

Health Center Board Composition, Recruitment, and Orientation

Health centers are governed by volunteer boards of directors and are unique because **federal law** requires 51% of board members to be patients of the center.

Health center boards must carry out the roles of a nonprofit board and meet the requirements of the Health Resources and Services Administration (HRSA) Health Center Program, which are listed in the **Health Center Program Compliance Manual**. Generally, health center board roles can be grouped into **three categories**: Strategy, Oversight & Policy, and Board Functioning. An important “Strategy” role of the board focuses on its own composition. This resource will help your board understand board composition, recruitment, and orientation and engagement. It can be read in its entirety, or boards can explore an individual topic of interest.



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Strategic Health Center Board Composition

Building a board that has members with the skills and backgrounds to bring value to the health center is important and takes ongoing focus. Many health center boards evaluate gaps on their board to determine composition needs, but over 60% of respondents to a recent assessment thought their board could improve their processes.¹ The following tips can help boards take a strategic approach to board composition.

1. Formalize structures and policies that promote an ongoing focus on board composition.

Effective board composition takes a strong commitment and ongoing effort from both the board and staff. To focus on this important work, consider the following:

- Ensure the board has a Governance Committee (or equivalent such as a Board Development Committee) focused on board composition, board succession planning, onboarding, and engagement. These tasks should be outlined in a charter which describes the Committee's responsibilities.

Roles: Board Composition

Role	Responsibilities
Board	<ul style="list-style-type: none"> • Ensure board composition and succession is ongoing • Consider establishing a committee to lead this work • Vote on nominations • Determine approach to rotation and renewal (e.g., terms and limits)
Board Members	<ul style="list-style-type: none"> • Serve on Governance Committee (based on interest and assignments) • Recommend board candidates • Consider serving as a board officer
Governance Committee	<ul style="list-style-type: none"> • Consult with full board throughout processes • Assess board composition needs • Identify, recruit, and vet board candidates • Review member engagement, and interview those whose terms are ending • Present a list of new members, renewals, and officers for board approval • Guide orientation and board mentoring programs • Collaborate with Chief Executive Officer (CEO)² and board chair on ongoing board education • Facilitate the board self-assessment process • Develop a pipeline of board officers and committee chairs in collaboration with the board and CEO
CEO	<ul style="list-style-type: none"> • Partner with the board, and provide input and support throughout processes • Provide input on board recruitment • Participate in conversations with prospective members • Play key role in new member orientation • Assign other staff to work with Governance Committee as needed • Serve as ex-officio non-voting member of Governance Committee

¹ National Association of Community Health Centers, Health Center Board Practices and Needs Assessment (2023).

² The CEO is also called the "Project Director" in the Health Center Program Compliance Manual.

- Encourage the Governance Committee – or appoint board champions – to lead the creation of a long-term board succession planning policy which outlines the process for identifying composition needs, future board members and board officers, and how to handle future vacancies (both planned and unplanned). This policy can provide direction for future board development.
- Be sure that the bylaws, which are the rules about how the board operates, include the process for the ongoing selection and removal of board members, and that the bylaws or other relevant documents include the requirements for board composition under the Health Resources and Services Administration (HRSA) Health Center Program (see the ***Health Center Program Compliance Manual***, Chapter 20: Board Authority for the full list of requirements).
- Keep board composition on both the board’s and the Governance Committee’s agenda.
- Be certain that everyone understands their role by adding it to the board’s workplan and annual retreat agenda.

2. Conduct periodic reviews of current and future board composition needs.

There are various items a board should consider related to composition.

Board Size

From time to time, a board should discuss whether its size helps it carry out its responsibilities. The Health Center Program requires that boards have at least 9 and no more than 25 members (see Chapter 20: Board Composition of ***Health Center Program Compliance Manual***). It is good practice to include a range of members

in the bylaws (e.g., 11-15) so that a board can adjust its size as needed. This also prevents the board from being out of compliance with their bylaws when unexpected vacancies occur. Generally, a board should be large enough to bring a range of experience, but small enough to operate efficiently and engage members.

