

Trustee Insights

DIVERSITY



5 Steps to Achieving Diversity on Your Board

Inclusion, equity and understanding your community are key

BY KARMA H. BASS
AND ERICA M. OSBORNE

Last year's social and civil unrest and its continuing aftermath made racial justice, equity and diversity an important topic of discussion in C-suites and boardrooms across industries and across the country. Diversity has long been essential to leadership and oversight roles.

A health care governing board is

the steward of a significant resource for its entire community. Therefore, the board has an obligation to ensure that the health needs of all populations within that community are equitably served. This is not possible, even from an enlightened board, unless there is a diverse group of people sitting around the table.

Effective governance requires that boards include individuals who do not all look the same, think the same or act the same. This is especially true when overseeing quality of care. Limiting a board's composition to a narrow slice of society restricts the board's perspective and

risks supporting patient care policies that lack pertinent information and leave out sectors of the community that may be most in need. Instead, a broad array of professional and lived experiences should inform the board's discussion of how to best meet community health needs.

There are many questions to consider in the process of achieving this diversity: What does diversity mean? Where do we find candidates? How do we make it work?

Taking it one step at a time can make the journey feasible. These steps may serve as guideposts along the way.

STEP 1: Define diversity as it relates to the composition of your community.

The board should first obtain a comprehensive understanding of the demographics of the communities in the organization's service area. The community health needs assessment (CHNA) will provide a picture of health needs of the populations your board serves. Consider starting the conversation by stratifying those health issues by demographics.

Diversity can be defined along the measures of age, race, ethnicity, gender, sexual orientation, socio-economic status, ideology, skills, expertise and background. These measures will vary from one community to another, so diversity will "look" different from one community to another.

It is important to remember that board diversity is not solely about race and ethnicity, or business acumen. Of course, the experience of an accountant, CEO or lawyer can be important, but so are the perspective and experience of the local businessperson who has owned the corner grocery store for 35 years. She may understand what her community needs because

board. But someone who works at an agency serving low-income families may have an awareness of the challenges some parents face. This is a powerful voice to have at the board table.

If your community has a large military installation, for instance, an ombudsperson could join the board to provide a better understanding of the needs of those who serve in the

with this. Governing boards should be 50% female — at a minimum. According to a [study on gender diversity in corporate boards](#) published in the Harvard Business Review, women can bring several contributions to board service that male members may not, such as a more collaborative leadership style, more inclusive discussion and greater determination in getting questions answered. Such contributions would well serve any health care board of trustees.

Sources for Finding Diverse Candidates

There are hundreds of national, state and local organizations dedicated to advancing diverse leadership in the boardroom. Here is a short list to get you started:

- African American Board Leadership Institute [www.aabli.org]
- Executive Leadership Council [www.elcinfo.com]
- Institute for Diversity and Health Equity [ifdhe.aha.org]
- Latino Corporate Directors Association [<https://latinocorporatedirectors.org>]
- National Association of Asian American Professionals [www.naaap.org]
- National Association of Health Services Executives [www.nahse.org]
- National Association of Latino Healthcare Executives [www.nalhe.org]
- Society for the Advancement of Chicanos/Hispanics and Native Americans in Science [www.sacnas.org]

Source: WittKiefer

she talks to those who live there every day. Maybe there is a lack of resources for nutritious food, which contributes to the community's high rates of obesity and diabetes. That lived experience is invaluable to a health care board.

Conversely, the best candidate to represent the needs of a particular segment of the community need not always be someone of that population. For instance, a single mother struggling to make ends meet while working two jobs will likely not have the time or capacity to serve on the local hospital's

military. Furthermore, if a community has a high number of at-risk youth, having a 16-year-old serve on the board may not be the best way to represent those needs, but someone who works with youth at a social services agency may be.

Although it is preferable to have board members drawn directly from the populations you serve, this may not always be possible. You may need to be creative in looking for proxy voices.

Finally, don't forget about gender diversity. While strides have been made, most boards still struggle

STEP 2: Identify the gaps between the diversity of the community and the diversity and expertise of the board, and establish goals.

After defining diversity in your community, compare that definition to the current composition of the board to expose the gaps in demographic diversity and in expertise. Using a matrix-type tool that lists board members, their demographic characteristics and their areas of expertise in comparison with the board's optimal composition can help boards identify the gaps.

