

Bridging the Gap Between Administrators and Physicians: The Art of Saying “Yes” and “No”

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Goal: Safe, Quality Patient Care

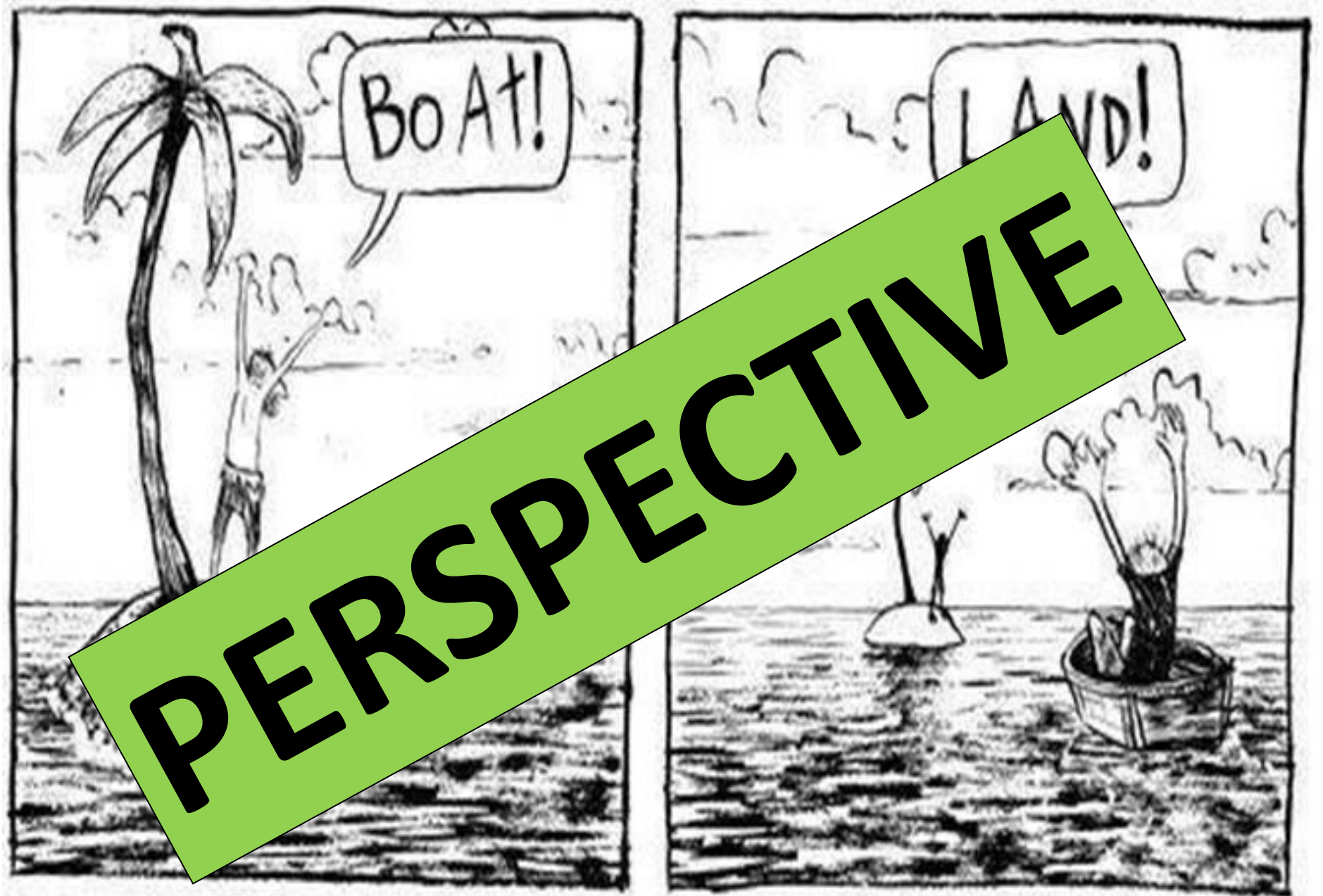
- Physicians: provide patient care following the principles of bioethics
 - Beneficence
 - Justice
 - Non-maleficence
 - Autonomy
- Administrators: determine and formulate policy/overall direction and operations at highest level
 - Best quality care and patient experience
 - Operational efficiency
 - Compliance with state, federal regulations
 - Strong financial performance
 - Community relationships



Let me guess, NOW you want to collaborate?

