



# LEADING BEYOND BORDERS

MEDICAL LEADERSHIP  
AND CULTURE IN PRACTICE

## “LEADING BEYOND BORDERS - MEDICAL LEADERSHIP AND CULTURE IN PRACTICE”

Medical leadership in the Netherlands and internationally is high on the agenda of health care delivery and medical education. However, what is the current status of medical leadership, and what are the next set of goals in the next few years? On the 23rd of November, the Netherlands Association of Medical Education (NVMO) and the Toronto International Summit on leadership education for Physicians (TISLEP) will join forces to organize a joint international symposium on medical leadership. For this congress only limited places are available, so full is full.

**Registration is possible via the following [link](#)**

**In case of any difficulties or questions,  
contact: [tislepnl@gmail.com](mailto:tislepnl@gmail.com)**

### PROGRAM:

09.30 - 10.00	Reception
10.00 - 10.15	Opening and introduction by prof. dr. Fedde Scheele en dr. Jamiu Busari
10.15 - 10.45	Medical leadership in Netherlands: taking responsibility by prof. dr. Carina Hilders
10.45 - 11.15	Finding True North: A Canadian Journey in Medical Leadership Education by dr. Mingh Ka Chan
11.15 - 11.45	Critical note by interviewing plenary speakers by Irma Scholten en Welmer de Groot
11.45 - 12.45	Workshop round 1
12.45 - 13.45	Lunch
13.45 - 14.45	Workshop round 2
15.00 - 16.00	Workshop round 3
16.00 - 16.45	Reviewing workshops and Wrap up of the day by Fedde Scheele en Jamiu Busari
16.45 - 17.00	Preview TISLEP NL 2020

This congress is made possible by the cooperation and commitment of the following speakers, workshop supervisor and organizers:



**Prof. dr Fedde Scheele**

**Fedde** is working as a gynecologist and dean of the school of health professionals education of the OLVG teaching hospital. He is a professor at VU University of Amsterdam, NL at the VU School of Medical Sciences and at the Athena Institute for Transdisciplinary Research. The assignment is 'Health Systems Innovation and Education'. Furthermore, Fedde is president of the Dutch Association of Medical Education and also a member of the supervisory board of the non-profit health insurance company Menzis.

Fedde completed his PhD-thesis entitled 'Gonadotrophin releasing hormone agonists in ovulation induction' in 1994 at the VU University of Amsterdam. Since then he has shifted his focus from biomedical research to research on societal accountability of medical education programs. Currently, he heads a group of PhD-students working on several perspectives of societal accountability of medical training. Fedde was also the (inter)-national project leader of the curriculum design for post graduate training in obstetrics and gynecology. He was advisor in curriculum design in several other medical disciplines.



**Dr. Jamiu Busari**

**Jamiu Busari** MD MHPE PhD, is an associate professor of medical education at Maastricht University, Past Department Chair and Program Director of the specialist training program at the Department of Pediatrics, Zuyderland Medical Center, Netherlands. Jamiu is a Maastricht University alumnus, a Harvard Macy Scholar and an HBS executive education graduate in Managing Health Care Delivery. His academic interests include management and leadership development, residency education, faculty and curriculum development. Some of his current roles include:

- Co-Chair Planning Committee TISLEP 2019, Ottawa Canada and NASKHO-TISLEP Joint Conference 2018
- Executive board member of the Netherlands Association for Medical Education (NVMO)
- Member of the International collaboration on competency-based medical education (ICBME)
- Member, international clinician educators network (ICEnet)
- Member, Toronto International Summit on Leadership Education for Physicians (TISLEP) Planning Committee <http://tislep.pgme.utoronto.ca/>.

**Prof. Dr. Carina Hilders** has a medical degree and specializes as a gynecologist. She obtained her PhD in immunotherapy for cervical carcinoma and has done research into preserving fertility in recent years. In addition to her position as CEO of the Reinier de Graaf Gasthuis, she is a member of the Executive Board of the Reinier Haga Group, she still works as a gynecologist and she is a professor by special appointment at Erasmus University in Rotterdam. She has an international reputation as a leader in change management in healthcare, professional development and patient-oriented care.



