

**The Medical Director:
Everything You Wanted to Know
But Were Afraid to Ask**

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Goals for this Session

- First—Define the role of the effective medical director and identify barriers that often prevent the medical director from being effective.
- Second—Define strategies that you can use to help your medical director be/become effective.

Job Description

- Legally charged with responsibility for all aspects of the clinical operation of the unit to include insuring that the staff are properly trained, that policies and procedures are in place to assure safe and effective treatment, and that they are followed.

Job Description

- The medical director is responsible for the quality assurance program of the unit. He/she is presently liable in the event of disaster, and in the future may be held accountable for all outcomes, to include patient survival and adequacy of treatment.

Job Description

- If the medical director is paid, but fails to provide these services, he/she may be subject to criminal penalties, and the provider, i.e. DCI, may also be held liable.

Being a successful medical director takes knowledge about dialysis, but it also takes knowledge about leadership.

Leadership is Not Management

What Leaders Really Do

They don't make plans; they don't solve problems; they don't even organize people. What leaders really do is prepare organizations for change and help them cope as they struggle through it

Leadership is Not Management

Management is about coping with complexity.
Leadership, by contrast, is about coping
with change.

Why Must the Medical Director Lead?

- First, he/she is legally obligated for the care
- Second, real change is impossible if he/she will not cooperate and sign the necessary orders
- Third, real change in any organization has to be sponsored from the top—the best anyone else can do is guerilla warfare

What are Medical Directors Being Told

Facts You Must Know

- One person can make the difference between success and failure in any organization--you are critically positioned to be that person.
- Most people become successful only through the help of others.
- Leaders are made, not born.

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

On Followership

- The Law of Magnetism
 - Who you are is who you attract
- The Law of Connection
 - Leaders touch a heart before they ask for a hand.
- The Law of the Inner Circle
 - A leader's potential is determined by those closest to him.

On Followership

- The Law of Empowerment
 - Only secure leaders give power to others.
- The Law of Buy-In
 - People buy into the leader, then the vision.

How To Attract Followership

- Making someone feel important is more powerful as a motivator than money, promotion, working conditions, or almost anything else.
- Leaders are not caretakers. They must have some idea as to where they want to go. “Where there is no vision, the people perish.” (Proverbs 29:18.)

How To Attract Followership

- Treat others as you would be treated yourself and they will follow you.
- Take responsibility for your actions and admit your mistakes.

How To Attract Followership

- Praise in public, criticize in private
- You must see, and be seen by your followers.
- You must know who your people really are.
- Competition can be used to make striving a game.

Getting Started

- Its difficult balancing optimism and realism, intuition and planning, faith and fact. But that is what it takes to be effective as a leader.
- If the leader can't navigate the people through rough waters, he/she is liable to sink the ship.

Getting Started

- Major barriers to successful planning are fear of change, ignorance, uncertainty about the future, and lack of imagination.
- The real test of leadership is not where you start out. It's where you end up.
- People listen not necessarily because of the truth being communicated in the message, but because of their respect for the speaker.

Getting Started

- To build trust, a leader must exemplify competence, connection, and character.
- Character makes trust possible. And trust makes leadership possible.
- How do leaders earn respect? By making sound decisions, admitting their mistakes, and putting what's best for the followers and the organization ahead of themselves.

Getting Started

- Who you get to work for you is not determined by what you want. It is determined by who you are.
- If you think your people are negative, then you had better check your attitude.
- People don't care how much you know until they know how much you care.

Building Successful Teams

- Unity of Vision
 - A team does not win the championship if its players have different agendas.
- Diversity of Skills
- A leader dedicated to victory and raising players to their potential.

Our Vision

Create systems of dialysis care that achieve superior clinical results, maintain long-term financial viability, and provide a workplace which attracts, trains, and retains knowledgeable and effective staff committed to attaining those superior clinical results.

The Tool Box

- CQI Methods to get everyone oriented to the same goals--Creating a learning organization.
- Empowerment of each individual to contribute to those goals
- Provide in-depth initial training to ensure high quality care, and reduce staff anxiety.
- Development of organizational resilience.

Summary

- Success in the dialysis unit is directly related to the leadership skills of its medical director.
- Leadership skills must be acquired, in most cases at the same time as taking the position.

Summary

- Learning leadership skills is a straightforward task. Being good at it requires life-long practice.
- If you can't or won't learn to lead, for the good of your patients you should find someone else to do the job.

Barriers to Being an Effective Medical Director

Assumptions

- 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.

The Medical Director's Role

- 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 nephrologist may fail to recognize that the medical director's 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.

If the medical director fails to provide effective direction patient care WILL suffer and the unit WILL fail.

Helping Your Medical Director Be Successful

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 medical director effective depends partly on him/her, partly on the dialysis unit management team.
- What can you do to make your dialysis team more emotionally intelligent?
- What can you do to help involve your medical director in the team's activities?



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.

Solving Problems Proactively

- Anticipate problems and address them before they happen.
- Take the initiative to understand and get what you need to be effective.
- Do it yourself if others aren't responding. Rely on yourself, not others.

Some Specific Ideas

- Help your medical director keep that function separate from the attending physician function. Do not ask a medical director question while he/she is making rounds.
- Recognize that it is up to you to convince the medical director that involvement with the team is not a waste of time. Minimize the number of meetings he/she is expected to attend.

Some Specific Ideas

- Find out what pushes the medical director's buttons—both positively and negatively.
- Play to the medical director's strengths. Most physicians are highly effective at prioritizing their agenda and can make up their minds quickly.

Playing to Their Strength

- Use the medical director to establish the unit's priorities. Ask him/her what the biggest problem is in the unit and they will probably know.
- Have the team work on developing solutions—the team does not necessarily need the medical director at this stage. Avoid asking the medical director “how should we do that?” You may get an answer and wish that you had not.

Playing to Their Strength

- Once you have worked out solutions—or at least approaches-- to the problem that you can live with, then present them to the medical director for decision.
- If you are working on issues that he/she think are important, and are letting him/her make the decision, you will develop interest/confidence and ultimately closer involvement of the medical director in the unit's activities.

Summary 1

- Without an effective medical director, the dialysis unit will fail.
- The primary role of the medical director is to provide leadership for the unit.
- Helping the medical director be effective is crucial for both the administrator and the nurse manager.

Summary 2

- Physicians are temperamentally not well suited to the leadership role.
- Behaviors that are effective at the bedside may not work in a group setting.
- Physicians receive little formal instruction in their role and have few or no role models to use to implement what they do know.

Summary 3

- Dysfunctional relationships with the medical director are more often related to emotional than to cognitive problems.
- The ultimate solution is to develop the emotional intelligence capabilities of all involved. Practically speaking, it is easier to start with the dialysis team than the medical director.

Making your Medical Director
effective is NOT optional and
may not be easy, but it can be
done!