

Peter F. Orio: three skills that hospital administrators should possess—availability, affability and ability

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“What do you think are some pivotal skills that hospital administrators should possess?” “I believe in the three A’s of medicine—availability, affability and ability. Although these were developed as critical skillsets for physicians to have when providing care to patients, because most hospital leadership are trained physicians or must interact with trained physicians, I believe it is of the utmost importance that all leaders possess these qualities.” As the Vice Chair and Medical Director of Network Operations for the Dana-Farber/Brigham and Women’s Cancer Center (DF/BWCC), Prof. Peter F. Orio shared his views on hospital management and administration. During his time as a radiation oncologist, Dr. Orio has seen rapid technological developments within the field, but also the need to make these technologies available more broadly to patients everywhere. His academic and clinical knowledge in radiation oncology are utilized to open, manage and maintain academic medical center affiliated network radiation oncology centers at the highest standard possible and to allow patients to receive state of the art treatment closer to their homes. He said the goal of the department in the coming years is to make care available to patients locally, nationally and internationally through collaborations with local hospitals. These collaborations will allow local physicians the access and support they need to the department’s state of the art techniques, care delivery systems and the expertise of the department’s top care providers, scientists and clinical staff. To know more, please refer to the following in-depth interview with Dr. Peter F. Orio (Figure 1).



Figure 1 Prof. Peter F. Orio.

Interview

JHMHP: *What is your daily routine as the Vice Chair and Medical Director of Network Operations?*

Dr. Orio: Every day is different as the Vice Chair and Medical Director of Network Operations for the DF/

BWCC network. I dedicate 2 days a week to seeing patients with a prostate cancer diagnosis in new patient consultations, those undergoing treatment and patients who I have previously treated to ensure their symptom management and overall care needs are addressed. I spend 1 day per week in the operating room at our local affiliate hospitals or in the operation room at Brigham & Women’s Hospital in Boston, Massachusetts performing prostate brachytherapy and simultaneously educating resident physicians in prostate brachytherapy techniques. I dedicate 2 days per a week to my academic career and administrative duties that come with being the Vice Chair and Medical Director of Network Operations. I focus my academic efforts on writing academic literature, leading national radiation oncology society committee calls and spearheading collaborative efforts for the treatment of prostate cancer. I balance these academic commitments with attending meetings with hospital leadership, chairing clinical operations and quality improvement meetings and dedicating time to participating in the Executive Committee, which oversees the operations of the entire DF/BWCC Radiation Oncology Department.

JHMHP: In what ways do your academic knowledge in radiation oncology and clinic work benefit you in your understanding of your managerial roles?

Dr. Orio: It is of the utmost importance that my academic knowledge in radiation oncology is as up to date as possible and that I understand all facets of radiation oncology, to include new treatment techniques, new technologies and national and international trends in the treatment of all cancers with radiotherapy. My academic and clinical knowledge are utilized to open, manage and maintain academic medical center affiliated network radiation oncology centers at the highest standard possible and to allow patients to receive state of the art treatment closer to their homes.

JHMHP: As the Vice Chair of Network Operations, what would you say are some of the most noticeable changes to the specialty in recent years?

Dr. Orio: Radiation Oncology is a quickly advancing field. Advances in technologies such as the development of Stereotactic Body Radiation Therapy (SBRT) and Stereotactic Radiosurgery (SRS) have allowed patients the ability to received treatment in a more truncated fashion, giving them the flexibility to receive their care more efficiently and effectively. The utilization of these technologies in the network setting, instead of just at major academic medical centers, has allowed patients the opportunity to receive these states of the art types of care closer to their homes, conveniently and safely, as they face the everyday challenges of cancer care. Advances in technologies have also included the development of products that aim to reduce the side effects of radiation, such as Hydrogel technologies. Hydrogel technologies are especially important in the treatment of prostate cancer, as the hydrogel can be placed to protect surrounding organs at risk from radiation, particularly the rectum, which is the main limiting factor in the delivery of radiotherapy to patients.

JHMHP: What is your current aim as the Vice Chair and Medical Director of Network Operations? Are there any major plans in the coming few years?

