M Northwestern Medicine[®] Feinberg School of Medicine

A Leadership Training Program for Chief Residents and Fellows

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Program Background

- Chief residents and fellows are often confronted with managing staffing, team conflicts, struggling learners and motivating large groups.
- Chiefs operate as middle managers of program, GME and hospital hierarchy.¹
- Chiefs are informally taught how to lead clinical teams, and are infrequently taught principles in management, advanced communication skills and conflict resolution.

¹Berg et al. Middle Manager Role of the Chief Medical Resident: An Organizational Psychologist's Perspective. JGIM. 2007.

Program Background

- 10-month curriculum. Developed in 2018, refined in following years.
- Five chief medical residents (CMR) and 9 chief fellows.

Instructors:

Todd Murphy and Adam Goodman,

Northwestern Center for Leadership and McCormick School of Engineering

Format

Reading, self-assessment inventories, two 1:1 coaching sessions, 12 one-hour interactive seminars led by two instructors from the Center for Leadership.

Content Focus

First Half: Self-Awareness

Second Half: Social-Awareness and Leading/Managing/Coaching Others

Topics and Logistics

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First Half

Self-Awareness

Second Half

Social-Awareness

Leading/Managing/Coaching Others

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Support Team	Who can I trust to support me while being honest with me about my gaps and blind spots?		



Overview of Program Structure

Eligibility Chief Resident, Chief Fellow or selected Senior Fellow

Curriculum Individual assessments and highly-participative workshops

Duration September through May

Schedule 1-Hour group meetings, 1-2x/month on Wednesdays at 5pm.

Location Chicago NU campus.

Commitment Approximately 2-3 hours of course work is required per month.

Fee \$4,620/person (covered by your unit).

Program Assessment

Objectives

Primary

Assess the impact of an engaging, small group-based longitudinal curriculum on self-reported leadership skills among chief residents and chief fellows.

Secondary

Assess Chief Resident and Fellow wellness and burnout.

Methods

- The curriculum was assessed using a 12-item pre-post survey.
- 5-point Likert scale:
 - Self-awareness of strengths
 - Social-awareness
 - Adaptability, coping and conflict resolution skills.
- Survey scores were compared via paired sample T-tests
- Narrative comments were solicited for qualitative analysis.

Results: Demographics

- The curriculum has run for three years
- Participants
 - 2018-19: 13
 - 2019-20: 14
 - 2020-21: 5 (Pandemic limited curriculum to chief medical residents).
- 15 chief medical residents and 17 chief fellows
- 14 men and 18 women

Results: Quantitative

Self-Awareness
Leading Others
Coping and Adaptability

85% response rate across all timepoints.

Aggregate survey scores rose:

3.19 (pre) \rightarrow 4.18 (mid) \rightarrow 4.56 (post)

Items rated the highest post-curriculum:

Coping and adapting (4.56)

Lowest rated:

Awareness of others (4.15)

All items increased to the same degree.

Curriculum Assessment Tool

I know what my best leadership capabilities are.

I know how to identify the best leadership capabilities of my colleagues.

I am prepared to cope in healthy ways with day-to-day work challenges.

I am prepared to respond to hostile/dysfunctional systems.

I have grown in my understanding of my best leadership capabilities.*

I have grown in my understanding of how to identify the leadership capabilities of my colleagues.*

I have a greater understanding of who my best self is.*

I am more consistently my best self in my day-to day work.*

My increasing awareness about leadership is improving the way I lead others.*

My increasing awareness about leadership is improving the way I work with others.*

My increasing awareness about leadership is improving the way I influence the people to whom I report.*

I am more adaptable in my approach to working with others.*

*Survey items not asked in the pre-curriculum survey

Results: Quantitative

Survey Item	Pre-Curriculum Survey	Post-Curriculum Survey	р
Self Awareness (n=27)	3.15 (0.66)	4.26 (0.53)	<0.001
Awareness of Others (n=27)	3.03 (0.71)	4.15 (0.46)	<0.001
Coping/Adapting (n=54)	3.28 (0.86)	4.35 (0.55)	<0.001

Survey Item	Mid-Curriculum Survey	Post-Curri8culum Survey	Р
Self Awareness* (n=81)	3.98 (0.67)	4.40 (0.61)	<0.001
Awareness of Others* (n=108)	4.14 (0.71)	4.56 (0.54)	<0.001
Coping/Adapting* (n=57)	4.15 (0.86)	4.56 (0.70)	0.013

^{*}Survey items not asked in the pre-curriculum survey

Results: Narrative Comments

I always thought of development as 'addressing my weaknesses.' However, based on the class discussion and reading, I now think more seriously about **developing and embracing my strengths**.

Being vulnerable is key to develop rapid trust.

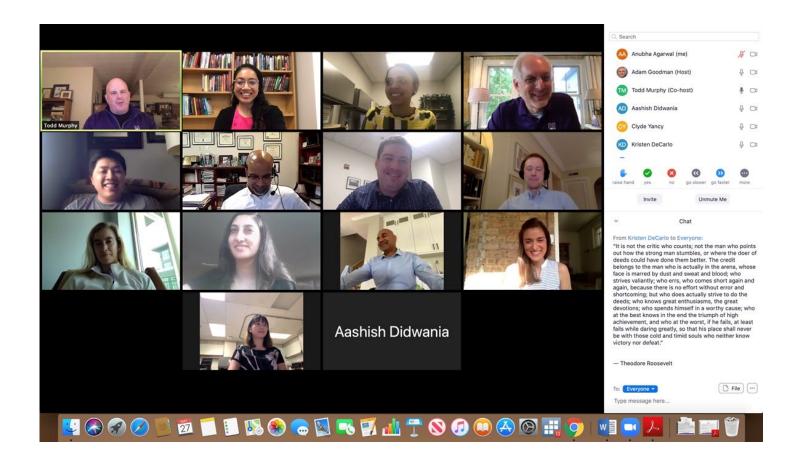
Rather than jumping immediately to possible solutions (which is something I tend to do in my nature to want to "fix" something), learning to understand who is where in the decision process and simply **starting at agreeing a problem (or opportunity) exists** was an important approach that taught me how to diffuse a situation.

I can now recognize what projects or issues are organizational priorities that will be well-supported and **how to generate buy-in from colleagues** and herald resources from my superiors to complete those projects.

The Northwestern leadership program...provided an environment to learn from peers I otherwise would not have met, which proved invaluable.



A Word from Previous Participants



Departmental Benefits

- Competitive advantage when recruiting
- Added tool for retention Investing in trainees and getting them invested
- Effective Approach for addressing physician wellness and burnout
- Critical Skill set for training in academic medicine

Questions?

