

WHITE PAPER

Profiling Healthcare in Australia

Some insights into the values
and behaviours of those
working in the Healthcare
industry in Australia.

Peter Berry Consultancy (PBC) was founded by Managing Director Peter Berry in 1990. In the decades since, PBC has grown into a leading provider of human capital consulting services and we are the Australian distributor of Hogan Assessments.

PBC provides evidence based solutions that enable organisations to select the right people, develop key talent, build better leaders and enhance organisational performance. Our team of consultants, organisational psychologists and project managers have a range of capabilities and expertise to deliver innovative solutions that address real business needs. At the heart of everything we do, is 'because people matter'.

Executive Summary

Using data sourced from a combination of values, personality and multi-rater assessments completed between 2016 and 2017 in Australia, this white paper sheds light on how Australian Healthcare workers may differ when compared to workers in other industries, and also when comparing Healthcare Managers and Healthcare Practitioners.

When looking at industry differences, from a values perspective, both those individuals applying to work in or currently working in the Healthcare industry appear to be less likely to be status driven or attentive to commercial and financial matters. They are typically more motivated by work environments that have clear expectations about behaviour and protocols for performance, where high quality outcomes and innovation are paramount. They should also enjoy work that allows them to use data to make decisions, where the latest research and technology are embraced.

From a personality perspective, compared to Healthcare Managers, Healthcare Practitioners are more likely to place high value on producing quality outcomes based on rigorous data driven decision making. In addition, they are more likely to be interpersonally astute and care about the impact of their communication style on others. They are also less interested in pursuing leadership roles than those in management positions.

This research was also cross-validated with data captured from a multi-rater survey that asked colleagues to comment on the behaviours that Healthcare managers and leaders exhibited in the workplace. These findings supported the current literature that leadership is a core area for Healthcare managers to develop, particularly in relation to managing performance, coaching, developing and motivating others. This data also described their high level of professionalism and integrity compared to other managers and leaders.

With further research to validate these initial findings, it appears that unique differences may exist between healthcare workers, which offer different challenges and considerations for those looking to optimise leadership and facility outcomes in the healthcare industry.

Background

There has been much written about the medical profession and the type of personality that is attracted to the profession as well as those who do well in it (Lievens, Cotsier, de Fruyt & De Maeseneer, 2002). Leadership within the healthcare industry has also been the focus of much attention. For example, a study by the Center for Creative Leadership (2010) reported that the need to improve skills in leading employees and work teams was a top priority among senior healthcare leaders. Recognising research efforts to date, there is still opportunity to further explore the impact of new and different leadership styles on tangible and important health outcomes, for both patients, workers and the facilities/organisations that treat them. Within today's increasingly dynamic and complex workplaces, regardless of industry, effective leadership is vital to organisational success (Longenecker, Neubert, & Fink, 2006). By understanding industry based differences, work environments and leadership programs can be optimised to get the most out of leaders and those who report to them. This white paper attempts to explore further the differences between Healthcare workers in Australia, and understand how they may differ depending on what level of role they are performing, specifically those in Management roles compared to those in Practitioner/Technical roles.

This Research

The present study seeks to identify whether meaningful values or personality-based differences exist between those working in the Healthcare industry in any capacity compared to other industries. In addition, review of personality profiles of physicians and allied health professionals and their management colleagues was also of interest. Understanding these differences may help to prioritise development for different role types to ensure that they are performing to their full potential.

Participants

This study drew on two populations of Australian workers within the Healthcare Industry. One sample had completed a series of values and personality assessments while another sample had completed a multi-rater survey as part of a leadership development program. Both samples were collected during 2016 and 2017 and included both public and private health and aged care facilities.

Sample 1 (Values & Personality Assessment)

The first sample (**Sample 1**) who completed the values and personality assessments (N = 938, average age = 38.8 years, ranging between 21 and 58 years) occupied roles that included support and administration, physicians and allied health professionals (referred to as Practitioners/Technicians in this paper), academics, facility management and executives (referred to as Management in this paper).

The gender breakdown by role categories of interest in this research is summarised in **Table 1**.

Table 1.

Sample Breakdown by Role and Gender

	Practitioner / Technician (N=238)	Management (N=342)
Male	33.2%	36.0%
Female	63.9%	62.5%
Not Reported	2.9%	1.5%

Examples of roles included in each group are provided in the **Appendix**.

