We have found that a great leader is self-aware. One of the essential traits of legacy leaders is authenticity to self (George 2003, 11). The key to developing authenticity is a sense of self-awareness, which begins early in a career. This chapter expands on the concepts of self-reflection and self-awareness, including how to approach them and how to develop an organization-wide culture in which others can nurture their own authentic self.

"Self-assessment is key, as is a recognition [that], to be effective, you are not going to get approval from everyone."
—Harvey Smith

WHY BE SELF-REFLECTIVE?

Effective leaders are willing to step back from situations and consider which style of leadership, strategic thinking tactic, means of engaging staff and colleagues in situation analysis, approach to defining the problem, or method of problem solving is most appropriate for each. They must also understand how to balance the three Ls—listening, learning, and leading—for each situation, a skill that significantly enhances their own and their leadership team’s effectiveness. To gain this understanding, think about—that is, reflect on—your words, expressions, actions, and
leadership style; your career planning; and your approach to team development.

Healthcare leaders are watched closely by colleagues and staff for signals about expected and acceptable behavior. If leaders want high-performance teams, they need to model desired behaviors, such as

- a passion to seek continuous improvement;
- a desire to serve patients, physicians, and purchasers with superior value;
- a willingness to engage and empower others; and
- an excitement to pursue innovation through active listening to the experiences and ideas of eclectic and diverse staff and stakeholders.

HOW TO BE SELF-REFLECTIVE

Our work in physician leadership development suggests that physicians have particular difficulty being self-aware or engaging in self-reflective analysis of how their interactions in various group settings are perceived. Physicians are acculturated in an environment characterized by individual competition to secure favored entry into medical school, internships, and residencies, and their training celebrates the value and expectation of self-reliant and individualistic decision making under time and data constraints. They are often surprised to learn in 360-degree assessments that they are perceived as autocratic, unwilling to consider the insights of others, and ineffective in group decision making.

Brian Campion, MD, a respected physician executive and cofounder of the successful Physician Leadership College at St. Thomas University in Minneapolis, has concluded that clinical leaders can most rapidly advance their career effectiveness by mastering active listening and the art and science of asking thoughtful questions. We refer to this skill as the Q factor. Leaders who have mastered the Q factor ask questions that cannot be answered by yes
It’s a brand new year, and your major focus is most likely on next year’s business plan and how you are going to achieve the goals and objectives you have set for the healthcare enterprise. This thought process focuses predominantly on business issues, external influences, strategy, and keeping your team focused on success.

But what about you? What are your personal plans as a leader for today and beyond? What are you doing to improve the impact you have on people? Who is responsible for your personal growth and success?

Effective leaders love engaging in meaningful dialogues and asking challenging questions.

They should also not be afraid to question with a beginner’s mind and within the Buddhist admonition to be humble. You cannot be a great leader with only your intellect. The first key still is to listen, talk, and build a relationship; you care about what each person can contribute.

I was unsophisticated about ‘leadership’ learning and initially not great at ‘management,’ but several patient mentors moved me along the path. I have tried to do the same with my colleagues and staff.”

—Brian Campion, MD

or no but that begin with or use phrases such as “Why are we . . .?” “How else could we . . .?” “When should we . . .?” “What if we did it this way?” or “What are the risks of doing/not doing this?”

Excellent leaders tell us they are always ready to pursue alternate answers and not be content with conventional wisdom or with platitudes offered by insincere or solicitous subordinates. Furthermore, not only do effective leaders ask staff and colleagues Q factor questions, but they also ask similar questions of themselves, frequently and objectively.

The skill of asking good questions can be invaluable, as it forces us to wrestle with uncomfortable issues or provocative new perspectives. When the question is about your own performance, however, being objective about negative feedback may be difficult. When you show that you are open to all types of feedback, you demonstrate self-awareness and the willingness to learn. Bill George
(www.billgeorge.org/page/true-north-groups) has observed that the essence of leadership comes not from having predefined characteristics. Rather, it comes from knowing yourself—your strengths and weaknesses—by understanding your unique life story and the challenges you have experienced.

Legacy leaders do not fear asking questions—they “learn to listen, and listen to learn,” and they create a culture in their teams and organizations that encourages and enables key questions to be asked about the following types of issues:

- Confronting assumptions and mind-sets that filter our interpretation of situations, problem definitions, and problem solutions
- Identifying stakeholders who are most important to ask questions of and listen to
- Developing a shared commitment to create and nurture risk-free and blame-free zones in which colleagues and staff can offer candid views of the group’s, their own, and the leader’s effectiveness, strengths, and weaknesses

A culture that exhibits a high Q factor is also one of maturity. It serves as a setting for emotionally mature leaders, followers, and collaborators; these participants have high emotional intelligence (EQ) (Goleman 1992).

Following Goleman’s EQ model helps healthcare leaders to master four competencies:

1. Self-awareness—the ability to read one’s emotions and recognize their impact while using gut feelings to guide decisions
2. Self-management—the ability to control one’s emotions and impulses and adapt to changing circumstances
3. Social awareness—the ability to sense, understand, and react to others’ emotions while comprehending the importance of interactions we have in our various networks of colleagues, friends, and family members
4. Relationship management—the ability to inspire, influence, and develop others while managing conflict

EQ is discussed further in Chapter 8 in relation to developing a celebration culture.

