

PERFORMANCE APPRAISAL COMMITTEE – TERMS OF REFERENCE

PURPOSE

The Performance Appraisal Committee serves to evaluate the Health Unit's performance of the Medical Officer of Health (MOH) and Chief Executive Officer (CEO). The committee's role is to assist and advise the Board of Health on how the MOH and CEO's performance reflects the Health Unit's values, vision, mission, mandate and policies and contribute to the achievement of the strategic goals.

REPORTING RELATIONSHIP

The Performance Appraisal Committee reports to the Board of Health of the Middlesex-London Health Unit. The Chair of the Performance Appraisal Committee will make reports to the Board of Health following each of the meetings of the Performance Appraisal Committee.

MEMBERSHIP

The membership of the Performance Appraisal Committee will consist of the members of the Governance Committee and other Board of Health members as may be deemed appropriate.

Staff support includes:

Executive Assistant (EA) to the Board of Health and/or EA to the MOH.

Other Board of Health members may attend the Performance Appraisal Committee but are not able to vote.

CHAIR

The Governance Committee will elect a Chair at the first meeting of the year to serve for a oneyear term. The Chair may be appointed for additional terms following the completion of an appointment to enhance continuity of the Committee.

TERM OF OFFICE

At the first Board of Health meeting of the year the Board will review the Performance Appraisal Committee membership. At that time, if any new appointments are required, the position(s) will be filled by majority vote. The appointment will be for at least one year, and where possible, staggered terms will be maintained to ensure a balance of new and continuing members. A member may serve on the Committee as long as they remain a Board of Health member.

DUTIES

The Performance Appraisal Committee will conduct an assessment and report to the Board of Health on the following areas of focus:

- 1. Program Excellence This area focuses on how the MOH and the CEO have influenced the impact the health unit has on: population health measures; the use of health status data; evidence-informed program decision making; delivery of mandated and locally needed public health services as measured by the accountability indicators.
- 2. Client and Community Impact This area reflects on the MOH's and CEO's representation of the health unit in the community.
- 3. Employee Engagement and Learning This area reflects on how the MOH and the CEO have influenced the health unit's organizational capacity, climate and culture and the contribution made to enabling engaged and empowered staff; thoughtful and responsive leadership and organizational structures that support decision-making, innovation and learning.
- 4. Governance This area reflects on how the MOH and CEO have influenced the alignment of management methods and systems to ensure appropriate structures and resources are in place to achieve the health unit's mission and vision. This area also reflects on the MOH's and CEO's responsibility for actions, decisions and policies that impact the health unit's ability to achieve the requirements as set out under the strategic plan, the Ontario Public Health Standards (OPHS), other funder requirements and direction provided by the Board of Health.

FREQUENCY OF MEETINGS

The Performance Appraisal Committee will meet three (3) times per year or at the call of the Chair of the Committee.

AGENDA & MINUTES

- 1. The Chair of the committee will prepare agendas for regular meetings of the committee.
- 2. Additional items may be added at the meeting if necessary.
- 3. The recorder is the EA to the Board of Health or the EA to the MOH.
- 4. Agenda and minutes will be made available at least five (5) days prior to meetings.
- 5. Agenda and meeting minutes are provided to all Board of Health members.

BYLAWS

As per Section 19.1 of Board of Health By-Law No. 3, the rules governing the proceedings of the Board shall be observed in the Committees insofar as applicable. This will include rules related to conducting of meetings; decision making; quorum and self-evaluation.

REVIEW

The Terms of Reference will be reviewed every two (2) years or when an amendment is deemed necessary by the Committee or Board of Health.

2023 Performance Appraisal Reporting Calendar

Q1 (Jan 1 to Mar 31)

Meeting: March

- Approve Reporting Calendar
- Initiate Terms of Reference Review (every two years)
- Confirm Performance Appraisal process, supporting documents required and timelines for the year
- Chair of the Board to conduct meetings with Board Members

Q2 (Apr 1 to Jun 30)

Meetings: May and July

- Initiate the Performance Appraisal Process
- Select Consultant to facilitate Performance Appraisal process
- Complete Performance Appraisal for MOH and CEO.

Q3 (Jul 1 to Sep 30)

Meeting: October

- Debrief with Consultant
- Chair of the Board to conduct meetings with direct reports
- Review Performance Appraisal Reports
- Report Performance Appraisal Reports to the Board of Health
- Report Performance Appraisal Reports to MOH and CEO

Q4 (Oct 1 to Dec 31)

Meeting: December

 Chair of the Board to conduct meetings with Board Members

Medical Officer of Health and Chief Executive Officer Performance Appraisals

The Medical Officer of Health and Chief Executive Officer (MOH and CEO) performance appraisals will be conducted annually with a report coming to the Board of Health on the results. (Refer to Policy G-050 MOH and CEO Performance Appraisals.)

Reporting Calendar

The reporting calendar ensures the Committee's requirements to assist and advise the Board of Health on matters outlined in the Committee Terms of Reference.

Terms of Reference

The Performance Appraisal Committee Terms of Reference set out the parameters for how authority is delegated to the Committee and how the Committee is accountable to the Board of Health. It is incumbent upon the Performance Appraisal Committee to review the Terms of Reference every two years to ensure that components (purpose, reporting relationship, membership, chair, term of office, duties, frequency of meetings, agenda and minutes, by-laws and review) are still relevant to the needs of the committee. (Refer to Policy G-290 Standing and Ad Hoc Committees).

Report No. 02-23: Appendix C