Metrics Review

**Dan Enright, MBA, SPHR, CCP, CBP**
Director, Workforce Planning & Analytics

# People Metrics Summary

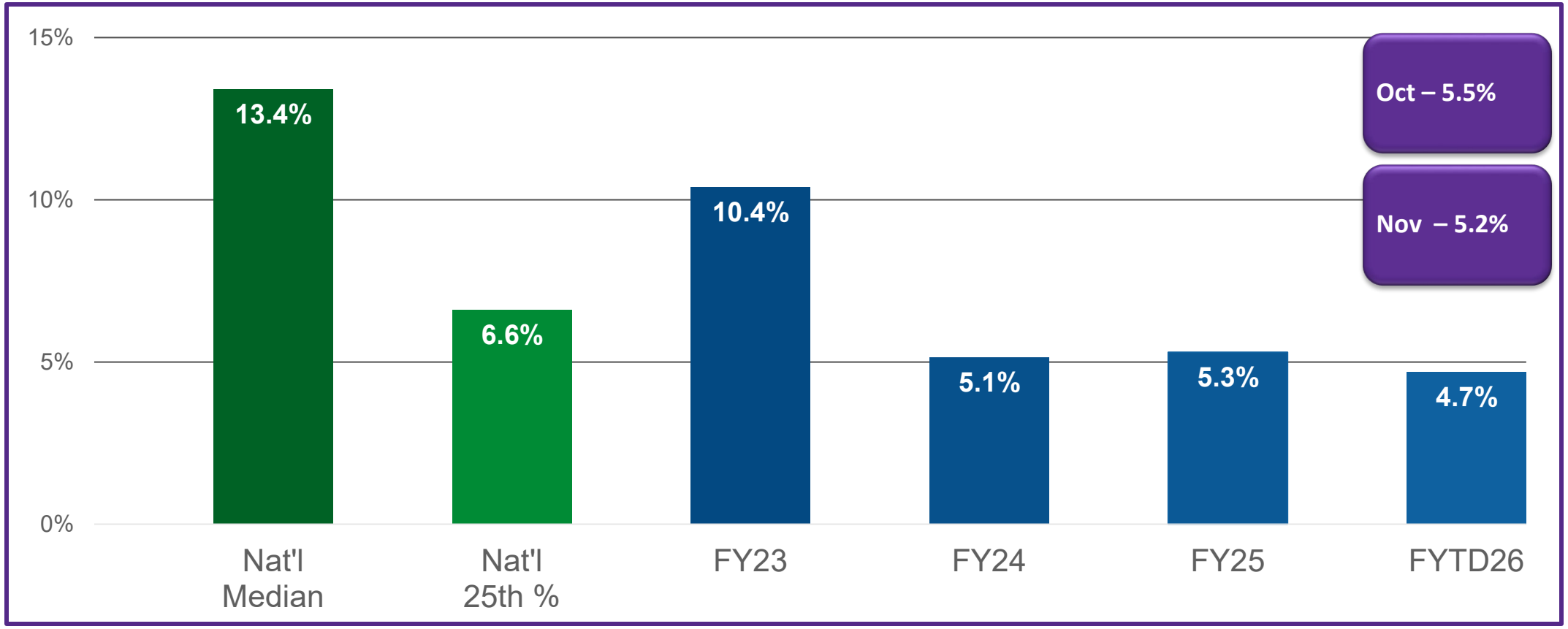
| Metric | Numerator | Denominator | FY2026 | FY2025 | Benchmark* |
|---|---|---|---|---|---|
| Vacancy | 622 | 13,197 | 4.7% | 5.3% | 13.4% |
| Nurse Vacancy | 292 | 4,671 | 6.3% | 7.4% | 10.3% |
| Turnover | 369 | 12,653 | 11.7% | 12.1% | 17.2% |
| Voluntary Turnover | 304 | 12,653 | 9.6% | 10.2% | 13.7% |
| Nurse Turnover | 127 | 4,400 | 11.5% | 11.3% | 13.9% |
| First Year Turnover | 90 | 1,403 | 25.7% | 27.8% | 39.8% |
| Nurse First Year Turnover | 32 | 427 | 30.0% | 20.6% | 25.5% |

