



## Leadership in Health Services

Developing a Physician Management & Leadership Program (PMLP) in  
Newfoundland and Labrador  
Victor Maddalena Lisa Fleet

### Article information:

To cite this document:

Victor Maddalena Lisa Fleet , (2015), "Developing a Physician Management & Leadership Program (PMLP) in Newfoundland and Labrador", Leadership in Health Services, Vol. 28 Iss 1 pp. 35 - 42

Permanent link to this document:

<http://dx.doi.org/10.1108/LHS-02-2014-0012>

Downloaded on: 11 November 2016, At: 02:45 (PT)

References: this document contains references to 6 other documents.

To copy this document: [permissions@emeraldinsight.com](mailto:permissions@emeraldinsight.com)

The fulltext of this document has been downloaded 148 times since 2015\*

### Users who downloaded this article also downloaded:

(2015), "The Medical Motorway: improving the quality of care in the context of an ageing population", Leadership in Health Services, Vol. 28 Iss 1 pp. 5-7 <http://dx.doi.org/10.1108/LHS-06-2014-0049>

(2015), "Implementing a nationwide quality improvement approach in health services: The Moroccan "Quality Contest" experience", Leadership in Health Services, Vol. 28 Iss 1 pp. 24-34 <http://dx.doi.org/10.1108/LHS-04-2014-0042>

Access to this document was granted through an Emerald subscription provided by emerald-srm:563821 []

### For Authors

If you would like to write for this, or any other Emerald publication, then please use our Emerald for Authors service information about how to choose which publication to write for and submission guidelines are available for all. Please visit [www.emeraldinsight.com/authors](http://www.emeraldinsight.com/authors) for more information.

### About Emerald [www.emeraldinsight.com](http://www.emeraldinsight.com)

Emerald is a global publisher linking research and practice to the benefit of society. The company manages a portfolio of more than 290 journals and over 2,350 books and book series volumes, as well as providing an extensive range of online products and additional customer resources and services.

Emerald is both COUNTER 4 and TRANSFER compliant. The organization is a partner of the Committee on Publication Ethics (COPE) and also works with Portico and the LOCKSS initiative for digital archive preservation.

\*Related content and download information correct at time of download.

# Developing a Physician Management & Leadership Program (PMLP) in Newfoundland and Labrador

PMLP in  
Newfoundland  
and Labrador

35

Victor Maddalena

*Faculty of Medicine, Memorial University, St John's, Canada, and*

Lisa Fleet

*Professional Development and Conferencing Services,  
Memorial University, St John's, Canada*

Received 28 February 2014

Revised 28 February 2014

Accepted 1 September 2014

## Abstract

**Purpose** – This article aims to document the process the province of Newfoundland and Labrador used to develop an innovative Physician Management and Leadership Program (PMLP). The PMLP is a collaborative initiative among Memorial University (Faculty of Medicine and Faculty of Business), the Government of Newfoundland and Labrador, and the Regional Health Authorities. As challenges facing health-care systems become more complex there is a growing need for management and leadership training for physicians.

**Design/methodology/approach** – Memorial University Faculty of Medicine and the Gardiner Centre in the Faculty of Business in partnership with Regional Health Authorities and the Government of Newfoundland and Labrador identified the need for a leadership and management education program for physician leaders. A provincial needs assessment of physician leaders was conducted to identify educational needs to fill this identified gap. A Steering Committee was formed to guide the design and implementation and monitor delivery of the 10 module Physician Management and Leadership Program (PMLP).

**Findings** – Designing management and leadership education programs to serve physicians who practice in a large, predominately rural geographic area can be challenging and requires efficient use of available resources and technology.

**Originality/value** – While there are many physician management and leadership programs available in Canada and abroad, the PMLP was designed to meet the specific educational needs of physician leaders in Newfoundland and Labrador.

**Keywords** Leadership, Management, Education

**Paper type** Case study

## Introduction

It is widely recognized that physicians play an important leadership role in the health-care system. There is a need for more physician involvement in administrative

The PMLP was developed collaboratively by the Faculty of Medicine (Professional Development & Conferencing Services) and the Faculty of Business Administration (Gardiner Centre), Memorial University, St. John's Newfoundland and Labrador. Funding for the PMLP was provided by: Department of Health and Community Services, Government of Newfoundland and Labrador and the four Regional Health Authorities.



