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Hospitals turn to Sarah Patterson, the health care sensei, and here's why

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Sarah Patterson

Title: Executive director and executive sensei of the Virginia Mason Institute

Education: Bachelor's in English literature from St. Lawrence University, N.Y.; master's in health administration from the University of Washington

Family: Chuck Kinsey, husband; two adult daughters who live in Seattle

Hobbies: Skiing (cross country and downhill), cycling, traveling and spending time with her family

Sarah Patterson leads the Virginia Mason Institute, an offshoot of the Virginia Mason Medical Center that helps other health care systems improve quality of care and eliminate wasted steps based on the principles of the Toyota Production System.

Patterson, who has been with Virginia Mason for 30 years, traveled to Japan in 2001 with a team of Virginia Mason executives to learn about the Toyota Production System and bring it to Virginia Mason. They ultimately designed a system adapted specifically for health care – the Virginia Mason Production System.

As more and more health care leaders began asking Virginia Mason for help introducing the system in their organizations, the Virginia Mason Institute was created in 2008 to meet the demand for training and education from other health care professionals.

Patterson became the institute's executive director – and executive sensei – in 2017.

What does it mean to be executive sensei? Sensei is Japanese for teacher, coach, guide. One of the key things we teach leaders is not to be the problem solvers, but to empower their team to be the problem solvers. The leader's job is to be the problem framer. For those whose leadership style is to be the hero and solve the problem, it is more of a struggle. For me, that really clicks. As sensei, I help leaders go out into their organization and see what's going on. In my own experience as a leader, you tend to spend most of your time in meetings and in your office when you should be out where care is being delivered,



finding out what the problems are and following up on improvements to make sure they don't fall by the wayside.

How has health care changed for the better during your career? There may be clinical people who would not like to hear this, but I do think it is electronic medical records. The fact that we have much more information at our fingertips about patients and their care has been a huge change. Younger people don't understand when I describe to them the processes we used to have that were dedicated to moving paper charts around our system. But there's also been incredible clinical improvements. I had a brother who died at 17 from a leukemia that is now treatable by a pill you can take every day – Gleevec. He would potentially be alive today if that had been available back then.

What is the biggest challenge facing health care today? One of the biggest things is the cost. It's unsustainable as a portion of our gross domestic product. There's opportunity to address that by eliminating waste in the existing system, but some of it is helping patients take care of themselves if they have a chronic illness. There are a lot of disruptive things going on and new

ways of putting tools in the hands of patients. It's about being able to innovate and adapt to changes and not get stuck in old models. That's something we work on with our clients at the institute – how to build innovation into the day to day so we can change quickly and get the right care to the right patient at the right time.

Describe your perfect weekend. We just had one. We went out to the Methow Valley. We went cross-country skiing both days and we read and we fixed a great meal – that's a great weekend. It would have been even better if our kids and their friends were with us, but it was just my husband this time. What we love is going on trips that are very active. We went on a trip to Greece last fall and went hiking and kayaking. Every day we were doing something active. It's a great way to get your mind off everything else. You feel great.

What's kept you at Virginia Mason all of these years? Number one is the people I work with – really smart, really good people focused on what's the right thing to do for patients. I also was offered opportunities to do different things in the organization. I didn't always see them as opportunities when they were presented, but I trusted the people who offered them, and I always said yes because I knew I would learn something. It made feel like I was understanding all of the different components of the health care system.

Does political uncertainty make your job more difficult? It doesn't help. For those of us who work on the front line of health care, what always grounds us is the interaction we have with our patients because that helps us to continue moving forward. But you do have to commit to being involved in that whole political process. Virginia Mason along with other health care organizations stays actively involved by providing information to legislators who are trying to do their job both at a national and local level.

What would you like to do if you weren't a health care executive? I think it would be great to be a college professor. My grandfather was a college professor. I attended a small liberal arts college and it just seemed like a great community. The idea of learning and thinking about things in different ways has always been part of me. I could actually see teaching in a master's of business administration program.