Coming up on Mayo Clinic Q&A:

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As the COVID-19 pandemic stressed medical institutions this past year, Mayo Clinic in Arizona adapted the care for patients with innovation, such as expanding their virtual visit capabilities.

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Welcome, everyone to Mayo Clinic Q&A. I’m Dr. Halena Gazelka. The past year has been filled with challenges as the COVID-19 pandemic stressed healthcare systems, and even altered the way that we deliver health care. But despite the pandemic, progress continues at the Mayo Clinic in Arizona where expansion is underway. Arizona.Bold.Forward is one of the largest expansion projects in Mayo Clinic history, with investments both in the physical and the technological future of health care. The project will double the size of the Mayo Clinic campus in Phoenix. Here with us to discuss this today, is Mayo Clinic, Arizona CEO, Dr. Rick Gray. Hi, Rick, thanks for being here.

Dr. Richard Gray
Hi, Halena. Great to be with you.

Well, it is so fun. This is one of my favorite parts of my job is to get to have new people on the program and hear about what they do. Obviously, you and I work together, but I haven’t gotten to interview you before.

Yeah, it is great to have a chance to do so.

Rick, you’re a CEO of a large healthcare organization. Tell us a little bit about your journey. How did you get to be where you are today?

Well, it’s interesting. I don’t know how far back you want to go. But, I guess I would start by saying I grew up on a cattle ranch in Michigan, the youngest of seven children and the only boy. So, you can psycho analyze me as to the effect of having six older sisters. But I began at Mayo Clinic really, as an intern. I came straight out of medical school and did my surgical training at Mayo Clinic in Arizona. And then as a Mayo scholar, which is a connection back to Mayo Clinic, I went to the H. Lee Moffitt Cancer Center and did
surgical oncology training. So, I came back to Mayo Clinic as a cancer surgeon, and I really have had my career dedicated to breast cancer, melanoma and soft tissue sarcoma, or caring for patients, and my research. I'm also very involved in Mayo Clinic education activities, leading a surgical training program during my time, and as you said, I've also had many wonderful leadership opportunities here at Mayo Clinic, within the education realm, within the Department of Surgery, within the Cancer Center. I have even had an interesting task as a co-leader of a transformation of our digital environment at Mayo Clinic called the Plummer Project, which changed all of our EHR platforms and was a big undertaking for Mayo Clinic. But, as you said, I've now been CEO of Mayo Clinic in Arizona for a little less than two years. And, it's been a fabulous experience, although they did promise me no pandemics coming into it.

Dr. Halena Gazelka 03:24
Well, they were wrong about that.

Dr. Richard Gray 03:26
They were.

Dr. Halena Gazelka 03:27
Rick, you kind of embody the three shields of Mayo Clinic, patient care, research, and education. That's really fascinating.

Dr. Richard Gray 03:36
Yes, it's wonderful. It's a wonderful aspect of being a physician at Mayo Clinic, the ability to be involved across all of those arenas, and it just really enhances our experience and is important for doing the right thing for our patients to interconnect all of those aspects.

Dr. Halena Gazelka 03:54
Do you still see patients?

Dr. Richard Gray 03:57
I do not. So, we have a physician leadership model at Mayo Clinic that really involves having physicians that see patients involved in leadership. And really, my position is one of the only exceptions to that. I found that I could see patients, but it would be so limited,
that it would really only be good for me, not good for the patients and for my colleagues, so I did give up my practice.

Dr. Halena Gazelka 04:25
Well, that makes sense. Rick, let’s take a look back at 2020. When you look back at that pandemic that you just mentioned, how has Mayo Clinic Arizona navigated all the changes?

