New FinalMayo Clinic Podcast - Dr. Gianrico Farrugia - YouTu...

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SPEAKERS

Dr. Gianrico Farrugia, Dr. Halena Gazelka, Narrator

N Narrator 00:00 Coming up on Mayo Clinic Q&A,

Dr. Gianrico Farrugia 00:03

I think the pandemic forced me to understand how important my relationships with people are. Relationships matter. And when you have a pandemic, you realize how much they truly, truly matter.

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Narrator 00:17

Leading a world-renowned healthcare institution is challenging at any time. But leading one during a worldwide pandemic...

Dr. Gianrico Farrugia 00:24

As our leadership team worked together, we got even closer, we felt so supported by our staff. And this made us even more determined to repay that trust by making sure we did everything possible to protect them and our patients.

Dr. Halena Gazelka 00:37

Welcome, everyone to Mayo Clinic Q&A. I'm Dr. Halena Gazelka. It has now been just over a year since COVID-19 became a household word and changed almost every aspect of our lives. We have changed the way that we live, we have changed the way that we work, and here at Mayo Clinic, we have even changed the way that we provide patient care. No one knows this better than Dr. Gianrico Farrugia, CEO of Mayo Clinic, and I am absolutely delighted that he is here today to share his perspectives, and to discuss how Mayo Clinic has responded to the incredible changes of the last year. Welcome to Q&A, Gianrico.

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Dr. Gianrico Farrugia 01:14

Thank you. So nice to be here. Thanks for having me on the podcast series.

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Dr. Halena Gazelka 01:18

Well, it is wonderful to be able to put you on the spot because it's not every day that I get to interview my boss.

Dr. Gianrico Farrugia 01:24 All right, we'll see how it goes.

Dr. Halena Gazelka 01:26

Okay. Well, this has been quite a year, Gianrico, you've been at the helm of the Mayo Clinic through what is probably one of the biggest events in human history thus far. And I'm wondering, what has that been like?

Dr. Gianrico Farrugia 01:40

Well, it certainly has been a year with lots of ups and downs. We at Mayo Clinic looked after over 65,000 patients with COVID-19, and despite having the lowest COVID mortality rate in the world, at Mayo Clinic, we still saw a lot of heartache, a lot of loss, as well as of course, we experienced the mental and the physical exhaustion of our staff. Yet, despite having said this, it truly has been an honor to lead the organization and work alongside everybody at Mayo Clinic this past year. We came together, and we fulfilled our mission, and we lived up to our values. We certainly never imagined that the year after approving our 2030 strategic plan to cure, connect and transform healthcare, it would be in the throes of a global health crisis. And really, those first six to nine months have arguably

been the most challenging in Mayo Clinic's history, but because we have invested in preparations for a crisis long before this particular crisis, because we looked after our patients, we looked to our values for guidance, because we worked so well together with our partners, and really because we seized opportunities to develop solutions for the pandemic and for our patients, both nationally and globally, we actually find ourselves in a position we did not expect to be in April last year. We felt empowered to lead, and in fact, we led, and our 2030 Bold.Forward. strategy has enabled us to transform healthcare even during the pandemic. So, I'll stop by saying, for me personally, it was a year with even less sleep than usual. I never felt alone, I really never felt alone. As a leadership team we worked together, we got even closer, we felt so supported by staff, and this made us even more determined to repay that trust by making sure we did everything possible to protect them and our patients. We wanted to make Mayo Clinic sure to be around for the next many, many years to come. And I think we did succeed in that. And we're now tangibly stronger than we were pre-COVID. And we're tangibly stronger in our practice, in education, research and operation and business agility. So overall, Mayo Clinic consistently pulls together in a crisis. I'm very much inspired by what my colleagues do every day on behalf of our patients, and it really showed in the past year.

Dr. Halena Gazelka 03:49

It is really inspiring to work with all the wonderful people that we work with at Mayo Clinic, but also our patients are just so amazing, and the concern that they've even had for us here at the clinic it's mutual. So that was wonderful. If hindsight is 2020 Gianrico, what do you see ahead for us? Do you think there are going to be like permanent changes to our lives from COVID?

