

## **Research Assessment #6**

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Subject: Interview with Michael H. Covert, FACHE, president, Washington Hospital Center, Washington, DC

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Assessment: Interview with Michael H. Covert

My mentor, Ellie Huff, once told me that the future of innovation and big, thriving, businesses is in the agile and creative minds rather than the experienced minds that have served their time. Especially in healthcare, there is a stigma that leadership positions and positions of power should only be held by those that have climbed the ladder the old fashioned way. However, as Ellie pointed out, the business models of many successful businesses have changed from that traditional view and have started to hire on people that can transform the company and inspire innovation. Companies like Google and Amazon have come to value the agility of one's mind rather than the seasonness of their mind. So, as I look to establish myself in the professional world and make a powerful name for myself in whatever field I choose to pursue, I will always aim to keep the creativity flowing and always looking for ways to innovate and push the current state towards the future.

However, while the business type might be changing, the value of experience and the advice from elders has yet to be diminished. For this reason, I have chosen to write this assessment over a published interview between a doctor and a very experienced healthcare administrator to gather knowledge from the best of the best best practices in the field.

One concept that Michael Covert said that stuck out to me was his ability to be prepared for the 9/11 and anthrax attacks before they actually happened. When asked about whether or not he was prepared for the influx of patients, he answered that, "Prior to the attacks, [they] had discussed the need for a coordinated flow of information and communication among our hospitals, U.S. health departments, and the federal government in case of such an emergency." The matter of communicating in a crisis is not an easy feat, especially for a high-stakes environment. While being prepared is a matter of clinical preparation and efficiency, it is also a matter of public health and

having the infrastructure suitable to withstand a catastrophic experience such as the 9/11 attacks. If the precautions were not taken for the possibility of a terrorist attack, the results of patient survival would be extremely different. Because most cities aren't at nearly as much risk for terrorist attacks as cities like New York and Washington DC are, it is still important to have processes and institutions that are capable of providing care under such stressful circumstances.

Another issue that concerned me was the challenge that Mr. Covert's hospital faced with having enough staff to keep up with the sudden influx of emergency and triage people affected by the terrorist attack. When there is a dire need for healthcare assistance, are all guidelines still in place or is there a loosening of some rules to better administer patient care? For instance, if one hospital is getting overflowed with emergency patients, and they don't have enough medical staff to keep pace, can another hospital (maybe in another state, country) send over medical staff to help manage the traffic? If not, what is the reasoning for the blockage of such a system? What are the big differences among nursing licenses ranging from county to county and state to state?

While reading this interview has only lead me to ask more questions, I have learned so much about healthcare administration and the many processes that go into such a detail-oriented and complex job.