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# Governance – Food for Thought

## The Board's Ends Policies

### The Board's Key Job Areas

The Board holds three key job areas including:

1. Policy development which shapes the organization's future and guides the values it operates with to achieve that future.
2. Connecting with the ownership to understand the owner's perspectives, needs, and values related to the Mission.
3. Monitoring CEO performance to ensure the desired results are being achieved, as Board directed, within the resource plan and within the Board articulated values (Executive Limitations).

Board leadership requires, above all, that the Board provides vision. To do so, the Board must first have an adequate vision of its own job.

The Board's role is best conceived neither as volunteer-helper nor as watchdog, but as trustee representing the ownership.

Policy Governance® is an approach to the job of governing that emphasizes values, vision, empowerment of both Board and staff in their unique roles, and the strategic ability to lead leaders.

Under the Policy Governance® Model, the way the Board guides and influences operations is to deliberate on and set policies which clearly determine the desired direction and results for the organization as well as the unacceptable means for getting there. This policy direction provides the framework for the CEO and staff to make the strategic, tactical, and operational decisions on an ongoing basis. The Board does not need to check or direct every operational decision because it has already decided the desired results and any unacceptable means to get to those results.

### Types of Policies the Board Needs to Develop

A Board policy is a written Board decision which reflects a specific value of the Board. Observing the principles of the Policy Governance® Model, a Board crafts its values into four types of policies.

- 1 Ends Policies
- 2 Executive Limitations Policies
- 3 Board–Executive Linkage Policies
- 4 Board Process Policies

### **Ends Policies**

The Board defines which human needs are to be met, for whom, and at what cost. Written with a long term perspective, these mission related policies embody most of the Board's part of long range planning.

### **Executive Limitations Policies**

The Board establishes the boundaries of acceptability within which staff methods and activities can responsibly be left to staff to determine. These limiting policies, therefore, apply to staff means or methods rather than to the results achieved.

### **Board – Executive Linkage**

The Board clarifies the manner in which it delegates authority to the President & CEO as well as how it evaluates performance on achievement of the Results and within the Executive Limitations Policies.

### **Board Process Policies**

The Board determines its philosophy, its accountability, and the process and specifics of how it will perform its own job.

### What are Ends Policies?

Ends Policies are designed by the Board to articulate the values around the desired/expected results. The Ends Policies answer the question “what good will we achieve, for what people, at what cost?”

The highest level Ends Policy of an organization is usually its “Mission Statement Policy”.

### Why are Ends Policies So Important?

Approximately 70 - 80% of the Board’s time should be spent on working on developing Ends Policies.

This is so that the Board can lead the organization’s leaders toward achieving results that are important to and needed by the communities to whom the organization belongs.

These are the policies which articulate the Board’s vision for the future. This is where the Board can exercise a significant unique leadership role.

### What Do Ends Policies Look Like?

Results policies look different for each organization. Key elements include what good, for what people, and at what cost (or within what resources). Two examples of Results Policies have been provided for your reference (one quite short – The Hope Cancer Fund and one longer – The Parkland Health District).

## **RESULTS POLICY EXAMPLE “A”**

### The Hope Cancer Fund

The Hope Cancer Fund exists for the elimination of cancer as a cause of human suffering and death. Major components of this mission are:

1. Basic knowledge of the chemical, molecular, and cellular biology of cancer.
2. Methods by which laboratory findings can be clinically applicable to the treatment and prevention of cancer.
3. Delivery technology capable of mitigating the social and psychological effect of cancer on patients and their families.

# RESULTS POLICY EXAMPLE “B”

Parkland Health District

## **Vision: Healthy Living in Rural Saskatchewan**

The mission of Parkland Health District is to achieve results in the areas of:

- I Healthy Environment
  - I. Healthy Physical Environment
    - I.1\_ Clean Air (priority 1)
      - I.1.1\_ Reduction of smoking in public areas
      - I.1.2\_ Public awareness of air contaminants
    - I.2 Public has access to information re: environmental contaminants (priority 2)
    - I.3 Safe Water
      - I.3.1 Host district notified of problems with safety of drinking water.
  - 2. Nurturing Environment
    - 2.1 Safe living conditions in locations where care is delivered (priority 1)
    - 2.2 Social support to maintain wellness is available (priority 2)
      - 2.2.1 Early recognition or symptoms of lack of social support
      - 2.2.2 Sense of security that support is available
- II Healthy Lifestyles
  - I. Mental Health
    - I.1\_ Increased social interaction for high risk groups (priority 1)
    - I.2\_ Public access to information re: the importance of the spiritual and cultural component of wellness
    - I.3\_ Positive self-esteem for at-risk groups (priority 1)
      - I.3.1 Youth a priority area
    - I.4 Skills to cope with stress
      - I.4.1 Adequate school access to mental health professionals
      - I.4.2 Adequate public access to mental health professionals
    - I.5 Decrease in suicide attempts
  - 2. Physical Health
    - 2.1 Decreased accidents, e.g. farm accidents, ATV's (all terrain vehicles), snowmobiles, automobiles, especially (for) teens (priority 1).
    - 2.2 Decrease in preventable communicable diseases
    - 2.3 Access to aids to independent living
    - 2.4 Increased recreation and exercise
    - 2.5 Proper diet
    - 2.6 Participation in early detection and screening opportunities

- 3. Social Health
  - 3.1 Decrease in substance abuse (smoking, alcohol, street drugs, smoke free tobacco) target teens; over-the-counter drugs (priority 1)
  - 3.2 Less sexually active youth
  - 3.3 Better parenting skills
    - 3.3.1 Awareness of the need for adequate supervision of children
  - 3.4 Decrease in gambling addictions

III Healing

- 1. There will be adequate in-district physician coverage.
- 2. Physical Healing
  - 2.1 Residents receive timely care in emergency situations (priority 1)
  - 2.2 Timely access to diagnosis (priority 1)
  - 2.3 Healthy delivery for mothers and babies (priority 1)
    - 2.3.1 Delivery of low risk pregnancies in district
    - 2.3.2 Increased number of deliveries in district
  - 2.4 Restoration to optimum health from illness or injury (priority 2)
  - 2.5 Maintain independent living for as long as possible with support that meets assessed and documented need (priority 2)
  - 2.6 Dying with dignity (priority 2)
- 3. Mental Healing
  - 3.1 Restoration to optimum mental well being (priority 2)
    - 3.1.1 Care-givers
    - 3.1.2 Those in mental health crisis
    - 3.1.3 Those with addictions and their families
    - 3.1.4 Those in situational crisis
    - 3.1.5 Those in abusive relationships
- 4. Spiritual Healing
  - 4.1 Clients can access the spiritual support they feel they need

If you, your Board or administration have questions about Ends Policies, please contact us at [www.meridianedgeconsulting.com](http://www.meridianedgeconsulting.com)

Watch for the next issue of Meridian Edge's Governance-Food for Thought Newsletter....

**How Board's Develop  
Ends Policies**  
Coming October 2006

Textbook Reference on Policy  
Governance®

*Reinventing Your Board: A Step-by-Step Guide to  
Implementing Policy Governance*  
By John Carver and Miriam Carver

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