# Pediatric Insight

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## **Communication for Successful Leadership**

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Leadership in any field is oriented towards the future and leadership in medicine has the exciting opportunity to make that future focused on greater health and enjoyment of life. Whether we are leading in a clinical setting, research laboratory, education or board room this chance to excite others to join us in this quest can be truly remarkable and rewarding. While the precise roles such as division chief, chair, and dean have different scopes and responsibilities the components of establishing a vision that can energize, enabling individuals to understand how they can play a part in moving that vision into reality and how their efforts will be valued are an essential part. These messages and the how they are communicated are fundamental to the success of the leader.

### Setting a solid foundation

The successful leader will be able to clearly articulate the following to the faculty and staff in their units.

- 1. An engaging vision that is consistent with the mission
- 2. Roles and responsibilities
- 3. Criteria for measuring performance

While many successful leaders find these types of discussions to be essential early on in their tenure, most will find that frequent references to them are vital to a clear understanding of the organization's direction and success.

Many find that soliciting advice from outside the department/institution can be helpful in developing the vision, roles and responsibilities and performance measures. Survey tools from an organization such as Career Physician and advice from its Child Health Advisory Council can provide a look from outside the organization which can be extremely important in these assessments. Some of the common pitfalls that such expertise can help avoid include developing a vision that is too closely tied to strategical or operational concerns. Such a limited vision can deprive the organization from common understanding that withstands challenges from the real world. Roles and

responsibilities that do not truly reflect the demands and expectations of the positions leave value on the table and can result in metrics that fail to bring about strength that comes from true alignment.

The process of developing a vision that resonates with all individuals in an entity is challenging but much easier when the components are clearly spelled out and consistent with the mission. Values, goals, and the very reasons for existence are much easier to relate to if faculty and staff have input and the opportunity for discussion. Depending on size and complexity of the organization, town hall, division, or departmental meetings that have space on the agenda for discussion of these topics is a way to begin the process of developing buy-in for a common vision. While discussions regarding specific strategy and tactics are important to the successful attainment of the vision those discussions are not a replacement for more fundamental understanding of why the organization exists. This clarity of understanding the vision for the organization serves as the foundation that the strategic and tactical decisions come from. In an organization with strong and successful leadership an individual from outside the organization should be able to have a conversation with members at many different levels of the organization and come away with an understanding of that organization's purpose.

The establishment of roles and responsibilities is essential in order to have a common understanding where individuals should be placing their efforts. It is important to have discussions at regular intervals with those having direct reporting relationships with you to make certain there is alignment between your expectations as a leader and the individual who is reporting to you. There are many ways to document these conversations, but regular (often yearly) written summary of these meetings provides greater clarity of communication. Depending on the size of the unit involved, those individuals should be encouraged to have similar discussions with follow up documentation for those people reporting to them. In general, departmental and divisional meetings should be held monthly. Department chairs should have formal meetings with division chiefs quarterly or semiannually and a formal written evaluation done yearly has become routine. Division chiefs should meet one on one with their faculty on at least a semi-annual basis and have some form of a written evaluation annually

The following is a departmental chair as an example for setting roles and responsibilities. Such an example is obviously not meant to apply to all situations but will promote thoughts/discussions and can provide a template that can be revised for the appropriate setting:

- Oversight and responsibility for faculty and staff.
- Accountability for promoting and evaluating progress towards the clinical, research and educational missions of an academic department.
- Periodic (usually monthly) meeting with division chiefs which will include metric reviews.

- Establishment of expectations regarding notification of pending issues and concerns that will require departmental involvement.
- Establishing metrics for the three major components of a typical academic department's mission:

#### Clinical

- Productivity measures such clinic visits, inpatient days, number of consults
- Inpatient and outpatient quality scores
- Inpatient and Outpatient satisfaction

#### Research

- List of publications and presentation by faculty
- List of grants both peer reviewed and private from faculty
- Renewal dates and applications pending
- Financial accounting of department research activities and investments

#### Education

- Review of medical student, resident and fellow teaching activities
- Ongoing issues with regulatory compliance (ACGME accreditation,
- Metrics including learner satisfaction

These metrics should serve as the basis for the departmental, divisional and faculty review although they will obviously need to be adapted. It is important in these meetings to allow time for feedback. Meetings should end with a summary and timelines for action plans where appropriate.

