

# Leadership Essentials for Pharmacists

**Scott M. Mark, PharmD, MS, MEd, MBA, FASHP, FACHE, FABC**

**Rafael Saenz, PharmD, MS**

**John S. Clark, PharmD, MS, BCPS**

**James G. Stevenson, PharmD, FASHP**

## Learning Objectives

After completing the chapter, the reader will be able to:

1. Define leadership and explain possible paths to a leadership role.
2. Explain the difference between formal and informal leadership.
3. Discuss the origins of authority and sources of power.
4. List ways leaders use power effectively.
5. Cite common traits of an effective leader.
6. Differentiate between leadership and management.
7. Describe Collins's hierarchy of leadership.
8. Define various styles of leadership.
9. Suggest leadership development strategies.
10. Discuss the importance of exit strategies.

## Key Concepts

These key concepts are designed to focus learning, and the textual material that develops these concepts is easily identified throughout the chapter with circle-shaped icons indicating the key concept number (the end of each key concept is also denoted with a circle-shaped icon).

- 1 In the pharmacy profession, transition into a leadership role often happens serendipitously, resulting in what is sometimes called “accidental leadership.”
- 2 Leadership is the process of influence in which one person is able to enlist the aid and support of others in accomplishing a common task, and the effectiveness of leaders is determined by both their level of influence and the outcomes of their decisions.
- 3 Formal leaders have formal power—the right (authority) to hire and fire, transfer, demote or promote, and reward. Formal power is bestowed through organizational authority, the result of holding a position within the organization (such as chief executive officer) or an assigned role affecting key outcomes (such as a designated project team leader). Informal power, however, is earned through relationships and experience.
- 4 There is a difference between holding a leadership position and being a leader. Likewise, there is a difference between having power or authority that is earned and having power or authority that is bestowed.
- 5 Despite your title, role, or position on an organizational chart, you have the power to be a leader. Leadership is something acknowledged by others as a result of demonstrated vision, self-motivation, performance, determination, communication skills, credibility, ethical behavior, and ability to mobilize, motivate, and achieve desired results through others. A high-level position or formal leadership role is not required for you to be perceived as a leader.
- 6 Pharmacist leaders must fuse the traits of leadership with the professionalism expected within the pharmacy profession. Professionalism is defined as the standards, behaviors, and character of an individual who is engaged in tasks related to his or her work or profession.
- 7 Although management is similar to leadership in many ways, given that management and leadership skills often overlap, management generally focuses on more operational aspects of an organization to achieve goals. Leadership is about “doing the right things,” whereas management involves “doing things right.”
- 8 Leadership theorists have characterized a variety of leadership styles, and each style has both advantages and disadvantages.
- 9 Although several leadership styles may work, leaders will be most effective when they select a style consistent with their personality, their brand, the environment in which they exist, and the people with whom they interact. Optimally, leaders will be able to find environments in which they are able to demonstrate their preferred approach to leading others.
- 10 Growing your leadership capacity requires sustained and deliberate effort.

## Introduction

Unless pharmacy students have considered the possibility of being called on to lead, they may not seek to develop the necessary skills to be successful in a **leadership** role. However, learning about leadership is important, as highly trained pharmacists are targets for leadership roles in which they will provide guidance on professional and patient care decisions. If you are a pharmacist who is good at what you do, you will likely be asked to assume leadership responsibilities; therefore, a better understanding of “leadership” is vital.<sup>1,2</sup>

Advancement to a leadership position could be part of a formal organizational succession plan or the next step in an individual pharmacist’s **career map**.<sup>3</sup> 1 In the pharmacy profession, transition into a leadership role often happens serendipitously, resulting in what is sometimes called “accidental leadership.”<sup>3</sup> 2 Situations that may result in leadership opportunities can range from an unexpected vacancy on an executive team to recognition for a novel idea. Additional opportunities are presented in **Table 2-1**.<sup>4,5</sup> Several leadership topics are addressed in this chapter,

**Table 2-1** Examples of Opportunities Resulting in Leadership Positions

Pharmacist who is always asked to take a leadership role on committees and/or other special projects
Lead pharmacist who is asked to assume some leadership responsibilities after his or her manager or director leaves the organization suddenly
Pharmacist who is groomed and prepared by the owner of a retail pharmacy to understand aspects of patient care and the business of pharmacy in light of the owner's future retirement
Pharmacist who is seen as an advocate for patient care and is subsequently asked to lead a new clinical expansion
Pharmacist who develops a new teaching style or method
Pharmacist who shares an innovative idea with a colleague and then is asked to present this idea to others
Pharmacist who is known for managing and completing complex problems
Pharmacist who is frequently asked to present at Pharmacy and Therapeutics (P&T) and other high-profile medical staff meetings
Pharmacist who provides teaching and other scholarly mentorship in a college of pharmacy to less seasoned colleagues
Pharmacist team member whom other team members admire
Pharmacist whose knowledge and intelligence impress many and who is often asked to present his or her work or ideas

Source: Data from Mark SM. Succession planning: the forgotten art. *Hosp Pharm* 2008;43:593–600; and Betof E, Harwood F. *Just Promoted: How to Survive and Thrive in Your First 12 Months as a Manager*. New York, NY: McGraw-Hill; 1992.

including the definition of leadership, what it means to be a leader, leadership characteristics, the differences between leadership and **management**, styles of leadership, strategies for developing leadership competencies, and strategies for exiting leadership positions. This chapter and Chapter 1, *Management Essentials for Pharmacists*, serve as the introduction for this text, as concepts presented in these chapters will be built on in later chapters.

## Leadership Defined

True leadership is the ability to mobilize and inspire others; it is not solely about a title or a position. As leadership authority John C. Maxwell noted, “The true measure of leadership is influence—nothing more, nothing less.”<sup>9(p11)</sup>

➊ Leadership is the process of influence in which one person is able to enlist the aid and support of others in accomplishing a common task, and the effectiveness of leaders is determined by both their level of influence and the outcomes of their decisions.<sup>7,8</sup> ● In *Leading Minds: An Anatomy of Leadership*, psychologist and scholar Howard

Gardner states, “A leader is an individual ... who significantly affects the thoughts, feelings, and/or behaviors of a significant number of individuals.”<sup>9(pix)</sup> This is perhaps the most appealing aspect of leadership—the ability to inspire and influence others in profound and compelling ways.

