



The Art of Leadership

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Leadership
Is a Learned Skill



Leadership theory has evolved

- ◆ Born Leaders
- ◆ Leader and Follower
- ◆ Supportive Leadership
 - People are happier and more satisfied in their work with supportive leaders who empathize at a personal level



A Leadership Primer

General Colin Powell

- ◆ “Being responsible sometimes means pissing people off”
- ◆ Good leadership involves responsibility to the welfare of the group, which means that some people will get angry at your actions and decisions. It’s inevitable, if you are honorable. Trying to get everyone to like you is a sign of mediocrity: you’ll avoid the tough decisions, you’ll avoid confronting the people who need to be confronted, and you’ll avoid offering differential rewards based on differential performance because some people might get upset. Ironically, by procrastinating on the difficult choices, by trying not to get anyone mad, and by treating everyone equally “nicely” regardless of their contributions, you’ll simply ensure that the only people you’ll wind up angering are the most creative and productive people in the organization.



Leadership of Healthcare Professional: Where do We stand?

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ Leadership can capitalize on the diversity within the group to efficiently utilize resources when designing management processes, while encouraging staff to work towards common goals.



"Your social problems stem from being cold, aggressive, and totally mercenary. Like to be our office manager?"



Leadership Styles

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ Transactional Leadership: Traditional
 - Supervision
 - Organization
 - Performance
- ◆ Transformational Leadership
 - Requires leaders to communicate their vision
 - Meaningful, exciting and empowering



Leadership Styles

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ Collaborative
 - Assertive process organizational symbiosis
 - Communicate information to allow coworkers to make informed decisions
 - Encourage dialogue
 - Reduce complexity within medical practice



Leadership Styles

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ Conflict Management
 - Individualistic behavior
 - Poor Communication
 - Structure
 - Latent issues
 - Leaders must adopt strategy for handling conflict with positive outcome



Handling Conflict

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ Avoidance
- ◆ Compromise
- ◆ Accommodation
- ◆ Collaboration
- ◆ Bargaining/Negotiating
- ◆ Consensus
- ◆ Creating Vision for Resolution



Distributed Leadership

Abdulaziz Al- Sawai OMAN medical journal 2013

- ◆ **Sense Making**
 - Ability to understand change
- ◆ **Relating**
 - Ability to build trusting relationships
- ◆ **Visioning**
 - Creating vision of future
- ◆ **Inventing**
 - Creating new ways of approaching tasks



Shared Leadership with Physicians and Staff

- ◆ Collaboration with MDs – Managing up!
- ◆ Team level that empowers staff
- ◆ Optimizing team building so staff adopt leadership behaviors
 - Barriers are often high workload
 - Staff turnover
 - Boring, repetitive work



Top 8 Practices of Effective Healthcare Leaders

Mark Madden B.E.Smith Career Management

- ◆ Lead by Example
- ◆ Build Strong Teams
- ◆ Encourage Participation
- ◆ Think Like a Teacher
- ◆ Challenge Conventional Thinking
- ◆ Measure Everything
- ◆ Know How to Take Action
- ◆ Be Accountable



The Middle Management Dilemma

- ◆ Developing authority and respect from doctors
- ◆ Insist that employees not be allowed to “go around” the administrator
- ◆ “Managing Up”



The Middle Management Dilemma

- ◆ Helping your physicians and employees avoid stress
- ◆ Involvement in physician and employee personal problems
- ◆ Managing change



Longtime culture of mistreating students persists at med schools

Type of mistreatment	Never	Once	Occasionally	Frequently
Publicly humiliated	65.7%	16.9%	16.3%	1.0%
Threatened with physical harm	98.5%	1.1%	0.4%	0.0%
Physically harmed	97.9%	1.8%	0.2%	0.0%
Required to perform personal services	90.6%	5.7%	3.5%	0.2%
Subjected to sexist remarks	84.3%	6.4%	8.7%	0.7%
Denied opportunities for training or rewards based on gender	94.1%	2.4%	3.1%	0.4%
Received lower evaluations or grades because of gender	93.5%	4.4%	1.9%	0.3%
Subjected to unwanted sexual advances	95.4%	2.6%	1.9%	0.2%
Asked to exchange sexual favors for grades or other rewards	99.8%	0.1%	0.1%	0.0%
Denied opportunities based on race or ethnicity	97.3%	0.9%	1.3%	0.6%

Source: "Medical School Graduation Questionnaire: 2012 All Schools Summary Report," Assn. of American Medical Colleges, July



Bad Boss

Perceived Moral Failings of CEOs and Top Managers, according to Survey of Employees

