

ROUTE TO THE TOP: A SNAPSHOT OF DEANS AT U.S. MEDICAL SCHOOLS

Each year, Spencer Stuart's Route to the Top study examines the backgrounds and education of S&P 500 CEOs and charts the paths they took to the CEO role. The study regularly produces interesting insights into emerging leadership trends, particularly the expertise and experience that are required for CEOs today.

This year, the firm's Life Sciences Practice set out to conduct a similar review of the backgrounds of the deans of 125 medical schools in the United States, looking at factors such as educational background, medical certifications, the positions they held earlier in their careers and the length of time they have been in office.¹

What did we find from our research? The data will not surprise many in the field. Senior leadership roles in the school of medicine — such as department chair, center director or associate/vice dean — continue to be the most common path to the dean's position.

As part of the study, we also reviewed the deans' American Board of Medical Specialties (ABMS) certification data. Of the 100 deans for whom we were able to get information regarding their specialty board certification, internal medicine was overwhelmingly the most common specialty background, held by 41 percent of the deans. Within internal medicine, infectious disease, gastroenterology, endocrinology and metabolism and nephrology were the most frequently cited subspecial-

ties. Pediatrics was the next most commonly held specialty background, held by 14 percent of deans.

We also examined whether deans had received advanced degrees in addition to their medical degrees. In fact, fewer than 30 percent have an additional advanced degree. Among those who do, a Ph.D. was most common, followed by an M.P.H. and M.B.A.

Finally, given the time demands of the role, we wondered at what point chronologically in their lives did they move into the dean role. We found that, on average, deans were age 55 when they moved into their current role. The average age of today's academic medical school deans is 58.

One of the most striking findings is that dean tenure averages just about four years — one year less than the median tenure of S&P 500 CEOs. To learn more about the factors affecting dean tenure and deans' route to the top, we spoke with a number of medical school deans and other senior academic medical center leaders in university settings about the challenges they face, the reasons they were drawn to the role and advice they would give to individuals considering a dean position.

¹ Research based on NIH-funded academic medical schools as of July 1, 2006.

AN IMPOSSIBLE JOB?

As the chief academic officers of their medical schools, deans oversee varied missions that typically include education, research and clinical service. They also may be responsible for running clinics and hospitals, and may oversee budgets of hundreds of millions of dollars or even a billion dollars or more. In addition to their responsibility for strengthening the academic and research infrastructure of their institutions, deans must focus on fundraising and maintaining the school's profile in academic circles and with the philanthropic community. These varied responsibilities and academic medical schools' inherently diverse constituency make the role of dean extremely demanding and time-consuming.

“Academic medical schools are said to be pretty much impossible organizations to run effectively because of their complexity,” observed Dr. Arthur H. Rubenstein, dean of the University of Pennsylvania School of Medicine and executive vice president for the Health System, which includes a large multi-hospital system and related enterprises. He attributes the relatively short tenure of medical school deans to a combination of “dean burn out” because of the intensity and time requirements of the job as well as the challenges associated with maintaining the favor of a broad range of constituents — including faculty, students, donors and the university leadership — in a challenging environment and with limited resources. “I don't think anyone is quite prepared — I don't think I was — for how much time the job requires to be successful,” Rubenstein said. “Even though I've been a dean now for nine years and I would say I'm efficient, I still work 14 to 15 hours a day and that hasn't changed one iota.”

Dr. Claire Pomeroy, vice chancellor for human health services at the University of California Davis and dean of the university's School of Medicine since February 2005, oversees the UC Davis Health System and all of its academic, research and clinical programs. She agreed that being a dean is an extraordinarily complex, challenging and time-consuming job.

“Being dean is challenging. First, you have to balance these really diverse missions — academics, research and a complex clinical delivery system — which takes a wide

spectrum of skills. We're all more expert in one of those areas than in others, and it's very hard to find the person who is as comfortable talking with the HMO providers as meeting one-on-one with a first-year medical student. There's a lot of culture clash that goes on and it's really hard to satisfy all those constituencies for a long period of time,” Pomeroy said. “Secondly, one of the main jobs of being dean is getting people the resources they need in those diverse missions, and recently they have been inadequate resources. You're constantly battling to get the resources that your organization needs to be successful and you don't meet everybody's needs.”

