Podcast Transcript

Risk Never Sleeps
Episode 28
Denise Anderson

Ed Gaudet: Welcome to the Risk Never Sleeps Podcast, in which we discuss the people that are protecting patient care. I'm Ed Gaudet, the host of our program, and today, I'm pleased to be joined by Denise Anderson, the president of the H-ISAC. Denise, welcome.

Denise Anderson: Thanks, Ed. I'm delighted to be here.

Ed Gaudet: Awesome. It's so great to have you on the program. I know our listeners are going to be excited to hear about your journey into healthcare, so let's start there. Tell us about how you got into healthcare and particularly how you got into the H-ISAC.

Denise Anderson: Sure. So it's been a little bit circuitous. I've been, I actually love medicine. I wanted to be a doctor, and I ended up not going that path. But in college, I actually applied for one of those job boards that had the index cards up, and you tried to get them a job while you're in college to get some extra cash. And I applied for it to be a ... Circuit, a medical clinic in a clinic that was near the campus. And so I got accepted, I ended up running the place in two years, and it was a 21-physician practice. I loved it, but I was actually talked out of being a doctor by a physician who actually was, who owned the practice. And so he encouraged me to go get my MBA, which I did, and so I got away from medicine for quite a while, and then I came back in with Health ISAC. So that's been very exciting.

Denise Anderson (cont'd): And also, I was an EMT firefighter, so I was working on an ambulance for quite a while as a volunteer, and so I did get my kick, my medicine kicks from that, and that's how I've gotten to be where I am.

Ed Gaudet: Thank you for your service. That's a tough job doing the EMT job. I'm sure you've seen it all.

Denise Anderson: Yeah, it was fun.

Ed Gaudet: Especially if you had the weekend shift. I'm sure, I'm sure you saw a lot.

Denise Anderson: Because I was a volunteer, we did, we could go in any time we wanted. We had a certain number of hours that we had to work, but what I typically would do was go in during the week after work, spend the night at the station, and then go back to work the next morning. So that was my typical.

Ed Gaudet: And so, H-ISAC, tell us about the H-ISAC. Tell us a little bit about the mission and your vision for the organization.

Denise Anderson: Sure, so let me back up a little bit with ISAC in general. So I actually came from the financial services ISAC, and I joined them back in 2007, and ISAC was basically formed in 1998 around a presidential directive when President Bill Clinton was in office, and the concern at the time was Y2K, but he wanted to get critical infrastructure sectors to talk to each other about the cyber concern and what they could do about it, any kind of mitigation strategies, and also to share not just amongst the sector, but across the sector and then with government. So that was the nexus of how the ISAC formed, and financial services was one of the first groups to form an ISAC, and they formed in 1999. So they've been around for quite a time. I was there at FS-ISAC, I actually mentored the woman who started the Health ISAC, so she started it in 2010, which was visionary. Even though the ISACs are very much old hazards, we're looking at cyber and physical threats that affect critical infrastructure. At the time, cyber and healthcare were not spoken in the same sentence, and so she was visionary in getting the group started.

Denise Anderson (cont'd): And then I came in about 2015 of, Jim ..., who was the chair of the Board of the Health ISAC, but who I also knew through my time at FS-ISAC because he was with a number of financial institutions. Twisted my arm hard and asked me to come over and say that they needed me to help get it up and running. So I did, and we've never looked back.

Ed Gaudet: Yeah, and how many members are you at today? Do you have an incredible growth over the last ten, five?

Denise Anderson: Yeah. Yeah, we have over 800 members now. So we start, when I came on board, it was less than 100, so that's grown astronomically.

Ed Gaudet: In all different industries, all different subsectors of the health industry.

Denise Anderson: All different subsectors, yeah. So we have health IT, we have pharmaceutical manufacturers, medical device manufacturers, of course, healthcare delivery organizations, medical research institutions. So anyone that touches the patient is basically a member of ours.

Ed Gaudet: And where are you taking it over the next couple of years? Where do you think you're going to focus investments, or where do you think the evolution of the organization will be over the next few years?

