

Physicians as health-care leaders

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Facts about KAUH

- Large hospital, 600 beds, opened 2002
- University teaching hospital
- 40 miles north of Amman
- Residency programs for Jordan and Arab boards
- Accreditation: ISO, 2005
Haccp, 2009
JCI, 2009

Leadership is the art of getting someone else to do something you want because he wants to do it.

Dwight Eisenhower

Leadership and management

- Kotter (1990) **Leadership and management** are two distinctive a complementary systems, each having its own function and its own characteristic activities, but both are necessary for the management of complex organisations.
- Kotter (1990) **Management** is about planning, controlling, and putting appropriate structures and systems in place, whereas **leadership** has more to do with anticipating change, coping with change, and adopting a visionary stance.

Leader vs. Manager

Subject	Leader	Manager
Essence	Change	Stability
Horizon	Long-term	Short-term
Focus	Leads people (followers)	Manage work (subordinates)
Style	Visionary, sets directions, facilitates decision taking	Objectives, Plans details, makes decisions
Appeal to	Hearts, passion	Brains, tries to control
Power	People	Given authority
Wants	Achievement for happiness	Results for money
persuasion	Sell	Tell
Risk	Takes risks	Minimizes
Rules	Breaks rules	Makes rules

Physicians as Leaders

*Discovering
the Leader
Within Yourself*

Are All Physicians Leaders?

Permanente physician-leaders opinion

- All physicians are leaders regardless of previous titles
- To be respected by colleagues as leader, he should be a good clinician, other staff view a physician just because he is a physician
- Physician lead by example good or bad
- They do not realize that they are seen as leaders by staff and therefore unaware of their impact on other staff attitude and behavior
- Physicians usually do not step up to their roles as leaders and therefore do not model up the most effective behavior for the staff
- Physician-leaders roles are mostly the same at all levels, what changes are the complexity, scope, authority and responsibility

Debra Mipos, health systems, the Permanente Journal ,2002

Characteristics of Leadership

- Leaders change things (assesses current position, look ahead, recognize need for change)
- Leadership is an action not a job, sets good example
- Leadership is proactive
- Leaders define reality often with data
- Leaders develop and test the change
- Leaders takes courage and not daunted by negative voices(listens to all, takes action despite criticism)
- Leaders persuade
- Leaders do most of their work outside their area of responsibility

The Five-Star Doctor

An Asset to Health Care Reforms

- Care provider
- Decision-maker
- Communicator
- Community leader
- Manager

Dr Charles Boelen, WHO, Geneva, Switzerland

Physicians as leaders, Overview

- In the past, most hospitals were lead by doctors.
- Currently in UK & US, most hospital CEOs are non-clinicians managers.
- Women clinician leaders are even less likely to see
- Debate over hospital CEOs, should be clinicians or not
- Many reports suggested that placing physicians into leadership can result in improved hospital performance
- Clinicians often lack formal training to become leaders in all curricula
- Calls for inclusion of management & leadership into medical training (Mayo, Cleveland, UK)

When Physicians Lead

Interviews and workshop of nearly 100 professionals:

- Skepticism about value of spending time in leadership vs treating patients
- Weak or negative incentives
- Little provision for nurturing of clinical-leadership capabilities, leadership is absent from curricula at all levels of training

Mountford J et al, McKinsey quarterly, 2009

Time for revolution- The role of clinicians in health care reforms

Valuable lessons from the NHS:

- High quality care is driven by clinical leadership, best evidence and innovation
- Clinicians to inform and lead the change
- Clinicians need to define the link between funding and care provided
- Clinicians need to educate policymakers and public about appropriate level of care
- Best outcome achieved when a system is built on partnership between clinicians and patients

Ara Darzi, New England Journal of Medicine, 2009

The Top-100 US Hospitals in the treatment of Cancer and their Leaders

Number of Clinical leaders	51
Number of Non-Clinician leaders	49
Clinician leaders in top-50 hospitals	33
Clinician leaders in the bottom-50 hospitals	18
Mean hospital performance score for cancer (max 100, Min 19.30, SD = 12.6)	28
Mean performance score for hospitals led by clinicians (max 100, Min 19.30, SD = 16.29)	31.63
Mean performance score of hospitals led by managers (max 40.4, Min 19.30, SD = 4.18)	23.61
Mean of hospital beds (SD = 361)	652
Number of female leaders	15
# Hospitals	n = 100

Skills necessary for a physician to be an Effective leader

Organizational behavior-based skills

- Motivation of followers, content or process
- Effective communication
- Team building
- Conflict management(task conflict good, affective personal bad)
- Culture development

Analytical skills

- Risk analysis
- Quality control
- Financial expertise

Joseph Chaudry et al, Journal of Surgical Education, 2008

Physician -Leaders and the Mantle of Leadership(how is he given power?)

