



BOARD OF HEALTH PROCEDURE

APPROVALS	DATE APPROVED	INITIALS
BOH:	Res. No.: 106-2023	
SLT:	N/A	
MCC:	N/A	
IF APPLICABLE		
DIRECTOR:	N/A	
JOHSC:	N/A	
PPL:	N/A	

SECTION:	BOARD OF HEALTH	PROCEDURE NO.:	BH-02-06
SUBJECT:	Board of Health Self Evaluation		
APPROVED BY:	Board of Health	PROCEDURE DATE:	December 2023

1. PURPOSE

- 1.1. The purpose of this procedure is to define the process for individual and collective self-evaluation of the Thunder Bay District Health Unit Board of Health meetings, processes and governance practices, in accordance with the Ontario Public Health Standards: Requirements for Programs, Services and Accountability.
- 1.2. This procedure supports Policy No. BH-02-06 Board of Health Self Evaluation.

2. PROCEDURE

- 2.1. Monthly Board of Health Meeting Evaluation
 - 2.1.1. A Board of Health Meeting Evaluation form will be available in hardcopy to all Board members at their monthly Board of Health meeting. It will also be available electronically, to be sent out following the meeting by the Executive Assistant.
 - 2.1.2. The form can be completed by the Board member at the conclusion of the Board meeting, or can be completed and returned electronically within two (2) days of the meeting.
 - 2.1.3. Upon completion, the form will be submitted to the Executive Assistant who will collate the results.
 - 2.1.4. The results will be distributed to all members of the Board and the Senior Leadership Team with the agenda package of the following month.
 - 2.1.5. The Chair of the Board will bring forward concerns or recommendations to the Board for review and appropriate action, as necessary.
 - 2.1.6. The results of all the monthly evaluations will be collated and presented at the Executive Committee's summer meeting for review and appropriate action.

2.1.7. A copy of the results and any subsequent recommendations from the Executive Committee, will be placed on the September Board of Health meeting agenda for consideration.

2.2 Board Member's Self-Assessment

- 2.2.1 A Self-Assessment will be completed by the Board of Health at least every other year.
- 2.2.2 The Self-Assessment form will be distributed to all Board Members at the October meeting by the Executive Assistant.
- 2.2.2 Each Board of Health member will complete the form, reflecting on their individual performance as a Board of Health member. The form will be completed by the November meeting.
- 2.2.3 Upon completion, the form will be submitted to the Executive Assistant, who will collate the results.
- 2.2.4 The results will be provided to the Board Chair for review. The Chair of the Board will bring forward any concerns or recommendations to the Board at the December meeting.
- 2.2.5 Results of the self-assessment will be used to inform on-going education or orientation needs for the Board of Health.

2.3 Board of Health Self-Assessment

- 2.3.1 The Board of Health will conduct a collective assessment at least once per term of the Board.
- The second year of the term is the recommended timeframe, or as determined by the Board of Health Chair.
- 2.3.2 The assessment will be used to measure the collective performance of the Board and to strengthen governance practices.
- 2.3.3 The assessment form will be distributed to individual board members at the June Board of Health meeting in the designated year.
- 2.3.4 Upon completion, the form will be submitted to the Executive Assistant who will collate the results.
- 2.3.5 The results of the assessment will be presented at the summer meeting of the Executive Committee, for review and appropriate action.
- 2.3.6 A copy of the results and any subsequent recommendations from the Executive Committee, will be placed on the September Board of Health meeting agenda for consideration.

3. SCOPE

- 3.1. This procedure applies to the Board of Health of the Thunder Bay District Health Unit.

4. RESPONSIBILITY

- 4.1. The **Executive Assistant** is responsible for:
- Distributing the Monthly Meeting Evaluation, Board Member Self-Assessment, and Board of Health Self-Assessment to all Board of Health members as applicable;
 - Collating the results and distributing them as outlined in the procedure;
 - Ensuring results and recommendations are placed on subsequent agendas, as appropriate.
- 4.2. The **Board of Health Members** are responsible for completing the Board of Health Meeting Evaluation Form at the conclusion of each meeting and for completing the Self-Assessment survey every two years and for participating in the Board of Health collective assessment.
- 4.3. The **Chair of the Board** is responsible to bring forward concerns and recommendations for the consideration of the Executive Committee or the Board of Health, as appropriate.

5. DEFINITIONS

- 5.1. An **Evaluation** is the process of measuring performance on the basis of existing standards.
- 5.2. An **Assessment** is the process of gathering and reviewing data for the purpose of improving performance.

6. REFERENCES

- 6.1 BH-02-01 Orientation Policy
- 6.2 BH-02-03 Continuing Education Policy
- 6.3 BH-02-20 Code of Conduct
- 6.4 Ontario Public Health Standards: Requirements for Programs, Service and Accountability

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7. APPENDICES/LINKS AND ATTACHMENTS

- 7.1 Monthly Board Meeting Evaluation Form
- 7.2 Board of Health Member Self-Assessment Form
- 7.3 Board of Health Self-Assessment Form
- 7.4 [BH-02-06 Board of Health Self Evaluation Policy](#)

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ATTACHMENT 7.1

Monthly Board Meeting Evaluation Form

MONTHLY BOARD OF HEALTH MEETING EVALUATION

Meeting Date: _____

MEETING PACKAGE

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Did you receive the meeting package at least five days in advance of the meeting? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Did the materials in the meeting package use clear language? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Were the materials in the meeting package relevant to the matters discussed? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did the materials in the meeting package assist you in forming opinions on the matters discussed? | <input type="checkbox"/> | <input type="checkbox"/> |

GOVERNANCE

- | | Strongly Disagree | Disagree | Agree | Strongly Agree |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 5. The agenda items were strategic in their focus | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. The agenda items pertained to governance issues. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. The agenda items related to key organizational issues. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The agenda items were relevant to the Board’s responsibilities under the public health mandate and the Accountability Framework. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

MEETING MANAGEMENT

- | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 9. The meeting time was used efficiently. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. All Board members had adequate opportunity to contribute to deliberations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. The Chair was able to ensure that deliberations remained focused on the matter under consideration. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

CODE OF CONDUCT

- | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 12. The meeting was conducted in an atmosphere of mutual respect. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Board members provided conscientious and effective participation. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Collaboration was respected to achieve consensus. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

COMMENTS / SUGGESTIONS:

Thank you for your feedback.

