Outcomes Measures Case Scenario

Situation: Urban Research University (URU) is a private institution located in a major East Coast city. The neighborhood in which it operates is highly mixed with some pockets of affluence as well as genuine poverty. The original historic campus occupies 20 square blocks, consisting exclusively of campus-owned buildings and a very limited amount of green space. URU’s actual footprint is much larger, however, because it has taken advantage of nearly every opportunity to acquire nearby residential, commercial, and light industrial sites to accommodate its enrollment growth and program expansion throughout the years.

URU’s medical school, teaching hospital (URUH), and outpatient clinics offer various medical outreach programs that have attempted to address, in particular, the special health issues attendant to a low-income population. Though highly successful, these efforts have been constrained because of a lack of physical space and insufficient numbers of staff. As a result there has been only minimal positive impact in the local community.

There is a nearby county hospital (COHO) with which URU previously had an affiliation agreement. Under the agreement many URU medical faculty held staff appointments at COHO. Additionally, URU interns and residents took rotations in various COHO departments. Despite this, and with the consent of the medical faculty and approval of the president, the vice president for health sciences allowed the agreement to expire two years ago. Numerous factors led to this action, with the most significant being concerns related to COHO’s management.

After being on probation for several months, COHO recently was decertified as an authorized healthcare provider. All current patients are being transferred to other area hospitals, including URUH. As a result of this and other problems, COHO’s board authorized the county executive to terminate the employment of the hospital administrator and medical director. Several other senior administrators have departed—both voluntarily and involuntarily—since the probation was announced. As currently staffed and led, COHO has no hope of being recertified.

Opportunity: In light of the situation, the county executive approached URU’s president with a proposal to transfer COHO’s operations to URU, to include the exclusive use of COHO’s physical assets. (Various laws prevent the sale or transfer of real property, but URU effectively would have total control of all COHO real property.) The proposed arrangement also would result in the transfer of all future local, state, and federal revenue to which COHO had been entitled. The proposal is very attractive to URU because of the opportunity to expand significantly its infrastructure and eliminate the duplication of services by URUH and COHO. It also offers the potential to dramatically enhance medical outreach to low-income constituents.

Strategy: After reviewing the findings of a URU task force established to consider the proposal, the board has approved the president’s recommendation to pursue the opportunity. In its resolution the board included a requirement that appropriate success measures be identified now to support an assessment of the arrangement after three, five, and ten years.

Assignment: Identify appropriate outcomes measures to support the assessment discussed above. Identify the measures as objective or subjective and soft or hard.