

TEXAS HEALTHCARE TRUSTEES

Trustee

Bulletin

Cheers for 40 Years: THT Celebrates with Governance Roundup

The last 40 years have brought significant changes for trustees and the organizations they govern. From DRGs to the BBA, a regulatory alphabet soup has sometimes served up not-so-appetizing fare for hospitals and health systems. Yet, there is much to celebrate. Texas Healthcare Trustees has guided trustees through four decades with cutting-edge programs, new ideas and the latest in technology and legislative issues.

Wanted: Trustees with True Grit

Perhaps never before have trustees faced such immense challenges. Like cowboys of the Old West, health care trustees have pulled down their hats, tightened their cinches and demonstrated true grit. Yet, an unfriendly regulatory environment and diminished resources have compounded to make a trustee's job more difficult than ever.

THT can help. Take advantage of 40 years of educational programming and learn the latest about important health care issues at the Texas Healthcare Trustees' Summer Forum, "Governance Roundup," slated Aug. 3-4 at the Worthington Hotel in Fort

Worth. The THT Summer Forum will focus on trustee leadership and address a wide cross-section of issues from the Health Insurance Portability and Accountability Act to advocacy, rural health and other governance issues.



With Texas hospitals and health care systems aswirl in change, Texas trustees must make tough decisions and address the best ways to lead their organizations into the future. Which direction leads to future success?

Count on the THT Summer Forum for a wealth of information. Come out to Cowtown and learn what it takes to be successful in this new environment. The Summer Forum will:

- Offer a review of key legislation passed by the 77th Texas Legislature. Learn what happened in Austin and how the issues affect your hospital. Noted state and

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Trustee Bulletin

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Governance Roundup continued from page 1

- national advocacy experts will provide specific information and insights about the policy-making process on a state and national level.
- Explore current governance challenges and identify obstacles in board policies and decisions to allow for timely changes.
 - Focus on the issues affecting your hospital, patients and community, including HIPAA regulations, Emergency Medical Treatment and Active Labor Act compliance, CEO evaluation, the nursing shortage, patient safety and more.
 - Share strategies for future success and determine which direction to take in times of change.

The combined THT Luncheon, Annual Meeting and Anniversary Celebration is a highlight of the Summer

Forum. During this session, the recipient of the 2001 Founders' Award, THT's highest honor, and new officers and board members will be recognized. The Forum will conclude on Saturday with additional informative sessions.

And don't miss the silent auction to be held during the Forum. Items to be auctioned include sports packages, trips and other exciting items. The auction benefits the THT Foundation.

After daily Forum activities, Fort Worth offers a wealth of dining, entertainment and recreational opportunities.

Mark your calendar now for this informative two-day Forum in Cowtown! For more information, call 512/465-1562 or, in Texas, 800/252-9403.

Silent Auction: Let the Bidding Begin!

Watching Tiger Woods drive to victory in multiple major golf tournaments, or Alex Rodriguez excel in America's favorite pastime, baseball, is enough to excite anyone about playing a sport or attending a sporting event. Now, there's an opportunity to satisfy your craving for a challenge on the links or a night at the ball field – and help others, too.

By participating in the Texas Healthcare Trustees Foundation's fourth annual Silent Auction, held in conjunction with the THT Summer Forum, trustees can bid on sports packages and benefit the THT Foundation. Weekend getaways, popular Brighton accessories, artwork, Texana items and high-tech gadgets are also on the bid list. The Silent Auction will feature a treat for every taste – sports, recreation, leisure and fashion will be well represented.

The auction is one of the most popular events at the Summer Forum and brings much anticipated levity. Don't miss this year's exciting event!

Public Hospital Refresher Set for August

Even the most veteran public hospital board trustees can benefit from a refresher. Learn about the changing face of health care and the role of a public hospital trustee at the Public Hospital Refresher for Veteran Trustees, Aug. 2. Hosted by the Texas Healthcare Trustees and the Texas Organization of Rural and Community Hospitals, the refresher will be held in conjunction with the THT Summer Forum in Fort Worth. All current public hospital board members are invited to attend this special presentation.

This important day-long trustee refresher will explore topics specifically related to public hospital governance including an advanced look at the Texas Open Meetings and Texas Open Records laws; advanced hospital finance; spending and investing public funds; and protecting against liability. If you serve on a public hospital board, don't miss this groundbreaking refresher.

