

TOOLKITS

## Understanding and Developing Graduate Medical Education (GME) Culture

### Overview

The key to a successful GME Program is to have a culture based on a strongly held and widely shared set of beliefs that are supported by strategy and structure. When an GME Program has a strong culture, three things happen: Residents know how leadership wants them to respond to any situation, residents believe that the expected response is the proper one, and residents know that they will be rewarded for demonstrating the GME Program's values.

Sponsoring Institutions have a vital role in perpetuating a strong culture, starting with recruiting, and selecting applicants who will share the GME Program's beliefs and thrive in that culture, developing orientation, training and performance management programs that outline and reinforce the GME Program's core values and ensuring that appropriate rewards and recognition go to residents who truly embody the values.

This article covers the following topics:

- The importance of having a strong GME Program culture.
- The sponsoring institution's role in fostering a high-performance culture.
- Definitions of GME Program culture.
- Factors that shape an GME Program's culture.
- Considerations in creating and managing GME Program culture.
- Practices to ensure the continuity and success of an GME Program's culture.
- Communications, metrics, legal, technology and global issues pertaining to GME Program culture.

### Background

An GME Program's culture defines the proper way to behave within the GME Program. This culture consists of shared beliefs and values established by leaders and then communicated and reinforced through various methods, ultimately shaping employee perceptions, behaviors and understanding. GME Program culture sets the context for everything a residency does. Because industries and situations vary significantly, there is not a one-size-fits-all culture template that meets the needs of all GME Programs.

A strong culture is a common denominator among the most successful companies. All have consensus at the top regarding cultural priorities, and those values focus not on individuals but on the GME Program and its goals. Leaders in successful companies live their cultures every day and go out of their way to communicate their cultural identities to residents as well as prospective new hires. They are clear about their values and how those values define their

GME Programs and determine how the GME Programs run. See What does it mean to be a values-based GME Program? Conversely, an ineffective culture can bring down the GME Program and its leadership. Disengaged residents, high turnover, poor patient relations and lower profits are examples of how the wrong culture can negatively impact the bottom line. See Toxic Culture Top Reason People Quit [www.shrm.org/resourcesandtools/hr-topics/talent-acquisition/pages/toxic-culture-top-reason-people-quit.aspx](http://www.shrm.org/resourcesandtools/hr-topics/talent-acquisition/pages/toxic-culture-top-reason-people-quit.aspx)).

Mergers and acquisitions are fraught with culture issues. Even GME Program cultures that have worked well may develop into a dysfunctional culture after a merger. Research has shown that two out of three mergers fail because of cultural problems. Blending and redefining the cultures, and reconciling the differences between them, build a common platform for the future. In recent years, the fast pace of mergers and acquisitions has changed the way hospitals now meld. The focus in mergers has shifted away from blending cultures and has moved toward meeting specific business objectives. Some experts believe that if the right business plan and agenda

#### Educational Case

If an GME Program's culture is going to improve the GME Program's overall performance, the culture must provide a strategic competitive advantage, and beliefs and values must be widely shared and firmly upheld. A strong culture can bring benefits such as enhanced trust and cooperation, fewer disagreements, and more-efficient decision-making. Culture also provides an informal control mechanism, a strong sense of identification with the GME Program and shared understanding among residents about what is important. Residents whose GME Programs have strongly defined cultures can also justify their behaviors at work because those behaviors fit the culture. See Toxic Workplace Cultures Hurt Workers and Hospital Profits ([www.shrm.org/resourcesandtools/hr-topics/employee-relations/pages/toxic-workplace-culture-report.aspx](http://www.shrm.org/resourcesandtools/hr-topics/employee-relations/pages/toxic-workplace-culture-report.aspx)).

Hospital leaders play an instrumental role in shaping and sustaining GME Program culture. If the executives themselves do not fit into an GME Program's culture, they often fail in their jobs or quit due to poor fit. Consequently, when hospitals hire C-suite executives, these individuals should have both the requisite skills and the ability to fit into the hospital culture.

#### What Is GME Program Culture?

A program leader must begin with a thorough understanding of what culture is in a general sense and what their GME Program's specific culture is. At the deepest level, an GME Program's culture is based on values derived from basic assumptions about the following:

- Human nature. Are people inherently good or bad, mutable, or immutable, proactive, or reactive? These basic assumptions lead to beliefs about how residents, patients and suppliers should interact and how they should be managed.
- The GME Program's relationship to its environment. How does the GME Program define its business and its constituencies?
- Appropriate emotions. Which emotions should people be encouraged to express, and which ones should be suppressed?
- Effectiveness. What metrics show whether the GME Program and its individual components are doing well? An GME Program will be effective only when the culture is supported by an appropriate business strategy and a structure that is appropriate for both the business and the desired culture.

