

Anytown Community Hospital
Governance Self-Assessment
Summary Report



Our Mission

The mission of Anytown Community Hospital is to provide competent, innovative, and accessible emergency and acute care services for the residents of Anytown County, regardless of their background or ability to pay.

Anytown Community Hospital achieves this mission through reverence, integrity, compassion and excellence.

Our Vision

Anytown Community Hospital's vision is to be the community's preferred health care provider. We will achieve our vision through a culture of caring and compassion, and a continual quest toward excellence.

Anytown Community Hospital Board of Trustees

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Introduction and Overview

In March 2015 the Anytown Community Hospital (ACH or Anytown) Board of Trustees assessed its overall leadership performance and committee performance, individual trustees assessed their personal performance, and major Anytown issues and priorities were identified. Trustees rated the board’s performance in ten essential leadership areas, including:

- Mission, values and vision;
- Strategic direction;
- Leadership structure and processes;
- Quality and patient safety;
- Community relationships;
- Relationship with the CEO;
- Relationship with the medical staff;
- Financial leadership;
- Community health; and
- Organizational ethics.

The self-assessment was conducted using an online survey. Eighteen of ACH’s 22 trustees responded.

How the Survey Was Conducted

Trustees rated a variety of statements in the ten areas above, using a scale ranging from “level 5” to “level 1.” A “not sure” choice was also available for each statement. Mean scores for each statement were calculated using a five point scale (5=level 5, 1=level 1). No points were assigned to “not sure” ratings. In addition to rating specific statements, trustees also identified leadership improvement opportunities in each of the ten board leadership dimensions.

Following ratings of the board’s overall performance, trustees rated the performance of the board’s four primary committees: the Executive Committee, Finance Committee, Nominating and Governance Committee, and Quality Committee. Trustees also assessed their personal performance and provided insights about major issues and priorities for the ACH board, board strengths and weaknesses, and significant trends the board must be prepared to address in the next year.

Reviewing This Report

The individual ratings of self-assessment criteria in each of ten leadership areas are depicted in this report

in stacked bar graphs. The criteria are presented priority order from highest to lowest level ratings. To facilitate the identification of areas that may require governance and/or management attention, each graph depicts the number of director responses to each statement. Responses are color coded, with “level 5” responses appearing in dark green, “level 4” in light green, “level 3” in yellow, “level 2” in orange, “level 1” in red, and “not sure” in white.

Graphs also depict trustees’ assessment of ACH’s committee performance, as well as trustees’ assessment of their personal performance and individual suggestions for enhancing trustee effectiveness.

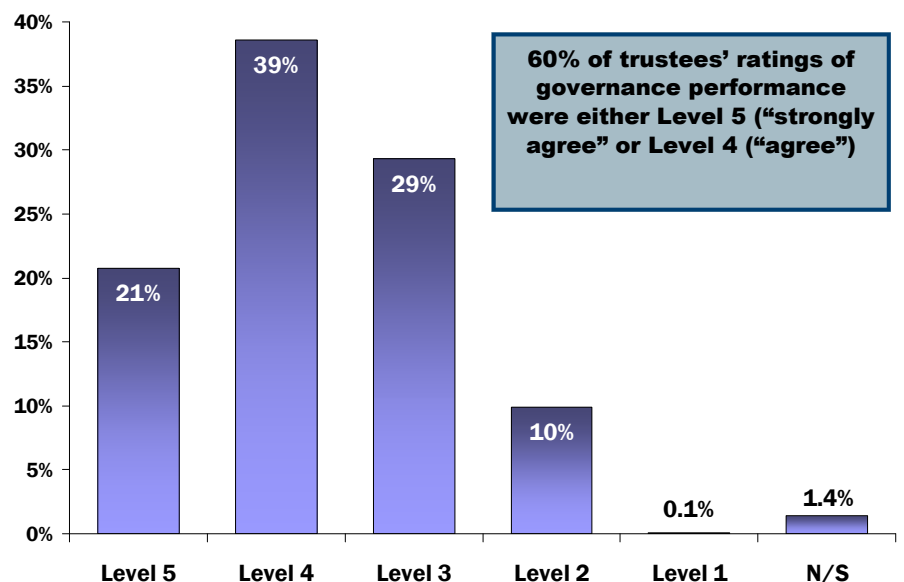
A summary of trustee suggestions for each leadership area appear in each section, as do suggestions for improving ACH’s committee performance and enhancing trustee effectiveness. Verbatim, unedited responses to these questions appear on pages 26-34. The survey criteria is also included on pages 35-39.

Overall Ratings and Leadership Gaps

Trustees generally rated Anytown Community Hospital’s board performance positively, but also perceive room for improvement. Figure 1 shows the total percentage of ratings in each of the levels. The majority (60 percent) of the ratings indicate that trustees either “strongly agree” or “generally agree” with the positive statements rated about Anytown Community Hospital Board’s performance. The remaining portion of the responses are divided between “level 3” and “level 2” response, with virtually no “level 1” responses and very few “not sure” ratings.

Figure 2 shows the overall mean scores for each of the 10 leadership areas measured on the board self-assessment. The mean scores

Figure 1: Overall of Satisfaction With Governing Performance



Rating Methodology

Although the definition provided for “level 5” and “level 1” ratings varied slightly depending on the question areas, in general the scale was defined as the following:

- **Level 5:** I strongly agree with this statement. We always practice this as a part of our governance. Our performance in this area is outstanding.
- **Level 4:** I generally agree with this statement. We usually practice this as a part of our governance, but not always. We perform well in this area.
- **Level 3:** I somewhat agree with this statement. We often practice this in our governance, but we are not consistent. We perform fairly well in this area.
- **Level 2:** I somewhat disagree with this statement. We inconsistently practice this as a part of our governance. We do not perform well in this area.
- **Level 1:** I disagree with this statement. We never practice this as a part of our governance. We perform very poorly in this area.
- **N/S:** Not sure. I do not have enough information to make determination about our performance in this area.

were calculated by taking the average mean score of all individual criteria in that section. The area between the outermost line and the lines representing the 2006 self-assessment score depict the “performance gap,” or opportunities for leadership improvement. A number representing the mean score appears below the plotted score for each area rated.

The ACH board generally rated its performance positively in each area, but trustee responses indicate that there is room for improvement in each of the ten dimensions. The board rated its relationship with the CEO and organizational ethics the highest, indicating that trustees either “generally agree” or “strongly agree” with statements about board performance in those areas. Trustees “generally agree” with statements about the board’s financial leadership, and fulfillment of its mission, values and vision. Trustees rated the board’s relationship with the medical staff and quality and patient safety slightly lower, followed by community relationships. Board members indicated that strategic direction and leadership structure and governance process are the two areas with the greatest need for improvement.

Leadership Assets

The highest-rated leadership responsibility areas, based on a mean score out of five, include:

- The board and CEO work together with a sense of purpose (4.4);

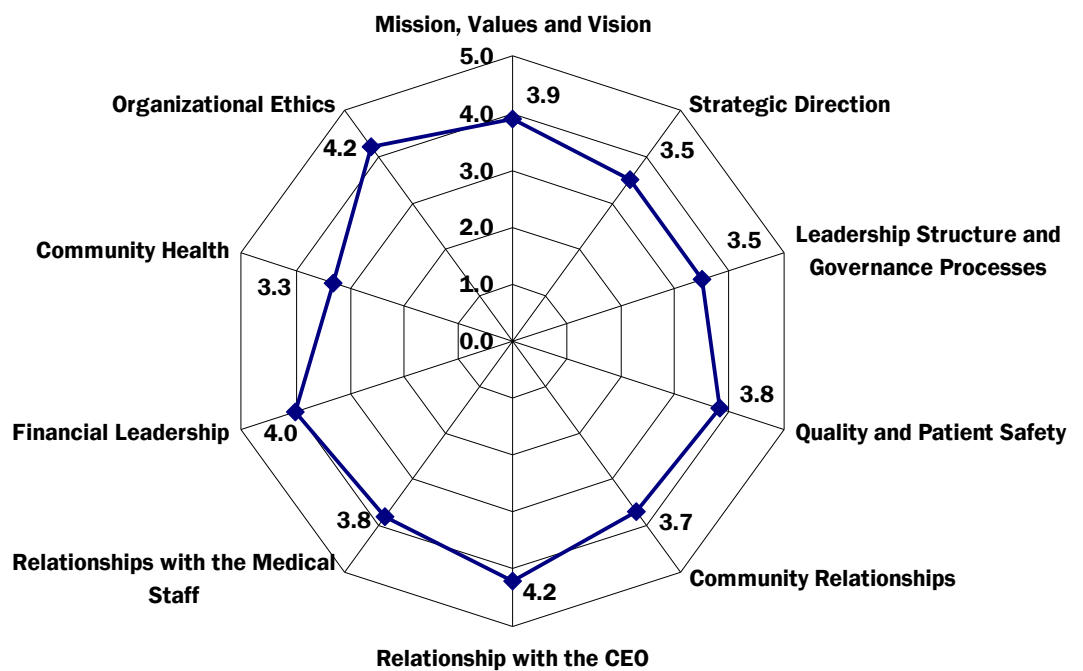
- The board ensures compliance with applicable state, federal and local regulatory and statutory requirements (4.4);
- The board evaluates and compensates the CEO using pre-defined expectations and defined performance targets tied to achievement of the mission, vision and strategic objectives (4.3);
- The board understands the implications of public perceptions on future success (4.3);
- Working relationships among trustees are good (4.3);
- The board and CEO have clear, mutually agreed-upon expectations of one another (4.2); and
- Quality improvement is a core organizational strategy (4.2).

Leadership Liabilities

The lowest-rated leadership responsibility areas, based on a mean score out of five, include:

- At least 75 percent of the board’s meeting time is spent focusing on strategic issues (2.6);
- The board focuses the majority of its time on strategic thinking and strategic leadership rather than strategic plans (2.7);
- The board has a process for improving individual trustee effectiveness when non-performance becomes a governance issue (2.8);
- The board has a clear and consensus-driven understanding of the most important community health needs and issues (3.1);
- A governance development process is in place that identifies governance issues, determines educational needs, and manages the board self-assessment process (3.2); and
- Trustees have a clear and comprehensive understanding of the changing health care environment (local, regional and national) and its effects on the hospital (3.2).

Figure 2: Board Performance Overview: Leadership Gaps



Issues, Priorities, Strengths and Weaknesses

Anytown Community Hospital trustees identified a number of priorities and issues for the next year and the future, as well as organizational strengths and weaknesses and key issues the organization will be facing in the upcoming year.

Major issues and priorities identified include:

- Continue to focus on implementing the existing strategic plan;
- Ensure board and organization-wide focus on quality and patient safety;
- Secure capital funding for long-term facility investments; and
- Strengthen board operations and processes to ensure an emphasis on long-term strategic issues.

Organizational strengths identified by trustees include:

- Diversity of board members' experience, knowledge and backgrounds;
- Dedication to Anytown Community Hospital;
- Business knowledge, experience and skills necessary to effectively lead ACH; and
- Group cohesiveness.

Organizational weaknesses identified by trustees include:

- Trustee complacency and lack of involvement in board and hospital activities;
- Lack of board diversity and full community representation;
- Too much emphasis on past and current issues, rather than a long-term strategic focus;
- Need for increased education about current issues, opportunities and challenges; and
- Lack of open, honest, thorough dialogue.

Board members believe there are four key issues Anytown Community Hospital will face in the next year, including:

- Declining reimbursement and state and federal support;
- The trend toward consumerism combined with increasing local competition;
- A need for improved employee morale and the development of a positive, accountable workplace environment; and
- A need for improved relationships with physicians.

Assessment of ACH Board Performance



Mission, Values and Vision

%of Total Responses	
Level 5	19%
Level 4	56%
Level 3	25%
Level 2	0%
Level 1	0%
Not Sure	0%

Highlights...

- ▶ Clear, focused, relevant mission statement
- ▶ Room for improvement in trustee leadership in ensuring the achievement of the ACH mission, values and vision

AHC board members rated their satisfaction with two leadership factors relating to effectively carrying out Anytown Community Hospital’s mission, values and vision (*see figure 3, below*).

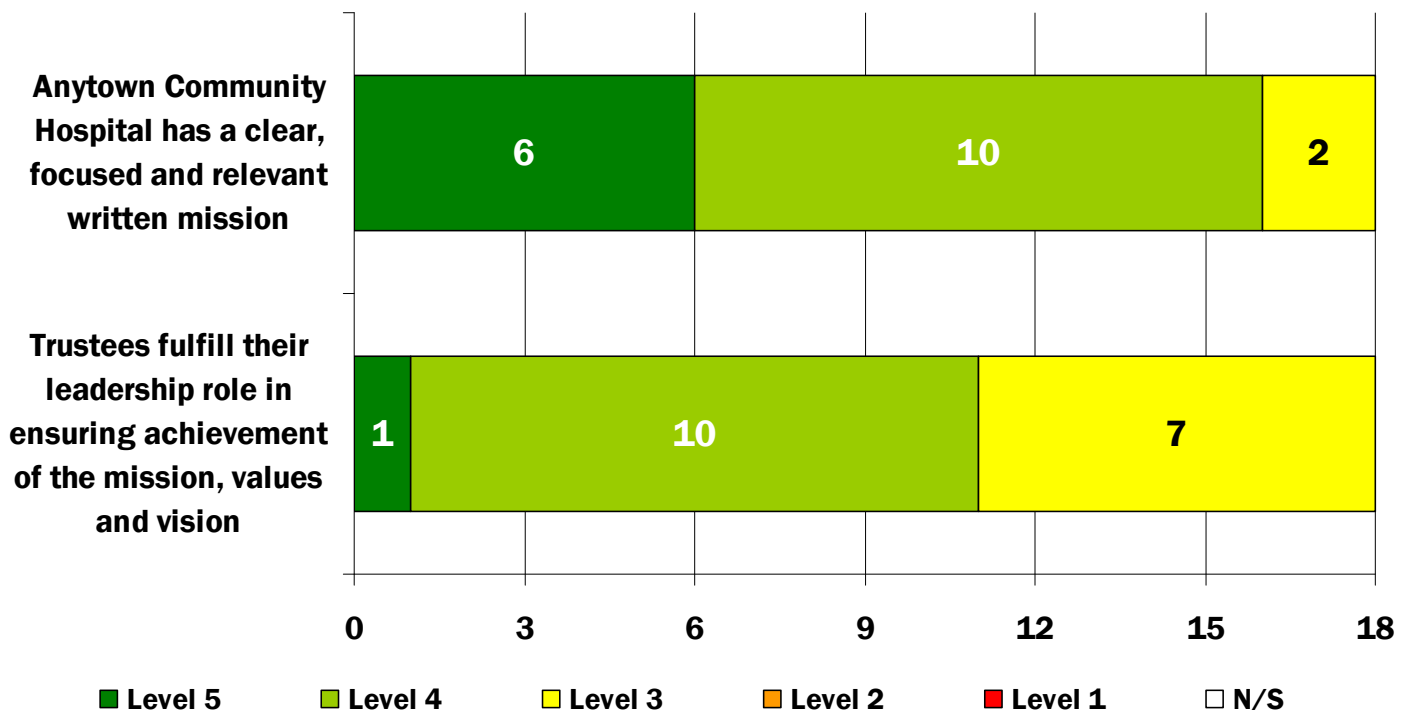
Three-quarters of the trustees either generally agree or strongly agree with the statements about the board’s performance in the area of mission, values and vision. Board members strongly agree that the hospital has a clear, focused and relevant written mission statement. Trustees also generally agree that they fulfill their leadership role in ensuring achievement of the mission, values and vision, although about one-third of the trustees believe that there is room for improvement.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure the board effectively carries out ACH’s mission, values and vision include:

- Track progress in achieving the mission, values and vision and celebrate successes;
- Keep the mission, values and vision in the forefront when making decisions;
- Ensure trustee independence and commitment to the mission, values and vision; and
- Use board leadership to set the tone throughout the organization and the community, emphasizing the importance of the mission, values and vision.