Dr. Richard V. Homan, Annenberg dean and senior vice president for health affairs of the Drexel University College of Medicine since September 2005, agreed that managing an academic medical center amid scarce resources is one of the primary challenges for deans today as costs for faculty salaries, malpractice coverage and research and development investments are on the rise, while state support, school tuition and grants cannot keep pace.

“Most deans are confronted with the challenge of maintaining a strong academic program in the face of diminishing and tight resources. To that end, deans must find ways to improve the efficiency of the clinical practice enterprise so that we can provide more resources and be able to invest in research and the academic development of the faculty,” Homan said.

With limited resources, it is critically important that medical school deans are able to establish and adhere to priorities for the institution, said Dr. Christopher C. Colenda, dean of the College of Medicine of Texas A&M University since 2003. “I have to be able to prioritize what is necessary for the schools and be able to explain and communicate those priorities to the stakeholders,” he said.

Dr. Gerald S. Levey, dean of the David Geffen School of Medicine at the University of California Los Angeles, concurred. “How a person makes decisions and the process they follow is so important,” he said.

What other characteristics are critical for medical center deans? The specific skill-sets necessary for a dean can vary greatly depending on the nature of the institution, its mission and its size.

“Each medical school is different from the other. There are research-intensive medical schools; there are medical schools that do some research, but a lot of clinical work; and then there are medical schools that do mainly clinical work and teaching and very little research,” Rubenstein said. “The characteristics of people who run them need to be very different because the skill-set is different.”

The largest institutions with the most complex budgets may require a dean with strong financial management skills. Depending on its mission, a medical school may require a dean with more research experience or more clinical experience in order to have credibility with the institution’s key constituencies. Similarly, an institution’s mission may suggest the need for advanced study in other areas, including business management, public health, organizational behavior, negotiation skills and conflict resolution.

Beyond technical skills and academic credibility, all medical school deans must be adept at a range of personal and people management skills.

“You need real leadership skills, which I actually think is the most important thing because resources follow the leadership skills,” Pomeroy said. “If you can inspire people, if you can paint them a vision that they get excited about, two things will happen: first, they’ll do more with limited resources and, second, more resources will come.”

The medical school deans who participated in our interviews agreed on the key characteristics of leadership, described in this way: fairness, integrity, listening skills, personal warmth, respect for people, lack of arrogance and the ability to get the best out of people. These leaders also underscored the importance of transparency in light of the complexity of a medical school, the diversity of its constituencies and the lack of hierarchy. The group agreed that most great leaders have these personal qualities. And,

while these leadership qualities are not sufficient in themselves, they help set the tone for the institution.

Rubenstein observed that “academic institutions are not at all hierarchical, so any student or faculty member can come see a dean, and I think that’s appropriate. The ability to deal with people at all levels of their career development and knowledge base and interest level is a big start to being successful.”

DRAWN TO THE ROLE

Despite the highly demanding schedules, all the challenges they face and the potential for burn out, the academic medical center deans we spoke with said they feel honored to serve in the position and find the work professionally and personally rewarding.

“There are only 125 medical schools in the country and it’s a real privilege to be a leader of one of these medical schools. These schools will produce the next generation of physicians and scientists, which will have a tremendous impact on the way medicine is practiced and healthcare is delivered nationally,” Homan said. “That’s an incredible opportunity and an enormous challenge and responsibility. It’s a wonderful opportunity to make an impact in healthcare and medical research, not only in your school, but regionally and nationally.”

UCLA’s Levey said he continues to find richness in being able to overcome challenges to make the institution successful. “It’s rewarding to be able to make a difference not only at the department level, but also to drive the vision for the whole institution, to lead multiple disciplines and departments collectively forward.”

All of those interviewed for this paper responded similarly to the question, “Why would you want to be a dean?” While the job can be exhausting and the faculty can be critical at times, it also provides a tremendous opportunity to do a range of very interesting and rewarding work with a variety of interesting people, deans said.

