

Published by Physician Practice Roundtable

Characteristics of an ideal board member

Structured brainstorm

Description: A group discussion to generate a list of characteristics in ideal board members.

Goal: The output of this discussion can be used as criteria for a nominating committee to assess future board members against or to help identify where the current board needs additional expertise. Setting these criteria provides transparency for all physicians into how board members are selected and builds trust between shareholder physicians and the board.

Necessary materials:

- 1. Flipchart
- 2. Markers
- 3. Dot stickers

Participants: This exercise can be completed with all physicians or just with the current board.

Facilitation guidance:

- In advance of the meeting, use your flipchart to list characteristics of an ideal board member. The goal is to have a starter list, but it does not have to be comprehensive. Page 2 of this worksheet includes a list of characteristics you can choose from.
- 2. At the start of the exercise, spend **five minutes** sharing the reason for completing this exercise, instructions, and time limits for each section of the exercise. Answer questions.
- 3. Introduce your example characteristics and give participants **two minutes** to read the list and brainstorm additional characteristics they would like to add. This helps generate a wider range of ideas, and the time limit is shown to boost creativity.
- 4. Ask participants to choose the top three characteristics that they would like to add to the list. Ask each participant to share at least one and up to to three additional characteristics, and add those to the flipchart. Try to ensure that every participant has an opportunity to add at least one characteristic during this brainstorming session.
- 5. Give each participant **three stickers** and ask them to place the dots on the characteristics that are the most important for a board member.
- 6. The exercise should identify 10-12 of the top characteristics the nominating committee should assess in potential candidates. **If the exercise results in too many characteristics** with dots, give participants one additional sticker and have them re-vote on their top one.
- **7.** In follow-up, circulate the list of characteristics to all physicians. Explain that this is the list of characteristics that the nominating committee will now look for in every board member.

Tip: Many boards use this exercise when there is distrust between shareholder physicians and the board. Agreeing on characteristics for board members together can help reassure physicians that the nominating committee is selecting reliable, experienced board members.

Tip: You can adjust this number depending on how many participants are in your meeting. For smaller board meetings, we suggest three stickers. For larger allphysician meetings, we suggest 1-2 stickers.

Sample ideal board member characteristics

Traits needed in every board member at all times

Use this list if you are trying to identify evergreen traits for the nominating committee to assess

Prior history

- Adequate time spent as a shareholder
- Prior committee service, other group leadership
- · Completion of educational requirements
- Strong clinical, financial performance
- Absence of complaints related to quality, service
- Leadership, board service in broader community

Personal qualities

- Understands, shares stated group-level values
- · Identifies with organization as a whole
- Capable of innovative, strategic thinking
- Not afraid to challenge peers in discussion
- Patient-centered
- Understands community needs
- Perceived as leader, able to influence peers
- Strong relationship-building, collaborative skills
- · Comfortable with leading change
- High aptitude for, and open to, continual learning

Traits that may be needed depending on current board conditions, strategic concerns

Use this list if you are trying to do a gap analysis to diversify expertise on the board

Demographic profile

- Specialty
- Geographic basis
- Tenure in group
- Gender
- Race
- Age

Areas of expertise

- Strategic planning
- Contract management and payer relations
- Principles of value-based care, health reform
- Medical group economics
- Physician compensation
- Pension, benefit, and staff planning
- Investment and capital management
- Financial document analysis
- Clinical quality, process improvement
- · Hospital relations
- Expertise relevant to current strategic initiatives (e.g., analytics, ASC management)

Source: Advisory Board interviews and analysis.



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