On Being a Director of Child and Adolescent Psychiatry
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"When you have seen one Child and Adolescent Psychiatry Program, you have seen on Child and Adolescent Psychiatry Program."

A. **Aspects of the Job Description of Head of Child and Adolescent Psychiatry**

1. The role of the leader
    a. Why did you become a leader?
    b. Guidelines for effective leadership:
        i.   Prioritize
        ii.   Balance between action and inaction
        iii. Lead through communication
        iv.   Take charge of time
        v.   Is this an enjoyable place to work? ("fun?")

2. Know your context
    a. History of Division
    b. The local and national community
    c. Current missions at your medical school
    d. Current missions in your department of psychiatry

3. Relationships with key constituents
    a. Psychiatry Chairman
        i.   Did he/she recruit you?
        ii.   Does he understand child and adolescent psychiatry?
        iii. Link with other de3partment initiatives
        iv.   Structural issues: budgetary autonomy
        v.   Structural issues: hiring autonomy
    b. Pediatrics Chairman
        i.   Join in shared initiatives where possible
        ii.   They are interested in a lot of the things we are
        iii. Remember they don't think like we do: problem and opportunity
    c. General Psychiatry Training Director/Vice Chair for Education
        i.   This is your prime recruiting pool
        ii.   Become a valued member to the educational dilemmas facing general programs
    d. Director of Research
        i.   Have regular contact regarding mentorship and the "mechanics" of the granting process
    e. Behavioral Mental Health Administrators
        i.   They can make your life a lot easier
        ii.   Training hospitals need to consider a two tier system: training track and primary service delivery track

f. In summary, relationships play out in hierarchical and matrix fashion.

4. Managing the Tripartite Mission
    a. Clinical
        i.   Contracts for special populations (e.g., delinquency)
        ii.   Collaborations with natural partner (e.g., Military)
        iii. Be selective in managed care
        iv.   Philanthropy and utilizing development staff
    b. Research
        i.   Find liaisons for junior faculty inside and outside your system
        ii.   Linkages with the adult department
        iii. Protect time of junior faculty
    c. Training
        i.   Work hard on recruitment by serving on general residency recruitment committee
        ii.   Have rotations for medical students which cover both inpatient and outpatient issues

5. Common issues/themes
    a. Managing cultural change
    b. Using administrative crises as "teachable moments"
    c. Dealing with an increasingly frantic pace of professional life and nurturing faculty
    d. Hiring and firing-taking care of people and the organization at the same time.
    e. On becoming a systemic thinker/manager

6. Plotting Strategic Relationships

Hierarchical relationships are those with a line authority (Who's my boss?), whereas in project product authority, individuals work together toward a common good. An example of line authority is a hospital nurse working for (reporting to) a nursing director for the hospital. At the same time, she/he is working for (reporting to) an attending psychiatrist in a hospital unit. The life of a director of child psychiatry also involves dual relationships.

Line of Authority

Project Authority	Director of Nursing	Director of Psychology	Chief of Psychiatry	Teachers
(Child Psychiatry Inpatient Unit)	RN	PhD	MD	

Line of Authority

	Vice Chair of Research	Community Board	CEO Hospital	Chair of Pediatrics	Chair of Psychiatry	Vice Chair of Education
IP Service						
OP Service						
CL Service						
Training Program						
Research Endeavors						
Finance						

Project Authority (C&A Psychiatry)

B. Good to Great: Why Some Companies Make the Leap and Others Don't

The findings of this business study are relevant to many types of organizations, including divisions of child and adolescent psychiatry. In this book, Collins and colleagues report that executives and leaders of successful organizations companies:

1. Were a paradoxical blend of personal humility and professional will. They were ambitious but for the company. The used the "window-mirror" approach – looking out the window for factors to attribute success and looking in the mirror when the company had problems.

2. Got the right people on the bus (and the wrong people off the bus) before the figured out where to drive it. People are not the most important asset, the right people are. They were rigorous in people decisions: when in doubt, don't hire – keep looking; when you know you need to make a people change, act; put your best people on your biggest opportunities, not your biggest problems.

3. Retained absolute faith that they would prevail in the end, regardless of difficulties and, at the same time confronted the most brutal facts of their current reality. The leaders: asked questions, as much as provided answers; engaged in dialogue and debate rather than coercion; conducted autopsies, without blame; built red flag mechanisms that turn information into information that cannot be ignored.

4. Identified what their companies were good at and stuck to it, what they were passionate about and what drove their economic engine (eg switching from profit per loan to profit per employee)

5. Established a culture of discipline- engaging in disciplined thought before taking disciplined action. They shunned opportunities that were outside what they were good at. They still allowed freedom and responsibility within the framework of that system.

