Team-based clinical care and teaching has garnered more emphasis in recent years. In most academic medical centers, teams remain relatively hierarchical. With rare exceptions, everyone in the organization is called upon to lead—whether as a senior resident, teaching attending, or mid-level to senior administrator—and to follow someone else “higher up” in the chain of command. Demands and expectations of supervisors strongly influence productivity, work environment, and, ultimately, key outcomes such as the quality of clinical care, research, and medical education. Therefore, managing your boss (aka “managing up”) is a critical skill needed by all trainees, faculty, and administrators.

Zuber and James define managing-up as “the process of consciously working with your boss to obtain the best possible results for you, your boss, and your organization.” In order to do this effectively, one must first recognize that the boss-worker relationship is mutually dependent. A boss depends on workers to carry out specific tasks in order to achieve objectives; workers depend on the boss to provide context for their activities and resources needed to complete tasks. However, this interdependence is between two fallible human beings and therefore requires specific strategies to obtain optimal results: 1) understanding your boss, 2) understanding yourself, and 3) managing the relationship. These steps to managing-up are spelled out in this HBR Classic.

Understand your boss. First, you must seek a deeper understanding of your boss’s perspective. You must understand the boss’s organizational and personal objectives to provide context for his/her decisions and actions. Seek to understand the pressures imposed on your supervisor (e.g., time or financial constraints). Take an inventory of your supervisor’s strengths (e.g., easy accessibility) and weaknesses (e.g., short-tempered). Acknowledge variations in work styles (e.g., early birds vs. night owls; scheduled meetings vs. informal drop-ins) and communication styles (e.g., “listeners,” who prefer phone and face-to-face communication vs. “readers,” who prefer written communication such as emails and memos).

Understand yourself. Next, take stock of your roles and goals within the organization and how well they are aligned with your boss’s. Evaluate your strengths, weaknesses, and communication/ work styles. Most importantly, recognize your responses to dissonance in these areas when interacting with your boss. “Rebellious” and “compliant” are two common response styles, both of which are counterproductive to your boss’s goals and your own. Negative responses from you or your boss due to differences in goals, communication styles, or work styles will result in areas requiring more intense management.

Develop and manage the relationship. Acknowledge and accommodate differences in work styles. For example, a boss who is a “reader” may prefer reviewing an agenda and related documents prior to a meeting, whereas a “listener” may prefer receiving a memo after a meeting to summarize the discussion. Second, solicit and clarify expectations and priorities. Sometimes establishing mutual expectations occurs in a formal process such as an annual review, but frequently additional ad-hoc meetings or informal check-ins are needed to evaluate progress and adjust to changing environments.

Once these basic strategies are employed, then tackling additional techniques of managing-up can be useful, including keeping information flowing about challenges and achievements and helping your boss manage his or her time, resources, and influence. Managing-up is a key skill that will improve all working relationships. In academic medicine, effectively managing-up can improve the quality of care provided by teams on the wards, productivity of mentee-mentor partnerships, and the overall work environment of academic general medicine divisions.