

## Public Focus

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## Public Hospitals: Champions for Collaborative Governance

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Ith recent changes toward a value-based reimbursement system, public hospitals are looking beyond their walls to proactively address issues associated with social determinants of health in very diverse and vulnerable populations. Successful population health improvement involves collaboration with outside partners, including school systems, mental health organizations, police and fire agencies, and groups engaged in housing, poverty reduction, restaurants, public health protection, employers, local boards of health, federally qualified health centers, and other community development bodies.

Unfortunately, many of our nation's best safetynet hospitals and health systems are not well prepared, nor structured, for new models of governance that engage, guide, and govern this complex array of organizations and community health partners. Leadership teams and community leaders serving on public authority, district, and safety-net hospital governing bodies need to be encouraged and supported to forge new planning and cooperation structures that meet certain key principles and activities.

A recent summary of 25 years of experiences within the Foster McGaw Award program cites the importance of designing and using new "collaborative governance models." These lessons are summarized in nine key principles:<sup>2</sup>

- 1. Partnerships must be community-driven.
- 2. All stakeholders must be meaningfully engaged.
- 3. More can be achieved together than alone
- 4. Partner equity ensures sustainability.
- 5. Community health and well-being improvement is a shared core purpose.
- 6. Creative approaches are needed to tackle all-encompassing problems.
- 7. A "systems approach" ensures continuity.
- 8. Goals and progress reporting ensure accountability.
- 9. Governance must be structured to ensure sustainability.

Our public hospitals can also learn from the growing body of knowledge from Europe<sup>3</sup> and Canada<sup>4</sup> about governing public sector hospitals to accommodate an expanded role in community health that protects and promotes, not just restores, health.

Given that communities can vary widely in their makeup and population health needs, there is of course no single formula for how hospitals and public health departments should work together. But guidance and examples of success can be found at such organizations as the Commonwealth Center for Governance Studies Inc., the de Beaumont Foundation, the Institute for Healthcare Improvement, and the Robert

<sup>&</sup>lt;sup>1</sup> Harry J. Heiman and Samantha Artiga, "Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity," Kaiser Family Foundation, November 4, 2015.

<sup>&</sup>lt;sup>2</sup> AHA's Center for Healthcare Governance, Learnings on Governance from Partnerships that Improve Community Health: Lessons Learned from Foster G. McGaw Prize Recipients, Blue Ribbon Panel Report, February 2016.

<sup>&</sup>lt;sup>3</sup> Richard B. Saltman, Antonio Durán, Hans F.W. Dubois (editors), *Governing Public Hospitals: Reform Strategies and the Movement towards Institutional Autonomy*, The European Observatory on Health Systems and Policies, 2011.

James Rice, "The Promise—and Challenge of Collaborative Governance," The Governance Centre of Excellence, *Boards*, November 2013.

Wood Johnson Foundation. Industry associations such as the American Hospital Association and its Association for Community Health Improvement, the National Association of County and City Health Officials, and the Association of State and Territorial Health Officials also offer resources.<sup>5</sup>

The most widely accepted characteristics of successful partnerships are found in these 11 success factors:<sup>6</sup>

- Recommendation #1: To have enduring impact, partnerships focused on improving community health should include hospitals and public health departments as core partners but, over time, engage a broad range of other parties from the private and public sectors.
- Recommendation #2: Whenever possible, partnerships should be built on a foundation of pre-existing, trust-based relationships among some, if not all, of the principal founding partners. Other partners can and should be added as the organization becomes operational, but building and maintaining trust among all members is essential.
- Recommendation #3: In the context of their particular community's health needs, the capabilities of existing community organizations, and resource constraints, the parties that decide to establish a new partnership devoted to improving community health should adopt a statement of mission and goals that focuses on clearly defined, highpriority needs and will inspire community-wide interest, engagement, and support.
- Recommendation #4: For long-term success, partnerships need to have one or more "anchor institutions" with dedication to the partnership's mission and strong commitment to provide ongoing financial support for it.

 Recommendation #5: Partnerships focused on improving community health should have a designated body with a clearly defined charter that is empowered by the principal partners to set policy and provide strategic leadership for the partnership.

- Recommendation #6: Partnership leaders should strive to build a clear, mutual understanding of population health concepts, definitions, and principles among the partners, participants, and, in so far as possible, the community at large.
- Recommendation #7: To enable objective, evidence-based evaluation of a partnership's progress in achieving its mission and goals and fulfill its accountability to key stakeholders, the partnership's leadership must specify the community health measures they want to address, the particular objectives and targets they intend to achieve, and the metrics and tools they will use to track and monitor progress.
- Recommendation #8: All partnerships focused on improving community health should place priority on developing and disseminating "impact statements" that present an evidence-based picture of the effects the partnership's efforts are having in relation to the direct and indirect costs it is incurring.
- Recommendation #9: To enhance sustainability, all partnerships focused on community health improvement should develop a deliberate strategy for broadening and diversifying their sources of funding support.
- Recommendation #10: If they have not already done so, the governing boards of non-profit hospitals and health systems and the boards of local health departments should establish standing committees with oversight responsibility for their organization's engagement in examining community health needs, establishing priorities, and developing strategies for addressing them, including multi-sector collaboration focused on community health improvement.
- Recommendation #11: If they have not already done so, local, state, and federal agencies with responsibilities related to population health

<sup>&</sup>lt;sup>5</sup> Larry Gage and David Gross, Best Practices in Public Hospital Governance, National Public and Hospital Institute. May 2008.

<sup>&</sup>lt;sup>6</sup> Lawrence Prybil et al., *Improving Community Health through Hospital—Public Health Collaboration*, Commonwealth Center for Governance Studies, Inc., November 2014.

improvement and hospital and public health associations should adopt policy positions that promote the development of collaborative partnerships involving hospitals, public health departments, and other stakeholders focused on assessing and improving the health of the communities they serve.

As public hospitals work towards these efforts, the board should consider the following:

 Safety-net health system boards need to expand the depth and breadth of focus in their strategic and financial plans to embrace how they will engage with other community health organizations to

- forge and follow a "community health enhancement roadmap."
- Each board meeting should ensure that just as there are reports on the state of the organization's quality and financial performance, there should be one on progress being made in the "community health enhancement roadmap."
- Boards should link with their administrative and clinical leadership colleagues to create a culture that celebrates quarterly innovative and sustainable recognition initiatives for leaders and teams that advance their journey into population health and the collaborative governance of community health partnerships.

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