Why is it important that doctors get engaged in leadership?

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Carl Savage, PhD
Clinical Management Research Group
Medical Management Centre
Department of Learning, Informatics, Management & Ethics
carl.savage@ki.se
1. Why?
2. How?
3. What?
THERE’S GOT TO BE A BETTER WAY...
Management ideas often become trends that last 3-5 years before the next one comes along...

Number of citations per year and management concept in Medline

3-5 years

70%}

THERE’S GOT TO BE A BETTER WAY...
Clinical management research group:
Developing innovative management practices together with practitioners

RESEARCH
- Action research
- Mixed methods
- Case studies
- Predictive modelling
- Statistical process control

EDUCATION
- Medical students
- MSc Health economics, policy & management
- Executive education

Multidisciplinary group: 6 MD, 4 MPH, 1 economist, 2 senior researchers, 1 professor

mairi.savage@ki.se & carl.savage@ki.se
"The medical profession has to too large an extent focused more on studying complicated biological processes than on patient flows on a surgical ward."

"Health care’s dilemma is not a lack of resources, but rather bad management."

"Sjukvården första hand om ledarinskapskris"
70%?

CAN DOCTOR’S BE PART OF THE Rx?
Physician leadership

- Quality of care
- Financial performance
- Staff satisfaction, retention, burnout & performance
- IT adoption
- Approval of reforms

(Virtuous cycle of physician leadership: Management through medicine)

(Willing leaders)

- Increased interest for leadership
- Formal recruitment
- Formalize rewards and recognition for leadership
- Leadership development as an organizational strategy
- Improved competency development
- Participatory leadership practices
- Practice and develop leadership through Quality Improvement
- Promote dialogue and interaction between organizational levels and professional groups

(Physician leadership)

(Lack of interest in leadership)

- Medical Disengagement
- Organization overwhelmed by external performance demands
- Mismatch between responsibility and authority

(Vicious cycle of physician leadership)

(Incidental leaders)

- Authoritarian leadership practices
- Conflict between medicine and management
- Difficult to balance leadership and clinical work
- Mismatch between expectations and managerial practice
- Education disconnected from practice
- Informal recruitment

(Sarto & Veronesi, 2016)
(Savage et al, 2017)
“We need to discover the root causes of success rather than root causes of failure”

– Prof. David Cooperrider
Originator of Appreciative Inquiry
What do effective leaders do?

WHO ARE THE 30%?
Effective physician leaders

- Interview study with physicians instrumental to ongoing changes in health care in Sweden:
  - 10 senior executives
  - 10 emerging leaders

- Aim: To explore the qualities and capabilities health care leaders attribute to their success and how have they developed these.

(Savage, M. et al, 2017, manuscript)
Qualities of effective physician leaders enable a learning orientation

- Clarity of purpose
- Positive outlook
- Endurance
- Authenticity

I can learn anything I want to.
When I’m frustrated, I persevere.
I want to challenge myself.
When I fail, I learn.
Tell me I try hard.
If you succeed, I’m inspired.
My effort and attitude determine everything.

I’m either good at it, or I’m not.
When I’m frustrated, I give up.
I don’t like to be challenged.
When I fail, I’m no good.
Tell me I’m smart.
If you succeed, I feel threatened.
My abilities determine everything.

(Dweck, 2007)

(Savage, M. et al, 2017, manuscript)
1. Ground management in medicine

- Understand medical consequences of management decisions through integrating knowledge in:
  - Medicine
  - Economics
  - Quality improvement
  - Organizational development

- Maintain integrity of purpose

- Identify and resonate with the mental models of different professional groups through an engaging leadership practice

(Savage, M. et al., 2017, manuscript)
2. Work with others by teaming, not team work

(Savage, M. et al., 2017, manuscript)

- Ability to quickly build resonant relationships with a wide range and mix of colleagues on the fly

- Execution-as-learning:
  - Reaching Across Boundaries
  - Learning from Failure
  - Creating Psychological Safety
  - Framing for Learning
3. Catalyse systems by acting on interdependencies

- Facilitate and act on contextual understanding:
  → interdependencies between actors and interests (not simply present "the health system")

- Lead-by-example not as a strategy to convince others but to learn

(Savage, M. et al., 2017, manuscript)
4. Adopt a scientific approach to understand problems and develop solutions

(Savage, M. et al., 2017, manuscript)
”Live life as a leadership laboratory”

(Heifetz, Grashow & Linsky 2009)

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