



On Being A Medical Director—Why is it so hard?

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Hypotheses

- People have characteristic ways of dealing with the world, all of which are designed to bring a level of internal control and comfort to the individual.
- There are a finite number of ways which, when combined, form patterns of behavior.
- Physicians are not randomly selected members of the population

Physician Characteristics

- Seek control through knowledge.
- Prefer concrete goals
- Have demonstrated high persistence levels in attaining goals.
- Prefer direct action.
- Prefer immediate response to their actions.
- Score high on tests for narcissism.

Physician Characteristics

- To function effectively as a clinician you must be able to amass large amounts of data quickly, make a decision quickly, and execute a plan--usually without significant input from anyone else.
- We like it that way--its why we went into this field in the first place.

Organizational Leadership

- Requires knowledge and persistence.
- Goals are often not concrete.
- Results seen over long time periods.
- Most effective actions are indirect.
- Requires recognizing that other people's role may be more important.

The Results

- The physician may fail to recognize that the leadership role is different from the attending physician's role.
- He/she may try to fulfill the requirements of the role using his/her physician training at times when that is counterproductive.
- He/she may simply refuse to participate.

Facts You Must Know

- Leadership is getting people to perform to their maximum potential.
- Good leadership does not depend upon good deals or pleasant working conditions: your ability to motivate people to perform to their maximum is independent of these factors.

The Eight Universal Laws of Leadership

- Maintain Absolute Integrity
- Know Your Stuff
- Declare Your Expectations
- Show Uncommon Commitment

The Eight Universal Laws of Leadership

- Expect Positive Results
- Take Care of Your People
- Put Duty Before Self
- Get Out in Front

Where Are You Leading?

- Successful units have an understanding of what is important to their patients and to themselves.
- Successful units operate as a team to make sure their patients are satisfied, and receive excellent care, both technically and personally.

The Three Levels of Patient Care

- Competence—we are organized to hire, train and retain competent people. We fire incompetent people.
- Courtesy—a unit focused on patient desires will expect the staff to be courteous. Service excellence becomes the expected standard.

The Three Levels of Patient Care

- Compassion is the outer ring. It is not something that can be required, as it comes from the heart, and we do not fire people who do not know how to express it.
- Compassion is what the patient cares about.

Creating a Culture of Compassion

- Traditional management techniques do not work.
- There are four levels of motivation
 - Compliance—behaviors based upon rewards and sanctions
 - Self-discipline—behaviors based upon personal ethics and values

Creating a Culture of Compassion

- Management almost always involves only these two motivators.
- Creating a culture of compassion requires:
 - Imagination—behaviors based on an emotional response to specific stimuli
 - Habit—behaviors that have become automatic over time.

Creating a Culture of Compassion

- Imagination is the secret to compassion
- Developing a culture of compassion requires managing employees with compassion (or empathetic imagination.)

FROM NOW ON,
ALL TEAMS WILL BE
FORMED ON THE
BASIS OF MYERS-
BRIGGS PERSONALITY
TYPES.



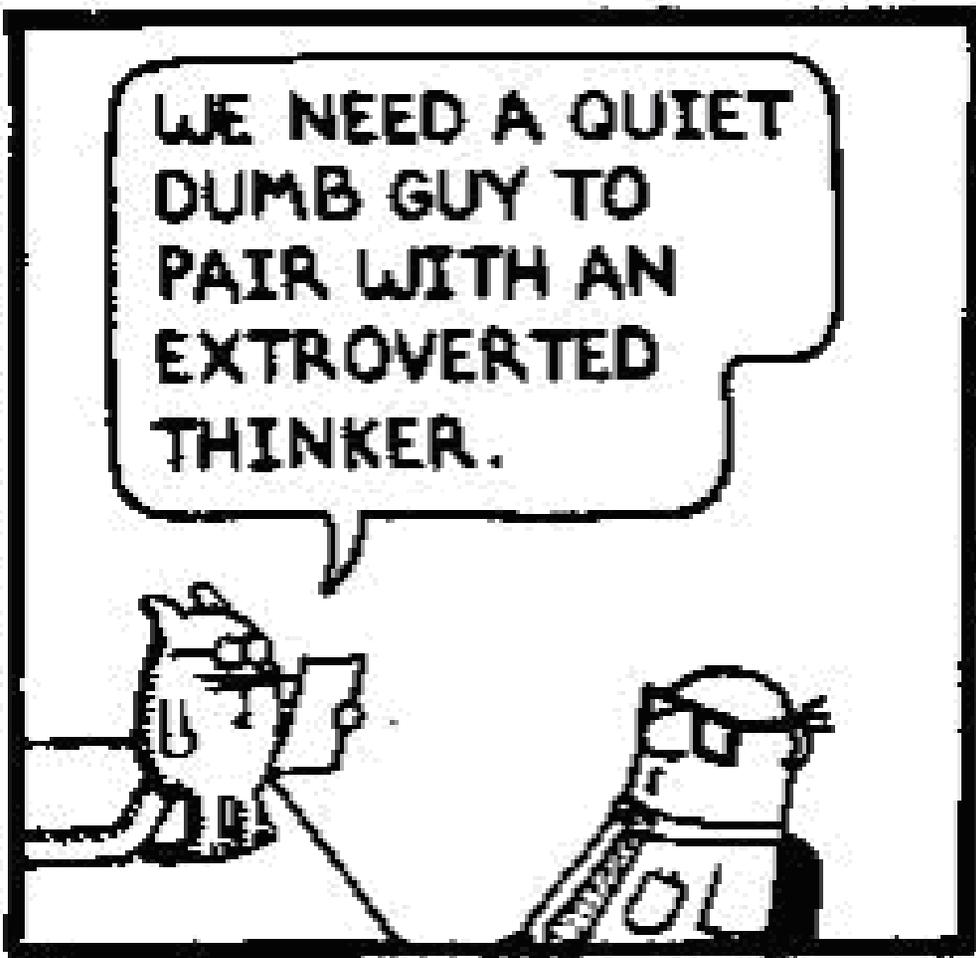
IF YOU DO NOT
HAVE A PERSON-
ALITY, ONE WILL
BE ASSIGNED TO
YOU BY HUMAN
RESOURCES.



