## Introduction and Guest Background

Everybody. I got my good friend Tom McCarthy here. So excited to have you. Tom has been called the world's leading high stakes performance coach, which is a big deal.

He is the author of The Breakthrough Code, and he's the coach and advisor to some of the world's leading companies, like Microsoft and Cisco. Salesforce.

Wells Fargo, AIG, MetLife, and the list goes on and on and on. And so, Tom, so happy to have you here. Welcome. Yeah. Cheering it's great to be with you.

Ever since I met you a year and a half or two years ago. You've been a very important part of my life. So it really is great to be with you today. Likewise. Thank you so much.

And I can't wait for our doctors to actually hear you speak. Because, I mean, I think we're so used to hearing other doctors perspective, but I think you are a high performance coach, and I think we are all high performers as physicians, just naturally speaking.

Otherwise we wouldn't have really gone into view to this. Right. But but you work with like the, the top notch people who have scaled, who have really understood what it takes to team build and everything like that.

And that's what we really want to get into. So so let me ask you this. You know why? Why is it that whenever, we talk about team building, it creates so much anxiety for a lot of people wanting to do it?

And and not only that, when they try to do it, even a small, small amount of failure makes us almost like, cower and fear. What is that feeling from? Yeah.

You know, you mentioned a couple statistics, earlier when we were talking about the stress and the burnout. Yeah, the physicians face and, you know, they they didn't come in to their jobs or their roles.

They didn't go to medical school to try and, you know, have to manage a team. Right? They they wanted to help people. And then managing a team kind of comes with the territory a little bit.

And and that's just more added stress. There are already under a lot of pressure trying to take care of people that aren't well and get them well or keep people healthy.

And now you've got this human dynamic component where everybody's coming in that's working there, and they're bringing their own issues into the practice, and the physician has to make sense of it all.

So culture is really important. And there's a couple things we can talk about today. One is how do you create that winning culture, a culture that makes your job more fun as a physician, that it just, is more, and is people more engaged.

They enjoy being at work more for the physician. It just is enjoyable. And that's what I hope we can delve into today. Yeah, absolutely. Because honestly, like most medical practices, if we talk about statistics, you know, most medical practices, when they hire someone, they only keep a new hire.

That's a medical system for about three and a half months. And that's what the turnover is. And it's turnover is massively high. And that's why, you know, you got 44% or 46% of physicians burnt out, you know, seven days a week.

And if you talk about for four days or more per week, it's over 86%. And this is the study that was done on a mayo clinic. And so here's the thing. You know, I think that I think that when we as physicians, get very narrowly focused as doing the things that we're trained to do and we want to develop things for ourself, allow creativity, here's here's something that you may not know, Tom, is that when we become a doctor, we're taught you should only do the standard of care.

## Why Team Building Creates Anxiety

Don't go outside of it. And that's the way we actually practice medicine. Don't go outside the guidelines. But from a leadership perspective, creative perspective, it seems to be the opposite.

At least that's what I experienced. Do you agree with that? Yeah. Look, with leadership, when you talk about people coming in to a practice and only staying three and a half months, and then you got to hire somebody else that is frickin stressful.

That really is going to stress anybody out that especially if that person was really a talented person that you would have wanted to keep later. So our longer.

So I think that, one thing or couple things for people to think about is as doctors and creating a culture, when you hire somebody, you want two things.

Number one, you want competency. You want people to be whether it's a physician assistant or, whatever role the secretary, even you want someone to be very, very competent.

You can't you're not going to function well if they don't have competence. But you want something else to you want them to fit into the culture. You want them to embody the values or the principles that you have as part of your practice.

Now here's the problem. Most physicians, most practices heck, most companies that I work with haven't thought through their culture. They don't really know what it is.

I asked them, do you have a culture? They go, yeah, we've got a culture. Well, what is it? I don't know. And maybe even years ago they put together like six values and they stuck them on a wall.

But I'll ask them, hey, what what are your values? And they go, you know, they want to look at it, but they know that would be silly. They don't really know what the culture is.

So one of the things I think would be important for practices to do and, and in really any business I was just with, I literally just got back from San Francisco last night, and I was up there working with a part of a company called Salesforce, and we defined their culture, this large group within Salesforce, we put together their culture in about a day.

But the way I like to do it is you have three statements that embody the behaviors that you want from people that are going to be part of your culture, and then you measure those.

Once you're clear on what the culture is, you can measure it. So this this assistant that's coming in, what role did you say only last three, three, five months. Medical assistant, medical center.

So this medical assistant, that's only lasting three and a half months. What if there were a and let's say that they're in a player, they're very confident and they've got a lot of talent.

What if there were a culture that when they came into it, they could see it. They could feel it. They could experience it. They could fall in love with it.

They wouldn't stay three and a half months. They would stay a heck of a lot longer. And you know what? They

wouldn't even they wouldn't even leave if someone offered them, you know, a couple bucks more an hour.

If the culture is strong enough, it keeps people engaged. And it's so much more fun for the leadership, for the physician and the fit and the the physicians have to be leaders.

