



On the Hospital Agenda: Developing Physician Leaders

By Laura Avakian

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Physician leaders need management skills to motivate their teams to provide quality care.



If a doctor works in any sort of leadership role, the odds are that he or she recently has attended a seminar on leadership, has an executive coach or has gone back to school for a master's degree in business administration. More physicians are becoming interested in developing their leadership skills, as they're recognizing not only a need, but a lack of these skills. As the chief medical officer of a Maine hospital stated at a workshop, "We are overeducated and underdeveloped."

Health care organizations are devoting considerable effort to identifying those abilities that are central to their success. And they are dedicating significant resources to assure that their key people possess these skills. In this highly competitive environment, leaders who motivate teams of skilled staff to deliver quality care and compassionate service keep patients at their door and reimbursement levels high.

Physician Leadership Is More Important Than Ever

Now that more than half of new physicians work as salaried employees, physician leadership is all the more important. As the need increases to improve clinical outcomes and lower the cost of care delivery, so does the necessity for administrators and physicians to create alliances and share resources.

Demographic and economic factors come into play. Given declining incomes and desires for a steady paycheck and regular hours, physicians find hospital jobs attractive. The hospitalist model is now well-entrenched, and physicians are landing hospital-based jobs in such fields as compliance, safety, information systems and administration.

All these trends point to the need for doctors to assume leadership roles, not just in those areas where they direct the work of other doctors, but in many facets of health care service.

What Physicians Need to Learn to Lead Effectively

In an April 2010 *Harvard Business Review* interview, "Health Care Needs a New Kind of Hero," surgeon and author Atul Gawande says, "We've celebrated cowboys, but what we need is more pit crews." Stressing that a doctor should lose his or her self-image of being a solo, all-knowing, lone healer, he notes that "most medicine is delivered by teams of people...yet, we don't train physicians how to lead teams or be team members. This should begin in medical school."

Also arguing for a divergence from the traditional curriculum for medical students, Michael Rosenblatt, M.D., former dean of Tufts Medical School in Boston, editorialized that learning to lead teams should be part of the students' experience: "Medicine has grown too complex and science too complicated. Now it is more critical for physicians to be effective collaborators with their colleagues and co-workers. Doctors must be both team members and leaders to serve their patients well." (See "Teaching the Future," *Tufts Medicine*, Vol. 68, No. 3, fall 2009.)

To improve patient care and satisfy the demands of health care reform, physicians need to demonstrate a number of skills that are critical to their organizations' success. In a recent survey of 4,000 physician and nonphysician health care executives, Morgan Executive Development Institute, in conjunction with the University of North Florida's program in health administration, identified 12 behavioral core competencies™ (press release, Navvis & Company, St. Louis, April 1, 2011):

- integrity
- trust and respect
- developing relationships
- leadership
- skillful communication
- conflict management
- judgment
- accountability

- collaborative facilitation
- motivating others
- strategic perspective
- adaptability

Not surprisingly, almost all these competencies relate to gaining the confidence of followers and being able to communicate effectively with them, helping them reach identified goals and resolving problems that get in the way.

While physician leadership is a hot topic these days, the issue has been important to some health care professionals for a long time. The MEDI research is consistent with findings from almost a decade ago in which doctors were asked to rate the competencies needed by physician leaders. The results, presented at a poster session (Mindi McKenna et al.) at the Medical Group Management Association's national conference in October 2003, included business knowledge as well as behaviors. Nine competencies were identified:

- interpersonal and communication skills
- professional ethics and social responsibility
- continuous learning and improvement
- ability to build coalitions of support for change
- clinical excellence
- ability to convey a clear, compelling vision
- system-based decision-making and problem-solving
- ability to address multiple stakeholders' needs
- financial acumen and resource management

Essentially, the competencies needed by physician leaders largely are about helping people see a vision of improved health care delivery, supporting them in their efforts to achieve it, doing so with integrity and adhering to standards of accountability.

David Fairchild, M.D., and health care consultant McKenna (who conducted the competency survey noted previously) offered this eloquent definition of effective physician leaders at a Society of General Internal Medicine conference in 2004: "[They] positively impact the health status of individual patients and health care overall by inspiring others to envision new possibilities and leading the way to make their shared vision come true" ("Leadership Development for Physicians," presentation at the SGIM annual conference, May 13, 2004).

Joanne Ayoub, who directs leadership development efforts for Boston's Beth Israel Deaconess Medical Center, compares doctors who are effective administrators with those who are not: "The differentiator is not the technical piece, but the interpersonal piece. They are able to build relationships across service lines beyond functional areas. They understand their impact on the whole system. They have a big-picture view."

Ayoub cites influence as a skill that's one of the most critical but hardest to teach. "It's about leaders putting themselves out there, being willing to take a stand, to ask for feedback."

How Physician Leaders Acquire These Competencies

The reality is that most physicians gain leadership savvy by observing both good and poor examples of other leaders. Many are fortunate to have mentors, either informally or formally. But for the majority, the learning comes from OJT—on-the-job training—sometimes referred to as "baptism by fire."

However, many educational resources are available to doctors. More than 50 MD/MBA programs exist, as well as a plethora of workshops, seminars and institutes, and a multitude of consulting firms offer individual coaches and management training for physicians.

As already complex health care organizations grow exponentially more complicated, their leaders realize they need to dedicate resources to the development of their physician leaders with internal programs. Some of these, such as the Cleveland Clinic Foundation, have been at this for many years and show a positive return on investment. (See "Physician Management and Leadership Education at the Cleveland Clinic Foundation: Program Impact and Experience over 14 Years," by James K. Stoller, Eric Berkowitz and Philip Bailin, in *Medical Practice Management*, Jan./Feb. 2007.)

Other organizations, like St. Mary's Hospital in Lewiston, Maine, are just beginning. Nicole Morin-Scribner, director of human resources, says: "Our physicians are committed to addressing a fundamental change in mindset. Forging dynamic partnerships between physicians and administrative leaders, at all levels of the organization, is the key goal of our initiative."

Developing the competencies of physician leaders is not "management by best seller." It is the serious work of health care organizations that realize their future success lies in the hands of skilled leaders who motivate high-performing teams to deliver unparalleled patient care.

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Susan Douglass

Laura could not have said it better. These competencies have not been taught and are still not a big focus during medical school or residency. They are the competencies that in many ways are as key to success as clinical competencies. It is time folks get serious about developing physician leaders.

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