



Hennepin County
Medical Center

Physician Leadership Development

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Medical Center

- Level 1 Trauma Center
- 450 beds
- 6700 Employees
- Public Teaching Hospital
 - 14 Residency/Fellowship Programs
 - >500 Residents & Fellows
 - >400 Medical Students



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Leadership Development: 2 Cohorts, 2 Designs

1st Cohort

- 40 participants
- Physicians + Managers/Directors
- 10 Sessions over 2 years
- St Thomas Executive Leadership Faculty
- Case Work: Small Groups

2nd Cohort

- 28 participants
- Physicians Only (emerging, not already in leadership roles)
- 10 Sessions over 1 year
- Internal Faculty (graduates from 1st cohort)
- Case Work: Large Group



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of ST. THOMAS
MINNESOTA

Opus College of Business



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Leadership Curriculum

- Adaptive Leadership (foundation for entire series)
- Fair Process
- Polarity Management
- Culture and Performance
- Building High Performing Teams
- Importance and Vulnerability of the Safety Net
- Finance/Economics
- Servant Leadership
- Challenges/Opportunities of Health Care Reform
- The Leader's Role in Quality Improvement
- Top 10 Resiliency Strategies for the Physician Leader



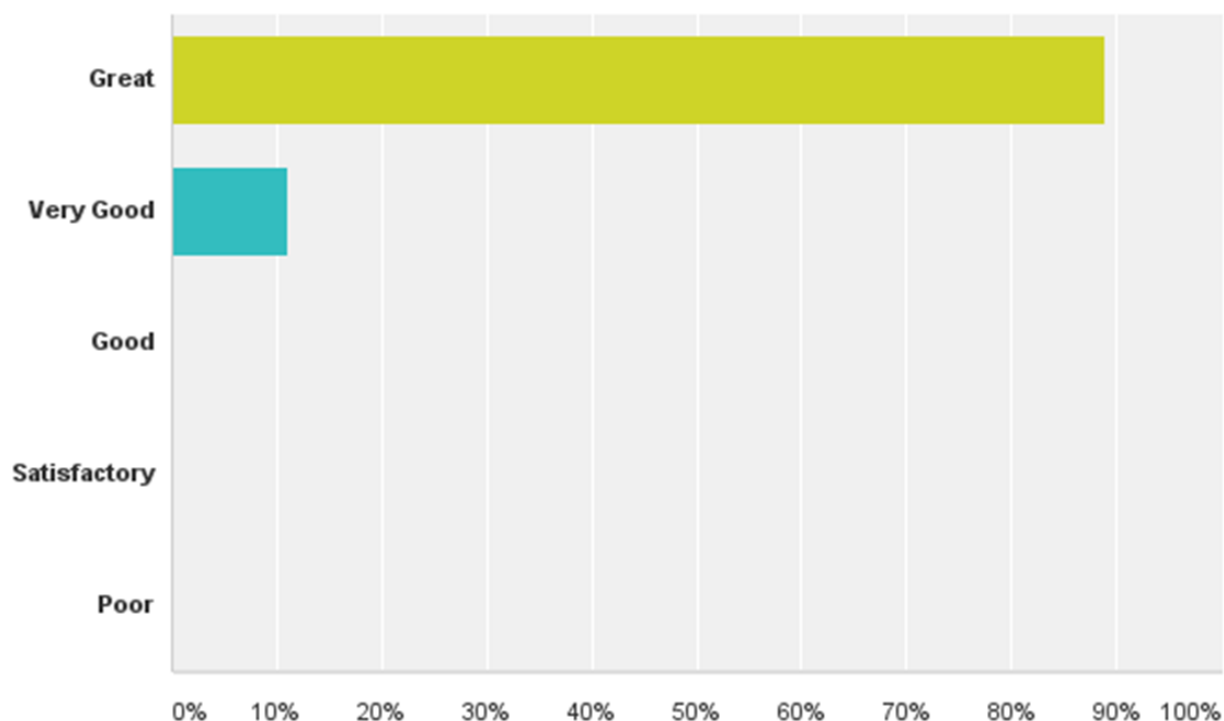
Content Experts
Discuss Real Work



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Q1 How would you rate your overall experience at the HHS Leadership Academy?