Everyone's looking up to them. So they have to embrace leadership. Yeah, that's that's a great point in and I'll tell you, I experienced that kind of firsthand is that, when we first started, we had relatively high turnover because there wasn't really a culture that was stated.

## Defining Culture and Hiring for Fit

And I thought, just like most other physicians, when you first start out there, hey, you know, when you start a medical practice, you know, my job is to kind of save lives and help patients.

And that should be just the culture. That's not necessarily the culture. That's the job description. Right? Yeah. And so, you know, when we started defining what our core values are, we're all cultures are, you know, people start buying into to the process.

And I'll tell you, I'm really, really like emotionally proud of my team because we went through some hard times during Covid, last year. And last year at this time was not a pleasant time.

And we had a group, a third of my team said, listen, doctor, run, we want to do what's best for the company. We we pulled our money together and actually, we'll work for free for the next three months if you want to do this.

Yeah. And then and then I just started bawling my eyes out. I'm like, this is such a great family to have. It's great. Yeah. That's a week later. We got the PPE and we didn't have to do that.

So think so. The energy is out there. But but I experienced firsthand it was very transformative. I'll never forget that moment for the rest of my life.

And I'm going to tear up even talking about it. Yeah, I think that that's the culture that I experienced, and I just don't want to let go of that, you know?

Yeah. Well, no, you did an amazing job. And first of all, you have a huge heart. You are a true physician, not just in the academic sense or the scientific sense, but with the emotions that that you have and the confidence you bring and, and just your love for humanity and other human beings.

And that also is what you have for your team. And, you know, no doubt that, they would want to be part of it and even forego their salaries, to make your clinic continue to survive when, when it looked a little iffy.

Yeah, but that that's what a great culture looks like. Chang. You've accomplished it there. I think it was by accident, because I didn't really know I was doing a first.

But let's talk about this for a second, because I don't want myself to be a unicorn case because I'm not. Yeah. So what are really the attributes of having a winning culture and winning team team members.

What are they really like? Yeah. So I, I like to imagine the nine blocks. So you know, nine, nine blocks, you've got an x axis, a y axis on the y axis.

We measure confidence. So I'm, I'm going to go from my left to right. Maybe it might be different for you, but you you evaluate people in any role. So it could be the receptionist, the medical assistant, the lab technician.

You know, whatever role they're playing, they're going to have different skill sets. But some are not very good. Like they're low performers, some are mixed.

You know, they have the good days, they have their day is not so good. And then some are high performers. Now, obviously you want a culture that would attract and retain and keep a high performer.

Kind of like the Tom Brady. Right? You know, at his position, he's been a high performer for a long time. The Patriots didn't keep him right. And he went won another Super Bowl with with Tampa.

But but you want you you want to you want to evaluate where is somebody on the performance. And that's what most people do. That's that's typically all they do.

Is this person doing the job yes or no. What we do, as I mentioned earlier, is we add another measurement tool and that is the the y axis where we're measuring alignment with culture.

Some people and we'll start down at the bottom left. They don't align with your culture like they walk in and the whole energy leaves the room like it's just a bad vibe.

And then some people kind of do, they kind of don't. We'll call that mix. And then you have people that align with your culture. So ideally the best practices, the best companies, the best teams are stockpiling people on their team that are high.

So we're gonna go to upper right hand corner. They're high performers and they fit your culture. And then the other people that we, we're willing to, to take on because we, you know, as also as a leader, you want to be a coach.

So you're trying to move them over. So the other the other, level is, is that block right to the left. So the upper right block is high performance, high culture.

And then right next to it is high culture, mixed performance. That person might need a little more experience, some coaching on how to do their role, but they've got potential to be in that, that high level.

Now I'm gonna ask, are we asking everybody to have the same skill set? No, because the performance metric you're going to you're going to have a different skill set than your medical assistant as a physician.

Right? So you you figure out what those are, you make sure you get high performance. Because we also here's what we don't want to have. We don't want to have someone who's really a nice person fits into our culture but can't get the job done.

That'll kill a practice. The other thing that could potentially kill a practice, though, unfortunately, is someone who's really skilled at what they do, but they're like, I mean, I hate to use this term, but they're like, you know, a chronic disease or a cancer in terms of in terms of what they bring every day in terms of energy and alignment with culture.

Now, the thing that you have to do, though, Chang, is you don't want to say, all right, you're a good fit for my culture. You're a good fit for my culture.

You're not. And then they ask you, why do you go? I don't know, it just feels like you're a good fit. I just don't really like that person's energy. That's not fair.

So why would I work with, teams to do is to say, right, what are the behaviors you want everybody to have? And they could say things like, you know, be constant learners, creative focus, gritty can work through things, courageous, whatever they are.

And then we take all these behaviors and then we try and compile them. They say, well, you said gritty. And then, you know, we also have determined are those kind of the same things.

And then we start lumping them together. And what I like to come up with at the end of the session is three. I call them mantra statements, a mantra, something you repeat over and over again.