Figure 3: Effectively Carrying Out the Mission, Values and Vision (*highest to lowest ratings*)



Strategic Direction

Highlights...

- ▶ Lack of consensus about board performance in this area
- ▶ Trustees generally receive information that enables a clear understanding of the issues
- ▶ Need for greater understanding of community health needs
- ▶ Lack of focus on strategic thinking and leadership

%of Total Responses	
Level 5	11%
Level 4	37%
Level 3	40%
Level 2	11%
Level 1	0%
Not Sure	1%

ACH board members rated their satisfaction with six leadership factors relating to Anytown Community Hospital’s strategic direction (see figure 4, below).

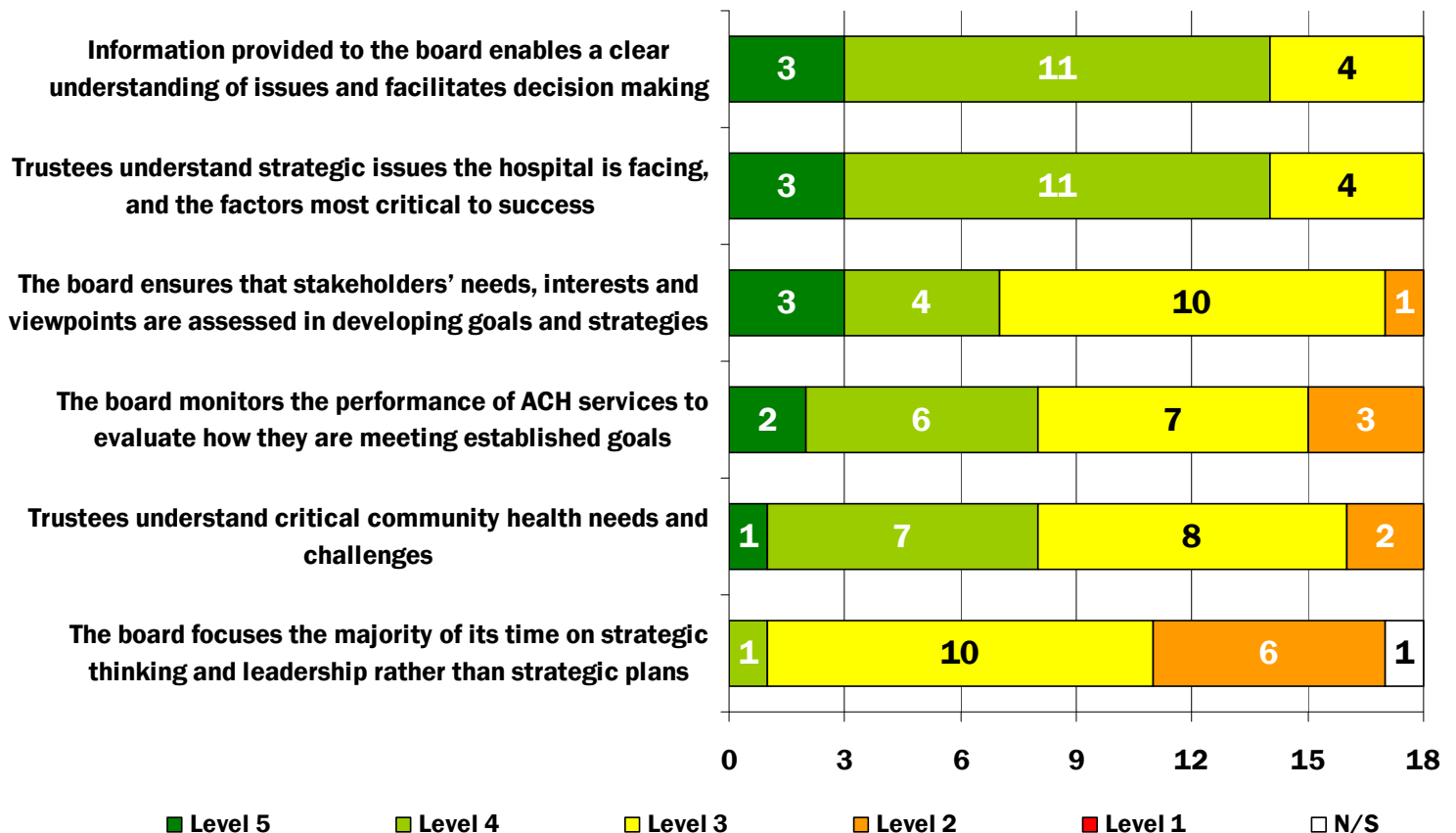
Trustees generally agree that information provided enables clear understanding of the issues and that they understand the issues the hospital is facing. At the same time, trustees are uncertain about whether the board ensures that stakeholders’ needs and interests are assessed. Trustees also expressed a greater need to monitor the performance of ACH services, understand critical community health needs and challenges, and spend the majority of its time on strategic thinking and leadership.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure the board provides effective leadership in strategic direction include:

- Regularly update the board on strategic progress and necessary changes to the strategic direction; and
- Increase board understanding of the community’s needs and upcoming issues and challenges facing ACH.

Figure 4: Leadership in Strategic Direction (highest to lowest ratings)



Leadership Structure and Governance Processes

Highlights...

- ▶ Roles and responsibilities are clearly defined
- ▶ Trustees work well together and generally communicate effectively
- ▶ Room for improvement in trustee effectiveness
- ▶ Need for board meeting focus on strategic issues
- ▶ Need for greater education and governance development

%of Total Responses	
Level 5	16%
Level 4	36%
Level 3	33%
Level 2	13%
Level 1	0%
Not Sure	2%

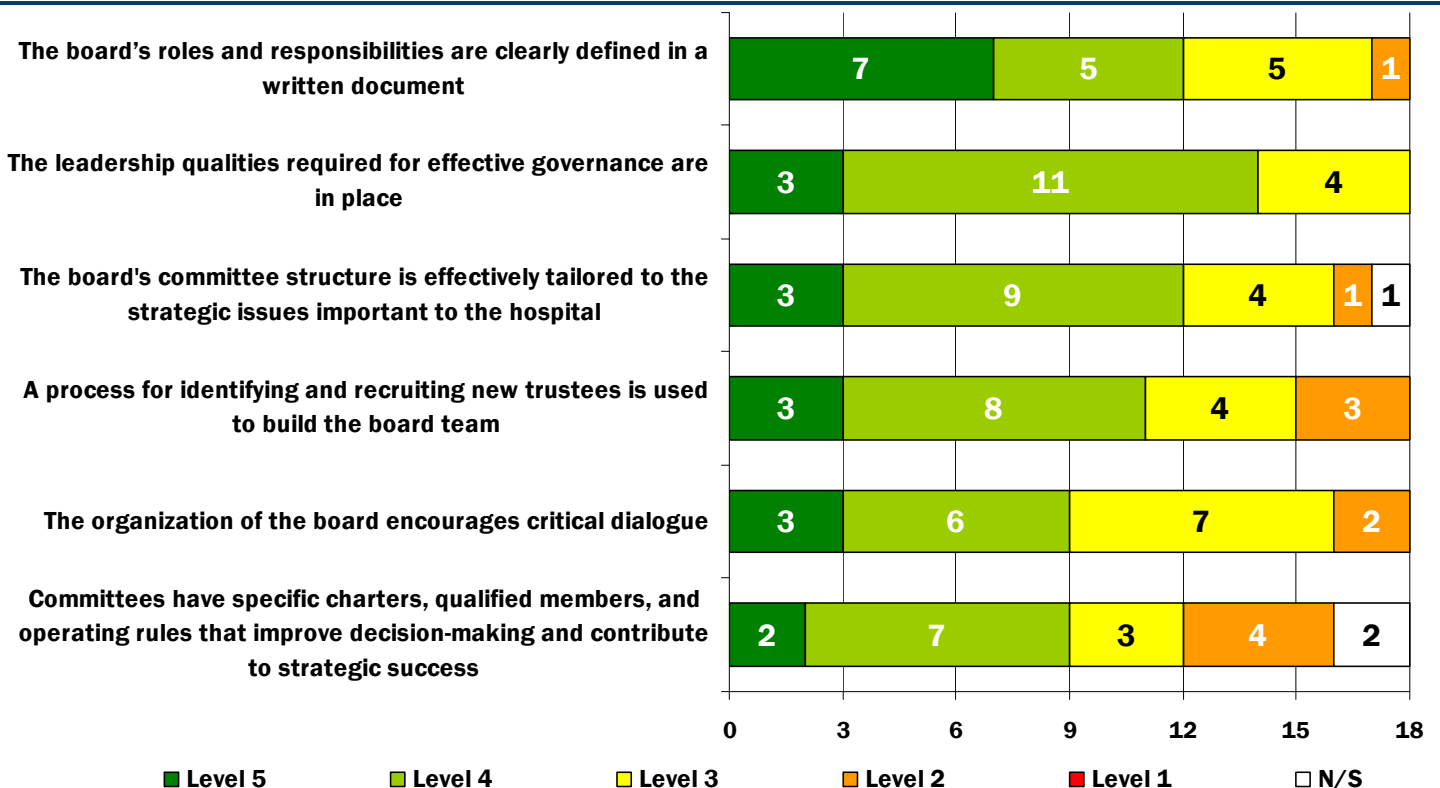
A HC board members rated their satisfaction in four sub-sections of leadership structure and governance processes, rating a total of twenty leadership factors (see figures 5-8).

Trustee responses indicate some room for improvement in the board’s overall leadership structure and governance processes, with most trustees generally or somewhat agreeing with statements about the board’s performance. The majority of trustees generally agree that the board’s roles and responsibilities are clearly defined, and

that the leadership qualities required for effective governance are in place.

Responses demonstrate that there is potential to improve the board’s organization to better stimulate and encourage critical dialogue. There is also room for improving committee organization and structure, ensuring specific charters and operating rules are in place and that qualified members serve on the committees.

Figure 5: Board Leadership Structure and Governance Processes: Board and Committee Responsibilities and Structure (highest to lowest ratings)



Trustees believe that there is some room for improving meeting efficiency, including using trustee time more efficiently and ensuring meeting agendas provide adequate time to discuss and act on significant strategic issues. There is some uncertainty about whether the board resolves problems effectively even when the solutions are uncomfortable to implement, and whether there is a process for addressing non-performance by a trustee. In the area of board meetings and trustee effectiveness, trustees are most concerned that not enough of the board’s meeting time is spent focusing on strategic issues.

Board members are divided about trustees’ knowledge and educational and meeting materials, with opportunities for improvement in the timeliness and relevance of meeting materials and background information. Some trustees seek more well thought-out strategic options from management prior to defining a strategic course, and there is a general sense of a need for greater education and understanding of the changing health care environment and its effects on Anytown Community Hospital.

Trustees generally agree that board relationships and communication are strong, with positive working relationships among trustees. Most trustees agree that they have a voice in governance decisions, but there is some room for improvement. Trustees also expressed room for improvement in trustees’ openness with their thoughts and feelings.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure the board effectively carries out ACH’s mission, values and vision include:

- Need for increased board dialogue, trustee involvement and commitment to the board;
- Structure board meetings to focus on long-term, strategic issues; and
- Provide continual board education about the current environment, issues and challenges.

Figure 6: Board Leadership Structure and Governance Processes: Board Meetings and Trustee Effectiveness (highest to lowest ratings)

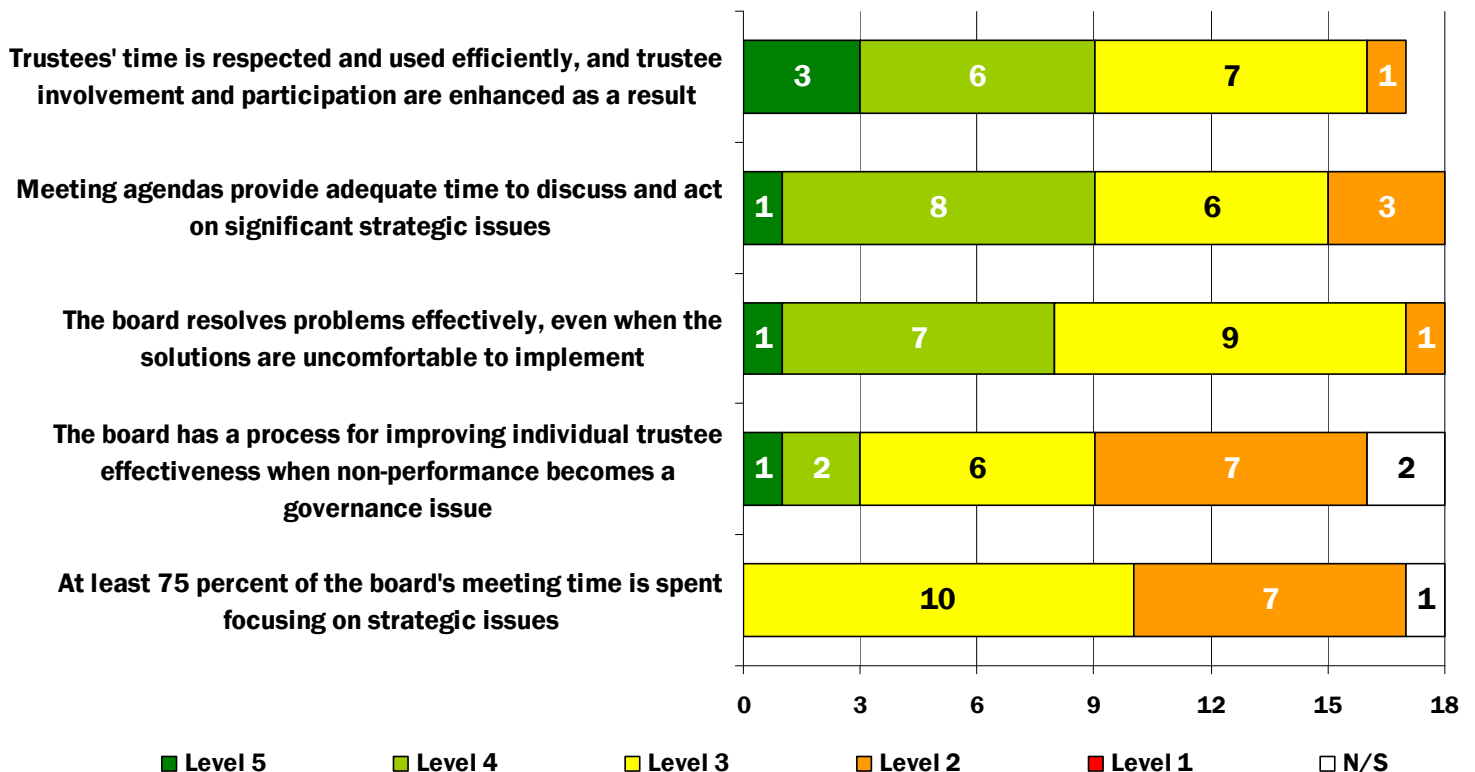


Figure 7: Board Leadership Structure and Governance Processes: Trustee Knowledge and Educational and Meeting Materials (highest to lowest ratings)

