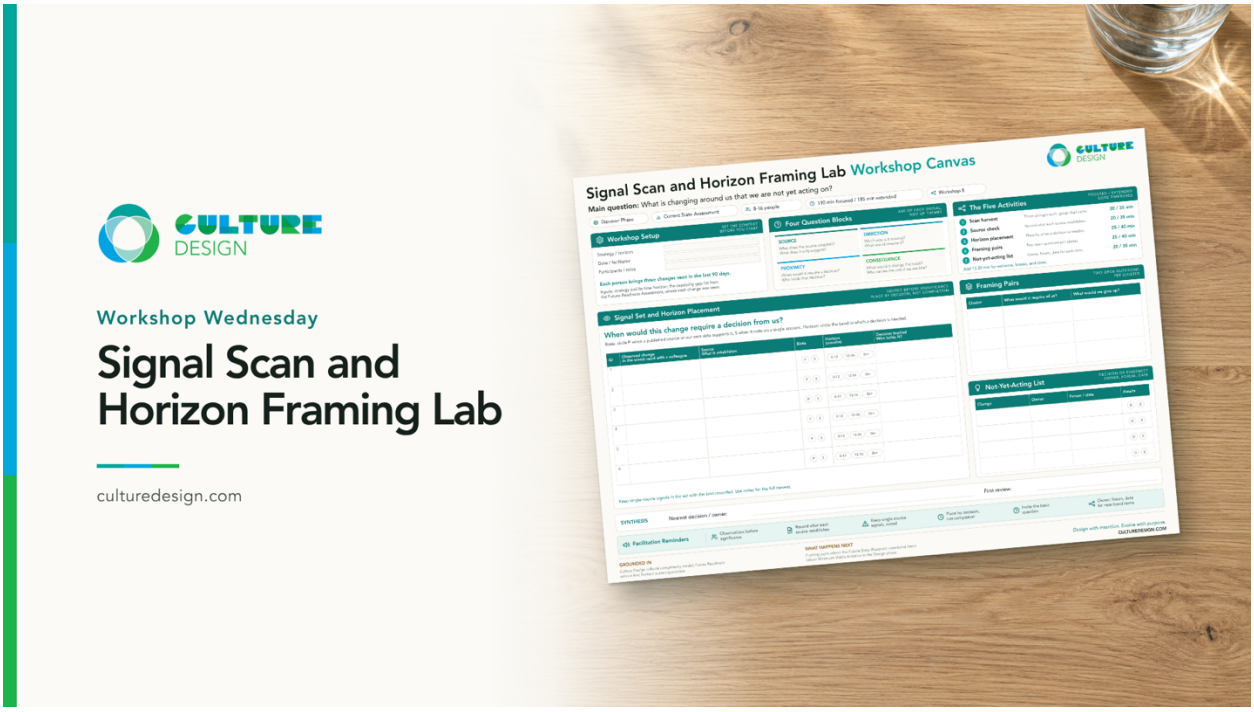
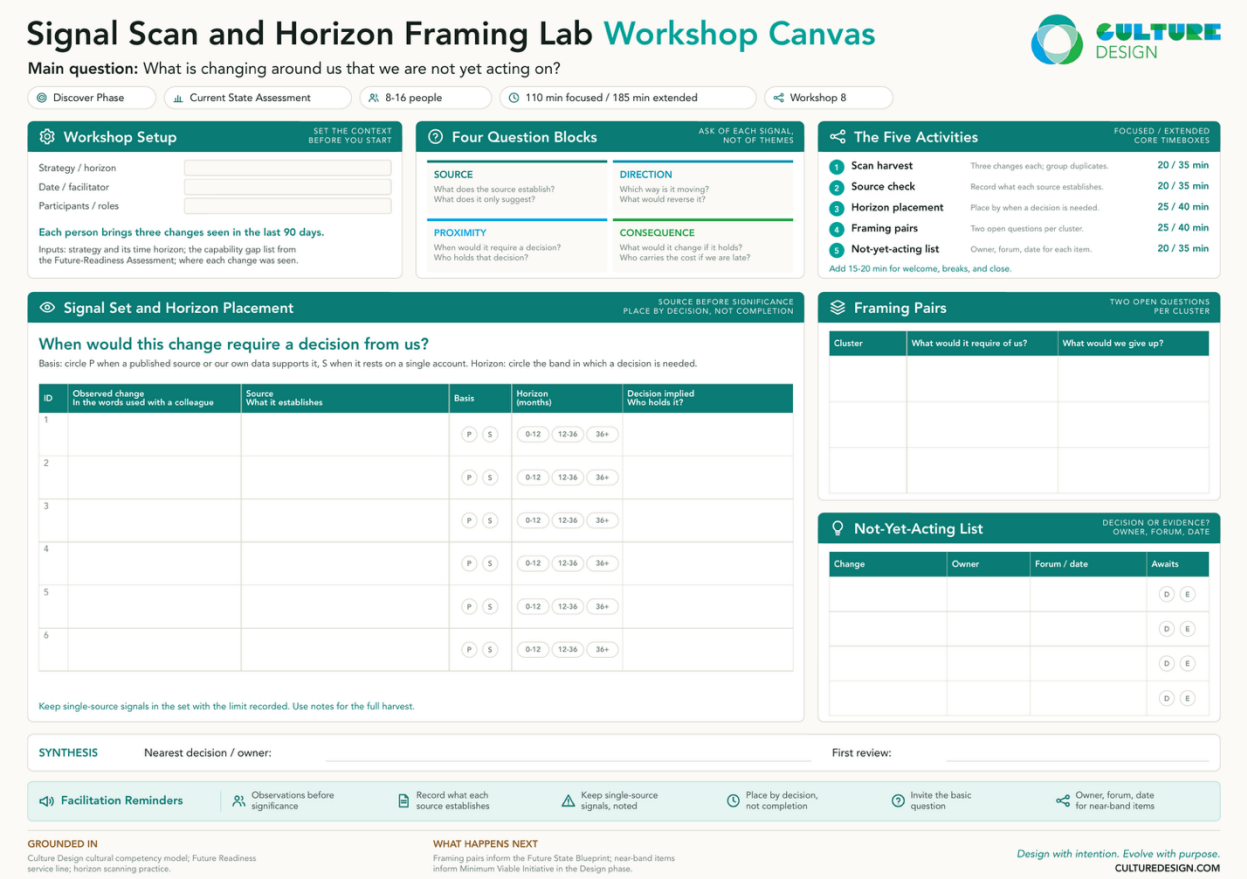
Signal Scan and Horizon Framing Lab

