

Board Portals and Enhanced Governance

NEW TOOLS ARE AVAILABLE FOR high-performing boards of hospital organizations. A board portal should be at the top of a hospital's or health system's infrastructure plan to support the pursuit of continuous governance enhancement.



A board portal is a 24/7 digital window into information boards can use for smarter and more efficient board work over the coming years. It is also a transformative tool for saving an organization significant time and money.

To stimulate readers' efforts to establish a board portal, or to refine one currently in place, this article draws on interviews with eight successful organizations that are finding their digital board portal resource a valuable tool for great governance in an era that demands faster and smarter board decision making for organizational vitality.

The organizations participating in this study are:

- Excela Health, Greensburg, Pennsylvania
- John C. Lincoln Health Network, Phoenix, Arizona
- Mississippi Baptist Health System, Jackson, Mississippi
- St. Jude Children's Research Hospital, Memphis, Tennessee
- St. Charles Health System, Bend, Oregon
- Salem Hospital, Salem, Oregon
- Shore Memorial, Somers Point, New Jersey
- Tahoe Forest Hospital, Truckee, California

Rationale for Board Portals

The active users of board portals observe that the digital library and decision support materials posted to the portal help them cope with these diverse challenges:

- Complexity of a strategic imperative to develop and govern new physician alignment arrangements
- Pressure to demonstrate meaningful community benefits to affirm they still warrant preferential tax treatment from state and federal governments
- Expanding calls from regulators at CMS and IRS for better governance oversight of the organization's complex array of such varied issues as: payer contracting and billing, compensation for senior medical directors and executives, and patient safety and quality outcomes
- Growing time pressures on volunteer board members and staff to practice governance best practices as too many boards are experiencing three deadly difficulties:
 1. **Agenda creep** (ever fatter and more complicated board packets for each board and committee meeting).
 2. **Meeting burnout** (monthly meetings that may extend for two to four hours, with one to two hours needed for preparation). Interviewees said they have now been able to move to quarterly

meetings because of the work they are able to get done through the portal—in particular, the discussion board feature.

3. **Competency map gaps** (each board member contributes four to five key competencies to the work of the board). As boards map these competencies against competencies needed to address the strategic imperatives in their strategic and financial plans, they will find gaps. To succeed, boards must recruit, or educate to fill gaps. Information that is readily available for board work will help reduce the difficulty of recruiting people with the diversity of background and wisdom needed to govern today's fast moving and complex healthcare organizations.

What to Include in a Board Portal

Below are a few examples of the content being posted to password protected, 24/7 digital hospital board portals. Consider at least these 10 information elements:

1. Photos and bios (with links for easy emailing) of board members, board committee members, senior executive team, medical staff leaders, and key leaders in any of your strategic alliances (physician co-ventures, hospital co-ventures, ACO partners etc.)
2. An 18-month, continuously updated calendar of board and committee meetings, special fundraising events, special medical staff relations activities and joint meetings, special hospital community health activities, and board educational opportunities
3. Easy-to-search news and communiqués shared by the CEO or board chairperson
4. Status of community benefit reports to public, regulators, and media, including your recent Form 990 submission to the IRS
5. Links to governance resource Web sites, such as your state hospital association, the Institute for Healthcare Improvement, Catholic Health Association, the American Hospital Association, The Governance Institute, the Association for Healthcare Philanthropy, the American Health Lawyers Association, Healthcare Financial Management Association, etc.
6. Links to any social media sites being used by the hospital or medical staff (Facebook, YouTube, Twitter, LinkedIn, etc.)
7. Easy to understand copy of the strategic and financial plan, with capital and operating budgets wired with links to enable easy jumps between key sections, such as:
 - » Strategic imperatives for the next three to five years, as well as targeted initiatives for the next fiscal year
 - » Capital and operating budget, compared to last year and industry norms agreed upon between board and management
 - » Medical staff ventures, performance plans, and recruitment initiatives
 - » Major capital investments and how they are performing against original plan
 - » Clinical service line growth plans

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- » The philosophy guiding the management team's payer contracting work
 - » Labor relations enhancements
 - » Compliance plans and performance
8. Descriptive profiles of the board's "performance dashboard" that shows graphically how the organization is performing each month and quarter in such key metrics as:
- » Quality and safety:
 - Mortality trends
 - Surgical infection rates
 - Readmission rates
 - Etc.
 - » Financial vitality:
 - Margin trends
 - Cash balances
 - Debt coverage
 - Bad debt collections
 - Etc.
 - » Patient satisfaction trends by key service line
 - » Market share position by service line
 - » Physician morale and satisfaction
 - » Employee morale and satisfaction

(The Web site should also explain in layman's terms why each metric has been chosen, how it is calculated, and how it compares to the organization itself, to industry standards, and/or benchmarked peer organizations for similar periods of time.)