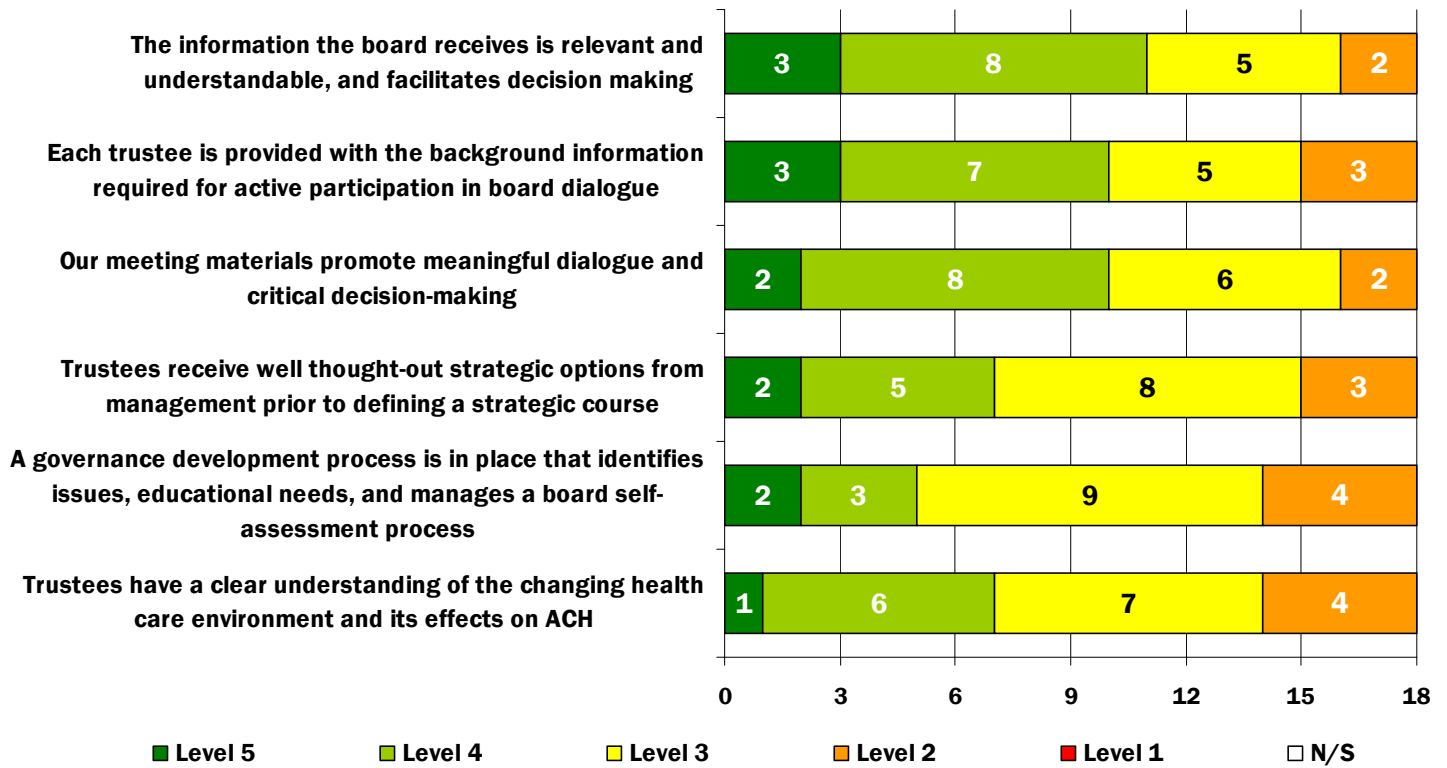
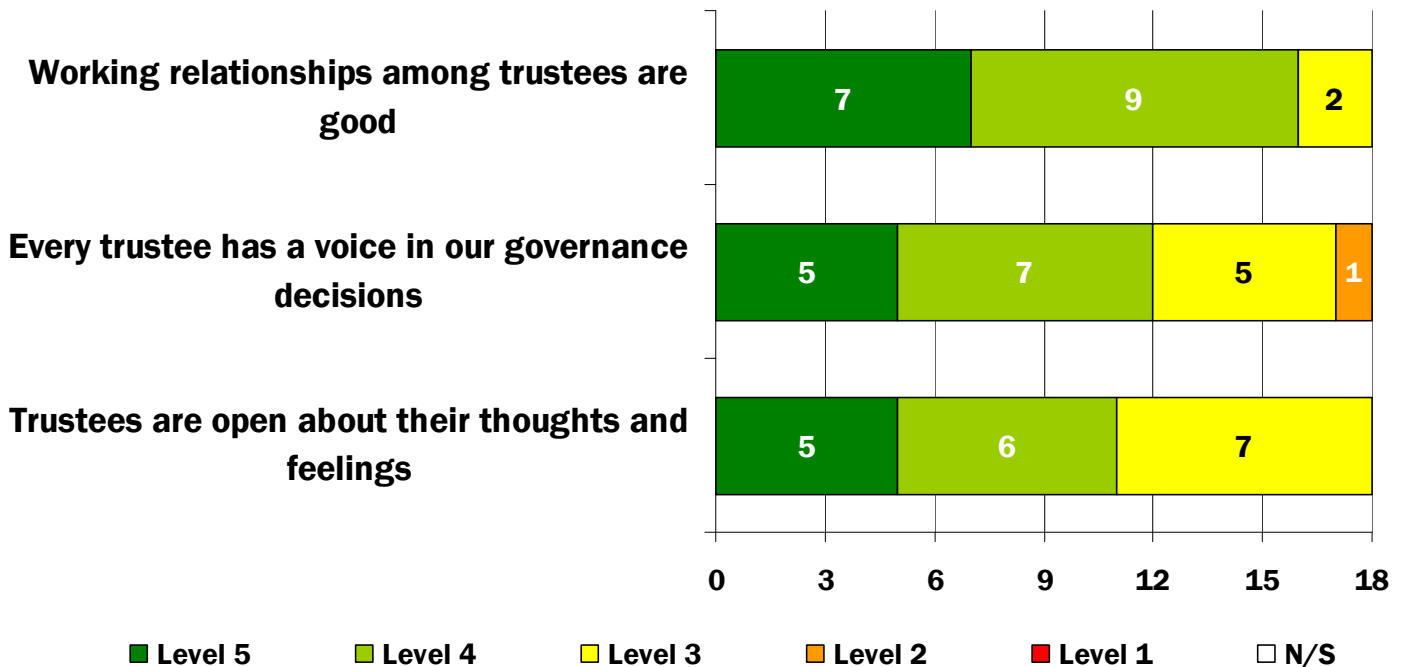


Figure 8: Board Leadership Structure and Governance Processes: Board Relationships and Communication (highest to lowest ratings)



Quality and Patient Safety

%of Total Responses	
Level 5	29%
Level 4	32%
Level 3	24%
Level 2	12%
Level 1	0%
Not Sure	3%

Highlights...

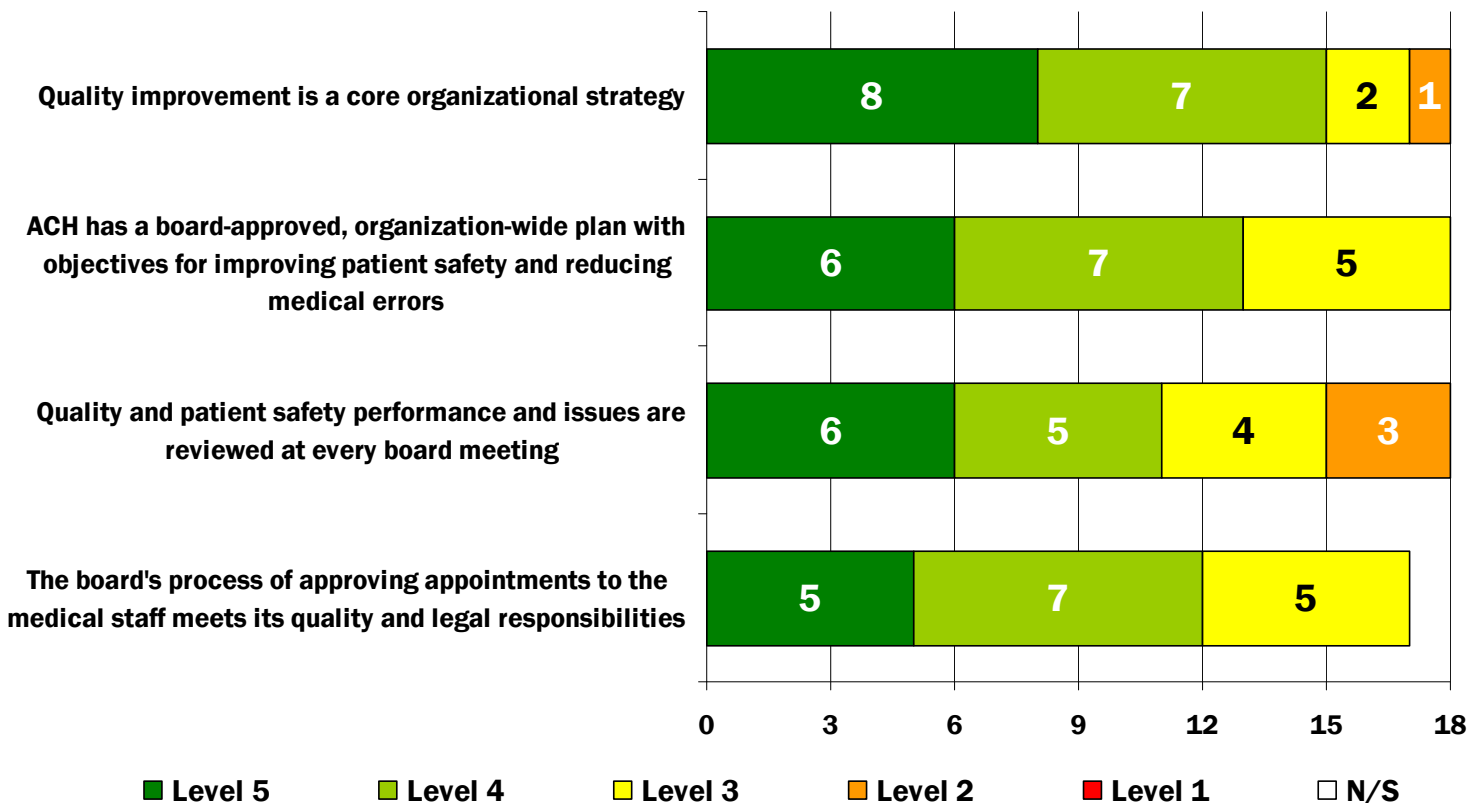
- ▶ General agreement that quality improvement is a core ACH strategy
- ▶ Room for greater board emphasis on quality and patient safety
- ▶ Need for clearly defined and measurable quality targets and a quality improvement process

A HC board members rated their satisfaction with eight leadership factors relating to Anytown Community Hospital’s quality and patient safety (see figures 9–10).

Although trustees generally agree that quality improvement is a core organizational strategy, board members lack consensus about the board’s overall performance in improving quality and patient safety

at ACH. Most trustees agree that the board has an organization-wide plan with objectives for improving patient safety and reducing medical errors, but trustees are not confident that quality and patient safety performance and issues are reviewed at every board meeting. There is also some uncertainty about whether the board’s process of approving appointments to the medical staff meet its quality and legal responsibilities.

Figure 9: Quality and Patient Safety: Top Rated Areas (highest to lowest ratings)



Trustees do not feel that the hospital has a board approved definition of quality, and there is room for improvement in ensuring that the CEO’s performance objectives are based on measurable and achievable quality goals.

