

# COVID-19 and Health Center Boards

**FOCUS AREA:** STRENGTHENING HEALTH CENTER GOVERNANCE INFRASTRUCTURE AND PROCESSES

## Orienting New Health Center Board Members During the COVID-19 Pandemic

### BACKGROUND

During the pandemic, health center boards continue to recruit new board members who bring important patient and community perspectives, various skills, and other important elements to health center governance. Ensuring that new board members receive the information and training to prepare them for their new volunteer role is widely recognized as a good practice and is commonly referred to as “board orientation.” The COVID-19 pandemic means that boards must now host new member orientation virtually. Some boards report new members joining the board during the pandemic have expressed that they feel less confident and connected, which has resulted in adapting orientation approaches to address these unique times. *This short resource outlines how health center boards and staff that work closely with the board can adapt board orientation during the pandemic.*

### Items to Consider

Board orientation provides a new board member with information about the health center, the board, and relevant information on broader issues related to health care. During the pandemic, orientation can also include information on the impact of COVID-19 on the center and its patients. Ideally, this process helps prepare new board members to feel confident immediately contributing at board meetings and through board committees.

Many health centers have some form of board orientation program that can be adapted during the pandemic. If a center does not yet have a program, this is a good time to develop an orientation program to support new members.

Below are some considerations boards may wish to consider regarding orienting new board members during the COVID-19 pandemic:

- **Consider the technology needs of new members and how to use technology during orientation—** This includes:
  - *Ensuring all members have access to a tablet or other device that allows for participation in virtual orientation and virtual board/committee meetings—* Many health centers provide board members with a tablet or other device for participating in board meetings and other events such as orientation. In these instances, it is important to ensure new board

members receive these devices and understand how to use them.

If a center does not provide board members with a tablet or other device for board business, it is important to talk with a new board member to ensure they will be able to access board information, as well as participate in board orientation, board meetings, and committee meetings.

- *Using the same platform to conduct virtual board orientation that is used for virtual meetings—* Board orientation provides an opportunity to ensure board members are familiar with the platform that the board uses for

board meetings and committee meetings such as:<sup>1</sup>

- Go To Meeting <https://www.gotomeeting.com/>
- WebEx <https://www.webex.com/>
- Zoom <https://zoom.us/>

While many new members may already be familiar with such tools, it is important to not assume knowledge and ensure new members are comfortable with how to log-in and use components such as the mute button, video, chat, etc.

- *Considering using a platform where members can see and hear one another*—New board member orientation is not just a time to learn about the health center and board; it also offers an opportunity to develop relationships and build trust among members. This can be particularly challenging to do when meeting virtually. Agendas can incorporate time for new and seasoned board members to get to know one another and being able to see one another on a video-enabled platform (e.g, Zoom, WebEx) can help with this process. Agendas can include time for introductions, time for members to share more about themselves and their connection to the mission, as well as other “get to know you” type of exercises.

- **Continue or adapt practices that work in-person for the virtual environment**—Boards may have some practices that work well for in-person orientation that can be easily adapted for a virtual environment. For example, several boards continue to extend an invitation to all board members to participate in virtual new board member orientation so that seasoned board members may also have the opportunity to have a “refresher” on board roles. Consider tasking a committee with adapting the orientation program if this is not already part of a committee’s duties.
- **Provide background materials including the board’s handbook in advance of the session(s)**—Many boards provide written resources to new board members and this practice can continue. For example, many boards provide new members with something often called a “board handbook,” which contains important background information about the center and the board. The handbook may include items such as the bylaws, description of board roles, expectations of individual members, committee descriptions, strategic plan, conflict of interest policy and disclosure, among other items. See the National Association of Community Health Center’s **Governance Guide for Health Center Boards**, Appendix 7: Sample Topics for Board Orientation Handbook (available in English and Spanish) for a more extensive list.

- **Consider how to best structure a virtual orientation**—When designing the agenda for a virtual orientation, consider the needs of new members and the format that may work best. Below are some sample formats:

1. **Multi-session approach**—A board may opt for several short virtual orientation sessions (the appendix contains a sample agenda). Focus areas might include:
  - *Health Center Overview* covering: the mission, vision, and strategic plan; services, hours, and locations; organizational structure; and the requirements the board and health center must fulfill based on receiving federal funding.
  - *Board Roles and Culture* covering: overall board roles; how to read financial reports and look at quality data; the board’s culture; board meetings and committee schedule and practices.
  - *Healthcare Landscape & COVID-19 Impact* covering: health center issues; health care industry trends; particular opportunities and challenges facing the health center; how center services have changed given COVID-19 and the associated financial and clinical impacts so that the member feels comfortable contributing immediately to any dialogue or discussion.

1 Inclusion on the list should not, and is not intended to, imply an endorsement or recommendation of a particular vendor/consultant.

It is also important to help new members understand any “big” decisions (e.g., “strategic” or “generative” decisions) the board may have made during the pandemic.

<sup>2</sup> These topics could also be covered in a full day virtual format; it is important to include frequent breaks if using a full day virtual format.

2. **Staggered Approach**—In response to feedback that orientation programs prior to starting board service can feel “overwhelming” or “theoretical,” some boards have started using a staggered approach. This entails offering new board members a short (e.g., half-day) virtual “introductory” session prior to their first meeting that provides them with enough information and context to make thoughtful contributions. After a few board meetings, the new members receive additional “orientation” (or “re-orientation”) and more information. Boards that have used this approach say that it benefits both the new board member and the health center as the new members are able to easily connect their experience from the meetings to their ongoing

board learning (the appendix contains a sample agenda).

3. **Customized Approach**—Based on input from board members, one board began implementing a customized orientation approach for new board members. During COVID-19, this means more touchpoints throughout the process. While new members still participate in some general sessions, the board also customizes the learning to the individual. For example, if someone comes to board service with no prior financial expertise, their orientation program would include more time on that topic.

