LEADERSHIP DEVELOPMENT SERIES

From New to Confident

Strengthening Medical Staff Partnerships While Tackling Impostor Syndrome

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MEDICAL STAFF SERVICES | LEADERSHIP DEVELOPMENT



Our Journey Today

INTERACTIVE SESSION

01

SECTION 01

Understanding Impostor Syndrome

02

SECTION 02

Impostor Syndrome in Healthcare & Medical Staff Services

03

SECTION 03

Confidence-Building Strategies

04

SECTION 04

Leadership Behaviors That Build Trust

05

SECTION 05

Communication Frameworks That Work

06

SECTION 06

Your 90-Day Partnership Action Plan

AGENDA · 6 SECTIONS

What Is Impostor Syndrome?

A foundational look at the experience that 70% of high-achievers quietly navigate

CARD 1 OF 4 The Definition

First identified by **Dr. Pauline Clance & Dr. Suzanne Imes**, 1978

CARD 2 OF 4 How Common

70% of people experience it

CARD 3 OF 4 Common Feelings

- Self-doubt and fear of being exposed as a fraud
- Attributing success to luck or timing rather than skill
- Discounting your preparation and expertise

CARD 4 OF 4 The Cycle

Achievement → Fear of discovery → Over-preparation → Success attributed to luck

↺ Repeat

> Breaking the cycle begins with **naming the pattern** — awareness is the first act of confidence.

BY THE NUMBERS

Impostor Syndrome in Healthcare

You are not alone in this experience

70%

of healthcare professionals report impostor syndrome experiences

3 in 5

new Medical Staff Services professionals feel underprepared in their first 90 days

82%

of high-performing leaders have experienced impostor syndrome feelings

1st Year

is the most vulnerable period — when partnership credibil built or eroded

Source: Research on workplace psychology, healthcare leadership, and Medical Staff professional surveys.

The Medical Staff Services Landscape

WHY THIS ROLE HAS UNIQUE CHALLENGES

Navigating Complex Hierarchies
Medical Staff, Administration, Clinical Leaders, and Governing Boards — each with distinct priorities and communication styles

High-Stakes Regulatory Requirements
TJC, CMS, NCQA credentialing and privileging standards — precision and compliance are non-negotiable

Time-Sensitive Processes, Zero Room for Error
Provider credentials directly impact patient safety — delays or inaccuracies carry real clinical consequences

Heavy Documentation Scrutiny
Every action is reviewed and may be audited — thoroughness and accuracy are visible and measured at every step

Relationship-Heavy Role
Success depends on physician trust and administrative alignment — built interaction by interaction, over time

Rapidly Evolving Field
Continuous learning is expected from Day 1 — regulatory updates, technology, and best practices shift constantly

*Medical Staff Services professionals must **earn trust** before they feel they **deserve it** — and that tension is real.*

MSS LEADERSHIP DEVELOPMENT

What Triggers Impostor Syndrome in Our Work

Identify your patterns — awareness is your first line of defense

Internal Triggers

WHAT HAPPENS INSIDE YOUR MIND

- **Comparing your Day 30** to a colleague's Year 5
- **Over-analyzing** every email, credential decision, or committee interaction
- **Minimizing your wins** — crediting the team, the system, or luck
- **Fear of asking questions** — worried it reveals incompetence
- **Perfectionism** masking as professionalism

External Triggers

WHAT HAPPENS IN YOUR ENVIRONMENT

- **A physician challenges** your decision or process
- **Senior staff use jargon** you haven't learned yet
- **High-pressure committee meetings** with executives in the room
- **Receiving critical feedback** after a long stretch of success
- **Being the youngest or newest** person in every meeting

Building Confidence: The ANCHOR Framework

A practical model for Medical Staff Services professionals

6 STEPS

1 A

ACKNOWLEDGE

Name the Feeling

Say it openly: *"I am experiencing doubt right now."* Naming the feeling reduces its power and shifts you from reaction to reflection.

2 N

NORMALIZE

You Are Not Alone

Remind yourself: this is universal. Competent, high-achieving people feel this. You are in very good company — and still fully qualified.