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Emotional Intelligence

“Emotional intelligence” refers to the capacity for recognizing our own feelings and those of others, for motivating ourselves, and for managing emotions well in ourselves and in our relationships. It describes abilities distinct from, but complementary to, to academic intelligence, the purely cognitive capacities measured by IQ.

Daniel Goleman. Emotional Intelligence. (New York, Bantam, 1995.)

Emotional Intelligence

Self-awareness:

Knowing what we are feeling in the moment, and using those preferences to guide our decision making; having a realistic assessment of our own abilities and a well-grounded sense of self-confidence.

Emotional Intelligence

Self-regulation:

Handling our emotions so that they facilitate rather than interfere with the task at hand; being conscientious and delaying gratification to pursue goals; recovering well from emotional distress.

Emotional Intelligence

Motivation:

Using our deepest preferences to move and guide us toward our goals, to help us take initiative and strive to improve, and to persevere in the face of setbacks and frustrations.

Emotional Intelligence

Empathy:

Sensing what people are feeling, being able to take their perspective, and cultivating rapport and attunement with a broad diversity of people.

Emotional Intelligence

Social skills:

Handling emotions in relationships well and accurately reading social situations and networks; interacting smoothly; using these skills to persuade and lead, negotiate and settle disputes, for cooperation and teamwork.

But Note:

- Medical training emphasizes the primacy of the doctor-patient interaction: one on one.
- Custom and the law hold the physician personally accountable for all aspects of the medical care process
- Physicians tend to see themselves as the “Lone Ranger” with, or perhaps without, a faithful Tonto.

Logically, then,

- Making the physician leader effective depends partly on him/her, partly on the management team, and partly on the group.
- What can you do to make your team more emotionally intelligent?

Building the Emotional Intelligence of Your Team

- Norms that create awareness of emotions
- Norms that help regulate emotions

Norms that Create Awareness

- Interpersonal Understanding
 - Take time to get to know one another
 - Have a “check-in” at the start of the meeting
 - Assume that undesirable behavior has a reason
 - Tell your team what you are thinking and how you are feeling.

Norms that Create Awareness

- Perspective taking
 - Ask whether everyone agrees with a decision
 - Ask quiet members what they think
 - Question decisions that come too quickly
 - Appoint a devil's advocate

Norms that Help Regulate Emotions

- Confronting
 - Set ground rules and use them to point out errant behavior
 - Call members on errant behavior
 - Create playful devices for pointing out such behavior. These often emerge spontaneously—reinforce them.

Norms that Help Regulate Emotions

● Caring

- Support members; volunteer to help them if they need it; be flexible.
- Validate members' contributions. Let people know they are valued.
- Protect members from attack
- Respect individuality and difference in perspective. Listen
- Never be derogatory or demeaning.

Creating an Affirmative Environment

- Reinforce that the team can meet the challenge. Be optimistic.
- Focus on what you can control.
- Remind members of the group's important and positive mission.
- Focus on problem solving, not blaming.

Conclusions

“I thought all I had to do was take care of the patients.”

Novice Medical Director, 2002

Conclusions

- Technical competence
- Interpersonal skills
 - Courtesy
 - Empathy
 - Emotional Intelligence

Conclusions

- The former is easier for us, and where we would often prefer to stay. And we would all agree that a medical director who lacked technical competence should be fired.
- Success as a medical director and leader of the unit, though, depends upon the latter.

Conclusions

- Do you know what is important to you?
- Do you know how to communicate that to your people?
- Do you know what is important to your people?
- Do you know how to react when #1 and #3 are in conflict?

Conclusions

- Do you know who you are?
- Do your people know who you are?
- Are the views the same?
- Do you know your people?
- Would they agree with your assessment?

Conclusions

Being a medical director is hard, because it requires doing things that may force us to confront aspects of ourselves that we do not admire. Likewise, it may force us to confront aspects of others behavior that we do not admire either.

Conclusions

Since it is emotional, not intellectual tasks that matter, we are not dealing in our strong suit. However, there is no other way to effective leadership.