The Three Shields of Mayo Clinic

[VIDEO TRANSCRIPT – September 14, 2023]

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Nanne Finis: We are really proud that this is the second of a series of three webinars that we’re doing to really think about and help us all understand what is great in health care today. You know, it means so many different things to, each of us. We started our series with Michael Bush, who’s the CEO of Great Place to Work and is part of UKG.

So we’re beginning to learn a lot more at UKG and then organizationally about a great place to work and some of the factors that really do feed into greatness. But Anne and I were talking and we really wanted to hear from Mayo Clinic and understand how greatness is sort of personified, if you will, in your organization. We’ve all been there, walked your halls and it is a great place when you walk in.

But there are inner operational workings and we want to understand that as well. So I thought we’d start with truly thinking about the Mayo Clinic. If you could describe, JoEllen, the organization, the role you play just to give us all kind of a framing of the organization, that would be helpful.

JoEllen Frain: Perfect. And I hope you’ll indulge me; we have about a 150 year history that I’m going to truncate maybe down into a couple of minutes. But, you know, admittedly, I was born and raised in Minnesota and I knew about the Mayo Clinic, but didn’t know a lot about its history or legacy or really what it was before I joined Mayo Clinic. And really our roots go back to a tornado, which isn’t uncommon in the Midwest.

But a tornado struck Rochester, Minnesota, where Dr. Mayo was a country physician. And at that time we had a Catholic teaching order in Rochester as well. And Mother Alfred Moses approached Dr. Mayo after this tornado with thoughts about formulating the first hospital in Rochester. And it was through this unconventional partnership and putting aside some of their religious gap and their religious differences coming together on behalf of mankind.

And so four years later, the sisters had raised enough money to build our very, very first hospital. And that was the roots of where we are today. And throughout today, I hope to sprinkle in some of that legacy because it's so impactful in helping us today and through some of the challenging times. And where we are today is we're an organization of about 76,000 employees.

We serve over 1.3 million patients from over 130 countries. You know, our logo really is important to us. I think everybody's is, but ours is really important because it represents who we are. And that's our clinical practice as one shield in our logo. We have three shields interlocked, but one shield is our clinical practice. But equally of significance within that logo, are our educational and our research shields, because those are the two workhorses around our practice that really elevate Mayo Clinic.
Our education is not only for our students and learners and providers of the future, but also supportive of our current workforce. As things change and transition and we continue to hone our practice, our internal education shield is really driving that on behalf of the organization. And the second aspect is our research shield. And that really is where we take discovery and bring it to delivery.

And it’s been so fascinating to watch how that’s accelerated over the last couple of years and how we’re pushing ourselves to say, “How do we get quicker from discovery to translation for our patients?” and having our research arm be such a part of our clinical practice as well as with our education. It’s just this thing that kind of works together, you know?

And I’ve had the opportunity to experience Mayo as both an employee as well as a patient. And I think what changes for me personally, as well as many of my colleagues, is experiencing Mayo as a patient and really it’s centered on the patient. It is teamwork in a way that you don’t see routinely. There is a humbleness in terms of what is being provided and a willingness to understand that you don’t have all the answers, but you have an army around you that can help you get those answers.

And so that’s part of that special uniqueness here. I left out in the introduction my history with Mayo. I basically lost a coin flip at my rehearsal dinner to my husband, who was born and raised in Minneapolis and had a job up there. And I lost the coin flip at our rehearsal dinner.

And so I, kicking and screaming, came down to Rochester, Minnesota, only an hour away. And I wasn’t going to get a real job, I was going to just get a temp job because he was clearly going to see how unhappy I was living in Rochester, Minnesota and let me move back up to the cities and he would follow me.

24 years later, I’m still at Mayo Clinic, but I was initially hired as a temporary secretary to the chief nursing officer at Mayo Clinic at the time. I literally went in at Friday afternoon at 4:00. They hired me and had me start the next Monday. And what I learned from that CNO was really impactful and that it was she recognized very, very quickly that I did not have the secretarial skillset in order to support her. But she took the time to get to know me and understand that I had a recruitment background.

And she asked me a really important question the following Friday at 2:00. Admittedly, she called me into her office and I called my husband and I said, “Should I just make a run for it? I don’t think this week went all that great.” And he’s like, “No, you have to you have to follow through.” So I met with her and she was very clear in her feedback to me that I was not a great secretary, but she heard I had a recruitment background and she asked me the question.

And again, this was in 1999. Did I think I could hire 900 nurses for Mayo Clinic in the coming year? And of course, I said “Yes” and the rest is history. And so I started as a recruiter and I now serve and have the privilege of working as a chair within H.R. I have responsibility for Rochester and the Mayo Clinic health system.

So I live and breathe within the practice of the leaders and the challenges that they face. But I also have the opportunity to lead compensation, benefits, wellbeing, labor, payroll and talent acquisition for Mayo Clinic Enterprise. And so I get not only the practical day-to-day operations of H.R. But also how that translates to our practice, which is so important because great ideas fall flat unless you understand the challenges that our front lines are facing.

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