ADVICE FOR FUTURE DEANS

To be successful in their demanding roles, medical school deans must possess a combination of basic management skills, people leadership skills and academic credibility with the faculty and students. Currently, there is little formal training to prepare up-and-coming leaders for the role. The most common approach seems to be an apprenticeship that allows individuals aspiring to the dean role to see the demands up close and understand the kind of skill-sets and characteristics that help deans successfully lead their institutions.

How can new or future deans prepare themselves for the demands of leading a medical school or academic medical center? Through our discussions with medical school deans, academic medical center leaders and our work with clients, we have developed the following suggestions:

Develop and articulate a strategic vision. Today's deans need to look beyond the medical school and adopt a larger organizational outlook. Levey, for example, said his years of experience in private industry — as senior vice president of medical and scientific affairs at Merck & Co. — improved his ability to see the big picture.

Developing and articulating an exciting vision for the entire institution and being able to build support for that vision among a range of constituencies is critical to success. The most effective deans are knowledgeable about strategic planning and involve a variety of people in developing and implementing strategic goals and guiding principles, which can be referred to regularly. Finally, while striving for excellence, deans should focus on goals that are practical and achievable.

Acquire financial management skills. The need for real financial management knowledge and experience has grown tremendously in the past 10 years as deans increasingly are charged with running and managing more complex organizations that require strong relationships with the clinical organizations affiliated with the medical school. With financial needs increasing and funding, in many ways, constricting, financial management expertise is a must. Deans also have to be able to set and communicate priorities. The fewer resources an

organization has, the more skilled at prioritizing the dean must be.

Continually enhance interpersonal skills. Leading a diverse group of constituencies in a relatively flat organization, the most successful deans possess exceptional interpersonal skills. Rubenstein observed: “How you present yourself, the characteristics you show and the feeling people have when they walk out of your office or listen to you at a meeting has a huge impact on the institution because it sets the tone in a way that people give too little credit for, but in the end is enormously important. These are very porous institutions, so you could talk to one faculty member and, the next day, everybody knows about it, for good and bad. The upside is huge and the downside is crippling.”

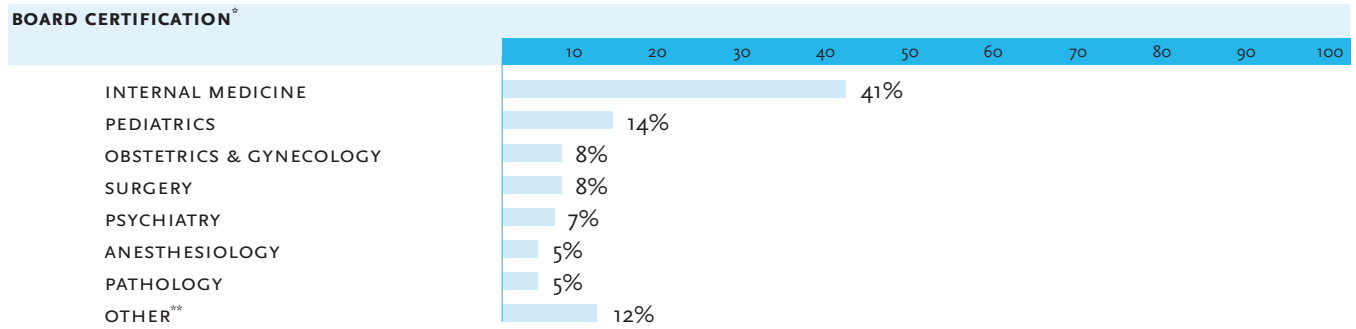
Find a few individuals who can provide trusted counsel and advice. Network with other deans across the country. “Being a dean can occasionally be isolating and lonely. It may sometimes be difficult to develop relationships with individuals at your own institution to serve as a confidant or sounding board, particularly related to sensitive institutional issues. Developing relationships with peers regionally and nationally can provide support, objective advice and guidance,” Homan said.

Be as transparent as you can with the faculty. Successful deans work effectively with the faculty and other school leaders to develop a common vision and effect meaningful change.

