

Leadership and Organizational Structure

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The leading education and advocacy organization for the multidisciplinary cancer team



Key Topics

- Oncology program leadership structures
- Team building and team working
- Business segments and leadership
- Staffing challenges
- Leadership and collaboration in the community
- Strategic risk and risk sharing
- Leadership fundamentals



Oncology program leadership

- What's unique about healthcare leadership?
 - Clinical leadership
 - layers of clinical leadership
 - Administrative leadership
- Collaboration vs. two-headed monster
- Do as I say, not as I do?



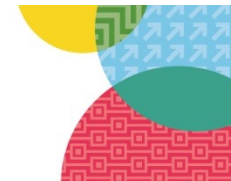
Multiple concurrent business processes

- Clinical operations
- Pharmacy operations
 - Purchasing/inventory; drug administration
- Revenue cycle operations
- Business operations
- Unique processes yet each intertwined
- Are you leading one business or many; says who?



Clinical Operations

- “Running the clinic”
- Day-to-day...opening/closing...flow...
- Who is in charge?
 - Physician leadership
 - Nursing leadership
 - Administrative leadership



Pharmacy operations

- Two cycles work concurrently and rely on each other
 - Purchasing/inventory
 - Drug Administration: oral and IV
 - Pharmacy leadership
 - Nursing leadership
 - Administrative leadership
 - Physician leadership



Revenue Cycle Operations

- Ensuring that the program is paid for the work that is done
- Presumed to be purely an administrative function
 - Administrative leadership
 - Physician leadership
 - Nursing leadership
 - Pharmacy leadership



Business Operations

- Practice issues beyond the day-to day operations
 - Strategic focus rather than front line tactical
 - Physician leadership
 - Administrative leadership
 - Roles for other clinical leaders



Take aways

- All program processes are interdisciplinary
- Its not always clear who ought to be the leader
 - How do we determine the leader...or does the environment determine the leader
- How does a leader lead in a heavily matrixed and interdependent organization
- Have you done enough to align incentives



Treat the organization as a system

- It's all “we”; there really isn't a “they”
- Even in times of limited resources, internal battles can be counterproductive.
- “My needs” must become “our needs”
- Mutual problem solving is needed both tactically and strategically
- An internal culture of systemic problem solving can be advantaged with external partners as well



Treat the organization as a community

- Doing one task well in the absence of making all tasks run well is a lost opportunity.
 - Safe and successful administration of a drug that is not reimbursed isn't a win for the organization; likewise, administration setting driven by reimbursement is suboptimal as well
- Does the organizational culture support the big win over the department win



The organization should be about creating success

- Do people look to leaders for direction, or do leaders give teams tools to lead the way?
- Do teams wait for someone to solve their problems or are they empowered to solve their own?
- DO teams help each other without an edict from above?
- A leaders only job is...



All members of the organization have a role in patient care

- Receptionist
- Medical records clerk
- Nurse
- Physician
- Social worker
- Patient Account representative
- All of the above can change a patient's experience



Why do you come to work every day?

- If you asked ten random employees...
- Is there a shared vision? Is it about the patient?
 - Or is it “the patient comes first...as long as it is convenient for me...”
- Is there a sense of one’s role in that delivering on that vision
- Are you part of helping people deliver on that vision



Does the organization “do” change?

- Is there any doubt that change is not mere inevitable but required in oncology
- Teams and individuals are rarely programmed for change
 - clinical professional for life
 - this is how I learned it
 - we have always done it this way
- Cultural shifts



Technology is what we do...or what we tolerate?

- If leaders don't merely adapt but innovate that sends a strong message
- However, I'll only use it because I have to sends a message as well
- What message are your leaders sending
 - Everybody else has to do it, but not me



Working at the organization is a joy and a privilege

- If it's not for the leaders, it won't be for anybody else...and coming to your oncology program will not be a joy for your patients
- Ask yourself first...then look around you
- If the answer is no...



Lessons

- Leadership isn't just about work experience; its about the experience you create at work
- Leadership is not emotionless, it is “emotionfull”.
- Leaders who care and show they care lead organizations that care
- Stoic leaders lead distant organizations



What does leadership have to do with staffing?