Leadership in Health Services

Vol. 28 No. 1, 2015

pp. 35-42

© Emerald Group Publishing Limited

1751-1879

DOI 10.1108/LHS-02-2014-0012

decision-making, management and leadership in health organizations. However, many would acknowledge that physicians often lack the appropriate management and leadership skills to enable them to fulfill these administrative responsibilities (Collins-Nakai, 2006; Satiani *et al.*, 2014). Specific management and leadership training in undergraduate medical education curricula is often limited and many physicians who aspire to leadership roles (or who find themselves asked to take on a leadership role) in health organizations have to seek additional management and leadership training after their formal undergraduate and post-graduate training.

The *CanMEDS Physician Competency Framework (2005)* describes the knowledge and skills that all physicians should possess upon entering medical practice. The CanMEDS Framework identifies seven principal roles: Medical Expert, Communicator, Collaborator, Manager, Health Advocate, Scholar, And Professional. It is expected that medical education programs prepare physicians in those roles. While Medical Expert tends to dominate the undergraduate curriculum, of particular interest to our new program development is fostering the role of Manager. *CanMEDs (2005)* defines the “Manager” role in the following manner:

As Managers, physicians are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system. Physicians are able to: (a) Participate in activities that contribute to the effectiveness of their healthcare organizations and systems; (b) Manage their practice and career effectively; (c) Allocate finite healthcare resources appropriately; (d) Serve in administration and leadership roles, as appropriate.

As the issues facing health-care organizations become more challenging and complex, it is imperative for physicians to learn the requisite management skills to be effective in their role. Other roles such as Communicator, Professional, Health Advocate, Scholar and Collaborator and associated skills are also key for effective physician managers. To meet this growing need, there has been a recent proliferation in programs devoted to training physician leaders and managers. Programs vary in length, depth of content and cost. Programs also vary in their modes of delivery, i.e. online versus in-class session or a combination of both. The following is a description of how the province of Newfoundland and Labrador (NL) developed and delivered a Physician Management and Leadership Program (PMLP) to meet the needs of its physician leaders.

As background, NL is the most eastern province in Canada. In 2013, the population was 526,702 (Statistics Canada) with almost 40 per cent of the population (200,550) living in St. John’s, the capital city. The area known as Labrador is sparsely populated (24,141) and covers a large northern and remote geographical area. The cost of accessing educational programs for physicians, especially those in rural and northern areas, is thus an ongoing challenge. There are physician leadership programs available elsewhere in Canada; however, the cost of travel and the cost of the tuition created circumstances where it was worthwhile to explore a “home grown solution”. Also, creating the PMLP at Memorial University allowed the program to be tailored to meet the unique needs of physician leaders in NL.

#### *Provincial needs assessment*

In 2009, in response to a perceived need to provide medical administrators and medical educators with management and leadership training, discussions were held with the Faculty of Medicine, the Gardiner Centre, the Eastern Regional Health Authority and the

Government of NL to explore the feasibility and need for advanced management and leadership training for physicians. Between January and April 2011, a Provincial Needs Assessment was conducted to gauge interest, seek input on learning needs and provide guidance for program development. The Needs Assessment was conducted by Professional Development & Conferencing Services (PDCS), Faculty of Medicine, Memorial University.

The Needs Assessment consisted of key stakeholder interviews with current physician leaders ( $N = 5$ ), followed by an online survey distributed to physicians, other health professionals, university and regional health authority staff and students. Survey respondents ( $N = 423$ ) included physicians ( $N = 215$ ) of whom many were current managers and leaders ( $N = 104$ ) and  $N = 60$  were interested in becoming managers and leaders. Non-physician respondents ( $N = 208$ ) included staff, other health professionals and medical students.

Key interview informants and survey respondents identified several characteristics physician managers/leaders should possess, including the ability to communicate effectively with staff, patients and the public/media; listening to the view of others and the ability to deal with conflict. Respondents also cited the importance of physician leaders being knowledgeable of the health-care system in which they practice, as well as possessing an understanding of a variety of management principles and practices. Recommendations from the needs assessment identified potential program topic areas, as well as preferred program delivery format, structure, duration and other program features. Based on the data collected, it was recommended that the proposed program include topics such as: aspects of communication skills training, principles of quality improvement including patient safety, strategic planning, program planning and evaluation, team building and related skills and time management tools and resources. The findings from the needs assessment also suggested that the program should be delivered utilizing a blended approach, combining face-to-face workshops with distance learning modalities. The conclusion from the needs assessment was clear: there was both a need and an interest in developing a PMLP for NL.

