2008

Up & Comers

12 rising stars in healthcare demonstrate leadership acumen at an early age

While much has been written on the aging population, all you really need to do is look around. Record numbers of retiring baby boomers are putting enormous pressure on our healthcare system, not to mention shrinking the workforce. What the casual observer may not see is the growing shortage of available talent among 35- to 44-year-olds—the very pool from which future leaders emerge. All the more reason to celebrate this year’s class of Up & Comers. These 12 winners, all age 40 or younger, have demonstrated their ability to assume decisive leadership roles at an early age.

While they bring diverse backgrounds and styles to their work, they share a common vision: high-quality, affordable health and wellness care in their communities. As their careers progress, these gifted individuals will play an integral role in transforming our delivery system. This year’s class joins the ranks of more than 200 previous winners—many of whom are highly respected chief executive officers or senior executives whose voices are heard on the national scene. Witt/Kieffer has been privileged to sponsor the Up & Comers award program since 1997. We’re pleased that more and more people realize exceptional leadership is key to our future, and are taking the time to submit nominations.

How well we care for the huge upsurge of aging Americans will be in the hands of a disproportionately small, but vitally important, generation of new leaders. If seeing is believing, what’s written here is proof they’re ready to take on the challenge.

—Barbara Kirchheimer

38, chief operating officer, St. Louis University Hospital

Dawn Anuszkiewicz had been Haynes’ administrative resident several years earlier. After a chance meeting in 2003 at an association gathering, Haynes persuaded Anuszkiewicz to leave her East Coast roots to oversee her hospital’s faltering GME program. Anuszkiewicz worked with the university, Tenet’s corporate office and a CMS fiscal intermediary to find the documentation on a case-by-case basis to satisfy the CMS’ audit, and provided cost reports to ensure payment. She also created a new system of reporting resident activity to ensure proper documentation occurred in the future. In the process, she forged a more positive relationship between Tenet and the university that was built on mutual goals, Haynes says.

By the time the hospital’s COO position opened up in October 2007, Anuszkiewicz had worked her way up to being a senior administrator at the hospital and reported to the chief financial officer. Anuszkiewicz frankly asked her supervisor whether he thought she was ready for the COO job, and he said, “absolutely,” she recalls.

Being a young leader has its challenges though, she admits. “I often feel when I’m meeting someone for the first time, that they’re looking over my shoulder for the chief operating officer,” Anuszkiewicz says. “I often have to assure them that not only am I the person they’re looking for, but also that I know what I’m talking about.”

—Barbara Kirchheimer
When Kira Carter, then chief operating officer, was one of four finalists for the president and chief executive officer position at Sparrow Specialty Hospital in Lansing, Mich., she gave board chairman Robert Hughes advice that showed her boldness and integrity. “She said to me at one of the audit committee meetings, ‘I don’t think we need a COO position,’” Hughes recalls. “She was fully aware … that if she didn’t get the (president and CEO) job, she would be out of work.”

Carter, 33, has led the 36-bed long-term acute-care facility—part of Sparrow Health System—for the past two years, after two years as COO. And that opening has never been filled. “I’ve stepped up in some regards to be that administrator,” she says.

Carter’s career and the administration of Sparrow have been intertwined in another regard. In her earlier role as senior planner for Sparrow Health System, she received an assignment to investigate the feasibility of developing an acute-care facility within the system. “That was originally one of my assignments,” she says. “It became my life.”

When she first became COO, Carter recalls, “There were no policies and procedures in place. There was no equipment. We worked to assemble a leadership team, an administrative and clinical team. We were proudest of … getting our name out in the community. Each year, our clinical results get stronger and stronger.”

Carter has put significant energy into lobbying both externally—when Congress was rethinking the CMS’ policies on acute-care facilities—and internally, persuading physicians to transfer patients to “yet another facility they’ll have to do rounds on,” she says.

