

TRH Board Strategic Planning 2009
Identifying Critical Questions and Issues for Study

Board members have expressed desire to spend meeting time in discussion of the critical short and long-term strategic issues facing our healthcare system. In order to structure this discussion, the first step is to identify questions that are candidates for board discussion this year at our meetings. These should generally be big picture issues that will influence the future viability of our healthcare system.

The following list of issues and questions was provided by board members for consideration at the March meeting, which ones are critical now in 2009 and others that can be placed in a Parking Lot for future discussion as the board's work progresses.

1. Should TRH explore a strategic partnership (affiliation) with another healthcare facility to improve its long-term viability?
 - What conditions or circumstances would be acceptable in a partnership?
 - What advantages would we be looking for?
 - What are non-negotiables that we are unwilling to make in a partnership?
 - If a partnership is desired, what are the next steps?
2. Should TRH seek to expand the hospital authority, beyond the four townships and the City of Three Rivers?
 - Should more of the service area's resident who benefit from TRH pay financially support the hospital?
 - What about a countywide authority involving Sturgis?
 - What are the next steps?
3. Are there enough advantages and benefits we receive as a result of the QHR management contract to continue it?
 - Beyond the benefits in savings as a result of pooled purchasing through QHR vendors each year (report to be provided in March), what are the other benefits?
4. What are the "health and well being" needs and wants of our constituency?
5. What is the degree of satisfaction of these needs; regardless of "provider"?
6. How do each stakeholder group (e.g. patients, practitioners, third parties and the community at large) agree or differ in their view of needs and satisfaction?
7. What is the degree of satisfaction of needs by alternative providers (i.e. TRH, Bronson, Borgess, Sturgis, outpatient, other)?
8. What is TRH's strategic positioning: (e.g. medical care superiority, lowest total delivered cost (including time and convenience costs) or "stakeholders" intimacy)?
9. What are the missions in which TRH can attain and sustain superiority? (e.g. proximate ER, convenient rehab, convenient exercise, superior knowledge of constituency's health needs)

10. What is the likelihood that providing "needed" services can be financially viable?
11. What is the likelihood that providing "desired" services can be financially viable?
12. Would we better serve our constituency by becoming a first call referral center with "intimate" knowledge of each individual and thus be in a superior position to redirect people to a variety of providers and provider locations?
13. Should we add transportation services (routine as well as urgent)?
14. Should TRH (be) the provider of first choice or of last resort?
15. Should we re-examine the Governance of how the authority board works?
 - What involvement should the Board have, if any, in campus activities and interaction with the Senior Staff.
 - Should board members, like the Executive Committee attend the meetings that our CEO holds with employees after board meetings to hear the feedback.
Should we just leave it as is?