

Cutting-Edge Care

An Interview with **Judy L. Aschner, M.D.,**
Physician-in-Chief, The Children's Hospital of Montefiore (CHAM);
Michael I. Cohen Professor and University Chair of Pediatrics, Albert Einstein College of Medicine

EDITORS' NOTE *Dr. Judy Aschner is a nationally recognized leader in neonatology and pediatrics. Her nearly decade-long tenure as Chief of Neonatology at Monroe Carell Jr. Children's Hospital at Vanderbilt University School of Medicine is credited with fostering significant expansion of both the clinical and research programs in neonatology, as well as the growth of their Neonatal Intensive Care Unit (NICU). A graduate of Union College*



Judy L. Aschner

in Schenectady, New York, Dr. Aschner completed medical training (including pediatric residency and neonatology fellowship) at the University of Rochester School of Medicine in Rochester, New York. Dr. Aschner has held or currently holds a number of leadership roles in state and national organizations, including Secretary-Treasurer of the American Pediatric Society, Founder of the Tennessee Initiative for Perinatal Quality Care, Co-Founder/Mentor of the Trainee and Early Career Neonatologist group of the American Academy of Pediatrics Section on Perinatal Pediatrics, and Vice-Chairperson and a member of the Board of Directors of IPOKRATES Foundation. As Chair of the Department of Pediatrics at Montefiore/Einstein, Dr. Aschner has overall responsibility for its patient care, research, advocacy, and educational missions.

INSTITUTION BRIEF *Montefiore (montefiore.org) is a premier academic health system and the University Hospital for Albert Einstein College of Medicine. Combining clinical excellence with a population health perspective, Montefiore delivers coordinated care where, when, and how patients need it most.*

What makes Montefiore so special and how has it consistently performed as an industry leader?

Montefiore's leadership has never forgotten its mission. They are rooted in what established Montefiore in the first place, which is to serve the health care needs of the population of patients in the Bronx and beyond, providing locally the same kind of outstanding, cutting-edge care that one would expect to get at any top institution. There is no reason for anyone to go elsewhere to get state-of-the-art, patient-focused, family-centered care at the highest

quality delivered with sensitivity to the needs of our local communities.

When you're dealing with such a broad system, is there close coordination among departments?

I can speak to my own department and my experience at the Children's Hospital at Montefiore (CHAM). I came here one year ago and my office has since been visited by the leadership from nearly every clinical and basic science department at Einstein and Montefiore. They came first to welcome me, but then to discuss how pe-

diatrics can collaborate with their department or center. This has led to the development of new multidisciplinary clinics to improve patient care and the patient care experience across multiple areas of care delivery. Montefiore attracts that type of collaborative person.

I am sure we will be able to maintain that culture of collaboration as we grow bigger because the foundation is strong for that kind of interaction.

Is there merit to the discussion about the human touch being lost with all the pressures on doctors today?

Pediatrics is a bit unique – those who go into it are all about the kids and their families.

That said, electronic health records are a blessing and a curse. I'm watching my residents, fellows, and junior faculty embrace this new technology and use it in ways to improve efficiency and patient care while some of my more senior faculty struggle a bit with the interface. Montefiore is undergoing a transition from our current electronic health record to EPIC over the next couple of years. This is an enormous undertaking and investment for the institution, but one that offers distinct advantages for providers and patients, for the clinical enterprise, and for research. Families and patients are going to have more access to their personal health records and multiple avenues for communication with their providers.

How critical is the research component?

It's absolutely essential and will only get stronger. The relationship between Montefiore and Einstein is solid and essential.

Patient care guides the research we do and that research brings discovery, new processes, and new medications and interventions back to the bedside so we do a better job of delivering care.

In terms of quality improvement, safety, and the effectiveness of our therapies, the research paradigm is in the process of being embedded into the entire field of quality improvement. Even now, QI studies are documented and analyzed like research studies, and the results can be spread throughout an institution or beyond to impact care nationally and even globally.

There is synergy between the clinical and research enterprises. That is how medicine moves forward and how discoveries in the lab become the next therapeutic breakthrough in care.

Data that are generated from our clinical activities drive innovations in care, inform the next research question, lead to new therapies, and ultimately improve patient outcomes. The leadership at Einstein and Montefiore understands this.

How much emphasis are you placing on prevention?

If your business model is to keep people well, then you fundamentally understand that you need to invest in perinatal and pediatric health, because you can't have healthy children without a healthy mother and you can't have healthy adults without healthy kids.

Montefiore invests heavily in preventive services, programs, and approaches that improve child health and make it more likely that our children will grow up to be healthy adults.

Among many initiatives, we recently announced a partnership with Jennifer Lopez and the Lopez Family Foundation to create the Center for a Healthy Childhood to improve the health of the people in the Bronx and beyond.

How important is it to build a diverse workforce that mirrors your client base?

One of the first things I did when I arrived was to launch our LEAD (Leadership, Engagement, And Diversity) Office, the purpose of which is to enhance diversity and inclusiveness and to make sure we integrate cultural sensitivity throughout all of our activities. We also look to recruit and retain a diverse faculty and staff, and to take into account the unique needs of our diverse patient population and serve them in a culturally sensitive way.

If we can make this work in the Bronx, it will work virtually anywhere. ●