



This is a great time for career growth, but don't count on stability for a while. The only constant will be the changing 'rules of the game'.

## **Who's on First?**

By Betsy S. Hersher

*Part one of a two-part series*

As the population ages supported by biotech, boutique drugs, nanotechnology and ubiquitous access to information, opportunity abounds for jobs in IT. Differently stated, IT jobs will also be dispersed throughout health care enterprises. Some of the new roles will be "quick fixes." Some will evolve and become growth jobs. The venues for delivery of care will change as will job definitions, reporting structures, and career direction and content.

Within this environment of change, many vendors and consulting firms are in a state of flux. Some of the vendor giants are attempting entry -- or re-entry -- into the health care IT field. The consulting firms continue to merge, leave or re-enter health care. Independent firms have been purchased or are changing directions, with many re-shaping their workforce.

This is a great time for career growth, but don't count on stability for a while. The "rules of the game" are changing all the time. In fact, there are few rules; expectations and traditions carry little weight.

So where does this leave you?

In a November 2005 survey conducted by Hersher Associates, Ltd., 100 CIOs from diversely sized and located organizations identified four issues having the greatest influence on health care IT direction in the near term:

- patient safety, compliance, security, privacy;
- major clinical initiatives;
- a realization that much of health care delivery will be ambulatory and different than it's been in the past; and
- our aging population

Meanwhile, as the cost of purchasing clinical systems rises, board influence has intensified. That influence is widespread, affecting funding for outsourcing and hiring decisions, and forcing early retirement of CIOs. In some instances, the CIO's sphere of influence is changing either by moving the chief medical information officer to a new reporting structure or over-engineering organizational structures to support new non-operational leadership in IT.



We can look for answers at organizations where succession planning has worked well. When planning for the retirement of a senior CIO, such organizations choose a person who is a good match for corporate culture and organizational direction, allow significant time to train the successor, and enable the successor to become more visible and responsible for defined initiatives. In any event, timing is critical for the retiring CIO. Too much notice may actually force early retirement of the CIO -- before the successor has gained organizational support.

We've also noted a potential short-term trend of organizations hiring a CIO with a physician background, and having the physician report through a different line of leadership (**e.g., through the CXX?**). Keep in mind that the creation of a physician CIO could cause re-engineering of the organizational structure and reporting system.

Finally, we recognize an outstanding group of fresh CIOs coming up through the ranks. In order for these first- or second-time CIOs to be successful, they will need executive support and coaching. And the most important lesson will be teaching them how to manage changing corporate cultures.

### **Rules? What rules?**

Historically, change creates challenges and new opportunities. The trick is to be able to keep up through networking, without discounting the rumor mill. Boards of directors are bringing in new C-suite teams that may be focused on a new direction and management team. You could be obsolete or a star depending on the new team. Some IT decisions are being made based on project costs already committed. Massive clinical projects may be one of the drivers of initiatives to bring in physician CIOs, causing reporting structures to change. But is this a nationwide trend or is this panic?

Part two of this article will appear in the next issue. If you have ideas or issues to be aired in the next article, please e-mail the author at [hersherb@hersher.com](mailto:hersherb@hersher.com).

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As EMR and CPOE issues settle down, we will begin facing even broader initiatives.

There are many initiatives occurring at the same time, they are to prioritize. There are, however, a few influencers that are constant.