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Dr. Gianrico Farrugia 04:12

Oh, absolutely yes. And I think that is a very good thing. But before I answer that, I'd say first, I hope a spark of a lasting change. I hope we as individuals, we as families, remember to remember what is most important to us, and perhaps what is not so important to us and let go of what is less important. From a healthcare standpoint, we absolutely need to make sure there are lasting changes. I've many times said that healthcare is like a stiff rubber band, it snaps back if you let go. And if you look at it like that, then you sort of realize why it's so hard to transform healthcare. It takes efforts to stretch, but also once you transform, it's really hard to stay there. And so, that has been part of what I've been pushing Mayo Clinic to do in the past year. Purposely create barriers that prevent us from going back. And a good example is of course, establishing benchmarks for virtual and digital care, instead of just letting them return the way they were, and I say this because we all want to see our patients in person. I know you do. And we also enjoyed that

interaction, and it's very important for many cases. But the other side of the coin that it's important to meet patients where they are to make healthcare easier for their daily lives and to prevent them from traveling to us when they do not need to, so that that when they need to come, it's easier for them to come. And now what we're seeing is that we can do both physical and virtual care really well and do it seamlessly. And I'll just start with one other quick example in the healthcare workforce. And you know this, you experienced it. Prior to the pandemic, very few of us teleworked. COVID-19 hit. Thousands moved to working remotely. Mayo Clinic now has about 10,000 of our staff, that number about 70,000, and those who work from home 80% of the time, many will continue to do the same. Now, this has a huge advantage, right, because work from anywhere allows us to create the workforce of the future much more quickly, we can recruit the best and the brightest from a much wider catchment area. And so, we can improve excellence and diversity. But at the same time, we have to make sure we make it easier for those who need to come occasionally to work from home. And so we have to create both physical and digital infrastructure, really to support needs that we did not even know existed 18 months ago. And so, everybody needs to feel part of Mayo Clinic's family, irrespective of where you work. So now that we're emerging stronger, we need to make sure that what we've done in the pandemic, we show also works post-pandemic, so that we can continue to transform healthcare, we need to have the data so we can show regulators and payers that they should create a structure to allow for that continued transformation.

Dr. Halena Gazelka 06:54

You know, I'm going to ask you about silver linings in a couple of minutes here, Gianrico, but what you said really struck me. One of the things that you said that I think has been most impressive to me, is the use of virtual medicine and the ability to touch our patients where they are. It doesn't mean that they don't come to Mayo Clinic anymore, but sometimes I can call into a video visit in their home to help prepare them, to check on them once they get home. It really is remarkable. I've really appreciated that.

Dr. Gianrico Farrugia 07:24

And Halena, it also sort of reminds us of this really important point to make is that one thing that pandemic has taught us is that innovation in healthcare is not going to come from outside of healthcare. Yes, it can come, but we shouldn't expect it to only come from outside of healthcare. So now, we disrupt ourselves right when we set up digital healthcare. And we know now that disruption within healthcare with the right partners is the right way to transform in a scalable way. So, this is a fundamental shift. It's a shift where others will not do it for us. Mayo Clinic has to do it. Technology alone will not transform healthcare. Yes, there's a tech component, but there's also human components, which is where the experience of you as a doctor, other doctors, nurses come in. So, you really need to have both, or you won't get a solution to scale. And that digital revolution you just mentioned is a perfect example of that.

Dr. Halena Gazelka 08:21

What you just mentioned leads well into my next question for you, I have found so much surprising about COVID-19, as I'm sure we all have. One of the things that has amazed me the most is the incredible ability to respond, individuals, society, health care, including the Mayo Clinic, but our ability and all of the medical literature that has come out and how quickly lab tests and vaccines have been developed. It's really just been amazing. And I'm wondering, what surprises you the most, or what has surprised you the most during COVID-19?

Dr. Gianrico Farrugia 08:55

I think we all kind of expected that with the COVID-19 extended crisis, that all our attention would divert away from anything else, we stopped making progress in our strategic plan, everything would be put on hold. But what surprised me, and I think a lot of us, is just the opposite happened. The pandemic served to reinforce that our Mayo Clinic Bold.Forward. strategy, which is really to cure more patients, to connect people and data to create new scalable knowledge, and to transform healthcare through our unique Mayo Clinic platform was indeed the right strategy. But it also told us something that is really important that we cannot forget. And that is that we're underestimating the ability of healthcare to transform itself and to tolerate change. And we know this because of some of the examples you gave, when we needed to make guick decisions, we made them, moving our workforce online, or moving into new research on COVID-19, or creating new medical plans for COVID patients or even rotating our staff to wherever COVID was surging, including going to Abu Dhabi, where we have Sheikh Shakhbout Medical City, or in education, 400 education courses were converted to hybrid learning in days, or even launching \$100 million campaign to eradicate racism and increase health equity in a summer of civil unrest. We found we could do so effectively and safely. We found our patients and we benefit from those decisions, and therefore it's important to continue to do so. I also think another welcome surprise is that we quickly discovered we could accomplish so much more with key partners that complemented our expertise than we originally thought. So, I'll give you an example. In 2020, in the middle of the pandemic, we were working with partners like Google and nference, and really many more, took 30 algorithms to ingest new data sources that are available from wearables and homebased sensors, convert them to international data standards, ran them through Mayo Clinic directed algorithms, and then created individualized treatment plans. And of