Board Members

Board members bring a variety of experiences. To make sure the board has the perspectives and skills for effective governance now and in the future, the Governance Committee should review the board’s composition – at least annually – against established requirements and policies, current responsibilities, and other factors. This review will help identify any gaps and highlight future recruitment needs. The tips below can help:

- **Comply with Health Center Program requirements.** The HRSA ***Health Center Program Compliance Manual*** sets requirements about board composition (e.g., at least 51% of members must be patients served by the health center, other members can be community members selected for their expertise in certain areas, etc.). Boards should read Chapter 20: Board Composition, verify they meet these requirements, and be sure plans regarding board composition consider how the board will continue to comply with requirements in the future.

Align Board Composition with Priorities and Needs

Consider recruiting candidates who:

- have helped with a CEO search, if you have an upcoming transition
- have real estate experience if you will soon be adding a new site
- are willing to share a different view or ask hard questions if your board members are hesitant to disagree with each other

- **Plan for unexpected and anticipated rotation.** Board members depart for planned reasons, such as term limits, or unexpectedly due to personal or professional circumstances. To stay ahead of departures and address future composition needs, boards should track members' terms (if they have them) and regularly check in on their level of satisfaction and interest in staying on the board. Additionally, having a plan for unplanned exits as part of the board succession policy and a strong pipeline of potential candidates can ensure smooth transitions and board effectiveness during unexpected changes.
- **Align composition with responsibilities and organizational priorities.** Regularly reviewing bylaws, member and officer position descriptions, as well as the current strategic plan can provide valuable insight for determining whether the current skills and expertise align with the board's roles and responsibilities, or if new skills and community connections are needed. This helps boards plan for addressing future challenges and be ready to meet changing needs.
- **Track changing community needs.** Monitoring shifts in the community can reveal new or different types of perspectives that may be valuable to have on the board.
- **Prioritize needed "soft skills."** Qualities like strategic thinking and making decisions with limited information are important for boards.

3. Determine and agree on an approach to board member rotation.

Health center boards have the flexibility to determine their approach to board rotation and renewal, including whether to imple-

ment term limits (the total length of time a board member can serve on the board, or a board officer can serve in an officer role).

A recent assessment³ found that the most common term and term limits reported for health center board service is 2 or 3 consecutive 3-year terms. This means members may serve a maximum of 6 to 9 years. Health center boards are less likely to use term limits than other nonprofits (53% of respondents indicate their board limits the number of consecutive terms, compared to 76% of boards that have limits across the nonprofit sector⁴). If used, term limits should be included in the bylaws.

Term limits provide a way to bring new connections and perspectives to the board, helps the board align with changing needs, and provides a process for ineffective or challenging board members to exit the board. Factors such as board and community size can impact the use of term limits, and the topic can be difficult for some health center boards. A common concern about using term limits is losing effective, long-serving board members and their historical knowledge. However, there are many ways to keep former board members connected to the health center such as serving on committees and engaging in fundraising or community engagement efforts. It is important to periodically discuss how the board will approach rotation and renewal. Regardless of whether a board limits the number of consecutive terms a member can serve, it is important to have processes in place for term renewal that includes discussion about whether the member wants to continue serving, whether the individual is meeting their board member responsibilities, and consideration of whether the member continues to bring the background and skills

³ National Association of Community Health Centers, *Health Center Board Practices and Needs Assessment* (2023).

⁴ Leading with Intent (2021).



Discussion Questions

Consider the following questions when discussing board composition.

1. Does our board have a Governance Committee (or similar committee)? If not, would the board benefit from this type of committee?
2. Do we have a board succession planning policy? When was the last time our board succession planning process was reviewed and updated?
3. Do we have the appropriate number of board members to accomplish our roles? What criteria should we use to determine board size now and in the next five years?
4. Are we strategic in thinking about the future composition needs of our board?
5. Does our board have term limits? Why or why not? What are some of the ways we can keep productive members who are rotating off the board involved?



**Define
Member
Expectations**



**Conduct
a Gap
Analysis**



**Build a
Pipeline of
Candidates**



**Use Several
Recruitment
Sources**



**Streamline
Recruitment
Process**

Recruiting Health Center Board Members

Effective board recruitment plays an important role in the success of any health center. By developing an intentional approach, health centers can prepare their boards to provide strong strategic guidance, make informed decisions, and engage in important forms of oversight. Strategic recruitment requires boards to understand their composition needs and how to successfully recruit and vet possible candidates on an ongoing basis. It is important to take the following steps and each is explored below:

Struggling to find board members?

