

Tyler's Tidbits

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Providing News and Information to Help Corporate Decision-Makers



MARKET MEMO

Meeting the Recruitment Challenge for Independent Hospital Systems

For many independent hospitals, one of the biggest challenges is recruiting quality healthcare executives. While large healthcare systems seem to have greater resources to recruit high-level leadership and offer the lure of larger cities with a plethora of cultural activities, the country's smaller independent hospitals have their own set of benefits for executives.

Independent hospitals located in smaller communities offer a number of trade-offs that executives are consciously choosing, including a shorter commute, more autonomy in their jobs and life in quieter communities, even if it means a small drop in total income.

No Traffic Jams, Time for Family

"One of the things we really have to our advantage is the quality of life offered in close-knit communities," said Val Short, Vice President of Human Resources and Medical Clinics for Halifax Regional Medical Center in Roanoke Rapids, North Carolina. "People are attracted to places that don't have wall-to-wall rush hours. Here, a traffic jam means that you're the fifth car back at a traffic light."

Short said that living somewhere other than a large city offers executives the option of being more connected with the people the hospital serves. "Our leadership can become involved through the schools their children attend, the sporting events they participate in, and other organizations that drive the community," she said. "Because everything is close by, it's easier to attend multiple

activities and to spend volunteer time connecting on many different levels in the community."

Include Benefits of Community for Recruitment Success

To help assure success for a Chief Executive Officer (CEO) search, independent hospitals should develop more than just a comprehensive job description. Create a picture of the cultural climate of the organization and a report about the stability of the area as well, including: demographics, school information, community activities, and employment and social opportunities for all members of the candidate's family.

"When making a decision, consider the whole family to assure that they all understand the lifestyle of the community," said Bill Walter, CEO of Maury Regional Hospital System in Columbia, Tennessee. Walter said, "In a smaller hospital in a rural setting, the decision will impact the family even more than in a larger city."

Playing up the lifestyle differences can be a plus. "Some people are attracted to places with a slower pace," Short said. "Small communities have a reputation for being better places to raise children. Parents know their children's friends' parents; they all see each other in the community daily. That doesn't always happen in larger cities."

A Chance to Lead

Hospitals and healthcare systems across the country overflow with talent, but in larger systems, rising to

CMO/VPMA: Does This Position Function the Same Way in Every Healthcare Setting?



George Linney, Jr., M.D.

The answer is, "no." We conduct searches for these positions (variously titled Chief Medical Officer or Vice President of Medical Affairs) in

small hospitals, large hospitals, small systems, large systems, and children's hospitals. Some CMO/VPMA responsibilities are common to most situations: quality management, utilization and case management, credentialing and privileging, JCAHO readiness, medical information systems review, continuing medical education responsibility, acting as liaison between the medical staff and administration, to name a few.

But certain responsibilities are unique to their settings. Examples include:

■ In smaller hospitals, where there are fewer senior administrators, the CMO/VPMA may have some general operations responsibilities. This is especially true if he/she seeks out such duties.

■ In hospitals/academic medical centers that have residency training programs, the CMO/VPMA may have oversight of the training program. In these instances, a program director often reports to the CMO/VPMA.

■ In larger hospitals and systems where there is more than one physician executive, there may be a Chief Quality Officer, a Chief Medical Information Officer, and/or a Medical Director for Utilization Management. In these cases, the CMO/VPMA may not be involved in the functions these individuals are responsible for on a day-to-day basis.

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ASK A CONSULTANT



Amy Evitts



I've worked with retained executive search firms to recruit senior members of my team over the years, and one of the most frustrating problems is one that occurs in the very final stage of the search process. We narrow the field to our favorite candidate, and he/she seems to be "sold." But then—seemingly out of the blue—the candidate's spouse cites some aspect of the opportunity that she/he suddenly can't tolerate, and the #1 candidate withdraws. How do you sell the "better half" earlier in the process to avoid this outcome?

This is one of the most frustrating situations that tests retained executive search firms and their clients. In my experience, the majority of these deals falls apart only when relocation is required. Rarely does a spouse object when the new position is located in the same community.

Typically, objections are raised when the candidate's spouse has a vibrant career without many prospects for similar employment in the new location; when there are children to consider who are very happy and involved in school as well as extracurricular activities, which may not be available in the new location; and/or, when life-long friends, family, or aging parents will be left behind.

In fact, every year nearly one million Americans relocate for purposes of a job; and more than 75 percent of those are married, according to the Employee Relocation Council. Furthermore, almost 85 percent of all families have two wage earners. Usually the "alpha earner" accepts a new position resulting in a "trailing spouse." Many companies have implemented programs designed for this growing trend by assisting the spouse of a new hire in finding a job, identifying schools for the kids, and helping the family adjust to the new community.

