Developing Leaders: Today and Tomorrow

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Leadership Development
...in 10 minutes

- Why
- Who
- What
- How
- When
- Where

Understand the basic tenets of leadership competencies
Gain exposure to Duke-NUS innovations in leadership development
Engage in dialogue regarding the role of leadership in medical school curriculum
Why?

**Changing Environment**
- economics
- IT
- workforce
- information
- devices
- emerging diseases
- population
- internet

**Call For Leadership**
- AAMC
- ACGME
- IOM
- AAMS
- FRCS
- MOH

Is there something else?
Leadership and Team Training Saves Lives

Association Between Implementation of a Medical Team Training Program and Surgical Mortality

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Diverse events related to surgery continue to occur despite the best efforts of clinicians. Teamwork and effective communication are known determinates of surgical safety. Previous efforts at demonstrating the efficacy of patient safety initiatives have been limited because of the inability to study a control group. For example, the use of the World Health Organization Safe Surgery checklist has been evaluated, but its overall efficacy remains uncertain because no control group was studied to clearly demonstrate this instrument's effectiveness.

The Veterans Health Administration (VHA) is the largest national integrated health care system in the United States, with 153 hospitals, 130 of which provide surgical services. The VHA implemented a formalized medical team training program for operating room personnel on a national level.

Context There is insufficient information about the effectiveness of medical team training on surgical outcomes. The Veterans Health Administration (VHA) implemented a formalized medical team training program for operating room personnel on a national level.

Objective To determine whether an association existed between the VHA Medical Team Training program and surgical outcomes.

Design, Setting, and Participants A retrospective health services study with a contemporaneous control group was conducted. Data were obtained from the VHA Surgical Quality Improvement Program (VASQIP) and from structured interviews in fiscal years 2006 to 2008. The analysis included 182,409 sampled procedures from 108 VHA facilities that provided care to veterans. The VHA's nationwide training program required briefings and debriefings in the operating room and included checklists as an integral part of this process. The training included 2 months of preparation, a 1-day conference, and 1 year of quarterly coaching interviews.

Main Outcome Measure The rate of change in the mortality rate 1 year after facilities enrolled in the training program compared with the year before and with non-training sites.

Results The 74 facilities in the training program experienced an 18% reduction in annual mortality (rate ratio [RR], 0.82; 95% confidence interval [CI], 0.76-0.91; P<.01) compared with a 7% decrease among the 34 facilities that had not yet undergone training (RR, 0.93; 95% CI, 0.80-1.06; P=.59). The risk-adjusted mortality rates at baseline were 17 per 1000 procedures per year for the trained facilities and 15 per 1000 procedures per year for the nontrained facilities. At the end of the study, the rates were 14 per 1000 procedures per year for both groups. Propensity matching of the trained and nontreated groups demonstrated that the decline in the risk-adjusted surgical mortality rate was about 50% greater in the training group (RR, 1.49; 95% CI, 1.10-2.07; P<.01) than in the nontraining group. A dose-response relationship for additional quarters of the training program was also demonstrated: for every quarter of the training program, a reduction of 0.5 deaths per 1000 procedures occurred (95% CI, 0.2-1.0; P<.001).

Conclusion Participation in the VHA Medical Team Training program was associated with lower surgical mortality.

“Medical Team Training program was associated with lower surgical mortality”

JAMA. 2010;304(15):1693-1700
Who?

We Are Leaders

Individual                Organizational

Complexity
### What?

Imagine the most outstanding leader in your experience…

<table>
<thead>
<tr>
<th>Integrity</th>
<th>Conflict manager</th>
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<tbody>
<tr>
<td>Vision</td>
<td>Team builder</td>
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<tr>
<td>Trusting</td>
<td>Empathetic</td>
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<tr>
<td>Articulate</td>
<td>Uses humour</td>
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<tr>
<td>Smart</td>
<td>Inspiring</td>
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<tr>
<td>Listener</td>
<td>Motivating</td>
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<td>Role model</td>
<td>Pragmatic</td>
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<tr>
<td>Communicator</td>
<td>Unflappable</td>
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<tr>
<td>Humble</td>
<td>Strategic</td>
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<tr>
<td>Learner</td>
<td>Develops others</td>
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<td>What? Discrete Competencies*</td>
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<td>----------------------------</td>
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<tr>
<td><strong>Change creation:</strong></td>
<td></td>
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<tr>
<td>Proactively and reactively creating and managing change</td>
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<tr>
<td><strong>Working with others:</strong></td>
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<tr>
<td>Creating relationships that bring others to the work in a unified manner to accomplish desired outcomes</td>
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<tr>
<td><strong>Communication:</strong></td>
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<tr>
<td>Exchanging information effectively and creating shared meaning</td>
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<td><strong>Contextualized thinking and knowledge:</strong></td>
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<tr>
<td>Incorporating the knowledge of one’s environment into decision making and strategic thinking</td>
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<td><strong>Management skills:</strong></td>
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<tr>
<td>Planning and organizing structures and people to produce predictable results</td>
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<tr>
<td><strong>Leadership attributes:</strong></td>
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<tr>
<td>Espousing personal qualities of effective leadership</td>
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<td><strong>Resilience:</strong></td>
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<td>The ability to thrive in times of conflict and change</td>
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*Vidyarthi and Kuo*
How does one develop these competencies?

- Knowledge acquisition (didactics, readings)
- Experiential learning (role plays, case studies)
- Application (real life)
- Reflection (peer feedback)
At Duke-NUS

- Didactic
- Simulation
- Feedback
- Application

- Foundations
  - Practice courses
  - Capstone

- TeamLEAD
  - Colleges
  - Clerkships
  - PC4

- TeamLEAD
  - Student govt
  - Clerkships
  - System change projects
Leadership Excellence

Who: YOU

What:
Dynamic individual who is adaptable to the changing environment, able to create change through chaos and complexity—and thrive

When: NOW

Where: Here

How:
Collaboration, innovation, rigor, and dialogue

Why:
“Transforming Medicine Improving Lives”
Developing Leaders: Today and Tomorrow

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