



# IHA Hospital Board Certification Program

## Basic Certification Form

Education hours earned within the current and previous calendar year are eligible for this program.

### Hospital Information

Hospital \_\_\_\_\_

Hospital Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

How many members are on your board? \_\_\_\_\_

How many of your board members do you anticipate participating in the IHA Hospital Board Certification Program? \_\_\_\_\_

### Applicant Information

Name \_\_\_\_\_

Email (required) \_\_\_\_\_

- I would like to enroll in the IHA Hospital Board Certification program. By submitting this form to IHA, I am confirming my intention to obtain IHA Hospital Board Certification.

► **If there are multiple applicants from the same board, please contact Ellen Waller via email at [ihahospitalboardcertification@ihaonline.org](mailto:ihahospitalboardcertification@ihaonline.org) for a group form.**

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*This basic certification form is available for download on the IHA website [www.ihaonline.org](http://www.ihaonline.org). Trustees must meet all the criteria listed.*

### Prepare for and participate in board and committee meetings

- Participate in new board member orientation
- Demonstrate basic knowledge of:
  - Hospital services
  - Board member selection/election process
  - Hospital mission, vision and values
  - Hospital bylaws
- Attend 75 percent of regularly scheduled board meetings (or more if required by hospital bylaws)
- Attend board retreats and participate in strategic planning sessions
- Review all board materials distributed prior to and at board meetings
- Demonstrate knowledge of issues presented before the board

## Commitment to fiduciary duties of care, loyalty and obedience and understand governance obligations to bylaws

- Periodically review hospital bylaws
- Sign conflict of interest policy at intervals required by hospital bylaws
- Comply with conflict of interest policy and abstain from voting when appropriate
- Act at all times in the best interest of the hospital
- Maintain strict confidentiality in compliance with hospital bylaws/policies
- Review on a periodic basis board committees' composition, goals and responsibilities

## Commitment to Safety and Quality of Patient Care

- Review state and national quality and patient safety improvement efforts and understand hospital-specific quality results
- Know the hospital's quality and patient safety indicators
- Act on medical staff credentialing recommendations
- Monitor key indicators, review periodic reports and ensure the hospital has specific aims in place to improve the following areas:
  - Quality improvement
  - Patient safety
  - Patient satisfaction
  - Demonstrate familiarity with performance reports, both internal quality and safety dashboards and external reports, such as Centers For Medicare & Medicaid Services (Hospital Compare) and IHA/IHC (Iowa Report, Partnership For Patients Hospital Engagement Network, etc.)
  - Demonstrate an understanding of the mechanism for patient and family input/involvement in quality and safety activities, such as Patient and Family Advisory Council, Patient Advisor Board member, etc.

## Commitment to the Organization's Financial Health

- Review and approve annual operating and capital budgets
- Ensure an audit is performed
- Review the organization's financial position on a regular basis, including financial statements and performance metrics

## Commitment to Community

- Demonstrate effort to assure diversity of age, gender, race and ethnicity at all levels of the organization from the Board to management to frontline staff that reflect the community
- Review annual IHA community benefits and IHA hospital economic impact reports
- Understand and endorse the Iowa Hospital Principles for Transparency

## Commitment to Continuing Board Education

- Participate in board education when offered
- Regularly read health care and governance periodicals (i.e., IHA *Trustee Minutes*, AHA *Trustee* magazine)
- Report to the board on individual continuing board education (CBE) activities
- Complete 12 hours of CBE over a two-year period (current and previous calendar year only) with four hours in face-to-face education programming (hours of education must be submitted annually). **Education hours must be submitted annually.**

## Participate in Performance Evaluation of Self, the Board and the CEO

- Participate in assessment of board annually (i.e., IHA Board Assessment)
- Conduct self-assessment annually (i.e., IHA Board Self-Assessment)
- Participate in annual CEO evaluation (if applicable)

## Participate in Advocacy Efforts on Behalf of Your Hospital and the Health Care Industry

- Sign up and join the Iowa Hospital Action Network
- Be a personal advocate for your hospital in your community as appropriate
- Introduce yourself to your State Representative and Senator as a board member of your hospital and contact them as requested by hospital CEO or when appropriate (This can be met through face-to-face meetings, phone calls, emails or letters)
- Introduce yourself to your US Congressman and Iowa's two US Senators as a board member of your hospital and contact them as requested by the hospital/health system CEO or when appropriate (This can be met through face-to-face meetings, phone calls, emails or letters)

## How to submit this form

**Please send completed form(s) and supporting documentation to:**

**Email:** [ihahospitalboardcertification@ihaonline.org](mailto:ihahospitalboardcertification@ihaonline.org)

**Fax:** 515-698-5163 • Attn: IHA Hospital Board Certification Program

**Mail:** Iowa Hospital Association • 100 E Grand Ave, Ste 100 • Des Moines, IA 50309  
Attn: IHA Hospital Board Certification Program

Attach any explanation of exceptions as necessary and attach any additional documentation in support of meeting the standards. Supporting documentation can include:

- Personally signed statements
- Attendance records
- Records of offices held
- Education conference certificates of attendance
- Letters or statements from your hospital CEO or board chair
- Copies of board agenda / board meeting minutes

**By my signature, I indicate that the information provided on this form is accurate to the best of my knowledge.**

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**Form submitted by:**

Name \_\_\_\_\_

Email \_\_\_\_\_



# Hospital Board Certification Program

## Frequently Asked Questions

**Q. How many education hours am I required to complete for new certification?**

**A.** A total of 12 hours of continuing board education are required for initial certification. The education hours must be earned within the current and previous calendar year.

**Q. How do I maintain my certification?**

**A.** Maintaining your certification requires completing a total of 12 hours of continuing board education every two years. **Education hours completed must be submitted annually.**

**Q. Which forms do I need to submit and when?**

**A.** The Basic Certification Form or Advanced Certification Form and Continuing Board Education log need to be submitted. As a best practice, please submit your forms as early as possible. All forms are due December 31 of the current year.

**Q. How can I find out what forms have already been submitted and how many hours have been submitted?**

**A.** To find out what forms and how many hours of education were submitted, please contact Ellen Waller via email at [ihahospitalboardcertification@ihaonline.org](mailto:ihahospitalboardcertification@ihaonline.org) or by phone at 515-283-9363.

**Q. What is the deadline for submitting hours of education and all supporting documents?**

**A.** All hours of education and supporting documents are due by December 31 of the current year.

**For questions or comments please contact Ellen Waller via one of the methods below:**

**Email:** [ihahospitalboardcertification@ihaonline.org](mailto:ihahospitalboardcertification@ihaonline.org)

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