When doctors take on leadership roles, the right coaching can help

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Jennifer Lubell
Contributing News Writer

Doctors get lots of training and have years of experience on how to build rapport with individual patients to help them achieve better health outcomes.

More rarely, however, do physicians get the targeted help that they need to make the transition into health-system leadership roles in which they are called upon to navigate fraught dynamics and find win-win solutions for the organizational team and the patients they serve together.

But since 2016, Baptist Health has supported its physician leaders through a program crafted by The Strategy Forums, an Indiana-based consulting group. The program uses a series of assessments to evaluate participants, gauge their leadership styles, and fine tune those abilities through individual and group coaching sessions.

Effective physician leaders are key to developing an effective and high performing medical group, according to Isaac J. Myers II, MD, chief health integration officer and president of Baptist Health Medical Group, who brought this program to the health system.

“This program served as a pivotal foundation to build that necessary physician leadership infrastructure,” he said, noting that “having the ability to understand your personality profile as a leader and having a coach to help you work through the balancing act is paramount to becoming a good physician leader.”

Such training has helped retain physicians—and practices. Dr. Myers recalled when a primary care practice was having trouble acclimating to the Baptist Health environment. Instead of parting ways with this group, the group received some coaching to help them understand the health system better. “Now it's one of our best-performing primary care providers,” he said.

“As they started working with the coach, understanding themselves, understanding the challenges they were having with working with the team and the leaders, it just all turned around and that was
huge for us,” added Dr. Myers.

Baptist Health Medical Group is part of Baptist Health, a Louisville-based health system delivering care in Kentucky, Southern Indiana and neighboring states. Baptist Health’s physician network includes more than 2,000 independent physicians, plus about 780 physicians and 870 nonphysician providers employed by the medical group.

Baptist Health Medical Group is a member of the AMA Health System Program, which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

**Assessments guide leadership style**

For many physicians, it’s a challenge to move back and forth from clinical to administrative roles, Dr. Myers said.

Leadership isn’t always intuitive for doctors, noted Sally Tassani, president of The Strategy Forums. “They know how to be a physician—some have been in the trade for 20, 30 years. But many will say, ‘I don’t know leadership.’”

Tassani’s coaches take them by the hand and walk them through the process of identifying their leadership style.

Being a physician leader involves shifting your thinking, noted Janet Renee Chipman, MD, a general surgeon and regional physician president for Baptist Health Medical Group. Physicians are trained to have a one-on-one obligation to each patient. Physician leaders have an obligation to a community, said Dr. Chipman, who went through the coaching program.

“If you don’t have the mindset to manage a large community, you won’t be successful. You have to be a team player,” said Dr. Chipman.

Tassani’s coaching program incorporates personality profiles based on four types of emotional expression, which together carry the acronym DiSC:

- Dominance.
- Influence.
- Steadiness.
- Conscientiousness.
Participants go through a series of assessments: DiSC Workplace®, Emotional Quotient/Intelligence (EQ), Productive Conflict®, and DiSC Work of Leaders® to gauge their leadership style.

“This helps us to understand them better, and for them to understand themselves better,” said Tassani. “We really get a clear picture of the individuals we coach.”

Work of Leaders compares you with leadership best practices, she explained. The Productive Conflict assessment identifies 18 unproductive responses to conflict, such as defensiveness, withdrawing, sarcasm or arguing, and how to replace them with 16 productive responses to conflict. The emotional-intelligence assessment explores how a person displays 15 different competencies, including self-regard, reality testing, interpersonal relations, empathy and independence.

Dr. Chipman was amazed by the accuracy of the assessments.

“After they give you your style, they'll tell you the sorts of personalities you'll have difficulty with. It was very predictive of that,” she said.

Through these assessments, a leader may learn that they could be more assertive. Or perhaps their stress tolerance is higher than the team they supervise. If that's the case, “these leaders might be able take on and do more, but the people who work with them won't be able to handle the volume,” said Tassani.

The goal is to refine the leader’s style to work more productively with the personalities of the people they are leading.

Even more importantly, individuals and administrative leaders can share their profiles with each other to learn how to work better together, Dr. Myers said.

