



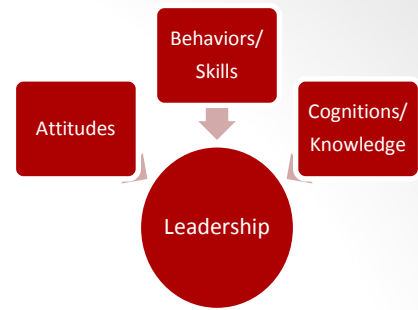
# LEADERSHIP IN HEALTHCARE

COLLABORATING ACROSS PROFESSIONS

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# COMPETENCIES FOR TEAMWORK



- Team leadership
- Mutual respect
- Mutual trust
- Team decision-making
- Information sharing
- Conflict management
- Team orientation
- Adaptability
- Mutual support
- Shared mental models
- Situation monitoring



# Collaborative Leadership vs Command & Control Leader



- Right person at right time
- Shared responsibility
- Participation of all team members
- Fluid



- Single, strong “great person”
- Leader bears ultimate responsibility
- Leader selects/directs team
- Leader-specific



# Bottom Line, Team Leadership is ...

- Collaborative, situational, shared, collective
- Team leadership involves –
  - *Right* person at *right* time
  - Shared responsibility and decisions
  - Participation of all team members
  - Fluidity where skill or expertise determines responsibility
  - Support for decisions
  - Strong communication
  - Trust



# Why collaborate and the yeah, but's

## WHY?

- Fewer resources, more demands: can we share ?
- Reduced funding: we must share
- Contexts of care affect outcomes
- Aging patient population with complex needs who want to stay at home
- Patient empowerment

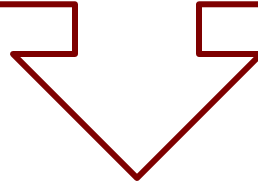
## YEAH BUT ....

- Command & control entrenched
- Cultural differences in leadership definitions across professions
- More & geographically dispersed providers in the circle of care
- Inconsistent use of & access to technology across professions & practices



# How Do We Teach Leadership?

- Focus is on technical skill & therapeutic knowledge
- Team skills often taught within professional silos
- Leadership examined through lens of own profession



Are we preparing students for the world they will work in  
or the one we have experienced?

How can we deliver on the change we all know is needed?



# The Task

**1**

Within your own profession –

- How is leadership defined?
- How does your program prepare learners for leadership?
- How can we create “teaching moments” on collaborative leadership in the clinical setting (esp. in context of hidden curriculum)?

**2**

With a mix of professions -

- Share your observations & answer the same questions
- Summarize similarities & differences

**3**

With larger group

- Share summary & other observations
- Consider learning models

**4**

We will -

- Synthesize & share with participants



# Within Your Own Profession

- How is leadership defined?
- How does your program prepare learners for leadership?
- How can we create “teaching moments” on collaborative leadership in the clinical setting (especially when the hidden curriculum offers conflicting messages)?



# In a Group with Mix of Professions

- How is leadership defined by profession?
- How does your program prepare learners for leadership?
- How can we create “teaching moments” on collaborative leadership in the clinical setting (especially when the hidden curriculum offers conflicting messages)?
- Summarize similarities & differences



# As a Large Group

- How is leadership defined?
- How does your program prepare learners for leadership?
- How can we create “teaching moments” on collaborative leadership in the clinical setting (especially when the hidden curriculum offers conflicting messages)?
- What are the similarities and differences among groups?
- Are there models of learning that work best?

