APPENDIX F — LEADERSHIP ROUNDING & PHYSICIAN RELATIONSHIP TOOLKIT

Scripts, templates, cadence models, and structured questions for high-impact leader–physician engagement

Strong physician relationships don't happen naturally — they are built intentionally through structured communication, consistent leadership presence, and proactive problem-solving.

This appendix provides a complete system that leaders can implement immediately to strengthen trust, reduce burnout, prevent turnover, and create a culture where physicians feel seen, valued, and supported.

SECTION 1 — LEADERSHIP ROUNDING OVERVIEW

The purpose of rounding is connection, clarity, and early problem detection.

Effective physician rounding helps leadership:

- Build meaningful relationships
- Identify problems before they escalate
- Improve communication loops
- Strengthen culture
- Reduce turnover risk
- Improve engagement and trust
- Support operational efficiency
- Reinforce organizational values

Key principle:

Physicians stay where leaders are visible, responsive, and consistently supportive.

SECTION 2 — ROUNDING CADENCE MODELS

Choose a cadence that aligns with your organization:

Model A — Weekly (High Touch)

Best for:

- New physicians
- High-acuity specialties
- Service lines undergoing transition

Model B — Biweekly (Standard)

Best for:

- Stable specialties
- Physicians post-90-day ramp-up

Model C — Monthly (Maintenance)

Best for:

- Well-established departments
- Senior/long-tenured physicians

Model D — Quarterly (Strategic)

Best for:

- Department leaders
- Physicians in low-burnout environments
- Strategic planning discussions

Note: New physicians (first 12 months) should always receive **weekly or biweekly** rounding.

SECTION 3 — ROUNDING STRUCTURE (THE 5-POINT CHECK-IN)

Use this structure for every physician rounding conversation.

1. **Connection**

   "How are you doing? How is life outside of work?"

2. **Clinical Workload & Flow**

"How is the clinic? How is OR access? Anything slowing you down?"

3. **Team & Culture**

"How are things with staff, peers, and leadership?"

4. **Support Needs**

"What barriers can I help remove for you this week?"

5. **Recognition**

"I want to acknowledge… (specific recent action or contribution)."

This 5-point model builds trust, eliminates surprises, and strengthens culture.

SECTION 4 — ROUNDING QUESTIONS BANK

Choose 3–5 per visit to keep conversations fresh and insightful.

1. Well-Being & Burnout Prevention

- "How's your workload feeling right now?"
- "What's feeling heavy or draining?"
- "Are you getting enough time off between call stretches?"
- "What would help restore some balance for you?"

2. Clinic Operations

- "How's the clinic flow this month?"

- “Anything we can do to reduce patient delays?”
- “Is the staffing mix working for you?”
- “Any equipment or resource gaps?”

3. OR Access & Procedural Support

- “How is OR block time working?”
- “Any delays, turnovers, or inefficiencies?”
- “Are you able to perform cases you feel you should be doing here?”
- “Where do you feel we could tighten processes?”

4. Team Relationships

- “How’s communication with APPs/MAs?”
- “Anyone on the team I should recognize?”
- “Any conflicts or frustrations I need to be aware of?”

5. Leadership Support

- “How can I better support you?”
- “Do you feel like your voice is being heard?”
- “Anything you need from me that you’re not getting?”

6. Culture

- “How would you describe morale right now?”
- “Anything hurting the culture that we should address?”
- “What one thing would make this a more positive workplace?”

7. Career Development

- “What’s the next step you want to take professionally?”
- “Would leadership roles interest you?”
- “Any CME or training needs we should support?”

SECTION 5 — RED FLAGS LEADERS SHOULD WATCH FOR

Signals that a physician is becoming disengaged, burned out, or at risk of leaving.

- Becoming more withdrawn or quiet
- Increasing conflict with staff
- Frequent call or schedule complaints
- Declining productivity
- Loss of enthusiasm
- Avoiding leadership
- Increased sick days
- Emotional exhaustion
- Comments like "I can't keep doing this."
- Spouse or family dissatisfaction

Any two red flags → immediate leadership follow-up.

SECTION 6 — LEADERSHIP ROUNDING DOCUMENTATION TEMPLATE

Physician Name:

Date:

Leader Rounding:

1. What's going well?

2. What are the current challenges?

3. What support is needed?

4. Operational Issues Identified:

5. Follow-up Actions (within 7 days):

6. Recognition Provided:

7. Next Rounding Date:

Important: Keep this documentation supportive, not punitive.

SECTION 7 — FOLLOW-UP COMMUNICATION SCRIPTS

1. Leadership Follow-Up Email (24–48 Hours Post-Rounding)

Subject: Thank you for our conversation today

Hi Dr. _____,

Thank you for taking the time to speak with me today. I appreciate your honesty and insight. Here's a quick summary of what I heard and the steps we're taking:

What you shared:

- _____
- _____
- _____

Our next steps:

- _____
- _____
- _____

I'm here for you, and I'll circle back by _____ to update you.

Thank you for everything you do for our patients and team.

Warmly,

_____

_____

2. Checking on a Physician Showing Signs of Burnout

"I wanted to check in because I've noticed you've had a lot on your plate lately. How are you

feeling? What's been most difficult recently?"

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3. Addressing Operational Frustrations

"I heard your concerns about clinic flow and OR time. Here are the changes we're implementing this week…"

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4. Providing Recognition

"I want to thank you for your leadership with the complex case on Tuesday. Your work truly made a difference."

SECTION 8 — PHYSICIAN ENGAGEMENT SURVEY (SHORT FORM)

Use quarterly to gauge physician well-being.

Rate 1–5:

Workload

- Clinic schedule feels manageable
- The call is reasonable
- OR access is adequate

Support

- I feel supported by leadership
- Operational problems are addressed promptly
- I have adequate staffing support

Culture

- Team morale is positive
- Communication is effective

- I feel respected and valued

Future

- I see a future for myself here
- My family is happy in the community

Scores <3 In multiple domains, trigger follow-up.

SECTION 9 — LEADERSHIP ROUNDING AS A RETENTION STRATEGY

Why this matters.

- Physicians stay where they feel seen.
- Burnout decreases when leadership is present.
- Trust is built through consistency.
- Operational issues improve when leadership listens.
- Communication enhances culture.
- Early intervention prevents turnover.

Leadership rounding is one of the most powerful retention tools — and one of the most underutilized.

SECTION 10 — SUMMARY: THE FIVE NON-NEGOTIABLES OF LEADERSHIP ROUNDING

1. **Consistency** - Rounding must be rhythmic and predictable.
2. **Presence** - Leaders must show up, listen, and care.
3. **Speed** - Follow-through must happen quickly.
4. **Documentation** - Track themes to identify trends.

5. **Recognition -** Physicians need to feel valued.

Organizations that master this create stability, engagement, and loyalty that last for years.

d long-term.