

3^a Conferenza Nazionale

22-23 settembre 2017 Hotel Bologna Fiere, Bologna

**Settore
Anaaio Giovani**



**Medical leadership e ruolo sindacale a livello
locale: due figure distinte?**

relatore

Bruno Zuccarelli –Cosimo Nocera

Best matches for MEDICAL LEADERSHIP:

[\[Unravelling medical leadership\]](#). Voogt JJ et al. Ned Tijdschr Geneeskd. (2015)

[Do we need medical leadership or medical engagement?](#) Spurgeon P et al. Leadersh Health Serv (Bradf Engl). (2015)

[The medical leadership challenge in healthcare is an identity challenge.](#) Andersson T et al. Leadersh Health Serv (Bradf Engl). (2015)

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Search results

Items: 1 to 20 of 14069



- **The medical leadership challenge in healthcare is an identity challenge.**
- [Andersson T](#)¹.
- [Author information](#)
- 1
- School of Business, University of Skövde, Skövde, Sweden.
- **Abstract**
- **PURPOSE:**
- The purpose of this article is to describe and analyse the identity challenges that physicians with medical leadership positions face.
- **DESIGN/METHODOLOGY/APPROACH:**
- Four qualitative case studies were performed to address the fact that identity is processual, relational and situational. Physicians with managerial roles were interviewed, as well as their peers, supervisors and subordinates. Furthermore, observations were made to understand how different identities are displayed in action.
- **FINDINGS:**
- This study illustrates that medical leadership implies identity struggles when physicians have manager positions, because of the different characteristics of the social identities of managers and physicians. Major differences are related between physicians as autonomous individuals in a system and managers as subordinates to the organizational system. **There are psychological mechanisms that evoke the physician identity more often than the managerial identity among physicians who are managers, which explains why physicians who are managers tend to remain foremost physicians.**
- **RESEARCH LIMITATIONS/IMPLICATIONS:**
- The implications of the findings, that there are major identity challenges by being both a physician and manager, suggest that managerial physicians might not be the best prerequisite for medical leadership, but instead, cooperative relationships between physicians and non-physician managers might be a less difficult way to support medical leadership.
- **PRACTICAL IMPLICATIONS:**
- Acknowledging and addressing identity challenges can be important both in creating structures in organizations and designing the training for managers in healthcare (both physicians and non-physicians) to support medical leadership.
- **ORIGINALITY/VALUE:**
- Medical leadership is most often related to organizational structure and/or leadership skills, but this paper discusses identity requirements and challenges related to medical leadership.
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- Medical leadership: why it's important, what is required, and how we develop it

- Oliver J Warren¹,
- Ruth Carnall²
- Author affiliations
- North West London General Surgery Rotation and Core Member, National Leadership Council, Department of Health, London, UK
- NHS London, London, UK
- Correspondence to Oliver Warren, Surgical Registrar and Honorary Research Fellow, Department of Surgery and Cancer, Imperial College London, 10th Floor QEQM Wing, St Mary's Hospital, London W2 1NY, UK; o.warren@imperial.ac.uk

mentoring, coaching, l'apprendimento d'azione e la creazione di reti

Abstract

Good medical leadership is vital in delivering high-quality healthcare, and yet medical career progression has traditionally seen leadership lack credence in comparison with technical and academic ability. Individual standards have varied, leading to variations in the quality of medical leadership between different organisations and, on occasions, catastrophic lapses in the standard of care provided to patients. These high-profile events, plus increasing evidence linking clinical leadership to performance of units, has led recently to more focus on leadership development for all doctors, starting earlier and continuing throughout their careers. There is also an increased drive to see doctors take on more significant leadership roles throughout the healthcare system. **The achievement of these aims will require doctors to develop strong personal and professional values, a range of non-technical skills that allow them to lead across professional boundaries, and an understanding of the increasingly complex environment in which 21st century healthcare is delivered. Developing these attributes will require dedicated resources and the sophisticated application of a variety of different learning methodologies such as mentoring, coaching, action learning and networking.**

Mentoring, istruzione, apprendimento d'azione, **creazione di reti** =

SINDACATO !!!!!

