



S. Harvey Price is editor of *For Your Advantage*. A health care industry strategist based in Boca Raton, Fla., Mr. Price has worked as an independent consultant since 1971. His clients are community hospitals, hospital systems and major corporations.

### About FYA

FYA - *For Your Advantage*, is a free twice-monthly newsletter published by TrendLeader Connections.

With every issue, FYA provides insights into the topics that concern healthcare leaders today and the challenges that will be faced in the near future.

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406-586-8775  
[www.ForYourAdvantage.com](http://www.ForYourAdvantage.com)

## The Next Generation of Healthcare Leadership- What Will It Take?

By Thomas J. Senker

President /CEO, Newton (NJ) Memorial Hospital

*Tom Senker has been a very successful and highly respected hospital leader. His son, T.J. Senker, is following in his footsteps. The younger Senker is currently the chief operating officer of St. Mary's Hospital in Waterbury, CT. He will react to his father's guest column next month.*

**A**s a hospital CEO approaching the twilight of my career, whose son has also chosen a career in hospital administration, I have been fortunate to enjoy many fascinating discussions about the challenges future leadership face in our profession.

For me, healthcare has always been and continues to be an exciting career and passion. Where else can you have such a variety of complexity and meaningful simplicity, from both an organizational and relationship perspective? Management guru Peter Drucker commented many years ago that the profession of hospital administration was one of the most difficult in all of management.

When considering leadership and the future, two questions immediately come to mind. First, what does it take to be a successful future healthcare leader? And, is the healthcare industry poised to provide an environment that will attract and retain the best and brightest?

I have always believed that there is no substitute for what in conventional wisdom is referred to as "core competency." Whether in medicine or in management, it is essential to have a sound understanding of the relevant disciplines. In the executive suite, these include, but are not necessarily limited to accounting and finance, organizational behavior, quality and satisfaction, ethics, marketing, human behavior and strategic thinking. While accomplished leaders consistently surround themselves with experts, having an indisputable knowledge base is fundamental to avoid having the "wool pulled over ones eyes."

When considering the issue of character, integrity is vital. Integrity is something you can't buy. It's either part of you, or not. You may survive without it; and perhaps even kick butt for a short period. However, the lack of it will eventually catch up with you. The examples are many and dramatic with the fall of the **Allegheny Health, Education and Research Foundation (AHERF)** being among the most noteworthy. Adherence to basic values, ethical principles and common decency will never fail you. And in this arena, you rarely, if ever, get a second chance on a first impression.

It's no secret that healthcare is a relationship-based business. The variety

## The Next Generation of Healthcare Leadership (Continued...)

of interpersonal interactions is almost limitless and includes all aspects of life and human behavior. Everyone is an expert and wants the best healthcare that someone else's money can provide. Physicians control the production process and have a relationship with our organizations that is problematic almost by design. Successful leaders must be able to cope and thrive in this environment through trust, reliability and creating an environment that values partnership and the achievement of mutual goals.

Being able to develop and articulate a vision is also one of those "must haves." With hospitals operating in such a dynamic environment, the ability to anticipate and manage change is a critical skill. Retaining the status quo will surely not cut it. The reality is that world-class performance in today's environment demands nimble organizations with leaders who are creative, innovative and relevant to the world in which they operate.

This business called healthcare is not for the faint-hearted. It requires resilient, high-energy, can-do individuals who love what they do, have relatively thick skins and can also make difficult decisions. Matching high levels of expectations from demanding constituencies with increasingly limited resources requires a unique combination of guts and passion.

And, all of this must be accomplished while balancing the obviously important personal and family side of one's life!

In addition to the above, meaningful exposure to the front lines is crucial and often difficult to obtain in today's world. While recognizing limited organizational resources, the healthcare profession needs to re-commit to providing mentorship opportunities through residencies, practicums, coaching, counseling and networking. There continues to be no better strategy for a young professional than to identify a respected leader and acquire invaluable hands-on, practical experience through a mentor relationship.

Clearly, successful leadership in the world of healthcare and hospitals requires a special set of skill and attributes. In today's healthcare arena, we increasingly need young and vibrant men and women who are ready, willing and able to take the leadership reigns as a life's work with its many rewards.

From my perspective, the future remains bright!

*Thomas J. Senker - President /  
CEO, Newton (NJ) Memorial  
Hospital*



### About



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### EMR Déjà Vu All Over Again

By: Rick Kneipper, Chief Administrative Officer and Co-Founder of PHNS

Remember a decade or so ago when soothsayers said electronic medical records ("EMRs") would transform the healthcare industry? And then precious little happened? Then in the last few years the President, most Congressional leaders and most Presidential candidates have become vocal cheerleaders for EMRs. And EMRs have been advocated in previous FYA commentaries by H. Stephen Lieber, president and CEO of HIMSS (8/13/03), Phil Incarnati, CEO of McLaren Health Care Corporation (10/20/03) and yours truly (9/7/04).

Suddenly EMRs seem to have arrived. According to the recent 17th Annual HIMSS Leadership Survey, 67 percent of 473 surveyed U.S. hospitals have an EMR system (24 percent have a fully functional EMR and 36 percent have begun an EMR implementation) or plan to purchase one! And only 12 percent of the survey respondents did not have a plan to implement an EMR, compared to 17 percent in the same survey one year ago. Significantly, 61 percent said that EMRs are the most important IT application that they will implement during the next two years.

