## **Medical Staff Leadership**

How Physicians and Advanced Practice Providers Can Succeed in the SOMC Leadership Culture

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**SOMC Leadership Learning System<sup>™</sup>** 

Southern Ohio Medical Center

Very Good things are happening here

#### Introduction

Every physician and advanced practice provider (APP) on the Southern Ohio Medical Center (SOMC) medical staff is a leader, whether they realize it or not. These clinical leaders set the tone for their teams and profoundly influence their workplace culture. This reality means that organizations must carefully select their medical staff members for leadership potential and cultural fit. We must clarify our mutual expectations and hold each other accountable for meeting them. And we must give our medical staff leaders the training and support they need to succeed. For these reasons, we engage our new medical staff members in the SOMC Leadership Learning System (LLS) during their first executive interview.

Many medical staff members want a leadership title, but few want to embrace the challenges that leadership demands. They want the positional authority that will allow them to feel important, tell others what to do, and get their way. These are not the sort of medical staff leaders we need. We need leaders who are passionate about producing and sustaining exceptional organizational results; leaders who understand it is not about them. We need leaders with servant hearts, committed team players who understand they cannot accomplish their goals without others. We need physicians and APPs who take satisfaction in helping others succeed without taking any credit for their success. We need selflessness, not selfishness. Only servant-hearted, respectful team players can excel in the SOMC leadership culture.

What follows here is an annotated playbook for medical staff leaders who wish to succeed in our leadership culture. These practical strategies will help our clinical leaders adopt more effective leadership beliefs and behaviors—despite how they feel.

Most medical staff members will not seek *formal leadership positions* because they want to focus primarily on their clinical work. We accept and appreciate that focus. The following strategies will help them lead their clinical teams more effectively.

### Prepare for Your Initial Interview

If you expect the typical medical staff interview at SOMC, you will be surprised. You will find our rigorous interview process unusually challenging and energizing. You will want to come prepared. If we decide to invite you to interview at SOMC, you will meet with the entire executive team as a group. To give you a chance to prepare adequately, we will send you the following email invitation before your visit.

Congratulations on being invited to interview for a position on the SOMC medical staff team. The invitation to interview means that our recruiters have concluded that you may have the motivation and servant heart to succeed here. Thank you for your interest in joining our high-performance team.

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The purpose of this email message is to give you a practical idea of some of the questions you can expect during the interview process. We have organized the SOMC enterprise around five strategic values: *Safety, Quality, Service, Teamwork,* and *Finance*. Every department and all medical staff members follow comparative performance metrics that support each of these values. Unlike most hospitals, patient-centered perfection on those measures is our goal; we intend to be the best.

At some point during your interview process, you will meet with several SOMC executives and other leaders to discuss your perspectives and performance related to these strategic values. The paragraphs that follow will clarify our expectations and help you prepare to respond meaningfully to our questions.

#### Safety

We understand that every provider believes he or she is a safe practitioner. What individual, comparative performance data do you have that proves you really are a safe clinician? What are your complication rates? What are your infection rates? How do your rates compare with nationally published rates? What are your documented handwashing percentages? What other meaningful patient safety metrics do you use to monitor your performance? How will you help us sustain and improve the SOMC safety culture? How do you live out your passion for safety in your personal and professional lives?

#### Quality

We aspire to provide the best possible care to our patients. What individual quality metrics do you follow in your specialty? How does your performance on those metrics compare with your specialty peers? What performance improvement projects have you led or participated in? What improved patient outcomes have you achieved? How is your quest for quality reflected in your professional interactions with your patients and colleagues?

#### Service

We take exceptional customer service very seriously here. What are your patient satisfaction scores as a percentile rank in a national database? What are your patients saying about you on the Web? How many complaints have your patients filed about you in the last year? What were they? How did you respond?

#### Teamwork

Once each year, at SOMC, we ask each employee to rank every medical staff member with whom they have worked in the past year on this statement: "This provider is a respectful team player." We then percentile rank every provider based on the percentage of those who respond, "Strongly Agree." What is your percentile rank on a similar tool in your institution for the past two years?

#### **Finance**

We expect our physicians and APPs to produce at the Medical Group Management Association (MGMA) 75th percentile for their specialties. What productivity measures can you provide that document your strong work ethic? What comparative data demonstrates that you are an organized, efficient, cost-effective clinician? How can you prove your clinical documentation is accurate and timely?

We work and serve in a challenging environment, and our organizational culture is demanding. But we take great pride in being one of the best places to work in America. If being a part of an exceptional team of professionals passionate about pursuing patient-centered perfection is your goal, you may be just the person we are looking for—and SOMC may be just the organization you are looking for.

In summary, successful SOMC physicians and APPs are positive, highly-motivated, and passionate about achieving and sustaining exceptional results. They are respectful team players who expect to receive regular feedback about their comparative performance on safety, quality, service, teamwork, and productivity. If you can provide comparative data demonstrating you have already produced exceptional results in these areas during your interview process, you will be a more attractive candidate.

We look forward to discussing your professional objectives and comparative performance metrics in more detail when you visit.

