Physician leaders: A powerful assemblage with enduring impact

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Ingaging and developing physicians in leading and leadership is vitally important to the profession of medicine as well as to the community and society as a whole. Physicians, based on their unique knowledge and experiences in education, medicine, and in the core values fundamental to medicine, are ideally prepared to serve as leaders.

Physician leaders are authentic; build trust based on transparent communication; develop collegiality by engaging their colleagues, patients, and others; demonstrate self-awareness, combine authority with humility; and emphasize the fundamental importance of ethics and honesty. Physicians, especially, support the principles of servant leadership with attributes of leading to serve, altruism, empowering team members, and realizing success through a teamwork concept. Physician servant leaders espouse inclusive leadership with authentic participation of those from different backgrounds and experiences, complete with myriad genders, races, ethnicities, which allows for the development of cultural awareness and thriving communities.

Personal identity development

Every individual has a unique personal identity and way of being, which began to develop at birth and continues to evolve. In the words of the infamous Mr. Rogers, "we all have different gifts, so we all have different ways of saying to the world who we are."¹ Each of us developed since childhood through family, school, friends, colleagues, and our personal experiences. Over time, an adult identity evolved based on previous experiences and influencers. We continue this evolution throughout our life and career. Each of us has a unique personal and professional identity, and for physicians we have many common characteristics learned and experienced through education, practice, and becoming a medical professional.

Why did we choose and pursue going into medicine? This is most often ambiguous, even in retrospect. Some decide because they have physician parents or family members, or some have had an illness and influential experiences with a doctor or doctors. Everyone, including potential and experienced physicians have their own independent personal identity that somehow influenced the desire and decision to become a physician. Whatever led to the decision to become a physician, most share the characteristics and personality of having a desire to serve and help others.²

Medical students are then educated and trained in a very complex system that aids them in developing a new identity as a physician. They learn new and foreign concepts – the language of medicine, the science of medicine, clinical skills, and a new way of being and acting. Included is the development of the professional identity of a doctor with personal and professional values in addition to the knowledge, skills, and attitude.

Throughout this professional identity formation, opportunities arise to function as leaders in various situations and roles. However, being a leader is not necessarily intuitive, nor is there a defined or developmental methodology. Many are assigned to, appointed to, or volunteer for leadership roles.

Many get "thrown" into leadership positions. Dr. Wylie "Chip" Souba (AΩA, University of Texas McGovern Medical School, 1978) has written and taught about "The Thrown Leader." ³ He notes that the term "thrownness" designates our inevitable submission to life's challenges and predicaments, often determined arbitrarily by chance or by destiny.³ We inescapably find ourselves thrown because we care, and patients, colleagues, family, community and the world matter to us.

Thrownness has major implications for effective leadership since leaders are invariably thrown into vexing circumstances or inherit problems that they had nothing to do with creating. Since we care about our future and the future of our work, that's what makes the sting of being thrown so raw and challenging. Authentic lead-

ers take responsibility for what was, what is, and what will be, regardless of the circumstances they are thrown into. Acceptance of the randomness and inevitability of being thrown, with its associated aggravations and annoyances, is a

hallmark of effective leaders. Every leader has at least one experience of being thrown.

Understanding a situation and our personal identity experiences directs us toward certain ways of being and acting. However, this certain way of being and acting is constrained by our past experiences along with shortcomings in our knowledge. You must work with what you have been, and are now, in order to become what you want to be in the future.

Authentic leaders have a commitment to a future bigger than themselves. They build trust through open communication and transparency. They develop a supportive and capable staff to work as a team on behalf of the organization. In some cases, these teams are inherited, in others the leader is able to recruit known individuals, and in some cases the best teams are composed from both inherited and recruited members.

Another important member of a leader's team is a second in command, such as a Chief of Staff (COS) to work with the administrative team to support the team's mission. This COS position, with the leaders support, will provide the assistance, time, and experience to allow the leader to be strategic in all of their responsibilities.