Dr. Orio: My main focus as the Vice Chair and Medical Director of Network Operations is to ensure highly coordinated and integrated care with our main campus academic facility. The successful model we have established

has increased our geographical reach to patients as we strive to provide the right care, in the right place, at the right time. The goal of the department in the coming years is to make care available to patients locally, nationally and internationally through collaborations with local hospitals. These collaborations will allow local physicians the access and support they need to the department's state of the art techniques, care delivery systems and the expertise of the department's top care providers, scientists and clinical staff. Advances in technology make fully integrated cancer centers sharing the same informational technologies and policies and procedures a reality.

JHMHP: You have joined the DF/BWCC in 2010, from your point of view, how do you see the status of this hospital influences you? Which areas do you think its advantages compared to other hospitals in USA?

Dr. Orio: Hospital leadership and the status of the hospital largely influences the day to day operations of the Department of Radiation Oncology. In the ever-changing American healthcare system providers are being asked to care for patients at a lower cost to the institution and with less resources by optimizing efficiencies. The financial health of the hospital directly impacts resources allocated to the department, and the department is directly responsible for doing its part in ensuring the hospital's reputation for providing the best care possible to patients in the most efficient and effective way possible. The DF/BWCC are fortunate to be considered among the top hospitals regionally and nationally, which provides the leadership and the hospital's departments the ability to recruit the top medical professionals to advance research and clinical care and develop technologies to treat our patients.

JHMHP: We learned that you hold several leadership positions and received the American Brachytherapy Society's Presidential Award in 2014 for your leadership and numerous efforts on behalf of the organization. How actually you made it? Can you tell us the story behind why you received this award?

Dr. Orio: I received the American Brachytherapy Society (ABS)'s Presidential Award in 2014 for my commitment to the advancement of brachytherapy and the organization itself. I am an active member of the ABS, previously serving as the chairman of the Membership Committee, where I successfully increased membership every year during

my 8-year tenure. I have served as the chairman of the Socioeconomics Committee since 2013, positioning the ABS to interact with policy makers to keep the field in the forefront of reimbursement and relevance. In addition to my service to the organization as the chairman of the Membership and Socioeconomic Committees I provide lectureship at annual meetings and prostate brachytherapy schools and represent the ABS membership on the national level when discussing reimbursements for the specialty when standing in front of the American Medical Society (AMA) RVS Update (RUC) Committee and Centers for Medicare and Medicaid Services (CMS). I am fortunate to have recently been elected as the president of the organization for 2018–2019.

JHMHP: *How do you juggle with different managerial roles?*

Dr. Orio: I am fortunate to have both a successful career as the Vice Chair and Medical Director of Network Operations for DF/BWCC and a wonderful academic career on the national and continuously growing international scale. My academic career has grown under the direction of my personal mentors, and I am privileged that my professional endeavors have grown steadily over time, allowing me to adjust my focus as needs arise and multitask to achieve my goals in all aspects of my career. The structure of the Department of Radiation Oncology and the DF/BWCC network provides me with the benefit of my talented leadership team (nursing director, physics director, radiation therapy director), whom I meet with regularly to ensure quality care delivery is achieved and maintained. As one cannot be everywhere at once, I have assembled a team of talented leaders and world class physicians who provide the best patient care, many of whom I have mentored to oversee the day to day operations of our centers and ensure the utmost quality care is delivered to our patients. I am fortunate to have the support of those around me, at work and at home, to allow me to continuously juggle my many managerial roles.

JHMHP: *What do you think are some pivotal skills that hospital administrators should possess?*

Dr. Orio: I believe in the three A's of medicine—availability, affability and ability. Although these were developed as critical skillsets for physicians to have when providing care to patients, because most hospital leadership are trained

physicians or must interact with trained physicians, I believe it is of the utmost importance that all leaders possess these qualities. Availability means making yourself available to patients, managers and leadership alike. Visits and meetings should be conducted so that problems are discussed in an unhurried manner and plans should be developed methodically. Affability means being likable; it means remembering the names of people, their points of view, and recognizing their individual needs. Affability makes a person approachable and capable of identifying with people in a nonjudgmental way. Ability comes from being well trained and keeping up with technologies and treatment regimens, but also with the overall health of the organization and its people. Good physicians and good leaders are focused on addressing the needs of those they represent and seek to be their advocate. Together, the three A's of medicine allow an individual to address the needs of the organization in an approachable, well-rounded way, and are pivotal skills for success within healthcare as a physician and a hospital administrator.