Shortcoming	Percent agree
Hypocrisy	62 percent
Favoritism	60 percent
Dishonesty	53 percent
Promise-breaking	52 percent
Disrespectful	37 percent

Source: Wilson Wyatt ©2004



Output of a Manager and Leadership

- ◆ A result achieved by a group under his/her supervision or influence
- ◆ Directing the activities of a group toward shared goal
- ◆ Coping with Change



Types of Supervisors

Assertive	Passive	Aggressive
Sees conflict as win-win	Avoids conflict	Sees conflict as win-lose
Expresses opinions directly	Relies on assumptions and nonverbal cues to convey opinions	Imposes opinions with fear tactics and ultimatums
Listens and considers others' thoughts and feelings	Submits to others' thought and feelings while minimizing their own	Downplays others' thoughts and feelings



“Management By Objectives”

Peter Drucker

- ◆ Set quarterly goals with physicians that meets owner objectives and are achievable, yet stretch you, the manager
- ◆ Goals should be specific and measurable
 - Reduce A/R in 120 days by 5 %
 - Reduce Patient waiting time by 10 minutes
- ◆ Helps prove what you accomplished for reviews



Qualities Physicians like in a Manager

- ◆ Straight Talk – Don't be afraid to tell it like it is
- ◆ Fairness and Consistency among Partners – No Playing Favorites – Just like staff
- ◆ Don't be afraid to lose your job – when it comes to making the right recommendations
- ◆ Physician respect that you are trying to help them– Communicate the risks/benefits



Qualities Physicians like in a Manager

- ◆ Recognize that physicians are like “Herding Cats”
- ◆ Appreciate their individuality, but emphasize the good of the group over the individual
- ◆ Let them vent, but continue to extol the virtues of the group
- ◆ Serve them well and deliver what they want – that is your job



Qualities Physicians Don't like in a Manager

- ◆ Not paying close enough attention to the finances and billing effort
- ◆ Favoritism with MD Partners or toward staff
- ◆ No follow through on tasks delegated
- ◆ Perception of “imposition” when asking for something



Qualities Physicians Don't like in a Manager

- ◆ Creating Chaos with Staff
- ◆ Crisis Management - Not enough planning
- ◆ No analysis, costs recommendations backing up wish list with facts/comparisons
- ◆ Not taking the initiative or seeing the overall picture



Dealing With Physicians

- ◆ Tactful explanation of the problem in clear concise language, respect their time
- ◆ Why it is a problem: Financial, Operations, HR, Etc. Give \$ examples or costs to the organization
- ◆ Clear Plan of Action
 - Cost Benefit Analysis
 - Excel Spreadsheet – Make it simple
 - Top Three recommendations

Dealing with Physicians For Managers

- ◆ Flexibility and Confidence in your
Opinions

Email:





Dealing with Physicians For Managers

- ◆ Ask what you can do to help the MD resolve it
- ◆ Communicate the benefits to the organization
- ◆ Follow up and Monitoring

**“In life you don’t get what you
deserve, you get what you
negotiate.”**

Negotiating – Peter H. Engel

Read Books or Attend Training on Negotiating Skills



Productivity Differences

- ◆ Use MGMA statistics:
 - MGMA Physician Compensation Report
 - MGMA Cost Survey
- ◆ Perform a yearly practice analysis for each MD
- ◆ Coach the doctors – make specific recommendations in writing
- ◆ Show them the financial implications of increasing productivity
 - Example: More patients/day vs. adding hours



Conflict Among Partners

- ◆ An outside person might be best in these situations to facilitate:
 - Consultant
 - Industrial Psychologist
 - Marriage or Family Therapist



Plan Team Efforts with Staff

- ◆ Sell the benefits of interacting with staff to emphasize from the top down the benefits of team spirit and morale:
 - Encourage MDs to get to know all staff , not just MA
 - Billing Department – MD with most coding errors has to take billing department to lunch
 - Medical Records – MD has 3:00 Expresso break with Medical Records Dept.
- ◆ Plan creative events to solidify the team







Corporate Team Building

- ◆ Parties that Cook
- ◆ Bottle your Own Barrel
- ◆ www.thegogame.com
- ◆ http://thegogame.com/team_building/Los-Angeles

The Go Game

While no two groups of people are exactly alike, our common affinity for collaboration, exploration and problem-solving demonstrates that one thing is certain: humans shine when at play. We will bring out the best in your team through game design expertise and technological execution.



<http://thegogame.com/team-building-san-francisco>

By playing **The Go Game**, you'll uncover newfound skills that among in your team, discover the magic and serendipity that exists in your every-day surroundings and be surprised by the creative potential of your teammates.



