

Q&A: System's chief clinical officer keeps striving to innovate

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Like beauty, “clinical excellence” can be in the eye of the beholder. And beholders such as the Centers for Medicare & Medicaid Services (CMS), the Leapfrog Group and *U.S. News and World Report*, all have ranked AdventHealth's Central Florida Division hospitals as among the best.

CMS evaluates hospitals based on their mortality rates, safety of care, readmissions, patient experience, and timeliness and effectiveness of care. This year AdventHealth Central Florida Division hospitals in Daytona Beach and Orlando earned a five-star rating from CMS.

Additionally, the Leapfrog Group gives hospitals a letter-grade, which the coalition of major employers says is based on “how likely they are to experience accidents, injuries, errors or harm while in the hospital.” Thirteen AdventHealth Central Florida Division hospitals earned an A grade.

Several AdventHealth hospitals also achieved national or “high performing” rankings in specialties, procedures or conditions by *U.S. News and World Report*, with AdventHealth Orlando ranked third-best hospital in the state, nationally ranked in four specialties, and designated as high-performing in six specialties and 16 procedures or conditions.

The physician leading this team is Neil Finkler, MD, recently promoted to the new position of chief clinical officer for the seven-county Central Florida Division, and is responsible for the entire continuum of clinical care. As a gynecologic oncologist who has been with AdventHealth for 30 years in various roles, Dr. Finkler is responsible for the care delivered to about 3.5 million patients a year by 6,000 physicians and other clinicians in more than 20 hospitals and emergency departments, 35 urgent care centers and 300 AdventHealth medical practices.

“That just kind of speaks to the staggering size of just our Central Florida division, and the responsibility that comes with it is equally large,” Dr. Finkler said.

During a recent interview, Dr. Finkler discussed his role, and how he promotes clinical excellence and develops a positive physician practice experience.

AMA: You previously held the title of chief medical officer for AdventHealth Orlando—Acute Care Services, which encompasses all AdventHealth hospitals in a four-county region. Please explain the difference between a chief medical officer and chief clinical officer.

Dr. Finkler: The chief medical officer (CMO) is responsible for the clinical activity within the walls of their facility and only that facility. The chief clinical officer takes responsibility for every aspect of the clinical work that goes on across the entire continuum. So, whether that's in a hospital, an outpatient office, one of our freestanding EDs, freestanding radiologic facility, or one of our physician offices, the sum total of that clinical work really rests with me as the chief clinical officer.

As the chief clinical officer (CCO) within this division, I need to get all of these facilities that the CMOs oversee to act as one collaborative unit. The biggest thing is obviously to deliver medical excellence. And then, as CCO, I'm concerned with how do we care for the community? How do we deliver the best whole-person care, putting the patient at the center of our thinking and delivering the right care to the right patient at the right venue? This is really the full picture of the job and that keeps me up at night, quite frankly.

AMA: Have you learned when a virtual setting for doctor's appointment is best?

Dr. Finkler: One of the blessings that's come out of the COVID global crisis is that it taught those of us in health care, as an industry, how to be innovative, how to be creative, and how to rapidly adapt to changing needs. One of the best examples of this is the widespread use of telehealth during the pandemic.

We've spent the better part of the last decade talking about what are the applications of telehealth. There were lots of limitations, mainly regulatory, and a lot of them were related to payment mechanisms. One of the beautiful things about COVID is the regulatory and payment issues went away because global society had to evolve to keep people safe. And then, lo and behold, we as a health care industry learned how to effectively utilize telehealth as an adjunct to the care that we provide. We discovered the patients really liked it; even the physicians liked it—particularly when they couldn't communicate in any other way.

Telehealth is here to stay. We know how to do it now, so how do we maximize it for the benefit of everybody as we move forward? This is one operation I'll be interested in streamlining for the entire Central Florida Division and providing best practices. We've also looked at we deliver personalized care at home via the "hospital at home" experience.

Dispatch Health is AdventHealth's newest way to care for patients in their own home. Without requiring a referral, patients can request in-home acute medical care for viral infections, COPD exacerbations, congestive heart failure and a few other conditions to start with. Our goal is to adequately treat people at home, so that we can meet them where their needs are without bringing

them into the hospital at a much lower cost, but still having the ability to monitor people.

In the health care industry, we have to look at lessons we've learned to evolve. I've had lots of internal conversations with my CMOs recently, and I've said, one of the things I've learned through the COVID pandemic is that, if we're not failing, we're not pushing far enough. None of us like to fail at anything we do—particularly physicians. But sometimes we must be willing to go out and to try something with the understanding that if it doesn't work, obviously don't repeat that failure, but what did you learn? What are you going to take to that next experience so that we could better the experience for all parties and all people that we take care of?

So, I think as an industry, we need to be a little bit more out on that forefront ledge and say, it's OK to be innovative and it's OK to fail, provided you learn.

One of the beautiful things about the system that I work in is the gamut of facilities. And I also work within a larger system that has facilities spread around the country. We're able to take things and pilot them and figure out what works, where it works, why it works. And if it doesn't work, how do we improve upon that project?

Also, if you get physicians at the decision-making table with you, the process and outcomes will be so much better. Physicians are smart. They're in the trenches. They probably have a much better idea of what will work and what wouldn't work, as well as explanation of “the why” behind it. That's what you need to push innovation forward.

AMA: As the new leader in a new role of a seven-county division, you've mentioned streamlining processes has been a priority. How does that fit in with improving the physician experience and reducing burnout?

Dr. Finkler: I've pushed my leadership to start thinking of physician wellness as a component of the overall physician experience. Physicians have psychological issues, and they have depression, and they have everything else that's in every other walk of society. But there are so many things that contribute to the physician experience that can eventually lead to burnout. So, I like to ask my CMOs, start thinking about what are the rocks in your physician shoes?

What bothers them every single day? We've taken a very thoughtful approach to explore how we can improve that physician experience. I have a physician who is now the chief medical officer of the physician experience, and she is examining a whole host of opportunities to improve the physician experience across the board, such as improving the communication process, creating processes to recognize fellow physician colleagues for excellence and developing mental health services to support our colleagues.

Several years ago, we developed our Coalition for Physician Well-Being website which is a valued resource among our physicians. We have licensed counselors the physicians have access to with no questions asked. Families can take advantage of this as well. In addition, the AdventHealth Provider Well-Being website includes resources to help physicians and advanced practice providers manage stress and avoid burnout.

Bottomline, I think we need to destigmatize that whole concept of asking for help as a physician. And I do believe our Coalition for Physician Well-Being as well as the Provider Well-Being website is helping us shatter the stigma.