9. Board orientation and development tools, such as easy to search, find, and understand articles, reports and reference materials on topics the board and CEO define and update two to three times each year; short video clips on how the plans and budgets are developed, the rationale for your performance metrics, and hot issues as defined by the CEO, CFO, CMO and CNO; other video clips on hot topics from governance resources such as The Governance Institute
10. Basic governance documents such as:
- » Bylaws and articles of incorporation
 - » Committee charges and annual work plans
 - » Board member job descriptions
 - » Conflict-of-interest policies and related disclosure document signed annually by each board member
 - » Copies of recent board self-assessments and "continuous governance enhancement action plans"
 - » The board's regular "governance policy and procedure manual" that provides details on how the board work occurs in such areas as:
 - Strategic planning financial planning and budgeting
 - Quality and safety assurance

- Community benefit plans and reporting
- Continuous assessment process for governance improvement planning
- Board "competency map" and related board member recruitment plans
- Board orientation manual and annual educational programming
- Approach to CEO succession planning and annual CEO performance appraisal process
- Medical staff relationship building

Five Strategies for Smarter Board Portals

The successful use of board portals helps minimize the challenges presented above. There are five key observations to leverage great value from a board portal:

1. Not every board member will use the portal initially
2. Balance digital with paper reports
3. Easy login
4. Use video and audio clips
5. Update often

Not Every Board Member Will Use the Portal

Not every CEO or board member loves the Internet or digital board access to information needed for superior board work. Security is not much of a problem, but board mindset, comfort, and convenience are challenges to discuss and manage. Most boards will not have 100



percent of their board materials sent and consumed in digital formats. A balance will need to be established. Having the CEO or the board chair champion the portal will go a long way in getting the board engaged in this modern way of

governing. The CEO or board chair should be brought into the discussion at the very beginning and educated on the value and function of the portal at that time. Be patient, try pilots, assume a 12-month rollout period, and build in a budget for extensive reliance on video and audio clips, enhanced graphic reports that tell their stories in color and movement, and easy to use board member orientation sessions on key features of the board portal resource.

Some boards offer a laptop, email setup, and basic digital orientation sessions convenient for each board member for as long as they serve on the board. Often these orientation sessions can be on the basics of how the Internet works, email trends and tools, social networking, data security, and even basic time management.

Balance Digital with Paper Reports

Some board reports are too complicated to read on a computer screen, and some board members may become frustrated if the only way to stay informed for their board work is via retrieving and reading digital information. Explore a sensible balance for your board, which usually means sending the routine paper board packets to the board for at least six months before migrating key portions to a digital only format. The more you can rely on digital information, the faster and easier it will be for staff to keep the board well informed and working efficiently, and the more likely you are to achieve efficiencies in your printing budgets.

Easy Login

Fresh knowledge is worthless unless used, and an overly complex login process will turn off even the most enthusiastic board techie. Most use an email and password selected by the board member. The board login should be on the home page of the hospital's Web site, and reminders should be periodically sent out by the CEO's staff, reminding the board members to access the portal for the board information packet and news.

Use Video and Audio Clips

Board members have varying degrees of comfort with typing and Web site navigation. To keep the messages powerful, simple, colorful, animated, and user friendly, try to distill wisdom into short video clips or Webinars with slides that help stimulate and inform the board members. High-performing boards schedule a series of at least quarterly video clip

updates via interviews with medical staff leaders on clinical trends, or the finance staff, the CEO, state hospital leaders, the hospital attorney or auditor, etc.

Update Often

High-performance boards will increasingly rely on board portals over time only if there is fresh knowledge readily available for their use whenever they log in. This includes financials, internal/external presentations, trends, industry information, etc. Management and the board chairperson must be sure there is a disciplined process and staff support assigned to keep the site user friendly, updated, and engaging with the use of graphics and video tools to bring the sometimes dry information to life. Use "push strategies" in which periodic emails are sent to each board member from the CEO with embedded links that keep the board members only an easy click away from hot new insights and data for "evidence-based governance" decision making.

As the pressures mount for smarter and faster board work, high-performance boards will be willing to explore and embrace as many innovations as possible for their pursuit of continuous governance enhancement as we all strive for enhanced healthcare systems that are patient centered, performance driven, and values based.

The Governance Institute thanks James A. Rice, Ph.D., FACHE, vice chairman, The Governance Institute and executive vice president, IHStrategies, and Kate Brecke, consultant, IHStrategies, for contributing this article. They can be reached at jrice@governanceinstitute.com and kate.brecke@ihstrategies.com, respectively.