

Podcast Transcript

Risk Never Sleeps

Episode 123

Will Conaway

Ed Gaudet: Welcome to the Risk Never Sleeps Podcast, in which we learn about the people that are on the front lines, protecting patient safety and delivering patient care. I'm Ed Gaudet, the host of the program. And today I'm pleased to be joined by Will Conaway. Will, welcome to the program.

Will Conaway: Oh. Thank you, Ed. It's great to be here. I'm a big fan of the show, so.

Ed Gaudet: Oh, thank you, sir.

Will Conaway: It's interesting being on the other side of the camera instead of watching people.

Ed Gaudet: Yeah, it's always fun. And full disclosure, I don't think many people know this, but I actually don't go back and listen to the podcast usually. And I was forced to do that this week because I wanted to provide some edits to one we did. And I was just amazed at how freaky I look sometimes. Get going with my hands and sometimes I get into this rocking motion. I don't know what is happening, but like.

Will Conaway: Too funny. I have to admit, I've done quite a few podcasts over the years and I don't usually listen to them. I know what I was supposed to say, sometimes I don't, so I just leave it alone.



Ed Gaudet: You're in the present and let's leave it in the present.

Will Conaway: Exactly. Yeah.

Ed Gaudet: Maybe someday I'll go back and listen. But I really appreciate you joining the podcast, and listeners I know will love to learn about your background. So maybe let's start there. Give us a sense for your current role and a little bit about your background.

Will Conaway: Sure. I'll just tip my hat to the top here. I'm currently the vice President of Consulting and provider leader at NTT Data. Very large company. We do about 30 billion just in the United States, or I should say North America. Very large organization. I've been very fortunate in my career where I've had a lot of executive roles at large healthcare systems, which is always nice, where I've held the titles of Chief Information Officer at the top level, chief of staff, chief operating officer and also a chief growth officer at one of NTT's largest competitors. But in the past, I've been at Becker's Hospital CIONO, which is always great when Scott Becker recognizes you. Also been the, can't argue with Scott Becker. I've been recipient of the Constellation Business Transformation 150 award that Ray Wang has in 2020 and 2022. So two time winner in that. And I received the ONCON ICON award in 2023, which means I must be getting older when you start seeing awards like that. I've served on numerous boards over the years. I'm currently on Monumentum board for Disability Services, and that's a large organization in California. I've also been on Chime's AHIT board and their AEHIA board. Been on the Federation of American Hospitals, which is very interesting to get the talk in Washington, DC, and such, and also on their cyber committee, which probably not qualified to be on there, but I was. I've also been on AT&T's Advisory Board, Forbes Technology Council, and I'm currently a member of the Economic or the World Economic Forum. So my day-to-day things that I do at a very high level. My role provides leadership to a growing staff of consultants, including providers, managing directors. I have a group of physicians that report to me, healthcare experts and technology specialists. But I will say, I think maybe over my career, I will still say no matter what leadership role I've had, I think I should always note that I think my greatest responsibility is creating more leaders for an organization, and that should be any leader's main item to think about.

Will Conaway (cont'd): And then additionally, I think people don't, the biggest change you'll ever have for those people who we always say go to the dark side from going, from working in the hospital over to a vendor. And that is you have heavy collaboration with sales, industry solutions, and trying to make sense of what sells. And that's always just what are you going to do to add value for the customer? And that's the key. And then just being a subject matter expert over the years.

Ed Gaudet: Yeah, I think it's interesting. You've built probably this level of empathy that is rare. You've had both sides and multiple layers at each side. What have you learned over the course of your career that if you were sort of codify the things? Maybe it's 3 to 5, maybe it's ten; I don't know. But like, I'd be really interested to hear some of the learnings that you've taken away from all this experience.

Will Conaway: I will say from the top level that truly, we're all sales. I hate to say that no matter where you're working, even if you're working in the hospital, you're selling your ideas to somebody. And we're all consultants. And I would say for me, and it's kind of like being a consultant no matter what you do, especially when you're in technology; things change so fast. And I will say at consulting technology jobs or working in a hospital or wherever it might be, it's a little like golf or playing a musical instrument. And that is, you never really master it. From day to day, you have good days; other times you just don't. So I really believe the things that I have learned in over the last, I will say, really, 5 to 10 years that have really been helpful is that if you really want to be successful as a consultant in technology, you must know your partners. And when I say partners, I'm talking to our clients. We don't like to say clients, but they're still clients. Better than the competition of the great ones really can define and understand and solve their partner's pain points. I would also say, not a big surprise to you, something that you probably get to learn every day as you talk with people and probably do a lot of reading yourself, and I know your company does a great job with this: you need to know the industry well and be able to predict trends. Great consultants know what's going on the day and where things are going. I would also say you have to have innovative insights. However, with all that said, they have to be able to be implemented. They final idea is not the goal.