Leadership is about persuading yourself and others to do what needs to be done—despite how you feel. Anything else is just pretending.

#### **Focus on Results**

Leaders are just like everyone else. We want to do what we want to do when we want to do it. We want to do it the way we want to do it. We want others to tell us how wonderful we are—especially when we are not. We do not want to be held accountable for results. Even worse, we resent being held responsible for outcomes we cannot personally control. Welcome to the medical staff leader's world. When we hold ourselves accountable, we invite others to blame us when things go wrong. And people will gladly take us up on that offer. Blaming others is one of everyone's favorite distractions.

Leaders exist for one reason—results. You might as well face this from the start. If you understand that the point of your existence is to produce results, you will avoid the most common mistakes new medical staff leaders make. Leadership does not consist of showing up to meetings and sharing your perspective with grateful colleagues. Leadership is about persuading yourself and others to do what needs to be done—despite how you feel. Anything else is just pretending.

Ask your colleagues what results they expect to produce. Most organizations have deployed scorecards or dashboards that contain performance indicators that matter to the organization. Ask your colleagues exactly what you can do to help, but don't stop there. Be innovative. Figure out new and different ways to produce results your colleagues haven't considered. Bring something new to the table.

**Decide who will be critical to your success.** Remember, the pursuit of organizational excellence is a team sport. You can accomplish nothing as a leader by yourself. You need people. You don't need everyone, but you do need the right ones. The sooner you figure out who they are, the better.

Figure out how to help other people succeed. Your success as a leader will ultimately be measured by the success of others. You will be most successful as a leader when the people you are persuading convince themselves that it was their idea all along.

#### **Explain How**

There are several reasons you may be reluctant to explain. As a physician leader, you are surrounded by bright, highly motivated people. You may think you do not need to explain how to do things. You may think you will insult them if you do. You may think the people around you are the experts and that they can and should figure this out on their own. You may not have seen a leader do this before. You may conclude that leaders don't need to bother themselves with this kind of detail. But the most common reason you will hesitate is that you just don't feel like doing it.

Get over it. Most people will want you to recommend what to do next. They want leaders to provide them with a detailed roadmap. Some enjoy figuring out what to do on their own, but they are a distinct minority. Once you have outlined some suggested next steps, your colleagues will eagerly make suggestions for improvement. Still, they will likely adopt your suggestions about how to proceed if your recommendations are practical, doable, and make sense.

**Build a strong consensus for the results you want to achieve first.** If you begin discussing what to do next before you have agreed on the desired outcome, everyone will eagerly offer perceptions, ideas, and suggestions that will lead nowhere. People will quickly become confused and frustrated.

**Suggest some next steps.** These steps will become the process outline for achieving your goals. If you have thought these steps through carefully, they will be obvious, and people will accept them with relief.

\*(|8f4 \*f0,47)-34£\* f) \*-664\*f 0338f8)(0- \*f45£\* 8( f74 \$£)24£\*. People want to help decide what to do next, but they do not want to go out on a limb or do the heavy lifting. Some excellent ideas will emerge during this phase of the discussion, and everyone will start to feel committed and confident. Everyone now knows what to do and how to do it.

**Clarify who will lead the completion of each step.** Until someone is accountable for getting something done, your team is only indulging in wishful thinking.

**Agree on a deadline.** Motivated people like deadlines. Deadlines help us set priorities. We want to participate in developing the deadlines, and we need to see them as reasonable and achievable. But most of us enjoy the satisfaction that comes from delivering the goods on time. We also relish the feeling of "checking the box" and moving on to the next challenge.

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#### Become a Respectful Team Player

We are accustomed to being in charge. We are the experts. We give the orders, and people carry them out. That's the way we like it. Becoming a team player requires us to admit we are dependent on others. Other team members have the expertise, experience, and skills we don't possess and desperately need. Interdependency is an uncomfortable position for leaders who have convinced themselves they already know everything that matters. Arrogance is the insecure leader's preferred coping strategy. Sadly, everyone but the leader sees right through it.

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Teamwork does not automatically materialize because a group of people decides to become a team. It is always the result of some problem you cannot solve in any other way. When you focus exclusively on the results you want to achieve, you will realize you need help.

But people can only help you if you let them. If you are condescending and dismissive of their perceptions and suggestions, they will quickly lose interest in helping you with your problem. If you ask people for help and show them the respect they deserve for their efforts, they will often go to great lengths to help you achieve exceptional results. It's very satisfying. The chance to be a part of a winning team is the reason why leaders become leaders.

## *Identify a problem you cannot solve by yourself.*There are plenty of these. You will need help with most of the challenges in your professional life.

**Engage your teammates.** Make everyone comfortable by asking clarifying questions and actively listening to their opinions. Welcome their disagreements and challenges, and thank them for sharing their perceptions.

**Pull your weight.** Show up on time, and be prepared. Pay attention during the meetings, and keep professional interruptions to a minimum. Follow through on what you say you will do.

#### **Manage Conflict**

Most of us avoid conflict. Everyday conflict, the kind accompanied by raised voices, jaundiced perceptions, and unreasonableness, is unpleasant. Even those leaders who pride themselves on being plainspoken are more inclined to speak frankly about their colleagues instead of directly to them.

