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| **14041, Vladimir Volel – conference** |
| Good Morning Ladies and Gentlemen,Thank you Dr. Crawford for giving me the opportunity to speak today. It’s been an amazing year and I am honored to speak today, along with our executive director and senior vice president for Laboratory Services and Ron Weiss, Former Chief Medical Officer, Chief Operating Officer and Executive Vice President of ARUP laboratories. I have worked in this health system for nine years and I’ve served as administrative director for North Shore University Hospital for four months. Dr. Crawford challenged me with telling the story of our service line. What have we accomplished? What have we done? And how have we done it? Well, it has been an incredible year of collaboration, innovation, discovery and individual and departmental success.We were asked as committee to look at leadership, branding, workforce development, and informatics/LIS. That’s a lot to cover, so let’s start with Leadership and a question that I have for you. What do you think makes a great leader? I believe a great leader is inspired, charismatic, principled, driven, and wise. Repeat that with me.So what did we discover? I can tell you that the journey of discovery was transformational for me personally. It was an amazing experience to be part of the team that ensured delivery of the goals of the 2014 retreat. I have to tell you that I approached this endeavor with more than a little anxiety and trepidation. This was all new to me because I’d never attended a retreat or chaired a group of distinguished individuals. So, I met the appointed retreat committee with prepared notes for what I thought were the things that everyone would be doing. But, as I went around the room and asked everyone what they thought, everyone had ideas on how to find ways, to “add value” and to set realistic, achievable goals and to execute those goals, based on what we discussed in 2013. I’m thinking how do we deliver on Leadership, Branding, Workforce, and coordinated care and do it in 8 months! I was so flustered that I almost forgot who was on the conference line. I remember asking one of our esteemed attendees, (who likely attended more retreats than I chaired), “So…uh…Gary (Dr. Stone) what do you think?” He replied (somewhat sarcastically), “Well……Jim….I think that…..” At this point I thought that someone with more experience should take on this role; that one of you who had attended these annual events should be up here. So when I reminded Dr. Crawford that I had never been here, he sort of shrugged his shoulders, never looking up from what he was doing and said something along the lines of “you’ll be fine”.Driving home that evening, I was listening to a Sugata Mitra podcast TED talk about learning and education. In it, he postulates that the way we learn now is obsolete and to prove it he created an absurd proposition. He went to the slums of New Delhi and gave uneducated, desperately poor children a computer and after a few months they learned how to use it to browse the internet. When he asked a colleague how they could have learned how to use a mouse and keyboard on their own, his colleague said someone must have helped them. So he went further, 300 miles outside of New Delhi, with an even more outlandish proposition, that the children would teach themselves the biotechnology of DNA replication in English. If his proposition failed, then learning as we know it stays the same and they would bring in the teachers. He went back a few months later to find out what they learned. These uneducated children, who spoke no English, and had never seen a computer, told him that they had learned nothing, and that they looked at the computer every day. Then they told him that other than learning that the improper replication of a molecule causes disease, they understood nothing else. So, if that is learning, what about leadership? Is this a metaphor for leadership as well? I’ve been asked to report to you the outcomes of last year’s retreat. What have we done in leadership development for branding our organization, for our workforce, and in informatics? If you include all of the 17 hospitals in the system, 30% of those received a new medical director (for example, Dr. Jordan Laser, medical director at LIJ, Dwayne Breining, medical director, core lab, Laurie Horowitz at Southside, Rachel Robbins at NUMC) and most were promoted internally. There were individuals who transitioned into administrative directorships (including myself, May Tso, John Zenker, Shanker Deonandan, Laurie Birnbaum, Richard Seaberg) and multiple individuals behind them were also recognized and promoted. That is a great accomplishment for all those promoted personally and professionally, but is that solely what leadership is about? How has the department faired?Last year the questions were asked and the need was articulated for leadership development. We didn’t know then that Ebola was on the horizon. When fear gripped the country, the country turned to the government, and the government turned toward the hospitals and the hospitals turned towards their laboratories, and we were asked to lead.When I went to the C-Suite for the first time and Senior Leadership asked me about our plan I said, “Well, we’re either going to keep the patients in the hospital or we are going to keep them out of the hospital,” (note to self, learn more about Ebola). People stepped up at the community hospitals, the tertiary hospitals and at the core lab, administrators and staff alike. When it became clear that we would open up the specialized treatment center (STC) at Glen Cove, how were we to staff it? Dr. Crawford, Dr. Breining, and Dr. Laser stepped in. Joe coordinated calls and there were sometimes heated discussions as to how best to proceed (from May, John, and Shanker to name a few). I remember coming in on the weekend because I didn’t know how we could cover both the STC and the lab at the same time. The staff told me to go home because they had already arranged for volunteers and coverage. When one of our instruments went down, Richie made himself available to a new administrator who didn’t know who to call. When Fox 5 News wanted to cover a lab about Ebola, they came to one of our sites to interview one of our own blood bankers, Dr. Chhibber. This was a true example of team work in the midst of a crisis. Speaking of blood bank did you know that at the AABB, we received the top poster in 2014? Our residents presented 25 times regionally and nationally. Before that we opened the Lenox Hill Healthplex in record time. After that there was rapid testing for RVP to decrease length of stay. When we announced at NSUH that we were going live with RVP at our weekly organizational excellence meeting, senior leadership applauded. After that we