6. Avoided getting on the bandwagon regarding technology fads, yet became pioneers in carefully selected technologies. They asked: does the technology fit with what we are trying to get good at?

7. Chaired transformations that looked dramatic but were ongoing, organic, cumulative changes. The good-to-great transformations never occurred in one fell swoop. The dramatic outcomes skewed the perception of what works over the long haul. These companies had no launch event, tag line or defining moment. Only in retrospect did the transformation become clear.

8. It is impossible to have a great life without a meaningful life; it is difficult to have a meaningful life without meaningful work. Tranquility comes from creating something of excellence that makes a contribution – and gives a leader a sense that his or her work matters.

<div align="right">(J Collins, 2001)</div>

C. Thoughts on Administration and Leadership

1. Always consider people first. You are likely to have personal relationships that last beyond any formal institutional/organizational tie. Individuals will likely know you in several contexts. In the short and long run, it is more effective to get to know them as a friend and colleague rather than as an employee of "your" organization.

2. People enjoy fun. Humor and social get-togethers "oil" the workplace.

3. Utilize the strength of others-what they are-rather than their weaknesses, what they are not. Ask "What can I count on them for?" Maximize their specific role for your organization.

4. Understand the strength of the group, the whole being greater than the sum of its parts.

5. Non-task behaviors reveal a great deal about individuals. Difficult management decisions can be informed by a broad view of persons.

6. A dose of humility goes a long way. You will likely have benefited from the work of others just as your work will make the work of others who follow you. We are all part of a link.

7. Management is dealing with problems, not eliminating them.

8. When people leave your organization be sure to recognize their contributions. These "send offs" communicate how your organization treats people when they are no longer useful to completing instrumental tasks. The implicit message for others is: "This is how you will be treated."

9. Your strength is your weakness. If you are a "listener" being proactive may be difficult. On the other hand, "shakers and movers" may not take time to pick up on subtle cues.

10. Leadership always demands initiating change, with the accompanying challenge of maintaining healthy historical continuities.

11. Understand a job (and master it if possible) before you delegate it to someone else. When timed appropriately, delegating benefits you, while at the same time, it enhances the personal development of the recipient of the charge.

12. Most major decisions the leader makes are not made with unanimous agreement but, hopefully, after a vigorous, informed debate about the issue at hand. Then the leader decides. Thus, consensus is a relative term.

13. See your job as decision making – that is your "product".

    f. There are pivotal decisions but most divisions/departments are built and developed through a series of decisions, made over time, which have a powerful, cumulative impact. Put another way, we always overestimate what we can do in a year, and underestimate what we can do in ten years.

    g. A leader's job is to make the decisions that can't be delegated.

    h. There is a difference between a wrong decision (good idea that didn't turn out) versus a bad decision (poor idea doomed to fail)

    i. Deciding before you have the relevant information is **impulsive**; deciding after you have more than enough information is **indecisive.**

14. The leader must inspire confidence in others. This requires interpersonal strength and goal directedness which falls short of controlling behavior.

15. When leadership becomes derailed
    The important role of leadership can inspire those who follow to greatness or leadership can subtly destroy the trust and confidence in those who follow (sometimes, not so subtly). Much recent literature has been devoted to this topic (see below). It seems clear that leaders who flounder have some of the following common leadership shortcomings:
    - Lack energy and enthusiasm.
    - Accept their own mediocre performance.
    - Lack clear vision and direction.
    - Have poor judgment.
    - Don't collaborate.
    - Don't walk the talk.
    - Resist new ideas.
    - Don't learn from mistakes.
    - Lack interpersonal skills.

- Fail to develop others (Zenger and Folkman, 2009)

16. The Effective Leader:
    - Is an effective listener
    - Communicates
    - Motivates
    - Engenders trust and confidence
    - "Knows" his / her people
    - Develops vision
    - Builds a team
    - Is approachable ("people skills")
    - Builds a relationship through mutual trust and respect
    - Is decisive
    - Initiates (tries things)
    - Leads by example
    - Accepts mistakes and learns from them
    - Is creative
    - Delegates
    - Handles criticism
    - Inspires and influences
    - Is fair in dealings with others
    - Consistent in behavior

17. When leadership becomes toxic, it is important for followers/subordinates to:
    - Be proactive
    - Cultivate friends/colleagues outside your immediate sphere of influence
    - Count the cost of confrontation.
    - Do what is right.

D. Four Areas Where Things Break Down For Leaders

Premise: Relationships are foundational to individual functioning and flourishing. Individuals get "sick" through relationships and get "better" through relationships. Leadership is formally managing relationships.