Led by noted health care attorney and compliance expert Kevin Reed, J.D., shareholder with Davis & Wilkerson, P.C., in Austin, the

refresher will feature Fletcher Brown, also a shareholder with Davis & Wilkerson, and Bill Parrish, president of Parrish, Moody & Fikes, in Waco, a respected hospital financial consultant.

All veteran public hospital trustees are encouraged to attend this full-day refresher session. The registration fee is \$100 for THT members and \$150 for non-members. For more information, call 512/465-1562 or, in Texas, 800/252-9403.

Open Meetings Information

Prior to 1999, a governmental body was not required to confer with one or more of its employees in an open meeting if the only purpose of the conference was to receive information from the employees or to question them. Members of the governmental body were not allowed to deliberate about public business or policy during such a conference.

Many hospital boards used the staff briefing exception to receive information from the hospital's chief executive officer or to question the CEO about particular issues in a closed session. This exception is no longer available under the Open Meetings Act.

In 1999, the Texas Legislature amended the staff briefing sections of the Act and repealed all authority to conduct staff briefings of governmental bodies except for the Board of Trustees of the Texas Growth Fund. Any meeting of a governmental body where it receives information from an employee or questions an employee must now be open to the public and properly posted.

Some hospitals also may have used what is known as the "workshop" exception as a rationale for holding a closed session. The Open Meetings Act specifically excludes from the definition of a "meeting" the atten-

dance or a quorum of a board at a regional, state or national convention or workshop if formal action is not taken and any discussion of public business is incidental to the convention or workshop. We do not believe, however, that this permits a governmental hospital to hold an in-house "workshop" which is not open to the general public. The exception clearly contemplates a "regional, state or national" event.

In other words, if a quorum of your board attends a Texas Healthcare Trustees or Texas Organization of Rural and Community Hospitals regional or state meeting, it is not necessary to post such a function as a public meeting. However, if the board is having a local strategic planning retreat with just board members and invited guests in attendance, we do not believe that the workshop exception applies and such a meeting should be properly posted and open to the public unless another exception to the Act is applicable to some part of the strategic planning discussions.

Kevin Reed, J.D., is a shareholder with Davis & Wilkerson, P.C., in Austin, and will lead the Public Hospital Refresher for Veteran Trustees in Fort Worth Aug. 2, in conjunction with the THT Summer Forum.

Error-Proofing Your Hospital's Governance

Governance error, n. 1. The state of believing what is untrue, incorrect or wrong. 2. Something incorrectly done through ignorance or carelessness, inattention or misunderstanding; mistake. 3. A departure from accepted practice. 4. Failure to adequately capitalize on opportunity.

The definition of a governance error is clear, but how do these errors affect your hospital or health system? How can boards know the warning signs and reduce governance errors?

The answers to these questions and more were discovered at the Texas Healthcare Trustees Spring Forum March 4 in Dallas. Larry Walker, president of the Walker Company in Lake Oswego, Ore., and a popular repeat Forum speaker, led an enlightening session focusing on the topic of "Error-Proofing Your Hospital's Governance."

"Errors can occur at many points throughout the governance process, potentially putting hospital trustees, the hospital and patients at risk," explained Walker. "Additionally, today's environment is much more unforgiving and the issues are so much more complex. The forces of change are so huge and challenging that trustees must have a higher level of expertise and negotiation than ever before," Walker emphasized.

Governance errors include:

- Errors in judgement.
- Errors of "innocence."
- Inadvertent errors of fact.
- Criminal behavior.

Negative results can occur including:

- No decisions.
- Wrong decisions, wrong time.
- Right decisions, wrong time.
- Violations of federal and state laws.

"Trustees can take steps to reduce errors as they lead their health care organizations through demanding and rapidly changing times," Walker continued. "Most board members are working hard to guide their hospitals through tremendous change and economic

upheaval. As board members try to best guide their institutions in increasingly complex times, they can improve their governance efforts by knowing what the issues are and developing a plan of action."