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ATTACHMENT 7.2

Board of Health Member Self-Assessment Form

Thunder Bay District Health Unit Board Member Self-Evaluation

My Performance as an Individual Board Member

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree or Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. I am aware of what is expected of me as a Board of Health member.	1	2	3	4	5
2. I have a good record of meeting attendance.	1	2	3	4	5
3. I read the minutes, reports, and other materials in advance of our board meetings.	1	2	3	4	5
4. I am familiar with what is in the organization's by-laws and governing policies.	1	2	3	4	5
5. I support other board members to express their opinions at board meetings.	1	2	3	4	5
6. I am supported by other board members to express my opinions at board meetings.	1	2	3	4	5
7. I am a good listener at board meetings.	1	2	3	4	5
8. I maintain confidentiality of all board decisions.	1	2	3	4	5
9. When I have a different opinion than the majority, I raise it.	1	2	3	4	5
10. I support board decisions once they are made even if I do not agree with them.	1	2	3	4	5
11. I promote the work of our organization in the community whenever I have a chance to do so.	1	2	3	4	5
12. I stay informed about issues relevant to our mission and bring information to the attention of the board.	1	2	3	4	5

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ATTACHMENT 7.3

Board of Health Self-Assessment Form

Thunder Bay District Health Unit Board of Health Self-Evaluation

Section A: How Well has the Board of Health Done its Job?

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree or Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. Our organization operates in alignment with the public health mandate (Ontario Public Health Standards and Accountability Framework) and the TBDHU Strategic plan.	1	2	3	4	5
2. The board's regular meeting agenda items reflect our responsibilities and priorities, including the public health mandate and strategic plan.	1	2	3	4	5
3. The board has created or reviewed in some key governance documents (e.g. by-laws, policies) in the past 12-24 months.	1	2	3	4	5
4. The board gives direction to staff on how to achieve the goals by setting and reviewing policies.	1	2	3	4	5
5. The board has identified and reviewed the organization's relationship with its key stakeholders.	1	2	3	4	5
6. The board has ensured the organization's accomplishments and challenges have been communicated to key stakeholders.	1	2	3	4	5
7. The board has ensured that stakeholders have received reports on how our organization has used its financial and human resources.	1	2	3	4	5

Comments/Reflections:

Section B: How Well has the Board of Health Conducted Itself?

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree or Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. As board members we are aware of what is expected of us.	1	2	3	4	5
2. The agendas of board meetings are well planned so that we are able to get through all necessary board business.	1	2	3	4	5
3. It seems like most board members come to meetings prepared.	1	2	3	4	5
4. We receive written reports to the board in advance of our meetings.	1	2	3	4	5
5. All board members participate in important board discussions.	1	2	3	4	5
6. We do a good job encouraging and dealing with different points of view.	1	2	3	4	5
7. We all support the decisions we make.	1	2	3	4	5
8. The Board commits resources to ensure that its members are offered continuing education opportunities, and encourages them to do so.	1	2	3	4	5
9. Board members have sufficient interaction with external stakeholders at board meetings (e.g. as guests) or between meetings.	1	2	3	4	5
10. Our board meetings are engaging.	1	2	3	4	5

Comments/Reflections:

Section C: Board’s Relationship with the Medical Officer of Health (MOH) / Chief Executive Officer (CEO)

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree or Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. There is a clear understanding on most matter where the board’s role ends and the MOH/CEO’s role begins.	1	2	3	4	5
2. There is good two-way communication between the board and the MOH/CEO.	1	2	3	4	5
3. The board provides direction to the MOH/CEO by setting and reviewing policies.	1	2	3	4	5
4. The Board has reviewed the kinds of information and level of detail it requires from the MOH/CEO.	1	2	3	4	5
5. The board has developed formal criteria and a policy for evaluating the MOH/CEO.	1	2	3	4	5
6. The board, or a committee of the board, has formally evaluated the MOH/CEO within the past 12-24 months.	1	2	3	4	5
7. The board provides feedback and shows its appreciation to the MOH/CEO on a regular basis.	1	2	3	4	5
8. The board ensures that the MOH/CEO is able to take advantage of professional development opportunities.	1	2	3	4	5

Comments/Reflections:

Section D: Feedback to the Chair of the Board of Health

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree or Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. The chair is well prepared for board meetings.	1	2	3	4	5
2. The chair helps the board stick to the agenda.	1	2	3	4	5
3. The chair tries hard to ensure that every board member has an opportunity to be heard.	1	2	3	4	5
4. The chair is skilled at managing different points of view.	1	2	3	4	5
5. The chair has demonstrated versatility in facilitating board discussions.	1	2	3	4	5
6. The chair knows how to be direct with an individual board members when their behavior needs to change.	1	2	3	4	5
7. The chair helps the board work well together.	1	2	3	4	5
8. The chair demonstrates good listening skills.	1	2	3	4	5
9. The board supports the chair.	1	2	3	4	5

Additional comments or reflections:
