

**Featuring AMGA Board Chair Tim Weir, M.H.A., M.B.A., FACHE**

*Editor's note: This excerpt is adapted from comments made by Tim Weir, M.H.A., M.B.A., FACHE, chief executive officer at Olmsted Medical Center and 2022 chair of the AMGA Board of Directors, at the AMGA 2022 Annual Conference on the morning of March 12, 2022, in Las Vegas, Nevada.*

**M**y message to all of you today is one of optimism, acknowledging the challenges that we have faced, and the leadership and resiliency you have all shown. I want to share how proud I am to be your colleague in what I consider to be one of the most important vocations: the delivery of health care.

Some of you may have been called to this vocation from a young age. For others, like myself, it took a bit longer. My path into health care may be unique, a bit unpredictable, but what a great journey it has been.

**Path to Health Care**

When I was 14, I had the good fortune to have a role, which may not exist any longer, as a house orderly at Dakota Hospital in Fargo, North Dakota.

The role was based out of the Emergency Department, and working all shifts including evenings and weekends, the experiences that I had from age 14 to 18 were amazing. It's hard to believe that as a 14-year-old, I transported patients—both dead and alive, set up patient traction, held children during spinal taps, performed all required CPR during codes, and, lastly, could dean on autopsies for extra money. I doubt these duties are still available today, but what an opportunity.

After high school, I moved to Tucson to attend the University of Arizona; however, as a kid from North Dakota, sun and acquaintances trumped scholastics, so I dropped out and worked at a golf course cutting grass for several

years. I soon realized three bucks an hour wasn't going to work too well. So, I found my way back to Minneapolis and got a full-time job as a house orderly in Methodist Hospital in St. Louis Park.

The best thing about working at Methodist Hospital as an orderly was meeting my wife, Meg, back in 1985. She was working as a PT aide waiting to get into PT school. Meg was smarter than me, had college credits and a plan, and she had a car! I, on the other hand, had no college credits, took two buses from south Minneapolis to get to work, and ate ice cream cups and saltine crackers and drank 7-Up from the nurses' stations refrigerators, as I was broke. I soon realized that I needed to get my act together. So while still working full time, I went

*Reflections on the pathways to our present and how we can forge a shared journey forward*

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to school year-round, discovered healthcare administration, finished up graduate school, and 36 years later, we are blessed to have a wonderful family with us here today.

**COVID: Confronting the Unexpected**

I share my journey into health care as an example of the unexpected twists and turns life takes. On a global scale, the pandemic isn't so much a turn in the road as a drop off a cliff. What a period it has been and what tremendous

turmoil all of us have experienced. I think it is fair to say that confronting COVID-19 has been probably one of the most trying and challenging times in health care for so many people, including all of you.

We are not the same leaders we were three years ago. We faced clinical and financial challenges, supply chain and staffing shortages, and a move to virtual not only

for patients but for the operations of our organizations. Recently, I was reviewing a 2022 environmental scan report that detailed the unprecedented financial loss to U.S. hospitals/health systems and medical groups. It is projected to be close to a \$54 billion net income loss. My sincere appreciation for the advocacy efforts of AMGA and for their leadership as healthcare systems and private medical groups felt the direct financial impact, compromising their ability to potentially remain solvent during the early COVID-19 timeframe.

The pandemic's toll over the past couple of years has been devastating. Medicine, one of the oldest and most noble occupations, is under

so much pressure at a time when the lines between public health and the provision of health care have never been more blurred and intertwined. So often, the rage and noise are deafening, with so much misinformation, mistrust, anger—at a time when folks need to stay connected and need a path to follow that is consistent, well-respected, inclusive, and inviting. We have to provide that path.

**AMGA's Legacy**

That is the reason that AMGA has been a sustainable beacon organization for so many of our groups since it was first incorporated May 1, 1950, as the America Association of Medical Clinics (AAMC).

AMGA is that haven that we all need in order to learn from each other; share innovations, successes, and failures; and, most importantly, remain connected. We are a convening organization of 400+ groups and health systems with a patient base of 142 million individuals, serving well over one-third of the country. Think about that for a moment. That is truly significant. This organization is here to help make a difference, and you are part of it.

Legacy and history are often what hold people together, and innovation is how we grow. Dr. Mark Briesacher, an AMGA Board member and who I consider one of the most talented and thoughtful leaders in health care, made a comment the other day in one of our meetings. He was reflecting on AMGA's history and, more specifically, the commonality of the guiding principles and values from 1950 to today. I was curious, so I looked up the founding principles and discovered timeless ones, such as, "To give mutual help among clinics by interchange of ideas and experiences."

These values of the organization have lasted throughout the years. We've evolved, but we haven't lost

many of our historical AMGA key attributes: innovation, convener, forward looking, relevant, all with an aim be a "forever organization." Thanks, Mark, for your comments.

With that desire to be a forever organization comes a responsibility to adapt and change. Today's world is dramatically different than it was 70 years ago. Our healthcare organizations and membership are different. We have seen clinical and technology advances, workforce challenges, shifting demographics, and an urgency to address diversity, equity, and inclusion, both within our organizations and within our communities. As leaders, we are called to adapt and change.

**Lead and Mentor**

My ask to all of you is that you lead in your own ways, partner effectively, and facilitate the mentoring of our next generation of healthcare leaders.

Today, I'm clearly not that same person who chose to cut grass instead of staying in college. Nor am I the same as when I joined the crowd in chanting "we will rock you" three years ago at our conference. The pandemic, life, other people, all contribute to pushing us beyond what we thought were our boundaries. I think we can all agree that we have changed as leaders. And with our new knowledge and perhaps an upgraded coat of armor, we are ready to lead healthcare delivery and improve the health of our communities.

I'll leave you with my final take: Life is unpredictable, jobs and careers take interesting turns, but a good life it is. Find each other, stay connected, share and learn from each other, and push forward, as there is no other way that I know to survive. **GPJ**

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