Will Conaway (cont'd): The goal is can you implement then? I'd say you have to have a strong sense of clarity and that is, can you revolve around the mission, the vision, the values of the organizations you work with? You have to be able to do that. Both the company you work for and the company you're working with at that time. And you have to be able to provide well-formed strategies and visions and be able to communicate those out. And I always say, When you're looking at your strategies, no matter if you're working for somebody else, you're working for yourself or an organization, your strategies are two things. Those are the things that you decide to do and the things you decide not to do. So that's what's in scope and what's out of scope, because that really defines who you are. And just a couple more items that really come to mind here. You need to be able to bring capabilities that evolve with time. And I think we're seeing more of that with the AI over the last couple of years. And maybe quantum computing is that next big thing. But you have to, you've got to be able to bring in new things without losing your brand or who you are. And that's not so easy. And as a guy who lives in Los Angeles for most of his life, I always think about John Wooden on one thing. And that is, you know, what he taught his great teams at UCLA and that is: Be quick, but don't hurry. But you need to understand that success in the market requires precision understanding, but it also requires getting the patient's needs, the customer's needs, and being at the right time. And then I think overall, you work in healthcare, you have to work for a greater purpose. It can't just be about you. There has to be a service and a selflessness that you have. It's not only doing things right, it's about doing the right things. And if you're in healthcare IT, you are part of the patient's episode of care, I like to say wow.

Ed Gaudet: Wow! Yeah, a lot to unpack there. So you talked about partnering. What makes a great partner on both sides? Like what have you seen that really works? Or what have you seen that doesn't work when you partner with either a third party or you partner with a provider?

Will Conaway: Well, I would say the first thing is, and I see this all the time, we often, as consultants get hired in to agree with people that where you're being brought in. They're actually don't want your advice; they want you to tell them, Yes, I am on the right path. When that happens, we're in trouble. And sometimes they are in the right path. And it's a very short meeting, like, yeah, you guys have this, but you need to be able to voice your opinion. The other thing is, I see the other side happen sometimes too when you come in, and they just hand everything to you.

Will Conaway (cont'd): And here you go, we got a mess. You have to be able to be involved. If you're, if I'm coming in and working with the health care system, they have to be involved. They need to let me know where they want to go. And it's like the AI stuff that we're working on right now. Like everybody, it's the buzzword. Just got back from him and everybody's talking about it every meeting. But if you're doing a roadmap for where you want your AI program to be, you need to be part of that. You can't just hire some consultants who tell you, This is what you need to do. You know your business better than anybody. You know your financials better than anybody. You know your security better than anybody. You know the risk you're willing to take more than anybody, because we all have, everybody has a level of risk. That is where it needs to be. And the other thing is: for things to really work, You have to know where both people want to be on the scale, because if you talk to a consultant, if we had a Likert scale of 1 to 10, we all want everything on ten. It's going to be the best ever. But I talked to a lot of health care systems. Five is fine for them. A three might be fine for some. Seven is better. Very few want to be ten. They don't have the time, the effort, and the money. They need to make sure patient care is solid. The technology is actually doing what it needs to do to advance the patient's episode of care.

Ed Gaudet: You just defined the tiering mechanism for NIST, CSF, by the way.

Will Conaway: Somewhat familiar with it. I'm not good at it, but I'm familiar with it.

Ed Gaudet: I get a little geek joke in there.

Will Conaway: There you go.

Ed Gaudet: Speaking of geek jokes, DNE?

Will Conaway: I don't.

Ed Gaudet: Ever? Oh, wow. Okay. Okay. Interesting. So, what did you do as a kid growing up? What were some of the things you did?

Will Conaway: As a kid growing up, I was heavily into sports. Whatever reason, I was always a very good athlete, which is, I always say my brothers are huge people and I'm much smaller than that. They're both about 5 or 6in taller than me, so I always thought if I could have been their size with my athletic ability, but. A lot of sports, a lot of music, which actually took me to Los Angeles. Some people are familiar with my background, and I always, it's known with a lot of people. They don't know it somehow. They always seem to be able to look me up and find it. But I actually started my career having very nice hair and a heavy metal band in Los Angeles. So I did. Yeah, it's true. Playing very heavy progressive music.

Ed Gaudet: Like Genesis, early Genesis, or?

