

# leadership book series

## The Art of Medical Leadership

BY SUZAN ORAN & SCOTT CONARD, MD

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We have all heard discussions about the art and science of medicine. Aristotle termed the practice of medicine *phronesis* - practical reasoning and wisdom based partly on science but mainly on experience and judgment. More recently, Voltaire stated that “The art of medicine exists in amuzing the patient while nature cures the disease.” Even more recently, in a 2014 article in *Family Practice Management*, Dr. Thomas Egnew defines the art of medicine as the interpersonal aspects of the healing enterprise including patient-physician communication and difficult patient interactions.

Similar to medicine, leadership has been conceptualized through the years as both an art and a science. Eisenhower defined leadership as “the art of getting someone else to do something you want done because he wants to do it.” Studies through evolutionary history have clearly shown that there is an art to the practice of leadership. The *Art of Medical Leadership* by Suzan Oran and Dr. Scott Conard explores the common pitfalls of medical leaders while providing a how-to guide for growth. The range of topics discussed includes: aspects of being a medical leader; having a solid practice foundation; getting things done; dealing with bumps in the road; and the differences between physician, practice manager, and employee leadership. This review will focus on three key ones discussed separately and as themes throughout the book: interpersonal relations, rallying the troops, and embracing change.

**Relating to others** is arguably the

most important aspect of leadership in which a leader must excel to be successful. Interpersonal relations are all about communication and involve two key components, speaking and listening. Speaking is something that is much easier to learn simply from experience and training. Leaders tend to exhibit a range of listening skills. Some leaders listen just long enough to reply with their preconceived ideas. Good listeners will be attentive, not interrupt, ask clarifying questions, and possibly recap what the other person said. However the most powerful listening skills include two additional practices, listening for the other person and being a learner in the conversation. Henry David Thoreau said “the greatest compliment that was ever paid me was when one asked me what I thought, and attended to my answer.” This quote highlights the difference between being a good listener and a powerful listener. Listening powerfully is a key in successfully relating to, and positively influencing, others.

The act of listening for the other person ensures the leader is attentive to who the other person is and honors the commitment they have to the success of the organization. We have all had situations where we question someone’s commitment to the mission. However in truth, this is detrimental to the success of the mission. When one’s commitment is questioned, they are devalued as a person and it is clear the leader doesn’t respect that which they bring to the table. The other aspect of powerful listening is being

a learner in the conversation, not a knower. Table 1 identifies the characteristics of each. This is likely not new to anyone reading this, however it is a task that many struggle with on a daily basis. Improving our ability to speak as leaders happens with every encounter, but improving our ability to listen powerfully is something which requires much more effort, effort that will pay great dividends in the end.

**Rallying the troops** and by extension gaining a fully engaged staff is something that I personally believe very strongly in. It is the core theme of many leadership books but within *The Art of Medical Leadership*, this concept is tied to improved health outcomes. A six step plan to a fully engaged staff is offered including:

- (1) Ensure you have a clear purpose for your practice (i.e. mission/vision)
- (2) Ensure people’s voices matter and they are free to speak up
- (3) Ensure you use people’s skills, talents, and knowledge to make a difference
- (4) Ensure you address anything not working in a respectful and professional manner
- (5) Ensure that people are supported and empowered by their colleagues, not just their supervisors
- (6) Ensure you recognize and appreciate people for their

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work, not just for significant accomplishments

Following this six step plan will lead to a more satisfied and empowered staff. They will have improved interactions with their patients yielding a true sense of caring. Patients in turn will be more likely to listen and follow their treatment plan leading to improved outcomes. After all, aren't healthy outcomes the goal of medical practice?

Lastly, to spend a few sentences on **embracing change**. Change is a constant within our military health system and something that we, as leaders, need to adapt to constantly. It is easy for us to feel powerless and fall into the role of victim in all this change. Many complain about change, yet we expect our staff to embrace it. As leaders we need to shift our mindset from being victim to being a creator. Being a creator allows us to choose our response to changing circumstances even if we are not the one changing the policies. Creators embrace the challenge of change as a call to action

from which we can learn and grow. A simple example of this is being given a new chronic disease diagnosis such as Diabetes. It is easy to be the victim. However in the role as creator, after the initial disappointment, one can realize that they have complete control as to how they respond to this new diagnosis. They have the ability to take charge, change their diet, exercise more, get their A1c under control, and live their life. This is the approach we need to embrace and create needed change and not be a passive victim. It is the only way to ensure success in our very rapidly changing military healthcare system.

*The Art of Medical Leadership* by Suzan Oran and Dr. Scott Conard discusses a multitude of aspects of leadership more akin to art than science. With its practical and useful tips coupled with validating exercises, it is a book I strongly recommend for leaders of all levels but especially for new leaders taking on a first significant leadership role within the military health system. I hope you find it useful as you continue your journey of

growth in medical leadership.

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Table 1 – Characteristics of a Knower vs. a Learner

Knower	Learner
Criticizes others and self	Gives people the benefit of the doubt
Lets toxic thoughts permeate thought/expression	Detoxifies negative thoughts prior to expression
Focuses on being proven right	Is open to explore what will work
Has the attitude "I know, and I am right"	Has the attitude "I have ideas and opinions"
Resists feedback – is rigid and positional	Is open to constructive criticism/input
Tries to control the situation	Focuses on being influential in solving the challenge
Feels saving face is important	Is psychologically secure and willing to admit mistakes
Believes, "I am my thoughts"	Believes, "I am a thinking person"
Sees problems as persecution and attack	Embraces challenges as the next step in the process
Needs to solve or be saved from the problem	Embraces collaborating with colleagues
Thinks and acts based on fear	Thinks and acts based on commitment/love