Board Portals: Are They Improving Governance Effectiveness?

by Mary K. Totten

While most health care governing boards may still rely on paper packets and board agenda books for board and committee meetings, adoption of board portals—Web-based, online workspaces that support health care governance—appears to be catching up with use in other sectors. A 2006 study (Wall Street Journal, October 23, 2006) estimated that about one in five companies were then using board portals—that’s about the level of today’s usage for health care boards, estimates John McLeod, senior director of web services and delivery for Care Tech Solutions, based in Troy, Mich., which offers the BoardNet portal. “The number of portals available today for health care boards has escalated due to the need for better security, availability of real-time data, utility in attracting younger board members and a stricter regulatory environment focusing on compliance with HIPAA and other requirements,” he says.

Articles and publications abound on portal features and on using, selecting or building a board portal. But, what do today’s governance staff and board members say about their impact on governance? Are they helping boards govern better? With usage rates in the low double digits, the long-term impact of board portals on governance effectiveness remains to be seen, but early returns are promising.

“The major advantage for us has been the phenomenal resource savings we have achieved from using a board portal,” says Lisa Bond-Holland, director of governance at Catholic Health East (CHE) based in Newtown Square, Penn., which uses the BoardEffect portal for the system board and a growing number of its regional health corporation boards. “Trustees are more likely to fulfill their fiduciary responsibility for due diligence if they have a user-friendly way to transport and review meeting materials,” she says.

According to Cliff, with a wealth of information only a click away, the portal helps trustees to be better informed for board discussions and decision-making. She also says her board is gearing up to take advantage of the secure online discussion forum their portal provides so that they have another way to handle sensitive or challenging issues that cannot be discussed using e-mail.

Robert Waite, Ed.D., assistant dean of academic integration and evaluation of community programs at Drexel University in Philadelphia and a CHE system board member, says real-time access to board materials using the iPad, especially during board meetings, is easy and more efficient than using the paper-based board books of the past. While she plans to make greater use of portal features such as the ability to annotate meeting materials, she views her board to be in the “first stage” of portal adoption focused on achieving greater efficiency for meeting preparation.

CHE’s Bond-Holland confirms that the system board primarily uses the portal for meeting-related activities. While CHE’s portal offers features such as online discussion forums, annotation, bookmarking documents for later reference, document search and online voting,
Bond-Holland says it is unclear how extensively system board members use these features. She is planning to survey the system board this spring after a year of portal use to determine what additional features board members want to adopt or other enhancements they would like to have available.

Due to the cost of commercially available portals and uncertainty about how extensively board members would use a variety of features, Enloe Medical Center in Chico, Calif. began building their own board portal in 2006 with input from board members and support from the hospital’s IT department and a local IT vendor. Despite availability of board meeting materials, a repository of board reference resources and a document search capability, the portal was underutilized, according to Henri Henderson, executive administrative assistant, until documents were able to be uploaded in an annotatable format and board members could use iPads to access them.

Henderson notes the need to “keep it simple,” and provide orientation and ongoing refresher training for trustees to promote continued use of the portal, especially when changes or upgrades result in new navigation language or other functions that may need clarification. Henderson emails board members weekly about new information, such as dates for board meetings and other hospital activities, which appear on the portal. “We have been happy with what we have,” she says, “but if our upcoming survey of board members’ portal needs identifies new functions we can’t develop or our storage needs exceed our capabilities, we may look into commercially available portals.”

The box below includes questions boards and governance staff can ask to evaluate implementing and sustaining use of a board portal. Here are some suggestions for boards and governance staff to consider to get the most out of adopting a portal:

- Involve board members, the CEO and board support staff in conducting a needs assessment upfront to determine what features and functions board members most want and are likely to use. Take into account longer term needs such as storage capacity that could result in costly upgrades down the line. Conducting periodic assessments also can uncover new needs and portal capabilities that may be helpful for more seasoned users.
- Define the criteria that a board portal must meet. Consider factors such as the needs of the board, ease of use, number of overall users and whether the portal will serve one or multiple boards, and available budget to purchase and maintain the portal. Also look for a portal that offers features, such as creation of member lists, a document repository, access through a tablet or smartphone, and 24/7 technical support, that fit the needs of health care board members.
- Involve the hospital’s IT department. If they are involved from the start, hospital IT staff can be very helpful in supporting ongoing use of a portal.
- If your board is considering a commercially available portal, look for a vendor organization that has a work culture similar to your hospital’s culture, will be responsive to your needs and be willing to develop enhancements to the portal based on customer recommendations. Board-Net conducts a quarterly review of client needs and feedback—the addition of an annotation capability and online discussion forum resulted from client suggestions.
- Ensure that board members get initial and ongoing, one-on-one training in a manner that suits their learning style. Trustees who are not technologically adept may need extra help and even tech-savvy board members can be overwhelmed with “feature overload.”
- Give trustees time to acclimate. Providing back-up paper copies of board materials for a meeting or two might give board members the time they need to get comfortable with a paperless environment and avoid unnecessary embarrassment or frustration for them. At the same time, empower board members with adequate training and support to make the change in a timely way.

Mary K. Totten can be reached at marykaytotten@gmail.com.

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**Questions for Adopting and Sustaining Use of a Board Portal**

1. Is our board leading adoption/continuing to support use of our portal?
2. Is our portal easy to use?
3. Have we adequately supported board members to transfer to a paperless governance environment in a timely manner?
4. Will/do we use all of the “bells and whistles” a portal can provide?
5. Is our portal cost-effective? (For example, does our vendor charge per user or provide access for an unlimited number of users?)
6. Are different versions of the portal needed for use on iPad/tablet, laptop computer or other devices?
7. How effectively does our vendor support our portal (for example, 24/7 help desk, ongoing training for users, etc.)?
8. Do we orient new board members and continue to refresh existing trustees about portal use?
9. Do we have the support needed from our hospital’s IT department to build and/or effectively support a board portal?
10. Are we satisfied with the level of security our portal provides?
11. Is our portal’s storage capacity adequate for the foreseeable future?
12. Do we continue to ask board members how the portal can better support them in fulfilling their governance responsibilities?