Will Conaway: I would say Genesis meets Black Sabbath is very heavy. And I do like the early Genesis. I thought Steve Hackett was a great guitar player. I loved his playing. And you can't beat the early Genesis. When Phil wasn't singing, but background, and Peter Gabriel was leading things. And who else can dress like a sunflower and go out on stage like Peter Gabriel? Anybody?

Ed Gaudet: So like an angry Marillion.

Will Conaway: I know. Those outfits were crazy, but I always joke at him because we always did that weird hairdo thing where cut his hair, where he looked like he was going bald. Now he is. And he looks like Cousin Fester. But that's a different story.

Ed Gaudet: That's great. What did you do? What did you play?

Will Conaway: I played guitar, and I still try to play guitar. It's one of my interests still. I don't get to play enough to be good anymore. I was lucky enough to get to do a lot of studio work. So I always say I got to play on other people's music that did something where I made no money doing it. I was not at the type of session player where you're thinking Steve Lukather or one of those guys who made millions. I was the guy who got invited to play 2:30 in the morning because I had \$750. Yeah, they were running ten-minute slots. They were booking the place for the whole evening. So.

Ed Gaudet: So what was the name of the band again?

Will Conaway: Well, I don't want to get into that because then I got other problems. And if people start texting me. But we played some good shows, got to open up for some big bands. And that was fun. It was fun.

Ed Gaudet: Tell me after the ...

Will Conaway: Oh, absolutely.

Ed Gaudet: I'm huge into music and I love the Black Sabbath too..

Will Conaway: That's funny.

Ed Gaudet: Yeah, they're putting the Aussies back. I guess they're going to do one show.

Will Conaway: Yeah, I'd love to go see it. I was like, Do it back in England. I think Birmingham or something, I think they're playing.

Ed Gaudet: Yes, Birmingham. Exactly. That's exactly.

Will Conaway: Yeah. Oh, we're making ourselves look bad now.

Ed Gaudet: I know. You'd be Randy Rhoads fan?

Will Conaway: Absolutely. I was a kid that even bought the Jackson Flying V style that he had, that had the pinstripe on it, the white one with the shark tooth inlay. I had to have that as a kid playing Crazy Train a thousand times and probably played it right two times, but.

Ed Gaudet: It's my walk on song ... I speak.

Will Conaway: Love it, love it. I love Randy.

Ed Gaudet: All right. Yeah, I did, I created it with another coworker. We created a house band at Imprivata. Pretty cool. Yeah. So we got to, we actually for a couple of years, we did the corporate events, our kickoff meeting and a couple of other events that we did. It was a lot of fun, but. There's some videos floating around the internet, I'm sure.

Will Conaway: Yeah, that's what always worries me. That's why I don't like to throw names out there. Is that really him? They find him. It seems like no matter where I'm at, someone finds him sooner or later.

Ed Gaudet: That's right, that's right. So as we go back to the AI point, and as you look at what your clients or what you're seeing in the marketplace, what are some of the top challenges that providers are having with adoption?

Will Conaway: Providers always have problems with adoption if anything. I think the first thing is they feel a little threatened by AI. Those who, and I'm going to hit on this something I think that's more important than that. And your question's brilliant. I think where we get the problem is. When you look at when 22% of physicians are aged 55 to 64, and then you have another 20-plus percent that are aged 64 and up, you have 40-plus percent of your physicians who, the silver wave, silver tsunami, whatever you want to call it. And I believe there's a lot of problems with that. That set of physicians, this is like when EHR came out; there was people that quit. I think when I'm hearing people now, they're scared. They don't like someone telling them what to think, what to do. They can see this happening. I think the younger doctors are very much into it. They see it as a way to augment the insights they have. And once they start using large language models and just having the ability to do digital scribes or any type of CDS type of work where they're doing, excuse me, clinical decision support type work, the faster it can do things for them, I think that the younger doctors are for it. I think from a healthcare standpoint, I think some of the adoption would be the cost. There's still, people aren't sure what to invest in. And I remember the first couple of projects we did, it was really go talk to our nurses, because that's usually where you start. And they just wanted documents moved from one file to the next automatically.

Will Conaway (cont'd): So I think part of it is healthcare systems need to understand better what they need to do. They probably, there's always going to be early adopters who are going to be fantastic at this, who are going to change the way we look at things. But I really believe we can bust it down to a physician, nursing, patients, clinical ops, revenue and business is how I try to bust those into those six categories. And so it's more than just physicians; I think it's the whole hospital unit itself that is going to paradigm shift. And I tell them right now, this isn't one of those things that you can opt in or out of. It's happening. It's just when are you going to start doing it? And the longer you wait, the further you're going to be behind.