Andrea Price, executive vice president and COO of Sparrow Health System, says Carter helped to convince Congress not to apply a rule that would have capped the system from sending more than 25% of its Medicaid patients to Sparrow Specialty and other long-term acute-care hospitals. During her time at Sparrow Specialty Hospital, Carter figures the facility has received petitions for union campaigns just about every year, and this year 73 service and technical workers, about half the staff, voted to join the United Auto Workers. Carter says she’s just trying to ensure universal policies across union and nonunion staff. “I typically lead by example,” she says. “There aren’t too many things I would ask someone to do that I, myself, haven’t already paved the way, or stepped in, or taken the initiative myself to learn.”

Sonny Ndowu, operations assistant at the hospital, praises Carter for her participatory leadership style. “She lets you know her expectations. She does not micromanage you,” he says. “She does not side with anybody. She listens to all the inputs and then makes the recommendation based on what everybody says.”

—Ed Finkel
It's tough to think strategically when your cash on hand can be measured in hours. That was the situation in 1998, when the newly formed Catholic Health System, Buffalo, N.Y., was a conglomerate of poorly performing hospitals and nursing homes, losing more than $20 million a year on average. As controller for two of the hospitals, James Dunlop was part of the turnaround team responsible for bringing it out of that dark night. In the process, he learned about tough decisions. "When you're faced with that type of adversity, there's no opportunity for failure because your existence depends on crafting a future," Dunlop says. "We recognized that we couldn't continue to exist as fiefdoms, but had to become a system." These days, Catholic Health System, with four hospitals, eight long-term-care facilities and 15 primary-care sites now headquartered in Cheektowaga, N.Y., has a net margin of almost $18 million. It's daring to make strategic plans that stretch five to 10 years out, and to adopt an ambitious information technology initiative that includes an electronic health record by 2012—one of the projects under Dunlop's supervision.

Dunlop, 38, has been senior vice president and chief financial officer since January, having risen through the ranks over the past 12 years. His interest in healthcare started young as he watched his officer since January, having risen through the ranks over the past 12 years. His interest in healthcare started young as he watched his father, a pediatrician, interact with patients, but he preferred math to pre-med. After earning an honors degree in economics and public policy from the University of Rochester in 1992 (where he was an all-American cross-country runner) and an MBA from the State University of New York at Buffalo, he went to the Buffalo office of Ernst & Young as an auditor specializing in healthcare. In 1996, Sisters Hospital in Buffalo (a future member of Catholic Health System), offered him a slot as director of reimbursement. He rose rapidly, to controller of two hospitals, then to director of finance for three hospitals, and finally to corporate controller in 2001.

"Jim has critical-thinking skills that allow him not to be intimidated by complexity," says Catholic Health System President and Chief Executive Officer Joseph McDonald, who joined the organization in 2003. "Jim looks at financial services from two broad perspectives," says Robert Stanek, president and CEO of Catholic Health East, Newton Square, Pa., which operates Catholic Health System under a joint operating agreement with Ascension Health and the Diocese of Buffalo. "He's a servant/leader, looking at how he can provide services to others, and he's also a strategic partner within the organization, bringing the financial aspect to its overall strategy."

Dunlop says his success is not just his. "You can't singularly make things happen," he says. "You need a diverse group of people who don't see the world the way you do." —Elizabeth Gardner

When David Entwistle became chief executive officer of University of Utah Hospitals and Clinics in February 2007, he had plenty of goals—but three in particular. "Our No. 1 goal is patient satisfaction. Two, quality-of-care. Three fiscal responsibility," he rattles off. "Our focus is on those three things, and how do we get those fundamentals down?"

Patient-care scores on Press Ganey surveys have risen from the "low teens, now pushing toward the 50th percentile," says Entwistle, with a goal of reaching the 90th percentile by next year. He has worked department by department to set goals. Among the satisfiers have been reductions in average inpatient length of stay, from 6.2 days to 5.8 days, and in average wait time in the emergency room, from nine to three hours—battleship-sized turnarounds in a four-hospital system with 5,500 employees, 23,000 inpatient admissions and 1.2 million outpatient clinic visits annually.