Workshop Wednesday | November 4, 2026 | Jason Burnham





Use the blank canvas to capture the discussion. Keep the full signal list and supporting notes alongside it so the evidence survives beyond the workshop. A completed example appears after the Kestrel Valley Health discussion.

We can know that something is changing and still fail to account for it in our strategy. Someone in regulatory affairs is following a consultation. A nursing lead sees vacancies taking longer to fill. A colleague returns from a conference with news of a payer's virtual-care pilot. Each person has a piece of the picture. Unless we bring those observations into a shared discussion about our decisions, responsibilities, and capabilities, we can continue planning around assumptions that people within our own organization already have reason to question.

This is part of the work of cultural sustainability. We need ways for people to share what they see, question what it means, and connect it to the choices we make. That includes observations we cannot yet explain. It also requires enough psychological safety for someone to challenge an interpretation that others have already accepted.

The *Signal Scan and Horizon Framing Lab* gives that work a structure. A signal is an observed change that may matter to your strategy. In this session, participants bring those changes together, examine the evidence behind them, and identify when the organization may need to respond. We are working with an incomplete picture. The purpose is to make our assumptions visible enough to test and our next steps clear enough for someone to own.

Main question: What is changing around us that we are not yet acting on?

Phase: DISCOVER - What is our current experience?

