

Trustee Insights

BOARD DEVELOPMENT



Wonder, Wander and Round *Intentionally*

Four leaders speak to how rounding provides valuable insight

BY TODD LINDEN

“Not all those who wander are lost.” — The Lord of the Rings: The Fellowship of the Ring.

One key to an engaged and active hospital board is to find appropriate opportunities for board members to interact with hospital employees and medical staff members.

An effective way to do this is through rounding; some hospitals call it a board visit or a walk-in-the-shoes experience. No matter what you call

it, it can make a difference.

Through this intentional process, board members will learn so much more than they can around the boardroom table. It's also a great way to get members out of the boardroom and onto the hospital floor. And you don't even need a magical hobbit from J.R.R. Tolkien's world to conjure this scene. All you need is

Roundtable

conviction, purpose and a little planning to leave the echo chambers of board meetings and hear directly from team members what the job is truly like.

By making the effort, board members will hear about wonderful things happening in their hospitals. They'll learn about those who provide patient care, support roles and

witness firsthand innovations that save lives and make a difference in the communities they serve.

Best of all, the experience will also provide board members with important context when making decisions in the boardroom.

Making the Rounds

The hospital's culture is an essential element of a high-performing organization. A structured and thoughtfully implemented governance initiative like a walk-in-the-shoes experience can help the board gain direct insight into an organization. It also offers an opportunity to show the board's appreciation for the hospital workforce, informs individual board members how things work in the hospital they govern and lets them absorb the organizational culture firsthand.

After recommending board rounding as a board engagement strategy to Memorial Regional Health (MRH) in Craig, Colo., I spoke to four leaders about their experiences with this practice:

- **Denise Arola**, chair, Memorial Regional Health Board of Trustees, and retired MRH financial officer
- **Steve Hilley**, county representative, Memorial Regional Health Board of Trustees, and clinical advisor for the Northwest Region Healthcare Coalition
- **Allen Reishus, M.D.**, vice chair, Memorial Regional Health Board of Trustees, and retired family

medicine physician

- **Jennifer Riley, M.H.A.**, chief executive officer, Memorial Regional Health

In this article, the team shares insights on how Memorial Regional Health implements board visits and offers advice for other hospitals considering a walk-in-the-shoes program.

Todd Linden: *Talk about your walk-in-the-shoes/rounding experience.*

Arola: Each month, one board member is scheduled to visit at least two departments. I personally checked with the CEO to determine which departments haven't been visited in a while. The managers provide a tour of their department and share services provided and any special highlights they feel are important for us to know.

Hilley: Doing facility rounding is written in our bylaws. The intent of the scheduled visitation is to ascertain observable insight into the quality of care at the facility. It is not to engage in the assessment of operational areas, employee job performance issues or financial information. It is an invaluable opportunity to learn how each department operates. More than an obligation from our bylaws, facility rounding gives the board of trustees exclusive access and 1-on-1 time with the employees who are doing incredible work every day. Overall, it's an opportunity that makes our facility a better place for our board, staff and the community we serve.

Reishus: Making hospital department visits has been one of my highlights of serving on the board. I have made six visits so far and have

Roundtable Participants



Denise Arola, chair, Memorial Regional Health Board of Trustees, and retired MRH financial officer



Allen Reishus, M.D., vice chair, Memorial Regional Health Board of Trustees, and retired family medicine physician



Steve Hilley, county representative, Memorial Regional Health Board of Trustees, and clinical advisor for the Northwest Region Healthcare Coalition



Jennifer Riley, M.H.A., chief executive officer, Memorial Regional Health

a much better understanding of how things work in the departments I have visited.

Riley: One of our trustees visits the facility twice per month. Each trustee selects the department they want to visit, and it is coordinated by me or my executive assistant. We typically have the department manager facilitate the visit, which often includes a tour of the department and introductions to staff. The board member then reports to the board at the next meeting. Before the board implemented this rounding program, we talked about the importance of listening and that if a problem was identified it needed to be shared with me for resolution. So far, nothing but positive feedback has come from the visits.

Linden: *What strategies do you believe are most effective when doing a walk-in-the-shoes/rounding experience?*

Arola: It's important for managers (and any staff) to know the visits are a learning experience for the board. We are not there to

evaluate or judge, but to become more familiar with the department. During the tours, I ask a lot of questions about the services as well as any challenges they have. For me, the more casual the conversation, the more I learn.