course, it's that loop, right, that makes it work and makes it so relevant. Because without that completed loop back to the person, there's no benefit. So, I know there were a lot of surprises, a lot of learnings, and yes, among all the grief, and the loss that we all experienced, there's a lot that we know that we have gained that now it's incumbent of us to make sure we use to transform healthcare.

Dr. Halena Gazelka 11:19

That's true, we have gained a lot. If our listeners know anything about me thus far, it is that number one, I love to learn something new, and number two, I love to look for silver linings. And for me, COVID-19 has had a number of silver linings, I think little ones like my cupboards been more organized, a little more time to read a good book, to big ones. And I'm wondering what silver linings have you seen in COVID-19, Gianrico, for yourself and for the organization?

Dr. Gianrico Farrugia 11:49

Well, I'll start with the organization. I think as an organization, we've made close to a decade of progress over the course of one year. So, all this work in the digital space, including using artificial intelligence to inform decision making has been ongoing for many years at Mayo Clinic. But it was the pandemic that pushed us faster and further than we could have imagined. A good example is in July of 2020, we launched Advanced Care at Home. It's a new care model that delivers innovative, comprehensive, and complex care to patients and does it all from the comfort of home, through a new technology platform, we developed with our partner Medically Home. So, what that means is that patients are sick but stable, who normally would be in the hospital bed now have an option to go home and be in a home setting for high quality virtual and in person care. It works because a Mayo physician conducts daily video visits, is on-call 24/7, physician assistants and nurse practitioners visit their homes periodically, and nurses provide 24/7 virtual nursing care. And then to Medically Home, we're networking with other groups that are required to make Advanced Care at Home work. You know, the mundane stuff like who will take care of laundry, who will cook low sodium meals. So, we piloted it during the pandemic, we've shown we can do this safely and effectively for over 400 patients. Now, interestingly, we learned that with this home hospital model, we're able to cut readmissions in half because we can rescue patients before they normally need to come to the emergency room. And of course, that means patients can spend less time with us, and more time with their families enjoying life. And they're really telling us they like it. They gave us a score of 4.9 out of 5. So, we'll see it grow nationally over the next few years. What I found really interesting, it is pairing reverse innovation. Because once patients found they could connect with us 24/7 digitally, then they're saying well,

why can't we do the same when we're in actually in our hospital room? So now we're considering putting same technology into our hospital rooms. Yeah, it's pretty amazing, isn't it Halena. But I do want to end by saying as amazing as it is, Advanced Care at Home, digital visits, remote monitoring, simply won't replace the in-person visits. What they'll do is enable us to care for patients at a distance, and patients have more control. And that's because patients want this, they will demand more virtual in the future, but it's important to understand that it will exist on a care continuum. There's a concept out there that the future goal is to do away with hospitals. That's simply not reality. I know that you know that. The smart hospital of the future is real. We'll need hospitals. We'll need to make them better suited for those to work in the hospital, so they find joy, and then for our patients and their families. So, that's really different from the concept of we don't need hospitals, we do, and we will. So, the ideal we are striving for at Mayo Clinic is a seamless transition of care between in person and virtual care versus choosing one path versus the other.

Dr. Halena Gazelka 14:56

That is amazing, and I just think about how supported the patients must feel when they transition from environment to environment and we're able to transition with them. I just think that's really remarkable.

Dr. Gianrico Farrugia 15:08

It really is, and they're teaching us at the same time as we are finding out how to make this work. And we're incorporating those teachings like we always do. And we now know how to do this better than we knew a year ago. And we'll come to do it better, and we'll continue to work with our partners to make sure it's available for others too.

Dr. Halena Gazelka 15:27 What's been your favorite silver lining, Gianrico?

Dr. Gianrico Farrugia 15:32

I think the pandemic forced me to understand how important my relationships with people are. And I think that the fact that there were times when I couldn't visit people as often as I did in the past, made me realize how important that was for me. And I'll say the same thing at home. I wasn't able to see our son for a long time in Arizona, and that weighed on us as a family. And so, relationships matter. And when you have a pandemic, you realize how much they truly, truly matter.

