

Leadership

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The fifth and final competency of the Healthcare Leadership Alliance (HLA)¹ model is leadership. This competency involves cultivating an environment in which all employees can contribute to their full potential in support of the organization's mission.

WHAT THIS COMPETENCY ENTAILS

The HLA identified 14 domains associated with this competency. From this list, we identified three areas that we believe are most central to effective leadership in health administration, particularly at higher levels.

A compelling vision. Vision can be parsimoniously described as a desirable picture of the future, one that employees can remember when the process of change proves particularly difficult. Establishing a vision involves not only constructing this picture but also ensuring that the vision is pervasively disseminated through methodical communication. In other words, having a clear answer to the question, "How do I know for certain that everyone is aware of the vision?"

Energizing goals. The link between well-executed goal setting and higher organizational performance has been clearly established in the literature.² When crafted and communicated effectively, goals can provide a concrete sense of progress toward the organization's vision. As communication devices, they can also enhance employees' understanding of their common purpose.

Organizational climate. Four of the domains in the HLA definition relate directly to the leader's role in developing the organization's culture: mutual trust, individual motivation, teamwork, and diversity.

As leaders progress to assume higher positions in the organization, their role in developing organizational climate becomes an increasingly prominent part of their job. This shift in focus usually requires leaders to change their approach to the work they do. Often, people get rewarded early in their career based on what they are individually able to deliver to an organization. Promotions at the more junior levels are often based on a specific activity that individuals are working on and their own skills, not on their ability to motivate, energize, and develop a mission for others in the organization or department. The pathway to leading an

organization of significant size will involve shifting perspective toward creating a climate that is broadly conducive to performance.

HOW TO BEST DEVELOP THIS COMPETENCY

The groundwork for this competency should start with one's graduate education, if not before. However, leadership skills are difficult at best to develop in a traditional classroom setting. In our graduate program at Rush University, much of the leadership development work focuses not on in-class activities but rather on opportunities for students to assume leadership roles and to receive regular feedback about their performance in those roles. These early opportunities include leadership roles on committees, in service organizations, and in special projects at the medical center. We tend to see students develop most rapidly when they are given the opportunity to make real contributions, when both success and failure have real consequences, and when we can create a climate of sufficient safety in which students can openly reflect on their struggles in the company of more experienced mentors.

For the early careerist, fellowship programs can be excellent opportunities to gain an understanding of the experiences and challenges associated with senior executive roles. A well-run fellowship exposes recent graduates to the ways an organization operates at every level, giving them, early on, an internal compass that they can carry with them to their professional roles. While fellows may not have to demonstrate the competencies that are expected at higher levels until many years hence, fellowship experiences tend to stay with them and can serve as templates for their future professional decision making and behavior. The strongest fellowship programs focus more on *how* the leaders in an organization do things and less on *what* they are doing. Skill requirements change as the environment changes; expectations of people skills and leadership skills remain the same.

For the more seasoned administrator, finding opportunities to practice and receive feedback on leadership skills may require regular, proactive effort on their part. Volunteering to lead special projects, especially any performance improvement efforts involving cross-departmental or cross-disciplinary teams, can provide opportunities for feedback. Also, regular collection of feedback from participants in any process or project is valuable.

Table 1 lists ways to develop leadership competency, along with resources for more information.

HOW ORGANIZATIONS CAN USE THIS COMPETENCY

Leaders at the highest organizational levels have the greatest opportunity, as well as responsibility, to foster a climate conducive to leadership practice and development. The principles outlined in the HLA model can be woven into the organizational culture through a variety of practices. Two practices are highlighted here.

Performance evaluation. In many organizations, performance evaluation tends to be dominated by assessments of outcomes—the *what* of performance. Executives

