

## Infusing Quality Throughout the Board's Agenda

The foundation for every board meeting agenda should be an expectation for all board members to be informed, engaged and actively participate in quality oversight and leadership.

To help boards properly lead in quality and patient safety efforts, the Institute for Healthcare Improvement (IHI) worked with a group of experts to establish an aspirational vision for trustees: every trustee should be able to respond to three statements in the affirmative:<sup>1</sup>

1. I understand the domains of and key concepts underlying quality care.
2. I understand the process to assess, prioritize and improve care.
3. Our board culture demonstrates a commitment to delivering quality for all patients.

Continual conversations about quality and infusing quality in every part of the board's discussion is a critical component of responding positively to these three statements.

### Keeping Quality at the Forefront

Boards can carry out their responsibility for quality and raise their own level of quality and patient safety knowledge, engagement and effectiveness by two simple steps: attaching a measure to the amount of board meeting time spent on quality, and selecting where quality is placed on the board agenda. Being conscious of the amount of governance time spent on quality will raise its prominence on the list of board priorities. Quality should be at the forefront in board discussions and decisions on virtually any agenda topic.

### How Engaged Are You?

The "Boards on Board" governance "how-to" guide from the IHI suggests that boards typically fall into one of four categories in their quality accountabilities.<sup>2</sup> The IHI considered board engagement in improving quality and safety, effectiveness, and understanding of quality principles. The four board categories they identify are listed below.

Do you know where your board falls? If you aren't sure, a comprehensive board self-assessment is a good place to start.

1. **Actively engaged and capable:** Already leading a high-performance organization and wondering how they can do their board work even better.
2. **Actively engaged:** Often showing that commitment through a high-profile event, but needing a much stronger foundation for continual work on improvement.
3. **Not fully engaged, but having strong, latent capabilities and talent on the board:** Looking to light a fire with the full board, but not sure how to proceed.
4. **Neither engaged nor capable:** Feeling quality is just fine; viewing quality of care as not the board's proper business, but rather that of the medical and executive leadership.

## Board Information: The Key to Quality Knowledge

Hospital and health system boards should have materials and information that will enhance their quality discussions and support their governance efforts. These materials should include a comprehensive quality dashboard (focused not on only inpatient care) that includes key indicators of clinical quality, patient safety and satisfaction, employee and staff satisfaction, turnover and vacancies.

**Background Information.** Boards should also regularly receive background materials to strengthen their understanding of quality and patient safety. These materials should include articles about quality, governance practices in relation to quality, emerging industry trends, legal and regulatory requirements regarding quality, and quality processes and practices from other industries that might be applied in the hospital setting.

**Tracking the "Right Measures."** As information about health care quality continues to grow, senior leaders, medical staff leaders and board members must determine what's the most important information to regularly track and discuss. The American Hospital Association recommends leadership conversations to narrow the focus not on "more measures" but rather on the "right measures" to meet the unique needs of each organization and the community it serves.<sup>3</sup>

Measures should be selected that help the board answer the following questions:<sup>3</sup>

- How effective and patient-centered is our care from the patient's point of view?
- Is the range of services we provide meeting the needs of our patient population?

- How effective are we at being a good steward of health care resources?
- How effective are we at meeting the needs of our community and promoting community well-being?
- How effective are we at meeting the needs and promoting the well-being of our workforce?

**Information that Encourages the Right Conversations.** Boards should track, receive and discuss information that leads to productive conversations about:<sup>3</sup>

- The patient experience of care;
- Workforce engagement and safety;
- The continuum of care;
- The value of care provided; and
- Community health.

### How Would Your Board Respond?

The Institute for Healthcare Improvement's vision is that every board member responds with a "yes" to the three statements below.<sup>1</sup> How would your board respond? Do your board agendas and conversations reflect this vision?



## Making the Quality Connection: Proactive Discussion in All Board Meetings

Informed, engaged and active participation in quality oversight and leadership should be the foundation for every board agenda. Agendas should include regular reviews of reports or dashboards on quality and patient safety. Agendas should also address the board's responsibility for setting performance goals for quality and safety, and hold managers accountable for achieving those goals.

Even with specific agenda items dedicated to quality, the board's focus on quality should be infused throughout the discussion. Nearly every topic has quality and patient safety implications, whether it is finance, human resources, medical staff credentialing, physician partnerships, or compliance with regulatory standards.

### *Embedding Quality into Finance Discussions.*

Without the proper financial resources, consistent quality of care is not possible. Adequate resources must be devoted to quality and patient safety

### The Goal: "Quality Literacy"

A critical tool for advancing quality is continuing governance education and knowledge-building. The goal is to build the board's "quality literacy."

- Does your new trustee orientation emphasize quality?
- Does the orientation address quality reports and dashboards, quality trends, a summary of legal and regulatory quality mandates, an explanation of quality terms and acronyms?
- Does your orientation include a review of your hospital's quality program?
- Have you considered assigning new trustees to the Quality Committee to provide them with a deeper understanding of the hospital's quality commitment and efforts?

improvement, technology upgrades, ongoing education and employee engagement. Boards must monitor capital spending related to quality, ensuring that investments made result in positive quality and patient safety outcomes.

The impact of expense reductions on quality and patient safety must also be considered in finance discussions. In today's increasingly pay-for-value environment, budget cuts in one area may result in a reduction in expenses but may also lead to negative quality implications that ultimately impact revenue or reimbursement. Boards must be able to make the "quality connection" to cost, identifying how quality of care may impact reimbursement and overall operating revenue.