Leadership can be found both formally and informally and at any organizational level.<sup>10</sup> ● **Formal leaders** have formal power—the right (authority) to hire and fire, transfer, demote or promote, and reward. Formal power is bestowed through organizational authority, the result of holding a position within the organization (such as chief executive officer) or an assigned role affecting key outcomes (such as a designated project team leader). Informal power, however, is earned through relationships and experience. ● **Informal leaders**, like so many social, political, cultural, and scientific trailblazers who have transformed their nations, communities, industries, and professions, rely on the creation and articulation of a compelling **vision** of the future to achieve success but do so without the power and authority granted to formal leaders. They often have personal magnetism or charisma, expertise in their fields, a recognized history with the organization, or the ability to inspire others. In many cases, informal leaders exert more influence on their fellow employees than do formal leaders.<sup>11</sup>

Issues pertaining to informal power and allegiance are part of a formal leader's responsibility. Savvy formal leaders determine which individuals possess informal power and assess how they choose to use it. They then use this information to mobilize their support or work to ensure they do not create unnecessary obstacles. Seasoned formal leaders appreciate the value of recognizing, engaging, and involving informal leaders in decision making and other key organizational tasks.<sup>12,13</sup>

In the event you are called on to serve as a leader, whether formally or informally, you will face a choice: you can accept the role and hope to rely on the power of your title and responsibilities to accomplish organizational goals, or you can cultivate leadership competencies and compel people to action by the way you think, behave, and interact with others. Given the increasingly dynamic nature of organizations, it is possible to hold a position today and lose it tomorrow. Building competencies to be both an informal and a formal leader will provide you with an expanded array of opportunities. This holds true in student organizations as well as work positions. Developing a wide scope of experiences provides a toolbox of leadership skills from which to draw on in the future. Because skills such as leading a meeting, interpersonal communication, and financial

management are similar whether in a student organization role or a work position role, developing experiences with them makes future leadership transitions easier.

## Transitioning into the Leadership Position

For some people, the transition into a leadership role is exciting, as many view such an opportunity as a chance to make a difference, grow professionally, and advance their career.<sup>14</sup> For others, the transition may be more daunting. From either perspective, making the transition to leadership is a big step. People who say otherwise have never done it, are too far removed from their own transition to accurately remember its challenges, or have experienced that rare occurrence—an easy transition. This adjustment or “speed bump” is felt with most transitions, yet people grow from such challenges.<sup>15</sup> For example, as a student graduates from pharmacy school, becomes licensed, and joins the staff of a pharmacy, this new pharmacist may develop into a leader as he or she is relied upon to assist and lead workflow for pharmacy technicians, medication use systems, and patient communication. Additional transitional opportunities as a leader may emerge as the now-veteran pharmacist motivates pharmacy technicians, pharmacy residents, pharmacy students, and less experienced pharmacists as their careers progress.

Leadership positions are not bestowed by luck; pharmacist leaders are selected because organizational administration believes they are qualified to handle the role and assume greater responsibility.<sup>16</sup> Thus new leaders should trust their abilities and potential and embrace the challenges of leadership, as the reward—the opportunity to inspire and affect the lives of others—is immense.

## What Does It Mean to Be a Leader?

4 As implied in the previous discussion of formal and informal leadership, there is a difference between holding a leadership position and being a leader. Likewise, there is a difference between having power or authority that is earned and having power or authority that is bestowed. 5 Sociologist Max Weber contributed greatly to the literature on leadership, noting that people are perceived to be leaders or to have authority for several reasons. According to Weber, there are three origins of authority:<sup>17</sup>

- *Traditional authority* is associated with custom or tradition, such as lines of royal succession in the case of kings and queens. In a more modern setting,

traditional authority is based on one’s position or rank. For example, the titles of director, chief, and department head represent traditional authority titles in various areas of pharmacy.

- *Bureaucratic authority* is based on rules or established laws. Bureaucratic leaders demonstrate their power by such tactics as enforcing rules, managing information, and requiring strict codes of organizational behavior. Military pharmacies are an example of a system in which a more established, stricter code of organizational behavior may be found, largely because of the value placed on discipline and rank.
- *Charismatic authority* is based on how leaders use their powers of persuasion and sense of personal magnetism to acquire followers and, often, devotees. Charismatic leaders tend to focus on transformation and use their personalities to make change. They often possess no formal power or authority but rather rely on their magnetism and vision to get things done. For instance, a staff pharmacist with extraordinary public speaking skills, a strong network, and commitment to serving low-income populations could positively transform a community pharmacy’s image by serving underserved individuals.

In their 1959 work, “The Bases of Social Power,” John French and Bertram Raven took a slightly different approach and suggested five sources of power:<sup>18</sup>

- *Reward power*: Based on a person’s ability to provide material or nonmaterial inducements
- *Legitimate power*: Derived from the follower’s perception that a leader has a right to lead, make demands, and expect obedience from others
- *Expert power*: Based on an individual’s knowledge and expertise
- *Referent power*: Stems from a person’s charm or appeal and a follower’s desire to identify or emulate these characteristics
- *Coercive power*: Based on an individual’s ability to threaten or punish

Weber’s research, as well as French and Raven’s work, underpins the notion that leadership is not reserved for people in formal leadership roles—a concept critical for those entering the profession of pharmacy. 5 Despite your title, role, or position on an organizational chart, you have the power to be a leader. Leadership is something acknowledged by others as a result of demonstrated vision, self-motivation, performance, determination, communication

skills, credibility, ethical behavior, and ability to mobilize, motivate, and achieve desired results through others. A high-level position or formal leadership role is not required for you to be perceived as a leader. ●

### Effective Use of Power

Whatever the source of their power, leaders must wield that power effectively to achieve desired outcomes. According to Fuqua and colleagues, effective leaders do not rely on their title (formal authority) to get results;<sup>19</sup> instead they adhere to ethical standards (and refrain from abuses of power), mobilize resources, inspire creativity and confidence in subordinates, and **empower** others. Leaders also effectively use their power in the following ways:<sup>19,20</sup>

- Demonstrating their qualifications to be a leader (i.e., their expertise and credentials) so that subordinates understand leaders earned their position of authority
- Prioritizing relationships and communication networks to better understand the needs of others, build social capital, and stay current on events and information
- Encouraging participation and soliciting input, as subordinates may have knowledge and suggestions critical to achieving goals
- Sharing information and decision making with appropriate individuals (e.g., those who play a critical role in a particular task)
- Rewarding accomplishments and enforcing negative consequences for failures
- Teaching others how to effectively use their power

## Characteristics of True Leaders

What do true leaders do and how do they behave? As discussed earlier, true leaders have a unique ability to move others to action. This ability arises because they tend to possess several common characteristics (Table 2-2 lists common behaviors and traits of effective leaders).<sup>21-26</sup>

- *The ability to articulate a compelling vision for the future:* A compelling vision can attract and inspire others, increase commitment to organizational goals, provide purpose and meaning to work activities, link current work activities to future accomplishments, and promote change.<sup>27</sup> The ability to create a compelling vision and garner widespread support to realize it is a critical leadership competency.<sup>25,26</sup>

For example, a meticulous pharmacist who strives to provide the safest and most efficacious care possible develops a vision in which medication errors would be reduced to nearly 0% over the next three years. To this end, she proposes the implementation of a new automation system to promote medication safety. The articulation of her vision regarding the use of automated technology and its positive effect on patient care inspires support for her proposal among her colleagues, which is instrumental in convincing the pharmacy’s administration not only to purchase the equipment but also to implement its use, thereby promoting goal attainment.

- *Passion:* True leaders are absolutely committed to their vision and enjoy working toward it.<sup>25</sup> This passion gives them the energy to persist even during setbacks. The pharmacist’s passion for promoting medication safety, described in the previous example, contributed greatly to her persistence in recruiting colleagues in efforts to compel the administration to act on her automation proposal.

