

# Clinical management units: Building the hospital of tomorrow

**It's time to transform traditional hospital services into more autonomous, flexible and efficient clinical management units (CMUs). A how-to guide.**

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The goal of any hospital is to care for patients in the best way possible, with adequate resources and prompt attention. Yet this goal is difficult to achieve with an inadequate or obsolete organizational structure. To allow for more flexibility, there's a new model for hospitals based on clinical management units (CMUs).

These units, made up of the health care staff in a particular area, are responsible for their own clinical and financial performances. At the same time, however, each CMU works with hospital management to determine the portfolio of services it offers, its budget, objectives and incentives.

It is a federated model for hospitals, in which business units enjoy a high level of autonomy and decision-making capacity. Meanwhile, the hospitals gain flexibility without losing their economies of scale.

In order to facilitate the implementation of this model, the bio-pharmaceutical company AbbVie and [IESE's Center for Research in Healthcare Innovation Management \(CRHIM\)](#) have published [a practical guide](#) to clinical management units, backed by the Spanish Society of Healthcare Executives and the National Association of Nursing Managers in Spain.

Prepared by IESE's Javier Mur and professor [Jaume Ribera](#), the guide draws on the experiences and insights of a group of 75 healthcare professionals — including managers,

medical directors and department heads. It forms part of the AMPHOS project to improve hospital processes by offering a practical and modular methodology for CMUs, with nearly 40 tasks, in order to establish this new federated model for hospitals.

## Change, in three phases

The document spells out three distinct phases in the reform process:

1) **Prepare.** Simply transferring tasks, resources, responsibilities and risks achieves nothing. So, before clinical management units can be set up, the entire hospital must carry out a series of preparations:

- Set strategic goals.
- Design a new hospital structure, grouping services in clinical management units.
- Establish an incentive model, training program and model for management contracts common to all CMUs.

2) **Test.** The next step is to carry out a pilot program to test the system. It should include the following actions:

- Conduct a feasibility study to ensure that the CMU meets all conditions needed for it to be implemented.
- Appoint the leadership team.
- Come up with a strategic plan.
- Adapt the organization, redesigning processes and personnel management.
- Establish a management contract which features goal-oriented management.

3) **Roll out.** *If* the pilot is a success, the third step is to extend the model throughout the hospital. If the pilot is only a partial success, it will be necessary to figure out why and development an alternative plan. As changes are introduced gradually, revisions and reworks are possible.

The guide addresses in depth each of the areas that are key for setting up CMUs: strategic goals, organizational model, strategic plan, governance model, process management, personnel management and management contracts. It also includes forms, examples and annexes to facilitate implementation.

## Boosting buy-in

The authors argue that three things are needed to get staff committed to the new model.

- 1) **Create an atmosphere that encourages change.** Noting that attitude (willingness to change) and aptitude (ability to change) are two different things, the report distinguishes among professionals who are convinced and committed to change, with skills and authority to drive and lead it (dubbed "apostles"); those who desire change but lack preparation to promote it ("hostages"); those who have the skills to actively take part in change but not the motivation or interest in doing so ("mercenaries"); and those who do not want to change and cannot, anyway ("terrorists").
- 2) **Train the leader and the rest of the CMU staff.** Changes in roles will require new skills and knowledge.
- 3) **Involve all staff in the common project.** The ultimate goal is for people to work for the common good of the institution, not simply their own self-interest.

In order for professionals to feel satisfied and motivated by this work, they should feel they are making valuable contributions to patients and to the institution. Achievements must be acknowledged by the hospital and appreciated by peers and society at large.

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