Ed Gaudet: Yeah, a great point. And of those six areas, do you see 1 or 2 area driving most of the adoption today?

Will Conaway: You know what? I think it's going to be, surprisingly, patients. I believe the patients are looking for health navigation. I think they're looking for more control of their episodic care. They're looking for more personalized health coaching, disease, education. I think the family is too, upon being discharged from the hospital. I think this is one of the most important things we could do is have reminders; have things that could, AI that could reschedule appointments for people; keep them on track; and let them know what their episode of care needs to look like as they go through; and give them the options. Because once again, everybody's got different viewpoints on what they're willing to spend on and what they're willing to do. So I believe the patient's going to continue to drive this. I think just like in any other industry, healthcare is changing. If I told you that that General Motors is making a new car because they had 10 million people who said, This is what you need, you wouldn't be shocked at all that they're doing that. Why would we be surprised that the patient or customer is going to start driving what they need more of? I think that's what it should be. I think that's where the value really is. Who you're trying to help? The patient. You know that? So I think that should be the, always be the bottom of where we look at the value.

Ed Gaudet: Wow. That's interesting. Let's look at that a little more. So if that were to happen because everything is driven out from the provider outward, but if it were driven inward from the patient, what would have to change?

Will Conaway: I think what we would have to change is healthcare's culture to some degree, which I think will, it's being forced to change now. A lot of that has been done in the past, where I don't think healthcare was ever seen as being efficient. I don't think anybody would still see it as being efficient. It's not uncommon for 40% of costs to be an administrative. I've seen departments for 7,080% of their costs of administrative. So I believe the patient telling people exactly the value that they need what will actually drive down some of those costs. It's going to pinpoint in what people find valuable and important. And I think that will help a lot. And I also think we're going to start seeing healthcare systems, especially right now with the current administration, where they're removing some of the funding that they've seen in the past for like their strategy nets and such; their service nets. They're not getting the money that they were going to see like a couple years ago. And they're looking at efficiency. So I think they're going to have to go back and reevaluate how they run their organization. And I think it goes down to the basic building block of who's being benefited. The patient comes in. You're trying to make them better. Have the patient part of that episode of care.

Ed Gaudet: Do you think there's a level of trust erosion also that's contributing to that?

Will Conaway: Absolutely. I think that's been going on for a long period of time; I really do. And I think that AI is going to bring out things that we didn't see in the past, too. I think it's going to start finding fault. And we already know, it can read PAC screens and imaging screens better. We've seen early diagnostic things. I think you get that controlled with quantum computing, which can take things that could have taken decades to pull the materials and figure something out. I think the next five years are going to be extremely exciting to be in healthcare, and it's just going to, things are going to move very fast. I think we're going to see cures for diseases that we never thought would ever be cured.

Ed Gaudet: So if you were to start your own healthcare organization with the patient first, really patient-first approach, where the patient is driving basically the health plan, what would you do differently? Like, would you need a new EHR? Would you need a new approach in hospital in situ, or could you leverage what's there today?

Will Conaway: You could leverage what's there. There's no question. I think we're going to, I think you're going to see a just a natural development. And I think people already talk about: EHR 2.0. Cerner has been talking about it for years. Now with Oracle owning them, I think they're going to take one more run at doing something special, and I think they'll get it done. They're pretty innovative company. Epic I think continues to run out new innovative things all the time. I also think you're going to see Epic become a much bigger player in the next year or so, with just how payments are done. I think that they're going to be working as a clearinghouse; they're going to be working as a payer; they're going to be the in-between to the insurance company as Declare House. I think you're going to see a lot of advancements there. So why not?

Ed Gaudet: ... insurance.

Will Conaway: I don't, you know, why not? I actually believe that they could run everything if they tried. They've been pretty impressive. And it's interesting. I've been on Meditech. I've been on Cerner. I've been on, I'm trying to think of all scripts; anything you can think of. I've worked on those systems at one time. I think they're all good systems, but Epic has almost turned this into Starbucks was back in the 2010 where it's the cool place to be. It's the cool product to have. It's the neat show. If you ever visit their campus, it's second to none. I think that they've done a fantastic job of doing things. And no disrespect for the other companies. They've done fine work, but they have turned it into a culture, an image, a feel. I know that people I talk with who are actually on Epic actually feel better about being on Epic than they would if they were on one of the other products. They just feel better.

Ed Gaudet: Yeah, no. Judy and Carl've done a really good job of principle based execution. Right? Where they set the strategy. I'm sure you've read the principles in the bathroom if you've been on campus posted everywhere. And I think the 1 or 2 is like, Don't sell; Don't become a part of another organization; Don't go public, right? Like, they're really interesting. At first blush, you look at them and go, Wow, those are really, why would they say that? And then you realize, well, especially if you've ever built a company where you've taken it public or you've sold it, you see the challenges of the, you see the good, the bad, the ugly of those experiences.