Denise Anderson: Yeah, so I think in a number of different areas. So the first and foremost is we're expanding globally. Cyber is not a local problem, it's a global problem. The threat actors don't recognize borders, I think there are no borders on the web, and so this is something we all need to be tackling across the globe. And so we're very focused on building our global community. One thing I've found in my journey with the ISAC is that in the US we got them, and we've done a lot, we've been so successful. I'm also chair of the National Council of ISACs. We have over 20 members of the council, and they've all experienced great success over the years. But it's been harder in other countries in the globe or other regions of the globe. For example, Europe has been trying to start ISAC, Asia has been trying to start ISAC, and they've tried. They've tended to have to struggle with that, and our mission is to really try to get people to leverage what already exists.

Denise Anderson (cont'd): The more we can pare down the community so that you have one place to go versus a whole bunch of different places to go, I think really enhances the sharing, and the mitigation when an actual threat does happen, you're able to be more efficient with that. So we are definitely expanding in Europe. We're trying very hard to make organizations aware that we exist and that we have many things that they can take advantage of. We just hired a new director there, so we're very excited about that. He's going to be located in Greece, and he actually came from a member organization, so he's very familiar with ISAC, and he believes in our mission, and what we're doing. He's very passionate, so we're very excited about having him on board. And then, of course, we're going to be growing in Asia as well, and that will be our other focus there. So geographic growth, absolutely. And then obviously they're, making people aware of our existence and all the tools and services we have to offer. Many of them free, and our sector coordinating council, sister organization, many of the free tools that they have there, I know you've been very involved with them, and making people, trying to make the brand awareness that's there. There's tools for people to use, take advantage of, and that they absolutely need to belong to this organization or this community. And then the, there's talk about the rural health and the smaller organizations. And I know we've had conversations about that. But I think with the, and it's not just a rural health problem when we're seeing ransomware attack, it's happening to small clinics so it is a big problem, and they tend not to have the resources to work evaluating a lot of different programs that we can possibly help these organizations with, to help them mitigate against the threats, or at least be aware of the threats that they can do something about them or know where to reach out to if they have a problem.

Ed Gaudet: Yeah, that's excellent -

Denise Anderson: ... Yeah.

Ed Gaudet: Yeah, and that geographic expansion, I'm assuming that's going to impact, in a positive way, the information efficacy because if a attack is launched overseas or in Europe or wherever, we'll be able to get that information in a much more frictionless way.

Denise Anderson: Absolutely. And we did see that, a ... in financial services, many times a lot of the attacks started in Australia and then worked their way around the globe. So that definitely is one. But we've seen it here in uptick recently with the Killnet ... attack. We, they were seen in Europe first. Our European members shared that information back with everyone so that the company, the organizations in the US already knew about them and were able to put mitigations in place to prepare for them. So absolutely.

Ed Gaudet: That's great.

Denise Anderson: We have two really great examples for that global sharing is key.

Ed Gaudet: Yeah, and that's obviously a big undertaking. There's probably a lot of things that keep you up at night. What are some of the things that you think about on an ongoing basis on behalf of your members?

Denise Anderson: Keeping me up at night? Yeah, probably the one that really does is data manipulation. I could be where threat actor weather, and it could be a criminal, but it could also be a terrorist or nation-state could go in, and they, imagine if they went in and said, We changed your record, Mr. Hospital, and on blood type, and we went in. We didn't even change all them, we just changed the ... to them. But what does that do to your data integrity? What does it happen? What happens when someone with an A-negative blood type gets B-positive blood? So that probably keeps me up at night more than anything, because I think it's easy enough to do, and it's hard to figure out how to come back.

Ed Gaudet: No, I think that's so insightful. I think too, as professionals, where for the most part, over the last several decades, we always thought about the data and the confidentiality of that data in terms of the protection of that data, even though integrity as well as availability is also important. Those two areas were really never front and center, it was always about the confidentiality. Now you've got availability with ransomware, and that, you're right, that last mile, if you will, for the attackers is that integrity, which could be even more impactful than ransomware. Yeah, that's a really great.

Denise Anderson: You could see that criminal holding ransom, too, right?

Ed Gaudet: That's right. No, exactly. Yeah, we've manipulated some number of your data sets, ... the ransomware will let you know where they are or, yeah, no, that's a yeah, that's.

Denise Anderson: I don't want to give any criminal ideas.

Ed Gaudet: No, I know, I'm sure. Unfortunately, they're pretty smart these days.

Denise Anderson: They are.