5 important qualities for a medical leader (and one to avoid)

Written by Dighton Packard, MD, Chief Medical Officer, EmCare | September 15, 2015

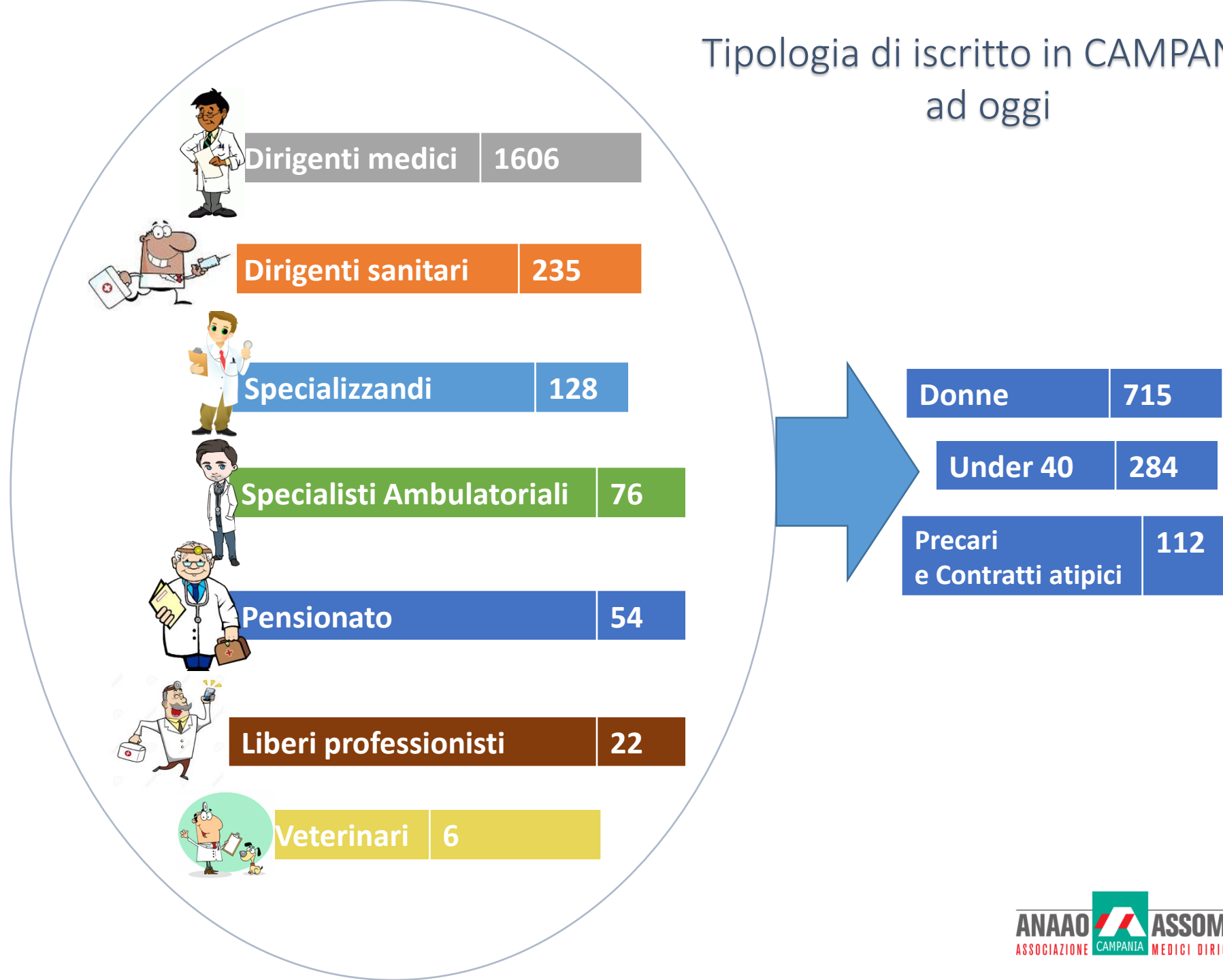
Medical leader

1. Sapere ascoltare
2. Avere una vision
3. Integrità
4. Empatia
5. Ottimismo

Dirigente sindacale

1. Sapere ascoltare
2. Avere una vision
3. Integrità
4. Empatia
5. Ottimismo

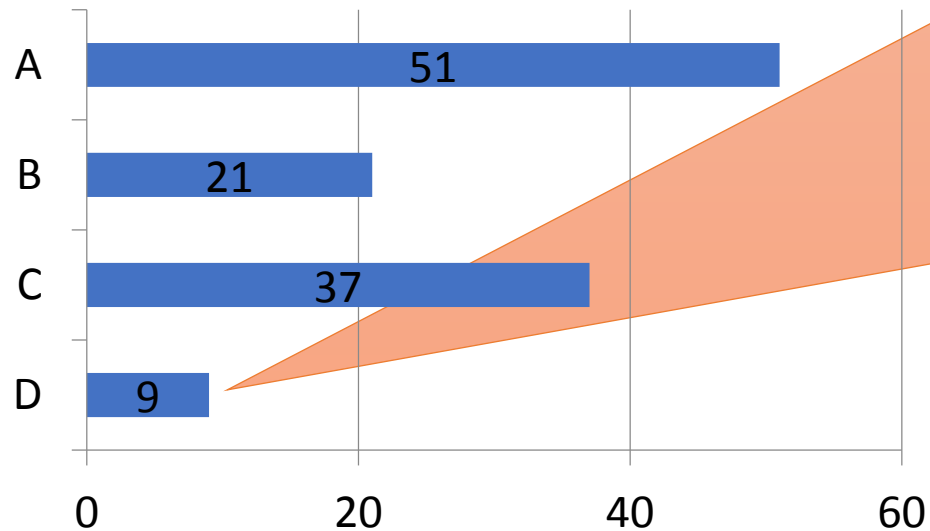
Tipologia di iscritto in CAMPANIA ad oggi



Domanda 3

	COSA VORRESTI DAL TUO SINDACATO
a.	Maggiore politica rivendicativa
b.	Incremento dei servizi
c.	Maggiore contatto con gli iscritti
d.	Altro

Esito



Risposte significative:

- 1) Maggiore formazione con corsi ECM.
- 2) **Maggiore partecipazione del Segretario Aziendale** che talvolta è presente solo nel proprio ospedale (quando trattasi di ASL) e /o per tematiche riguardanti la sua sfera professionale.
- 3) Il rapporto fiduciario nei confronti dei membri attivi ai vari livelli sia la base su cui si fonda lo spirito associazionistico.
- 4) L'incremento dei servizi offerti, dati i tempi che corrono, è attrattiva necessaria per suscitare l'interesse di tanti colleghi.