Medical staff leaders cannot avoid conflict. Complainers will bring it to you. No matter what decision you make, someone will be upset. Not making a decision will upset others. And chronic, unresolved conflict will drive your best people away. Since you cannot avoid conflict, your only choices are to manage it well or manage it poorly.

**Prepare for it.** Interpersonal conflict is inevitable. While people sometimes behave selfishly, unintended slights wound thin-skinned colleagues. People have genuine differences of opinion. We all want others to meet our expectations, but they often fail to do so. All of this produces conflict, which may turn out to be destructive or constructive. Unmanaged, it is usually destructive.

#### Move quickly to contain destructive conflict.

Nothing good comes from disruptive behavior. This unpleasantness is what comes to mind when you first think of workplace turmoil. When angry, people say and do things that can never be undone. If you have the opportunity to intervene during an outburst, you can sometimes prevent lasting scars.

**Calm yourself and others.** Emotional arousal limits everyone's ability to think and behave rationally. When you are the first-responder to some recent outburst, insisting on a cooling-off period is usually the most helpful next step.

Listen objectively to both sides. This tactic is just common sense. And like most common sense, it is not very common. When you assume the investigator role, you are taking charge of the problem. If you investigate deliberately and promptly then take the appropriate action, you will manage conflict better than most organizational leaders.

## **Eliminate Disruptive Behavior**

Few of us look forward to spending time with people who are loud, obnoxious, and angry. It's one thing to watch these folks make fools of themselves on a television reality show; it's another thing entirely to deal with them in the workplace. Medical staff leaders ordinarily serve people who are grateful for their service, but disruptive people don't want your help. They only want their way. They are not glad to see you coming, and they will make that clear. Managing disruptive behavior is like unclogging the sewer. No one wants to do the work, but everyone wants to get the job done.

Unfortunately, managing disruptive behavior is a big part of the leader's job—especially when the person behaving is another leader. Because of the power differential, a raging medical staff member is an organizational emergency. As a leader, you are the designated dragon slayer. It goes with the territory. Get used to it, and become an expert at it.

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**Show up in person if possible.** This effective dampening technique is usually not possible. Bad actors rarely misbehave in the presence of their superiors. They mostly show themselves in situations where they are confident no one will challenge them.

Launch an immediate investigation. You will likely first hear of an outburst through a complaint. Talk to everyone who was involved, including the person who allegedly misbehaved. Do not jump to conclusions. Listen to all sides. Do not offer your opinion until you have completed your investigation.

Follow a process that is consistent, fair, and firm.

Most organizations have written policies for managing disruptive behavior. Familiarize yourself with that process before you need to use it.

#### **Hold Yourself Accountable**

You may think you are special. Most humans do. From the moment a medical professional attains a position of power and authority in the organizational hierarchy, the temptation to feel entitled and behave accordingly is always lurking inside your head. When you see other bigwigs getting away with behavior that leaders would not tolerate in others, that confirms it. The rules apply to lesser mortals. Why should you hold yourself accountable for your behavior when no one else does?

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Medical staff leaders set the tone. People will look to you as an example. Even those who regularly misbehave themselves will watch you. They will look for evidence of your hypocrisy as an excuse to keep on misbehaving. They will reckon that you cannot hold them accountable for behaving the same way you do. Since you must prepare to confront your colleagues when they misbehave, your failure to hold yourself responsible for your own behavior will undermine your credibility and influence.

**Review SOMC's Code of Conduct carefully.** Be honest with yourself. How do you measure up? Do you behave the same way when no one is there to notice?

#### Seek out colleagues who will tell you the truth.

Ask them if you are practicing what you preach. Ask for specific examples. Resist the urge to be defensive when they point out your shortcomings. Thank them for doing you the service of being honest. Ask them to keep the feedback coming.

**Review our** Expectations for SOMC Leaders. This aspirational document describes how we intend to treat each other here. While we sometimes fail to live up to our expectations, we use these principles to hold each other accountable for our leadership failures.

#### **Manage Your Feelings**

We all have feelings. Most of us take them too seriously. People, including leaders, usually let their emotions rule their lives. Accustomed to letting our feelings dictate how we respond in every circumstance, it may never occur to us that we cannot always trust these powerful urges. We are all inclined to go with our gut. Managing our feelings is hard. It's easier to go with the flow even when the emotional current is pointing us in a dangerous direction.

Others will look to you to help them deal with their feelings. Learn to deal with yours first. If your feelings are always yanking your chain, you will not be able to recognize others' feelings, understand them, and help them put them in perspective. People who are upset look to leaders to help them manage their internal turmoil. If you are upset, too, you will only make matters worse.

**Recognize your feelings before you act on them.** You must first be comfortable in your own skin. If you've fallen into the habit of ignoring your feelings, you will need to make some significant changes. Even the least guarded among us will find that identifying, accepting, and understanding our emotions before we react demands arduous self-discipline.

Wall them off for the moment. Once you recognize your feelings, you can temporarily put them aside while you respond to how others feel. We all do this to some degree as a way to get through our daily lives. Successful leaders do it more frequently and effectively.

