STRATEGY FORUM - November 17-19, 2010

WNMU representatives: John Counts, Faye Vowell, Chris Farren, Sherri Bays, Linda Kay Jones, Paul Landrum, Danielle Moffett, Mary Billings

DAY 1 – November 17, 2010

EXERCISE 1: Welcome and Introductions

Participating institutions in this strategy forum were as follows:

Group A: Alexandria Technical College, Iowa Western Community College, Lakeland Community College, Western New Mexico University

Group B: Bismarck State College, Indiana University Northwest, Kankakee Community College, Lamar Community College

Group C: Community College of Denver, Lorain Community College, Rainy River Community College, University of Wisconsin-Stout

Group D: Mineral Area College, Northern New Mexico College, Northwestern Michigan College, Riverland Community College

EXERCISE 2: Clarifying Challenges and Issues

Objectives:

- Review the process you used to select your category for improvement (Category 7, Measuring Effectiveness). The Systems Appraisal feedback report repeatedly identified the need for measurement in order to produce results for assessment and improvement. The President, Vice Presidents, Director for Data Analysis & Research, and Quality Coordinators began meeting regularly in June 2010 to design a web-based Institutional Measures matrix and to align these measures with the WNMU Strategic Plan, the Systems Portfolio, and AQIP categories. In its fully developed form, this matrix will link key measures with the various in which they are routinely reported (e.g. IPEDS, Fiscal Watch).

- Clarify and focus the challenge or problem statement for category for improvement. As stated in the Systems Appraisal, “…effectiveness does not appear to be well defined or measured... A need for greater pan-institutional coordination appears to be evident.”

- Use affinity mapping to clarify and focus the challenges and problems you face in improving this category. Affinity diagram “headers” for this exercise included the following: Culture (we lack true peers & anecdotal information is comfortable for us); Outcomes; Meaningful Measures; Communication; Resources.

- Identify key issues on which you would like help from colleagues from other institutions. Comparative external data. (We also need better comparative internal data.)
EXERCISE 3: Getting Input on Category Improvement Challenges

Objectives:

- Learn how each institution processed its Systems Appraisal feedback. *This exercise was the first of several opportunities over the 3-day forum to visit with representatives from other participating institutions. Our regular “Measurement Team” meetings over the summer and fall were recognized by other participants as exceptionally rigorous in terms of processing Systems Appraisal feedback and moving forward with an actual plan.*

- Explain the thinking behind your institution’s decision in selecting its specific AQIP category for improvement. *(See above.)*

- Gain insight on specific issues identified during Exercise 2.

- Share from others’ *Reflections* (“lessons learned”). *The Measurement Team reviewed these lessons learned as part of the pre-forum homework. Many institutions shared the same observations and experiences, including the importance of having process owners serve on action project teams, the significance of having administrative champions, the necessity of keeping project team scope of duties realistic and of keeping activities on track, and the ongoing challenge of earning and maintaining buy-in of continuous quality improvement.*

EXERCISE 4: Specifying the Challenges for our Category Improvement Campaign

Objectives:

- Share and discuss input from other teams concerning your Category Improvement Campaign. *The most common concern that we heard from other teams was, “where will you get the resources to develop this complex measurement matrix?”*

- Identify typical problems other teams are having in trying to articulate their own challenges, and compare those to our own experience. *The theme central to this discussion was shrinking budgets, even among the community colleges in the room.*

- Reach team consensus on the specific aspects of the Category that need to be changed. *Institutional key measures need to be identified, not only for the new measurement system but for the Systems Portfolio. The Portfolio is very limited in size (it can’t exceed 100 pages in length), so no more than one or two key measures can be presented in any detail. Selecting these will be a challenge.*

*Exercise 4 was the first step in completing the Category Improvement Chart, which required the team to identify the “current state” of our activities, processes and/or performance for measuring effectiveness. The Category Improvement Chart, in its completed form, is depicted in Exercise 6.*
EXERCISE 5: Visioning the Future We Want to Achieve

Objectives:

- Stimulate your team to create a specific, concrete vision of the future that might emerge from your Category Improvement Campaign.
- Help individual team members clarify their ideas of what might be improved.
- Engage your entire team in a highly participative fun process that can help them think creatively and “outside the box.”
- Allow everyone to put forward ideas in a non-threatening way.
- Foster creativity by requiring the group to pursue various aspects of potential metaphors.
- Create energy while building group cohesiveness and consensus.

