

## Relationship Management

*Leslie Ann Fox, MA, RHIA, Patty Thierry Sheridan, MBA, RHIA, CCS*

*Thank you to Advance Magazine for permission to use this article*

“For the strength of the pack is the wolf, and the strength of the wolf is the pack,” wrote Rudyard Kipling in The Jungle Book. We can learn much about leadership and survival in natural systems by watching the lead wolf. The leader of the pack presents a leadership model that looks like he continuously scans the environment for opportunities or threats, determines the next best moves and guides his “organization” through the turbulence that always accompanies change.

Today’s health information management (HIM) leaders must do no less. Threats to the survival of the traditional HIM role in health care are numerous, and many opportunities for new roles are emerging. Technology, economic forces and market demand are changing the ways in which health information is collected, processed, stored and retrieved. The effectiveness of HIM leadership within the health care industry, as well as within individual institutions, will be a matter of survival for our profession and the body of knowledge we bring to the health care delivery process.

Continuing the series of columns on leadership from a systems perspective, this month’s column focuses on my second key principle of leadership derived from Bowen Family Systems Theory: Continuously work on differentiation of self. (See “Differentiation Provides a Clear Vision of High Level Functioning,” ADVANCE for Health Information Professionals, July 5, 1999.)

### Continuously Work on Differentiation of Self

This principle is closely tied to my first principle of leadership, “focus on self, not others,” discussed in the first exclusive Web column titled “Leadership from a Systems Perspective.” However, continuously working on one’s self goes beyond looking at the leadership role in specific workplace situations. Differentiation of self is a life-long process of emotional maturing. It is the process of developing an autonomous self that can function independently while at the same time staying connected to the significant individuals and emotional systems in one’s life. It means neither fusing with significant others nor cutting off from them in the face of real or imagined threats to one’s self or the organization’s survival.

Well-differentiated leaders are clear about their personal beliefs and life goals. Thus they have internally driven reference points and stabilizers that enable them to maintain balance in the face of adversity or danger. They are able to articulate their positions clearly and consistently, without being emotionally hijacked by the undifferentiated or reactive behavior of others in the emotional system. The clarity and consistency, as well as the equanimity of a well-differentiated individual are attractive to others and elevate the differentiation of the entire system/organization. People want to follow such leaders.

What then are some of the characteristics of mature well-differentiated leaders? They

- Know where their responsibility begins and ends.
- Hold themselves and others appropriately accountable.

- Clearly express their expectations to subordinates and peers.
- Contain their anxiety rather than allowing it to spread.
- Look at issues from all sides.
- Formulate new positions based on facts.

### Case Study

The director of HIM at a large teaching hospital had a chronic shortage of coders in the inpatient record area. To add to her miseries, administration had recently asked her to centralize all of the hospital's coding, thus, she was preparing to take over outpatient coding for the clinics, outpatient therapy departments, laboratory and imaging services. She had no experienced outpatient coders, no furniture or equipment, and little space to allocate to this function. The challenge she was facing seemed daunting.

She appointed a special interdepartmental coding task force to be headed by her coding supervisor. She included two of the inpatient coders, the record completion supervisor, representatives from each of the clinical areas and the HIM liaison from the information systems department. At the first meeting of the task force, the Director gave the task force a clear charge. They were to determine how new outpatient coding responsibilities could be integrated into the existing coding function in the HIM department. They were to assess needs and costs for staffing, training, coding tools, equipment, space, etc. and make recommendations for implementing a new comprehensive coding function as cost-effectively as possible. She wanted weekly progress reports and a completed report within one month.

As the task force's progress reports came to the director, it was noted that some, or the entire, outpatient coding could be outsourced to a professional coding service working remotely. The remote outsourcing solution would solve the space and equipment issues, as well as the problem of a shortage of qualified coders in their community. However, the coding supervisor informed the director that the outpatient department representatives were against outsourcing. They were concerned about quality and confidentiality of patient data being transmitted to remote locations. At the coding supervisor's request, the director attended the fourth and last meeting of the task force to hear their conclusions and recommendations.

The coding supervisor presented the needs assessment and the options that the task force had identified, but they had not reached consensus on the recommended action plan. Representatives from the inpatient department stated that outsourcing was a good, cost-effective option. They had cogent arguments to rebut the concerns of the clinical departments about quality and confidentiality.

For example, the outsourced coding would be subjected to the same confidentiality and data quality control processes as coding done in-house. Further, the outsourcing company's information systems department manager had presented a state-of-the-art security protocol for information transmittal. The hospital's information systems department representative agreed that the security protocol looked good.

The HIM director asked the clinic representatives to discuss their concerns about the proposed outsourcing solution. She listened respectfully as they described potential worst-case scenarios. They also voiced their resentment that the department's staff could find time, space and coders for the inpatient work, but not for their work.

The director was calm but thoughtful in her response. She told them it was her responsibility to assure cost-effective, quality coding is done for the hospital. However, she also believes it is her responsibility to maintain good working relationships with the other departments. Thus she was asking them to extend the collaborative planning period for another week, to make sure that they prepared detailed cost comparisons between the outsourcing solution and trying to recruit, train and properly equip several outpatient coders to work in the HIM department.

Further, she suggested that the clinical members of the task force talk to the proposed outsourcing company's references directly. If the company's other clients were completely satisfied, wouldn't they reconsider? Then she suggested that an outsourcing plan could be phased in slowly, perhaps one clinical area at a time to give everyone a level of comfort with the proposed solution. Several members of the task force were still not happy and expressed their displeasure, but they did agree to look at the option further.

At their next meeting, after reviewing the cost comparisons, the entire task force recommended that remote outsourcing be done in one outpatient department for a one-month pilot test. At the end of the test they would make a final recommendation.

The HIM director in this case study demonstrated well-differentiated leadership. She was clear about her responsibility to the hospital, her goals for the task force and her beliefs about collaborating with other colleagues. She managed her own anxiety in the presence of the anxious responses of the task force members by calmly directing the parties to examine facts and look at all sides of the issue. She herself remained open and flexible. Such leaders foster thoughtful decision making and a high level of functioning in their subordinates and peers.

*Leslie Ann Fox, is president of Care Communications Inc., Chicago. She invites readers to send their thoughts and opinions on this column via e-mail to [lfox@care-communications.com](mailto:lfox@care-communications.com)*