

# Creation and Utility of an Immersive Resident Elective in Radiology Leadership and Administration



SCHOOL OF **MEDICINE**

# Authors and Disclosures

- Kalen Riley, MD
  - The author has nothing to disclose
- Bilal Tahir, MD
  - The author has nothing to disclose



# Purpose

- Healthcare is an extraordinarily complex field, and studies have shown that the best healthcare organizations are in fact led by physicians
- Furthermore, most physicians want to be led by other physicians as they are trusted to make the best decisions about healthcare delivery



# Purpose

- Developments in radiology such as AI and novel imaging techniques have the potential to improve how we care for patients
- With innovation and associated regulation, however, come an increasingly complex set of leadership challenges for which most physicians are woefully underprepared to deal with



# Purpose

- In order prepare for these challenges one resident in our program began working toward an MBA degree on a part-time basis
  - However, he desired experience in how to specifically apply the concepts learned in business school within a radiology department
- The purpose of this abstract is to describe and evaluate the efficacy of an elective that was created in order to achieve the goal of applying traditional business/leadership skills into the context of a radiology department and to create a blueprint for other trainees with similar interests to follow



# Materials and Methods

- Discussions with the radiology chief (faculty mentor) at a health system affiliated with our institution led to the creation of an immersive administrative elective in which the resident would apply his MBA experiences to problems facing a radiology department
- Since there was no precedent within our program for this type of experience, we needed buy-in from the residency program director, the radiology department chair, and the chief medical officer of the hospital (among several others)



# Materials and Methods

- After securing approval, the resident designed a formal outline of goals and expectations for the elective which were shared with all pertinent leaders
- A pre and post rotation evaluation was given to the resident to assess the efficacy of the experience in specific areas. Responses followed a 1-5 scale with "1" indicating "Strongly Disagree" and "5" indicating "Strongly Agree"



# Results

- The resident described the experience as “eye-opening” and felt he gained a much better understanding of the inner workings of the radiology department and how his MBA skills could be applied to more efficiently lead in this context
- During the month, he attended a multitude of committee meetings related to topics such as credentialing, EHR/PACS updates, and finances/capital requests



# Results

- As part of the experience he was also tasked with independently analyzing and brainstorming solutions to multiple problems currently facing the radiology department, several of which were ultimately implemented as department policy
  - Contrast administration policies
  - Standardized radiology report footers
  - Inventory management
  - Hospital accreditation processes (stroke center certification, trauma verification, etc)
  - Safety and regulation



# Results

- Overall the resident felt he gained a much better understanding of the inner workings of the radiology department and how his MBA skills could be applied to more efficiently lead in this context
- The pre and post rotation Likert evaluations were as follows: general administrative duties (Pre: 2, Post: 4), policy writing (Pre: 2, Post: 4), revenue cycle (Pre: 1, Post: 4), capital budgeting (Pre:1, Post: 3), and interdepartmental relations (Pre: 2, Post: 4)



# Challenges

- Determining how to organize the rotation
  - With no precedent to work from, the rotation structure had to be created from scratch
- Having first written a thorough outline of specific goals for the rotation was critical
  - For example, we made sure to build in opportunities to learn about some of the financial challenges facing a radiology department as the resident has a particularly strong interest in finance



# Key Lessons Learned

- Leading a radiology department is a difficult undertaking that is always a work in progress!
- The issues facing healthcare organizations are complex and certainly require more than a month to fully understand
  - However, as a result of experiences such as this, we believe trainees can have a significant advantage when confronting similar challenges in their post-training practices



# Key Lessons Learned

- Flexibility is critical when planning this type of rotation experience
  - Many of the specific meetings/conferences that were beneficial to the trainee's education only occurred at certain intervals, therefore having a flexible schedule was mandatory



# Conclusions

- The entire field of medicine is in the midst of an unprecedented time of transition, and radiology departments will need strong leadership to help navigate the approaching era of value-based care while continuing to prioritize patient needs
- Those in the best position to help lead departments during this time of transition will not only be skilled radiologists, but also will have intimate knowledge of how organizations operate



# References

- Perry J, Mobley F, Brubaker M. "Most Doctors Have Little or No Management Training, and That's a Problem." 15 December 2017. Harvard Business Review. <<https://hbr.org/2017/12/most-doctors-have-little-or-no-management-training-and-thats-a-problem>>.
- Stoller JK, Goodall A, Baker A. "Why The Best Hospitals Are Managed by Doctors." 27 December 2016. Harvard Business Review. <<https://hbr.org/2016/12/why-the-best-hospitals-are-managed-by-doctors>>.
- Rotenstein LS, Sadun R, Jena A. "Why Doctors Need Leadership Training." 17 October 2018. Harvard Business Review. <<https://hbr.org/2018/10/why-doctors-need-leadership-training>>.



# Thank you for reading!!

- @KRileyMD



SCHOOL OF MEDICINE