

ACHD Governance Series

Effective Board Work for Enhanced Service and Performance

Six Short Programs for use by ACHD Members

1. Community Engagement
2. Balancing Governance & Management
3. Board Orientations
4. Strategic Planning
5. Board Self-Assessments
6. Board Education Programming

Jim Rice: Governance Adviser



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Experienced. Practical. Responsive.

Jim Rice, PhD, FACHE is Senior Adviser with the Governance & Leadership service line of Gallagher's Human Resources & Compensation Consulting practice, and Chairman of the Akadimi Foundation. Having served on many boards, Jim focuses his consulting work on strategic governance structures and systems for high performing medical groups, hospitals, credit unions and integrated care systems. He is often engaged for enhanced strategic alliances and mergers for large and small not-for-profit organizations; as well as leadership development programming for Physicians, Boards and C-Suite Senior Leaders.

Dr. Rice holds a masters and doctoral degree in management and health policy from the University of Minnesota. He has received the University of Minnesota, School of Public Health Distinguished Alumni Leadership Award; a National Institute of Health Doctoral Fellowship; a US Public Health Service Traineeship in Hospital Management; a Bush Leadership Fellowship at Stanford and the National University of Singapore; and the American Hospital Association's Corning Award for Excellence in Hospital Planning. He is a Fellow in the American College of Healthcare Executives (ACHE) and has worked in over 35 countries in North America, Asia, Africa and Latin America.



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1. What is a good "Board Education Program"?

Board education is a diverse and multi-media set of learning experiences for board members to continuously strengthen their work in three levels:

- Collective decision-making for healthcare district vitality
- Committee effectiveness
- Personal growth, effectiveness, and pride content driven by self-assessments, Brown Act, and ACHD Certification topics.

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2. Why is it important?

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- Health sector is complex and rapidly changing
- Community leaders may have limited insights into hospital fiduciary duties and board governance best practices
- Each board member is unique, as are their development needs
- ACHD Members often have a small number of board members so access to diverse expertise can be constrained
- The Board can set a tone for continuous growth and development from the top for executives, medical staff and other community leaders.

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- Lack of time and budget
- Lack of enthusiasm from CEO and Board Chairperson
- Lack of governance model to which educational programming is directed for continuous performance enhancements
- Unwillingness to borrow concepts and ideas from the boards of other service/membership industry governing bodies (Hotels, Banks, Chambers of Commerce, Colleges, Churches)
- Lack of commitment from board members to improve their work

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4. What can Boards do to be more successful?

- Establish a culture and policy frame that continuous board development is valuable and essential to the district's vitality
- Make education a part of the board member's job description
- Drive education topics by the district's strategic plan and Community Health Needs Assessment (CHNA)
- Be creative on "Faculty" from within and outside the healthcare district
- Build educational experiences around practical case studies and multi-media learning opportunities (See next slide)

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