Operating Room Leadership: Who is the One?

Vanni Agnoletti1, Giorgio Gambale2, Massimiliano Meineri3 and Alex Macario4

1Department of Anesthesia and Intensive Care, IRCCS - Azienda Ospedaliera Arcispedale Santa Maria Nuova, Reggio Emilia, Italy
2Department of Anesthesia and Intensive Care, Maurizio Bufalini Hospital, Cesena, Italy
3Associate Professor, Department of Anesthesia and Pain Management, Toronto General Hospital, Toronto, ON, Canada
4Professor, Department of Anesthesia, Stanford University School of Medicine, Stanford, CA, United States

*Corresponding author: Vanni Agnoletti, Department of Anesthesia and Intensive Care Institution IRCCS - Azienda Ospedaliera Arcispedale Santa Maria Nuova, Viale Umberto I, 50 Reggio Emilia, Italy, Tel: +39-3387363492; Fax +39-0522-295622; E-mail: vanni.agnoletti@asmn.re.it

Received date: September 15, 2015; Accepted date: October 27, 2015; Published date: October 30, 2015

Copyright: © 2015 Agnoletti V et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Leadership is considered as the process (act) of influencing the activities of an organized group in its efforts towards goal setting and goal achievement. It is not easy to differentiate management and leadership. Leadership is concerned with setting a direction for change, developing a vision for the future while management consists of implementing those goals through planning, budgeting and staffing. Cost-restraints and quality improvement mandates operating room to seek dedicated professional perioperative leaders. The anesthesiologists are deeply involved in the successful and efficient operations of the surgical services. In more and more facilities, the anesthesiologist is the recognized authority for “leading” the Operating Room (OR) suite. In contrast, the surgeon may have an incomplete vision of the Operating Room and could be influenced in his/her judgment or action by the conflict between the interest of increasing his/her own (or his/her group) surgical activity and the management responsibility to consider the entire needs and resources of the surgical suite. Another crucial element of the OR team is the nurse. Similar to the anesthesiologist the nurse manager may have the same vision of the OR management. Nurses do have experience in OR leadership and management. Nurses often represent the leadership of the OR suite. It is likely that for many surgical centers the best way to manage an OR suite would be not to have a single leader but a team of anesthesiologists, nurses and surgeons that work as one unit tackling the challenges. Nowadays the importance of leadership on public services is often asserted but the evidence of positive impact on patient safety and quality improvement is weak. More studies are needed to define the optimal leadership structure in surgical suites.

Keywords: Operating room; Leadership; Management

Abbreviations

OR: Operating Room

Letter to the Editor

There are almost as many definitions of leadership as there are persons who have attempted to define the concept [1]. Leadership is considered as the process (act) of influencing the activities of an organized group in its efforts towards goal setting and goal achievement. It is not easy to differentiate management and leadership. Leadership is concerned with setting a direction for change, developing a vision for the future while management consists of implementing those goals through planning, budgeting and staffing. Most organizations are over-managed and under-led [2]. Anyone who influences others can be seen as a leader and therefore leadership is not about position or power authority. Rather, it is about providing vision and a sense of clear purpose and direction. Egger and Macario define leadership as the power, ability or the capacity to lead other people toward a shared goal [3]. Cost-restraints and quality improvement mandates operating room to seek dedicated professional perioperative leaders [4]. There are many different leadership styles and it is commonly (incorrectly) assumed that a physician or any other clinician successful in clinical practice can easily transfer to managing or leading an organization. A large number of attributes can signify leadership such as communication, feedback, honesty and vision. A good leader identifies and trains his successor. It is often said and true that a leader can't please everyone all the time. It must also be recognized that it is difficult to be the OR leader. This is because the leader position is often a solitary one unless there is a small group of people forming the team that has decision making authority. It is likely that for many surgical centers the best way to manage an OR suite would be not to have a single leader but a team of anesthesiologists, nurses and surgeons that work as one unit tackling the challenges. The anesthesiologists are deeply involved in the successful and efficient operations of the surgical services [5]. The goal of the anesthesiologists and the goal of the hospital to work efficiently and guarantee patient safety are completely aligned. Therefore, the anesthesiologist brings a valuable management perspective. In more and more facilities, the anesthesiologist is the recognized authority for “leading” the Operating Room (OR) suite. In contrast, the surgeon may have an incomplete vision of the OR and could be influenced in his/her judgment or action by the conflict between the interest of increasing his/her own (or his/her group) surgical activity and the management responsibility to consider the entire needs and resources of the surgical suite. Another crucial element of the OR team is the nurse. Similar to the anesthesiologist the nurse manager may have the same vision of the OR management. Nurses do have experience in OR leadership and management. Nurses often represent the leadership of the OR suite. In conclusion, one could say that the manager thinks about today and leader thinks about tomorrow. The surgical suite is the place where
managers and leaders dress alike, speak the same words but think about different issues. Nowadays the importance of leadership on public services is often asserted but the evidence of positive impact on patient safety and quality improvement is weak. More studies are needed to define the optimal leadership structure in surgical suites [6].

References