

Transcription of Podcast Episode 380: Karen Faulis, CEO at JFK Memorial Hospital

SPEAKERS

Bob Firing, Karen Faulis

Note: This transcription was computer-generated and may contain typographical errors.

Bob Firing 00:00

Good afternoon, Shadow Hills. It's Bob Firing again, and I've got a special guest this time that I think you're really going to enjoy and learn a lot from. Her name is Karen Faulis. And she is the Chief Executive Officer of JFK Memorial Hospital. Right down at Monroe and 111. Karen, welcome to the podcast.

Karen Faulis 00:26

Oh, thank you, Bob. It's really nice to have been invited to speak.

Bob Firing 00:30

And well, so before we get into JFK, I'd like the audience to know a little bit about you. Where did you know where did you were you born and how did you happen to get into this line of work?

Karen Faulis 00:44

Yeah, sure. So, I have a an unusual path is what I'm being told, I get told by a lot of people. So I actually grew up in Buffalo, New York, over on the east coast, lived there for about 27 years, went to my undergrad school there at SUNY Buffalo for my RN degree, my nursing degree. And then I went back while I was working for my graduate my master's degree. And after I graduated and took a different position in case management at the hospital, I ended up moving out to Las Vegas, and, and lived in Las Vegas for about 13 years, worked in a very varying positions within nursing and then outside of nursing. As a clinical nurse specialist, I started off with as my role and then I moved into risk management and then administration associated administrator at a big hospital in Las Vegas. And then I helped to present an associate administrator, I helped to open up a new hospital as you know, Las Vegas back in the, you know, 90s was growing. And, and so I had the opportunity to help open up a new hospital in the northwest part of Las Vegas. So that was quite an experience. And we were successful in doing that. And then I was asked to do to do something similar over in Palmdale, California. So I was promoted to Chief Operating Officer and then relocated a hospital, from Lancaster to Palmdale, and then remained as the chief operating officer there. So, I was there for there for about six years. So, a lot of different changes there. And then, and then took on this position at high desert Medical Center up in Joshua Tree as a CEO, my first CEO position where I was in that position for about seven and a half years, seven years, and then was given the opportunity to take on JFK Memorial Hospital, beginning of this year in February of 2023. In addition to keeping the high desert role, so kind of overseeing both hospitals now, and it's been, it's been a great experience. It's been wonderful getting to know JFK, getting to know the employees at JFK, the families, the patients. So it's

been really nice to have two very distinct communities to oversee, and, and to see how we can contribute to improving the health care access for these communities.

Bob Firing 03:38

Okay, my understanding is that Desert Regional, JFK, and High Desert are all part of the same system. Is that true?

Karen Faulis 03:42

That is very true. Back in I forget now, if it was 2018 2019, there was a new network formed called Desert Care Network. And you're right, it's all three hospitals are part of this network. And, and our CEO, Michelle Finney, who's also the CEO of Desert Regional Medical Center was instrumental in forming this network. And so, we cover a large area of Coachella Valley and all the way up into the high desert area. In addition to that, there's a ambulatory surgery centers that are affiliated with the with the network. There's a medical staff Foundation, which is where physicians work out of these clinics that are spread out in the kitchen Valley and then up in Morongo Basin. So we have a lot of services to offer, the Coachella Valley and the Morongo Basin areas.

Bob Firing 04:52

So are there benefits to the patient of the three of you being part of the same network work?

Karen Faulis 05:01

Definitely yes, yeah. So, you know, years ago, hospitals try to be everything to everyone. In other words, every hospital would want to have the same services as their, you know, competitor would or whatever, even if you are in the same network, you'd want to have all the same services. But over time, what has been found is that duplicate services like that are really, it's really not beneficial to the viability of the facilities even within the same network. So. So for example, if you look at JFK Memorial Hospital, it's considered a community hospital. And but it also does have a cardiac cath lab, which is a higher level of care. It's also a level four Trauma Center, just recently became a level four trauma center, it is a stroke, primary stroke center. So there are differences and a little more elevated community, hospital essence to it. But when you look at Desert Regional Medical Center, that is the only level one trauma center in in the whole Coachella Valley covers a large geographic area that it takes care of. And it has, you know, lots of lots of services there a level three NICU, in other words, the really sick babies, that's the only the only center in the area that has that kind of high level care for our newborns. It has lots of neurosurgery advanced cardiac care. So it's more involved. And so when patients are either at JFK or high desert that need a higher level of care, we have a very seamless transition that we can send those patients to Desert Regional to get that, that type of care there. So it really is, it's really a smart way to do this, in terms of ensuring that care is close to home for patients in those respective areas. But when additional care is needed a higher level of care, we can quickly get that patient to where they need to go.