**Table 2-2** Common Behaviors and Traits of Effective Pharmacist Leaders

Behaviors	Traits
Acts assertively	Competent
Admits mistakes	Cooperative
Challenges the status quo	Credible
Communicates well	Decisive
Delegates, entrusts, and empowers	Diplomatic
Demonstrates integrity	Emotionally stable
Encourages	Innovative
Innovates	Intelligent
Listens	Optimistic
Makes others feel important	Passionate
Negotiates successfully	Persuasive
Provides good direction	Responsible
Resolves conflict	Systems thinker
Stays involved	Visionary

Sources: Data from Hogan R, Curphy GJ, Hogan J. What we know about leadership: effectiveness and personality. *Am Psychol* 1994;49:493–504; Straub JT. *The Rookie Manager*. New York, NY: AMACOM; 2000; Broadwell MM, Dietrich CB. *The New Supervisor: How to Thrive in Your First Year as a Manager*. Cambridge, MA: Perseus Books; 1998; Rowitz L. *Public Health Leadership: Putting Principles into Practice*. Sudbury, MA: Jones and Bartlett Publishers; 2003; Bennis W. *On Becoming a Leader*. Cambridge, MA: Perseus Books; 1989; and Kouzes J, Posner B. *The Leadership Challenge*. San Francisco, CA: Jossey Bass; 2002.

- *Integrity*: Leaders know their strengths, are honest about their limitations, establish high standards (such as those set by our medication safety-promoting staff pharmacist), and are consistent in their approach. They also honor their commitments, treat others with respect, and serve as role models.<sup>25</sup>
- *Encouragement of others*: The tombstone of Andrew Carnegie, one of the twentieth century's notable leaders, reads: "Here lies a man who knew how to enlist the service of better men than himself."<sup>28</sup> Carnegie believed that great things required the support of others and that effective leaders harnessed the power and ideas of others.<sup>29</sup> Indeed, it has been said that leadership is about "creating a way for people to contribute to making something extraordinary happen."<sup>14,30</sup> Leaders understand the importance of engaging the collective talents of many people, and facilitating teamwork and collaboration by creating an atmosphere of mutual trust and respect. They make it possible for people to be successful and recognize them for their accomplishments and contributions.<sup>25,26</sup> As a pharmacist leader, your success depends, to some degree, on your own technical and pharmaceutical knowledge but, more significantly, on your ability to mobilize others.<sup>31</sup> Returning to our example, the pharmacist understood that without the support of her colleagues, her proposal would not have the power or momentum to gain the attention of decision makers within the organization. This reliance on the mobilization of others may represent a whole new way of thinking for those who moved to leadership roles after establishing themselves as take-charge pharmacists who solve challenges independently.<sup>32</sup>
- *Curiosity, daring, and taking calculated risks*: Leaders are not afraid to challenge the status quo and are willing to take risks to effect important change. They are not afraid to make mistakes in pursuing their goals and use adversity to prepare for future opportunities.<sup>25,26</sup> Because of the expense involved in purchasing automation, the training required, and the widespread belief that such technology would result in job cuts, the pharmacist faced an uphill battle among colleagues and administrators. Yet, she continued to challenge the embedded belief systems about automation to facilitate a better understanding of its cost, benefits, and impact.

6 Pharmacist leaders must fuse the traits of leadership with the **professionalism** expected within the pharmacy profession. Professionalism is defined as the standards, behaviors, and character of an individual who is engaged in tasks related

**Table 2-3** Traits of Pharmacy Professionalism

Accountability for actions, decisions, and work efforts
Knowledge and skills of pharmacy profession
Commitment to improving the skills and knowledge of both self and others
Trustworthiness
Creativity and innovative thinking
Ethically sound decision making
Pride in pharmacy profession
Service orientation
Covenantal relationship with patients

Source: Data from American Pharmacist Association Academy of Students of Pharmacy—American Association of Colleges of Pharmacy Council of Deans Task Force on Professionalism. White paper on pharmacy student professionalism. *J Am Pharm Assoc* 2000;40:96–102.

to his or her work or profession. ● Moreover, pharmacist leaders always consider the ethical and legal ramifications of their decisions and actions. Professionalism requires that pharmacists and pharmacist leaders commit to (1) promoting the highest standards of excellence in pharmacy practice, (2) advocating and serving the interests and welfare of patients, and (3) addressing health needs on a societal level.<sup>33</sup> **Table 2-3** details the traits of pharmacy professionalism.<sup>34</sup>

## Distinguishing Between Management and Leadership

Successful leaders often are also skilled managers. Yet, there are some key differences between leadership and management roles that are important to note.<sup>24</sup> 7 Although management is similar to leadership in many ways, given that management and leadership skills often overlap, management generally focuses on more operational aspects of an organization to achieve goals.<sup>35</sup> It is sometimes said that leadership is about "doing the right things," whereas management involves "doing things right."<sup>36(p7)</sup> ● In other words, leaders are concerned with the broad, general mission, or vision, of an organization, while managers are concerned with more operational details, such as budgeting, planning, hiring, and developing employees to accomplish that mission or vision. Although this is a somewhat simplistic overgeneralization, it speaks to the essential difference between management and leadership. It is one thing to be a good planner and an effective manager of human, financial, and physical resources, but it is something quite different to inspire others to action. Managers do the former, and leaders do the latter. In a

pharmacy setting, managers ensure the work gets done, and leaders get people excited about doing it. Managers plan, and leaders envision an exciting future. Managers think critically, and leaders think creatively and strategically. Managers ensure that employees are prepared to fulfill their roles, and leaders facilitate collective and continual learning among employees to expand the ways they think and achieve results.<sup>37</sup> For further details, refer to Chapter 1 (*Management Essentials for Pharmacists*) and Chapter 25 (*Effective Performance Management*). Although distinct differences separate leaders and managers, many leaders possess outstanding management skills and many managers have excellent leadership qualities. **Table 2-4** provides a list of competencies for pharmacist leaders and managers, key actions used to achieve these competencies, and the chapters that address these competencies and key actions.<sup>38</sup> Several of these competencies and key actions are discussed in Chapter 1 (*Management Essentials for Pharmacists*).

