EVALUATION OF THE USE OF SOFT SKILLS BY DEPARTMENT HEADS

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Successful management cannot take place without soft skills. The study was aimed to assess the frequency of using soft skills by heads of clinical departments based on feedback from physicians working at the departments. For that an online survey of 433 physicians was conducted with the use of the questionnaire taken from the 360 Sample Competencies Guide. The questionnaire included 20 statements divided into five items: self-awareness, drive for results, leadership, communication, teamwork. The respondents were given five response options per statement: from "always" to "never". The clue referred the assessed individual to one of five groups based on the frequency of using soft skills: leaders, key management, typical management, underachievers, outsiders. Nonparametric methods of analysis were used for data processing. Based on the survey data, 8.6% of assessed individuals joined the group of leaders, while 15.8% were referred to the group of key management, 23.4% to the group of typical management, 30.3% to the group of underachievers, and 21.9% to the group of outsiders. The scores of items correlated with each other (0.973 $\leq R \geq$ 0.967; p < 0.001). The respondents' age, years of service and gender (p > 0.05), as well as the assessed individuals' gender (p > 0.05) provided no significant differences between the scores. The scores obtained for "communication", "teamwork", emotional control, setting challenging goals, and prioritizing work were lower in the hospital-based physicians than in those who worked in outpatient settings (p < 0.05). The questionnaire can be recommended as a feedback tool. Soft skills of the department heads require further development. Soft skills that belong to the items "drive for results", "leadership", and "self-awareness" are worst affected.

Keywords: heads of clinical departments, soft skills, feedback, staff evaluation

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ОЦЕНКА ПРИМЕНЕНИЯ ГИБКИХ НАВЫКОВ ЗАВЕДУЮЩИМИ ОТДЕЛЕНИЯМИ

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Успешное управление невозможно в отсутствии гибких навыков. Целью работы было оценить частоту применения гибких навыков заведующими отделениями на основании обратной связи от врачей отделений. Для этого провели заочный опрос 433 врачей по анкете из руководства «360 Sample Competencies». В анкете 20 утверждений, разбитых на пять блоков: самоконтроль и критичность к своим действиям, достижение результата, лидерство, общение, командная работа. Все утверждения имеют пять вариантов ответа от «всегда» до «никогда». Ключ расшифровки относит оцениваемого в зависимости от частоты использования гибких навыков к одной из пяти групп: лидеры, ведущие, типичные, отстающие, аутсайдеры. Для обработки результатов применили непараметрические методы анализа. В результате опроса в группу лидеров вошли 8,6% оцениваемых, в группу ведущих — 15,8%, в группу типичных — 23,4%, в группу отстающих — 30,3%, в группу аутсайдеров — 21,9%. Обнаружена корреляция оценок по блокам (0,973 $\leq R \geq 0,967$; p < 0,001). Возраст, стаж и пол респондентов (p > 0,05), а также пол оцениваемого (p > 0,05) не дают значимой разницы оценок. Оценки «общения», «командной работы», контроля эмоций, постановки сложных целей, расстановки приоритетов ниже у врачей стационаров, чем врачей поликлиник (p < 0,05). Опросник можно рекомендовать как инструмент обратной связи; гибкие навыки заведующих отделениями нуждаются в развитии и сильнее страдают гибкие навыки в сферах «достижение результата», «лидерство» и «самоконтроль и критичность к своим действиям».

Ключевые слова: заведующие отделениями, гибкие навыки, обратная связь, оценка персонала

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Managing structural units is the responsibility of the department heads [1]. Successful management cannot take place without soft skills, which include communication skills, interpersonal skills, organizational skills, and leadership qualities [2]. It is clear that all healthcare professionals must, for example, control their emotions when interacting with patients. However, heads of clinical departments not only interact with patients and their family members, colleagues, subordinates, seniors, supervisors and experts, but are often obliged to play a role of dampener in conflicts between parties.

In recent years the term "soft skills" has become more widely used to cover various qualities, features, values, and traits [3].

Soft skills complement hard skills, increase productivity of employees in any field, including healthcare [4], such skills are necessary for personal growth [5]. Soft skills improve self-confidence, social competence and compassion, optimism, and provide energy for personal and professional success [6].

Healthcare professionals, who have been trained to improve empathy skills, show better communication with patients [7–10].