*National Median: Saratoga Hospital Industry published in 2025

# People Metrics (Detailed Pages)

**Dan Enright, MBA, SPHR, CCP, CBP**
Director, Workforce Planning & Analytics

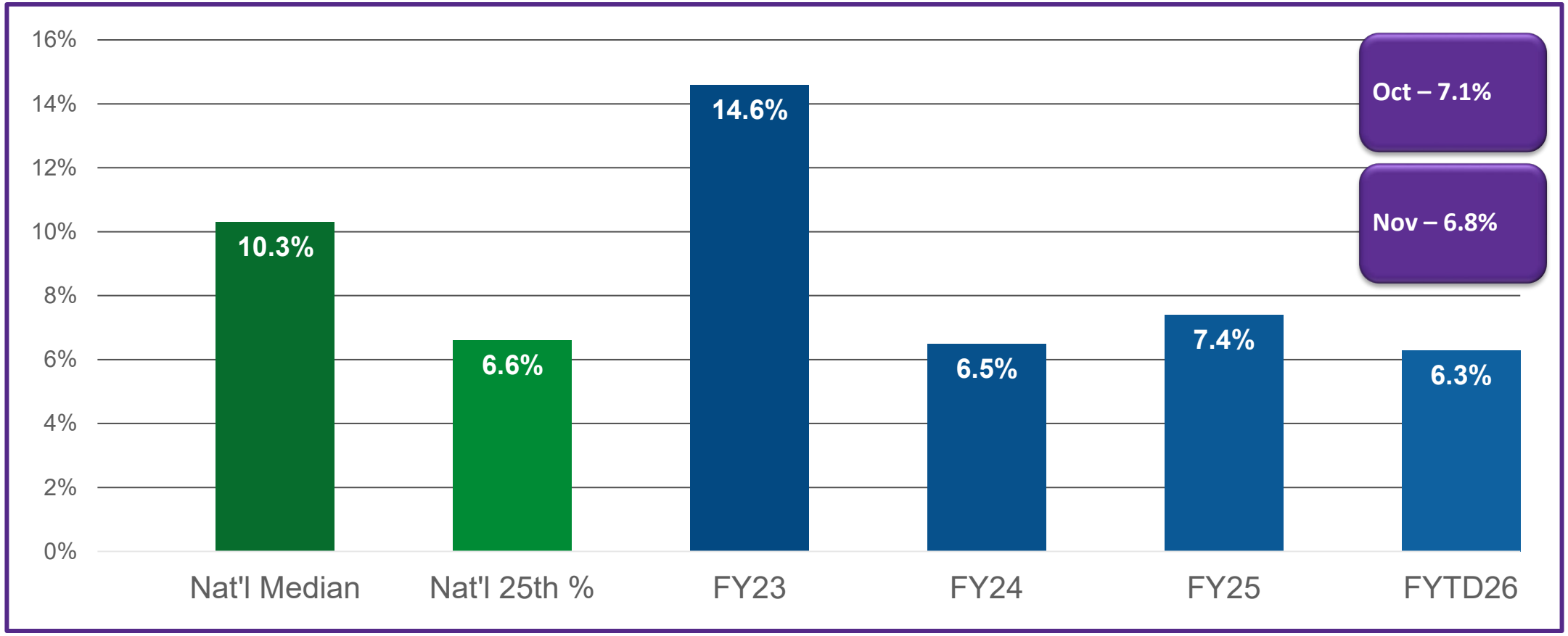
# Vacancy Rate




Formula: Number of Open Posted Positions / Total Positions (filled plus open)

