



Governing today for the future: How and where to start

What will healthcare look like in 25 years? No one knows. What we do know is that the current system is not designed to meet the demands ahead. Currently, there is an unsustainable imbalance between what we expect, what we can afford and what the system delivers — and this imbalance will only be amplified in the future.

How can the healthcare system be redesigned to expand access to care, improve health outcomes, manage higher demand, reduce cost, and simplify and enhance the patient experience?

How can you prepare for the challenges ahead? “Business as usual” governance is not an option for boards. To influence how their organization will work in the future, healthcare trustees need to protect the mission and be intentional in the decisions they make today, including what they prioritize, which questions they ask and which trade-offs they are willing to make. Boards should have generative conversations about purpose, care delivery redesign and the long-term impact of the decisions they make today on their organization and community.

How and where can trustees get started?

Assess whether governance practices enable future-focused leadership.

Review how the board operates today, what it spends time on, how decisions are made and where authority and accountability truly reside. Identify which cultural habits and ways of thinking support governing for the future, and which quietly reinforce the status quo.

- **Ask:** *Are we governing in ways that prepare us for the future? If not, what needs to change for the board to govern more effectively?*

Reaffirm your purpose through a future-oriented lens.

Without clarifying purpose, even well-intended strategies and decisions risk reinforcing the very elements that need to change.

- **Ask:** *Are we clear on our fundamental purpose and what problems we are trying to solve today — and what problems we must be solving for the future?*

Define long-term success and legacy.

Have generative conversations by looking beyond today’s constraints to envision what health, access, affordability and experience could look like in the future if the system were truly working.

- **Ask:** *What legacy do we want to leave for our community decades from now? If we were designing healthcare from scratch without restraint, what would it look like?*

Work backward to create the conditions for change.

Identify what is holding the organization back today such as financing models, contracts, relationships, assumptions and “we’ve always done it this way” practices. Then decide what must change to make the future possible.

- *Ask: What conditions in our market or in the broader system are preventing us from creating the future we say we want – and what specifically must change?*

Lead beyond the organization through your role as a steward and change agent.

Since many of the barriers to change are outside any one organization’s control, boards must help build new and unique relationships, make the case for what their communities need and engage constructively with policymakers and partners to advocate for new ideas and shape conditions that allow better systems to emerge.

- *Ask: How can we come together for a common purpose? How might we use our voice, relationships and influence beyond the organization to advocate for the policies and conditions our future organization will require?*

The future is calling boards to govern differently. Challenge your board to move beyond just oversight and begin having generative conversations and intentionally creating the conditions for changes to emerge.

Information for this article was obtained from [“When the Future Finally Arrives: Governing Health Care in 2050,”](#) AHA Trustee Services.

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