**Right way to have hard talks**

The program also helped internist Ashish Patel, MD, meet face to face with a physician who was being disruptive.

“We had gone through a recent acquisition of a practice,” said Dr. Patel, medical director for Baptist Health Medical Group’s primary care practices in Lexington, Richmond and Corbin and surrounding areas. One of the physicians in the acquired practice had been reluctant to join the health system.

While the transition from independent practice to being part of a larger health system can be challenging, the physician responded in an unproductive way. For months, the employee consistently made snide remarks, writing long, passive-aggressive emails, and was disruptive with managers.
Things were not going well. Dr. Patel knew that he had to balance diplomacy with firmness to deescalate the situation.

He asked the employee if Baptist Health was the right fit for him.

“We've given you all kinds of support and help, and you have rebuffed those offers. We are at a fork in the road. Either you are with us, or you will have to think about doing something else,” Dr. Patel said to the employee in a one-on-one meeting intended to show respect.

That combination of respect for the physician and the display of forcefulness paid off. The employee apologized for the unprofessional behavior and has discontinued it.

Coaching helped Dr. Patel achieve this successful outcome, he said. “It energizes me as a physician leader and helps me come up with ideas and goals to better serve my team and improve patient care.”

The program has assisted other physician leaders at Baptist Health to excel in such demanding situations.

So far, 45 people at Baptist Health Medical Group have completed the training. This isn't a one-time commitment. Leaders "stay in the training," which spreads out from a monthly to a quarterly commitment over time, said Dr. Myers.

Boosting physician leadership

Dr. Myers’ desire to build a coaching program came from years of watching physicians struggle in leadership roles at other health systems. They had a lot of questions about how to manage staff and work with hospital administration. But they never received training in these skills.

“That’s why, when I came to Baptist Health, I thought it was so important that we get the leadership training. I knew this was a big lift to make this medical group successful. I needed physician leaders to be in place to help me, and I wanted to give them all the assets and foundation to be successful in their role.”

In his quest to build a strong physician leadership team, Dr. Myers drew from his learnings of a similar program he participated in years before.

He came away with a better understanding of himself and how to work with others to drive results. “I learned the pros and cons of my personality type, how to be a better listener, when to excel or pull back to meet personal and business expectations and to achieve a work-life balance which added to my success.”
He wanted these same things for the Baptist Health Medical Group physician leaders and executive team.

The program helps physicians in clinical practice who face challenges adapting to the culture of the medical group, or working with their peers and others, said Dr. Myers. Since its inception, the program has broadened to include Baptist Health Medical Group senior executives, vice presidents of operations and several directors.

In another component of the program, group meetings help Baptist Health Medical Group departments such as finance, operations and recruitment, and their administrative assistants understand themselves and work better together as a team. Dr. Myers hopes to expand the program to practice managers.

“They are the nucleus to our medical group, working with the physicians, the nurse practitioners, the staff running the practice,” he said. “There’s a lot of day-to-day activity and interaction. Getting that same understanding, learning and education with that group is only going to benefit us.”

**Working in teams**

Tassani’s coaches use the results from the assessments to craft a leadership-development strategy for each participant.

Working with teams, participants observe how their leadership style plays out when they interact with others, and how they can modify their style to achieve the most effective relationships and productivity. This is also about retention: keeping people happy in their jobs, said Tassani.

The teamwork exercises incorporate The Five Behaviors®: trust, engaging in productive conflict, committing to one another, holding each other accountable, and achieving results. (The Strategy Forums is an independent Everything DiSC® and The Five Behaviors Authorized Partner.)

This is to get people to trust one another and resolve conflict, said Tassani. Most importantly, it’s about sharing and exchanging perspectives among peers.

In one-on-one coaching sessions, participants can discuss any conflicts they’re grappling with, and how to maneuver the office setting. An individual may learn that their impulse control is high, and they might not share what they’re thinking.

“We coach them to reduce their impulse control and be more assertive, so they speak up when they need to,” said Tassani.


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Assessment captures “inherent wiring”

The assessments didn’t reveal anything surprising about Dr. Patel’s personality. But they did deepen his self-understanding.

