With all of the preparation for Meaningful Use stage 2, ICD-10 and electronic health records, the demand for health IT professionals has never been stronger.

But there just aren't enough of them to go around.

This is a report for iHealthBeat, a daily news service of the California HealthCare Foundation. I'm Kenny Goldberg.

Veronica Zaman is vice president of human resources for Scripps Health, one of the largest health care employers in San Diego.

(Zaman): "Finding people with the information technology background, but also a health care background, makes it a particularly challenging field to find the right person."

Last July, HIMMS, the Healthcare Information and Management Systems Society, released a workforce study.

The group surveyed more than 150 hospital chief information officers from around the country.

Jennifer Horowitz, the senior director of research, says CIOs were asked if they had IT projects that had to be put on hold because of staffing shortages.

(Horowitz): "Thirty-one percent did put initiatives on hold, and another 19% hadn't yet put something on hold, but were considering it."

Horowitz says the study also identified the areas in which hospitals had the most critical IT staffing needs.

(Horowitz): "Organizations are really focused on clinical applications support, network and architecture support, and clinical informatics professionals."

With the shortage of health IT professionals, medical centers have to compete for talent.
That makes it especially tough for rural hospitals, which can’t match the compensation packages and amenities their urban counterparts can offer. St. Claire Regional Medical Center is in the eastern Kentucky town of Moorhead, population 6,800.

Randy McCleese is St. Claire's CIO.

(McCleese): "We try to be as flexible as possible when it comes to what can we do outside just the normal pay. Can you have flexible hours, work at home? Because I have two IT staff, and we're a staff of only 19 total. One of them essentially works at home all the time; he's in the office about once a month. And the other's in the office about one day a week."

McCleese says he's tried to fill some IT holes by nurturing some of his home-grown clinical staff.

(McCleese): "But I'm seeing that as a hindrance, because it takes time to learn the technology, and we're having to push these systems in place so fast."

Some health care organizations and large physician groups are turning to consultants to help them fill IT positions -- or to fix what's already been done.

Sheri Stoltenberg heads up Stoltenberg Consulting. Her western Pennsylvania-based firm has 130 people working at various medical centers nationwide.

Recently, she's been getting requests for what she calls clean-up work.

(Stoltenberg): "An implementation was done. It didn't go very well. And they're looking for somebody to turn it around and help them get back on track."

In an attempt to prime the information technology job pipeline, the Office of the National Coordinator for Health IT has provided millions of dollars in grants to beef up training and education programs at colleges and universities.

Columbia University, Duke and the University of Minnesota are among those that have received the awards.

The grants are part of the ONC's Health IT Workforce Development Program.

Russell Branzell is executive director of the College of Healthcare Information Management Executives.
He says his industry needs all the help it can get to develop new talent.

(Branzell): "It's hopeful that there's that education process that's out there, but we're also concerned about the pipeline as an aggregate whole, relative to an aging workforce and those that are choosing to retire."

By the end of this year, there will be a national shortfall of 51,000 qualified health IT workers. That's according to CSC, an independent analytics firm, using projections from the Bureau of Labor Statistics and the Department of Education.

Branzell says transforming our health care system depends on a robust health IT workforce.

(Branzell): "The entire industry is in a period of pretty massive change overall, and in particular the areas that we work in, health IT, is trying to stay up with, and in many cases we need to get ahead of, the changing industry to be able to enable it."

This has been a report for iHealthBeat, a daily news service from the California HealthCare Foundation. If you have feedback or other issues you’d like to have addressed, please email us at iHB@chcf.org. I'm Kenny Goldberg. Thanks for listening.