Developing a Language of Leadership to Respond to the Interprofessional Leadership Needs of Healthcare Trainees

5.5.2022 | Catherine Malisse | Class of 2025 MD Candidate
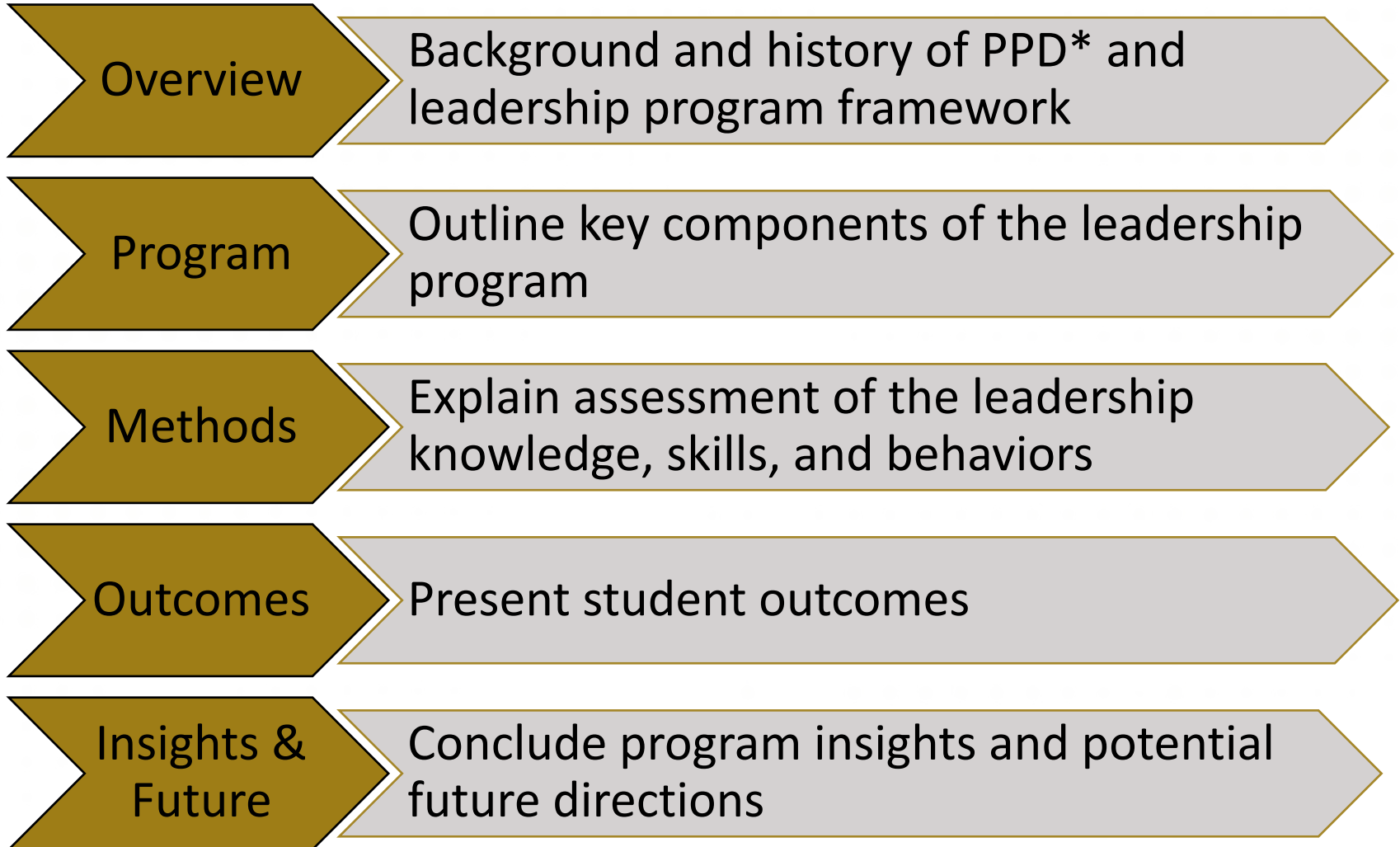
Co-Authors: Kristina Natt och Dag PhD, MD, Roy Strowd MD, MS, MEd