## Defining Your Leadership Style

In the management classic *Good to Great*, author Jim Collins asserts there is a hierarchy of executive behaviors.<sup>39</sup> Level 1 includes individuals who make their contributions independently. Level 2 comprises people who work well in team settings. Level 3 is composed of what Collins calls “competent managers,” individuals who are proficient at managing people and resources. Level 4 includes the classic definition of a leader, someone who “catalyzes commitment to and vigorous pursuit of a clear and compelling vision, stimulating higher performance standards.”<sup>39(p20)</sup> According to Collins, a smaller cadre of individuals achieve extraordinary success through “a paradoxical blend of personal humility and professional will.”<sup>39(p20)</sup> Collins calls these individuals “Level 5 Executives.”<sup>39</sup>

Unlike their often charismatic counterparts, Level 5 executives move quietly, modestly, and resolutely toward their goals. Collins uses Abraham Lincoln to illustrate the characteristics of a Level 5 executive—someone who is more focused on the organization or cause than on himself or herself and who is more driven by goals than by recognition, fortune, or power.<sup>39</sup> In the pharmacy profession, an excellent example of a Level 5 leader is Gloria Niemeyer Francke. Dr. Francke graduated from pharmacy school in the early 1940s, a time when few women entered the profession. She held multiple leadership positions, including assistant director of a hospital pharmacy, first executive secretary of the American Society of Hospital Pharmacists (later renamed the American Society of Health-System Pharmacists), and chairperson of the American

Pharmacists Association Advisory Group to the Office of Women’s Affairs. During her more than 60-year career, Dr. Francke actively advocated and advanced gender equality and the roles of women in pharmacy and pharmacy leadership. She was also the first female recipient of the American Pharmacists Association’s Remington Medal, considered by many as the pharmacy profession’s highest honor.<sup>40</sup>

Level 5 leaders exhibit one of many possible leadership styles. You will need to find a style that comports with your talents and values. Leadership approaches vary markedly, and relationship skills, comfort with people, decision-making style, ability to handle ambiguity, and communication abilities will all influence the approach you develop and cultivate. **8** Leadership theorists have characterized a variety of leadership styles, and each style has both advantages and disadvantages. **●** These styles include the following:

- **Affiliative:** Affiliative leaders are masters at forging relationships with others and can be especially effective at building productive teams. Although they are effective at using the power of networks and connections to accomplish goals, they sometimes find it difficult to deliver bad news that may disappoint others, including feedback about underperformance.<sup>16</sup>
- **Autocratic:** Autocratic leaders make decisions independently, without engaging or consulting others.<sup>41</sup> Although this style works well in crisis situations, it does not typically engage the thinking or talents of others.
- **Democratic:** Democratic leaders value fair process and tend to give all members of the organization an opportunity to weigh in with their preferences and recommendations.<sup>16,41</sup> Democratic leaders excel in engaging others, but their commitment to collecting input and establishing buy-in can sometimes be inefficient.
- **Laissez-faire:** Laissez-faire leaders provide critical resources and information but tend to provide little direction. This form of leadership works well with highly competent and independent individuals but may cause some people to feel abandoned or ignored.<sup>41</sup>
- **Transformational:** Transformational leaders believe that social and spiritual values can be employed to raise employees to even higher levels of performance and motivation.<sup>42</sup> According to James Burns, who coined this label, transformational leaders include intellectual leaders who transform organizations or society by thinking in new ways, charismatic leaders who use charm and personality to promote change, revolutionary leaders who promote change by using effective methodologies, and reform leaders who focus on a single moral issue.<sup>42</sup> Transformational

**Table 2-4** Competencies for Pharmacist Leaders and Managers

Competency	Key Actions	Chapters Related to Competency
<i>Accurate self-insight:</i> demonstrating an awareness of your own strengths and development needs as well as the effects of your own behavior on others	Inviting <b>feedback</b> , performing self-assessment, understanding impact	<ul style="list-style-type: none"> <li>• Chapter 1 (<i>Management Essentials for Pharmacists</i>)</li> <li>• Chapter 2 (<i>Leadership Essentials for Pharmacists</i>)</li> <li>• Chapter 19 (<i>Personal Finance</i>)</li> <li>• Chapter 28 (<i>Developing Professionalism</i>)</li> <li>• Chapter 30 (<i>Creating Your Personal Brand and Influencing Others</i>)</li> <li>• Chapter 32 (<i>Managing Your Time</i>)</li> </ul>
<i>Building business relationships:</i> using appropriate interpersonal styles and communication methods to work effectively with business partners, such as peers and external vendors, to meet mutual goals; building networks to obtain cooperation without relying on authority	Establishing shared goals, collaboratively developing solutions, influencing action, confirming agreement, facilitating, acknowledging contributions, establishing communication systems	<ul style="list-style-type: none"> <li>• Chapter 1 (<i>Management Essentials for Pharmacists</i>)</li> <li>• Chapter 2 (<i>Leadership Essentials for Pharmacists</i>)</li> <li>• Chapter 3 (<i>Communicating Effectively in the Workplace</i>)</li> <li>• Chapter 4 (<i>Managing Conflict and Building Consensus</i>)</li> <li>• Chapter 5 (<i>Negotiation Techniques</i>)</li> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> <li>• Chapter 28 (<i>Developing Professionalism</i>)</li> </ul>
<i>Building organizational talent:</i> attracting, developing, and retaining talented individuals; creating a learning environment that ensures associates realize their highest potential, thereby allowing the organization as a whole to meet future challenges; creating and maintaining an environment that naturally enables all participants to contribute to their full potential in the pursuit of organizational objectives	Diagnosing capability and developmental needs, scanning the environment for developmental assignments, demonstrating advocacy for talent, creating a learning culture, ensuring differential reward systems and processes, emphasizing retention, demonstrating inclusive behavior, demonstrating advocacy for diversity	<ul style="list-style-type: none"> <li>• Chapter 1 (<i>Management Essentials for Pharmacists</i>)</li> <li>• Chapter 8 (<i>Pharmacy Business and Staff Planning</i>)</li> <li>• Chapter 23 (<i>Creating and Identifying Desirable Workplaces</i>)</li> <li>• Chapter 24 (<i>Successful Recruitment and Hiring Strategies</i>)</li> <li>• Chapter 25 (<i>Effective Performance Management</i>)</li> </ul>
<i>Change leadership:</i> continuously seeking (or encouraging others to seek) opportunities for innovative approaches to organizational problems and opportunities	Recognizing opportunities; valuing sound approaches; encouraging boundary breaking; addressing resistance to change; managing complexity, contradictions, and paradoxes; driving toward improvement	<ul style="list-style-type: none"> <li>• Chapter 6 (<i>Leading and Managing Change</i>)</li> <li>• Chapter 14 (<i>Quality Improvement</i>)</li> <li>• Chapter 31 (<i>Innovation and Entrepreneurship</i>)</li> </ul>
<i>Communicating with impact:</i> expressing thoughts, feelings, and ideas in a clear, succinct, and compelling manner in both individual and group situations; adjusting language to capture the attention of the audience	Delivering clear messages, presenting with impact, creating clear written communications, adjusting to the audience, ensuring understanding	<ul style="list-style-type: none"> <li>• Chapter 3 (<i>Communicating Effectively in the Workplace</i>)</li> <li>• Chapter 4 (<i>Managing Conflict and Building Consensus</i>)</li> <li>• Chapter 5 (<i>Negotiation Techniques</i>)</li> <li>• Chapter 26 (<i>Understanding and Applying Marketing Strategies</i>)</li> <li>• Chapter 27 (<i>Advertising and Promotion</i>)</li> </ul>
<i>Customer focus:</i> cultivating strategic customer relationships and ensuring that the customer perspective is the driving force behind all value-added business activities	Seeking to understand customers, educating customers, maintaining trust, acting to meet customer needs and concerns, developing partnerships, recognizing customer service issues, creating win-win solutions	<ul style="list-style-type: none"> <li>• Chapter 12 (<i>Justifying and Planning Patient Care Services</i>)</li> <li>• Chapter 13 (<i>Developing and Evaluating Clinical Pharmacy Services</i>)</li> <li>• Chapter 15 (<i>Achieving and Measuring Patient Satisfaction</i>)</li> <li>• Chapter 28 (<i>Developing Professionalism</i>)</li> </ul>
<i>Driving for results:</i> setting high goals for personal and group accomplishments, measuring progress toward goals, working tenaciously to meet or exceed goals while deriving satisfaction from goal achievement and continuous improvement	Targeting opportunities, establishing and reaching for goals, staying focused, evaluating performance	<ul style="list-style-type: none"> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> <li>• Chapter 14 (<i>Quality Improvement</i>)</li> <li>• Chapter 25 (<i>Effective Performance Management</i>)</li> </ul>
<i>Establishing strategic direction:</i> establishing and committing to a long-range course of action to achieve a strategic goal or vision after analyzing factual information and assumptions and considering resources, constraints, and organizational values	Gathering and organizing information, analyzing data, evaluating and selecting strategies, developing timelines, executing plans	<ul style="list-style-type: none"> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> <li>• Chapter 8 (<i>Pharmacy Business and Staff Planning</i>)</li> <li>• Chapter 18 (<i>Integrating Pharmacoeconomic Principles and Pharmacy Management</i>)</li> </ul>



