# Case Study: In-House Leadership Development at Gundersen Lutheran Health System

By Jeff Thompson, MD, and Nancy Noelke

### In this article...

Learn how to equip future medical administrative leaders with the knowledge, strategic business skills and experiences necessary to lead in an increasingly complex health care environment.

Five years ago when Mary Frances Barthel, MD, was appointed as medical director for a growing hospitalist program at Gundersen Lutheran's 325-bed hospital, she saw that there was more to leadership than leading by example and trying new things.

"I realized that leading program development and physicians within a department required me to learn more about others' viewpoints and to understand that not everyone sees things the way I do," she says.

"Through the community I learned the difference between leading and managing. Leadership requires an understanding of the people around me and their unique needs. It also requires that we build trust together over time."

Prior to becoming department chair and then section chief of gastroenterology at Gundersen Lutheran, Scott Rathgaber, MD, thought that leaders were born and not made.

"Now I understand that while certain leadership skills can be innate, skills can also be developed. By studying systems and improvement processes, one can become a more effective leader and avoid mistakes that come from trial and error," he says.

"The learning community enlightened me on the interconnectedness of the Gundersen Lutheran Health System and encouraged me to think widely about the health of the system rather than narrowly about my section."

When he started building a bariatric surgery program eight years ago, Shanu Kothari, MD, envisioned a program with best-in-class outcomes for laparoscopic gastric bypass surgery.

Revisiting the leadership principles discussed in the book *Good to Great*, by Jim Collins, as part of the learning community curriculum, solidified his leadership approach within Gundersen Lutheran's minimally invasive bariatric surgery clinic. "I ask myself if we have the right people in the right seats on the bus," says Kothari.

In addition, he says he always comes back to the principle: "be what you can be the best in the world at." He goes on to add, "We have demonstrated our perioperative surgical complication rate is one of the lowest in the country."

The learning community for high potential medical administrative leadership began in 2004 with the belief that we could take a handful of bright, ambitious young physicians, put them in an experience-rich learning environment each month with senior leaders and end up with a cadre of leaders who are better prepared to run our organization in the future.

# Preparing a leadership pipeline

Gundersen Lutheran Health System is a physician-led organization with an all-physician board of governors, three medical vice presidents, 45 physician department and section chairs and 10 medical directors covering clinics in 19 counties and three states.

Our medical leadership model means that our physicians continue practicing medicine while serving in a leadership role. In response to this dual role, we developed a comprehensive approach to preparing physicians for leadership across the span of their careers.

The entry point for many early- to mid-career physicians interested in leadership is the learning community. We provide a broad view of the strategic side of health care and give participants a glimpse into decision making and problem solving at a system-wide level that executives face every day.

Selection is based on the recommendation of the candidates' medical vice president, the chief medical officer and the chief executive officer. Twenty candidates are invited to participate in the three-year learning cycle.



# **Designing the curriculum**

In the first year we spend considerable time on organizational direction, structure, strategy and leadership tools we use to drive performance. We found that physicians needed to have a better understanding of the business of health care.

Year one monthly topics:

#### • Driving performance at Gundersen Lutheran

An overview of the organizational direction, structure, strategy, and leadership tools Gundersen Lutheran uses to drive performance Gundersen Lutheran takes a handful of bright, ambitious young physicians and puts them in an experience-rich learning environment each month with senior leaders. The goal is to end up with a cadre of leaders who are better prepared to run the organization in the future.

in an increasingly complex environment.

### An overview of medical leadership at Gundersen Lutheran

An overview of physician leadership roles at Gundersen Lutheran including: department chair, medical vice president and board of governor roles.

# Implementing and executing corporate strategy

An in-depth look at how corporate strategy is set, communicated, and integrated into operational objectives to achieve targets.

## Leadership case study – Harvard Business Publishing

Participants read and discuss a fictional account of the leadership

challenges facing a new general manager and the corporate divisional relationships that arise and need to be addressed. The case study addresses people management, communication, leadership, and organizational design.

# Leadership frameworks from Good to Great by Jim Collins and the Institute for Healthcare Improvement

An overview of leadership principles that have been integrated into approaches at Gundersen Lutheran.

#### Managing oneself as a physician leader

Participants are led through a discussion of how success in leadership can be often be traced back to leaders who know themselves, know their strengths and values, and know how they best perform.

#### Leading change

Using the principles from *Leading Change*, by John Kotter, participants learn how to manage large-scale change in the form of implementing a new electronic patient documentation system.

