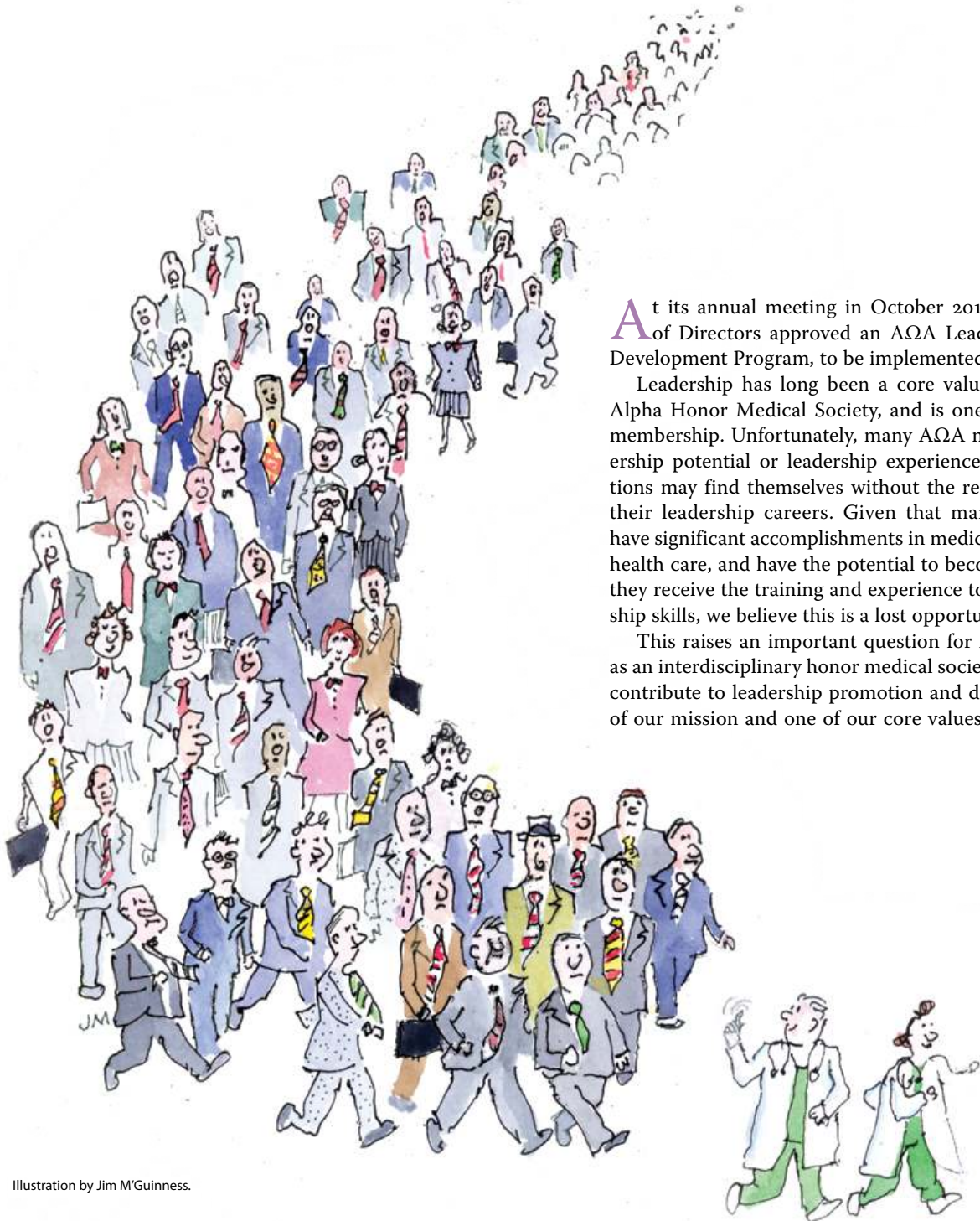


*Editorial*

# AΩA Fellow in Leadership Award

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At its annual meeting in October 2013, the AΩA Board of Directors approved an AΩA Leadership Award and Development Program, to be implemented in 2014.

Leadership has long been a core value of Alpha Omega Alpha Honor Medical Society, and is one of the criteria for membership. Unfortunately, many AΩA members with leadership potential or leadership experience at mid-level positions may find themselves without the resources to advance their leadership careers. Given that many AΩA members have significant accomplishments in medicine, education, and health care, and have the potential to become great leaders if they receive the training and experience to hone their leadership skills, we believe this is a lost opportunity for medicine.