*Exercise 5 was the second step in completing the Category Improvement Char, which required the team to identify WNMU’s “future state” conditions. The Category Improvement Chart, in its completed form, is presented in Exercise 6.*

EXERCISE 6: Brainstorming Strategies for Category Improvement

Objectives:

- Define actions required to meet your challenge. *This exercise, and final step in creating the Category Improvement Chart, required the group to identify strategies for improvement.*
- Practice brainstorming to generate ideas and multivoting to reduce a set of ideas to a manageable number. *Results are depicted in the middle column of the chart below.*

*Category Improvement Campaign Chart*

**Western New Mexico University – Measuring Effectiveness**

<table>
<thead>
<tr>
<th>Current State</th>
<th>Strategies for Improvement</th>
<th>Future State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurement “anarchy;” lots of measurement, not so much analysis; anecdotal evidence (culture)</td>
<td>Inventory, organize, prioritize, align what we have with what we need to do with the Systems Portfolio and WNMU Strategic Plan.</td>
<td>Full, mature, systematic analysis with actionable, reliable, and valid information that assists in “closing the loop” (data -&gt; information -&gt; knowledge)</td>
</tr>
</tbody>
</table>
Developing automated performance measurement system (outcome)

- Hire support positions (i.e. Cataloger)
- Detailed inventory of decisions Made (replace anecdotal fields)
- Train people to use the system
- Hire support positions
- What type of data do we need, broken down & standardized
- Allocate $ to purchase necessary resources in technology (Crystal, Banner)
- Align VP-level operational plans.
- ID data needs
- Link processes to measures
- ID key measures that are meaningful & set targets

Defining institutional measures

- Communicate with stakeholders (tell them “why”)
- Keep this current & viable
- Link processes to measures
- Keep this current & viable
- Allocate $ to purchase necessary resources in technology
- Link processes to measures
- Keep this current & viable

Lack key measures

- Key measures that have led to improvement in processes

Internal & external stakeholders don’t always understand need for a measurement system (communication)

- Communicate with stakeholders (tell them “why”)
- Keep this current & viable

Need to set priorities & reallocate resources to create & sustain automated measurement system (resources)

- Train people to use system
- Hire support systems (e.g. cataloger)
- Link processes to measures
- Keep this current & viable
- Allocate $ to purchase necessary resources in technology
- Link processes to measures
- Keep this current & viable

Need to align automated measurement with institutional strategic plan as well as AQIP Systems Portfolio

- MMS is recognized as a best practice by internal & external stakeholders
- Priorities have been set & resources allocated to create & sustain the MMS
- MMS fully aligned with Strategic Planning & the Systems Portfolio

Allocate money to purchase necessary technology resources
DAY 2 – November 18, 2010

EXERCISE 7: Prioritizing Potential Action Projects for Category Improvement

Objectives:

- Develop factors for evaluating strategic initiatives.
- Prioritize initiatives using a prioritization matrix. Below:

<table>
<thead>
<tr>
<th>Initiative</th>
<th>$$</th>
<th>Value (3 = high)</th>
<th>Time</th>
<th>Urgency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organize existing report</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Strategic issue/data</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
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<tr>
<td>ID key measures</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>3</td>
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<tr>
<td>Operational decision support</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>1</td>
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</tbody>
</table>

EXERCISE 8: Charting a Category Improvement Action Project

Objectives:

- Recognize the value of clearly defining and documenting common expectations and constraints associated with [an] Action Project.
- Practice by drafting a charter for an Action Project associated with your Category Improvement Campaign.
- Practice identifying membership needs for successful Action Project teams.
• Consider how strategic selection of teams can have benefit beyond the specific project.

Western New Mexico University

Mustang Measurement System (MMS)

Context: This is a response to our 2010 Systems Appraisal which identified a need for measurement

Problem & opportunity: Too much measurement & not enough analysis to support CQI. We need to leverage our ability to get the right information to the right decision-makers.