Wake Forest® School of Medicine

Passionate about Healthcare Leadership

- My passion for leadership stems from…

Objectives

Overview	Background and history of PPD* and leadership program framework
Program	Outline key components of the leadership program
Methods	Explain assessment of the leadership knowledge, skills, and behaviors
Outcomes	Present student outcomes
Insights & Future	Conclude program insights and potential future directions

* Personal and Professional Development (PPD)

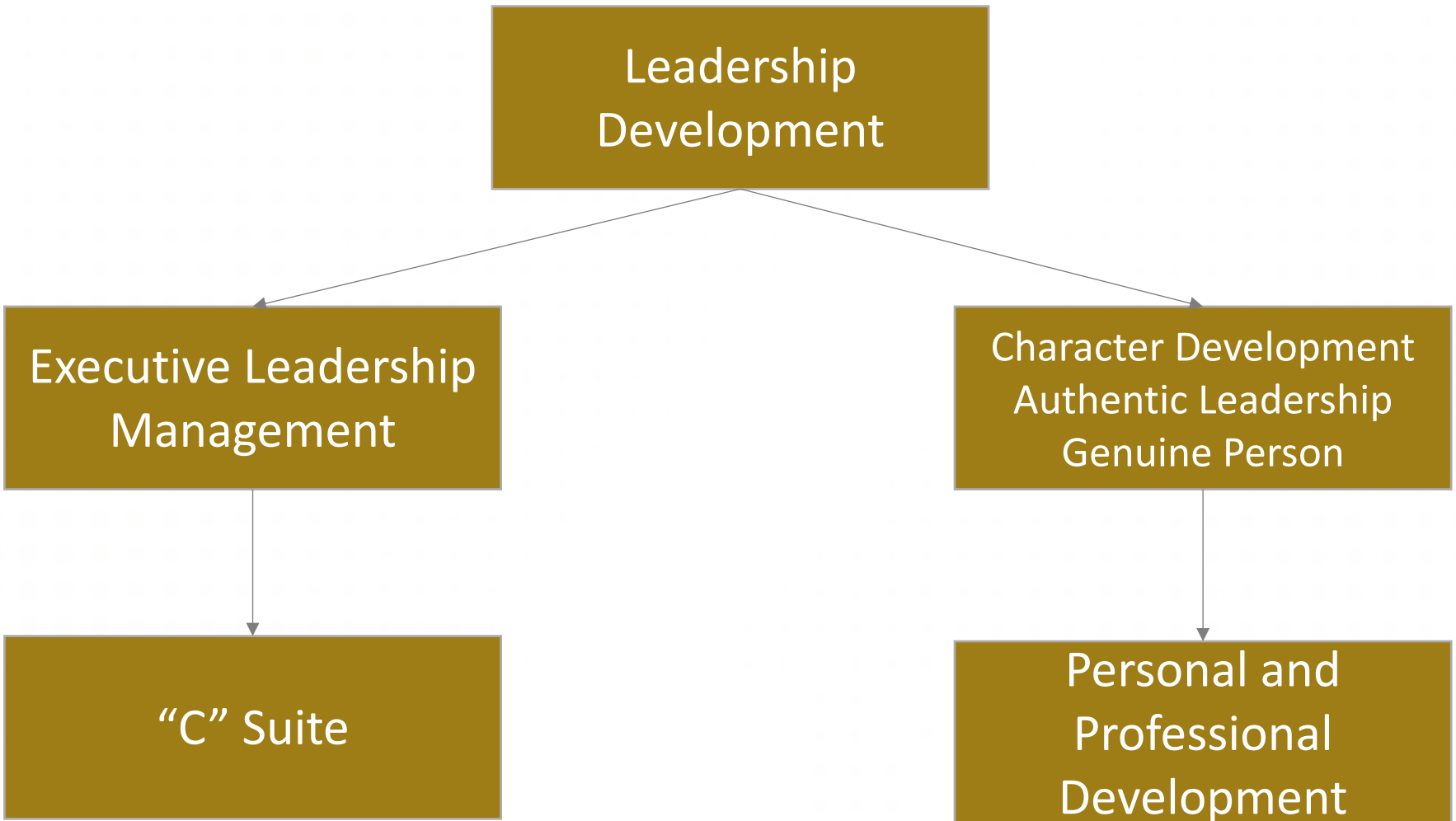# Leader Identity leads to Character Development

