

Case Study #4

My boss won't sing along!!

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The scenario & the characters

James is the physician head of one of three geographically dispersed branch clinics for a rural community hospital system in southwestern Colorado. After completing medical school and residency, James returned to practice medicine in the small city in which he was born and raised. Over the last two years, he obtained an Executive MBA from the local state university.

He reports to Annamarie, the head of the community hospital system. She has been with the hospital system for more than 30 years and is a community icon. She was the first female physician to practice orthopedics in this rural part of the state.

The community hospital system has been under financial pressure since the inception of the Affordable Care Act. They are taking care of more, sicker, and more poorly reimbursed patients than ever before. At the same time, they're having trouble recruiting physicians and staff, given the relatively low pay scale in rural community clinics.

James, over the last five years, has introduced many radical innovations in his branch clinic. Following a detailed analysis of the financial and operational situation, he implemented strategies based on a vision of making the branch clinic financially viable while providing superlative medical quality. He has been wildly successful, and his branch clinic's achievements were recently featured in a national TV show.

But he's hitting two walls. First, he needs more capital to make the next flight of improvements. Second, his two branch clinic counterparts, who are not doing nearly as well, have soured Annamarie against many of the improvements he has made and wants to make.

Sensing

James has done a superlative job of sensing, visioning, and creating strategies for improvement *within* the branch clinic.

But he has not brought his boss, and the parent organization, onboard. They don't really understand what he has done and why, and they tepidly support his model, his vision, and his strategies. In fact, he knows that the other two branch clinics are envious of his success, and he suspects that Annamarie is becoming fearful of being replaced.

But he has not brought his boss, and the parent organization, onboard.

He must incorporate the needs and issues of the parent organization into his model.

The "what's in it for me" for Annamarie and the community hospital system is not clear. This situation is almost the exact opposite of the KidsMusic case, where the CEO of the rapidly growing organization had done little if any sensing, visioning, and strategizing. In the KidsMusic example, it was Carl's boss, his board chair, who had to force him to do the sensing, visioning, and strategizing he needed to do. In this case, it's James's boss and his peers who need to come onboard.

Visioning

James needs to proceed on two parallel paths.

First, his vision must expand so it incorporates the needs of the parent community hospital system with the terrific work he's already done at the branch clinic. Essentially, he must create a "what's in it for the community hospital *system*."

Second, he needs to change his approach to Annamarie so that in his communication with her he focuses on "what's in it for *her*." When he asks for additional resources, it's not to make his branch clinic function better, but rather to make the community hospital system work better.

Enabling

In this example, it is the need to expand James's toolset—acquire more resources—that is driving the need to change the vision. Unlike in other examples where the vision drives the tools, in this case, it is the tools (really, the lack thereof) that drive the vision.

Acculturation

Just as James needs to change his *modus operandi vis-à-vis* the community hospital system, his team needs to take a much more collective approach to working with the other branch clinics.

And just as James is working hard to help Annamarie, the culture on James's team needs to change. James's team needs to shift from competition to cooperation. "What can we do to help you? What can we do for you to make your life easier?" should be two questions constantly asked and answered to their counterparts in the other clinics, and to the parent. That's a significant change in culture, but without that change, James will not get far.

James needs to clearly promulgate, proselytize, and enforce a culture of "we the community hospital system" as opposed to "we the branch clinic."

Responsibility

James's approach needs to be that he is responsible for more than just his branch clinic. If he takes a more holistic approach, taking responsibility for the system instead of his branch clinic, that will translate to more cooperation from Annamarie.

Mentoring

Normally, we think about mentoring as from a senior to a junior. In this case, James may want to think about peer mentoring his two less effective clinic heads. While it may be challenging in the beginning, if he is tactful and humble, he might convert competitors into allies by showing them how to be more successful.

Key lessons

Leadership often involves leading your peers and leading your bosses.

Leading up is a cultural change for both the leader and his team. Sometimes you need to mentor your peers.