

LevelSet: Physician Leadership

Overview



Physician Leaders
lack insight into
their impact.

CONFIDENTIAL
LevelSet: Physician Leadership

for

Dr. Sarah Jones
SAMPLE Medical Center

May 22, 2025

Rater Response

Self	1 of 1
Manager	2 of 2
Peers	10 of 10
Other	10 of 10

**This Physician Leader does not have Physician Direct Reports or Clinical Direct Reports. In a typical survey/ report, those rater categories are represented.*

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Why not cement their success with
high-impact, low cost *LevelSet:*
Physician Leadership feedback?

Congratulations on Receiving *LevelSet* Feedback

And on your organization recognizing that investing in Physician growth and success benefits all. In today's business climate, all Physicians are expected to function as leaders, and do so in a sustainable way. This requirement makes every Physician accountable for skills and behaviors often not conferred in their professional training (see article at the end of this report).

LevelSet is designed to help normalize the routine delivery of feedback to Physician Leaders – formally and informally

Additionally, the lack of feedback can be an occupational hazard for Physicians.

Research indicates that certain Physician behaviors are associated with long-term effectiveness (within the role and the organization). The survey items contained in this report have been found to be predictive of Physician Leader success. Based on input from you, your Manager, Peers, Dyad Partner/Practice Administrator/HR Partner, Physician Direct Reports, Other Clinical Direct Reports, and Other stakeholders, a composite view of your leadership effectiveness is presented here.

LevelSet Feedback is:

- A snapshot of perspectives from a wide variety of stakeholders
- Developmental, confidential, and focused on your growth as a Physician leader
- Honest, constructive feedback that leads to appropriate action

LevelSet can be delivered by your coaches (or ours, if you prefer).

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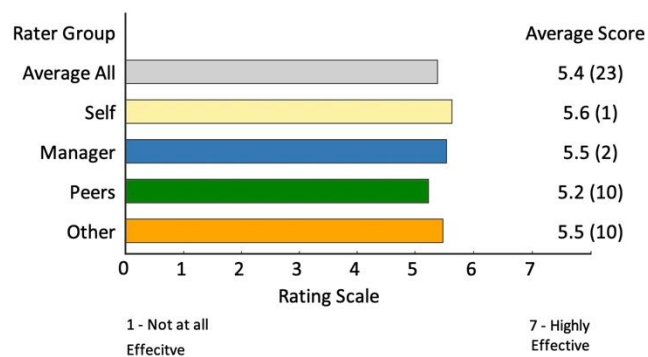
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Dr. Sarah Jones

Organization: SAMPLE Medical Center

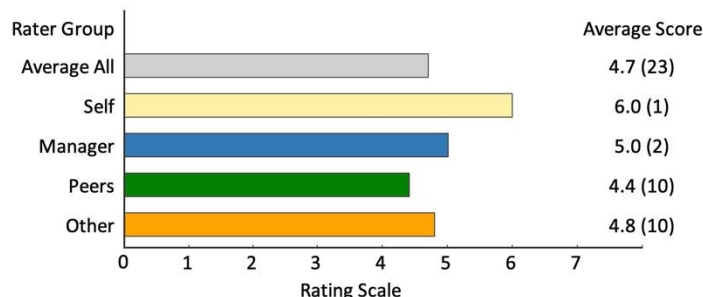
Summary of all responses for all survey questions



Physician Leaders need constructive, confidential feedback – from every direction.

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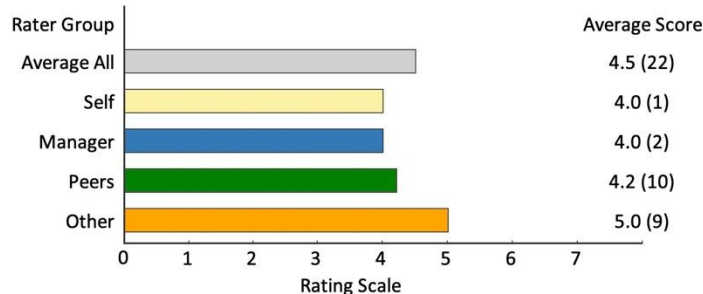
1. Seeks input from a wide variety of stakeholders (physicians, clinical and administrative colleagues, patients and families) in the right way, at the right time.



