

# MEDICAL LEADERSHIP AND MANAGEMENT CURRICULUM STUDY THEMES AND TOPICS

# 1. Medical Expert

Directly covered in the following study themes. Relevant to other role competencies.

## **Topic Study Area**

Relevance to other roles

1. Medical and professional governance

Leader / Manager / Professional

All medical practitioners understand that there are professional obligations and responsibilities inherent in medical registration. There are both legislative and professional penalties for breach of professional conduct. An understanding of the professional and legislative basis of these requirements and the roles of Colleges and registration authorities is expected. In NZ, "lobbying" is not an acceptable activity for public employees. We may "advocate". These rules come under State Services Commission rules requiring political independence.

- 1.1 Policies & Priorities
- 1.2 Organisational Structure responsibility
- 1.3 Codes of Professional Conduct
- 1.4 Ethical Standards & values based decision making
- 1.5 Legislative Requirements
- 1.6 Leadership and Management Models
- 1.7 Role of Colleges
- 1.8 Role of Medical Boards
- 1.9 Industrial & professional bodies
- 1.10 NGOs and their role
- 1.11 Workforce issues
- 1.12 Communication skills

# **Topic Study Area**

Relevance to other roles

2. Medico legal / health law

Leader / Manager / Health advocate

Health law is inherent in many other elements of medical management. Awareness of local and national legislative issues and their relevance to hospital and health care practice is an imperative for a medical manager. Issues such as consent, notifiable conditions, medical indemnity and HR law are of particular relevance to medical managers.

- 2.1 Legal system
- 2.2 Competence
- 2.3 Accountability
- 2.4 Notifiable infectious diseases and conditions
- 2.5 Mental health law
- 2.6 Advanced care directives
- 2.7 Common Health Litigation and recent important decisions
- 2.8 Medical indemnity
- 2.9 Privacy and its statutory limitations

- 2.10 The Coroner
- 2.11 Giving Evidence
- 2.12 Contract law

## Relevance to other roles

3. Health care systems

Leader / Manager

All health care, including individual patient care, is delivered within the context of a health system. Medical managers must understand the system within which health care is delivered. An understanding of the political, economic (including local and national funding sources), social, clinical, legal and technological interfaces that influence the effective operation of their institution is essential. Applying this understanding and insight to the functions of primary, secondary and tertiary care facilities to identify the relationships, overlaps and gaps between and across service providers, forms the basis of expert medical administration. In many countries, the private sector provides a major part of health care delivery. Medical managers must be familiar with the different financial and organisational structures found in private sector health care, and of the interactions between the public and private sector. There are also other major players in the health care arena including Veterans Health, and the role of private health insurance.

- 3.1 Acute Hospital Systems
- 3.2 Primary Care
- 3.3 Private health system
- 3.4 Defence health
- 3.5 Community Programs
- 3.6 Step Down Programs
- 3.7 Interface Programs
- 3.8 Chronic Health Care Models
- 3.9 Funding Models
- 3.10 Current/ Recent advances in treatment
- 3.11 Key Clinical Opinion Leaders
- 3.12 Health Insurance
- 3.13 Medical Benefits Schedule
- 3.14 Models of care
- 3.15 Australia and New Zealand systems and contexts
- 3.16 Emerging global context

# **Topic Study Area**

# Relevance to other roles

4. Priority areas

Leader / Manager / Health Advocate

Acknowledging the status of medical managers in influencing where health funds are invested, it is appropriate to advocate for less well served communities and in particular, underserved Aboriginal, Torres Strait Islanders, and Maori. To enhance this understanding, medical managers must be familiar with environmental and social determinants of disease and illness and national responses to these issues.