Some boards may also opt to combine various elements of these approaches depending on the size and complexity of the health center.

- **Support a “virtual” mentor or board buddy program**—Some boards assign new board members a mentor or buddy who has served on the board for some time and who can help new members become comfortable in their board role. During the pandemic, board buddies can connect by phone or video conference. It can be helpful for the buddy to check in

with the new member before and after the new member’s first few board meetings and be available for questions. This type of program can also help new members feel more “connected” by getting to know another board member quickly.

## Discussion Questions

Below are questions that board members may want to ask about new board member orientation at their health center during the pandemic:

- Do we need to adapt our new board member orientation process during the pandemic? If so, what changes are needed? What feedback did we receive from our most recent board members about their orientation process that might help?
- What do we want to maintain or adapt from our traditional orientation program during the pandemic?
- Would a “customized” orientation plan for each new board member be beneficial during the pandemic?
- How will the orientation be used to help new board members build relationships and trust with other members?

2 “Governance as Leadership” is a framework that suggests boards can operate in modes of governance: fiduciary, strategic, and generative. Most boards are comfortable in the fiduciary mode which is primarily about exercising oversight; the two other key modes for the board’s work are:

- **Strategic Mode**—This mode is focused on strategy and guides the organization from current to future state in partnership with the CEO. While a board often engages in this during strategic planning, it is not reserved solely for that process. The pandemic has, for example, presented a need to re-evaluate strategic priorities and modify strategic plans. Strategic questions include: What business model makes sense for our patients (In-person vs telehealth etc.)? What role will telehealth play in the mid- to long-term future for our center? Do we need to assess our sites and how we serve patients?
- **Generative Mode**—This mode is when the board thinks about the future and tackles questions core to its mission, vision, and values such as: Has the pandemic impacted the mission and vision of the center? Answers to generative questions often help shape fiduciary oversight and health center strategy.

For more information see, Richard Chait, William Ryan, and Barbara Taylor, *Governance as Leadership: Reframing the Work of Nonprofit Boards* (John Wiley & Sons, 2005). Also see Cathy Trower, *The Practitioner’s Guide to Governance as Leadership: Building High-Performing Nonprofit Boards* (John Wiley & Sons, 2013).

- Do new (and existing members) have access to the technology they need to participate in virtual orientation, as well as virtual board and committee meetings?
- What new topics might we need to include in orientation? For example, how can we use orientation help new members understand COVID-19 and the impact on the center? What key strategic or generative<sup>3</sup> decisions have we made this year which should be shared with new board members?
- If the center's orientation process has been staff-led, how can the board take additional ownership of the process?
- Do we have a board mentor/ buddy program? If not, would it be helpful to develop such a program now to assist new members joining the board during the pandemic? Is there a committee (e.g., Governance or Board Development) that could take the lead?
- How will we know if or when we've successfully oriented a new member?

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For additional resources from NACHC related to COVID-19, please visit <https://www.healthcenterinfo.org/priority-topics/covid-19/> and <http://www.nachc.org/coronavirus/>.

3 See footnote 2 for more discussion of “strategic” and “generative.”

## APPENDIX 1: SAMPLE MULTI-SESSION BOARD ORIENTATION

Below is a sample agenda for a multi-session virtual board orientation.

### Session 1: Welcome and Health Center Overview

1. Welcome / Getting to Know Each Other
2. Health Center History and History of the Movement
3. Current Vision, Mission, Core Values, and Strategic Plan
4. Health Center Overview
5. General Overview of the Health Resources and Services Administration (HRSA) Health Center Program
6. Questions and Answers

### Session 2: Board Roles and Culture

1. Board Duties
  - a. Overall Responsibilities
    - i. Board Roles
    - ii. Requirements from the HRSA Health Center Program regarding the role of the board
  - b. Board Member Legal Duties
2. Committees and Officer Roles
3. Board and Committee Meeting Dates
4. Board Culture and Practices
5. Audit and Financial Position
6. Quality Oversight and Data
7. Questions and Answers

### Session 3: Learning More about Healthcare and COVID-19

1. COVID-19 and Impact on the Health Center—Overview for New Board Members
2. Additional Issues Impacting the Center's Internal and External Environment
3. Questions and Answers

## APPENDIX 2: SAMPLE STAGGERED BOARD ORIENTATION

### Session 1: Prior to First Board Meeting

1. Welcome / Getting to Know Each Other
2. Health Center History and Current Vision, Mission
3. Health Center Overview
  - a. Welcome from the CEO
  - b. Services, Locations, Hours
  - c. Organizational Chart
4. General Overview of the Health Resources and Services Administration (HRSA) Health Center Program
5. Board Duties
  - a. Overall Responsibilities
  - b. Board Member Legal Duties
6. Board Meetings and Committees
  - a. Committee Overview
  - b. Board and Committee Meeting Dates
7. Board Culture and Practices
8. What to Expect—Financial Overview, Quality Data, High-level impacts of COVID-19 and Recent Key Decisions
9. Questions and Answers

### Session 2: After the Second Board Meeting

1. Continuing to Get to Know One Another
2. Answering Your Questions
3. Strategic Plan Overview
4. Board Duties—Deeper Dive
  - a. Board Roles
  - b. Requirements from the HRSA Health Center Program regarding the role of the board
5. Audit and Financial Position
6. Quality Oversight and Data
7. Questions and Answers

### Session 3: After the Third Board Meeting

1. Checking In: How is it going?
2. Answering Your Questions
3. Deeper Dive: COVID-19 and Impact on the Health Center
4. Additional Issues Impacting the Center's Internal and External Environment
5. Questions and Answers