Everybody knows it. So three mantra statements that call out the most important behaviors that make us unique as a culture. And and so then we create those and we like them to be kind of quirky.

So not like, you know, not like the standard, you know, we work hard like okay, great. Right. Like what? Come on. Let's come up with something more unique and different.

And that's what we just did with Salesforce. And we've done you know, we've done a ton of these with different companies. And I think practices can do the same.

And when it's quirky enough, people remember it. And they also take pride in it. Yeah. That's us. Like the Salesforce Group, one of the ones I remember that they put together and this is, this may or may not work in anyone else's practice, but they, they had one of their statements was we play with our hands free.

Now what does that mean? See, it's working out for you. Go. What does that mean? Oh, let me tell you what it means. And what it meant was this one. One of the leaders had had that as one of their statements, and the whole team adopted it.

But like, you know, you know, when you're tight and you're just trying not to make a mistake and, and you're trying to be too perfect, which maybe in the medical field that is what you want.

I don't know, but but when there are sellers, right, they're selling Salesforce software and when they're too tight and they're going into a client meeting, they're not natural.

They're not creative, they lose their mojo. And so this person's like, hey, we play with our hands free, you know? And if you're going to make a little mistake, it's okay.

Again, probably not right for medical practice. But you know, if you're going to make a mistake, make it early. So you figure out what it is. You can you can now try something else.

You know, maybe it is right. You know, like if you if you're if you're trying to heal somebody. Yeah. Let's figure out what doesn't work quick so that we can get to the next thing.

So that's just one idea of a little statement where now everybody look, we're going to play their hands free. Now the last thing I was saying I know I've been talking a long time.

When you create a culture, you're not trying to create it for the masses. You don't want every medical assistant to go, yes, that's right for me. You want some ago now? I don't want that.

That's not the kind of culture I want. So there's some people that don't want to play with their hands free. They want to be dictated and told what to do every single minute.

But that team doesn't want those people. They can go somewhere else. They want people that want to play with their hands free, that want to be creative and curious.

I can't think of a better term, you know, playing with our hands free. And so but what you said earlier was absolutely true even for medical professionals.

Because yes, you got you got we got to have room for some play here even in practicing medicine because it's still called practicing medicine. Yeah, yeah.

And even even from, from surgeons and stuff like that. A lot of the interaction that we have to have some play here, and we have to focus on the things that we desire in our culture.

So, you know, today, for example, once a month, we have a culture day, I call it, our Grand Rounds day. And we put out the, the six human needs of, of how we communicate with our cells between ourselves, our family and our

patients.

And we had a lot of emotional conversations behind that. But that's part of our culture is that we want to be unapologetically us. But connected at the same time.

## Culture in Action During Crisis

I love that, and that's and that's the way that I've always been. But I also appreciate because I have another friend who's who's in private practice.

It's not like that at all. But that's okay because he has his own set of cultures that's that's allocated to him and that's totally fine. So when he asks me, hey, do you know of any good, you know, medical this is the higher also.

Well, first of all, we are very two very different leaders. Yeah. Yeah. Right. Yeah. What I think is good and may not be necessarily good for you. So I wanted to kind of sort of warn that for a second.

Yeah. But you know, is there like a structured stage that companies or teams go through to ultimately becoming that high performer, or is it just kind of random?

Yeah. So so what I think creating the culture is the foundational stuff. Okay. Culture and strategies start with that. Then. Then you do what I call surround yourself with winners.

And a winner is someone who does, again, just that level nine block. You know, you can draw one out. You can even even evaluate your own team right now.

As long as you have the culture clearly defined, you don't want to make it random. Where you're judging them and they don't even know what you're expecting.

But surrounding yourself with winners is critical. Think of somebody that's not embracing your culture, showing up to work every day. They're literally draining the rest of the team, and probably you too.

So you surround yourself with winners, and then assuming you've got winners now, you come to this, what we call, our third step, which is you mold the people you have into a winning team.

Now, even though they're winners, they might not be a team. Yeah. And and so there's four stages that teams go through. And this is important to know because sometimes you're not in that high performing stage and you feel like you're failing.

You're not. It's just growing through the progressions. So the first stage is the forming stage. And and actually, teams come back to the forming stage quite often because any time you even if you're a high performing team, if you hire some new assistant or, a new doctor to come into the practice, you now have a new team.

It's not the same team. You go, well, that's pretty much just one new person. It's different. Everybody has to get acclimated for it to be a team. So the forming stage is where we're kind of learning the guidelines or learning the culture.

You know, it's like that, you're getting ready to have a new baby, soon. And you know what I use the example is like the first day of school and first grade people are showing up like, okay, what do we do here?

And the teacher is, you know, waiting for him and you're some are like really excited, some are scared, some are clinging to their mom and and everyone's kind of have to learn.

It's just reforming up. We're creating something new and the next stage is actually progress, but it doesn't seem like it. So the next stage after you form up now you storm.

There's like some disagreements, right? You know, why do we have to do it that way though? The other place I worked in did it a completely different way.

