Hope in Action

By nature and necessity, healthcare CEOs spend much of our time thinking strategically about the overall health and well-being of our organizations. We make yearlong, five- and even 10-year plans. But as healthcare leaders across the United States and globally have faced the tremendous challenges brought about by the COVID-19 pandemic, we have all had to pivot. Today, CEOs are leading day-to-day, sometimes hour-by-hour, amid great uncertainty.

Here are lessons learned during this evolving experience.

Think Colleague, Not "Competitor"

Since the COVID-19 crisis began, our organization has actively collaborated with and learned from other health systems in our state, region and beyond. Being located some distance from the New York metro area, we did not receive the same sudden influx of COVID-19 patients as our colleagues in the northern part of the state. This gave us time to adopt social distancing and other safety measures that likely prevented our hospitals from becoming overwhelmed.

Though we are "competitors," the health system leaders in our area view each other as colleagues, and that sentiment carried over into this crisis. A regional health coordinator, appointed by the governor of New Jersey, helped to coordinate obtaining equipment and making plans for patient surges, helping to ensure we had enough available critical care beds.

Especially during a challenge like this pandemic, it is beneficial for CEOs to take a step back, look at the big picture and determine how—collectively as health systems—we can respond to our community's needs.

Focus on Communication

Communication has always been one of the most important skills for CEOs, especially in times of uncertainty. I often refer to the three M's of communication: (1) Leaders should establish themselves as credible messengers whom people trust; (2) they should ensure their message is rooted in truth and best practice, with data to support it; and finally (3) leaders should communicate the messaging in a way that is authentic and easily understood. These attributes are not only important when leading staff but also when interacting with the community.

My organization employed numerous communications vehicles during this crisis. For months, a daily news briefing went to all staff, which often included videos from senior clinical staff members providing important updates on topics such as changes to treatment protocols.

We also created a new variation of our CEO podcast. Over several weeks, I had one-on-one conversations with employees from across the organization—from clinical staff to support teams to call advisers—about their experiences on the front lines.

These discussions, called "Hope in Action," were recorded and distributed—allowing the wider community to meet some of the front-line heroes helping to navigate this health crisis.

Be Visible and Present

During a crisis, it is so important for our front-line workers and the entire organization to know that senior leaders are in this with them. I still do rounds in our EDs and ICUs, and I make sure to listen more than I speak.

Visiting with staff during rounding has helped me better understand the resources and support staff need. It also inspires me. The most common thing I hear from staff members is the pride they feel knowing that their time and talent makes a major difference.

During one podcast episode, an environmental services colleague from one of our EDs talked about how the pandemic has made him realize just how essential his role is to infection control.

Hearing from the health system's heroes like him has helped lift my spirits and motivated me.

Plan for What's Ahead

We must look to the future and make plans that account for both current and future threats.

Many people are practicing medical distancing, putting off needed treatment due to fear of interacting with healthcare facilities. In the months ahead, this could result in influxes of more—and sicker—patients as we attempt to return to a "new normal."

In addition, members of our community face daily challenges, such as food insecurity, lack of transportation and behavioral health issues, many of which have been heightened by the events of 2020.

When we eventually return to whatever new normal awaits, we are still going to be the force that's needed to help this community heal and prosper.

--Adapted from "Hope in Action," *Healthcare Executive*, by Dennis W. Pullin, FACHE, president/CEO, Virtua Health, Marlton, N.J.

The Unexpected Side Effect of COVID-19: Collaboration

With the arrival of COVID-19 came chaos. And from that chaos rose innovations that have transformed healthcare delivery. Yet, according to healthcare executives, during the interim between the arrival of the pandemic and the innovations that followed, a remarkable phenomenon occurred: unprecedented collaboration.

Walls between siloed departments within hospitals tumbled down. Representatives from competing hospitals met to share information. Community organizations and public health departments exchanged data with health systems. Physicians, whose offices had closed, shared their personal protective equipment with colleagues on the front-line of the battle.

Innovation executives participated in roundtable discussions during the virtual **HealthLeaders Innovation Exchange** this summer to share experiences and ideas with other hospital and health system

colleagues. One of the themes to emerge from that discussion was the value of collaboration in the innovation process and the many forms it has taken.

Read more about thee five ways collaboration has helped change the healthcare landscape during the COVID-19 pandemic, along with the advantages this type of cooperation provides to the industry.

--Adapted from "The Unexpected Side Effect of COVID-19: Collaboration," *HealthLeaders Media*