### *The program*

A Steering Committee was established to oversee program development and administration of the PMLP. The Steering Committee is composed of partners representing Memorial University (Faculty of Medicine, PDCS and the Gardiner Centre in the Faculty of Business), the Department of Health and Community Services, and Eastern Health (representing the Regional Health Authorities). During the planning stages, it was decided that the overall objective of the PMLP would be to provide current or aspiring physician leaders with an introduction to the kinds of skills they will need to function within the health-care administrative environment. The plan was for PMLP to consist of ten modules, and it was acknowledged that in a ten-module program, it would not be possible to provide participants with in-depth content. The goal was, therefore, to provide basic knowledge and skills and raise awareness of the processes involved in organizational administration. For example, one of the modules focuses on media training and communication. It is 4 hours in duration and covers the basics of media training. However, more importantly, it also helps to inform physician leaders that within the administration of a large health organization, there is a Public Relations Department that is responsible for management of media and communications-related issues. While it is important for physician leaders to know how to prepare for media

interviews and to prepare information for the media, it is equally important for physician leaders to know how they fit into the broader organization processes and how they are expected to participate in media-related issues.

Subject matter experts were engaged to develop module content which addressed identified educational needs and presented information from the health authority and provincial perspectives. Keynote speakers and distinguished faculty from academia and health practice are often invited to participate. All content was reviewed as per the provincial accreditation requirements of the Royal College of Physicians and Surgeons of Canada (RCPSC) and the College of Family Physicians of Canada (CFPC). Simultaneously, a cohort of 37 participants was recruited from the Regional Health Authority (RHAs) and the Faculty of Medicine, Memorial University, to participate in the pilot delivery of the program in 2012–2013.

Of the PMLP's ten modules, three are delivered online (asynchronous) and seven are delivered in a classroom setting. In-class modules range in length from 4 to 7 hours (See [Table I](#) – PMLP Modules). To accommodate schedules and to facilitate

Course	Overview
A Self-Discovery Approach to Leadership (7 hours in-class)	Participants will learn, through self-assessment, about their work style and how it relates to problem solving, conflict resolution, decision-making and communicating
Strategic Planning (Online Asynchronous)	Participants will learn the fundamentals of organizational strategic planning and how these processes can guide health service planning and decision-making
Managing Competing Priorities (4 hours in-class)	Participants will learn techniques on how to shift from one priority to another in the face of dueling pressures of their administrative and clinical roles
Project & Change Management (7 hours in-class)	Participants will learn the fundamentals of project and change management, and apply them to real projects they are working on to help meet deadlines and minimize conflict
Organizational Structures (Online asynchronous)	Participants will gain an understanding of the legislative and organizational structures and regulatory processes of the provincial health care system, including governance of regional health authorities
Evaluation Methods (On-line asynchronous)	Participants will learn about evaluation methods that can be applied to existing programs and services in health care
Public Relations & Communications (4 hours in-class)	Participants will understand their role as a spokesperson for the health board, learn what to say and not to say to media, and understand the impact of social media in public relations
Patient Safety (7 hours in-class)	Participants will learn about their role in promoting patient safety, reducing medical error and fostering an organizational culture of quality patient care
Recruiting & Performance Development (4 hours in class)	Participants will learn the do's and don'ts of these formal HR processes in order to attract, hire, develop, and keep the best talent
Leading vs. Managing (7 hours in-class)	Participants will learn the difference between management and leadership, gain awareness of their own leadership style, and understand its importance in effective teambuilding and working with a multigenerational workforce

**Table I.**  
PMLP modules

travel, the in-class sessions are also typically offered on a Friday afternoon (4-hour session) and a Saturday (7-hour session). The PMLP is fully supported by a secure Web portal ([www.physicianleadership.ca](http://www.physicianleadership.ca)) that provides participants with access to all program and module information, as well as access to the online modules and the discussion forums. The PMLP also includes in-depth pre- and post-module assessments and leadership and team and individual problem-solving activities. The modules are based on an adult learning model using problem-based, interactive format using cases and role-playing exercises. The PMLP also offers practical take-home resources and activities to support ongoing access to leadership tools and developments.

