



Duke University basketball coach Mike Krzyzewski (center) with the 2014 class of Feagin scholars.

Courtesy of Michael Bradley

AAOS Now

Published 5/1/2015 | Julie A. Neumann, MD; Kathryne J. Stabile, MD, MS; Ann H. Taylor, BSN; BG (retired) Maureen K. LeBoeuf, EdD; LTC (retired) Joe Doty, PhD; COL (retired) Dean C. Taylor, MD

Clinical

Turning Orthopaedic Surgeons into Leaders

The Feagin leadership program provides formal leadership training

Physicians are expected to lead their patients, their colleagues, their communities, and themselves, despite the well-known fact that formal leadership training and education is typically lacking in today's medical curricula. Although leadership skills can be strengthened through practice, persistence, and feedback from coaches or colleagues, many physicians do not attain this awareness until late in their career (if they attain it at all) and rarely is it acquired formally through education.

Leadership education can and does occur within medicine; however, it often involves trial and error as well as observation of and interaction with inconsistent mentors. With the increasing expansion of medical technology, complexity of research, emphasis on evidence-based medicine, and the need for a multidisciplinary approach to provide excellent patient care and outcomes, healthcare leadership is becoming much more complex—but no less necessary.

[SEND FEEDBACK](#)

Although the AAOS, the American Orthopaedic Association, and the Society of Orthopaedic Military Surgeons (SOMOS) do provide leadership programs for members, most medical schools and graduate medical education training programs do not have formalized leadership training. To address this issue, the Duke University Medical Center established the John A. Feagin, Jr, MD, Leadership Program (Feagin Leadership Program) in 2009. This article outlines our experience with this formal, year-long leadership development opportunity.

Goals

Recipients of formal leadership education more frequently end up in leadership positions. The goal of the Feagin Leadership Program is to provide tomorrow's medical leaders with formal leadership education, training, and developmental experiences.

The Feagin Leadership Program teaches participants both the principles and practical applications of the tools they will need to successfully assume leadership positions in both medical and professional communities. Specifically, the program focuses on cultivating personal and interpersonal competencies such as communication, networks, and emotional intelligence; team-building; and making connections within a diverse population.

Participants

Eligible participants include medical students, residents, and fellows within the institution's medical community who are passionate about and committed to improving their leadership skills. Selection of the class of scholars is based on a competitive application process, which includes submission of a curriculum vitae, essays, and letters of recommendation.

Instructors

Military or business executive-type instruction can be an avenue to provide vital leadership skills and foster strategic thinking. Instructors in the Feagin Leadership

Program include individuals from diverse backgrounds who are well versed in leadership principles specific to their areas of expertise—medicine, military, athletics, business, research, or other fields. Throughout the course, these experts mentor scholars through didactic lectures and formal coaching.

Activities

Active involvement (experiential learning) enables participants to apply information learned in the classroom to real-life situations. The Feagin Leadership Program can be broken down into the following three complementary experiences:

- didactics and lectures
- experiential leadership opportunities (team projects)
- coaching and mentorship

Team projects—Team-based models have demonstrated improved patient outcomes. Thus, it is important that physician leaders have the skills to build teams and to understand their role on the team. At the beginning of the program, scholars are randomly sorted into three teams and each team is assigned a team project. Team projects include the following:

- hosting a Leadership Summit that brings together the various leadership programs within the institution’s healthcare community to network and share experiences as well as best practices
- conducting a “Military-to-Medicine Leadership Think Tank” at West Point that enables national experts and educators in leadership and leadership development to share ideas on leadership challenges common to both the military and medicine
- developing a leadership model for medicine using both qualitative and quantitative research methodologies that include members of the medical center (faculty, fellows, residents, medical students, nonphysicians). This leadership model was incorporated and translated to our Leadership, Education, and Development Program (LEAD) curriculum.

Coaching and mentorship—Coaching as well as feedback opportunities are important in leadership development. Each scholar has the opportunity to be coached and mentored throughout the program in a one-on-one fashion, which includes a 360-degree assessment of the scholar’s strengths.

Capstone event

The program culminates in the Feagin Leadership Forum, a venue for the scholars to share their projects and hear from a world-class group of speakers. Each forum is theme-based ([Table 1](#)), and previous keynote speakers have included Mike Krzyzewski, head coach, Duke men's basketball; Congressman Ron Paul, MD; Victor Dzau, MD, chancellor for health affairs and CEO of Duke University Health System; and **Jo A. Hannafin, MD**, first female president of the American Orthopaedic Society for Sports Medicine. In 2015, the sixth Feagin Leadership Forum will focus on "Leading in the 21st Century: Collectively Educating-Engaging-Empowering."

Next steps

The best time in medical training for formal instruction in leadership—during medical school, residency, fellowship, or practice—has not been established. But experience with the Feagin Scholars indicates that the sooner the leadership development experience occurs, the better.

The current cohort of Feagin scholars and alumni, independent of their level of training, report feeling more comfortable taking on leadership positions based on their experiences in the program. Although reportable outcome data of the 46 graduates to date are difficult to measure and will not be evident for years, the feedback received has been universally positive. Scholars viewed the program as a highly effective opportunity to hone skills in leadership while developing what will hopefully become lifelong friendships.

We believe that formal leadership education can benefit the participants, whether they find themselves in formal or informal leadership positions. In addition to sharing information on this effort to formally educate tomorrow's leaders in medicine, we want to receive feedback on the Feagin Leadership Program. One goal of the program is to serve as a catalyst for formal leadership education and development for other medical communities, given the lack of formal leadership education in today's medical curricula. Additional information on the Feagin Leadership Program is available at www.feaginleadership.org

Julie A. Neumann, MD, is a Feagin Scholar and resident in the department of orthopaedic surgery at Duke University Medical Center (DUMC), Durham, N.C. **Kathryne J. Stabile, MD, MS**, is a Feagin Scholar and former sports medicine fellow in the

department of orthopaedic surgery at DUMC. Ann H. Taylor, BSN, is an instructor in the Feagin Leadership Program. BG (retired) Maureen K. LeBoeuf is the former Feagin Leadership Program Executive Director. LTC (retired) Joe Doty, PhD, is the program chief operating officer. **Dean C. Taylor, MD**, chairs the Feagin Leadership Program, directs the Duke Orthopaedic Sports Medicine Fellowship Program, and is a professor in the department of orthopaedic surgery at DUMC.

Disclosure of funding: Funding for the John A. Feagin, Jr, MD, Leadership Program was provided in part by the Duke Institute for Health Innovation (DIHI), DJO Global, Arthrex, BREG, DePuy Synthes, Duke Sports Medicine Department, Duke Orthopaedic Surgery Department, Smith & Nephew, Topical Gear, Duke Executive Health Program, and ConMed Linvatec.

© 1995-2023 by the American Academy of Orthopaedic Surgeons. "All Rights Reserved." This website and its contents may not be reproduced in whole or in part without written permission. "American Academy of Orthopaedic Surgeons" and its associated seal and "American Association of Orthopaedic Surgeons" and its logo are all registered U.S. trademarks and may not be used without written permission.