JHMHP: *How important it is to cooperate with other entities to improve healthcare?*

Dr. Orio: The modern healthcare system has demonstrated that many failures exist which plague the system as it has grown over time. As such, cooperation is a necessary pillar of care for patients and is critical in the future of healthcare. As Michael Porter's value agenda demonstrates, we must replace today's system where every hospital and program offer a full range of services, with a system in which services for medical conditions are concentrated within organizations, in the right locations to deliver the highest value care. Cooperation among departments and hospitals allows patients to receive state of the art care when necessary and allow critical care hospitals to dispatch patients to local hospitals for more routine care when appropriate. The value agenda focuses on opportunities for improving value as hospitals collaborate and integrate systems to eliminate duplication of care in one area, concentrating volume in fewer locations, choosing the right location for each service line, and integrating care for patients across locations. The landscape of healthcare in the United States and internationally is continuously changing. Cooperation and coordination of care for patients that is focused on providing the best care, at the best value, is of the utmost importance for

the success of the system in the future.

JHMHP: How does Network Operations establish and strengthen strategic partnerships with other entities?

Dr. Orio: The DF/BWCC Network's fundamental goal is to establish and strengthen strategic partnerships with other entities. The DF/BWCC network locations were created in clinical affiliation with local hospitals to provide care to patients closer to home. Intricate partnerships unique to each center's needs have resulted in service agreements between the DF/BWCC Department of Radiation Oncology and the local hospitals to operate the center with physicians, nursing support, radiation therapy staff, physics and dosimetry and support staff. This collaboration allows for investment from the local institutions and the expertise of the DF/BWCC brand. Collaborations between the DF/BWCC Department of Radiation Oncology and the affiliate hospitals strengthens ties between the local institution and the DF/BWCC brand, and in many instances, has led to collaborations across these institutions to provide state of the art academic care in medical oncology, breast and thoracic surgery and neurosurgery to patients closer to home as well. The collaboration of these institutions across many specialties has allowed for patients to receive multi-disciplinary care closer to home and allows for a direct service line to major academic center medical care when a patient's unique care plans requires such referral. These strategic partnerships to provide cancer services in line with community needs creates innovative and fiscally responsible plans that meet the needs of local hospitals and patients alike.

JHMHP: How do you train your staff? How do you evaluate the performance/standard of your staff?

Dr. Orio: As the Vice Chair and Medical Director, I am directly responsible for participating in the development, implementation and periodic assessment of policies and procedures of the radiation oncology centers. Policies and procedures standardization across locations is a key initiative of the Department of Radiation Oncology and training staff falls under this purview. The department has established a Policies and Procedures Committee as well as an Education, Training and Credentialing Committee. Together, these two committees are responsible for ensuring staff are properly trained upon hire and are educated on new technologies and standards within the department as the need arises. An infrastructure of ongoing educational lectures has been developed to educate physicians and staff in the department

regarding new treatment regimens and technologies for patient care delivery. Additionally, efforts to provide educational opportunities for departmental and affiliate physicians or clinical staff are provided through avenues such as tumor boards, grand rounds, multi-disciplinary forums, community lectures, etc. These programs ensure that all members of the department are trained to the top of their scope.

As Vice Chair and Medical Director, I am tasked with the clinical supervision of medical staff, including regular performance appraisal and feedback to physicians and staff. Evaluation of physician performance is completed through weekly patient care plan review for every patient treated. Performance review is also done on an ongoing basis as set forth by the bylaws of the affiliate institution and the Board of Registration of Medicine in regards to expectations for Continuing Medical Education (CME). Physician professionalism, patient care, medical knowledge, and system-based practice requirements are regularly monitored and reported on both via face to face interaction and through formal written assessments of competence. I am responsible for the growth, mentorship and academic careers of the radiation oncologists assigned to the centers within the confines of the rules and standards set by Harvard Medical School and work tirelessly to meet with physicians and ensure they achieve and surpass the expectations of academic and clinical productivity.

