Leadership lessons learned as an academic chair: the Northwestern experience

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Becoming a Department Chair:  
An opportunity I did not seek

• My background:
  • Division Chief (in Pediatrics) for 16 years
  • Built 4 faculty division
  • Started clinical research unit
  • Initiated basic science research program
  • Active in dept and hospital committees

The Phone Call: Would you consider becoming Chair?

• Had experience with leadership roles at Children’s
• Running a “mini-dept” with many of the same challenges
• Little connection to dermatology dept. at the time: hybrid between coming from outside vs inside institution

• Required *stepping away from comfort zone*
Do your homework before the acceptance*

- Organized a team of 5 chair mentors
  - Current chairs and deans who were chairs
  - Individual discussions and followups during process
- Collect information
  - What are the strengths and weaknesses?
  - What are the opportunities and barriers?
  - Culture of the department
  - Detailed finances
  - Organization of clinics, research, education
    - Interview faculty, administrators, trainees
    - Talk with other chairs
      - Listen, learn and gain trust
- Develop a vision that can be achieved
- Determine what is needed to achieve the vision
  - People......Funding........Timeline with priorities
- Make sure you have the resources

*applies to any leadership role
Make it a pleasure

- Negotiated with Dean
  - Wiped all debt
  - Provided sufficient startup to recruit scientists per the presented vision

- Met early and often with faculty and residents
  - Presented vision for the department
  - Listened to their insights
  - Reorganized roles
  - Engaged each one in the collaborative vision

- Assumed leadership of both department and residency program

- Started building the academics
Create a reasonable timetable

• First priority: Expand clinical facility
  • Access
  • Create excellence/ improve reputation
  • Space…

• Reversed negative budget: clinics became profitable
  • Channeled clinical revenue into research

• Renewed and expanded clinical research unit

• Focused on bench science program

• Improved opportunities in residency program
What lessons have I learned about leadership?
Roles of a Department Chair

- Link between top leadership at institution and faculty
  - Chair “serves at the pleasure of the Dean”

- Vision needs to be macro, not micro
  - Personal
  - Division
  - Department
  - Medical school and University

- Not a passive process
  - Reaching out beyond comfort zone

- Greatest success through collaboration
• Have integrity
  • Do what you say you are going to do
  • Do what is morally correct, not necessarily what is easy

• Be genuine to yourself and others
  • Be honest in your dealing
  • Accept your limitations

• Be generous with your time
  • Elevate others around you

• Set the example
  • Energize others by your hard work and energy

• Be willing to yield control at times
  • Trust in others and empower them
Strive for excellence:

Surround yourself with energy and skill

• Department administrator as a “chair extender”
  • Communication with faculty
  • Able to execute plans
  • Helping to handle issues head-on
  • Trusting re budgets, financial management

• Faculty
  • Partners in building new programs, providing top service, educating, contributing through research and advocating for the specialty
  • National presence at meetings
  • Thought leaders based on scholarly activities
Strive for excellence:
Surround yourself with energy and skill

• Administrative assistant
  • Juggling calendars
  • Communicating with faculty, other institutional leaders, outside world
  • Managing crises

• Keeping a sense of humor

“As my assistant, your job will be to follow me around humming the ‘Jaws’ theme every time I enter a room.”
Strive for Excellence:
Discover, Dream, Design, Deliver

• **Discover**: Lots of *listening* in faculty meetings, one-on-one talks, ideas from other programs
  • Gaps and strengths?
  • What do most people want?
    • Recognize everyone’s opinion – draw out of quieter ones, not just loudest
  • Who feels deeply about issue? Need to be heard…
    • How can “dissenters” be accommodated?
  • How do the expert and the individuals who will carry out the vision feel?
• How will the decision be viewed within the institution?
Strive for Excellence: Discover, Dream, Design, Deliver

- **Dream**: Get everyone together to discuss vision
  - Ideas at faculty meetings
  - Organize committees
  - Hold strategic planning retreats
  - Discuss with other chairs
  - Colleagues outside the institution

- **Design**: Plan a strategy and how to implement
  - Justified by discussions
  - Should include accountability measures/ metrics
    - Is it working? What needs to be changed? Proof of success?
  - Get faculty and institutional buy-in

“My last comment ‘appeared’ to be inviting feedback.
Do not be fooled.”
Deliver: Don’t do it all yourself (who has time?)

- Engage others
  - Ask for help and empower decision-making
  - Autocracy gets results, but disenchants
- Delegate responsibility and hold accountable
- Discover the best in others
  - Build on strengths rather than disparage weaknesses
  - Leverage passion, energy and skills of faculty and staff
  - Recognize that strengths and interests change over time
    - Can renegotiate expectations
- Create a new leadership roles based on passion and skills
  - Use as opportunity for mentorship
Thank people…. Give credit

• Acknowledge contributions
  • Quietly (email exchanges, one-on-one discussions)
  • Publically (faculty meetings, rounds, online)

• Reward citizenship and excellence in roles
  • Establish meaningful “awards”
    • e.g., Teacher or mentor of the year
  • Roles that offer leadership and engagement
  • Financial rewards
Advocate for resources
Commitment to the institution as well as department

• Look for opportunities to stretch – make dermatology visible
  • Faculty and chair participation in committees and on boards: networking
    • Example: Integration and Board/Communications

