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To serve patients is our greatest privilege

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Today is an extraordinary time in medicine. Our science and technology have produced remarkable advances that in the not-so-distant past might have been thought unimaginable; Organ transplantation to save lives, reconstructive surgeries to restore a patient's shattered features, new therapies to prolong life or defeat disease. In our laboratories, our operating rooms and our treatment centers, we are making new discoveries and delivering the highest-quality medical care the world has ever known.

Clearly, we have the clinical skills to deliver these wonders. But what about the humanitarian skills to also comfort the men and women and children who come to us, to treat them not just with excellent medicine but also with respect and compassion? In today's healthcare environment, the demands of reform, competition and economics are combining in ways that require us to create and implement new, value-based approaches to healthcare delivery. In this evolving environment, the patient's *experience* of his or her interaction with the medical community is as important — and in some cases perhaps more important — as the quality of the treatment that they receive.

Today, we recognize that the people who come to us are more than just *patients*. They are wives and husbands, mothers, fathers, brothers, sisters, sons, daughters, aunts, uncles, nieces, nephews, friends and colleagues. Each one has his or her unique story, and that story doesn't end when they leave us. We have the privilege to connect with them while they are in our care, but even if their life ends within our walls, we become a part of their ongoing narrative and that of their families and friends. Whether or not that narrative reflects positively is entirely up to us.

This was something brought home to me 20 years ago, after I had completed my training in psychiatry and child psychiatry at UCLA and joined the faculty. Even after all these years, this is an experience that still reverberates for me. I was working with a teenage boy who had had a psychotic break. I sat with his parents to explain their son's diagnosis and, in very complicated terms, I tried to describe schizophrenia and how neurotransmitters in the brain function. I talked about research underway at UCLA and about the complicated tests we would need to complete. As I continued along this long and windy discourse, the boy's father interrupted. With tears in his eyes, he asked, in a very quiet voice, "Doc, are you telling

me I need to build a room out in the backyard for my son?" This father realized much more acutely than I, with all my education, that the road of his son's life, and that of his family, had suddenly and irrevocably taken a dramatic turn. These parents needed plain talk so they could prepare for the difficult journey that was ahead. They needed information, yes, but they also needed a compassionate voice in place of overly complex medical explanations of their son's condition. In that instant, they taught me that my years of study and book learning were only a foundation for what I really needed to know as a doctor.

From that moment, I have been obsessed — as a physician and now as president of the health system — with making sure that every patient and family that comes through our doors receives not just great care, but also is treated with dignity, respect and compassion. Placing patients at the center of our attention and the decisions we make, both clinical and business, is essential to transform our institutions in a healthcare landscape that is undergoing tectonic upheaval. These guiding principles are codified in our mission statement: *Healing humankind one patient at a time by alleviating suffering, promoting health and delivering acts of kindness*. By embracing this mission at every level of our organization — from physicians and nurses to technicians and support staff — UCLA's culture has been transformed. And with that transformation have come dramatic increases in our patient-satisfaction ratings. We have gone from an institution with patient-satisfaction scores in the 30th or 40th percentiles and where a highly placed executive within the health system once told me that he would hesitate to send a member of his own family to UCLA for treatment — not because the quality of care was lacking, but because the *experience* of being treated here was abysmal — to one in which our patient-satisfaction scores tower in the high 90s in many clinical areas. It is a wonderful thing to be counted among the best hospitals in the country, but as brilliant and skilled as our physicians and medical professionals are, we must never forget that there is no one here who is more important than the patient.

It is axiomatic that patients want to receive the best medical care when they are injured or ill, but if the situation is not an emergency the empirical quality of the care is not necessarily the predominant driver of where

they will choose to go. A recent survey¹ conducted by Aha Media Group, a Washington, D.C.-based content-strategy and healthcare marketing consultancy, concluded that healthcare organizations often get it wrong when they try to communicate with their would-be customers.

For its survey, the group looked at words that the top-50 cancer centers in the United States (based on the latest *U.S. News & World Report* rankings) use to promote themselves online to potential patients and how those potential patients respond. The words to which so many of us cling to describe ourselves and the care we deliver — multidisciplinary, complex, advanced, state-of-the-art — often ring hollow for large numbers of patients. In the catchy language of Aha Media's presentation, these are “zombie words” — seemingly alive with import (at least to us) but in reality desiccated and shambling.

What words did resonate most strongly? Compassionate. Patient focused. These are words that evoke a quality of warmth and empathy for the patient experience. It is true we cannot base the choices we make solely on market surveys, but I think that this result is telling. We cannot allow ourselves to be tone deaf to the messages that are coming from the consumers of our services when they say to us: Recognize that while today is another day on the job for you, for us it may be among the worst days of our lives, and treat us with civility, compassion, dignity and respect.

Our patients are our best teachers. Allow me to share a story that I believe powerfully illustrates this truth and the intimacy of the caregiver-patient relationship. The daughter of a woman who died at UCLA wrote to one of her mother's nurses: “I felt like a planet that had lost its sun, and my universe had been upended. I had always felt a little less alone, a little less frightened, just knowing that mother was out there loving me. She was my homecoming, my touchstone, my comforting embrace. And now I had to figure out how to navigate my world without her.” But at the end of her mother's life, a nurse had been there for the patient and her family, a “fierce advocate” who was fully present, offering a level of caring and compassion that is itself the very definition of patient focused. “You were our guide, our pathfinder. It's as if you held up a light, and we finally clearly saw the path,” the daughter wrote. “And that last hour or so with her — lying beside her as she gently slipped away — was just what I had been yearning for, to be able to hold her and tell her how much I loved her, and that I knew she needed to go. It could not have been a more peaceful, loving passing. I believe it is because by some miracle you were there when we all needed you most ... that those final moments of peace and release were possible.”

It is a blessing for us to work in an environment where we have the opportunity every day to touch someone's life so deeply. We must never lose sight of that. It is our responsibility to not just treat our patients, but also to embrace them. Understanding that this experience is knitted into each patient's story, we recognize that we are called to do whatever we can to uplift their day and to make it better. Today, we are honored and proud to say to our patients, “It is our privilege to treat you.”

References

1. Leibtag, Ahava, Aha Media Group, “What Do Patients Want from Healthcare Content,” <http://goo.gl/8nAmO5>