

Liz:

Thanks for joining me and welcome to Dr. Liz on Leading Through Crisis. Hi, I'm Liz Bywater. I'm President of Bywater Consulting Group, and as an executive advisor I work with senior leaders in a variety of organizations and their teams to navigate through challenging times, pivot through change, and succeed and thrive no matter what the circumstance. Today I'm joined by one of my favorite people, Debbie Visconi. Debbie is president and chief executive officer of Bergen New Bridge Medical Center in Paramus, New Jersey. Debbie, thank you so much for being here with me today.

Debbie:

Thank you, Liz. Thanks for having me with you today. I'm honored to be here. Thank you.

Liz:

Yeah, that's wonderful. Debbie and I were speaking before we got on the call. We always have great conversations so hopefully we'll have some things that are of interest to folks who are listening into us today. Just for a little backdrop, Debbie, I'm thinking you and I must know each other for about 10 years now.

Debbie:

It is 10 years actually. Yeah, it is. It is.

Liz:

So I was working with a number of senior leaders, executive officers over at Atlantic Health Systems, and you had just been hired by David Shulkin as essentially chief operating officer for Morristown Memorial, right?

Debbie:

Yep. Yep.

Liz:

We did some work on kind of transitioning into the organization and getting to know your team and doing all of those important things to be successful. And the 10 years have flown by what?

Debbie:

It actually is 10 years. It was 2010.

Liz:

Wow.

Debbie:

So you're spot on.

Liz:

Yeah, well, and you're doing fantastic things now in your role, at Newbridge and we want to spend a couple of minutes making sure we talk about that. Don't let me forget before we get off our call today. I

want to make sure that if people want to learn more about the work you're doing over at the hospital, they can learn more, maybe get onto the website, whatever you think.

Debbie:

Sure, absolutely.

Liz:

The best way to do that. The reason really we're talking today, and the reason that I'm doing this podcast series is to help leaders in all kinds of capacities, whether it's a CEO of a hospital or somebody who's a civic leader, or actually a leader within your family trying to help your children and your partner get through the difficulty of COVID-19 and the pandemic, but to provide some pragmatic advice, some inspiration, create some dialogue around what are the factors that have to be thought through and acted on to really be useful and energized and successful even in such difficult times as we're facing today.

Debbie:

Yeah.

Liz:

So I've got a number of questions. I know I have given you an idea of a few things we might talk about, but it's just a conversation, so we can go in whatever direction we need to, but I wanted to start with kind of a broad question for you, which is, how has this pandemic changed the way you lead whether it's the way you show up, the way you think about leadership or, I mean, I guess the first question is, has it in any ways changed the way you lead?

Debbie:

Yeah, I was given that a lot of thought and, I think that for me as a leader, it hasn't changed. I think it's enhanced my leadership style and, what, how I've grown as a leader, with every day, I believe that we all grow as individuals and certainly as leaders and during this pandemic is no exception to that.

Debbie:

So, I think the things that were important to me as a leader and really have shown to be vital during the pandemic are things like transparency. Many people use that word freely, but this really takes transparency to another level. It's being able to stand in front of your employees, your staff, your community, your government stakeholders, and tell everyone exactly what's going on in your medical center. Even the things people don't want to talk about or hear about like deaths and people getting sick, and the number of patients that are coming through the doors, and those are uncomfortable things to talk about. And so, for me, transparency has been a huge asset, courage to say you're the CEO of a medical center, but yet, we've had X amount of deaths. It takes a lot of courage.

Debbie:

Nobody wants to say they've had any deaths, but to be able to stand up there and say, "Yeah, we have deaths and we're not immune to COVID." And, to be able to, I say, wear your heart on your sleeve in some ways that really does apply here. I'm able to say to my staff, "You know what? I'm with you because I'm scared too. I don't know what this thing is. I've been through a lot in my career and I

survived a lot and we're resilient, but you know what, I'm scared along with you, because we don't know what what's going happen."

Debbie:

And as this continued to emerge for us, it continued to test those things that we hold dear, which is, we know how to treat a disease. We've done this before, but yet it kept coming and kept killing people and kept infecting people on things just kept emerging on us.

Debbie:

So resilience also comes to the test of leadership during this time. It's being there by your staff's side every single day, day and night weekends. And whether you're there in person or whether you're there behind an email or whether you're walking the floors or just being by their side and them knowing that you're there, and really showing the courage and really recognizing them. So there's a lot of recognition that comes into play. I struggled with that too. You always want to thank your staff and say "You're heroes and you're great." But then sometimes you listen to them and they're like, "We're not heroes. This is what we do." And so you have to respect that boundary as well. So, some of those things are challenged in times like this.