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

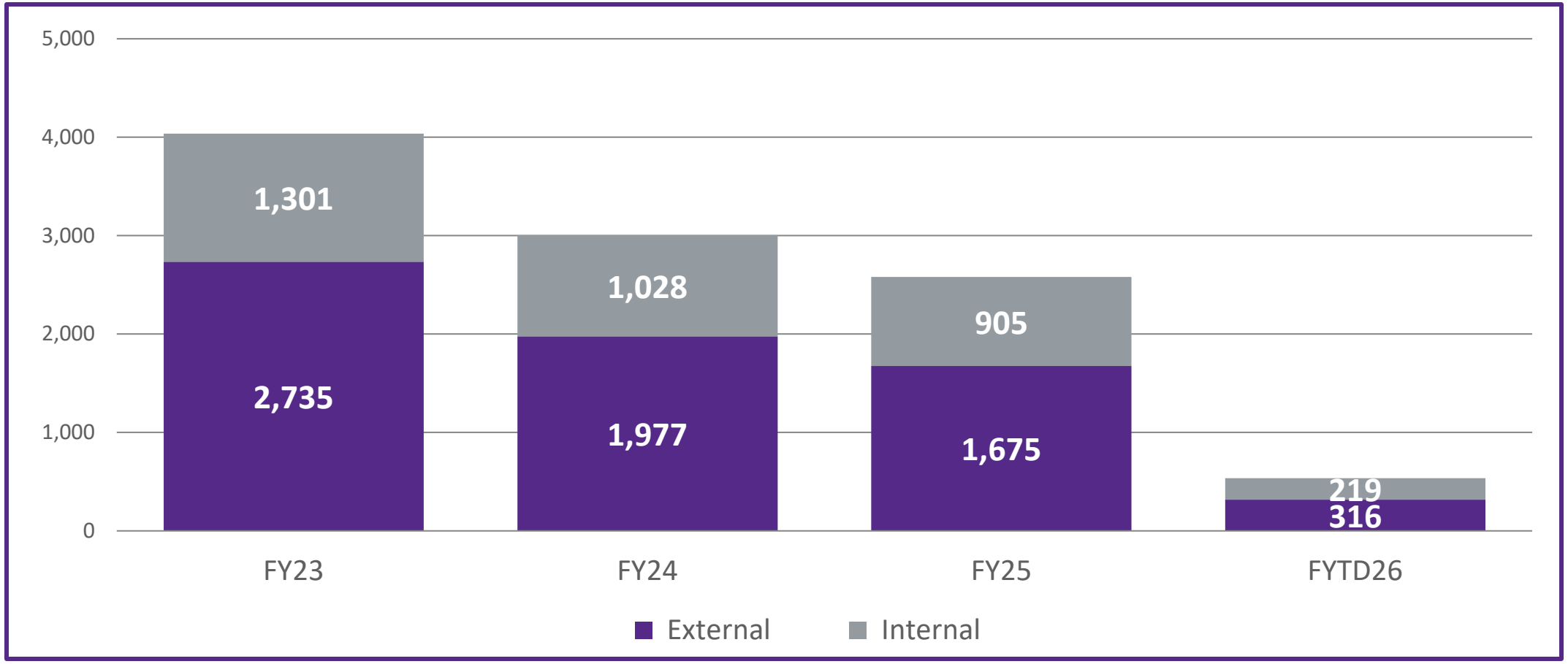
# Nurse Vacancy Rate




Formula: Number of Open Posted Nurse Positions / Total Nurse Positions (filled plus open)

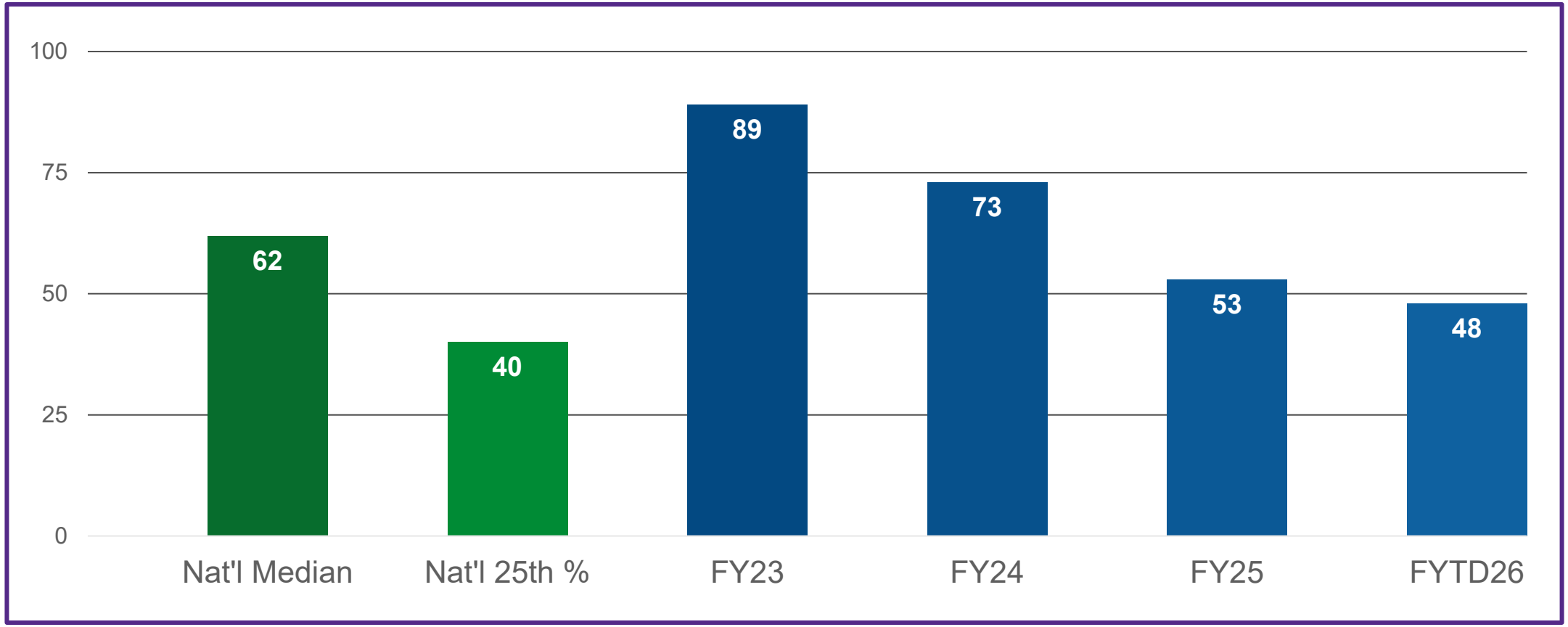
National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

# Total Hires




Formula: Total Hires (external + internal)

