



The Dynamic GC Office

How Technology is Re-Shaping Best
Practices in the Boardroom

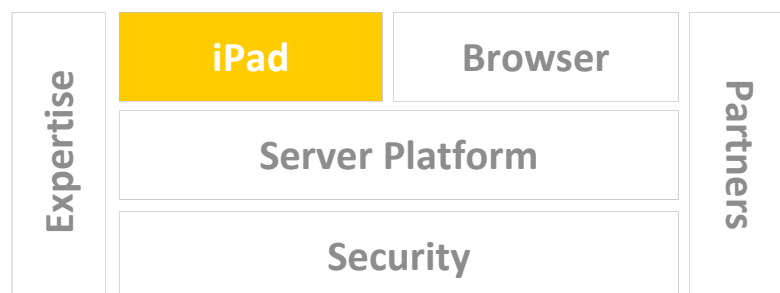
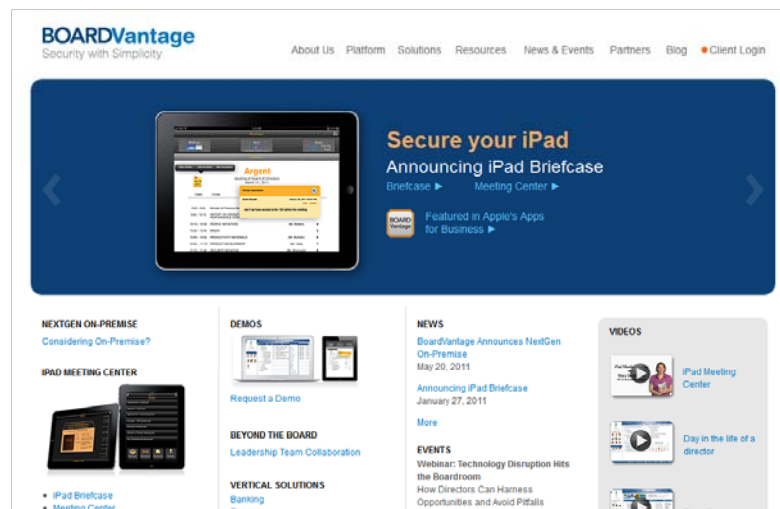
Mary De Frenchi – VP of Accounts BoardVantage

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December 14, 2011

BoardVantage Snapshot

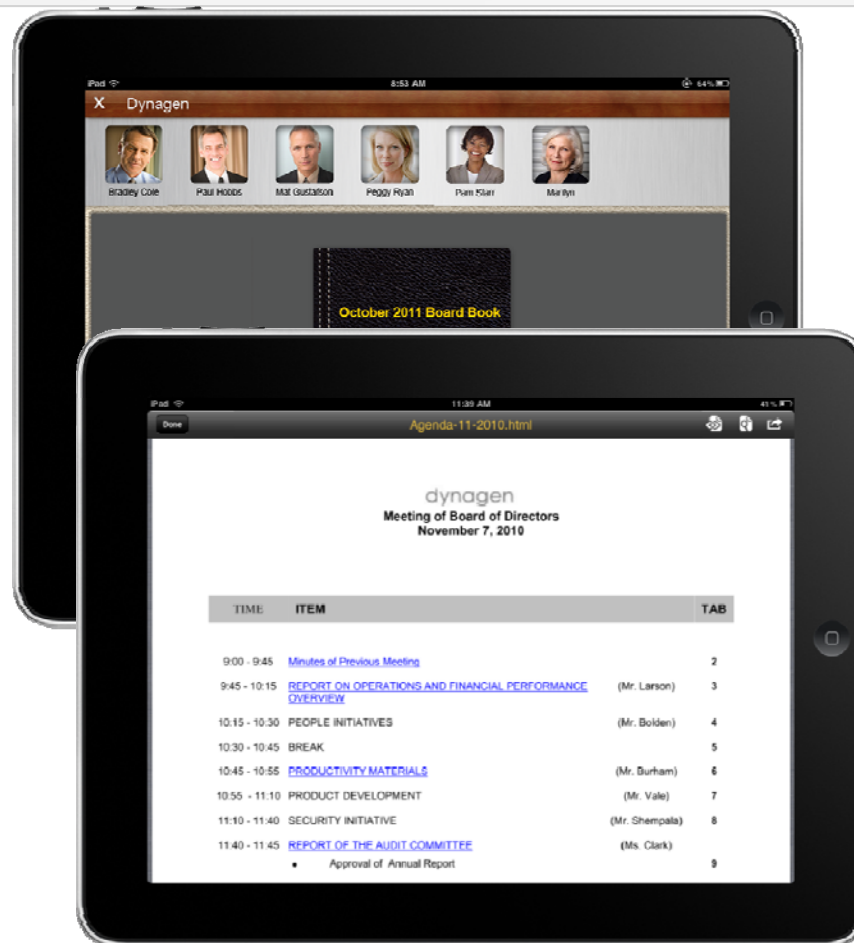
- BoardVantage
 - Marquee provider of board portals
 - Browser and iPad
 - Boards and Leadership Teams
 - Menlo Park, CA based
 - Offices in the US, Europe and Asia
- Technology
 - Frontend
 - iPad for directors
 - Toolkit for admin
 - Backend
 - Security
 - Platform



