Leadership Critical Incident in a Multispecialty Hospital

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The present paper deals with a specific situation a leadership in the hospital setup faces which had the potential to turn the fate of the bank to a great extent, in terms of its profits, and its image in the market and in the eyes of the public. The paper highlights how the leadership dealt with the critical situation with prudence and attempted to look at the problem through a cross cultural framework lens and analyze it to come to a solution that is effective, and beneficial for all. All this is carried out keeping the ethics and morals at place. The paper reflects on the need of a broader and prompt action to be taken by the leadership in order to ensure their level of competency in a cross-cultural organizational setup-diverse yet inclusive. This is ensured as the leadership comes with a strategic action plan that aids in tackling the problem and addressing any such issues that may arise as a result of it. This is done as a single incident and its criticality can never be looked upon in isolation in such a huge, complex, diverse, globalized, cross-cultural, multi-dimensional, multi-variant, and multi-level organization. It requires a well thought and deeply analyzed plan that considers the ramifications of an action addressing a certain incidental problem on other areas at that time or in the future. The paper recommends practical solutions to these issues and concludes on an optimistic note citing that any organization and its leadership is responsible to make it successful through effective change management and transformations that help it sustain itself in turbulent times and ensure employee and customer confidence in the organization, retaining its image and reputation in the market and the society.

1. Introduction

Leadership is the backbone of any organization and in order to make the organization healthy and fit in all respects, it is required that the leadership is robust, resilient, prudent, pragmatic, flexible, receptive, courageous, prompt, motivating, and so on. This is specifically crucial in a cross-cultural organizational setup where diverse people exist holding different views, opinions, ideas, doubts, skills, experience, cultural conditioning, and so on. The different dimensions of a cross-cultural setup, such as, the power distance issue, individuality, collectivism, gender parity, uncertainties and threats or challenges posed by diverse groups, openness, and willingness to accept and adapt to change, all these are important when a leadership operates in a cross-cultural setup (Dickson et al., 2003).

Leadership is all about moving towards excellence, and the process starts with the exhibition of exemplary behavior by the leader in several ways. A broad spectrum of traits possessed by leaders across organizations are termed as, namely, model the way, inspire a shared vision,

challenge the process, enable others to act, and encourage the heart. These principles become more pronounced and hold greater relevance in a cross-cultural organization, making the leader work on his emotional intelligence, and not just technical aspects of exhibiting his role as a leader in an organization (Triple Strength, 2019).

Critical Incident in a Multispecialty Hospital Organization

The present paper discusses the case of a healthcare organization, that is, a hospital by the name St. Vincent in Indianapolis, US, with respect to how the leadership in the organization exhibits their behavior in line with those laid down by Kouzes, and Posner, as discussed above. The case deals with the issues the hospital was facing in the recent times, which included, shortage of competent nurses, dissatisfaction of the employees, poor work relationships with the leaders, and stiff competition by the rival hospitals. The hospital has a diverse, cross cultural workforce, and patients from diverse backgrounds, and societal standards, having a range of issues that require an open and liberal approach to be dealt with. The paper discusses how the leaders take cognizance of these challenges by applying the above-mentioned practices, But in order to address those challenges the doctors and the management there resorted to unethical means, which is elaborately discussed below (The Leadership Challenge, 2019).

Medical profession is a very noble and revered one. Ethics play a much larger role here than in any other sector. The leadership is faced with a number of challenges with respect to ethical conduct, and practices by those concerned, and there have been incidences of gross medical negligence, and even unscrupulous ways to earn money, and misuse one's power, position, and skills to fulfill selfish motives (Breslin et al., 2005). This is the case of a multispecialty hospital I worked with as a young urologist, I was privileged enough to work under the most acclaimed surgeons, and be a part of the kidney transplants that they performed frequently. The hospital used to have long waiting list, as people of all creed, gender, age groups, societal standing, used to come to this hospital for treatment. That was the kind of repute the hospital, and the doctors had. But, one day, to my utter shock, I saw a very unethical thing happening in the hospital. The case of utter medical negligence, and unnecessary tests conducted on the patients. In some cases, it was not required to undergo an MRI or CT-scan, but patients were asked to, because these were costly treatments, and provided the hospital with the surplus fund to run itself. But certain tests are harmful due to the radiation effects they have. None of the senior doctors listened to my request. I got furious and disheartened at the same time. I went to the hospital director, and told him about the situation, but he seemed unperturbed, and asked me to mind my business. Moreover, the next morning I was handed over a disciplinary letter and asked to report to the hospital director at the earliest. He warned me of dire consequences, and said, the hospital, your perky salary, and other benefits you enjoy, come from these sources of income for the hospital.