## Module features

### *Pre-training*

Each learning module begins with a pre-training section (online) in the form of a pre-test that enables the participant to assess their knowledge and confidence in the specific topic area prior to participating in a module. Knowledge items are multiple choice questions; confidence items are measured using a Likert scale ranging from 1 = strongly disagree to 5 = strongly agree.

### *Module content*

This include the content of each module (required readings, pre-module assignments, PowerPoint presentations, etc.) and a discussion forum for the online modules to help create a community of learners to encourage sharing of experience and information and to interact with their peers and reflect on issues of management and leadership.

### *Post-training (online)*

Module participants are required to complete a post-test that enables them to assess their knowledge and confidence in the specific topic area. The post-test includes the same questions that were presented on the pre-test to enable pre/post-comparison of knowledge and confidence. Completion of the post-test is required to receive educational credit for the module.

### *Evaluation survey*

Participants are asked to complete an evaluation survey following completion of each learning module. The survey includes a combination of closed and open-ended questions related to module content, navigation if online, and overall impressions. Closed questions based on a Likert scale of 1 = strongly disagree to 5 = strongly agree.

### *Applied learning report*

The purpose of the Applied Learning Report is for participants to reflect on the program after completing the ten modules and to consider how they applied the knowledge and skills gained in the workplace. Some of the questions participants are asked to consider included: *What have you learned in this module? How have you applied what you have learned to your work and/or how do you plan to apply what you have learned? Have you experienced any barriers/challenges in trying to apply the learning and if so please*



*explain*. Participants can use the “My Journal” feature of the PMLP Web site to document their thoughts for this activity.

Completion of the ten modules and the Applied Learning Report are required to receive the PMLP Program Certificate.

### **Program evaluation**

The PMLP has been offered in 2012 and 2013 and is open to physicians and non-physicians across NL. There were  $N = 37$  participants recruited to participate in the 2012-2013 PMLP Pilot ( $N = 35$  physicians;  $N = 2$  non-physicians). There were  $N = 34$  participants recruited to participate in the 2013-2014 PMLP ( $N = 33$  physicians;  $N = 1$  non-physician). A research and evaluation framework was designed utilizing a logic model approach to identify activities, outputs, immediate and long-term post-program outcomes. This framework guided the collection and analysis of data for the 2012-2013 pilot program and is guiding the collection and analysis of data for the 2013-2014 program. The long-term post-program evaluation took the form of a modified multi-source or 360 degree feedback that involved the collection of self-report data from program participants, as well as data from stakeholders and peers/staff regarding impact of the program on participants' leadership skills and performance.

In 2012-2013, each of the ten PMLP modules was evaluated in terms of pre-to-post-increases in knowledge and confidence and participant satisfaction. Paired-samples *t*-test analyses demonstrated significant pre-/post-increases in knowledge and confidence at the  $p < 0.05$  probability level. Module satisfaction data indicates overall participant satisfaction for relevance of the modules. For example, 91.7 per cent of respondents reported that the modules addressed their learning needs; 93.4 per cent reported that the modules were relevant to their current positions. In 2013-2014, evaluation of the ten PMLP modules and program continued as per the process followed for the pilot program. Four modules were delivered as of January 2014. Paired-samples *t*-test analyses have continued to demonstrate significant pre-/post-increases in knowledge and confidence at the  $p < 0.05$  probability level. Respondents have reported planned changes in the workplace as a result of program participation.

In October/November 2013, the post-program long-term outcomes evaluation was conducted with participants of the 2012-2013 PMLP pilot six months after their participation to determine how the program influenced their practices, knowledge and skills learned/applied. The majority of participant survey respondents (95.07 per cent) reported feeling more prepared for their leadership responsibilities as a result of their participation in PMLP. Ninety-five per cent also agreed that it enhanced their interest in a leadership position. Several participants reported that the opportunity to network and collaborate with other physician leaders and managers was one of the most valuable aspects of PMLP. Several participants indicated that they had, in fact, participated with colleagues whom they work with on a regular basis and reported that this level of team involvement added to the experience as they could directly collaborate on projects during the program, and could see how/why they can collaborate in future. The data collected from participants via the applied learning reports and online survey demonstrates application of the knowledge/skills obtained from PMLP in the workplace. In general, participant respondents reported: more effective communication

with staff/managers/peers, creation/enhancement of a team environment, development of new policies and procedures, more effective conflict resolution, altered approaches to various projects, personnel, and workplace issues and increased awareness of potentially valuable partnerships.