Even more interesting, albeit not surprising to IT enthusiasts, is the conclusion of researchers at Florida State University that acute care hospitals can see a financial benefit from investing in IT such as EMRs, computerized physician order entry and supply chain management systems. The study concluded that new IT investments not only will provide a direct financial benefit to hospitals, but that hospitals can use IT to control increasing healthcare costs.

But not all new IT technologies are being fully embraced by hospitals, at least not yet. According to a recent HIMSS study only 5.7 percent of nongovernmental hospitals have implemented computerized physician order entry ("CPOE") systems despite the overwhelming evidence that

implementing CPOE systems can dramatically improve safety and accuracy of pharmaceutical prescriptions. Healthcare improvement advocates such as Leapfrog have aggressively advocated CPOE as a way to reduce patient deaths. So why haven't CPOEs and other new technologies reached the level of acceptance of EMRs?

The good news is that IT is finally becoming a critical strategic enabler for hospitals, at least as far as EMRs are concerned, but the bad news is that hospitals still have not yet taken advantage of other new IT applications such as CPOE that could also significantly improve the quality and safety of healthcare services. Why? I don't know - do you?



I would like to hear your comments.  
Send them to:  
[Richard.Kneipper@phns.com](mailto:Richard.Kneipper@phns.com)

#### About



FYA - For Your Advantage is brought to you by TrendLeader Connections. The function of TrendLeader Connections is producing educational materials and seminars that help healthcare executives differentiate between fads and trends; and making connections with "Trend Leaders" within the healthcare industry.

We are committed to delivering new perspectives and ideas, creative and innovative healthcare solutions, provocative concepts and quality educational materials to today's healthcare leaders. We want to concentrate on "what comes after what comes next."

## Measure To Improve, Not To Impress

By Fred Lee

Let's imagine checking into a Disney resort hotel. Pretend that at the registration desk they show you a copy of their guest satisfaction survey and let you know how important this survey is to them. They explain that they want you to be able to put a five (very satisfied) for each question. And then they say, "If, at any time, you do not think we have earned a five, please call us and let us know so we can rectify the situation immediately."

Let's also pretend that after a couple of days at the resort you get a knock at the door. It is the general manager of the hotel. He asks if he can come in and talk about something with you. Once more you are told, now by a person in authority, that this survey means a lot to Disney, and if, for any reason, you do not think you can conscientiously give a five to every question, you are expected to call the general manager and let him know.

You check out on Sunday morning. At the front desk let's imagine you are confronted a third time with the guest survey and told that it will be arriving in the mail for you to fill out and return to the company that is doing the surveys for Disney. Is there any reason you cannot give a five on every question you are asked, because if there is, it is only fair that Disney know about it right away and have a chance to address it with their staff.

What would you think if this really happened at a Disney resort? A little too eager to influence your response? Pressuring you? Intimidation? Pushy? Yet hospitals all over the country are doing just that. Why? I believe it's because hospitals have joined healthcare systems where many hospitals compete to have the best numbers in the system and bonuses are tied to their rankings. This makes it more important to managers to get high scores than to get honest feedback.

As far as I know, pressuring guests to give a higher than intended satisfaction score on a survey is not being done in hotels. So if hotels don't do it, where are we getting this practice? Through personal experience I know of at least one other industry in which competition, and corresponding financial remuneration, has caused managers to try to look better than they are by getting customers to overstate their actual assessment.

I ran into this recently when I took my car to a dealer for some repairs. Stapled to my bill was a form letter from the service manager. Why does the automobile dealership do this? For the same reason hospitals are doing it. Bonuses are

probably attached to getting the highest ratings in a region or state. Where there is competition for rewards or fear of consequences based on the numbers, people will naturally do whatever it takes to get high numbers as long as it cannot be construed as outright dishonest.

Rewards and punishments will help a company's scores go up, but at what price? Have their scores become more important than the truth? Will they go up because customer loyalty has gone up, or will they go up because competition and fear has motivated managers to figure out how to blur the line between satisfied and loyal to get customers to raise the score without raising their opinion?

It is rapidly becoming common practice for hospitals trying to make a big push in service excellence to go over the survey at admission and urge the patient to either give fives or complain. Then after the patient is in a room, a nurse manager, often accompanied by another nurse, will visit each patient and emphasize the importance of giving fives on the nursing section of the survey or letting the nurse manager know what it would take to get fives. Finally, at discharge, the patient hears the same counsel one more time. I asked a director of nurses about this practice, and her response was, "It is just about the numbers. If we are held accountable for the numbers, and our bonuses are attached to the numbers, we will do what it takes to legally get those numbers. That's what the system rewards."

Make no mistake; this manipulation works. If we pressure people to inflate their ratings, they will do it. With this technique any hospital can effect a significant positive change in their scores overnight without doing anything differently to earn the scores. It may even place them in the highest percentile among hospitals collecting satisfaction scores. But, at what price is this reward achieved? Regrettably the price is self-induced blindness by creating a false sense of security in the one honest number that can protect its future—the percentage of loyal promoters.

More on this subject next month.

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*Fred Lee is a highly popular speaker; and the author of "If Disney Ran Your Hospital." His book was named the 2005 book of the year by the ACHE.*

You can contact Fred at  
[FredLee@patientloyalty.com](mailto:FredLee@patientloyalty.com)