You are not alone. 54% of the Health Center Board Practices and Needs Assessment respondents noted they have trouble finding individuals willing to make the time commitment and 50% have trouble finding individuals with the needed experience, knowledge, and skills.

Tip: Consider creating a Patient Advisory Committee or engaging with organizations in your community to identify potential board members.

1. Define the expectations of board members.

The board should review the health center's strategic plan and the board's roles and responsibilities to accurately describe board member expectations. It can reflect on patient and community members who have served on the board and contributed successfully: what contributions did they make and what traits made them strong board members? With a clear understanding of what makes a successful board member, the full board or Governance Committee should review and revise the board member position description as needed. A sample can be found [here](#).

2. Conduct a gap analysis.

A Governance Committee should consider using a matrix or grid (see example in the Appendix) to track member details, including terms, member types (e.g., patient or community member), and backgrounds. Be sure the current board composition and capabilities are captured in the matrix and compare the board's current composition to anticipated needs in the future to identify gaps and recruitment priorities. For example, if a health center will soon be searching for a new facility and does not currently have a board member with real estate experience, they may prioritize filling this gap. Boards can also use this tool to ensure continued compliance with requirements of the Health Center Program (see Chapter 20: Board Composition of the *Health Center Program Compliance Manual*). While a committee may lead this process, involving the full board and CEO is also valuable.

3. Build a pipeline of candidates that addresses identified gaps.

Once gaps in composition are identified, create a pipeline of potential candidates who fill the gaps, looking at least six months ahead. If not already in place, establish a central resource for board members and the CEO to suggest candidates year-round. This should be a living document, continually updated with new candidates. Staff can then conduct necessary background checks to guarantee only qualified candidates remain in the candidate pool (see additional information on background checks under item 5).

4. Use several recruitment sources.

Although all board members should be involved in identifying prospective board members, it is important to look at various sources to identify appropriate candidates. For example:

- Use daily interactions of staff with patients. Utilize the well-established relationships the clinical staff have with patients to identify individuals who could be an effective patient board member. Some centers routinely train staff about board needs and how to identify potential candidates. Patient Advisory Committees can also be tapped to develop a pool of candidates for future board service.
- Check committees for candidates. Look for opportunities to engage non-board committee members who have shown interest in governance.
- Add a board candidate interest form to the health center's website. Posting the form on a board member section can make it easy for potential candidates to signal their interest in board service.

- Engage with community, non-profit, social services associations, and professional organizations. Consider reaching out to various organizations for recommendations of candidates with the necessary skills or backgrounds such as:
 - state Primary Care Associations,
 - local associations or chambers of commerce,
 - community organizations,
 - businesses or other community organizations that may encourage their staff to serve on boards, and
 - professional organizations focused on leadership and board development (e.g., community-based leadership programs).

5. Streamline the recruitment process.

When planning to recruit new board members, it is important to be aware of the time constraints everyone faces. Some tips include:

- **Be well prepared.** Keep recruitment packets that provide information about the health center concise. This packet should promote the center, describe board service, and create enthusiasm around board membership. It should be no more than 8 to 10 pages and might include:
 - overview of health center
 - summary of community needs
 - board member position description
 - current board roster
 - meeting schedule
 - listing of committees for candidates to consider joining

Sample Board Interview Questions

1. Tell us about your connection to our health center.
2. What motivates you to want to serve on the board?
3. After reading the board roles and responsibilities list we provided, what questions do you have about what is involved in serving on the board?
4. Our board meets monthly, and meeting attendance is an important way that board members fulfill their responsibility. Are you able to attend board meetings on a routine basis? How can we support your ability to attend?
5. For prospective patient members: Are you comfortable sharing the patient-perspective to inform board discussions and decision-making?
6. Decisions are made collectively by the board. Our board norms indicate that members will treat one another with respect, that open communication is encouraged, but once a decision is made, we support it. How comfortable would you be with our board's norms?
7. We welcome all questions you may have.

