

## Interview an Alumnus

*Current student, Monica Baker, interviews alumnus Alan Channing '71 about his career as the CEO of Sinai Health System.*

*What do you find most challenging and most rewarding about leading strategic initiatives for a safety net hospital?*

The easy part is what's rewarding. Most of us entered health care to make a difference in other people's lives. I'm a 1960s kid. We grew up thinking we'd change the world. In a safety net hospital, we do it in a way you don't do it elsewhere. It is so incredibly rewarding to connect with a community that needs you, and where you can be proud of your work.

The challenging part is that you don't have much money. By default, we are paid below market rate across the board. Commercial payers represent a small percent of our market and my cash is 78% dependent on the State of Illinois. So, the economics are certainly the most challenging part.

*What advice do you have for students interested in working with low-income populations?*

First, look to see if there's a job at Sinai! Any true safety net hospital will be deeply committed and very mission-driven throughout the organization. The mission will challenge you in a way that's different than a resource-robust institution. For example, when I got to Sinai I found a committed group of 3,000 people who wanted the institution to succeed in caring for patients. I didn't find the kind of systems, measures, and focus that students learn about in graduate school today. I said to the board of directors that Sinai should focus on becoming a quality provider. The board said that Sinai was already a quality provider. My response was that there was no evidence that that was true and that systems needed to be put in place to measure the quality. The board then responded by saying that they were not a rich organization that had the bells and whistles found in wealthier places. My answer was that it's not about the bells and whistles. You're not here to tell the world what is wrong with them. It's about how you practice medicine, how you care for people. You're here to serve the patients' needs. Now, Sinai has won statewide and national recognition for clinical quality, and the wealthier places are surprised.

*How has Sinai Health System been able to achieve such high clinical quality when Medicaid, which has one of the lowest reimbursement rates, is one of your largest payers?*

It's all about the focus. In all organizations, it starts with mission, vision, and values. I mentioned we are a mission-driven organization. Every one of Sinai's employees has a sense of our mission and vision. Sinai's mission is caring for individuals and the community – whether through the ER, or via referrals, but especially how we care for individuals outside the four walls of the institution. Looking at the language of the Affordable Care Act, Sinai is ahead of the curve in terms of caring for the community – creating healthier communities.

Also, you need to establish and incorporate your vision into the lifeblood of the institution. How? The board of directors and executive leadership must be able to translate it into actionable and measurable activities. For example, Sinai's quality committee puts together dashboards to show where we are. Every month clinical leadership meets with me to discuss one area of clinical quality and what is being done to make it better.

*How would you like the future of the healthcare delivery system to look?*

I want to start getting paid for the good work that Sinai is doing for the community. I like the idea of care management and managed care, but am concerned about how it will play out. The debates in Congress today are racist in nature and abhorrent. There are members of Congress who couldn't care less about the have-nots. It is criminal for a country as rich as this one. I would like to see a delivery system that cares for 100% of the people in this country.

For example, let's change the idea that we need acute care for asthma. Sinai does this through pre-primary care ©. We have two pre-primary care organizations. First, we have the Sinai Community Institute, which has 25 programs that follow the human lifecycle, including cooking classes, nutrition education, and job placement programs. We also have the largest non-governmental WIC (Women, Infants, and Children) program in the state. This group touches many lives. The second organization is the Sinai Urban Health Institute. It is a group of PhD- and Masters-prepared epidemiologists and health educators who are engaged in community outreach and did the largest door-to-door health status survey in Chicago ten years ago. The survey asked people what was most important to them and what they wanted to know about themselves. The results of the survey allowed the Sinai Urban Health Institute to focus on the things that were most important to the community.

Back to the asthma example, for every \$1 that Sinai has invested in a community health worker, we have avoided \$15 in acute care services. There might be only three or four places in the country that are doing the kind of work that Sinai is doing.

*Many of my classmates are struggling with the ethical dilemma inherent in working for a hospital. Hospitals have an incentive to generate income through high-volume, profitable services, yet one of the biggest problems with today's healthcare system is the growing cost of healthcare. What advice do you have for those of us faced with the seemingly contradictory goals of working for a hospital but improving the system by trying to control healthcare costs?*

Think about your personal experience working for the state legislature and apply it to healthcare reform. The opportunity to influence at a policy level is the first point. We all have to learn to be advocates for those who cannot speak for themselves.

Second, you need to start somewhere. Think about how organizations have to change their focus. All are waking up to the managed care environment. Sinai has created a consulting arm to help organizations understand population health management.

*What advice do you have for students concerned about maintaining a work/life balance in such a demanding field?*

My advice is to have an understanding family. People will have to figure out on their own what they can do and what they can't do. When I am making rounds in the hospitals on weekends and holidays, I am asked "why aren't you home with your wife." I tell them "because you all are part of my family." And my wife understands that.