

PROGRAM HELPS NORWEGIAN AMERICAN HOSPITAL PROVIDE PATHS TO LEADERSHIP

CASE STUDY

Norwegian American Hospital | Chicago, Illinois

Overview

As physicians take on increasing levels of executive responsibility within hospitals, their skills need to evolve with their role. While caring for patients will always be paramount, other skills related to cross-functional collaboration, conflict resolution, managing to metrics and long-term strategy become equally important.

Norwegian American Hospital, a 200-bed safety-net hospital in Chicago's Humboldt Park neighborhood, recognized this need within its organization and embarked on a professional development partnership with the American Hospital Association that will help it engage and develop physicians to build a pipeline of future leaders.

"We identified three needs for our organization," says Michelle Blakely, PhD, Norwegian American's chief operating officer. "We need to engage with physicians differently. Second, we need to create true partners. Finally, we want to help our physicians develop as leaders to provide them with the requisite skills to be successful beyond their clinical competence in any facet of health care. Through our internal executive-level conversations, we agreed a physician development

program was the best way to meet these needs. But we really didn't have the experience or resources to develop one."

Norwegian American overcame its limitations and met its goals by becoming one of the first participants in the American Hospital Association's Physician Leadership 360 program, which provides professional and leadership development for physicians. Participating organiza-

tions in Physician Leadership 360 work with the AHA to develop goals for the engagement. The AHA's partner Strategic Talent Solutions (STS) then conducts professional leadership feedback and development planning based on its 360 assessment process. STS is a consulting partnership founded on a deeper understanding of what competitive strategies demand from talent. The firm

has worked with health care organizations for many years and offers a full range of services to help these physician leaders hone the leadership skills required to create and maintain high-functioning teams.

The AHA and STS use the results from the assessment to conduct professional leadership feedback and coaching to create an action-oriented development plan and provide other resources that are tailored to the organization's



goals and staff. Using the feedback, the Norwegian American team worked together to design projects that gave participants opportunities to apply and further develop their leadership skills. A Physician Leadership 360 engagement typically lasts six to eight weeks.

Attracting Prospects

Norwegian American wanted to help some of its physicians see themselves as future leaders, and then to develop their leadership skills. The hospital invited selected physicians to join its Physician Leadership 360 cohort, but importantly, opened it to other who requested inclusion.

“Some of the medical staff members we selected didn’t express interest, and we were surprised by some of the people who asked to participate,” says Blakely. “That was helpful to us to see which physicians want to be part of the hospital in a more impactful way.”

Once the cohort of seven participants was selected the physicians identified colleagues to provide feedback through an online 360 tool and conducted their self-assessment. The participants met with the AHA and STS team to connect this work to changes in the health care landscape generally, the challenges in Norwegian system specifically, and delve into their relevant individual feedback and development planning. Coaching was based on results from the 360° assessment. Participants were asked to rate themselves on a variety of leadership attributes, for example how they managed to key metrics, whether approach their responsibilities with a strategic

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mindset, how they handled conflict resolution and how collaborative and team-oriented they are in their approach. Each physician’s colleagues, direct reports and manager rated the participant on the same attributes through anonymous surveys.

“It was enlightening to see how you are viewed by other peers and administrators, and made me realize some key factors to assist me with pursuing an administrative role in health care,” says Dr. Annmarie Kulekowskis, who balances her time between private practice and her work at Norwegian American. “I definitely would not have asked my peers the detailed questions that they were given. The fact that they could answer anonymously meant more to me because I knew they were being truthful in their responses.”

Assessment Results Guide Program

A highly experienced consulting psychologist from STS worked with each cohort participant to compare the self-assessment and staff-assessment scores and interpret the results in the context of their responsibilities. There were also group discussions where the facilitator and participants could present examples of how different actions contributed positively or negatively to motivating others, demonstrating leadership, and helping the organization achieve its goals.

“I believe it was very eye opening to see what my peers and coworkers thought about my leadership style, strengths and weaknesses. Of course it is not what you always want to hear, but I appreciate feedback, particularly when negative or when there are opportunities for improvement,” says program participant Dr. Dagoberto Camacho, M.D., MBA, Norwegian American’s medical director of ambulatory services.

Each participant received additional coaching and a tailored action plan that focused on the individual’s ability to deliver more effectively against his or her responsibilities. Blakely cautions that while the resources are valuable, hospitals shouldn’t rely on the external program alone.

“The critical piece for hospital administrators to make this successful is to think about what infrastructure you’ll have and how it fits with what the AHA is doing for you,” she says. “The AHA program is a component. What else are you going to do to complement it? We learned we should have had one of our own physician executives formally in place to engage with and mentor the participants.”

Despite that perceived gap, most of the cohort members were very satisfied with the experience.

“The action plan allowed me to further analyze areas of potential weakness and implement goals to become a better leader, says Camacho. “I could not have done as well on my own, because through the program we could receive guidance any time we needed and plenty of resources to enrich our experience.”

A Foundation for Moving Leadership Development Forward

Blakely considers the program a success. Norwegian received immediate benefits in morale and engagement because many of the physicians who were invited to participate felt honored, and have made ongoing efforts to improve their skills.

“The program showed me that Norwegian American is looking to partner closely with its providers to render better and comprehensive care, while we confront together the challenges imposed by the current healthcare legislation,” says Camacho.

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“Opportunities like these really open your eyes to the possibilities that lie ahead,” says Kulokowskis. “I realized that I am viewed as a leader, and that the idea of a leadership role in the health care field is not that farfetched.”

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Outcomes and comments like these have led Norwegian American to continue to apply the techniques learned through the Physician Leadership 360 process. Working with the AHA provided a jump-start to a physician leadership development process that will serve the organization well into the future.

“Working with the AHA brings credibility. Some of the content it brought to our program is informed by its national platform. The AHA simply has more perspective than a community hospital could develop,” says Blakely. “Could we have built a program like this ourselves? Maybe, but it would have taken us a lot more time.”

Contact

Interested in learning how Physician Leadership 360 could work for your hospital?

Elisa Arespachoga

 elisa@aha.org