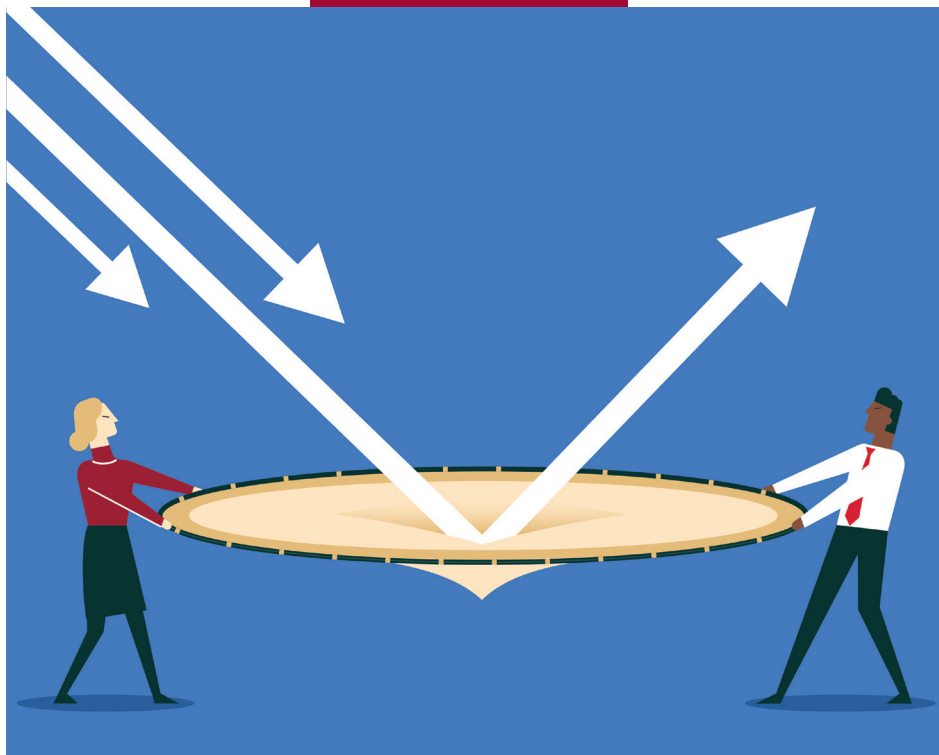


# Trustee Insights

VIEWPOINT



## Getting to the New Normal in Health Care

The board's role in crisis recovery

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**D**uring these unprecedented and rapidly changing times, governing boards may be asking: What now? How do we best prepare for an uncertain future? How can we best serve our organization and community through crisis to recovery?

Whether it is overseeing the

### Transforming Governance

COVID-19 recovery process or responding to a natural disaster, a school shooting or civil unrest, the board can play a pivotal role in ensuring that employees receive

the support needed to heal and that the organization and community receive the resources they need to restore and rebuild.

Following is practical guidance for board members as their organiza-

tions transition from crisis response to the long road to recovery. Although many of the practices speak directly to the COVID-19 pandemic, they also can be applied more broadly to other major crises.

### Foster healing

During and throughout crisis recovery, board members have an opportunity to be inspirational leaders and promote a whole-person and wholehearted caring approach. This might mean asking whether leaders, staff and caregivers have the necessary resources to heal from the traumatic experiences of front-line caregiving. Asking about the well-being of the front-line staff sends a clear message of caring. The board should ensure the organization has strategies and programs in place (e.g., counseling, support groups and financial assistance benefits) that address the emotional, physical and financial toll of managing the crisis and treating patients. Likewise, the board should understand what programs are necessary to ensure the community has appropriate resources and programs to recover.