Leader Identity

Strong resilient professional and personal healthcare leaders

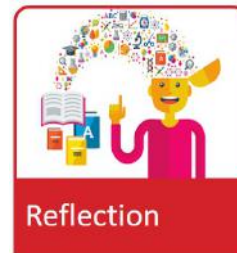
Knowledgeable   Skillful   Ethical & Moral Intent

Leadership Development

Executive Leadership Management

Character Development
Authentic Leadership
Genuine Person

"C" Suite

Personal and Professional Development

Core Topics

Workshop #1
Individual
strengths

Theory &
Knowledge

Session #2
Authentic
leadership

Reflection

Session #3
Leading in
society

Practice

1 year program

Session #1b
Apply
leadership
strengths

Session #2b
Apply
authentic
leadership

Session #4
Team
leadership

Slide by Dr. Roy Strowd and Dr. Kristina Natt och Dag

Student focused leadership development

Four P's of leadership focus on skills needed in team-based care & advocacy

Patients

*Lead **P**atients to change*

Peers

*Lead **P**eers in mentorship*

Providers

*Lead within the inter**P**rofessional team*

Policy

*Lead little "p" **P**olicy change*

Slide by Dr. Roy Strowd and Dr. Kristina Natt och Dag

Assessment of Leadership Program

- Knowledge/Learning
  - Retro pre- and post-surveys to assess changes in student's self-reported knowledge of leadership strengths

- Skills
  - Self-reported pre- and post-program Leadership Practices Inventory (LPI) instrument for leadership skills

- Behaviors
  - Observer-reported pre- and post-program Leadership Practices Inventory (LPI) instrument for leadership behaviors