Participants: Eight to sixteen people, including commercial, partnership, regulatory, technology, and talent roles. Include two or three colleagues whose roles do not normally involve looking outside the organization. Their questions can help the group examine assumptions it has stopped discussing.

Timing: Allow 110 minutes for the focused activities or 185 minutes for the extended version. Add 15 to 20 minutes for the welcome, breaks, and close. These are suggested session timings.

Preparation: Bring your strategy, its planning horizon, and the capability gaps identified in the *Future-Readiness Assessment*. Ask each participant to bring three changes they have observed in the last 90 days, along with where they encountered each one.

Establish What You Know Before Deciding What It Means

The order of this conversation matters. If we begin by debating which trends are most important, we risk building the session around the strongest opinion in the room. Start with what people have observed. Then examine what the sources support. Only after that should the group discuss implications and timing.

A published consultation tells us what a regulator is consulting on. It does not establish what the final rule will say. A conference conversation may give us something worth investigating, but we still need to verify the account. Keep that distinction in the record. Once an observation becomes a bullet on a strategy slide, it is easy to lose the uncertainty that came with it.

Work through four sets of questions for each signal. Keep disagreements visible rather than forcing agreement before there is enough evidence.

1. **Source:** *Where did we see this? What does the source establish, and what are we inferring? Would someone outside this group read it the same way?*
2. **Direction:** *Which way is this moving, and over what period? What would have to change for it to reverse? Have we seen this pattern before?*
3. **Proximity:** *When would this require a decision from us? Who has the authority to make it? How long can we wait before our options narrow?*
4. **Consequence:** *If this continues, what would it change about our strategy? Which capabilities would we need? Who would carry the cost of a late response?*

Running the Lab

Activity 1: Scan Harvest

20 minutes focused / 35 minutes extended

Ask participants to share their three observations in the language they would use with a colleague. Combine obvious duplicates, but keep distinct observations separate. There will be time to interpret them. For now, give everyone a chance to contribute before the group decides what deserves attention.

When several people raise the same signal, ask when they first noticed it and who they told. That conversation may reveal something useful about how information moves through your organization. People may have raised an issue without knowing where it should go next.

Activity 2: Source Check

20 minutes focused / 35 minutes extended

Record the source for each signal and what it supports. Separate the observation from the interpretation. If a signal comes from one conversation, say so. If several accounts trace back to the same original source, record that too.

Keep signals with limited evidence in the discussion, with their limitations attached. Ask what would increase the group's confidence and who could find out. The point is to give people enough context to judge how much weight to place on each observation.

Activity 3: Horizon Placement

25 minutes focused / 40 minutes extended

Place signals in three bands within 12 months, 12 to 36 months, and beyond 36 months. Use the point when your organization would need to make a decision. A change may take years to unfold while requiring a commitment much sooner. For each signal in the nearest band, name the decision and the person or group responsible for it.

Keep likelihood separate from timing. We may be uncertain that a change will happen and still need to prepare for a decision about it. Record any assumptions behind the placement. Also distinguish the deadline for gathering evidence from the deadline for committing resources. You may need to verify something this month before you can judge when a larger decision is due.

Activity 4: Framing Pairs

25 minutes focused / 40 minutes extended

Group signals that appear to share a driver, making clear where that connection is still an interpretation. Write two questions for each cluster. The first explores what the change would require of the organization. The second explores what you might need to give up or reconsider.

Keep these questions open. A question about what a sustained workforce shortage would require of your staffing model leaves room to examine options. A question that assumes you need a particular technology has already narrowed the discussion. The framing pairs should help the team carry unresolved choices into strategy work.

Activity 5: The Not-Yet-Acting List

20 minutes focused / 35 minutes extended

Identify the signals that need follow-up. Some will require a decision. Others need more evidence before the group can judge what to do. For each item, record the next step, an owner, the meeting where it will be reviewed, and a date. Where evidence is missing, specify what the owner needs to find out.

Be clear about authority. The person responsible for investigating a signal may have no authority to approve a response. Record who can make the decision, who can influence it, and where it needs to go if the people in the room cannot resolve it.