Entwistle, 39, has brought fiscal discipline to the Salt Lake City system despite the CMS' changes to upper payment limit calculations that produced a $36 million hit on its $603 million annual budget. "We have been able to maintain our budget, despite shortfalls in those areas," he says. "We have to be able to produce capital to grow and meet our needs. We like to say, our budget is a plan—not a wish."

Another significant change during Entwistle's tenure has been on the capital improvement side, where the system is undertaking a 250,000-square-foot expansion that will convert all inpatient rooms to private ones in the main hospital while also doubling the size of the cancer hospital; the system also has separate orthopedic and psychiatric facilities.

"He's an individual who thinks out of the box, creates a vision that is compelling, and gains the support of those who work in the hospitals and clinics," says A. Lorris Betz, senior vice president for health sciences and CEO of University Health Care. "The relationship of trust that he's built with the physician leadership has been tremendous."

Entwistle gets similar raves for his performance as senior vice president and chief operating officer at the University of Wisconsin Hospital and Clinics in Madison, where he worked for six years before taking the helm in Utah.

Donna Sollenberger, former CEO at University of Wisconsin Hospital and Clinics who's now CEO of Baylor Clinic and Hospital in Houston, says that Entwistle drove an increase in patient satisfaction to the 95th percentile from the 37th on Press Ganey surveys while lowering employee turnover to nearly 10% per year from 20%. "A lot of what he put into place... really solidified and became ingrained as a practice," she says. "There's a real calming consistency about David and his leadership that make people want to perform better."

—Ed Finkel
Don Fesko might be a young face at Community Hospital in Munster, Ind., but he is not a new face. The leadership at the hospital—which claims to be the busiest in Lake County, near Chicago—made an intentional decision to choose a young candidate from the local area for the hospital administrator position.

“We were looking to the future for Community Hospital,” says John Gorski, senior vice president of hospital operations for the three-hospital Community Healthcare System, which includes Community Hospital. “There’s a changing face of healthcare. There are generational differences in the physicians that are coming out of training now.” Administrators were hoping for someone who would learn the job, build local ties and relate to the staff. Fesko says that’s just what they have accomplished.

“I grew up in town here,” Fesko, 36, says. “I grew up with many of the older physicians’ children. When they saw someone young coming in, I wasn’t someone totally unknown.” Fesko began his medical career as an optometrist, and holds a bachelor’s degree in economics and an MBA. He got his start in administration after serving on the hospital board and working with Gorski on a few key projects.

Since being appointed administrator of the 367-bed hospital in July 2005, Fesko has overseen the hospital’s investment in a robotic, minimally invasive surgery system, an open MRI and other medical technology that has moved Community Hospital to an elite position in the region.

In 2008, Community Hospital was recognized as one of America’s 50 Best Hospitals by HealthGrades, and Fesko is currently supervising a major expansion and upgrade of the emergency department.

Gorski says those successes and the future of the hospital come down to physician recruitment. “It’s really difficult to recruit young physicians,” Gorski says. “Don develops relationships with them so they feel very important.”

Fesko says younger physicians communicate differently. “With regard to the younger doctors, I think generations know how to communicate with each other—whether it’s texting or giving them a little grief and having a little fun,” he says.

But he remains close to the older physicians as well. “A lot of this job is communicating and following up with staff and physicians. If you tell them you’re going to do something, you need to do it,” Fesko says. Gorski says Fesko’s early career in medical practice gives him even more skills relating to physicians. “Physicians really feel more comfortable interacting with an administrator that knows what they are talking about.”

—Alice Hohl

Two defining life moments Jena Hausmann had while a college senior studying political science geared her in the direction toward healthcare administration. First, the 1992 presidential election was taking place, and the issue of healthcare intrigued her. Second, it was during that time when her grandfather was diagnosed with cancer, and she saw the healthcare system he went through while he was staying in the hospital; she wondered how it could be so broken.