Best Practices: Eight Critical Factors

A tool that can help, Walker suggested, is the development of board "best practices." Trustees should take note of these eight critical factors in reducing governance errors:

Recruitment. Recruitment efforts ensure that the number of trustees, representative skills, relationships, experiences, critical thinking and consensus-building capabilities are present to guide the organization in the future. Boards should continuously nurture and recruit individuals who bring skills necessary to lead transition and change, and who broaden the base of experience and expertise. It is important to match the candidate's present skills against current and emerging trends.

Orientation. New trustees should receive organized, structured training and orientation. Topics should cover board bylaws, structure and policies, organizational description, trustees' roles and responsibilities, organizational history, information about the local health care market, summaries of current and future issues, and challenges facing the hospitals. Ideally, new trustees should be assigned a "mentor" who works

closely with them through the first year to serve as an informational resource, provide perspective and speed leadership performance.

Education. Ongoing education is vital to a board's success and in reducing the rate of governance errors. Every board should have an education plan and an adequate budget to meet emerging leadership needs. Yet, only 54 percent of boards have a formal education program. Training and education should be identified for the entire board, and individual plans custom-tailored to meet the needs of the individual. To reduce governance errors, all trustees should be required to take part in educational sessions.

Information. Boards are required to deal with large amounts of complex information. It is important to evaluate the quantity and quality of information necessary to make strategic and policy decisions. And distribute pre-meeting information far enough in advance of the meeting to ensure that trustees have adequate time for a thorough review and understanding of the issues they will discuss and vote on.

Decisions and Direction. Boards should ensure that meeting agendas are crafted to address the hospital's most critical strategic priorities. Meetings should be well-organized and flow smoothly from topic to topic, with generous opportunities of focused discussion. Board members should be leaders in the strategic-thinking process and nurture top management stability. Additionally, committees should work proactively and be accountable for achieving specific results.

CEO Evaluation. The CEO evaluation should use criteria directly tied to the hospital's strategic plan, as well as leadership criteria unique to the hospital's

challenges. All trustees should have an opportunity to weigh in. The evaluation process should be well-understood by the board and CEO, so there is mutual agreement with its scope, purpose and value.

Self-Evaluation. Entire health care boards should evaluate, on an annual basis, their overall leadership performance, their individual performance, and the major issues and priorities for the hospital using clearly defined criteria. The board should use the annual self-evaluation to determine areas of leadership weakness and develop action plans to address deficiencies. The assessment allows the board to address major issues in a collaborative, non-threatening manner and focuses on mission, vision and strategic direction, structure and processes, communication, CEO relationship, medical staff and community, financial leadership and community health improvement.

“As board members try to best guide their institutions in increasingly complex times, they can improve their governance efforts by knowing what the issues are and developing a plan of action.”

– Larry Walker

Vital Signs. Key indicators of organizational performance or “vital signs” will help a board assess current performance and forecast future expectations. These indicators include financial statement performance, budget performance, operating statistics, capital planning, patient satisfaction surveys, mortality/morbidity rates, employee attitude surveys, unscheduled re-admissions and community health measures.

Understanding and addressing the underlying causes and effects of governance errors leads to an understanding of where change must occur. Through this process, trustees can work to prevent the negative, unintended outcomes of governance errors and formulate a streamlined governance model.

“Building community and constituency support for survival and growth is perhaps a trustee’s greatest role,” suggested Michael E. Treacy, J.D., president of Cashel Consulting, Inc., of Fort Washington, Pa., a speaker at the Texas Healthcare Trustees Spring Forum in Dallas. “Strong trustee and administrative leadership can combine to ensure strengthened and enhanced health service for the benefit of all in the community,” he said.

Building Community and Constituency Support

Increasingly, health care organizations are facing decreasing reimbursements from Medicare and other payors, rising costs, human resource shortages and the need to provide services for the uninsured. Particularly in many rural communities, trustees and administrators are anxious about whether their local hospitals can survive these difficulties.

According to Treacy, the need for community support is greater than ever. This is especially true as it becomes clear that the status quo is no longer viable as a long-term strategy.

“When change is needed, and difficult decisions must be made, it is important to gain the support of all the stakeholder groups that are affected, including a broad cross section of community leadership,” he explained.

A Trustee’s Role

Trustees can play a pivotal role in helping to build community support. As overseers, trustees have a responsibility to ensure that the hospital’s mission is protected and supported. They have a responsibility to ensure that the needs of the community are well understood and properly taken into account. And they have the oversight responsibility to ensure that hospital management is leading in the right direction.

