Building Relationships

THE KEY TO SUCCESS AS A FAMILY PHYSICIAN AND FAMILY MEDICINE LEADER

FAMILY MEDICINE FORUM  NOVEMBER 14 2014
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Building Relationships

No Conflicts of Interest
Building Relationships

Background to this presentation
Enhanced understanding of

(i) the importance of building strong relationships in medical practice and organizational leadership

(ii) the leadership qualities that lead to building and maintaining strong inter-personal and inter-organizational relationships
Leadership and Building Relationships

References

Good to Great : Jim Collins
Built to Last : Jim Collins
The Effective Executive : Peter Drucker
The 21 Indispensable Qualities of a Leader: John C Maxwell
Drive: Daniel Pink
Never Give In : Sir Winston Churchill
Primal Leadership: Realizing the Power of Emotional Intelligence : Daniel Goleman
Better ; Atul Gawande
Outliers: Malcolm Gladwell
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Definition

Relationships are the mutual dealings, connections and feelings that exist between two parties.
Building Relationships

“True leadership always involves other people ... both within and external to your organization”

The 21 Indispensable Qualities of a Leader

“The ability to work with others and build relationships is absolutely indispensable for effective leadership”

Female Executive Magazine
“Society is comprised of a vast network of relationships between human beings. The key components of society are not human beings but rather the relations between them ... individuals are merely the foci in the network of relationships”

Arnold Toynbee
“One good reason to limit close relationships is that 3 out of 4 murders are committed by people who know the victim”

George Carlin
“I love to shop - so after a relationship breaks down I always buy a new outfit. Sometimes, if I see a great outfit, I’ll break up with someone on purpose.”

Rita Rudner
Building positive relationships with patients is essential to good medical practice.

Building positive relationships with other stakeholders is essential to good organizational leadership.
Starfield, Macinko et al found that access to a family/primary care doctor (+/- team) is the most significant factor leading to better population health outcomes with the main reason for the better outcome being the continuity of the relationship over time between the patients and the caregivers.
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Startling positive health outcomes of population in Roseta PA

Explanation:

“Outliers” Malcolm Gladwell
Building Relationships

Sir William Osler
The father of modern medicine

“Everything Osler did spoke to the importance of building relationships”

John Maxwell
The 21 Indispensable Qualities of a Leader
Building *Relationships*

**Sir William Osler**

“When Sir William Osler died he was remembered not only for his brilliance as a physician and teacher but as one who possessed “the genius of friendship.”

It was his interest in others that was his most outstanding attribute ... it was from his humanity, his extraordinary interest in others that all his other powers seemed to flow.”

The 21 Qualities of A Leader: John Maxwell
“Family Medicine is the only medical discipline to define itself in terms of relationships rather than by a particular body system, technology or technique”

Ian McWhinney
CanMEDS – FM Roles and The Principles of Family Medicine

- Seven Roles with FM Expert as integrating Role
- Four Principles inspire and inform the Roles as “roots”

Adapted from the CanMEDS Physician Competency Diagram with permission of the Royal College of Physicians and Surgeons of Canada. Copyright © 2009.
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The Principles of Family Medicine

The patient – physician relationship is central to the role of the family physician.

The family physician is a resource to her/his patient population

Family medicine is community based

The family physician is a skilled clinician
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The Principles of Organizational Leadership

Building positive inter-personal / inter-organizational relationships is central to the role of an organizational leader.

Organizational leaders are community – focused.

The organizational leader is a resource to a defined population.

Organizational leaders are skilled and knowledgeable.
CanMEDS Roles
For physicians AND organizational and system leaders

- Expert
- Communicator
- Collaborator
- Advocate
- Professional
- Manager
- Scholar
Qualities of a leader relevant to building and maintaining relationships

