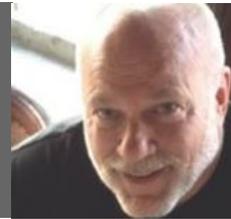


I've been **thinking**...



June 2015—Paint the Ceiling

I've been thinking about pizza, ceilings, and what we want from airlines and caregivers.

I am a frequent flier, United 1K, in the interest of full disclosure.

Last week, I was chatting with a fellow passenger who holds the airline's highest status—Global Services. You can guess what two road warriors who've endured a hundred thousand plus miles the previous year kibitz about when belted into uncomfortable seats in aluminum tubes and breathing stale air, while being served by generally gracious flight attendants whose executive leadership makes it increasingly difficult for them to serve their passengers. Where have all the pillows gone?

The guy told me that not long ago, he was unexpectedly seated next to United's Chief Executive Officer, who stepped into the galley and reviewed the manifest. After the video featuring his welcome finished, Jeff Smisek, returned to his first-class seat, introduced himself, and said, "I see you are one of our Global Services. So tell me how are we (sic) doing?"

After asking for clarification about who "we" might be, the passenger gave the CEO more than he asked for about United.

We agreed that a better sampling might have come from surveying passengers in the back of the plane and that if Smisek were to regularly fly a few thousand miles in 25B, United might come closer to delivering on its claim—something about "friendly skies."

I am *not* a healthcare provider. However, many of my readers are—mostly nurses and pharmacists with a few doctors sprinkled in.

All of us have been or will be patients.

When we say *healthcare*, I wonder if the thought bubble over most of our heads reads *healthcure*. First and foremost, when admitted to hospitals, we are hoping for cure.

Though institutional healthcare has been around a few thousand years, I, with most of you, am grateful to live in a time and place with access to the most advanced medical science and practice the world and history offer. Nevertheless, sometimes I wonder if, instead of fortifying care with cure, we

have forfeited a good deal of care along the way while focusing so intently on cure.

Blindsided by non-Hodgkin's lymphoma, world-renowned trauma surgeon Gregory Jurkovich found himself suddenly transitioning from physician to patient—moving to the back of the plane.

In his presidential [address](#) delivered at the 27th Annual Meeting of the Western Trauma Association, Jurkovich artfully fulfilled his *secondary* title: "Reflections on Illness." After recounting his experience, he concluded, "It is not enough to care *for* our patients, but we must care *about* our patients."

Though the trauma docs in the audience hadn't asked their outgoing chairman, "How are we doing," they got an earful:

"The extreme to which we go to avoid dealing with the personal lives of our patients is reflected in how we sometimes refer to them. How often have we called the young boy injured while riding his bicycle home, "the spleen we're watching on the floor?" Or the father and sole financial supporter of two young children, "the bad head in the unit"? Or the young male, with a mother who is worried sick about him, "the gunshot to the abdomen." The point is, our patients and their families have had their lives completely disrupted, their concept of life's meaning challenged, their foundation tested."

The title of Henri Nouwen's bestseller, [The Wounded Healer](#), might be worth the price of the book. Whether running an airline or caring for patients, Nouwen's premise rings appropriate: "The great illusion of leadership is to think that man can be led out of the desert by someone who has never been there."

The wounded trauma surgeon linked care with cure: "We need to be attuned to the emotional well-being of our patients, because that emotional well-being is critical to their recovery and survival."

Yet, even when patients can't survive or recover, care to the end matters. Jurkovich painted the desert, "The world of the ill is quite different from the world of the well—and most of us, as I did, will one day find ourselves in that world. In the long dark night of illness and suffering, it is always 3 AM. And at that time, when we ring the call bell, we should expect not only to be cured, but perhaps more importantly, to be cared for."

The time-tested words of Jesus, who was sometimes called "physician," come to mind: "Do unto others as you would have them do unto you."

I'm struck by the anticipatory rather than reactionary nature of his simple instruction. He didn't say, "Do unto others as you wish others had done unto you when you were on a redeye flying from LAX to Dulles or being shuttled

with chest pains from 4 West to ICU.” As instructive as these desert experiences might be, we probably don’t have to wait until we’ve been there to do the right thing to others.

Our imaginations are capable of discerning/feeling others’ viewpoints and pain points if we take the trouble and time to use them.

If Jurkovich were to chime in at this point, he might add that “doing unto others” doesn’t always have to be something monumental. Just before he sat down to a standing ovation, the well-seasoned patient concluded with some helpful out-of-the-blue remarks:

The hospital in which I received my care (and the hospital at which I practice) is modern, well-equipped, clean, and reasonably attractive. There is art on the walls of common areas, and the entrance is a particularly attractive art-deco style. There are always custodians cleaning windows, waxing floors, and painting the walls. But the ceiling in my room had one large water spot on it that I could not ignore, lying on my back for many hours contemplating my newly diagnosed cancer.

Patients are most often on their backs, looking up at the ceiling. It is not a common perspective for doctors or administrators, but it is, after all, the patients’ perspective, and that should matter the most.

You should know that the *primary* title of Jurkovich’s lecture was his punch line: “Paint the Ceiling.”



It’s kind to sit for a while where others sit—to lie for a spell where others lie. Sometimes it’s as simple as going to the basement and getting some paint or

springing for a few blankets, which flight attendants to give to passengers who are chilled.

Sometimes, it's doing something crazy for others, like a pilot and crew recently did for their passengers on a flight that was delayed, not by mechanical failure, mind you, but by an act of God.

"We are sitting on a runway stuck on a @Delta flight because of weather," tweeted @RileyVasquez. "So they're [throwing us a pizza party!](#)"

Perhaps there's a ceiling in your hospital that needs a coat of paint, a policy that needs to be revisited, an extra pillow that the frightened flight attendant in 301-W would appreciate, or an overdue pizza party for staff in ICU.

What do you think?

Noosh
Mark Neuenschwander a.k.a. Noosh
mark@hospitalrx.com