

Successful Physician Leadership Behavior

Some Contrasts with Typical Physician Behavior

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Typical Physician Behaviors	Successful Physician Leadership Behaviors
I complain when things don't go my way.	I listen to others complain while silently asking myself why I ever thought complaining was helpful.
I ruminate when I am upset.	I recognize that rumination is pointlessly destructive, and engage in problem solving instead.
I focus on others' shortcomings.	I focus on others' strengths.
I talk about people when I have a problem with them.	I talk to people when I have a problem with them.
I let my feelings show.	I do not allow my feelings to contaminate my interactions with others at work.
I talk a lot.	I listen a lot.
I tell people the way it is. <i>(See the check list on page 14 of Meeting Leadership Expectations.)</i>	I share my perspective.
I make categorical statements.	I ask clarifying questions.
I prefer to voice my concerns in public meetings with everyone.	I prefer to voice my concerns in private meetings with key leaders.
I blame others when things go wrong.	I take the blame when things go wrong.
I hold others accountable.	I hold myself accountable.
I give others feedback about their performance.	I invite feedback about my performance.
I make excuses for my shortcomings.	I take full responsibility for my shortcomings.
I reject others' perceptions when I disagree with them.	I accept others' perceptions even when I disagree with them.
I direct people.	I persuade people.
I expect people to know what they are supposed to do without being told.	It is my responsibility to clarify my expectations.
I ventilate when I am upset.	I remain quiet when I am upset.
I focus on problems.	I focus on solutions.
I spin my story depending on my audience.	I take the same position in public and in private.
I promise confidentiality beforehand to my friends and allies.	I never promise confidentiality beforehand.
As a physician leader, I behave as a tribal lobbyist for my fellow physicians.	As a physician leader, I always take the enterprise perspective.
I focus on doing what I want to do.	I focus on what needs to be done.
I avoid discomfort.	I embrace discomfort.
I point out the differences between what others say and what they do.	I invite others to point out the differences between what I say and what I do.

Typical Physician Behaviors	Successful Physician Behaviors
I tell people what they want to hear.	I tell people what they need to hear.
I insist on secrecy.	I insist on transparency.
I encourage people to talk to me about other people when they are upset.	I insist that people talk directly to the people they are upset with.
I ask others to provide solutions to my problems.	I expect to provide the solutions to my problems.
I react to problems as aggravations from which others should protect me.	I react to problems as opportunities.
I expect others to drop what they are doing and respond immediately to my problems.	I understand that other people have different priorities than I do, and I expect to negotiate a mutual agreement about when I can expect an issue to be resolved.
I expect administrators to know (or buy) what I want because I want it.	I expect to have to make a compelling business case for what I want.
I jump to conclusions after hearing one point of view.	I listen to both sides before taking a position.
I expect other less important people to do my work for me.	I understand that others have their work to do; I expect to do my work myself.
I finish my work when I feel like it.	I finish my work on time no matter how I feel.
I do stuff the way I've always done it.	I am always looking for a better way.
I follow the rules when it is convenient or when others are watching.	I follow the rules even when it is inconvenient or no one is watching.
I don't pick up trash because that is somebody else's job.	I pick up trash because it is everybody's job to pick up trash.
When there is a problem, I engage in public handwringing about the problem in meetings.	When there is a problem, I describe the problem objectively, identify the next steps and express quiet confidence that we will explore every reasonable option, choose the best one and implement it successfully.
My behaviors at work are mostly consistent with those detailed in this column, and I feel no real need to change. As a result, I understand that I cannot be a successful physician leader in the SOMC organizational culture.	I aspire to behave in the ways detailed above. I know which of my current behaviors I must change, and I will change them. I will invite others to hold me accountable for behaving as a successful SOMC physician leader should. I intend to become a successful SOMC physician leader.

Signature

Date

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Very Good things are happening here