

Development of Physician Leaders



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KEYWORDS

• Physician • Leadership • Medical education • Diversity

KEY POINTS

- Physician leadership in health care.
- Physician leadership training.
- Physician culture.
- Leadership principles.

INTRODUCTION

Health care today is rapidly evolving and so too must health care leadership. Many external forces, including the implementation of the Affordable Care Act, have resulted in a transition of health care systems away from the traditional fee-for-service (FFS) models and toward value-based care. This has led to increasing pressures on the system to improve access, affordability, and quality.¹ These external forces are also impacting the physician workforce resulting in high physician burnout and attrition. Added to this is a rapidly changing health care environment with new technologies and treatments continuously becoming available and an aging population with increased complex care needs. Together these factors have resulted in a need for new care delivery models that emphasize team-based care. Change requires the engagement and cooperation of many different stake holders including physicians. Health care leaders must be equipped to work in this complex and rapidly evolving environment. Currently, most health systems are run by nonphysician hospital administrators. Given the significant challenges facing health care today strong and expert leadership is needed. Physicians, naturally viewed as leaders, are especially suited to this role for their expertise clinically and their credibility

with other physicians. This is also true of independent medical practices. Although larger single-specialty and multispecialty groups may have the economic ability to retain business executives as managers, for many smaller groups, particularly those facing economic challenges, this burden typically falls on a practicing physician. Traditional physician leaders lack the formal training in many of the skills that are required for our current leaders, yet they have many of the necessary skills required to be successful. Growing our physician leader workforce requires formal training of existing physician leaders and a modification of the current medical school curriculum to ensure that there are qualified physician leaders in the pipeline ready and able to continue this work going forward.

WHY PHYSICIAN LEADERS

Historically, hospitals were run primarily by physicians. This practice has decreased over the past 80 years such that now only about 5% of US hospitals are run by chief executive officers (CEOs) with a medical degree.² Recent evidence suggests that hospitals with strong physician leadership may perform better in terms of quality of care, physician engagement, and cost efficiency. In 2019, greater than half of the 21 US News and

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