The Inward Journey

Lau Tzu said, "He who knows others is wise, he who knows himself is enlightened." 4 Leaders cannot effectively lead others until they can first lead themselves-this is the inward journey of leadership.5

The inward journey involves self-discovery and self-development. It entails finding clarity around a set of core values that will guide you in life and in achieving your goals. It necessitates honesty, trustworthiness, humility, compassion, competence, observation, clarity, understanding, courage, commitment, persuasiveness, believability, credibility, and truthfulness.

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"Progress is impossible without change, and those who cannot change their minds cannot change anything."6

ment to a shared sense of destiny. It involves building a culture of excellence and accountability. It is about leading yourself to discover your innate self-expression, deepest commitments, and leadership potential.

-George Bernard Shaw

The inward journey is an

ongoing exercise in leadership as it prepares future and current leaders to lead more effectively by developing meaning and purpose and an ability to overcome adversity and potential barriers.

Putting it all in context

Context shapes the way we make sense of any leadership challenge or situation. A shared context can create natural empathy and teamwork with shared meaning and purpose and a sense of mission. Context provides the background for what we do and can prevent misinterpretation and confusion.

A leader's job is to create context for understanding and action. Context is the way to connect goals with purpose and meaning. Empathy is easier if one understands the context in which another person is acting, and it helps to see the situation through the other person's eyes by understanding their context. The foundation of excellent leadership is then based on a framework, including awareness, integrity, authenticity, and commitment. Context leads to awareness. Awareness is mindful presence that brings full concentration to a situation with purposeful, non- judgmental attention, and curiosity.

Albert Einstein said, "I have no special talent. I am only passionately curious."⁷ Curiosity is a key personal, professional, leadership, and life skill. It contributes the power of exploration and understanding from wondering and asking questions.

Great leadership

As described above, serving as a great leader is based on a set of professional values and leadership principles. These principles include:

- Practicing integrity by always doing what is right, both morally and legally;
- Loyalty to patients, team, colleagues, organization, and societal values;
- Fulfilling obligations to patients, team, colleagues, and the organization;
- Selfless service with passionate commitment to the vision and mission of the profession;
- Living up to one's professional values;
- Commitment to professional competence and lifelong learning;
- Treating everyone humanely with benevolence, compassion, empathy, and consideration;
- Serving in an ethical, responsible, reliable, and respectful manner;
- Listening to others with understanding and respect;
- Communicating effectively;
- Being honest and trustworthy and reliable;
- Meeting social responsibilities; and
- Advocating for the best care for all.

Great leaders aspire and commit to a purpose greater than themselves. Great leadership requires perseverance, adaptability, and curiosity, and is developed through education, practice, experiential learning, training, reflection, role models, mentors, coaches, teams, colleagues, and the inward journey. Great leaders have unique personal and professional identities—physician, teacher, academician...and leader.

Great leaders are servant leaders

Servant leadership is fundamental to becoming, and being, a great leader. Servant leaders inspire and develop the best in others; have a commitment and dedication to a higher purpose, cause, or principle; and derive joy, selfrespect, and integrity by serving others. They develop the best in others by instilling a set of values and trust among those they serve. They recognize that employees are the real drivers of the organization and the mission, and embolden them to care and serve. They put the needs of others first and foremost, demonstrate appreciation, and develop others to achieve the best outcomes possible.

Servant leaders display great cognitive and emotional intelligence. They are self-aware, empathetic, and service

oriented. They demonstrate self-control, transparency, adaptability, initiative, and optimism. They are inspirational and focused on developing and nurturing relationships.

Reflection is another important attribute of

servant leaders. They use refection as an adaptive, developmental process, and use it to recognize that leadership is a process of continuing to learn through experience, practice, curiosity, and modification.

