

# Optimising healthcare leadership

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There is a general perception that superior managerial skills are lacking in the global healthcare industry because the response to the pandemic lacked urgency in placing appropriate reactive responses in place. This is further exacerbated due to slow international progress in developing "herd-immunity".

## Where are the gaps within the managerial capabilities?

- Implementing principles and action steps in crisis management.
- Developing value-based collaboration amongst stakeholders of different industries.
- Business and financial acumen optimising financial forecasting and healthcare funding.
- Increased utilisation of technology and data to create and enable remote delivery of role-players.
- Development of protocols to ensure healthcare staff and patient safety in the face of a critical workforce shortage.

It is generally accepted that the future will be disruptive, unstable and economically strained. The goalpost will forever be moved due to the lack of predictable normalities.

Many articles have spoken to exemplary leadership across several decades. In 1983 Posner and Kouzes already developed the leadership practices inventory addressing five practices:

- Model the way.
- Inspire a shared vision.
- Challenge the process.
- Enable others to act.
- Encourage the heart.

Is there a possibility that this model can be redefined to meet current and future leadership competencies, not only in the healthcare industry?

The development of shared global values in the managed-care industry is as important today as in the past, as well as the ability to align leadership and organisational actions to enhance ethical values. The ability to inspire and implement a common vision and shared aspirations is essential.

The capability to think out of the box will be even a more sought-after skill due to the urgency of developing innovative action steps to counteract the effects of disruptiveness.

Furthermore, the competency to create, foster and maintain collaboration through building trust is paramount.

Rehumanising the healthcare industry has accelerated over the past year. More than ever is emotional intelligence and the ability to be an empathetic leader crucial at all staff levels, coupled with the ability to move groups forward in a non-coercive manner. Therefore, a delicate balance needs to be achieved between being empathetic versus the urgency of implementing



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action plans.

Kellerman visualises leadership in general from an equilateral triangular point of view. This empowers three equal forces of leadership, context and followers to constantly interact and intertwine with one another. Therefore, the ability to cope with ongoing complexities and the speed of looking beyond short-term planning will empower future leaders to break their rhythm of glossing over the contextualities that carry significance for a global workforce.

In conclusion, the future of the healthcare industry is the ability to optimise a new dialogue between science and society, highlighting that scientific authority is not a universally held value according to Duke Corporate Education (DCE).



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