

Podcast Transcript

Risk Never Sleeps

Episode 85

Apurv Gupta

Ed Gaudet: Welcome to the Risk Never Sleeps Podcast, in which we talk to the folks that are on the front lines, delivering care, and protecting patient safety. I am Ed Gaudet, the host of the program, and I'm pleased today to be joined by Apurv Gupta, the Vice President at Premier. Really great to see you today, and I'm really excited to hear more about your journey. Let's get started with the first question, which is really tell the listeners about your role and your current organization.

Apurv Gupta: Thank you so much, Ed. I really appreciate the chance to be on with you here and talk with you in this unique forum about a topic that I think hopefully is going to pique the interest of many of our listeners here. Right? Something they may not be expecting. Let's just say that.

Ed Gaudet: That they will love quote-unquote.

Apurv Gupta: How's that for a sneak preview? I love that too. So yes, thank you. It's such a pleasure and honor. So thanks for opening that up with that question. I think it's always helpful to have that background. I'm an internal medicine physician. I worked as a hospitalist for 20 plus years. I was a medical director of a fairly large hospitalist group out in the East Coast. And then I became chief medical officer at a couple of different community hospitals, also close to Boston. Finally came into consulting about ten years ago with a few different firms, initially with FTI consulting, then with Navigant, which has recently become Guidehouse, and now with a company called Premier. And loving my role here at Premier, it's still consulting in the health care world.

Apurv Gupta (cont'd): Really, my experience and background is all in quality improvement, performance improvement, operations improvement. So you could say that's really what I do as my day job is trying to help our clients, which are health systems, hospitals, and physician groups, try to figure out how they can actually improve their performance, improve quality, reduce cost, improve value over time. And what we really realized in the course of that journey, I think, which is what leads will lead into the bulk of this conversation, is that as we do that work, it's not so much about the subject matter itself or even the tactics of what needs to be done, but it's actually about the framework, the governance, what we call clinical governance when we work with doctors and nurses, it's the strategic components and the mission, vision, values, and how they connect. So that's what really leads to true transformation, cultural transformation that we're trying to drive. And so that's what my company Premier is in the business of doing.

Ed Gaudet: Excellent. Yeah. And it starts foundationally with that shared mission that is so unique to health care. You really can't get that in any other industry.

Apurv Gupta: It's unbelievable. You're absolutely right. So one it's the people that go into that industry. They already have some sense of common purpose and shared vision and mission. And so that's amazing that you're starting with that. Then you're starting with those organizations, as you just mentioned, that also have it deeply embedded in their purpose. And therein actually lies the rub at what winds up happening, unfortunately, with the people of health care, that's the doctors and the nurses and other staff, is that they come into it intentioned, but unfortunately, over many decades, sometimes, unfortunately, even shorter time period, they have the division and the mission, the hope of love and compassion. Unfortunately, it gets drummed out of us systematically, almost because they focus in in our education and our training and even in our practice, winds up becoming the day to day routine of seeing as many patients as you can and being as efficient as you can. People wind up becoming cynical. They wind up getting disengaged. Unfortunately, we've all been hearing about the burnout crisis, which then can emanate out of that. So it becomes a real problem for the people. And then on the organizational side, what we find is that even though the organizations have these very deeply created mission, vision, values, unfortunately sometimes they don't come into the strategy, they don't come into the operations of the organization. So they often wind up being more like a mottos. And so yeah, superficial, right?

Apurv Gupta (cont'd): You feel good about it when you talk about it, but then how are you actually living it? So that's really where both the opportunity is because it is so deep in us, in our organizations, yet at the same time it's not being lived.

Ed Gaudet: Yeah, I like to refer to that as the hardening of the soul.

Apurv Gupta: I couldn't have put it better. That it's so true. It's so true. It's over. And I think we all feel that hardening over time. Almost sometimes you can even feel it on a day-to-day basis. Many of the physicians that I speak to, unfortunately, they say they feel it's because of the bureaucracy and the dealing with the insurance companies and being on the phone for hours beyond the patient care, trying to just negotiate the right thing for their patients. And so with each of those conversations, I'm sure their soul is feeling like it's hardening a little bit.

Ed Gaudet: Yeah. And people create these rackets to deal with it too, which also caused to the stress and the anxiety of the situation.

Apurv Gupta: Yes, yes. Go ahead, Ed.