- Program insights
  - Qualitative feedback

Model the Way
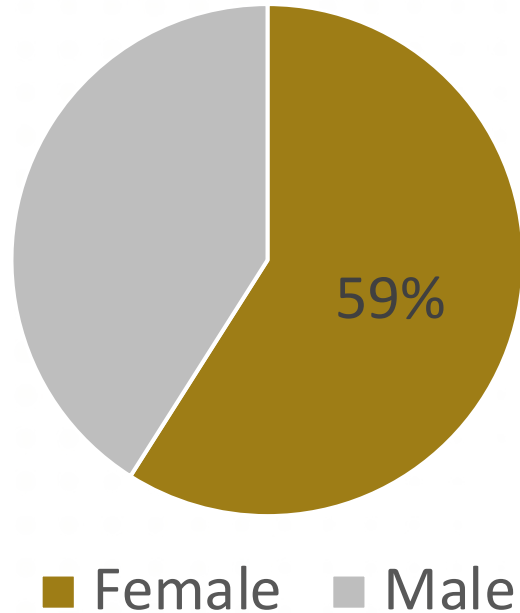
Inspire a Shared Vision

Challenge the Process

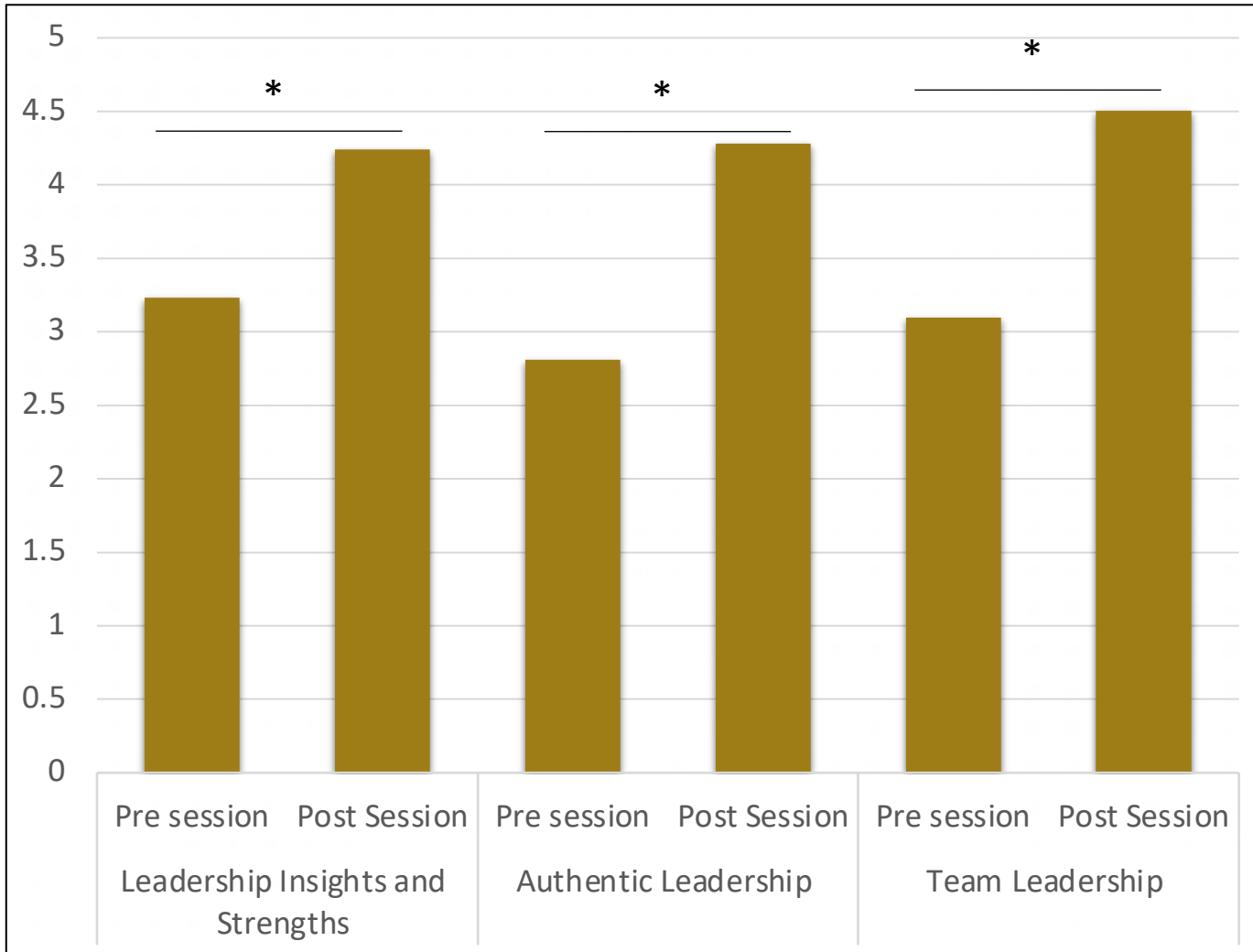Enable Others to Act

Encourage the Heart

Outcomes

59%

■ Female ■ Male