This raises an important question for AΩA: How can we as an interdisciplinary honor medical society best support and contribute to leadership promotion and development as part of our mission and one of our core values—"to improve care

Illustration by Jim M'Guinness.

for all by encouraging the development of leaders in academia and the community”?

### Leadership in medicine

Leadership in medicine, medical education, and health care is more complex in the twenty-first century than ever before. Because of physicians’ unique knowledge in medicine and in our understanding of medicine’s core professional values, physicians are ideally suited to serve as leaders in these areas. Our professional experiences in serving and caring for people and working with teams in the health professions provide a solid foundation for leadership. Physicians understand clinical medicine and medical education, they embrace the vital importance of medical and scientific research, and they have earned respect for their contributions to caring for patients. These integral parts of the professional life of a physician are the values affirmed in the Medical Professionalism Charter that frames the teaching of professionalism at the undergraduate and graduate medical educational levels and emphasizes the primary principles of patient welfare, patient autonomy, and social justice.<sup>1</sup>

These professional values and the experiences physicians acquire during their training and careers provide a solid foundation for developing into leaders in medicine. But those who aspire to leadership roles need to consciously prepare to learn how to become great physician leaders. Great leaders can be developed through education and training, working with mentors or coaches, practicing what they have learned, and reflecting on what they have experienced.

Wiley Souba, MD, in “Building Our Future: A Plea for Leadership,”<sup>2</sup> writes: “Fundamental leadership principles are critical to building a better future: 1) recognizing that the work of leadership involves an inward journey of self-discovery and self-development; 2) establishing clarity around a set of core values that guides the organization as it pursues its goals; 3) communicating a clear sense of purpose and vision that inspires widespread commitment to a shared sense of destiny; 4) building a culture of excellence and accountability throughout the entire organization; and 5) creating a culture that emphasizes leadership as an organizational capacity. Leadership and learning are inextricably linked.”

As Dr. Souba notes, developing into an excellent leader requires more than motivation—it is an ongoing, continuous process. One needs to recognize the challenges and opportunities and then proceed to lead, and in doing so, make a positive difference.

Souba and others have emphasized that leadership development and preparation begin with understanding and leading oneself. As he notes, the “inward journey” occurs both at the beginning of the process and continues throughout it. Effective leaders are self-aware, and their self-awareness results in integrity and authenticity that constitute the framework for their leadership, and is naturally connected to the basic

tenets of medical ethics and professionalism. He writes, “The transformation of medicine and health care begins with a shift in our understanding of what it means to be a leader”—thus individual and personal change are requirements for organizational change. This principle of leadership from within can be taught to those who aspire to become great leaders.

### The professional values of medicine

Medicine is based on a covenant of trust, a contract we in medicine have with patients and society. Medical professionalism stands on this foundation of trust to create an interlocking structure among physicians, patients, educational and medical institutions, and society that determines medicine’s values and responsibilities in the care of patients. Leadership in medicine and related organizations must be grounded in core professional beliefs and values, which start with an obligation and commitment to serve and care for people, and these primary tenets: 1) do no harm, and 2) treat others as you would like to be treated. The corollaries to these primary tenets include:

- Integrity and honesty: believe and do what is right.
- Loyalty and duty: hold to your values, commit to and fulfill your duty to patients, team, colleagues, and the profession, and advocate for the best care for all patients.
- Respect and care: consider the views and needs of patients and teams and treat everyone with benevolence, compassion, empathy, and consideration.
- Serve: give your best to patients and the profession of medicine.
- Communicate: listen with understanding and communicate effectively.

We believe that the best and most sustainable leadership for medicine must be grounded in these professional values.

### Leadership and servant leadership

Along the spectrum of leadership styles, from manager leaders and traditional top-down leaders to laissez-faire and transformational leadership styles, we believe that the servant leadership model developed by Robert Greenleaf in the 1970s best fits the needs of the medical profession.

Servant leadership is based on specific core values, ideals, and ethics, in much the way that the culture of medicine is shaped. Because medicine is at its core a profession that serves others, servant leadership, with its emphasis on service as the basis for furthering an organization’s objectives and values, is worthy of consideration as a model for medical leadership.