Ed Gaudet: Yeah. And the other thing too, that I think we're learning as an industry is what makes them more difficult than ever before, is that they are truly organized crime, right? They are organized criminals at the level of microservices where people are doing very discrete functions within that ecosystem of threat. And, whereas before it used to be one threat actor would do everything. Now they've actually created this notion of microservices, which is brilliant, but unfortunately making our lives much harder to deal with the attacks. ..., speaking of attacks, it's been a tough couple of years for folks with the pandemic. What are you most proud over the past couple of years, personally and professionally, and/or professionally?

Denise Anderson: I think a lot of organizations were hurt by the pandemic, and I don't want to knock pandemic at all, because there were a lot of individuals as well as organizations that were impacted by it. And I don't know that we'll hopefully we'll ever see that again, it definitely was something I've never seen in my lifetime, but there was a couple of things. Let me just back up, not just, I know your question is about what I'm proud about, but I do think that what it's done for healthcare is back in the day, healthcare was at the low totem of the pole when you came to, in the US, we have 16 critical infrastructure sectors, right? Health was at the bottom. COVID changed that. Healthcare rose to the top, and people realized what a role health globally can do to impact not just our lives, but our economy, our ability to save lives, because we didn't have supplies, whether that be food or medicine or whatever the case may be. So it absolutely changed where we are in the industry and the importance of healthcare in the global ecosystem.

Denise Anderson (cont'd): Going back to that, so one of the things we did, we really ramped it up during COVID as an organization. We were a remote organization as far as staffing was concerned. We do have a talk, but we, it didn't impact us. We've been using Zoom before people even knew how to spell Zoom. We've been doing those kinds of things. So we were able to go up and running and run with it, and we were busy. Obviously, there were a lot of threats at the time, there were a lot of ransomware attacks, so we were able to hold sessions, we call them happy hour sessions, where we got members on the phone, and they shared things that, the challenges that they were facing, the best practices that they were putting in place to help against those challenges, and just threat in general and stuff that they were doing. So it was absolutely valuable, I think that, what we were able to deliver during the pandemic. And then certainly, the fact that we've been able to grow this organization from pretty much nothing in pretty much less than to, more or less, we've really taken it to a level that I'm very proud of. We're doing some really great things. I would argue that we're pretty much up there with the best of the ISAC, it's not the best, and we're doing a lot of great things like targeted alerting, so we're able to go out to our members and let them know we've seen lift off, and here's some things that they could do to mitigate against it. The sharing that we've done has been incredible. When the ..., Petya event happened in 2017 the, what we did as an organization and what our members did was just amazing. Within 48 hours, they were able to figure out what the real ground truth was as far as the attack was concerned, how it was spreading, and then develop what we called a vaccine to mitigate against it. And we published that up on our website where anybody to access it, that was something really great that shows capabilities of the organization.

Ed Gaudet: Plus all the work you're doing with the Healthcare Sector Coordinating Council to support those efforts is just amazing.

Denise Anderson: Yeah, we're doing a lot of work there. We don't toot our horn a lot, but we do try to contribute back to the community. I know I get to ask that question all the time, especially by government, but what are you doing for the smaller organizations, or are you only focused on your members? And that's absolutely not true. Our mission is for the sector and the community.

Denise Anderson (cont'd): And yes, we have members, they help us do that, but we're there to serve the community at large, because at the end of the day, every one of us is going to be a patient and we're going to know a patient. It's really important that we make sure that healthcare is able to be delivered and is able to be delivered safely.

Ed Gaudet: Absolutely. Yeah, stronger together. If we work together and we leverage our collective wisdom experiences, then we can combat any attack. And obviously, we've got some work to do, but it's so much better than it was just even a couple of years ago.

Denise Anderson: Oh, absolutely.

Ed Gaudet: So outside of healthcare, what are you most passionate about? What would you be doing if you weren't doing this role, this job?

Denise Anderson: I do love to travel and am doing a lot of that. I would be traveling for sure. I don't sit around too much. I actually, a little unknown tidbit about me probably is that I used to climb mountains and we're not talking little mountains, I'm like talking about one of the tallest mountains. I climbed ... in Tibet, which was a 26,000 or 8000-meter peak, sorry, 26,000ft. So yeah, I did do a lot of that. I'm a lot older and probably a little bit not as agile anymore, but I haven't been doing that, but I love the outdoors. I love to travel, so that's probably where I would be. I love to discover new places and love cultures. Yeah, I'd be traveling the world.

Ed Gaudet: What's your favorite place in the world given all your traveling?