#### Developing service line excellence

An overview of building and leading service line excellence in Gundersen Lutheran's bariatric program contains a leader's roadmap for shaping a vision, creating a plan, overcoming obstacles, and achieving and sustaining high-quality outcomes.

In year two we provide participants with the opportunity to learn leadership skills while applying leadership methods to solving actual challenges such as integrating a new physician compact into the culture and improving access.

## Medical staff compact development and integration

The executive committee determined that it would introduce a medical staff compact into the organization to improve the overall performance and provide a baseline of expectations for behaviors. It charged the learning community members with having input into final content and then teamed up with members to introduce the medical staff compact to departments and answer questions and address concerns.

#### Improving access

Faced with the organization's need to improve access, learning community members discussed and problem solved common access concerns including capacity vs. demand, space issues, and shared responsibility and accountability for improving access. Suggestions were brought forward from both an organizational and department level.

The third year provides participants with the opportunity to create individual leadership development plans in addition to lecture, discussion, case studies, and selected readings.

Participants meet with the vice president of human resources and the chief learning officer in addition to their respective medical vice presidents to construct a tailored leadership development plan based on their goals and leadership assessment data indicating leadership strengths and gaps.

#### Indicators of success

In the five years since Barthel began as medical director of the hospitalist program at Gundersen Lutheran, she has grown the program from four physicians to 10 physicians, eight physician assistants and two nurse practitioners.

After embarking on a hospitalwide patient flow initiative using Lean methodology, she identified a need for standardization in the admission process. This led to the development of the admission/referral coordination center at Gundersen Lutheran.

When she identified inefficiencies in hospital flow due to short-stay patients, she helped create the short-stay observation unit. Today she is pursuing a Master of Business Administration to delve deeper in the business side of health care.

Her goal throughout her career is to blend her clinical work with administrative work. She says "through the learning community I realized I needed more foundational knowledge in the business of medicine, this is what led me to the MBA program."

When asked how the learning community better prepared him to lead, Rathgaber states, "being elected section chief of gastroenterology has afforded me the opportunity to work with others in accomplishing many improvements. I have closely aligned all work within the section to the strategic goals of the organization.

"In addition, I have clearly defined the goals and expectations of staff and acknowledged accomplishments. These efforts have empowered staff to provide input and solutions to problems while creating a much improved atmosphere of respect and shared vision. Both the care given to our patients and staff morale has noticeably improved."

Kothari describes one of the main benefits of the learning community as a greater understanding of his leadership attributes. He states, "I now realize that I am better at vision casting and inspiring those around me than direct oversight of the day-to-day management of my program."

This realization led to the hiring of a program manager for the Gundersen Lutheran minimally invasive bariatric surgery clinic. "We have seen the benefits of this decision

in just one year. We have simplified the flow for preoperative patients, increased patient volume and reduced the time from approval of surgery to actual surgical date" Kothari says.

In addition to his clinical work, Kothari serves on several national committees setting the agenda for minimally invasive surgical training. He adds, "The learning community has made me reflect on where my leadership attributes are of best service."

Although many physician leaders will do a good job on just instincts, great performers usually require instinct plus a challenging environment, specific training and ongoing mentoring. The Gundersen Lutheran learning community provides the right setting and support to assist these very talented physicians in making significant contributions across the health system.

#### Jeff Thompson

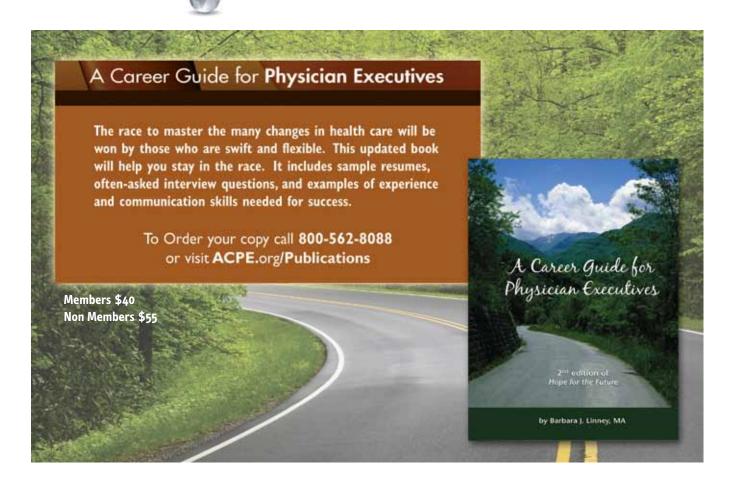
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