Liz:

Yeah. There's no doubt. And I think in each of the things that you mentioned, transparency and courage and resilience, and recognizing people and all of those important things, there is a shifting balance over time, right? And in times of crisis, I imagine certain things you have to emphasize more and then kind of really kind of a reading the impact as you go. Would you say that's part of what you do?

Debbie:

Oh, absolutely. The other key thing is communication. And, you always think of yourself as a great communicator. I mean, we all do, but in a time like this, the communication, I won't even say it's a skill, but it's an ability to communicate broadly, effectively and constantly. I mean, all I do, aside from supporting staff on the ground, I feel like I'm in college again.

Debbie:

I write all day long. Whether I'm writing, I have a daily email that goes out to the staff every single day. It has words of inspiration, words of encouragement. I always highlight a particular unit and department, person tell stories. And then I give them the news, it's how many positives we have, how many people have died, how many people have recovered. So we always try to bring people, ground people like, yeah, this is really bad, but what we're going to get out of it.

Debbie:

So communication is another pillar that I think really has changed and will continue to evolve as this thing continues to evolve.

Liz:

Yes, it's interesting because working a lot with senior leaders, I've always told my clients: Communicate, communicate, communicate. You can't do it too much. You have to do it right and you have to balance it

in some way, but you can't do too much of it. I think in times of crisis, there's no more important time, as people are anxious and uncertain and they need direction and information. So yeah.

Debbie:

It's been huge. It's been huge. And, I know that it's been effective when people use your own emails against you.

Liz:

Sounds like that's happened once or twice.

Debbie:

So in your fourth email then you said this, but also people see me in the halls and they're like, "We look forward to your daily email," and people, you don't realize the power of that, when people like look forward to hearing the voice and whether it's inspirational or just facts, just knowing what's going on in the hospital. The many pockets and especially in a place, a 24-hour operational hospital, the per diem people, the part-time people, the ones that aren't there day in and day out, it's important for them to hear the voice and on a regular basis. So that's been crucial.

Liz:

Absolutely. Yeah. And it sort of brings me into my next question, which is thinking about in such a difficult time as this pandemic has brought upon us, one of the jobs of a leader is to create some sense of optimism and hope, not Pollyanna, but encouragement and inspiration. What is it that you would say has been most effective as you try to instill that in whether it's your staff, patients, families, other stakeholders, government bodies, etc., how are you bringing some genuine, believable hope and confidence to the people around you?

Debbie:

So it's about really being honest and forthright, and sharing the facts and trying to erase or dispel the myths and the rumors. And you take the myths and the rumors face on and you say, "I know you've heard this, but here's the truth." Or, "Let me reference a CDC guideline, a department of health," or, you leverage as a leader, you leverage your position in the industry. So I sit on the New Jersey Hospital Association Board, so I can speak with authority on what we're doing as an advocacy, as an industry. I sit on one of the AHA, American Hospital Association regional policy boards. So I can bring a regional experience and a regional voice to the table, really working with our clinical leaders, and tapping into their knowledge base and their connections and bringing that to the table so that the employees feel confidence that you're not just saying things.

Debbie:

It's based on the facts that we have at the time, these things continuously change, whereas as the virus has been changing, but you bring them credibility. You bring credibility to the table when you're in a good position within your market, within your industry, and you have others or surround you that are experts in the field as well.

Liz:

Which is, I think, such an important point. So, as a leader, sometimes I'd imagine you feel like you have to have all the answers at your disposal, but of course it's never possible and at times like this it's absolutely not possible because there's so much emerging information and things change all the time, and there are so many contributors to mastering this thing. So it sounds like part of what you're saying is

not going up there and saying, "Oh, I have all the answers I'll tell you, but I will learn. I will get out there and gain information. I'll share with you what I learned as I learn it." Is that pretty accurate?

Debbie:

That's exactly right. Yeah, and again, the transparency comes into play and just saying, "Look, I really don't know. This is what we're following the guidance of the experts, whether they be the CDC or the department of health or the commissioner of health or whomever it is we're following their guidance, and we're learning as we go along." A lot of the credibility does stem from the employees recognizing that we're just as human as they are.

Debbie:

But when we do have credible information to share and things to bring forth, they do believe and support what we're trying to accomplish. I always tell my employees, "If you have ideas or if you've heard something or share it with us, because we want to learn with you. So, bring us your ideas." You learn mostly from the people on the ground, how to make a difference.

Liz:

100%, yeah, communication is not all from you to them, right? It's got to be dynamic. You better be pulling from the people who are on the front line. What we could today call really a battle, right?

