

Marshall Hicks, MD, tells a story about the Leading the Institution

Dr. Hicks joined the faculty of Diagnostic Radiology in 1998. He served as department chair from 2007-2012 and as President ad interim from 2016-2017. In an interview conducted in 2019, he talks about the period of his interim presidency and how the transition team responsible for shifting the institution to a shared governance structure changed the practical and philosophical approach to institutional decision-making.



It's as Simple as Disciplined Decision-Making

The key point for me and for all of us was the discipline around it, adhering to the discipline. Don't cut corners, go to the effort upfront, to define what data you're going to use, and make sure everybody is in agreement with that. Make sure that you have a process for incorporating all the stakeholders. That was a big flaw for us in the past. We wouldn't have all the stakeholders in the room or we would assume what their interests were. HipLink, which was our paging system that we adopted temporarily, was a great example of that. It replaced all of our pagers and it was an iPhone application. We bought all these iPhones, and it was \$6- to \$8 million worth of investment. It turns out it didn't really serve the function of being able to page people in certain areas of the hospital. It didn't allow for emergency codes, code-type paging reliably. It didn't allow for group interactions like we had before with the BlackBerries and pagers. The functionality wasn't what was promised, and so we ended up having to go back to the regular old pages for a while after millions, and that's not even including the time and effort of training of people trying to understand it.

You can multiply that. How are these decisions made? Somebody is making them, and didn't ask for input from the right people. It's a lot of wasted effort and time, and then frustration. The whole thing really erodes morale and trust and leadership.

We weren't disciplined around it, because it's as simple as that: have the discipline to get the right information to people, get the right people in the room, promote the right kinds of conversation, come up with options. It's not just one solution that everybody has to agree to upfront. It's let's come up with some options. Let's discuss those and have a process that is clearly defined. There are clear expectations around it, you're going to make better decisions, and that's best for the organization.

About This Content

This interview clip was taken from an in-depth interview conducted for the Making Cancer History Voices Oral History Project. This ongoing project currently contains almost 500 interview hours with MD Anderson institution builders.

The transcript has been edited from the original.

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Interview link: <http://mdanderson.libguides.com/HicksME>

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