

## **Healthcare Leadership Development in the Rush University MS-HSM Program**

**1. Program Overview.** The Rush Master’s Program in Health Systems Management (MS-HSM) is a CAHME-accredited, two-year program integrating service learning throughout its curriculum. The program operates under a practitioner-teacher model within Rush University Medical Center. The program’s vision, to be “recognized as the premier graduate health care management program for developing leaders to transform health care,” reflects our desire to see the practitioner-teacher model become much more widely adopted, because we believe that this model can greatly benefit our health systems and the future generations who will lead them. We therefore place great emphasis on giving away all of our “secrets” through regular presentations, publications, and dissemination activities of other sorts, including this application.

**2. Innovative techniques.** The single most important innovation of our program is its implementation in close partnership with the field of practice, with work-based learning as foundational rather than adjunct to our students’ education. Building on this foundation, we strive to apply best-available evidence to preparing the hearts and minds of these future leaders for their roles. The curriculum is designed around a practice-validated leadership competency model, and our approaches are continuously updated to incorporate advances in the leadership development evidence base. In particular, the most transformational approaches to leadership development involve a combination of: (1) **practical application** (in real-world and/or high-fidelity simulation settings), (2) **deliberate preparation** for these practice experiences, and (3) high-quality **post-experience feedback/debriefing**, attending to both the emotional and cognitive aspects of learning (Anderson & Garman, 2014; Day & Dragoni, 2015; Garman & Lemak, 2011; Slavich & Zimbardo, 2012).

**3. Integration throughout the curriculum.** Although management and leadership competencies are embedded throughout most required courses, in the following courses they receive special emphasis:

Year one. All full-time students begin their formal leadership development journey during their fall term, with the **Professional Seminar** series (“ProSem”), **The Patient Experience** course, and the **Internship** program (described in section 6). In **ProSem-1 and 2**, students develop a deeper understanding of the meaning of “profession,” and their responsibilities to society as healthcare managers. Through a series of exercises, students learn to articulate their personal values and career aspirations, first individually and then publicly as a commitment to their peers. **The Patient Experience** course complements this learning through a focus on person-centered healthcare. During this course, observation and reflection assignments in the emergency department and other settings provide students with direct exposure to the diverse lived experiences of people interacting with the healthcare system.

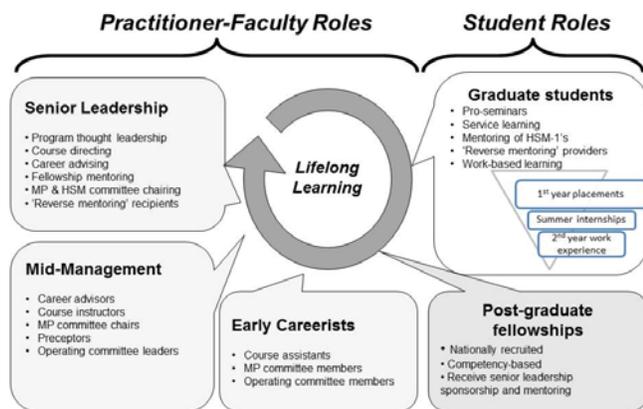
Year two. During the second year, emphasis shifts toward students applying their skills to more formal leadership roles. The two-quarter **Masters Project (MP)** course provides each student with an applied leadership experience. During **MP1** (Fall term), each student identifies a current management decision or process improvement need, and then leads a committee including at least two practitioners and one core faculty, who work closely with them as they develop and execute the project. At midpoint and project end, students receive competency-based evaluations from their committee, providing them the opportunity to practice new approaches in areas identified for improvement (Garman et al., 2017).

In addition to the MP sequence, students also complete two higher-level leadership courses. The **Organizational Analysis and Change** course uses a combination of experiential exercises and Team-based Learning (Michaelson & Sweet, 2011) to develop skills in resolving organizational behavior challenges in a psychologically safe, “learning laboratory” environment. Peer feedback and individual reflection on team dynamics are also provided throughout this course, helping students gain a deeper understanding of how their work and interpersonal styles are perceived by others and providing a foundation for additional personal development. The final course project is a team-based organizational change analysis, in which student teams select a real-world change management process currently in progress. The team collects perspectives from key stakeholder groups using semi-structured interviews designed to assess each of the components of Kotter’s highly practical *Leading Change* model (Kotter,

2012), and synthesizes their findings into a summary of how change process is working and recommendations for enhancing its likelihood of success. Project sponsors attend the class session during which students report their findings, and typically participate actively in discussing the change process.