Bob Firing 07:18

I see. So if I'm hearing you correctly, if someone is really sick, or has an emergency, they're going to go to the closest hospital. But then after they're evaluated, if there are especially if more sophisticated

procedures are required, they're likely to be transferred to Desert Regional in Palm Springs. Is that true? Am I getting that right?

Karen Faulis 07:48

Yes, exactly. Right, right. There a tertiary care center there. They focus on bringing patients in from within the network, but also outside of the network. And all different hospitals will transfer patients into Desert Regional Medical Center. But you'd be surprised what JFK and high desert Medical Center can care for just even to keep patients local, keep patients close to home, that's our motto, within the care network is we really want to keep patients close to home as much as we can. So we're always looking for ways to do that. But again, you can't be everything to everyone anymore. So it's better to really go to a place that has that higher level of care that they see those patients a lot throughout the year. So they have the right special specialists and equipment at those facilities.

Bob Firing 08:42

Okay, and my next question is that I think our residents typically have a different definition of an emergency than a hospital does. And it results in them going to an emergency room and waiting around a long time before they're actually seen. Could you describe it from a hospital's point of view?

Karen Faulis 09:11

Sure. Okay. So yeah, so hospital is going to see an emergency as something that maybe defined as I have trouble breathing, My chest hurts or any type of symptom. I'm not able to, you know, my face is droopy, right? So here I am describing things like a heart attack, a stroke. So to a hospital, those are emergencies, or let's say a motor vehicle accident where there's some serious injury. Those are just some examples of what an emergency would be. With that being said, over the years, patients and individuals have come to the emergency department for even non emergent, what we would define as emergent conditions. And that's it Okay, because what we've done in our in our facilities, is we recognize that we welcome that. And we set up different pathways for individuals who have real serious, acute sicknesses or whatever the issue may be injuries. And then we have a different pathway for those people who, who come in with maybe lower acuity lower, you know, pain, lower sickness, and we can get them in and out quicker. And, and so there's different pathways that you can go, I have to say, if anyone has ever been in the JFK emergency department, it's quite small, has reputation being quite small, but statistically, with the number of patients that go through, go through that facility on an annual basis, the quickness that actually most patients who are you know, able to be discharged from the emergency department, they get in and out very, very quickly, they do an amazing job in that emergency department to get patients in and out. And I've, I actually went down there, and I kind of observed and watched how they do it. And it really is a true team effort, where you have the ER, emergency department providers, meaning the physicians and the and the mid levels or this or the PAs or the nurse practitioners, they'll go right out into the triage area, and they'll be talking to the patients while the while the nurses triaging them, and then they can you know, start the process right away. I mean, they're very, very good with that. So, so yes, there's different definitions, but we don't want to discourage folks from coming to the emergency department. If they do, you need care, because we do have different pathways that we can we can put them in so they can get in and out as quickly as possible to.

Bob Firing 11:55

I did a podcast a few years ago, with the paramedics at the fire station road right over here on Avenue 40. And they said that don't go to the hospital yourself, call 911 Let them take you to the hospital. And they'll decide which hospital to go to. Because they have far more information than is, you know, available to a typical resident. So would you talk, another option is urgent care, and you have ambulatory care? So would you discuss that for our residents, please?

Karen Faulis 12:38

Yeah, so there's a couple of different options. You know, there's the emergency department, there is an urgent care center. So those are splattered throughout the Coachella Valley, you'll see them on, in in shopping centers on corners, you'll see them all out there. And, you know, those are okay for they don't have usually don't have a lot of diagnostic types of services there. Because they're meant for you know, you know, a sprain strain a cold, you know, not feeling well type of, you know, kind of lower acuity types of situations. So, so it's not to say that you're not going to wait at those places either. And so, those are places that you can go to for, you know, very low acuity types of situations. ambulatory surgery center is somewhere where you're going to go for a scheduled surgical procedure. And where you won't need to stay overnight in a hospital. Usually, your surgeon will schedule you at either an ambulatory surgery center or the hospital, depending on you can still come to the hospital for you know, low, lower, less serious cases, you know, to have them scheduled. So your surgeon will do that. But an ambulatory surgery center is essentially what it means, you know, you're ambulating you're walking in and you're walking out. So the same thing the same day.