Debbie:

Exactly. Exactly.

Liz:

It's not business as usual.

Debbie:

At all.

Liz:

Yeah, yeah. Debbie, do you have a story you might want to share about something really inspirational that you've observed either among your staff or patients' families within the community that you might want to highlight or showcase?

Debbie:

Well, I think there's a lot of incredible stories that have come from this. And I always say there's, it's the stars and the dark of the night that have emerged from this crisis. And those stars are that of the bonding of humanity. No matter what level we're at, no matter who we are, we're all, we're literally all in this together. And so what we've seen over the last couple of months is communities coming forth to support our employees, our staff, our frontline heroes. You see it all over the place, heroes work here, but the signs that the writing in chalk on our sidewalks, thank you.

Debbie:

This was a really sweet one. I thought our psychiatric residents, our doctors that are training the residents, they wrote me a letter. And they said they really wanted to thank the nurses and the social

workers and all the staff that are caring for the patients at the hospital. And they asked permission to use the sidewalk chalk. I guess they had seen it somewhere else. And it was just so sweet because these are young doctors coming into the field. They're in the middle of this tremendous crisis and, they're psychiatric residents, so there's all this emotional stuff that they're dealing with with their patients. And so, and I said, "Of course, sure. Write on the sidewalks." And it was so nice. They just put things, love messages and, love the psychiatry residents.

Debbie:

I thought that was such a sweet gesture and such a nice moment in time, employees recognizing each other. We've seen again, communities, all kinds of yesterday, a young girls' soccer team and made these little goody bags that they wanted to give to either staff or patients that were in the middle of the COVID and they dropped it off at the hospital. We've seen so many donations of the handmade masks come to our staff. To me, it's been a whole of community really coming together to recognize what we do. Our staff is fed round the clock with food donations. I don't know what's going to happen when this is over. We're going to starve to death because it's been just incredible snacks and water and food and meals. Air mattresses were donated to our staff. So I think there's a lot of that that we see.

Debbie:

So it's hard to pinpoint one particular story, but certainly when we discharged our first COVID patient that was on a ventilator. You see this lot in the news as well, the clap outs. So all of that coming together has really been heartwarming.

Liz:

Yeah.

Debbie:

It's been great.

Liz:

Absolutely. Yeah. It's interesting. I've seen, and maybe you've seen this too, people writing poems and so on about sort of us all being in this same thing together, and I've seen some back and forth. Some way, "Well, we're all in the same boat." And other people say, "Well, we're not all in the same boat. And some people are sick and have family members are on front lines." But I think that the nicest comeback I've seen to that was, "Well, maybe we're not all on the same boat, but we're all in the same storm."

Debbie:

Yeah. That is true. That is actually true. We may not be in the same boat, but we're still in the same deep water.

Liz:

We certainly are, yeah, yeah. You made me think too of something, we were talking about a little bit recently, which is I would imagine that that going through this crisis and the need for so much group effort, community effort, industrial effort to get to the other side of it, let's change the dynamic in some ways between you and Newbridge Medical Center on the one side and maybe some other area hospitals

that could potentially have been seen as competitors for a limited number of patients, Medicare dollars and so on. Is that accurate? Has there been a change in that relationship and what are you seeing?

Debbie:

Actually, that is, that is one of those bright stars too in the dark here. Yes, we could all be perceived as competitors, pre-March, but what I've seen and experienced really firsthand is all the CEOs of the hospitals in New Jersey, certainly in our region, we are in Bergen County, we've all bonded together. We have group texts with each other. We call each other on cell phones, go along with the day and night, asking each other for best practices, ideas, suggestions, and really practical things like, "Hey Deb, do you have a couple ventilators I can borrow?" Or, I'm calling my colleagues saying, "Hey, I'm really short on gowns. Anybody have any that you can lend me," to more practical things and much more.

Debbie:

Again, we're learning together, so best practices. What are people doing with some of the drugs that are on the market? Are you using them prophylactically? Are you not using them? Where are you with, what are we going to do with asymptomatic testing of employees? What if they test positive? Are we going to put them out for 14 days? So I think that that unity of, of the healthcare community has really been, I mean, it was there to a certain extent, but this has really taken it to a whole other level.

Liz:

Yeah, absolutely. And it sounds like there's such a need for it now although it wouldn't necessarily have to play out as well as it is, but the sense that everyone wins when there's a collaborative unifying effort, rather than who gets there first. I mean, there's no time and space for that at this point.

Debbie:

No one cares. All we care about is saving lives and providing access and being there for our communities when they need us. So that's been really refreshing to have that newly established relationship with, with my peers.