**Table 2-4** Competencies for Pharmacist Leaders and Managers (continued)

Competency	Key Actions	Chapters Related to Competency
<i>Executive presence:</i> conveying an image that is consistent with the organization's values; demonstrating the qualities, traits, and demeanor (excluding intelligence, competency, or special talents) that command leadership respect	Advocating for the organization, managing stress, creating an impact, exhibiting flexibility and adaptability	<ul style="list-style-type: none"> <li>• Chapter 2 (<i>Leadership Essentials for Pharmacists</i>)</li> <li>• Chapter 28 (<i>Developing Professionalism</i>)</li> <li>• Chapter 30 (<i>Creating Your Personal Brand and Influencing Others</i>)</li> </ul>
<i>Leading through vision and values:</i> Keeping the organization's vision at the forefront of decision making and action	Communicating the importance of vision and values, moving others to action, modeling vision and values, rewarding others who display vision and values	<ul style="list-style-type: none"> <li>• Chapter 2 (<i>Leadership Essentials for Pharmacists</i>)</li> <li>• Chapter 6 (<i>Leading and Managing Change</i>)</li> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> </ul>
<i>Managing diversity:</i> creating and maintaining an environment that naturally enables all participants to contribute to their full potential in pursuit of organizational objectives	Creating an equitable work environment, ensuring inclusivity of policies, recognizing diversity as an organizational asset, promoting the use of diverse resources, promoting increased diversity among the staff, setting standards of behavior based on respect and dignity	<ul style="list-style-type: none"> <li>• Chapter 22 (<i>Employment Law Essentials</i>)</li> <li>• Chapter 23 (<i>Creating and Identifying Desirable Workplaces</i>)</li> <li>• Chapter 24 (<i>Successful Recruitment and Hiring Strategies</i>)</li> </ul>
<i>Operational decision making:</i> relating and comparing data on operational effectiveness from different sources; establishing goals and requirements that reflect organizational objectives and values, including the importance of continuous improvement; securing relevant information and identifying key issues, key people, and cause-and-effect relationships from a base of information; committing to an action after exploring alternative courses of action	Seeking and organizing information, analyzing data, developing and considering alternatives, gaining commitments, demonstrating decisiveness and action	<ul style="list-style-type: none"> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> <li>• Chapter 8 (<i>Pharmacy Business and Staff Planning</i>)</li> <li>• Chapter 9 (<i>Significant Laws Affecting Pharmacy Practice Management</i>)</li> <li>• Chapter 10 (<i>Pharmacy Operations: Workflow, Practice Activities, Medication Safety, and Technology</i>)</li> <li>• Chapter 14 (<i>Quality Improvement</i>)</li> <li>• Chapter 17 (<i>Cents and Sensibility: Understanding the Numbers</i>)</li> <li>• Chapter 18 (<i>Integrating Pharmacoeconomic Principles and Pharmacy Management</i>)</li> <li>• Chapter 20 (<i>The Basics of Managing Risk</i>)</li> <li>• Chapter 21 (<i>Insurance Fundamentals</i>)</li> <li>• Chapter 29 (<i>Ethical Decision Making</i>)</li> </ul>
<i>Organizational acumen:</i> understanding and using economic, financial, and industry data accurately to diagnose business strengths and weaknesses; identifying key issues; and developing strategies and plans	Analyzing, integrating, and understanding the application of financial strategies and systems	<ul style="list-style-type: none"> <li>• Chapter 6 (<i>Leading and Managing Change</i>)</li> <li>• Chapter 7 (<i>Strategic Planning to Achieve Results</i>)</li> <li>• Chapter 8 (<i>Pharmacy Business and Staff Planning</i>)</li> <li>• Chapter 11 (<i>Purchasing and Managing Inventory</i>)</li> <li>• Chapter 12 (<i>Justifying and Planning Patient Care Services</i>)</li> <li>• Chapter 16 (<i>Third-Party Payment for Prescription Medications in the Retail Sector</i>)</li> <li>• Chapter 17 (<i>Cents and Sensibility: Understanding the Numbers</i>)</li> <li>• Chapter 18 (<i>Integrating Pharmacoeconomic Principles and Pharmacy Management</i>)</li> </ul>
<i>Process improvement:</i> acting to improve existing conditions and processes	Assessing opportunities, determining causes, targeting and implementing improvements	<ul style="list-style-type: none"> <li>• Chapter 14 (<i>Quality Improvement</i>)</li> </ul>
<i>Professional or industry knowledge:</i> having a satisfactory level of technical and professional skill or knowledge in position-related areas, keeping up with current developments and trends in areas of expertise	Engaging in continuous learning, applying state-of-the-art technology and concepts, developing and maintaining industry awareness	<ul style="list-style-type: none"> <li>• Chapter 1 (<i>Management Essentials for Pharmacists</i>)</li> <li>• Chapter 2 (<i>Leadership Essentials for Pharmacists</i>)</li> <li>• Chapter 8 (<i>Pharmacy Business and Staff Planning</i>)</li> <li>• Chapter 24 (<i>Successful Recruitment and Hiring Strategies</i>)</li> <li>• Chapter 28 (<i>Developing Professionalism</i>)</li> </ul>

Source: Originally published in Zilz DA, Woodward BW, Thielke TS, Shane RR, Scott B. Leadership skills for a high-performance pharmacy practice. *Am J Health-Syst Pharm* 2004;61:2562–2574. © 2004 American Society of Health-System Pharmacists, Inc. All rights reserved. Adapted with permission.

leaders tend to be “idea” people and may need help attending to the details of their plans. In some cases, their passion can exhaust others.

