Overall, this was a fantastic course that covered several different areas of interest and importance that are not covered elsewhere in training or practice.

After arrival on Sunday, we gathered for a quick meet and greet during which we had a brief introductory ice breaker. It was wonderful to have a diverse group of surgeons attend, including many different sub-specialties and various practice types represented. The dinner speaker was John Armstrong, MD, who gave a fantastic talk about why it is important for surgeons to be involved in advocacy.

Dr Chillingerian kicked off the conference on Monday with an outstanding session on strategic thinking and decision-making processes. Using an interesting case study, we discussed how to change minds and the effect of leadership on culture. This was an outstanding and incredibly practical and useful session.

Frank Opelka gave an enlightening update on the ACS focus in advocacy for the upcoming year. He gave a particularly helpful tip in advising us to come in with a solution when discussing a challenge with legislators.

Stuart Altman then started his incredible series of lecture on Health Policy in the US, where we have been and where we are now. His personal narrative and personal involvement made these lectures outstanding and fun.

Dr Chillingerian’s talk on clinic management and how to deal with flow and resource utilization was another incredibly applicable and useful talk. I really appreciated all of the use of actual cases and small group work with Dr Chillingerian and felt that his talks were full of information that I would be most likely to bring back and put to work in my own environment. I learned so much from each of these sessions. The Leadership Styles session gave me insight into my own personality and strategies. The Leading Change in Complex Systems lecture and exercise was outstanding and so insightful!

Robert Mechanic’s talk on Medicare models was less informational for me as this was not new information. Additionally, I felt it was very depressing about the state of healthcare in the US. There was overlap in Chris Tompkins talk as well. Although these were not that informational for me, they were still critical talks especially for those less familiar with the new models.

Deborah Garnick’s talk about quality and performance measures was very interesting. I think that both she and Jody Gittell needed to be given more time as their talks were both really useful but too short. I would really have liked to have more time to dig into the Relational Coordination topic from Jody Gittell.
Brenda Anderson gave a fantastic talk that explained the SEC and oversight that was very educational. I also learned a lot from the budget balance sheet and how the accounting is done. The case study for RetroTrac was a very useful exercise.

The final day exercise on negotiation, with the Angry Surgeon exercise, was a useful leadership tool for all of us to use. However, we ran out of time to cover some of the content which I think would have been very helpful. Perhaps plan for this session earlier or make sure everyone knows the schedule will run all day that day. The Chestnut Drive exercise was also really useful. I would have liked longer sessions on this important topic which we can use everyday!

Overall, this was a great week and I really enjoyed the camaraderie of the group and the lessons learned. I will put so much of this information directly to use in my role at the hospital. I am very interested in learning more on many of these areas and definitely will consider pursuing a Healthcare MBA or similar in the future.

Thanks to all of the amazing faculty and the ACS for co-sponsoring this course.