Dr. Richard Gray 04:37
It really has been an incredible year, a very challenging year. At Mayo Clinic in Arizona, I really think like across Mayo Clinic, it’s really been about being nimble and being flexible and constantly learning. We pride ourselves at Mayo Clinic as being a learning organization and obviously our scientific basis and educational model help foster that. But never have we had to learn as quickly and adjust as quickly as we did during the course of this year. So, in Arizona, we really went through multiple phases beginning with that initial lockdown phase in March and April. I think that was dominated by uncertainty and even fear. That was then followed by what I’ll call a recovery phase, where so many people with non COVID health care needs had to have those delayed or deferred, and we needed to catch up and provide that serious or complex care that people count on Mayo Clinic and Mayo Clinic in Arizona for. But then Arizona was caught in that summer surge in the sunbelt that we all remember back in June, July, and August. And, that was a return to limitations on what we could do because of the overwhelming number of COVID patients. And then, we went through another recovery phase and then a winter surge. And, we’ve really just emerged from that now. So, we’re excited to be back in that catch-up phase where we can meet more of those serious or complex needs. But, it’s been incredible to see how nimble and flexible our staff has been during those surge phases. There were many days where, for example, our transplant surgeons would be on the phone with our critical care physicians and our surgical services leaders figuring out hour to hour if we had capacity and critical care to move forward with, say a liver transplant for a patient in need. And that type of communication and coordination was incredibly important for Mayo Clinic in Arizona to navigate this.

Dr. Halena Gazelka 06:42
Wow, the stories you could tell.
Dr. Richard Gray 06:45
There are a lot of stories to come out of 2020. That's for sure.

Dr. Halena Gazelka 06:49
So, I think all of us are hoping in the future, Rick, that we’re going to move past this pandemic, sometime. It’s a little hard to imagine right now. But, as we get a few years down the road after this, what do you think you will remember the most when you look back at pandemic time?

Dr. Richard Gray 07:07
There will be a lot of things to remember, certainly, as I mentioned that initial uncertainty and fear of what would this look like? What would it mean? What would it mean, to keep our staff and patients safe? I think that will be a memory that all of us will carry forward from it. But, as you said, as we get a little further out, I do think that all of the creative solutions and accelerations in healthcare transformation, a lot of those pieces will be what we will carry with us because those will still be a day to day part of how we’re taking care of patients and how we are performing our research and education duties. And, if anything, I always say we’ve learned humility from this, that we don’t always know how to predict exactly what’s coming our way, and even in the midst of COVID-19, to try to be able to map out what would be the next steps, we could only get so far. And, those reminders of what we are and are not in control of, and again, that importance of flexibility and making adjustments along the way will be wonderful. But, probably the thing right now that I say I’ve taken away most from this is what we’ve seen in our Mayo Clinic people and it’s been incredible. It’s been said that you really find out what’s inside something if it’s bumped hard enough to make its content spill out and COVID-19 bumped us at Mayo Clinic pretty hard. And, what we’ve seen spill out is been empathy and bravery and a selflessness to serve our patients and our colleagues. That is really inspiring for me and that’s what I will hold on to for sure.

Dr. Halena Gazelka 08:55
Wow, I think that’s wonderful, Rick. I remember back to the beginning of this whole pandemic, and there were months of just feeling like we had losses, things were being taken away from us. We were restricted in traveling, in going to work even, in going to the store. There was no toilet paper et cetera, et cetera. And so, I started trying to think of what’s good about the pandemic, just to remind myself to be grateful. And so, I have a few things that I think are good about the pandemic. One is that I’ve learned to say no, a little
bit more, and it’s been okay. And then I like Zoom. I’m meeting with you on Zoom. I’m wondering, Rick, what do you find good about the pandemic, what will you take out of this as a positive?

Dr. Richard Gray 09:38
Well, I do think those lessons learned about how we can make decisions quickly and do it in a streamlined way. Mayo Clinic, for those listening, has a long history of consensus-based decision making, which has served us very well in our committee systems and other things. But we learned there are times, and there are circumstances where we need to streamline our decision making. So, again, we can learn and make those adjustments quickly and deploy those to the people that need them. So, I think that learning of how to adjust and simplify and push out decision making will be something good that we can walk away with. And, of course, as you know, Halena very well, even before the pandemic, Mayo Clinic rolled out our road to 2030, our 2030 strategy that we dubbed Bold.Forward. And there were aspects of that such as greatly increasing telehealth services that were just accelerated by the circumstances of the pandemic. No one would ever wish for an awful pandemic like this that has reaped so much devastation in order to accomplish those goals. But nonetheless, that is a silver lining for which we can be grateful, because everyone saw the benefits of what we were trying to work towards. So, I could give other examples of our 2030 roadmap that have really been accelerated, like hospital at home services, and other types of things. So, you’re right, it’s wonderful to focus on what we can be grateful for, even in circumstances that are very trying.

