SECOND EDITION

LEADERSHIP
FOR HEALTH PROFESSIONALS
Theory, Skills, and Applications

Gerald (Jerry) R. Ledlow, PhD, MHA, FACHE
Professor
Jiann-Ping Hsu College of Public Health
Georgia Southern University
Statesboro, Georgia

M. Nicholas Coppola, PhD, MHA, FACHE
Program Director and Associate Professor
School of Allied Health Sciences
Texas Tech University Health Sciences Center
Lubbock, Texas

JONES & BARTLETT
LEARNING

World Headquarters
Jones & Bartlett Learning
5 Wall Street
Burlington, MA 01803
978-443-5000
info@jblearning.com
www.jblearning.com

Jones & Bartlett Learning books and products are available through most bookstores and online booksellers. To contact Jones & Bartlett Learning directly, call 800-832-0034, fax 978-443-8000, or visit our website, www.jblearning.com.

Substantial discounts on bulk quantities of Jones & Bartlett Learning publications are available to corporations, professional associations, and other qualified organizations. For details and specific discount information, contact the special sales department at Jones & Bartlett Learning via the above contact information or send an email to specialsales@jblearning.com.

Copyright © 2014 by Jones & Bartlett Learning, LLC, an Ascend Learning Company

All rights reserved. No part of the material protected by this copyright may be reproduced or utilized in any form, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without written permission from the copyright owner.

The content, statements, views, and opinions herein are the sole expression of the respective authors and not that of Jones & Bartlett Learning, LLC. Reference herein to any specific commercial product, process, or service by trade name, trademark, manufacturer, or otherwise does not constitute or imply its endorsement or recommendation by Jones & Bartlett Learning, LLC and such reference shall not be used for advertising or product endorsement purposes. All trademarks displayed are the trademarks of the parties noted herein. *Leadership for Health Professionals: Theory, Skills, and Applications, Second Edition* is an independent publication and has not been authorized, sponsored, or otherwise approved by the owners of the trademarks or service marks referenced in this product.

There may be images in this book that feature models; these models do not necessarily endorse, represent, or participate in the activities represented in the images. Any screenshots in this product are for educational and instructive purposes only. Any individuals and scenarios featured in the case studies throughout this product may be real or fictitious, but are used for instructional purposes only.

Production Credits
Publisher: William Brottmiller
Senior Acquisitions Editor: Katey Birtcher
Editorial Assistant: Sean Fabery
Associate Director of Production: Julie Champagne Bolduc
Production Assistant: Stephanie Rineman
Marketing Manager: Grace Richards
VP, Manufacturing and Inventory Control: Therese Connell
Composition: diacriTech
Cover Design: Michael O'Donnell
Cover and Front Matter Image: © MitarArt/ShutterStock, Inc.
Printing and Binding: Edwards Brothers Malloy
Cover Printing: Edwards Brothers Malloy

To order this product, use ISBN: 978-1-284-02688-7

Library of Congress Cataloging-in-Publication Data
Ledlow, Gerald R.
Leadership for health professionals: theory, skills, and applications / by Gerald R. Ledlow and M. Nicholas Coppola. — 2nd ed.
p.; cm.
Includes bibliographical references and index.
ISBN 978-1-4496-9132-5 -- ISBN 1-4496-9132-3
I. Coppola, M. Nicholas. II. Title.
[DNLM: 1. Leadership. 2. Professional Competence. 3. Administrative Personnel. 4. Health Personnel—organization & administration. 5. Health Services Administration. W 21]
362.1068--dc23
2013000626
6048

Printed in the United States of America
17 16 15 14 13 10 9 8 7 6 5 4 3 2 1

CONTENTS

New to the Second Edition ix
Foreword xi
Foreword from First Edition xiii
Preface xv
The Purpose of This Leadership Text xvii
In This Text xix
Acknowledgments xxi
Author Biographies xxiii
Contributors xxv

Part 1 Leadership Foundations 1

Chapter 1 Leadership Thought 3

Introduction 4
Why Study Leadership? 5
Introduction to Leadership in Academics and Practice 7
Leaders and Systems: Individual, Group, Organization, and Industry Success 17
Descriptive and Prescriptive Theories 17
The Study of Leadership: What's in It for Me? 17
Summary 18
Discussion Questions 18
Exercises 18
References 19

Chapter 2 Determining Your Own Leadership Style 23

Introduction 24
Know Thyself: What Kind of Leader Are You? 25
Leadership and Personality Assessments 27
The Relationship Between Personality Archetype and Leadership 33
Strategies to Maximize Your Nature Versus Nurture Leadership State of Being 33
Using What You Learn About Yourself 34
Summary 35

Discussion Questions 35
Exercises 36
References 36

Chapter 3 Understanding Leadership as a Theory 39

Why Study Theory? 40
What Is a Theory? 41
Overview of Theory 42
Theories, Models, Constructs, Variables, and Measurements 43
A Model of Health 50
Key Relationships: Leadership Models to Theories to Accepted Theories 50
Descriptive and Prescriptive Leadership Models Revisited: A Conceptual Model of a Leadership Theory on Motivation 51
Summary 54
Discussion Questions 54
Exercises 54
References 55

Chapter 4 Chronology of Leadership Study and Practice 57

Introduction 58
Great Man and Trait Leadership Phase 59
Behavioral Leadership Phase 63
Situational or Contingency Leadership Phase 66
Leadership as Managing Organizational Culture 80
Summary 81
Discussion Questions 85
Exercises 86
References 87