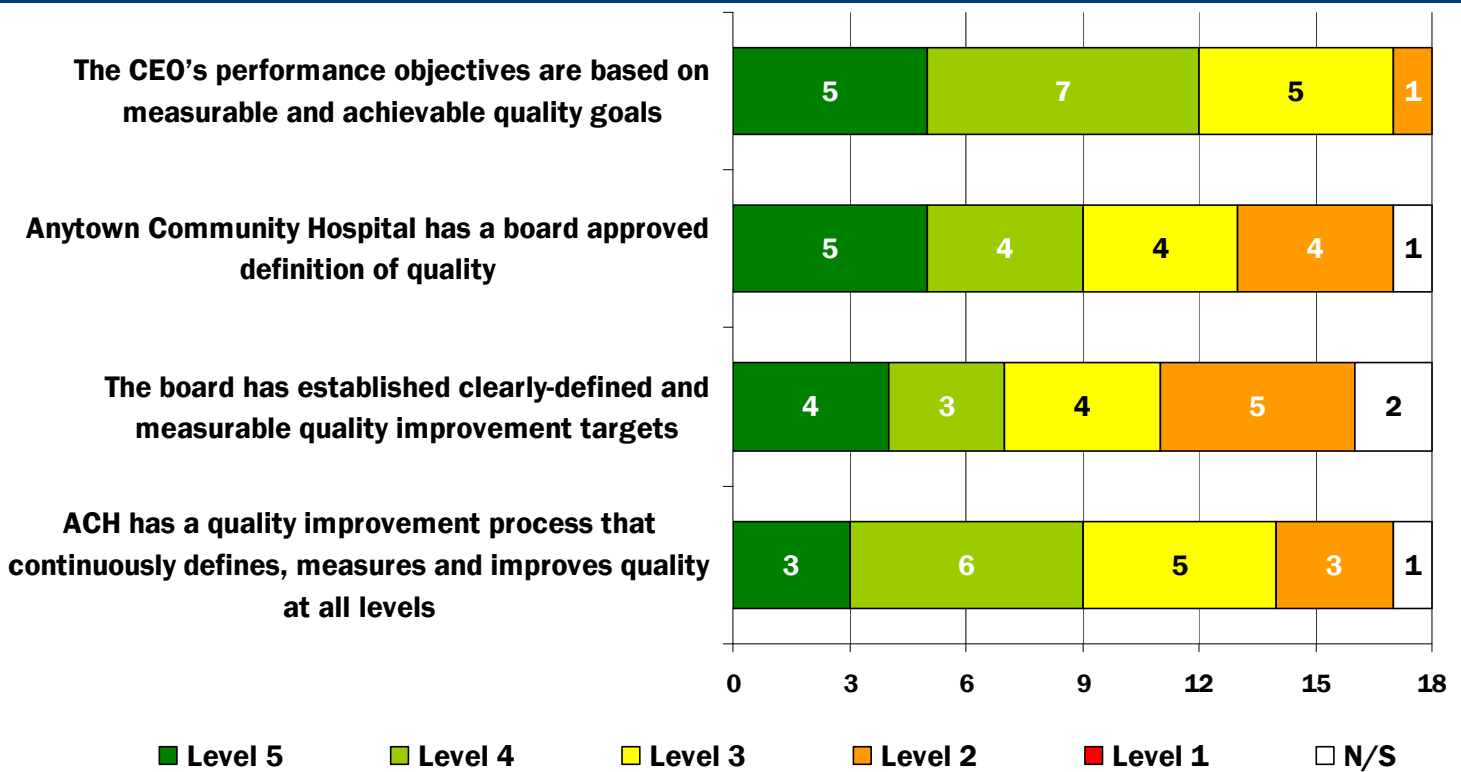
Board member responses also indicate a need for more clearly-defined and measurable quality improvement targets, and for a quality improvement process that continuously defines, measures and improves quality at all levels within Anytown Community Hospital.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure the Anytown Community Hospital provides safe and high quality care include:

- Continue with recent efforts to address quality improvement; and
- Work closely with administration to identify shortcomings and develop an action plan to improve quality.

Figure 10: Quality and Patient Safety: Lower Rated Areas (highest to lowest ratings)



Community Relationships

%of Total Responses	
Level 5	15%
Level 4	44%
Level 3	30%
Level 2	9%
Level 1	0%
Not Sure	2%

Highlights...

- ▶ Trustees generally understand the implications of public perceptions on ACH’s future success
- ▶ Desire for more regular measurement of the public’s perception of ACH
- ▶ Room for increased communication of ACH plans and priorities to key stakeholders

A HC board members rated their satisfaction with three leadership factors relating to Anytown Community Hospital’s community relationships (see figure 11, below).

Trustees generally agree that the board understands the implications of public perceptions on future success, but the board lacks consensus about whether the hospital regularly measures the public’s perceptions of ACH services, community contribution, perceived trust, economic impact, and overall value to the community. Trustees also see room for improvement in ensuring

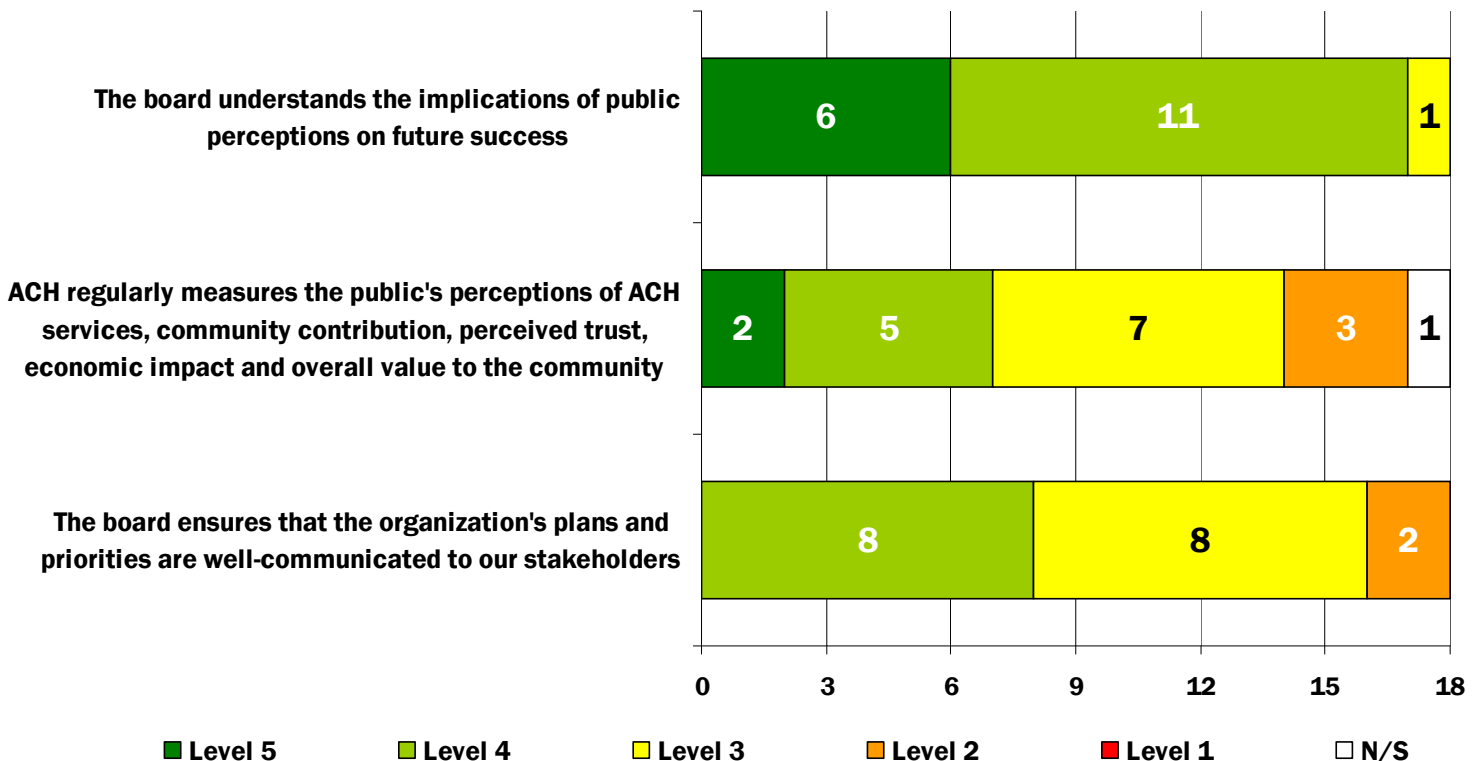
that the hospital’s plans and priorities are well-communicated to key stakeholders.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure positive community relationships include:

- Build public trust and a positive community reputation; and
- Seek community viewpoints and develop positive dialogue with the community.

Figure 11: Ensuring Positive Community Relationships (highest to lowest ratings)



Relationship with the CEO

Highlights...

- ▶ Overall, trustees are satisfied with their relationship with the CEO
- ▶ The board and CEO work together with a sense of purpose
- ▶ Board and CEO expectations are generally clear
- ▶ Need for increased CEO communication when difficult problems arise

%of Total Responses	
Level 5	39%
Level 4	43%
Level 3	17%
Level 2	0%
Level 1	0%
Not Sure	1%

A HC board members rated their satisfaction with four leadership factors relating to the board’s relationship with the CEO (see figure 12, below).

Trustees are generally satisfied with their relationship with the CEO, and board members agree that they work together with the CEO with a sense of purpose. Trustees also generally agree that the board evaluates and compensates the CEO using pre-defined expectations and performance targets tied to the mission, vision and strategic objectives, and that the board and CEO have clear, mutually agreed-upon expectations of one another. At the same time, some board members are uncertain about whether the board

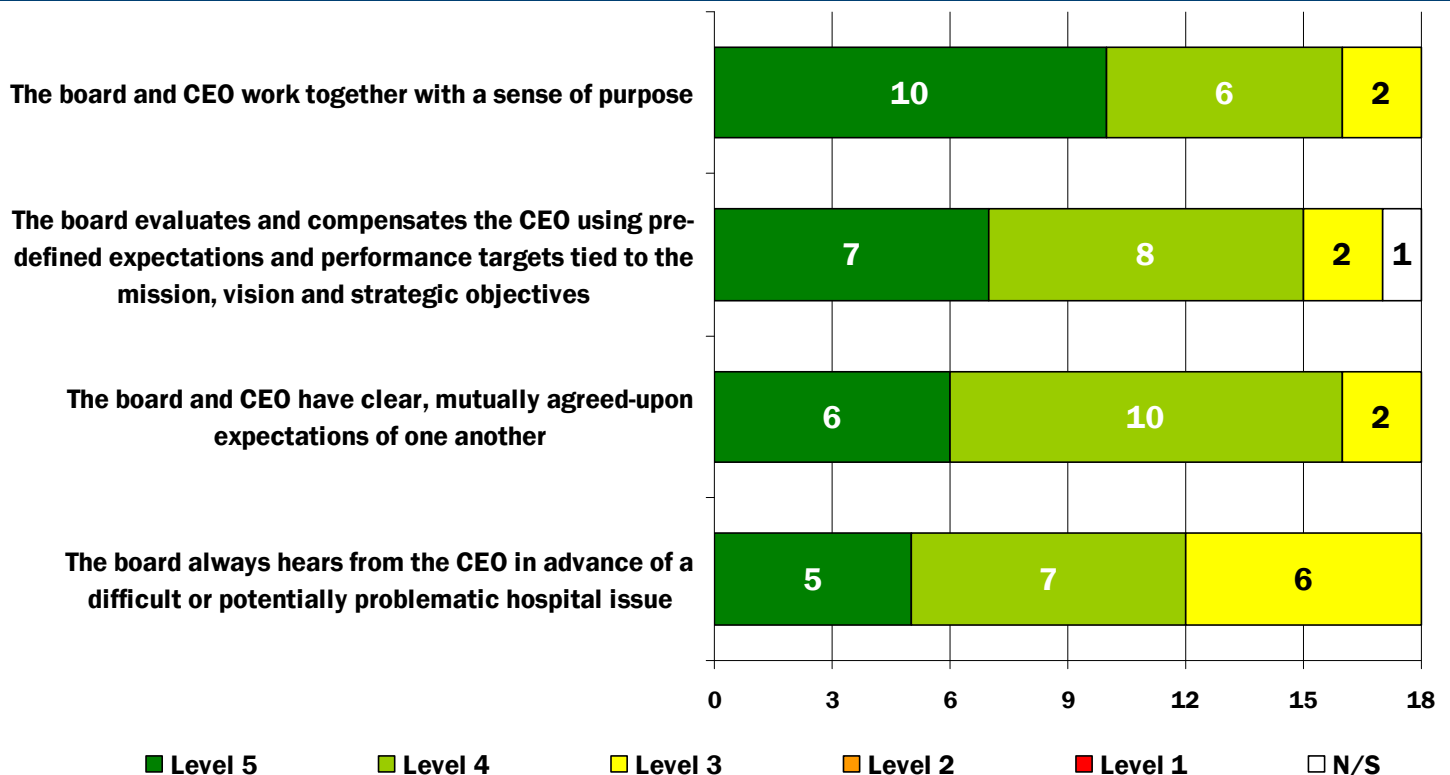
always hears from the CEO in advance of a difficult or problematic issue at Anytown Community Hospital.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure a strong relationship with the CEO include:

- CEO has great communication skills and listens well;
- CEO communicates well with board members between meetings, when appropriate; and
- No need for improvement.

Figure 12: Ensuring a Strong Relationship with the CEO (highest to lowest ratings)



Relationship with the Medical Staff

%of Total Responses	
Level 5	14%
Level 4	54%
Level 3	28%
Level 2	3%
Level 1	1%
Not Sure	0%

Highlights...

- ▶ Physician leaders generally participate in decision-making; however, need to ensure physician interests are continually addressed
- ▶ Room for clarification of the Medical Executive Committee’s role
- ▶ Uncertainty about the effectiveness of board-medical staff communication

A HC board members rated their satisfaction with four leadership factors relating to the board’s relationship with the medical staff (see figure 13, below).

Overall, trustees tend to generally agree, but not strongly agree, with statements about the board’s relationship with the medical staff. Most trustees generally agree that physician leaders participate in decision-making at the board and committee level, and are actively involved in important decisions. Board members also generally agree that they understand the roles and responsibilities of the Medical Executive Committee. Trustees are less certain that the

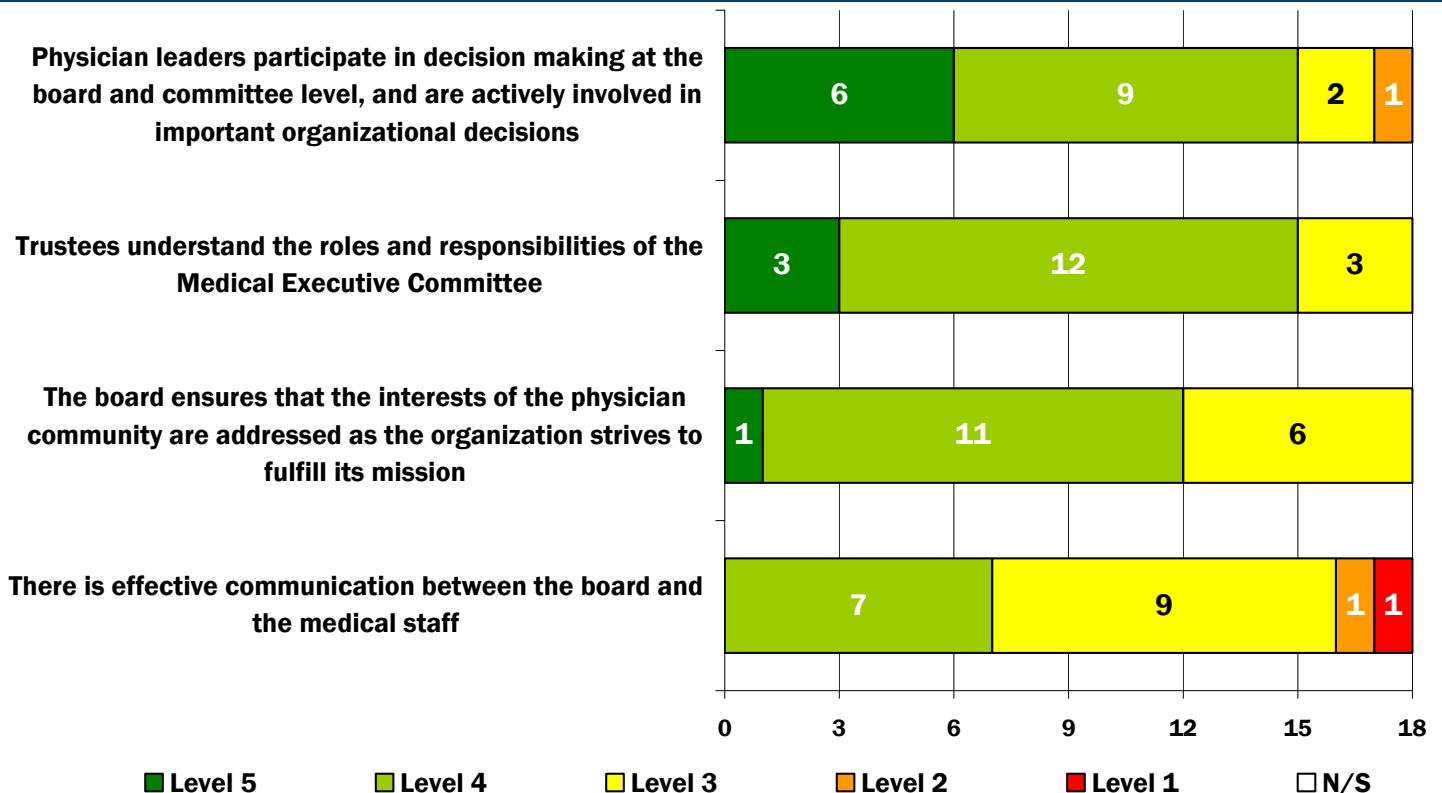
interests of the physician community are addressed, and there is clear room for improvement in communication between the board and the medical staff.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure a strong relationship with the medical staff include:

- Ensure processes for consistent communication with the medical staff through the Medical Executive Committee, as well as other avenues; and
- Continue with current efforts.