On being a leader

There are myriad qualities to being a leader:

- Practice what you preach. There is no quicker way to lose respect than to say one thing and do another. Actions must truly represent beliefs, and must be consistent.
- Lead from the front. A leader must be able to do, or be willing to do, anything they ask others to do. Share hardship with the team.
- Speak out when things are wrong. Correct deviations and violations. Leaders must meet or exceed the standards they set for everyone else. No double standards.
- Speak up for what is right. Express concerns and dissent. Give straight-forward advice when questioned. Do not tell others what they want to hear for the sake of appeasement.
- Demonstrate self-discipline. Leaders must do what is right because they want to. Set a positive, professional, and personal example.
- Treat others as you would like to be treated. Favoritism, discrimination, fraternization, and sexual harassment cannot be tolerated.
- Communicate effectively through storytelling and narrative that represent the power to create new futures and initiate action and motivate. What a leader says and how it is said are important for persuasive leading and perspective on a challenge or opportunity.

"If your actions inspire others to dream more, learn more, do more and become more, you are a leader." 8 –John Quincy Adams

- Engage people to make progress on the adaptive problems they face.
- Learn to identify a problem or challenge; manage the emotions and stress for adaptive work; identify and focus on issues, and avoid distractions.
- Encourage and allow those involved to solve problems with support, and assess the costs and possible outcomes from proposed solutions.
- Manage as well as lead. Leadership is doing the right things, and management is doing things right. Every leader needs people on their team who know more, can do more, and advise on how to do things right.
- Provide collaborative leadership.
- Lead others in solving problems by delegating responsibility, motivation, and teamwork; a common group with common purpose and goals.
- Create vision, direction, passion, commitment, and excitement.
- Build new relationships and structures.
- Influence and inspire.

Physicians make excellent leaders

As mentioned throughout this editorial, due to their training and intrinsic abilities, physicians are ideally suited to be leaders, not only in medicine but in all aspects of society. Physicians are trusted as leaders based on their commitment to professionalism.

In 2019, five percent of hospitals in the United States were run by physicians–Chief Executive Officers with a medical degree. Hospitals with higher quality rankings are more commonly run by physician CEOs—25 percent higher than those run by non-physicians.⁹

Non-physicians often lack the professional and technical knowledge of medicine and experiential understanding of patient care, and everything involved with caring for patients in a hospital setting. Non-physicians have a tendency based on their business acumen to shift the mission from patient care as the predominant goal to more of a business and revenue generation focus. Non-physician administrators may be well intentioned, but they do not truly understand the professional values and commitments that physicians have toward caring for patients.

Physicians have earned a high respect for compassion for the suffering and those providing care and support for the suffering. Two departed physicians come to mind as outstanding physician leaders in very highly ranked and complex hospitals and academic organizations. Dr. Herb Pardes (A Ω A, SUNY Downstate Health Sciences University) was a psychiatrist by training, and the inaugural CEO of the merged Presbyterian Hospital and New York Hospital, now New York-Presbyterian hospital. Dr. Gerald S. Levy, whose catch phrase was, "Never be afraid to do the right thing," led the re-building of the UCLA medical center after the Northridge earthquake of 1994. He was Vice Chancellor of Medical Sciences and Dean of the David Geffen School of Medicine at UCLA. They both serve as inspirational role models for physicians who are in the pursuit of becoming great leaders.

A couple more recent examples include the change in leadership at two prominent universities. At the University of Pennsylvania, following the resignation of Liz McGill as president, the Board of Trustees named Dr. J. Larry Jameson (A Ω A, University of North Carolina School of Medicine at Chapel Hill, 1981, to step in as the university system's Interim President.¹⁰ Prior to his new appointment, Jameson served as Executive Vice President of the University of Pennsylvania Health System, and Dean of the Perelman School of Medicine at the University of Pennsylvania.