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Dr. Halena Gazelka 16:04

Yeah, I've been struck by that, too. I almost mentioned that myself, I think that even though there's been distance physically between people, we have used to what we have, social media and technology to grow closer. And I think that's really neat. People are more interested in knowing their neighbors, they're more interested in helping others, and I just think that's a really neat outcome. Gianrico, there are only 24 hours in a day. And I know that you keep a very tight schedule, because I've seen that it's scheduled pretty tight. What does a day in your life look like, and how do you get it all done?

Dr. Gianrico Farrugia 16:38

Everybody gets things done in a different way, right. And I'm no exception. So, I like to get into work early in the morning, so I have time to think and to catch up on the world news. As you well know, and others know, I'm very data driven. So, I have spreadsheets that let me know that my day matches my priorities. I often look at those data. I use the early morning to call my mother who lives in Malta, and then Zoom starts. And somewhere in between, I really like going to seek the rest of the leadership team, and that usually means interrupting their days, usually not always, they tolerate that disruption. I work very closely with Jeff Bolton, my administrative partner, we get to talk several times a day. And I've restarted traveling around the clinic or the hospital to see how everybody's doing. And then at least once a day, in the afternoon, I try to sneak down to Caribou Coffee for an afternoon coffee and bring a chai tea for my chief of staff. I haven't quite figured out why it works that way and not the other way around, but that's the way it is. She has trained me well, yes. I park on the top floor of the parking ramp, so when I go home, I have to walk up to the top of the parking ramp. That's often the most exercise I get during the day. I get home spend time with my wife, and after dinner I get back to work. And then weekends are a bit different. I keep time for my family, I exercise. And I keep time for my lab. It's still going strong thanks to a very capable team of colleagues. Then I prep for the coming week. I prep for this podcast. I prep for any other interviews I have to give. I watch soccer, and then the cycle starts again. But I say that those around me, including you and certainly including my chief of staff, including Jeff Bolton know, they and I are happiest when I'm busy. And I certainly cannot complain about too much downtime at the moment.

Dr. Halena Gazelka 18:21

That's great. Gianrico, when I work with residents and fellows, such as on our hospital service, I like to do something with them that I call meet and greet. First of all, I ask them to tell me their life story in three minutes or less, tongue in cheek, of course. And then I ask them what superpower they would pick if they could choose one. Now I'm not going to pin

you down on a superpower today. I do think that requires some contemplation. So, that's too much for today. But you have had a really amazing career, and I'm wondering if you would share with our listeners just a little bit about where you come from, and how you ended up here in Rochester, Minnesota, as the CEO of Mayo Clinic.

Dr. Gianrico Farrugia 18:59

Okay, I will try to do this in less than three minutes. I certainly don't want to be bested by a resident, so I'll try hard. So, I was born in Malta. It's a tiny, in my opinion, beautiful island in the Mediterranean. My father was a physician. He started the first blood bank on the island, was heavily involved in diplomatic service. And both my parents had a remarkable work ethic. My mother in her 80's still uses her home as the focal point for family gatherings. They both had a really strong moral compass. And I like to think that they were successful in instilling some of those attributes to all three of their children. I went to medical school. In one year of medical school, I met Michael Camilleri, a physician who trained at Mayo Clinic, spent two years in Malta, and then returned to Mayo. And so through him, I got to interview for residency in internal medicine. And Dr. Henry Schultz, who you know, took a chance on me, I got accepted. And Mayo had this great program that allowed me to explore research for the first time. I loved it. I truly loved it. I joined the clinician investigator program, and I was in a series of many times being very lucky. I was mentored by two giants in the field, Jim Rae and Joe Szurszewski. They're still my friends, they are colleagues, they are mentors, I became a gastroenterologist and set up a research lab. And then like everybody else at Mayo Clinic, we're exposed to different committees, and I got involved in space and equipment, and that was the first time that I realized that the wonderful place that is Mayo Clinic does not exist by chance. It takes people who are willing to first embrace our culture and values and are willing to challenge and change what needs made better. That got me into research administration, got me to work with Dr. Nick LaRusso and Barb Spurrier to set up a Center for Innovation, and we remain close friends. And then the first genome got sequenced, it became clear that was going to change medicine. So, I applied for and became the Director of the Center for Individualized Medicine. I'm really still very proud of what we as a team accomplished together in that center for patients. But that Center also gave me the opportunity to visit the other Mayo Clinic destination center in Florida and in Arizona, I saw how vibrant they were, and so when the CEO of Mayo Clinic in Florida retired, I became the CEO there. Four years later Dr. Noseworthy retired, then I became the CEO of Mayo Clinic, and in three minutes, 31 years of my life are over.