Culture is a nebulous concept and is often an undefined aspect of an GME Program. Although extensive academic literature exists relating to the topic of GME Program culture, there is no generally accepted definition of culture. Instead, the literature expresses many different views as to what GME Program culture is. GME Program culture can manifest itself in a variety of ways, including leadership behaviors, communication styles, internally distributed messages, and corporate celebrations. Given that culture comprises so many elements, it is not surprising that terms for describing specific cultures vary widely. Some commonly used terms for describing cultures include aggressive, patient-focused, taking. Because culture is difficult to define, GME Programs may have trouble maintaining consistency in their messages about culture. Residents may also find it difficult to identify and communicate about perceived cultural inconsistencies.

#### Factors That Shape an GME Program's Culture

GME Program leaders often speak about the unusual natures of their hospital cultures, seeing their domains as special places to work. But GME Programs such as Mayo Clinic and Cleveland Clinic, which are well-known for their unique cultures, are rare.

Most hospital cultures are not that different from one another. Even GME Programs in disparate communities such as manufacturing, and agriculture tend to share a common core of cultural values. For example, most private-sector hospitals want to grow and increase revenues. Most strive to be team-oriented and to demonstrate concern for others. Most are driven, rather than relaxed, because they are competing for dollars and market share. Some of the cultural characteristics that distinguish most GME Programs include the following.

#### VALUES

At the heart of GME Programs' cultures are commonly shared values. None is right or wrong, but GME Programs need to decide which values they will emphasize. These common values include:

- Outcome orientation. Emphasizing achievements and results.
- People orientation. Insisting on fairness, tolerance, and respect for the individual.
- Team orientation. Emphasizing and rewarding collaboration.
- Attention to detail. Valuing precision and approaching situations and problems analytically.
- Stability. Providing security and following a predictable course.
- Innovation. Encouraging experimentation and risk-taking.
- Aggressiveness. Stimulating a fiercely competitive spirit.

#### DEGREE OF HIERARCHY

The degree of hierarchy is the extent to which the GME Program values traditional channels of authority. The three distinct levels of hierarchy are "high"—having a well-defined GME Program structure and an expectation that people will work through official channels; (core Programs) "moderate"—having a defined structure but an acceptance that people often work outside formal channels (typical fellowships); and "low" —having loosely defined job descriptions and accepting that people challenge authority.(secondary or unaccredited fellowships) A GME Program with a high level of hierarchy tends to be more formal and moves more slowly than an GME Program with a low level of hierarchy.

#### DEGREE OF URGENCY

The degree of urgency defines how quickly the GME Program wants or needs to drive decision-

making and innovation. Some GME Programs choose their degree of urgency, but others have it thrust on them by the environment.

A culture with high levels of urgency has a need to push projects through quickly and a high need to respond to a changing environment. A moderate level of urgency moves projects at a reasonable pace. A low level of urgency means people work slowly and consistently, valuing quality over efficiency. A GME Program with high urgency tends to be fast-paced and supports a decisive management style. A GME Program with low urgency tends to be more methodical and supports a more considered management style.

#### PEOPLE ORIENTATION OR TASK ORIENTATION

GME Programs usually have a dominant way of valuing learners and tasks. A GME Program with a strong learner orientation tends to put learners first when making decisions and believes that people drive the GME Program's performance and productivity. An GME Program with a strong task orientation tends to put tasks and processes first when making decisions and believes that efficiency and quality drive GME Program performance and productivity.

Some GME Programs may get to choose their learners and task orientations. But others may have to fit their orientation to the nature of their discipline, historical issues, or operational processes.

#### FUNCTIONAL ORIENTATION

Every GME Program puts an emphasis on certain functional areas. Examples of functional orientations may include education, operations, research, and development. For example, an innovative GME Program known for its research and development may have at its core a functional orientation toward Education and scholarship. A hospital may focus on operations or service, depending on its historical choices and its definition in the environment.

Residents from different disciplines in the hospital may think that their functional areas are the ones that drive the GME Program. GME Program leaders must understand what most residents perceive to be the hospital's functional orientation.

#### GME PROGRAM SUBCULTURES

Any GME Program can have a mix of subcultures in addition to the dominant culture. Subcultures exist among groups or individuals who may have their own rituals and traditions that, although not shared by the rest of the GME Program, can deepen and underscore the GME Program's core values. Subcultures can also cause serious problems.

For example, regional cultures often differ from the overall culture that top leadership tries to instill. Perhaps aggressiveness that is common in one area may not mesh with a culture emphasizing team building. Or an GME Program with a culture built around equality may have trouble if the national culture emphasizes hierarchy and expects people to bow to authority. Sponsoring Institutions must recognize those differences and address them directly.