Comments:

- Wish she did more of this -- she tends not to engage in this kind of input-seeking, unless it is to figure out what others want her to do.
- Dr. Jones is very skilled in vascular surgery and saves many patient lives. And while a kind and considerate person, does not listen to others' professional expertise in the operating room. Yes, the surgeon is in charge, and we have years of training and expertise as well.
- Good with other physicians and clinical staff, could use a more balanced approach with admin.
- Seems to be asking the right amount. Too much input being sought would seem like Dr. Jones is not confident.
- Could do more of this with leadership on strategic priorities and possible initiatives.
- Effective in interacting with families, especially, and getting important information.
- Hearing different perspectives helps ensure patients are served effectively.

2. Uses a variety of leadership approaches, depending on the situation and needs of diverse stakeholders.



Comments:

- I've experienced a number of approaches, from specific direction to the Socratic method. All appropriate for my experience and knowledge level.
- I really just see her in the surgical role; not much opportunity to see other forms of leadership.
- Learning - does well clinically, but could probably benefit from some training or coaching on this.
- She doesn't really act in a leadership role that often -- really effective doctor in terms of patient care, but not so much otherwise.
- Seems like Dr. Jones approaches us all like we are part of a surgery team in the operating room.
- Have only seen this physician in the operating room. A command style seems to be most evident.

LevelSet includes 30+ items that scientifically predict Physician Leader success.

Action Plan for. _____

Identify two primary themes of my feedback

For example: Do I need to be more effective at *Building Relationships*, *Aligning Activities with Organizational Priorities*, *Seeking to Understand before Being Understood*, or in some other area?

Theme #1 _____

Theme #2 _____

Theme #1: _____

Action plans matter, but they must be relevant and achievable.

What's at risk if I don't take action on this theme?

What will you do this month? Use "Taking Action on Your *LevelSet: Physician Leadership*" (see pages immediately following).

What things about my organization/work context could stop me from taking action?

What will you do next month?

What things about me could stop me from taking action?

How will you know if things have improved?

Feedback from others?

▪

Behavior changes?

▪

Identify and Connect with **Potential Coaches/Mentors**:

-
-
-

Identify Feedback Providers (see rater list for ideas):

-
-
-

Taking Action on Your *LevelSet: Physician Leadership Feedback*

Now that you've received your feedback, it's important to take action to strengthen areas of concern to you. If you have one, an *OnBoarding RoadMap* (or *OnBoarding Objectives*) can be additional useful tools in identifying strategies to enhance your alignment.

If you had a lower score on:	Some potential causes for that rating:	Some options for action include:
1. Seeks input from a wide variety of stakeholders (physicians, clinical and administrative colleagues, patients and families) in the right way, at the right time.	<ul style="list-style-type: none"> To what extent do your key priorities support desired organizational results? What are your key priorities that require the input of others? What other priorities may not require the input of others, but could be implemented more quickly and/or effectively with their buy-in? Have you included <u>all</u> of your key stakeholder groups in your search for information and support? What initiatives are currently underway in your department to gain input and support from your patients and families? 	<ul style="list-style-type: none"> Create a comprehensive list of key stakeholders and their deliverables and key priorities. Confirm priority levels with your Manager: <ul style="list-style-type: none"> What impact do they have on the priorities of others? How can you learn more about this? Identify a comprehensive list of key priorities you own: <ul style="list-style-type: none"> How do your priorities integrate with others'? How have you been approaching seeking input? How have you incorporated their suggestions and addressed their concerns? How have you communicated when you found you could not incorporate their ideas or address their concerns? Are you seeking input in those situations? <ul style="list-style-type: none"> How has doing so improved your outcomes? Suggest framing communication as "FYI, your input will add value." Prioritize stakeholder group(s) that will be most impactful: <ul style="list-style-type: none"> Identify challenges in connecting. Look for resources to help you connect. Which community members and institutions does your Manager think are important to connect with? Identify a standard set of questions for each stakeholder, while allowing for customization as needed. Find additional ways to keep in touch with patients and their families. <ul style="list-style-type: none"> Establish regular times to meet with them and open up dialogue to hear their needs. Consider creating a patient/family advisory group to inform patient experience efforts and quality of care.