Alan Garber, MD, PhD, assumed the role of Interim President of Harvard University following the resignation of Claudine Gay January 2, 2024. Garber, who received his MD from Stanford University, is the first Harvard College alum to serve as president since Nathan M. Pusey, class of 1928, who was president from 1953 to 1971.¹¹

Both Jameson and Garber have succeeded on their leadership journey because they first trained as physicians, and then through the attributes of being a physician, lifelong learning, and their commitment to serving others, became exemplary leaders.

There are numerous examples of physicians who are currently, or have been, prominent leaders in institutions of higher learning. A few examples of current physician leaders in academia include:

- Dr. Paula Johnson, a cardiologist, is the President of Wellesley College;
- Dr. Ora Pescovitz (AΩA, Indiana University School of Medicine, 2006, Faculty), is the President of Oakland University in Rochester, MI;
- Dr. Michael Drake (AΩA, University of California San Francisco School of Medicine, 1989, alumni) is the21st President of the University of California System, where he oversees 10 campuses, five medical centers, three nationally affiliated labs, and more than 280,000 students and 230,000 faculty and staff.

These are but a few examples of physicians who currently lead major academic institutions and systems. However, there are myriad examples of physician leaders in Congress, government, business, and in industries inside, and outside, of medicine. Physicians make excellent leaders.

The Richard L. Byyny Fellow in Leadership program

 $A\Omega A$ believes in the importance of developing the next generation of physician leaders so that they can assume leadership roles in medicine, or anywhere an excellent leader is needed. The program has graduated 27 Fellows, will be graduating another three in October, and is welcoming its 2024 cohort in a couple of months (see pg. 32 for more information on the 2024 Richard L. Byyny Fellows in Leadership).All of the Fellows who have graduated from the program have been presented with new and unique leadership opportunities that have advanced their careers.

The program contains all of the elements listed above, along with several more that are imperative to developing great leaders and cultivating leadership skills. It focuses on true leadership, not management, and boasts an outstanding faculty of leaders in medicine. Faculty members, include:

- Bradley E. Barth, MD, FACEP, FAAEM (AΩA, University of Kansas School of Medicine, 1994), Executive Director of AΩA
- Richard L. Byyny, MD, FACP (AΩA, Keck School of Medicine of the University of Southern California, 1964), Emeritus Executive Director, AΩA, and former Chancellor, the University of Colorado Boulder
- Eve Higginbotham, MD (AΩA, Morehouse School of Medicine, 2008, Faculty), the inaugural Vice Dean of Inclusion and Diversity at the Perelman School of Medicine at the University of Pennsylvania
- Diane Magrane, MD, (AΩA, Drexel University College of Medicine, 2017, Faculty) the former Director of Executive Leadership Programs at Drexel University College of Medicine
- Dee Martinez, Chief of Staff, $A\Omega A$
- Alan G. Robinson, MD (AΩA, University of Pittsburgh School of Medicine, 1988, Faculty), the former Associate Vice Chancellor for Medical Sciences, and Senior Associate Dean at the University of California Los Angeles David Geffen School of Medicine
- Wylie "Chip" Souba, MD, Emeritus Dean, Dartmouth Geisel School of Medicine, and former Dean, The Ohio State University College of Medicine
- Steven A. Wartman, MD, PhD, MACP (AΩA, The Johns Hopkins University School of Medicine, 1970), former President and CEO of the Association of Academic Health Centers, and a former medical school dean and department chair

Donald Wilson, MD (AΩA, University at Buffalo Jacobs School of Medicine and Biomedical Sciences, 1953), former Dean, the University of Maryland School of Medicine. Dr. Wilson was the nation's first African American Dean of a non-historically black college or university.

Enduring impact

Physicians exemplify great leadership through their innate professionalism. Through their work with patients and society, they are excellent communicators, mentors, and motivators. Their knowledge and skills place them in high esteem with peers, co-workers, and the public. Physicians are powerful leaders who have the expertise, proficiency, and credibility to provide enduring impact.

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