I reported the matter to the board of directors headed by the Chairman. But they had already received negative feedback about me, and my work. My stand became weak. It was a malicious intent of few people to tarnish my image and go safe if any scrutiny is carried out as per my request.

The Chairman transferred the matter to the relevant vigilance team, and they scoffed me unnecessarily and closed the investigation, asking me to write on paper, that I take back my

complaint, and apologize for my misconduct. The stance taken by the leadership (the Chairman) was lackadaisical, and disinterested. A very one-sided and narrow approach to a matter of such grave concern. A lack of receptiveness, responsiveness, empathy, balance, and discretionary traits was clearly visible in the leadership.

Competency Leadership to tackle the Critical Incident

It is crucial that the leadership in this situation makes employees understand the importance of brand value in the right sense, which will reflect in their deliverance of services of the customers or the patients. A shared approach to value adoption should be inculcated by the leadership in an inspirational, accommodative, and with subtlety that creates a balance in the behavior of the employees within the organization, and the with the external stakeholders, and customers. This needs to be carried out in a manner that instills in the employees a sense of understanding, loyalty, trust, and belongingness towards the organization, and make them psychologically, and technically ready to deal with every kind of patients, and all kinds of situations, and help the hospital grow, bolster its image, and reputation in the market, and ensure highest levels of patient experience and satisfaction. The employees need to be made aware of the hospital facilities, and how they need to be up to the mark in handling the cases and be dedicated enough to take challenging illnesses and try their level best to help the patients come out of their ill state. To ensure this the committee comprising of the leaders should lay down a action plan to enhance staff skills by providing adequate training and imparting skill development to make them technically sound in treating the patients properly. The leadership should make communication as a tool of exhibiting the empowered leadership to achieve the desired objective. There should be a sense of clarity and purpose, a shared vision, views, an opinion map, and a hope for adequate recognition, and reward after achieving the desired goals (Velez, & Neves, 2018).

Leadership Recommendations to Address the Generalizability of the Critical Incident

The healthcare sector needs an in-depth evaluation by outside parties too. The presence of stringent laws, regulatory guidelines, a well-framed system to monitor the recruitment, and appointment procedures of the hospital, employee performance check on a regular basis, employee welfare, empowerment, training, educational, motivational, and ethical conduct programs should be carried out on a regular basis (Ghaisipour et al., 2017).

The situation mentioned above could have been dealt with in a more planned, and calculative manner, to put my stand on a firm footing. The next time I decided to not lose temper, and be more vigilant, and calm. I started collecting evidence and coming in the good books of the senior doctors. The fake tests they performed, the unnecessary tests they prescribed, the fear they created in the minds of the patients, were all recorded by me. The use of ventilator when the doctor is sure that the aged patient has minimal chances of survival, and shifting to ICU (intensive care unit), and unnecessarily delaying the procedure, just to get ICU room rent, and ventilator charges, which amounted to \$500 per day. I created a reported, made a backup of it, sent mails to the Chairman, the board of directors, and other managers. I fixed a meeting with the Chairman where he called all other concerned leaders to address the issue. I had evidence, and the case was clear.

The leadership setup a vigilance team which was to be monitored by a steering committee,

headed by the Chairman, and the investigation started. All the perpetrators, and culprits were brought to the book. The Chairman applauded me, and appreciated my honesty, sincerity, and courage. I was suitably rewarded for the same. The culprits were called for an explanation and were suspended for an indefinite period. Ad hoc doctors were called to address the patients. The hospital authorities made a public notice that the hospital does not have any nexus with any diagnostic center, and all tests prescribed are genuine, and relevant to the specific diagnosis carried out by the doctor. The leadership conducted seminars, customer awareness programs, ethical conduct training for the employees of the hospital, and a thorough surprise scrutiny by third-party to deter such cases to occur in the future.