Featured on Apple's Website

Why a board portal?

- Portal Attributes
 - Online access for directors
 - Toolkit for the CS
 - High-caliber security
- Most common use case
 - Access to current meeting materials
 - Annotation
 - Access to previous meetings
- Other popular use cases
 - Consents, questionnaires,
- Browser and iPad



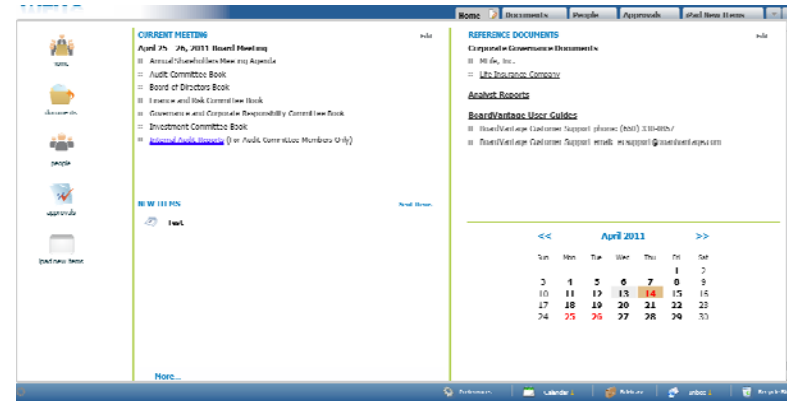
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What tools does the GC office need?

- Board book creation
 - Native documents
 - One click assembly
 - Last minute changes
- Control
 - Role based permissions
 - Remote purging of notes and documents
 - Access to archived materials
- Dashboards
 - Consents, questionnaires,
- Browser and iPad



Due diligence

- Web Demo
 - Familiarization
- Test instance
 - In-depth understanding of user experience and functionality
 - Typically 2 weeks
- Security Review
 - Excellence in security

| Threats | Email | Cloud | Homegrown | Paper | Portal |
|-------------|-------|-------|-----------|-------|--------|
| Hacking | ● | ● | ● | ● | ● ● |
| Sabotage | ● | ● | ● | ● | ● ● |
| Human Error | ● | ● | ● | ● | ● ● |
| Discovery | ● | ● | ● | ● | ● ● |

Systemically
Insecure

Practically
Insecure

| Security Do's | Security Don'ts |
|-------------------------------|---------------------------|
| Linux Stack | Email, Cloud or Homegrown |
| No Vendor Access to Content | |
| Third Party Penetration Tests | |
| Audits by F-100 customers | Windows Stack in a Portal |
| Innovation | |

Potential Obstacles

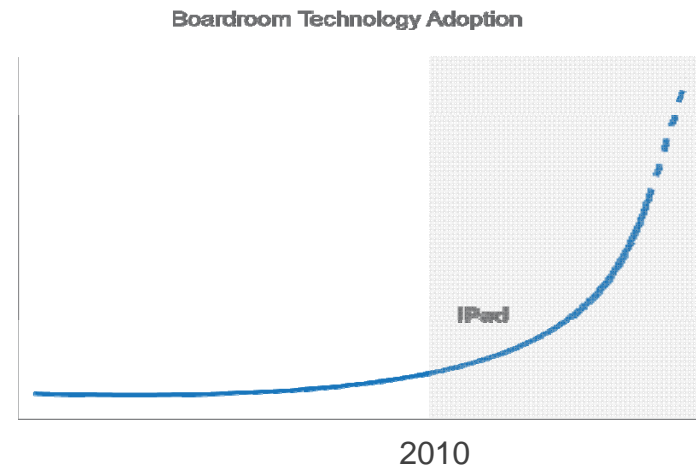
- Boardroom network bandwidth
 - In need of an upgrade
- iTunes
 - Directors unfamiliar with the environment
- Learning curve
 - CS Office and IT

Are companies doing away with paper or running in parallel?