Figure 13: Ensuring a Strong Relationship with the Medical Staff (highest to lowest ratings)



Financial Leadership

%of Total Responses	
Level 5	33%
Level 4	41%
Level 3	19%
Level 2	7%
Level 1	0%
Not Sure	0%

Highlights...

- ▶ The board generally carries out its fiduciary responsibility
- ▶ Some room for improvement in ensuring financial reports are easily understandable
- ▶ Lack of consensus regarding trustees’ comfort level with asking questions about financial issues

A HC board members rated their satisfaction with three leadership factors relating to the board’s financial leadership (see figure 14, below).

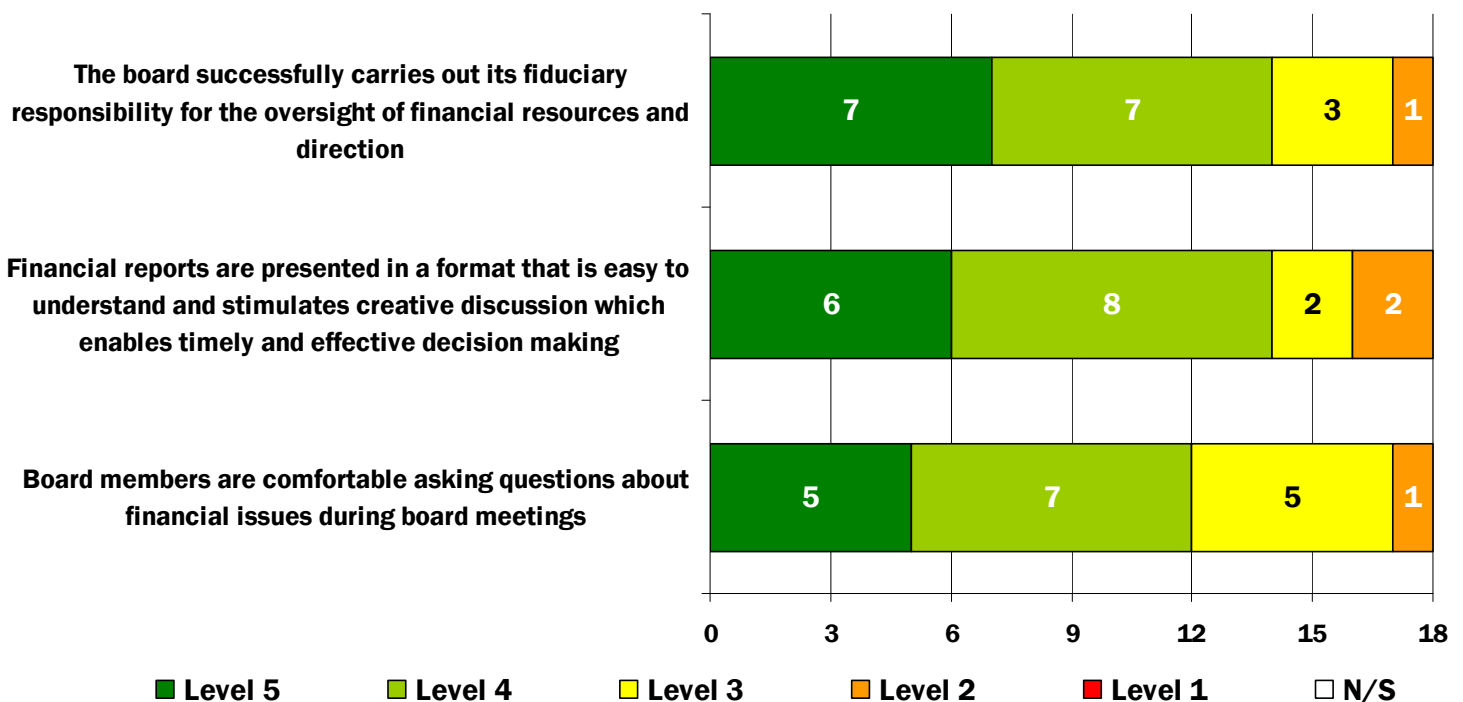
The majority of board members are confident that the board carries out its fiduciary responsibility for the oversight of financial resources and direction at Anytown Community Hospital. Trustees also generally agree that financial reports are presented in an easy-to-understand format that stimulates discussion and decision-making. At the same time, there is some uncertainty about whether board members are comfortable asking questions about financial issues during board meetings.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure strong financial leadership include:

- Present financial reports in “layman’s” terms, with updates on the success of specific services and programs; and
- Overall, financial leadership is strong; little room for improvement.

Figure 14: Ensuring Strong Financial Leadership (highest to lowest ratings)



Community Health

Highlights...

- ▶ Need for greater focus on community health
- ▶ Room for increased ACH efforts in jointly advocating with other community organizations to address community health
- ▶ Lack of a clear understanding of the most important community health needs and issues

%of Total Responses	
Level 5	5%
Level 4	36%
Level 3	39%
Level 2	17%
Level 1	0%
Not Sure	3%

A HC board members rated their satisfaction with two leadership factors relating to the board’s role in ensuring a healthy community (see figure 15, below).

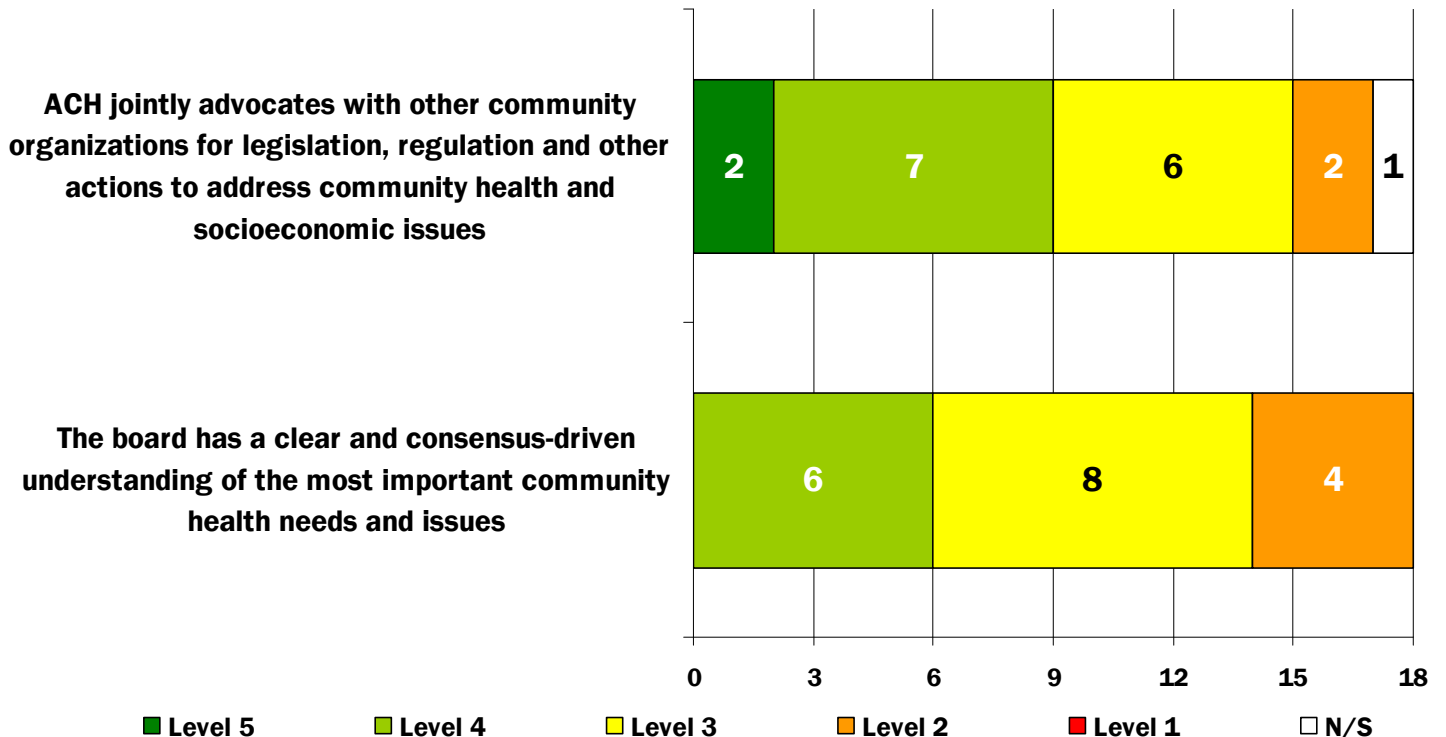
Trustees lack consensus about the board’s overall performance in ensuring community health. Half of the responding trustees agree or generally agree that ACH jointly advocates with other community organizations for legislation, regulation, and other actions related to community health, while the other half are uncertain about the board’s performance. Trustees responses also demonstrate that the board currently lacks a clear and consensus-driven understanding of the most important community health needs and issues.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure a health community include:

- Increased board understanding of community issues and board involvement in community dialogue; and
- Assess community viewpoints to understand why patients go elsewhere for medical care.

Figure 15: Ensuring Community Health (highest to lowest ratings)



Organizational Ethics

Highlights...

- ▶ Trustees agree that the ACH board is ethical
- ▶ The board ensures compliance with state and federal requirements
- ▶ Some uncertainty about whether the board ensures its ethical principles are provided to all individuals that interact with ACH

%of Total Responses	
Level 5	47%
Level 4	31%
Level 3	19%
Level 2	3%
Level 1	0%
Not Sure	0%

A HC board members rated their satisfaction with two leadership factors relating to the board’s role in ensuring organizational ethics (see figure 16, below).

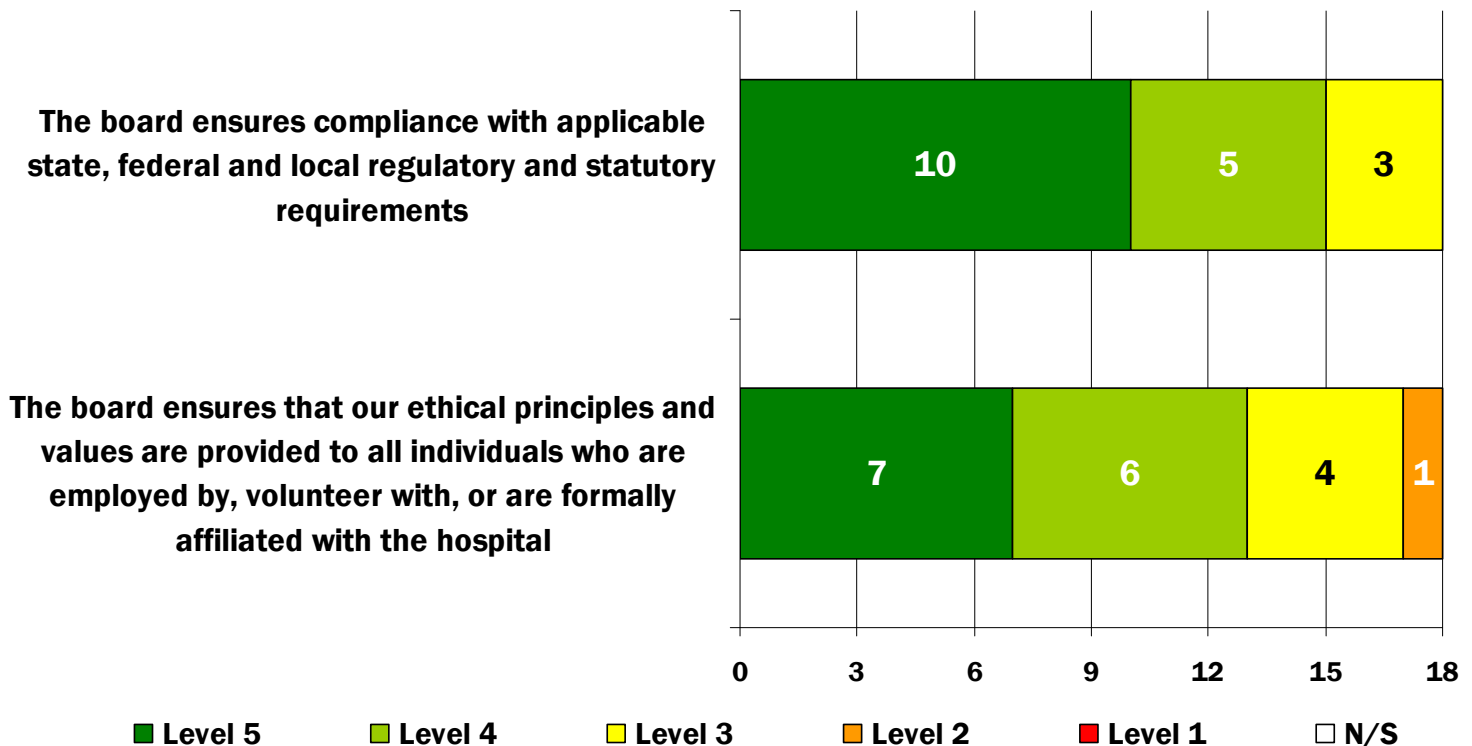
The majority of trustees agree or generally agree that the board is ethical. Trustees believe that the board ensures compliance with applicable state, federal and local regulatory and statutory requirements. Trustees also generally agree that the board ensures its ethical principles and values are provided to individuals employed by or volunteering at ACH, although there is some room for improvement in this area.