The leadership displayed balance, discretion, justice, integrity, a tough stance, and a completely transparent side to the public to maintain their trust and save the dignity and image of the hospital and the employees working in it. They were able to align their vision, motivate the employees, and create a culture which fostered virtues that the medical profession stands on (Myrtle, 2018). Moreover, the way of handling the issue was professional, fast, and uninterrupted. The leadership did not allow anyone to meddle with their agenda or detract them from the case. It was a win-win situation for all. Thus, it needs to be understood that one incidence can tarnish the image of the hospital and eventually lead to a loss of trust in the eyes of the patients and the employees, which will lead to a gradual deterioration of the organizational image and affect its different parts and domains in a negative manner.

2. Conclusion

The leadership should always display the highest levels of integrity in any situation. Moreover, they should have an unbiased view about a case or problem under consideration, and be ready to investigate the matter, listen to both sides, find facts, and evidences, and analyze the veracity of the claims, and accusations, and after a clear understanding of the situation, come to a conclusion, and formulate an action plan to deal with the issue, and be firm about the decision making they have done regarding a case (Rara, 2017). The leadership should deal with any kind of organizational politics, and be prompt enough to report what is most urgent, and ethical, so as to keep the employees on toes, and alert enough to not indulge in any misconduct, and report promptly if they see any such thing happening (Gentry et al., 2016). Leadership effectiveness needs to be the topmost priority, with leaders motivated enough to handle uncalled for situations, and resort to strong measures to maintain a standard of integrity within the organization, and incorporate changes for the same, which should be communicated to all concerned in an open, and timely manner, with enough scope to voice one's opinions, and views too.

References

- Dickson, M. W., Den Hartog, D. N., & Mitchelson, J. K. (2003). Research on leadership in a cross-cultural context: Making progress and raising new questions. The Leadership Quarterly, Volume 14, Issue 6, December 2003, Pages 729-768. https://doi.org/10.1016/j.leaqua.2003.09.002
- 2. Triple Strength., (2019). The Five Practices of Exemplary Leadership revisited. Retrieved from https://triplestrength.com/2017/03/24/the-five-practices-of-exemplary-leadership-revisited/

- 3. The Leadership Challenge, (2019). Transforming a culture to become the hospital system of choice. Retrieved from http://www.engagingoutcomes.com/tlc case studies.html#link01
- 4. Breslin, J. M., MacRae, S. K., Bell, J., & Singer, P. A. (2005). Top 10 health care ethics challenges facing the public: views of Toronto bioethicists. BMC Med Ethics. 2005; 6: 5, Published online 2005 Jun 26. doi: 10.1186/1472-6939-6-5
- Velez, M. J., & Neves, P. (2018). Full length article: Shaping emotional reactions to ethical behaviors: Proactive personality as a substitute for ethical leadership. The Leadership Quarterly, 29, 663–673. https://doi-org.proxy1.ncu.edu/10.1016/j.leaqua.2018.06.004
- Ghaisipour, M., Mosadeghrad, A. M. Arab, M., & Jaafaripooyan, E. (2017). Leadership challenges in health care organizations: The case of Iranian hospitals. Med J Islam Repub Iran. 2017; 31: 96. Published online 2017 Dec 17. doi: 10.14196/mjiri.31.96
- 7. Rara, S. (2017). Leadership is a Challenge: Top 5 Challenges and How to Overcome Them. Retrieved from https://sarv.com/resource/post/5-leadership-challenges-and-how-to-overcome
- 8. Gentry, W. A., Eckert, R. H., Stawiski, S. A., & Zhao, S. (2016). The Challenges Leaders Face Around the World: More Similar than Different. Center for Creative Leadership. White Paper. Retrieved from https://www.ccl.org/wp-content/uploads/2015/04/ChallengesLeadersFace.pdf