



MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 137-12

TO: Chair and Members of the Board of Health

FROM: Bryna Warshawsky, Acting Medical Officer of Health

DATE: 2012 November 15

2012 BOARD OF HEALTH SELF-ASSESSMENT SURVEY

Recommendation

It is recommended that the Board of Health proceed with the Board Self-Assessment in November 2012 as outlined in this Report (Report No. 137-12 re “2012 Board of Health Self-Assessment Survey”).

Key Points

- The Board Self-Assessment must be completed according to the Ontario Public Health Organizational Standards.
- At the request of the Board of Health, staff sought a legal opinion that confirms the Board can meet *in camera* to discuss an individual Board member’s performance.
- It is recommended that the Board complete the survey in November 2012 and receive an anonymized public summary report of the findings in January 2013.
- In January, the Board may move to go *in camera* if further discussion about an individual Board member is warranted as part of the self-assessment process.

Overview

The Board of Health Self-Assessment Survey process was approved by the Board in March 2012 (see [Report No. 040-12](#) “The Board of Health Self-Assessment Tool and Process – Proposed Revisions”) to fulfill a requirement of the Organizational Standards that states a self-evaluation process of governance practices and outcomes is implemented at least every other year. In April 2012, the Board of Health requested that staff seek a legal opinion as to whether the Board could meet *in camera* to discuss an individual Board member’s performance that may be generated from the findings of the self-assessment survey. Completion of any self-assessment surveys were deferred until the matter was resolved.

A legal opinion confirmed that the Board can go *in camera* to discuss an individual Board member’s performance. Additionally the meeting of the board may be closed to the public, if the meeting is held for the purpose of educating or training members but cannot discuss anything that materially advances the business or decision-making of the Board.

Conclusion

It is recommended that Board members complete the self-assessment survey by November 30th. Board members should be aware that responses to the survey will be summarized into a public report which will be presented at the January 2013 meeting. The summary report will present general themes and will not identify any individuals in the report. If the Board so decides upon receiving the summary report that they would like to discuss an individual board member, they may move to go *in camera* for the discussion.

The survey document is attached as [Appendix A](#). This document is also available online. The link to the survey will be emailed to Board of Health Members following the November 15th meeting. Board members are asked to complete the online survey or submit a completed paper copy of the survey by November 30, 2012.

Completed hard copies can be left in a sealed envelope with the Executive Assistant to the Board of Health, Ms. Sherri Sanders, at the November 15th Board of Health meeting or mailed directly to Ms. Sanders at 50 King St., London, ON, N6A 5L7.

When completing the survey, please note:

1. The scale for the survey ranges from Strongly Disagree on the left to Strongly Agree on the right.
2. Page 7 & 8 of the survey, Performance of Individual Board Members, is for personal use only and is not to be submitted.

This report was prepared by Ms. Sarah Maaten, Epidemiologist, Environmental Health and Chronic Disease Prevention Services.



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Acting Medical Officer of Health

This report addresses the following requirement(s) of the Ontario Public Health Organizational Standard 4.3:

The board of health shall have a self-evaluation process of its governance practices and outcomes that is implemented at least every other year and results in recommendations for improvements in board effectiveness and engagement. This may be supplemented by evaluation by key partners and/or stakeholders. The self-evaluation process shall include consideration of whether:

1. Decision-making is based on access to appropriate information with sufficient time for deliberations;
2. Compliance with all federal and provincial regulatory requirements is achieved;
3. Any material notice of wrongdoing or irregularities is responded to in a timely manner;
4. Reporting systems provide the board with information that is timely and complete;
5. Members remain abreast of major developments in governance and public health best practices, including emerging practices among peers; and
6. The board as a governing body is achieving its strategic outcomes.