And so there's like, you know, bashing up against each other. It doesn't have to be brutal, but it's uncomfortable. Guess what? That is a perfect stage for growth.

And actually, if done right, it can elevate everybody. Think of the best ideas you've ever had. It's probably I know my best ones are not ones that are originated within me.

You know, part of an idea might have originated, but then, you know, I talked with you or I talked to someone else, and you, you you give me an idea that, like, bashes into mine, like, whoa, okay, what's going on here?

And then I have to figure it out. And that's what storming does. That's a second stage. And then the most dangerous stage. So forming, storming, storming doesn't feel too good.

It's like, you know, the kids in, in first grade, you know, they're talking and they, they get lectured to and it's like, whoa! Or they get in trouble, or they have to sit in the corner and.

And so it's a little uncomfortable for the teacher. And for the kids, but it's how we learn and how we grow. And then the third stage, I think is the most dangerous stage is called norming, where you get out of storming.

Yeah, you get comfortable with everybody. You go, hey, hey, we made it. You know, this is high performance, but it's not. It's a trick you just normed out.

You just kind of settle down and there's a whole nother level of performance. It's called the performing stage. But most kids, unfortunately, they think they made it.

They settle in. The leader doesn't push for more or encourage more, and so they just stay there. The best leaders will challenge people not in a mean way, not in a, discouraging way, but in a way that, you know, we've got more in us.

Let's go for even more. And it's funny, I play a little game sometimes with people where I get a little ball and we gather in a circle, and I agree, everybody's got to pass the ball from one person to the next.

You only get to pass it once. This is a good game to play with your team, by the way. You only get to pass it once. You only get to receive it once, and you can't pass to someone standing right, right to the right of you or to the left of you.

So they come up with a little bit of they get together and they talk and say, okay, let's do it this way. And they pass it around and let's say there's ten people and they do it in 12 seconds.

They think they've done a great job. And I go, hey, great job. And sometimes I even create competitions. I'll do two groups and I get who's the fastest and someone will do it in 12 and someone does it ten and the ten are like, yeah, and they're all part of the same team, but they're so proud of themselves.

I go, okay, great job. Hey, now do it. In five seconds. They go, what, five seconds? Come on. We just did it ten. And we worked really hard. And so now what do they do?

They go in there and they storm, you know, because I don't want to let them do storm. They storm. They go and try that. No that won't work. You know, try it this way.

And then eventually what happens? They come up with a way and they get to five seconds. And now they think show world record five seconds. Come on, how can anyone do it any quicker?

The reality is I've had groups to in about one second because I keep pushing them. And that's what you have to do,

is you have to keep breaking the paradigm for people just to get to high performing and stay at high performing.

But that's the ultimate level of of having a team. This is so counterintuitive because you said norming is a dangerous stage where you come into, hey, we made it is normalcy.

I feel like that we're all trying to get to this like this norming stage. And it's very interesting that you're saying that a good leader challenges people enormously.

So like I said, it's to me it's very counterintuitive and maybe it's counterintuitive because that's kind of the way I was taught, you know, within through through medicine.

Yeah. I don't let me let's, let's rewind for a second because you, when you, when you start forming. Yeah. And then you start the growth process and people start butting heads.

You said that could be a very constructive stage. I feel like I fear it because of so many conflicts. Right. Yeah. I how I just kind of walk me through how can that stage be asked to be constructive, to go to further?

Yeah. Now if it's mass conflict that's different. But we're talking about somebody maybe challenging a rule. Okay. Well let's take that example. First of all.

So somebody challenges, you know, rule our challenges is our culture. Yeah. It can be, you know, like if we just go, oh no, it's okay, it's okay. Don't worry about it.

You know, you can, you know, just settle down here. All of a sudden you don't really have a culture, but if it's like, hey, why do I. Why do we have to it this way? Or why do we, why do.

Well, why don't I have to be nice to my team members? Right. You know, something like that. Why do I have to be a good person? I get the job done. Why do I have to do that?

So that's a form of storming and say, well, because it's more than getting the job done here. We can get people to get the job done and there's lots of people can get the job done.

We also want to have a camaraderie. We want to have an energy. We want to be around people we like to work with and and we want to be inspired by team members.

And so a couple things happen there. This person can go, okay. Well, that makes a lot of sense. They may embrace it. They may not. And you might you might have to move them out of the business.

So that storming stage, what happens though? The benefit of that happening is everybody sees the culture being challenged and they see how you reacted to it.

You didn't go, hey, wait a minute, wait a minute. No, no, no, this person doesn't have to be nice because they're really good at what they do. You're going to let them not be nice.

Everyone else be nice. Not them. You have no culture when you do that. So even just that example of the storming created a learning and awareness. It maybe caused a, a tough decision because you might be going, that would be a hard person to lose.

Maybe that role is hard to find, but guess what else is hard? Define losing a bunch of other people because you keep this person on board, you know, and and their behavior just drives people away.

No one wants to be around bad energy. Also, the other thing I would say is just as a position, whatever your culture is, the number one, the number one indicator of whether it's a strong culture or not is your behavior.