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Those, who have improved their communication skills, are better at helping patients to overcome fear of therapy [11]. Identification and prioritization of interpersonal skills improve the quality of work in physicians and healthcare managers [2, 12].

Soft skills or social skills, which are related to personality traits [13] and lifestyle, could be improved by appropriate training [14–16]. Unfortunately, soft skills are poorly taught in the traditional system of medical education [17–19] and are acquired through trial and error [20].

The Russian Scientific Electronic Library elibrary.ru finds a total of 279 scientific papers published in 2017–2022 by keywords "soft skills". Two of those are about the development of soft skills in physicians and students of medical schools [21, 22]. No studies of soft skills in heads of clinical departments or heads of medical institutions have been found in elibrary.

The importance of soft skills for heads of clinical departments and the lack of such studies in the national database have defined the aim of research: to assess the use of soft skills by the department heads based on feedback from physicians working at the departments.

METHODS

The study involved an online (e-mail) survey of physicians, who received supplementary professional education at the Academy of Postgraduate Education of Federal Scientific and Clinical Center of Specialized Types of Medical Care of FMBA. The survey was conducted with the use of the questionnaire taken from the 360 Sample Competencies Quickstart Guide [23]. The questionnaire includes five items: self-awareness ($N_{\rm P}$ 1–4), drive for results ($N_{\rm P}$ 5–8), leadership ($N_{\rm P}$ 9–12), communication ($N_{\rm P}$ 13–16), teamwork ($N_{\rm P}$ 17–20). The total number of statements is 20. The response options are the same for all statements: always / often / in half of the cases / rarely / never.

The questionnaire was translated into Russian by two professional translators working independently of each other. They performed harmonization of the direct translations and did the reverse translation. The basic version of the questionnaire was tested on a focus group of 14 people. We made sure that the translated items had the original meaning during the face-to-face oral interview. Internal consistency of the questionnaire met the current requirements; Cronbach's alpha (α) was 0.947. Test-retest reliability was tested 74 days later, significance of the intraclass correlation coefficient was <0.001. Internal consistency of the questionnaire together with the test-retest reliability were tested on the group of 107 people that included physicians (median age 48 years, 39 males (36.4%)). Among the respondents, 68 people (63.6%) worked in hospital settings.

According to the available clue, the assessed individuals can be divided into five groups: leaders (those who "always" demonstrate the skill), key management (those who "often" demonstrate the skill), typical management (those who demonstrate the skill in "half of the cases"), underachievers

(those who demonstrate the skill "rarely"), outsiders (those who "never" demonstrate the skill).

Characteristics of respondents

A total number of valid questionnaires to be assessed was 433, which corresponded to the sample for the study with improved accuracy to be conducted by the method proposed by K.A. Otdelnova [24]. Characteristics of the respondents are provided in Table 1.

The respondents were also asked to specify gender of the assessed department head. There were 250 men (57.7%) and 183 women (42.3%) among the surveyed people. The characteristics were selected based on the results of third-party and our own research on the impact of the respondent's age, years of service, gender, workload, as well as the surveyed individual's gender on the feedback results [25–27].

Statistical processing of the results was performed with the SPSS software, ver. 23 (IBM Company; USA). Since the distribution of the values of age, years of service, scores per item or statement was significantly different from normal, the median was used together with nonparametric methods of analysis. The differences in median values were assessed using the median test for two independent samples and the Wilcoxon test for dependent samples. Spearman rank correlation was used to define the correlation of scores with age and years of service. Frequency analysis was also performed.

RESULTS

The survey of physicians showed that the majority of the department heads not necessarily used soft skills that belonged to the items "self-awareness", "drive for results", "leadership", "communication", "teamwork". Figure presents the total number of the department heads divided into five groups based on the frequency of using soft skills and the list of statements in the following way: 8,660 assessments = 20 statements multiplied by 433 assessed heads of clinical departments.

The group of leaders who always use distinct soft skills constitutes 8.6% in the assessment structure; key management constitute 15.8%, typical management account for 23.4%, underachievers constitute 30.3%, and outsiders who never use their soft skills account for 21.9%.

The percentage of the department heads who always demonstrate certain soft skills does not exceed 10% (Table 2). Up to 20% of the department heads often use various soft skills, up to 33.9% use soft skills in half of the cases, up to 38.3% use soft skills rarely. Up to 35.8% of the assessed individuals have never used soft skills.