Two different people...

Two different perspectives...



He doesn't understand what I bring
to the table

I take good care of my patients

I work hard so my patients get the BEST care

I have sacrificed so much for this place

I contribute so much more than just my job
responsibilities

Physician Perspective

She doesn't understand what I
bring to the table

I want to be sure we can provide the
best care for our patients

I work so hard to keep her
administrative burdens minimal

I sacrifice so much for this place

I contribute so much more than just my
job responsibilities

Administrator's Perspective



How We Communicate

Physicians

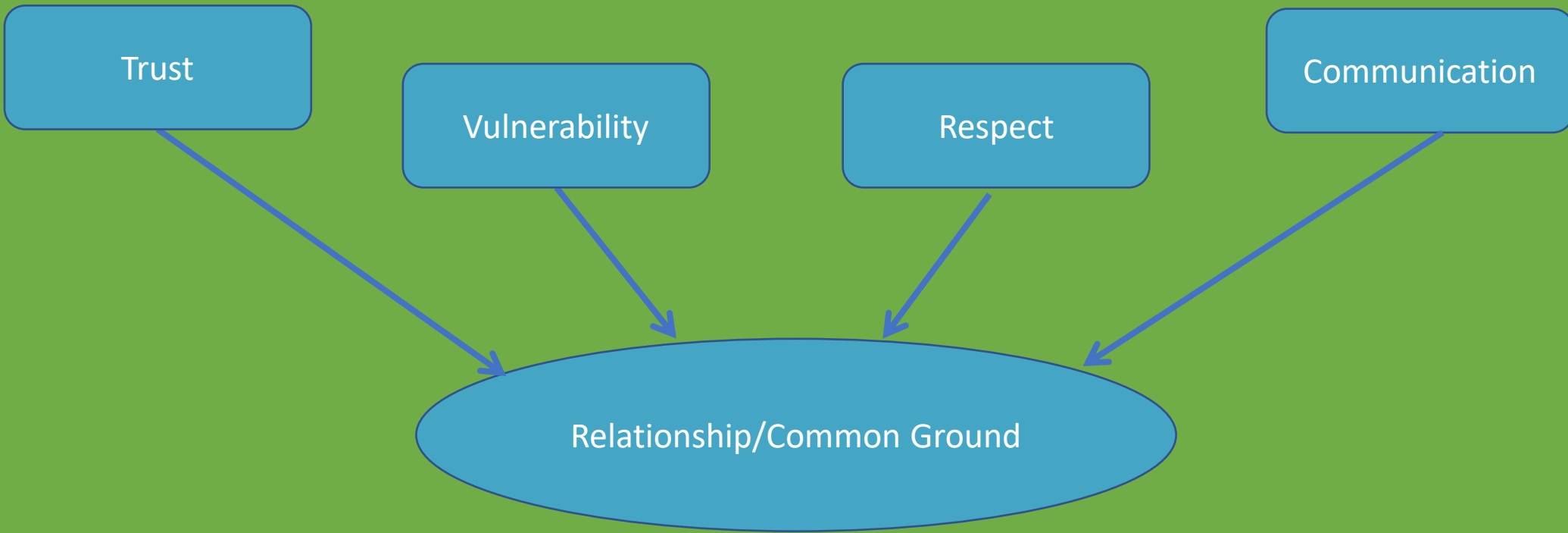
- Dissent/challenging is encouraged
 - “pimping” in rounds
- Dissent/challenging is not seen as personal
- Challenging a physician is often seen as engagement and proof of listening
 - “He made a decision without expressing his disagreement with me – he must not care what I think”

Administrators

- Dissent/challenging is considered insubordinate
- Dissent/challenging is personal
 - “why is she attacking me? It’s my job to make a decision even if it’s not popular”

