

Speaker 1 ([00:01](#)):

Is what we call social care. Uh, and that is now, um, executing on strategies in which we already know that a person's behavior, a person's genetics, a person, physical environment will impact their health much more than medical care. The American heart associations mission is to be a relentless force for a world of longer healthier lives. And our pursuit of that mission. We're having some amazing conversations along the way. Welcome to the special edition series on equity, honoring the life leadership and legacy of Bernard J Tyson. These are the stories of the relentless

Speaker 2 ([00:46](#)):

Welcome to episode three, how inequity impacts access to care. This feels incredibly timely. As the American heart association recently released their presidential advisory, structural racism and its connection to health disparities. The statement reads structural racism has been and remains a fundamental cause of persistent health disparities in the United States. So to that end today, we're addressing how inequity impacts access to care and Bernard J Tyson's legacy when it comes to prevention, affordable quality care, social determinants of health, particularly when it relates to communities of color, historically marginalized and vulnerable communities. And the homeless here to help us have this conversation from both professional and personal lenses are dr. Bert Chara shoe care, a friend and colleague who Bernard hired to be the senior vice president and chief health officer for Kaiser foundation health plan and hospitals, dr. She care oversees the organization's efforts focused on addressing the social health of its 12.4 million members and the 68 million people who live in the communities it serves.

Speaker 2 ([01:56](#)):

We also have Carissa Coleman, a dear friend of the Tysons who is also the chairwoman of dignity, health community care. She has received numerous awards for her work towards creating a more diverse community inside and outside of the workplace. And finally, we're glad to be talking with Lloyd Dean, one of Bernard's best friends and a professional competitor. Lloyd is the CEO of common spirit health and president of dignity health foundation. He's a nationally recognized leader within healthcare. So the child let's begin with you, Bernard Tyson hired you and even encouraged you to write your book about community health. Can you talk a little bit about how you came to know him and talk about your personal and professional relationships?

Speaker 1 ([02:39](#)):

So my name is Beshara shoe care and I'm a family physician and I serve as the chief health officer at Kaiser Permanente. So within that role, I'm accountable for making sure that the health and wellbeing of our members, as well as the health and wellbeing of our communities are front and center to our work as an organization. My very

Speaker 3 ([03:00](#)):

First time encountering Bernard was actually on my social media feeds and an article caught my attention at the time. I think it's called it's time to revolutionize race relations. And at that time, all over the country, people were in the streets, demonstrating outrage over the killings of, uh, Michael Brown and Eric Garner. And what I remember reading at that time, that day, wasn't really what a scripted response from a CEO would look like. It was a, you know, a set of real words, authentic words of a black man, a father, and a concerned American. So, you know, many of us were struggling to wrap our heads around what was happening in this country. And Bernard offered the words of hope that these

demonstrations would spark change and lead to a better understanding of race relations. So for me, it was refreshing, it was inspiring. And honestly his perspective got people talking, creating thousands of comments and spurring a conversation at my own kitchen table. So that's really how I got to know Bernard. And then few years later, I ended up being on his team here at Kaiser Permanente

Speaker 2 ([04:25](#)):

Type a story. So, so Bernard would often share a story that he had the epiphany one day walking down the street, as he passed someone who's homeless. He, he says that he realized that he and the healthcare community had an obligation to do more in terms of prevention. I want to get a better sense from you about how you did the work together around these issues to strategize and tackle, access to care specifically in issues such as homelessness.

Speaker 3 ([04:53](#)):

What was so remarkable about working on a massive social issue like homelessness with Bernard was his ability to see where and how the efforts of our organization could make long and lasting impact. You know, Bernard had such a thoughtful, purposeful approach and he believed in listening to experts. So he brought himself deep knowledge and expertise around the healthcare system, how it operates and how it could flex to support new ways of thinking. At the same time, he collaborated with folks who had that level of deep understanding around policy, around social services, around financial investments and around community organizing and by driving and promoting those connections, we were able to develop a strategy that's up to the task. And that's, I think what has inspired me the most and working with Bernard around such a massive social issue like homeless.

Speaker 2 ([06:02](#)):

And so with all of the people that you serve, the millions of people that you serve, how is it possible to give people care? And how did Bernard's legacy and leadership events? This work

Speaker 3 ([06:16](#)):

Bernard was genuine. He was real. And he had this way of looking beyond the horizon to see how far health care could reach if we get it right while at the same time, not losing sight of the day-to-day needs that are facing our communities and our workforce of more than 200,000 people. And that's when we started thinking about the importance of focusing on the social health of our members, the same way we think about their physical health and their mental health. And that's, I think for me was really the transformative part that Bernard pushed us to think through differently that for us to be able to optimize the health and wellbeing of our 12.4 million members, yes, we have to pay attention to their physical health. Yes, we have to pay attention to their mental health, but absolutely we have to pay attention to their social health because there is no way that we can expect someone to live a healthy life, that they don't have a stable roof over their head.

