

# Prof. David Hayes: administrators must have in-depth understanding of the hospital and be fair, open-minded and transparent as leader

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Prof. David Hayes (*Figure 1*) was the Chair of Cardiovascular Diseases at Mayo Clinic for more than 8 years and now he is medical director of Mayo Clinic Provider Relations, which includes the Mayo Clinic Care Network with the mission to establish collaborative and clinically meaningful relationships with high-quality providers to benefit patients, accelerate innovation and increase value in health care (1). It was not originally his goal to be a physician administrator, but when offered the opportunity, Prof. Hayes felt it was critical to identify successful physician leaders within the organization and learn from them.

He has shared with us in this interview his perspectives in hospital management. He has indicated some important qualities of hospital administrators in his opinion, clarified the culture and management philosophy of Mayo Clinic and introduced its operating principles and team management as well as international cooperation with a great passion and hope for connectivity between Mayo Clinic and the international health care community to discover new ways to benefit patients around the world.

## Interview

### *Hospital management*

**JHMHP: What do you think are some of the most important qualities and skills that hospital administrators should possess?**

**Prof. Hayes:** Skilled hospital administrators, whether physician or health care administrators, have an in-depth understanding of the hospital they manage. Additionally, they understand how employed, independent and group physician practices interact with the hospital and the nuances of those interactions. As to important qualities in a leader, the ability to be fair and open-minded seems essential, followed closely by the ability to approach difficult situations in a straight-forward, transparent manner.



**Figure 1** Prof. David Hayes.

**JHMHP: What do you think are the most important management philosophy or principles or values in the whole system of Mayo Clinic as a worldwide leader?**

**Prof. Hayes:** A number of the principles of Mayo Clinic were established by the Mayo brothers when they formed the Mayo Foundation. From as early as 1908, the founders determined that the organization would be “physician led and professionally run”. For Mayo Clinic that meant establishing a dyad model of physician and administrator teams to jointly lead all areas of the organization. Mayo recognized early on that while a physician leader is critical if the needs of the patient are to be central to the mission, the skills of an administrative professional would complement those of a physician and ensure organizational success. In more recent years, Mayo Clinic’s leadership model in clinical areas has evolved to include a nurse manager as a key figure resulting in a triad leadership team for the practice.

Two other principles have been critical for Mayo Clinic

and hospital management. The first is that Mayo's hospitals are now wholly owned and part of the foundation, which means that Mayo Clinic is a single entity with no financial differentiation between its in-patient and out-patient practice. And second, that our hospitals are closed staff and all our physicians are employed and salaried.

**JHMHP: What are some of the most noticeable changes that have happened in the hospital over these years?**

**Prof. Hayes:** For many years the two hospitals on the Rochester, Minn., campus of Mayo Clinic were independent facilities, though they served only Mayo patients and were staffed only by Mayo physicians. Both hospitals are now formally Mayo Clinic hospitals, operating with Mayo Clinic as a single entity. On our southern campuses, after establishing an outpatient facility in both Arizona and Florida, Mayo Clinic eventually built a hospital on each campus. From the beginning, these hospitals operated as part of Mayo Clinic, not separate organizations. They too serve only Mayo Clinic patients and are staffed only by Mayo Clinic physicians.

#### *From clinician to administrator*

**JHMHP: What are the differences of being a cardiologist and a medical director/administrator?**

**Prof. Hayes:** When I am providing direct patient care, I think of myself as a cardiologist. However, at Mayo Clinic, the synergies between practicing as a physician and serving as a medical director/administrator are important. A basic principle of Mayo Clinic is that this is a physician-led organization. It is stated in our by-laws. The doctors Mayo required physician administrators to continue their practice, in part to be credible leaders with their colleagues. At this time, I still practice cardiology. And as a physician, I understand the pressures of the practice and what physicians are required to do in a changing healthcare environment.

**JHMHP: How did you adapt the new role as administrator at the very beginning? Could you share with us the most impressive scenario that you have been encounter as an administrator?**

**Prof. Hayes:** It was not originally my goal to be a physician administrator. As leadership opportunities were offered to me, I felt it was critical to identify mentors who had clearly been successful physician leaders in the organization and learn from them. The culture and philosophy of Mayo

Clinic support this approach.

In terms of the scenarios I have encountered in this administrative role, I would cite not one example but all those instances when, as an administrator, I engaged in a "crucial" or sensitive conversation with a physician colleague. Such conversations are always difficult, but as the doctors Mayo originally perceived, a shared outlook as physicians helps by establishing credibility. And, again, having a mentor or a coach to assist with the first of such scenarios proved very helpful to me.

#### *Team management*

**JHMHP: As a director, how would you coordinate your team members of great diversity perhaps, to work cooperatively and effectively, especially in a case when they hold different or even opposite ideas?**

**Prof. Hayes:** Mayo Clinic was organized as a team-based and multi-disciplinary approach to medical care. That philosophy carries over into all aspects of the institution so it is natural that we would have multi-disciplinary and diverse teams working together when we are trying to improve or correct an organizational need. We operate in a "culture of safety" which means that we encourage team members to speak out if they see a problem or have a concern. We feel this culture of safety also leads to a culture of cooperation and collaboration. People are encouraged to be transparent and voice their ideas, even if they are counter to previously held positions or the position of others.

