

Feature Article

OPTIMIZE ORGANIZATIONAL PERFORMANCE THROUGH LEADERSHIP DEVELOPMENT

By Nan Brodsky

There are good leaders, and there are exceptional leaders. What makes a leader exceptional? The answer is simple: competencies. Competencies are a set of professional and personal skills, knowledge, values, and traits that guide a leader's performance. The exceptional leaders have the ability to apply these competencies. The global marketplace is open for leaders with vision, insight and special skills that will promote the company's survival in today's increasingly complex, competitive industry.

Leaders need to translate the mission, vision and values of the organization into understandable language, with emphasis on action. Being open about plans for the future lets your people know where you intend to lead them. Culture starts at the top and must be present throughout the organization so that each employee is aware of how much the success of the entire organization depends on his or her daily effort. The mission, vision and values must become part of their daily work lives – it should be visible everywhere and used as a guideline so every person in the organization knows what behaviors are acceptable and what are not, and the consequences. Leaders should model the culture daily, as accountability begins at the top. They need to be passionate about high performance, and encourage executives and managers to mentor/coach others to develop talents and skills.

Sounds simple, right? Statistically, companies that define, communicate, and model their mission and direction perform better than companies that don't. Yet, a small percentage of companies follow this path. Why? Do leaders not understand the importance or do they lack the ability – or both?

Leadership Development Programs

A leadership development program is for leaders and managers who want to be more effective and produce results. They want to lead themselves and their companies to be

successful today and tomorrow.

There are off-the-shelf leadership development programs that are provided to the general population. Arrangements can also be made to bring them to your organization for the convenience of your leaders and to limit attendance to only your organization. Programs can also be tailor-made specifically for your leadership team, for individual departments, and professionally specific for physicians, nurses, and other professionals. These programs should include an organization-specific assessment in order to provide courses designed to meet the needs of

(article continued on page 2)

SAVE THE DATE

WHA 25TH ANNIVERSARY EVENT GALA

featuring

the Honorable Hilda L. Solis
Congresswoman, 32nd District
Keynote Speaker

& Other Guest Speakers

OCTOBER 25, 2006

5:30PM
PASADENA

Watch for email announcement or contact mtui@comcast.net for more details

FEATURE ARTICLE (CONT'D)**....Leadership Development**

your organization. The classes and workshops could be conducted on-site for the convenience of your team.

Curriculum examples that help maximize success include *Leadership, Finance, Business Development, Performance Management, and Company/Industry knowledge* to align leaders with company goals, job responsibilities and the culture.

Cost Benefit

Think you can't justify a leadership development program? Consider these business metrics:

- Employee retention
- Rejuvenation of stalled mid-career or mid-level managers, thus preparing them for promotion opportunities and reducing the need for recruitment expenses and the cost of vacancies
- Job and professional satisfaction resulting in improved productivity
- Increase in safety compliance producing a reduction

in injuries and claims payment

- Increase in business development and market share
- Improved customer service and retention
- Focus on products, services and quality that meet your customers' needs
- Alignment of leaders' goals with those of the organization, producing a unified direction with everyone in the company committed and motivated to getting there
- Improved financial understanding and compliance

Continuously developing key contributors and leaders is critical for the short- and long-term success of an organization. It provides an integration of the company's leadership values and philosophy with the practices of the organization, the team and the individuals. Advancing the core leadership competencies helps to align the corporate culture with the organization's mission and goals. It leads to increased job satisfaction, productivity and retention while supporting the leader's readiness for succession. All of this supports an improved bottom line. ✦

Health Care News Brief

JULY 24, 2006

Governor Arnold Schwarzenegger Holds "Summit on Health Care Affordability" at UCLA

(Source: Los Angeles Times)

Gov. Arnold Schwarzenegger brought together corporate executives, doctors, medical administrators and academics Monday, July 24, in what he said was an attempt to find common ground on healthcare policy

Despite Schwarzenegger himself having offered few detailed proposals on healthcare during his nearly three years in elective politics, the governor said he was open to all ideas and ready to begin a thorough examination of healthcare with an eye toward announcing a comprehensive proposal next year if he is reelected

The discussion covered familiar territory in the national healthcare debate, with the participants offering various reasons for high health costs and the rising number of uninsured Californians — now estimated at more than 6 million. There was little mention of administrative and prescription drug costs, often blamed as reasons for rising healthcare costs.

