FROM THE EDITOR

REFLECTIONS ON LEADERSHIP AND MENTORING

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For the most part, my Forum editorials have focused on one or more of the articles in an issue and my impression on its message and relationship to general internal medicine, and the Society as a whole. This month I’m going to deviate a little and throw caution to the wind by sharing a recent professional experience of my own. This summer, I was asked to participate as a mentor in the Klar Leadership Development Program (Klar LDIM) at the Zucker School of Medicine at Hofstra/Northwell. Klar LDIM is a longitudinal program that focuses on leadership, team building, decision-making, and innovation management and introduces these topics to medical students through a variety of methodologies, which includes an eight-week long summer experience, longitudinal mentorship, case study discussions, healthcare policy advocacy opportunities, and seminars.

The formal mission of the Klar LDIM program is to expand and accelerate the development of leadership and innovation management skills in a select cadre of medical students preparing them as future healthcare leaders. As I often do, I agreed to be a mentor. And, as often happens, it didn’t take long for me to worry about how I am going to commit to this longitudinal mentorship experience and how can I make it interesting. When not caring for my small cohort of patients, teaching, or working on a research grant, my days are filled with unexciting meetings, discussions with faculty and staff, and mentoring my gen med faculty. Hardly the kind of stuff that would keep a member of “Generation Z” occupied and nurture an interest in a career in academic general internal medicine. Guiding students in the art and practice of medicine was easy compared to this. This would be the first time that I would be responsible for a student interested in learning about the “non-medical” part of my job.

As I often do when faced with a new challenge, I started examining how I spent my time and paused to reflect on why I do what I do. Why did I approach meeting with the finance people the way I did? Did I compromise too much on my proposed budget and give up any advantage I may have in funding new innovations for the division? This practice of thinking about the process of each everyday task so that I can explain and find teachable moments for my student allowed me to reflect on my own leadership style and to influence the experience before it occurred. I, like many physicians in leadership positions, conduct myself in the way that I observed my own mentors—gen med icons like Wishwa Kapoor and Rick Lofgren, as well as my current SGIM colleagues. What I now recognized was that I have transcended the simple mirroring of the leadership styles of my mentors and colleagues and now have my own unique style that my medical student will in turn take and assimilate as part of his style. I found that to be a pretty exciting revelation, but also a great responsibility. I spend a significant part of my time thinking about and creating opportunities to promote primary care general internal medicine and academic medicine as career paths.

In this month’s President’s column, Drs. Corbie-Smith and Bass highlight the four major organizational goals that emerged from Council’s recent visioning process. The first, to foster the development of future leaders in academic general internal medicine, fits in perfectly with what I am describing. The Klar program, although not specifically a general internal medicine program, gave me another venue to promote a career that I have found most rewarding and influence future generations of physicians.

I was paired with an outstanding medical student and all around remarkable person. Marcel is a second-year student interested in strengthening community partnerships, and he already has demonstrated a very distinct SGIM quality of giving back by establishing a middle school mentorship program whereby Zucker Medical Students review topics on wellness and health. This is one of those situations where the roles of teacher and student are often blurred and depending on the situation, interchangeable. I learned as much about my style and approach to leadership and how I handled my role as Division Chief, mentor, advocate, and coach as he continues on page 2.
FROM THE EDITOR (continued from page 1)

learned about “what a division chief does?”

This month’s *Forum* also features articles that reflect issues being faced by generalist faculty and leaders every day. Colin Feuille and colleagues describe a well designed and experientially based track to train future academic clinician educators. Tiffany Leung ad her colleagues shine a light on the important topic of physician suicide and offer some actionable points to address the issue. Articles on health IT, harm reduction regarding the opiate crisis, and another outstanding morning report make the September issue another great read.

Enjoy!!