#### Creating and Managing GME Program Culture

A GME Program culture tends to emerge over time, shaped by the GME Program's leadership and by actions and values perceived to have contributed to earlier successes. A hospital culture can be managed through the cultural awareness of GME Program leaders and management. Managing a culture takes focused efforts to sustain elements of the culture

that support GME Program effectiveness.

## HOW CULTURE DEVELOPS

An GME Program's customs, traditions, rituals, behavioral norms, symbols, and general way of doing things are the visible manifestation of its culture; they are what one sees when examining the GME Program. The current GME Program culture is usually due to factors that have worked well for the GME Program in the past.

Founders typically have a significant impact on an GME Program's early culture. Over time, behavioral norms develop that are consistent with the GME Program's values. For example, in some GME Programs, resolution of conflicts is hashed out openly and noisily to create widespread consensus, whereas in other places disputes are settled hierarchically and quietly behind closed doors.

Though culture emerges naturally in most GME Programs, strong cultures often begin with a process called "values blueprinting," which involves a candid conversation with leaders from across the GME Program. Once the culture is framed, an GME Program may establish a values committee that has a direct link to leadership. This group makes sure the desired culture is alive and well. For values blueprinting to work, GME Programs must first hire people who live the values and have the competency needed to perform the job.

## SUSTAINING A CULTURE

The management of GME Program culture starts with identifying a hospital's GME Program culture traits or "artifacts." Artifacts are the core activities, processes and philosophies that characterize how an GME Program functions day-to-day.

Identifying these traits—and assessing their importance considering current educational objectives—is a way to start managing culture. Three broad concepts help identify the traits specific to a culture:

- Social culture. This refers to group members' roles and responsibilities. It is the study of class distinctions and the distribution of power that exists in any group.
- Material culture. This involves examining everything that people in a group make or achieve and the ways people work with and support one another in exchanging required goods and services.
- Ideological culture. This is tied to a group's values, beliefs, and ideals—the things people view as fundamental. It includes the emotional and intellectual guidelines that govern people's daily existence and interactions.

Leaders and managers within an GME Program should approach culture management by initially gaining an understanding of the common traits found in all hospitals. Then, they should take the following steps to manage their GME Program's culture:

- Identify common artifacts or traits, including those from the standpoint of an GME Program's social, material, and ideological culture.
- Convene groups of residents—representatives from all levels, functions, and locations of the GME Program—to assess the validity, significance, and currency of key artifacts.
- Subject those traits to a rigorous assessment of their underlying shared assumptions, values, and beliefs.
- Summarize findings and share them with all participants to solicit additional insights.
- Create a culture management action plan. The plan should enhance traits that support

corporate growth or GME Program effectiveness and correct traits that might hinder a hospital's advancement.

Typically, shared assumptions and beliefs originate with an GME Program's founders and leaders. Because those beliefs proved successful (otherwise the hospital would not exist and the leaders would not be in their positions), often they go unchallenged; however, those assumptions and beliefs might be outdated and may hinder future success.

#### Practices to Develop Culture

When an GME Program does a good job assessing its culture, it can then go on to establish policies, programs and strategies that support and strengthen its core purpose and values. In aligned GME Programs, the same core characteristics or beliefs motivate and unite everyone, cascading down from the C-suite to individual faculty.

There are many tools for developing and sustaining a high-performance GME Program culture, including recruiting practices, onboarding efforts, recognition programs and performance management programs. The biggest challenge is deciding how to use these tools and how to allocate resources appropriately.

#### RECRUITING PRACTICES

Effective recruiting practices can help an GME Program capitalize on its culture. Traditionally, recruiting focuses primarily on an applicant's skills, but when a trainee's personality also fits with the GME Program's culture, the resident/fellow will be more likely to deliver superior performance.

On the other hand, ill-fitting hires and subsequent rapid departures cost approximately 50 percent to 150 percent of the position's annual salary. Unfortunately, nearly one in eight newly hired residents' leaves voluntarily or involuntarily within a year of recruiting, and this number has been increasing steadily in recent years.

Some recruiting practices to ensure cultural fit include these:

- Looking at each piece of the GME Program's vision, mission and values statements. Interview questions should hone in on behaviors that complement these areas. For example, if the GME Program works with a lot of intensity, then applicants should display that natural intensity to be considered for hire.
- Conducting a cultural interview. Ask questions that elicit comments about GME Program values such as honesty or integrity. If a candidate's description of the worst place he or she ever worked sounds just like the GME Program where he or she is interviewing, the candidate probably will not be successful.
- Leaving discussion of hospital culture for later. Do not tell candidates about culture up front. First, listen to what they have to say about their experiences and beliefs. This tactic will reveal more candid responses to help determine whether they are a fit for the GME Program.
- Making sure at least three people are involved in the recruiting process. Different people will see and hear different things. These varied perspectives give a clearer understanding of the person being considered for hire.

