

Why All Doctors Require Leadership Trainings?

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The medical profession has always been considered a noble profession, and doctors are considered “next to god” in terms of their selfless service to society. Entry into the profession is also one of the most challenging and competitive, with over 18 lakh candidates appearing for 91,927 seats in medical colleges in India.¹ Although medical trainees spend years learning about technical skills, there are few formal avenues through which trainees learn fundamental leadership skills, such as how to lead a team, how to confront problem of employees, how to coach and develop others, and how to resolve conflict. In medicine, physicians not only begin managing and directing teams early in their careers, but they rise through the ranks also uniformly. Within the first year of graduate medical training, or residency, resident physicians in all specialties lead teams of more junior residents, as well as other healthcare personnel, without undergoing any formal training or experience in how to manage teams and the span of leadership and responsibility grows once physicians enter independent practice²

Few academic organizations and institutes are also involved in the capacity building of public health managers focusing on their country's current health scenario. Joint Learning Initiative, a consortium of over 100 global public health leaders, has also emphasized strengthening the health workforce through training in public health management and leadership.³ In developed countries, various short- and long-term public health management and leadership programs are being conducted, such as Baylor University, George Washington University, and the University of North Carolina.^{4,5} The Robbins Institute of Health Policy and Leadership program under Baylor University provides a Masters in Healthcare Administration focusing upon installing knowledge specific to the healthcare industry⁶ while the UK has set up the Faculty of Medical Leadership and Management. Canada's Royal College of Physicians and Surgeons has a physician competency framework—Canadian Medical Education Directives for Specialists, which include leadership as one of the essential roles of physicians.^{7,8} The Association of American Medical Colleges has also included leadership skills as one of the key professional activities in residency.⁹

In India, the recently formulated Graduate Medical Education regulations by the National Medical Council (NMC) of India have duly recognized the leadership role of Indian medical graduates in managing healthcare teams and health systems.¹⁰ This is in sync with the global Accreditation Council for Graduate Medical Education, which requires medical students to work effectively as a member or leaders of a healthcare team.¹¹ The recent addition of the attitude, ethics, and communication module to the undergraduate medical curriculum is another significant step in the development of doctors' nonmedical yet crucial professional skills. While broad outlines are provided in the curriculum, NMC has bestowed the responsibility of implementing formal,

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culturally sensitive leadership training with medical colleges and institutes.¹²

The majority of the medical school curricula in India do not include the skills and competencies of leadership. Besides, very few leadership programs and training are being offered in developing countries, including India. Institutes like the Indian Institute of Health Management Research, India; National Institute of Health and Family Welfare, New Delhi, India; All India Institute of Medical Sciences, Delhi, India; All India Institute of Hygiene and Public Health, Kolkata, India, offer short-term training programs for health personnel in key areas of health management and leadership.^{13–16} Additionally, a few pieces of training for state governments in health management are being conducted. Most of these training programs are highly theoretical and not contextual to work settings. Moreover, very few medical graduates opt for these programs because of cost and time constraints. Due to the scarcity of leadership training programs and the lack of a medical curriculum, doctors are not able to play the effective role of a leader in health systems.

According to the author, there are 10 essential leadership skills that are required by a doctor. They are communication, teamwork, empathy, emotional intelligence, decision-making, collaboration and networking, change management, values, strong willingness, and personal humility. In the next few paragraphs, the author shall briefly describe them along with their importance for a doctor.

