Medical Directors: What, Why, How

George E. Linney, Jr., and Barbara J. Linney
American College of Physician Executives, Tampa, FL, 1993, 44 pp., $15 (members), $20 (nonmembers) (paperback)

AT A TIME OF UNPRECEDENTED CHANGE in healthcare delivery and unprecedented need for physician leadership, Medical Directors: What, Why, How provides useful insight into the medical director's role. In a succinct and practical presentation, the authors answer the questions posed in the title while encouraging careful analysis and introspection by those involved in day-to-day interactions with medical directors.

The preface by Roger Schenke, executive vice president of the American College of Physician Executives, describes this book as a "menu with a map." Schenke argues that there is no clear-cut description of a medical director's role. In a succinct and practical presentation, the authors answer the questions posed in the title while encouraging careful analysis and introspection by those involved in day-to-day interactions with medical directors.

The Linneys, known for their work in healthcare and career counseling, point out that medicine is a profession of professions. One "profession" a physician may choose to pursue is in the area of administration and management. Whereas in times past physicians may have preferred not to be involved in administrative pursuits, clearly reform of the healthcare system presents a distinct opportunity and need for physician leadership in healthcare entities. The questions are, What, why, and how?

In clearly written chapters, perhaps too basic in spots, the authors first provide an overview of the medical director's roles and responsibilities and explain 17 areas where medical directors wield influence in healthcare enterprises. Second, they explain steps necessary to create a medical director position, including the differing skills and responsibilities required of medical directors in group practice, health maintenance organization, and hospital settings. Next, they make a clear case for ensuring that lines of authority are well defined and that the medical director's power and influence are well understood, for both the director's and organization's sakes, before hiring is concluded.

In perhaps their most important analysis, the Linneys outline the steps required to convince a wary medical staff that a medical director can be an important addition for an organization. They explain the arguments administrators will encounter while planning for such a position, and they provide the insight necessary to disarm these attitudes and behaviors. For example, some physicians may argue that one physician cannot adequately or accurately represent all physicians' viewpoints. They ask, Why not rely on medical staff officers for input?

Last, the authors describe the steps those aspiring to medical leadership or management positions should consider. This primer should prove most useful for aspirants to such positions because it pointedly gives the dos and don'ts—down to being well groomed and on time.

This monograph is accompanied by several helpful references. It is detailed enough to be useful but is still concise, so it can be used by physicians, board members, and medical staff leaders—all important to making the medical director position effective.

Many times in recent years, when asked to discuss the prospects for a career in medical administration, I have resorted to personal interviews and mentoring experiences as I told those interested, "There's just nothing written I can refer you to." The Linneys have changed that way of thinking and provided a framework for the consideration of physician leadership careers in a well-written publication. Now that they have answered what, why, and how, for those considering medical director leadership positions, the salient question may be, When?

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BOOK BRIEFS

Restructuring Health Care: The Patient-focused Paradigm


J. Philip Lathrop offers a new paradigm of hospital leadership to set the stage for real improvements in performance. He defines the problem with the current system as one of compartmentalization and offers theories and approaches for implementing restructuring efforts, including making the necessary shift from a hierarchical, functional organization structure to a patient-focused approach. Cases are drawn from other industries and Booz Allen Health Care's experience in helping hospitals implement patient-focused care.

BOOKS RECEIVED

The Art and Vocation of Caring for People in Pain, Karl A. Schultz, Paulist Press, Mahwah, NJ, 1993

A Death in the Family: Orphans of the HIV Epidemic, Carol Levine, ed., United Hospital Fund of New York, New York City, 1993