Dr. Halena Gazelka 21:20

You make it sound so efficient, but we know that that was a long process in there with a

lot of work and a lot of those really busy 24-hour days. So, Gianrico, obviously when you took this job as the CEO, you had certain expectations about the job and what you'd be able to accomplish. All of us who work with you are familiar with the 2030 plan and where we're trying to head in healthcare. And I'm wondering, did you ever imagine during your tenure that you could face something like this? Can you even prepare for that ahead of time?

Dr. Gianrico Farrugia 21:51

Well, as in most cases, the answer to a question like that is yes and no. I'd say that every Mayo Clinic CEO experiences a significant event in their tenure. Be it an economic crisis, a war, national events like 911. So, I already knew. I knew something would come my way, of course. But I didn't know that it was going to come so early, and it was going to come in the form of a pandemic. Now, Mayo Clinic over prepares for most of everything. And so, the way our leadership teams responded, the way our staff came together, where our patients placed their trust in us, which then of course, our staff reciprocate by keeping them safe. And having the lowest COVID-19 mortality in the world has made me even more in awe of Mayo Clinic than the first day I arrived. And that really is something that sustains me and carries me. So, this has been one of the biggest crises that Mayo Clinic has had to deal with. And every week on Friday afternoon, I poke my head into each office of the leadership team, talk to the other people to say thank you and reflect that we got through another week. I'd say there was a lot of uncertainty, except for one certainty that Mayo Clinic was going to live up to our mission and to our values. We're going to look after our staff and our patients. And that kept us going. And so, it kept us going, we contributed to the national and global effort. So, for example, highly accurate predictive modeling on the surges, needs for ICU beds, new COVID diagnostic testing, 275 clinical trials, 750 applications, 4000 interviews, we had five states and national governments, companies, and lots of people doing great work, including yourself Halena, made me even more grateful that I got to experience Mayo Clinic at its best.

Dr. Halena Gazelka 23:38

Wow, that's wonderful. Thank you for sharing that. Gianrico, as we close today, I thank you very much for being here. It's been fun to chat with you. I'm wondering what you would most like our patients and our future patients to know about and understand about Mayo Clinic.

Dr. Gianrico Farrugia 23:54

Well, first of all, thanks again. And thanks for this opportunity, because I really would like

our patients, be the in-person patients and future patients to know that we are determined. We're absolutely determined to create a better healthcare system for all, and we are going to lead that change. And I'd also like them to know that Mayo Clinic is safe. We're open for them to come. We remain concerned about non-COVID-19 related mortality rates because some people are delaying care. We know that health care facilities across the world really are generally safer than the surrounding communities, certainly at Mayo Clinic. Yet we've seen a decreased demand for preventative services across our sites, it's happening at other medical centers and that's worse. So, even though it's too early to gauge the precise effects of delaying care, it will have an impact. In our practice, demand for colon cancer screening, for breast cancer screening was down as much as 60% early on in the pandemic. And that's 1000s of procedures that were deferred. And so, there are now many examples of patients putting off care that end up either in the emergency room or even more tragically, not making it to the emergency room. Our own physicians published a study that showed that there was a decrease in about 50% in emergency room visits in mid-March and April of 2020, with a corresponding increase in outpatient mortality. So, the message bears repeating. Seek care when you need it. Don't ignore your health. Get your mammogram, your colonoscopy, take care of your mental health. We and many other hospitals and clinics are fully open for face to face and virtual visits. So, know we're also creating the future of health care to meet your evolving needs and expectations. You need new cures for disease, which we're doing our part by discovering through big data and Al initiatives. We're creating a platform. We hear your need for simple, convenient, and more affordable access to medical expertise, and we'll respond. We'll make sure we have virtual care, but we'll also make sure that we'll give you the hospitals you need for the future, smarter hospitals, even able to deliver more complex care. So, we already are at the point where our orthopedic surgeons can have a person arrive at six or seven in the morning, implant a hip, and the patient is home by 11am. And then we look after our patient digitally. But at the same time, we can assure you we're going to be doing and inventing more complex life-saving procedures that require more teamwork, and longer hospital stays. And a smart healthcare system of the future needs to be bold. So that's what we're planning on doing, and we're executing it with our partners Google, Medically Home and nference. So, together we will truly transform healthcare.

Dr. Halena Gazelka 26:35

Beautifully stated. Thank you for being here. Dr. Gianrico Farrugia, CEO of Mayo Clinic. I hope that you have learned something today. I know that I have, and we wish each and every one of you a wonderful day.



Narrator 26:47

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