Part 2 Leadership in Practice 91

Chapter 5 Leadership Competence I: Professional Competencies, and Personal Skills and Responsibilities 93

Competencies in the Health Profession 94
Competency Assessment Tools 96
The Complex and Dynamic Health Environment 98
The Complex and Highly Educated World of the Health Workforce 98
Leadership Knowledge, Comprehension, Skills, and Abilities 100
Motivation and Inspiration 109
Power, Influence, and the Basis of Power 112
Forming Relationships, Networks, and Alliances 114
Communication and Culture 117
Summary 127
Discussion Questions 128
Exercises 128
References 129

Chapter 6 Leadership Competence II: Application of Skills, Tools, and Abilities 133

Planning 134
Situational Assessment and Environmental Scanning 137
Decision Making and Decision Alignment 138
Training 146
Continuing Health Education: Competency Attainment 149
Summary 151
Discussion Questions 151
Exercises 151
References 152

Chapter 7 Leadership Assessment and Research: Individual, Team, and Organization 155

Cycles of Leadership Development 156
The Crawl–Walk–Run Metaphor 157
The Crawl: Strategies for Managing Individuals 158
The Walk: Strategies for Managing Groups and Teams 161
The Run: Strategies for Leading Organizations 169
Effectiveness and Leadership Development 171
Summary 172
Discussion Questions 173
Exercises 173
References 173

Chapter 8 Leadership Models in Practice 175

The Omnibus Leadership Model 176
The Dynamic Culture Leadership Model 185
DCL and Organizational Culture 195
Bolman and Deal's Reframing Leadership and Management in Organizations Model 196
Lynn's Leadership Art and Science in Public Leadership and Management Model 200
Yukl's Multiple Linkage Model 200
Hargrove and Glidewell's Impossible Leadership Model 200
Analysis and Comparison of Four Models 201
Leadership Measurement Tools 202
Summary 203
Discussion Questions 205
Exercises 205
References 205

Part 3 Leadership in Health Organizations 209

Chapter 9 Leadership and the Complex Health Organization: Strategically Managing the Organizational Environment Before It Manages You 211

Mission, Vision, Values, Strategies, Goals, Objectives, and Action Steps 212
Understanding the Internal Environment 214
Understanding the External Environment 220
Organizational Culture 224
Challenges of Change 229
Strategic Relationships as a System for Leadership Concern 230
Summary 240

Discussion Questions 240
Exercises 241
References 241

Chapter 10 Ethics in Health Leadership 245

Introduction 246
What Is Ethics? 247
The Ethics of Policy Making and Treatment in the United States 252
Ethical Codes Adopted by the Health Industry 254
The Difference Between Medical Ethics, Clinical Ethics, and Bioethics 258
A Health Leader's Challenge: Where to Start? 259
Regulatory Compliance 260
Ethics of Promise Keeping and Leadership Bankruptcy 272
Summary 274
Discussion Questions 274
Exercises 274
References 275

Chapter 11 Measuring the Outcomes of Leadership Initiatives 279

Introduction 280
Early Efforts of the U.S. Health System in Measurement 280
Constructs, Variables, and Tools to Measure Health Leaders and Their Organizations 281
Tools to Measure Leadership Outcomes and Competencies 285
Models for Leadership Assessment and Evaluation 286
Baldrige National Quality Award 297
Summary 299
Discussion Questions 300
Exercises 300
References 301

Chapter 12 Understanding the Executive Roles of Health Leadership 305

Leadership for Physicians, Nurses, Administrators, and Medical Function Directors 306
Parity of Health Care 315
Summary 317
Discussion Questions 317
Exercises 318
References 318

Part 4 Leading People and Managing Resources into the Future 321

Chapter 13 Complexity, Speed, and Change: Leadership Challenges for the Next Decade 323

Cultural Differences in Leadership 324
GLOBE Leadership Study 325
Cultural Competence 327
Leveraging Technology 329
Leaders as Followers 330
Power, Influence, and the Basis of Power 330
Enduring Organizational Values and Beliefs 332

Knowledge Management and a Learning Organization 338
What Kind of Leader Do You Want to Be? 339
Maintaining Relevancy and Credibility 341
Development of Systems to Lead People and Manage Resources 344
Integrity 346
Relationship Building and Communication 346
Have Fun 347
Summary 347
Discussion Questions 348
Exercises 348
References 348

Chapter 14 Leadership: A Critical Factor for the Future Success of the Industry 353

Health Systems and Leadership 354
Healthcare Supply Chain 354
Overview of Revenue Management 362
Leading Evaluation of Systems 363
Meaning for Leaders 369
Summary 370
Discussion Questions 370
Exercises 370
References 370

Chapter 15 Leading Nonperforming Employees: Leadership Responsibility 373

Introduction 374
Strategies for Coaching, Mentoring, Peer Mentoring, and Educating Nonperformers 378
Recognizing That Employee Failure Can Be a Failure of Leadership 382
Options for Discipline 383
Disruptive Physician Behavior: Another Aspect of Nonperformance 386
Learning from Leaders Who Fail Us 388
Summary 390
Discussion Questions 390
Exercises 390
References 391

Chapter 16 Responsibilities of Mentorship and Succession Planning 393

History of Mentoring 394
The Differences Among Leading, Coaching, and Mentoring 395
Starting a Mentoring Program 398
Responsibilities of the Mentor and the Mentee 400
Succession Planning 402
Leadership Decisions for Your Leadership Model 403
Summary 406
Epilogue 407
Discussion Questions 407
Exercises 407
References 408