**Prof. dr. Carina Hilders**

**Dr. Mingh K a Chan** is Clinician Educator and Associate Professor at the Department of Pediatrics and Child Health, University of Manitoba. Her current roles are Pediatrics Director, Education & Faculty Development Director at the Shantou University Medical College Academic Exchange. Her current Activities in Healthcare Leadership Education are:

- Founder and Co-Facilitator, Annual Canadian Pediatric Resident Leadership Conference
- Founding member, 'Sanokundu' (an international community of practice dedicated to fostering health professional leadership education worldwide) [www.sanokundu.com](http://www.sanokundu.com)
- Member, Toronto International Summit on Leadership Education for Physicians (TISLEP) Planning Committee <http://tislep.pgme.utoronto.ca/>
- Co-chair, Max Rady College of Medicine Leadership Curriculum Committee
- Founding member, Healthcare Leadership Education Interest Group



**Dr. Mingh Ka Chan**

**Irma Scholten** is resident Obstetrics and Gynecology in her final year. She has a PhD in fertility medicine. Alongside her training, she attended the board of 'De Jonge Specialist'; the Dutch Association for medical residents. The past three years, she was responsible for Medical Education of residents and focussed on technological innovation and medical leadership.



**Irma Scholten**





**Welmer de Groot**

**Welmer de Groot** studied Medicine and Healthcare Management at the Erasmus University in Rotterdam. Besides, he works in military services for the Dutch Air forces and as a trainer in intensive care. His areas of interest are education, innovation and team performances.



**Anne Matlow**

**Anne Matlow** is an internist with further specialty qualifications in Infectious Diseases and Medical Microbiology. Her key leadership positions have related to patient safety and quality of care including Medical Director of both Infection Prevention and Control and Patient Safety at Toronto's Hospital for Sick Children and Associate Director of the University of Toronto's Centre for Patient Safety. In her current position as Faculty Lead for Strategic Initiatives in Post MD Education at UofT she is spearheading innovative approaches to leadership education, liaising with national and international initiatives such as cochairing the Toronto International Summit on Leadership Education for Physicians (TISLEP) Planning Committee, and being active as a founding member of the international leadership education community of practice 'sanokondu'. She is keen to share her passion for values-based leadership as gleaned from her many years of clinical and administrative experience.



**Diane de Camps Meschino**

**Diane de Camps Meschino** is a psychiatrist and educator in the department of psychiatry, University of Toronto. Her academic pursuits include healthcare change through leadership and curriculum development at the University of Toronto and international universities. She is a founding member of sanokondu, serving on its executive team. It is an international community of practice dedicated to advancing healthcare leadership education worldwide. She has held numerous leadership roles, has founded, developed and scaled clinical programmes as well innovated intergenerational trauma interventions in psychiatry.

**Marcia Sokolowski** is director of ethics at Baycrest Health Sciences in Toronto, Canada where she oversees organizational and clinical ethics services. She is an assistant professor in the faculty of medicine at University of Toronto, and adjunct professor at Ben Gurion University of the Desert in Israel. Marcia's post graduate degrees are in psychology and philosophy. She is author of "Dementia and the Advance Directive: Lessons from the Bedside" (Springer International, 2018). Her areas of interest include advance care planning, helping healthcare teams and corporate leadership members negotiate value differences, narrative ethics, building moral resilience, and integrating client values into care and treatment decisions. Marcia has a strong interest in helping multidisciplinary healthcare teams' transition into interdisciplinary teams, where leadership skills are enhanced and respectful value-based decision-making is privileged.



**Marcia Sokolowski**

**Dr. Debbie Jaarsma** was trained as a veterinarian at Utrecht University, the Netherlands. She continued her academic career as a PhD student, which resulted in a PhD dissertation in 2008 entitled Developments in Veterinary Medical Education: Intentions, Perceptions, Learning processes and Outcomes at Utrecht University.

In 2011, she was appointed (full) Professor of Evidence-Based Education at the University of Amsterdam's Faculty of Medicine, so moving from veterinary education to medical education. Since 2014, she became (full) Professor of Medical Education at the University of Groningen's Faculty of Medicine. Here she leads the multidisciplinary research group called LEARN which is focused on health professions education research. She is also director of the department for Education Development & Innovation



**Debbie Jaarsma**

**Judith Voogt** is a PhD student and is finishing her PhD on medical leadership, which focuses specifically on speaking up. She is currently working as a resident internal medicine. During her PhD project, she worked on the Quality, Patient Safety and Medical Leadership curriculum for the medical training program in Utrecht.