The following identifies topical areas, with specific questions, to aid thinking about and exploring areas of personal, and intra-personal, discomfort and challenge. They can be tailored according to role status (i.e. trainee, colleague) and setting (formal or informal).

1. The Relationship of Work to Your Sense of Self (You "Psychology")
    - How much of your "self-esteem" is determined by your work success? When you experience a work related "failure", what is your response? How do you cope with this?
    - Do you feel you are running "too fast"? Do you make interpersonal, or technical, errors because you are multitasking?

- Do you have any solitude in your life? Do you feel you need this time? Is that time psychological or spiritual, or both?
- Do you feel you can't keep up with the pace of your workplace? If so, what are your coping strategies to deal with feelings of "falling behind"?
- Can you say "No"? When you do, are you concerned with the consequences on interpersonal relationships?
- Do you feel you are running out of time in achieving your goals?
- Most individuals have an ideal of who they want to become/what they want to achieve. How close are you to achieving that ideal? If you don't make it, how will you deal with it?
- In what way has your family of origin experience influenced your vocation choice and current work behaviors?

2. Personal Vulnerability/Narcissism
- Are you threatened by the achievements of others – those who report to you and those "above" you in the organizational hierarchy? Do they seem to get credit you believe is your due? What happens to you emotionally when others get compliments?
- Do you ever wonder why people don't seem to like you?
- Is your anger easily triggered by negative comments about your performance? Is it easy for you to look for "kernels of truth" in the comments?
- Have you been able to sustain long term relationships/friendships, or do people seem to come and go in your life?
- How competitive are you? What happens to you emotionally when someone else seems to "win" at your expense?
- To whom are you closest to in an emotional sense? Personally and professionally? Could you articulate what is most important to them in their life?
- Do people ever comment on your leadership: "He/she doesn't listen! He/she doesn't hear me."
- Have you ever been accused of bending, or breaking, "the rules"?

3. The State of your Personal Relationships
- What is most important to you – work or personal relationships (i.e. family)? Do you feel you have achieved a balance between the two? If yes, what are the key ingredients to achieving this balance?
- Has your family suffered from, or benefitted from, your career?
- Has your spouse ever told you, "I don't like what your job is doing to you. You are changing?"
- Does your spouse (partner) have a career? How have you balanced his/her career needs with yours? Has your spouse enhanced your career efforts? Have you enhanced hers/his?
- Does your family feel "squeezed out" by your career? Would you say you know your children and they know you? Could they describe succinctly your vocation and what you attempt to do through it?
- Do you get angry when family needs intrude upon work needs?

General Relationships

- Do you have friends outside of the workplace? What do you do to take care of these friendships?
- How do "outside friendships" enhance your work performance?
- Are these friendships shared with your spouse and partner, or are they yours alone?

4. Emotional and Physical Health
   - Do you worry more than you used to? How much of this is work related?
   - Do you have persistent times of feeling despondent, with little interest in things that used to interest you?
   - Have friends or family told you that you are drinking too much?
   - Do you get enough exercise? Sleep? Is your diet healthy?
   - Do you have a medical problem that is worsened by your work experiences?
   - How do you define stress? Given the ubiquity of stress in the workplace, what strategies do you use to manage it? Has stress led to medical problems for you?
   - Have you ever felt the need for professional counseling/therapy? Has someone suggested it? Are there impediments, personally and professionally, in pursuing professional mental

E. Moving an Entire Child Psychiatry Division into a Pediatrics Department: Lessons Learned Upon the Way

1. A personal view of academic politics
   a. The role of long term relationships
   b. Divisions are built one brick at a time
2. Integrating a child psychiatry division into a department of pediatrics
   a. Downside
      i. What to do with grand rounds?
      ii. What to do with research conferences?
      iii. What to do with the identity of a psychiatrist?
      iv. Communicating the family's role in psychopathology and in treatment
   b. Upside
      i. Where the patients are
      ii. Pediatricians respect the role of the family
      iii. Facilitates our communication skills
3. Understanding and communicating differences
   a. The nature of the relationship and clinical encounter
   b. What is psychopathology?
   c. How do the mental health disciplines differ from each other or complement each other
   d. How do the psychosocial therapies work/interact?
   e. What medicines can do and what they cannot do

      f.   What is a psychiatric diagnosis?
4. Increased mental health needs in primary care: Models
      a.   Integration versus co-location
      b.   Telephone consultation
5. What we have learned
      a.   Maintaining integrity: doing what is right no matter the cost
      b.   On being good citizens
      c.   The difference between pediatric psychology and child psychology
      d.   On maintaining a balance between joining and autonomy

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