

FINAL REPORT 2017 HEALTH POLICY SCHOLARSHIP

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The Brandeis course was a weeklong experience covering advocacy, health policy, reimbursement systems, business management, accounting, metric reporting and dynamic leadership. This broad exposure turned out to be extremely useful for me. The course occurred in June 2017, and I assumed the role of Surgeon-in-Chief at Children's Mercy Hospital July 1.

Shortly after coming into the role, I was handed financials and balance sheets to review with our administrative director, which I was far more equipped to read, interpret and provide meaningful comments because of the background gained during the course. The course provided me the knowledge to balance depreciation of capitol expenses against the potential investment brought by strategic initiatives and make logical decisions in order to steward the resources of the institution into the future. In addition, I became poised to ask the critical questions based on the financial reports, which impacts staffing, purchasing and growth.

As would be expected, I was also faced with multiple circumstances where I was called upon to exhibit leadership skills. The Brandeis course focused on a dynamic leadership style. In this model, we learned to suppress our first reaction, think about what the system needs depending on the level of crisis, and then respond. This response can range from pushing the decision back to the front line to taking care of the problem personally. We learned to discern from clues based on the characteristics of the team and nature of the problem, which course of action would serve the team best. This requires cognizance of not just finding a solution for the issue at hand, but understanding the impact on the expected subsequent issues. The course was immensely helpful in navigating these rough waters.

The breakout sessions focused on system dynamics, and understanding the relative roles of each team and specifically each player within those teams was extremely useful. Instead of focusing on what needs to be done to serve a personal agenda, I now understand which people need to be engaged to facilitate the future direction in the most cohesive and productive way without compromising movement or risking disengagement from the staff.

Advocacy was frankly a blind spot in my view of leadership prior to taking the course. Now I have a much better understanding of the levels that each voice must rise through before influencing lawmakers to create an impact on the rules we all function within. While I have yet to make this kind of influence, I recognize the pathway and am prepared to move forward. Locally, this has taught me to not except antiquated institutional bylaws that have migrated over time from contemporary practice. Recently, I acquired the institutional policy on sending surgical specimen to pathology, circulated my questions to other institutions for external input, and then shared the information with each division chief to provide a revised policy. This benefited our pathology department by providing a more rational and decisive use of our resources. This will be reviewed by the medical executive committee in the coming months and end the frustration and competing interests of surgeons and pathologists.

I will serve as program director for the AAP section on surgery in 2019, which required putting a program together by the past April. Now cognizant of advocacy as a result of taking the course, I worked with the Section on Emergency Medicine (SOME) and our incoming President of the Section on Surgery to rearrange our traditional template from 4 educational symposia to 3 symposia where the featured Saturday afternoon session will be a joint session with the SOEM to discuss gun violence in children. This session will review current laws, mental health issues, and will provide an optional two-hour advocacy workshop where we hope to generate action items that will shape the safety of the future environment for our children. Without the Brandeis course, it would have never crossed my mind to shift from the standard didactic format we have used for decades. I have reached out to the ACSPA to become a counsilor for the Health Policy Advisory Council. Unfortunately, I could not make the ACS Leadership and Advocacy Summit in Washington D.C. this year due to scheduling conflicts, but will be looking for the opportunity next year.

As for the budget, the scholarship was used for the course last year, which left a small amount that was used toward my participation in the ACS.

Summary of Travel Expenses

Expense Type	Estimate	Expense	Allowed	Edit
Airfare - Advanced	\$542.46	\$542.46	\$542.46	Edit Airfare - Advanced
Conference	\$0.00	\$0.00	\$0.00	Edit Conference
Ground Transportation	\$99.50	\$99.50	\$99.50	Edit Ground Transportation
Lodging	\$1,260.00	\$1,260.00	\$1,260.00	Edit Lodging
Meals - Traveler Only	\$476.00	\$243.00	\$243.00	Edit Meals - Traveler Only
Mileage 2017	\$42.80	\$42.80	\$42.80	Edit Mileage 2017