When you have a free moment, examine the feelings you have temporarily shelved. Identify them, face them squarely, and accept them as legitimate. Look for what triggered them. Accept the discomfort they bring and the insight about your underlying beliefs they reveal. Resist the urge to act impulsively. Feelings urge us to act. We often respond before recognizing our underlying emotions and before we have considered our options. Remember, doing nothing is always an option. And in an emotional storm, it is often the best option.

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#### **Grow a Thick Skin**

Medical staff leaders are accustomed to being admired and indulged. This coddling makes us soft. Any criticism, whether real or perceived, justified or not, spooks us. Having watched our colleagues wither or throw hissy fits in response to minor slights, we know how thinskinned most of us are. Since we need each other to take care of our patients, we grow accustomed to handling each other with kid gloves, and in the process, we become painfully sensitive ourselves. Surrounding ourselves with people who always defer to us is not conducive to becoming a mature, resilient leader.

People will criticize you whether you do the wrong things or the right things. You will do some of both. If you become tough enough to accept criticism as valuable feedback, it will energize you instead of paralyzing you.

Complaints will be among the first signals that you have made a mistake. Respond quickly, and you can recover without lasting damage. Toughened from all the hits you've taken in the past, you may reasonably conclude that the current flak is nothing more than the carping of those dislodged from their comfort zones. You can then take some deserved pleasure in knowing that you are an effective leader. Criticism can be very gratifying.

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**Recognize that it is inevitable.** Get ready. Remind yourself that criticism does not necessarily mean you have done something wrong.

**Predict it.** When you are about to take some action, decide what your critics are likely to say. This simple step may permit you to defang their criticism upfront.

Consult with trusted colleagues. There is no need to endure criticism you might have avoided by running your idea by your colleagues first. Your real friends will tell you the truth. They may suggest an approach that will trigger less resistance. Take such counsel very seriously.

**Accept the criticism.** Whether good or evil-intentioned, acknowledge it. Avoid being defensive. Make it clear that everyone is entitled to an opinion. Encourage debate as the best way to identify the best option. If your critics have a good point, acknowledge that. If they are unreasonable, press on despite their attacks.

**Don't let your hurt show.** Criticism is painful, but it becomes a lot less so over time. Don't take it personally, even when it is. If you train yourself to tolerate the discomfort, criticism will help you build up the emotional calluses you will need to lead effectively.

#### **Get Things Done**

There are only two ways to get something done. You can do it yourself, or you can persuade someone else to do it. Medical staff leaders have the same challenges with personal motivation and efficiency as everyone else. During our training years, we usually adopt two other bad habits that interfere with accomplishing our goals. First, we cannot possibly do everything for our patients. We must depend on others. This reality tempts us to expect others to do everything for us. Second, leaders regularly assume that their job is talking about what needs to be done. It is not. Talking is never as important as doing. But it is a lot easier.

The nice thing about talking is the comforting delusion that someone is listening. Actually, people are rarely listening. Pretending listeners are just waiting for their chance to talk. The most effective leaders listen more than they talk. They understand that most of their colleagues love to listen to themselves. Listening to them is the easiest way to allow them to feel special. If you don't encourage people to feel special, they will not help you get the work done.

After you have engaged them by listening respectfully, roll up your sleeves, and lead by example. Even the slackers will be inclined to mosey along with you when you do. As a leader, that's how you will get things done. Don't forget that leaders exist for one purpose—to get things done.

**Decide on the results you want.** You can clarify this by listening to your colleagues drone on about what other people ought to do. After listening quietly for a respectful time, ask this question: "Exactly what result are we trying to achieve here?" Knowing what you need to do is usually not the hard part. Doing it is.

Figure out the steps that will take you there. You can start making a list while you are listening to others beat around the bush. When you offer your plan, you will be amazed that no one else in the room has thought that far ahead. Most leaders show up to meetings and talk about what's on their minds. Influential leaders concentrate on what to do next while others are wishing and hoping.

**Assign the most challenging next steps to yourself.** Be the first to sign up. By your example, nudge others into giving up the degenerate pleasure of armchair quarterbacking for the bruising joy of being a player.

**Ask others to make specific commitments.** Only after you have taken the lead can you reasonably expect others to join you. Don't leave the meeting without an active task list. Take names. Agree on timelines. Get their commitments on the record.

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#### **Embrace Discomfort**

Physician leaders avoid discomfort for the same reasons everyone else does. We want to do what we want to do. We don't want to do what we don't want to do. We long for lives of pleasure and comforting entertainment. For example, we gain weight because we are unwilling to endure the mild, temporary discomfort of sticking to a healthy diet and engaging in vigorous daily exercise. Achieving and sustaining exceptional organizational results is uncomfortable too. Having pursued the pampered lives of the well-to-do, we leaders may be even less inclined to push ourselves out of our comfort zones.

Those who lead by example are more credible persuaders. You will have a hard time persuading your colleagues to voluntarily endure the discomfort of change if you are unwilling to lead the way. When others see you embracing energizing discomfort, they are likely to draw certain important conclusions: It can't be that bad if you are doing it. Maybe the results they hope to achieve are worth it. They will not want to admit that they are not up to the challenge themselves. And they will not want you to best them. Never underestimate the motivational power of competition.

