Hospital Managers of the future

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Hospitals in Europe

• Different systems, different organizations, but many common problems:
  • - fundings
  • -human ressources
  • Cost containment
  • Elderly patients
  • The private/public challenge
accreditation

• The European question: we share many problems but we share also many values in different systems
• How to assume quality?
• Accreditation of managers?
• Or accreditation of hospitals?
goal for today: what challenges can we agree on?

• Then in a second attempt:
  • what are the basic competences and specific training options we should focus on?
  • How to develop competences, but also respect of values of future managers?
  • Is a common European approach to continuous education a desirable option?
The values dilemma

• How must a manager think?
• As a responsible for the bottom line of his organization?
• Or
• As a responsible actor of and in a healthcare system?

• *Is medical care a civic right or a market?*
Know how to fight for safety

• shrinking larger hospitals and reserves the COVID pandemic situation would have ended in a national catastrophe
• Hospitals need reserve capacities
• Navigating on just “what is needed at the moment” can be hazardous
Hospitals are the backbone of healthcare systems

• Treat any emergency at any time 24h/24
• Essential in catastrophes, pandemic situations or critical disease
• Essential Training centres for the next generation for nurses and doctors
• Without elaborate hospital centres there will be no future professionals
• This requires visionary organizations and managers
What is a hospital?

- Expert organization with important role of medical professionals, making steering a complicated task
- Requires different skill than classic organization
- Often large organizations are dependant on knowhow and reputation of a few professionals

So any ideas about what we can do?
The decision making process is medical

• Almost no step in hospital process without a prior medical decision
• Medical decision is essential for the costs and for quality output
• Doctors use to be individual thinkers
An essential environment for care is empathy

- Management is responsible for working conditions, environment and the corresponding behaviour of professionals
- Giving care is a very different service industry
- Human values are the key
- As a result managers fall in a constant dilemma between costs, resources, organization and values
Leadership challenges

• Authority on professionals of very different orientations and sometimes culture
• Must understand and manage the differences in a complex production process requiring constant vigilance and team working
• Must not be a doctor, but must have knowledge of medical systems, legal constraints, economics and specific organization psychology
Soft skills, conflict management

• The ever present dilemma between resources, revendications, results and values
• The emotional “advocate of the patient” in my service syndrome
• Must have sensitivity towards listening to staff and know how to deal with emotions, frustrations and ambitions
Communication skills

- Convince & Integrate complete staff in one common vision
- Have 1 shared objective
- Learn to motivate by arguments
- Be understood as a member of the hospital core team not as an adversary for progress
Understand the root causes of statistics

- Excellent benchmark metrics in your surgery department could mean:
- your surgeons are outstanding professionals in their domain
- or they select patients and do not treat risk patients
The PR trap and show

- Know how to deal with the press
- How to explain results, spendings, budgets, invests, and some times incidents to public and politics
- Know how to convince local, regional and national politics of your visions, plans and extensions
- Keep unions calm
Develop a feeling for real useful technologies

• Combination of technology, electronics and AI will completely change medical practice
• But also our ward organizations and nursing
• The professional spectre of our staffs
• It could make our hospitals shrink, but it could also develop us new fields of action out of hospitals
The hospital middle management change

• Hospital production is the result of 1 team with 1 common objective working closely together
• We do not need a separate medical director and a nursing director
• We need a process coordinator
Change and “melting icebergs”

- Hospitals live in a permanent environmental change.
- Social evolutions, political considerations, budgetary restrictions, mergers... change our environment.
- Hospital admission diagnosis change over time.
- COVID will change the perception of hospitals.
- We have to assume a permanent and open minded changing situation.
A possible conclusion

• hospitals are sensible expert organizations requiring highly competent leadership personalities showing human values and technical knowledge

• a manager must develop a high sensitivity towards the needs of society as well his medical and nursing staff. he must understand how metrics are produced

• we think technical and professional knowledge is a condition but continuous education should also focus on our European societal values and education of the future generations of doctors and nurses
CONTACT

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