Clinicians Playing the Role of Managers: How Do They Use Their Time and How Would They Like to Use It?

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Abstract

Health professionals are now required to develop skills to achieve a better organizational performance, in addition to the skills necessary to carry out their professional duty. The role of clinician-manager has thus grown rapidly in all OECD countries and, today more than ever, it is necessary to assess managerial performances in order to enable health organizations to fulfill the rising demand for high quality services. Considering the limited financial autonomy characterizing public health organizations, only few managerial variables can be leveraged within the organization itself. Time allocation is found to be one of the most important element to be strategically manipulated. In light of the hybrid nature of hospitals’ clinician-managers, it is important to assess the adequacy of the time they use to play the role of managers and the time they to act as clinicians. This paper investigates how health organizations middle management allocate its time in a resource-constrained health system wondering the following questions: “What activities shall the middle managers of a public health organization perform, how much time shall they spend on each of these activities and how do they self-perceive the adequacy of such time spent?”. In order to address these questions, a multi-phase mixed method has been used. The first phase consisted of a focus group. 22 participants have been identified relying on two criteria: (1) being an expert of a public health organization, and (2) having published at least one article in the last five years on health management topics on peer reviewed journals. This allowed to identify 6 different key-activities that shall characterize the role of health middle-managers: clinical activities, direction activities, internal relations, external relations, training and research, and other non-clinical activities. This first phase relies on selected participants particularly sensitive to the topic, defined by the literature as privileged observers. This definition is based on the full view these subjects possess on the phenomenon. Each activity is then assessed in the second phase, which relies on a survey questionnaire administered to over 8,000 public health organization clinician-managers in Italy, consisting of the entire hospitals’ middle-management population of the country. 1,200 questionnaires
were returned. The questionnaire has been designed to sketch personal information of respondents, including gender, age, field experience, geographical position, type of unit they work for. Two questions have been asked using semantic dimensional Likert scales. Questions investigated how much time they spent on each identified activity and how they self-perceive the adequacy of that time. The design of the questionnaire allowed to calculate differences between groups and perform inferential analysis. Analyses were performed using STATA®, software version 15.2. The validation process has been based on the six-steps approach. The internal consistency was calculated and resulted satisfactory in all tested items. Preliminary results show several differences between groups. Medical units clinician-managers tend to be more oriented in splitting their time in half between clinical and management issues, while surgeons tend to be more professionals and less managers. Generally speaking, women seem to find their time to be manager insufficient, while the opposite was found for men. Years of experience in the field of management also characterized the choices: less experienced clinician-managers tend to aspire to spend more time on clinical activities whilst more experienced respondents better acknowledge the need of being managers. Overall, it seems that clinical-managers are still more oriented on the clinical part of their duties. Clinical managers perceive the non-clinical work as “too invasive” and time consuming within their tasks; they ask for more clinical activities in term of direct activity on the patient but also about education.

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