Ed Gaudet: Yeah. No, I was going to say there's a good book out. I don't know if you've read it. It's called The Three Laws of Performance. And basically the premise is that there are these three laws that actually help leaders drive performance. And it starts with the correlation of language to behavior. And there's this notion of people bringing rackets, quote-unquote, things that they do to survive, basically, self-preservation. And so I always go back and remind myself to read that.

Apurv Gupta: I think it's a great recommendation. I have not read that book. It sounds right up my alley. And I love the.

Ed Gaudet: You'll love it.

Apurv Gupta: Love it. Yeah. There you go. I'm definitely going to get that. Thanks for recommending it. I agree with you. I think that unfortunately what you're calling a racket, I still have to get my head around it from the book, but how I think of what you're saying is workarounds. In health care especially, we have a lot of workarounds that everyone has created in order to survive. And sometimes those workarounds wind up helping us and leading to better patient outcomes because we somehow figured it out. But unfortunately, at the end of the day, it's very taxing because with almost every encounter, we have to go into that same sort of super ordinary performance. It requires almost a miraculous, heroic level of performance, with almost every patient encounter to deliver the level of care that we know the patients need. That is amazing that we have so many practitioners that are able to do it. But at the same time, you think it's so daunting when you think they have to do it patient after patient, day after day. Unfortunately, no wonder even the most compassionate of our practitioners wind up burning out at some point.

Ed Gaudet: Yeah, I watched it with my daughter who was going through nursing school and she had a job at a local, so I'm from Boston, it was a local hospital in Boston, and she was on the psych ward, and she worked the midnight to 7 a.m. shift or some crazy shift. And she went in with full of life and love and pursuit of solving the mental health crisis. And she came out of it just with a hardened soul. And it was a really brief period of time. And I watched this change her, and I thought, That's just awful. Is it like that in every place, I wonder?

Apurv Gupta: Yeah, it just breaks our souls to even witness that happening in a young person, especially someone so close to you. How long was she in that role for?

Ed Gaudet: She did it for, I think, about a year and a half, and it totally changed her perspective. And she got out of it. She would have made a great nurse. She's the perfect profile: caring, loving. But she found like every time she would express that care, she just was beaten down. And you know, and so.

Apurv Gupta: The system isn't set up for that type of behavior. And that's really where the problem is for I used to get I get a kick out of this, like coming up with a different way to think. I used to describe myself as a recovering physician.

Apurv Gupta (cont'd): Many others, sometimes after that, I learned to say the same thing. It's almost like you've gone through something very traumatic in the course of your training and your practice. And so we use humor sometimes to self-deprecation. I find some common. Unfortunately, that's the case for so many of our practitioners. It's almost the norm. Those folks who are truly thriving, that have somehow been able to get around, that seems to be a small handful of people. I always marvel at the small fraction of people I know that are really able to continue persevering in those direct patient care facing roles, and they're full of life and energy. Unfortunately, far too often I see it's the opposite of what your daughter is experienced. It's again, I think because the system is set up really more for bureaucracy. They're trying to optimize efficiency, trying to optimize billing and collections. Almost everything that is, that feels to the clinician other than what patient care should be about.

Ed Gaudet: Yeah. So how do we solve for it?

Apurv Gupta: There you go. And the answer that you've already given many preludes to is I think it's love. I think that's what we're really talking about. So we have recently working with a group of people over the past year, came up with this idea we call a loving organization. And the idea is, I guess we can unpack that a little bit. Why love? Why do we call it love? And why do we think love is the solution. Beyond love sounds great. Who doesn't love more love? Okay, great. Everything is wonderful about love, right? But yeah, we don't, we want to get beyond motherhood and apple pie nature of it to recognize that. Love is ultimately, for us, it represents the most essential state that we can experience. It's almost like then experience of who we are when we are not dealing with stress and we're not dealing with fear. So it's a very deep, profound essence of who we are, and therefore it's the best way in which we can manifest our best self in the world. And then through working collaboratively with others, we should be able to manifest that in our families, in our churches, in our society. And we just think that the organization is an ideal place within which to collaborate on this with a group of people who should be on a similar mission, vision to try to accomplish the same thing. It's a relatively large, but also still a relatively small unit within which we can create collective change together. And ultimately, the recognition that love is also not just about who we are, but who we are collectively. It's what do we represent when we work with each other. So that's really a represents why we think it's love.