Answered: 18 Skipped: 0





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Rank Your Top Resiliency Strategy

Answer Choices	Responses	
1 Learn to recognize adaptive work	66.67%	12
2 Reflect in Action - perspective	61.11%	11
3 Develop your ability to influence others	61.11%	11
4 Learn to spot work avoidance and interpret it	55.56%	10
5 Develop your presence	44.44%	8
6 Know thyself	38.89%	7
7 Learn not to take it personally even though it is mean to feel personal	77.78%	14
8 Be curious about what you can't know	33.33%	6
9 Don't go it alone	44.44%	8
10 Find sanctuary regularly	44.44%	8

"I have the most trouble with Don't go it alone. The American culture and Physician culture is all about the individual. Going fast and alone is how we do most things. Teamwork is our main deficit in healthcare."



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“I think the content of the 30 minute sessions with the CEO was less important than the fact that those 30 minute sessions happened at all. We were able to build a trusting relationship with our new CEO. At times we were able to give him ideas and feedback, which was good, but even when the conversation was less substantive, it represented an unusual opportunity to develop that relationship with him. I am extremely grateful to our CEO for that opportunity.”



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What We've Learned

- Get off campus
- The facilitator is key
- Discuss real issues/do real work
- Bring in leaders from competing health systems
- Do 360's/personality assessments
- Engage the CEO in group debriefing
- Close sessions from C-Suite
- Provide experiential learning—committees, leadership roles, etc.



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The Future

- Dyad Training (3rd Cohort)
- Deliberate tracking of cohort leaders into positions
- Consider assigning mentors in the organization
- Don't lose momentum



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System Clinical Leadership Council (SCLC): Leadership Development Program

St. Luke's Health System

September 30, 2014



About Us

St. Luke's Health System

- Only locally owned and governed health system in Idaho
- 7 Hospitals (8 with Children's Hospital)
 - 886 beds
- 100+ clinics
- 13,000 team members (largest private employer in Idaho)
- 1,287 medical staff members and 519 credentialed allied health providers



Overview

Developed a two-year Leadership Development Program for the SCLC in partnership with the Advisory Board Company:

- Assessed needs (PULSE, surveys, interviews, etc.)
- Designed program to align with Leading @ Luke's – St. Luke's Leadership Competencies
- Designed with an interdisciplinary approach: Division Medical Directors, Administrative Directors (Dyads), Clinical Administrative Directors (Triads) and System Senior Executives
- Developed for a cohort of 35 senior-level leaders
- Developed in partnership with physician leader steering committee
- Implemented program and customized content to align with internal initiatives: Change Management, Innovation, Strategy, Vision, Lean
- Evaluated monthly and yearly to reassess and course correct as needed



Program Participants

Interdisciplinary Cohort Structure:

- 14 Division Medical Directors
- 14 Administrative Directors (Dyads)
- 3 Clinical Administrative Directors (Triads)
- 4 Physician Executives (Executive Medical Director, Chief Quality Officer, VP of Medical Affairs and President, SELECT Medical Network)
- Additional System Executives (Guests have included: SLHS President & CEO, COO, Chief Legal Officer, CFO, and CIO/CMIO)



Advisory Board Partnership

The Advisory Board Company is honored to work with many of the world's most progressive hospitals and health care organizations.

Our U.S. members include:

More than 93% of [*U.S. News & World Report's 2010 "Best Hospitals"*](#)

More than 93% of [*the Leapfrog Group's 2010 "Top Hospitals"*](#)

Eighty-eight of [*Thomson Reuters' "100 Top Hospitals"*](#)

Forty-four of the [*HealthGrades "50 Best Hospitals"*](#)

Sample Physician Leader Development Partners (Systems)