Our goal in the final term is to ensure students have internalized the professional values and life-long learning orientation they will need in order to effectively and beneficently pursue their future professional roles. This goal is central to the final assignment in **Governance & Leadership** course. During this course, students articulate a personal Continuing Education (CE) Plan, including three sections: (1) the students' self-understanding (including their beliefs, core values, causes they care about, and the life balance they hope to achieve), and how they seek to embody these in their professional career; (2) the competencies and experiences they believe they will need in order to pursue their next career steps; and (3) the specific and measurable next learning steps they will commit to take.

**4. Alumni involvement.** Throughout its history, the MS-HSM program has placed special emphasis on maintaining active involvement from our alumni, up to and including recruiting their participation as practitioner-faculty (Campbell, 1982). Over the years, we have mapped specific faculty



roles to career stages to optimize their developmental value, as summarized in the accompanying figure. In addition to benefiting our students, the model also helps us identify ways in which alumni themselves can benefit from continued participation in the department's educational mission, in preparation for progressing into positions presenting both greater opportunity and responsibility to transform our health care systems.

**5. Professional development.** All HSM students are encouraged to volunteer for leadership roles throughout the course of the curriculum. In addition to the formal **community service** requirement described in section 8, students also operate a self-perpetuating **Student Governing and Professional board (SG&P)** which, in addition to pursuing coordinated service activities, also maintains a matrixed relationship with each of the HSM operating committees and the HSM Alumni Association. This widespread involvement also provides important opportunities for faculty and alumni to role-model participative leadership approaches. The SG&P also oversees a peer-mentoring program, in which each second-year HSM student is matched with a first-year student. Separately, HSM students actively collaborate with the Chicago chapter of the **American College of Healthcare Executives**, including hosting several annual activities, such as an annual national administrative fellowship recruiting event that is open to sites and graduate students from across the country.

**6. Experiential opportunities.** In addition to the service requirements and extracurricular activities detailed in sections 5 and 8, during the first year of study all full-time students are required to work in half-time, paid positions in the medical center and other affiliated organizations. These positions are identified by the program prior to students' arrival; during orientation week students and preceptors participate in a speed interviewing process to create the matches. All preceptors hold faculty appointments and receive training support from the department for their mentoring roles. Student development is further supported through a three-quarter **Internship** course sequence, which begins with a preservice "boot camp" focusing on preceptor-identified competencies (e.g. professional etiquette, Excel/data management, time management) that ensure they are ready to contribute from day one. The sequence continues for two additional quarters, and includes a formal 90-day check-in conducted by each student's academic advisor with the preceptor and the student (separately and then together). The check-in helps us ensure the quality of the internship learning environment and student's work performance, which their preceptor also formally evaluates. Final competency-based feedback is then provided by the preceptor at the end of the first academic year.

**7. Developing an understanding of true Servant leadership, with a focus on person-centered**

**healthcare.** The HSM program operates within the Rush University Medical Center, an organization that takes great pride in the Anchor Mission it pursues on behalf of the communities it serves (cf. O’Connor, 2016). Servant leadership is foundational to the Anchor mission (cf. Prybil et al, 2014), and carries forward into our program through the practitioner faculty who serve within it. In keeping with our work-based learning philosophy, we also believe that Servant leadership is not something that can be “taught” in a classroom, but rather needs to be experienced immersively. From our practitioner faculty, students learn first-hand from our practitioner faculty about the responsibilities they are assuming for the welfare of their patients and communities, as well as the growth of their staff. From the service learning and mentoring roles described in sections 5, 6, and 8, students have the opportunity to apply these values to the real-world challenges they face.

**8. How the program interacts with the community, and motivates pursuit of leadership within the**

**community.** In addition to the work-based learning projects and experiential activities woven throughout the curriculum, all students in our program are required to complete an additional 16 hours of community service prior to graduation. Typically students meet this requirement through participation in one of the many interdisciplinary [Rush Community Service Initiative Programs](#) (RCSIP), involving our community partner organizations, including local clinics, shelters, and special-needs high schools.