



## Good Will

*As told by  
Steve A. Freedman*

**One of my commitments as a professional is to develop health care systems for children.** I also have to find ways to finance them. Because of the onset of managed care, hospitals in many markets have been adding and advertising children's services. My hometown of Tampa is no exception, with two hospitals competing, one on each side of the bay. They were each spending a lot of money advertising that they were *the* children's hospital to go to.

As a result, over the years they had developed enmity toward each other and the depth of their competition was quite extraordinary. The older of the two hospitals was 70-years-old and had been serving kids well for a long time, with many terrific teaching programs. But the patient load was beginning to shift to the newer of the two hospitals because they were outspending the older hospital in advertising and public relations, even though they didn't offer many of the important services that the older hospital provided. It was becoming an all-out war.

I had the privilege of knowing both the CEO of the older children's hospital and the chairman of the board of the large general hospital that had the new children's hospital appended to it. In all the years their institutions had been fighting, they had never talked to each other about their competing interests, so I got them together at lunch one day.

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Knowing that the chairman of the newer hospital had a child with special needs, I asked him whether he would have wanted his child treated at the teaching hospital across the bay. Without hesitating, he said he would have taken his child to his competitor's hospital. Then I asked, "What quality do you want for the rest of the parents of children with complex medical needs in our region?" I added, "Your hospital has some high-quality services as well." At that point, the CEO of the other hospital acknowledged that that was true. "As a community pediatric service, you do a great job, but you must also acknowledge that for the really complicated cases, you aren't adequately equipped." After a brief silence, they both laughed about how they had been in conflict with each other, whereas the truth of the matter was that they really honored each other's service to the community. That was the beginning of the end of the cross-bay conflict.

We went on to explore their values for children and the reasons the chairman had wanted to develop a children's unit in his large general community hospital. As they articulated their values, they were almost identical at their core. When they heard each other, I said, "Well, it sounds to me like you guys are on the same team. Is there any way you could figure how to work together?"

That was the beginning of a discussion about how they could differentiate their services. The talks spanned nearly two-and-a-half years. A month ago, the two hospital systems signed a letter of intent to merge and add other hospitals with children's services to the network. Now, parents in the Tampa Bay area will no longer be confused about the quality of health care services for their children because the system is integrated under one banner.

For me it was an interesting lesson. When you talk to people about their values rather than their affiliations, you can bring them together even when they are avowed competitors because at that level, no one can disrespect another person. My friends at these two hospitals discovered that they are two people of good will. Once they understood that they could trust each other's values, they found a way to trust each other administratively.

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