Appendix **Leadership in Practice: Cases and Insights** **411**

Introduction 411
Introducing the Health Leader: James H. Stephens, DHA, MHA, FACHE 411
Introducing the Health Leader: Donald M. Bradshaw, MD, MPH, FAAFP, FACHE, FACPE 415
Introducing the Health Leader: Michael Sack 419
Introducing the Health Leader: Susan Reisinger Smith, DHA, MSN, RN 423
Introducing the Health Leader: Crystal A. Riley, PharmD, RPh, MSHCA, CPHQ 427
Introducing the Health Leaders: Paul E. Detty, MD, MHA, and Phil Meadows, MBA 430
References 434

Index **435**

NEW TO THE SECOND EDITION

In addition to updating each chapter with relevant examples of executive leadership, this *Second Edition* addresses important issues with healthcare competencies as researched by the nation's leading professional organizations and associations in healthcare leadership and administration. All chapters also include additional emphasis on an "application to practice" framework based on evidentiary leadership outcomes. Material on leading partnerships, health information systems, supply chains, and successful governance of managerial finance and outsourcing are also introduced. Scholars and students alike will also enjoy reading contemporary material relating to new statutory and regulatory issues that health executives must navigate. Finally, new material regarding leadership transparency, leadership bankruptcy, and ethical responsibilities of leadership are presented.

Chapter 1

Chapter 1 includes new material on the following topics:

- Leadership integrity
- Benefits of studying leadership for professional and personal development
- Boundaryless leadership
- Leadership in academics in practice

Chapter 2

The discussion of leadership personality assessments in Chapter 2 has been revised, emphasizing application to practice. The following topics have also been added to this chapter:

- Social competence
- Leadership locus of control
- Planned behavior

Chapter 3

This chapter has been reorganized to present "theory" in a more practical manner, with the emphasis now placed on the need to use theory as a tool for building simple models for measurement. The Pain Rating Scale has been introduced as an example.

Chapter 4

This chapter has received high praise as an authoritative chronology of leadership. Two new theories have been added to this chronology: Bandura's Social Learning Theory and Ashkenas' proposed model of de-linearized leadership and boundarylessness.

Chapter 5

Chapter 5 introduces new material on leadership competencies and personal responsibilities in the health professions. Competency assessment tools discussed include those offered by the American College of Healthcare Executives, the Healthcare Leadership Alliance, the National Center for Healthcare Leadership, and the Association of University Programs in Health Administration. Tools for maintaining personal competence are addressed through forming relationships, networks, and alliances. Self-determination, reliance, and power are explored.

Chapter 6

Chapter 6 builds on new material in Chapter 5 to foster an application to practice framework in executive leadership development. The chapter now addresses the following:

- Strategic (calculated, premeditated, and deliberate) leadership
- Situational assessment

- Environment scanning
- Competency attainment through continuing health education

Chapters 7 and 8

Chapters 7 and 8 include new examples and citations to keep the chapters relevant and up to date.

Chapter 9

Chapter 9 now features the CAAVE (Competitive, Avoiding, Adaptive, Vested, and Empathetic) Model as a way of exploring leading systems, transactional leadership, and leadership through the application of strategic positioning. Leading partnerships, shared services, and leveraging outsourcing success are all explored through an evidentiary and outcomes-based approach that is both practical and easy for the early careerist to understand. New material relating to the following topics has been added for this edition:

- Distance learning
- Institutionalization
- Leadership economics

Chapter 10

New material relating to the following has been added to this chapter:

- Ethics of policy making and advocacy
- Cultural competency
- Biological and clinical ethics
- Codes of ethics
- Leadership transparency
- Leadership bankruptcy

In this chapter, the importance of statutory and regulatory compliance issues surrounding executive decision making are addressed through historical precedents and law. Cases associated with the False Claims Act, The Federal Medicare/Medicaid Anti-Kickback Statute, Stark Law, Health Insurance Portability and Accountability Act (HIPAA), and the Emergency Medical Treatment and Active Labor Act are new examples. Leadership decision making relating to end-of-life decisions, abortion, spiritual preferences, and euthanasia are addressed in a matter that fosters critical thinking in early careerists.

Chapters 11 and 12

Criteria from the Baldrige National Quality Award was added to Chapter 11 to help support a leader's need to measure outcomes in the health profession. New citations have been added to keep the chapters relevant and up-to-date.

Chapter 13

Chapter 13 incorporates many concepts from the previous edition's Chapter 14 in order to create a more cohesive learning experience. By asking the question "What kind of leader do you want to be?" this chapter offers new material that links application to practice. Leader creditability, legitimacy, and relevancy are explored through must-know, need-to-know, and want-to-know concepts. Obligations and opportunities for continuing education and lifelong learning are addressed.

Chapter 14

Roughly 80% of the material presented in Chapter 14 is new. The chapter now focuses on integrated delivery and financial systems that are wedded to ancillary areas of information systems, supply chains, operations management responsibilities, and materials/logistics management. Strategies for optimizing revenue streams, streamlining manufacturing, and maintaining efficient and effective financial performance metrics are profiled through portfolio analysis. Seminal issues surrounding the leadership of financial management, as well as coding and billing processes from the executive level, are defined through case analysis.

Chapter 15

New material on managing disruptive patient care providers is introduced in order to recognize the unique political and sensitive issues that surround this population of employees. This chapter now provides a framework suggested by the Joint Commission to assist in developing policy for documentation and action. Furthermore, the importance of employee rights and responsibilities is stressed when dealing with non-performing, incompetent, and/or unethical supervisors. The chapter also profiles leaders who are on the receiving end of cronyism, non-merit-based advancement, and payback promotions.