**Make a compelling case for change.** You cannot expect people to embrace discomfort just for the fun of it. There must be a reason. And the "why" must make sense to them.

**Display comparative performance data publicly.** Nothing else in our professional lives unleashes a leader's competitive juices, like seeing one's performance compared with one's peers.

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**Admit that you are uncomfortable.** Pretend that change is easy for you, and your colleagues will just write you off. They know better. Admitting your struggle will allow them to identify with you. Misery is more tolerable when shared.

Admit that there is a price to be paid. People hate for their leaders to try to sell them a bill of goods. Be completely frank about the pain involved. Go a little overboard, even. People will love to taunt you afterward with, "That wasn't so hard." Insist that the results will be worth it. Remind them of past accomplishments they now take pride in. Remind them of the price they paid.

#### **Improve Processes**

Process improvement is tedious, painstaking work, and many leaders don't have the patience for it. Everyone wants things to improve, but things won't improve by themselves. Someone has to figure out what is wrong with the process and correct those process flaws. Medical staff leaders are eager to delegate this kind of work. But these leaders are frequently the owners of the faulty practices in question, and they need to become personally engaged in the diagnosis and treatment of their organizational diseases.

If you want to produce better results, finding A Better Way (ABW) is your only option. If you keep doing what you are doing, you will keep getting what you are getting. There is no shortcut to improved performance. You must examine your processes, find the flaws, and figure out ways to correct them. You will discover that most of your colleagues are amazingly satisfied with mediocre performance. Your passion for improvement will quickly set you apart. Your interest in detail may invite ridicule from your less engaged colleagues. It will also attract the best and brightest to your cause.

*Identify a process that could be improved.* The first step is easy. When results are less than stellar, there are always underlying processes that need to be improved.

**Recruit a small group of determined zealots.** You will never convince the masses that processes matter. Find those rare people who understand and are eager to do the analytical work that everyone else despises.

**Diagram the process in question.** Focus on precisely what is happening now. Don't be tempted to tinker with the flawed process until you fully understand how the process is working—or not working—today.

Imagine what the process would be like in a perfect world. Most of us instinctively think of all the reasons why something won't work. Until you break free of these mental limitations, you will not see the possibilities for innovation.

#### **Prepare for Meetings**

Leaders have been attending meetings for years, and most people view meetings as the worst part of their jobs. They often view these gatherings as a waste of time or an opportunity to complain and blame. And they are right. Many medical staff leaders have stopped attending useless meetings altogether. And they are right to do that, too. The antidote to a worthless meeting is to prepare and make it worthwhile. The fact that so many of us are still attending meetings that add no value is evidence that most leaders are still failing to prepare.

Being prepared for a meeting confers a considerable competitive advantage. Just appearing to be ready will set you apart from most of your colleagues. Actually being prepared will confound everyone in the group. And what's more, few will ever figure your tactic out. Your colleagues will keep on showing up unprepared and allowing you to set the tone, control the agenda, and direct the outcome. The personal and organizational inertia that compels us to keep doing what we've always done, even when it is not working, is one of the great conundrums of our professional lives. What an opportunity for the prepared leader!

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#### Begin by figuring out what you want to accomplish.

Focusing on results always clears the mind. What exactly is the problem? What questions need to be asked and answered? What additional data do we need? Who do we need to consult or inform? What are the options? Which is the best option? What are the next steps? Who will do what by when?

#### Bring questions (and answers) to the meeting.

Nothing sets the leader apart more effectively than asking (and then answering) the right questions.

**Bring data.** The less people know about something, the more strongly they feel about it. Get the facts. Reveal your sources. Invite others to share their research. Enjoy the stunned silence.

**Prepare a presentation.** Send it out before the meeting to save everyone time. Few leaders will invest the time and energy to do this. This approach is a sure-fire way to ensure that your ideas will not have to compete for airtime with extemporaneous pontificators.

Concentrate on telling people only what they need to know, not everything you want them to know. Speak to their needs, not from yours.

#### **Communicate Effectively**

Medical staff leaders aspire to communicate effectively and, they believe they do. And everyone else disagrees. It's not that leaders don't try hard. It's that communication is so dependent on needs and perceptions. If the people you are trying to communicate with have no interest in hearing you at the moment, they just ignore your message. Don't take this personally. You do the same thing. There is no other way to cut through the message clutter and get through your day. And a lot of people ignore their email and expect an individual conversation at their convenience. Then there is the need for repetition. You talk until you are sick of hearing yourself talk. You may feel confident you have communicated to every stakeholder twice. But you probably missed a few of them. And they feel left out because—they were.

Effective communication is critical to your mission. Good intentions are not enough. The failure to communicate is the most common grudge people hold against their leaders. While you may be better than most, you are far from perfect, and you still have a significant opportunity to improve. Just accept this as a fact. Keep trying harder.

**Get your message down.** Cut out the verbosity that gives you so much pleasure. Concentrate on telling people only what they need to know, not everything you want them to know. Speak to their needs, not from yours. Find an emotional hook by telling a story.

