

29 Nov 2017 | Interviews

Exec Chat: Johnson & Johnson Brings Together Physician Education Programs In The J&J Institute

by [Reed Miller](#)

Johnson & Johnson recently launched the Johnson & Johnson Institute – a network of 26 physician training education centers, putting what was previously an unconnected set of regional and specialty-specific education programs into one connected system to better serve J&J device-users in all geographies. *Medtech Insight* talked about the Institute, and its place within the diversified health-care giant, with Diana Bacci-Walsh, VP for North America Education Solutions for Johnson & Johnson Medical Devices.

[Johnson & Johnson](#) recently launched the Johnson & Johnson Institute to bring together its diverse collection of physician training programs into one system that can meet physicians' training needs, almost anywhere at any time.

"The J&J Institute combines comprehensive global educational programs to harness the size, reach, resources and collective passion of Johnson & Johnson Family of Companies to enhance human health," the company said Nov. 2. The J&J Institute staff train clinicians around the world on a wide variety of clinical procedures with the latest training technology, including virtual reality simulations, as well as online and mobile training technology.

Diana Bacci-Walsh, the Vice President of North American Education Solutions for Johnson & Johnson Medical Devices, oversees the day-to-day operations of the Johnson & Johnson Institute in North America. In her role, she leads the Center of Excellence that includes Professional Education, Sales Training and Development, Stakeholder Engagement, Digital Education, and Clinical Simulation, and oversees strategic initiatives for J&J's Cardiovascular and Specialty Solutions, DePuy Synthes, and Ethicon businesses. She works with sales, marketing and strategic account teams to build education programs across North America.

Bacci-Walsh also supports product launches with new education programs and maintains partnerships with medical professional societies. And she is a member of J&J's North America Regional Leadership Team and the [Academic Orthopedic Consortium](#), an organization of academic orthopedic departments.

Bacci-Walsh talked to *Medtech Insight* about the new Institute and how it fits into Johnson & Johnson's corporate-wide effort to adapt to the emerging value-based care environment.

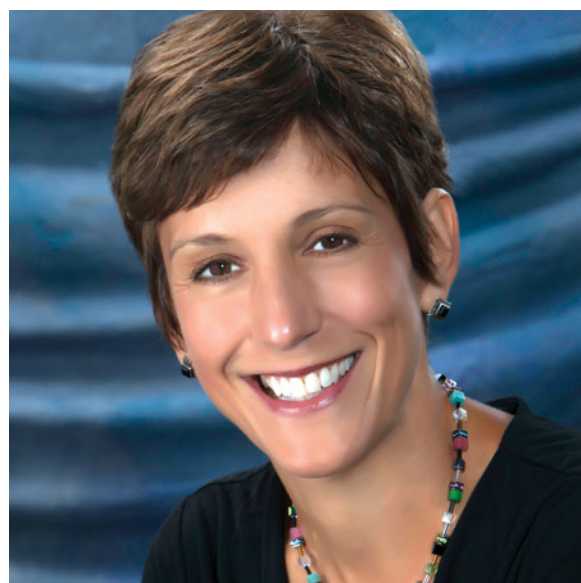
Q *Medtech Insight:* What is the need that the J&J Institute intended to fill and how will it do that?

A Diana Bacci-Walsh: Essentially, we've come together now with 26 institutes across the globe. Historically, however, we had one [center for each specialty] - one focused perhaps on orthopedics in one geography, and then in another geography we focused on general surgery or electrophysiology. We weren't available to our customers in a way that we wanted to be, but we want to be that preferred partner in education for our customers such that we could give them the right education at the right time.

What we've done is come together and created these J&J Institutes such that, for example, if a surgeon needs training and wants to do a particular surgical procedure in the upcoming months, and may not be as familiar with our instrumentation or with a particular procedure, we can really customize the education and be available for that physician when he needs the training.

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For example, an orthopedic surgeon comes to one of our institutes and joins us for a



Diana Bacci-Walsh, VP-North America Education Solutions, Johnson & Johnson Medical Devices

Source: Johnson & Johnson

total knee replacement course. We can ask that surgeon if he wants to invite his OR team as well. More and more we're taking a team approach towards education, so he may want to invite his scrub tech or his PA. And what we can do is look at the procedure in total.

For example, when they make that initial cut in a surgery, we have products that help with blood management. While the surgeon may be focusing on the knee replacement, the PA can be thinking about what sutures he or she is going to use to close the incision. We can now take this more holistic approach because we have such depth and breadth of product.

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Q What was the origin of the J&J Institute? How was the idea created?

A Bacci-Walsh: What we've seen internally are synergies among the different areas. The target audience may be different, but there are some things that are just universal in terms of, say, faculty- development or trying to find the right simulation or doing some procedures in an outpatient setting. We've seen some of those synergies internally, and we've said, 'how can we bring this to our external audience as well? How do we keep getting better and better in terms of this holistic approach?' What we had in the past was we had [education programs] like the Ethicon Institute or we had a [DePuy Synthes](#) Institute. And although we were all part of the same company, we didn't act that way. And now we truly say, 'how can we help our customers best?'

Q The Johnson & Johnson Institute recently announced a collaboration with the Federal University of Pernambuco and Hospital das Clínicas de Pernambuco in Recife, Brazil to train residents in minimally invasive surgery. Can you talk about how that fits into the program?

A Bacci-Walsh: We [have had] an institute in São Paulo [since 2010], and one of the tenants of the institute is to give greater access to training to many surgeons in rural areas that may not have it. Some of our institutes in [for example] India or in Brazil allow us to bring that education to certain groups who may not have that access to it so easily.

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Q Within North America, is there a need to get some of these training opportunities out into more places or are you still focused on the big cities?

A Bacci-Walsh: We are finding that there are unique regional needs, so our professional education team is organized such that we have a national team [to run] the courses held at our institutes, but we also have a regional team that can bring the education to the surgeon. We sometimes will use a mobile truck [with training and simulation equipment] that we drive up to an academic institution or a hospital and allow nurses and PAs and surgeons, residents, fellows – throughout the day when they have an opportunity – to come to us and to get some hands-on training.

That's one of our objectives, for sure. In addition, we have jnjinstitute.com, where we make available little snippets of videos. A surgeon in a rural area, let's say, may not have done a procedure in a while, and he or she may want to refresh themselves around the approach or the procedure, so they may take a look at the video, to just refresh their memory. And that's been a great way to really augment the hands-on

training by using this interactive digital experience.

Q How do you explain to the rest of J&J why the J&J Institute is worthwhile and what are the metrics you use to show that its helping the company overall?

A Bacci-Walsh: Our Center of Excellence determines where there may be gaps in education. For example, in orthopedics, the anterior approach to hip replacement is an area that is new over the last ten to 20 years – taking that anterior approach versus a posterior approach.

A surgeon who's been in practice for a while may not have had that experience when they were a resident and fellow, so we provide them this opportunity to augment the education and expertise that they already have. We look at areas of need and decide if it is an area we need to focus. And of course, everything we do is driven by [our credo](#).

Q Is there anything else going on that we should be paying attention to or looking forward to as the next big thing that's going to happen with the J & J Institute?

A Bacci-Walsh: We're always evaluating new technologies. We'd love to get to a point where there are simulators that really allow us to, like I said, bring that education at the right time for the right surgeon in a way that is extremely cost-effective and can reach a surgeon no matter where they are in the world. That's something we continually strive for.

From the editors of Clinica