- **Collect information from prospective candidates.** Ask for their contact information, why they are interested in serving on the health center’s board, and whether they or their family members receive services from or work for the health center. Health center employees and their immediate family members may not be health center board members (please see details in Chapter 20: Board Composition of the *Health Center Program Compliance Manual*).
- **Structure a concise recruitment process.** Provide an engaging, but brief recruitment process. Before contacting candidates, conduct federal background checks, search the Office of Inspector General Exclusions *database*, and circulate candidate biographies to current board members to identify any known “red flags.” Maintain regular contact with candidates throughout the selection process. Keep them informed when there are delays and when they should expect to receive additional information or follow-up from the Governance Committee Chair or CEO.
- **Be intentional with interview practices.** Limit the number of board members on interview panels to two to three members. Practice active listening, allowing pauses for candidates to consider and respond thoughtfully. Discuss why the candidate’s service is important for the health center, and what specific skills they bring that could positively impact the board and health center. Consider asking a core set of questions to easily compare candidates. Ideally the process is board-led but centers should include the CEO in interviews or meetings with candidates to gather their input. The interview process is also an opportunity to share board member expectations, board norms, and instill excitement about serving on the board.
- **Ensure the full board votes on board candidates.** The Governance Committee will bring a slate – which is essentially a list of individuals that it recommends be elected to serve on the board – for the full board’s vote and approval.



Discussion Questions

Consider the following questions when discussing the board’s current approach to recruitment.

1. How do we recruit new members? What is working? Are there any new practices we may wish to try?
2. How can we use the recruitment experience of our newer board members to improve our overall process?
3. What sources are we using to find potential board members?
4. What other sources could we explore?

Orienting and Engaging Health Center Board Members

In order to effectively prepare new board members for their volunteer role, it is important that they receive board orientation. Once orientation is complete, it is equally important to continue to engage board members. Below are tips for building a strong orientation program and strategies for board engagement.

Orientation

A strong orientation prepares and inspires board members to actively participate in board meetings and their governance role.

1. Extend a personal welcome to new board members.

Some centers welcome new board members with a letter, phone call, or e-mail from the chair. A conversation with the chair is a great opportunity to review board expectations and identify any additional skills or talents the candidate can bring to the board.

2. Provide technological support.

Many centers provide board members with tablets and/or hotspots, which allow them to participate in virtual board and committee meetings when needed, as well as access to

board portals, which allow them to review key governance documents (such as bylaws) and meeting materials online.

New board members should receive training on how to use the technology before their first meeting, with access to IT support if needed. Additionally, as virtual and hybrid meetings remain common, all new board members should be familiar with the norms for participating in virtual meetings.

3. Cover important topics so new board members feel confident contributing immediately.

An effective board orientation program provides an overview of the health center, board roles, and the healthcare landscape. The aim is to ensure new board members have important background and information, so they feel confident contributing immediately, both in board meetings and committees.

4. Adopt a flexible approach to orientation.

Boards can adopt flexible approaches to orientation that accommodate different learning styles and preferences. Below are some sample formats to consider.

Orientation Topics

Health Center Overview

- Health center history
- Mission, values, vision
- Strategic plan
- Services, Hours, Locations
- Finances
- Organizational structure
- Federal funding requirements

Board Roles

- The board's roles and responsibilities
- Expectations of board members (e.g., board position description)
- The board's structure: Board meetings, Committees, Board norms, Policies

Healthcare Landscape

- History of health centers
- Stakeholders
- Industry trends
- Key statistics about health centers and health care industry
- Challenges facing health centers

Sample Approaches

Multi-session approach

- Avoids overwhelming new board members
- Provides several short in-person or virtual sessions
- Potential focus areas listed in table with “Orientation Topics”

Staggered approach

- Allows members to connect their meeting experiences with ongoing learning
- Starts with a brief (e.g., half-day) introductory session before the first meeting, providing enough information and context to contribute thoughtfully
- After a few board meetings, provide more in-depth information

Customized approach

- New board members attend a general orientation session
- Customized learning experiences are created to suit the individual’s need

5. Prepare for and facilitate effective orientation sessions.

When planning orientation consider the following practices:

Utilize a checklist to make sure all relevant information is covered and activities do not get overlooked. This document can include topics to be covered and tasks to be completed (see example in the Appendix).

Provide background materials at least seven days before the orientation session. These materials may include the session agenda, presentation slides, and a “board handbook” with key information.

Invite all current members to attend the sessions to refresh their own governance skills and knowledge as well as to welcome new members.

If meeting in-person, consider holding a luncheon or other gathering following the orientation for all board members to get to know one another. If virtual, extend the session by 30 minutes to do the same.

Provide an opportunity for a site tour, if feasible, or consider offering a video tour.

Ask new board members for feedback on orientation and use the information gathered to consistently improve the process.