**Judith Voogt**



**Salmaan Sana**

**Salmaan Sana** studied Medicine. Afterwards, he became the cofounder of Compassion for Care. Currently he is a Senior Consultant and Meaningful Learning Specialist at Better Future.



**Dr. David Keegan**

**David Keegan** MD CCFP(EM) FCFP, is an associate professor of Family Medicine and associate dean of Faculty Development at the Cumming School of Medicine at the University of Calgary in Alberta, Canada. Some of his other roles include:

- Founding editor of LearnFM, the shared Canadian curriculum in family medicine ([learnfm.ca](http://learnfm.ca) or [sharcfm.ca](http://sharcfm.ca))
- Founding editor of TeachFM.org, an open-access resource for family medicine teachers/educators worldwide.
- Past president of both the Canadian Federation of Medical Students and the Canadian Association of Interns and Residents (now called Resident Doctors of Canada).



**Renée Weersma**

**Renée Weersma** is general practitioner and she has a private family practice, named Kennemerveen, in Haarlem West. She has always worked administratively in both her own field and that of other medical specialties. She was vice chairman of the Registration Committee for Medical Specialists, trainee Supervisory Board of Flevo Hospital, Association Council member NHG and Chairman of the Platform Medical Leadership. In addition to being a general practitioner, she is a lecturer at the General Practice Training Amsterdam UMC location VUmc. With the establishment of the Medical Leadership Platform in 2012, she is committed herself to Medical Leadership from student to medical specialist. Medical leadership is about having a central position in society and doing the right things. Medical leadership enables you to make changes in health care through yourself, others and society.



**Prof dr Götz Wietasch**

**Prof. Wietasch** is program director of the anesthesia residency program of the UMCG. Hosting more than 75 residents, students and young doctors from abroad, professional development is one of the main topics of the educational program.



**Martine Yntema, MD**

**Martine Yntema** deputy trainer Anesthesiology at the UMCG in Groningen. She has been assisting physician assistants in their professional development for years and is closely involved in the development of the just-in-time coaching program of the training.



**Beatrijs de Leede**

**Beatrijs de Leede** is training coordinator of the AUMC's general practitioner training, location VUMC and also co-owner of 'de Tweede Praktijk' for professionalization of trainers and training groups.





**Drs Corry den Rooyen**

**Drs. Corry den Rooijen** is educationalist and has been working in the field of post graduate education since 2005. Most of the time as project leader of national projects on implementing CBME. Other projects were implementing HVCCC and CanMEDS in training programs of residents. Her specialty is change management and faculty development. Special interest in training program directors for example in coaching their residents. She wrote, together with Beatrijs de Leede, a book on how to coach your resident.



**Huriye Yaldiz**

**Huriye Yaldiz** is currently a medical intern and also has a degree in Pedagogical & Educational sciences. Due to her background and interests, she focusses in projects and research which focus on medical education. In addition to her study and research projects, Huriye is a guest lecturer in the minor medical leadership at the Radboud University and a student board member of the KNMG (Royal Dutch Medical Association) district Groot Gelre.

## PROGRAM ENGLISH VERSION

### 1. PLENARY SESSION: MEDICAL LEADERSHIP: TAKING RESPONSIBILITY

PROF. DR. CARINA HILDERS

The current complexity of the world in which we live means we have an increasing urge to control. Society expresses this in an inexhaustible need for information. This flow of information gives us the illusion that we are participating in a transparent society where everyone's responsibility can be shared and assessed at any time. However, by not realizing that we are becoming increasingly the immediate object of this unavoidable increasing flow of information and technology, we have become victims of digital communication and techno-stress. In a world that we experience as accelerating, where there is an increasing supply and the term scale has become a relative concept, we should consciously create more scope for depth and reflection in order to maintain control over the future. A direct parallel can be drawn with healthcare. The need for control is felt on a day to day basis by an endless stream of performance indicators, the pressure to achieve the most VIM notifications, the Safe Incident Reporting by ward and achieving a minimum number of emergencies per year per hospital.