Apurv Gupta (cont'd): We could call it compassion, kindness, empathy. Many of our colleagues do call it that. And frankly they're trying to do similar things based on using just slightly different nomenclature. I think that love really encompasses all of these things. And, or you could say kindness encompasses all of these things; trying to stay out of the semantics, but recognize that we've got to get to just a deeper value that can really emanate into ourselves and then into the work we do together.

Ed Gaudet: I was going to say, I agree with you. And I think also passion is another representation of that as well, that when people are passionate about their job, typically it's followed with I love my job.

Apurv Gupta: Yes, you feel, why do we feel passionate? We feel like we're operating at the best level we can. We feel like we're learning. We feel like we're using our skills at the top of our license. We feel we're growing usually. We feel that we're thriving in our communication with others and our connectedness. So I totally agree. I think passion is another term we use. And I guess something that I've realized is that all these terms really refer to each other. It's very difficult to define any term in isolation and not refer to something else. So I totally agree with you. We could call it passion. We could call it love, we could call it compassion. And I think that to some extent, as we peel those out, we'll realize we're talking about the same thing. Again, we want to think about it as love, because we think of it as a state that should be existing independent of the situation, really independent of even the patient situation. We should be able to operate in a state of love more often than not, really all the time. And we should be able to manifest that in all of our interactions. So sometimes these other terms seem a little bit limiting when we think about respect versus empathy versus kindness or compassion even. Sometimes they feel like they're reserved for specific situations, and we're trying to appeal to something that's a little bit more universal. The other idea of why we think we can solve it through this is not just because it sounds good, it's basic. It's because we think that, unfortunately, the predominant paradigm in most organizations has become to manage through fear, which is really the opposite of love. And that's how we've grown up. That's the societies that we've grown up in, the training we've received. Sometimes it's just been the experience. We think that management has to be through fear, which we define as really reward and punishment or control.

Apurv Gupta (cont'd): So there's always some threat hanging over you when you're managing through fear, and you can get a lot done through fear. But it also has a lot of downsides in that it burns people out, it takes away our energy, it makes us less creative, it allows other people to drive agendas, whereas we feel that the emotions that arise from love are more opening and conducive to creativity, innovation, curiosity. It really opened us up to how we think of operationalizing our dimensions of learning and connectedness. So on the one hand, it's about really being truly open to learning new skills, being curious, being vulnerable, being able to say that I don't know, something really the growth mindset aspect of our natures, that's part of what we think love enables. And then the other part of it is enabled because through connectedness and through communion, through family, through treating each other as the way we want to be treated by others, treating patients like the way we want to have our families be treated through that level of connectedness, combined with learning, is what we think is a relatively practical way to think about how love gets operationalized. One more thing to point out, Ed can then, please jump in and let's keep the conversation discussion part of it going, is that we also want to focus on the fact that we want this to be systematic. There's, in health care, we've already discussed the people of health care already feeling stressed out, burnt out, overwhelmed. They really don't think they can take on any more. So we don't want this to feel like yet another initiative. Now I've got to become a loving organization. This is on top of the other ten initiatives that everyone's already pursuing. We think that this needs to really just be baked into the systems of an organization. So that includes the workflows, the policies, the processes, the culture, the values, the technology and the tools, the leadership. Those are the things that an organization is, that is its people, but it's also beyond its people. And so we can work the love into those structures and the infrastructure. Then we can help an organization actually create an environment within which its people can thrive. So it's not about going back and expecting the people to be more loving and compassionate. Again, when they already came into it with plenty of hope and optimism and love, and it got beaten out of them. We just want to reclaim that environment within which they feel that they can thrive.

Ed Gaudet: Yeah, no, that's great. And oftentimes, fear is temporal, right? So oftentimes, you create this environment where people are reacting. Their default setting becomes to hide and to protect and persevere. And you don't get the best obviously out of the folks. It's never the right path.

Apurv Gupta: And maybe this is a connection back to why your podcast. They are not willing to take risks. Risks have to be taken. They have to be open. They have to be open to explore. You have to be vulnerable. You don't want to take foolish risks, but you need to take appropriate risks. And unfortunately, on a psychological level, we don't take those risks when we feel fear because we feel someone's going to judge us, someone's going to blame us, someone's going to be ready to potentially hold us accountable. So it's a completely different paradigm. And the good news is that there's a different paradigm possible. That's again, it's not just a hope and a utopia. We can manage through love as well. Love is an alternate to fear. We just haven't built a lot of loving system, a lot of loving management systems. So I think that kind of hopefully connecting it back to your central thesis of risk, hopefully it helps our audience also appreciate that there's an appropriate amount of risk that we want our people to be able to take, and love enables that.