Most search consultants have found that the key is to "close" the spouse first. The spouse is the gateway to the candidate and carries substantial influence in the couple's decision-making process. All too often, the spouse is an after-thought in the recruiting process and only comes into play when planning an interview trip to the client location. Instead, once a viable candidate has expressed serious interest in a position, the consultant should engage the spouse in a phone conversation as soon as

possible to determine the couple's needs and motivations. If this step is circumvented, and the consultant only learns about the spouse's needs from the candidate, there's no guarantee that the spouse is on board.

The consultant should have myriad information available for the spouse about the community and its schools, churches, employers, recreation, shopping, neighborhoods, transportation, etc. so the spouse can become educated about the location. The more familiar he/she becomes about potential relocation, the more likely it is he/she will ask questions and communicate any concerns, which can then be addressed early in the search process. When it then comes time for the spouse to accompany the candidate on an interview visit, the consultant can provide the client with key information about what will be important for the spouse to see or do during the trip. This could be anything from meeting with a realtor, to meeting a human resources representative at a company where the spouse may seek employment, to touring a school or fitness center. Some clients even make a separate itinerary for the spouse—a practice I encourage.

When the consultant develops a good rapport with the spouse, asks the right questions and provides information, it will be much easier to meet the family's needs in a relocation situation. It will then be much less likely that the spouse will suddenly change his/her mind at the 11th hour. **T**

Amy Evitts is an Associate in Tyler & Company's Atlanta office with more than 20 years of experience in executive search. She can be reached at 770.396.3939 or via e-mail at aevitts@tylerandco.com.

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the top of the leadership chain may be more difficult and often takes more time. Smaller hospitals also seem to offer more hands-on opportunities for CEOs. There they interface more directly with their physicians, staff, and trustees regularly because decisions are made locally, not at a far-away corporate headquarters.

Walter said, "A down-the-line manager in a larger system should think about looking at the independent systems, especially if they have the desire to be a CEO. Wouldn't it be better to be a CEO at a smaller hospital than a manager or director in a large system?"

An executive who is not afraid to make large, strategic decisions and take some risks will do well in this setting, especially if they take time to bond with, help educate, and keep their Board informed.

"Serving as a CEO of an independent community-based hospital can be very rewarding," Short said. "Not only do you have the chance to have a large impact on the community, you have a chance to live a kinder, gentler life that's less hectic and frenzied, yet still confront exciting new challenges that the best executives usually seek." **T**

This article is adapted with permission from "Independent Hospital Systems Offer Opportunities for Leadership, Lifestyle Choices," Atlanta Hospital News, April 2006.

CMO/VPMA *from page 1*

■ In children's hospitals, where fundraising is critical, the CMO/VPMA may play a significant role in public relations and fundraising.

You can see that CMOs/VPMA's are not "One Size Fits All." Given this reality, my advice to physician executives is to be prepared and willing to do whatever their boss needs them to do. And, ask for new responsibilities from time to time. It will make your job more interesting and challenging and make you a more desirable candidate for opportunities in the future—no matter the setting. **T**

Comments about this article can be directed to George Linney, Jr., M.D., CPE, FACPE, Vice President in Tyler & Company's Charlotte office who also heads the firm's Physician Executive Search Practice. Dr. Linney can be reached at 704.364.0746 or via e-mail at glinney@tylerandco.com.

Do you have a question for a Tyler & Company consultant? If so, please share it with us. Questions answered in *Tidbits* will appear without reference to your name or organization. Please send your questions to kmazzuckelli@tylerandco.com or fax to Katie Mazzuckelli at 770.396.6693. (Please indicate that you are submitting an item for "Ask a Consultant.")



George Linney, Jr., M.D., CPE, FACPE, Vice President, Charlotte

“Planning Your Career After Retirement.” A presentation at The Fall Institute of the American College of Physician Executives in Tucson, November 12-16, 2006. Dr. Linney also represented Tyler & Company at the Recruiter Fair held during the conference.

J. Larry Tyler, FACHE, FAAHC, FHFMA, CMPE, President, Atlanta

Tyler writes a bimonthly column in the *Atlanta Hospital News*. In his column, “Hello, My Name Is ...” he interviews healthcare leaders in the metropolitan Atlanta area. In recent columns he interviewed:

- **Philip R. Wolfe**, Chief Executive Officer, Gwinnett Health System. (June 2006.)
- **Gregory A. Hurst**, Executive Vice President and Chief Operating Officer, Piedmont Healthcare System. (August 2006.)