In addition to the roles and responsibilities it is important that faculty and staff have a clear understanding of how their performance in those areas will be measured. Many faculty and staff have responsibilities in multiple mission areas, and it is often appropriate to include all of them. These measurements will usually include both subjective and objective components. Those objective components should be as quantifiable and transparent as possible. Examples in the clinical realm would include things such as productivity, quality measures and patient satisfaction. In the research realm information such as levels of funding, grant submissions, and publications can be considered. Education measurements can include course load, teaching hours, and learner evaluations.

This process of communicating openly and candidly with the faculty and staff is important not only during the initial phase of leadership but on an ongoing basis. Regular faculty and departmental meetings with ample opportunity for discussion of problems allows for a consistent reacquaintance and renewal with these issues.

#### Communication of strategic and tactical considerations

Many organizations have requirements that necessitate information flow from leadership on regular basis. Much of this information can be predicted and should be readily available. Social media gives many options, but it is important to make sure everyone knows when and where these data points will be available. It is also important to make

sure that when new faculty and staff arrive, they know where the information can be found. Without a regularly updated and frequently visited scorecard it can be easy to lose focus on important productivity and quality standards in any of the mission areas when other events arise such as the recent Covid-19 pandemic.

There will also be major strategic and tactical considerations that will arise periodically that will require decision making and a process of getting that information out to faculty and staff. While everyone often focuses on the actual decision, it cannot be overemphasized that the decision-making process that leadership uses and how those decisions are transmitted can have a major impact on how you are viewed and ultimately succeed.

While such decision-making processes can be extremely complex some of the same principles put forth earlier apply here. If people are more involved in the decision, they will likely be more invested in its success. While the nature of some decisions may preclude large group involvement and require some confidentiality more involvement is usually better. It is worth noting that leaders are chosen and remain in their positions not because they "know" all the answers but because they have the ability to arrive at the best solutions. It is important during leadership discussions on these issues with your leadership team to set the boundaries of the discussion. An example might be: "... given the organizations missions and values the following questions arise and I would like your opinions and suggestion on the issue. I realize this is an important issue and that I (or this office) will be responsible for the ultimate decision, but I look forward to hearing your perspectives on the issue...". Listening is an important skill in such a discussion and creating an environment where others can feel free to respectfully disagree is important.

Once a course of action has been decided on there are several important considerations in regard to the transmittal to faculty in staff that will help it to be successful. As a general rule people do not like to be surprised. Many units are large enough that it is worth considering layers of information dispersal. An example would be the consideration of a major merger of two or more units. If there is a governance body that has not been involved in the decision-making process they may be notified prior to faculty and staff by hours or days. Often Vice Chairs, deans or chairs benefit from early notification. No one in your leadership team feels good about being "blind-sided" in the hallway by faculty or staff as their first indication of the decision. This is one of those situations where an ounce of prevention can truly be worth a pound of cure. These notifications will often include rationales for the decision and how the decision was arrived at. It will usually be important to note the information you have drawn upon in making the decision. Lastly it may be important to note timelines and when or how further information will be coming forth.

The Child Health Advisory Council is an advisory board to CareerPhysician. Comprised of former deans, department chairs, division chiefs and children's health system executives, the Advisory Council represents more than 100 years of child health leadership experience and is committed to a legacy of positively impacting the breadth and depth of

leadership in pediatrics. The Child Health Advisory Council includes nationally recognized thought leaders who are dedicated to providing experiential insight and advisory services to CareerPhysician and our executive search and leadership development clients.

CareerPhysician is a nationally respected physician leadership search and consulting firm with 20 years of unprecedented success in supporting the critical talent needs of academic child health organizations. No one understands the culture and the challenges of academic leadership development better. Our flexible, innovative talent engagement platforms and proven ability to complete complex academic search and leadership development assignments has resulted in an unmatched track record of success. We have created the gold standard in academic leadership development as we work to advance & develop current and future physician leaders.

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