**Encouraging Leadership in Rehabilitation Medicine: Recognise Your Potential**By Nathaniel Chandra

The RMSANZ annual scientific meeting in Sydney this year together with ISPRM was a massive success. Whether the preferred nomenclature was PM&R, physiatry or rehabilitation medicine, the meeting involved thought-leaders and changemakers in the field collaborating and contributing their amazing work and insights. With over 1500 delegates from all around the world in wide-ranging fields, there is no doubt the ripple effects of this meeting will be felt for many years to come.

The session on leadership in rehabilitation medicine reflected on the unique leadership qualities that rehabilitation professionals bring to the table. Despite being underrepresented in medical leadership positions worldwide, our skills and experiences equip us to excel in these roles. A distinguished panel including Australia’s own Professors Fary Khan, Andrew Cole and Dr Gaj Panagoda considered how we can lead both from within and from the front:

**Insights from the Conference on Leadership in Rehabilitation Medicine**

**Mould Consensus, Don’t Just Search for It:** “A leader should mould concensus and not only search for it”. This proactive approach towards finding solutions to problems is essential for effective leadership.

**Choosing Leaders:** When identifying potential leaders, it’s crucial to look for individuals who are organised, capable of strategic planning and who understand that the organisation is more than just one person. Ideal candidates are those who are aware of the department’s mission—whether it’s focused on revenue, quality, or other values—and who ask thoughtful questions about how the organisation achieves its goals. They should have a vision for their future within the organisation, present innovative solutions to problems and have garnered positive responses from their peers.

**Essential Leadership Traits:** Effective medical leaders should bring unique ideas and a forward-thinking vision, incorporating new technologies and breakthroughs. They must be able to compromise and collaborate; demonstrating compassion, ethics and integrity. These qualities help in building trust and fostering a positive work environment. The ability to maintain a level head in uncertain times was mentioned more than once as an important trait.

**Navigating Crises:** One common mistake in crisis management is oversimplifying problems or reacting emotionally rather than reflectively. Effective leaders identify the correct leverage points and approach problems with a rational mindset, ensuring that decisions are well thought-out and balanced.

**Translating Clinical Skills into Leadership:** The clinical expertise of a rehabilitation professional, coupled with emotional intelligence and management skills, positions us well for leadership roles. It's crucial to make well-informed and balanced decisions, allocate resources wisely and adapt to new priorities as needed. Transparent communication, resilience, empathy, and leading by example are key aspects of strong leadership. Delegating tasks, having clear direction, and ensuring a shared vision with the team are equally important.

**Balancing Detail-Oriented and Big Picture Viewpoints:** Our analytical and problem-solving skills are highly transferable to leadership roles. Interpersonal and listening skills are also vital, enabling us to navigate complex organisational landscapes effectively.

**Challenges Ahead:** As we look to the future, we must be prepared to address several significant challenges, including technological advancements, talent retention and development, and issues related to privacy, cybersecurity and regulatory compliance.

Rehabilitation professionals should recognise and harness the transferability of our skills and reflect on both the developed and developing qualities that magnify our potential impact on the field of rehabilitation medicine and beyond.

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