Suggestions for Governance Improvement

General suggestions offered by trustees to ensure an ethical organization include:

- Regularly update the board about changes in legal requirements for non-profit organizations and health care providers; and
- Avoid micromanagement by empowering employees: Give departments the tools they need and, in return, letting them have the responsibility and show the results to the leadership.

Figure 16: Ensuring Organizational Ethics (highest to lowest ratings)



Assessment of ACH Committee Performance



Committee Performance

Members of the Finance Committee and Quality Committee rated their satisfaction with two leadership factors relating to each of their committees' ability to fulfill its duties (see figures 17 and 18).

Finance Committee members agree that the committee reviews and refines the annual operating and capital budgets, and generally agree that it recommends investment policies and monitors the organization's investments.

Members of the Quality Committee are divided about the committee's performance, with uncertainty about the committee's monitoring of hospital performance in developing and implementing quality improvement programs. Committee members also see room for improvement in oversight of the development, implementation and reporting of programs that measure quality, risk management and clinical resource utilization.

Finance Committee Suggestions for Improvement

General suggestions offered by trustees to ensure an effective Finance Committee include:

- Develop a long-term agenda that requires regular review of functional areas reporting to the CFO;
- Present an analysis of the financial picture of various services, programs and functions within ACH; and
- Beyond the pension plan, the board should look at an overall investment policy.

Quality Committee Suggestions for Improvement

General suggestions offered by trustees to ensure an effective Quality Committee include:

- Develop specific quality goals and objectives and track progress in achieving those goals;
- Increase understanding of current quality efforts and the committee's role in improving quality; and
- View quality needs as equally important as finances.

Figure 17: Finance Committee Performance (highest to lowest ratings)

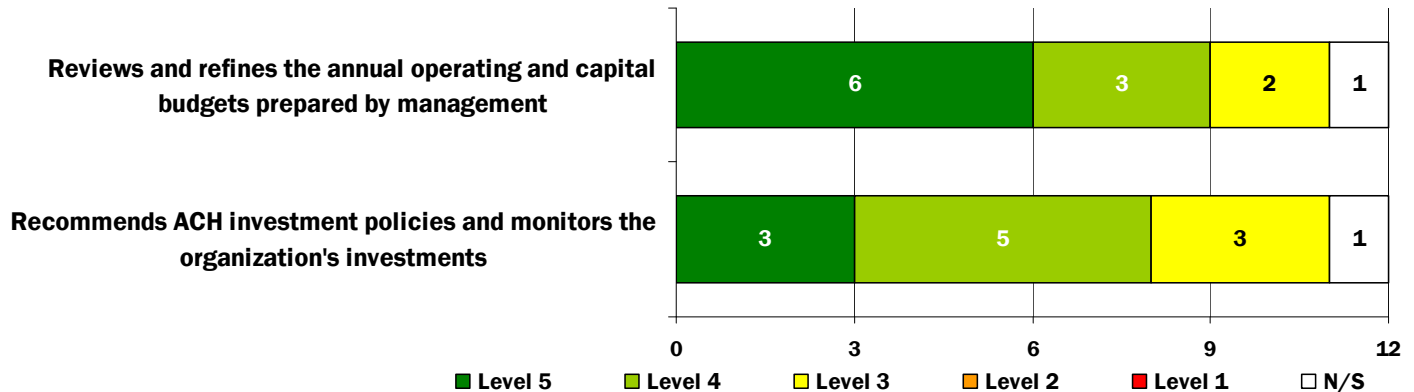
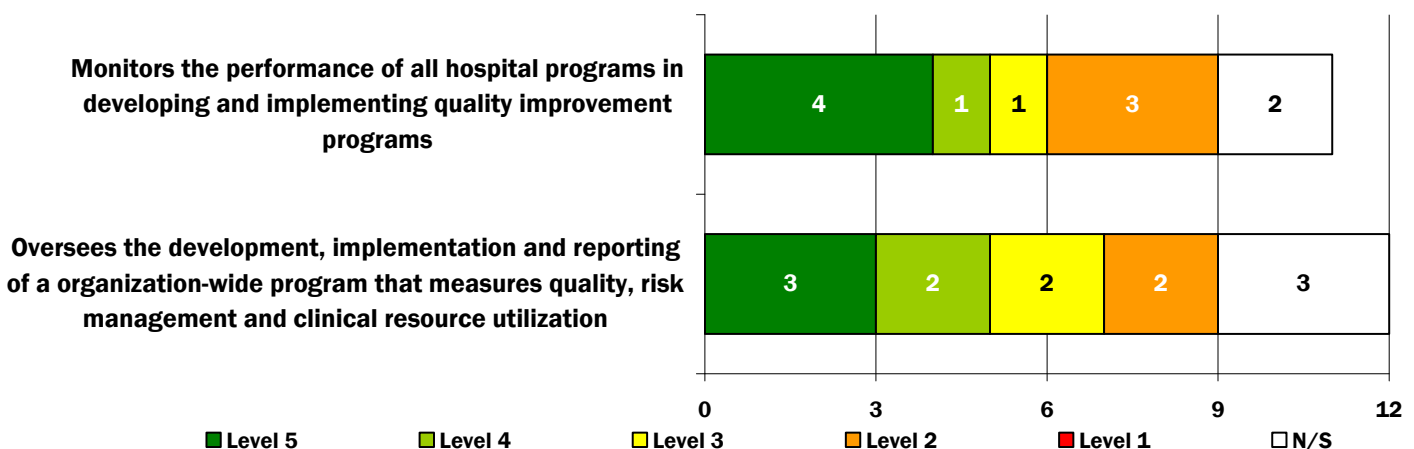


Figure 18: Quality Committee Performance (highest to lowest ratings)



Personal Performance Assessment



Personal Performance Assessment

%of Total Responses	
Level 5	22%
Level 4	57%
Level 3	15%
Level 2	6%
Level 1	0%
Not Sure	0%

Highlights...

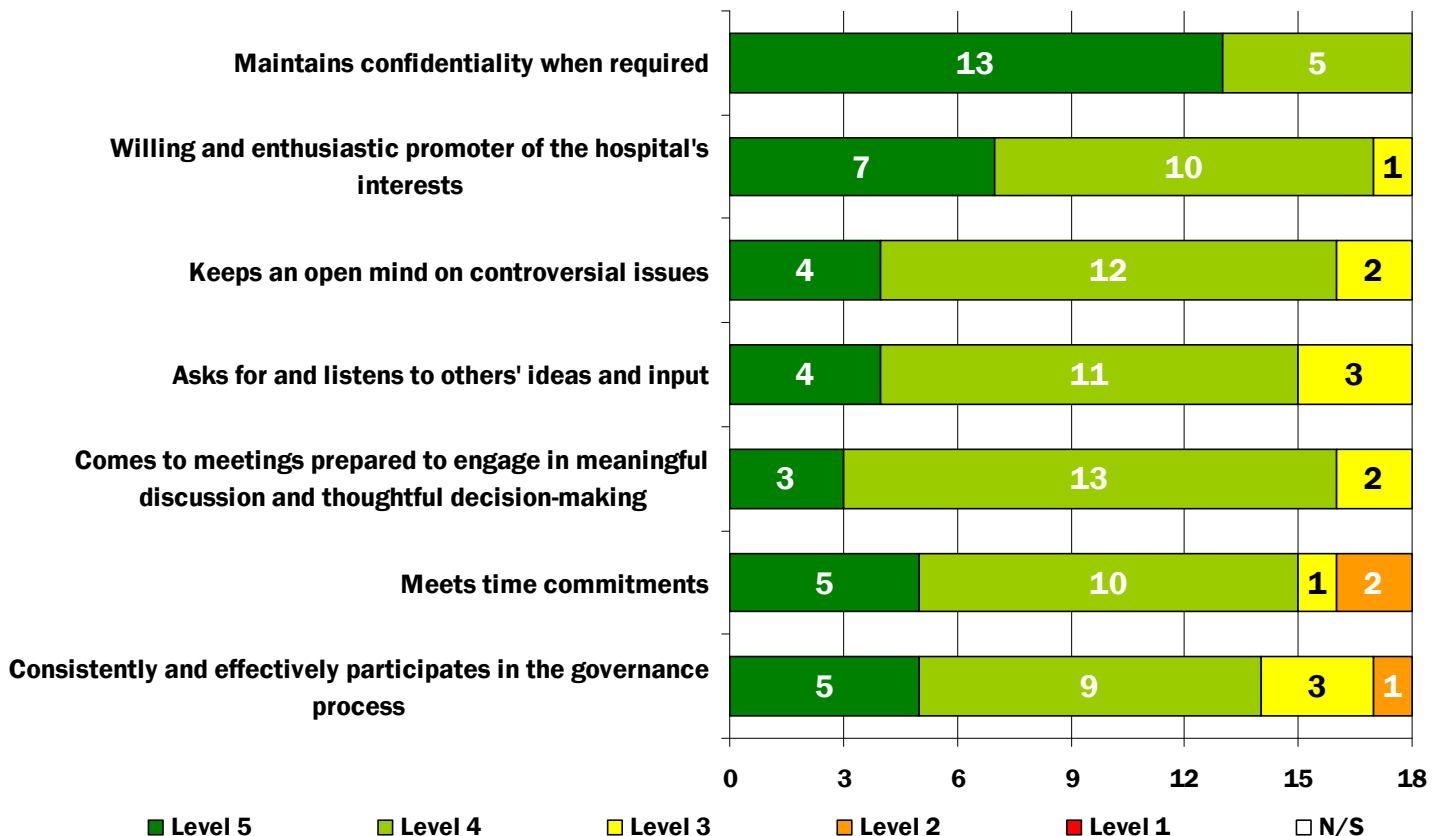
- ▶ Trustees are generally pleased with their personal performance, but see room for improvement
- ▶ Trustees maintain confidentiality and enthusiastically promote the hospital’s interests
- ▶ Uncertainty about effectiveness in presenting ideas and dealing with ambiguous situations

Anytown Community Hospital (ACH) board members rated their satisfaction with fourteen leadership factors relating to their personal performance on the board (see figures 19 and 20). There is a strong sense among trustees that confidentiality is maintained when required. Trustees also generally agree that they are enthusiastic promoters of the hospital’s interests, they keep an open mind on controversial issues, ask for and listen to others’ ideas and input, and come to meetings prepared to engage in meaningful discussion and thoughtful decision-making.

Most trustees also generally agree that they meet the board’s time commitments, and consistently and effectively participate in the governance process. Although most trustees generally agree that they understand the key issues and challenges facing the hospital, there is room for additional education and development.

Board members generally continually seek to improve their performance, but are unsure if they ask probing and insightful questions and provide “constructive skepticism.” There is also

Figure 19: Personal Performance: Top Rated Areas (highest to lowest ratings)



some uncertainty about trustees' ability to discuss controversial topics effectively.

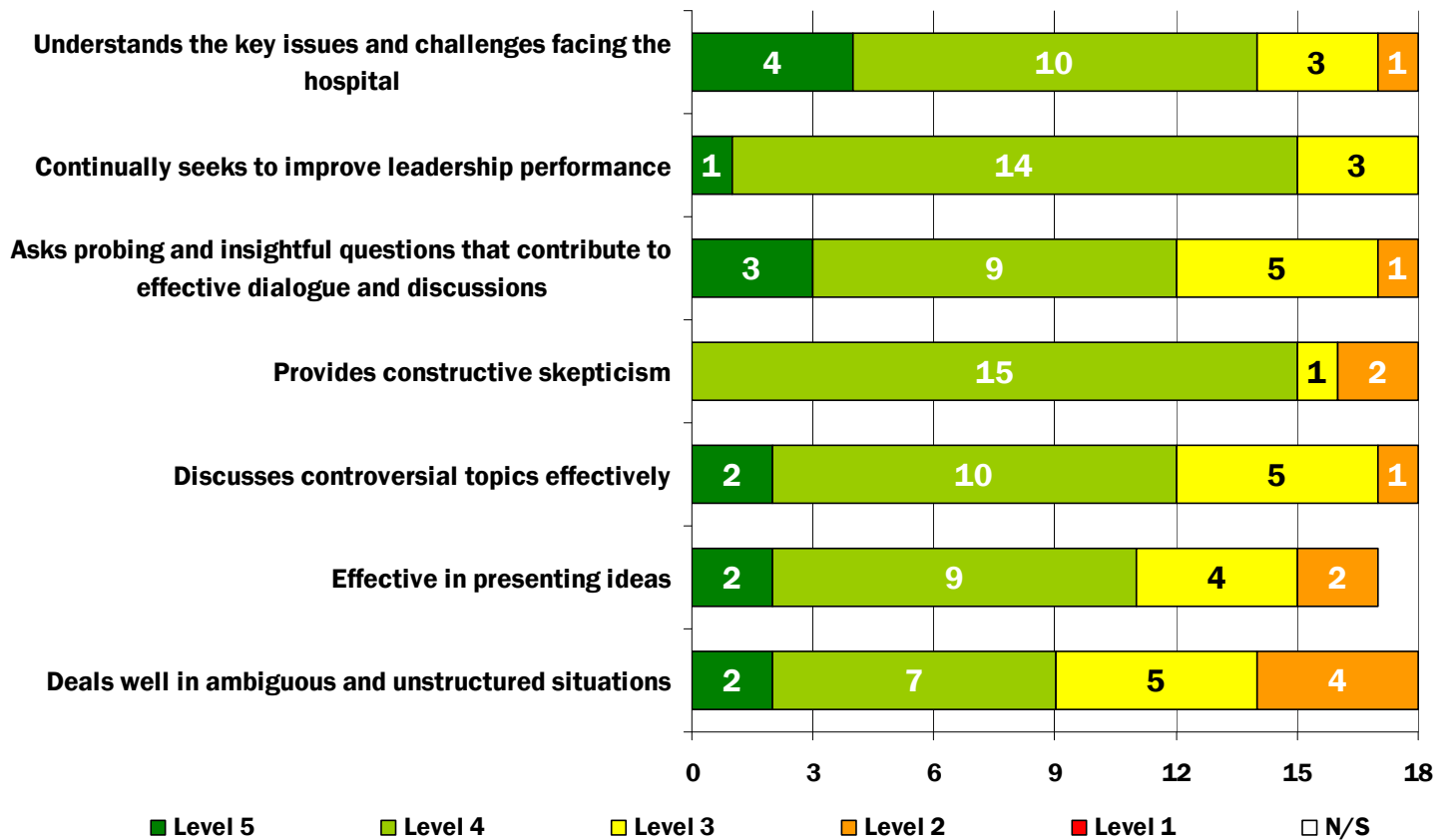
Trustees are least certain about their effectiveness in presenting ideas, and their ability to deal with in ambiguous and unstructured situations.

Suggestions for Governance Improvement

General suggestions offered by trustees to improve personal performance include:

- New trustee orientation and ongoing board education;
- Address the current time commitment required for trustees; and
- Ensure active involvement in board discussions and activities.