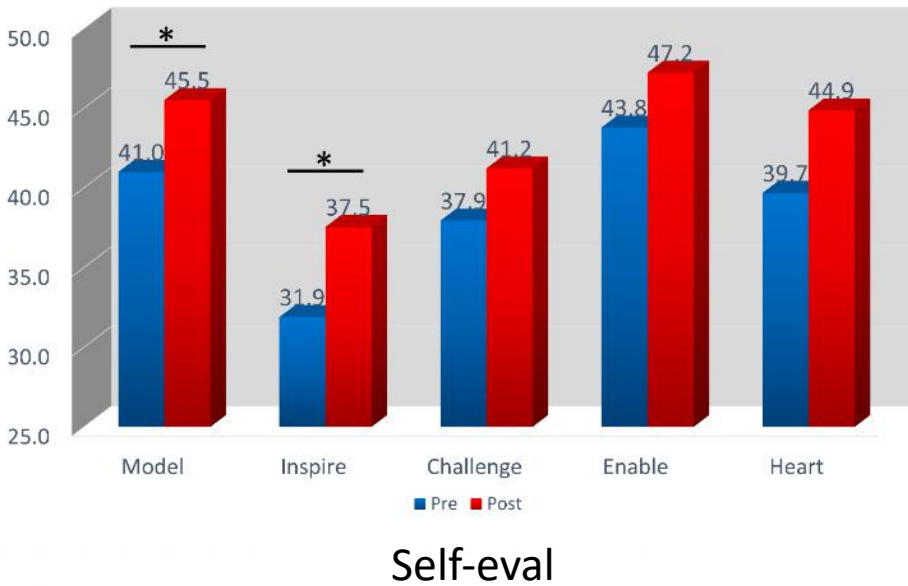| Trainee Type	N= 37
MD students	24 (65%)
PA students	7 (19%)
CRNA students	4 (11%)
Pharm resident	1 (5%)

- 89% of participants were in clinical training

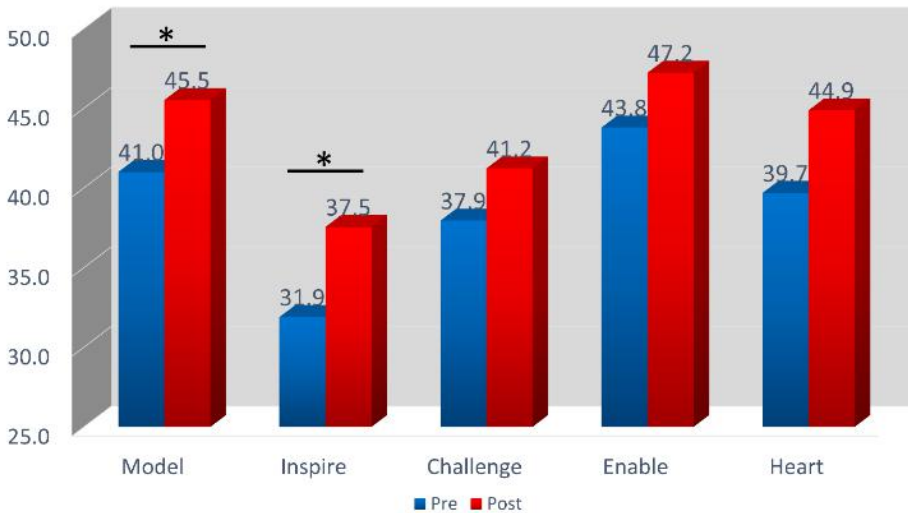# Significant Increase in Knowledge and Learning