- *Servant*: Servant leaders view their role as being in service to others, meeting the needs of those whom they lead, and helping others to grow by building individual capacity and a sense of community. Servant leaders believe that attending to the needs of employees or followers will enable them to achieve their full potential—and when potential is fully realized, the organization as a whole will benefit.<sup>43</sup> Although the people within organizations led by servant leaders tend to feel valued and supported, some criticize the approach, suggesting that it focuses too much on developing others and not enough on setting direction to get things done.<sup>44</sup>

Regardless of the leadership style you adopt, it is important to understand that styles can be situational. Additionally, different leadership styles are likely to be exhibited during different times in your professional career. For example, different leadership styles are likely to be undertaken while you are a student versus when you obtain a formal management position. According to Vroom and Jago, who developed the contingency leadership theory (also known as the situational leadership theory), “a leadership style that is effective in one situation may prove completely ineffective in a different situation.”<sup>45(p23)</sup> Thus most leaders will likely encounter situations in which their default leadership style is ineffective or at least not optimal.<sup>46</sup> For example, a pharmacist leader who typically uses a laissez-faire approach to leadership will not find this style effective if he or she is asked to take over a hospital pharmacy staffed by several newly graduated pharmacists. Likewise, a transformational leader who thrives on change will probably not be successful (and likely will not be happy) in a family-owned community pharmacy with no need or interest in reorganizing or significantly revamping its products or services. There are clearly times when uncomfortable approaches are required to move through difficult situations or to be successful in an organization that does not value your preferred approach.<sup>31,47</sup>

9 Although several leadership styles may work, leaders will be most effective when they select a style consistent with their personality, their brand, the environment in which they exist, and the people with whom they interact.<sup>48</sup> Optimally, leaders will be able to find environments in which they are able to demonstrate their preferred approach to leading others. ● Leadership requires authenticity, and we can be authentic only when we are acting in accordance with our personal and professional values.

## Developing Your Leadership Potential

10 Growing your leadership capacity requires sustained and deliberate effort. ● Expanding your base of experience is an essential development strategy, and there are many strategies to accomplish it:

- *Pursue leadership roles within community organizations.*<sup>26</sup> The varied and often underfunded needs of community organizations provide volunteers with ample opportunities to pursue and build skills that would not normally be possible with one’s employer. Volunteering to work on a campaign to promote literacy, managing contributions for a fund-raising event, or soliciting contributions for a local marathon are strategies to build marketing, financial, and persuasive competencies.
- *Volunteer for leadership roles within your professional associations.*<sup>26</sup> Recruiting corporate partners for a pharmacy conference or leading program planning for a local, state, regional, national, or international pharmacy association will give you an opportunity to meet new people and network, acquire new skills, and learn how professional pharmacy organizations work. These kinds of assignments also tend to hone communication, persuasion, and **negotiation** skills.
- *Find one or more mentors.* The best mentors may be individuals outside of your management chain. For example, a staff pharmacist in a hospital setting may look to the director of nursing or medical director for mentorship. Mentors can support leadership development by opening doors and expanding networks and by providing feedback about issues ranging from style and presence to approaches to managing conflict. Mentors can steer you to high-profile assignments that increase your visibility, encourage you to think in new ways, model successful behaviors and attitudes, and support you through difficult situations. **Table 2-5** describes the many roles of a mentor.
- *Ask for difficult assignments.*<sup>26</sup> Challenging assignments encourage growth and can result in organizational recognition. Once you have been successful with one project, you will likely be called on to work on another. Such extension of your responsibilities will expand your knowledge and experience base, provide you with opportunities to try new things, and increase your connections with others. For example, a pharmacist may request to be included on a team assigned to develop new practice guidelines for chronic disease management. One extremely important aspect of

**Table 2-5** Mentoring Roles

Elements	Description of Mentor's Activities/Responsibilities
Sponsorship	Opens doors that would otherwise be closed
Coaching	Teaches and provides feedback
Protection	Supports the protégé and/or acts as a buffer
Challenge	Encourages new ways of thinking and acting, and pushes the protégé to stretch his or her abilities
Exposure and visibility	Steers the protégé into assignments that make him or her known to top management
Role modeling	Demonstrates the kind of behaviors, attitudes, and values that lead to success
Counseling	Helps the protégé with difficult professional dilemmas
Acceptance and confirmation	Supports the protégé and shows respect
Friendship	Demonstrates personal caring that goes beyond business requirements

accepting difficult assignments is fully completing those assignments in an agreed-upon timeframe. Time management skills are essential as one stretches to reach his or her potential in leadership.

- *Stay informed.* A solid grasp of the context in which one works is required for strategic thinking. Learning about your pharmacy's expansion plans, reading journals to stay abreast of current therapy, using a professional organization Listserv to converse with your professional peers about the effect of a medication, reviewing financial statements to learn more about your organization's financial stability, and introducing yourself to colleagues at professional meetings are just some of the ways to learn more about your profession and the trends affecting it.
- *Observe others.* Pay attention to the traits and behaviors of leaders whom you admire. How do they handle opposition? Which words do they use to move others to action? Where do they invest their time and energy? We can learn a great deal by studying role models.
- *Read about leaders.* Politicians, revolutionaries, inventors, groundbreaking scientists, sports figures, corporate leaders—all provide lessons from which we can learn. Read their stories to learn about the techniques they employ, the words they use, and the behaviors they exhibit.
- *Take leadership tests and inventories.* A number of leadership style assessment tools can be illuminating.<sup>49,50</sup> Online tools, career offices within universities, and career coaches within the community are useful resources with which to expand your level of self-understanding. The more you understand your personal strengths and interests, the better positioned you will be to develop a leadership style that feels right for you.

- *Develop emotional intelligence.* In contrast to IQ (intelligence quotient), which refers to a person's cognitive ability, EI (emotional intelligence) refers to an individual's ability to evaluate situations and people, and interact in an effective, caring way by understanding others' and one's own emotions.<sup>51</sup>
- *Do not wait to be ready.* We all need "stretch assignments," so do not wait to be fully proficient before tackling assignments. Act with confidence and be ready to ask others for support in the event you need it.

## Exiting Leadership Roles and Positions

It is not uncommon for leaders to leave positions to take on new roles and endeavors, or to retire. This concept is true for student leaders as well as for experienced professionals. To maintain the stability of the organization and foster ongoing positive relationships, it is useful for leaders to develop exit strategies, or plans for leaving a position (also discussed in Chapter 1, *Management Essentials for Pharmacists*). Development of such strategies may begin when an individual assumes a role (particularly if he or she has a set time period in mind for committing to the position or if it is a time-limited position such as an elected leadership position in a student organization), or when he or she begins to consider an appropriate time to resign from the role.

