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Leadership in Academic Medicine: Executive Coaching: A Worthwhile Investment for Physicians and Scientists

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—By Julie Edwards, special to the *Reporter*

Physicians and scientists often are promoted to executive positions based on their research or clinical success. When they find themselves in leadership roles, they may feel unprepared to navigate their new roles. Leadership seminars or workshops can help, but executive coaching offers a personalized experience.

According to Margaret Cary, M.D., M.B.A., M.P.H., of the Cary Institute, it can be challenging for physicians in leadership roles to excel in administration and management. “They don’t have an ‘honest broker,’ someone who’s in their corner, someone to hold up a mirror and gently say, ‘So what does that mean?’” she said.

The AAMC’s Leadership and Talent Development group recently hosted a meeting in Chicago to address the value of executive coaching for medical schools and teaching hospitals and individuals interested in leadership roles in academic medicine. Executive coaching helps people in leadership development hone leadership skills by providing feedback, support, and challenging ideas, according to Kevin Grigsby, D.S.W., AAMC senior director of leadership and talent development.

“Typically, executive coaches participate in a time-limited relationship with an executive leader to inspire, transform, and enhance executive leadership skills,” Grigsby said. “The executive leader emerges from the coaching relationship with an enhanced behavioral repertoire enabling her or him to improve the performance of the organization and the people comprising the organization.”

According to a Manchester Consulting Group study of executives at Fortune 100 companies, executive coaching pays off. Those who participated in executive coaching experienced a 77 percent improvement in relationships, 67 percent improvement in teamwork, 61 percent improvement in job satisfaction, and 48 percent improvement in quality. The benefits can be expected in academic medicine and science, as well as in the private sector.

A 2010 article, published in *Academic Medicine*®, reported that of five new departmental executive officers at Carver College Medicine in Iowa who had executive coaching for a one-year period, all said they would recommend an executive coach to others in new leadership positions, and four of the five said the experience improved their leadership skills. Another article, published in 2004 in the *Journal of Health Administration Education*, found that coaching or mentoring from another leader was among the most effective ways for physicians to develop leadership competencies.

“Executive coaching validated my professional strengths, offered useful tools to further enhance my executive functioning, and provided a mechanism for senior leadership to acknowledge and capitalize on the contributions I make to my department,” said Angela Sharkey, M.D., associate dean for faculty affairs and professional development at Saint Louis University School of Medicine.

Why do physicians in executive roles seek coaching?

“The smartest ones want to know what career management looks like. Their education doesn’t teach them how to negotiate, how to set career goals, or how to manage conflict,” said Janet Bickel, M.A., of Janet Bickel & Associates.

Unlike mentoring, which can be an informal relationship, or training workshops, executive coaching helps leaders look toward the future and is customized to the individual client.

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"Mentors are for learning a system, which is critical for the first two years, but when you're looking at the next two years or the next five years, that's what a coach is for," said Patti Thorn, Ph.D., of Living in Vision.

Participants at the AAMC meeting said many people in the academic medicine community do not understand the purpose of coaching, and some even compare it to psychotherapy.

"The difference between coaching and [psychotherapy] is like the difference between physical therapy and personal training," said Jan Rybeck, an executive coach. "Physical therapy deals with healing and rehabilitation for injury. It serves to rebuild. Personal training uses a lot of the same tools, but to build rather than rebuild."

Several experts pointed to coaching as a way to continuously improve. "When physicians come to me, they say, 'Coaches fix people, right? I don't want people to think I'm broken,'" Thorn said. "But coaching is not a profession directed at fixing deficiencies or fixing poor performers."

In fact, many organizations view coaching as an asset that can take high performers to the next level. Cary noted that one medical school dean said some prospective faculty members now negotiate for a coach as part of their hiring package.

"Entering a new organizational culture or assuming a new role in a familiar culture is very challenging," Grigsby said. "When athletes move to a different team or begin to train for a new event, high-quality coaching is always a part of the transition. Academic medicine and science can learn from athletes. Talent is not enough. Coaching and disciplined practice are always a part of success."

Associate editor Sarah Mann contributed to this article.

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