Addiction and Leadership

What the first step in addiction treatment and leadership have in common!!!

Addiction is real and a struggle for many. Addiction to drugs, pornography, sex, food etc, there are numerous vices. Many people overcome and beat their addiction through various programs like AA, inpatient/outpatient, executive or 12 step programs etc. Though the programs differ in some of the steps and approaches, one thing holds true, it all begins with admission of a problem/dependence and lack of control.

Unfortunately, many healthcare departments, institutions and organizations are addicted to poor leadership. The consequences are both acute and chronic to themselves, employees and patients. The first step is often never taken to correct the leadership shortcoming and its toxic impact. In our research, we validated that many "know" there is a problem and feel that leadership development programs/education exist but are not invested in.

The problem: reimbursements continue to be cut and productivity models pushed as the "main" agendas. This has been a formula with unfortunate and real consequences such as decreased retention, quality and increased safety risks. Many healthcare institutions cut funding to critical education and training that produce real sustainable results. Instead many created "internal programs" such as versions of *Journey to Excellence* with poor results at best. Just as an addict is often only fooling themselves, so do these internal programs. Outside expertise, assessment, accountability and solutions are

required. You cannot hide behind a mere title and the title/position does not equate to a true leader.

Our research and site visits have indicated the desperate "addiction" the healthcare industry has to failed leadership and ineffective leadership agendas/investments. The disconnection to the front lines continues to grow, steadily decreasing morale and buy in. People have been placed in roles with no clear expectations, no training, no support, no mentors and expected to perform and achieve all benchmarks.

The "quality" and "satisfied" façade is what is often portrayed to the public and employees. When really things are falling apart putting everyone at risk. A recent survey we conducted showed 70% of the 45 people we polled were not satisfied at their job.

Step one of the addiction recovery program is admitting you have a problem, you may not know and you have a need assistance. This is something the healthcare industry struggles with for various reasons pride, prestige, position etc. Often the same "program" is renamed or branded and rolled out in another "flavor of the month" initiative.

Quality based reimbursement is here to stay. This means that the "revolving door" leadership and "fake it to make it" approach will not be sustainable and will actually impact your bottom line. Investing in real leadership training is mandatory. Many organizations have started investing in this training/assessment and are seeing immediate results. It can be done on-site,

via webinar, or via quick phone sessions. It does not have to break the bank or cause workflow delays.

Ignoring this critical need will not make it go away. With social media and reporting websites true transparency is readily available more than ever before. Patients and employees talk, and true or false, word/reputation spreads faster than ever before.

Email or Call today. Beat the addiction and break the cycle. See how we can integrate with you to change your culture and create sustainable results.

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