Like, do you live up to it? Do you embrace it? That's going to be really important. Yeah, that's that's a hard one for

me because, you know, I think as I, as I developed the company, you know, I realized that I've learned so much about myself and the qualities I have within me, which, you know, before I saw them as a weakness, that they were just growing pains, I think.

And as as physicians, this is what happens with physicians. So. So we come from a very structured setting, elementary school, you know, middle school, high school, college, medical school, residency, fellowship.

And then and then you're done. And all of a sudden we're left with a completely disarray of a lack of structure. And so what happens is a huge population of people who finish end up being in academia, which is continue the same structure.

But not everyone likes their structure. So there's some people like myself who kind of veer off and do their own thing. And the minute we do our own thing, we all of a sudden all the things I value before, which is accelerated through academia, no longer applied because it's a very lonely world.

I'm just looking around my room myself. I'm like, this is such a lonely time to be because I'm outside of the comfort zone. And not only that, there's very few mentoring programs for people to walk.

A lot of people do this, and a lot of the private practice docs are also burnt out as well. That's were that that tinge of, of of hopelessness comes in.

And so whenever we think culture, we think back to like residency and fellowships and stuff like that. And to be honest with you, those cultures weren't very good.

Maybe some were. But majority of the people I talk to where it's like there's a lot of people who are in higher positions who are very like bullying to the lower positions.

We see it with, with charge nurses to, to, regular nurses from department heads to, attendings and down to fellows. And, and it's like, this is, it's like this jumping of, of like brutality that exists.

And we think that's a normal thing. But within our culture. So we have to complete change of mindsets. That makes sense. Yeah it does. And I think that's probably one of the most, dangerous aspects of being a physician.

You're supposed to be this leader, you're supposed to make great decisions. And a lot of people think that comes with, you know, I need to have a big ego.

I need to, always be right. I need to be on this pedestal above everybody else.

## Team Performance Stages and Growth

And number one, it's not that reassuring to or not as reassuring to a patient because they don't really feel your heart as a, as a leader or two. People will maybe do what you want them to do, but they're doing more out of fear.

They're not doing it out of wanting and caring for you. And one of the things, another part of my leading winning teams model is you have to be the CEO of your team.

Now, a lot of people go. CEO, Chief Executive Officer Yeah, I'm that's my title of my practice. But I'm not talking about that. I'm talking about their chief emotional officer, their chief energy officer, their chief engagement officer.

So it's actually CEO to the third power. Yeah. And, you know, you are I have someone on my team that, just ping me today said, hey, can I talk to you over the weekend on a personal matter now, do I want to do it?

Not really. Right. You know, it's my weekend, but am I going to do it? Hell, yeah, I'm going to do it right. This person's got something where they need some help.

I don't know exactly what's happening for them, but I'm going to go in and take their time to do that. And then you just spot like when you come into your practice, you want to be noticing.

I mean, we're healing everybody else. People come in with wounds, people come in with ailing family members or, somebody, you know, treated them poorly in a relationship.

Now, I'm not saying we have to, you know, be there every minute of the day for them, but a kind word or a question and, you know, do you need you need anything, things like that.

As a CEO, just being able to spot through body language, through the way they're talking, who needs to have their story changed, who needs to be picked up a little bit?

These are all things that are really important. Yeah. No. Absolutely. So so speaking of CEO, because, you know, I made the mistake earlier on like just most most physicians do as well that because I'm deficient in this part of whether it's business or management and stuff like that, I'm just going to cover it up by hiring these people, and I'm going to let them do their thing.

I know I realized that was a mistake. And then when I correct that mistake everything's became better. So I feel like there's a lot of things that doctors delegate to outside people and maybe hire into positions.

But then they don't, they don't, they don't act into that CEO role. So what do you think are some things that CEOs or leaders should not delegate? Should not delegate?

Well, I mean, listen, I'm a big proponent of delegation. And when you delegate, though, you want to have somebody that embodies the culture, right, that will, you know, be a kind of a co-CEO or a sub CEO for you.

But there's there's things like, well, if you look at what inspires people to stay engaged, the Gallup did a, did a survey, quite some time ago. And they came up with some reasons why people disengaged.

So and an average company average change, probably average practice. You've got about two people working in the practice that are engaged that are into their work, that are doing their best for every one that is disengaged.

So 2 to 1. Yeah, 2 to 1. Actually let me make sure I'm getting the numbers right. So yeah, 2 to 1 and actually 2 to 1 might be 2 to 1 I think. Oh yeah. Two to the axis.

2 to 1 is the average okay. Keep performing teams 10 to 110 people engage for every one person that's pulling the the team away. Now why do people stay engaged and why do people disengage.

Well one of the one of the things I'll just give you a couple, one of them is is positive feedback. So the average leader doesn't give enough positive feedback or encouragement.

I'd call it feedback or encouragement because sometimes they didn't do anything great. But just like, hey, I know you got this right, come on, you're built for this.

Things like that. The average person, probably the average leader, probably does, maybe 1 to 1. There was actually a study that was done at Company Pacific, where I think they've now been absorbed by UnitedHealth.