Context is everything.

LevelSet identifies the root causes of problematic situations and Physician leadership behavior.

Our team can tell you more:
info@BeCultureLeaders.com

LevelSet: Physician Feedback Survey Specifications

The Rating Scale:

- Raters are asked to rate the Physician's effectiveness on a scale of 1 – 7, where 1=Not at all Effective and 7=Highly Effective.
- They are also given the opportunity to opt out on individual items (which they may not feel qualified to answer) by indicating a rating of N/A.
- An average score of 6.0 or higher on an item typically indicates a high level of effectiveness in that area.
- An average item score of 5.0 or lower indicates an area of potential concern, with further exploration and action recommended.

Raters:

- *LevelSet: Physician Feedback* provides for a maximum of 25 raters (additional raters may be included for a nominal fee).
- There are six Rater Groups:
 - Physician Feedback Recipient (Self)
 - Manager(s) – can include both Manager and Dotted-line Manager, if appropriate. Could include: COO, CMO/CCO, CEO, Service Line Leader, Chair/Chief/Division Head
 - Peers (those who also report directly to the Manager) - Could include: COO, CMO, CCO, Service Line Leader, Chair/Chief/Division Head, CNO, Faculty (academic hospitals), Dyad Partner, Practice Administrator and/or HR Partner
 - Physician Direct Reports (all members of this group) - All downstream Physicians
 - Other Clinical Direct Reports – Clinical professionals who report to the New Physician Leader. Could include: Nurses, APPs, MAs, PAs, other clinical professionals
 - Others – Other stakeholders who work with and/or are impacted by the New Physician Leader. Could include: Administrators, specialty clinical leaders and practitioners, other internal and external partners (i.e., Community members, Board Members, etc.)

Rater Anonymity:

- Only the Physician Feedback Recipient and Manager(s) ratings will be represented as an N=1. Their numerical ratings will be broken out separately and identified as their own. Their comments remain anonymous (as do all comments for all Raters).
- If fewer than 3 raters are listed on the Rater Identification list for any Rater Group (other than Self or Manager), the survey will not be launched until a total of at least 3 potential Raters are represented (or, if none can be added, they will be switched to the Rater Group that most appropriately represents them).
- Each Rater Group has an item-level threshold for anonymity (for rater responses less than the threshold, those Rater numerical responses will be rolled into Average All totals). The following number of raters are required from each Rater Group in order to have Group-level results reported for that Rater Group:
 - Self N=1
 - Manager N=1
 - Peers N=2
 - Physician Direct Reports N=3
 - Other Clinical Direct Reports N=3
 - Others N=2

Data and Debriefing Confidentiality:

- All Certified *LevelSet* Facilitators are required to sign a Confidentiality Agreement that specifies:
 - All data are to be held confidential between the Physician Feedback Recipient and the Facilitator.
 - There will be no copies of the data/report shared with anyone else without the express permission of the Physician Feedback Recipient (recommend having the Physician personally hand off the data, if they wish it to be shared).
 - The contents of the debrief conversation are to be held confidential between the Physician Feedback Recipient and Facilitator (again, the Physician may choose to share information directly with others, if they wish).