Figure 20: Personal Performance: Lower Rated Areas (*highest to lowest ratings*)



Summary of Open-Ended Comments

Leadership Responsibility Areas: Suggestions for Improvement

Mission, Values and Vision

Track Progress in Achieving the Mission, Vision and Values and Celebrate Successes

- Implement the strategic plan by showing progress of small tasks that are completed, showing the staff that progress is being made.
- The strategic plan and mission/vision/value statements have just been adopted by the board. We must celebrate some of the achievements along the way.

Keep the Mission, Vision and Values in the Forefront When Making Decisions

- When making decisions we should consider the relevance to the mission.
- Develop the skill to ask questions based on mission and values as opposed to specific events.

Ensure Trustee Independence and Commitment to the Mission, Vision and Values

- By and large the trustees are doing a good job but some individuals are not as committed as most of the board.
- I think at times particular friendships override a situation that needs addressing.

Board Leadership in Setting the Tone Throughout the Organization and the Community, Emphasizing the Importance of the Mission, Vision and Values

- There are times that we don't always put these values in place for our employees, who are also possible customers and ambassadors for our hospitals.
- ACH's view of its local and regional mission seems to be a moving target. The board should lead the way on this issue, rather than being steered by administration.
- When opportunities occur in the community, to openly espouse the mission, values and vision of ACH.

Other

- By focusing on quality of patient care issues - the rest will come along.
- Continued involvement with the facility and working within the board for improvement.
- I don't believe there is sufficient focus on the mission, values and vision. With the major changes in recent years at ACH it seems that it has been difficult to focus. With time I expect there to be a natural improvement.

Strategic Direction

Regularly Update the Board on Strategic Progress and Necessary Changes to the Strategic Direction

- Demand that management present data to support development of and changes to strategic direction.
- Need to have board meetings where the staff can explain what they are doing, and how the board could assist in a positive way. I realize that this is a tricky situation for the administration, but the board ultimately would be more knowledgeable.

Increased Board Understanding of the Community's Needs and Upcoming Issues and Challenges Facing ACH

- We spend too much time reviewing past performance (in all areas) and not enough time understanding the issues that influence the future. We don't spend enough time educating the board.
- I don't believe enough trustees know what the community's health needs are, nor, know how to meet these needs. The senior team seems to best know this, and can be, and has been helpful in informing the trustees.
- It may be beneficial to have an outside assessment of our needs and challenges. We only see through the eyes and filters of management.

Monitor Progress in Specific Areas Such as Quality and Community Health

- We need to monitor more in the quality arena. Recent quality overview done was excellent and we need more like it.
- While a new strategic plan was approved, we need to begin to think strategically. We should consider community health needs and challenges, and evaluate our performance.

Other

- Community meetings early in the strategic planning process enabled community members to be heard. A new round of community meetings should be implemented to unveil the strategic plan.
- We can do better here.
- The board and administration appear to recognize the need for improvement in this area and we are already focused on efforts to improve as the result of administration’s prodding.
- Focus on types of patient care that this institution offers or wishes to offer and then significantly improve them.
- With the focus on committee work, and with so many committees and such a spread of issues I believe it is very difficult for the monthly meeting, with all board members present, to synthesize the strategy and challenges of ACH. Individuals on individual committee assignments may understand certain areas well, but there isn’t enough time for a volunteer board to have expectations that are too high. We must rely upon our professional administrative staff in almost every instance.

Leadership Structure and Governance Processes

Need for Increased Board Dialogue, Trustee Involvement and Commitment to the Board

- Board members should speak up more and ask more questions. Too frequently we are approving things without much discussion.
- Develop process so that all trustees provide comment on issues before the board.
- Allow the whole board to more fully weigh in on the critical decision making for sensitive or troublesome hospital issues.
- An executive session allows board members to share their thoughts, but the board needs to develop the comfort to have this level of discussion at all times.
- Continue with open dialogue among trustees.
- Newer board members often struggle with the more sensitive topics as they have limited background or exposure prior to it coming up at a board meeting for a vote. Need to slow down and ensure everyone asks their questions, get additional information before meetings, etc.
- Some board members miss an excessive number of meetings. Although their input is valued we have had board members miss three meetings in a row. How can a member stay assessed of the hospital’s issues and problems if they don’t make the meetings?

Structure Board Meetings to Focus on Long-Term, Strategic Issues

- Refer more routine review to committees so that board meetings can focus principally on quality and strategy.
- We certainly could spend meeting time more wisely...more often than not items are presented in a tight time frame. We have always been reactive rather than proactive, but I'm afraid that this is a result of the current environment and the constantly shifting courses created by both state and federal governments.
- Often times board meetings are focused on the past months activity rather than the future.

Provide Continual Board Education About the Current Environment, Issues and Challenges

- Ongoing education for trustees is very beneficial.
- Get more information on advancing and present health care issues and standards.

Other

- Again, I believe the board is already attempting to make improvements in the above areas except that I am not aware of a well defined program to identify and recruit new trustees.
- Planning committee meetings are too frequently scheduled, then cancelled, disrupting business and personal schedules.
- The board has good leadership, but the roles and responsibilities of individuals and committees are not well defined.
- Continued communication with each other and increased communication from the senior management team to the board.

Quality and Patient Safety

Continue with Recent Efforts to Address Quality Improvement

- Issues in which I perceive deficiencies in this area are being addressed.
- The board has charged management with providing quality benchmarks which we expect to start using later this year.
- The recently adopted strategic plan has an emphasis on quality and will require the board to define expectations and objectives.

Work Closely with Administration to Identify Shortcomings and Develop an Action Plan to Improve Quality

- With the help of the administration I believe the board can do better in establishing and reaching quality improvement targets.
- Quality improvement is one of our weakest areas – we’re still measuring the same things we looked at for years without really addressing many of the issues that truly could improve quality. However, the current administration is well aware of these shortcomings and I feel confident that we will soon see real change.

Other

- Develop a quality scorecard and trend quality assessments throughout the hospital.
- Don’t assume everything is a rubber stamp, ask questions. Quality is an area that the board struggles with and what are the targets and areas we need to track. This needs to get resolved.
- Regain focus on what quality is for each medical issue.

Community Relationships

Build Public Trust and a Positive Community Reputation

- Community relations are improving, but we still have a long way to go to rebuild the hospital’s reputation and regain the public trust.
- I believe the current CEO is aware of the need for improvement in the above categories and he has assisted the board in recognizing the importance of public perception. However there is room for further improvement to overcome past mistakes.

Seek Community Viewpoints and Develop Positive Dialogue with the Community

- Continue to perform outreach to the community to get the pulse of the public.
- As mentioned earlier another round of town meetings would be appropriate to roll out the hospital's new strategic plan.

Other

- Again, many times I feel that we would do better as a group to be proactive in the community, before the negative items are publicized. I think we are better about this than we were a few years ago, but we still need improvement.
- Many in the community seek medical care away from ACH. In some cases their physicians direct them elsewhere (and they may need to be sometimes because of unavailable services at ACH, but sometimes they are referred elsewhere even when specific services are available locally). Frequently patients simply go elsewhere and do not seek medical care at ACH when they could. ACH and the board should somehow be addressing this.
- Continue to develop solid working relationships with neighboring community hospitals.

Relationship with the CEO

- Our CEO has great communication skills and listens well. Even if the plan of attack is different from someone's expectations, he is able to well define his reasons for his course of action.
- No need for improvement here.

Relationship with the Medical Staff

Ensure Processes for Consistent Communication with the Medical Staff Through the Medical Executive Committee as well as Other Avenues

- Ensure there is a process to communicate effectively with all members of the medical staff.
- Attendance at MEC meetings is very important to the board.
- I am not confident that the board’s excellent interaction with the Medical Executive Committee is achieving effective communication with all medical staff but it is apparent that the board and administration are endeavoring to improve communication.

Continue With Current Efforts

- Keep doing what we're doing!
- Fairly good now, continue open talking.
- This has been an on-going issue but great strides have been made to build the trust between physicians, board and management through open dialogue.

Other

- I think the board members sometimes are notified by physicians about a problem before we hear them as a group. I also think there are times that issues are discussed between administration and physicians without the entire board being aware of these matters. I also feel that the board members weigh the physicians' opinions more heavily than any other group, at times to the detriment of the patients and staff. I think the board has overstated that we want our CEO to mend the physician/board relationship from previous years - I think the board may need to re-direct the CEO on this matter.

Financial Leadership

Financial Reports Presented in "Layman's" Terms, With Updates on the Success of Specific Services and Programs

- I think the report that the CFO gives is great for those who have a strong financial background - I don't think it is that clear for those who don't.
- I've been thinking lately that it would be helpful to the board if, perhaps twice each year, the board were to be informed of the financial impact of the different services, functions and programs present at ACH. While there most likely are overlaps in the data, computerized data could present this data even in an overlapping presentation.

Financial Leadership Is Strong – Little Room for Improvement

- CFO is the best.
- In my opinion, due to active committees and excellent presentations of information by the CEO and CFO there is little room for improvement in this area.
- Very well done.

Community Health

Increased Board Understanding of Community Issues and Board Involvement in Community Dialogue

- The CEO and the staff work with other community organizations, but the board is not often part of ongoing dialogues.
- I am not confident that the board has a clear understanding of community health needs, although the board is aware that it must obtain this information in order to embark on major capital project.
- Somehow, the board needs an assessment obtained from the community as to why many patients go elsewhere for their medical care.

Other

- Although there are instances of joint advocacy I believe that the board could cause the administration to excel more in this area.
- Through the Anytown Liaison community relationships will continue to benefit ACH.

Organizational Ethics

- We are not good about empowering our employees. We tend to micro-manage the departments. I would rather see us give the departments the "tools" they need and, in return, let them have the responsibility and show us the results.
- This is a case of on the job training. The board is very aware of its responsibilities but at the same time, due to the complexity of legal requirements for non profits and health care providers the board needs to be regularly updated as to changes in legal requirements.

Committees: Suggestions for Improvement

Executive Committee

Ensure the Executive Committee Does Not Over-Use its Power

- While some board members believe the committee overuses its power, the committee seldom meets except on an as need basis.
- The Executive Committee must be careful not to usurp the authority of the full board and not keep board members in the dark about decisions. It is moving in the right direction.

Other

- I am not aware of a need for improvement.

Finance Committee

- Develop longer term agenda that causes regular review of functional areas reporting to CFO.
- By presenting an analysis of the financial picture of various services, programs and functions within ACH.
- Beyond the pension plan, the board should look at an overall investment policy.

Nominating and Governance Committee

Ensure Clear Recruitment Criteria Focused on Qualifications and Ability to Complement Existing Board Skills

- There have been huge discussions about diversity in governance. My feeling at the present time is that we are becoming too focused on diversity and overlooking qualifications as we proceed into the next pool of potential board members. I believe we need to have a variety of people on our board; however, not so that there is a loss of qualified board members.
- Develop written document outlining criteria and process for trustee selection.

Other

- We really need to identify potential board candidates and begin to actively recruit them...the average age of our board members is way up there and we need to bring on younger people
- Develop trustee education process.
- The nominating committee should expand into a governance committee and assist with clarifying roles and responsibilities, set an education agenda, and focus on board development.
- It is currently working on doing so.

Quality Committee

Develop Specific Quality Goals and Objectives and Track Progress in Achieving Those Goals

- Quality at ACH needs to be fully developed so that the board can be fully apprised of quality initiatives and the lack of success in certain areas.
- This committee needs to determine its purpose, areas to track/focus on and know that quality is improving and consistent. Committee seems to be in transition.

Increase Understanding of Current Quality Efforts and the Committee's Role in Improving Quality

- We oversee a great deal but not sure we deal with the really critical issues...but the administration is fully aware of the issues. The committee's main responsibility is to keep asking the questions and expecting change.
- Get a better sense of physician's efforts at quality and some of the issues around this effort.

Highlight the Importance of Quality

- Quality needs to be seen as important/critical as finances.

Summary of Issues and Priorities

Highest Priorities for the Board in the Next Year

Continue to Focus on Implementing the Existing Strategic Plan

- My highest priority is to continue with the strategic plan - and to make sure almost all, if not all, staff are positive since they are the biggest advocates for our hospital.
- To move the strategic plan to the next level and celebrate small successes.
- To assist the administration in carrying out the strategic plan.
- Engagement to insure the implementation of the strategic plan, with an emphasis on defining quality expectations.

Ensure Board and Organization-Wide Focus on Quality

- Performance and quality improvement.
- Overseeing the redesign of the quality assurance program.
- Redefine what really is quality patient care.
- Focus on the quality of service provided by the institution. Quality improvement programs are handled quite effectively. However, the perception of quality is highly dependent on the attitude of the employees who interact directly with the patients and their supporters. Here there is room for improvement.

Secure Capital Funding for Long-Term Facility Improvements

- Completion of a long range plan for capital improvements and planning of a capital campaign with the Anytown Foundation to fund with other resources.
- Implement plans for construction/renovation while maintaining institution's financial health.
- Making sure that we get the right team in place for the capital project. This is the most important item to assure quality health care in the region.
- I'm not sure the capital campaign is realistic. I need to feel comfortable that it is realistic.

Strengthen Board Operations and Processes to Ensure an Emphasis on Long-Term, Strategic Issues

- To strengthen its internal functioning so that it can be prepared to defend the organization as it embarks on a major capital campaign.
- To improve its meeting process so that the focus shifts to key strategic issues.

Other

- Meeting health needs of a growing population.
- Board education in order to position ourselves best to serve this community.
- I'd like to see the relationship of board members and physicians improve. Many physicians seem selfish and apathetic.

Most Significant Board Strengths

Diversity of Board Members' Experience, Knowledge and Backgrounds

- Diversity of members with a varied background and professional and business strengths.
- Diversity of membership .
- Diversified board with a strong focus to make the hospital better.
- Excellent mix of experience in the different aspects of the Anytown's activities.
- A broad multi-talented group of caring individuals.
- A compliment of well versed community and physician leaders.
- Broad community representation.
- Good mixture of business members, physicians, other community leaders.

Dedication to Anytown Community Hospital

- All are dedicated to this hospital (other than those who have their testing in their doctors' offices rather than our own hospital).

- Committed.
- Dedicated.
- Committed/involved board members.
- The people who serve on the board are truly committed to the hospital...they are hard working and willing to put in the time.
- A sincere commitment of a great deal of time and personal expertise by practically all of its members.

Business Knowledge, Experience and Skills Necessary to Effectively Lead Anytown Community Hospital

- Well experienced board members with excellent business skills.
- The board as a whole has the skills and technical knowledge required to provide effective leadership to the hospital.
- The board has all of the talent required to function well, and a fair amount of people with long institutional memory.

Cohesiveness

- We all like each other.
- Well connected group.

Other

- Quality of leadership.
- Fair-minded.
- Caring.
- Honest.