Bob Firing 14:14

I see. Okay, and then finally, one thing we haven't talked about is the Eisenhower Medical Center, which is for what, probably because a great marketing is really well known here in the Coachella Valley. Do you regard them as frenemies or do you work together or what is your relationship with them?

Karen Faulis 14:41

Yeah, so you know, honestly, we work we work well with all of our competitors, right? Because you have to, you know, in every place I've been, whether it was New York or Nevada or California, when it comes down to it, we're all on the same page when patients you'd care, we borrow supplies or equipment from each other, whatever the case might be to make sure that that patient gets with the care that they deserve. So, so in that respect, you know, when it comes to patient care, we're all on the same page. healthy competition is always good. I've always said that, you know, because it's just elegant, it forces you to elevate your game also. And I would say that, you know, Eisenhower, they provide fine care, they do a very nice job in providing care. You know, I would say that just in general desert Care Network provides care to, again, I'm not, I'm not going to compare here, I'm just saying desert carry network is all inclusive. It doesn't matter. You know, what your background is what your payer source is, you know, we will see you we will schedule your cases, we will, we will take care of you. There are federal regulations that require all hospitals in the emergency department to see all patients irregardless of payer source. But I would say desert care network is, is very, very focused on that we go out into the communities. And, you know, we have out of Desert Regional, there's a resident program, medical resident program that actually has a mobile unit, a medical mobile unit that goes out into the areas, especially around Indio could Shala that whole area, and they, they look, they go out to

the people and they provide care. And so that's something that's really distinct, I would say, between desert care network and Eisenhower in terms of the care that that's being provided out in, in the under resourced areas. Yeah. So again, healthy competition. You know, I would never say anything negative about Eisenhower. But I think there's, there's a distinction between the two systems in that respect.

Bob Firing 17:11

Okay. Fair enough. And then one final question, as long as I've got you on the line here, and that is flu season is upon us, and COVID is back in there. You know, recommending more vaccines? Do you have any thoughts on that for our residents?

Karen Faulis 17:33

Yeah, you know, I think it depends on your physical situation, in terms of, you know, both are being recommended, certainly to prevent any serious types of illnesses. Getting the flu vaccine for years doesn't mean that you won't get the flu, it just means that if you do if you did get the virus, maybe your symptoms won't be as strong. Same thing with COVID. You know, vaccines will I don't know if there's any vaccines out there that will 100% guarantee, you won't get that type of virus, but if you do, you have those antibodies already going in your system that will help to fight the virus when your body, you know, sees it inside of inside. So, so I would definitely recommend getting, getting what you feel is necessary for you your situation, in terms of protecting yourself from any of those viruses.

Bob Firing 18:41

Okay. Well, Karen, thank you very much for your time, I think that our residents are going to benefit a lot from hearing what you have to say. And thank you for keeping us safe.

Karen Faulis 18:56

Oh, you're welcome. My pleasure. And, you know, I hope that folks have an opportunity to visit Hi, sorry, JFK, at any point, we are doing some work inside to kind of modernize it a little bit. And we've gotten receive some very nice feedback on that. And again, you know, the ER is a place where you can come to JFK and really be seen very quickly. So we appreciate you staying close to home and using the resources that you have and would love to see you either as a patient or as a visitor.

Bob Firing 19:33

And I was just thinking as you were talking that some of our residents might have questions that I didn't think to ask, and if you do it feel send it in to send the question into podcasts that Sun City Shadow Hills. Will we'll get Karen to address it, and we'll put it in the Ask a Question section of our website. So Karen Thank you again we appreciate it very much and I'll let you go back to work.

Karen Faulis 20:07

Okay very good well thank you Bob appreciate it

Bob Firing 20:10

okay and for the audience that's all for today until next time, bye-bye.