But I was working with them and we took the top 10% of leaders in that organization in a big department there. And we we just looked at them versus the bottom 25%.

And we said, what are the differences? And one was in their feedback, the top the bottom leaders were basically 1 to 1. Like for every constructive or negative thing they said, they put out a positive or or you know, just, you know, some sort of positive feedback or encouragement.

And the top leaders, though, were 4 to 1, they would walk in and they would notice someone doing something and

they would not just walk by and go to their office.

They would say something and they would say, hey, great job. How did you pull that off? That was amazing. Or maybe something someone did yesterday. Well, the way you handled that patient that was really afraid that was that could have been a clinic.

What was your strategy there? And by the way, the one thing you want to do whenever you go, positive feedback, whether it's to someone on your team or to your daughters and your case, Chang or anybody is notice what they did say.

Great job. I love the way you did that and then ask them, how did you do that? Why? Why is asking them so powerful? Why do you think, maybe it's open in the question to entice thinking or why?

Yeah, they have to remember how they did it, so they're going to be more likely to do it again. Plus that extra 30s you spent there listening to how they did it just makes that that positive feedback feel so much better to them.

But positive feedback, you should be 4 to 1. Wow, I to be 4 to 1. I don't notice all the great stuff. Hey, some of it's encouragement, but just be focused on going into your practice every day.

And what are you going to do? I'm an introvert. I'm not a real positive person. Well, you better change that. Are you going to lose people? So just find people you know, just connect with them even for two seconds and just kind of light them up a little bit in the day.

Another thing is asking for feedback. As a physician, you're you're used to being the one, you know, telling people what to do. And I'm not saying, you know, you're dealing with a person with a really critical condition.

And you you ask the receptionist, hey, what do you think we should do here? Not that type thing, but you can ask the receptionist, hey, what? What's a better way to set up the the waiting room?

You know, have any ideas on that? I've been thinking, you know, that we might try something different. You know, I had a couple ideas, but what do you think?

Because when you you ask people for their opinion, they're now more body and they're more engaged. And you can find little ways to do that throughout the day.

Those are just a couple of things you can do. I think it's massive. You know, a 4 to 1 that's actually a really good place to to start because that's the next thing I can track myself to.

You know, I do think I, I definitely need to encourage more and I already do, but I think that it just needs to be more consistent basis. And I think, you know, I'm a big believer in tracking a hack.

It's so definitely going to stick to that. 4 to 1 at least. Right from from I don't know if people can track it. Here's what I just tell people to do.

Focus on getting more positives out. You know, we're all going to have our own negatives. Like I don't know what my ratio is. I didn't know, like when my son was growing up and I learned this, I'm like, man, I'm beating the heck out of this dude, right?

Because he was my son's awesome. But he would challenge me on everything and I'm just like, man up on him. And and you know, this is the way we do it, right?

And then and I wasn't noticing any of the great stuff he did. I was just like finding all the things that were irritating me. And I just said, you know, I got to get a lot better.

I got to notice different things. He's doing really well and notice even the fact that, you know, he challenges me.

Hey, I love the fact of challenge me and don't like accept everything.

I don't like it every single time you do it. But I like it sometimes. Wow. Yeah, yeah. So more positive than than negative. So that's at least that gives me an idea in my head who I should be doing.

But you know, let's let's talk about coronavirus for a second. A lot of things have changed since since Covid, a lot of, businesses, we had to pivot. A lot of practitioners, all of a sudden a lot of the things that we learned before no longer apply, right?

And so we had to switch to telemedicine instead of patients coming into the office. We had to close off some of our service lines, because we absolutely have to, because the more elective procedures was is a huge revenue stream for a lot of doctors.

And so how do you keep your team engaged in this sort of time of pivot and crisis, which is kind of chaos everywhere? How do you keep them engaged? Well, a couple things.

One is just the the end goal, like, you know, letting people know why we're why we're going through this, I mean, not why we're going through because of coronavirus, but why we're making these changes and, and the ultimate end goal of where we want to be able to be, where we want to go to.

The other thing I think that's really important is just this is real life. I mean, this is like, you know, people think that I used to think, you know, the fairy tale existence.

You know, you one day you make it, you know, maybe it was, you know, someone thinks one day I graduate from medical school or I opened my practice and then, you know, I don't have to work for anyone else.

And now it's going to be all great. No, no, no, it's going to be messy. You're going to get your hands dirty. I still remember when my my best friend, had a child, before I got married, and, and, so he and his wife, I was visiting them, and I'm still this single guy, you know, 24 years old.

And his wife and I are in this conversation, and she's changing a diaper, and she's changing the diaper. She got some poop on her hand, and. And I'm just, like, in shock, like, you know, does she realize she's got poop on it?

And she's just kind of talking. She's got poop on her hand, and I couldn't believe it. Like you know, shouldn't you be freaking out? You got poop on your hand?

No, I have to. Two kids later, it's like, yeah, I've had poop all over, right? But you life is going to. You're going to get poop on your hands, right? You're gonna.