- 4.1 Generic Issues
- 4.2 National Health Initiatives
- 4.3 Indigenous concepts of health and sickness
- 4.4 Indigenous Health Inequalities / Maori health and the Treaty of Waitangi
- 4.5 Environmental determinants of disease & illness

- 4.6 Mental health
- 4.7 Workforce Issues

# 5. Specific health contexts

## Relevance to other roles

Leader / Manager / Collaborator

Health care is provided in a variety of contexts. Although the majority of the population of Australia and New Zealand live in major city centres, there is a significant population outside of this, as well as a growing market for international consultation and support. Medical administration requires skills and knowledge in the areas of health and medical consultation. This may range from gaining health information, to assisting with the analysis of a problem, through to offering considered opinions. There are also other major issues in the health care arena including developing technologies, such as telemedicine and e-health services.

- 5.1 Rural/remote healthcare
- 5.2 Indigenous health Australia and New Zealand
- 5.3 Medical / Health Management consultation
- 5.4 Telemedicine and e-health services

## **Topic Study Area**

## Relevance to other roles

6. Public / population health medicine

Leader / Manager / Collaborator

Public health medicine is a cognate study in medical management, and shares many of the management requirements. A medical manager needs to be familiar with theory of modern public health practice, which has moved a long way from purely statutory matters to a much wider goal of improving health and reducing inequalities at a population and subpopulation level. At the practical level, the medical manager needs to form constructive relationships with their local Population or Public Health Service and their primary care providers, and to maintain their understanding of the key determinants of good health outcomes for their communities. In this way, both public and privately funded health care provision can contribute, directly or otherwise, to the improvement of health in the communities served.

- 6.1 Understanding of all the determinants of health
- 6.2 Application of population health
- 6.3 Health inequalities
- 6.4 Preventative health priorities
- 6.5 Management of competing priorities

# **Topic Study Area**

#### Relevance to other roles

7. Comparative health systems

Leader / Manager / Collaborator

The study of health and reform agendas in other countries is always of benefit to medical managers. Others' mistakes can be avoided and others' initiatives adopted and modified. Given increased global mobility of the workforce, understanding International health issues and systems is often an employment advantage. It is important that an understanding of the general principles around alternate models of funding and service delivery is developed - and why Australia and New Zealand have adopted the model they have. Flux is common in all health systems and their functioning, and it is important to understand the cycles of flux, variability and the political determinants, locally, nationally and internationally.

## Relevance to other roles

8. Emergency Management and disasters

Leader / Manager

Australian Emergency Management principles apply the risk management approach to all hazards [(ASNZ 4360 (2005) and now ASNZ ISO 31000 (2009)]. It is essential to understand and adopt sophisticated disaster management and business continuity strategies that have been well developed over the last 30 years. Integration of resources to manage disasters requires rapid response by well trained staff. Where specialised services are required, these are provided in addition to core responsibilities within a hospital or facility, and should only be undertaken in appropriate situations.

- 8.1 Application of Risk Management for emergencies/disasters
- 8.2 Internal Disasters
- 8.3 External Disasters
- 8.4 National and State wide Disasters
- 8.5 Supporting international disaster responses

# **Topic Study Area**

#### Relevance to other roles

9. Ethics and Values

Manager / Professional

The academic study of ethics is playing an increasingly large role in medical education. Doctors must be able to clearly distinguish ethics from medical etiquette. Doctors must be able to develop a well founded ethical basis for their clinical decision making. Understanding of, and respect for, cultural values, not only of Aboriginal, Maori and Torres Strait Islanders but also of other ethnic groups, must be understood by medical managers, and form part of their professional practice. Medical managers will be seen as a contact point for all kinds of ethical questions from clinical to research.

- 9.1 Principles of Ethics
- 9.2 Confidentiality
- 9.3 Specific Ethics and Resource Allocation
- 9.4 Ethics Committees
- 9.5 Cultural Aspect of Values
- 9.6 Personal value system
- 9.7 Informed consent
- 9.8 Medico-legal accountability
- 9.9 Professional review boards/panels
- 9.10 Organisational ethics
- 9.11 Special settings
- 9.12 Health and self care of medical professionals

## 2. Medical Leader

Directly covered in the following study themes. Relevant to other role competencies.