• Best way to advance programs is to move beyond the dept
  • How is vision helping the institution
  • Big picture
  • More likely to get resources if benefits more broadly
    • Example: OncoDermatology

Data, data, data: Metrics talk
• What is the competition doing?: X, Y, Z?
• What will be gained financially: worth the investment?
Data, data, data: Metrics talk

- Want to get more salary for faculty members?
  - Are the numbers available nationally?
  - Can you get the numbers at other institutions?
  - Reach out to other chairs if data is not available
  - Share your own data as possible to support specialty

- Idea for a new program?
  - How will institution be better positioned nationally?
  - Are we losing money without it?
    - Example: Teledermatology – importance for institution

- Pitch programs at the top: they’ll happen faster
  - Who has decision-making capability?
  - Get institutional leaders together to discuss
Advocate for more space

• Present vision and justify need
  • Be realistic
  • Offer to take a chance/ be the first
  • Leverage sacrifice for the institution

  • Example: Sacrifice for CV surgery

• Plan space carefully
  • Think outside the box

• Consider interdisciplinary relations for space extension
  • Who needs our services?
  • Example: Cancer center
Building research

• What are current strengths: within department? within institution?

• Networking and more networking
  • Collaborations that are win-win

• Establish Cores that broadly support faculty research

• Provide startups with philanthropic funds

• Recruit new faculty who find strength in collaborations outside of the department

• Set an example
Getting funding (controlled by the Chair)

- Don’t expect it to come to you
- Diversify
- Be creative
- Look for opportunities within institution
  - Internal and external grant sources
    - Leverage collaborations within institution
    - Help faculty network
  - Industry relations
  - Philanthropic opportunities: engage faculty
Communication skills are important

- With faculty and staff – and then back to the Dean’s office and hospital/ faculty practice leadership
- At regular faculty meetings, not chance encounters
- To retain faculty
  - Cannot ignore problems
  - Don’t take too long to act

Good decisions may be unpopular

- Stick with decisions if appropriate
- If a bad decision, accept responsibility

- Consider best way to change and move to rescue
- Get input from relevant faculty and support staff – don’t need to do it alone
Business skills are now important

• Most dermatologists are not trained in finance

• Basic understanding of financial or administrative processes goes a long way: get training

• Business school courses: Executive MBA or specific classes

• Improve communication skills

• Deans are happy to cover costs
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"How do you measure the inner strength that nudges you forward when the call comes to toss your hat in the ring or the true recognition that what you bring to the table is of great value? Listening, speaking up, and speaking out are the results of a conscious appreciation of one's own value, skills and knowledge … and these are the results of ELAM."

Anne Simpson, ’13

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Handling complaints: Don’t ignore them

• What is the issue and why the complaint?
  • Listening is key: don’t second-guess
  • Often based on poor understanding; explaining may suffice; respect person’s perception

• Avoid being negative, judgmental, or too quick to counsel; focus on issue not individual

• Acknowledge emotions but manage them

• Complaint may require action
  • May be able to act quickly and implement change
  • May require further investigation before action
  • Usually not an “emergency”
  • Sometimes non-negotiable or for “greater good”

• Document: keep it factual and don’t editorialize

• If a disagreement between faculty, hear both sides and then bring people together with moderator
A non-collegial faculty member can be toxic

• Choose faculty members who are team players and collaborative… but issues arise
  • Disagreements and discourse is healthy
• Beware of non-collegial faculty: harm dept culture
  • Faculty may disengage to avoid interactions
  • Morale is depressed
  • Negative emotions overcome positive ones
  • Performance and participation deteriorate

• Mentoring and discussions
  • One-on-one frank discussion with faculty to express concern
  • How can department help?
  • May need resources outside dept
  • Punitive or no action is not helpful
Managing change: test of leadership

- Change (esp. rapid) is a potential destabilizer
  - Fear of the unknown
    Example: new Dean, new Northwestern Medicine, new compensation plan

- Culture change

- Potential financial and lifestyle ramifications
  - Long delay before central decisions re salary/incentives
Managing change: test of leadership

• Be there and be involved

• Listen to faculty concerns and relay them as appropriate to Dean’s office and other leaders

• Communication and reassurance with faculty

• Play a role in making decisions at a high level to advocate for faculty; discern what will be a “given” and what is negotiable

• Model the numbers and anticipate issues

• Thoroughly understand the potential impact for each faculty member and be creative

• Lobby with other chairs for change if inappropriate
Managing change: test of leadership

• Change can be an opportunity

• Integration led to incorporation of ~14 private practice dermatologists into department and put strategic control of growth into the department

• New Division of Community Dermatology: closer affiliation for privates, referral base for specialists
In sum: Tips to leading a collegial department

• Be genuinely interested in every faculty member
• Treat everyone with respect and dignity at all times – faculty, trainees, staff
• Understand faculty goals and help them achieve them
• Personal integrity and role modeling is the foundation
• Remember that relationships are built on trust and ongoing communication
• Poor behavior (faculty, staff, trainee) requires a response
• Recognize people publically for their successes and contributions
• Department’s most important asset are its people, their intellectual capital and skills, and the culture that is created
• Success of a chair is based on the success of the institution, the department and all its members, not personal success
Thanks for your attention and enjoy Chicago