



Physician managers warned of media's growing power

Patrick Sullivan

How influential are the media in the day-to-day operation of Canada's hospitals? More than most physician executives recognize, says David Levine.

Levine may be biased, because he was in the media's sights for months last spring after being appointed president and CEO of the new Ottawa Hospital. His background as a Parti Québécois insider made him a lightning rod for demonstrators who were angry that "a separatist" had been appointed to the newly amalgamated hospital's top job, and this in turn attracted media attention. Ironically, on the same late-February day that he addressed the annual meeting of the Canadian Society of Physician Executives (CSPE), Levine was in the news again — the *Ottawa Citizen* was reporting that he was being wooed by Montreal's new French-language super hospital.

For Levine, media rumours like that are nothing new — and they are probably a major reason why he thinks physician executives should never underestimate a reporter's ability to influence a hospital and its agenda.

Surprisingly, though, he thinks his own rough introduction to hospital politics in Ottawa — and the accompanying media frenzy — were 2 of the best things that could have happened to the new Ottawa super hospital. Besides taking the focus off the forced amalgamation of the General, Civic and other area hospitals, the controversy surrounding his appointment helped unite a brand-new hospital board. "In this case the board was thrown together to defend its new hospital, and I think we've had positive experiences every since. We have achieved in 2 months what usually takes 12 to 18."

Levine, a former CEO at Montreal's Notre Dame Hospital, said the media represent "an external zone of power" that hospital administrators must be wary of but also use to their advantage. "[Reporters] are aggressive. They never give the benefit of the doubt, and they present bad stories as everyday events because that is the way to get the shocking headline." He said hospital managers have to "work this zone like the politician works the room."

He offered the 60 doctors at the meeting this rule of thumb: "If you're comfortable enough with whatever you're doing to have it appear on the front page of the *Ottawa Citizen*, then do it. If you're not comfortable, then don't do it, or change it. That may seem to be a strange criterion, but it is a very important one."

Levine, whose audience included the chief of staff at his own hospital, Dr. Chris Carruthers, stressed that the media

is only one of more than a dozen internal and external "zones of political power" that managers must learn to navigate around.

Although the "physician zone" is the most important internal zone, he said professionals such as nurses are beginning to wield increasing power. As well, the power and importance of hospital boards should never be underestimated. For instance, the Ottawa Hospital experienced a relatively smooth merger because its new hospital board included a lot of new blood and new ideas. However, a similar merger of 3 Montreal hospitals has been difficult because members from each of the 3 hospitals are still defending their old turf instead of thinking of what's best for the merged facility.

Levine said hospital leaders must articulate a vision that others accept. He pointed to one of his first experiences in Ottawa — the province's decision to close the Riverside Hospital. Instead of closing it, Levine was able to sell the idea of turning this relatively modern and refurbished facility into an ambulatory care centre. He first discussed the idea with department chairs from the University of Ottawa, and after "testing the waters" he was able to promote the idea publicly.

Selling ideas is one of the keys to being a successful hospital leader. "If you're not a good salesman, then find someone on your team who is," he said. "And use the media well."

Levine concluded that when change is needed, it is best for hospital managers to move swiftly. He described the zones of power confronting managers as icebergs, and noted that a ship that is moving swiftly has a better chance of manoeuvring clear of danger.

New society flourishing

Carruthers, who serves on the CSPE steering committee, says membership has passed the 200 mark since roughly 40 doctors launched the new organization a year ago with support from the CMA.

More information is available at the CSPE Web site, www.cma.ca/cspe. Physicians can join the new group online, or send a cheque for \$75, payable to CSPE, to Dr. Chris Carruthers, 3540 Paul Anka Dr., Ottawa ON K1V 9K8; ccmd@home.com.

Patrick Sullivan is News and Features Editor at CMAJ.