



CEO Healthcare ROUNDTABLE

A Partnership of The CEO Advisory Network & The Healthcare Roundtable

Fall Meeting 2021

“What’s Next? Addressing Growing Workforce Issues and Changing Expectations While Managing Individual and Organizational Burn-out”

Keynote Speaker: Annie Gallagher, Gallagher Consulting Group

We were very excited, after a one-year absence, to again gather in-person in Chicago on **October 6-8, 2021**, for our Fall CEO Healthcare Roundtable. The enthusiasm and joy of physically being together was evident during the presentations, dinners and time together as attendees re-engaged around several thought-provoking and timely presentations.

Workplace Burn-Out | Confronting Adversity

Our October Roundtable began with our **Wednesday** afternoon “keynote” speaker, **Annie Gallagher**, President of Gallagher Consulting Group, Columbus, OH. Annie is a nationally recognized and highly respected consultant and strategist who has worked with the senior leadership of organizations representing more than 39 different industries in areas such as strategic leadership and organizational development. Annie opened her presentation by recognizing the



factors that are creating multiple levels of anxiety, stress and burn-out facing healthcare leaders and their organizations. Annie noted that the key to survival is “resilience” which she described as:

“Resilience is the ability to recover from setbacks, adapt well to change, and to keep going in the face of adversity.”

Annie shared that “resilience” is a learned skill which can be developed through hard work. She also shared that resiliency can be an ***“emotional contagion”*** which can be observed by team members as a positive leadership skill.

- Resilience involves behaviors, thoughts and actions that can be learned and developed
- Being resilient does not mean a person won’t experience distress or difficulties
- Resilient people do fail, but they learn, grow and thrive because of it

The importance of developing these skills has never been greater as it was noted that:

- 52% of clinicians have reported increased anxiety, burnout, or mental health issues during the pandemic
- The suicide rates among female physicians are 130% higher than that of other females in the population
- Currently 2/3 of healthcare workers report burnout as real for them personally
- Nearly 60% of healthcare CEOs / leaders report they feel “used up” at the end of the day and only 20% believe they can be effective at leading virtually

Annie concluded her presentation describing several tools, including a set of Mental Habits, which can be used to manage and reduce organizational and personal stress, anxiety and burnout. Annie joined us for the evening Networking Dinner where members engaged in further discussions.

Annie Gallagher’s keynote presentation set the stage for some very engaging, meaningful and, at times, personal discussions on **Thursday**. To help frame the discussions we started the day with small break-out Roundtable discussions with each attendee discussing ways that burnout, staffing shortages and other issues and challenges are impacting both their organizations and themselves personally.

Lead and Motivate | Engaging with People and Organizations

The Roundtable discussions were followed by our



morning session with **Burl Stamp**, President of Stamp & Chase, St. Louis, MO. Calling upon his experiences as both a consultant and CEO of several hospitals and health systems,

Burl emphasized that burnout existed well before the pandemic having been recognized as a problem 25 years ago. However, *due to the pandemic, burnout is becoming its own pandemic.* It’s being exacerbated by the frustrations and anger of clinicians

and staff trying to care for patients who are dying but don’t need to die, in many cases, if they would have chosen to be vaccinated.

Burl then went on to share that the good news is *“we can fix this”* but the bad news is that we need to develop our leaders and engage our people differently. He noted that 70% of the variance in employee engagement is related to the employee’s manager. He also stated that:

“70% of managers are ill-equipped or trained for the challenges they are now facing including leading and motivating people.”

Much of the remainder of Burl’s comments focused on how healthcare systems engage and treat their “people.” One area of particular interest to attendees was a discussion around the question of whether, due to the current stressors, leaders and organizations are lowering the bar by tolerating behaviors which would not have been tolerated in the past. This would include things like multi-tasking, tardiness or not even attending meetings no matter whether virtually or in-person.

Burl encouraged attendees by stating that:

“The current challenges have created an opportunity for leaders to seize the moment and engage their people and organizations.”

He concluded his presentation with suggested tools and best practices for engaging the workforce and shared a proscriptive communication practice he referred to as “TEAM” (Teach, Empower, Align, Mentor). His process is available to all Roundtable members [here](#).

Workplace Burn-Out | A Strategic Threat

Our next presentation was by **Scott Spohn**, Partner-



in-Charge, People & Change Practice, DHG Healthcare and **Dr. Victoria Grady**, Associate Professor Organizational Behavior and Academic Director of the MSM Graduate Program in the School of Business at George Mason University. Victoria also holds the unique position of Professor in Residence for the People & Change Practice at DHG where she is

actively involved in numerous research projects including work being done by DHG on the downstream organizational problems such as organizational turnover and financial pressures resulting from change fatigue and burnout.

Scott and Victoria began their presentation by noting that:

“The cost of burnout in just the healthcare industry has been estimated to range somewhere between \$125-190 billion.”

As a result, burnout needs to be viewed as a strategic threat and treated as a strategic issue. It requires not only a structured approach for addressing the causes and solutions but also a set of well-defined tools, measures and metrics to gauge the success of the strategy for addressing it.