The maximum positive score for each statement was 5.

The median score for the "self-awareness" item was 3.50, while the scores for individual statements of the item did not exceed 3.68. In the first item, statement of the department head controlling his/her emotions was assigned the lowest

Table 1. Characteristics of respondents

Characteristics	Number, abs. (%)	Median age (years)	Median years of service	
All respondents	433	48	23	
Women	294 (67.9)	48	22.5	
Men	139 (32.1)	48	23	
Worked in inpatient settings	276 (63.7)	49	24	
Worked in outpatient settings	157 (36.3)	45	20	

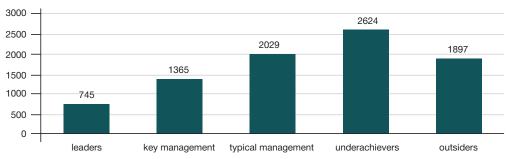


Fig. Size of groups for the entire list of statements

score. The median scores for the item (p=307) and individual statements were the same in the respondents of both genders (0.929 $\leq p \geq$ 0.211), and these for the item (p=0.256) and individual statements were the same in assessed individuals of both genders (0.928 $\leq p \geq$ 0.150). The median scores for item 2 (p=0.051), statements 2 (awareness of how his/her actions and decisions affect others) and 4 (seeking feedback from others) were the same in the respondents working in both hospital and outpatient settings (0.425 $\leq p \geq$ 0.258). The median scores for statements 1 (emotional control) and 3 (learning from mistakes) were higher in the respondents who worked in outpatient settings (p=0.029; p=0.047). No correlations of the scores for the "self-awareness" item and individual statements of the item with age or years of service were found (0.355 $\leq p \geq$ 0.098).

The median score for the item "drive for results" was 3.75, the scores for individual statements of the item did not exceed 3.66. Statement 6 of the item (helping others to achieve their objectives) was assigned the lowest score. The respondent's $(0.408 \le p \ge 0.083)$ and assessed individual's gender $(1.000 \le p \ge 0.216)$ had no effect on the scores for the item (p = 0.408; p = 0.897) and individual statements of the item. Physicians who worked in the hospital settings gave the department heads a lower rating for items 5 (setting challenging goals; p = 0.001) and 7 (prioritization; p = 0.009) than those working in outpatient settings. No significant differences in the scores for the entire item (p = 0.230), statements 6 (helping others to achieve their objectives; p = 0.230) and 8 (achieving objectives even when faced with obstacles and challenges; p = 0.075) between the hospital-based physicians and physicians working in outpatient settings were found. The respondents' age and gender had no impact on their scores (0.364 $\leq p \geq$ 0.083) for this item.

The median score for the "leadership" item was 3.50. Among all statements of the item, statement 10 (taking into account team members' ideas and opinions) was assigned the lowest score. The scores for the item (p=0.574) and individual statements of the item were the same in the respondents of both genders (0.630 $\leq p \geq 0.400$). The assessed individual's gender also had no effect on the score (item, p=0.908; statements, 0.908 $\leq p \geq 0.598$). The respondents who worked in the hospital settings scored statement 9 (translating strategy; p=0.009) lower than physicians working in outpatient settings. No differences in the scores for the entire item (p=0.309) and other statements between the respondents working in the inpatient and outpatient settings were found (0.309 $\leq p \geq 0.127$). Age and gender had no impact on the scores (0.270 $\leq p \geq 0.180$).

The median score for the item "communication" was 4.0. Among all statements of the item, statement 14 (tailoring communication to the needs of the audience) was assigned the lowest score. Men and women scored statement 14 different (p = 0.035), however, the scores for the entire item (p = 0.124) and other statement s (0.452 $\leq p \geq 0.082$) were the same.

Male and female heads of clinical departments were rated the same based on the entire item ($\rho=0.111$) and individual statements (0.752 $\leq \rho \geq$ 0.106). The hospital-based physicians gave the department heads a lower rating for the entire item ($\rho=0.003$) and individual statements of the item (0.033 $\leq \rho \geq$ 0.002). No differences in the "communication" scores between the respondents of various age and years of service were found (0.174 $\leq \rho \geq$ 0.064).