Esito dell'intervista

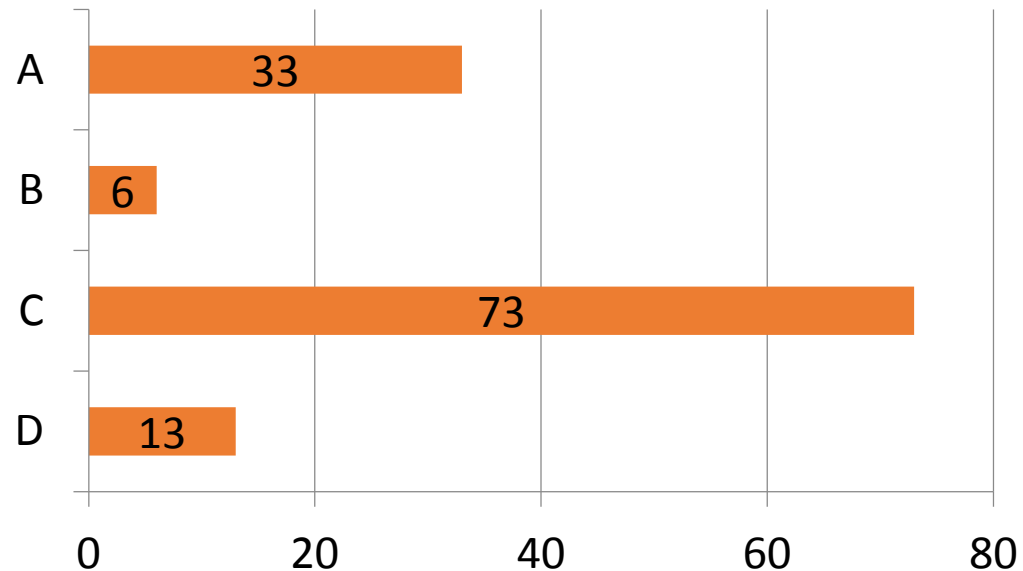
Bacino di iscritti

Abbiamo intervistato 100 Dirigenti che si sono iscritti tra il 2010 e il 2016 di età > 55 anni, < 45 anni e < 35 anni

Domanda 1

	PERCHE' TI SEI ISCRITTO ALL'ANAAO?
a.	Per i Servizi Assicurativi e Legali
b.	Per il Brand
c.	Per il rapporto personale con un dirigente
d.	Altro iscritto per corso BLSD

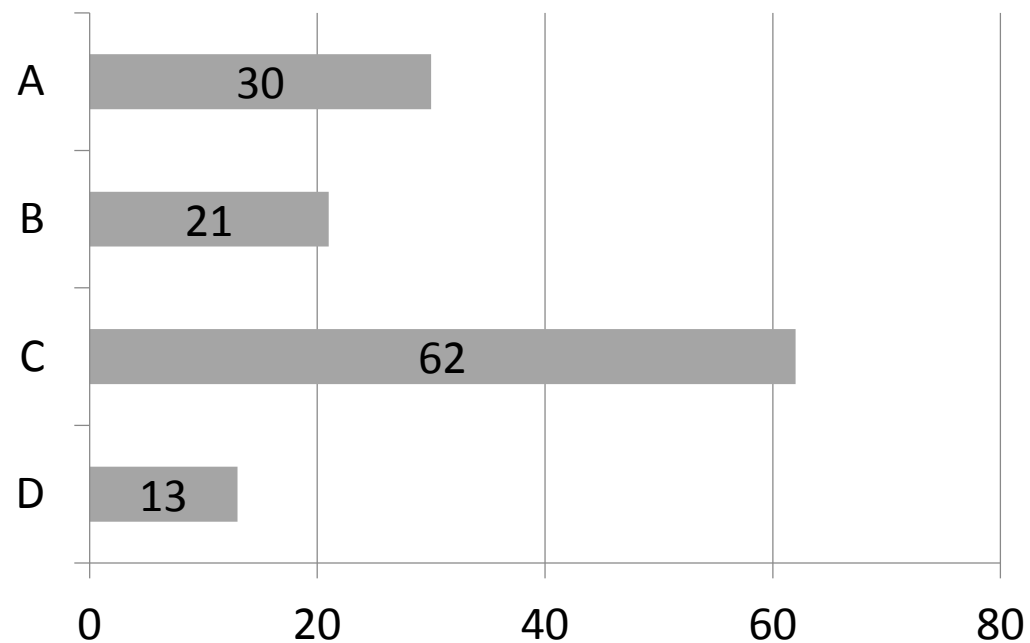
Esito



Domanda 2

	PERCHE' RIMANI ISCRITTO ALL'ANAAO?
a.	Perché mi identifico nella politica associativa
b.	Per l'assistenza (legale, assicurativa etc.)
c.	Perché è il sindacato più rappresentativo della Dirigenza Medica e Sanitaria
d.	Altro

Esito







L'unico posto in cui Medical Leadership e Leadership sindacale si fondono perfettamente !