After receiving her bachelor’s degree in political science from Colorado College, Hausmann decided to take a year off before graduate school to join the Minnesota Senior Federation to learn about senior citizen health issues. Debating between careers in health policy or health administration, Hausmann chose the delivery side of health administration, and earned a master’s degree in healthcare administration from the University of Minnesota.

In 1996, Hausmann started as an administrative fellow and worked her way to becoming the vice president of professional services and operations for the University of Minnesota Medical Center in Minneapolis, within a span of two years. Although, her most recent post, serving as the senior vice president and chief operating officer of Children’s Hospital, a 230-bed facility in Denver, since March has proved to be no easy task. “Anytime you move into a new role, you can’t let ego and arrogance blind you,” Hausmann says. “Be aware and cognitive of what you don’t know.”

Among the many challenges she faces as COO, Hausmann, 37, is leading a construction project and developing a business plan to create a pediatric campus for the Children’s Hospital on 20 acres in northern Denver. The 50,000-square-foot facility will occupy the community’s first pediatric surgery center, along with pediatric subspecialty clinics, 24/7 urgent and observation care, a full-imaging center and sleep program.

Joan Bothner, who serves as chief medical officer for Children’s Hospital, says that Hausmann “believes in the power of teams and reaches out to her colleagues for their expertise and knowledge,” when it comes to overcoming challenges.

What has been most rewarding to Hausmann—who is also eight months pregnant with her third child—in her career in health administration, is the impact she has had on patients and family.

“Being in a role that allows you to create a culture and the shaping of that culture is very rewarding,” Hausmann says.

Jim Shmerling, president and chief executive officer of Children’s Hospital, says in his 29 years at the hospital, Hausmann is the strongest COO he has seen. “She has the ability to execute strategy with great proficiency,” Shmerling says. “To do both and very well is a rare trait.”

—Tracey Fuller
Christopher Hummer not only has the same shining pate as Dr. Evil of the "Austin Powers" movies. He plays him on TV.

Hummer's Dr. Evil impersonation, part of a video presentation for an employee forum, is just one of the ways Hummer uses technology and pop culture to build a positive environment at Carolinas Medical Center-Pineville, the Charlotte, N.C., hospital where Hummer, 37, is president.

"He's a phenomenal communicator, period, whether it's rank-and-file employees or other administrators," says Dennis Phillips, an executive vice president at the 109-bed hospital's parent system, Carolinas HealthCare System.

"Chris has a way of using every tool you could think about to rally the support of the Pineville team to the goals of the organization and the goals of the hospital," Phillips says. "I really do have a tremendous amount of admiration for how he operates. Not everyone could do this, but he pulls it off and does it extremely well."

Hummer is the youngest of seven siblings, all of whom entered healthcare professions after watching their father put in long but rewarding hours practicing medicine and then working in healthcare administration.

"What I saw was really a lifestyle—to really be dedicated," Hummer says of his father. "Even somebody who is floor nursing or someone in the lab—it's not easy to separate from it when they go home. We didn't look at it as anything negative. It's a positive industry to be around."

Hummer studied journalism and mass communications in his undergraduate studies, and went on to earn his master's in healthcare administration. Hummer held several chief operating officer positions at Tenet Healthcare Corp. hospitals in North Carolina and Missouri. He spent 2½ years as chief executive officer at Tenet's 232-bed South Fulton Medical Center, Atlanta, before Phillips recruited him.

At Pineville since January 2006, Hummer is presiding over a series of strategic capital projects, including a $300 million, 88-bed open-heart-surgery expansion, among other advancements. The hospital received a J.D. Power and Associates award for clinical excellence in maternity and emergency services in 2007 and 2008 under Hummer's leadership.

"I'm more excited than ever because we have a chance to transform the way healthcare is delivered in South Charlotte," Hummer says.

Hummer says the video spoofs are simply a disarming way to communicate the important messages all hospital administrators need to convey.

"It's an entertainment generation," Hummer says. "You have to figure out different ways to deliver the same message."