Liz:

Absolutely. And have you thought at this point, and maybe it's premature, because there's so much going on, but have you thought about how do you continue that once the crisis has passed? How do you take hold of the positive changes and build on them rather than sort of going back to business as usual when all this is said and done?

Debbie:

Yeah. I was thinking about that myself and I'm thinking, I don't think we'll ever go back to the way things were. I think the relationships that have been fostered this last few months, I think they're so powerful and were so real that I think that we're going to stay bonded this way for a long time.

Liz:

I think that's fantastic.

Debbie:

That's my hope.

Liz:

Yeah. Well, but you know what? It has to start with hope and then you had hope and some action, right?

Debbie:

Action.

Liz:

Over time and calling people out like they split backs and say, "Wait, wait, we're committed. We're going to keep this thing going."

Debbie:

Yeah, I agree.

Liz:

As change starts to stick.

Debbie:

Yeah.

Liz:

Are there other sorts of changes you're seeing either emerge or accelerate in terms of, of course in your space, health care, new technologies, different ways of delivering service, other sorts of innovations that either went back and were back-burnered or simply weren't seen as useful until now?

Debbie:

Oh yeah. Huge. I mean, we turned things around as an industry in record time. There were no holds barred. We did what we had to do, telemedicine telehealth was a huge movement forward. In the past we were thinking and evaluating and searching and shopping and, do we have money? Do we not? And it was sort of like, "We got to do this, we got to do this now." And it didn't matter. We brought in computers, we bought in a platform, we turned it on. We trained people in record time. But there was also a relaxation of regulatory burdens, if you will. There was a lot of different things that we were able to do during this crisis that, if we were to go back to normal, because just the bureaucracy of healthcare things we have to get approval for.

Debbie:

And so with the help of our governor and our department of health commissioner, they really relaxed a lot of things that helped hospitals move much more rapidly to implement things. So telehealth certainly being one huge example of that, and I guess that's probably the biggest innovation. But even things like meetings like this,, having meetings on Zoom or WebEx meetings, really saving a lot of time and energy, that maybe we had the technology, we just probably didn't use it as much. I think that was a good thing that's emerging from this.

Debbie:

Use of medications and just innovative ways to deliver care, especially in the emergency departments and using space differently. I hope that we don't go back to normal in certain regard because I think our ability to be much more efficient in the delivery of care and, in some ways, even better for patients, if you don't have to come to a hospital for your ambulatory visit, and you can do it on a telehealth visit, that would be great. So I think things like that were really, really helpful.

Liz:

Yeah. It is amazing in times where things have to move more quickly, how much more quickly they can move, when you take away some of the deliberation and the resistance and "Well, it's never been done this way or can never be done that way" and suddenly, "Well, let's give this a try" and things move so much more quickly.

Debbie:

It was even small things internally. One of our divisions had been resisting going to electronic billing. They wanted to stay on paper, whatever, whatever. So, we were trying to convince them and talk to them and get by and yada, yada, but all of a sudden when this hit, they were like, "When can we do all electronic billing?" And I'm like, "Ooh, let's take advantage. Turn that on."

Liz:

Necessity is the mother of invention, right?

Debbie:

Yeah, so we've done some creative things. We've done some creative things.

Liz:

And my guess knowing you, the kind of leader you are is that again, once the dust settles and I don't anticipate we'll ever go back to things exactly as they were, but as the crisis calms down, as we get control over things, to take some time and really look at what are some of the improvements we made. How do we keep those, and how do we also look at the things that maybe didn't work so well and kind of get those out of the way, as quickly as possible, right?

Liz:

The post-analysis, quick, rapid, not stuck in it and then keep moving. Does that sound like something you'd probably be doing?

Debbie:

Oh, absolutely. We're already starting to think about things already because we're going to start to the road to recovery. So we're planning on how we're going to do things differently. What's working great, how can we expand on things and capitalize on some of this energy that we've built, and relationships that have emerged as part of this? I mentioned before all the community coming together. I mean, there've been community supporters for us that I never knew existed and they're sending us all kinds of donations and food. And so, I told my team, "Make sure you keep track of everybody because we want to make sure that they're part of our extended family, our extended community, when we come out of this."

Debbie:

Because, there will be another one of these, and all the experts are talking about COVID 2 which is imminently positioned for the fall, is what everyone is saying, what the experts are saying, which will test us even more differently, because it could potentially be mixed with the usual flu season. So COVID and the flu hitting us at the same time is going to be a real, a real test.