Ed Gaudet: Yeah, and I love the passage, one Corinthians, the famous wedding passage that everyone reads at a wedding, right? Love is patient, love is kind. But love also protects and it trusts and it hopes, right? And it always perseveres. And I love that last piece about love. And I think people are born in that state. But I think we learn different behaviors through the, and whatever you call them, rackets or behaviors or whatever, over time to survive, quote-unquote. And if you can create a learning organization where they're bringing love back into the conversation, that's the key. So how do you do that?

Apurv Gupta: Yes. I think you said some incredibly brilliant things. A passage from one Corinthians is amazing to reflect on in that context. The idea of trust is super critical as a foundation to love as well, and many people remind us of that. So it's not to over overlook that. And I think the other point there, you've said is that over time we have learned these rackets in order to survive. So it's that survival mechanism that's kicked in, which really impacts our limbic system neurologically, and that's wired for survival. That's the fear of flight mechanism that we have, which was a very useful mechanism, especially in terms of evolution and biologic evolutionary terms, because we needed that in order to be able to detect threats. It's just that it's become in hyperdrive now, right? We're, we don't live in a world of constant threat, except we're constantly assuming that the world is a constant threat because of the behaviors around us. So we've unfortunately interpreted a lot of the behaviors around us in a way that's threatening to us.

Apurv Gupta (cont'd): And so then we go into shutdown mode and we go into survival mode. And that creates silos, that creates dysfunctionality, that creates all the negative, the seven deadly sins that come out of that same thing; that basically, the greed and the envy and the anger. All ultimately comes down from that shutting down and feeling like I have to protect myself. I have to defend myself. I've got to run away from this situation. I've only got to look out for myself. Love opens up the opposite potential in each of us, both systematically as well as individually. That's what the love allows us to actually connect with people, to care for others, to feel like it's not only about me. Our benefit is in our togetherness. We are united in what we're experiencing. We, particularly in an organizational context, are going through this together. We should not be setting up a we day type of a structure in which, Oh, the leadership is over there and the workers are over here, or the doctors are over there and the nurses are over there. Unfortunately, all of these instincts, behaviors, rackets that you're talking about have come about because of the fear dynamic. And what we're hoping to overcome with them is if we can show that there are alternatives to manage and alternative behaviors that we can display, then we can start opening up the channels of trust and compassion and empathy and love that will allow us to actually flourish. So it not only helps us feel good individually, it helps us as recipients of it. It helps us as givers of it. But collaboratively, we can actually create an environment within which all of us can flourish. And that is the goal. The goal for us is to create an organization which not only do the people of the organization start to feel that way, they can now impart this to their patients. Right? Ultimately, we're all in this together, not just for our own service. Yes, we spend a lot of time in healthcare being the purveyors of health care, but we're doing it for our patients and for our communities. And if they're not feeling the love, then they're not healing. They're feeling isolation, loneliness, depression, anxiety, chronic diseases that they don't feel they're getting good care for. All of that's unfortunately, a manifestation of the fear-based silos that we've created inside us and inside our organizations.

Ed Gaudet: Yeah. And the other danger is, I've often heard that the opposite of love, most people think is hate. And yet those are two emotions you're still experiencing an emotion and a feeling. True opposite of love is indifference. And when we get to it, when we get to an indifferent society, that's the real risk. And you can see it, see the cracks starting to happen.

Apurv Gupta: Absolutely. And Ed, I love this conversation with you because you're getting me to think in so many different ways. That's the whole point of love. It's not that, Hey, I know it all. We know it all. We figured it out. We're going to tell you what to do. The journey that we're on to helping organizations become more loving is an exploratory journey, because they're going to be figuring it out. They're going to be exploring their love and pulling it out. So I love the point you're making. In that context, what I would say is: we often think of that, whether it's hate or whether it's indifference or whether it's fear, I think indifference is ultimately a consequence of fear. To me, I feel that the indifference is the hardening of the soul, and that's happened because of our constant reactivity that we've built up over a long periods of time, until we finally get to a place of, the only way I'm going to survive is to just stay within my zone and not care. But we got there because of these repeated, let's say, attacks and insults of fear over time. So I think they're all connected. Just like we think love is connected to compassion is connected to empathy, is connected to trust. On the negative side, these emotions or states or behaviors are also all connected. And it's just recognizing that we've worked ourselves into those situations because we operated under a different paradigm. But we can work ourselves out of it, too. So I think. There's hope.