Speaker 3 ([07:22](#)):

There's no way we can expect someone to optimize their health if they're struggling and being able to pay there and meet their basic needs, like having food at their dinner table or having the ability to get to work or the ability to pay their bills. So I think that focus of elevating social health, putting it on the same footing as physical health and mental health and integrating all of that together, which is really the secret recipe, if you want, or the magic recipe that Kaiser Permanente offers is what gives us that opportunity to transform health and healthcare in this country. Something that Bernard was very, very

passionate about. We've realized early on that for us to be able to engage people experiencing homelessness, we need it to partner with community-based organizations. Who've been doing this work in our communities for decades, and we came to the table with a certain set of skills, but with a lot of humility because we want it to lift up the voices and the experience of people who've been doing this work a lot more than we have.

Speaker 3 ([08:31](#)):

So we've engaged healthcare for the homeless programs across the country. We've engaged a homeless providers and every one of our communities to be able to better connect with people, experiencing homelessness and be able to provide them with the wrap around services that they need to be able to optimize their health and eventually, um, get them, uh, into stable housing. So we've partnered with many community-based organizations, but in particular with the Bay area community services organization, and we've identified those 515 people by name we've engaged with them. We provided them with the right support and the right wraparound services. And we've made a commitment that we wanted to get these folks housed within a year and nine months into this project, 515 people over the age of 50 with multiple medical problems were able to get off the streets into stable housing. And now we continue to engage with this group. We continue to engage with the community partner to make sure that they continue, that these folks continue to stay in stable housing. For me, that's a concrete example of how you take a very complex issue like homelessness and try to help solve for it, not just out of policy and system level change perspective, but also on the ground with people who are on the streets and be able to support them to getting them into permanent housing.

Speaker 4 ([10:00](#)):

So speaking of being community-based in your focus, Teresa, please tell us more about how you came to know Bernard. And if you could tell us a little bit about your relationship with him, both personally and professionally. Hi, I'm Carissa Coleman. And I have been here in the Bay area, Silicon Valley since 1972. So for a very long time, you know, I think I had the pleasure of meeting Bernard. I think it was at least 20 years ago. And the first time that we met, we were playing golf in a tournament, a black tournament because it was being sponsored by the executive leadership council, the ELC we were in that tournament. And, you know, we were choking out our respective golf power says, and we were really bad, but he, and he wasn't yet CEO of Kaiser, but it was still a very huge responsibility. And I remember being taken by the ease and Bernard's voice, you know, as we sort of started to get to know each other, um, his authenticity and the way that he spoke about his responsibilities to his family, his commitments to the community, his responsibility, obviously to Kaiser and what really came through.

Speaker 4 ([11:07](#)):

And this came through every time I was with Bernard was his responsibility that he felt to being a man, a black man in this world. I loved Bernard's laugh. You know, it was indicative of, of his love for life in general, but he was just, um, he's an amazing figure. A few years after I met Bernard, I found myself, uh, in healthcare. And then we actually shared our love for a mutual friend and Polly Lloyd D who was CEO of not common spirit health. And, you know, they were really good friends, but they were also great colleagues and fierce competitors. And, and together they showed the world how that could be done, you know, because people think you're either in competition or your friends or your colleagues. And, you know, I was so proud because the way that they cared about each other, the way that they had each other's backs, the way that they shared information, um, to really create this, this wonderful atmosphere of collegiality, as they built both, you know, had responsibility for, um, mammoth organizations, one being Kaiser and the other one being dignity health.

Speaker 4 ([12:19](#)):

And, um, and yet somehow they figured out that they needed to change health care together in this country. And that made a huge difference. You know, you know, the interest to that really brought us all together was that it was the way that we wanted to care for our fellow man, that we felt that that was really a responsibility. We also shared the importance of how we needed to show up as executives and more specifically black executives. And I took that really very seriously and it showed in everything that he did and, and the way that he conducted himself and everything that he said. And as chairman of dignity health, at one time, I was so proud to be sandwiched between these two CEOs of these big organizations. And as I said, black CEOs changing healthcare in our country.

Speaker 2 ([13:11](#)):

So powerful image and a powerful message for many of us who often look for leadership and leadership that are willing to, um, identify issues such as race, such as embracing identity and talking about what that means. So I'm grateful to hear this and to hear you sharing about this, um, this seems like a great segue to Lloyd Dean.

