

Thomas M. Priselac Talks About Leadership and the Inevitability of Change in Healthcare



The National Center for Healthcare Leadership is proud to present the 2007 National Healthcare Leadership Award to Thomas M. Priselac, President and Chief Executive Officer of the Cedars-Sinai Health System in Los Angeles. During his nearly 30-year healthcare career, Tom has earned a reputation for commitment to excellence at every level of Cedars-Sinai—patient care, research, education, and community service. As president of a leading academic medical center, he is highly regarded for his willingness to innovate, take bold moves, create new knowledge, and share his findings with the field. Under his guidance,

Cedars-Sinai has earned and maintained a stellar reputation for its patient-centered care, biomedical research, and inspired learning environment for all health professions. Tom has made lasting improvements to the health field and important contributions to future leaders. For his dedication to advancing the nation's healthcare, NCHL salutes Tom Priselac and thanks him for his inspiration to the next generation of healthcare leaders.

Thomas M. Priselac
President & CEO
Cedars-Sinai Health System

Education
BA, Biology
Washington and Jefferson College
MPH, Public Health, Health Services
Administration and Planning
University of Pittsburgh

Career
Montefiore Hospital
Pittsburgh (1975 – 1979)
Cedars-Sinai Health System
(1979 – Present)
1988 – Executive Vice President
1994 – President and CEO

Boards and other affiliations
Chair-elect
American Hospital Association
Past Chair
Association of American
Medical Colleges
Chair, Healthcare Committee
Los Angeles Chamber of Commerce
Adjunct faculty member
UCLA School of Public Health

About Cedars-Sinai Health System

Founded in 1902, Cedars-Sinai has more 2,000 physicians, 9,000 employees and 2,000 volunteers. In 2007 it was named to the *U.S. News and World Report* "Best Hospitals" Honor Roll for excellence in 10 medical specialties. For the past 19 years, it has been named Los Angeles' most preferred hospital for all health needs in an independent survey of area residents. In addition to its 952-bed medical center, Cedars-Sinai Health System comprises a Medical Delivery Network (including the Cedars-Sinai Medical Group and Cedars-Sinai Health Associates) and the Burns & Allen Research Institute. Cedars-Sinai is internationally renowned for its diagnostic and treatment capabilities, breakthroughs in biomedical research, and outstanding medical education.

A few things are deeply embedded in Tom Priselac's make up. First are values—including the importance of community—that were instilled by his parents. Second is the inspiration from a college athletics coach who taught him about commitment and passion. And third, the quest to continually improve. Those are the attributes Priselac has brought to Cedars-Sinai Health System in his role as President and CEO, and which have been a perfect fit with the culture and mission of Cedars-Sinai. When you put it all together the result is one of the nation's most widely respected academic medical centers.

How do you lead a large, complex healthcare system like Cedars-Sinai?

A key role for people in leadership is communication: I try to spend a lot of time communicating with a wide variety of people and groups in Cedars-Sinai tackling issues as well as understanding changes in the external environment and engaging people in identifying what our response to these issues should be. Face-to-face communication is an important part of the culture of Cedars-Sinai. E-mail alone would not work. In this setting a lot of personal presence, personal attention, and carrying the message directly is required. We do it with regularly scheduled medical staff, management, and employee opportunities. I try to use whatever opportunities I can to reinforce our messages. Personal communication must also come from the other members of the management team as well as our medical staff leadership. In addition to having an excellent management team, I am fortunate to have an enlightened medical staff and medical staff leaders who share our commitment to quality and carry that message to their colleagues throughout the institution.

What is the most significant thing you do in your leadership role?

The job of a leader in a healthcare system like Cedars-Sinai—one that is large and complex—is to help translate the external environment and realities to everyone involved in the organization and then to work with them to identify a common vision about what we need to do to continue as a national leader in providing outstanding patient care, research, and education.

Are you bothered that a few people still think of Cedars-Sinai primarily as the “hospital to the stars?”

While it speaks to our quality that people who can go anywhere in the world for healthcare choose to come here, celebrities are actually a very small portion of the patients we care for. A lot of people aren't aware of the fact that Cedars-Sinai has one of the largest Medicaid patient volumes of any hospital in California, and that we provided more than \$135 million in community benefit last year.

So your job as a leader is to inspire and motivate your staff?