—Alice Hohl

It's not Kim Kalajainen's job to say "no"—even when the requests to her information technology department overwhelm its capacity. "It's our job to figure out how to do it," she says.

"My greatest challenge is to plan out all the work and organize it and communicate it to everyone."

Some 130 projects are on the roster right now. In the past 2½ years, she has brought her hospital out of the IT dark ages and it's on course to join the world of electronic health records by 2011 with an entirely new suite of financial and clinical software. The hospital now has powerful wired and wireless networks; everyone on the staff has Microsoft Outlook and Internet access; and the surgical staff has been outfitted with hands-free communicators, a technology that will eventually roll out hospitalwide.

When Kalajainen came to 252-bed Lawrence & Memorial Hospital, New London, Conn., in 2006, its IT was vintage 1980s, says Bruce Cummings, the hospital's president and chief executive officer. He had arrived on Oct. 31, 2005, to find a primitive e-mail system, virtually no clinical automation and not much connectivity among the applications that were in place. The IT department lacked a leader at the time, and Cummings made filling that position his first priority.

"I'm not a techie," Cummings says, "but I appreciated that information technology was increasingly a matter of strategy and differentiation." He upgraded the position to a vice president who would report directly to him. Kalajainen, then CIO at 128-bed Rutland (Vt.) Regional Medical Center, stood out among the possible candidates and came onboard the following April.

Kalajainen, 40, had originally started out to be an engineer, attending Rensselaer Polytechnic Institute, where she's in the athletic Hall of Fame for her basketball career (including being named Most Valuable Player as a freshman). She quickly found that she hated chemistry and physics labs but loved math, and ended up switching her major. By the late 1980s, being a math major also meant learning quite a bit about computer programming.

After graduation, Kalajainen took a position in the financial services area of Andersen Consulting, doing programming and systems design, and after a few years moved to the insurance division of now-defunct Arthur Andersen Business Consulting. From there she segued into its healthcare division and found her passion.

Cummings says it was her top-flight project management skills that landed Kalajainen the job. "She really took the bull by the horns and totally revamped the department, provided structure, and delineated everyone's roles and responsibilities," he says. Cummings hasn't hesitated to tap her expertise even for areas outside of IT, having her help train managers in project management in other departments.

—Elizabeth Gardner
**Feature**

**Winjie Tang Miao**

While receiving her undergraduate degree, Winjie Tang Miao thought she wanted to become a doctor. Little did she know a part-time job while attending school would determine her future.

“While at school, I was looking for a job to get by, and got a job in public health because it was 50 cents (per hour) more than the other medical student positions, and 50 cents more was a lot to a college student,” Miao says.

After receiving her bachelor’s of science in biomedical engineering from Johns Hopkins University, Baltimore, she decided to get her master’s in healthcare administration, with a concentration in financial management and quality management from the University of North Carolina at Chapel Hill.

“The work that people do in public health really resonated with me,” Miao says. “I became drawn to health policy.”

Becoming president of Texas Health Resources’ 27-bed Harris Methodist Northwest Hospital in September 2007, Miao, 30, has come a long way in a short period of time. She was promoted from her position as administrative director for oncology services, clinic services, and planning and construction for the Presbyterian Hospital of Dallas, a member of Texas Health Resources, where she served in various positions since 2000.

**Julie Sprengel**

On July 29, an earthquake hit near Providence St. Joseph Medical Center in Burbank, Calif. Twelve seconds later, Chief Executive Barry Wolfman, who was out of town, received a text message from Assistant Administrator Julie Sprengel. It read: “Hey boss, I’m on it. Don’t worry,” Wolfman says.

The fact that Sprengel is always wired up to technology is convenient. But the real reassurance comes from the fact that she is a smart, intuitive leader. “You get a sense of confidence and a sense of comfort knowing you have staff like that,” he says.

Sprengel, 37, says that while her path to hospital administration hasn’t been typical or slow, she’s proud of her career and also cognizant of the challenges of being younger than most of those in her position.