## **Topic Study Area**

10. Health System Governance

## Relevance to other roles

Leader / Manager

The health system in every developed country is an extraordinarily complex set of organisations and stakeholder relationships. To achieve best outcomes requires a balance of strategy and policy with operations management and delivery. Legal frameworks exist to government departments making and exercising responses. Management at both a corporate and local level requires application of recognised business principles as they apply to health care delivery is imperative. Comparisons between private and public health systems and subsets within these will be covered. Other large organisations and application of financial and risk management principles are also considered in this topic. Health care planning necessitates activity at the tactical, operation, strategic and political level.

- 10.1 Macro Organisational Structure/ Options
- 10.2 Political/ Organisational Interface
- 10.3 Corporate governance
- 10.4 Micro organisational structures
- 10.5 International governance models
- 10.6 Corporate legislative requirements
- 10.7 Corporate responsibility
- 10.8 Ethics and pecuniary interest
- 10.9 Policy and strategy
- 10.10 Principles of corporate audit

# **Topic Study Area**

11. Leadership in Australasian health settings

Relevance to other roles

Communicator / Collaborator

Management incorporates aspects of leadership, but not all good leaders are good managers. It is therefore important that the elements of leadership theory and practice are understood.

- 11.1 Leadership theory
- 11.2 Leadership skills
- 11.3 Vision and innovation
- 11.4 The clinician's role in leadership in health care organisations
- 11.5 Australian and NZ medical leadership structures
- 11.6 Developing medical leaders
- 11.7 Being a member of an executive team

# **Topic Study Area**

Relevance to other roles

12. Centred Leadership

Communicator / Collaborator

Management incorporates aspects of leadership, but not all good leaders are good managers. It is therefore important that the elements of leadership theory and practice are understood.

- 12.1 Leadership theory
- 12.2 Leadership behaviours
- 12.3 Self-Awareness, emotional intelligence
- 12.4 Follow-ship, team and others

- 12.5 Reflection and reflexive thinking and behaving
- 12.6 Strategy and Change management
- 12.7 Clinical engagement
- 12.8 The clinician's role in leading in health care organisations
- 12.9 Developing medical leaders
- 12.10 Being a member of an executive team
- 12.11 Vision and innovation

Relevance to other roles

## 13. Strategy and policy

This topic encompasses the fundamental intersection between management and population health. It also mandates the adoption of evidence to direct policy and strategic action and necessitates stakeholder engagement. The essential division between Board and executives is also an important concept. To be taken seriously, we MUST use evidence to direct policy and strategy.

- 13.1 Policy making
- 13.2 Population health and inequalities
- 13.3 Advocacy
- 13.4 Strategic planning
- 13.5 Policy development
- 13.6 Planning frameworks
- 13.7 Political variations
- 13.8 Strategy and policy drivers
- 13.9 Levels of planning
- 13.10 Inter and Intra Departmental Strategy and policy
- 13.11 Policy implementation
- 13.12 Stakeholder management

## **Topic Study Area**

Relevance to other roles

14. Services and capital planning

Planning services and capital works for health services requires intimate knowledge of and experience in both management aspects, as well as clinical functionality. From this regard, medical managers are ideally situated with their skill set and background to be intimately involved in planning of all descriptions within the health sector.

- 14.1 Stakeholder Engagement
- 14.2 Community values
- 14.3 Information/ Evidence Needs
- 14.4 Health needs analysis/ gap analysis
- 14.5 Initial Plan priorities
- 14.6 Model Development
- 14.7 Clarification of Options
- 14.8 Evaluation frameworks
- 14.9 Master planning of facilities and interface with service design
- 14.10 Communicating the vision
- 14.11 Clinical plans for facilities
- 14.12 Operational specifications
- 14.13 Managing the stages
- 14.14 Funding cycles for capital works

- 14.15 Management for infrastructure through its life cycle
- 14.16 Media skills and public forum presentation

# Relevance to other roles

15. Consumer engagement

Health advocate / Collaborator

The continuing trend to consumer involvement in health care planning and decision making necessitates a clear understanding of the rules of engagement and the benefits of consumer participation in the health care system. Defining who the consumer is and the benefits of their participation requires regular evaluation to obtain best outcomes. Consumer involvement needs to be at community as well as individual level.