By failing to realize that we have become victims of a measuring system that has become elevated to a standard and which in practice has difficulty in producing depth and therefore improvement, we have become part of the healthcare stress. Here too, depth and flexibility could produce more control over the future of healthcare, with a focus on creating value for the patient. As a result, an effective culture has been introduced in healthcare facilities with regard to the safety of the patient. After all, it is the patient who will determine the substance of healthcare in the future and who will be in charge of this. This is evident in issues such as shared decision-making, end of life care, healthy living and behaviour, vitality and well-being, as well as complementary medicine and e-health. It has become time that we no longer hide behind the complexity of healthcare and the patient, but take responsibility to resolve the pressure on the system. It endorses the necessity and need for new leadership, Medical Leadership, where the medical professional will have to act as a connector between the patient and the complex environment.

### 2. PLENARY SESSION: FINDING TRUE NORTH: A CANADIAN JOURNEY IN MEDICAL LEADERSHIP EDUCATION

DR. MINGH KA CHAN

Leadership education for medical learners across the continuum (medical students, residents and faculty) has gained increasing importance. Diverse stakeholders are adding their voices to this important agenda given that development of good leadership and followership skills intersects with strong team development, wellness (at individual, team and system levels) as well as quality improvement and enhancement of patient/family care. In Canada, our medical education organizations have endorsed the increasing need for leadership education as reflected by the 2015 renaming of the Manager Role to the Leader Role in the CanMEDS competency-based education frameworks. Investment in leadership education continues to grow within teams, programs, disciplines and institutions for students, residents and faculty. Diverse methodologies from face to face to online learning within episodic or longitudinal programs all play a role. There is a growing recognition of the need to promote not only the development of knowledge, skills and attitudes but also the value of mentorship and sponsorship along with opportunities to demonstrate leadership and followership on a day to day basis and/or in role-specific contexts. 'Every day' leadership (and followership) as well as role-specific leadership are equally important and de-

velopment in both areas are gaining traction. The opportunity to expand the narrative and perspectives through co-learning and co-teaching with other health care professionals as well through collaboration with other countries is also growing and greatly valued.

Through narratives and examples of leadership education exemplars, this session will highlight some of the key successes and lessons learnt. Canada's role in the development of Sanokundu, a multi-national group working on healthcare leadership education will be showcased as one model to move this important healthcare agenda forward.

## WORKSHOPS (3 ROUNDS)

### 1. WORKSHOP LEADERSHIP: GIVING VALUES A VOICE

ANNE MATLOW, DIANE DE CAMPS MESCHINO & MARCIA SOKOLOWSKI

All healthcare professionals are leaders who share a commitment to deliver high quality healthcare. As individuals and as members of professional disciplines, they each bring their distinct personal values, professional values and codes of conduct to the workplace. Diversity of values can enrich team functioning and patient care; however it can also result in team fragmentation and reduced quality of patient care. In this session we will explore the enablers and derailleurs of values-based leadership in healthcare, and consider strategies for optimizing its delivery.

OBJECTIVES: At the end of this session participants will be able to:

1. Identify their own personal and professional values
2. Discuss how values influence healthcare delivery.
3. Apply strategies to optimize value based healthcare delivery.

### 2. WORKSHOP: TIME FOR MEDICAL LEADERSHIP

CARINA HILDERS

In the future, the medical professional will also have to make clear the added values for the patient in positions inside and outside the hospital, in various health organizations, and society-wide. Medical Leadership must form the link between the patient and the system at different levels in the structure of health care. Medical Leadership is therefore not 1 kind of leadership but has a stratification that corresponds to the different roles and positions that the healthcare professional has in the healthcare system. During this workshop you will be taken on a journey to these different types of leadership as well as inside the hospital as outside the hospital on a society-wide level.

### 3. WORKSHOP NAVIGATING THE COMPLEXITIES OF CURRICULUM CHANGE: A LEADERSHIP PERSPECTIVE

DEBBIE JAARSMA

Bringing about change in health professions undergraduate and postgraduate curricula and related medical organizations (whether it be health professions schools or postgraduate teaching hospital settings) is a recurrent, complex and challenging process. However, the redesign of health professions education is both necessary and timely since healthcare environments are changing rapidly. The challenge presented by new paradigms in education is not merely a technical one, as it entails profound transformations, requires new competencies, creates disequilibrium, resistance, a sense of loss and often takes longer than technical change. Many organizations struggle with questions on how to navigate these challenges of curriculum change implementation.