I've learned over the years that a big part of the art of leadership is to make sure we have agreement and understanding about our goals and our assignments, and then I try not to micromanage. At the same time, we have effective accountability mechanisms in place to help people achieve their goals. Cedars-Sinai attracts employees, medical staff, and trainees who are high-achievement oriented.

What other tools do you think are critical to be a successful leader?

I come out of a planning background, so part of my nature is the extensive use of planning tools. I have found that creating the right kinds of tools and committing to making them relevant will drive communication. We use a dashboard that reports desired outcomes for different aspects of our institution's mission. We also have very active quality committees. We continually review “red-green” reports that show targets met and not met, which allows us to focus on how to overcome obstacles to success.

Beyond the tools, what does your leadership style look like?

If you go beyond the tools, I think the role of the leader is to recognize that the need for change is inevitable, and then to embrace it. Part of what you have to do as a leader is embrace change and have an ongoing commitment to excellence. And a leader needs a deep personal commitment to what he is doing. Healthcare is a very collaborative endeavor, so people can quickly ascertain the nature and extent of a leader's commitment.

What are the big issues healthcare and Cedars-Sinai are facing?

The increasing demand for value in healthcare is the biggest challenge. We are doing a lot of work on this in our setting. We have the good fortune of having a reputation for excellent quality. But our cost structure—because of our academic

mission and because of the nature and volume of our high-end specialty clinical services, research, and teaching—is higher. We are working on ways within our mission to be more efficient and more effective. This relates to operations and effective resource management.

How does Cedars-Sinai approach leadership development?

We have organized programs to provide leadership and management development that crosses different career stages and career paths. One of the things we are proudest of is our physician leadership development program, which is available to all members of our medical staff. This program, designed by the physicians, has involved physicians from every department. Each physician takes on a current issue facing the institution and works with other physicians and administrative leaders to reach consensus on solutions. A recent project focused on the turnaround time on imaging reports. The projects often integrate physician issues with some part of our broader quality strategies, such as hand hygiene. So a couple of physicians might tackle interventions to increase compliance and come up with strategies that can be effectively implemented. We strive to find issues that are relevant to their individual interests as well as being relevant to the entire medical staff.

What is one of the thorniest leadership issues healthcare faces?

During the '90s and early part of this century, graduate programs in healthcare management, like other healthcare professions, lost their attractiveness for a lot of young people. That is starting to turn around, but still remains an issue: we need to have sufficient numbers of people with master's degree educations—that is critical. The other crucial need is to strengthen the depth of leadership skills in our managers and supervisors. It is a big challenge for hospitals to find time for leadership development. Currently, a lot of leadership skills come about from experience, which is fine, but it needs to be augmented by formal opportunities for leadership development.

What is the role of teamwork in managing a large hospital?

Caring for patients is the ultimate team sport, especially in a teaching hospital where a patient may come in contact with as many as 70 people in a 24-hour period. You cannot take care of someone well or efficiently without a substantial team effort. A good example is our participation in the national Transforming Care at the Bedside initiative, which engages our nurses, other members of the healthcare team, and patients

and their families in designing and testing new patient-centered approaches. Another initiative is our MD/RN Collaborative, which is in every operating unit of the hospital. The whole purpose is to look at the interaction of the nurse/physician team to get their ideas about how to work together to provide the best possible care for each patient.

What is the role for a prominent healthcare leader in the political arena?

There's no question that politicians are anxious to hear from hospitals and the healthcare field. Those of us in healthcare leadership need to articulate the critical role that hospitals play in their communities and give objective advice to others who will be involved in making policy decisions, to help them understand how these changes will impact our communities. We also need to listen carefully to the concerns expressed by other constituencies about healthcare, and take those concerns to heart.

As a past chair of the AAMC (Association of American Medical Colleges) and current chair-elect of the AHA (American Hospital Association) you have taken your leadership skills beyond Cedars-Sinai. Why is that involvement important to you?

Hospitals need to make sure that real-life information is being included when broader policy decisions are being made that affect hospitals, physicians, or other parts of the delivery system. So it is in the best interest of all hospitals to have a presence and voice at the larger policy platform. Despite the extra work, this involvement was instilled in me from the beginning of my career in hospital administration—that participating in these organizations is part of what I signed up for.

