

# CEO Viewpoint

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Joe Swedish is not what he appears...he's not even Swedish. When his parents arrived in the United States from Austria and Eastern Europe in 1950, their names—like so many other immigrants'—were mistranslated into something the customs officer could pronounce. While that's a twist on the promise of reinventing yourself in America, Swedish, 58, has put his own mark on a career path that has taken him to his current post as president and CEO of Novi, Mich.-based Trinity Health, the fourth-largest Catholic health system in the United States. Trinity's top job, which Swedish took in 2004, is not for the faint of heart: he oversees annual revenues of \$7 billion, 47,000 FTEs, more than 8,000 active staff physicians and 47 hospitals in nine states. Born in Richmond, Va., Swedish earned his undergraduate degree in political science from the University of North Carolina in Charlotte and his master's in health administration from Duke University. His career has covered investor-owned (HCA) and non-profit hospitals covering Virginia and the Carolinas to Colorado. He and his wife Gene have three children: a daughter, 25, and two sons, 26 and 31. He likes to fish, golf and snow ski, all of which are possible in Michigan—if you have free time.

## What are the top two or three issues you face as president and CEO of Trinity Health?

Given the times the answer is probably changing as we speak, but they are in this order: formation of strategy, development of networks and creating access to capital. Given the scale of our organization, a fourth would be development of a culture that effectively matches the expectations of the marketplace for excellence, care delivery and community benefit. Today that's what a CEO does or should do.

## Will these issues change under the current administration in Washington?

Those are the issues recent and going forward. I don't think our issues have changed in a significant way compared to other organizations. We anticipated much of



JOE SWEDISH

the turbulence that arose from the economic collapse. Many of these initiatives we began two or three years ago when we saw the early-warning signs begin in Michigan. Six to 12 months later it hit other states.

## Can you identify two or three benefits that IT has had on your organization?

We began our IT journey 10 years ago by making a strategic decision to integrate our systems on a centralized platform. We have integrated finance, clinical and supply chain. The

benefits of that integration and capital investment are improved efficiency and effectiveness of clinical services and better overall integration of our enterprise. We're in nine states and our IT infrastructure performs as one platform that facilitates better decision-making, which

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leads to a third benefit: elimination of variation in practice. An effective IT infrastructure is truly the Holy Grail in our industry that will help us meet the expectations of healthcare reform.

**What do you believe are the most significant near-term challenges that could be addressed by enabling Information Technologies?**

Near-term you have to put IT in the context of healthcare reform legislation, which requires elimination of avoidable readmissions and avoidance of hospital-acquired infections. Without data you're really operating blind. Our sense is that IT creates the ability to identify evidence-based practices. Second, IT promotes physician engagement and third, supports all vectors toward a culture of safety.

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**What has been the biggest change you have seen in healthcare over your career?**

My sense is that the quality of leadership is transforming itself at a very fast pace that matches the expectations of industry. We're much more conversant in the "what and how" of leadership and how that translates to managing change during a turbulent period like today.

**What is the best piece of advice you've ever been given?**

I worked for a physician in medical education in the early 1970s and he told me, 'You're a lay executive, don't wear a white coat.' That's a very important statement. That taught me to respect the uniqueness of clinicians and listen to their needs and counsel.

**What advice would you give to a young person seeking to enter the healthcare field?**

You have to recognize there are many moments in career development so there's no single answer. My advice is to find the right mentor for the moment.

**What is your favorite part of the work you do?**

Simply managing change, especially in turbulent times when there's lots of uncertainty. A related favorite is managing cultural integration. Every organization has a culture and the question is how do you match that culture with its mission.

In our organization we've identified the "Guiding Behaviors" of our culture that are tied back to our mission and vision. All associates are expected to apply them to their jobs. We're a faith-based organization

and our founding principles are immutable rules of performance whether we're talking about one of our hospitals in California or Maryland.

**If you weren't running Trinity Health, what would you be doing?**

As a career I'd probably have gone to law school and become an attorney. What I'd really like to be doing now is to try to make a living out of being a fly-fishing guide.

**What is the biggest mistake you ever made?**

The good news is I climbed the ladder of success and realized I'm on the right ladder. The bad news is I wish that I'd made the ladder bigger. It's a very intense and lonely career pursuit and you can leave a lot of friends and family behind.



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