The "teamwork" item had a median score of 4.0. The department heads' effective working in a team was assigned the lowest score. The respondents of both genders rated the entire item (p = 0.556) and individual statements ($0.556 \le p \ge$ 0.167) the same. "Teamwork" of the department heads of both genders was rated the same by the respondents based both on the entire item (p = 0.556) and individual statements $(0.556 \le p \ge 0.167)$. Female heads of clinical departments were rated the same as male department heads based on the entire item (p = 0.224) and individual statements (0.559 $\leq p \geq$ 0.106). The hospital-based physicians gave their department heads a lower rating for the "teamwork" item (p = 0.018) and individual statements of the item (0.018 $\leq p \geq$ 0.002) than physicians who worked in outpatient settings. Age and years of service had no effect on the scores (0.167 $\leq p \geq$ 0.059) of the department heads' teamwork.

The "self-awareness" item was rated by the respondents the same as the "leadership" item (p=0.884). However, the scores of the "self-awareness" item and items "drive for results" (p<0.001), "communication" (p<0.001) and "teamwork" (p<0.001) were different. The scores of the item "drive for results" were significantly different from the scores of other items (p<0.001). The scores of the items "leadership" differed from the scores of the items "communication" and "teamwork" (p<0.001). The scores of the items "communication" and "teamwork" were different (p<0.001). Strong positive correlations between all items were found ($0.973 \le R \ge 0.967$; p<0.001).

DISCUSSION

The survey showed that the majority of the assessed department heads had soft skills in the areas of "self-awareness", "drive for results", "leadership", "communication" and "teamwork", and showed those during work. However, most of the department heads, 53.7% ($30.3 \pm 23.4\%$), use these skills in half of the cases or more rarely and could be therefore assigned to the group of typical management or underachievers. Only 24.4% ($15.8\% \pm 8.6\%$) use their soft skills often or always and are therefore assigned to the group of leaders or key management. Outsiders occupy the second place (21.9%). We would like to point out that the group of outsiders includes heads of clinical departments, who "never" use certain soft skills.

In our opinion, strong significant positive correlations between the scores of different items are the important finding.

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Table 2. Results of the survey of physicians about the department heads

	Answers $\pm m_p$ (%)					
Statements	Always	Often	In half of the cases	Rarely	Never	Median (years)
Item 1. Self-awareness						3.5
Controls his/her emotions, even in high-pressure situations	9.0 ± 0.458	18.7 ± 0.433	27.9 ± 0.408	24.9 ± 0.416	19.4 ± 0.431	3.31
Demonstrates an awareness of how his/her actions and decisions affect others	2.8 ± 0.474	17.6 ± 0.436	33.9 ± 0.391	25.9 ± 0.414	19.9 ± 0.430	3.42
3. Treats mistakes and setbacks as learning opportunities	6.7 ± 0.464	14.8 ± 0.444	26.8 ± 0.411	30.5 ± 0.401	21.2 ± 0.427	3.53
4. Actively seeks feedback from others on his/her performance	6.5 ± 0.465	17.8 ± 0.436	15.2 ± 0.443	38.1 ± 0.378	22.4 ± 0.423	3.68
Item 2. Drive for results						3.75
5. Sets challenging goals for him/herself	7.4 ± 0.462	12.7 ± 0.449	22.6 ± 0.423	33.7 ± 0.391	23.6 ± 0.420	3.66
6. Helps others achieve their objectives	9.9 ± 0.456	20.6 ± 0.428	30.3 ± 0.401	19.4 ± 0.431	19.9 ± 0.430	3.18
7. Prioritizes his/her work based on the needs of the organization and its customers	8.8 ± 0.459	15.7 ± 0.441	22.6 ± 0.423	30.3 ± 0.401	22.6 ± 0.423	3.54
Achieves his/her objectives even when faced with obstacles and challenges	9.5 ± 0.457	16.9 ± 0.438	21.2 ± 0.427	33.0 ± 0.393	19.4 ± 0.431	3.48
Item 3. Leadership						3.5
Translates the organization strategy into concrete actions/plans	8.8 ± 0.459	16.4 ± 0.439	24.0 ± 0.419	29.3 ± 0.404	21.5 ± 0.426	3.48
10. Takes team members' ideas and opinions into account when making decisions	8.1 ± 0.461	13.2 ± 0.448	31.9 ± 0.397	26.6 ± 0.412	20.3 ± 0.429	3.44
11. Helps team members resolve work-related problems	8.1 ± 0.461	12.5 ± 0.450	30.9 ± 0.399	26.3 ± 0.413	22.2 ± 0.424	3.49
12. Holds team members accountable for achieving their objectives	7.4 ± 0.462	11.8 ± 0.451	27.0 ± 0.411	34.4 ± 0.389	19.4 ± 0.431	3.56
Item 4. Communication						4
13. Actively listens to others	8.5 ± 0.460	14.1 ± 0.445	21.5 ± 0.426	33.9 ± 0.391	21.9 ± 0.425	3.6
14. Tailors his/her communication to the needs of the audience	9.5 ± 0.457	15.0 ± 0.443	18.7 ± 0.433	36.5 ± 0.383	20.3 ± 0.429	3.59
15. Communicates clearly and concisely	7.9 ± 0.461	12.9 ± 0.449	16.4 ± 0.439	38.1 ± 0.378	24.7 ± 0.417	3.77
16. Conveys credibility and expertise when he / she communicates with others	8.1 ± 0.461	11.8 ± 0.451	23.8 ± 0.420	32.1 ± 0.396	24.2 ± 0.418	3.65
Item 5. Teamwork						4
17. Works effectively in a team	9.5 ± 0.457	14.3 ± 0.445	18.7 ± 0.433	35.1 ± 0.387	22.4 ± 0.423	3.63
18. Gives constructive and helpful feedback to others	7.9 ± 0.461	13.6 ± 0.447	14.5 ± 0.444	38.3 ± 0.377	25.6 ± 0.415	3.8
19. Treats others with respect	9.7 ± 0.457	14.8 ± 0.444	18.0 ± 0.435	33.3 ± 0.392	24.2 ± 0.418	3.64
20. Values and respects differences among team members	5.3 ± 0.468	9.5 ± 0.457	22.4 ± 0.423	27.0 ± 0.411	35.8 ± 0.385	3.97