Key stakeholders: Decision-makers, data owners/collectors, and (ultimately) our students. Most influenced by IR in concert with Senior Leadership. Benefits are improved decision making, & processes/practices to improve student learning.

Project Vision & Objectives: To create a mature system of analysis with actionable, reliable, and valid information that supports and demonstrates CQI. This system aligns with the WNMU Strategic Plan and the institutional accreditation process (AQIP). It will increase achievement of institutional objectives, supporting better decisions.

Project sponsor: Senior leadership (President and VPs)

Budget & timeline: Phase I completion is scheduled for 4/1/2011. Costs include team member salaries, operational and travel expenses from the President’s budget, and hiring of a cataloger to assist the Director of Data Analysis & Research. Milestones will include completion of Phases I and II.

Constraints & Assumptions: Assumptions include: data are available; the network must be available all over campus; IT support must be sufficient to develop a mechanism for accessing this; constraints are time and completing the projects.

Critical success factors & risks: This action project needs to be a priority. Time & resources must be made available to support this. Risks include potential loss of current personnel key to this project (particularly the Director of Data Analysis & Research).

Approach & organization: Timelines; regular meetings; identification of information maintenance process owners; regular reporting to all stakeholders.

EXERCISE 9: Quality Now – Our Current Quality Infrastructure and Culture

Objectives:

• Assess key factors of a quality culture and infrastructure, and how they currently manifest themselves in your institution.
**Culture** describes how people in an institution think and work together. Culture is the sum total of an organization’s past and current assumptions, experiences, philosophy, and values that hold it together, and is expressed in its self-image, inner workings, interactions with the outside world, and future expectations. Culture is based on shared attitudes, beliefs, customs, express or implied contracts, and written and unwritten rules that the organization develops over time and that have worked well enough to be considered valid.

**Infrastructure** describes how institutions formally organize their people, their roles and responsibilities within the organization – who has authority, how things get done, what are the boundaries of acceptable behaviors. **Infrastructure** includes structures (committees, departments, divisions, etc.) and standardized processes and activities, and can determine how innovative, creative, responsive or bureaucratic an institution will be.

*In preparation for this exercise, and as part of the Strategy Forum homework, the team, along with members of active AQIP action projects at WNMU and Academic Council, completed a Quality Culture Survey. The compiled results of this survey were reviewed at the forum and, per the instructions for this exercise, several items with the greatest and least consensus were identified for discussion.*

- Further clarify the meaning of *culture* and *infrastructure* in relation to your understanding of quality. *Items discussed from the WNMU Quality Culture Survey are highlighted in the chart below.*