Denise Anderson: Oh gosh, that is a hard one. Nepal was awesome. I loved Nepal. It's beautiful, stunningly beautiful. And I like Australia, though I would say Australia and Nepal are probably my two favorites.

Ed Gaudet: Sydney or Perth.

Denise Anderson: Sydney. I actually love the area north of Sydney, though, I love all of, I guess I could live in Australia if I had to.

Ed Gaudet: Have you ever seen a Tasmanian devil?

Denise Anderson: I have not.

Ed Gaudet: The island.

Denise Anderson: I think I saw one in the zoo, but I've never seen one in a while.

Ed Gaudet: How about New Zealand? You've been in New Zealand. I hear New Zealand is beautiful too.

Denise Anderson: I have not. That is on my bucket list. I would love to go New Zealand. That definitely is on my bucket list.

Ed Gaudet: An H-ISAC meeting in the future, in New Zealand.

Denise Anderson: We are, at some point we're going to be there, I'm pretty sure.

Ed Gaudet: Excellent. Excellent. All right. What would if you could go back in time, what would you tell your 20-year-old self?

Denise Anderson: I would say that always be open to possibility and always be flexible in what you do. Because I went in, obviously, all of us go into school with a certain idea of where we're going to be in our life, and that's not always going to be ..., or we end up. Always be, I had a lot of mentors that kind of helped me along the way, and I would just embrace the mentors that are out there. I would be a mentor because it just plays such an important role in somebody's life. And you could see, I could point to certain times in my life when somebody did something for me that moved me on to the next level.

Denise Anderson (cont'd): And I hope that I can, I know I have done this, but I hope I can be more of a mentor to people in their lives to help them get to certain places. So that's probably what I would say.

Ed Gaudet: All right. Hardest lesson in your career?

Denise Anderson: This one I learned very early in life. So I was going to college and I was running a 21-physician practice. I think I had 30-something employees, and I was getting a minor in business, and I was reading these textbooks, and I had all these great ideas on how to manage people. And so, wow, great, I have this. I can go take it and put it in place in my, in the ..., in the clinic. You know, what are the textbooks and all these great ideas, necessarily don't work in reality. So I learned very early in life that you got to, you can't always rely on what's written in a book.

Ed Gaudet: Yeah, it was, Mike Tyson says everyone has a plan until they step in the ring and get punched in the face.

Denise Anderson: That's right. That's right.

Ed Gaudet: All right. I would be remiss if I didn't ask you this question, because this is the Risk Never Sleeps Podcast. What is the riskiest thing that you've ever done?

Denise Anderson: I would say climbing 8000-meter peak.

Ed Gaudet: It's pretty risky.

Denise Anderson: Yeah. Looking down over that edge and going, oh, my God, if I fall, this is not going to be good, or if I don't make it down, Yeah, that's probably one of the risky things I've done. I'll tell you another one, though. With, one, it was a night I thought, I told you I was a volunteer firefighter, and one of the things I went to six months of fire school, and this was as a volunteer, so we would do it at night after work, but we had to lift 35-foot ladders.

Denise Anderson (cont'd): And remember that one night I tried to, there was one thing that probably scared me more than balancing that ladder and then trying to raise it and ... my face the first time I did it. I was like, Oh my God, what am I doing? What, am I just out of my league here? But I did it. I got it done. And it ended up being a little bit easier than it was. But that was definitely something I don't have a passion for, and raising a, balancing a 35-foot ladder and raising it.

Ed Gaudet: But you're not afraid of heights. So once it was up there, you scaled it. Excellent. Excellent. Any last comments or thoughts you'd like to leave with our listeners?

Denise Anderson: Now, I would be remiss if I don't encourage information sharing, because I think it's so important and it's something so easy to do and something we fall down on all the time. There's a variety of reasons whether we are afraid of liability from the lawyers or even our own egos, right? Oh, they won't, what I'm going to share, they probably don't think is that important. Sharing is so important. The cybercriminal nation states are doing it. We need to be doing it. There's no reason that we can't be doing it, and we can be very effective and helpful and make the community that much stronger by doing it.

Ed Gaudet: Yeah, that's right. And cyber safety is in fact patient safety and the core of that, foundational, is the information. If we're not sharing it, obviously we can't be stronger together. We thank you for your service, and everything you do, and everything you bring to the industry. And this is Ed Gaudet signing off from the Risk Never Sleeps Podcast. If you're on the front line protecting patient safety, remember to stay vigilant because risk never sleeps.

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