

Beyond the Mask Profile



Dr. Paul Gill

Dr. Paul Gill is a FP-A based in Goderich, ON. In addition to a demanding family practice, he is the chief of anesthesia at Alexandra Marine & General Hospital, the Chair of Rural Pain Medicine for Gateway Rural Health Institute, a member-at-large of the Ontario's Anesthesiologists' Executive, the Digital Clinical Lead for the South-West LHIN and the Huron Perth Primary Care LHIN Lead. He's also a husband and a father to two young children. In short, he's one busy human. Dr. Jane Cooke -Lauder, the Section's strategic consultant, and Lindsay Kneteman, the Section's communications coordinator, interviewed Paul recently to learn about his journey and what messages he might have for other physicians interested in leadership roles.

Paul's approach to his work is driven by the imperative to advocate for the marginalized, to tackle difficult situations and to eradicate inefficiencies. This approach was forged early in life while balancing his immigrant parents' strong cultural beliefs, his Canadian upbringing, and his responsibility as a sibling to a differently abled older brother.

Following completion of his undergrad in biochemistry, Paul did a Master's in Development Biology, thinking his future involved a PhD, a wet lab and lots of mice. However, with the realization that there were few available science jobs and with the encouragement of his thesis chair, he came to realize that medicine was the better path for him. Given his interest in the body's physiology, he decided to pursue family medicine and within that, anesthesiology. The role of anesthesiologists in making critical decisions when facing high-pressure situations was a natural fit.

Being a member of the OR team who is called on to step forward and play a decisive role when needed reflects Paul's approach to physician leadership. For him, solving workflow inefficiencies, simplifying processes or problems that do not need to be so complicated, is a team sport, particularly when processes are well entrenched, "Listen to your colleagues to understand their pain points, get them together so that they can understand what issues they are facing as a collective, and then reflect their concerns back to them to enable them to select the direction." From there, it's about finding an action-based way forward with a tangible product. For Paul, this is similar to helping his parents navigate their new experience in Canada. He needed to understand the cause of the confusion, simplify the solution, and support them in moving on.

While this push to consensus may sound warm and fuzzy, Paul indicates that the secret lies in listening to and encouraging dissent. "The final agreement has to be arrived at with dirty, bruising arguments that are difficult," he explained as significant change often requires conflicting ideas to bring about well thought out, tested solutions. "A room of people that all agree with you is a scary place to be when planning system changes."

Learning this approach to leadership also started in the home. Paul explains that as the middle child growing up in a "scrappy" family, learning to compromise was a regular and key part of his life. However, he really honed this skill through his work with the LHIN and with the support of both mentors and formal training, both of which he describes as critical for developing leadership skills and confidence.

Paul freely admits that he suffers from imposter syndrome. He credits mentors and colleagues for recommending and encouraging him to take on roles and challenges that he never would have considered for himself. Paul believes that everyone should seek out at least one mentor. For himself, what he has found is that formally assigned mentor relationships have been less fruitful. Rather, the best mentors are those where the relationship developed more organically. "These people have gone out of their way to share their own personal journey in medicine, including taking detailed looks at the turning points in their careers. They then used these examples and a reflective approach to help me explore career options."

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Finding the opportunities to learn leadership on the job should not be difficult. "There are so many organizations that want input, they want help and they don't know where to get clinical folks involved." In Paul's experience, "There's no shortage of leadership opportunities; there's sometimes difficulties in trying to understand where the opportunities are and how to access them." He encourages his colleagues to put their hands up, recognizing that not every opportunity will work out. For Paul, one of the crucial leadership skills is how to extricate yourself on a timely basis from situations where the fit is not as good as initially thought. And that's also where a mentor can be of help.

Paul points out that there are different ways to effect change. You can jump in and mobilize others. And then there are times when strong advocacy skills are required, particularly around matters of patient care. Acute pain can become chronic pain when there is no timely access. In rural areas, the situation is even more challenging given the absence of pain clinics and specialist know-how.

"There is a lot we can do to increase system capacity for the care of chronic pain patients in rural areas by helping to stand up for the infrastructure to deliver care in a more distributed model." His role as a leader for the Gateway Rural Health Institute provides the opportunity to address this important issue by gathering the evidence, building alternative models and providing a platform to draw the issue to the attention of others.

Concern about burnout and stress are part of every physician's life. Paul speaks to the importance of having variety in your professional practice and also setting boundaries. His family are a stress alleviator and so they are a clear priority. "If there's something that's going to interfere with my ability to coach my son's hockey team, the answer is no – and I then try to find a delegate." Technologies like Google Calendar and smart phones are crucial for balancing work-life. But even better he notes, is being married to a physician who understands what a career in medicine is all about. "I have this built-in person to empathize with and vice versa."

As for what's next in his leadership journey, "I'm not one to have any preconceived notions about where I might go with any of this," Paul shared, "I just let my passion take me where it will." Given what he's been able to accomplish so far, we have no doubt of his future success, tackling the difficult issues by taking action, enrolling others, and bearing witness.

We thank Paul for his dedication to leading improvements in the practice and administration of medicine and look forward to tracking his future exploits.

Taken from Ontario's Anesthesiologists' winter 2018/19 Section newsletter.