Stakeholders who responded to the online survey and participated in a focus group also reported observing changes in how physician/organizational leaders applied information and skills learned from PMLP in the workplace. They report observing increased application of skills in areas such as conflict resolution, problem-solving (i.e. ability to solve more issues themselves) and quality care initiatives. They also report observing a broader understanding of the administrative system at the RHA level. The post-program long-term outcomes evaluation process will continue for the 2013-2014 cohort in fall 2014 as part of PMLP's ongoing quality improvement initiatives to provide feedback on the program's effectiveness and provide ideas for future development.

The PMLP program and outcomes evaluation were approved by the provincial Health Research Ethics Authority. The PMLP is also fully accredited by the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada.

### Current and future development

In 2013 the Faculty of Medicine at Memorial University began a process of curriculum renewal for the undergraduate medical education program. As part of this process, and in recognition of the need to enhance leadership training for physicians entering practice, the Faculty of Medicine has incorporated the PMLP into the undergraduate medical curriculum. The 10 modules were modified for an undergraduate student audience and incorporated into the schedule of the four phases of the new curriculum. Students graduating from the Faculty of Medicine undergraduate program will now receive an MD and a Certificate in Physician Management and Leadership.

Identifying and providing continuing education for physician leaders is an ongoing concern for the PMLP Steering Committee. To meet this need, the Steering Committee recently conducted a needs assessment to determine ongoing educational needs and is exploring a variety of options for advancing the continuing education of physician leaders in the province. As the PMLP matures, the Steering Committee is also exploring options for offering the PMLP to other jurisdictions in Canada and abroad.

### References

- Collins-Nakai, R. (2006), "Leadership in medicine", *McGill Journal of Medicine*, Vol. 9 No. 1, pp. 68-73, available at: [www.ncbi.nlm.nih.gov/pmc/articles/PMC2687901/pdf/mjm9\\_1p68.pdf](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2687901/pdf/mjm9_1p68.pdf)
- Royal College of Physicians and Surgeons of Canada (2005), *The CanMEDS 2005 Physician Competency Framework*, available at: [www.royalcollege.ca/portal/page/portal/rc/canmeds/framework](http://www.royalcollege.ca/portal/page/portal/rc/canmeds/framework)
- Satiani, B., Sena, J., Ruberg, R. and Ellison, E.C. (2014), "Talent management and physician leadership training is essential for preparing tomorrow's physician leaders", *Journal of Vascular Surgery*, Vol. 59 No. 2, pp. 543-546.



**Further reading**

College of Physicians and Surgeons of Canada (2009), *CanMEDS – Family Medicine*, Working Group on Curriculum Review, available at: [www.cfpc.ca/uploadedFiles/Education/CanMeds%20FM%20Eng.pdf](http://www.cfpc.ca/uploadedFiles/Education/CanMeds%20FM%20Eng.pdf)

Statistics Canada (2014a), *Population Estimates 2013 by Province*, available at: [www.stats.gov.nl.ca/statistics/population/PDF/Annual\\_Pop\\_Prov.PDF](http://www.stats.gov.nl.ca/statistics/population/PDF/Annual_Pop_Prov.PDF)

Statistics Canada (2014b), *Census Metropolitan Area – St. John’s NL 2013*, available at: [www.stats.gov.nl.ca/statistics/population/PDF/Population\\_Estimates\\_CDCMA.pdf](http://www.stats.gov.nl.ca/statistics/population/PDF/Population_Estimates_CDCMA.pdf)

**Corresponding author**

Victor Maddalena can be contacted at: [victorm@mun.ca](mailto:victorm@mun.ca)

---

For instructions on how to order reprints of this article, please visit our website:

[www.emeraldgroupublishing.com/licensing/reprints.htm](http://www.emeraldgroupublishing.com/licensing/reprints.htm)

Or contact us for further details: [permissions@emeraldinsight.com](mailto:permissions@emeraldinsight.com)

**This article has been cited by:**

1. MaddalenaVictor Victor Maddalena Faculty of Medicine, Memorial University of Newfoundland, St. John's, Newfoundland and Labrador, Canada . 2016. Leadership training for undergraduate medical students. *Leadership in Health Services* **29**:3, 348-351. [[Abstract](#)] [[Full Text](#)] [[PDF](#)]