6. Consider a mentor for new members.

To create a welcoming environment, consider pairing all incoming members with an experienced board mentor/buddy who can provide guidance and assist them in adjusting to their new roles. Mentors are encouraged to meet with new members prior to the first meeting to confirm they have received the meeting packet, and review materials to check understanding. The mentor can also explain major issues, answer questions, and provide relevant context on agenda topics during the first six months to one year of service.

7. Schedule occasional check-ins between newer board members and the CEO or board chair.

Use these meetings to address questions, offer encouragement, and avoid surprises.

Engagement

It is important to engage board members, so they are active contributors throughout their board service. Educating and engaging board members increases connection and retention.

Sample Items to Include in a Board Handbook

- Bylaws and Articles of Incorporation
- Board roles and expectations
- Board roster
- Committee descriptions and assignments
- Current strategic plan
- Board policies, including conflict of interest policy
- Copies of relevant statutes, regulations and guidance
- Organizational chart
- Financial and historical documents
- Previous board minutes
- Other relevant documents

1. Schedule regular board training to keep members informed and engaged.

Ongoing education opportunities will help expand board members' understanding of their roles, the health center, and the external environment. Consider the following:

- View ongoing education as a continuous process and consider adding board education as a standing agenda item or holding quarterly educational opportunities.
- Consider creating an annual education plan to prioritize ongoing education. Ask board members if they need more information on key topics such as board practices, board roles, CEO succession planning, understanding alternative payment models, workforce recruitment and retention, or other areas. Since board members often have busy schedules, flexible education plans offering small, digestible pieces of information are more effective. Resources from the *National Association of Community Health Centers* (NACHC) or your Primary Care Association (PCA) may help.
- Periodically evaluate educational activities to check they meet board members' needs by asking whether they have a clear understanding of the information shared.

2. Focus on strategic conversations and engagement during board meetings.

Board chairs and CEOs can design board meetings to include time for the board to discuss important strategic issues to enhance engagement. Additionally, board chairs can facilitate productive conversations by offering questions to guide discussions. They can give all members a chance to provide their opinion by going around the room and asking every board member to comment on discussion topics or when an action is required. This approach increases participation and makes certain everyone is on the same page when making decisions.

3. Make time to socialize.

Giving board members time to connect with one another can strengthen relationships and improve engagement during formal meetings. Starting meetings with an ice breaker, facilitating new members' introductions, organizing retreats, and arranging informal social events, all build connections.

4. Spotlight board members.

Consider starting each meeting with one or two members providing personal or professional highlights to strengthen board relationships. The time may also be used as a "Mission moment" when members can share their WHY—why they chose to serve or what has provided a deeper connection to the health center mission. Mission moments can also be used to share de-identified patient stories to support why the work is important and how the health center is making a difference in the communities it serves.

5. Develop board leaders (e.g., officers, committee chairs) through board succession planning.

Board chairs – in partnership with the Governance Committee – can take the lead in encouraging board members to serve in a board officer role and identifying necessary training or committee leadership opportunities to help interested board members develop the skills needed for the additional leadership duties. Committee chairs can also mentor a committee member by having the member shadow them or asking them to co-chair the committee.



Discussion Questions

Consider the following questions when discussing board orientation and engagement.

1. How effective is our board's current orientation process? What is working? Are there any new practices we may wish to try? What new topics might we need to include in orientation?
2. Does our process include a board mentor/buddy program? If not, should this be considered? Is there a committee (e.g., Governance) that could take the lead?
3. How do we support ongoing engagement with board education? What additional practices might we wish to try regarding board engagement?

Appendix: Board Composition, Recruitment, and Orientation Process Snapshot

Building an effective board is an ongoing process. The table below provides an overview of the steps involved and a snapshot of how health centers are approaching each component. Data comes from the “Health Center Board Practices and Needs Assessment” conducted by NACHC.