One area in which trustees can make a valuable contribution is by working with hospital management to design a planning process that involves representatives of all key stakeholder groups. A sound planning process involves five important steps:

- Realistically assess the current situation;
- Evaluate the imperative for change;
- Define the vision and goals;
- Develop strategies for achieving those goals; and
- Effectively execute those strategies.

A Case Study

Lenawee Health Alliance, a rural hospital system in Lenawee County, Mich., used this strategy to develop and strengthen community support among bitterly divided health factions.

Previously, Lenawee County hosted five different hospitals within a fairly close geographic area. Each was fiercely independent, and mistrust and rivalry abounded. That left the small hospitals open to increased competition from a larger tertiary facility and other community health care providers. Duplication of services, competing medical staffs and the threat of managed care contributed to declining financial performance.

Though the situation was dire, Lenawee County underwent a dramatic transformation, due in large part to the community support carefully constructed by the Lenawee Health Alliance. They employed a highly participatory process to bring the five competing hospitals together as a single, county-wide hospital system, Lenawee Health Alliance. Then, as a system, they concentrated on integration and performance improvement.

In three short years, Lenawee County went from five separate hospitals to a four-hospital system with a five-year joint operating agreement, saved \$5 million without service provider layoffs and shared the savings with the community. The following two years, Lenawee Health Alliance employed a process involving the entire community to develop a comprehensive strategic plan and focused on executing the strategic initiatives. According to Treacy, it was Lenawee Health

The Lenawee Health Alliance succeeded by:

- Involving the boards in the design of the planning process;
- Designing a systematic, logical, sequential process with ample opportunities for community and constituency involvement at each step;
- Building trust among all key constituencies;
- Creating some early success;

Trustees can play a pivotal role in helping to build community support. As overseers, trustees have a responsibility to ensure that the hospital's mission is protected and supported. They have a responsibility to ensure that the needs of the community are well understood and properly taken into account. And they have the oversight responsibility to ensure that hospital management is leading in the right direction.

Alliance 's inclusive and participatory process that made the difference, with the entire community solidly behind the partnering strategy that was ultimately implemented.

- Being sensitive to existing and varied community cultures and traditions; and
- Taking time to do the process right.

Though the road to creating a single system was fraught with potholes, expert navigation by board members and administrators changed the situation.

Texas Governance: People and Places



D.J. Williams

Background: Williams is a life-long resident of Port Lavaca. He retired from Union Carbide after 40 years of employment, serving in middle management as a maintenance supervisor. Active in numerous civic and community endeavors, he serves on the YMCA board and the citizen's advisory board of Formosa Plastics Corp. Williams is a member of the Port Lavaca Cemetery Association, Calhoun Citizens in Action, and Mount Sinai Baptist Church. He also is coordinator of a nine-church community fellowship. He and his wife, Pearl Joyce, have one daughter and two granddaughters.

Hospital/Health System:

Memorial Medical Center, Port Lavaca.

Facility Description: "We are a 58-bed hospital serving the community of Port Lavaca. Our hospital is affiliated with Memorial Hermann Healthcare System in Houston. Our facility is very nice and possesses the latest and most modern equipment. The physicians, staff and administration are extremely competent and caring."

Length of Service on Board:

Six years.

Board Involvement:

"As a citizen of Port Lavaca, I am involved in a myriad of civic activities. I have a particular interest in community service, so my board service is a natural fit. I was appointed to the board in 1995."

Most Challenging Issue:

"Like every other hospital in the country, we are facing serious challenges as a result of the Balanced Budget Act of 1997. The BBA has made it very difficult to operate in a manner

where we are financially stable and still provide for the health care needs of our community. I know this is foremost on the minds of our board members. We have a deep concern and a sincere commitment to provide the health care services that are needed in this community, but government reimbursement changes have made our jobs very challenging."

Most Satisfaction:

"I like being involved in civic activities and doing things to benefit my community. Being involved in providing health care to our community is very satisfying."

Accolades:

Awarded a special honor from the Memorial Hermann Healthcare System as Distinguished Trustee of 2001.

Special Interests:

"I am very active in fund-raising events, including the Sun Light Girls Club Scholarship Fund. I assist with many community barbecues, especially for youth organizations. My goal is to be thought of as a person who is always ready to help someone in need."