**Design a comprehensive personal communication process.** Decide when you will make a phone call and when a face-to-face meeting would be more effective. Send an email message to inform, not to persuade. Use text messaging and social media appropriately, but don't overlook the power of a handwritten note. Generally speaking, the way people communicate with you is how they want you to connect with them. Make rounds regularly.

**Welcome questions.** Thank others for bringing rumors to your attention. Invite clarifying questions after every attempted communication.

Accept the blame for every communication failure. If you do not accept responsibility for a problem, you cannot fix it. You forgot to include a key stakeholder, or your message might have been more explicit. You might have found a more effective way or chosen a better context. You might have worked harder to prevent misunderstandings. You might have dampened your emotional arousal more and thereby confused the message less. Apologize and mean it. It was your fault.

#### **Use Checklists**

We don't like checklists. We think they are dumb. We are smart people, and we know what to do. We are special. We should be able to do whatever we feel like doing. Sure, we sometimes forget things and make stupid mistakes, but the people who support us are supposed to catch those. Genius cannot be bothered with details. And after all, perfection is God's business. We all want to feel competent, and we will believe and do almost anything to convince ourselves that we are. But the *Dunning-Kreuger* effect reminds us that the more competent we *think* we are, the less competent we *really* are.

Checklists are not dumb. They are smart precisely because they are simple. We create checklists, not to cover every step the leader needs to take, just the essential ones. Smart leaders use lists because they recognize their value at keeping everyone focused on the critical steps in the process even when distractions abound. And distractions abound everywhere and all the time.

Educate yourself about the science behind checklists. Read The Checklist Manifesto: How to Get Things Right, by Atul Gawande.

Identify the checklists that have made the most significant difference in your organization. The smartest leaders have already put checklists to good use. Find these leaders and their lists. Learn from them.

Promote the use of evidence-based order sets. All physicians have created a collection of mental templates to fall back on for the routine things we must do to respond to a particular diagnosis. Recognizing that we cannot possibly keep up with the emerging evidence for the best treatment for the disorders we treat, exceptional physicians have long since adopted computer-generated order sets based on the latest scientific findings. These are nothing more than sophisticated checklists.

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#### **Clarify Expectations**

First, we think we already know what others expect. Second, if they don't expect that, we believe they should. Third, we are much more concerned about what we expect from others than what others expect from us anyway. Such arrogance is not confined to leaders, but we have taken it to a new level. These baseless assumptions are at the root of most failed communication efforts. Here is a simple truth. We cannot read our colleagues' minds very well. We should stop trying.

### The only thing wise people are sure of in life is that they are not sure.

Taking the time to clarify your mutual expectations in your conversations with others will increase your odds of communicating successfully and persuading your colleagues to join your cause. Instead of listening dispassionately, many leaders are thinking about how ignorant, selfish, or wrong the other speaker is. Resisting your natural tendency to devalue any view that is different than your own will not be easy. After all, you know you are right. Thankfully, this defensive certitude diminishes a bit as you get older and wiser. The only thing wise people are sure of in life is that they are not sure.

Face the reality that you cannot read other people's minds. Most leaders make this mistake every day. You probably will too. Recognizing this tendency will give you a chance to overcome it. If you realize that clarifying others' expectations is an essential step in every communication, you will remember to do this at least some of the time. Create a simple communication checklist. Post it in plain sight. Refer to it or repeat the steps silently to yourself during your listening phase. We leaders don't listen to others very long before interrupting with our questions and pronouncements. One study concluded that physicians listen to their patients only 23 seconds before redirecting the conversation.

**Ask clarifying questions to make sure you understand.** Even when you are certain you know what your patient or colleague expects, take time to make sure. They will appreciate the effort.

Ask them whether you understand their position correctly. Summarize what you've heard. Ask your colleagues whether there is anything else they want you to consider before you take a position or make a decision.

If possible, resist the tendency to respond on the spot. Ask for time to reflect and consider. This delay will decrease the odds that they will conclude you had already made up your mind, and you were just going through the motions when you solicited their perspectives. Successful medical staff leaders never make up their minds before considering everyone's point of view.

#### Focus on Strengths

We are all the same. We tend to focus on weaknesses and take strengths for granted. If you received 20 positive comments during your evaluation and two negative ones, you would find yourself ruminating about your perceived shortcomings. That's because you want to be perfect, and you want everyone to like you. While you recognize this is patently ridiculous, you can't help yourself. It's the way human brains are wired.

Unless your leadership weaknesses are disabling, the effort you expend to overcome obvious weaknesses is mostly wasted. The time and energy you spend in improving your strengths will pay much better dividends. Most personal shortcomings are more annoying than disabling. Admitting these quirks openly, asking for others' patience, and finding colleagues whose strengths can compensate for yours are more effective coping strategies. When you think about it, changing your entire personality to suit every person you interact with is an unrealistic goal anyway.

Figure out what your strengths and weaknesses are.

Ask your immediate superior to conduct a facilitated 360-degree evaluation of you. This leader will invite the twenty or so people you work most closely with to tell her what they perceive as your critical assets and shortcomings as a leader. It would be nice if people would be honest with you themselves, but they won't.