Speaker 5 ([13:33](#)):

My name is Lloyd Dean. I'm the CEO of common spirit, uh, health, uh, and my relationship with, um, Bernard Tyson was twofold. Uh, one, uh, professionally in one, uh, personally, uh, Bernard was a, um, legacy, uh, voice, uh, in, uh, healthcare. And in 2000, uh, I came to, uh, California, uh, to be the CEO of, uh, what was then a common spirit health. And now with the combination of, uh, Catholic health initiatives and dignity health, uh, which was the subsequent, uh, change a name from a Catholic healthcare West to dignity health. Uh, and now we are merged two common spirit health. Uh, one of the first persons that I got to know, uh, as, uh, another, uh, African-American, uh, leader in healthcare was Bernard Tyson. Uh, even prior to coming to California, I had heard about, uh, Bernard Tyson, but once I arrived, uh, and certainly, uh, knew of Kaiser Permanente and knew that he was, uh, one of its, uh, key, uh, executives, uh, we met, uh, and I got to know him, uh, personally our friendship, uh, developed, uh, we would, uh, call each other on weekends.

Speaker 5 ([15:18](#)):

We would laugh together. We would, uh, cry to together. Uh, so personally, uh, we became, uh, very, very close and, uh, I was always, uh, up until his passing and to this day, honored to be able to call him a friend, not only did our paths cross personally, but professionally, we actually competed, uh, because, uh, we were in markets that, uh, Kaiser Permanente was in and vice versa. Uh, but, uh, we also had carved a path for that in a certain of our geographies. Uh, we worked together and had a partnership, uh, so it was, you know, a long term relationship, but, um, so I got to know him as an executive and as a leader, uh, and we both shared a common, uh, interest, uh, in number one, uh, providing, uh, healthcare for, uh, poor and vulnerable, uh, communities, number two, uh, the expansion of African-Americans and people of color, uh, in, uh, leadership within, uh, the healthcare sector, uh, and number three, uh, being a voice, uh, nationally and in his place globally of, for a fair and just healthcare system for all, uh, in this country.

Speaker 2 ([17:07](#)):

Thank you for sharing that powerful memories. So as a black executive in healthcare, from your perspective, how would you describe the Mark that Bernard has made?

Speaker 5 (17:19):

Yeah, Bernard made his Mark relative to, uh, access and, uh, equity in many, many ways, but one of the most significant call-outs that he was known, uh, to just be persistent in was the impact that the social determinants of health and chronic conditions had on, uh, access and equity. And he always called out, uh, the fact that, uh, when you think about health, it's more than just healthcare. You have to think about the strength of the community. Uh, it's about, uh, housing. Uh, one of his passions was, uh, changing, uh, the plight of the homeless. Uh, he always called out about, uh, nutrition about food, about you must have access, uh, to transportation, to jobs, uh, and that you of course, had to have access, uh, to, uh, the health system and not just, uh, when his definition of health. And when he talked about social determinants of health, it also included, uh, mental health.

Speaker 5 (18:56):

So education, uh, he would, uh, call out, uh, violence in the community and its impact on health. And he would go all over the world talking about that we can do better. And particularly in the United States, uh, one of the most, um, you know, significant in modernized, uh, countries on earth and he would chastise and call out, uh, that, you know, we can do better in that access, uh, in dealing with, uh, the social determinants of health, uh, would lead us to begin to be able to address, uh, chronic conditions in that until we did that, uh, that people of color, uh, the poor, uh, the most vulnerable would continue to be disproportionately impacted, uh, by the lack of access to health,

Speaker 2 (20:10):

You two had such a closer relationship. Can you take us inside a little bit more of the relationship and you both together and share a fun or favorite story?

Speaker 5 (20:20):

Well, my favorite, uh, my favorite story is the story that I, uh, um, you know, told at his Memorial celebration, and that is that, um, you know, Bernard loved, loved, uh, to dress well. Uh, he loved, uh, to tease me and call me up and say, uh, uh, you, Hey, I've, I picked up a little, a little toy for myself today. And, um, and I'd say what it needs to say, Oh, I, you know, I picked up this gold, uh, Rolex. He said, you know, that little, you know, that little, uh, uh, \$10 watch that you wearing, uh, you got to see what a real watch to look like. Uh, we would just, we would just tease each other about, uh, things. And, uh, he was just so, uh, funny in that, um, you know, he was one of the few people that could make me a laugh until I, you know, uh, her, uh, hurt myself and, you know, so it was just, it, you know, it's hard to pick one story, uh, with a Barnard cause there were, uh, just, uh, uh, uh, so many, but, um, you know, he, his favorite line was, um, uh, he would always make me laugh because we'd go, we'd end up at some of the same social, uh, events and, you know, and our wives would, uh, be attending to, and, uh, he would have a glass of wine in his hand and said, just look, just look at my baby.