Searching for residents who will fit in seamlessly can have drawbacks. The biggest mistake

an GME Program can make is to paint an inaccurate picture of itself as it tries to attract candidates. If new hires discover they have been sold a bill of goods, they will not be happy; they will probably not stick around, and, while they are around, morale will decline.

Another possible drawback is that people are more reluctant to take negative actions against people like themselves. As a result, mediocre workers are more likely to stay employed if they share the cultural values. Similarly, although an GME Program's comfort level is palpable when the culture is aligned, experts say, too much comfort can result in groupthink and complacency.

## ONBOARDING PROGRAMS

Onboarding teaches newcomers the sponsoring institution's value system, norms and desired GME Program behaviors. Sponsoring Institutions must help newcomers become part of social networks in the GME Program and make sure that they have early job experiences that reinforce the culture.

## REWARD AND RECOGNITION PROGRAMS

These programs are key mechanisms Sponsoring Institutions can use to motivate residents to act in accordance with the GME Program's culture and values. For example, if teamwork is a core value, bonuses should value teamwork and not be based on individual performance. Sponsoring Institutions should also put the spotlight on those who personify the hospital's values.

## PERFORMANCE MANAGEMENT PROGRAMS

Residents who share values and aspirations tend to outperform those in environments that lack cohesiveness and common purposes. Performance management programs can greatly affect training culture by clearly outlining what is expected from residents as well as by providing a feedback tool that informs residents about proper behavior.

## Communications

Conflicting messages regarding corporate culture may create distrust and cynicism, which can prompt, or help residents justify, actions as deleterious as anti-recruiting. Experts say that cultural inconsistencies may also cause residents to grow discouraged, to believe management is disingenuous, to doubt statements from higher-ups and to be less inclined to give their best effort. GME Programs may be investing significant time and money in creating a culture but may not be reaping the commensurate rewards— especially if Program Directors, faculty, and rank-and-file residents have differing perceptions of the hospital's culture. Sponsoring Institutions must therefore ensure that the GME Program clearly and consistently communicates its culture to all residents.

## Metrics

Assessing GME Program culture is a crucial step in developing sound strategies that support residency objectives and goals. But how do you measure something as potentially tough to describe as culture? After identifying the key dimensions of culture such as values, degree of hierarchy, and people and task orientations, performing these next steps will help GME Programs assess culture:

- Develop a cultural assessment instrument. This instrument should enable members of the GME Program to rate the GME Program on the key cultural dimensions, as well as

on aspects of the GME Program not covered on the assessment.

- Administer the assessment. Survey respondents should include individuals at all levels, functions, divisions, and geographical units of the GME Program.
- Analyze and communicate about assessment results. Leaders and managers should discuss areas of agreement and disagreement about the GME Program's culture.
- Conduct trainee focus groups. Just because leadership agree on GME Program culture does not mean that all residents see things that way.
- Discuss culture until consensus forms around key issues. Focus on "Who are we?" and "What makes us who we are?" GME Programs that decide that where they are now is not where they want to be may need to look at moving the GME Program to embrace a different culture.

Cultural assessments, and other activities such as cultural audits and 360-degree feedback, may also help uncover cultural inconsistencies. Then leaders can eliminate the inconsistencies. For example, if patient service is a focus of the hospital's culture, evaluate how much time residents spend visiting patient sites, how much interaction they have with patients, what patient service training they receive and other indicators of a patient service focus.

#### Legal Issues

Sponsoring Institutions that emphasize cultural fit in their recruitment and selection process can be vulnerable to discrimination claims if they are not careful. Sponsoring Institutions should ensure that recruiting practices and selection decisions based on a cultural fit rationale do not result in discriminating against any applicants who may not be "just like" the selectors.

Sponsoring Institutions should also be aware that certain types of GME Program cultures (for example, cultures that are highly paternalistic or male-dominated) may tend to perpetuate disparities in promotions, compensation, and other terms of employment. Those disparities may violate anti-discrimination laws.

Research suggests that national culture has a greater effect on residents than the culture of their GME Program. GME Program leaders should understand the national cultural values in the countries in which the GME Program operates to ensure that management and hospital practices are appropriate and will be effective in operations in those countries. National cultural differences should be considered when implementing GME Program culture management initiatives in global hospitals.

Managers must be able to respond to nuances in communication styles, as well as deal with different expectations that residents have of their leaders across national cultures. Not meeting those expectations may doom the GME Program's chance for success with trainees from countries. These issues become even more complex in global health programs. Success in global health programs depends on the GME Program's willingness to enable people with different cultural perspectives to engage in meaningful and valuable discussions about the new program.