* P <0.001

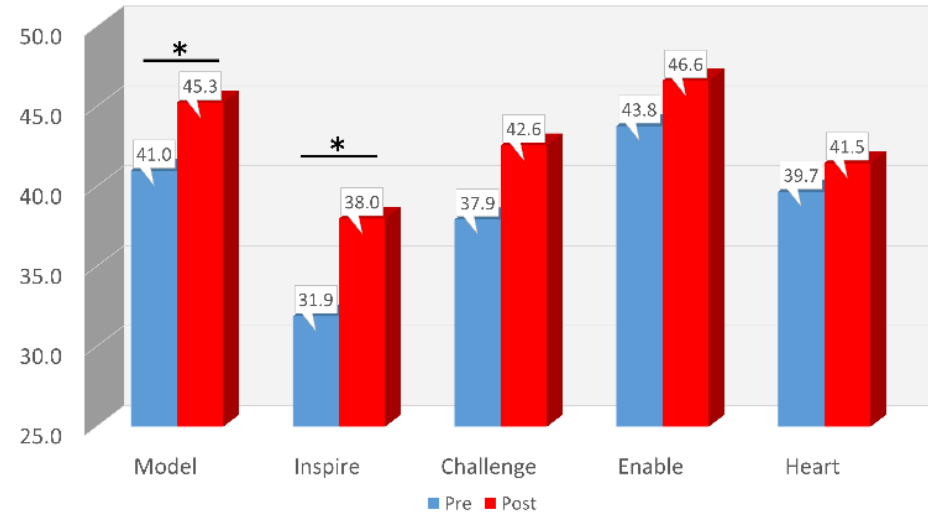# Leadership Practices Inventory

Self-eval

- Significant increase in
  - Model the way
  - Inspire a shared vision

* P <0.05

Leadership Practices Inventory

Self-eval

Observer Eval

* P <0.05

Self-reported Leadership Skills

Before

After

Student Feedback Themes

New approaches to interacting with patients and colleagues

"I learned how to work on **communicating better** with friends and colleagues who are **different types of leaders**."

"I'll also be more aware of how other **colleagues/patients/friends are demonstrating to me what their preferred style of interaction** is so that I can try to best communicate and listen to them"

Increased self awareness

"Knowing more about **my strengths** will help me utilize them more effectively and better judge when I need to channel certain skills"

"**By knowing my natural tendencies,** I am more aware of what might be the cause of if something is working well...or if something is not going well...and should instead try a different approach."

Enhanced ability to tailor mentee experience

"I will be aware of how the various people in the group learn and interact and I will **tailor my communication style** to best help them. I want to be the most effective leader for them, and I understand that **means different things to each of the mentees in the group**."

"In my interactions from now on I will now have a **toolbox of communication tools** that I can use to strengthen my relationships and **become a better mentor**."

Lessons Learned

- The training is applicable to patient care
- Providing students with a taxonomy to describe their professional identity through leadership strengths provided insight into PPD character development
- This could be a model to promote EPA 9 in health professions curricula
- Continue to implement our student focused leadership program
- Exemplify the value of using leadership identity to promote healthcare character development

Acknowledgements

Dr. Roy Strowd

Dr. Kristina Natt och Dag

Aubrey Cuthbertson

Kathy Scott

Ayesha Andrews

Nakiea Choate

BEHIND EVERY GREAT TEAM IS A GREAT LEADER

References

- 1. 5 Types of Leadership Styles in Healthcare. AHU Online. Published July 27, 2020. Accessed April 6, 2022. https://online.ahu.edu/blog/leadership-styles-in-healthcare/

- 2. Huber A, Strecker C, Kachel T, Höge T, Höfer S. Character Strengths Profiles in Medical Professionals and Their Impact on Well-Being. *Frontiers in Psychology*. 2020;11. Accessed April 6, 2022. https://www.frontiersin.org/article/10.3389/fpsyg.2020.566728

- 3. Healthcare Leadership Challenges | Preparing for the Next Generation. Accessed April 6, 2022. https://ce.pharmacy.wisc.edu/blog/healthcare-leadership-challenges/

- 4. KIPL Leadership Development. North Carolina Medical Society. Accessed April 7, 2022. https://ncmedsoc.org/education-training/kipl-leadership-development/

- 5. The Core Entrustable Professional Activities (EPAs) for Entering Residency. AAMC. Accessed April 6, 2022. https://www.aamc.org/what-we-do/mission-areas/medical-education/cbme/core-epas