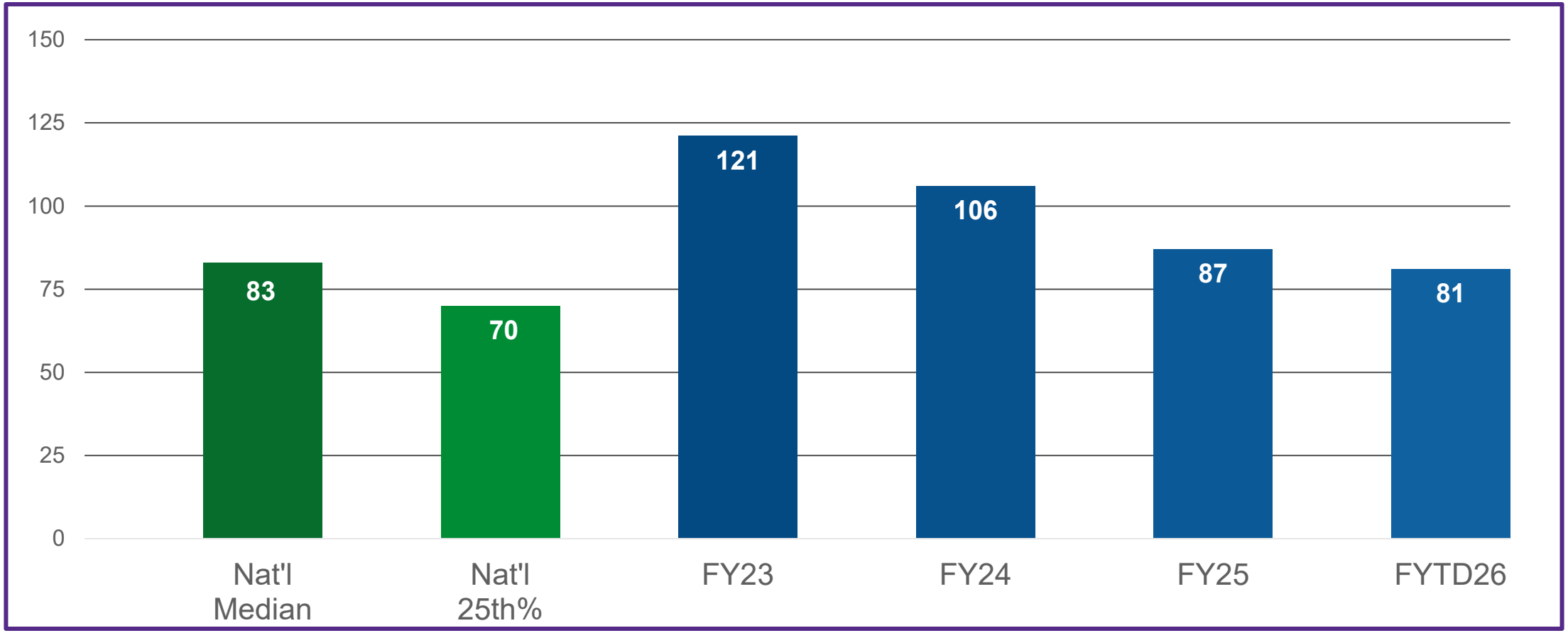
# Days to Fill




Formula: Average Days Between Job Requisition Open and Offer Acceptance Date

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

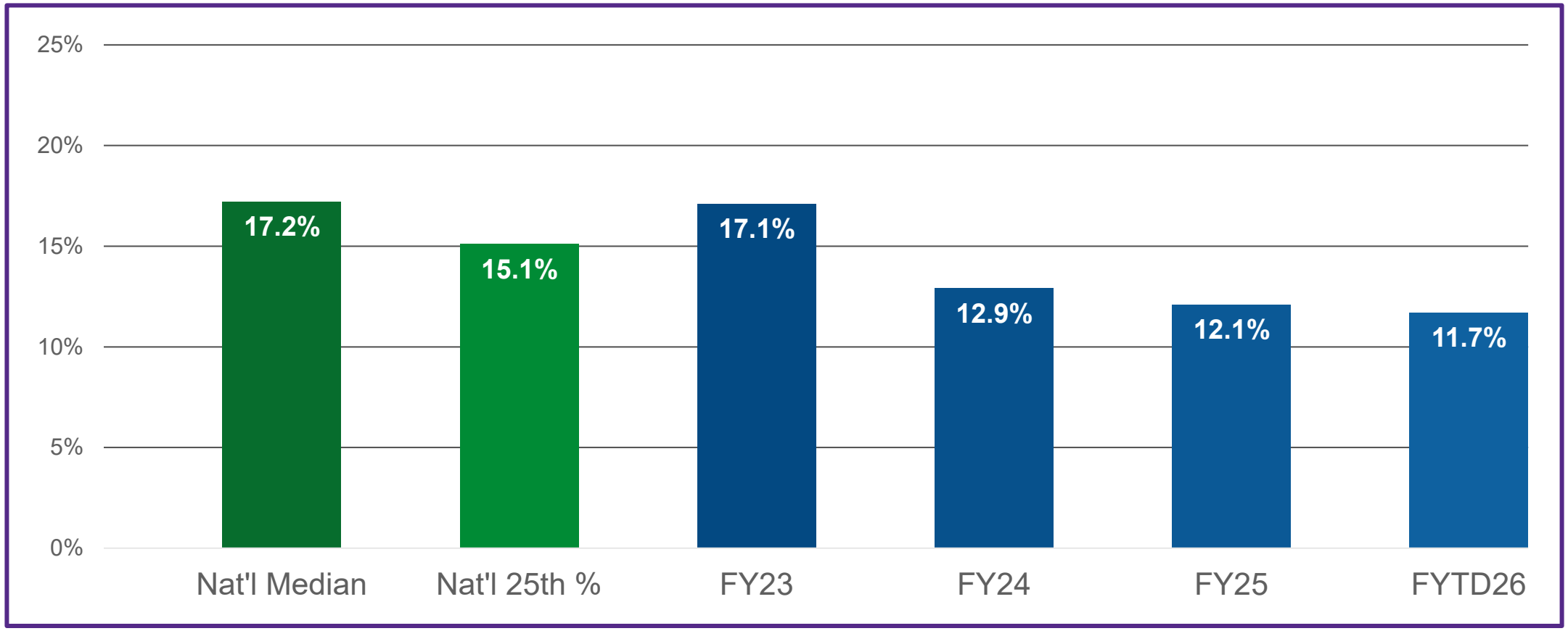