- 15.1 Political consumer role
- 15.2 Quality & Safety Consumer Role
- 15.3 Consumer Engagement
- 15.4 Consumer Participation
- 15.5 Community Input
- 15.6 Advocacy
- 15.7 Role of consumers on health service committees

# **Topic Study Area**

## Relevance to other roles

16. Politics and public media

Health advocate / Scholar

Health is always a politically sensitive topic, and this represents the public's interest in the provision of quality health care. Medical managers need to understand the political and media dynamics, and develop competent public presentation skills and clear strategies for media management, especially in regard to major incidents.

- 16.1 Understanding and managing the political environment
- 16.2 Building relationships with political representatives
- 16.3 Conflict of Interest
- 16.4 Public Presentation Skills
- 16.5 Media Management
- 16.6 Media management of Clinical Incidents
- 16.7 Emergency response and management
- 16.8 Working with Boards of Directors

# **Topic Study Area**

# Relevance to other roles

17. Stakeholders

Health advocate / Collaborator

One component of health advocacy, involving active use of collaboration, is the identification and involvement of stakeholders in the health care process. There is an increasing expectation from politicians, the community and accrediting bodies in health, that consumers/ patients are actively involved in health care decisions and processes. Therefore, it is imperative for stakeholder analysis and engagement to be performed by medical managers. This just has to include some reference to the special responsibility to advocate for indigenous health improvement, as long as glaring inequalities remain.

- 17.1 Identification of Stakeholders
- Stakeholder Engagement in planning and policy implementation Statutory Requirements
  Alternative Dispute Resolution 17.2 17.3
- 17.4
- 17.5 Manage Stakeholder Expectations

# 3. Manager

Directly covered in the following study themes. Relevant to other role competencies.

## **Topic Study Area**

18. Clinical governance

#### Relevance to other roles

Manager / Collaborator / Communicator

This topic addresses current theories and research on clinical governance and clinical risk management to enable acknowledgement and application of these principles to the work environment. The skills required to identify and assess the quality improvement tools that might be applied within the health service context are developed. Techniques associated with the management of various clinicians in the health care setting challenges, are also addressed.

- 18.1 Clinical governance frameworks
- 18.2 Evidence based Healthcare
- 18.3 Quality Improvement / Evaluation
- 18.4 Clinical Risk Management
- 18.5 Patient Safety/ Quality Frameworks
- 18.6 Patient Safety Structures
- 18.7 Medico Legal
- 18.8 Open Disclosure
- 18.9 Performance support and development
- 18.10 Introduction of New Technologies / Drugs
- 18.11 External clinical governance frameworks
- 18.12 Future Directions in Healthcare
- 18.13 Medical organisational structures

## **Topic Study Area**

19. Operational management of health services

## Relevance to other roles

Leader / Collaborator / Communicator

Operational management comprises aspects of daily management of a health service, including supply and demand management, performance indicators and performance management and team building and collaboration. A familiarity with current trends in operational management improvement is required, including principles of flow and service redesign, plan/do/study/act cycles and change management. Medical managers have to be systematic, analytical and evidenced-based in order to facilitate operational management in a competent and professional manner.