Ed Gaudet: That's awesome, and I love how you brought it back full circle as well. Let's change topics if you don't mind. I'd love to learn more about you. And I see that you may have worked at the hospital that we delivered our second daughter at.

Apurv Gupta: Well, no kidding. Which one is that?

Ed Gaudet: Quincy?

Apurv Gupta: Yes, I was at Quincy Medical Center for a couple of years.

Ed Gaudet: Did you work with a doctor, Rao? Do you remember Dr. Rao there?

Apurv Gupta: I think I do, yes, in fact. Oh my goodness, yes. Not very closely, but yes I do. That's, what a small world.

Ed Gaudet: We delivered our second daughter, Laura, who just, she just got married a couple of weeks ago.

Apurv Gupta: That is brilliant. That's excellent.

Ed Gaudet: Well, they closed that hospital, right?

Apurv Gupta: Correct. Unfortunately, I was there just before it closed. And in a I think we felt like it was a very loving attempt to try to save the hospital. Yes, but you could really feel it there. Again, I wasn't part of the community. I've always lived in Rhode Island, although I worked at Quincy Medical Center and before that at Norwood Hospital nearby, before that at Beth Israel in the city. So I've always worked in the Boston region, but I just fell in love with that community because the, it was a city hospital. It was, it really loved by its residents, a lot of the community work at that hospital, and they really wanted to save it. So for me to be there actually felt to me like a time of growth and learning for me to understand what it really means to be a community hospital and to feel like we were doing our best to try to save it. Unfortunately, the situation was a little too far gone at that point, and so we had to declare bankruptcy. And that's a long story, which we will get into still being played out in the press these days. But yes, it's good to know that we have that connection.

Ed Gaudet: Yeah. Interesting. I saw that in your background. So how did you get into health care?

Apurv Gupta: Yeah. So great question. Actually, my origin story is a story, so to speak. I got into health care because way back in the 80s, I was just didn't really have exposure to a lot of other fields. Young Indian kid who had just recently emigrated to the US. My dad was an engineer. And back in those days, if you were coming from that cultural background, you really didn't have an understanding of too much of what's what was out there, so-called, in the world. It was either engineering or medicine. Since my dad was an engineer, I said, Let me try out this medical thing. It seems cool. And I got accepted into an eight-year medical program here in Rhode Island. And so I said, Wow, that's great. So I just started on the journey. 17-year-old kid, what do I really know? I didn't have, unfortunately, too much exposure or refinement in my thinking.

Apurv Gupta (cont'd): Probably somewhere deep inside I felt like I wanted to help society in some way, but also that was pretty ill-formed concepts at that stage is, over the course of that eight-year program that I really feel like I started to get out of my math-science background and my early cultural upbringing, and I actually started to explore public health through the influence of some really good friends of mine who were really interested in community health and public health, started doing some projects in that space. It ultimately led me to take a year off between third and fourth-year of medical school, and I did a master's in public health, and that just lit up my world. I could literally felt like I was on fire, like, Wow, this is what I want to do. Because I was learning things about health care leadership and management. I was learning about evidence-based medicine, disease management, and systems-based care. That's when I said, Wow, this is something totally different. I've never been exposed to this, but I feel like this is who I am. It was my first chance to really explore that, and after that, at every decision I made, including choice of residency, going into internal medicine, going to Beth Israel to do my residency, every decision was about where can I learn more about health care leadership and management and become more schooled in it. And so I actively made decisions after that point to really learn more and become a better manager. I just, I went into hospital medicine because I thought I could stay close to the hospital world and learn how hospitals function, so I could hopefully help make them better. So that was a hospitalist for a long time, and I was an administrator, and that kind of just kept gradually kept going until I came to a point where I said, I really love the quality improvement work that I get to do as an administrator. Where can I do more of it? Maybe I should do consulting because consultants, we as consultants tend to work with a lot of clients and really trying to help them improve performance in many different ways. So that's why I came into consulting ten years ago. And now what I get to do at Premier is explore that at an even deeper level. We're building new solutions to help organizations with quality transformation. We're building this loving organization solution to help clients. A lot of people, when I tell them this is what Premier is doing, Wow, I can't believe Premier is getting into this stuff. It's so cool.

Ed Gaudet: Yeah, it's very cool.