Although the summit included some prominent union leaders, outside of the summit location, the California Nurses Assn. ran a picket line of 40 people, protesting the governor's healthcare policy record to date.

WHA Jobline Success Story!

Lisa Levitt, WHA Member and Senior Program Manager at Blue Shield of California, found her job through the WHA Jobline, enabling her to move from Boston to Los Angeles. Congratulations Lisa!

Executive Forum is published four times a year by Women In Health Administration of Southern California. We welcome your comments, suggestions and article submissions. Please contact:

Editor:
Nina Niu-Ok
(818) 368-4917
nina@theoks.com

WHA would love to hear from you! Please let us know of any important news in your lives, ideas for events and activities, book reviews, articles, etc. Better yet, get involved and lend your talent and ideas by joining one of the WHA committees!

MAY EVENT**Physician/Hospital Relations: History and Prognosis***By Caitlin Beck*

WHA hosted a Speaker Event at the Grove on May 18, featuring Ellen Meier, VP of Physician Strategy at Sutter Health.

Ellen Meier knows physicians. Not only was she a seasoned pediatric nurse practitioner and former Vice President of Operations for a 650-member faculty group practice before receiving her MBA from Pepperdine University, but now she is responsible for managing Sutter Health's overall physician strategy and executing their short and long term plans for physician recruitment and retention. Sutter Health is a large health system in Northern California encompassing 26 affiliate hospitals, approximately 41,000 employees and relationships with approximately 3,500 physicians and as VP of Physician Strategy, Ellen *knows* physicians.

Ellen's presentation to WHA examined the complex nature of the physician-hospital relationship from a historical perspective as well as the current environment and suggestions for collaboration and partnership going forward. In the context of the current environment of declining reimbursement, rising costs of care and steep competition among providers and provider organizations, the relationships between physicians and hospitals has been one susceptible to conflict. Ellen broadly compared this rela-

tionship to that of a "bad marriage" due to the differing perspectives, priorities and training of physicians and hospital administrators and their chalky past amid an era of managed care.

Her message was clear, however, that in order for this to be a mutually beneficial relationship, it needs to be "pluralistic" in nature recognizing the need for physician autonomy as well as the overall good of the patient and organization at large. Despite this being no easy feat, Ellen spoke to the group of some creative strategies for meeting both the needs of individual physicians and hospitals, and how the use of innovation and technology can enable this type of arrangement and align incentives for the good of patient care.

Overall, the group who attended enjoyed Ellen's enthusiasm, graciousness and insights on this "hot topic." WHA is grateful to Ellen to her contributions to our knowledge and understanding of this important area of healthcare.

WHA also presented its 2006 WHA Scholarship Award at the event. Stephanie Heintz, UCLA Executive MPH student, accepted her award with a brief but gracious speech regarding her appreciation of the award and her health care career aspirations. Congratulations, Stephanie! ❖

**WHA 25TH ANNIVERSARY GALA IN PASADENA
OCT 25, 2006**

The WHA 25th Anniversary Gala is a celebration showcasing the visibility of executive leadership in the areas of advocacy, government, corporate leadership, community service, and entrepreneurship: all integral areas of WHA's 25 year commitment to empowering women in the field of healthcare administration.

We invite you to come out to volunteer, show your support, and celebrate our accomplishments as we prepare for other exciting challenges and changes ahead.

More details included in emailed communication and the website about this exciting event!