Connecting the Discussion to the Work

The lab follows the *Future-Readiness Assessment* in DISCOVER. That assessment examines whether your organization is equipped to deliver its strategy. The lab examines changes around that strategy that may alter what you need to do. Bring the capability gaps into the discussion so participants can connect an external change to the tools, knowledge, and ways of working it would require internally.

The framing pairs then inform the *Future State Blueprint* in DESIGN. Near-term decisions can inform the *Minimum Viable Initiative* work. Keep the source notes attached to both. Whoever takes the work forward needs to know where the evidence is strong, where it is limited, and which assumptions remain unresolved.

After the session, circulate the signal list, horizon placements, framing pairs, and agreed follow-up. Flag single-source observations so they remain easy to identify. Schedule the first review within 90 days, with earlier reviews wherever a decision or evidence deadline requires one. Each owner should know what they are expected to bring back.

What This Looks Like In Practice

Kestrel Valley Health is the fictional regional health network used in the earlier workshop articles. All details, numbers, and commitments in this example are illustrative.

Kestrel's *Future-Readiness Assessment* identified gaps in scheduling tools, cross-clinic referral knowledge, and escalation routines. Its integration plan includes a goal of moving 20% of primary-care visits to virtual care. Twelve people join the lab, including leads from strategy, regulatory affairs, technology, nursing, and partnerships, along with two clinic managers whose roles do not normally involve external scanning.

The group brings 36 observations. After combining duplicates, 26 remain. These include a remote-monitoring consultation, a reported payer pilot for virtual-visit reimbursement, and several observations about nursing recruitment. One clinic manager has also noticed patients arriving after using an online symptom checker.

The source check gives the group a clearer basis for discussion. The consultation is published, with a stated comment period. The payer pilot comes from a single conference conversation and still needs verification. Three recruiters' accounts and Kestrel's own time-to-fill data support the nursing concern. The symptom-checker observation comes from one manager, so the group needs more evidence before treating it as a wider change in patient behavior.

Seven signals go into the within-12-months band. The consultation belongs there because comments close in five months. Kestrel needs to decide what position to submit before it knows the final outcome. Nursing recruitment also requires attention within that period. The group provisionally places the payer and symptom-checker signals in the 12-to-36-month band for potential operational decisions, while assigning evidence checks within the next month. Those placements will be revisited when the evidence comes back.

The discussion produces three pairs of questions.

1. Workforce: *What would a sustained nursing shortfall require of our clinic staffing model? What would we stop doing to fund the response?*
2. Virtual care: *What would remote monitoring require of our scheduling and referral systems? Which assumptions about the balance of virtual and in-person capacity would we need to revisit?*
3. Patient expectations: *What would it take to hear directly from patients about how they first seek help? Which assumptions about their first contact with Kestrel would we need to reconsider?*

The group agrees on four follow-up items:

1. The regulatory affairs lead will bring a draft consultation response to the operations committee within 60 days.

2. Leah Brooks, the fictional chief nursing officer, will bring a workforce scenario to the executive huddle within 60 days.