**JHMHP: And how does Mayo Clinic keep the staff motivated and creative? Is there any incentive mechanism or program?**

**Prof. Hayes:** There is absolutely no financial incentive. No bonuses are offered. All Mayo Clinic staff are salaried. The motivation is inherent in the culture of Mayo Clinic. From the beginning, Mayo Clinic staff have personally embraced the concept that "the needs of the patient come first". Whether they are engaged in clinical, education, research, or administrative activities, the staff of Mayo Clinic typically cite this simple statement as a guiding value in their work. The logo of the Mayo Clinic depicts three shields, which represent a central focus on clinical care, surrounded and supported by research and education. However, there is effectively a fourth shield, one that represents the significant contributions of administration. Mayo Clinic staff are encouraged to excel in at least two of the shields, and their motivation and creativity are truly motivated by a culture

that recognizes both individual excellence and the power of collaboration. Staff at Mayo Clinic are highly professional and motivated to excel in their chosen areas, but they also share with their colleagues a centrally held belief that the needs of the patient come first, and that working together is the single most effective way to improve the patient outcome and/or experience.

### *International cooperation*

**JHMHP:** Based on your experience of the medical director of Mayo Clinic Provider Relations, would you share with us about how Mayo Clinic establish and strengthen strategic partnerships/cooperation with other entities?

**Prof. Hayes:** Mayo Clinic Provider Relations is charged with establishing relationships both domestically and internationally with alumni, other physicians and hospital organizations. We have found that sharing medical knowledge and expertise with other organizations is best for the patient, whether that patient is on a Mayo Clinic campus or being served locally. Additionally, working with other quality organizations in a collegial and transparent fashion builds a foundation for a strategic relationship with other entities.

**JHMHP:** As for Mayo Clinic, which is recognized as one of the best medical institutions in the world, what are the general challenges in the international cooperation with other entities? For example, what are the biggest difficulties of the Mayo Clinic Care Network collaboration?

**Prof. Hayes:** In dealing with international organizations there are some issues, such as time zones and language differences, that require careful consideration, though language becomes less of an issue given the fact that English is often the language used by medical professionals. It can be challenging to collaborate with international organizations on research protocols, given various governmental and/or legal regulatory issues.

### *Education and training*

**JHMHP:** Could you briefly introduce the current training paths in Cardiology at Mayo Clinic, as well as some training programs or fellowship projects for international young students or doctors from other countries?

**Prof. Hayes:** Training paths in cardiology at Mayo Clinic

follow the pathway defined by U.S.A. regulatory agencies. With that said, Mayo frequently has international research fellows and a number of international candidates who compete for approved training positions. In addition, many international students at various levels, i.e., medical students, residents, fellows, established clinicians come to Mayo Clinic for observerships, and we have long had a visiting clinician program by which students and established clinicians can come to observe a specific clinical area for a specified amount of time. In coming years, we will be looking at how we can extend our training programs virtually and, in this way, be better able to share the knowledge and expertise that can be gained through the educational arm of Mayo Clinic.

**JHMHP:** What are some advances and evolutions in the medical student education in terms of training duration, competency (skills) focus, new models of instruction, etc.?

**Prof. Hayes:** We have recently opened a new branch of the Mayo Clinic School of Medicine on our campus in Phoenix, Arizona. In that curriculum, we are offering additional opportunities for students in the area of public health. We recognize that population health is going to become increasingly important as we strive to develop care at lower cost and higher quality to yield greater value. The new curriculum has the opportunity to provide that foundation for the medical students.

In addition, we have used our simulation centers on all three campuses for many years, but this increasingly becomes a more critical part of the curriculum, not just for our medical students but for residents, fellows and nurses as well.

**JHMHP:** If you could offer words of advice regarding hospital management and taking an administrative role, what would they be?

**Prof. Hayes:** I think the most important thing is to be a fair and transparent leader, and to establish role models and mentors from which staff can learn and develop professionally. In our organization, I have had the privilege of working with a number of physician colleagues who were exceptional physician leaders. They were able to keep the Mayo Clinic mission at the center of everything that they did. They never lost sight of the fact that the needs of the patient come first, but they also excelled at problem solving and managing a diverse and talented group of individuals.

*Personal life and wishes*

**JHMHP: What would you do to relax? How do you make a balance between your personal or family life and the work with clinical, academic and administrative roles?**

**Prof. Hayes:** My family would probably not say that I have excelled at work life balance. And I would be the first to admit that I need to develop additional outlets for relaxation. Certainly, the greatest outlet for me has been to play the piano. I have played the piano since I was a small child, and that continues to be a wonderful way for me to “relax”. I also enjoy leisure travel a great deal and exploring new areas.

**JHMHP: You have made great achievements in the medical field but if you had to look back now, what would you say you're most proud of?**

**Prof. Hayes:** I am grateful for every leadership position that I have held, and I have learned from every one of them. It was a great honor for me to be the Chair of Cardiovascular Diseases at Mayo Clinic for more than 8 years. And it has been a privilege to be involved with the Mayo Clinic Care Network almost from its inception. I am very proud of the fact that we have been able to develop this network of strong organizations who want to work more closely with Mayo Clinic, and I have enjoyed watching it flourish.

**JHMHP: What do you desire most to achieve in the future?**

**Prof. Hayes:** I hope to see the Mayo Clinic Care Network and our international affiliations and other relationships continue to grow. The world seems smaller when viewed through the lens of newer and more efficient telemedicine tools. I look forward to seeing greater connectivity between Mayo Clinic and the international health care community as we discover new ways to benefit patients around the world.

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**Footnote**

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**References**

1. Xu EX. Professor David Hayes: the Mayo Clinic Care Network. *J Thorac Dis* 2016;8:E1570-1.

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