



Public Hospitals Need a Reset to Best Serve Their Communities

By Danielle Dyer, Partner, Guidehouse

A paced response to change has always been the hallmark of effective hospital and health system board leadership. However, in today's healthcare environment, change is giving way to volatility as the main constant, and nimbleness is even more critical. Insightful leaders can respond to change because they anticipate it coming, but volatility instantly challenges leaders to act quickly. This is especially true for public hospitals, on which vulnerable communities rely for their healthcare needs.

Drastic shifts in the demand for healthcare services amid workforce and supply chain disruptions and technology advances have created unprecedented levels of financial and operational volatility. Hospitals have been forced to respond by pivoting their strategic directions to the needs and demands of their communities. For many public hospital boards, leadership action is required to launch an enterprise-wide reset. This means reassessing current and future strategies to embrace more financially stable, operationally efficient, and effective care delivery models.

Proactive enterprise-wide risk and opportunity management are a must for board leaders moving forward. A successful reset strategy will enable organizations to excel in several areas that are key for public hospitals, including clinician engagement, health equity and access, and digital enablement.

Clinician Workforce and Engagement

Enterprise risks, including clinician burnout, staff resignations, and executive retirements now define many work environments. Defensive clinician recruitment, retention, and engagement strategies will not address today's challenges alone. It's time for leaders to play offense.

Fundamental changes in culture, care delivery models, and workforce development are vital. The challenges go beyond salary and benefits. The characteristics of that new work environment include a culture of innovation, team-based care, and listening to multi-generational expectations. Examples include: an employment structure

that offers a variety of work models like remote and shared jobs, a clinical staff with an innovative mix of skill sets and licensures, and a reboot of technology-enabled strategies to streamline workflows and increase productivity and retention.

Part of building, restoring, and revitalizing relationships with clinicians also means enabling them to focus on the work that matters most: delivery of patient care. Look for opportunities to eliminate barriers that prevent physicians from working at the top of their licenses. Automation and Al-based technologies can prompt medical assistants to ask questions that inform disease management, for instance, enabling clinicians to dig deeper at the point of care. The right technology, support, and processes can help keep physicians and other clinicians from feeling disenfranchised, give them time back in their day, and promote an atmosphere of high reliability.

→ Key Board Takeaways

- Get feedback on evolving models and sites of care.
- Learn what matters most to patients and clinicians and ensure your strategies address those expectations.
- Lean into technology and automation to create a more satisfying and efficient work environment.
- Hire an innovative mix of skill sets and licensures.

Further, public hospitals need a clinician strategy that is in sync with commercial market dynamics—emphasis on primary care, virtual care options, integrated behavioral care, digital sophistication, and patient and caregiver convenience and efficiency—and completely aligned with an organization's overarching objectives. Board leaders should assess digital care and innovation trends in their community in delivering behavioral health services, as well as opportunities to leverage advanced practitioners and other providers to better serve their patient populations.

Person-Centered Health

Two valuable impacts of the COVID-19 pandemic are patient's increased engagement in their own health and the exposure of long-running health inequities and disparities. Where and how a health system strategically engages with underserved populations leads to more opportunities to better coordinate care, resulting in enhanced access, experiences, and outcomes.

Building the infrastructure needed to focus on social determinants of health (SDOH), including understanding vulnerabilities in the community, establishing strong relationships with community partners, and evaluating technologies with health equity in mind, is key. Moreover, these strategies need to be embedded within health system workforce expectations to support their communities and ensure all stakeholders are satisfied.

It is very discouraging when a provider identifies an unmet need that impacts a person's health, such as food insecurity or housing instability, but lacks an easy way to respond to that need in the moment. As organizations determine the best way to support their communities, they may find they need a different mix of providers to achieve these goals. Adding more social workers and case managers to the team could help take pressure off overloaded medical professionals while giving patients the right support in the right setting, including in the home.

→ Key Board Takeaways

- Understand vulnerabilities in the community.
- Identify the services and skill sets required to address community health needs.
- Establish strong relationships with community partners.
- Evaluate technologies with health equity in mind.

Digitally Powered Health

For providers, digital health technologies and electronic health record (EHR) systems are tools, not saviors. Simply plugging them in will not automatically position organizations for success. Leaders need to be more purposeful in their digital care and health IT investments to ensure they improve efficiency and the patient experience while streamlining corporate and non-clinical services.

This means using technology to make life easier for patients and clinicians. Give patients greater control in managing their healthcare experience, examine opportunities to close gaps in functionality or service using existing tech, and give clinicians time back with solutions that reduce administrative burdens. Ease of use and interoperability are must-haves to improve access and engagement.

Health systems cannot rely on their enterprise's EHR platform to improve user and patient experiences. Functionality built into EHRs is inherently a commodity, available to all users of the platform. Beyond ensuring they fully use their EHR's capabilities to avoid falling behind, the application layer needs to be managed on top of the EHR to create real value for patients and providers. This requires adhering to a more agile and rapid lifecycle than the norm and deploying a digital strategy based on an objective understanding of the organization's opportunities.

→ Key Board Takeaways

- Invest in purposeful technology.
- Focus on ease of use.
- Ensure digital strategies enable overarching goals.
- Optimize use of technology and ensure measurable impact.

Resetting in 2023

Public hospital boards and senior leaders will need an effective enterprise-wide planning structure to support these changes. A key quality for boards and hospital leaders will be to overcome resistance to change and volatility fatigue to drive impact with pace. Turning volatility into opportunity is no small feat. But it's the only way for public hospitals to best serve their communities now and in the future.

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