He learned that he was a direct person who had an impulsive side and didn’t always show patience to deal with ongoing problems. He ended up retesting after a few years—and saw that the coaching strategies he practiced led to some improvements.

DiSC reveals your “inherent wiring,” said Dr. Patel. You learn that you can leverage and attenuate your leadership style to better engage with other leaders within your organization, he said.

He would talk with Tassani, who became an honest friend and coach to him. “She’s giving you feedback on your emotions and how you want to react to a certain situation,” he said.

Through coaching, he learned that he shouldn’t be so quick to make judgments about situations. That translates to this, in practice: Do less talking, hear people out and wait to say something.

“You don’t have to decide right there. You could do it a week later, sleep over it, take your time,” he said.

He also learned how to express thoughts in a clear, direct manner without offending someone.

For Blair Tolar, MD, medical director for Baptist Health Medical Group in Paducah, Kentucky, the training shed light on how other physician leaders behave and perform—what gets them out of bed in the morning, what leadership traits they have, and how he could more effectively work with people with different leadership styles.

“For me, the big takeaway was patience and learning how to listen better—not just take in what the feedback is from other people, but also try to understand it from that viewpoint,” said Dr. Tolar, an ob-gyn.

“Don’t take my coach away”

Seeing Baptist Health physicians grow in their administrative roles, deal with challenges and work more productively with other physicians and administrators have been key wins for the coaching program, said Dr. Myers.


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In yearly surveys that measure the value of the program, physicians will talk about how it has improved their problem-solving and communication skills and administrative capabilities. Many physicians will say, “Don’t take my coach away,” said Dr. Myers.

Looking ahead, Dr. Myers would like to bring back more face-to-face group meetings to the coaching program. “There’s a lot of value to having the in-person interaction and conversation,” he said.

The quarterly face-to-face meetings held before COVID-19 and Zoom were much more impactful, he said. Physician leaders would discuss specific topics, work through challenges, and set goals. An important component of these discussions was the “Big Rock,” a primary goal someone wanted to accomplish during the year.

Dr. Patel has seen physician engagement improve. A recent survey measuring employee satisfaction and engagement placed Baptist Health physician practices in his region in the top 10th percentile of similar systems on these metrics.

Coaching also helped him achieve a longtime goal of adding Saturday hours at four of his clinics, extending patient access while working productively with other leaders and staff to secure buy-in.

There’s no doubt the program has improved physician morale, Dr. Chipman said. “It’s allowed us to understand how the other regions are working better, and helps you have insight into other people.”

It’s also been helpful in resolving difficulties with specific practices in the health system, she added. Some of these practices were going down a bad road, “and we began efforts to make things work better,” she said. This involved listening to staff, hearing out their views, helping with operations, “and understanding that people aren’t at their best if they’re not given support they need,” she said.

Dr. Tolar continues to seek advice from Tassani on difficult issues he’s struggling with.

The tough situations never get any easier, he said.

“You’ve got a disruptive physician or you’ve got a physician who’s falling behind on work. They’re still colleagues and they’re still friends,” Dr. Tolar said. “But I still need to hold people accountable to the work that they’re hired to do.”

And that also means making it clear that no one is justified in treating people poorly or engaging in other disruptive behaviors.

Know the people you lead—as people
To build morale, Dr. Tolar applies his learnings from the coaching program to connect with staff and build relationships during meetings. He and his staff take a few moments at the beginning of meetings to talk about their day, or other topics that aren’t on the official agenda. “This is an effort to get to know each other,” he said.

In the spirit of the late, great TV and radio legend Larry King, he also asks one of the meeting participants to answer a question on the fly. There are two rules: the person always knows they’re going to be chosen in advance and can refuse to answer the question without any consequences. “The second thing is they can’t know the question going into it because that would kind of defeat the purpose.”

For example, he asked one person, “What’s the greatest piece of advice you’ve ever been given?” The answers to that and similar questions have helped build camaraderie and strengthened the team’s understanding of each as physicians, health professionals and staff.

“Whether it’s coaching, whether it’s formal leadership training—those are the types of things,” Dr. Tolar said, “that I did not get in college or medical school.”