Will Conaway: Absolutely.

Ed Gaudet: Yeah. So interesting. So wow. That's so, as you think about a health system, let's maybe, what are some of the top inefficiencies that you look for when you go into a provider so that you can help, obviously, rightsize what's happening?

Will Conaway: Yeah. I don't look so much at inefficiencies anymore. I look at how, it goes back to what they have in scope and what they decide they're going to do for me. And the reason I say that is I need them to define who they are. But the things that I really look for when I go to a hospital to see if they have things set up in a way that I think makes sense and I'm always looking at cyber. And I don't know why, but that work they spend on cyber also tells me what they're willing to spend on other things, and the amount of risk they're able to take. And when you start looking at healthcare systems just in general, and I'm trying to say, I read this and you'll probably know that stat, and I'm trying to think this out in my head, that if you look at the difference between like an A and a B-rated healthcare system, there are about three times more likely to be hit by a cyber attack if you're a B rated. And that gets pretty ugly. And then I think we all have started to realize over the last couple of years that your Social Security card is worth a dollar; your credit card is worth \$5, unless my wife has it and that's another story; and then you, yeah, and then if you look at your medical record, then on the black market could be worth up to \$1,000. So I'm looking right across there because what is your appetite for being hit? Because every healthcare system is a victim that's not going to slow down, they're easy targets, too much biomed stuff rolling around; it's easy to crack into. The other thing I look at is what is your demographic that you're serving at your area, and that will tell me about their efficiencies. When I look at aging populations, when I think of how many areas that we work with, that there are more people over the age, and this is true for the United States as a whole. There's more people over the age of 65 than are under the age of 18. So that's a scary thing to me. I look at regulatory compliance and data. I mean, that's only going to get more complicated as we start looking at AI. What are we going to do there? We're going to have to bust everything into fairness, accountability, transparency. What's the ethical considerations that the big five things that people look at? Physician shortages are another thing. I look at hospitals and I can tell already, obviously, for the country we're looking at about 138,000 physician shortage by 2036. That number could be worse. We're growing at about 8% a year, so that's getting bad.

Will Conaway (cont'd): I'm also looking at things like augmented care at home, hospital at home; two different things. One is an AI program. Hospital at home is something that normally doesn't generate a lot of money, and it's more of, I would call a logistics platform. And then I think anything that we can do in a healthcare as anything-as-a-service; X-as-a-service I like to call it. What can we push to your desktop quickly so you don't have to have 400 people in your IT department? Those are the things I look at when I go into places, and how I can clean those types of items up, because that's about 30% of your cost. I think most people have gotten into after civilization. I think they get that most of the places, unless they're leaving one product to another, have already done their EHR implementations. So and I also think just, you're going to see less CIOs involved in things. I hate to say it, it's going to become more digital officers. So I tell every CIO out there, Learn digital, learn AI, move to the next level because if not, CIOs can stand for career is over.

Ed Gaudet: That's right. You mentioned quantum, too. It's coming fast. So I love that notion of cyber program as an indication of overall organizational maturity. Are there any patterns where you go into an A-level organization; they've got their cyber buttoned down pretty well; or anything that comes to mind? There's but these other areas tend to be areas of opportunity.

Will Conaway: What scares me is my employees over the years when I was at the hospital. My own team I was pretty confident in. I usually had pretty good cyber people. It's too many physicians bringing in, sharing passwords. Too many people have. Walk through a hospital someday, and if you were to see every nurse and every doctor flip their card around, I guarantee you're going to spot, 1 in 5 have a password on the back of it. Those are the things that scare me more than anything. Biomed, when you have the patch act over the last couple of years, has tightened that up a little bit, putting more responsibility back on the vendor to clean things up. But still, some of these places are running and I'm not going to say who, but I've been to places still run on like windows '95. That's not an exaggeration. Just one item that they have to have that GE made 1992; it's the only one they have. So you see things like that still not often, but those are the things that scare you. And I think that the other thing is there's some great companies out there who are really locking it down on cyber. We need to approach cyber differently in healthcare. We need to look at what the banking industries have done. We need to look outside of healthcare. Healthcare has not been successful in this.

