



Commander's Thoughts



January 30, 2012

On Leadership and Strategy

Army Medicine is at a defining moment. It is time to focus our collective efforts and seize this opportunity to meet the uncertain demands of the future. My confidence rests in this room with all of you, Army Medicine's Senior Leaders. Our united talent and combined years and variety of experience will enable us to face these challenging times head on. While we do not have the luxury of time in years to postulate what the future should be for Army Medicine, I know there is time to reflect and pause so we can create a meaningful road map for the future. We are a dynamic organization that must maintain function while simultaneously negotiating change and embracing innovation. Staying the course is easy; but without original thought and stimulating conversation about where our organization needs to evolve to, there will be minimal growth or improvement. I am calling upon you to think about what your strategy is, or will be, to generate the momentum to move Army medicine forward – how are you leading from the front?

To quote Ralph Waldo Emerson, "Do not go where the path may lead, go instead where there is no path and leave a trail". This quote fits in with an interesting example of a business strategy called "Blue Ocean". The book, "Blue Ocean Strategy", written by W. Chan Kim and Renee Mauborgne, describes how to create uncontested market space, make the competition irrelevant, create and capture new demand, and align the whole system of a company's activities in pursuit of differentiation AND lower costs. I'm interested in your thoughts on how we can use wellness and prevention to create "blue ocean" for the AMEDD.

Change is here. It is part of our daily conversation. Secretary Panetta has clearly laid out what the DoD will need to do to produce a smaller, more adaptable and agile force. What does that mean for Army Medicine? Do these changes of size, location or dollars influence how we remain relevant in CONUS and in theater? I believe to remain competitive we must proactively strategize and create a near, far and long term (2040) architectural framework for Army Medicine. If we stagnate, and continue to wed ourselves to what we know, the status quo or business as usual, then we will find ourselves missing a very small window of opportunity that likely will not come again. Our response must be thoughtful, strategic and with the ability to fire-for-effect when acute needs and issues rise. All the while, we sustain our current global mission. Linear strategy no longer suits our organization, and paralyzes our ability to demonstrate operational and tactical leadership skills. What I ask of you is not simply Lessons Learned; but Visions Unexplored, and perhaps, previously Unimagined. Innovative thinking and big initiatives are what separate the pioneers from the settlers.

There is an article of interest that illustrates a business model they call *collective ambition* in the December 2011 Harvard Business Review. This model came from looking into businesses that defied logic, succeeded when there was adversity, and emerged even stronger and more successful. Collective ambition is a summary of how leaders and employees think about why they exist, what they hope to accomplish, how they will collaborate to achieve their ambition, and how their “brand promise” aligns with their core values.

Through collaboration and purpose, they shape their collective ambition that supersedes individual goals or single linear objectives. As we face the challenges that lay ahead, my vision for Army medicine is to continue leading from the front, setting the standards for a medical system that delivers healthcare globally and the promise of a healthier America.

In order for this to happen, I ask you to join me to make this a collaborative effort, not simply an execution of my commands. Forward leaning leadership takes responsibility for the future, and it requires each of us to mobilize and focus resources and energy on the strategy we create together that will make a difference and that will position our organization for success in the future. I am excited about the future of this organization and I sense your enthusiasm that will shape our Army Medical Department of the future. British economist and scholar, John Maynard Keynes contends “the real difficulty in changing the course of any enterprise lies not in developing new ideas but in escaping old ones”. Strategic innovation that blends strategy with disciplined innovation can bridge future strategy to present-day execution. No doubt, there will be respectful disagreements in how we innovate. There will be candid discussions and the requisite emotional valence that such candid dialogue inevitable generates. But all voices need to be heard- because in the final analysis- the fertility of the questions is as important as the finality of the answers.

My final thought: Army Medicine has the opportunity and even the responsibility to foster a new wave of leadership thinking – thinking borne from a greater sense of purpose. To this end, I request your total commitment as we boldly engage the future that is Army Medicine.

Serving to Heal...Honored to Serve!

A handwritten signature in blue ink, appearing to read 'Patricia D. Horoho', with a long horizontal flourish extending to the right.

LTG Patricia D. Horoho
43rd Surgeon General