“Core Competencies for Healthcare Executives.” A presentation at the Georgia Hospital Association, Leadership GHA, Savannah, GA, September 14, 2006.

J. Larry Tyler spoke at the Tutorial for the Certifying Commission in Medical Management for the American College of Physician Executives, Dallas, September 18, 2006. His sessions dealt with multiple topics, including: “Employment Marketplace,” “Networking,” “Interviewing from Both Sides of the Desk,” “Negotiating Your Salary,” and, “What to do if You are Fired.”

As a member, J. Larry Tyler attended a meeting of the Georgia State University Health Administration program’s advisory board in Atlanta on October 6, 2006.

Tyler sponsored and participated on a panel titled, “Championing

Your Career” for the THA Leadership Development Council, a group of hospital executives that held their quarterly meeting in conjunction with the Texas Hospital Association’s 2006 Leadership Conference in Austin, October 10, 2006. **Jon Hilsabeck**, Vice President, Texas Hospital Association, served as moderator. Other panelists were **Dick Sweeden**, Partner, Healthcare Solutions Group and former Executive Director of Scott and White Memorial Hospital; **Matt Maxfield**, CEO, Brownwood Regional Medical Center; and **Jim Wiederhold**, Principal, Wiederhold and Associates, a healthcare outplacement and career management firm. Panelists discussed issues related to behavioral competencies that determine the success of healthcare executives including:

- “Importance of Mentoring,” “Essential Skills Necessary for Upward Mobility,”
- “Relationship Building,” and, (Tyler’s topic) “Communication Skills.”

“Governance and Organizational Structure,” the knowledge area covered by Tyler during a Certified Healthcare Executive (CHE) Exam Preparation Course offered by the American College of Healthcare Executives, Chicago, October 25, 2006.

Tyler had two roles at the 49th Annual AAMA (American Academy of Medical Administrators) Annual Conference in Atlanta:

- November 1—Tyler trained those who reviewed resumes for AAMA attendees on November 2.
- November 3—he presented a post-conference panel, “Interacting with Executive Search Firms: Myths, Facts, and Tips,” with **Etheline Desir**, President and CEO of the Desir Group Executive Search.



Northeast Regional Leadership Advisory Board Meeting Recap

Tyler & Company’s annual Northeast Regional Leadership Advisory Board meeting in Philadelphia on September 15, 2006 (see the article previewing this event in *Tyler’s Tidbits*, Summer 2006) was a rousing success. Two speakers were featured on the program: **J. Larry Tyler**, FACHE, FAAHC, FHFMA, CMPE, President of Tyler & Company, highlighted some of his latest research on succession planning, indicating the difference between CEO transition and true succession planning. As has been the case each year at this meeting, Tyler’s comments were felt to be cutting-edge and informative. Complementing Tyler’s presentation was that of the meeting’s other speaker, **Alan Zuckerman**, President of Healthcare Strategies and Solutions and author of *Healthcare Strategic Planning: Approaches for the 21st Century*, Zuckerman gave a speech titled, “Major Trends Affecting Healthcare Delivery, 2006-2011.” As always, attendees also appreciated time to join group discussions and to simply network.

To mark the 10th anniversary of the Philadelphia office, the company hosted a dinner in Philadelphia the evening prior to the meeting. **Patti Hoffmeir**, CHC, Senior Vice President, and **Roberta Levine**, Senior Consultant, were surprised by a special commendation from Tyler honoring their 10th anniversary with the company. Both Hoffmeir and Levine helped open the Philadelphia office.

For more information, including pictures, from this reception and meeting, please visit Tyler & Company’s Web site, www.tylerandco.com.

Please Welcome . . .



Ron Sellers

Ronald L. Sellers has joined Tyler & Company as a Vice President. Sellers is a well-known healthcare executive, having served as Vice President with human resources and broader responsibilities at Appalachian Regional Healthcare in Lexington, KY, Mercy Health System, Chicago, and Millard Fillmore Health System, Buffalo, over the past twenty years. In addition to his new Tyler & Company responsibilities, Sellers is currently the Chief Executive Officer of a not-for-profit hospice near Buffalo. He earned his Bachelor of Science degree in Education from State University College at Buffalo and his Master of Science degree in Educational Administration from State University of New York at Buffalo. Sellers is married and is the father of two sons.



Diane Smith, R.N.

Diane Smith, R.N., joined Tyler & Company as a Research Associate earlier this year. Prior to joining the firm, Smith worked as a pediatric nurse and consultant. She has strong case management experience in home healthcare and in the insurance industry. Smith earned her Associate degree in Nursing from Bucks County Community College. She is married and has two young daughters.