Chapter 16

Though largely unchanged from the first edition, Chapter 16 includes new material on a recommended mentoring philosophy for early careerists. The following emerging issues are also introduced:

- Distance learning
- Telementoring
- Mentoring from a distance

FOREWORD

Don't ever underestimate the impact you can have by becoming a better leader! The problem in health care is not that we don't have good leaders; it is that we don't have enough good leaders. We simply need more leaders at all levels for organizations to be successful. The question that must be asked is how do we motivate people to enhance their natural leadership abilities in order to become a better leader today?

The all-important necessity of becoming a better leader tomorrow than one is today is a challenge not enough leaders have mastered. Established and aspiring leaders need all the help they can get improving their leadership effectiveness. Drs. Ledlow and Coppola have written one of the preeminent books about leadership and leader development that anyone can use to enhance their leadership skills. *Leadership for Health Professionals: Theory, Skills, and Applications, Second Edition* is outstanding and relevant for many reasons. First, the authors not only are outstanding academics who are leaders in their field of study, but also have demonstrated a recent ability to lead at various levels within healthcare organizations. Second, we have too many leadership books written by academics for academe that are not grounded in the cold, hard trials and tribulations that all leaders struggle with on a daily basis. Most of these books are written about what leaders should do, with no clear correlation as to whether their theories or distant observations will actually work. Other books are written by leaders who were successful but who did not know why what they did worked. The true power of this edition of *Leadership for Health Professionals: Theory, Skills, and Applications* is that it combines theory with the practice of leadership to make it suitable for academic settings but also for practicing leaders. In addition, the case studies and examples of real-life scenarios frequently encountered in health care make this book extremely interesting while also educational, a combination that makes any book a must-read.

The challenge in writing a book about leadership is that leadership is in the eye of the beholder. The challenge of making any leadership book relevant to the reader's definition and idea of what a leader does is daunting. Most books are written from the perspective of the author, not from the perspective of the reader. This book is different in that it addresses a wide variety of leadership topics that all leaders, regardless of their primary style or leadership strength, will find valuable. It is focused on the reader's needs, not the author's needs. Even though the best way to learn how to lead is to actually do it, like driving a car or firing a pistol or rifle, preparatory classes can prove to be extremely valuable in hastening the learning curve. This is simply one of the best books any leader can read to quickly and efficiently enhance their leadership effectiveness.

For faculty and students, there is no more comprehensive book about leadership you can read in preparation for assuming your first real leadership job as a healthcare professional. Each leadership subject is covered in great detail with discussion questions and exercises at the end of each chapter, as well as cases in the Appendix. This combination of theory and practice makes this an outstanding text for leadership courses in all programs in health administration.

For aspiring leaders already in the workforce, this book can provide an introduction into new practices and theories that can be of use regardless of a leader's position or experience. This is the best book any leader who wants to enhance their effectiveness should use to accomplish this task.

Jody R. Rogers, PhD, FACHE
Visiting Professor
Trinity University
San Antonio, Texas

FOREWORD FROM FIRST EDITION

It is a privilege to write a foreword for this new book by Dr. Gerald Ledlow and Dr. Nicholas Coppola, for two reasons. First, the topic of leadership is something that has been central to my 20-plus years in academia, both in the books and articles I have written and in the courses I have taught. Second, I have known both Jerry and Nick for many years as trusted friends and respected colleagues. Both have excelled in their own careers within and outside of academia. They themselves are leaders who have become scholars of leadership theory and practice. Their book, *Leadership for Health Professionals: Theory, Skills, and Applications*, represents the culmination of many years of leadership engagement and scholarship in health organizations throughout the world and across all sectors of society, including public, private, and nonprofit agencies.

While reading an advance copy of this book, I was reminded of an interview I did as editor of the *Journal of Healthcare Management*. The interview was with Warren Bennis, noted as one of the top 10 leadership scholars and authors in history. In response to one of my questions about the essence of leadership, Dr. Bennis described the leader as "one who manifests direction, integrity, hardiness, and courage in a consistent pattern of behavior that inspires trust, motivation, and responsibility on the part of the followers who in turn become leaders themselves."[1] I have never seen a more succinct and comprehensive description of the leader. However, in the book you are about to read, you will indeed gain a comprehensive understanding of leadership that captures the deep and rich meaning I was able to hear firsthand in that interview.

Leadership for Health Professionals: Theory, Skills, and Applications addresses the full scope of leadership, with its many challenges and its special significance in healthcare environments. Furthermore, the book provides the breadth of knowledge and range of skills an individual needs to improve his or her own leadership abilities and effectiveness. As I have advocated in my own writings, leaders of today and tomorrow are compelled to adopt principles and practices that create sustainable organizations. In particular, there must be a focus on the co-equal and vital mandates of financial viability, social responsiveness, and environmental responsibility.[2] The book you are about to read will provide you with a substantial and timely understanding of the art and science of leadership that will help you shape the world in meaningful and productive ways. Enjoy and learn.

James A. Johnson, PhD
Medical Social Scientist and Professor
Central Michigan University
Mount Pleasant, Michigan

References

1. Johnson, J. A. (1998). Interview with Warren Bennis. *Journal of Healthcare Management*, *43*(4), 293.
2. Johnson, J. A. (2009). *Health organizations: Theory, behavior, and development*. Sudbury, MA: Jones and Bartlett.