Apurv Gupta: It's really cool. I'm very grateful. I knock on wood. I still feel, I've been a year-and-a-half at Premier, I still feel like I'm in the honeymoon phase. I feel very grateful that an organization like Premier recognizes that we have to be able to help our organizations in a deep, cultural, meaningful way that really leads to their true sustainability rather than just the short-term cost cutting. How are we going to get out of this financial hole? Of course, we can do that as well, but they really need to be done in concert.

Ed Gaudet: I agree, I agree. Outside of health care, what would you be doing? What are you most passionate about?

Apurv Gupta: Yeah, unfortunately, I'm pretty much a geek. I still have been able to ... I got a bunch of that. If you say, what do you like to do? I like to talk about this stuff. And I probably bore my family to death. I bore my friends to death. I'm really pretty much a performance improvement person ... I like, so I like thinking about self-development. I'm really deep into spirituality and kind of pursuing that.

Ed Gaudet: Me too.

Apurv Gupta: Yeah, let's talk about that.

Ed Gaudet: I just became a newly ordained minister.

Apurv Gupta: Oh my God. So I need to learn more about that. How did that come to pass, if you don't mind?

Ed Gaudet: Sure. So my nephew is getting married and they asked me to officiate.

Apurv Gupta: Oh! That's an easy.

Ed Gaudet: I have a ... So he and his brother surrogate sons for me.

Apurv Gupta: That is so wonderful. Your audience may not want us to go into this space, but I would love to go into this space with you. I'm in Rhode Island. You're in ...

Ed Gaudet: I'll have you back on the show, but I'm also a poet. I don't know.

Apurv Gupta: Yeah. Are you?

Ed Gaudet: I published, I'll have to send you some stuff. Yes.

Apurv Gupta: I have not published. I'm just a self-poet. I would love to share.

Ed Gaudet: Yeah. Last year I joined a local group, Friday night readings, whatever. And they had this round robin where you could actually read your stuff, and I'd never done it before. This was during the pandemic, and I think that's a year after. And anyway, so I started reading my stuff in this forum, and the reactions were just overwhelmingly positive. And I connected with the leader of the group there, and he encouraged me to really look outside and get published. And so I did that.

Apurv Gupta: Oh my god, I need to learn from you. Friends of mine have told me that, and others, when I actually contacted some publishers and say, We stay away from poetry. So I got this.

Ed Gaudet: Yeah. Oh, I can help you there maybe. Yeah, absolutely. In fact, there's a reading this weekend in Plymouth at the Arts Center.

Apurv Gupta: Awesome. Please invite me. I don't know if I can make it, which one I can make it to, but I will definitely plan to prioritize.

Ed Gaudet: That's great. Yeah, I'll connect with you on that, but I'd love to have the spiritual conversation as well. Very good you opened the door. So if you could go back in time and tell your 20-year-old self anything, what would it be?

Apurv Gupta: Yeah, I think I would tell my 20-year-old self some of what we're talking about today. One of the things that got me on the spiritual journey. I was happening to be transitioning from one job to another. Actually, I was already at Navigant and, but I was an independent contractor and then they hired me full-time. And wouldn't you know it, as soon as they hired me full-time, all the amazing projects we were working on as a independent contractor, suddenly, either finished or they just dried up. And now here I am, fully employed. But there's literally no work to be done. That was on the beach right away. So I had time on my hands. It was almost my own kind of sabbatical. So I started reading, and one of the first books I picked up was a book called Mindset by Carol Dweck. Amazing book. It's always, when someone asks me for a book recommendation, it's always the first book that's on my mind. I read it, my wife had been trying to get me to read it for a couple of years, and I said, No thanks, I don't need it. I'm already I've already got. The book is about growth mindset versus fixed mindset. And I said, I already have growth mindset. I was so arrogant and full of myself and I already got it. I don't need to read it. Then I picked it up and I was blown away because when I did the rubric in the book, it's a six-point rubric, I said, Oh my God, I've always thought of myself as a growth-oriented person, but I'm only three out of six. Oh, this is crazy. And that just popped open my, that just popped me open. So that's when my spiritual journey really began of September 2017, because literally everything I was reading in that book was just going inside me and changing me as I was reading it. And I was becoming growth mindset just through the reading of that book. It really opened me up. And so if I were to go back and talk to my 20-year-old self, I would say be a growth mindset-oriented person. And that's, it is about learning, but it's about learning in a different way. It's about learning in a way that's not about judgment. It's not about, it's really about putting in the effort, not trying to get to where you need to get to as fast as possible. Appreciating the journey. So that's what growth mindset teaches you. Before that actually I had done a lot of different things. I think I achieved some success in a few different areas, but I really was living more what I call the American Dream, which is live for the weekend. Try to enjoy yourself, relax, and have a good time. And so to me, that felt like what I was trying to do. Once I read the book, I realized, Oh my God, it's actually about the effort. And I started actually appreciating the effort. Then I started finding that to be more enjoyable. So it was a shift in perspective for me that allowed me to then I feel, get deeper meaning out of life and get a deeper engagement with my work.