# Days to Start




Formula: Average Days Between Job Requisition Open and Start Date

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

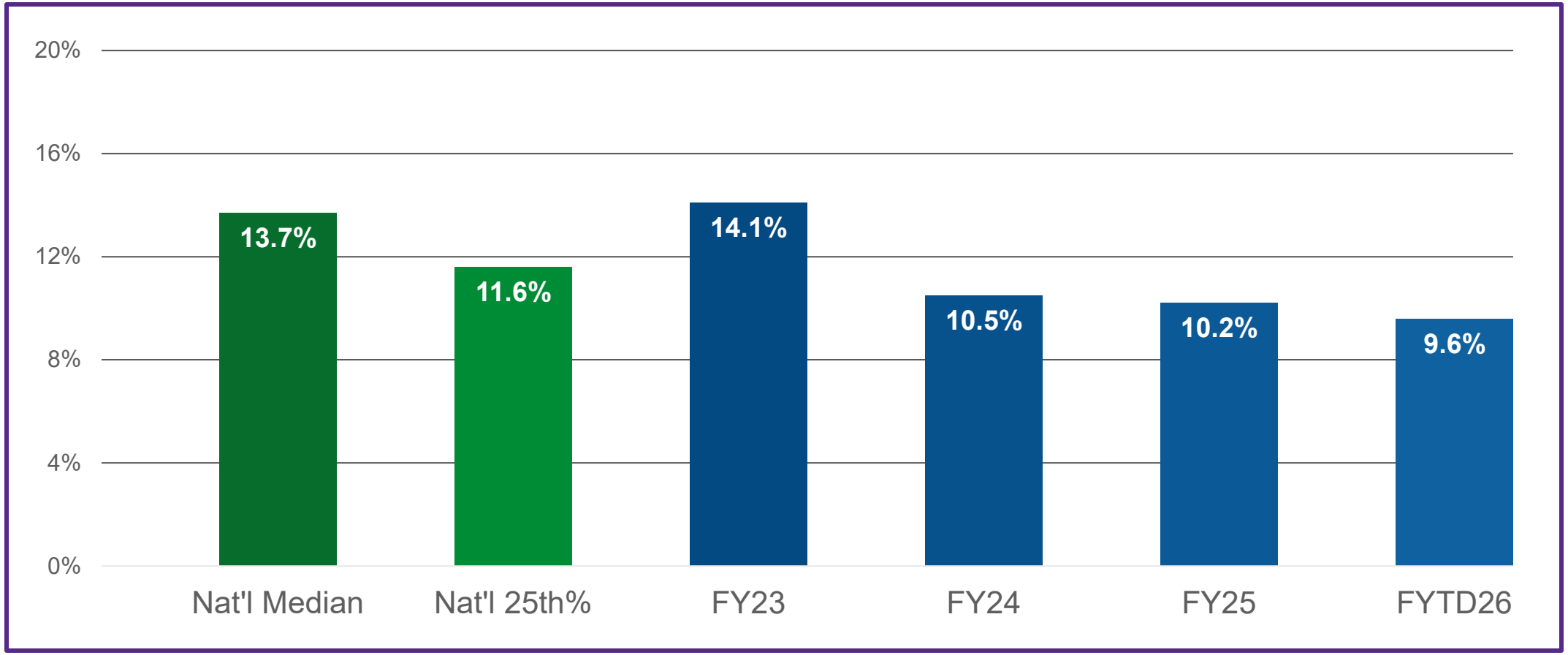
# Turnover Rate




Formula: Total Terminations / Regular Headcount

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

