

Tennessee's Medical Society Helps Members Take the Leadership Reins

By Michael Stone | Oct. 12, 2016



When physicians' decade-plus of post-secondary education and training leaves gaps in non-clinical topics, Dave Chaney sees an opportunity for state medical societies — often the largest professional organizations for physicians at the state level — to step up and fill them in.

And this is sometimes nowhere more important, he said, than physician leadership: doctors participating in more administrative duties outside the examination or operating room.

To give physicians a leg up in these decision-making leadership roles, Chaney's medical society, the Tennessee Medical Association, began offering training in the area almost a decade ago and graduated its most recent classes on July 15.

"Medical schools have a lot to teach during a physician's or an inspiring physician's tenure there," said Chaney, a TMA spokesman. "But I think partly it's more the role

of the state medical society to offer these types of programs because of the nature of our position in staying aware of heath care trends, being involved and engaged in a number of different areas from legislative and legal and regulatory to continuing medical education."

Blurring the lines between suit-and-tie and scrub-and-stethoscope helps to spread perspectives of doctors still regularly working with patients, said Dr. Michel McDonald, Vanderbilt's director of dermatologic surgery and a graduate of TMA's first physician leadership class in 2008.

"It's always helpful to have physicians that are in the trenches and are still practicing that also are in leadership roles," she said. "It definitely gives you more credibility, and physicians like to see that. They like to know that you know what they're going through."

TMA's offerings on physician leadership have had slight modifications since 2008. Under today's umbrella John Ingram Institute for Physician Leadership, the organization offers two formal courses, open to all TMA members through self- or associate nominations.

The first, the Leadership Immersion Program, brings a dozen Tennessee physicians together for a three-day weekend in June and the additional day on July 15 to learn about medical collaboration, conflict management, negotiation, media and communications, advocacy, and other topics.

From those, negotiation and conflict management are the most popular, said Beth Lentchner, who oversees the courses as TMA's education coordinator.

"To me, it's fairly natural [that] any time you get a group of people together, you're going to have differing opinions and you're going to have people coming from different points of view," she said of conflict management. "And each may believe their viewpoint is the most important aspect."

Another important topic is advocacy, Lentchner said. This teaches physicians how their field is handled by the government, starting with basic terminology used by the state Legislature and working up to how different medical issues are viewed in various committees, how physicians' perspective can be brought into legislative discussions, and the legislative environment overall.

Two topics that Lentchner said might be added next year to the immersion program are delegation and time management.

The second course, the months-long and more in-depth Physician Leadership Lab, has between 20 and 30 doctors learning to improve care quality and cost-efficiency in a team-based approach. They do this by coming up with their own projects and, with what they've learned through the lab's in-person workshops and webinars, implementing them at their own practices with the help of their co-workers there.

Two end goals from this year's projects were reducing patient wait times and creating a mechanism to track patient medication.

In the Leadership Immersion Program, Lentchner said, "you get the individual leadership skills." In the Physician Leadership Lab, "you are taking those leadership skills and becoming and being and serving as a leader to lead in process improvement and to lead team-based care initiatives."

At the immersion program's July 15 gathering at TMA headquarters in Nashville, the participants finished their coursework in the morning and afternoon, and those from the Physician Leadership Lab joined them that evening for the TMA board meeting, during which a few of the leadership lab students presented their projects.

For 2017, Lentchner is hoping for another course: MBA-like training that teaches accounting and other business practices "that are important now for all physicians to understand."

TMA's programs are meant to benefit the individual physicians and their respective medical groups by establishing and training future leaders. But they also serve as a recruitment tool (because enrollees have to be TMA members) as well as a conduit for participants to go beyond basic membership.

Past participants have gone on to serve on TMA committees, on its board of trustees and even as board chair, Chaney said.

"They might not have been a member even before or known anything about the state medical society," he said, "but going through the program and getting exposed to some of those things has peaked their interests."

McDonald, for example, went from being a basic member prior to the course to holding leadership roles in and out of the organization — including, most recently, being the 2015-16 chair of TMA's board of trustees.

"The leadership college definitely opened up the doors so that I knew what was required of those roles, I had a much better idea of how to function in those roles, and also, I got to network and meet people who are instrumental in being mentors to help me get those roles," she said.

Overall, interest in TMA's leadership courses has grown so much that a waiting list had to be started, Lentchner said.

"Continuously," she explained, "I hear folks say, 'I wish we could've gotten some of this in medical school' or 'This is so important because we learned how to take care of patients, but we're responsible for so much more."