- The approach has changed recently
 - Previously most boards ran in parallel indefinitely
 - Some boards switched after an extended transition
- Boards now switch quickly from paper to electronic
 - Following a brief transition
 - Driven by the iPad
- Transition period is often only a single meeting

IPad Effect

- The iPad has transformed the meeting experience
- Usability threshold has been crossed
 - Immediacy of electronic communication
 - Readability and familiarity of print
- Superior to browser and superior to print



Can board portals handle 6 inch thick board books?

- There are no constraints on the capacity of a good board portal
- There are bandwidth constraints
 - Wifi and 3G
- Large board books downloaded simultaneously will bog down the network
- BoardVantage recommends use of the offline briefcase

Are boards holding their meeting on ipads?

- Typical environment is as follows
- GC projects image on large screen
- Directors follow along on their iPads
- Consulting their notes

Won't notes be discoverable?

- The best technology permits full implementation of the customers retention policies
- Director can remove notes individually
- Corporate secretary staff can remove notes collectively
- Notes can even be purged even if the device is lost or stolen

What are the steps starting with initial interest to holding your first board meeting?

1. Initial Web demo
 - With project manager
2. Socializing at the customer
 - Review of documentation and 'day-in-the-life' videos
3. Follow-on Web demo
 - With executive sponsors
4. Test instance
 - Depends on customer
5. Documentation review
 - Security
6. Documentation review
 - Security
7. Contract
 - Determination of users
8. Provisioning
 - Adding users
9. Director Training
 - Fifteen minutes
10. Board meeting



Hamilton Health Sciences



- Family of 6 hospitals, a Regional Rehabilitation Centre and a Cancer Centre
- Serves residents of Hamilton, Central South and Central West Ontario, more than 2.3 million residents
- Hospital operation revenues of \$1 billion plus \$220M in annual research revenues.
- Major teaching hospital of McMaster University Faculty of Health Sciences

Beds in operation

(as of April 4, 2011)

| | |
|---------------|-------|
| ▪ General | 392 |
| ▪ Juravinski | 317 |
| ▪ McMaster | 202 |
| ▪ Chedoke | 0 |
| ▪ Villa | 24 |
| ▪ St. Peter's | 220 |
| Total | 1,155 |

Service Levels (2010/11)

| | |
|---|---------|
| ▪ Inpatient Cases | 42,100 |
| ▪ ER Visits | 114,778 |
| ▪ Births | 2,922* |
| ▪ Ambulatory Care Visits (excluding ED) | 665,058 |



Hamilton Health Sciences

*estimated, not final



Policy Makers

- Board of Directors (skills-based Board)
 - 15 elected directors (community)
 - Accountants / Lawyers
 - Business Leaders
 - 5 ex officio directors
 - 3 physicians
 - 1 nurse
 - 1 administrator



Define

Q1: How do we know that an opportunity or problem exists?

Background and case for improvement

Q2: What are we trying to accomplish?

Aims (overarching, specific/measurable targets)

Q3: How will we know a change is an improvement?

Measurements (qualitative, quantitative)

Q4: What changes will result in an improvement?

Changes to processes, variables, resources, practices

Define



State your recommendations or decision to continue with adoption/spread, make adaptations/adjustments, or abandon implementation

Conclusion as to the extent to which testing or implementation is optimizing results/outcomes

Identify and organize the people/resources/tasks/data collection/analysis (who, what where, when); engage, educate, communicate with stakeholders

Execute the change; track progress, collect, collate, sort, chart/graph analyze data (apply statistical tools and rules)

Plan



Vendor Selection

- Conduct literature search
 - Develop comparator matrix
- Understand the user needs
 - Determine what the director is looking for
- Five product demonstrations with co-chairs
- Short list vendors (three) for demonstrations with steering team



Hamilton Health Sciences

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Hamilton Health Sciences

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Vendor Selection

- Functionality
 - Agenda and supporting document linkage
 - Ability to make notes, bookmarks, comments
 - Printing of package / pages
 - Searchability
 - Notification
- Supporting services available
 - Calendars / polling / voting / surveys / chat room / directory, etc.
- Product support / security
 - Service hours
 - Server / backup / encryption / discoverability / provider access to confidential data