Will Conaway (cont'd): Why is it that, if I use my credit card where I shouldn't, I'm getting a text within 10s? We should be doing those same things in healthcare. Why is a doctor at 2:30 in the morning that has never used this piece of equipment, what is he doing on there? And then the other thing I hate to say, you got to lock down those service desks. We have a lot of issues with service desk throughout this country where people call in and bully the people working there. Unfortunately, these are the lowest paid people on your IT department, and they don't want to be in trouble. So you have people calling in and bullying in to get information in numbers.

Ed Gaudet: They may not even be part of your employees. They might be a third party that you're leveraging. Makes it even more challenging. So I want to unpack something that you said earlier, which I really liked. Well, like; it was just a trend. The doctors are getting older. And so I wonder if, does AI offer an opportunity for us to rethink the level of education? Does it open, does it present an opportunity to open up the gates to more physicians, or maybe a different type of role that can really drive better outcomes longer term because of the use of AI? In five years from now, AI will be as prevalent as a stethoscope, right? I mean, it's going to, we're going to have some AI pilot in their hand, and they're going to be leveraging that or ambient listening through their ears or something. Right? It's happening. It's going to happen. And I just wonder does a doctor have to go through that, was it 12 years basically of education?

Will Conaway: I think that's a good question. In my mind, AI is going to be the greatest equalizer for this. It will make the jobs easier for the position. I'm not saying a lot easier, but it is going to provide insights they've never had. I also, something that I have seen, just, I do work at Cornell University. I'm sure people see the reason I'm using this computer today is it works better with the Zoom. But I will say, over my years of teaching at Cornell for the last 15 years, I see less people want to get into healthcare and more people want to get into technology. I think technology has become fun sounding. Kids have grown up with a lot of advanced gaming. They've grown up with a lot of that type of material around them. When I grew up, you didn't have any of that. The smartest kids became lawyers. They became doctors. That's where the smart kids went. Smart kids today are looking at, they see Elon Musk; they see people like that; they're seeing things that they could put a rocket to the moon.

Will Conaway (cont'd): This was never thought of before. So people are viewing technology as a true career or I think at one time it's just we really thought that way. Now it's there, it's tangible. So I do believe that AI will be the equalizer that will help out. I also am starting to see, just from my own experience, I'm starting to see a lot more CMOs become CMIOs. They're getting more into the technology part, and those are the people we need to be, the people that really lead and challenge others and really drive that. I think we'll be all right. I think we'll be all right long term.

Ed Gaudet: I wonder in five years if the time to become a doctor compresses to six years or less, right?

Will Conaway: I think you have to, because I think we live in a world now where everything is on your phone and you can get information in seconds, no matter what you're doing. And I think education is going to have to go back to that, like after World War Two when the soldiers came back, a lot of the programs were two-year programs, three-year programs. So they're kind of back out there. So they didn't lose that time. I think we have to compress some of that time. It may be tougher, but AI could maybe make it more valuable. The time you have is better spent because if not, I don't see people wanting to spend ten, 12, 14 years and then working three years to pay off \$1 million loan or 15 years to pay off working in the emergency department in South Central. You just, that's not something that anybody's looking to do. So I think you have to compress it.

Ed Gaudet: I think if you and I had another two hours, we created a company today.

Will Conaway: We'll talk.

Ed Gaudet: A new company today. Yeah. A lot of really good ideas. Let's switch gears a little bit and talk about you. So yeah, your favorite topic. So let's see. If you want to go back in time, what would you tell your 20-year-old self?

Will Conaway: Oh man. What I would tell myself. Why do you ask such questions? What would I tell myself when I was 25?

Ed Gaudet: Remember you're in LA rocking out.

Will Conaway: Yeah, I was cool. And if anybody tells you different, they're wrong. I was cool. So I'll tell you that. I will say a couple of things. I would tell my 25-year-old self, my dad gets smarter with age. I don't know how that happened, but it does work. You start to realize things. But really, I'd tell myself that nobody cares more about your career than you do. In other words, your career is what you make it, the actions you do that continue to make that successful. Never wait on other people to tell you what you want to do or how you need to do it. That's not a good plan. Also, I would just say that be resilient as you walk through life. Businesses are going to change, technologies are going to change. Your job is going to change numerous times. People are going to see you one time. Absolutely. And it always reminds me of a Rogers quote for ..., he probably said it when I was that age, but there's no traffic jams on the extra mile. And I think that do a little more work. You're usually going to be pretty good in life. And don't take things, the other thing I would tell myself is don't take criticism from someone you wouldn't ask advice from. And I think when I was younger I did that often. As you get older, you realize, why would I even talk to this person? But yet, I'm upset about something they said to me.

Ed Gaudet: Yeah, that's a really good point. All right, so you're on a desert island, this will be interesting, and you could bring five records albums with you; what would they be?