**WNMU AQIP Quality Culture & Infrastructure Survey Results October 2010**

<table>
<thead>
<tr>
<th>Areas</th>
<th>Questions</th>
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<tbody>
<tr>
<td><em>Who is in charge of our quality initiative and what authority do they have?</em></td>
<td>1. How have we assigned responsibility and accountability for continuous improvement throughout our organization?</td>
<td>7</td>
<td>7</td>
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<td></td>
<td>2. How have we empowered people to support our quality improvement efforts? Does our quality program generate decisions, recommendations, or suggestions? To whom? About what?</td>
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<td>3. What measures, investigations, studies, projects, or changes can our quality manager(s) or structure implement directly?</td>
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<td>What people and resources support our quality initiative?</td>
<td>4. Who manages our continuous quality improvement processes?</td>
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<td>5. How are roles and responsibilities for quality communicated throughout our organization? Is a position or responsible body identified in our organizational chart?</td>
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<td>6. What resources (people, space, money, etc.) are assigned to our quality initiative? How do we assure it has adequate resources?</td>
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<tr>
<td>How do our people and culture reinforce our quality initiative?</td>
<td>7. How do we select and train faculty and staff to contribute to quality improvement?</td>
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<td>8. How do we develop succession planning—especially for senior administrators—that ensures ongoing commitment to quality?</td>
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<td>9. How do we motivate employees to contribute to our quality initiatives, and how do we recognize their involvement?</td>
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<td>10. How do we create or enhance a culture of collaboration, learning, fact-based thinking characteristic of high-performance organizations?</td>
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<td>What do our people know about our quality initiative?</td>
<td>11. How do we keep everyone aware of our current organizational projects (both AQIP Action Projects and other significant organizational undertakings and improvement projects)?</td>
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<td>12. How do we explain how these activities relate to our organizational mission, values, and strategic priorities?</td>
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<td>13. How do we communicate accomplishments to our faculty and staff?</td>
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<td>14. How is our organization using our Systems Portfolio to communicate our quality development to employees and other stakeholders?</td>
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<td>When do we act on Improvement opportunities?</td>
<td>15. What stimulates us to make improvements?</td>
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<td>16. What compels us to act and do things differently?</td>
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<td>17. What systems have we established to encourage, collect, analyze, and take action on ideas for improvement?</td>
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<td>How does our quality initiative link with our other planning and enhancement efforts?</td>
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<td>18. How do we link, coordinate, and combine our other organizational planning systems with our continuous improvement efforts?</td>
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<td>19. How does our continuous improvement program affect (or is affected by) enrollment planning, facilities planning, strategic planning, budgeting, program planning, etc?</td>
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<td>20. How are daily operations continuously improved?</td>
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<td>21. How do we maintain effective communication and coordination among the people responsible for various aspects of planning and continuous improvement?</td>
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<td>How well is our quality initiative working?</td>
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<td>22. What measures, indicators, and signs tell us how effectively our continuous improvement program is working?</td>
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<td>23. If it slows or stops, how do we know?</td>
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<td>24. How do we employ results in a cycle of improvement (PDSA), capturing and employing lessons learned?</td>
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<td>25. How do we celebrate our successes so that we build momentum for additional achievements?</td>
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<tr>
<td>26. How do we learn from failures so that we avoid repeated mistakes?</td>
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</tbody>
</table>
• Establish a baseline for a future campaign to improve your institution’s quality culture and infrastructure. For this we considered the items above in the context of the Category Improvement Campaign chart’s “strategies for improvement” column.

EXERCISE 10: Discovering Root Causes

Objectives:

• To pinpoint underlying causes of one problem area in your institution’s quality culture and infrastructure. The problem identified by the group, based on feedback from the Quality Culture Survey, was motivating employees to “buy in” to and become involved with quality initiatives.

• To construct a fishbone diagram of causes that may be contributing to the challenge or problem. Categories (and “whys”) were defined as follows:

  Environment

  Resources ($, time)

  People (leadership, ineffective committees, professional development for action project teams, fear, change)

  Policies (compensation, department practices, tenure)

  Vision (not feeling like part of the big picture, leadership)

  MMS (assessment seen as punitive, assessment seen as someone else’s job)

EXERCISE 11: How Our Quality Improvement System Works

Objectives:

• Assess and capture key elements of your understanding(s) of quality and how they manifest themselves in your institution’s culture and infrastructure.

• Prepare a graphic that the team may use in Exercise 13 to share information about quality culture and infrastructure with peers. The graphic, which depicts a winding road, with obstacles and successes that define WNMU’s quality efforts since the early 1990s, is available for viewing in Danielle Moffett’s office. Martinez 255.

EXERCISE 12: Vision and Targets for Future Quality Culture and Infrastructure

Objectives:
• Conceptualize and capture a limited set of concrete goals for a campaign for improving the institution’s quality culture and infrastructure over the [next] few years.

• Gain insight on specific issues concerning conflicting notions of quality that participants identified during exercises 9, 10, and 11.

EXERCISE 13: Exploring How Other Institutions Improve Quality

Objectives:

• Learn about each institution’s current quality culture and infrastructure.

• Collect copies of other’s Quality Program Homework (for further learning). If you are interested in obtaining an electronic copy of this, contact Mary Billings or Danielle Moffett.

• Gain insight on specific issues identified during exercises 9 – 12.

• Share from reflections (“lessons learned”) homework. If you are interested in obtaining an electronic copy of this, contact Mary Billings or Danielle Moffett.

DAY 3 – November 19, 2010

EXERCISE 14: Strategies for Quality Improvement

Objectives:

• Define actions required to close the gaps between your vision and the current reality of your Quality Culture and Infrastructure.