TABLE 1
Activities Useful for Developing Leadership Competency

Competency Item	Development Activities
Establishing a compelling vision; developing energizing goals	<p><i>Practice and feedback opportunities</i></p> <ul style="list-style-type: none"> • Volunteering for leadership roles in community organizations (e.g., as a board member or project leader) • Participating in strategic planning efforts in your own or other departments • Surveying employees on clarity/familiarity/excitement about vision and their role in that vision <p><i>Suggested readings</i></p> <ul style="list-style-type: none"> • Beer, M., and R. A. Eisenstat. 2004. "How to Have an Honest Conversation About Your Business Strategy." <i>Harvard Business Review</i> 82: 82–89. • Kotter, J. 1996. <i>Leading Change</i>. Cambridge, MA: Harvard Business School Press. • Nanus, B. 1992. <i>Visionary Leadership</i>. San Francisco: Jossey Bass.
Enhancing organizational climate: building trust, facilitating individual motivation, encouraging teamwork, and supporting and valuing diversity	<p><i>Practice and feedback opportunities</i></p> <ul style="list-style-type: none"> • Volunteering to lead process improvement teams • Implementing departmental/organizational climate surveys with specific follow-up commitments <p><i>Suggested readings</i></p> <ul style="list-style-type: none"> • Cameron, K. S., and R. E. Quinn. 2006. <i>Diagnosing and Changing Organizational Culture</i>. San Francisco: Jossey-Bass. • Dye, C., and A. N. Garman. 2006. "Appendix E: Action Plan: Developing a Feedback-Rich Working Environment." In <i>Exceptional Leadership: 16 Critical Competencies for Healthcare Executives</i>. Chicago: Health Administration Press. • Lencioni, P. M. 2002. <i>The Five Dysfunctions of a Team: A Leadership Fable</i>. San Francisco: Jossey-Bass.
Developing leaders: supporting and mentoring high-potential talent, planning for leadership succession	<p><i>Practice and feedback opportunities</i></p> <ul style="list-style-type: none"> • Supporting fellowships as an integral part of succession planning • Providing internship opportunities for health administration students • Serving as a mentor in your organization or in a professional association's (e.g., ACHE) mentoring programs • Providing guest lectures or adjunct teaching in university programs • Starting a succession planning process within your department or organization <p><i>Suggested readings</i></p> <ul style="list-style-type: none"> • Dye, C. 2002. <i>Winning the Talent War: Ensuring Effective Leadership in Healthcare</i>. Chicago: Health Administration Press. • <i>Healthcare Executive</i> magazine's Leadership in Mentoring series: www.ache.org/newclub/career/MentorArticles/Mentoring.cfm. • ACHE's Mentoring Manual: www.ache.org/newclub/CAREER/MentoringNetwork/mentoring_manual.pdf.

are used to being evaluated based on outcomes, such as quality, productivity, efficiency, and financial performance. However, an overfocus on outcomes too often means an underfocus on process—the *how* of performance. Many leaders who can attain very impressive outcomes in the short term are unable to maintain them over time because they underperform on process; for example, by failing to build capacity within their staff.

In reality most organizations are overly tolerant of leaders who may perform well on the *what* or on the *how*, but not so well on both. The achievement-at-all-costs manager is perhaps easier to identify than the “who” or “what” underperformers. Of equal concern, however, is the classic mid-level manager who gets along with everyone and is a participant on every team, but who devotes more energy to finessing the political system and staying out of trouble than to taking the necessary risks with direct but unpopular opinions and ideas. Either kind of underperformance (on the *what* or the *how*) can prevent organizations from living up to their full potential.

The HLA leadership competency provides a good framework for organizations, considering the process—the *how* associated with the *what*. Used in combination with other performance metrics (the *what*), this competency description can serve to balance the performance focus.

Leadership development. Evaluating leaders on both the *what* and the *how* is an important first step, but it is only a step. Beyond individual expectations, senior executives need to be asking, “What kind of support are we providing for leadership development within our organization?” For example, adding a requirement for succession planning to performance appraisal sends the message that developing others is an essential part of the job. Providing forums in which succession planning can be learned, discussed, and implemented across the organization helps ensure that the expectation is well executed.

Formal leadership development programs have been growing in popularity, particularly in larger health systems. Structured and monitored effectively, they can help ensure that senior leaders are regularly devoting time and attention to developing the competencies of more junior managers. These programs also serve to build the “social capital” of the program’s participants as well as its providers, expanding people’s networks to include individuals who do not have a direct link to the participants during the course of their day-to-day work.

Ultimately the success of any leadership-development initiative will be determined by its ability to attract, develop, and retain the organization’s most capable staff. Leadership development is an activity that provides few immediate gains but is essential to the long-term viability and growth of the healthcare management profession.

Notes

1. For more information on the HLA's work on competency, visit www.healthcareleadershipalliance.org/directory.cfm.
2. For a comprehensive review of this topic, see Locke, E. A., and G. P. Latham. 1984. *Goal Setting: A Motivational Technique That Works*. Englewood Cliffs, NJ: Prentice-Hall.

For more information on the concepts in this column, please contact Andy Garman at andy_n_garman@rush.edu.