MEMBER SPOTLIGHT**Kathy Hegstrom, CEO, Advanced Medical Management***By Jan Frates*

Advanced Medical Management also celebrates its 25th anniversary in 2006. Kathy and her husband started the firm in 1981 as an adjunct to their work administering a medical clinic and professional corporation. Her husband was a medical clinic manager; she was a banker. When they married they decided to work together and formed their own company, and Kathy learned how to do physician billing. Kathy's banking experience helped them obtain a Small Business Administration loan to capitalize the business.

The company's original business model was as a billing service for the twelve physicians, with AMM receiving a percentage of the collections. They moved into managed care when Maxicare and HealthNet, then fledgling HMOs, had a couple of commercial contracts with medical groups and the medical groups needed more administrative capacity to handle them. After a few years they began working with hospitals to establish IPAs for managed care contracting and handle the claims function for the IPAs.

The firm grew gradually until 1998, when the FPA physician practice management firm suddenly closed and one of AMM's client IPAs assumed responsibility for 15,000 additional lives overnight. This helped both the IPA and AMM attract more business. Today, AMM has a staff of 140 employees and manages care for over 2,000 physicians and 100,000 patients. The business model has expanded to include a management services organization, a third party administrative service, and a fiscal intermediary function begun in July 2006 when AMM became the fiscal intermediary for the Orange County Health Care Agency.

Kathy recalled that when she and her husband established AMM, he was the CEO and she was the Executive Vice President. He served as CEO and was the company's primary representative; she concentrated more on operations. When he developed some health problems a few years ago and had to limit his activities, Kathy took over as CEO and had to assume the business development functions. She believes that marketing is mainly built on relationships and word of mouth recommendations for new business opportunities. For example, a client advised them about the opportunity to bid for the Health Care Agency fiscal intermediary contract.

Although AMM has grown to include many more functions (such as case management, utilization review, and IT) there is still a strong family orientation. Two of Kathy's three sons work at the company (yes, she raised three children and also earned a Master's degree in health care administration during this 25 year period) and there are at least five clusters of related family members among the staff. She has also been a great intern preceptor and mentor for students from CSULB; one has risen through the ranks to become the firm's Finance Manager.

Kathy has been a member of WHA for many years, enjoys the meetings and the newsletter. Remembering AMM's early days when some people didn't accept her authority, she credits organizations like WHA with creating opportunities for more women to advance in all areas of healthcare.

**Other Organizations****CONFERENCES**

California Governor & First Lady's Conference on Women:

"Connect Today, Seize Tomorrow"

September 26, 2006, Long Beach, CA

Visit www.californiagovernorsconference.org for registration and program information. This year's conference includes an afternoon address by His Holiness the Dalai Lama.

INFORMATION

Hospital Association of Southern California (HASC) has launched a blog called "Lott on Healthcare," which will present the thoughts of Mr. Lott on topical issues facing hospitals and the health care delivery system in general. Jim Lott is the Executive Vice President of HASC.

Visit www.hasc.org/lott.cfm to view the blog.



What Members Are Reading



Difficult Conversations: How to Discuss What Matters Most

by Douglas Stone, Bruce Patton, and Sheila Heen

Submitted by Suzanne Yu

The book *Difficult Conversations: How to Discuss What Matters Most* offers a practical and clear approach on how to manage through difficult conversations. Perhaps you are wondering, what is a difficult conversation? According to the book, it is anything we find hard to talk about. This broad definition may have many of us thinking this could apply to limitless situations but the authors have provided specific criteria and purposes for when their recommended approach would be most effective.

The book outlines a 5-step approach to help us successfully identify and steer through difficult conversations:

1. Prepare by walking through the 3 conversations
2. Check the purposes and decide whether to raise issues
3. Start from the third story
4. Explore their story and yours
5. Problem-solve

Step 1 is realizing that one difficult conversation is actually comprised of 3 conversations: the “What Happened,” Feelings, and Identity conversations. The authors have found that the fundamental problem with difficult conversations is that we fail to address and communicate these 3 conversations to the other person. These 3 conversations are critical to help us sort out the facts from the interpretations, the intentions from the impact, and find a balance to eliminate the threat of losing our identity, respectively.