### Focus on safety and quality

The board has a fiduciary duty to ensure the provision of high-quality, safe care regardless of the circumstance, and this should remain a top priority as organizations

manage and recover from a crisis. As hospitals and health systems ease back into providing more clinical care not related to COVID-19, even as the pandemic continues, the board should understand how leadership will balance the need to provide necessary services while minimizing risk to patients and health care personnel. The board should understand the criteria that must be met in order to safely reopen for routine care, how quality patient care will be maintained, how staff will be kept safe, and the organization's approach to prioritizing and accommodating high-risk or at-risk populations. Access to testing, availability of non-COVID ICU beds, utilization of telehealth and availability of personal protective equipment all are considerations to discuss.

The Centers for Disease Control and Prevention has issued a [“non-COVID-19 care framework”](#) that includes key considerations for health systems as they seek to provide the safest way possible to resume care delivery. The AHA has released [“COVID-19 Pathways to Recovery”](#) with considerations and resources for hospitals and health systems.

### Express gratitude

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Offering gratitude and appreciation to hospital executives, providers and other staff is important during the peak of a crisis – and it continues to be during recovery. Acknowledging the innovative, often heroic, ways management and staff are responding to challenges encountered during the crisis supports their efforts and builds an environment of

empowerment and solidarity for the entire organization. A formal, written thank-you from the board acknowledging the dedication of leadership and staff and providing words of encouragement and support can help sustain morale and commitment for the long haul.

### Ensure an appropriate assessment of the organization's response to the crisis

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The board should use a post-crisis assessment, conducted by management, to understand what is working and what is not with the organization's performance. Boards should ask: Are communication channels effective? Is technology adequate? What efforts are in place to revise emergency preparedness plans, and what funding is necessary to implement these changes? What community agencies and organizations should we partner with to maximize our collective impact?

### Rebuild community trust and confidence

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During the COVID-19 crisis, health systems have experienced unprecedented underutilization of important medical services for patients with urgent or emergent health care needs not related to COVID-19, as well as the delay of non-emergent surgeries and procedures. Patients, their families and communities in general are fearful that a visit to the hospital or clinic will put them at greater risk of contracting COVID-19. However, delayed urgent and emergent care can cause the very real risk for severe illness and harm and, in the worst cases, death.

To that extent, trustees have an opportunity to encourage the public to return to a new normal by returning to the hospital for needed care services. They should assure community members that the hospital remains a trusted organization and is ready to care for them, and that they should not delay needed care for fear of COVID-19.

### Support the work toward financial recovery

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Delayed and deferred care also has caused many organizations' revenues to drop by 50% or more. This reduction has occurred while expenses have soared as spending is required to prepare and care for COVID-19 patients. As such, hospitals and health systems must retool and determine what new operational or financial goals are reasonable by year's end. Projections must be recast and objectives reset. Board members must be ready to consider these goals and ensure that they best meet their organization's needs. Health care organizations that are positioned to adapt quickly to the new normal will be able to meet the needs of their communities more effectively.

### Leverage community connections for philanthropic donations

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Responding to COVID-19 has had a huge financial toll on hospitals and health systems. During and immediately following a crisis, private donors are frequently eager to make meaningful contributions to support recovery. Trustees have an opportunity to leverage their connections to

bolster their organization's financial resources with philanthropy. The board can help identify areas of greatest need and set expectations for fundraising efforts.

### Advocate again and again

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Here, again, is one of the board's core roles. Board members should continue to follow up with legislative representatives to obtain funding or change regulations that hampered the health care field's ability to respond effectively during the crisis. Advocating for the organization with legislative representatives and promoting the organization with the

public also are great ways to foster support for those needs that have been identified.

Finally, as their organizations begin the journey to recovery, board members must of course remember to stay true to their primary role of oversight. Boards that get buried in the weeds of operations have the potential to distract attention from the necessary actions required to ensure success. Instead, the board can provide true strategic value by monitoring recovery efforts, ensuring necessary resources are available and keeping focused on future opportunities and challenges.

Healing from the prolonged

COVID-19 pandemic or other major crises will take caring, acknowledgment, diligence and, most of all, time. A board's oversight is critical in supplying all of these.

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*Please note that the views of the authors do not always reflect the views of the AHA.*