Will Conaway: Five?

Ed Gaudet: Yeah. I want to see if I want to go to your island or not.

Will Conaway: Oh, the first one would absolutely have to be The song Remains the Same by LED Zeppelin.

Ed Gaudet: I'm on your island, dude. I'm on your island. All right. I don't need to hear the other four. I'm there.

Will Conaway: The other reason I would say that is that if I had a video recorder that's also filmed so I could watch video and hear the music. So it has to be somewhere, was it 1976?

Ed Gaudet: Yeah.

Will Conaway: The second one is kind of a weird one. I'm a classical music fan. And I'm a Zagorsky fan too. So I would have to take pictures at an exhibition by Emerson, Lake, and Palmer. I always liked that album. Oh, another one I would take: Opeth. I'm surprised you. The Swedish metal band; I love those guys. They had an album out a couple of years ago, and I'm trying to think what that. Oh, the Garden of Titans at Live at Red Rocks Amphitheatre. And that was also filmed, I believe. So that's one of my favorites.

Ed Gaudet: That's a new one for the show.

Will Conaway: I love any type of heavy metal. Another couple albums that I'd have to have. I would probably have to grab Black Sabbath. And I'd have to grab, We Sold Our Souls for Rock 'n' Roll. Because it's like the first five albums. So if I just picked the first album, then I'm losing the next four and I need to hear Hole in the Sky and I need to hear all those songs.

Ed Gaudet: It has that arresting visual when you open the album up to, right, if you remember that.

Will Conaway: Oh, awesome. You just gotta love Ozzy. Greatest front man ever. I won't say he's the greatest singer, but he's the greatest front man. And I can't, to me, it was always odd because Ronnie James Dio came in; much better singer. But he didn't sound as good. Ozzy just fits Black Sabbath. And I'm going to pick a movie because I got to get a movie on there.

Ed Gaudet: Yeah, I was going to ask you movies, too, but let's go.

Will Conaway: You're killing me then. I would say North by Northwest. And I always like that Cary Grant movie. And was that; Eve Marie Saint? And who was the other guy? James Mason. That is one of my favorite movies. Love Hitchcock type items like that.

Will Conaway (cont'd): Not a huge movie fan oddly enough. I don't watch many them over the years, but I always like those old Cary Grant movies and the James Cagney movies and those even older back in the 40s.

Ed Gaudet: Always great, always great. And the cinematography is world class. And you're in LA. So tell me about LA. Like, what did you, were you born there or did you grow up there? Is that?

Will Conaway: I was not. I actually grew up in Kansas, and did my undergraduate at Kansas State, and I literally couldn't get out of Kansas fast enough. And there's nothing wrong with Kansas when I look back at it now. But when you're 20-year-old kid, you want out of Kansas. I literally loaded up the van, literally the van; that's not a joke. A Dodge Van. I think it was like a 1979 with the Corinthian leather in it. I got that thing, and I had two guitars, an amp, and I had about 450 bucks, and I thought I was rich. And I drove to LA to be in a big band. I ended up sleeping in that van for the next six months in the ampm's; if anybody from California will know what I'm talking about. Showering in the ampm bathroom, which isn't good. And then they had these nachos for a buck, and they didn't care how high you piled them. I became a pro. I could stack those things like 14in high, and I lived on that stuff for a year. It's interesting, but.

Ed Gaudet: My first flight. So I grew up in a small town in Connecticut called Plantsville. So probably the Kansas of the northeast, right? Very rural. Couldn't wait to get out. Big music fan. I get on a plane for work, and I go to LA. First trip. And I'm so excited because I'm going to Mecca. I'm going to Venice Beach, where Jim Morrison and the Doors started. And I went to Venice Beach, and I still go, whenever I'm in LA, I always go to Venice Beach. I love that. That's too cool.

Will Conaway: I will let you know. I opened up for Robby Krieger when I was a kid. I got to open up. Yeah, we played a small bar, and he was doing his jazz stuff at the time, and I came in there and I was so excited. And got the meeting. Talked to him, got to play his guitar.

Ed Gaudet: He's so underrated. He was such a great, great player.

Will Conaway: Just great player.

Ed Gaudet: Yeah. Oh, that's crazy.

Will Conaway: Yeah. That's pretty cool.

Ed Gaudet: Where did you sleep in the van? Where did you sleep? In Venice or? Santa Monica?