Dr. Halena Gazelka 11:18
I think what you just shared is wonderful Rick, that we had these plans to move forward to certain places, and in some ways the pandemic has enabled us to do that or even accelerated that, it’s really interesting.

Dr. Richard Gray 11:31
It has. It has validated a lot of our thoughts of what the future should look like for Mayo Clinic, and for the transformation of healthcare that we’re trying to lead in a patient centered way.

Dr. Halena Gazelka 11:42
At the top of the program, I was mentioning all of the expansion and changes that are going on at Mayo Clinic in Arizona. Tell us a little bit about that. How is that progressing
during the pandemic, and what would patients see when they came to the campus?

Dr. Richard Gray 11:56
Well, there's another thing to be grateful for. We have Mayo Clinic in Arizona and are grateful that we have been able to stay on track with Arizona.Bold.Forward. Despite the challenges of the pandemic, we worked closely with our construction partners to keep their workers safe from COVID, and have been able to keep it on schedule. And we're now about 25% complete. And, as you mentioned at the opening, this is an exciting expansion, 1.6 million square feet that we're adding in all aspects. So, we're adding inpatient care, we're adding emergency department and laboratory space, outpatient care areas, and we're expanding our education and research footprints. So, this is classic Mayo Clinic undertakings of ensuring that all of our what we call three shields, practice, research and education, come forward together. But, as to what our patients will see, I think they'll see a lot of what we were talking about in our 2030 strategy. How is Mayo Clinic moving forward with the transformation of healthcare by blending the physical and digital worlds together in the right balance. Of course, they'll see beautiful spaces that are intended to promote healing for our patients, and comfort and peace for their family members. But, they will experience a lot of things through those digital connections that will also just make their life a little bit better and a little more convenient, and a little simpler. And, we could all stand a lot of simplification within healthcare. But, I would be remiss without mentioning that another important aspect for us is taking care of our staff, creating new spaces. And, it was a beautiful thing to see when we held focus groups with our patients and family members, as we were planning Arizona.Bold.Forward and ask what do you as a patient or family member want to see in all of this. They offered us some wonderful suggestions. But at the end, they kept coming back to please take care of your people. We love coming to Mayo Clinic for the wonderful cutting-edge technology and treatment modalities, and architecture is great, and healing atmospheres are important, but we really come here for your amazing people that put together the solutions for us. So, please take care of them. And, it was wonderful again, to see that selflessness from our patients and their families.

Dr. Halena Gazelka 14:27
Isn't that neat? Rick, that even in the midst of patients needing to go through medical care, they're still caring about the staff caring for them too that's really neat. So, Mayo Clinic Arizona excels in many, many areas of practice, Rick, and I'm wondering, can you tell us some of the big highlights from the last year?
Dr. Richard Gray 14:47
Well, it feels like the last year was all about COVID-19, but it wasn't. COVID-19 certainly challenged us and showed some of the metal of Mayo Clinic and in particular of Mayo Clinic in Arizona. And, I should mention actually all of the top 20 US News hospitals in the US, the honor wall, they call it, Mayo Clinic in Arizona cared for the highest percentage of COVID-19 patients.

Dr. Halena Gazelka 15:13
Oh, wow.

Dr. Richard Gray 15:14
So, it was it was an incredible challenge, but our people really stepped up to it. And to your point, were able to provide a lot of amazing things, much more so than just COVID-19. So, one of the things we're most proud of in 2020, is that Mayo Clinic in Arizona became the number one solid organ transplant program in the nation.

Dr. Halena Gazelka 15:40
That's amazing. Congratulations.