Effective communication skills not only help in connecting and establishing rapport with the patient and their family members but is also important to gather relevant and correct information for diagnosis. In many patients, it also acts as a healing effect on their diseases and is called the “heart” and “art” of medication.¹⁷

The complex and superspecialized clinical care delivered in modern times has forced doctors to practice a multidisciplinary approach which requires working as interdisciplinary teams.¹⁸ Further, working together reduces the number of medical errors, increases patient safety, reduces burnout, and increases health workers' satisfaction.^{19,20}

Empathy is the ability to understand and share the feelings of others or keep oneself in another's shoes. Empathy should be an integral component of a physician's skillset for allaying patients' fear and anxiety, as patients and their caregivers are apprehensive when they come to the hospital. It also helps in building mutual trust and respect, which further improves patient outcomes.²¹

Emotional intelligence is the ability to know about self and others' emotions (self-awareness) and manages them by staying calm (self-management). Doctors should practice high emotional intelligence by learning to pause and reflect while dealing with patients or their colleagues (especially in stressful situations), understand the drivers of emotions and control them. This improves teamwork and greater professional satisfaction within healthcare organizations.^{22,23}

Decision-making is another crucial aspect of a doctor's life that is needed at different points in their medical careers. It could be used as simply as the test to be performed for diagnosis of the illness, choosing the best treatment approach or surgical option based upon the contextual situations, or determining when to send the patient home.²⁴ In recent times, shared decision-making (patients and doctors making decisions together) is gaining importance for increasing patient satisfaction and better patient outcomes.²⁵

The inter-institute collaborations and networking between doctors help in data sharing for better treatment outcomes. The doctors are infused with fresh ideas by sharing newer technologies that help them to grow in their professions. The networking can be through attending and presenting their research in conferences and workshops but also through various social media networks like LinkedIn, Docplexus, PlexusMD, Curofy, Daily Rounds, ResearchGate, etc.²⁶

In the era of uncertainty and advancing technologies almost every day, the author considers change of management as one of the most important competencies for doctors. Change management is an organized, structured approach that empowers healthcare professionals to continue working seamlessly in challenging and uncertain situations. It consists of making a plan for change by building a long-term vision for the organization, followed by the development of interdisciplinary teams and identifying resources required, implementing change, and embedding it into organizational culture.²⁷ For example, during the coronavirus disease of 2019 pandemic, the healthcare institutions strengthened their pandemic preparedness plans, built teams, and collated resources, implemented them to tackle the pandemic, and embedded it into the organizational culture to manage change if a pandemic strikes in the future.

Values are deeply rooted views that act as guiding principles for individuals and institutions. It has been amply researched that doctors or medical institutes which articulate and demonstrate leadership based upon strong values and ethos outperform their competitors. In fact, leadership begins by defining the values first, followed by a vision that guides action.²⁸

Two competencies are key to Jim Collin's level-5 leadership—personal humility and professional will. Of 1,435 companies that appeared on the Fortune 500, only 11 were categorized as "great" in terms of their sustained performance over at least 15 years in comparison to their counterparts, and cumulative averaging stock returns 6.9 times the general market. All of them have level-5 leadership in key positions.²⁹ Similarly, doctors who demonstrate modesty, are quiet and calm, have ambition for their institute rather than themselves (personal humility), and have

unwavering resolve and determination to undertake challenging things (professional will) are level-5 leaders and build great institutions.

Summarily, building leadership training for doctors is a critical requirement in India, not only for providing better medical care to patients but also for tackling ever-increasing challenges. It should be formally integrated into medical and residency training curricula at undergraduate and postgraduate levels. There should be regular continuing medical education programs on leadership in every institution besides practicing leadership during routine ward rounds and field postings of residents, coupled with qualitative and quantitative evaluation. These leadership programs should run longitudinally at every level of residency and faculty positions depending upon their responsibility. The students and faculty should be encouraged to organize or take part in leadership training or fellowships as part of their career progression. Midcareer leadership programs should be periodically organized to refine their leadership competencies. The NMC should consider inculcating expanded leadership skills in every semester of undergraduate education rather than implementing a limited set of leadership skills during the internship. This is required to instill and practice leadership skills when students are part of a multidisciplinary team at a health center or a medical institute. Thus, leadership training for doctors cannot be executed on a "nice to have" basis; rather, it must be done so on a "must have" basis if we wish to achieve better treatment outcomes, increase patient and doctor satisfaction and reach new heights in the medical field.

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