3 C

COLLECT EVIDENCE

Keep a Win File

Document specific achievements, positive feedback, and problems you solved. Review it when doubt rises — facts defeat feelings.

4 H

HONOR THE PROCESS

Growth Isn't Linear

Competence builds through repetition and experience — not perfection. Each messy moment is progress. Trust the timeline of your own development.

5 O

OWN YOUR EXPERTISE

Speak with Authority

Use direct language: *"I recommend... I reviewed... I determined."* Replace "I think maybe" with conviction. Your expertise is real — claim it.

6 R

REACH OUT

Build Your Network

Find a mentor. Ask questions boldly. Curiosity signals professionalism — not weakness. No one built credibility in isolation.

Leadership Behaviors That Build Trust

What confident, credible Medical Staff professionals do differently

Presence & Visibility

Show up consistently to Medical Staff committees, credentialing meetings, and leadership huddles — even before you feel ready.

01

Mastery of Standards

Know TJC, CMS, and NCQA requirements deeply. Standards fluency = instant credibility with physicians.

02

Proactive Communication

Reach out before physicians ask. Send status updates, flag issues early, and follow up consistently.

03

Relationship Investment

Learn physician preferences, communication styles, and professional goals. Personalization builds loyalty.

04

Solution Orientation

Present problems with proposed solutions. Ask: "Here is what I am thinking — what is your perspective?"

05

Integrity in Action

Do what you say. Own mistakes quickly. Physicians respect transparency and accountability above all else.

06

Communication Frameworks That Work

Speak with authority, clarity, and clinical partnership in mind

FRAMEWORK 1

SBAR in MSS Context

- **S** Situation — what is happening with this provider file
- **B** Background — history, previous credentialing, peer review
- **A** Assessment — your recommendation
- **R** Recommendation — proposed next step for committee or leadership

FRAMEWORK 2

Assertive Language Swaps

"I just wanted to check..." →	"I am following up on..."
"I might be wrong but..." →	"Based on my review..."
"Sorry to bother you..." →	"Thank you for your time..."

FRAMEWORK 3

Active Listening in Physician Interactions

Reflect back key points to confirm you heard correctly

Clarify before responding — ask one focused question

Avoid filling silence — let the physician complete their thought

Confirm shared understanding before closing the conversation

FRAMEWORK 4

Written Communication Standards

Lead with the ask or decision — never bury the headline

Use brief, direct language — edit ruthlessly

Include regulatory citation when relevant (TJC, CMS, NCQA)

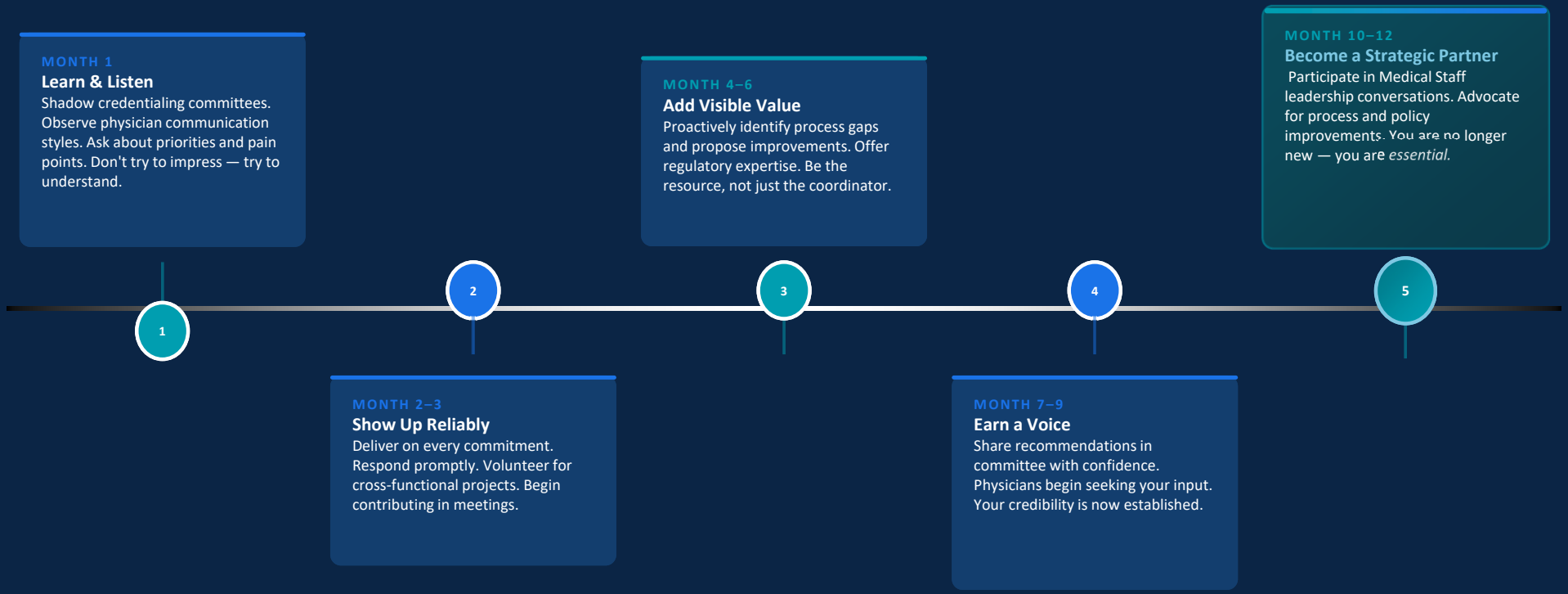
Close with a clear, actionable next step and owner