Dr. Richard Gray 15:43
Yeah. Thank you. In a very challenging year where transplants in the US actually went down by 2%, in our program, they went up by 6%. So, that happens through stories like I related earlier of that careful coordination to make sure we can balance all the considerations and a lot of innovations that have made our team three times more likely than other transplant programs to be able to accept an organ, and therefore, the fastest in the nation to move patients from being listed as in need of a transplant to actually receiving that gift of life. So, lots of breakthroughs in cancer, neurosciences, cardiovascular health, the transplant programs that I talked about plenty of scientific breakthroughs, both in COVID and non COVID. care, just again, incredible to see how are people powered through these challenges, and tried to make the most of them. Like you said, be grateful for the pieces we have instead of just focusing on the challenges.

Dr. Halena Gazelka 16:48
Rick, I know that in Arizona, you have something called the med tech incubator. What
does that mean?

Dr. Richard Gray  16:53
Yes. So, we have a program called a med tech accelerator, a med tech incubator, and this is really a partnership between Mayo Clinic and early phase companies that are bringing innovation and especially digital and technological innovation into healthcare. Many of these early stage companies have a lot of capabilities, and especially technological expertise, but not obviously the depth of medical care knowledge, or scientific healthcare knowledge that Mayo Clinic possesses. And so, we really feel strongly that we can bring together capabilities on behalf of patients and that patient centered transformation of healthcare that I talked about. And, this is in cooperation and coordination with Arizona State University, that we are able to bring in these companies, partner with them, accelerate what they’re doing, while at the same time accelerating what Mayo Clinic is trying to do for the future of healthcare.

Dr. Halena Gazelka  17:56
I think one of the reasons that I wanted to work at Mayo Clinic is that I was so impressed that not only are we attempting to provide absolute excellence in patient care, and in education, but we’re always trying to think ahead to what the next changes in healthcare might be that would advance that care or make it even better.

Dr. Richard Gray  18:16
Absolutely. We certainly know that Mayo Clinic has become number one for a reason. But, we aren’t saying we’re number one, and therefore we should keep doing things the way we’ve done. We’ve said we’re number one, because we continue to innovate, we continue to look for that next new solution, and we want to do that as quickly as possible. And things like the medtech accelerator and other collaborations can help us to accelerate that even more quickly.

Dr. Halena Gazelka  18:46
Rick, you were talking a little bit about the collaborations and partnerships that Mayo Clinic has with Arizona State University and other tech companies. How does that benefit our patients, Mayo Clinic and the other entities?
Dr. Richard Gray   19:02
It really does come back to the fostering of innovation and having that transformation happen more quickly. If we at Mayo Clinic, tried to create every capability that is necessary for the transformation of healthcare and where we need to go, it could take us a very long time, a lot of resources, a lot of people when there are others out there who are mission focused and share our values, who have complimentary capabilities that we could come alongside and work together. At Mayo Clinic, we always talk about that our core value is the needs of the patients come first. And if we really think that, then we’re not going to try and do everything ourselves if doing it with others is going to allow us to put the needs of the patients first. And so, that’s a core part of who we are. It goes back to the Mayo brothers and their willingness to collaborate, share their knowledge and learn from others. And we’re putting that to practice even now, today.

Dr. Halena Gazelka   20:09
I think that’s really fascinating that even in the research realm, we collaborate. That’s certainly true in clinical medicine, and it’s one of the things that most impresses our patients that I can call you when you see a patient, or you’ll call me and ask me to see them, and we can discuss patients in group settings, different roles, and I think that’s great.

Dr. Richard Gray   20:33
It’s part of our culture, isn’t it, to work together on behalf of the good of the patient. I still remember, I was brand new on staff at Mayo Clinic, and I saw a patient with a difficult problem. And, I didn’t think it was the problem that she came to see me about, I thought it was a little different, and I walked down the hallway down to another department to someone that I thought might be more related, even though the whole backstory didn’t make sense. I just had a feeling it was more in the realm of this expert than I. And when I showed it to him, he said, Oh, yeah, I just got off the phone talking about my research paper that I published on this exact problem. Let me come down and help you with her right now. And I said now, that is why I want to be at Mayo Clinic.