- Staffing is not about headcount
- Staffing is not about the initials after the name
- Staffing is about meeting the customers needs
- Does the organization have the vision to see through the barriers to meet those needs



We need someone to see the patients

- Hire an oncologist!!
- OR...
 - Hire an internist
 - Hire a midlevel
 - Hire a nurse...social worker...nutritionist...genetic counselor
- Are we hiring the fill boxes for convenience or comfort...or to meet patient needs



We need someone to do pre-authorizations

- Hire a financial counselor!!
- Are we hiring to the job description or the task?
 - Do we understand the task?
 - Is it a one person job, or is it a multi-person task
 - If the task is done well, what no longer needs to happen



Our business is shrinking, we need to shrink too

- Before we downsize...
 - Are we meeting all of our customers' needs
 - Are there customers that we haven't met yet, who need us?
 - Can our culture and competencies serve our community in new ways
 - You have great resources, use them



As you thought of these challenges

- Red Ocean thinking
 - zero-sum game
 - winners and losers
 - shrink your way out of a jam
- Blue Ocean thinking
 - go where no man has gone before
 - grow your way out of a jam



How do you fix what ain't broke

- Tide Pods



Ambiguity = Pain?

- Take advantage of the ambiguity in the world. Look at something and think what else it might be.
 - Robert van Oech
- Red Ocean or Blue Ocean



Lessons

- Leadership isn't about taking the easy path... it's about creating a new path
- If you think creatively, your team will think creatively
- Your people are a long term investment worthy of long term consideration
- Your customers and community will rarely disappoint you, if you don't disappoint them



Leadership in the Community

- What does cancer mean in your community?
- Who is in charge?
 - Prevention; screening; survivorship
- Why aren't you?
 - What barriers keep you from setting the agenda?



Leadership in the Community

- Barriers
 - It's the AMC/NCI Center's job
 - No one in administration said we could
 - We are too small
- Measure your role in the community
- Change your role in the community



Leadership and Risk

- Risk is a good thing? Bad thing? Thing thing?
- What makes risk risky?
 - Change
 - Lack of direction or a plan
 - Uncertainty about the future
 - Uncertainty about the present

Leadership and Risk

- Don't fix what ain't broke!
- How do you know it ain't broke
 - Is the healthcare system in a steady state?
 - Are payor comfortable with a buy-and-bill system with drug margins?
 - Are you able to relieve patient financial distress?

Leadership and Risk

- Okay, so maybe it's broke...
- What is the right step and what is the wrong step
 - If I had a nickel...
- Is leadership about avoiding failure or learning from it?



Leadership and Risk

- Strategic thoughts
 - Who are we? Who ought we to be?
 - Are we in the right place in our market?
 - Are we offering a fair price? Too much? Too little?
 - Are we telling our story the right way?



Leadership and Risk

- Talk to your patients about what you do and what you can do better
- Find out what your payors' plans are; if they don't have any, suggest some
- If you don't have a relationship with local employers, make some. They are paying the bills and they are hurting. Is there common ground?



What are you going to do?

- You have five days until Monday morning
- You have two more days to learn what others are doing
 - Imitation is the sincerest form of flattery
- There is wifi in the room...every day
- Some thoughts



One idea

- Pull out the strategic plan
 - If you just said what strategic plan...
- When was the last time it was revised
- When was the last time it was critiqued
- Have you circulated the plan broadly enough
- How frequently will you revisit the plan



Another idea

- New employee orientation
 - Is there one
 - How long does your formal orientation program last...a day...a week...six months
 - What's your role...are you being a leader on this level
- Mentoring...



Last idea

- Have you done a pre-mortem on your next project
 - We all (should) do postmortems on projects
 - One of the best ways to avoid project failures is discuss how they might fail before you start
 - <https://hbr.org/2007/09/performing-a-project-premortem>

Final thought

“Better, I think, to decide what's important, what needs to change, what's worth accomplishing...The most important comparison, in fact, is comparing your work to what you're capable of.”

— Seth Godin

