

## LEADING YOUR TEAM

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*"The objective of leadership is to accomplish the mission in the minimum time and with the maximum balance of individual needs."*

Dr. T. E. Catanzaro

Profit-based performance standards require effective leadership to make them work as positive motivators. The ultimate objective of leadership in any organization will always be the successful accomplishment of the goals and objectives of that organization. In veterinary practice, Veterinary Consulting International has defined the ultimate veterinary hospital management objective as follows:

TO ENSURE QUALITY HEALTHCARE DELIVERY FOR EVERY PATIENT PRESENTED WITH AN ACCEPTABLE RATE OF FISCAL VALUE AND ADEQUATE QUALITY OF LIFE FOR THE PRACTICE AND ITS STAFF WHILE ESTABLISHING A CLEARLY DEFINED AND CLIENT-PERCEIVED VETERINARY SERVICES MARKET NICHE IN THE COMMUNITY.

In striving to achieve this goal, the leader must accept full personal responsibility for all his/her decisions and must continually assess the situational environment in which the practice operates. Continuous quality improvement (CQI) requires that every member of the staff is accountable for the daily activities and pride in the tasks performed; the client perceives the outcome of that effort as quality care. Using profit-based performance standards is one method to recognize the staff's contribution to the hospital's CQI program.

## STYLES OF LEADERSHIP

Too often leaders focus their efforts on short-range goals at the unnecessary expense of their subordinates (the team is subordinate to the leader, but do not need to be made to feel that way). In the long run this can be detrimental to both the staff and the practice. Effective leadership is accomplishing the mission with a minimum expenditure of personal time and effort and an appropriate balance between practice, staff, and individual needs and goals.

Leadership ability becomes increasingly important as the practice team expands. When the practice becomes a multi-practitioner healthcare delivery system, leadership becomes a prerequisite for team building and success. While there are many styles of leadership, shades of grey in the spectrum of good approaches that vary with the situation, most all can be classed as either directive or nondirective leadership methods. The directive leader tells the staff exactly what to do and lets them know who is the boss. Group members have the secure feeling of knowing exactly what is expected of them. Nondirective leaders seek the opinions of team members, consult with them in planning and decision making, and sometimes, on non-health care issues, even put ideas to a democratic vote.

### MATCH THE CONTEXT

Neither approach is appropriate at all times. In general, directive styles will be more appropriate in lifesaving situations and with starter-level employees, and a more participative style in practice management situations and with professional and paraprofessional associates.

Summarizing research, models, and theories developed by a variety of social scientists, Claremont McKenna College professor Dr. Chemers gives this advice: "If your subordinates do not have the knowledge necessary to perform the task, or if their attitude is such that they lack commitment to the goal at hand, a directive approach is warranted." The most common example of this situation is the chemotherapeutic regimen for a patient where the drug, dose, and duration and administration is dictated by the veterinarian.

Of course, even the best veterinarian doesn't always have a clear picture of what the most desirable course of treatment should be. You may need a colleague's perspective or the staff's ability to provide subjective information on the case or client; here, participation is called for. When a veterinarian is nondirective, it is more likely that the team members' intellectual abilities, years of practical experience, or technical capabilities will contribute to the task. This is especially true for challenges in practice management that deal with client bonding or improving productivity.

The participative style has some important bonuses. It makes team members feel autonomous -- a proven motivator for many personality types -- and it gives them the opportunity to develop their skills. In deciding between the two schools of leadership, also consider the bottom line -- "Can subordinates be expected to energetically implement a management decision if they didn't participate in making it?"

## A COMPATIBLE FIT

If one style or the other feels uncomfortable to you, don't be surprised. Many theories assume that any person can be equally adept at any behavior; this just isn't the way it is. A considerable body of research shows that leaders have personal styles that they are more comfortable with and that they habitually use.

If you are the type who is very concerned about relationships, about harmony, and about acceptance by the staff, you will lean toward the participative styles. They place greater emphasis on morale. If it is very important that people like you, there will be difficulty with the directive styles of leadership. On the other hand, if there is a high need for order and a very strong desire to accomplish a task efficiently as possible, you will find frequently that the directive approach is favored.

Knowing which end of the spectrum is preferred by your colleagues or the practice owner can help you work with them more successfully. If you are the associate and the practice owner is highly directive, you can depersonalize and defuse most situations instead of taking his personality as a personal affront. More importantly, if two veterinarians are both directive in style, there will be conflict about whose directions are best. Both want an orderly practice environment -- but based on their own order. If both veterinarians are participative in nature, they may want to avoid conflict so much that they don't control problems and, therefore, waste a lot of time.

People need to understand their own inclinations, the partner's style, and if employed, the leadership style of their boss. If attention is paid, situations can be recognized before they reach an impasse.