- 19.1 Operations research (production planning) methodologies
- 19.2 Access management
- 19.3 Demand management
- 19.4 Resource management
- 19.5 Change management
- 19.6 Understanding and interpreting health information data
- 19.7 Role of IT in knowledge management
- 19.8 Alternative Health Care Delivery
- 19.9 Operational KPIs & reporting
- 19.10 Health services accreditation systems
- 19.11 Workforce and staffing
- 19.12 Implementation of strategy and outcome evaluation
- 19.13 Complex organisations management

Mary Parker Follet, an influential early-20th-century social commentator and writer, considered management to be "the art of getting things done through people." For this reason, all aspects of people management (employment, performance, wellbeing, professional development, and workforce planning and cultural issues) are essential learning areas for medical managers. It is essential to have a clear understanding of the legal/industrial requirements in medical staff management/employment. In NZ, a commonly cited and understood proverb is this one: He aha te mea nui? He tangata. He tangata. He tangata. What is the most important thing? It is people, it is people, it is people.

- 20.1 Medical staffing categories
- 20.2 Employment/engagement legal requirements
- 20.3 Performance management
- 20.4 Professional development
- 20.5 Induction and orientation
- 20.6 Medical workforce planning
- 20.7 Workforce issues
- 20.8 Workforce recruitment and retention strategies
- 20.9 Medical appointments & credentialing
- 20.10 Practitioner health issues
- 20.11 Staff cultural issues
- 20.12 Special registration categories/pathways
- 20.13 Working in teams

## **Topic Study Area**

# 21. Information management

#### Relevance to other roles

Leader / Scholar / Communicator / Collaborator

Underpinning professional health management is information and its management. Information systems require significant investment in capital, as well as human resources. An understanding of modern information systems is required, including the potential benefits and risks they bring, and how to ensure decisions are enabled and supported by information and the supporting information resources, rather than driven by them. A sound understanding of policy, strategy, governance, technology, human factors and cost benefits of e-health is essential.

- 21.1 Appropriate use of health information and health information systems
- 21.2 Uniformity and standards of data transmission across jurisdictions
- 21.3 Internet communication
- 21.4 Governance data
- 21.5 Balanced scorecard
- 21.6 Principles of Information Technology
- 21.7 Responsible use of information
- 21.8 Clinical management IT system/s
- 21.9 IT risk management
- 21.10 Systems design
- 21.11 E-health
- 21.12 Delivery of Information Technology
- 21.13 Principles of knowledge management
- 21.14 Medical records administration & Coding
- 21.15 Epidemiology and statistics

- 21.16 Privacy legislation
- 21.17 Multi cultural matters and the appropriate use of interpreters

22. Risk and risk management

## Relevance to other roles

Medical Expert / Collaborator

Most activities of the human condition have a degree of risk associated with them. It is impossible to eliminate all risk from all situations. In complex health organisations, and in interactions with people about their health/ employment/ welfare, the major objective is to balance and weigh risks of action and inaction. In this manner, best practice in risk management needs to be employed in every activity of employment in the health sector.

- 22.1 Theory
- 22.2 Standards
- 22.3 Methods
- 22.4 Application in management
- 22.5 Application in clinical care

## **Topic Study Area**

23. Funding and resources

#### Relevance to other roles

The patient and the Community are central to health service planning and delivery. Advocating for health care service on behalf of an individual or a population requires clear understanding of need, innovations, funding sources and historical service models to advocate for change. Many of the aspects of this topic are encompassed in medical expert and communicator roles as well.

- 23.1 Patient experience and customer service management
- 23.2 Community health needs assessment
- 23.3 Historical Service Delivery
- 23.4 Innovation/New Technology Assessment
- 23.5 Sources of New Funds
- 23.6 Political Imperatives in Resource Allocation
- 23.7 Expectation management

## **Topic Study Area**

24. Business planning

## Relevance to other roles

Medical Expert / Leader/ Collaborator / Communicator

Business planning is a critical component of managerial practice. The ability to prepare a case in support of investment in a new service and/or equipment item is essential. This will include assessment of the qualitative and quantitative benefits of the new service or item, consideration of impact on other parts of the organisation and quantitative assessment of the cost/benefit. Presentation of this material in a form suitable for senior management, Board or Minister is an important element of this work.