PREFACE

As the authors of this book, we want to thank you for purchasing and using this textbook for professional development, instruction, and education. We believe that the title of this book says it all: *Leadership for Health Professionals: Theory, Skills, and Applications*. Up to this point, there has not been a development-focused textbook, specific to health organizations and health professionals, that combines the classical knowledge of leadership theory in the literature with the time-honored best practices and outcomes associated with the skills and applications practiced by industry leaders. This is the second edition aimed at providing leadership-focused learning for health leaders. Until the publication of this book, students, educators, and professionals were placed in the position of having to buy two (or more) texts, or supplement their readings with multiple journal articles, to achieve the compilation of knowledge presented in these pages.

This textbook captures our collective hope of enabling and encouraging ever-improving leadership practice, continuous leadership development, and ultimately a more effective, efficient, and efficacious health industry. From our own practical experience, academic study, and facilitation of leadership instruction over the past 25 years, we fervently posit that great leadership practice is one of a few critical factors necessary to ensure quality healthcare delivery, good health status in our communities, and high levels of productivity in our society. As part of our ongoing effort to improve leadership practice, we developed this book and the associated materials for your use as a learning system.

The foundation of this health leadership learning system is informed by the following definition: ***Leadership*** is the *dynamic* and *active* creation and maintenance of an organizational *culture* and *strategic systems* that focus the collective energy of both *leading people and managing resources* toward *meeting the needs of the external environment* utilizing the most efficient, effective, and, most importantly, efficacious methods possible by moral means. As a system, the text is based on the hierarchical learning stages of Bloom's Taxonomy of the Cognitive Domain. It takes advantage of our experiences in facilitating leadership instruction to graduate students from all walks of life and with varying levels of practical health experience for more than a decade. Put simply, the material, concepts, theories, models, applications, and skills integrated within this system greatly facilitate learning. A graduate student, reviewing this work from a student's perspective, wrote the following:

> As a student, I have learned that the material taught in a course is often not as valuable as the way in which it is taught. Drs. Ledlow and Coppola have succeeded in integrating the content of leadership practice with learning how to lead in their text, *Leadership for Health Professionals: Theory, Skills, and Applications.* Students will be eager, as was I, to learn the methods employed within this rich text. The health industry is a dynamic and engaging environment where the only constant is change. This text allows the student to become engaged in the material and extrapolate the roles, obligations, and responsibilities of leaders and managers. Drs. Ledlow and Coppola have spent years instructing health leaders and have simplified the exercise of learning into a concise, easy-to-follow format that can be straightforwardly adapted into today's ever-changing leadership environment. The reiteration of material sets a foundation, expands upon the context, and then places the information into a health context. This repetition makes it easy to learn and maximize what a student gains from a course. This text illustrates how to address continuity and stabilization in an environment ripe with change and uncertainty.

From a content perspective, themes of leadership principles, applications, and constructs such as organizational culture, cultural competency, ethical frameworks and moral practice, scientific methodology, leader competencies, external and internal assessment and evaluation, communication, planning, decision making, employee enhancement, and knowledge management are woven through the entire text and the supplemental materials. These themes are presented in multiple contexts throughout the book, and echoed in multiple chapters. To wit, the most important constructs and concepts are presented in an early chapter, further expanded and explored in a middle chapter, and then used in context in a later chapter. The reiteration of key leader systems, actions, and behaviors provides additional opportunities for learning within a leadership course. Many times, students have not been exposed much to the material presented in a leadership course, so multiple interactions with critical content material are both efficacious and pedagogically sound. In practice, students learn more with construct and content reiteration in a time-limited semester or term.

Collectively, the authors of this book have more than 50 years of professional leadership experience that spans the continuum of health care from ambulatory clinics, to large multisite and multidisciplinary health entities, to academia. In this text, we combine our practitioner knowledge and experience and our academic experience to elucidate the competencies and learning outcomes required for graduate programs. In combining both practitioner knowledge and industry best practices in graduate education, it is our desire that you will find the studying, learning, and/or instructing of health leadership more effective, efficient, and efficacious and will enjoy a competitive advantage in your own career. It is our expectation that through studying this text, your leadership will bring about a better health organization, community, industry, and society through your application of the theories, skills, and concepts presented in this textbook.

In closing, we believe strongly that learning is a lifelong process that requires continuous exposure to, thinking about, and reflection on new information that can be turned into knowledge that is "actionable" in your leadership practice. Although this book went through a rigorous peer review process, we actively encourage feedback on its content from students, educators, and professional executives in the field. If any part of this book requires additions or contains omissions, please contact us. We also encourage active contribution to this text for future editions. Should you or your colleagues desire to share for consideration any cases, models, exercises, or written text for inclusion in future editions, please do not hesitate to contact us with your ideas and suggestions. Thank you to all who have provided feedback to make this second edition more efficient, effective, and efficacious. As in the last edition we want your feedback, and your contributions may be included in future versions of this text.

Thank you for allowing us to take part in your leadership development and practice!

THE PURPOSE OF THIS LEADERSHIP TEXT

The purpose of this text is to provide you with a foundation not only for the study of leadership practice and theory, but also for the broader concept of leading people and health organizations across multiple and interconnected disciplines. A second goal is to bridge theory and the abstract concepts of leadership with the practical or concrete operational behaviors and action of leaders. This goal is integrated with the discussion of the popular evidence-based leadership of today. We meet these goals by utilizing a four-tier strategy that walks students, early careerists, and practicing health leaders through the foundations of leadership, leadership principles and practices, the complexity of leadership in health care, and finally into the world of leading people and managing resources into the future.

