Book: Applying Personal Leadership Principles to Health Care: The DEPO Principle

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Book Review:

This book is about leadership in medicine. The author is an MD – a surgeon by training. He brings a strong, varied background and a commitment to his views about physician responsibility and leadership. Dr. Woods admits that his "vision of what medicine was all about" was formed in his youth observing his father's practice. "More than 35 years without fighting about money, who was 'more valuable' to the group, or who should control 'this or that'." He later "found the practice of medicine" nothing like what he had "expected and had dreamed of."

There are at least two discernable themes in Dr. Woods' book. First, physicians have lost control of the profession. They "do not control their own destiny." Yet, they remain responsible for the decisions relating to this situation. The second theme centers on the idea that if this situation is to be remedied a cultural change must occur. This change must relate to "personal leadership development and interpersonal skills across all levels of medicine -- practicing physicians, physician administrators, and down into medical school and even premedical training." He is quite deliberate in his acknowledgement (which the research thoroughly supports) that two of the physician's greatest concerns ought to be weak interpersonal skills and inadequate communications skills.

In this brief (nearly 200 pages) but compact book the author delves into many significant points about the medical profession and leadership issues. However, one of the key facets of the book relates to two principles he uses to deal with problem recognition and solution. The LECO principle (Leader-Employee-Customer-Organization), acknowledges that the leader of any organization is responsible for the results obtained by the organization. This is not a new theme, but Dr. Woods places it in a new perspective. The DEPO (Doctor-Employee-Patient-Organization) principle is based on the contention that the "physician is responsible for the results obtained with other health care employees—whether nurses, nursing assistants, pharmacists, housekeeping staff, or administrators," regardless of employment status. To the extent this acknowledges the physician is a "team" player and not the sole reason for the game this is a step in the right direction. To the extent this is another ploy to place the physician on a pinnacle above and beyond the reach of the customer and fellow employee this is a step down a well-worn and nonfunctional path. I must confess that I am not quite sure about Dr. Woods' intent on this issue. Perhaps I need to read the book again (or at least some parts of it).

From my perspective, Applying Personal Leadership Principles to Health Care has three overarching benefits. First, it addresses some profound issues in the field of medical leadership. It brings a number

of these issues "out of the closet" and into the open arena where they should have been long ago. The author has clearly and forthrightly identified the crux of the malaises of modern medicine. Second, Dr. Wood has proposed realistic and meaningful solutions, which are deserving of a hearing (or at least a reading). Finally, the book is worthwhile simply from the exceptional overview of leadership, and the especially good distinction between management and leadership. I believe it is fair to say that Dr. Woods supports the contention that we have far too much of the former and far too little of the latter.

Anyone who has spent any time reflecting on issues associated with health and medicine in contemporary society has to acknowledge that many of the issues seem almost too complex to reconcile. However, that does not mean we should not try to continue to improve the situation. To that end, I feel it is appropriate to conclude this review using Dr. Woods' own words, which all of my experience supports: "Recognition of this problem isn't enough. Individuals, and the profession as a whole, must take the next step of committing to change – to improving individual leadership skills, consciously and deliberately. There are no quick fixes. A 'shot of penicillin' won't cure the problems we see today. Denial or resistance by some – perhaps many within the profession is certain. The change will be slow and painful, but everyone can improve their personal leadership skills, no matter how good they or others think they already are." "This will require nothing short of a social movement within the medical profession, beginning with the acknowledgement that there is a problem. In some ways, it will require 'occupational rehabilitation.'"