What I Would Tell New Board Members:

"Don't come to the board with a hidden agenda. Come ready to be a part of a team working together to make your hospital the best facility possible. Teamwork and education are essential."

TEXAS GOVERNANCE: PEOPLE AND PLACES

Trustee profiles give you a "snapshot" look at different trustees from across the state. From Laredo to Lufkin, you can see first hand the efforts they are making for their communities.

If you know of an exceptional trustee to profile in this section, please call THT's Merry Hughes at 512/465-1562 or, in Texas, 800/252-9403.



Tom Kindred

Background: A native of Dallas, Tom Kindred grew up in the Park Cities. After a stint at Texas A&M and in the U.S. Navy during World War II, he earned a mechanical engineering degree from Southern Methodist University. He has owned and operated Kindred Construction since 1957. The company builds, owns and operates real estate investments. He has three daughters and three grandchildren.

Hospital/Health System: Texas Health Resources; Texas Health System; Presbyterian Hospital of Dallas.

Facility Description: “Texas Health Resources is the largest faith-based nonprofit health system in Texas. THR was formed in 1997 through the merger of three highly respected health care companies: Harris Methodist Health System, Presbyterian Healthcare System and Arlington Memorial Foundation, Inc. The company includes 14 acute care hospitals, two psychiatric treatment facilities, a 500-resident retirement village and a senior medical center, and provides home health services.

“Presbyterian Hospital of Dallas is a 900-bed hospital located just north of downtown Dallas. It is a community-based hospital serving as a referral center for North and East Texas.”

Board Involvement: “I have served since 1985. My very good friend, Finley Ewing, was on the Presbyterian Hospital of Dallas board and knew of my background in real estate. That led to my serving on the Presbyterian Professional Building Corp. When a vacancy occurred on the Presbyterian Hospital of Dallas board, I completed that term and have served since.

“The Texas Health System board, of which I am vice chairman, is the operating board of the Texas Health Resources entities.”

Most Satisfying Aspect of Board Service: “I have really welcomed my role as a board member. I am a people person. One of the things that attracted me to board service are the people in health care. The people involved in this business are all very caring and dedicated. This is my opportunity to volunteer and one way I can give back to my community.”

Challenging Issues: “The changing environment is certainly a challenge. We continue to try to find the best way to serve the community, but the Balanced Budget Act has created severe financial pressure. Currently, another tremendous challenge is recruiting and retaining professional staff.

“Also, in 2001, I have been involved through the THR Ad Hoc Governance Committee to analyze the efficiency and effectiveness of the current THR corporate governance structure, since we came together as a system in 1997. This is a pro-active effort to assure that THR remains a faith-based organization joining with physicians to be the health care system of choice, which is our vision.”

Issue of Interest: “For the past few years, I have served at Presbyterian Hospital of Dallas as an ex-officio member of our medical staff and of their executive committee. I also serve on the Quality Resource Management Committee, a medical board committee that oversees the quality and risk management activities, as well as the Process Improvement Committee.

“This involvement has been a rewarding experience, and I am fortunate to be an ex-officio board representative for this group. The perspective from the clinical side of our hospital operation is very interesting and of great value to our board oversight. The doctors, nurses and administrative staff are very active and contribute so much of their own time to these committees. They are all very busy, yet volunteer many hours of their time. They are serious about improving the health of the community we serve, which is our mission.”

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Speaker: Sue Dill, RN, J.D.

July 31

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Speaker: Sue Dill, RN, J.D.

Take advantage of timely educational seminars delivered direct to your hospital through Texas AudioNet. By combining teleconferencing with the Internet, Texas AudioNet offers a convenient, economical opportunity to learn about today's issues without ever leaving your hospital.

This summer, join the Texas Healthcare Trustees and the Texas Hospital Association for seminars that cover information about the regulations enforcing the Medicare Conditions of Participation.