An entire industry of assessment tools, executive coaches, and talent management firms has been spawned by the recognition that effective leaders and effective careers are rarely possible without (1) objective analysis and comparison of one’s behaviors to evidence-based norms and (2) willingness to be receptive to the opinions of others. While self-awareness is among the least-discussed leadership competencies, it may be one of the most valuable (Musselwhite 2007).

Self-awareness reflects a willingness and an ability to objectively assess ourselves as if we were a wise and experienced friend evaluating our strengths and weaknesses. Objective self-evaluation covers dimensions such as the following:

- Appearance
- Language
- Moral values
- Active listening
- Integrity
- Open consideration of new and perhaps unpopular ideas or beliefs
- Sharing of credit and power
- Humility
- Engagement and empowerment of others

This self-evaluation can, and often should, allow you to reach the conclusion that you need to exhibit behaviors and perform actions appropriate for the social or organizational situation.

Many male leaders assume that their effectiveness must be shaped by an authoritarian or even autocratic management style. We disagree with this position and believe women leaders of the future
are more likely to be successful among knowledge workers because they are more receptive to and accommodating of alternate ideas and approaches in general than are their male counterparts.

In the rapidly changing environment healthcare leaders face, many have adopted the mind-set that they are required to know everything. They fear people will not follow if they admit they do not have all the answers; any apparent vulnerability could diminish their effectiveness as leaders.

In fact, however, our experience with healthcare managers young and old indicates the opposite is true, especially for those who work in competitive markets with interdisciplinary teams that recognize the power of diverse perspectives and experiences.

Legacy leaders acknowledge their weaknesses and appreciate that those weaknesses will be seen by others. The person who tries to hide weakness actually highlights it, creating the perception that he lacks integrity (Musselwhite 2007).

To promote personal growth, healthcare leaders should regularly engage in self-analysis and reflection. They may begin the process by asking the following questions:

- What do I want physicians to say about me as an individual?
- What do I hope my grandchildren say about my accomplishments as a leader?
- What do I want my leadership legacy to be?
- What level of curiosity for innovation and excellence will I nurture in my employees?
- Am I an effective mentor? (See Chapter 5 for more about mentoring and legacy leadership.)

In short, how do you create a leadership legacy you can be proud of, one that speaks volumes about who you are and what you are accomplishing? Several of the healthcare leaders interviewed for this book suggest that the process begins by taking an inventory of your personal values (make sure you clearly distinguish your personal values from your business values in this exercise).
When reflecting about their careers, the 21 interviewed leaders each observed that a major portion of one’s legacy road map is facing the challenge of creating balance in one’s life. Achieving life balance allows you to embrace the expenditure of quality time on the five “F” priorities—family, friends, faith, fun, and fitness—as well as the overheralded three Fs of fiduciary, finances, and fame. Several of these executives acknowledge that finding a work–life balance with their family was not recognized as essential early enough in their careers to be fully accomplished. Once you understand and are willing to practice the concept of balance, they note, it comes more easily.

Your personal values platform serves as the basis for the business portion of your legacy, as demonstrated by your personal vision and mission. Your chosen vision and mission should reflect your passion, what you expect to accomplish, and how you will accomplish it. Your personal vision and mission are the foundation of your legacy.

As mentioned earlier, healthcare leaders often begin to consider the impact of their leadership when they are about to retire or moving to a senior-level job in another organization. They should not wait for these milestones to occur but should instead begin to look forward as soon as they enter the profession.

When looking forward, legacy healthcare leaders aim to achieve success in terms of organizational and personal performance. They hope to receive positive recognition for their efforts by the individuals they work with directly and indirectly. Kouzes and Posner (2006, 3), however, observe that being self-absorbed in one’s legacy runs counter to the notion that leaders are selfless. By being more intentional about mapping your career plans, you can enhance the accomplishments of your career and the careers of those around you without having to indulge in self-absorbing, praise-seeking behavior.

Self-confidence and self-esteem pose different considerations than selfish pursuit of legacy. These two ingredients are necessary to make a positive difference, and they can encourage healthcare leaders to continuously explore a sense of self and self-worth that

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transcends the job or even the career. While necessary, however, self-confidence and self-esteem are not sufficient to build a career of impact. The leaders we spoke with are well aware that success cannot be achieved in a vacuum. They needed support along the way—financial, psychological, and other forms of assistance. They attracted this support through the intensity of their convictions and their awareness of the impressions they made on others. They became effective leaders because people believed in them, and people believed in them because they believed in themselves (Watson 2001, vii–ix).

THREE KEY ACTIONS TO HARDWIRE SELF-REFLECTION INTO YOUR LEGACY ROAD MAP

**Action 1:** Boldly define your desired career goals using the SMART goal-setting format (they should be specific, measurable, attainable, realistic, and timely). Conduct a candid assessment of your values that will serve as a guide for your journey to achieve these goals.

**Action 2:** Explore the art and science of the Q factor by asking questions that help clarify your values. These questions will guide your journey into a career of impact.

**Action 3:** Take a risk: Post your values in a public forum, and invite your staff and colleagues to discuss yours and define their own. Dialogues stimulated by self-awareness yield positive career plans.