To reinforce the point, they shared that a recent survey demonstrated that fatigue is significantly driving burnout but only 2 out of 3 healthcare organizations are measuring burnout across their entire clinical community. At the same time, *50% of respondents believe turnover will reach historic levels and will create long term supply concerns.*

The concept of *“silent burnout”* was also discussed based on a recent Yale survey which demonstrated that:

“An organization’s most engaged employees are also the most burned out.”

Interestingly, only 1.8% of non-engaged employees say they are burned out. All of which raises the question for a healthcare leader, *“What if 20% of your most productive employees are the ones who are most burned out?”* The follow-up question is “What are you doing to identify, measure and address burnout among your most at-risk employees?”

Scott went on to ask the question “What does burnout really cost an organization?” *It has been estimated that 30-50% of turnover is a result of burnout.* It is also estimated that the cost to replace an employee will range from .5-2X the annual salary for that position. And that cost estimate does not include the cost and impact of the medical errors as well as cultural, operational and strategic impacts related to turnover.

In summary, the DHG team noted that *burnout is an organizational problem not an individual problem.* Due to the financial impact, it must be measured and actively addressed by the organization. They closed their presentation by sharing three key steps for fighting the significant financial and emotional costs of burnout on the organization:

1. Take an initial measurement to understand the depth and breadth of the problem and then summarize and openly communicate the findings
2. Create a strategy and systematic program for addressing and, again, commit to on-going communication about progress
3. Remeasure and adjust

Healthy Leaders | Healthy Organizations

The final Thursday presentation engaged the participants in exploring their own, personal challenges with stress, pressure and burnout. The



presentation was a brief introduction to a program called **“Healthy Leaders, Healthy Organizations”** which has been developed by CEO Advisory Network partner **Nancy Steiger** and **Dr. Ben Bernstein**, one of the nation’s leading Performance Psychologists.



Nancy and Ben opened their presentation by challenging the

attendees with the premise that:

“You can’t manage others if you don’t manage yourself”

In addition, in the case of healthcare leaders, they stated that if you want to deliver healthcare you need to be as personally healthy as you possibly can be.

Ben then shared that our educational systems, in general and medical schools in particular, do not train people to deal with stress, uncertainty and how to deal effectively with others. Noting that “uncertainty is a certainty,” he went on to state that:

“The root cause of burnout and stress is the way we have trained people.”

He further shared that stress is a function of “disconnection.” *Outside things that we often see as the cause of stress are, in reality, not the reason for stress but are simply “triggers.”* Controlling stress creates optimal health for ourselves which leads to optimal health leaders and optimal

performance. Ben then shared the three-legged stool of optimal health:

- Calm (in the body)
- Confidence (in the mind)
- Focus (in the spirit)

Ben noted that:

“We feel stress when one of the above (body, mind, spirit) becomes disconnected from the others.” He also shared that the human spirit is not something to be hidden, it needs to be fueled and fanned until it flames.

Nancy and Ben concluded our Thursday session by providing attendees with a variety of tools to use when facing stress, anxiety or burnout. They also shared ideas for identifying and addressing triggers that lead to stress and anxiety.

Innovation Session

Our **Friday** morning **Innovation Session** continued our tradition of focusing on the ways entrepreneurs and private equity are impacting revenue, cost, and market share of our member organizations. Although



we typically invite the Founder / CEO of an entrepreneurial company, since we were meeting in Chicago, we were able to arrange a presentation by **John Banta**, President & Managing Partner of BCBS

Venture Partners, the private equity fund of the Blue Cross Blue Shield Association. John is responsible for overall management, strategy, direction and financial return for the participating BCBS plans invested in the Blue Venture Fund.

John reviewed the history and structure of the fund and shared some of the criteria and priorities for making investments. He discussed the key areas of focus and shared a few brief case studies on some of the portfolio companies. He noted that although the

fund has had a significant focus in the past on companies that can provide the partner BCBS plans with improvements or efficiencies (in areas such as technology and operations), *growing areas of interest involve investing in entrepreneurial companies who are focused on clinical products or services which improve outcomes and efficiencies while reducing total cost of care.*

It's interesting to note that several of the innovators and entrepreneurial companies who we have invited to present at the Friday Innovation Session at past Roundtables are Blue Venture Fund portfolio companies. Therefore, attendees gained a greater understanding of the Blue Venture Fund and how it supports and encourages innovation in healthcare.

The session ended with a brief discussion on ways our CEO Roundtable members might collaborate and work with innovative, entrepreneurial companies like those represented by the Blue Venture Fund.

Last Words

The combination of the timely theme, outstanding presentations and opportunity to again gather together in-person to network, learn and candidly share successes and challenges made us all appreciate how much we have missed the special value that the CEO Healthcare Roundtable personally creates for each of us.

We look forward to seeing everyone at **the Spring CEO Healthcare Roundtable March 2-4**. Be sure to hold the dates on your calendar and watch for more details on theme and speakers!

SAVE THE DATE!

Next Scheduled Spring Meeting
March 2-4, 2021



Omni Scottsdale Resort & Spa at Montelucia
4949 E. Lincoln Drive, Paradise, AZ 85253



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