The CHNA, for example, may report that your community has a sizable population of older adults who have lower incomes and face challenges related to inadequate housing and public transportation. If the board is only comprised of businesspeople, physicians and other leading members of the community, they may not sufficiently understand this population's experience well enough to thoughtfully discuss and address the issues they face.

Once the gaps have been iden-

tified, it is then time to identify the specific types of candidates who will bring the missing diversity to the board, keeping in mind the competencies required. For example, the matrix may identify the need to recruit a board member of a certain ethnicity or race or someone with in-depth knowledge of older adult or youth populations.

STEP 3: Diversify your recruitment sources — quickly.

Board members may be accustomed to finding candidates in their professional networks and social circles, but this may not lead to diversity if these circles include people who have the same backgrounds and experiences.

“If you really are serious about new skill sets and you’re really serious about diversity, you’ve got to go to new sources,” advises Jim Gauss, a senior partner in the health care and board services practice of executive search firm WittKieffer. “You cannot rely on the traditional sources of candidates.”

Gauss suggests recruiting from organizations focused specifically on developing leadership or governance capacity, such as the African American Board Leadership Institute, which focuses on training members for board service, and organizations devoted to health care, such as the National Association of Latino Health Executives and the National Association of Health Services Executives. He also advises using more general associations, such as the American Hospital Association’s Institute for Diversity and Health Equity and the National

Black MBA Association.

Local social service agencies, local chapters of national service agencies, and local colleges and universities are all appropriate sources to find diverse candidates as well.

Gauss says it is important to be prepared for questions from these candidates about the organization’s actual intentions behind seeking diversity. “What’s your history? Am I the first diverse member? What is the ethnic mix of your senior team?” are among the questions to expect, Gauss says. He adds that recruiting committees should be prepared for such questions, and they should be able to articulate why board service is so important to the organization and to its community.

Although these candidates understand the importance of their race and ethnicity, they do not want those to be the primary qualifications for being considered, Gauss adds. “Board candidates like to be selected because of what they offer the board, the skill sets they have and the ability for them to influence change at an organization,” Gauss explains. “I often hear from candidates: ‘I don’t want to join an organization that’s recruiting diversity simply for diversity’s sake, but is serious about it and looking for certain talents in addition to diversity.’ Candidates will see through it really quickly if that’s not how things align.”

Gauss also advises that organizations need to be prepared to face significant competition for candidates. “These people are highly sought after. We’ve received an exponential increase in our request to find diverse board members in the last six months,” he notes.

STEP 4: Don’t forget equity and inclusion.

The important work does not end with the appointment of a more diverse slate of board members; the board also must be willing to adapt its practices to be more inclusive of the newer board members. And that understanding begins at the top.

“It’s one thing to have a diverse board; it’s another to have a highly accepting and inclusive environment,” Gauss says. “To be successful in recruiting and sustaining diversity on boards, that commitment, starting from the top from the board and the CEO, is really critical.”

Board members should develop a greater understanding of the needs of new board members, especially those who haven’t served on boards before. For instance, a board’s traditional meeting time of midafternoon on a weekday might be unworkable for new board members who work full-time and cannot easily take time off for community service. The requirement to serve on multiple committees also may need to be reconsidered as younger board candidates have more limited hours to spend participating in governance.

Diversity can be challenging to achieve but, most importantly, is really “making a total commitment to inclusion, and that is a far more complex task,” Gauss contends.

STEP 5: Track progress.

Just because a board comprises several women or members of Black, Hispanic or Native American communities does not mean it will

be effective in changing results. Diversity for diversity's sake, as noted previously, should not be the end goal. The goal is building a board that is prepared for a more complex, challenging future where improving quality outcomes and organizational performance will depend on more appropriately serving every population and challenging the status quo.

Never Give Up

One more important thing to remember: Stumbling blocks will inevitably befall any journey that

is so multifaceted. For instance, a terrific candidate may decline the invitation to join your board. Or someone who is new to board service may decide it is not fulfilling and resign, even after your significant efforts to recruit and orient them.

The aspirations of any worthy goal should not be pinned on just one or two people. Successful boards will persevere and keep working on the recruitment, onboarding and inclusion process. It may require more time and effort than previous board development activities. Expect

this and don't let setbacks cut short the accomplishment of your goals. Much the way learning is a lifelong process, increasing board diversity is a continuing journey that should never end.

Karma H. Bass (kbass@viahcc.com) and **Erica M. Osborne** (eosborne@viahcc.com) are principals with Via Healthcare Consulting and based in Carlsbad, California.

Please note that the views of authors do not always reflect the views of the AHA.