On a personal level, an exit strategy plan may involve regularly conducting a review of personal goals and career (or life) plans: Where does the leader want to go following the exit, and what does he or she want to accomplish? Has the leader accomplished all he or she set out to do in a role? Is the leader's effectiveness in the role changing? Is

the leader ready for more or different responsibilities? If it is determined that the appropriate time to exit may be approaching, one needs to consider the personal, financial, geographic, and relationship impact when weighing the various options. For example, might vesting or retirement benefit considerations affect the timing of the exit? For student leaders, the consideration might entail the needs of the student organization as well as the needs of the leader and other constituents in the organization.

On an organizational level, exit strategies may include (1) transition planning to determine how the organization will move forward as the leader withdraws from his or her role and (2) **succession planning** to ensure a smooth transition to new leadership. Development of a succession plan is an important task for every leader. Leadership and management development should be an active process, with specific actions and outcomes. In developing a succession plan several important components must be considered:

1. When identifying potential successors, evaluate the significant anticipated challenges the organization is likely to face over the next 5 to 10 years, and consider the skills and background needed to lead the organization during this time.
2. Begin to develop internal candidates or make plans to recruit individuals who could be groomed for leadership if appropriate internal candidates are not available. This development will need to include progressively greater delegation of responsibility and independence of decision making. For example, in a student organization, it is wise to delegate assignments with leadership components to those individuals who might be considered for future formal leadership roles in the organization.
3. As the leader's exit time approaches, assess the readiness of internal candidates and begin to work with them more closely if gaps in their preparedness persist.<sup>52,53</sup> For student organization leaders, it is wise to have a formal transition plan developed to facilitate a seamless transition from one leader to another. This is probably best accomplished in conjunction with the faculty advisor.

In some, but not all cases, consultation with organization administration will facilitate optimal planning for the leader's exit. Ultimately, the goal of exit strategies is to help the outgoing leader, the incoming leader, and the organization prepare for change resulting from the exit in a manner that will benefit all parties.

When it is determined that the time for an exit is at hand, it is critical to write a careful and respectful resignation

letter. This letter should suggest an agreeable timetable for your exit. Preferably, this timeline will be acceptable to the exiting leader, his or her current employer, and his or her future employer, if applicable. The resignation letter should be personally delivered to the exiting individual's supervisor. When meeting with the supervisor, the exiting leader should be prepared to explain his or her thought process for the decision to exit. The exiting leader should be respectful, gracious, and thankful for the opportunities he or she has been given—now is not the time to complain or criticize. If the individual has concerns, he or she should express them as positive, constructive recommendations for improvement. The exiting leader should also have a plan developed with suggestions on how current assignments, responsibilities, and commitments may best be managed during the transition. This type of responsible action will allow the leader to exit on his or her terms but will leave the door open for potential future relationships with the employer and/or supervisor. After communicating the resignation and agreeing to the timing and the transition plan with the supervisor, the leader can then communicate his or her plans to leave the position more broadly.

Once a leader has announced his or her plan to exit the organization, the individual can be available to his or her successor to provide any needed background or advice. If the leader is staying in the organization and taking on a new role, the successor should be given "space" to manage and lead. Be prepared to provide guidance if asked, but keep some distance, as the new leader needs to establish his or her priorities and leadership approach within the organization.

### Management Challenge

In the next five years, pharmacy leadership positions will be mostly occupied by Baby Boomer, Generation X, and Generation Y individuals. Work-related characteristics of each generation are as follows:

- Baby Boomer (born 1946–1964): work efficiently; desire quality; question authority; collegial; team players; consider work to be an adventure
- Generation X (born 1965–1980): self-reliant; desire structure and direction; view work as a challenge and a contract
- Generation Y (born 1981–2000): multitask; entrepreneurial; tolerant; goal oriented; view work as fulfilling

How would the typical Baby Boomer leader differ from Generation X and Generation Y leaders?

# Summary

*Leaders can conceive and articulate goals that lift people out of their petty preoccupations ... and unite them in pursuit of objectives worthy of their best efforts.*

—John W. Gardner

Effective leadership, like any other skill, requires practice and patience. As a pharmacist, it is likely you will be called upon to lead. Recognizing this probability, this chapter provided an introduction to leadership and the need for leaders within the pharmacy profession. It also discussed

critical aspects of the leadership role, including (1) formal and informal power, (2) effective use of power, (3) leadership types and styles, (4) strategies to build leadership competencies, and (5) exit strategies. The future of pharmacy is highly dependent on future pharmacist leaders. Thus the development of successful leaders is imperative to the profession of pharmacy. This text, which was written and reviewed by pharmacist leaders, managers, and human resource experts, will elaborate on this cultivation in the following chapters.

# Abbreviations

EI	emotional intelligence
IQ	intelligence quotient
P&T	Pharmacy and Therapeutics

# Case Scenarios

**CASE ONE:** You have been selected as the new manager position within the pharmacy department at a medical center. The last manager, Dr. Jeffries, was well liked and successful in her role. She was selected for a promotion, and you were chosen to succeed her based on your clinical success and informal leadership to this point. Which leadership tactics should you employ in the next 40 days to ensure your leadership transition goes as smoothly as possible?

**CASE TWO:** Your colleague, Max Washington, was recently appointed the pharmacist manager for a retail setting that, according to corporate officials, needs “a serious makeover.” Dr. Washington has several ideas and plenty of energy, but his newly acquired staff seems almost hostile to the idea of changing established approaches. “They all know I’m the boss,” he explains to you, “but they refuse to give me the respect I deserve.” What can he do to turn things around?

**CASE THREE:** Lucy Spiegel is a pharmacist at a small hospital pharmacy that is experiencing regular medication errors. Despite her frequent expressions of concern to her pharmacy colleagues, she has observed a general sense of apathy toward solving the problem, and the pharmacist

manager seems unconcerned. Each error seems to have a unique set of circumstances, and there does not seem to be a clear pattern. Dr. Spiegel is frustrated by this situation, but because she is not in a formal leadership role, she is unsure about what she can do to create real change. Which strategies might she employ?

**CASE FOUR:** As a pharmacist manager, you are committed to cultivating your employees’ talents. You are increasingly impressed by Dr. Daniels, a newly graduated pharmacist who is passionate about his profession. His ideas are creative, salient, and on point. On the down side, he can be overly direct and even condescending in his communication with others. You see tremendous leadership potential in Dr. Daniels—if he can conquer some of his interpersonal communication challenges, that is. What can you do to help him reach his potential?

**CASE FIVE:** A student leader named Carrie asks you how she can get involved to develop her leadership skills, and become more experienced, confident, and prepared to accept a formal leadership position in your community pharmacy in the future. What should you recommend to Carrie so she can prepare herself for a leadership role?