**Admit your weaknesses freely.** Always begin your efforts to persuade your colleagues with a frank admission of your perceived shortcomings. Ask for their understanding and patience. People do not expect you to be perfect, but they do expect you to be honest.

**Stop ruminating about your shortcomings.** This mental tendency to fret pointlessly and destructively will sap precious time and energy that you should invest in more productive mental effort. Admittedly, this is much harder than it sounds, but any progress you make in decreasing the time you spend ruminating will improve your life.

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**Focus most of your energy on your strengths.** This approach will allow you to improve the leadership skills at which you already excel. And your more productive focus will offer a healthy distraction from the rumination that cripples so many leaders.

#### **Accept People as They Are**

We all want people to believe, feel, and behave the way we want them to, and we want them to agree with us. If they would only do that, we would feel better about them—and ourselves. But people not only disagree, but they are also sometimes disagreeable as well. The leader's first impulse is to try to change them. We often persist in these futile efforts while knowing we have no chance for success. And to make matters worse, we choose to become frustrated when people don't meet our unrealistic expectations. When aggravated by others' failure to behave as we wish, many leaders view expressed *anger* as both an entitlement and a motivational tool. It is neither.

When aggravated by others' failure to behave as we wish, many leaders view expressed anger as both an entitlement and a motivational tool. It is neither.

If you focus on understanding and accepting others instead of trying to change them, they will be more open to your point of view. And you will likely discover some unexpected common ground that will provide a foundation for further discussion and compromise. Your improved relationship will allow you both to clarify your mutual expectations. And you will be a lot less frustrated in your work.

**View your rising frustration as evidence that you have missed the point.** When you focus on accepting others as they are, curiosity replaces frustration as the accompanying feeling.

**Ask clarifying questions.** Avoid the inclination to confront, challenge, and openly disagree. Resist the urge to make pronouncements and sweeping generalizations. Seek to understand their perspective by asking clarifying questions.

**Ask them to identify the weaknesses in their case.** Most physicians are critics by nature and cannot resist the challenge of attacking prevailing wisdom, even when it is their own. Such an invitation will likely be more effective than a direct challenge to their beliefs.

## Strengthen the Culture of Integrity

Every leader admits that building and maintaining an organizational culture of integrity is essential in theory, but the emotional price is steep. You have to tell the truth. You have to take the same position publicly and privately. You have to do what you say you will do and admit it when you are wrong. It is much easier to tell people what they want to hear, enter into secret agreements, and avoid speaking on the record. It is easier to blame others. It is easier to hold your cards close to the vest. It is easier to cut secret deals while reassuring yourself that's what everyone does. Every leader aspires to be a person of integrity. Not every leader is willing to pay the uncomfortable price on which that reputation is built.

The people you serve will figure out pretty quickly whether you are a person of integrity or not. If they conclude you are not, you are finished as an effective leader at SOMC. You may hold on to your leadership title for a time, but no one will take you seriously. You will not be a player. Few leaders intentionally aspire to be empty suits, but there are more than a few of those around.

**Choose the reputation you want to build. Look around.** There are real-life examples of reputable and disreputable clinical leaders in every work environment. You know who they are. Choose your role models carefully. You will likely turn out to be the kind of leader you admire.

#### Make a list of how leaders with integrity behave.

Do some practical research on integrity. Be specific and detailed. Post your list of honorable behaviors so that you will see it every day.

**Listen critically to all sides before taking a position.** The urge to jump to accommodating conclusions when powerful complainers come calling is strong. Resist it.

**Beware the secrecy trap.** When people ask you to hold something they are about to say in confidence, stop them right there. Make it clear that you cannot agree to confidentiality beforehand. As you know, nothing a leader says or does is secret for long.

**Do the right thing.** You will usually know right away what the right thing is. It's the hard option that you would rather avoid.

#### **Confront Others Effectively**

Confrontation is hard. Because it is so unpleasant, most of us avoid it. Because we avoid it, we allow ourselves only a few opportunities to get better at it. And because it is hard and we are not very good at it, we avoid it. This destructive leadership loop is the reason so few leaders develop strong confrontation skills. Like everyone else, we leaders spend most of our lives trying to avoid discomfort.

If everyone read your mind and automatically did what needed to be done while behaving respectfully and responsibly, you would never need to confront others. Has that been your experience? Inappropriate behavior is inevitable. Conflict is the result. Confrontation is the only way to deal effectively with these challenges while achieving and sustaining exceptional organizational results.

**Set realistic goals.** No amount of confrontation will transform jerks into pleasant people. Focus on one or two recurring behaviors that must change.

# No amount of confrontation will transform jerks into pleasant people. Focus on one or two recurring behaviors that must change.

**Prepare**. Do not confront others by the seat of your pants or when you are angry or poorly prepared. Take the time to think through exactly what you intend to say, how you intend to say it, and what you attempt to accomplish.

*Make Notes*. Influential leaders do not attempt to wing these crucial conversations. Explain that you have made notes because this conversation is critical, and you want to make sure that you cover all of the salient points.