And no one knows it better than, you know, physicians. But it's messy. It's. And and the messiness is the beauty of it. One of my favorite things I teach people is there's always an advantage.

Well, what was the advantage of Covid happening? And we had to do this and had to do that, you know, hey, happened in my business to 98% of my business.

And the people that worked for me were out around the world getting face to face with people. Guess what? Now it's 100% where? Well, not quite, because I've done a couple live engagements recently, but it's about 98%.

We're on a screen with people and we we're having our best year ever financially.

## Leadership, Feedback, and Delegation

We had to flip it really quick, but I saw that coming in because this is one of my philosophies. I said, there's an advantage here. Like we should have probably changed more of our business to virtual years ago.

Many doctors should have probably embraced telemedicine. Years ago. You were on the cutting edge. You did a lot of these things already. You just let the coronavirus accelerate your change.

But medicine's going to continue to change, you know, and I don't know all the rules and laws and reimbursements and different things. But I know you're doing this summit because medicine will continue to change.

You're trying to help people get ahead of that change. These are the people that are benefiting from being first in line when change happens. And I think that's got to be the way you run your practice, though.

That's the way I run my business. Even though coronavirus showed me I wasn't doing it quick enough. And that's the way that the best people run. Even the big companies, you know, they have a saying that if it ain't broke, break it like break it just on purpose.

Because I tell people you will either disrupt or you will be disrupted. I don't want to be disrupted. I want to be the one disrupting, and I don't need to disrupt other people.

But disrupting my own processes, my own thoughts, my own thinking so I can be on the forefront of improving without needing a kick in the butt to get me to do it.

Yeah. So true. Because, you know, you know, it's crazy to think about last year and what happened and how much trauma I thought I was going to endure.

But, we also had a most profitable year, and I know you did. You did an amazing year. I'm proud of you. You know, even without the without counting the money from the PPE and stuff like that.

And it's because what I learned and that kind of blew my mind. What? I didn't know why I didn't think about this before. It's not about revenue generated.

It's about how much you keep at the end. And what we were able to do was we were able to lean down cutout and trim up the fat. We went from three locations to one location.

Now one location was too big. We're from even to a smaller location. And all of a sudden, you know, our profitability doubled. But yeah, and then our culture became better.

And we have this, this sort of massive bond that came from it. So, you know, I'm very proud to say that my team and I, we really, truly blossomed from this situation, that we're seemingly very, very bad, you know, at the at the very beginning.

And yes, we had a lot of help. And then we had the engagement. We also had engagement of our patients too. And I really have to thank my team for that, because we have such a strong culture and communication connection with the patients as well.

So it's really this massive effort. But you're right, I should have done this years ago. Yeah, yeah, I should trim the fat a year a year ago and I don't know why I didn't.

So even though our team's a little bit smaller, our profitability is is double. But that allows me to be more creative in thinking what's next. And that's what this summit is.

It's all about what is next, right? For example, what coronavirus did is that increase the adaptability of telemedicine in those people age 65 and over dramatically.

So now you have market adoption of technology that wasn't really there before. Now, finally, more than 40% of age over 65. I prefer telemedicine because of the coronavirus.

Yeah. And that's that's that was less than 10% prior to coronavirus I prefer it. I don't want to have to go in an office

and wait. And I'd rather be right here on an appointment.

Yeah. Well time you can't be older than 27, right? You look. Yeah. And so yeah, I think that, I think that that that's the lesson here. Right. And the, the lesson here is that out of challenges comes comes triumph.

And we just have to be resilient to do it. And from a leadership perspective, I mean, it's crazy to think that you were in San Francisco in a gigantic Salesforce building talking to this massive company about exactly what we're talking about right now, but seems so congruent no matter the size of the company. Right?

Yeah, yeah. I mean, in organizations and organization, your practice is a team like any other team. You gotta go, well, we're specific and yeah, yeah, you've got skill sets that are specific, but at the end of the day, you're human beings, you know, that's what you are.

You're human beings. It's human capital that every day has a choice to either come in and do a great job and help humanity and heal patients, or they can come in and kind of, you know, half assed it and, you know, you are you are in charge of that team and you're in charge of who gets on that team.

You're in charge of the culture of that team, and you have a big influence on the level of engagement of that team. You can be one of those practices like yours, and that's why I'm so glad you're doing this, this summit.

Chang, because you really do have a model practice not only in profitability, but just in culture. And the vibe and, and and you, you are the ultimate physician.

You've got a huge heart, you're incredibly smart. And you combine those two things. It's not just head, it's head and heart. And I think the more that physician leaders understand that, embrace both those you can be super smart and still care about human beings and and help uplift them.

You it's going to lead to more profitability and a lot more fun. It's going to be more fun to come into the office every day to practice every day. Tom, thank you for the kind words and really means a lot coming from you.

And, you know, I think, you know, I'm under this this always constant, never ending improvement. And it's something that I truly value. But, but I really want to appreciate, you know, what you're saying your validation. So.