had to come up with a plan for C. Difficile. Southside converted to Cerner, Lenox Hill went live on Voicebrook. LIS completed 298 interfaces for outreach with the subsequent charges totaling $60 million. Interfaces were built for the HHC hubs. There was the “patient portal” that managed what patients want, lab results. There was clinical informatics with acute kidney injury and anti-coagulant initiatives. “It always seems impossible until it’s done,” according to Nelson Mandela. That is demand management, delivering value and protecting against risk. In 2012, you asked “What do we (pathologists) do to add value”? In 2013, you wanted to know what is your “value add”? In 2014, it was the Year of the value equation. Value based care, the consumer experience, and operational excellence have taken the forefront in healthcare. The “value” question remains almost the same but where every year the answer keeps changing. That’s why we keep coming back every year. We’re looking to you for new ideas. Atul Gawande said we are tackling problems invisible to the patient. Pathologists are under constant stress and provide a unique value that was often under-recognized in the past. When I went back to leadership a few weeks ago, I asked them, “What does the laboratory service line mean to you?” They said the laboratory provides leadership - whether it’s Ebola, or C-Difficile, or Sepsis. The laboratory provides the direction. Yes, there were 18 million clinical tests last year. There were also almost a quarter million AP slides that passed through your hands. There were x# of consults where patients, surgeons, and institutions needed to know what we thought. You asked that we develop the workforce. I did my part by using the ALS ice bucket challenge as an opportunity to engage staff. When I told them that we would have a raffle for $5 a chance and the winner would get to dump the ice on my head, we raised $400 in two days. The bucket they selected was so large that the winner couldn’t lift it. They had to get two guys to do the deed. I haven’t always been sure of my relationship with you all, but for one of you I’m certain. When Jordan heard about the challenge, he approached me and suggested that we use dry ice instead. I said to Jordan, “a large, heavy, bucket of ice without water, on my head? He said “Yeah, now that would be cool!” Many of you know that I had a motorcycle accident the prior year and I was out for three months. Many of you don’t know all the details. I took a ride up to Connecticut with a new group of guys for a scenic ride in the country. Right before then, I had been practicing “leaning” for a couple of months with my relatively new bike. Trying to get the bike so that my knee is scraping the ground, with varied amounts of success. So as we are riding, we come across a traffic circle and the asphalt was as smooth as glass. We were going about 30 mph, spaced fairly well apart when I hit the circle and the bike just fell into a perfect lean, my helmet was just buzzing the asphalt, and for a moment, it was perfect. A few minutes later, we are riding along and the leader disappears around a blind corner. I learned later that in the few moments that he was in the lead, he saw a driver straddling the middle of this narrow country round and had just enough time to swerve out of the way. I met the van right at the apex and the impact was hard enough that I broke my leg in 7 places and needed 9 hours of surgery. The surgeon said my tibia and fibula were pulverized and needed an assortment of 14 pins, plates and screws to put it back together. I sailed over the van and landed about 20 feet away. While I was “sailing”, I was thinking “I wonder if they’re related to Jordan”. So, just at the moment when you think you are perfect, that you can do no better, is when you are closest to failure. Being in first place is great, being content in second place is a disaster waiting to happen. It’s why we come together every year, to ask the questions that beg different answers. For us, on our own, we come up with the strategies and goals to propel us for the upcoming year. Simon Sinek said “What good is an idea if it remains an idea? Try. Experiment. Fail. Try again. Change the world. We come back every year because there is value in this venue. When I, and some of my team members first took on this role, we thought that some of these ideas were too “lofty” and I said as much at the first meeting. But when you “Set High Expectations, at a minimum you develop the habit of performing above average” (Sam Villanueva). On behalf of the committee, I want to thank you for allowing us to discover the exceptional year that you have had. How you have performed as leaders without leading. I learned, (thank you Dr. Crawford) that true leadership means letting leading happen. Every year when we meet we learn new methods, we set new goals with higher expectations. After working with all of you and this committee I know that we can come out of this meeting having learned from last year’s experiences and move forward with new and exciting challenges for the year to come. Being a great leader, letting leading happen, can only occur when the leadership and the team know one another and know what they can expect from each other. A great leader trusts his team to do what they are trained, talented and skilled to do and guides them more than anything. I’ve witnessed this type of leadership in this group and have seen the positive results. After working with all of you I also believe that each of you leads in his or her own way. Whether you are in an authority position or whether you are working in your own position doing the quality work you are known for, you are leading those around you. You are leading others by your example. Today we begin a new year with similar questions but with new goals in sight, just as in years before. Before we arrived here we looked at our own experiences of the last year to see how we felt we performed. As we join together we can compare notes to see how each different group learned and grew from last year’s decisions and how we can apply what we’ve learned this last year to our goal planning for the upcoming year. We are sure to have some disagreements on how last year’s accomplishments and this year’s goals. But, by discussing those we will come to a consensus of how best to proceed. I have every confidence that we will each learn from one another as we make these plans and decide how best to implement them. This may be my first time speaking before all of you but I look forward to working with you all today and in the future. I look forward to the future goals and the advancements we will make as we move forward, each in our area of expertise. I am truly excited about what we can accomplish together and how we can serve our fellow man. Thank you |  |