Sprengel worked for nine years as a nurse, spending many of those years at bedsides in the emergency room. As she was promoted up the line in nursing, she realized the traits of a good nurse don’t necessarily make a good manager, and she became focused on learning more about business as she rose to director of emergency services and other administrative nursing positions.

“I took a deliberate path and decided to get my graduate degree not in nursing but in business,” Sprengel says. With support from her superiors, she found opportunities to shine, and was quickly noticed by those at the top.

In 2005, she joined the Seattle-based Providence Health & Services system as regional value-management director. There she lowered costs by standardizing products over several hospitals and evaluating new products for cost-effectiveness. From 2006 to 2008, she served as director of patient-care support services, where she managed labor disputes and oversaw staffing and budgets at 377-bed Providence St. Joseph Medical Center.

As assistant administrator at St. Joseph, she is in charge of directing surgical and cardiovascular services, and continuum of care, which includes case management, social services, home health, occupational health and urgent care.

Sprengel says that at a conference for Providence administrators, the keynote speakers asked everyone born after 1970 to stand up. “There were maybe six of us standing in the room,” she says. “For me it was great to stand up and be one of the younger ones. I don’t think it’s been negative in any way. Once people see your knowledge and your expertise, any mistrust goes away.”

Sprengel says her quick rise actually helped her build rapport with hospital employees and represent them better. “It wasn’t that long ago that I was on the floor and at the bedside,” she says. “I can bring the perspective of what it’s like to be the nurse or the employee.” —Alice Hohl

30, president, Harris Methodist Northwest Hospital, Azle, Texas

37, assistant administrator, Providence St. Joseph Medical Center, Burbank, Calif.

—Tracey Fuller

—Alice Hohl
Jonathan Timmis

When Jonathan Timmis started serving St. Vincent Health System in Little Rock, Ark., in May 2005 as vice president in charge of cardiovascular services, he became known as “very personable and genuine,” says colleague J. Lynn Davis, a cardiologist. Davis, who was then chief of staff at St. Vincent, was surprised to find how well Timmis seemed to fit in.

“Here in the South, guys from Michigan don’t fit in very well,” Davis says. “For Jon to come down here into Little Rock, to a staff of 500, he fits in very well and is highly respected.”

During the time he was vice president of cardiovascular services, one of the projects Timmis says “brings pride” to him was the development of the Jack Stephens Heart Center at St. Vincent, a 115-bed cardiovascular hospital-within-a-hospital that he led and supervised improvements at, as well as the accreditation of the state’s first and only chest pain center. Timmis also took the lead and developed an interventional cardiology partnership with 84-bed Saline Memorial Hospital in Benton, Ark., which allowed patients to be referred to the Jack Stephens Heart Center when they required additional cardiac care.

“What has been rewarding so far is being a part of projects that have tangible outcomes,” Timmis says.

Timmis, 35, grew up in a family involved in healthcare. With his father being a cardiovascular surgeon and his mother being a pediatric psychiatrist, he leaned toward becoming a doctor, and was interested in attending medical school. He received his bachelor’s of science in biology from Marquette University in Milwaukee, and decided to get his master’s of health services administration in the School of Public Health at the University of Michigan, Ann Arbor.

Currently serving as vice president and chief strategy officer for St. Vincent, a 542-bed hospital, since July 2007, Timmis says that one of his biggest challenges is “prioritizing and staying focused.”

“While potential partnerships may seem intriguing, you have to be able to step back and see the global impact,” Timmis says.

Davis says Timmis has become a success at such a young age because he has “lots of energy, works long hours and keeps positive.”

“When we’re doing a project, Jon comes back with just what you’ve asked for and more,” Davis says.

Another trait of Timmis that Davis is fond of is the relationship he has with his family. Timmis spends his free time taking part in family activities, such as coaching in the Life Champs youth football league and the Westside YMCA youth soccer program.

“Even with all of the obligations with the hospital, he still fits in time with the family,” Davis says.

—Tracey Fuller

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35, vice president and chief strategy officer, St. Vincent Health System, Little Rock, Ark.