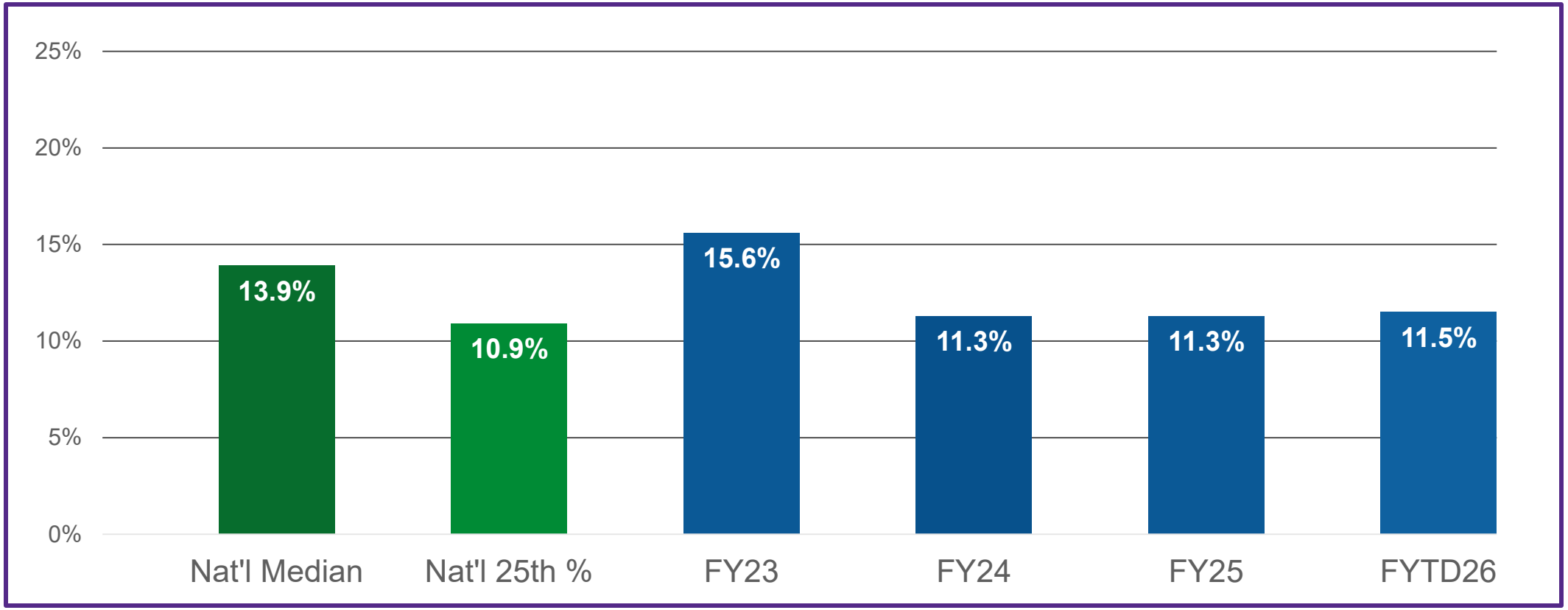
# Voluntary Turnover Rate




Formula: Total Voluntary Terminations / Regular Headcount

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

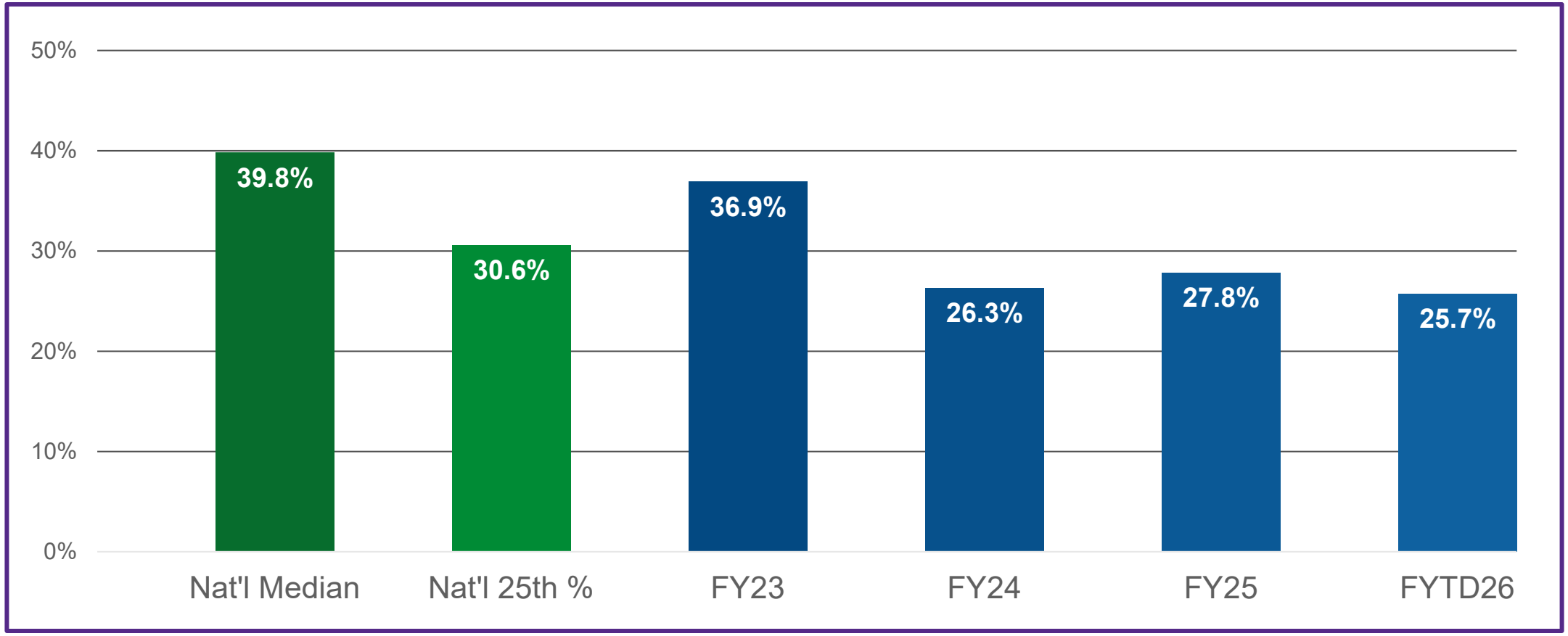