"Confidence is not **volume** — it is **clarity** and **consistency**."

Pick one language swap this week and use it every single day.

Building Meaningful Medical Staff Partnerships

Partnerships evolve — trust the timeline



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Your **90-Day** Confidence Action Plan

PHASE 1

Days 1–30

Foundation

- Start your **Win File** today
- Identify **one impostor syndrome trigger** to watch
- Introduce yourself to **3 physician champions**
- Audit your **regulatory knowledge gaps**
- Find a **mentor** within Medical Staff Services

PHASE 2

Days 31–60

Build Momentum

- Practice one **assertive language swap** daily
- Attend **all Medical Staff committees** — actively observe
- Request one **informal check-in** with your supervisor
- Complete one **regulatory training** or credential update
- Review Win File weekly — **add 3 entries** each week

PHASE 3

Days 61–90

Establish Presence

- Speak up **once in each committee meeting**
- Propose one **process improvement solution**
- Facilitate one **physician interaction** start-to-finish solo
- Share your **Win File highlights** in your next 1:1
- **Celebrate 90 days of growth** — you earned it

SESSION SUMMARY

Key Takeaways

01 **Impostor syndrome is universal** — 70% of high achievers experience it. You are not alone and you are not a fraud.

02 **Medical Staff Services is inherently high-stakes and relationship-driven.** The discomfort you feel is a signal of professionalism, not incompetence.

03 **Use the ANCHOR Framework:** Acknowledge · Normalize · Collect Evidence · Honor the Process · Own Your Expertise · Reach Out.

04 **Build credibility through consistency:** show up, follow through, speak clearly, and invest in physician relationships one interaction at a time.

05 **Your 90-Day Action Plan starts today.** Small, intentional steps build the confidence and partnerships that last a career.

HIGH ACHIEVERS

70%

experience impostor syndrome — and still excel

ANCHOR FRAMEWORK

- **A** • Acknowledge
- **N** • Normalize
- **C** • Collect Evidence
- **H** • Honor the Process
- **O** • Own Your Expertise
- **R** • Reach Out

"You are exactly where you are supposed to be."

You Belong Here.

Every expert was once a beginner. Every trusted partner was once a stranger in the room.

- **Start your Win File tonight** — write down three things you did well this week
- **Share this framework** with one colleague who needs to hear it
- **Schedule your first physician** relationship-building conversation this week

MEDICAL STAFF SERVICES | BUILDING CONFIDENT LEADERS



Questions?

LET'S TALK.

Your thoughts, reflections, and questions matter.

This is your space — speak freely.

Patricia E. Brown, MBA, CPCS, CPMSM