- 24.1 Business cases for specific projects
- 24.2 Business planning processes
- 24.3 Impact of new technology
- 24.4 Alternative investment option appraisal

- 24.5 Return on investment
- 24.6 Measurable outcomes KPIs

25. Finance and resource allocation

Relevance to other roles

Medical Expert / Collaborator / Communicator

Accounting principles, processes and procedures and their general application to the health care system are explored within this topic. Fundamental accounting practices, developing and implementing a budget for decision-making and managerial control, cost concepts, and the different methods of budgeting skills will be developed. Case mix based funding, both in the private and a public sector, is a topic of current and developmental interest. The difference between technical and allocative efficiency and the allocation of scarce resources is a continuing management challenge, and familiarity with methods used to prioritise the distribution of finite fiscal resources is essential.

- 25.1 Basic finance
- 25.2 Financial reports and accounting conventions
- 25.3 Health system funding
- 25.4 Budget preparation
- 25.5 Case mix
- 25.6 Activity based costing
- 25.7 Business cases and business case development

#### **Topic Study Area**

26. Project Management

Relevance to other roles

Collaborator / Communicator / Advocate

From time to time, major project planning is a task for medical managers. But on a regular basis, more projects require similar attention to detail; this topic encompasses procurement planning, tenders and contracts, as well as project implementation and evaluation.

- 26.1 Initiation of Project
- 26.2 Stakeholder Engagement
- 26.3 Project Plan Development
- 26.4 Project Plan Implementation and Resourcing
- 26.5 Project Monitoring and Evaluation
- 26.6 Maintenance or decommissioning of a project

# 4. Scholar

Directly covered in the following study themes. Relevant to other role competencies.

## **Topic Study Area**

Relevance to other roles

27. Research

Collaborator / Scholar

This topic encompasses a vast array of research methodologies and areas of interest. It can span traditional wet bench lab research to qualitative data analysis, such as may be involved in service evaluation. The integration of research with clinical practice is an additional challenge for the medical manager. For NZ, there should be some reference to the specific needs of research involving Maori. All research needs to consider the risks of over sampling of some populations.

- 27.1 Methodology and method
- 27.2 Management
- 27.3 Data collection, analysis and interpretation
- 27.4 Governance
- 27.5 Ethics and the law
- 27.6 Funding of research
- 27.7 Publication and presentation
- 27.8 Clinical trials
- 27.9 Managing relationships with external organisations
- 27.10 Translating the results of research into evidence based clinical practice
- 27.11 Intellectual Property
- 27.12 Ethics/ research committees/ systems of evaluation

# Topic Study Area

Relevance to other roles

28. Teacher, training and education

Collaborator

Current efforts to enhance vertical integration of undergraduate, immediate post graduate and vocational training requires a clear understanding of other educational institutions (eg. Vocational training colleges), their training programs, funding and priorities, and innovative topics such as interprofessional education. Ensuring an adequate balance of medical staff's training requirements and facility's service requirements is a role of the medical manager.

- 28.1 Educational theory
- 28.2 Medical School
- 28.3 Medical prevocational curriculum
- 28.4 Junior Medical Staff training
- 28.5 Training Registration
- 28.6 Service vs. training imperatives
- 28.7 Postgraduate training structures
- 28.8 Train the Trainer Programs
- 28.9 National policy initiatives

29.11 Analytical skills

Manager

One of the great successes of EBM has been the proliferation of a strong evidence basis for many health care interventions and management decisions. A familiarity with most aspects of EBM is required, including an assessment of the quality of the evidence and its potential application to evidence based policy decisions in health care.

29.1 Use of EBM 29.2 **EBM Information Technology** 29.3 Classification of EBM 29.4 Statistical measures in EBM Quality of Clinical Trial publications 29.5 Limitations of EBM 29.6 EBM clinical and management decision support systems 29.7 Understanding of the difference between policy/protocols/guidelines 29.8 29.9 Understanding of how to implement policy/protocols/guidelines 29.10 Best practice