Although the discipline of leadership, with its myriad related topics, theories, and models, is rather large and extensive in the literature and knowledge base, the authors' perspective focuses on the most pertinent leadership content, theories, models, principles, and strategies that produce results in the health industry. The authors have put many of these theories and models into practice during the course of our successful practitioner careers. Of course, the health industry differs in many ways from other services and products industries: Many times efficacy is more important than efficiency, patient outcomes are more important than profits/margin, the "rational man" theory of economics is set aside when certain injuries or illnesses invade our families such that chaos or irrational economic decisions prevail, and society holds the health industry to an extremely high standard of perfection. Moreover, health organizations are extremely complex, run continuously, and are highly regulated and scrutinized. These realities create a distinctive leadership niche—that of the health leader. This text is intended specifically for the person filling that role.

This text combines both the scholarship of the academy of leadership and the practicalities involved in leading people and managing resources in the real world. With more than 50 years of combined experience leading people in complex organizations, the authors hope to impart that experience to the next generation of health leaders in a way that is both meaningful and useful to scholars and practicing health professionals.

People are led and resources are managed! This text has multiple objectives. It was created to provide you with an understanding of leadership principles; an ability to apply leadership principles through actions, behaviors, and processes in a dynamic world; a capacity to synthesize leadership theories and models to create a personalized leadership model; and the ability to evaluate leadership theories, models, principles, and ideas in a sound manner. Most importantly, the intent of this text is to develop an increasingly competent and confident cadre of leaders for the health industry so that complex health systems, population health status, and a multidisciplinary health workforce can be improved, enhanced, and strengthened to successfully overcome the significant challenges that society faces now and in the future. Six key trends in the health industry, identified in 2009, clearly highlight the need for quality, competent, and enthusiastic leadership:

1. Quality and performance reporting will shift from value-add to essential.
2. Asset rightsizing will provide new levers to fund strategic growth.
3. Departmental autonomy will fade as technology enables an enterprise view.
4. Care architecture will drive smarter facility design.
5. Effective leaders will be part policymaker, part entrepreneur.
6. Managing clinical staff will require new thinking and methods.[1]

To achieve success in the health industry, an organization must have focused and intelligent effort. Leaders are the catalysts for organizational, group, and individual greatness. This text seeks to make you a better leader who can lead a group or organization to accomplish great achievements; the ultimate goal is for you to have a fulfilling health career. The authors applaud your enthusiasm to become a better leader! Wolf offers simple yet pertinent insight into the application of leadership:

- Leaders lead by example; they do not ask people to do something they would not do themselves.
- Leaders perform consistent rounding (walking the floors and engaging employees in their own work environments) and also maintain an open door policy, making the administrative offices a welcoming place to all staff.
- Employee input is sought and encouraged, both individually and through employee groups, and is supported by a non-punitive environment.[2]

This text serves as your road map to start your leadership journey, a multidisciplinary journey. In essence, this text is a catalyst to begin or continue your leadership development.

REFERENCES

1. Vachon, M. (2009). Six trends for your next strategy session agenda. *GE Healthcare Performance Solutions* [booklet], p. 2.
2. Wolf, J. A. (2008). Health care, heal thyself! An exploration of what drives (and sustains) high performance in organizations today. *Performance Improvement, 47*(5), 38–45. doi:10.1002/pfi.210, p. 39.

IN THIS TEXT

This text is intended to build foundational leadership knowledge and bridge the gap between theory and practice to enhance the skills and abilities of the reader and student of leadership in health organizations. The authors use "Focused Content Cycling" where concepts/topics are presented to form a foundation and then expanded upon in the following chapters and again later in the text, used in one or more contexts or situations to maximize awareness, learning, and the potential to bridge theory to practice for the reader. These goals are accomplished in the book's four parts, each of which consists of four chapters. A summary of the four parts provides a good overview of the content of this textbook.

Part 1: Leadership Foundations

Part 1 is divided into four chapters. Chapter 1 defines leadership from historical, cultural, and contemporary perspectives. Chapter 2 assesses individual leadership styles and allows the student to relate his or her style to the various leadership theories and case studies presented in the text. Chapter 3 describes what a theory is and explains how leadership theories can be measured and assessed once theory is broken down into its fundamental parts. Chapter 4 provides a classical and historical review of leadership theories as they have evolved over the last several hundred years, especially since the 1930s.

Part 2: Leadership in Practice

Part 2 focuses on leadership in action and the knowledge, skills, and abilities required of a health leader. Chapter 5 outlines the personal responsibilities leaders have to maintain relevancy in skills, tools, abilities, and education. Chapter 6 focuses on applying those skills, tools, abilities, and education to communication, planning, decision making, managing knowledge, and training. Chapter 7 provides the health leader with a road map to success in personal leadership development by using the leader "crawl, walk, and run" methodology. Chapter 8 looks at some new methods in practice that help guide and hone leader skills; emphasis is placed on "leading people and managing resources" in the health organization.

Part 3: Leadership in Health Organizations

The third major module in this textbook focuses specifically on the complexity of health organizations. Chapter 9 begins by exploring the complex world of health and describing how leaders can identify and manage horizontal, vertical, institutional, and resource-dependent environments. It is followed by Chapter 10, which offers a sound review of ethics and morality in health and discusses a leader's responsibility to manage and maintain an ethical framework that fosters a moral environment. Chapter 11 is a unique chapter on measuring and defining outcomes of health leadership initiatives that apply the model building techniques discussed in Chapter 2. Part 3 concludes with Chapter 12's special analysis of the unique and interdisciplinary roles of health leaders, focusing specifically on physicians, nurses, administrators, and department heads.