Debbie:

But we're going to be prepared because we were sort of prepared this time around, but now we're going to be well super prepared.

Liz:

Well, absolutely. There's only so much preparation one could have done and so much is a lot. But without having had the actual experience of this thing hitting, right? Now you have preparation plus experience, you put that together, it makes you even better prepared for the next go-round.

Debbie:

Yeah, absolutely.

Liz:

I mean, I'm glad to hear that, and I'm not surprised that you're thinking about how you prepare for the next challenge in this case, maybe the next crisis, but how do you make sure that you are in the best possible position? These are the conversations I actually love to have with my clients. I worked with other healthcare and pharmaceutical and actually all kinds of industry leaders and these conversations, both with the CEOs and their teams around what are we doing especially well, how do we pivot as circumstances change and how do we make sure we're taking advantage of the relationships that we're forming and the new best practices and innovations. It's really important, and you would think it happens all the time, but you know what happens, right? Life gets very busy. We all go back to the stuff that's automatic and familiar and the way we've done things for years.

Debbie:

What's unique here is that this, this wasn't just a week or two. I mean, this has been months now, two months into it. And so this is starting to become your way of life. So I think going back to whatever it was, it's going to feel weird and strange. So I think that there's to be certainly a much more of an appetite to stay the way we are, or at least to capitalize on the things that worked rather than going back to the way it was, because it doesn't make sense to go back there. We, not even as humanity, as a society, will we ever be the same?

Debbie:

Don't you find yourself, if you're watching a movie or a TV show and you see people close and touching and hugging and you go, "Oh my God, there's no social distancing."

Liz:

Put on a mask, stay away from one another.

Debbie:

I know, in two months. And I saw someone the other day walking without a mask and I just felt he looked strange. Wait, where's your face covering?

Liz:

This might be extreme, but when I parked my car today. I just, I had to go pick something up at the store with mask, sanitizer, full disclosure, I'm doing all the right things, but I was in an almost empty parking lot. And I came out to my car after a few minutes in the store and the next car was parked right next to me. And I thought, "Why is that car right next to my car? There's a whole parking lot here. Give me some space." The person wasn't in the car, but.

Debbie:

But it's true. We're never going to be the same as society ever again. I mean, this has really changed us. I mean, just like any crisis, like 9/11 changed us forever, forever. It changed us forever. And so I think this will be even deeper and more longstanding with the changes, but, you know.

Liz:

I agree. When 9/11 hit, and my daughter was just about two. My son wasn't yet born and now I have an almost 21-year-old, and almost 17-year-old. So they only know a post-9/11 world.

Debbie:

That's true.

Liz:

And their children will only know a post-COVID-19 world.

Debbie:

That's true. That's right.

Liz:

Before I let you go, Debbie, what's the one positive that you have observed that you really think will stick and that you really want to see stick.

Debbie:

I think it's the whole of community. I think it's the bonding of people at all levels, recognizing and respecting each other differently than we had before. I think it's just people sticking together and knowing that we've survived this and that we're stronger for it. I think that will carry through for generations to come is how we look at each other as a society. I think that's something that really has been a positive in all of this.

Debbie:

We're all in this together, whether in the same boat or not, but we're all in this together. And just the kindness that has emerged as part of this, thinking about everyone, people that don't have jobs, people that can't feed themselves, the kids with the distant learning, I think all of that will really resonate for years to come.

Liz:

Yes, I think you're right, and I do think that message of community support and humanity and we're all in this together is very, very powerful.

Debbie:

Yeah. Yeah, I do.

Liz:

So I'd like you to take a moment and tell folks if they'd like to learn more about you and your hospital system and the staff, what's the best way to get some more information.

Debbie:

So we have a website www.newbridgehealth.org. Me personally, I'm on all social media, so I'm on Facebook and LinkedIn and Instagram, so you can always find me. We have a great team of people that welcome connections and welcome support and, both ways we'll give support and we always can use support and assistance and always looking for new friends. So anything-

Liz:

Well, and we've been friends for 10 years and I think we're a lot alike.

Debbie:

I can't believe it's been 10 years now that you said it. That's incredible. Yeah, it's been awhile.

Liz:

Of course, if anyone would like any more information about me and the work that I do with fantastic leaders like Debbie and her team feel free to reach out to me at liz@lizbywater.com. You can check out the website, it's simple, lizbywater.com, LinkedIn, Twitter, all that good stuff.

Liz:

So Debbie, thank you so much for all the wonderful work you're doing. Stay safe, be well, take care of your family. And I know you and I will be speaking again very soon.

Debbie:

Thank you, Liz. And you stay safe and be well too. Thank you.