Today, health systems are navigating a rapidly changing and dynamic healthcare landscape. When ever-evolving patient needs, financial pressures and growing demands on providers increase, decision-making requires the voice of those closest to care. That perspective is essential to making decisions that are grounded in patient experience, informed by clinical reality and workable for the people responsible for carrying them out.

Nicole Holguin, MD

As providers, we sit with patients in moments of uncertainty, recognize need and do everything in our power to help. When we carry that same presence into leadership, health systems make better decisions because strategy remains connected to the realities of patient care.

I am carrying that responsibility with me as I step into a new chapter of my career. After two years as Medical Staff President, I am honored to serve as the physician representative and voting member on the Cambridge Health Alliance Board of Trustees. As my role changes, my deeper responsibility remains to help ensure the voices of our providers and patients are present in the decisions that shape the future of our health system and the health of our community.

A few guiding principles that I believe will lead my path forward:

**You cannot fully represent providers if you are too far removed from clinical care.** Throughout my time in leadership at CHA, I have continued to spend most of my time caring for patients because I believe that proximity matters. It keeps me connected to the day-to-day realities of our teams, including what is working, where people feel supported and where barriers may be getting in the way of care. I often say that my ear is close to the railroad track. I hear things because I am working alongside my colleagues and experiencing many of the same pressures they are. That closeness creates trust and helps providers feel comfortable sharing what they are seeing and feeling. And it allows me to bring a grounded, real-time perspective into leadership conversations.

**Listening is leadership.** Leadership is not about having every answer or fixing every problem immediately. It begins with listening carefully enough to understand what is really happening. I have seen this done extremely well at CHA. Through leadership rounding, town halls, provider surveys and open-door executives, CHA has created more ways for people to be heard. That kind of listening has helped me do my job better, and it has reinforced for me how powerful it can be when leaders are present, accessible and willing to learn from the people closest to the work.

**The provider voice is often about translation.** Without patient-facing leaders involved in decision-making, there can be a disconnect between strategy and reality. That disconnect can be felt by providers, staff and ultimately patients. Representing the provider voice does not mean elevating every concern to the highest level. It means listening, understanding what people are experiencing, helping solve what can be solved directly and recognizing when an issue reflects a broader need. In that way, provider leadership is often about building a bridge between provider realities and organizational strategy.

As I step into this new role, I do so with deep gratitude for the people of CHA, from providers to nurses to staff to leaders, who continue to show up for our patients and our mission each day. The work ahead will be far from simple as healthcare continues to change and the pressures on safety-net systems remain. But I believe CHA is strongest when we all work together and move forward together aligned around the same purpose.