It’s not unusual for physicians to attend five to six meetings every week. The majority of these are about one hour long. At this rate, a physician could spend a staggering 9,000 hours or more in meetings over the course of his or her career. This makes it especially important to evaluate whether a meeting is necessary and how to make the most of those you lead or attend.

To meet or not to meet

The advent of e-mail has reduced the need for face-to-face communication; however, there are still good reasons to have meetings. The trick is to distinguish between situations that call for meetings and those that don’t. This is the responsibility of everyone involved, not just the leader. If you are invited to a meeting that doesn’t seem necessary, you may do everyone a favor by tactfully questioning the need for it.

A meeting might be necessary in the following circumstances:

• When it is important to involve the group in solving a problem or making a decision;
• When knowledge is dispersed among several people or the commitment of several people is needed;
• When a major issue needs clarification;
• When concerns need to be shared with the group or when the group has concerns that need to be addressed by the leader;
• When a problem involves people from different groups or it isn’t clear who is responsible for dealing with it;
• When members of a large, geographically dispersed group need to get to know one another and develop a shared purpose and collaborative spirit (if it’s practical to get the whole group together in one location);
• When a meeting may help to avoid multiple e-mails and rounds of phone tag that take more time than you think the meeting will.

Too often, meetings are held that ought to be postponed. The time would be better spent on something else in cases like these:

• When important data are unavailable or essential handouts have not been completed and distributed;
• When key participants cannot be present;
• When there is significant anger or hostility in the group (this should be addressed in one-on-one discussions until all parties are reasonably confident that a productive group discussion can occur).

Many meetings are ill-conceived and ought not to have been scheduled in the first place. The principle that one should not have a meeting about something that could be better handled in another way is especially true today, given the number of options available for electronic communication.

Trivial matters are best handled by e-mail (or not at all, in some cases). E-mail is often the best choice when the goal is to summarize, update or share information rather than discuss – although a meeting is useful if it is important to see the reaction of the group or gauge how well the information is understood.

Recurring meetings pose a special challenge. Many continue long after they’ve outlived their usefulness. If the need for a recurring meeting is in question, cancel the
Invite the “side conversationalists” to share their comments with the group – like your teacher did in third grade. It still works.

The first item should be the minutes of the previous meeting, if there was a previous meeting at which minutes were taken. Other items should be prioritized, with those requiring the most discussion coming first. Put informational items and less controversial items at the end of the agenda. Intersperse them if needed to avoid putting too many difficult items back to back. Only allow the number of items that can be covered in the allotted time. If you know of meeting attendees who are strongly in favor of or against any particular agenda item, talking informally with them about the issue before the meeting may save time during the meeting. If your goal is to move an initiative forward, it can be particularly helpful to talk with dissenters before the meeting to try to enlist their help.

**Participants.** The decision regarding who should be invited to attend a meeting should be based on the type of meeting and the desired outcome. Those who have a need to know and those who have relevant information to share may need to be present at the meeting. Those affected by the decision may also need to be included. In most cases, limit the number of attendees to 12; with more, the discussion can become unwieldy. Avoid being overly inclusive, which may only waste people’s time.

**Facilities.** When the meeting facilities are proper, they go unnoticed. How many times have you been in a meeting where the room was too hot and everyone fell asleep? How about the meeting where the overhead fan was so loud you couldn’t hear the speaker? Heat-

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**HOW TO BE A GOOD MEETING ATTENDEE**

**Question the need for the meeting, if appropriate.** Others, including the meeting leader, may thank you for it.

**RSVP if necessary.** Letting the meeting planner know whether you will be coming helps him or her to anticipate space needs and may affect whether the meeting occurs at all.

**Arrive on time.** If you have to be late, don’t expect the meeting leader or the person sitting next to you to fill you in on what you missed.

**Come prepared.** Read related material, particularly any distributed by the meeting organizer prior to the meeting. Bring the material with you, along with paper and a pen.

**Listen carefully.** This will prevent you from asking questions that have already been covered.

**Don’t interrupt.** In a more formal meeting, you may need to ask the leader to acknowledge you by raising your hand.

**Don’t be a distraction.** Silence your cell phone and pager, and avoid side conversations.

**Participate.** People will interpret your silence in different ways, many of which don’t accurately reflect what’s really on your mind.

**Don’t monopolize the discussion.** Keep your questions brief, and allow others ample opportunity to speak. If appropriate, you may want to encourage others to participate.

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**About the Authors**

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ing, cooling, lighting and ventilation should be adequate and checked prior to the meeting. For meetings that will last more than an hour, the chairs should have cushions, if possible. For meetings that require interactive discussion, participants should be seated at a conference style table, facing one another.

Managing the meeting

You can earn the appreciation of those who attend your meeting by starting and ending on time. This is respectful to those who have made the effort to be available at your request and demonstrates that you understand their time is valuable. It is particularly essential when the meetings involve other physicians, who are likely to have scheduled appointments around the meeting time.

During the meeting, it’s important to stay focused on your goal. Don’t allow an informational meeting to degenerate into a brainstorming session. Don’t lecture to a group when what you want is to challenge and stimulate everyone in the room to participate in decision making. Be prepared to redirect the conversation as needed.

When meetings get off track, the behavior of the participants is sometimes to blame. (See the list of tips for meeting attendees on the facing page.) The following strategies will help you to deal more effectively with challenging attendees during the meeting:

The know-it-all. This person believes himself or herself to be an expert in the issues being discussed, offers many strong opinions and delights in crossing up the leader. Turn him or her over to the group by asking others what they think about an item that this person has brought up.

The talker. Like the know-it-all, this person has a lot to say and can monopolize the discussion. Avoid eye contact with him or her. When he or she completes a thought, ask others to offer their point of view, for example, by saying, “We’ve heard what John has to say. I’d like to hear what others in the group think.”

The side conversationalists. These are the two who have something to say to each other during the meeting. If their conversation is brief, ignore it. If it is prolonged, or if it occurs repeatedly throughout the meeting, you should address the situation.

Invite them to share their comments with the group — like your teacher did in third grade. It still works.

The timid one. This person never contributes. Don’t mistake his or her silence for agreement. Many times it comes from a lack of self-confidence or fear of embarrassment. Calling on the person may be all that is needed to elicit useful input. Office staff may need extra encouragement to speak up in meetings that involve physicians and nursing staff. If possible, ask the person questions he or she is uniquely suited to answer based on his or her knowledge or expertise. Reserved individuals often put a lot of thought into what they say and can make valuable contributions with some encouragement.

Of course these are just a few of the challenging behaviors that meeting leaders have to address. A tactful, direct approach that calls attention to the issue while allowing the individual to save face usually puts a stop to it. Speaking directly to the individual about the problem after the meeting may also be in order.

A final word

It can be hard for physicians, who are naturally independent-minded and focused on patient care, to see most meetings as a good use of their time, and their skepticism may be born from experience. These guidelines should help those who lead meetings and those who attend them to make their meetings as productive as possible for everyone. Send comments to fpmedit@aafp.org.

SUGGESTED READING