• Brainstorm to generate ideas and use multivoting to reduce a set of ideas to a manageable number.

• Learn from others and help them learn from you.

EXERCISE 15: Drivers and Restrainers to Improvement of Culture and Infrastructure

Objectives:

• Identify key elements of the culture and infrastructure you are trying to achieve through your quality program and the metrics that will help you assess your programs.

• Practice conducting a Force Field Analysis to identify factors that will help you or deter you from achieving your vision. The team’s force field analysis is below.

WNMU Force Field Analysis
Goal or ideal state: CREATE A CULTURE OF ASSESSMENT

Success indicators or measures: CLOSE LOOP: SHOW RESULTS

<table>
<thead>
<tr>
<th>Enhancement Strategies</th>
<th>Drivers</th>
<th>Restrainers</th>
<th>Reduction Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan &amp; implement a process for creating &amp; sustaining a culture of assessment</td>
<td>Senior leadership</td>
<td>AQIP language</td>
<td>Identify key measures</td>
</tr>
<tr>
<td></td>
<td>Need to prioritize / reallocate resources</td>
<td>“Key measures” not identified</td>
<td>Teach everyone</td>
</tr>
<tr>
<td>Communicate reason for funding this &amp; results</td>
<td>AQIP accreditation results</td>
<td>AQIP language</td>
<td>AQIP language; simplify/define for greater understanding (AQIP = QI)</td>
</tr>
<tr>
<td>Results as part of budget preparation presentation</td>
<td>External mandate &amp; assessments</td>
<td>Communication system</td>
<td>Communication at start, in progress, &amp; at end of project; communicate successes (micro &amp; macro); program prioritization</td>
</tr>
</tbody>
</table>

Funding in general

EXERCISE 16: Planning for Continuous Quality Improvement

Objectives:

- Develop specific plans to:
  - Improve your quality infrastructure
  - Fully engage all of your faculty and staff
  - Sustain continuous quality improvement
  - Create the quality culture to which you aspire
  - Measure the effectiveness of improvements

<p>| ACTION PLANNING TEMPLATE |</p>
<table>
<thead>
<tr>
<th>Action/Milestone /Deliverable</th>
<th>Lead</th>
<th>Due Date</th>
<th>Measure/Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>QI training/reference manual (clarification of language; expectations; action project vs. committee behavior, etc.)</td>
<td>Mary &amp; Danielle</td>
<td>Fall 2011</td>
<td>Team mission accomplished continuously</td>
</tr>
<tr>
<td>Communication plans for implementation &amp; roll-out of MMS</td>
<td>Measurement Team</td>
<td>Spring 2011</td>
<td>Employee satisfaction at Convocation this year &amp; in 2 yrs.</td>
</tr>
<tr>
<td>MOE inventory online (Phase I) – ID key measures; align with Systems Portfolio; hire cataloger</td>
<td>Measurement Team</td>
<td>April 1, 2011</td>
<td>Completed; signed off by Dr. Counts; used</td>
</tr>
<tr>
<td>Data warehouse (Phase 2)</td>
<td>Measurement Team</td>
<td>April 1, 2011</td>
<td>Completed; signed off by Dr. Counts; used</td>
</tr>
<tr>
<td>Align with Strategic Plan</td>
<td>Kathie Gilbert; Strategic Planning Team</td>
<td>12/2010 and 1/2011</td>
<td>Transparency; buy-in</td>
</tr>
<tr>
<td>Alignment of operational plans with MMS/Systems Portfolio/Strategic Plan</td>
<td>Senior Leadership</td>
<td>Spring 2011</td>
<td>Integration, alignment, systems Portfolio revision facilitation</td>
</tr>
<tr>
<td>Re-write Systems Portfolio</td>
<td>Mary, Danielle</td>
<td>April 1, 2011</td>
<td>Integration with MMS; currency (ongoing); compliance</td>
</tr>
</tbody>
</table>

**EXERCISE 17: Next Steps**

**Objectives:**

- Understand AQIP requirements for participating institutions
- Understand applicability of tools and exercises to work that needs to be done when teams return home
• Celebrate learning and participation