Specifically, the “What Happened” conversation encourages us to look beyond what just happened and dig into deeper issues of intentions and interpretations based on each individual’s past experiences. The Feelings conversation encourages us to explore and express our emotions explicitly to the other person. The Identity conversation encourages us to look introspectively and evaluate

the implications of the difficult conversation onto our sense of who we are.

After we have the 3 conversations with ourselves, Step 2 is to evaluate our purposes and determine when to raise the difficult issues. The book identifies the 3 purposes where this approach would be most effective are in learning, sharing, and problem-solving situations. Subsequently, the decision to raise the issues should rest upon whether having the conversation will serve the intended purposes and whether raising the issue is the best approach or if it is better to let the issue go.

When we have decided to have the difficult conversation, the most difficult step is to know how to have the “learning” conversation. Steps 3 through 5 provide a practical approach to conducting our difficult conversation. Beginning with the third story means that we open the conversation with the sole intention of trying to understand the other person’s side of the story. In other words, we must withhold from asserting our perceived implications and assumptions.

Once the line of communication is established, we can then focus on exploring the other person’s story and our own. This includes listening with the intention of understanding, sharing our viewpoint, and “reframing” what we have heard to verify that our interpretation matches the intended message. After all stories, assumptions, and feelings have surfaced, problem-solving in Step 5 can occur by developing options and standards that better match each parties’ concerns and interests.

I highly recommend this book. It will provide its readers’ with a healthy perspective on how to manage through a discussion that involves a variety of issues that we often neglect to consider in our decisions and approaches. Happy reading!



WHA recognizes our generous sponsors

TITANIUM

Foley & Lardner LLP

Kaiser Permanente

PricewaterhouseCoopers

BRONZE

USC Executive MHA Program

WHA 2006 BOARDPresident

Sue Brilliant (310) 720-2532

Secretary

Simran Sahny (714) 809-3292

Finance Chair

Doria Hai (310) 259-3986

Membership Chair

Diane Ung (310) 975-7818

Events Chairs

Caitlin Beck (323) 810-4807

Karen Valentine (805) 480-8077

Communication Chairs

Jan Frates (949) 515-0181

Nina Niu-Ok (818) 368-4917

Members-at-Large

Trudi Carter, MD (714) 565-4368

Nan Brodsky (818) 986-1405

Immediate Past President

Krisianna Lee (323) 857-4376

MEMBERS ON THE MOVE & NEW MEMBERS**New Members:**

Judy Beserra is a Executive Assistant at Arroyo Seco Medical Group and a student at Cal State Long Beach.

Karen Blum is a Senior Staffing Consultant at HealthNet.

Joanne Chiu is a student and an Administrative Specialist at UCLA.

Jovita Montes De Oca is COO at Network Medical Management.

Karen Elliott is Privacy Officer & Information at LA Care Health Plan.

Erin Hudson is a Student and Surgical Assistant at Dr. Paul D. Braun DDS.

Kelly Leong is an Assistant at Loma Linda University, SPH.

Carol Malo is a student at Cal State LB.

Cassandra Nguyen is a student at Cal State Long Beach.

Flora Poladyan is an COO at Comprehensive Community Health Centers, Inc.

Deborah Salas is Claims Director at PacifiCare.

Cathy Ajala-Staats is a student at Cal State Long Beach.

Vicky Tai is a new member.

Members on the Move:

Melissa Biel is now Community Development Facilitator at Community Clinic Association of Los Angeles County.

Amy Canter is now Health Systems Specialist/Business Manager at VA Long Beach Medical Center.

Trudi Carter, MD is now Executive Director at MediCal and Healthy Families.

Carolyn Catton is Chief Exec. Officer at Mission Community Hospital.

Bridget Cole is now Director of Information Technology and Special Projects at Comprehensive Community Health Centers, Inc.

Stacy Dyer is now Administrative Manager I at SSA/Strategic Planning & Public Relations.

Lisa Levitt is now Senior Program Manager at Blue Shield of California.

Stacy Thompson is now Physician Practice Business Manager at Children's Hospital Central California.