

Purpose and resilience: How to lead authentically and cultivate high-performing teams

COVID-19 has had a profound disruption on the healthcare sector, creating enormous leadership and talent challenges that did not exist even a few years ago and accelerating others. As [veteran CEOs exit their roles](#) and new ones step in, mergers take place and talent (both senior and frontline) moves between organizations, the sector is at a unique inflection point. New teams are coming together, established teams are beginning to work with new CEOs, and everyone throughout the organization is facing burnout after nearly three years in pandemic mode.

Now is a crucial time for hospital and health system executives to both evaluate how they lead and consider new ways of teaming, especially as many undertake the twin challenges of retaining talent and driving major transformation agendas. *Becker's Hospital Review* recently spoke with healthcare industry experts from [leadership advisory firm Spencer Stuart](#) about the challenges facing executives in today's hybrid working world and how leaders can cultivate an environment of trust and high performance, even during times of great change.


Shift your focus from agility to resilience and purpose

Before and during the pandemic, the buzzword among healthcare leaders was agility — how fast can we move and adapt as conditions change by the minute. While being fluid and adaptable is still as important as ever, leaders are thinking more about building a *resilient* leadership team and workforce that feel a shared sense of purpose behind the work they do each day.

"Hospitals and health systems are of course looking for leaders with business and financial acumen," says Kathryn Sugerman, consultant and global healthcare services practice leader at Spencer Stuart. "But it's equally important that they hire individuals who are purpose-driven and lead authentically — leaders who are effective communicators, can establish trust quickly and help build followership among employees."

That sense of purpose — linking people's daily work to the health and well-being of their communities — is the critical "glue" that holds teams together and helps organizations retain talent. It must be led from the top, especially given the stamina challenge on healthcare's frontline and beyond. "Everyone was expected to be on 24/7 for a long period of time. Fatigue and burnout are huge issues across the healthcare sector," said Kathy Schnure, PhD, consultant in leadership advisory services at Spencer Stuart. "It's something senior teams must address at a level they've never had to before."

Healthcare CEOs and senior leaders can find formal and informal ways to instill this resilience and purpose at all levels. Increasingly, hospitals and health systems [are offering formal resilience training](#) to employees. But individual actions like communication, presence and leading by example have meaningful impact. "Triple down on the amount you're communicating to your people, even if you think you're doing enough," said Ms. Sugerman. "Be present, be available to both your immediate team and the extended organization as much as you can be. Also, encourage them to take space to think through decisions and find creative solutions they may not have felt they had time to explore previously."



For healthcare CEOs, visibility is essential. According to Ms. Sugerman, “We’ve heard that feedback doesn’t always resonate with frontline staff when leaders aren’t present and visible. During this time, the importance of communication from leaders has been amplified, and I think that will continue to be important for building a purpose-driven culture. In healthcare, it’s critical to keep visible leadership front and center.”

Be the conductor, not a hero

Everyone is familiar with the charismatic “hero” CEO who is known as the face of their organization. But today, Spencer Stuart finds that boards and senior executive teams are gravitating toward “conductor” CEOs who motivate teams to operate together in ways that benefit the whole organization.

Individual heroics and top-down directives worked well when conditions were more stable and predictable, but in today’s complex, fast-paced environment, [the most effective leaders](#) don’t try to solve everything themselves. They set direction and work through levers like strategy, a unified leadership team, organization structure and employee engagement to multiply their impact.

“Boards want CEOs who will be very focused on the team, rather than ‘hero CEOs’ who act unilaterally to drive a strategic agenda,” Dr. Schnure said. “That’s a significant shift from pre-COVID times. Organizations now have an appreciation for leaders who don’t try to do it all on their own and who instead ensure many diverse voices are heard and bought in as they chart a path forward.”

Pre-pandemic, many leaders may have described their teams more like a collection of talented individuals than a high-performing, highly effective team. Pandemic working conditions may have exacerbated that: during the first year especially, employees with clinical oversight spent considerable time physically in facilities and it wasn’t uncommon for leaders to rotate into frontline roles. Meanwhile, individuals in functional roles without direct clinical oversight, such as finance, were often asked to work remotely for safety reasons. That took a toll on team unity.

“Over the last several months, there’s been a desire to return to the norm, with teams trying to recover from this split and finding ways to return to their pre-COVID approach to collaboration,” Dr. Schnure said. “Unfortunately, it’s not always easy to go back to the way things were. It’s up to CEOs and functional leaders to acknowledge the challenges of the past two and a half years, figure out where team repairs are needed, and establish new ways of working going forward.”

Lean in on people development and potential

For new CEOs, Ms. Sugerman offered advice for getting teams working together effectively. “Don’t make any big decisions too early on. A good first step is to conduct a listening tour — spend time with the team, learn about their professional aspirations and personal goals, and transparently show them who you are as a leader. This goes a long way toward [building trust](#), which is really the antidote to so many of the collaboration challenges we’re seeing today.”

Both consultants emphasized how helpful it is for healthcare leaders to assess their teams both individually and collectively, whether they are a new team coming together or an established team in need of a reset. Formal assessments help a leader identify individual team members’ capabilities as well as their future potential — what are their opportunities for success moving forward and how can you help them get there?

“During the pandemic, organizations thought about different roles for managers and leaders who had the potential to do more,” Ms. Sugerman said. “That enabled staff to grow, and it allowed mid-level managers and directors to grow. Those kinds of opportunities not only help people feel connected to the organization, but they also promote and enhance greater diversity in leadership teams and ultimately the C-suite.”

Collectively assessing the team will give a leader clarity on how that team works together — and whether there are issues getting in the way of team performance. The most adaptable and resilient teams are aligned on the big picture and collaborate closely, so they can make progress on key objectives even as problems arise or conditions change. This requires strong relationships, trust and healthy team dynamics.



Finally, team member assessments help leaders signal the importance of people development to others on their team and weave that focus into their everyday way of working, rather than as an afterthought. As an example, Spencer Stuart recently worked with a well-known health system CEO to proactively assess his senior leadership team for development opportunities, even though he had no plans to retire or leave the organization.

“This CEO gained a much deeper understanding of his team’s capabilities and future potential for succession,” Ms. Sugerman said. “It got him thinking about right role, right person, right time, and clarified where there was any ‘noise’ on the team and what he needed to do about it. His team members also felt it was a positive experience. They felt supported by the CEO’s investment in them and his creating a safe space for them to focus on themselves and their own development, which will hopefully lead to greater opportunities for growth over time.”

In healthcare today, the importance of purpose-driven and authentic leadership can’t be underestimated. “Employees want leaders who care about the team and show compassion and understanding,” Dr. Schnure said. “Authentic leaders celebrate wins, no matter how small, and make people feel that there is purpose to their work.”

Conclusion

There is no question that the pandemic has created significant workforce challenges in healthcare that will require workforce redesign. Alignment and buy-in from the front line all the way to the most senior executives are critical.

“In hospitals and health systems, everyone has led with incredible grace despite the significant disruption of the pandemic,” Ms. Sugerman said. “I think the disruption at leadership levels will continue, however, and there will be an ongoing need to build cohesive teams that work well together.”

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