USE YOUR CLINICAL EXPERTISE TO BECOME A HEALTHCARE EXECUTIVE

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• DECLARATION STATEMENT: I HAVE NO RELEVANT RELATIONSHIPS WITH INELIGIBLE COMPANIES TO DISCLOSE WITHIN THE PAST 24 MONTHS

EDUCATIONAL OBJECTIVES

At the conclusion of the session participants should be able to:

•Develop an appreciation of the broader healthcare landscape to advance in executive leadership while promoting the delivery of high-quality care and representing the PA profession

•Recognize the stakeholders and leadership skills needed to be successful

•Appreciate the value of creating a personal leadership strategy and developing key relationships to advance an executive career



INTRODUCTION

- This session will provide strategies and tactics that will help PAs advance in payor or corporate roles and advance to c-suite leadership
- PAs can use skills and strategies to transition to a role that is more strategic, executive, and systems based.
 - This session will encourage methods to leverage clinical expertise while changing healthcare delivery systems and processes to offer a new career trajectory.
 - This session will encourage leadership competencies to showcase increasing PA presence in executive healthcare leadership roles and emphasize this skill in advancing the PA profession.



THE WAY TO GET STARTED IS TO QUIT TALKING AND BEGIN DOING.

Walt Disney



OUR COMPLICATED US DELIVERY SYSTEM

- Payors
- Regulators State and Federal
- Access/Quality/Cost/Equity



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POPULATION FOCUSED/VALUE BASED HEALTH CARE

- Proactively identify & outreach to at-risk patients
 - Stratification Lists
 - Emergency department & hospital discharges
 - Care team identification
- > Shared Visits with Interdisciplinary teams
- Care Plan/Action Plan/Patient Self-Management + Digital Applications
- Coordination across sites, specialties, care teams
- Follow-up through registries
- Linking with community resources



HOW PAS FIT

Credit and AMA Formatted Reference:

Optimal Team Practice: Learn More About OTP. AAPA. https://www.aapa.org/advocacycentral/optimal-team-practice

CHANGES PAs ARE SEEKING

To support Optimal Team Practice, states should:



other healthcare provider in order for a PA to



Create a separate majority-PA board to Authorize PAs to be eligible regulate PAs or add PAs and physicians

WHY OPTIMAL TEAM PRACTICE MATTERS



PAs will be fully responsible for the care they provide.

\$

for direct payment by all

HOW DO YOU GET FROM HERE TO THERE?



SETTING A STRATEGIC TIMELINE





SMART GOALS = SPECIFIC, MEASURABLE, ACHIEVABLE, RELEVANT AND TIME BOUND

FOUR CATEGORIES OF STAKEHOLDERS

AMA Formatted Reference:

Blomquist B. How to do a Stakeholder Mapping Exercise. blog.jambo.cloud. https://blog.jambo.cloud/stakeholder -mapping-exercise



High Interest/High Influence: these are your **key players** and should be managed closely. These are the stakeholders who can most impact your success (or failure). These stakeholders must be engaged and completely informed. Put your highest engagement efforts into this group.

Low Interest/High Influence: as this group can influence your career, you should keep them informed help meet and make them feel involved. This group won't require as much engagement as your high interest/high influence stakeholders but should still have frequent interactions.



High Interest/Low Influence: keep this group informed. Talking with them through regular meetings is often helpful for feedback on your career. These stakeholders can also help identify leadership areas that could be improved or may have been overlooked.



Low Interest/Low Influence: this group has little influence or interest in your career and should be monitored, but don't ignore them. Let them know about your progress and then periodically check with them.

STAKEHOLDER MAPPING

Stakeholder Analysis is based on the belief that there is a reciprocal relationship between an individual and certain other organizations, and groups.

	Public	Private	Society	Regulatory	Academia	Advocacy & Professional Organizations	Patients & Families	Health Care Delivery Organizations	Media
Who are they	CMS, HRSA		Grant Agencies, Foundatons	State Medical and Nursing Boards, Licensing Agencies, Payers, ACOs	leaders, Subject	Physician groups, Nursing groups, CHW and Public Health Associations		Hospitals, Long term care settings, home health agencies, hospice agencies, behavioral health services, faith based agencies, durable medical equipment services, pharmacy services	Media outlets as public influencers
Roles(s)	Policy influencers and funders			Patient advocates, policy influencers	Researchers	Provider and patient advocates, policy influencers	Personal health consumers, patient advocates	Service agencies, funders	News disseminators, influencers
How they will be affected	May need to provide funding and/or lobby for regulatory changes	provide funding and/or data	to clinical team in order to promote acceptance	Would ensure scope of practice is not infringing on other professions and does not require licensing or added certification or training	Research contribution and provision of data to address efficacy and cost effectiveness	Protection of scope of practice for other professions, ensure compliance with existing regulations	Consumers of services to increase access to care and improve disease management	Funders and policy makers for delivery models	Would share CHW concept, successes and challenges to help patients understand CHW role and improve acceptance on clinical delivery team
1	Funding, legislative change	Funding, data	Improved public acceptance and awareness	Regulation and legislation, provision for reimbursement mechanisms	Research, support, data	Legislative advocacy, support for payment reform	Increased acceptance and engagment with CHWs	Funding, developent of innovative clinical delivry models	Media coverage
1	Development of innovative team based care models	increased numbers of		Compliance with state and federal regulations for clinical delivery services	Data showing clinical efficacy with CHW clinical delivery interventions	Clear agreement on the role of the CHW and defined scope of practice within a clinical service delivery model	health services, greater ease of chronic disease management	Greater cost efficiency tthrough team redesign with CHWs allowing education and chronic disease management influence over a larger population	Promotional material educating lay people about the role of the CHW on the health care team
Willingness to engage	Medium	Medium	Medium	Medium	Medium	High	Medium	High	Medium
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Necessity of involvement	High	High	Medium	High	Low	High	High	High	Medium
Overall strategic importance	Liah	High	Medium	High	Low	High	High	High	Medium

EXECUTIVE LEADERSHIP – CORE COMPETENCIES



LEADERSHIP DEVELOPMENT

Organizational Leadership

Expansion/Creative definition of scope

Mentorship/Intern opportunities

Using individual development plans to increase learning

State/Regional/National Leadership

Participation in Payer Advisory Councils

State organizations – IOM, Health Commissions

National Appointments – Technical Assistance Panels, Advisory Boards

Critical Corporate Competencies

Utilization and Resource management • ROI/Business Case

> Team Leadership/Direct Reports



TAKE HOME POINTS

- Make your own personal strategic plan
- Get Help
- Be patient most careers are not linear but iterative
- Dream big
- Lead with a capital L

THANK YOU!

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