**Do not argue or get sidetracked.** Ask the person you are confronting to listen without comment until you are finished. Promise him the same courtesy when you are finished.

## Like everyone else, we leaders spend most of our lives trying to avoid discomfort.

**Document the confrontation.** We all hear and remember what we want to hear and remember. Document your conversation in a follow-up email and invite the person to respond with any corrections or additions within 48 business hours. Make it clear that no response is his acknowledgment that your documentation is accurate.

**Proceed to the next step.** Confrontation is just one step in the process of holding others accountable. Painful as it is, you must follow these challenging conversations with continued accountability and meaningful consequences.

#### Solicit Input from Stakeholders

Once leaders decide what they want to do, they naturally switch to the selling mode. They want to hear from those who agree with them—from those who disagree, not so much. Leaders with madeup minds are reluctant to wake sleeping dogs. Like every other leader, they want to achieve their objective with the least possible effort. They don't want to take the heat. Partisans do not welcome dissent. And soliciting feedback is hard work. Done right, it consumes a lot of time and energy. Most people want to express their opinions, or at least have the opportunity to do so. Not everyone will contribute. Those who share their views would prefer that you do what they recommend, but everyone recognizes that the deciders, not the opiners, will make the final decisions. Those consulted understand they will not always be happy with the result, but they will be a lot less unhappy if they contributed input during the decision-making process. Real leaders welcome dissent, respect it, and use it to achieve their goals.

**Decide who the stakeholders are.** Every decision affects someone—usually more people than leaders realize. Take the time to figure out who will be affected and who might like to participate in the decision-making process. Even those who have no real interest in offering an opinion are usually pleased to be invited to participate.

**Invite input appropriately.** Present the issue in a way that invites stakeholders to consider the case for and against their point of view. This evenhanded approach will remind even the most opinionated to respect contrary perspectives.

**Value data over emotion.** While welcoming all opinions, make it clear that you will give more credence to evidence-based recommendations when making the final decision.

**Clarify who is opining and who is deciding.** This is not a mystery. The people who are signing the checks are the deciders. Everyone else is an opiner.

**Set a deadline.** Do not let the argument go on forever. Endless discussions always turn repetitive and personal. You can never know everything you need to know before making a decision.

*Make the best decision and move on.* Whatever you decide will sometimes turn out to have been a mistake. When that happens, make another decision and move on again.

#### **Promote Transparency**

Secrecy makes people feel special. They are not eager to give this perceived advantage away. People also want the freedom to take one position in public and another in private. They don't want to upset others or take the heat for what they said about them.

Complainers often approach leaders with the urgent desire to reveal something significant but only with a promise of confidentiality. Leaders want their colleagues to view them as trustworthy, so they sometimes mistakenly agree. Requesting confidentiality beforehand is the oldest leadership trap in the book. And every leader falls into this trap from time to time.

Transparency holds everyone accountable—including you. You must never agree to confidentiality beforehand, and you must inform complainers that nothing that affects the SOMC team is secret. If the complainer has a real problem, they will welcome the opportunity to go on the record; they will feel grateful you are taking the issue seriously. If, as is most often the case, they are hoping to poison your mind about a colleague without being held accountable for what they say, your insistence on transparency will discourage that behavior in the future.

Transparency holds everyone accountable—including you. You must never agree to confidentiality beforehand, and you must inform complainers that nothing that affects the SOMC team is secret.

**Require those who come to you with a complaint to go on the record.** Take careful notes. Send them an email summary of what they said. If they complain about a colleague, give them 48 business hours to speak directly to this colleague themselves. If they refuse, send a copy of their complaint to the person they criticized.

When presented with a leadership issue, take the position that you will investigate the matter. Aroused complainers will want you to agree with them and their skewed view of things—right now. Don't fall for this. Ask your administrative partners for their help with the investigation. When you and your leadership team have gotten everyone involved on the record, your process and transparent decision will remind team members of the critical role transparency plays in the SOMC culture.

#### **Field the Best-Possible Teams**

Leaders avoid this responsibility because it is intensely uncomfortable. We all first learned the importance of fielding the best possible team in grade school. It seemed natural to pick kids for your team who could help you win the game. Then we grew up and got jobs. Suddenly, we believed we were entitled to those jobs for life no matter how well we performed. The belief that performance—not tenure—matters most is not widespread. The leader who expects net-positive performance from every team member will never be appreciated by those who fail to clear this bar. Their resentment is the price leaders pay for building and sustaining high-performing teams.

This coaching duty is the only way to compete successfully. The high performers will appreciate your willingness to cut the deadwood. This requirement does not mean you should insist that everyone be stars, just net-positive. Extruding the miserable cusses and slackers will send everyone a strong signal that they must earn their position on the team every day.

**Make your position clear.** Announce your intention to field the best-possible team publicly. Put your skin in the game by recommending that your boss make the same commitment.

**Do it.** Having the best intentions will get you no credibility at all. When you must trade up, do it. Everyone is paying more attention to what you do than what you say. Insist that your fellow leaders do the same. Most leaders will avoid this painful duty whenever they can. You may need to nudge them to do the right thing.



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