Rather than focusing on themselves, servant leaders and their teams dedicate themselves to a higher purpose, cause, or principle worthy of their commitment. They follow truth and principles and share values and trust among team members and those they serve. This leads to moral authority in the leader and team. Servant leaders engage their teams in creating a shared vision—a compelling picture of the future—based on values.

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Servant leaders rarely have or need the executive power to make most important decisions alone; they instead inspire and infuse the team with their vision, set a positive example, and use the shared sense of purpose and the tools of teamwork to get the right things done. Servant leaders work for and with their teams, and recognize and celebrate their successes.

We believe that effective, sustainable, and excellent leadership should be based on core professional and personal values and the commitment to servant leadership, while recognizing the value of other leadership strategies and approaches.

### The Alpha Omega Alpha Fellow in Leadership Award

AΩA, as part of our society's mission, will advocate for and support the work, development, and success of a new generation of leaders.

The AΩA Fellow in Leadership Award will recognize and support further development of outstanding leaders exemplifying the qualities of leading from within, the society's professional values, and the concepts of servant leadership.

The five essential components of the AΩA Fellow in Leadership Award are: 1) Self-examination, the "inward journey," leading from within; 2) a structured curriculum focused on topics related to leadership, including an understanding of the relationship between leadership and management; 3) mentors and mentoring; 4) experiential learning to broaden the perspective and understanding of leadership as it relates to medicine and health care; 5) team-based learning and developing communities of practice.

Members of AΩA need to ask themselves where and how they can provide leadership in the sector of medicine they serve. With this award, AΩA reaffirms its commitment "to improve care for all by encouraging the development of leaders in academia and the community."

Applications for the award were received by local chapters until April 1, 2014, and the announcement of the first year's fellows will be made on June 1, 2014. The program will begin on July 1, 2014.

The award was open to applications from mid-career AΩA members who provide outstanding leadership within organizations in medicine and health care, including schools of medicine, academic health centers, community hospitals, clinics, agencies, or organizations, and who show a high promise for future leadership success and contribution to medicine. Up to three \$25,000 fellowships will be awarded, to be used for further leadership development.

The applicants were required to provide a detailed description of the following:

1. An experience that will broaden the applicant's perspective on leadership related to health care and medicine. The experience must include working with an individual mentor or mentorship team at the senior leadership level.

2. Designate at least one mentor. Mentors will be required to assist the applicant in completing a project, serve as a role model, offer advice as needed, and connect with key individuals either within or external to the applicant's organization.

3. Describe an action project that will be completed in the course of the year, which will be presented at an annual meeting. Examples of such projects could be: developing a leadership curriculum for medical students at the home institution or local medical society; integrating leadership into everyday practice; leading a team; implementing and leading interventions and/or policy to positively address important challenges.

4. A commitment from the applicant's institution to allow the applicant time to complete the proposed curriculum.

5. The mentor's commitment to the mentoring plan and supporting the fellow for ongoing leadership opportunities after completion of the fellowship.

The fellows will be required to participate in a defined and structured curriculum focused on topics related to leadership in medicine. The fellowship will begin with an orientation meeting and the course *The Science and Practice of Leading Yourself* at the Geisel School of Medicine at Dartmouth.<sup>3</sup> Bimonthly teleconferences will be held with fellows and members of the AΩA Board of Directors that will focus on topics related to challenges in leadership or project-related concerns. Fellows will be encouraged to create a community of practice with each other. They will be expected to serve on the selection committee for future fellows and to provide mentorship for others pursuing leadership development.

I want to thank the AΩA Board of Directors Leadership Committee, which worked on the development of the AΩA Fellow in Leadership Award and Program over the last two years. The committee was chaired in the first year by Dr. John Tooker, and in the second year by Dr. Eve Higginbotham. Committee members included: Carol A. Aschenbrener, MD; Richard B. Gunderman, MD, PhD; Page Morahan, PhD; Alan G. Robinson, MD; Wylie W. Souba, MD, DSc, MBA; Joseph W. Stubbs, MD; Steven A. Wartman, MD, PhD; Donald E. Wilson, MD; and AΩA staff member Debbie Lancaster. I worked closely with the AΩA Leadership Committee chairs and as a committee member to create and implement the AΩA Fellow in Leadership Award and Program.

I also want to thank the AΩA Board of Directors for their contributions in developing the program and for their support of the award.

### References

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2. Souba WW. Building our future: A plea for leadership. *World J Surg* 2004; 28: 445–50.
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