Part 4: Leading People and Managing Resources into the Future

Chapter 13 offers suggestions for leaders in the next decade, with a specific emphasis on globalization and an understanding that many discussions in this book focus on Western philosophies of leadership; other worldviews

of leadership are presented. Next, Chapter 14 impresses on the reader that healthcare systems such as the supply chain and financial areas such as revenue management must be understood, improved, and integrated into other systems for a coherent whole in the effort to lead people and manage resources in an efficient, effective, and efficacious manner. Chapter 15 outlines the responsibilities of leaders in the management of nonperforming employees. Tips, strategies, and best practices are introduced throughout this part of the textbook. The textbook closes with Chapter 16's discussion of mentoring and succession planning.

To illustrate concepts detailed throughout the book, an appendix describing the experiences of seven healthcare leaders has been included.

Case	Title of Case	Textbook Chapter Link (Parts 1 and 2)	Textbook Chapter Link (Parts 3 and 4)
Stephens Case 1	Replacing the Radiology Contract	Chapters 5 and 6	Chapters 10 and 15
Bradshaw Case 1	Implementing an Information System: Electronic Health Record	Chapter 6	Chapter 12
Bradshaw Case 2	Ineffective Subordinate Leader	Chapters 2 and 5	Chapters 15 and 16
Bradshaw Case 3	Values and Vision Conflicts	Chapters 5 and 6	Chapter 10
Sack Case 1	Physician Leadership Development	Chapter 7	Chapter 12
Sack Case 2	Cultural Change	Chapter 4	Chapters 9 and 13
Smith Case 1	Evidenced-Based Leadership: A Formula for Success?	Chapters 4 and 8	Chapters 11 and 13
Smith Case 2	Ownership and Accountability Culture	Chapter 5	Chapters 9 and 13
Riley Case 1	Pharmaceutical Inconsistencies	Chapter 5	Chapters 11 and 14
Detty & Meadows Case 1	Improving Data Management Processes	Chapter 6	Chapter 14

ACKNOWLEDGMENTS

As in any major project, teamwork, collaboration, compromise, and dedication are required for a successful outcome when writing a book. Our Triune God, first and foremost, has nurtured, loved, and cared for me and my family to enable all that I am, with all my flaws paid for by Christ. My beautiful wife, Silke, and my wonderful daughters, Sarah, Rebecca, and Miriam, supported and encouraged my work for this textbook: Thank you, and I love you all very much. Nick Coppola, my partner in this project, again and as consistently in this second edition as in the first edition, provided a superb collegial environment while working intelligently and diligently on the many aspects of this textbook and supporting materials: Thank you for your collaborative spirit and dedication. Lastly, I greatly appreciate and empathize with the myriad of health leaders—those now on the stage and those waiting in the wings—who provide the organizational nourishment, direction, and moral fiber for the health industry on a daily basis. I am greatly encouraged by those health leaders who "lead people and manage resources" in our dynamic world.

Gerald (Jerry) R. Ledlow, PhD, MHA, FACHE

Becoming a leader is a process that cannot be accomplished alone. Although the names would be too numerous to mention, dozens of mentors and role models over the decades have provided guidance, encouragement, and wisdom that I now share with the readers of this text. I thank all of them for allowing me to share their knowledge with you. My heartfelt thanks also go out to my spouse (and better half), Susannah, and my three wonderful children, Nicholas, Holly, and GiGi. My family supported me during more than one late night and weekend visit to the office while writing the first edition, and then this humble request to co-author a second edition. To my family, I thank you for your love and support. I also want to thank the students in my leadership classes who aided in the development of this effort. I extend my gratitude to my graduate assistants for conducting research and literature reviews for the first edition of this book—Major Jake Bustoz, Jeanette Krajca, and Corey Morrell. A special thank you is warranted for Amy Sigmond, who did a great deal of editing and streamlining of material for this second edition. Lastly, my special thanks are extended to Dr. Jerry Ledlow, a long-time friend and colleague of nearly 20 years. Without his generous invitation to partner on this leadership journey with him, I would not be a co-author on this text. Finally, thank you to all the health leaders currently working in the industry today who make the U.S. healthcare system the most respected in the world!

M. Nicholas Coppola, PhD, MHA, FACHE

AUTHOR BIOGRAPHIES

Gerald (Jerry) R. Ledlow, PhD, MHA, FACHE

Dr. Gerald (Jerry) R. Ledlow, as a board-certified healthcare executive and Fellow in the American College of Healthcare Executives, has led team members and managed resources in health organizations for more than 27 years, including 15 years as a practitioner and more than a dozen years as an academically based teacher–scholar. He has successfully held a variety of positions: (1) executive-level positions in corporate and military health systems in the areas of clinical operations, managed care, supply chain and logistics, information systems, and facility management; (2) management positions in health services, medical materials, and the supply chain; and (3) various academic leadership positions as the director of doctoral programs at two universities, director of academic affairs, director of student services, and director of the center for survey research and health information, as well as holding tenured faculty positions at two doctoral research universities. Dr. Ledlow earned his PhD in organizational leadership from the University of Oklahoma, a master of health administration degree from Baylor University, and a bachelor of arts degree in economics from the Virginia Military Institute. He has held tenured graduate faculty positions at Central Michigan University and currently is a tenured professor and graduate faculty member at Georgia Southern University.