Speaker 5 (22:07):

Ain't my baby. Just, she's just so fine. H and I said, Banard now you can't be what I can't be looking at the knees. The knees is my brain. He goes, yeah, but, you know, she just so fine. H she said, just look at my baby. And it was always his baby, his baby, his baby, uh, he just, I mean, he, he had a love that was again like his, his personality. Uh, it was the real real deal.

Speaker 4 (22:39):

Thank you. It's been really nice to learn more about their love story and their respect for each other. Caresa as we wind down, I also wanted to ask you as another executive in healthcare, what do you think stands out in terms of Bernard Tyson's innovation around prevention that you feel made him have an impact in the healthcare space? Oh my gosh. There's so many things I think, uh, Bernard, uh, really helped to shine the light on. And certainly one of them is this whole area of population health that everyone talks about. Um, you know, in terms of, uh, the social determinants of health, all the things that that people have to deal with before they somehow put themselves in the center of their physical health and wellbeing, you know, it's, it's the food insecurity it's, um, being homeless, it's mental illness, it's, you know, Bernard, uh, really, I think, shine a light on those things.

Speaker 4 ([23:41](#)):

And, um, uh, you know, and as I talked about, as he looked at and wanted to focus on people and underserved communities and their needs and creating more access, and I think that, um, that those social determinants of health, uh, are something that Kaiser can really hang their hat on. And I think a lot of that actually speaks to Bernard's leadership in that regard. And then I think also, you know, the summit, um, uh, reward, if you will, um, towards the end of, of Bernard's life was, or at the end of Bernard's life was when, um, you know, there was, uh, a medical institution that was named for him. Uh, he would just be so proud of that, you know, that, that he now has impacted and will impact forever a number of people and professionals who will go into the medical profession because of Bernard. But Charlie, is there anything that you'd like to add about his legacy

Speaker 3 ([24:48](#)):

No. A year ago, um, in the midst of the tremendous outpouring of support and remembrance for Bernard one tribute in particular struck me, um, Kevin deadener, he's a public health advocate in Washington, DC. When he was writing his tribute about Bernard's passing. He said something like, you know, when Bernard spoke, we listen because we knew action, what follow has words. And to me, that's just so Bernard Bernard was so deeply committed to transforming health and healthcare and America. And the legacy he leaves behind will be born out by all of us were inspired and called to work on behalf of this transformation. So for me, you know, we continue to be the action that follows us.

Speaker 4 ([25:39](#)):

It's a powerful legacy and important legacy for all of us Lloyd. I'd like to give you the last word, if I can. The name of the podcast is stories of the relentless. What would you say makes Bernard Tyson relentless?

Speaker 5 ([25:54](#)):

I think what makes Bernard Tyson a relentless, uh, force is his passion for being the best that he could be, but also his passion for a fair and adjust society and where, you know, African-Americans and people of color, uh, could achieve their dreams and that through every access point that he had, whether it was professionally or personally, uh, he was driven, uh, to be an example, and driven to do everything that he could. And he did, uh, to ensure, uh, that just in fair, uh, society, that just in fair world and within health and healthcare, including mental health, uh, he was a voice that could not be silenced and wherever he would go, whoever he would talk to, uh, he was relentless in that we can, we must, and we are called to do better as a society and as a people. And that part of his force was him being an example. And he carried himself with pride and never, never, never would give up. Never

Speaker 2 ([28:00](#)):

Thank you. There's so much there that we could learn from. I think they should have not being silent and being relentless, and that we're called to do better as a society and as a people, I think those are powerful words to end on. Thank you all for being here and being a part of this conversation. Thank you for sharing your stories and your memories. And thank you for continuing to sort of allow those of us who did not know Bernard Tyson to learn more about him, to learn more about things we never would know unless we heard it from you all. And most importantly, to be reminded of the legacy that he's left, um, that really impacts all of us. Thank you.

Speaker 1 ([28:42](#)):

I used to argue early on that it was about equality that everybody has to be treated equally. And I later discovered that's not the right framework. That's not the right narrative is about equity. Everybody gets what they need to get the same outcomes. Thanks for being a part of the American heart associations, relentless stories. Learn more about the Bernard J Tyson impact fund@heart.org forward slash B J T impact fund. And if you enjoyed what you just heard, please press share, tell a friend and leave us a review. Your next episode is own the way stay tuned as we discuss Bernard's impact on how equity impacts mental health and wellbeing.