JHMHP: Base on your personal experience with DF/BWCC Network Operations, what do you think will be the challenges in developing and implementing healthcare programs in a developing country?

Dr. Orio: The cost of creating radiation oncology centers and delivering care is a critical factor in developing countries. The Advisory Group on Increasing Access to Radiotherapy Technology in Low and Middle Income Countries (IAEA) estimates a shortage of 5,000 radiotherapy machines in the developing world due to the capital, infrastructure, and cost of maintenance for these facilities in addition to the lack of trained staff to run them. Oftentimes it is an insurmountable obstacle for developing countries to purchase radiation equipment, and open and continuously staff centers appropriately. There are many techniques to providing care in developing countries, such as the technique in some areas of Europe where policies have centralized radiation oncology services, which translates into fewer, but larger centers. This technique may decrease

the cost of developing and implementing radiation oncology programs; however, while centralization provides advantages in terms of economies of scale with reduced costs and increased physician expertise, this must be balanced against the potential disadvantages of increased waiting times and reduced access for many low-socioeconomic status patients.

JHMHP: *How do you think of international cooperation in the field of hospital management? How can we promote continuous collaboration over the long term?*

Dr. Orio: International cooperation is paramount in the success of healthcare systems. Globalization in health care has intensified with the widespread utilization of the internet and social media and will be critical in the care of patients in the future. Institutions, driven by hospital management, should support international research collaborations, which allow researchers and clinicians with opportunities to share unique experiences, data and treatment methods. These collaborations can give providers the basis for new perspectives on existing practices and could improve clinical treatment regimens, care delivery and subsequently patient outcomes. International collaboration should be encouraged by governments and strengthened through formal government agreements. Non-profit organizations worldwide should collaborate on innovation and education by providing a forum to bring talented individuals together to face healthcare related challenges internationally.

JHMHP: *If you could offer words of advice regarding hospital management, what would they be?*

Dr. Orio: Great leaders remain adaptable to the challenges they face. They are students of history and make efforts to always evaluate what worked and did not work in the past. Failures are sometimes unavoidable, but learning and adapting are critical to success. A great management team understands that those they lead ultimately determine the success or failure of any endeavor and they are willing to devote the appropriate time and resources to mentor and train their teams.

Expert's introduction

Dr. Peter F. Orio is the Vice Chair and Medical Director of Network Operations and Director of Genitourinary Brachytherapy at the Department of Radiation Oncology at DF/BWCC, a senior physician at Dana-Farber Cancer

Institute and an assistant professor of Radiation Oncology at Harvard Medical School. Dr. Orio completed his residency in Radiation Oncology at the University of Washington in 2006 and after graduation held numerous leadership positions prior to returning to Boston, Massachusetts in 2010 to join the DF/BWCC.

Dr. Orio holds several leadership positions in the American Society of Radiation Oncology (ASTRO), serving as chair of the Code Development and Valuation Committee and advisor to the AMA RUC Committee and CMS. He remains active in the ABS, where he chairs the Socioeconomic Committee and is President-Elect of the organization. Dr. Orio received the ABS's Presidential Award in 2014 for his leadership and numerous efforts on behalf of the organization and was scientific chair of the 2016 ABS/GEC-ESTRO World Congress of Brachytherapy.

In addition to his administrative positions, Dr. Orio has made academic contributions to the field of genitourinary malignancies where he has authored or coauthored over 70 publications in the field of prostate cancer and prostate brachytherapy. Dr. Orio focuses his clinical efforts on advancing innovative solutions for the safe delivery of radioactive isotopes as a cost-effective and efficacious treatment. He continues to work towards advancing radiation therapy and brachytherapy planning and delivery for prostate cancer patients internationally.

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