# Nurse Turnover Rate




Formula: Total Nurse Terminations / Nurse Headcount

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

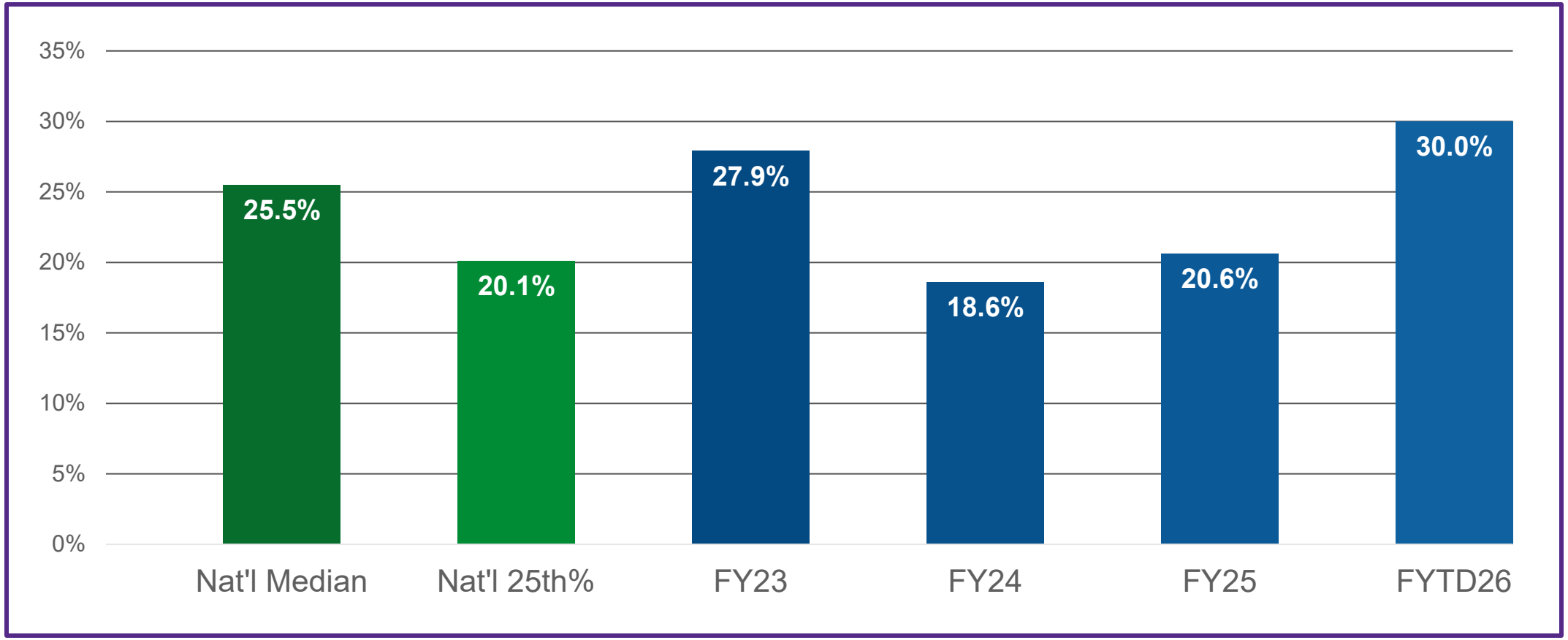
# First Year Turnover Rate




Formula: Terminations with 0-1 Years of Svc / Reg. Headcount with 0-1 Years of Svc