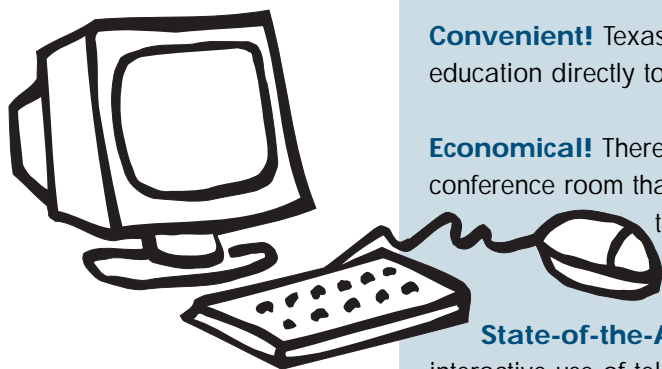
How Does It Work?

It's simple. The audio portion is like any other telephone conference call. The presenter's visual materials (slides, charts, graphs and pictures) are

accessible simultaneously via the Internet. The programs can be fully interactive – you can ask questions either over the telephone or via e-mail.

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Texas AudioNet programs are open to THT and THA members and non-members. Discounts are available for multiple program registrations. Continuing education credits also will be offered. For more information about this exciting educational opportunity, visit THA's Web site at www.thaonline.org. To register, call THA's fax-on-demand service at 888/293-5257 and request document number 113.



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When the Going Gets Tough, the Tough Start Governing

Long-held traditions – fall football games, holiday gatherings or even dinner out on Friday evenings – are a good thing. But in the boardroom, if tradition overrules accountability, the results can be disastrous. But when difficult decisions must be made and the going gets tough, the tough start governing.

Kevin Reed, J.D., shareholder in Davis & Wilkerson, P.C., of Austin, highlighted this topic at the Texas Healthcare Trustees Spring Forum, March 3 in Dallas. He spoke of the infamous Allegheny System bankruptcy in Pennsylvania, an epic example of mergers and acquisitions run amok with little to no board oversight. Many factors contributed to the Allegheny debacle, but the organization's glaring inattention to internal accountability was among the most harmful.

"Trustees have an obligation to leave a legacy," said Reed. "They must assess their stewardship abilities and leave the asset in better shape than when they came."

One way to do this, explained Reed, is by trustees asking themselves questions such as:

- Do I bring expertise to the table?
- Do I educate or criticize?
- Do I establish clear objectives?
- Do I give recognition?
- Do I own my part of the failure?

Citing well-known governance authority John Carver, Reed cautioned that boards cannot rest on past laurels or govern by tradition, but instead must communicate clearly, set realistic goals and be flexible or "audible-



Kevin Reed, J.D., provides tips for effective board governance at the THT Spring Forum in Dallas.

ready." Trustees should constantly re-evaluate their decisions based on what's best for the community.

According to Reed, trustees must guard against serving in a "rubber stamp" or "ceremonial" capacity. "So much more is demanded of trustees in today's environment. Trustees are fiduciaries for the community, and they have a responsibility to make sure that the hospital is on the right track and producing good results, even when the decisions are not easy. When they are not, trustees have responsibility to step forward and lead," said Reed.

In his "Take It to the Bank" slide, Reed offered tactics for being a strong leader:

- Set clear policies and goals.
- Communicate those goals and policies.
- Recognize accomplishment.
- Respect failure.
- Be flexible.
- Give feedback.

Ten Commandments of Hospital Smarts

1. Never underestimate the importance of money.
2. Never overestimate the value of money.
3. You can never have too many friends in business.
4. Don't be afraid to say I don't know.
5. Speak less.
6. Keep your promises, big ones and little ones.
7. Every issue has a life of its own. Be flexible.
8. Commit to the best.
9. Be nice to people.
10. Share the credit.

Board leadership can make a tremendous difference in the success or failure of a health care organization, Reed said. Strong trustee leadership can lead to "forward thinking, value-oriented, leading" organizations. Yet, it takes hard work, he emphasized. "Doing the same thing you have always done gets you the same thing you have always gotten."



Community Health Corporation

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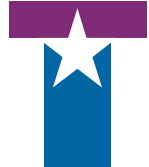
Community Health Corporation (CHC) was established in 1996 to offer support and assistance to the community-based hospital. CHC can acquire, lease, or manage hospitals in a coordinated effort to preserve their not-for-profit status. As an affiliate of VHA Southwest, CHC representatives work with administrators, trustees, physicians, and local community leaders in the least intrusive way for the hospital's benefit.

For more information about this opportunity call:

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