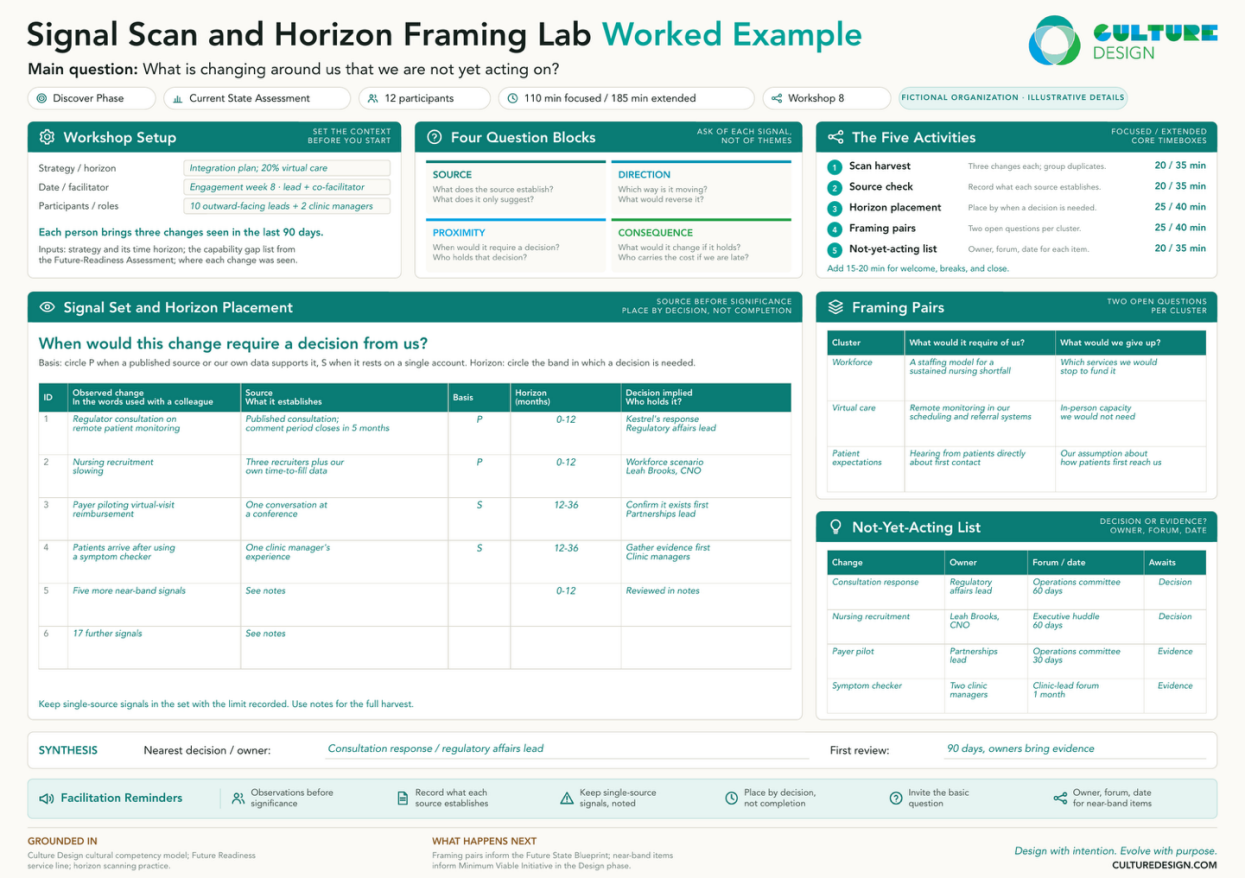
3. The partnerships lead will verify whether the payer pilot exists and report to the operations committee within 30 days.

4. Two clinic managers will record symptom-checker observations for one month and bring them to the clinic-lead forum.

That gives Kestrel two items preparing for decisions and two gathering evidence. The team also asks that the scheduling platform options already being developed account for potential remote-monitoring requirements. These are commitments made during a fictional session. No improvement in care, staffing, or performance has been demonstrated.

There is another finding worth keeping in the write-up. None of the 26 signals came directly from patients. The group has assembled what its own people see, through the sources they already use. That leaves a gap in how Kestrel understands the people it serves. Filling the canvas does not resolve that gap.

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Completed canvas for the fictional Kestrel Valley Health session. All entries are illustrative. The virtual-care capacity entry is an assumption to test, not an established reduction in need. The 12-to-36-month placements are provisional operational horizons; evidence checks are due within one month.

Before Your Next Planning Cycle

This lab draws on the Culture Design cultural competency model, particularly Cultural Sustainability and Common Purpose, and the Future Readiness service line. Its value depends on what happens after people share their observations. A completed canvas gives you a record of the discussion. You still need someone to investigate the uncertain signals and bring the resulting choices to the people who can act on them.

Start by asking participants for three changes they have observed in the last 90 days. Check the sources before placing them on a horizon. Name the owner, review meeting, and date for every item requiring follow-up before the session ends.