Most Significant Board Weaknesses

Trustee Complacency and Lack of Involvement in Board and Hospital Activities

- Absences by board members. Attendance is critical.
- The board has become somewhat complacent in its role after weathering a couple of rough years of leadership changes.
- Lack of involvement. The board needs to reassess its commitment to the hospital. I would like to see more board involvement at hospital activities.
- Lack of more direct contact with activities within the hospital.

Lack of Board Diversity and Full Community Representation

- Lack of broad community representation.
- Some members of the board tend to represent a constituency rather than the community as a whole.
- Sometimes too inbred. Need to develop membership to ensure an infusion of new blood. This will stimulate good dialogue and hopefully assist in leadership of ACH.

Too Much Emphasis on Past and Current Issues, Rather than a Long-Term Strategic Focus

- The need to focus more strategically and on the future, rather than the past.
- A lack of long term strategic planning and insight.

Need for Increased Board Education About Current Issues, Opportunities and Challenges

- Not enough time to spare for continued education.
- Understandably not aware of all health, medical, surgical issues.
- The board doesn't spend enough time studying and understanding the major issues at hand.
- Full appreciation of the breadth of issues/opportunities/events/challenges/updates in health care.

Lack of Open, Honest, Thorough Dialogue

- Acceptance of positions and recommendations without adequate questions.

- Many of the board members are personal friends with each other and with physicians - I think this may sometimes affect our judgments in particular situations. At times the board members do not wish to hurt anyone's feelings; however, this is better now that we have been having an executive session after each meeting.

Other

- I am not confident that many members of the board are in tune with less than an excellent public perception of the institution and the continued need for improvement.
- The medical staff board members often seem to have an agenda which is different from that of the institution. This is less of an issue with the current members but has been a problem in the past.

Significant Trends the Board Must Understand and Address in the Next Year

Declining Reimbursement and State and Federal Support

- Less financial support from state and federal governments.
- State funding initiatives that are reducing funding sources for hospitals.
- National changes in health care financing.
- Reimbursement issues, bargaining unit issues.
- I'm afraid that once again we are going to have to deal with the payment crises that will undoubtedly come from Washington...figuring our how to move forward with fewer dollars is going to a problem for everyone...sad but true.
- Dealing with the new rate schedule for patients, while simultaneously dealing with a potential diminishing bottom line.

Trend Toward Consumerism Combined with Increasing Local Competition

- Need that medical technology is changing all the time and that we are going to need to be willing to look at new ways to make profits and meet consumers demands, such as with more holistic health care.
- Movement of patients toward seeking some of their medical care elsewhere.
- Loss of market share.
- The impact of the expansion of our largest local competitor.

Improved Employee Morale and the Development of a Positive, Accountable Workplace Environment

- Must change the culture of the employees at ACH. Strategic plan does have a focus on accountability for the employees with a new incentive and rewards program.
- Labor relations, achieving good employee morale which will translate into customer service and commitment to quality out of area hospitals and physician groups offering competing services.

Need for Improved Relations with Physicians

- The competition from private physician groups, difficulty in recruiting for needed service areas, working with physicians that increasingly want to cut back on call schedules while still meeting the community needs.
- The board must provide the needed leadership to bring the medical staff to consistent adherence to principles of scientifically based standards of care.

Other

- Decision - whether to be a small community hospital or a referral center for larger local hospitals.
- The ongoing changes of the health care needs of the community is the most important element that the board needs to understand and then deal with.
- State regulations and control of hospital beds. Many changes coming and we need to be ready.
- Quality and compliance.
- Customer satisfaction.

Personal Performance Assessment: Suggestions for Improvement

Suggestions for Improving Personal Leadership Performance

New Trustee Orientation and Ongoing Board Education

- Educational programs for trustees.
- New trustee training/orientation would be helpful. There is a tremendous amount to learn about function and structure of the board, the hospital operations, the issues facing the hospital, etc. in order to be an effective trustee. A thorough, well-developed orientation program would be extremely beneficial.
- Self education, willingness to attend hospital education.

Address the Current Time Commitment Required for Trustees

- Find a way to meet the continuous committee and board obligations. With multiple committees meeting monthly, but on different days and in different weeks it is impossible to truly have an outside board member. You have to live in the community 100 percent and have few other firm obligations to effectively meet all of the time demands. Tough to do, even when you believe it is for a good cause and you are working with good people. The time issue is that it is an hour here, an hour and 1/2 there, and when you have to travel a full day to and from these meetings it becomes impossible. This really isn't the answer to the question asked, but without the ability to give the time, it is impossible to achieve the other goals.
- Time commitment is becoming more of a problem. I am not as consistent in attendance as I would like to be... I'm still totally committed to the hospital, but perhaps its time to let someone else sit in my seat.
- Time is a factor for all board members but in my case I could always be better prepared for meetings.

Active Involvement in Board Discussions and Activities

- I need to attempt to learn more about the committee structure and be willing to interact more with other trustees in board discussions.
- Continued involvement and tenure on the board.

Other

- Try to implement ideas from board education sessions.
- I am not sure, but I am open to suggestions.
- Improve open-ended questioning skill. Strive to maintain focus on strategic issues.
- By having the board and CEO and administration listen and respect my ideas, recommendations and vision for this institution.

Appendix

Self-Assessment Criteria

Section 1: Board Performance Assessment

Scale:

- Level 5:** I *strongly agree* with this statement. We *always* practice this as a part of our governance. Our performance in this area is *outstanding*.
- Level 4:** I *generally agree* with this statement. We *usually* practice this as a part of our governance, but not always. We perform *well* in this area.
- Level 3:** I *somewhat agree* with this statement. We *often* practice this in our governance, but we are not consistent. We perform *fairly well* in this area.
- Level 2:** I *somewhat disagree* with this statement. We *inconsistently* practice this as a part of our governance. We *do not perform well* in this area.
- Level 1:** I *disagree* with this statement. We *never* practice this as a part of our governance. We perform *very poorly* in this area.
- N/S:** Not sure. I do not have enough information to make a determination about our performance in this area.

Leadership Responsibility 1: Mission, Values and Vision

Please rate your agreement with the following statements:

1. Anytown Community Hospital has a clear, focused and relevant written mission
2. Trustees fulfill their leadership role in ensuring achievement of the mission, values and vision

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 2: Strategic Direction

Please rate your agreement with the following statements:

1. Trustees understand strategic issues the hospital is facing, and the factors most critical to organizational success and performance
2. Strategic information provided to the board enables a clear understanding of issues and challenges, and facilitates decision making
3. The board focuses the majority of its time on strategic thinking and strategic leadership rather than strategic plans
4. The board ensures that stakeholders' and constituents' needs, interests and viewpoints are assessed in developing goals and strategies
5. Trustees understand critical community health needs and challenges
6. The board monitors the performance of hospital services to evaluate how they are meeting previously established goals

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 3: Leadership Structure and Governance Processes

Please rate your agreement with the following statements:

Board and Committee Responsibilities and Structure

1. The board's roles and responsibilities are clearly defined in a written document
2. The leadership qualities required for effective governance are in place
3. A process for identifying and recruiting new trustees is used to build the board team
4. The organization of the board encourages critical dialogue
5. The board's committee structure is effectively tailored to the strategic issues important to the hospital
6. Committees have specific charters, well-qualified members, and efficient operating rules that advance understanding, improve decision-making, and contribute to strategic success

Board Meetings and Trustee Effectiveness

1. The board has a process for improving individual trustee effectiveness when non-performance becomes a governance issue
2. At least 75 percent of the board's meeting time is spent focusing on strategic issues
3. The board resolves problems effectively, even when the solutions are uncomfortable to implement
4. Meeting agendas provide adequate time to discuss and act on significant strategic issues
5. Trustees' time is respected and used efficiently, and trustee involvement and participation are enhanced as a result

Trustee Knowledge and Development and Educational and Meeting Materials

1. Each trustee is provided with background information and intelligence resources required for active participation in board dialogue
2. Trustees receive well thought-out strategic options and alternatives from management prior to defining a strategic course of action
3. Trustees have a clear and comprehensive understanding of the changing health care environment (local, regional and national) and its effects on the hospital
4. A governance development process is in place that identifies governance issues, determines educational needs, and manages the board self-assessment process
5. Our meeting materials promote meaningful dialogue and critical decision-making
6. The information the board receives is relevant, timely, understandable and actionable, and facilitates board decision making

Board Relationships and Communication

1. Working relationships among trustees are good
2. Trustees are open about their thoughts and feelings
3. Every trustee has a voice in our governance decisions

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 4: Quality and Patient Safety

Please rate your agreement with the following statements:

1. Anytown Community Hospital has a board approved definition of quality
2. The hospital has a board-approved, organization-wide plan with objectives for improving patient safety and reducing medical errors
3. Quality improvement is a core organizational strategy
4. The hospital has a quality improvement process that continuously defines, measures and improves quality at all levels, including clinical, service and organizational development
5. The CEO's performance objectives are based on measurable and achievable quality goals
6. Quality and patient safety performance and issues are reviewed at every board meeting
7. The board has established clearly-defined and measurable quality improvement targets
8. The board's process of approving appointments and reappointments to the medical staff meets its quality and legal responsibilities

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 5: Community Relationships

Please rate your agreement with the following statements:

1. The hospital regularly measures the public's perceptions of the organization's programs and services, community contribution, perceived trust, economic impact and overall value as a community health asset
2. The board understands the implications of public perceptions on future success
3. The board ensures that the organization's plans and priorities are well-communicated to our stakeholders

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 6: Relationship With the CEO

Please rate your agreement with the following statements:

1. The board and CEO have clear, mutually agreed-upon expectations of one another
2. The board and CEO work together with a sense of purpose
3. The board always hears from the CEO in advance of a difficult or potentially problematic hospital issue
4. The board evaluates and compensates the CEO using pre-defined expectations and defined performance targets tied to achievement of the mission, vision and strategic objectives

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 7: Relationship With the Medical Staff

Please rate your agreement with the following statements:

1. Physician leaders participate in decision making processes at the board and committee level, and are actively involved in important organizational decisions
2. Trustees understand the roles and responsibilities of the Medical Executive Committee
3. The board ensures that the interests of the physician community are addressed as the organization strives to fulfill its mission
4. There is effective communication between the board and the medical staff

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 8: Financial Leadership

Please rate your agreement with the following statements:

1. The board successfully carries out its fiduciary responsibility for the oversight of financial resources and direction
2. Board members are comfortable asking questions about financial issues during board meetings
3. Financial reports are presented in a format that is easy to understand, that highlights major trends, and that stimulates creative discussion which enables timely and effective decision making

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 9: Community Health

Please rate your agreement with the following statements:

1. The hospital jointly advocates with other community organizations for legislation, regulation and other actions to address community health and socioeconomic issues
2. The board has a clear and consensus-driven understanding of the most important community health needs and issues

How can the Board of Trustees improve its leadership in this area?

Leadership Responsibility 10: Organizational Ethics

Please rate your agreement with the following statements:

1. The board ensures compliance with applicable state, federal and local regulatory and statutory requirements
2. The board ensures that our ethical principles and values are provided to all individuals who are employed by, volunteer with, or are formally affiliated with the hospital

How can the Board of Trustees improve its leadership in this area?

Section 2: Committee Evaluation

Scale:

Level 5: I *strongly agree* with this statement. This committee *always* practices this as a part of its governance. Our performance in this area is *outstanding*.

Level 4: I *generally agree* with this statement. This committee *usually* practices this as a part of its governance, but not always. Its performs *well* in this area.

Level 3: I *somewhat agree* with this statement. This committee *often* practices this in its governance, but is not consistent. It performs *fairly well* in this area.

Level 2: I *somewhat disagree* with this statement. This committee *inconsistently* practices this as a part of its governance. It *does not perform well* in this area.

Level 1: I *disagree* with this statement. This committee *never* practices this as a part of its governance. It performs *very poorly* in this area.

N/S: Not sure. I do not have enough information to make a determination about this committee's performance in this area.

Executive Committee

Please answer questions about this committee only if you have been or are currently a member of this committee. If not, please proceed to the next committee.

The Executive Committee:

1. Acts on the board's behalf when necessary, while keeping the board fully informed of all deliberations and decisions that have been made

How can the Executive Committee improve its leadership performance?

Finance Committee

Please answer questions about this committee only if you have been or are currently a member of this committee. If not, please proceed to the next committee.

The Finance Committee:

1. Reviews and refines the annual operating and capital budgets prepared by management
2. Recommends Anytown Community Hospital investment policies and monitors the organization's investments

How can the Finance Committee improve its leadership performance?

Nominating and Governance Committee

Please answer questions about this committee only if you have been or are currently a member of this committee. If not, please proceed to the next committee.

The Nominating and Governance Committee:

1. Identifies individuals qualified to become board members, developing a pool of potential future board members that can strengthen the board's ability to govern effectively

How can the Nominating and Governance Committee improve its leadership performance?

Quality Committee

Please answer questions about this committee only if you have been or are currently a member of this committee. If not, please proceed to the next committee.

The Quality Committee:

1. Oversees the development, implementation and reporting of a organization-wide program that measures quality, risk management and clinical resource utilization
2. Monitors the performance of all hospital programs in developing and implementing quality improvement programs

How can the Quality Committee improve its leadership performance?

Section 3: Issues and Priorities

1. What is your single highest priority for the board in the next year?
2. What are the board's most significant strengths?
3. What are the board's most significant weaknesses?
4. What do you see as the most significant trends that the board must be able to understand and deal with in the next year?

Section 4: Personal Performance Assessment

Scale:

Level 5: I *strongly agree* with this statement. I *always* demonstrate this as a part of my trusteeship. I perform *flawlessly* in this area.

Level 4: I *generally agree* with this statement. I *usually* demonstrate this as a part of my trusteeship, but not always. I perform *well* in this area.

Level 3: I *somewhat agree* with this statement. I *often* demonstrate this as a part of my trusteeship, but am not consistent. I perform *fairly well* in this area.

Level 2: I *somewhat disagree* with this statement. I *inconsistently* demonstrate this as a part of my trusteeship. I *do not perform well* in this area.

Level 1: I *disagree* with this statement. I *never* demonstrate this as a part of my trusteeship. I perform *very poorly* in this area.

N/S: Not sure. I do not have enough information to make a judgment about my performance in this area.

Please rate your personal performance in the attributes, skills and abilities listed below:

1. Consistently and effectively participates in the governance process
2. Understands the key issues and challenges facing the hospital
3. Asks probing and insightful questions that contribute to effective dialogue and discussions
4. Comes to meetings prepared to engage in meaningful discussion and thoughtful decision-making
5. Keeps an open mind on controversial issues
6. Discusses controversial topics effectively
7. Willing and enthusiastic promoter of the hospital's interests
8. Meets time commitments
9. Asks for and listens to others' ideas and input
10. Maintains confidentiality when required
11. Effective in presenting ideas
12. Deals well in ambiguous and unstructured situations
13. Provides constructive skepticism
14. Continually seeks to improve leadership performance

How can you improve your leadership in these areas?