<table>
<thead>
<tr>
<th>Accountable</th>
<th>Advocate</th>
<th>Available</th>
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<tbody>
<tr>
<td>Caring</td>
<td>Charismatic</td>
<td>Cheerful</td>
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<tr>
<td><strong>Collaborative</strong></td>
<td>Committed</td>
<td><strong>Communicator</strong>*</td>
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<tr>
<td>Compassionate</td>
<td>Competent</td>
<td>Confident</td>
</tr>
<tr>
<td>Courageous</td>
<td><strong>Expert</strong>*</td>
<td>Flexible /Fair/Balanced</td>
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<tr>
<td>Focused</td>
<td>Genuinely interested</td>
<td>Honest</td>
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<tr>
<td>Intelligent</td>
<td>Intuitive</td>
<td><strong>Knowledgeable</strong>*</td>
</tr>
<tr>
<td>Listener</td>
<td><strong>Organized</strong>*</td>
<td>Passionate</td>
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<tr>
<td><strong>Personal</strong>*</td>
<td><strong>Professional</strong>*</td>
<td>Realistic</td>
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<tr>
<td>Reliable</td>
<td>Respectful</td>
<td>Respectful</td>
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<tr>
<td>Responsible</td>
<td>Responsible</td>
<td>Sense of humour</td>
</tr>
<tr>
<td><strong>Skilled</strong>*</td>
<td>Sense of community*</td>
<td>Team player</td>
</tr>
<tr>
<td>Trustworthy</td>
<td>Supportive</td>
<td><strong>Visionary</strong></td>
</tr>
</tbody>
</table>

* Principles of FM /Can MEDS Role

Collins, Maxwell and others
**Building Relationships**

**BE THERE : BE PERSONAL**

“I don’t want to be just a voice on the phone ......I need to meet and get to know people face to face over time if we are going to develop a sincere relationship . That way, if and when we run into problems we can deal with them and it doesn’t become adversarial because we have come to trust each other and we have the confidence we can work it out”

Wayne Huizenga
Founding CEO of 3 Fortune 500 companies
“Leaders need to find compromise among opposing factions debating key issues while at the same time maintaining and communicating the ultimate vision to all publics.”

Abraham Lincoln
‘If we would all just listen, everything else would fall into place. It is the key to being patient –centered’

Ian McWhinney

“Listen to your patient. He is telling you the diagnosis”

Sir William Osler
“To be successful you have to be able to communicate and relate to people. They have to be satisfied with your personality to be able to do business with you and to build a relationship with mutual trust”

George Ross
Executive VP- The Trump Organization
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To build your relationship with patients don’t be afraid to ask non scripted questions
To build your relationships with peers don’t be constantly angry, irritable and criticizing what others do
Be aware of your own inadequacies and be open to change

Adapted from “Better’
Atul Gawande
Building Relationships

Building Trust

“The glue that holds all (personal and professional) relationships together is trust ... and trust is based on integrity”

Brian Tracey
Author and Professional Development Trainer
The Phoenix Seminars
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Characteristics of leaders who fail to build positive relationships

- Bad first impressions
- Moody, non smiling, lacking a sense of humour
- Cynical argumentative, hyper-critical, non constructive criticism
- Perfectionistic, stubborn, inflexible
- Unavailable, always arrive late/leave early
- Dishonest, not trusted
- Incompetent
- Impersonal, disinterested
- Poor communicator – not clear
- Self-centered; inflexible; not collaborative
- Unreliable,
- Impatient

Maxwell, Collins, Gawande
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Characteristics of organizations whose leaders fail to build positive inter-organizational relationships:

- Lack of or unclear strategic objectives/policies/governance
- Inadequate preparation/support of org representatives
  - Poor leadership skills development and enhancement
  - Inflexible or inconsistent positions/no room to negotiate
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Be there
Be on time / stay for complete meeting / show respect
Arrange one on one informal meetings (coffee, lunch, dinner) with other leaders; be appropriately personal
Be open, honest, flexible; show that you care; seek compromise (win/wins)
Identify common goals and objectives (common community)
Share information; be a resource for other stakeholders for information related to your organization (‘How can I help you present our perspectives to your org?’)
Be an advocate/voice not only for your own organization to others and for other stakeholders helping your constituency to better understand their positions/needs (‘your voice in our organization
Allow time for relationship to develop
Revisit challenging areas before sacrificing worthwhile goals
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Stories in family medicine – the CFPC initiative

Experience as a family doctor: my stories / your stories

Experience in organizational work: my stories / your stories