Ed Gaudet: ... probably, I'm sure to.

Apurv Gupta: Yes, I hope so. My son definitely got into a growth mindset. I think my daughter probably to some extent, definitely my wife. And then it spread. Of course, as you can tell, I'm a geeky guy, so I pretty much talk about this all the time. That to me it was the doorway to spirituality. It really brought me to the place where a mad science, a relative atheist like me, agnostic, no better at that time, I would have never entered into this if it wasn't through the pathway of psychology. It was positive psychology. Then I started reading about biology and neuroanatomy, and how all the sciences were coming to the same place, neuroplasticity. And that finally brought me to some of the religious texts like the Gita and Hinduism and the Bible and others. And, but it took me a while to get there because, again, my math-science brain wouldn't have allowed me to get there. So that's why I feel like for people like me who are left-brained and math-science-oriented, positive psychology just turned out to be an amazing way to approach this.

Ed Gaudet: No, it's the real deal. Have you read the Project 369?

Apurv Gupta: I have not, no. What is that about?

Ed Gaudet: It's about manifestation.

Apurv Gupta: Wow. Oh my God. I love that.

Ed Gaudet: Check that out. Yeah.

Apurv Gupta: Project 369. Excellent. There's, give me, would you mind texting me though?

Ed Gaudet: I'll send you those. Yeah, I'll send that.

Apurv Gupta: Yeah, please do.

Ed Gaudet: And likewise if you could just send me the Mindset too and I'll send you some poems as well if you're interested.

Apurv Gupta: I love it. Please do. Please do. Yeah. Thank you.

Ed Gaudet: Yeah. This is terrific. I'd be remiss if I didn't ask you this question. This is a Risk Never Sleeps Podcast. What's the riskiest thing you've ever done?

Apurv Gupta: That's interesting. Probably, my friends would say many things, but back when I was just out of residency, still relatively young, didn't have a family at that time. This was back in the late 90s. That was the internet heyday, and I had just learned about the internet, mind you, just like a year before. But I said, Wow, we're working on some pretty cool stuff in the area of disease management, things that it felt like were on the cutting edge of population health. Why don't I try my hand at actually commercializing some of these? So I left the world of medicine, and for almost three years, I was doing my own thing as an entrepreneur and really took a leap, a big leap of faith without any preparation. I'm really not a, it wasn't really a, I was, I am a management person. I was appreciating management. But I'm not an entrepreneur. I know that now, after many failed attempts at entrepreneurship, I will probably still keep trying because I love entrepreneurship. But that was a big risk because I wasn't making any money and I just jumped in. And then obviously the opportunity cost. When I got married, I had no savings. So it was challenging, but I loved it. Again, it taught me that you can take risks. I think it's through the risks that we learn and we grow. Of course, you want the risks, those risks to be a wise risk that you're not just taking risks for the sake of taking risks, but you're doing it in a way that you're exposing yourself to more learning and growth.

Ed Gaudet: No, that's great. And last second, the last question. You're on a you're on a desert island. You can take five movies or five record albums. What would you bring?

Apurv Gupta: Wow, wow. Movies, I really love. The question is, do you want to keep watching those movies over and over again?

Ed Gaudet: Yeah, you got to love it. You got to really love those movies.

Apurv Gupta: You have to love those movies. I have to think about it. You know what? Just based on that, I might think I'll go with five albums.

Ed Gaudet: Okay, great.

