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Leadership Meets Leaders

The old saying goes: people don't leave a company, they leave a supervisor. In this era of scarce professional staff, it is essential for hospital managers to look into what makes their employees tick and what motivates them and to modulate their approach according to the type of individuals they supervise. It is definitely the best way to maintain the affective, continuance and normative components of professional commitment.

Building a high-performance organisation

Birgit Miesch, Director Human Resources, Ethicon Endo-Surgery Europe, Johnson & Johnson

"Caring for the world one person at a time" is the company's motto and it was also the starting point for Birgit Miesch's presentation on building a high performance organisation. She defined leadership as an equation: values + living them = leadership.

By having a set of values that serves as the foundation of everything that you do and living these values, giving consistency and credibility with your employees, you can become a great leader.

The Johnson & Johnson CREDO illustrates their responsibilities to customers, employees, committees and stockholders. It demands high quality, respect and inclusion of employees, being a good citizen, supporting societies

and respecting the importance of education. This Credo is described as a living document for decision-making.

For Johnson & Johnson employees are a huge responsibility. Everyone is considered as an individual and their dignity must be respected and their merit recognised.

Quoting Linden Wood Ms. Miesch stated, "People don't care about how much you know until they know how much you care." Employees need to know that their contribution matters, that they are part of something broader than themselves. Good leadership means putting meaning into what people do everyday.

Good leadership is also about selecting the right person for the job, someone who will build on the legacy that you leave behind in your organisation. The ultimate goal is that you are not needed anymore. This means leaving your comfort zone and realising that your employee may have the potential to be your boss one day.

So how do we achieve this relationship with our staff? We must ask what makes them tick, strive to understand their motivations, their specific needs. Time must be taken to listen to employees and learn about them. Giving and receiving feedback is also essential. In most cases this is not done often enough due to the fear of damaging a good relationship

but well thought out feedback can be very beneficial. Moreover, as a leader you need to be open to receiving feedback too. Showing your appreciation is of utmost importance. This is the fun part of leadership, a chance to be creative. Appreciation can be shown through monetary awards, a hand written note, praise in front of peers or even a simple thank you.

A good leader will also create opportunities for employees to shine. It is about unlocking potential and giving opportunities to less experienced members of staff. This can be challenging as it may mean waiting a little longer for

results and providing more support to employees.

The presentation was concluded with the final prerequisite for being a good leader- being a role model. Consistency is extremely important, you must do what you said you would do, walk the walk. It is about being authentic and most importantly being yourself. Performance will improve when relationships in the work place are based on mutual respect and trust.

Doctors' commitment to the hospital and to their profession and management implications

Prof. Dr. Manel Peiro, Academic Vice Dean, ESADE Business School, Barcelona, Spain

Prof. Peiro's presentation explored the relationships between doctors and the hospitals in which they work.

Spain provided the framework for the survey as it has been remarked there and elsewhere that in general, hospital doctors feel disappointed and dissatisfied as professionals and show a lack of commitment to the hospital where they work.

For the study, organisational commitment was divided into three categories:

- > affective commitment (personal and emotional),
- > continuance commitment (perceiving costs), and
- > normative commitment (moral obligation).

This commitment depends on age, sex and tenure in the organisation. He identified a conflict of divided loyalties. Professional norms and values often come up against organisational requests and demands.

The aims of his research were to discover the extent of organisation commitment, the commitment of doctors to establish links, the extent of professional commitment and the relationship between organisational and professional commitment as well as the patterns regarding their complicity.

His findings have shown that commitment to the organisation increases with time/age and promotion. It has been found that professional commitment is usually very strong.

They have also shown the relevance

of the foci of commitment:

the department and the

department head, with a strong

affective commitment to the department but a low level of commitment to the head of department.

There are four clusters of different degrees of professional and organisational commitment:

- > the conditionally loyal, representing approximately 30% of the total, who feel a low commitment to the department,
- > the resentful idealists, representing approximately 15% of the total, who are basically angry at the world and strongly reject the department head,
- > the committed winners, about 28%, and the youths with qualities, representing about 27% of the total, often young doctors with a strong commitment towards the department.

There are significant management implications from these findings. They highlight that doctors are a diverse group and it is necessary to divide them into these clusters in order to manage them in different ways. Prof. Peiro believes that doctors' commitment can be managed; positive work experiences can be developed with rewards, a fair distribution of resources and supervisor support.

To conclude, Prof. Peiro highlighted some of the main problems and current trends effecting commitment. These can be looked at from a global perspective.

Large unions are prevalent in the current healthcare systems, which means various departments are being grouped together.

However, one must ensure that this does not weaken their commitment to their own department.

He also highlighted problems concerning heads of departments.

In the hospital sector promotion is the only recognition there is and there is also the question of whether heads of departments are really interested in management or simply the power and recognition that comes with the title.

Despite these problems doctors' commitment to the service is very strong as is their commitment to the profession.

The weakness lies in the bond with the service manager, which is weak and decreases throughout a doctor's professional career.(LC)

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