### *Embedding Quality into Compliance Discussions.*

One of the board's responsibilities is to assure the accuracy of mandated data reports by implementing and utilizing internal controls to gather and report data accurately and on time. The board must ensure that quality is integrated into its policies and the organization's operations. Board members must be able to monitor the organization's compliance with standards and regulations, which means securing the right information from the medical staff and employees to help improve the chances for informed dialogue.

The board must also consider newer laws and regulations and their impact on the organization's delivery of quality care. As health care reform and its components are implemented, compliance discussions will increasingly need to be at the top of meeting agendas.

**Boards must be able to make the "quality connection" to cost, identifying how quality of care may impact reimbursement and overall operating revenue.**

### *Embedding Quality into Human Resources*

**Discussions.** To ensure a workforce dedicated to quality and patient safety improvement, boards must make an investment in quality proficiency. This begins with implementing an “on-boarding” plan that introduces new hires to the organization’s quality and patient safety philosophy, guidelines, quality metrics, and improvement plans. Human resources discussions must also consider the need to budget for training and development plans for existing employees to gain additional skills that will help improve quality and patient safety such as learning about high reliability, Lean and Six Sigma.

The board should also regularly measure employee engagement, satisfaction and turnover rates, and evaluate how those measure in relation to comparable organizations. Employee satisfaction and retention not only have financial implications; they have the potential to significantly impact the organization’s quality of care. By including employee participation in quality and patient safety improvement planning and boosting employee morale, the board can enable a strong workforce is in place to provide high-quality care.

***Taking Quality Discussions to the Next Level.*** The board should devote time at board meetings to hear about quality failures and ‘near misses’ from the medical staff, employees and patients. Board members should discuss root cause analyses (RCAs) and failure mode effect analyses (FMEAs) to identify ways to prevent these failures and ‘near misses’. They should also look deeply into the quality dashboard, closely examining where pre-defined goals are not being attained, and ask probing questions about why those goals are not being met. Is there a staffing failure? A process failure? Is it a one-time ‘blip’, or a long-term issue? Is there a systemic issue, or is the problem isolated in one area in the hospital? Answering these questions will require a close and trusting partnership with the

## CEO and Medical Staff Support

The CEO and medical staff leaders can support the board’s efforts by:

- Working closely with the board chair to set the agenda for quality discussions.
- Including medical staff perspective in reports, materials and information. This perspective should include an explanation of the significance of the information, and its relevance or impact on the hospital.
- Anticipating the board’s questions, and including explanations or answers in presentations.
- Bringing forward best practices to share or recommend to the board, contrasting them with current hospital practices and providing an evaluation of resources required to implement any changes.
- Being on the lookout for emerging trends, calling the board’s attention to them, and putting them into context.
- Recommending readings, conferences, workshops or other quality-related events that will further the board’s quality literacy and governance capability.
- Ensuring that the board and medical staff are aligned and working collaboratively in the pursuit of quality and safety.

medical staff and hospital employees, as will resolving the issues once they are identified.

Although the board should not be involved in the daily operations of resolving quality issues, trustees need to understand the resources that are necessary to address the shortcomings identified. The board’s commitment to allocate the resources necessary and follow up on their impact is a tangible demonstration of their commitment to quality and patient safety to the medical staff and hospital employees.

## Infusing Quality Throughout the Agenda: Sample Agenda Discussion Topics

### *Finance*

- Do quality initiatives have adequate resources?
- How does capital spending directly improve quality?
- What would any budget cuts or changes mean to quality and patient safety?
- When you review financial performance, are you making the “quality connection?”

### *Compliance*

- How are you ensuring that mandated data reports are timely and accurate? What internal controls do you have? Is there an internal audit of this function?
- How well integrated is quality in your policies and operations?
- Are you getting the right information, and are you analyzing and discussing it?
- What new laws or regulations have been implemented or are under consideration, and how would they affect you?

### *Human Resources*

- How are you investing in quality proficiency throughout our workforce?
- Does your “on-boarding” plan for new hires (including medical staff and house staff) include a focus on the hospital's quality initiatives and their significance?
- What new skills are needed? Plan? Budget?
- How do your employee satisfaction levels or turnover rates compare to benchmarks for comparable organizations?
- How does turnover affect the quality of care you provide?

### *Quality and Patient Safety*

- Do you devote time at every board meeting to hear about a quality failure or near-miss?
- Do you discuss root cause analyses (retrospective) and failure mode effects analyses (proactive) for significant adverse events?
- Do you “connect the dots” on the quality dashboard?

### *Education*

- Do you invest time in building board-wide quality literacy?

### *Administrative Report*

- Does the CEO's report include an executive briefing on a quality-related subject?

## Sources and Additional Information

1. Daley Ullem E, Gandhi TK, Mate K, Whittington J, Renton M, Huebner J. Framework for Effective Board Governance of Health System Quality. IHI White Paper. Boston, Massachusetts: Institute for Healthcare Improvement; 2018. [www.ihl.org](http://www.ihl.org).
2. 5 Million Lives Campaign. Getting Started Kit: Governance Leadership "Boards on Board" How-to Guide. Cambridge, MA: Institute for Healthcare Improvement; 2008. [www.ihl.org](http://www.ihl.org).
3. Yates, Gary R. Helping Boards Have Productive Discussions about Quality of Care. *Trustee Insights*. American Hospital Association. September 2019. [www.aha.org](http://www.aha.org).

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