Sample 2 (Multi-Rater Assessment)

Approximately 8,000 raters (**Sample 2**) completed the multi-rater survey, the Hogan 360 (Peter Berry Consultancy, 2015), on 825 Managers in the Healthcare industry. The Managers who were rated ranged in age from 23 to 73 years, with an average of 44.7 years, and occupied primarily management and executive roles. It is the ratings given by the raters that are reported upon, not the self-ratings of the Managers.

Measures and Statistical Procedure

Sample 1 completed the following measures as part of an assessment of values and personality:

- the Motives, Values, Preferences Inventory (MVPI; Hogan & Hogan, 2010), which provides insight into individuals' core values that motivate and drive their behaviour;
- the Hogan Personality Inventory (HPI; Hogan & Hogan, 2007), which measures day-to-day personality characteristics and provides information about individuals' typical behavioural tendencies and how they are likely to be perceived in the work environment; and
- the Hogan Development Survey (HDS; Hogan & Hogan, 2009), which measures personality when under stress and pressure, and describes individuals' strengths which, when overplayed, can potentially derail performance at work.

Values and personality assessment results were summarised and average percentile scores for each personality scale were calculated from raw score data. A series of independent sample t-tests were carried out to assess for differences between the different groups.

Sample 2 completed the Hogan 360 (Peter Berry Consultancy, 2015). The Hogan 360° is an online multi-rater assessment tool that gathers leadership feedback from a variety of key stakeholder groups. The tool is supported by research that demonstrates its reliability and validity (Peter Berry Consultancy, 2015). Ratees receive 50 item ratings from 1 to 7 from raters classified as either Managers, Peers, Reports or Others. Ratees also rate themselves ("self-ratings"). Raters also select the top strengths and opportunities of the person from a list of pre-determined characteristics based on global research.

Research Findings

Values and Personality (Sample 1)

While no significant differences were found between the groups studied, there were clear patterns in this sample, primarily in terms of values and drivers. A discussion of differences at the industry level is presented first, followed by a breakdown by role for more specific insights.

Motives Values Preferences Inventory

As reflected in **Figure 1**, notable differences were observed between those employed in the Healthcare industry compared to those working in other industries when reviewing their results on the Motives, Values, Preferences Inventory (MVPI).

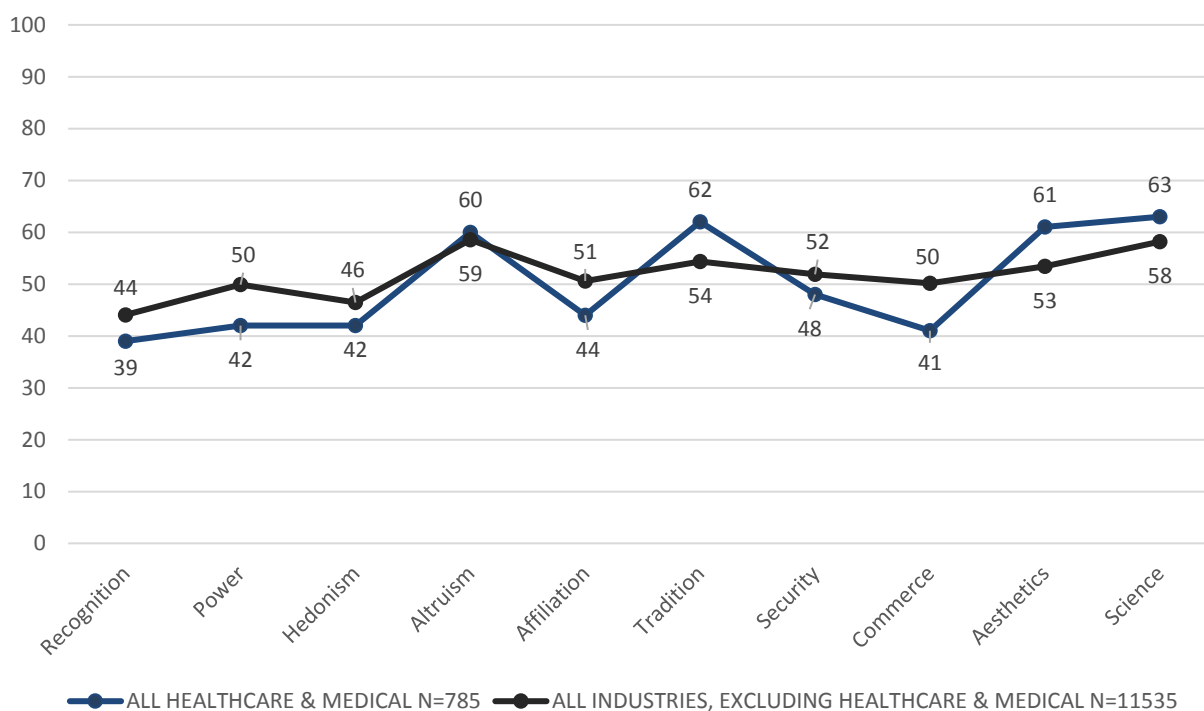


Figure 1. MVPI Percentile Scores of Healthcare employees ($n = 785$) and employees in other industries in Australia ($n = 11,535$).

Compared to all other industries, Healthcare employees scored:

- lower on the status cluster of Recognition, Power and Hedonism
- lower on Affiliation
- lower on Commerce
- higher on Tradition, Aesthetics and Science

This suggests that Healthcare workers are *less likely* to value and be motivated by:

- Opportunities to be recognised and receive credit for their individual contributions;
- Competitive, ambitious and results-oriented environments;
- An informal, lively, and pleasure seeking work culture;
- Frequent teamwork, networking, and building strategic alliances at work; and
- Commercial matters such as budgeting, or financial reward.

They are also *more likely* to value and be motivated by:

- Having clear expectations, protocols for performance and structured work environments;
- Work that allows them to use creativity to solve problems and produce aesthetically pleasing results; and
- Base their decisions on data and research rather than intuition.

As seen in **Figure 2**, notable differences were also observed between those working in Practitioner / Technician roles compared to those working in Management roles.

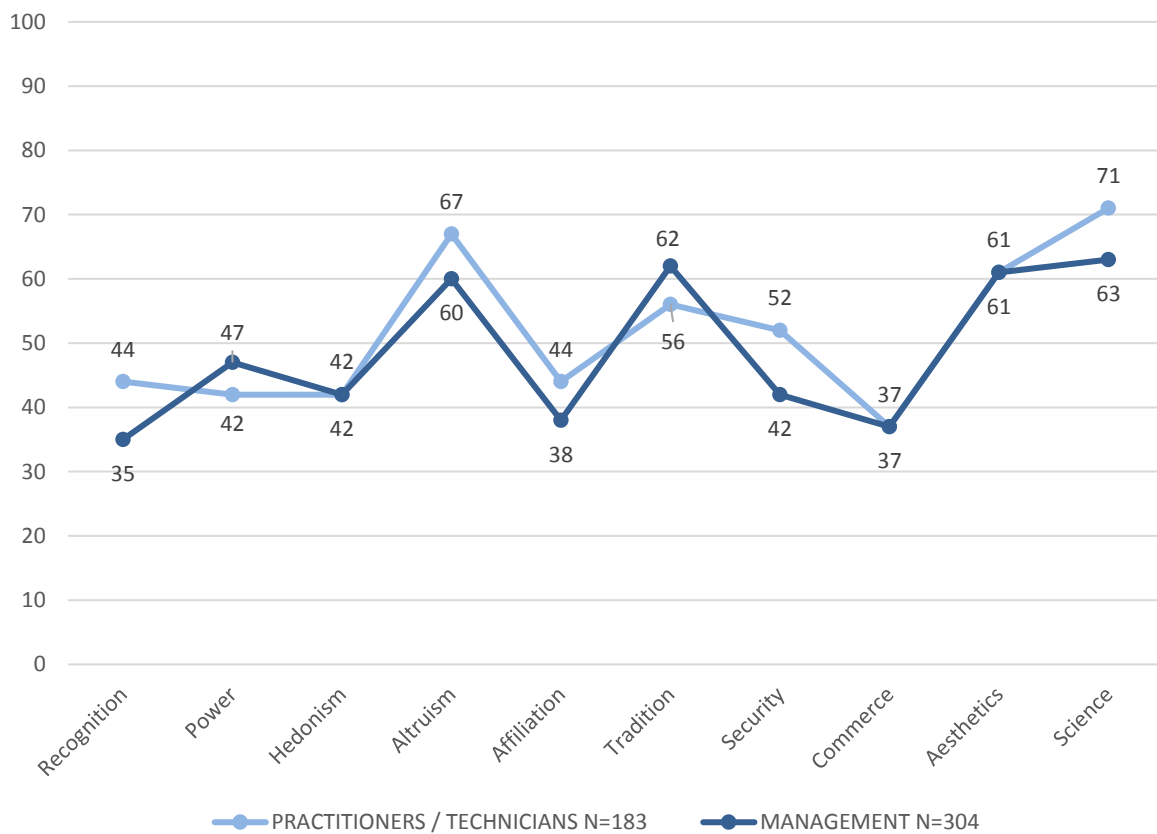


Figure 2. MVPI Percentile Scores of Medical Practitioners and Technicians (n = 183) and Management in the Medical/Healthcare Industry in Australia (n = 304).

The key trends to observe in **Figure 2** are the higher score on Altruism, Security and Science. Practitioners/Technicians working directly with patients and clients are driven by a desire to help others in need, while also practising in a way that avoids and/or manages risk, and using data to support their decisions in relation to patient / client treatment and progress.

Hogan Personality Inventory

Some differences were observed on the Hogan Personality Inventory (HPI) scales between those employed in the Healthcare industry versus those working in other industries. Compared to all other industries, Healthcare employees scored lower on Adjustment and Ambition (see **Figure 3**).

In relation to Adjustment, while Healthcare workers in general tend to be calmer and more even tempered on a daily basis, they are still likely to worry about their mistakes given the impact that this could have on patient outcomes, they work driven by a general level of anxiety, and can be self-critical and hard on themselves if they make a mistake. These traits combined reflect the average overall level of Adjustment exhibited by the sample.

In relation to Ambition, while this industry tends to display a strong sense of identity, self-confidence and a drive to achieve results, they tend to be less interested in performing leadership roles, being responsible for the work and management of others.

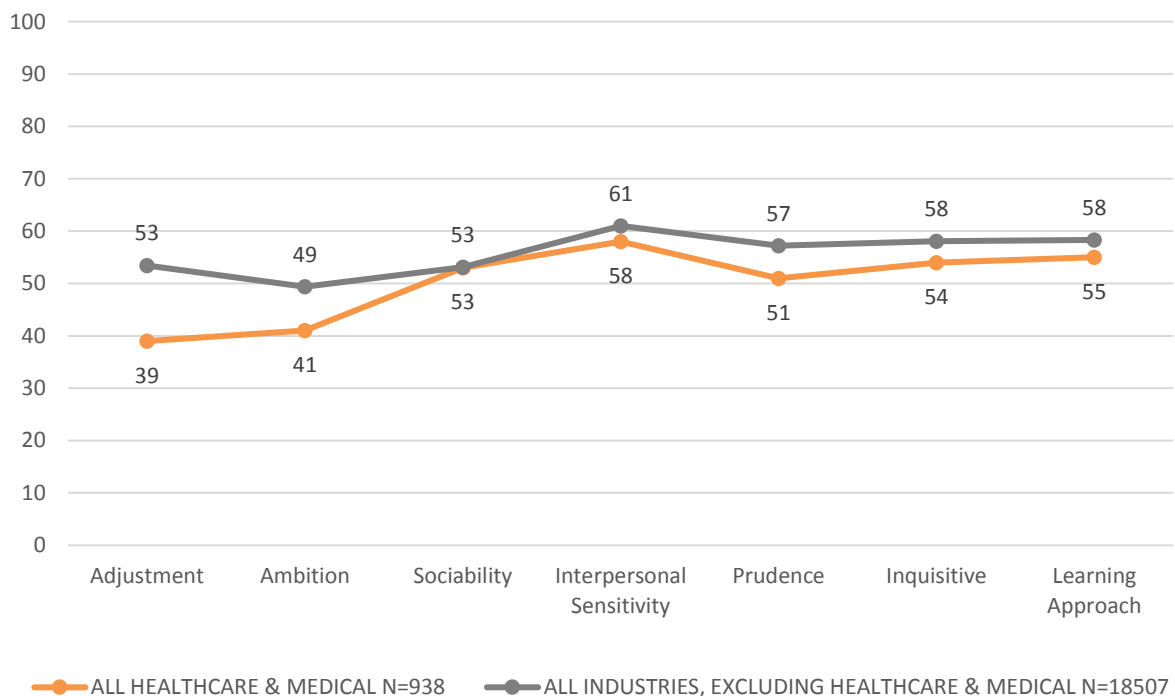


Figure 3. HPI Percentile Scores of Healthcare employees ($n = 938$) and employees in other industries in Australia ($n = 18,507$).

More interesting differences were observed when reviewing the data for Practitioners/Technicians versus Managers (seen in **Figure 4**). Practitioners/Technicians scored higher on all HPI scales with the exception of Ambition. This suggests that, compared to Managers, Practitioners/Technicians tend to be perceived as;

- Slightly calmer under pressure;
- Less leader-like and less inclined to enjoy managing others;
- Slightly more comfortable interacting with a wide range of people (this is also supported by their slightly higher Affiliation drive in the MVPI – **Figure 2**);

- More sensitive and caring towards others (this is also supported by their slightly higher Altruistic nature demonstrated in the MVPI – **Figure 2**). *Managers are notably lower on Interpersonal Sensitivity suggesting that they are inclined to be more direct communicators, ready to address performance or other issues as they are less inclined to be swayed by personal concerns.*
- Slightly more focussed on compliance and risk management (this is also supported by their higher Security needs in the MVPI – **Figure 2**);
- Having a greater affinity for new ideas and creative problem solving; and
- More informed and knowledgeable, staying up to date in their field and applying the latest research and technology to their practice.

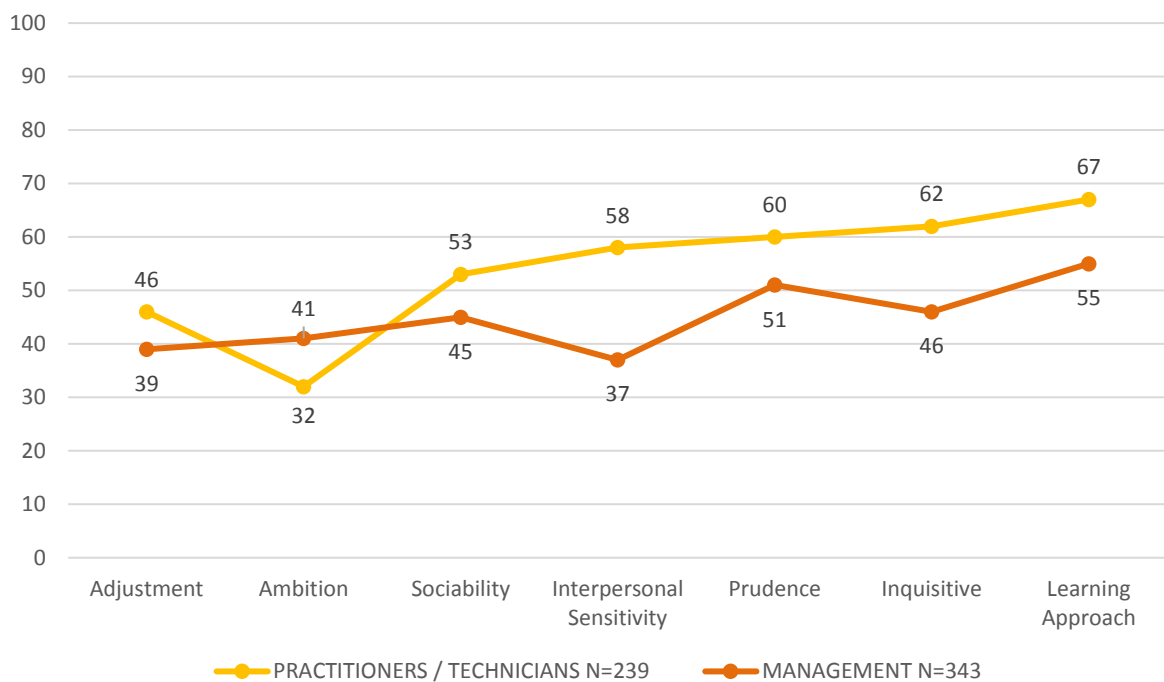


Figure 4. HPI Percentile Scores of Medical Practitioners and Technicians ($n = 239$) and Management in the Medical/Healthcare Industry in Australia ($n = 343$).

Openness to change and innovation are critical for the healthcare system to meet the ongoing and growing needs of the community. Healthcare leadership requires complex systems thinking and an innovation mindset (Weberg, 2012). While Practitioners/Technicians profile as open to more ideas and solving problems using a creative, innovative mindset (high Inquisitive), the Managers/Leaders in the Healthcare industry may need to develop this further or at least maintain this inquisitive nature if originally coming from a Practitioner background.

Hogan Development Survey

While there were no marked variations between those in the Healthcare industry and other industries on the HDS, when looking more closely at Practitioners/Technicians and Managers in the Healthcare industry, there are a number of differences worth discussing. It is clear from **Figure 5** that under pressure, Practitioners/Technicians demonstrate a slightly higher level of caution (Cautious) and risk avoidance (lower Mischievous), notably higher Diligence (having high standards, being perfectionistic and pedantic) and a higher level of conforming, ingratiating, deferential behaviour, being eager to please others (Dutiful). They also exhibit less of the typical behaviours seen in leaders when under stress, such as being higher on confidence and entitlement (Bold), risk taking and manipulation (Bold), distractibility and attention seeking (Colourful) and eccentric and impractical (Imaginative).

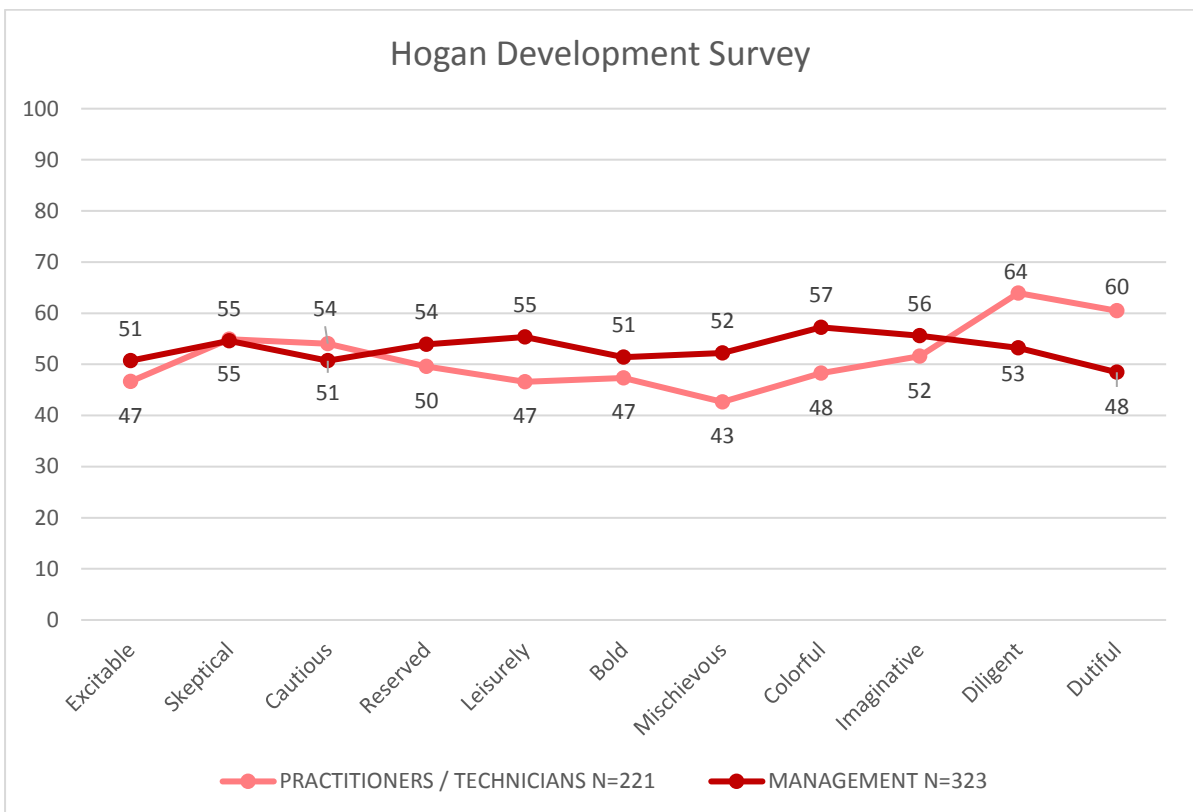


Figure 5. HDS Percentile Scores of Medical Practitioners and Technicians (n = 221) and Management in the Medical/Healthcare Industry in Australia (n = 323).

Hogan 360 (Sample 2)

While the Healthcare sample who completed the multi-rater assessment (Hogan 360) tended to perform better than most industries combined, specifically they achieved their highest ratings by others on the following items in decreasing order:

1. Hardworking with a good work ethic
2. Behaves to very high ethical standards
3. Has the passion to make a difference
4. Has the right knowledge and ability to be very effective
5. Completes work in a professional manner

The sample's lowest scoring items were:

1. Recognises and challenges poor performance in others
2. Effective in coaching and developing others

When asked about their greatest strengths, the following strengths were ranked the most highly:

1. Has a professional approach
2. Is action-oriented and gets things done
3. Works hard with a strong work ethic
4. Is customer focused and good with clients
5. Is steady and calm under pressure.

With the exception of "works hard with a strong work ethic", the Healthcare managers and leaders in this sample exceeded the global ranking of all other industries.

When asked about the greatest opportunities for improvement, the following were ranked the most highly:

1. Motivate others and improve morale
2. Show leadership on issues
3. Stop taking on too much and spreading yourself too thin
4. Delegate more

Opportunities 1 and 2 appeared to be more of an issue for Healthcare managers and leaders than those working in other industries. However, opportunities 3 and 4 were aligned with the greatest opportunities for all managers and leaders to improve.

Implications

The findings outlined in this white paper provide some interesting insights for those entering the healthcare industry as a practitioner or in a management capacity. When viewed from three different perspectives: core values and drivers, day-to-day work personality, and personality under stress and pressure, it can be observed that those applying to work in or currently working in the industry have similar values. When looking at industry differences, healthcare workers tend to lack a need for status and may appear to be less driven to lead others than those in other industries regardless of level of role. Healthcare workers may appear to be more focussed on applying rigour and creative problem solving in both their research and practice, with very little interest in the financial implications of their work compared to other industries.

When considering role differences, Practitioners/Technicians tend to be more focussed on achieving results through careful, data driven decision making while at the same time ensuring that they are sensitive to the needs of their patients/clients. They may tend to worry about making mistakes more than others, and aim to minimise risk wherever possible. This is exacerbated under pressure when others are likely to see an increase in attention to details, protocols and quality outcomes. When moving into more senior leadership roles, overseeing other practitioners, the temptation to continue behaving in a way that led to success as an individual contributor (although usually working in teams of varying sizes) may impede successful leadership. This is particularly informative for those practitioners who are promoted into senior leadership roles after having practised in their area of specialty for a number of years.

Combining the personality research at the Management level with the trends observed in the multi-rater data, it does appear that the lower Adjustment, Sociability and Interpersonal Sensitivity may have an impact on their propensity to coach and develop others, as well as motivate and engage others. The success of the leaders described in this study to date would be through their high level of capability, professionalism, ethics and client focus. Their opportunities would be leveraged by delegating more to free themselves up to coach and mentor others, sharing their knowledge and experience. There is also extensive research into how leadership within the healthcare industry requires a different approach to traditional leadership models (Gunderman, 2009; Hartley & Benington, 2010; Weber, 2012). "Healthcare leaders must understand the value and critical importance of delivering an emotionally and behaviorally intelligent style of leadership to ensure that their staff feel empowered and supported..." (p.245, Delmatoff & Lazarus, 2014).

While this white paper provides some initial insights into the values, personality and behaviours of those working in the Healthcare industry in Australia, further research is required to replicate these findings to determine if these differences are statistically meaningful and generalisable. The profile of Healthcare leaders can then be aligned with and developed in line with contemporary Healthcare leadership frameworks (Hartley & Benington, 2010).

References

- Center for Creative Leadership. (2010, June). Addressing the leadership gap in healthcare. Retrieved from <http://www.ccl.org/leadership/pdf/research/addressingleadershipGapHealthcare.pdf> 01/01/2018.
- Delmatoff, J. & Lazarus, I. R. (2014). The Most Effective Style of Leadership for the New Landscape of Healthcare. *Journal of Healthcare Management*, 59(4).
- Gunderman, R. B. (2009). *Leadership in Healthcare*. Springer-Verlag: London, UK.
- Hartley, J., & Benington, J. (2010). *Leadership for Healthcare*. The Policy Press: UK.
- Hogan, R., & Hogan, J. (2007). *Hogan Personality Inventory Manual*. Tulsa, OK: Hogan Assessment Systems.
- Hogan, R., & Hogan, J. (2009). *Hogan Development Survey Manual*. Tulsa, OK: Hogan Assessment Systems.
- Hogan, R., & Hogan, J. (2010). *Motives, Values, Preferences Inventory Manual*. Tulsa, OK: Hogan Assessment Systems.
- Lievens, F., Cotsier, P., De Fruyt, F., & De Maeseneer, J. (2002). Medical students' personality characteristics and academic performance: a five-factor model perspective. *Medical Education*, 36, pp.1050–1056.
- Longenecker, C. O., Neubert, M. J., & Fink, L. S. (2006). Causes and consequences of managerial failure in rapidly changing organizations. *Business Horizons*, 50, 145-155.
- Peter Berry Consultancy Pty Ltd & Hogan Assessment Systems Inc. (2015). *Hogan 360° Technical Manual (1st Edition)*. Sydney, Australia: Peter Berry Consultancy.
- Weberg, D. (2012). Complexity Leadership. A Healthcare Imperative. *Nursing Forum*, 47(4), pp.268-277.

Appendix

Practitioner/Technician Roles:

Anaesthetist	MRI Radiographer
Associate Professor	Musculoskeletal Physiotherapist
Chief Medical Imaging Technologist	Occupational Rehabilitation Specialist
Chief Medical Officer	Occupational Therapist
Chief of Surgery	Orthoptist
Chief Pharmacist	Paramedic
Chief Radiographer	Pathologist
Clinical Advisor	Pharmacist
Clinical Nurse	Physician
Clinical Psychologist	Physiotherapist
Clinical Trials Fellow	Podiatrist
Colorectal Surgeon	Postgraduate fellow, Cardiology
Consultant Physician	Principal Medical Scientist
Dental Technician	Principal Psychologist
Dermatology Registrar	Professor of Medical Genetics and Director of
Dermatology Research Fellow	Molecular Medicine
Doctor	Professor of Surgery
Emergency Nutrition Specialist	Prosthodontist
Exercise Physiologist	Radiographer
General Physician	Registered Nurse
General Practitioner	Registered Nurse / Midwife
Health Psychologist	Registered Psychologist
Hospital Medical Officer	Registrar
House Medical Officer (Junior Doctor)	Rehabilitation Case Manager/ Psychologist
Infection Control Consultant	Research Fellow
Injury Management Consultant	Senior Clinician
Long Stay Clinical Practice Consultant	Senior Dental Nurse
Medical Doctor	Senior Mental Health Clinician
Medical Officer	Senior Pharmacist
Medical Oncologist	Senior Physiotherapist
Medical Practitioner	Senior Rehabilitation Consultant
Medical Registrar	Speech Pathologist
Medical Resident	Sport and Exercise Medicine Physician
Mental Health Clinician	Surgical Registrar

Management Roles:

Admissions Manager	Clinical Operations Manager
Area Manager	Clinical Project Manager
Assistant Director	Clinical Services Manager
Associate Director	Community Health Manager
Business and Corporate Development Manager	Contracts Manager
Centre Manager	Deputy Director
Chief Executive Officer	Deputy State Director
Chief Information Officer	Director of Allied Health
Chief Operating Officer	Director of Clinical Governance and Quality
Chief Operations Manager	Director of Clinical Services
Clinical Group Manager	Director of Intensive Care Services
Clinical Manager	Director of Medical Services

Director of Anaesthesia	Head of Indirect Products & Services
Director of Care	Head of Marketing
Director of Clinical Operations	Head of Physiotherapy
Director of Emergency Medicine Training	Head of Portfolio Management Office
Director of General Medicine	Head of Product Marketing
Director of Nursing	Health and Safety Manager
Director of Nursing and Midwifery	Health Program Leader
Director of Operations	Hospital Flow Manager
Director of Policy	Hotel Services Manager
Director of Research	Human Resources Director
Director of Organisational Development	Manager, Acute Systems Service Improvement
Director of Workplace Health & Safety	Manager, Asset Strategy
Director of Workplace Relations	Manager, Clinical Engagement & Strategy
Director of Cardiac & Thoracic Surgery	Manager, Clinical Safety and Quality
Director of Communications and Engagement	Manager, Finance
Director of Human Resources Operations	Manager, Human Resources
Director of Nursing Research	Manager, Organisational Development
Director of Safety and Quality	Manager, People & Change
Divisional Director	Manager, Regional NSW & ACT
Executive Care Manager	Manager, Strategic and Regulatory Policy
Executive Chairman	Manager, Workforce Planning
Executive Director	Managing Director
Executive Director of Finance	Maternity Services Manager
Executive Director of Medical Services	Midwife Unit Manager
Executive Director of Nursing	National Manager
Executive Director of Nursing & Midwifery	National Operations Centre Manager
Executive Director of Operations	Network Director, Cancer Services and Medical
Executive Director of Research	Oncology
Executive General Manager	Nursing Director Emergency Services
Executive Manager	Operations Manager
Executive Vice President, Asia Pacific	Outpatient Nursing Director
Facility Manager	Payroll Manager
General Manager, Business Development	Perioperative Services Manager
General Manager, Corporate Services/CFO	Practice Development Manager
General Manager, Human Capital	Practice Manager
General Manager, Marketing	Production Manager
General Manager, Mental Health	Program / Facilities Manager
General Manager, Quality	Program Director
General Manager, Relationships	Program Manager
General Manager, Residential	Project Manager
Group Clinical Governance Manager	Regional Manager
Group Manager Volunteer Services	Residential Manager
Head of Clinical Governance	Senior Manager
Head of Communications and Marketing	Service Delivery Manager
Head of Department	Service Director
Head of General Medicine	Site Manager
Head of Implementation	Village Manager

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