Dr. Halena Gazelka   21:19
You just described it. That’s wonderful. Rick, every one of our institutions, Florida, Arizona, Rochester, our institutions in the Midwest, have a lot of different talents, capabilities. How do you think may patients select which Mayo Clinic they should go to for care?
Dr. Richard Gray 21:39

Yes, we used to talk a lot about being one Mayo Clinic with three doors. And we tried very hard to make sure that Mayo Clinic is the best place for people to receive multidisciplinary care for serious or complex conditions, no matter where they go. And I think what we were just talking about Halena is the key to that. So, if a patient comes in our doors in Arizona, and has a particular condition, that the world’s expert happens to be in Rochester, Minnesota, or Jacksonville, Florida, we just pick up the phone and make sure that we collaborate and are doing exactly the right thing on behalf of that patient, and vice versa. So, we have a lot of overlapping expertise. But more importantly, we leverage all of the knowledge of Mayo Clinic. And that’s one of the things we want to continue to foster moving forward. We sometimes joke that sometimes Mayo Clinic doesn’t know what Mayo Clinic knows. And so, we want to make sure all of that knowledge and expertise is visible within Mayo Clinic. And more and more to the external world. As you know, Halena, a lot of our work is on creating digital platforms that will allow more access to those patients, and even other collaborating researchers that need that level of expertise and collaboration. And to be able to do it in a broader fashion and in a simplified fashion for patients.

Dr. Halena Gazelka 23:10

You know, I’ve been particularly impressed you talked a little bit earlier, Rick about our electronic health record. And you know, as a clinician, there is a little bit of me, that’s an old dog needing to learn new tricks. And it wasn’t all that fun at times. However, we now have an electronic health record, that I can see the same images and the same clinic reports and lab notes that you can see in Arizona, and that can be seen in Florida, and in our other sites. And that’s really amazing. We used to not share that. Between that and video visits, the ability for us to collaborate on patients is just monumental.

Dr. Richard Gray 23:47

It really is remarkable. And change is always painful, right? Neither you nor I really wanted to learn a different EHR system. And yet, we have to change to move forward, and we did it because it’s for the benefit of our patients. And I would share another brief anecdote that just two weeks ago, I got a notice that there was a new study that showed a particular drug and medication in the perioperative period is probably not best suited for certain categories of patients. And we were instrumenting across all of Mayo Clinic an instant update to all orders sets that contain that medication to assure it was optimally available to the right patients. And that’s an example of what you’re talking about of the power of very quickly spreading Mayo Clinic knowledge and doing it in an automated format that more quickly brings our patients to the cutting edge of whatever is best for
them.

Dr. Halena Gazelka  
24:49
Any last thoughts you’d like to share today, Rick?

Dr. Richard Gray   
24:54
You know, I am so privileged to work at Mayo Clinic for all the reasons we’ve talked about today, but particularly being in this position, I get to see all the amazing work that our people are doing at Mayo Clinic in Arizona and across all of Mayo Clinic. But I know a lot of that work is happening, especially in a stressful year, like we’ve had in many healthcare organizations. So, we saw a real outpouring of appreciation for healthcare and other frontline workers in 2020. And I hope we can keep up that appreciation because we have such amazing people, especially at Mayo Clinic, I may be a little biased, but all across the country and all across the world that are doing wonderful work. So, I just always want to keep in mind how grateful, speaking of gratitude, we should be to all of the people that are that are doing this work day in and day out. It can be hard, but it’s fulfilling, and they do God’s work really.

Dr. Halena Gazelka   
25:51
That’s right. Hats off to health care workers everywhere.

Dr. Richard Gray   
25:54
That’s right.

Dr. Halena Gazelka   
25:55
Thanks, Rick, for being here.

Dr. Richard Gray   
25:57
Thank you Halena.

Dr. Halena Gazelka   
25:59
Our thanks to Dr. Rick Gray, CEO of Mayo Clinic in Arizona for being with us today on
Q&A, to share about the work being done there. I hope that you learned something, I know that I did. We wish you a wonderful day.

Narrator 26:12

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