Taking into account the fact that soft skills in various areas are uneven [5], the correlation identified proves that each group consists mainly of the same heads of clinical departments, i.e. those, who "always demonstrate self-awareness", always or often use their soft skills in such areas as drive for results, leadership, communication, teamwork. On the contrary, heads of clinical departments, who have been assessed by the respondents as "never using self-awareness skills", join the group of underachievers or outsiders based on the scores of other items.

The lack of correlation of the scores with the respondents' age and years of service, as well as with the respondents' and assessed individuals' gender, is a good sign that confirms objectivity of the questionnaire used in feedback polls.

The scores for the number of statements and items revealed differences between the physicians who worked in in-patient and outpatient settings. The hospital-based physicians rated

their department heads significantly lower in terms of emotional control, setting challenging goals, prioritizing, translating strategy, active listening to others, tailoring communication to the needs of the audience, communicating clearly and concisely and conveying expertise, effective working in a team, giving constructive and helpful feedback, treating others with respect, and respecting differences among team members.

Taking into account our data on the correlation between the department heads' psychological well-being and working in various healthcare settings with varying workload, it is impossible to outline the background of different estimates for soft skills obtained during the study [27]. Presumably, hospital-based physicians work in more close cooperation with heads of clinical departments: achieving the result relies more heavily on the team efforts and the role of the department head, than in outpatient clinics. That is why the requirements related to communication skills, teamwork, emotional control, prioritizing,

and translating strategy for hospital-based physicians are higher. However, this assumption needs to be verified and can make the hypothesis for further research.

Attention should be paid to the differences between the median scores of the items. These differences allow us to say that the department heads' soft skills in various fields are uneven.

We would like to remind that the median scores for the items and statements are not tethered to standard values. That is why it is a mistake to assume that the median value over 3 points is the evidence of the assessed person's soft skills being above satisfactory levels. The division of the assessed individuals into five groups shows the true state of their soft skills.

CONCLUSIONS

The questionnaire can be recommended for use as part of the performance appraisal system tailored for physicians who serve as heads of clinical departments. Soft skills of the department heads require further development. The skills that belong to the items "self-awareness", "leadership", and "drive for results" are worst affected. The findings are valuable for construction of the performance appraisal systems in medical institutions, including as part of the internal control of the quality and safety of care, as well as for educational institutions when developing the additional professional education programs and heads of clinical departments when choosing the path for professional development.

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