# References

- White SJ. Will there be a pharmacy leadership crisis? an ASHP Foundation Scholar-in-Residence report. *Am J Health-Syst Pharm* 2005;62:845-855.
- Raiffa H. *The Art and Science of Negotiation*. Boston, MA: Belknap Press; 2005.
- Robbins H, Finley M. *The Accidental Leader: What to Do When You Are Suddenly in Charge*. San Francisco, CA: Jossey-Bass; 2004.
- Mark SM. Succession planning: the forgotten art. *Hosp Pharm* 2008;43:593-600.
- Betof E, Harwood F. *Just Promoted: How to Survive and Thrive in Your First 12 Months as a Manager*. New York, NY: McGraw-Hill; 1992.
- Maxwell JC. *The 21 Irrefutable Laws of Leadership*. Nashville, TN: Thomas Nelson; 2007.
- Brousseau KR, Driver MJ, Hourihan G, Larsson R. The seasoned executive's decision-making style. *Harv Bus Rev* 2006;84(2):110-121.
- Michelman P, Kleiner A. Debriefing Art Kleiner: how to lead when your influence goes off the (org) chart. *Harv Manag* 2004;9(5).
- Gardner H. *Leading Minds: An Anatomy of Leadership*. New York, NY: Basic Books; 1996.
- Hill LA. *Building Effective One-on-One Work Relationships*. Boston, MA: Harvard Business Publishing; 1996.
- Mintzberg H, Van der Heyden L. Organigraphs: drawing how companies really work. *Harv Bus Rev* 1999;77(5):87-94.
- Garvin DA, Roberto MA. What you don't know about making decisions. *Harv Bus Rev* 2001;79(8):108-116.
- Collins JC. Turning goals into results: the power of catalytic mechanisms. *Harv Bus Rev* 1999;77(4):70-82.
- Stettner M. *Skills for New Managers*. New York, NY: McGraw-Hill; 2000.
- Bunker KA, Wakefield M. Leading in times of change. *Harv Manag Update* 2006;11(5):3-6.
- Goleman D. What makes a leader? *Harv Bus Rev* 2004;82(1):82-91.
- Weber M. *The Theory of Social and Economic Organization*. Henderson AM, Parsons T, trans. New York, NY: Free Press; 1947.
- French JR, Raven B. The bases of social power. In: Cartwright D, ed. *Studies in Social Power*. Ann Arbor, MI: University of Michigan; 1959.
- Fuqua HE Jr, Payne KE, Cangemi JP. Leadership and the effective use of power. National Forum. Available at: <http://www.nationalforum.com/Electronic%20Journal%20Volumes/Fuqua,%20Jr,%20Harold%20E.%20Leadership%20and%20the%20Effectives%20Use%20of%20Power.pdf>. Accessed November 18, 2011.
- Bal V, Campbell M, Steed J, Meddings K. The role of power in effective leadership. Center for Creative Leadership. Available at: <http://www.ccl.org/leadership/pdf/research/roleOfPower.pdf>. Accessed November 18, 2011.
- Hogan R, Curphy GJ, Hogan J. What we know about leadership: effectiveness and personality. *Am Psychol* 1994;49:493-504.
- Straub JT. *The Rookie Manager*. New York, NY: AMACOM; 2000.
- Broadwell MM, Dietrich CB. *The New Supervisor: How to Thrive in Your First Year as a Manager*. Cambridge, MA: Perseus Books; 1998.
- Rowitz L. *Public Health Leadership: Putting Principles into Practice*. Sudbury, MA: Jones and Bartlett Publishers; 2003.
- Bennis W. *On Becoming a Leader*. Cambridge, MA: Perseus Books; 1989.
- Kouzes J, Posner B. *The Leadership Challenge*. San Francisco, CA: Jossey Bass; 2002.
- Lashway L. *Leading with Vision*. Eugene, OR: ERIC Clearinghouse on Organizational Management; 1997.
- Lifeorganizers.com. Tombstone of Andrew Carnegie's. Available at: <http://www.lifeorganizers.com/Business-Solutions/Daily-Business-Quote/Tombstone-of-Andrew-Carnegie-s.html>. Accessed November 13, 2011.
- Johnson LK. Are you delegating so it sticks? *Harv Manag Update* 2007;12(9):3-5.
- Brady C, Woodward O. *Launching a Leadership Revolution: Mastering the Five Levels of Influence*. Lebanon, IN: Business Plus; 2007.
- Cohn JM, Khurana R, Reeves L. Growing talent as if your business depended on it. *Harv Bus Rev* 2005;83(10):62-70.
- Walker CA. Saving your rookie managers from themselves. *Harv Bus Rev* 2002;80(4):97-102.
- American Board of Internal Medicine Committees on Evaluation of Clinical Competence and Clinical Competence and Communication Programs. *Project Professionalism*. Philadelphia, PA; 2001:5-6.
- American Pharmacist Association Academy of Students of Pharmacy-American Association of Colleges of Pharmacy Council of Deans Task Force on Professionalism. White paper on pharmacy student professionalism. *J Am Pharm Assoc* 2000;40:96-102.
- Zaleznik A. Managers and leaders: are they different? *Harv Bus Rev* 2004;82(1):74-81.
- Bennis W, Goldsmith J. *Learning to Lead: A Workbook on Becoming a Leader*. New York, NY: Basic Books; 2003.
- Senge P. *The Fifth Discipline: The Art and Practice of the Learning Organization*. London: Random House; 1990.
- Zilz DA, Woodward BW, Thielke TS, Shane RR, Scott B. Leadership skills for a high-performance pharmacy practice. *Am J Health-Syst Pharm* 2004;61:2562-2574.
- Collins J. *Good to Great*. New York, NY: HarperCollins Publishers; 2001.
- Maine LL, O'Brien JM. Lessons learned from an unsung hero: Gloria Niemeyer Francke. *Am J Pharm Educ* 2008;72:115.
- Lewin K, Lippitt R, White RK. Patterns of aggressive behavior in experimentally created social climates. *J Soc Psychol* 1939;10:271-299.
- Burns JM. *Leadership*. New York, NY: Harper & Row; 1978.
- Greenleaf R. *Servant Leadership*. Mahwah, NJ: Paulist Press; 2002.
- Manfelow J. Servant leadership: opinion. Available at: [http://www.mindtools.com/pages/article/newLDR\\_93.htm](http://www.mindtools.com/pages/article/newLDR_93.htm). Accessed November 13, 2011.
- Vroom VH, Jago AG. The role of the situation in leadership. *Am Psychol* 2007;62:17-24.

46. Jackson J, Bosse-Smith L. *Leveraging Your Leadership Style Workbook: Maximize Your Influence by Discovering the Leader Within*. Nashville, TN: Abingdon Press; 2008.
47. Schein EH. Three cultures of management: the key to organizational learning. *Sloan Manag Rev* 1996;38(1):9-20.
48. Schaeffer LD. The leadership journey. *Harv Bus Rev* 2002;80(10):42-47.
49. Kippenberger T. *Leadership Styles*. Oxford: Wiley; 2002.
50. Miller RF, Mark SM, Powell M. Assessing your aptitude for pharmacy leadership. *Am J Health-Syst Pharm* 2008;65:1-4.
51. Goleman D. *Emotional Intelligence: Why It Can Matter More Than IQ*. New York, NY: Bantam; 1997.
52. Collins SK. Succession planning: perspectives of chief executive officers in US hospitals. *Health Care Manager* 2009;28:258-263.
53. Conger JA, Fulmer RM. Developing your leadership pipeline. *Harv Bus Rev* 2003;81:76-84.