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

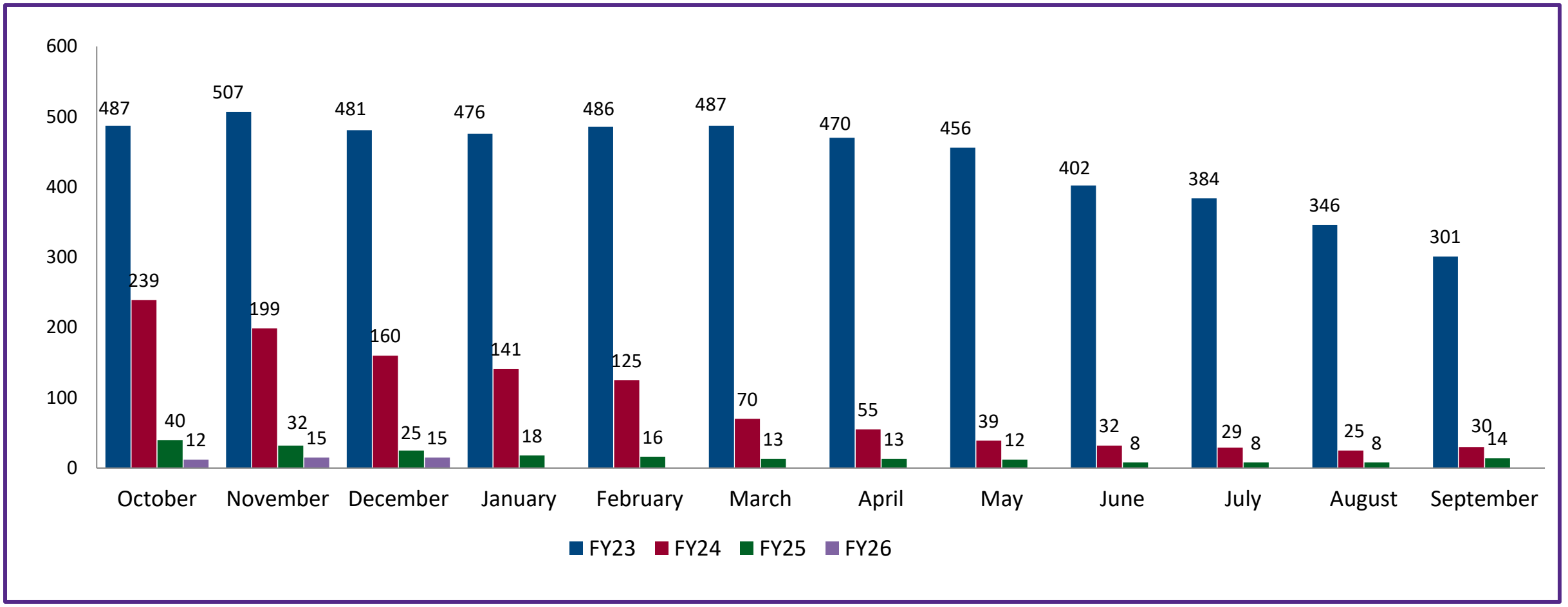
# Nurse First Year Turnover Rate




Formula: Nurse Terminations 0-1 Years of Svc / Nurse Headcount 0-1 Years of Svc

National Median & 25th Percentile: Saratoga Hospital Industry published in 2025

# Contract Labor Utilization




Formula: Total Contractors from AHSA (Headcount)

# Communications Schedule of OTM Activity to Employees

**Sean Gorman, MBA**
OTM Communications Manager

# January 2026 Communications

## January 2026

| | | | | Thursday | Friday | Saturday |
|---|---|---|---|---|---|---|
| | | | | 1/1/2026 | 1/2/2026 | 1/3/2026 |
| | | | | Workday Go-Live All Staff Email | Workday Banner | |
| | | | | Workday Banner | MLK Parade Banner | |
| | | | | MLK Parade Banner | | |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| 1/4/2026 | 1/5/2026 | 1/6/2026 | 1/7/2026 | 1/8/2026 | 1/9/2026 | 1/10/2026 |
| | Childcare Banner | Childcare Banner | Childcare Banner | Leadership Forum | Childcare Banner | First Payroll/Direct Deposit All-Staff Email |
| | Annie's Place Partnership | Workday Banner | Workday Banner | Childcare Banner | Workday Banner | |
| | Parkland Now Year in Review | MLK Parade Banner | MLK Parade Banner | [illegible] | MLK Parade Banner | |
| | Parkland Now MLK Paarade | | Workday Targeted Email: UKG Issues Resolved | Workday "Pre-First Check" Email | | |
| | Parkland Now Petcare Corner | | Childcare for Parkland Employees: All-Staff Email | Workday Banner | | |
| | Workday Banner | | | MLK Parade Banner | | |
| | Workday Targeted Email: Escalation of Requests, Questions & Concerns | | | | | |
| | MLK Parade Banner | | | | | |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| 1/11/2026 | 1/12/2026 | 1/13/2026 | 1/14/2026 | 1/15/2026 | 1/16/2026 | 1/17/2026 |
| | MLK Parade Pak | Childcare Banner | Childcare Banner | Town Hall | Childcare Banner | |
| | Wellness Experience | Workday Banner | DFWHC Banner | Childcare Banner | | |
| | Childcare Banner | MLK Parade Banner | Workday Banner | DFWHC Banner | DFWHC Banner | |
| | Workday Banner | Direct Deposit Update All-Staff Email | MLK Parade Banner | Workday Banner | Workday Banner | |
| | MLK Parade Banner | | | MLK Parade Banner | MLK Parade Banner | |
| | | | | | Direct Deposit Update All-Staff Email | |
| | Policy Termonology Update: Targeted Email | | | | Workday Retirement Account Update All-Staff Email | |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| 1/18/2026 | 1/19/2026 | 1/20/2026 | 1/21/2026 | 1/22/2026 | 1/23/2026 | 1/24/2026 |
| | MLK Jr. Day | | | | | |
| | Workday Banner | DFWHC Banner | DFWHC Banner | DFWHC Banner | DFWHC Banner | |
| | MLK Parade Banner | Workday Banner | Workday Banner | | | |
| | | | | Workday Banner | Workday Banner | |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| 1/25/2026 | 1/26/2026 | 1/27/2026 | 1/28/2026 | 1/29/2026 | 1/30/2026 | 1/31/2026 |
| | Ash Wednesday Parkland Now | Workday Banner | Workday Banner | Workday Banner | Workday Banner | |
| | Workday Banner | | | | | |

# Thank you!