In recent research, leaders in charge of these curriculum changes, described three major challenges they had to deal with while navigating this process: the large number of stakeholders championing a multitude of perspectives, dealing with resistance, and steering the change process. Additionally, strategies for addressing these challenges were described. The authors identified an underlying principle informing the work of these leaders: being and remaining aware of emerging situations, and carefully constructing strategies for ensuring that the intended outcomes were reached and contributed to the progress of the change process. (1)

In this workshop we will deepen participants' understanding of this topic and we will dive into the leader's challenges and strategies combined with concrete assignments exploring participants' own (stakeholder) contexts, using methods that could be adopted once back home.

### 4. SPEAK UP?! ENGAGING MEDICAL RESIDENTS IN QUALITY IMPROVEMENT AND MEDICAL LEADERSHIP

JUDITH VOOUGHT

Medical residents work at the front line of patient care where they see good and bad practices. Their rotations allow them to visit many different departments and have a fresh look at work processes. This position makes them ideal candidate to identify barriers in current health care processes and improve patient care. However, research has shown that proactively speaking up is not an easy task, as it can appear risky and futile to individual residents. In this workshop we assess together with the participants which barriers currently exist in their resident groups and how we can use this information to improve information flow from the frontline.

### 5. PERSONAL LEADERSHIP: TURNING FRUSTRATION INTO A FORCE FOR CHANGE

SALMAAN SANA

Salmaan's mission is to create change agents. He makes people aware of themselves, their responsibilities and their inner motivations. During the TISLEP congress, Salmaan will show us how to turn frustration into a constructive, positive force. In order to generate a change from within, on both the organizational and personal level.

## 6. WORKSHOP KEY LITERATURE ON MEDICAL EDUCATION LEADERSHIP: HIGH IMPACT PAPERS ON PHYSICIAN LEADERSHIP AND LEADERSHIP DEVELOPMENT

JAMIU BUSARI EN DAVID KEEGAN

A highly interactive session reviewing an idiosyncratic and eclectic collection of 10 high impact papers in the area of physician leadership the last year. Using a lively pro and con format discussion, the facilitators will provide a critical review of the strengths and weaknesses of the chosen papers, examining both methodological issues and potential impact of each article discussed.

Upon completion of this session, participants will have:

- reviewed 10 high impact papers in the area of physician leadership practice and education over the last year,
- experienced a lively pro and con format discussion of the strengths and weaknesses of the topical papers in medical education,
- examined both methodological issues and potential impact of each of the articles discussed.

## 7. WORKSHOP MEDICAL LEADERSHIP IS DOCTER-EMPOWERMENT, HOW DO YOU INCREASE YOUR INFLUENCE?

RENEE WEERSMA

Medical leadership is about personal leadership and exercising influence on others. How do you lead? What is medical leadership? Leadership is sticking out your neck out and getting out of your comfort zone. When talking about medical leadership, power, compassion and dedication are frequently mentioned themes. During an interactive session, Renee Weersma will inspire you to explore your own leadership qualities and leadership ambitions.

## 8. WORKSHOP “CROSS-CULTURAL COACHING”

G. WIETASCH, M.YNTEMA EN B. DE LEEDE

Internationalization of PGME programs has an impact on how to coach and to provide feedback to residents. Cultural aspects are very important factors that influences the results of feedback and coaching. Research shows that educational concepts cannot easily be transferred from one country to another. When implementing coaching programs for residents, cultural difference between countries, as well local context and needs and diversity of residents have to be taken into account. In this workshop we introduce the five dimensions of cultural difference (Hofstede), which are necessary to understand the cultural differences. In an interactive session the models will be used in small groups to recognize and analyze the cultural aspects of your PGME program, to increase your insight and ability to develop and implement cross-cultural coaching in your daily practice. The workshop is performed by two educational specialists and two medical specialists from the Netherlands and provides you with up to date information and best practice for cross-cultural workplace based learning and coaching. This experience will help you to stimulate the development of residents of different cultures into responsible professionals in modern healthcare.