Align two people to achieve a
common goal – build a
relationship on common ground

Relationship Foundation



We Are Stronger Together



“Take off your armor...
check your ego... be
comfortable with not
having all the answers...
just sit and listen”

“Vulnerability is not a weakness;
it’s our greatest measure of
courage”

Respect: Different, Not Better

- Physician recognizes the administrator's value in healthcare:
 - Included as part of the medical team that allows the frontline to function
 - Educate about healthcare finance and business concepts
 - Distribute information that helps build the team
- Administrator recognizes the physician's value in healthcare:
 - A physician with many years of experience – not just a random “provider”
 - Educate about the conditions that can be vital to building and enhancing programs
 - Problem solving at the epicenter of care – with the patient



Open Communication

Physicians

- Put words in “doctor-speak” and avoid triggering words
- Share the burdens of the business of medicine and how it infringes on patient care
 - Active participant
- Ask about the business side with intent to learn a new view
- Recognize own communication style and strengths

Administrators

- Share the burdens of finance in medicine and don't avoid sensitive topics (like compensation)
- Ask for explanations about medical concepts
- Be inclusive
- Assume good intent until proven otherwise

Relationship established to
achieve the common goal

Relationship Foundation

Trust

Vulnerability

Respect

Communication

Relationship/Common Ground

Leverage Strengths

Cooperative (Dual) Leadership

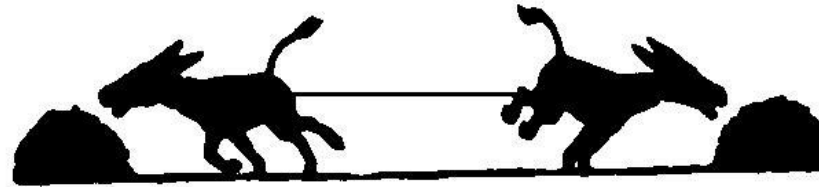
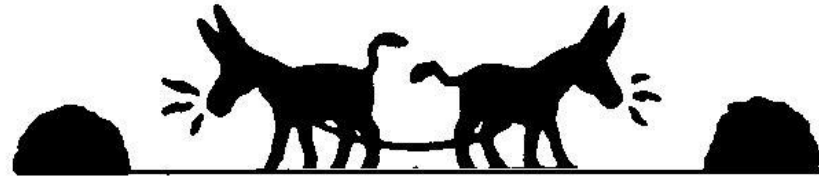
Guard against dangers



Cooperative (Dual) Leadership

- One message with two voices
- Establish agreement
- Honor Commitment
- Avoid confusion and confrontation in the frontline by achieving consensus early

"Co-operation"



What can we achieve together?



Outcomes

Safe, Quality Patient Care

| Metric | FY17 | FY18 | Q1 - FY19 | Demonstrated Outcome |
|---|----------------------------------|---------------------------------|---------------------------------|---|
| Case Mix Index | 1.66 | 1.71 | 1.78 | <ul style="list-style-type: none"> Total CMI up 3.4% FY17 to FY18 Total CMI up 4% FY18 to Q1 FY19 |
| EBITDA | ----- | 6,613,412 | 2,925,111 | <ul style="list-style-type: none"> Annualized income for FY19 estimated at 11.7 million |
| CLABSI | .644 SIR | .337 SIR | 0.00 SIR | <ul style="list-style-type: none"> All of Medical/Surgical Units and ICU's have achieved > 1 year CLABSI Free |
| C-DIFF | .216 C-Diff /Exposure Days | .139 C-Diff/Exposure Days | 0.00 C-Diff/Exposure Days | <ul style="list-style-type: none"> Sustained progressive improvement in performance |
| CAUTI | 0.00 SIR | 0.00 SIR | 0.00 SIR | <ul style="list-style-type: none"> Sustained Certified Zero |
| Patient Satisfaction Overall Top Box Score | 82.4% Top Box | 87.9% Top Box | 88.4% Top Box | <ul style="list-style-type: none"> Improvement in NRC Percentile Benchmark from 65th in FY17 to 85th in Q1 FY19 |

Thank You