Regardless of styles, the secret is to communicate effectively. This means that information is given AND received in each exchange. Brains and ambition are hard to recognize and reward if they are muffled by lackluster or annoying verbal traits. It doesn't matter how brilliant or sincere an individual is; if the message doesn't come across verbally, it will be lost.

## THE FILTERS

Information is processed at various levels of understanding. Based on the mind-set of the listener, it flows through the experiences of the past and distortion is added. Every person has these filters, so additions and deletions are made based on interpretation. Some of the more common filters seen in practice leadership situations include:

- \* What the leader believes he/she "heard", either verbally or in writing. Clarification is seldom discussed.

- \* What the leader believes the staff should know, for their own good or for "protection" of the practice.

\* What the leader believes the staff wants to hear, regardless of the practice needs or environmental situation.

\* What the leader thinks should be "toned down" or "built up" for the benefit of the receiver. Facts are mediated.

\* What the leader's values and attitudes do to the information; the bias of prejudice and personal ethics.

\* What stress or stresses the leader is operating under, at home or in the practice.

\* What importance the leader attaches to the information, the validity of perceptions other than their own.

\* What the leader feels at the moment that the information is being received or when passing the information to others.

When we consider the filters that information must pass through at each level, it is understandable that distortion, dilution, or total loss of understanding occurs. Do not misunderstand these comments. After all, it is the leader's job to overtly filter messages in order to clarify them or add to them as required. The leader, however, should not allow personal feelings and stresses to filter communications inappropriately or covertly.

The downward flow of information has the practices' seal of approval behind it; a kind of gravity flow exists. On the other hand, feedback is critical to ensure communication has occurred; remember, both the giving AND getting of information is essential for effective team communications. The average veterinary healthcare delivery team also has filters installed in the communication process. Many of the "staff filters" are more severe and cutting than those applied to downward communication, making meaningful feedback more difficult. Some common filters that staff members apply to upward communications are:

\* The notion that any opinion in opposition to the bosses' idea is "negative thinking" and therefore bad.

\* The notion that practice teams always gripe, and you should only worry when they don't.

\* The belief that the information is unimportant and that the originator does not have the big picture in mind.

\* The belief that the veterinarian(s) are not interested in the paraprofessional perception.

\* The belief that you will get into trouble for passing along this type of observation or information.

\* The belief that the information will reflect adversely on you, your ability, or the staff effort.

\* The belief that the practice manager/ownership only want to be told the good things and not the bad things.

Do not think that all filters are bad. Some filters serve a useful purpose. You should try to solve problems, or when addressing a problem, offer at least two alternative solutions. You need to take the appropriate action, try the best alternatives, and pass on the significant information. Whining is not constructive communication. The acid test is to ask yourself whether you would need or like to have the information if you were in the leadership position. Only pass the information on if the answer is yes.

## THE BRIDGE

Some guidelines for communicating more effectively with either style of leadership are:

\* Keep it short, simple, and direct.

\* Word your questions so that they will elicit a "yes" response; the position is then associated with the positive.

\* Suit your message to the audience.

\* Use words like "let's" to automatically associate yourself with the team.

\* Use a story or anecdote as a window. Construct a vivid scenario of "what if" or "when" to make the team imagine the events already occurring.

\* Using words like "right" or "truth" puts your position on the positive side of a debate.

\* Know when not to speak. A dramatic pause after a particularly important point will stress your sincerity. It also allows you to evaluate the reception. If negotiating, present your case then leave in silence.

Improving your own communication skills to meet the needs required to cope with varying leadership styles is only smart business. Select those things you can effect, and do your best to be all you can be with those things you can influence. Do not spend great amounts of time fretting over things that you cannot influence. It makes for a far better practice environment.

## MAKING IT COME ALIVE

This is the time of practice change . . . ambulatory medicine lone-doctor practice paradigms have been modified by expansive multi-doctor facilities, linear scheduling has given way to multi-tasking, doctor-centered decisions have yielded to client-centered planning, curative medicine training has become secondary to wellness services for companion animals, and the list goes on and on. The mission focus is no

longer centered on just doing a great veterinary job on medicine and surgery, and with the new Pet Wellness Programs being promoted in many venues, savvy leadership must restate the mission focus to excite the hearts of staff and clients alike, something to the effect:

***Client-centered patient advocacy to enhance and extend the quality and duration of the companion animal's life.***

Through an awareness of the filters and barriers in the practice communication systems, a leader can decide which communication system can be used, how to reduce the effects of the filters, and where to look should breakdowns occur. Good communication does not just happen -- it must be developed and maintained by each and every team leader.

An important facet of any leader's responsibility for developing and maintaining effective communications is that of daily coaching and counseling. The veterinary healthcare team wants to be better; they want to give the best to the clients and patients. Communication is the most significant means of influencing a team member's behavior, their image of self-worth, and their participation in the practice's goals and objectives.