So thank you very much for that. You know what? We what we really need to do, and it's exactly what we did on this talk is really come together across industries and say, what are the most successful attributes of leaders and what really works?

Because in the end, a lot of this is just psychiatry. And psychology. And moving people forward are in different stages, and it seems to be very congruent even across industries.

So we as physician leaders aren't really that we're special born. We're not really that special in terms of uniqueness within our business model. Because I tell you, most of the doctors that I talk to, especially the physician leaders that I talk to, a physician practitioner, say, you know, what my business model is, is, you know, we're at the mercy of the insurance company.

So are roofing contractors, right? We're at the mercy of our of our, of our patients and stuff like that. I'm like, a lot of this is very similar. You know, we have to get, like, outside of our outside of our headquarters, uncomfortable.

## Vulnerability and Final Leadership Lessons

See what's across different industries and bring it together. And that's why we have so many different types of people, you know, on the summit and like, like yourself, Tom.

And so, so let me let me ask you this, this last question before, before we, we could ask this what is the most valuable lesson that you have learned recently that you wish you knew maybe ten years ago?

That's a good question. So just on a personal level. Yeah. And I probably didn't know it ten years ago, but I wasn't doing it. Now, as I get older, I do realize that.

We have these stories of who we are from a lot of us from childhood. You know, like, I'm good at. I'm great at math. I'm not great at this, or I'm an extrovert, not an introvert, by the way.

I'm an introvert, naturally. So a lot of my job is extrovert. Just for those of you thinking that if you're an introvert, you can, you know, communicate. I mean, I learned how to do it.

And and so I think, one of the things that I've learned recently, and maybe it's around leadership, is I've embraced it in the past, but even more now is vulnerability.

And I know as a physician that's probably a little bit scary. Like, I can't be vulnerable like you know, that's weakness. And I've got to be strong. I've got to face all these things and, and and not get too attached to it.

And I'm not talking about getting too attached to it, but I'm talking about going down underneath where you are when you say all these people are burning out, that's because they're trapping all these emotions and not feeling them and not not being human.

And and the body's just not meant to do that. The mind's not meant to do that. And so I'm probably speaking out of turn out of turn because people go, why know more than that, about more than that on that topic than you do.

But it is a passion of mine. So I do a lot of peak performance. And and when people can go down in and and see the, the pattern of the trapped emotion or the old memory, they keep replaying over and over again and let go.

But like as a leader, I was not a good leader when I started. I was actually bad, which is why I discovered, you know, I started discovering like, what does it take to be a great leader?

Because I was leading an organization when I was in my mid 20s and I realized, man, I do not know what the hell I'm doing. Now, here's the good news. If you want to be a better leader, you can be.

You know, I've never been a leader before. I wasn't the captain on my team. I wasn't, you know, I didn't I wasn't the president of my, class in school.

So what? You can be a leader. It's something anybody can learn. You have to have a desire to do it. But here's what I. What? I believe you should have a desire to do it because you've got human beings every day that are showing up in your practice, that are looking to be led.

And to the extent that you upgrade your leadership, you're going to have people. And it's not just what they do in your practice. You're going to have people that you influence a big portion of their life.

Think about how much of their time they spend at work. And so for me, it's a privilege to be a leader. The more vulnerable I become and vulnerable, meaning, hey, I don't know everything.

I don't have to know everything. I can keep learning, you know, just like being okay with that. It's made me a better leader. And so I think I just get better and better at that as I get older and don't have to put up any front or airs or anything like that.

Yeah, I mean, that hits really close to home time because I think the the more vulnerable I get, the the bigger the blossom becomes within my team as well.

And it's very counterintuitive because I come from my, my, my family members are very stoic, don't show any emotion, be very militaristic. Right. And then, when I try the opposite of it, I got a lot of positive feedback.

But from a leadership perspective, I think vulnerability is definitely needed within the physician environment. You

know, physicians actually make terrible patients, like, talk about doctors being actual someone else's patient.

The compliance of that other person telling the doctor is very, very zero. It's almost close to zero. Right. And so I think that we don't we don't necessarily advocate for ourselves a lot.

We feel like we have to hold everything in that we have to bottle it, because that's the way that we were trained in this sort of hierarchy type of training system with the but, you know, I just want to, you know, really, really challenge the people who are listening to this is I want to challenge you to just to be vulnerable, vulnerable with yourself, to be altruistic and also vulnerable with your families.

And if you're vulnerable with your team as well, and see what really happens. And what you might find is that there's a spark that comes with vulnerability that's going to really ignites your chance to create something beautiful.

So thank you, Tom, for for saying I really appreciate that. Fantastic. Yeah. It's been an honor being with you. And, as I mentioned, you know, you are you're such a great friend.

And I'm so excited you're doing this summit. You are a role model. I hope people will take what they learn from all the different speakers, and particularly from watching and listening to you, and they're going to have really successful practices if they do.

God, I hope so. Thank you. So much, Tom, for being on. I'm going to sign off right now. Tom McCarthy, everybody, thank you very much. For.