Will Conaway: I was outside at Studio City. And the reason studio City, that's where all the recording studios were. So I used to park my van in front of the recording studios. And it was funny because I had a Gibson 175 at the time, which is the most unlikely guitar you would ever have in a heavy metal band. But I had that thing when I was about 12. Got it from the neighbor. Then I had a Les Paul time. So I played the Les Paul for all the metal, and then I could get gigs at the studios because guys would see me with my guitar and they figured, Oh, he must be serious because he's got that 175 jazz guitar. And I walk in with that. I was no better than the rest of the guys, but they thought I must be. So it's the little things. It's image.

Ed Gaudet: Yeah, yeah. Awesome. That's awesome. Well, you're like, I've never been stumped before for questions, so. Yeah. I hate to say you may be the most interesting guest we've ever had because we've had some really interesting guests, but you're definitely up there. Hardest lesson in your career?

Will Conaway: Hardest lesson in my career is that no matter how good you are, you will be replaced at some time. It really is. And it will continue to happen your whole career. You must be able to reinvent yourself every 5 to 10 years, and if you can't, you're going to be in a ton of trouble. And I'm thinking with all the technology, maybe it's 2 to 3 years. You will continue to move your ability to be self employed, so to say, and to keep moving forward is the difference between you being good at what you do and you just being everybody else, or standing in the unemployment line.

Ed Gaudet: I love that advice. Awesome. Riskiest thing you've ever done. I've got to ask you that question. This is the Risk Never Sleeps Podcast.

Will Conaway: God, you're killing me with this one. I would say, I would like to think that the riskiest thing I have not done yet; I would like to think I am going to, at some point, take an educated chance on something that will bring great joy to my life and hopefully a lot of money. I think, and I think unless you're doing a risky job like Evel Knievel jumping cars, you should be able to do things. You don't want to kill yourself. But I do believe that you have to take somewhat of a risk, and that requires you to have your own mission statement, your own vision statement, your value statement. If you know where you're going, you'll find a way there.

Ed Gaudet: No, awesome. And if you weren't doing this job, what would you be doing?

Will Conaway: You know, I think I would be doing this job for myself, this type of work. I enjoy doing the consulting work. I enjoy talking with people. I enjoy the technology part of things. I might have a podcast one day to talk more about it. I see people like you; your podcast is fabulous. I mean, I'd love to do something like that someday.

Ed Gaudet: What's stopping you?

Will Conaway: You know, I don't know. Now I'm starting to think. You're talking me into this. That might be that risk. That's that risk we're talking about.

Ed Gaudet: There you go. There you go. Okay, last question. I think it's the last question. What advice do you have to cyber professionals just starting out or somebody that wants to come into healthcare? What advice would you give someone that's just graduating?

Will Conaway: I would tell them that definitely find a mentor or a coach. I suggest that to everybody. Find the person that you want to be five years from now if you're just starting your career. Talk to that person because you may find in two years you don't want to be that person. And I'm going to tell you there is no trickier job than cyber. I really believe that is one of the toughest jobs.

Will Conaway (cont'd): That's why CISOs make more money than CIOs, and that's why they're, because they're looking for work often, too, if anything goes wrong. You have to educate yourself, continue to educate yourself, and educate yourself some more because things are changing fast. I actually believe that the CISO of a company might be the most valuable employee there. I really believe that. They are the person that can lock it all down.

Ed Gaudet: I love that. Learn how to learn. Become an autodidact. I love that. So I guess there's one more question.

Will Conaway: Sure. ... Colombo.

Ed Gaudet: Love him or hate him?

Will Conaway: You got to love the Grateful Dead. How can you not love the Grateful Dead? All you have to do is still go to San Francisco and walk around and look at all the tie dye. I love Jerry Garcia so much that a friend of mine was actually building amps in LA. So Jerry Garcia and amp. And I heard it and I had him make me a, it's a Trillo amp, and it's made by Groove Tube. And I had to have that amp, and I still have it to this day. And huge Jerry Garcia fan. And I love the big guitars he played. Just really played those beautiful guitars.

Ed Gaudet: I went to the, they had an anniversary concert for Cornell 77. What was it; last year? 2023. And I took one of my daughters, there. It was at Barton Hall. It was epic. It was like, it was so amazing. But that's my Cornell story. Will, a pleasure, truly a pleasure to have you on the show today. Thank you so much for your time.

Will Conaway: Really appreciate it.

Ed Gaudet: This is Ed Gaudet from the Risk Never Sleeps Podcast. And if you're on the front lines protecting patient safety or delivering patient care, remember to stay vigilant because Risk Never Sleeps.



Censinet RiskOps™ Demo Request

Do you want to revolutionize the way your healthcare organization manages third-party and enterprise risk while also saving time, money, and increasing data security? It's time for RiskOps.

SCHEDULE DEMO

www.Censinet.com