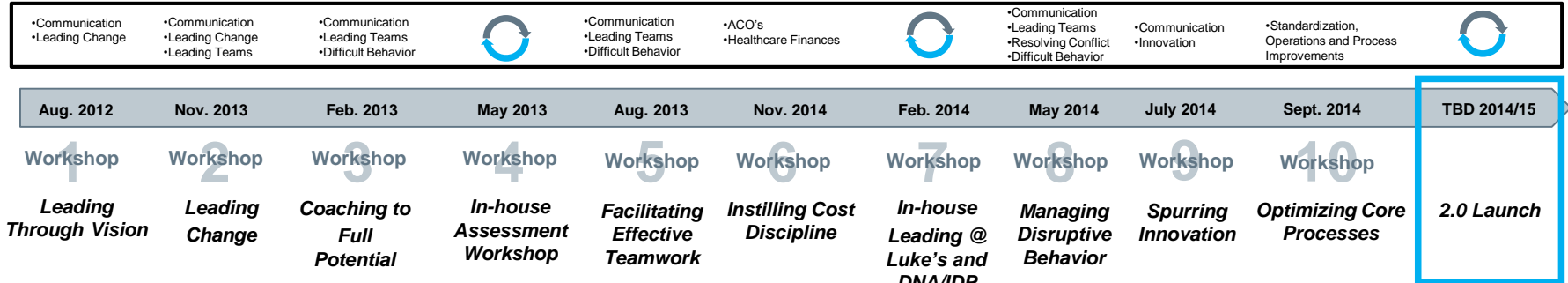
- *Sharp Healthcare, San Diego, CA*
- *Providence Health & Services, Renton, WA*
- *Summa Health System, Akron, OH*
- *Massachusetts General Hospital (Partners Healthcare), Boston, MA*
- *Baptist Health System, Jacksonville, FL*
- *Poudre Valley Health System, Fort Collins, CO*
- *Cone Health, Greensboro, NC*
- *MultiCare Health System, Tacoma, WA*
- *Christus Health, Irving, TX*



SCLC Leadership Development Program

Program Overview

Aligned with Physician Priorities and St. Luke's Health System Leadership Responsibilities (Self, People, Results and Transformational Leadership)



Take Care Forward.

Results

“As a result of ongoing application of the concepts from this course, I will improve my performance as a leader.”

Program Total: 100% Either Agree (35%) or Strongly Agree (65%)



Review: What Worked Well

- **Content and speakers:**
 - Workbooks and useful tools
- **Participant mix:**
 - Learning from each other
 - Team discussions re: SLHS strategies
- **Frequency:**
 - Four-hour sessions offered quarterly – bi-monthly



Review: Challenges & Opportunities

- Time...
 - During sessions (content vs. connecting w/ peers, dyads and executives)
 - Applying (action) learning after sessions
 - Cascading learning and activities with teams
 - Doing more with less (w/ what you have)
- Aligning, recruiting and retaining other physician leaders



Review: Suggested Improvements

- Dedicate or “protect” time to connect and learn
- Align current work w/ structured and intentional application
- Provide content aligned w/ nationally recognized certifications and education
- Match everyone w/ a mentor and coach w/ pre- and post-engagement feedback (peers and/or CLD/OD/PE)
- Align content to organizational goals
- Develop more leaders (to leave a legacy)



10 “Best Practice” Recommendations

1. Active support from executives
2. Linked to organization's strategic priorities
3. Build and expand physician and interprofessional relationships
4. Align & integrate w/ existing learning and development
5. Hold conversations w/ existing and emerging physician leaders
6. Design to support organization's competencies
7. Use internal and external speakers
8. Employ effective learning methods
9. Provide coaching and mentoring
10. Evaluate and refine the program using metrics tied to organization's performance



Link Program w/ Organization's Strategy

Objectives of a PLD Program:

- Strengthen physician engagement and retention
- Strengthen leadership and talent development/succession planning
- Improve quality of care/patient safety
- Align physicians w/ organizational objectives

Our Vision:

- SLHS will transform healthcare by aligning with physicians and other providers to deliver integrated, seamless and patient-centered quality care across all St. Luke's settings

Strategic Initiative: Align SLHS

- Develop leaders throughout the organization, including physicians



Next Steps: Leader & Leadership Development

Leader (Individual):

- Review Development Needs Assessment (DNA) and meet with Organizational Development/Performance Excellence (OD/PE) to begin Individual Development Plans (IDP)

Leadership (SCLC/PLC Teams):

- Align content w/ Leading @ Luke's and offer quarterly development sessions at Physician Leadership Council (PLC): tied to organizational goals w/ time to connect and learn from each other



Next Steps

Develop 2.0 program structure:

- Select program objectives and align learning w/ organizational strategy and goals
- Involve physicians (SCLC/PLC) in the planning/creation to drive buy-in and design interprofessional cohort structure
- Determine criteria for applied learning projects (ATP)
- Further refine and select evaluation methods and metrics
- Determine selection criteria for participation



Questions and Answers

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