- Receives the mantle on the basis of belief that they have excellent characters
- Physician-leaders feels the needs of their colleagues
- It is the physicians whom you manage who will give you the power
- Bad side about this mantle is the high expectations of him to serve their interest, colleagues may retract support if interests were not met.
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Reinertsen J, Annals of Internal Medicine, 1998

What a physician should do when asked to lead

Step back and evaluate

- whom do you serve?
- what is the main service? how it is provided to customers?
- are all staff pointing to the same direction? Is there friction at interfaces?
- how does your system fit into the larger system and the community health system?

Reinertsen J, Annals of Internal Medicine, 1998

What a physician should do when asked to lead

Know your customers

- Listen to them, they pay for your service, bring them and get the accurate picture and respond appropriately
- Physician leaders have good knowledge of physician-patient relationship, best leaders bring patients' perspectives to all discussions
- This knowledge will ensure that your change is in line with what your customers needs

What a physician should do when asked to lead

Establish alignment towards a shared aim

- Should use different strategies with staff to establish this alignment
- Involve others to articulate this aim
- Alignment should be translated to policies and actions

What a physician should do when asked to lead

Become process literate

- Operationally aware so you know your people, the work they do and the customers you serve (become close to them and gain credibility)
- Evaluate existing process, how is it performing? is it smooth? how will this process perform next time?....

What a physician should do when asked to lead

Balance playing and coaching

- Be sincere and speak from the heart
- you may solve problems but ask your staff to do so (coaching)
- Leadership does not offer solutions
- Enable people to see the problem and give solutions
- This allows continuous improvement

What a physician should do if asked to lead

Improve your knowledge

- Reading, seminars, courses
- Learn from successful leaders

“I raised my hand to every body”

What a Physician Should do When Asked to Lead

Drive out fear

- Make it clear to your staff that you are interested in truth, even if it hurts
- That you are not looking for someone to blame, blame processes not individuals
- Develop compensation, performance feedback and other policies that your staff will be tempted to distort data

Leading and following

Followers must:

- Participate
- Be candid, tell leader what you think
- Maintain positive outlook, contribute to solutions
- Be respectful, attack ideas not persons
- Be responsible, don't expect leaders to solve all problems
- Be a team player and accept others ideas

Physician leadership strengths

Physicians, possess some very positive characteristics that they bring to the leadership table:

- Decision-making skills. They typically have high self-confidence and are accustomed to making tough, even life or death, decisions
- Physician-leaders feels the needs of their colleagues and other staff
- physician are respected for clinical skills, he/she will be more effective with other members of the medical staff
- Physician leaders understand what needs to be done clinically. They are able to prioritize the development of clinical services and requirements for new technology

Special Challenges Encountered by Physician-Leaders (pitfalls)

- Critical thinking of physicians (judgment and caution) if dominates this will delay change
- Instead of being partners, tension between physician leaders and colleagues can occur, this will sabotage real improvement
- The compartment or the whole(best answer to patients)
- Leaders must occasionally use power, physician leaders hesitates to violate colleagues professional autonomy, if power is not used when needed quality will deteriorate

Women Physician as Leaders

- Underrepresented, why?
 - Less likely to be asked
 - They do not have less skills
 - Do not have mentors (not necessarily women mentors)
- Women presence at policy tables in medicine is likely to add value to discussion and outcome, women make the majority of health decisions for their families (Janet Bickel AAMC)
- Women bring different perspectives than men do to public policy issue (Morhan and Bickel)
- The policies that women advocate are not just beneficial for women but for society as a whole (Judy Erola, former Canadian federal minister)

May Cohen, presented to WONCA, Orlando, 2004

Summary Points and Recommendations

- For increasing health-care demands and to keep pace with health-care economy, physicians must assume leadership roles
- When physicians assume leadership, they can substantially improve health care
- Most physicians are leaders or have the potentials to become productive leaders
- Leadership skills are not innate, they can be learned
- Leadership skills are lacking in all curricula
- Academic institutions, health organisations should cultivate the skills of leadership

Clinical Leader of Tomorrow

Must possess a strong background of medical and managerial expertise to develop and to shape policies in ways that insure the highest level of patient care in years to come otherwise physician will become technical consultants in a dysfunctional healthcare community

Chaudry J et al, 2008