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LEADING LEADERS ON THE WAY TO BECOMING A “SUPERCONDUCTING” HEALTHCARE ORGANIZATION - PART 2

This is the second in a series of four articles about working toward being a “superconducting organization,” where results come faster and they last. (See Part 1 [here](#).) In this article, we detail one of the levers that can help build this kind of organization, Leading Leaders.

Aligning Talent When Every Leader Is a Volunteer

Successful companies in every sector recognize that their workforce is a precious resource. Perhaps nowhere is this more powerful than in healthcare, which draws people passionate about solving complex problems to care for their patients. The business of healthcare involves people with varied talents, significant expertise, education, and training. This creates a strong basis for collaboration — achieving value that is greater than the sum of the parts — because team members’ roles are often highly distinct, thereby creating the opportunity for people to bring different perspectives to the table.



In today’s complex organizations, leaders have found that a command-and-control style, one that dictates the contribution of each team member, comes up short on results. Instead, viewing talent as “volunteers” enables leaders to think more creatively about getting the most out of their people and improving performance. Volunteers engage with an organization because they want to be there and they feel they have something to give to better the whole. Because healthcare organizations enjoy a variety of expertise, drawing out people’s contributions, such as their expertise or passion for patient care, makes the outcome measurably better. Each person can, in their own way, be a leader. In fact, we call this practice of leveraging passions and helping and expecting people to contribute their all “leading leaders.” It can not only improve workforce engagement, but also increase impact and speed time to results. The following two examples illustrate two cases in which “leading leaders” achieved the results that mandating change could not have done.

Leading Leaders to Form a Network from Scratch

In settings where organizational structure and contracting are deliberately loose, tapping people’s passions is often the best way to accelerate change. For instance, we worked with an emerging clinical integration network, whose leaders decided early on not to use risk contracts as their primary method of alignment. Given the size and shape of the market, it just didn’t make sense. At the same time, hospital leaders knew they absolutely needed to partner with the physicians in their community if they wanted to improve the quality and safety of care they provided — and to do so in a more cost-effective way. We helped the network focus on engaging physicians to shape how the network’s performance would be measured. In doing so, we were able to tap into the goodwill and passion of the medical staff, which led to meaningful work designed to improve care delivery and the health of the communities they collectively served. Being invited to participate and to share their talent and expertise sent a strong message about the value of physician relationships. The physician who chairs the network sees keeping the medical staff engaged and building on their progress as a major responsibility. The network has embraced an approach to aligning a volunteer army of physicians as they seek to improve the health of the community.

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LEADING LEADERS ON THE WAY TO BECOMING A “SUPERCONDUCTING” HEALTHCARE ORGANIZATION - PART 2 *continued*

Leading Leaders Across Organizations

Leading leaders can also increase impact when you have a wide network but limited resources. For example, we have been working with a nursing education initiative funded by a major healthcare foundation. The program is looking to leverage a small amount of funding to catalyze game-changing pilot programs that alter the course of nursing education to meet the needs of population health in one state. The pilots will be ambitious and have ripple effects, yet each one alone would be too small to turn the tide for all of nursing education in the state. The broader goal is to close the perceived gap between the current content and delivery of nursing education and what will be required to train nurses to be successful in the not too distant future. The path to change includes many stakeholders. While there is a lot of will to make change happen, numerous barriers exist. It will take collaboration across nursing schools and clinical settings, along with leadership dedicated to shaping the future of nursing practice.

The initiative’s leadership knew they would have to do more than provide funding and guidance to spur real change. They saw that academic and clinical leaders in the state had a lot of energy and new ideas but rarely had the chance to think together. And they theorized that tapping into those energies could eventually launch partnerships to foster a critical mass of change projects that could go beyond their initiative.

We helped them with an experiment — a nurse leader summit with invitees from academia and clinical settings to develop ideas for transformational change in nursing education. Teams across both backgrounds designed potential programs that would prepare new nurses for the variety of sites and team members, and patient, quality, and administrative concerns they may encounter in a modern clinical practice setting. We later asked them to discuss what was already in process in their organizations and others — how change was happening around them, and how to amplify it.

Participants shared written reflections at the end of the day, with one overwhelming message — they wanted more opportunities to collaborate across the academic/clinical “boundary.” People saw the potential for kickstarting change in nursing education based on the fresh thinking and commitment they experienced in the room. The results point to what people can achieve when their experience and ideas are valued and when each individual in the room is expected to lead — accountable for contributing to the conversation and for building on the contributions of others.

In the next issue, we will explore how working with resistance can strengthen change initiatives to move your organization toward “superconducting.”

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