Board Composition	Board Recruitment	Board Orientation and Engagement
<p>Review your health center’s strategic plan and goals to identify the skills and knowledge your board needs to achieve these goals and support your mission. Note where there are gaps in these skills on your current board and prioritize these in your board recruitment process.</p> <p>Strong Governance Practice:</p> <ul style="list-style-type: none"> 78% of health centers examine their board composition to identify gaps <p>Area for Growth:</p> <ul style="list-style-type: none"> Only 39% identify potential board members using an established process <p><i>Tip: Consider asking your Governance Committee (or equivalent) to recommend a process for identifying potential board members</i></p>	<p>Work with your Governance Committee (or similar committee) or as a full board, to identify and recruit potential board candidates. Be clear about your expectations and requirements for board service.</p> <p>Strong Governance Practices:</p> <ul style="list-style-type: none"> 92% of health centers ask board and/or committee members for board candidate recommendations 71% develop relationships with community leaders, corporations, or other organizations to find board candidates 65% ask staff for board candidate recommendations <p>Area for Growth:</p> <ul style="list-style-type: none"> Only 30% recruit non-board members serving on committees, Patient Advisory Council, etc. <p><i>Tip: If you are having a hard time finding new board members that bring the skills you need, try expanding your networks, posting your board member position description online, or using a board matching service.</i></p>	<p>Orient new board members to the health center, the health center landscape, and the board and its roles and responsibilities, to help all board members feel more comfortable contributing to board oversight and strategic discussions.</p> <p>Strong Governance Practices:</p> <ul style="list-style-type: none"> 79% provide an orientation for new board members 78% provide periodic training or education for board members <p>Area for Growth:</p> <ul style="list-style-type: none"> Only 25% match new members with a board buddy/mentor <p><i>Tip: Create multiple touch points for orienting new board members, rather than just holding a single training. As board members gain experience, they will ask more questions. Including ongoing education opportunities for board members also increases their ability to fulfill their oversight and strategic responsibilities.</i></p>

Appendix: Sample Board Matrix

This is a sample board matrix that a board could use to examine its current composition and identify any possible gaps that would help in identifying needs for board recruitment. A health center must follow its bylaws and comply with the Board Composition requirements in the *Health Center Program Compliance Manual*. This sample should be customized by each organization based on its needs.

Board Member									
Patient Member									
Community Member									
Professional Expertise									
Business									
Community Affairs									
Compliance									
Finance/Banking/ Accounting									
Health Care*									
Human Resources									
Investment									
Legal									
Nonprofit management									
Real estate									
Risk management									
Social Service									
Other									
Connections in the community									
Foundations									
Health Care*									
Media									
State or local government									
Other									
Skills									
Commitment to mission									
Strategic thinker									
Prior governance experience									
Term (1st/2nd), year term is due for renewal)									

An earlier version of this appeared in NACHC's Governance Guide for Health Center Boards.

**No more than one-half of the non-patient health center board members may derive more than 10% of their annual income from the health care industry (see details in the Health Center Program Compliance Manual, Chapter 20: Board Authority).*

Appendix: Orientation Process Timeline and Checklist

Upon board approval of new member(s) and prior to the first meeting, ensure the following takes place.

- Welcome letter sent from Board Chair
- New member contact information collected
- Security badge and board portal login information issued (if applicable)
- Tablet and hotspot issued, and training arranged (if applicable)
- Board portal training arranged (if applicable)
- Board member mentor assigned by board chair and CEO
- Committee assignments made, as applicable
- Invitation to new member orientation and first board meeting sent (may be included in welcome letter)
- Mentor advised, contact information and mentor program description sent to mentor (information to be sent to new member as part of the orientation packet – see below)

Prior to or in conjunction with first meeting, conduct new member orientation session

- All board members invited to attend orientation, encouraged to attend the social “meet & greet” if in person
- New board member orientation packet is sent no later than one week prior to orientation and includes:
 - Cover letter
 - Orientation agenda
 - Board Handbook (on portal or electronic as applicable)
 - Mentor name, photo, brief bio, contact information and mentor program description
 - Committee assignment, as applicable
 - Facility map with orientation location noted (if in-person)
 - Calendar of regularly scheduled board and committee meetings
- New board member orientation conducted, to include:
 - Legal documents signed and submitted by new member (Code of Conduct, Confidentiality Statement, Conflict of Interest Annual Questionnaire)
 - Social time with other board members and health center staff, consider virtual meet and greet if in-person session is not possible
 - Site tour, as feasible (or video tour if available)
 - Orientation evaluation by board member

From 3 to 9 months

- One-on-one with CEO or board chair as applicable
- 3 and 6-month check-in with mentor
- 6-month check-in conducted by board chair
- 9-month check-in conducted by board chair

Appears courtesy of Erica Osborne of Go2Cqa, LLC

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