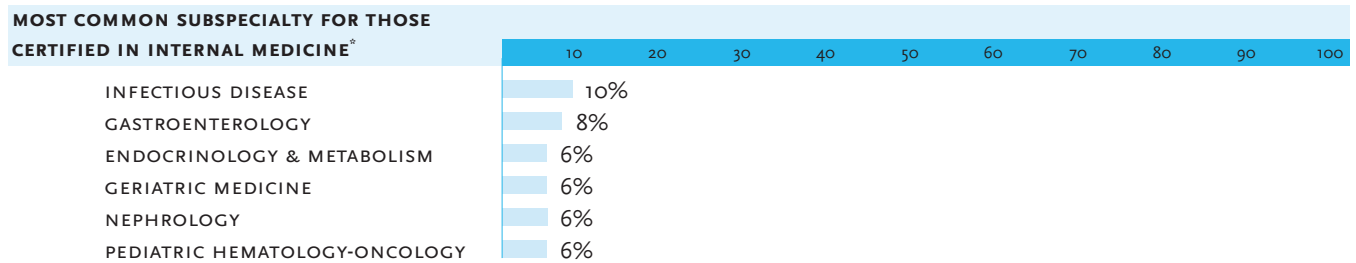
Cultivate a strong relationship with the president or chancellor of the university and/or the board members to whom you report. With the support of key university leaders, a medical school dean will be able to establish an open and ongoing dialogue and develop a clear expectation of what his or her range of authorities is and what demands will be made of him or her. In addition, deans who develop a wide network of supportive colleagues will be better positioned to win the support necessary to implement their plans.

Vital Stats of Today's Medical School Dean

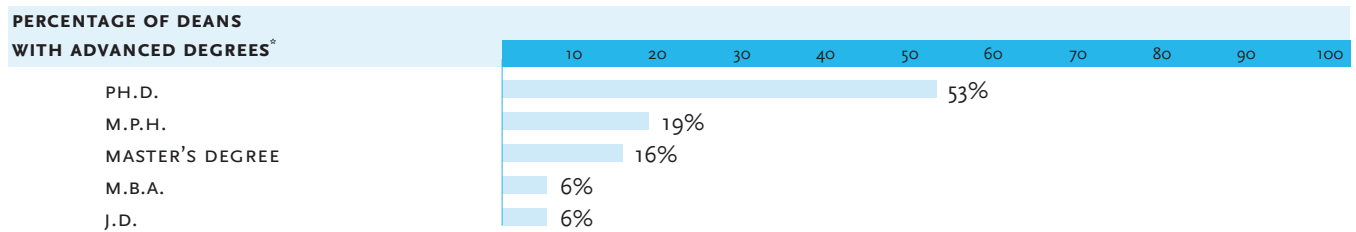
AVERAGE AGE OF SITTING DEANS:	58 YEARS
AVERAGE STARTING AGE FOR DEANS:	55 YEARS
MOST COMMON CAREER PATH:	DEPARTMENT CHAIR AND/OR MEDICAL SCHOOL ADMINISTRATION
PERCENTAGE OF DEANS WITH A SUBSPECIALTY CERTIFICATION:	40%



* Out of 100 deans for whom information was available.
 ** Other represents categories that included fewer than 3 percent of deans.



* Out of 51 deans for whom information was available.



* Out of 32 deans for whom an advanced degree was identified.

MOST FREQUENT UNDERGRADUATE SCHOOL*

PRINCETON	6%
YALE	5%
AMHERST COLLEGE	3%
BROWN UNIVERSITY	3%
COLUMBIA UNIVERSITY	3%
HARVARD UNIVERSITY	3%
UNIVERSITY OF MICHIGAN	3%

MOST FREQUENT MEDICAL SCHOOL*

DUKE UNIVERSITY	5%
HARVARD UNIVERSITY	5%
CORNELL UNIVERSITY	4%
NEW YORK UNIVERSITY	4%
ST. LOUIS UNIVERSITY	4%
CASE WESTERN RESERVE	3%
JEFFERSON MEDICAL COLLEGE	3%
RUSH MEDICAL COLLEGE	3%
UNIVERSITY OF MICHIGAN	3%
UNIVERSITY OF MISSOURI	3%
UNIVERSITY OF MISSISSIPPI	3%
UNIVERSITY OF CHICAGO	3%
VANDERBILT UNIVERSITY	3%

* Out of 86 deans for whom information was available.

* Out of 111 deans for whom information was available.

SPENCER STUART'S LIFE SCIENCES PRACTICE

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