Tyler & Company In-and-Around the Industry . . .

FHA—**Kirk Durossette**, Senior Consultant, and **J. Larry Tyler**, FACHE, FAAHC, FHFMA, CMPE, President, attended the Florida Hospital Association’s Annual Meeting and Trade Show in Lake Buena Vista, FL, November 15-17, 2006. Tyler & Company also exhibited during this event.

SEARCH SUPERLATIVES

"A search is often a mystery. You start out with a need, and magically it is filled. Magic? No, not really. Hard work actually, and a partnership. No search is ever successful without a strong bond between the retained executive search consultant and the client. The strength of this bond will drive the success of the search. That's why finding the right firm with the right people makes all the difference. We at AtlantiCare found that partner in Tyler & Company. Our last search may have been the best I've ever experienced: the best slate of candidates, done in the quickest time, with a conclusion that was fair to all. I look forward to partnering with Tyler & Company in the future."

Fred J. Laquinta, Vice President, Corporate Human Resources, AtlantiCare Health System, Egg Harbor Township, NJ.

CLIENT KUDOS

Client: Temple University School of Medicine Philadelphia, PA
Samuel H. Steinberg, Ph.D., FACHE, former Deputy Chair, Department of Medicine and Director of Strategic Planning and Marketing, Temple University Physicians, Temple University School of Medicine, is the author of a newly published book, "The Physician's Survival Guide for the Hospital." The book—a "how-to for doctors and administrators, advising them how to maximize the time they spend in the hospital and their working relationship"—is available by visiting www.iUniverse.com. Dr. Steinberg is a member of Tyler & Company's Northeast Regional Leadership Advisory Board.

Tyler's Truisms

ALLEY'S AXIOM

Justice always prevails ... three times out of seven.

BEAUREGARD'S LAW

When you are up to your nose, keep your mouth shut.

COMPUTER LAW

Make a system even a moron can use, and a moron will use it.

KIRK'S LAW

87.6 percent of statistics are made up on the spot.

NAVY LAW

If you can keep your head when all about you others are losing theirs, maybe you just don't understand the situation.



RECENTLY CLOSED SEARCHES

AtlantiCare Regional Medical Center

Pomona, NJ
Vice President, Administration, Mainland Campus

Medical University of South Carolina

Charleston, SC
Medical Director, MUSC Medical Center

Morton Plant Mease Health Care

Clearwater, FL
Vice President of Medical Affairs

Munroe Regional Medical Center

Ocala, FL
Chief Executive Officer

Parkview Health System

Fort Wayne, IN
Director of Corporate Accounting/Controller

The Regional Medical Center

Orangeburg, SC
Director, Revenue Cycle

Sinai Hospital of Baltimore

Baltimore, MD
Director, Department of Medicine

St. James Mercy Health System

Hornell, NY
Vice President, Behavioral Health

St. Joseph Medical Center

Towson, MD
Medical Director, Oncology Product Line

Saint Raphael Healthcare System

New Haven, CT
Chief Operating Officer



WELCOME TO OUR NEWEST (OR RETURNING) CLIENTS

Bayhealth Medical Center

Dover, DE
Vice President, Planning and Business Development

Brockton Hospital

Brockton, MA
Chief of Medicine

The Children's Hospital of Philadelphia

Philadelphia, PA
Director of Clinical Nutrition
Health Systems Director, Chief Learning Officer

CHW—St. Mary's Medical Center and CHW—Saint Francis Memorial Hospital

San Francisco, CA
Medical Director, Oncology

Civista Medical Center

La Plata, MD
Senior Vice President, Administration & Corporate Services

EMA/Alpha Physician Resources

Livingston, NJ
Chief Financial Officer

MCG Health, Inc.

Augusta, GA
Director of Internal Audit

Medical Reimbursements of America, LLC

Franklin, TN
Sales Development Regional Manager

MediCorp Health System

Frederickburg, VA
Vice President, Quality

Piedmont Healthcare Organization

Atlanta, GA
Chief Corporate Compliance Officer

St. David's HealthCare Partnership

Austin, TX
Partnership Controller

Southeast Georgia Health System

Brunswick, GA
Director of Human Resources

Temple University Hospital

Philadelphia, PA
Director of Performance Improvement and Regulatory Affairs
Administrative Director, Pathology and Laboratory Medicine

Texas Children's Hospital

Houston, TX
Director, Supply Chain Management

The Heart Group

Nashville, TN
Billing and Business Office Director

Washington Hospital Center

Washington, DC
Senior Vice President of Nursing

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