Vendor Selection

- Education for administrator / directors
 - Training and education
 - Group vs. one on one
- Pricing
 - Flat fee vs. charge per member
 - Set up fees
 - Training / education costs
 - Ability to unbundle
 - Upgrade costs to organization





Plan

- Communication
 - Updates on plan at every board meeting
- Education for the administrator
- Populate the Portal
- Ensure infrastructure is in place
 - Internal (i.e. access to internet) and external (users technology)
- Educate the directors
 - as close as possible to go live date
- Pilot one board meeting with co-chairs
 - review outcomes
 - adopt or adapt any changes necessary to improve



Do



- Total on line implementation at board meeting
- Bring committees on line within next two months
- Continue to study and make small improvement changes as required
- Collect data
- Develop evaluation survey
 - Are you better able to access information more efficiently
 - Are you utilizing the portal as expected
 - Are you better prepared for discussions and decision making
- Analyze data



Study



- Share data analysis with Governance Committee
- Determine achievement of overarching and specific aims
- Development options / actions for consideration by Board of Directors



Act



- Decision on achievement of overarching aim by Board of Directors
- Next Steps



How do we know that a problem or opportunity exists?

- HHS is committed to making the most effective and efficient use of the skills, knowledge, time and dedication of its Board members.
- Recent interest in the application of eGovernance technology (on-line board portals) to improve both information flow and work flow at the Board-level.
- In the spirit of the recently launched corporate Quality Framework, the Board launched an improvement initiative focussed upon its own key processes.

Like the dozens of recently launched Quality Frameworks, councils and other initiatives across HHS, the Board applied the organization's common language for continuous improvement: **Define PDSA** (based upon the Institute for Healthcare Improvement's internationally recognized model).

Hamilton Health Sciences Change and Quality Improvement Model

Define



Environmentally Friendly

Do

- Education and training sessions held.
- First "live" sessions included paper back-up.
- Wireless connectivity issues experienced.
- Some continued to receive paper packages.
- Board surveyed after 6 months for feedback.

Study

- Level of satisfaction varied.
- Connectivity issues driving dissatisfaction.
- Opportunities for increased efficiency and effectiveness, and to reduce paper, still exist.
- Over \$3000 printing/shipping savings at 6mos.

Act

- Go forward options considered.
- Decision to continue implementation.
- Began 2nd PDSA cycle with improvements to connectivity and additional technical support for incoming Board members.
- Initial reports of increased utility and satisfaction in using portal.
- Spread of paperless approach to Committee of the Board underway.

What are we trying to accomplish?

Overarching Aim: To improve the effectiveness and efficiency of Board-related information flow and work flow.

Specific Aims:

- Board members will report that they are able to access information more efficiently.
- Board members will report that they are better prepared for discussions and decision making.
- Reduction in costs associated with printing and shipping Board meeting materials.

How will we know that a change in an improvement?

- Board members will be surveyed as to their experience in adopting the paperless eGovernance technology and processes.
- Costs associated with printing and shipping of Board meeting materials will be tracked.

What changes will result in an improvement?

eGovernance

- Web-based portal provides an online workspace devoted exclusively to the board.
- Provides confidential access to past and present board materials, and tools that facilitate preparation for board meetings.
- Typically includes security controls that keep board documents and members' communications with each other protected and confidential.
- Includes tools to greatly reduce time and cost of producing & managing board materials and scheduling board work.
- A number of vendors offer "turnkey" board portal products.

Plan

- Initiative Team established: six Board members
 - Co-Led by the Board Liaison Officer and a Board member
 - Supported by Quality, Patient Safety & Clinical Resource Management Program, Information & Communications Technology Department.
- Scope, Constraints and Assumptions identified and documented.
 - Risk assessed and contingency plans developed.
- Resource & technical requirements and purchasing process identified.
 - Communication and engagement plan established.
 - Timelines, milestones and deliverables documented.
 - Potential Vendors and products researched.
 - Costs and benefits reviewed.
 - Presentations made by vendors, vendor selected.
 - Education and training plan developed.
 - Technical resource and support requirements identified.

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Critical Success Factors

- 'Buy in' by the membership to moving to the paperless environment
- Senior board member leadership
- Commitment to timeframe
- Ongoing communication of activities / timelines
- Support structures (education / ICT/vendor)



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