Hilley: The best advice I can give to any board member considering facility rounding is to offer complete and uninterrupted active listening to the staff. Members of the hospital staff at your health care facility are looking to be heard. Listen and consider all points of view. Make sure you are prepared for the visit with a notebook and pencil. Be inquisitive and ask important questions.

Reishus: These visits give me an opportunity to personally thank the staff for all they do and to show some appreciation on behalf of the whole board. It puts a smile on people's faces when I tell them how important they are to the citizens we serve. We report back to the entire board about our visits. Getting insights from other board members about their visits is also extremely

beneficial for our overall learning about the organization. We think these trustee visits are so important we made them part of our board policies. We have divided up the entire organization so that each area is visited, and board members get a much deeper understanding of the hospital.

Linden: *What did you like most about the experience?*

Arola: I love the interaction with the managers and learning more details about each department. As a former hospital employee, I thought I had more knowledge about each department. I was so wrong! I have been amazed by all the services each department provides.

Hilley: The experiences that were most satisfying when doing the facility rounding were hearing about how the employees are doing in their departments.

Riley: I like that this gives the board members an opportunity to see more than just data related to a department. It gives them a chance to meet the people providing care and services, ask them questions and hear about successes and wins. I had one board member who was questioning the value of a department based on the monthly volume of patients served. When that board member rounded and got to meet the provider and learned about all the services and patients served, they came away with a different view.

Linden: *What did you learn from the people you interacted with in the department? What were examples of things you shared with the full board when you reported on your rounding experience?*

How to Conduct a Walk-in-the-shoes Experience

- 1. Conduct rounding regularly.** This allows board members to observe and learn about hospital operations and culture firsthand. Rotate board members through different departments at a frequency that makes sense for the size of the hospital's board.
- 2. Plan and make this an intentional, scheduled activity.** Schedule the visit with the department leaders in advance to prepare staff, explaining the purpose of the visit.
- 3. Get a tour.** This allows board members to observe the hospital's environment and workflow.
- 4. Be authentic and observe intently.** During the visit, have board members introduce themselves and share their roles. Allow board members to shadow staff and ask questions about their day-to-day work.
- 5. Ask open-ended questions.** Focus questions on understanding staff roles, challenges and ideas for improvement.
- 6. Include a hospital leader in the process.** Have a C-suite member accompany board members to help field operational questions. Emphasize visits are for learning, not evaluations.
- 7. Reflect.** Share visit highlights at board meetings. Use insights to inform board decisions and strategy.
- 8. Celebrate.** Share details about the visits on the hospital's social media channels, newsletters and employee communications (make sure to follow all HIPAA regulations!) to educate staff on board governance and build engagement.

The key is to structure the program thoughtfully, communicate its purpose and continually evaluate its effectiveness to maximize benefits for both board education and staff engagement.

Arola: They are all passionate about what they do.

Hilley: On a visit with the infection prevention department, we had great discussions on post-COVID lessons learned and how the infection prevention policies affected the staff. A wonderful place for board members to start their visitation and rounding efforts is to join new employee orientation. It is a great precedent to set for future relationship-building with the employees. I also had lunch at the hospital with a few employees. I had no goal in mind except to watch and witness

staff interactions. The observation I had is that the staff at the hospital are very happy, lots of smiles and laughter and it reflects the CEO and senior management.

Reishus: There is a lot of benefit for the department leader as well. They are typically thrilled to have the attention directed at their team.

Linden: *What advice do you have for a board or staff member thinking of doing this? Would you do it again?*

Arola: Just do it! We can be better board members by participating in this learning experience

rather than just meeting once a month in the board room. I have personally visited four departments so far and look forward to more.

Hilley: I would absolutely take advantage of any chance you can to schedule visits to the various departments in your facility. It is a true pleasure to meet the employees working daily to care for patients, family, friends and visitors. The only way you can learn how to apply strategic leadership and policy skills in your facility is to have these critical 1

on1 discussions with the employees in your facility.

Reishus: I highly recommend all boards do these structured visits. They should be set up by the administration in advance, not only to legitimize the visit but also to assure the department that it's not a "hit" or "gotcha" visit but rather an opportunity for the board to learn more about the department.

Riley: This is an incredibly valuable activity. It gives the board members insight into the day-to-day

activities of the organization. It also helps our staff get to know the people who are serving as our community's liaisons to the organization.

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