Apurv Gupta: I think I think you can keep playing over and over again. And I think it's, the music has a way of getting deep inside you, and there's some devotional music that I've recently gotten into. I could probably listen to that endlessly. It has a way of calming you down, and it's like chants. It's Hindu devotional music, so. Yeah. So that music really has a way of grounding me and centering me. It's almost meditative to that effect. And so we call it bhajans, which is a form of devotional music. So I probably take at least 1 or 2 of those along, but you can have it on an endless loop. Something else that I've recently gotten exposed to. A friend of mine, he plays the sitar, and only through him, I got to appreciate the profound spiritual kind of elevating nature of that. It's Indian classical music ... Yes, exactly. And before I heard him play, I could never really get into that music. I was just telling him that earlier today, actually, his name is Srinidhi Reddy and he's a professor at Brown and he plays the sitar so blindly any of the audience gets a chance to to listen. Ed, maybe you should come down sometime, get a chance to listen to him.

Ed Gaudet: I would do that. I would love that. Yeah.

Apurv Gupta: I'll invite you to it.

Ed Gaudet: Brian Jones of the Rolling Stones, it has several songs with sitar on it.

Apurv Gupta: There you go. Yeah. So we'll find that connection too. I just remember the first time I heard him play, I was with my dad. We just sat in the auditorium, and we were both mesmerized. And every time I've listened to him, it's almost the same experience. It's hypnotic, trance-like, sort of an experience. So that's probably something else I would take with me. I imagine on a desert island, we'd probably need a lot of that.

Ed Gaudet: Take your own sitar and learn how to play.

Apurv Gupta: There you go. You didn't give me that option. But yeah, but if you give me that option, that might be great.

Ed Gaudet: And then you're gonna use your right brain for that. You're following the rules. See?

Apurv Gupta: Exactly. I know.

Ed Gaudet: Oh, really good. Really good. Last question. What advice would you give to students coming out of graduating now and looking to break into health care or into IT, or cybersecurity, or any of those professions?

Apurv Gupta: Yeah, I love that question too. In general, out of that, I haven't done a lot of work at IT or cyber security. What I have done a lot of work is in health care management and consulting and clinical care. And out of all of those, I always tell everybody, including my son, my daughter, everybody. I try to encourage them: I love consulting. I really feel consulting is a great career. At some point, it's worth trying out. You may not love it as much as I do. You may love it. You may go away from it. You may love it again. A lot of people come in and out of consulting. I think consulting teaches you some amazing skills. It really teaches you how to learn. It teaches you how to grow. It teaches you how to think fast on your feet. You've always got to be at least a half a step ahead of your client, which is the beauty of it. You don't need to be that far ahead because then you're not learning. Then all you're doing is teaching. You just want to be a little bit ahead enough from everything else you've done. But then you're also open to continuing learning from your clients makes consulting a real joy, and you get to explore in it. You get to build new solutions. I call it n of one innovation, where in consulting we're not researchers. We don't need to go and do a randomized, double-blind, controlled trial at ten different places to prove that something is working. That's science. We're not scientists. We just need to show that whatever we're doing can work in one place. And if we can make it work in one place, then we just think, Okay, how replicate it? So I love that form of innovation because it's just from my practical mind and the way in which I want to create change in the world, I feel like that's just perfect.

Apurv Gupta (cont'd): It allows me to be on the cutting edge, not so far out that it's just visionary and that futuristic that no one else is really going to be doing this what I'm doing for a while, but it's not so close to the vest that we're really not advancing the cause. So I guess my answer to your question is for all the youngsters out there, think about a career in consulting, or at least getting exposed to it at some point.

Ed Gaudet: That's great. That's terrific. Apruv, thank you so much for your time, I appreciate you. This has been terrific and I'm sure I'm going to follow up on it spiritual. We can share each other's journey there. That was, I really love to explore that with you.

Apurv Gupta: Oh my god, Ed, this was a sheer delight. I had no idea that a podcast that's going to be called Risk Never Sleeps Podcast take us down this pathway. Unbelievable what you do. I'm looking forward to reading the books you recommended and the poems you're gonna send me, and we're going to talk more about.

Ed Gaudet: Yes, we are. Excellent, excellent. This is Ed Gaudet.

Apurv Gupta: ... friend.

Ed Gaudet: Oh, yeah. You did? Yes. You said. Oh, yes. Well, we will be, I think we're going to end up being very close friends, actually. And I get to Newport too. So maybe when ... Or close to let you know.

Apurv Gupta: Yeah, absolutely. Please.

Ed Gaudet: All right. This is Ed Gaudet from the Risk Never Sleeps Podcast. And remember, if you're on the front lines protecting patient safety and delivering patient care, stay vigilant because Risk Never Sleeps.



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