Dr. Ledlow has taught 24 different graduate-level courses, including teaching doctoral- and master's-level students in the topic of health leadership. "Dr. Jerry" (as his students call him) has made presentations on health-related topics and health leadership models and applications across the globe; he has presented to a myriad of audiences internationally, nationally, and locally. He has published in many venues (e.g., journals, book chapters) and has been author, contributing author, editor, and reviewer for several books.

Dr. Ledlow is married to his beautiful wife, Silke, and has three fantastic daughters, Sarah, Rebecca, and Miriam. He is a regional editor for the *Journal of Global Business and Technology*, is on several publication review teams, and participates as a member of various task forces and committees internationally, nationally, and at the state level. Years ago, Dr. Jerry was a National Registry-certified emergency management technician as a volunteer and was deployed to combat zones as a commissioned officer in the U.S. Army Medical Service Corps.

He received the Federal Sector Managed Care Executive of the Year Award in 1998 and the American College of Healthcare Executives' Regent's Award in 1997 and in 2003. His interests are health industry oriented and focus on the areas of leadership, management, decision sciences, supply chain and logistics, community preparedness for terrorism and disasters, socioeconomic constructs of health and community health status, and any project that has the potential to improve the health of communities through moral, effective, efficient, and efficacious health leadership and management practices.

M. NICHOLAS COPPOLA, PHD, MHA, FACHE

Dr. M. Nicholas Coppola is the Program Director for the Healthcare Master of Science in Clinical Practice Management program at Texas Tech University Health Sciences Center (TTUHSC). He is also the elected president of the TTUHSC Faculty Senate. In this capacity, Dr. Coppola leads the faculty in the governance process of the university. Prior to being elected by his faculty peers as the Faculty Senate president, Dr. Coppola was elected by his practitioner peers as the American College of Healthcare Executives (ACHE) Regent for the West Texas Region. In this capacity, he represented the interests of nearly 500 senior healthcare executives in West Texas and New Mexico. In addition to serving as the ACHE Regent for West Texas, Dr. Coppola also had previously served as the ACHE Army Regent. In this capacity he represented the interests of military healthcare executives worldwide.

Prior to his position at TTUHSC, Dr. Coppola served in the U.S. Army for 26 years. He originally enlisted in the Army as an engineer, was later commissioned as a second lieutenant in the Infantry, and finally branch transferred into the Medical Service Corps where he completed his career. His healthcare experience includes service as an administrator in Army hospitals, serving as a policy analyst for the Surgeon General, and being the director of an ambulatory clinic in his early careerist days. Dr. Coppola's last assignment in the Army was as the Founding Associate Dean of the Army Medical Department's Graduate School. While there he also served as the Founding Program Director of the Army–Baylor Graduate Program in Health and Business Administration (MHA/MBA joint degree).

Dr. Coppola is an ACHE Fellow, and a Past Fellow of the U.S. Medicine Institute. He holds a BA in Biology from the State University of New York (SUNY) at Potsdam, a master of science degree in administration from Central Michigan University, and a master of health administration degree from Baylor University, Texas. He has a PhD in health service organizations and research from the Medical College of Virginia Campus, Virginia Commonwealth University.

Dr. Coppola is the author of more than 100 scholarly publications and presentations, and has lectured globally on healthcare leadership and healthcare administration. He is the proud recipient of numerous leadership awards, including the 9A Proficiency Designator award from the Surgeon General (which identifies the top 1% of Army medical personnel), seven ACHE Leader-to-Leader awards, and an ACHE Governor's Award. He has also received leadership and recognition awards from every university from which he has earned a degree. This includes the Rising Star Award from SUNY Potsdam, and Distinguished Alumni Awards from both Baylor and Central Michigan. Dr. Coppola has also earned teaching awards from both Baylor and TTUHSC. Prior to his military retirement, officers worldwide nominated and elected him as the Medical Service Corps' Mentor of the Year. Dr. Coppola is listed in two national *Who's Who* publications, and is a member of three national honor societies in allied health, business, and healthcare administration. Dr. Coppola and his wife, Susannah, have three wonderful children together: Nicholas, Holly, and GiGi.

CONTRIBUTORS

Donald M. Bradshaw, MD, MPH, FAAFP, FACHE, FACPE
Senior Vice President, Defense Health Operations Manager, Health Solutions Business Unit
Science Applications International Corporation (SAIC)
Falls Church, Virginia

Paul E. Detty, MD, MHA
Six-Sigma Green Belt
Midwest Medical Center
Lancaster, Ohio

Karl Manrodt, PhD
Professor, College of Business Administration
Georgia Southern University
Statesboro, Georgia

Phil Meadows, MBA
Senior Data Analyst, Six-Sigma Black Belt
Midwest Medical Center
Lancaster, Ohio

Crystal A. Riley, PharmD, RPh, MSHCA, CPHQ
Associate Director, Federal Relations
The Joint Commission
Washington, DC

Michael Sack
President and CEO
Hallmark Health
Melrose, Massachusetts

Susan Reisinger Smith, DHA, MSN, RN
Vice President, Clinical Practice, Research, and Education
Gentiva Home Health
Macon, Georgia

James H. Stephens, DHA, MHA, FACHE
Associate Professor and Distinguished Fellow in Healthcare Leadership
MHA Director
Jiann-Ping Hsu College of Public Health
Georgia Southern University
Statesboro, Georgia