The Sand Castle and Disco Dancing mission











Please join the Doctors of

Marin Medical Group

at the

Annual Dinner

honoring our fine staff

August 24, 2007

at six o'clock

R.S.V.P.

Monica



Sophisticated
Seductive
Complex
And
Full-Bodied
(... And the wine's not bad, either)

CALIFORNIA
CULINARY
San Francisco, California



Employees like celebrating Halloween, according to the results of a 2013 Glassdoor Halloween survey, and not just because they enjoy free candy. Employees said they see value in celebratory events at work.

Employees who participated in the survey said that employer-hosted events:

- ◆ Boost morale (59%);
- ◆ Support team building (50%);
- ◆ Build company culture (40%).



Employees also said that employer-sponsored events help “break the ice”:

- ◆ 49% said they see work events as a chance to connect with employees in different departments; and
- ◆ 43% said the events help connect people across various levels.

Steininger, Ed. CalChamber Newsletter. October 14, 2014.

Glassdoor. October 11, 2013. <http://employers.glassdoor.com/blog/survey-shows-how-to-make-halloween-a-scream-in-the-office/>



Team Building Blending at X winery Napa



Team Building

- ◆ <http://www.teambonding.com/san-francisco/programs>
- ◆ Chili Cook off



Nursing Home or Parents Sick kids



Survey Says – Family Feud

- ◆ Get to know your team





Social responsibility team building

– <http://impact4good.com/index.html>



Tips for Physician/Staff Meetings

- ◆ Set agendas in advance with time frames for discussion –
 - Work with MD president/managing partner to control meetings - Ortho Example
 - Roberts Rules
- ◆ Ask for items for the agenda
- ◆ Do not let meetings degenerate into gripe sessions, – Move to problem solving
- ◆ Write decisions for the policy manual



Meeting Ground Rules

We have listed below a set of ground rules that we are committed to following in all employee meetings to ensure that meetings are productive and smooth. Please review these ground rules prior to the meeting.

1. Only one person may speak at a time. When someone is speaking, everyone else in the meeting will listen respectfully and sincerely try to understand the other person's needs and interests.
2. We will all commit to keeping discussion on topic, and focused.
3. Questions will be used for the sole purpose of gaining clarity and understanding.
4. We will all commit to challenging opinions we do not agree with without attacking the individual who expresses them.
5. We will all commit to treating each other with respect and dignity at all times.
6. The raising of voice or use of derogatory or abusive language will not be permitted.
7. We will only discuss items on the predetermined meeting agenda.
8. Should any of the meeting ground rules be violated, the meeting will be immediately terminated.
9. We are looking forward to a productive meeting with you. Please contact [*Contact Name*] to clarify any questions you may have regarding the meeting ground rules.



Overcoming Objections

- ◆ Gently remind physicians that they are not practicing medicine the same way as they did 15 years ago - Use Medical Analogies
- ◆ Example:
 - Surgical Equipment advances
 - Need to Invest in EMR
- ◆ The Business Side changes and improves just as the Clinical Side does



Introducing Change

- ◆ Consult all Partners/Staff re: Suggestions & Alternatives
- ◆ Describe Change - Reason, Purpose, Advantage
- ◆ Ask MDs and staff to express fears and feelings
- ◆ Make lists of possible problems
- ◆ Ask for commitment to try



Employ Sales Techniques

- ◆ An effective manager is also a great salesperson
 - Persuasive, confident, believes in product/idea
 - Creates desire for change
 - Communicates benefits
 - Successfully overcomes objections with data/information
 - Asks for the order
 - Delivers the product
 - Creates long term, trusting relationships
- ◆ Read sales techniques books or trainings



Physician Behavior which de-motivates staff?

- ◆ Arriving late to the office without calling, which angers the patient when the appointment is delayed
- ◆ Reprimanding the staff in front of patients
- ◆ Undermining the manager's authority
- ◆ Changing systems without staff meetings or without partner agreement



What de-motivates? (cont.)

- ◆ Playing favorites especially with RN/MA
- ◆ Avoiding discipline/termination when needed
- ◆ Never asking for advice from the staff
- ◆ Having spouse work in the practice
- ◆ Expecting overtime without compensation



Group Discussion

- ◆ Share Successful Techniques/Stories/Problems
- ◆ What was your most successful Leadership Experience and what techniques did you use?
- ◆ What types of Team Morale events has your practice implemented?
- ◆ What problems would you like group input?



QUESTIONS?

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Thank you!