

AGENDA
MIDDLESEX-LONDON BOARD OF HEALTH
Performance Appraisal Committee

Microsoft Teams
Thursday, April 18, 2024 at 5 p.m.

1. ELECTION OF CHAIR, PERFORMANCE APPRAISAL COMMITTEE

2. DISCLOSURE OF CONFLICTS OF INTEREST

3. APPROVAL OF AGENDA – April 18, 2024

4. APPROVAL OF MINUTES – September 21, 2023

5. NEW BUSINESS

- 5.1 2024 Medical Officer of Health and Chief Executive Officer Performance Appraisal Procedures (Report No. 01-24PAC)
- 5.2 2024 Performance Appraisal Committee Terms of Reference (Report No. 02-24PAC)

6. CLOSED SESSION

The Middlesex-London Board of Health (Performance Appraisal Committee) will move into a closed session to approve previous closed session Performance Appraisal Committee minutes and to discuss matters which pertain to one or more of the following, as per section 239(2) of the *Municipal Act*, 2001, S.O. 2001, c. 25:

- a) the security of the property of the municipality or local board;
- b) personal matters about an identifiable individual, including municipal or local board employees;
- c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- d) labour relations or employee negotiations;
- e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- g) a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- h) information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them;
- i) a trade secret or scientific, technical, commercial, financial or labour relations information, supplied in confidence to the municipality or local board, which, if disclosed, could reasonably be expected to prejudice significantly the competitive

position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization;

- j) a trade secret or scientific, technical, commercial or financial information that belongs to the municipality or local board and has monetary value or potential monetary value; or
- k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board.

7. OTHER BUSINESS

The next meeting of the Performance Appraisal Committee is on Thursday, June 20, 2024 at 6 p.m.

8. ADJOURNMENT



PUBLIC SESSION – MINUTES
MIDDLESEX-LONDON BOARD OF HEALTH
PERFORMANCE APPRAISAL COMMITTEE

Thursday, September 21, 2023 at 5 p.m.
MLHU Board Room – CitiPlaza
355 Wellington Street
London, ON

MEMBERS PRESENT: Michelle Smibert (Chair)
Matthew Newton-Reid
Michael Steele
Aina DeViet

REGRETS: Tino Kasi
Emily Williams, Chief Executive Officer (ex-officio)
Dr. Alexander Summers, Medical Officer of Health (ex-officio)

OTHERS PRESENT: Stephanie Egelton, Executive Assistant to the Board of Health (recorder,
attended virtually)

At **5:02 p.m.**, Committee Chair Michelle Smibert called the meeting to order.

DISCLOSURES OF CONFLICT OF INTEREST

Chair Smibert inquired if there were any disclosures of conflict of interest. None were declared.

APPROVAL OF AGENDA

It was moved by **M. Newton-Reid, seconded by M. Steele**, *that the AGENDA for the September 21, 2023 Performance Appraisal Committee meeting be approved.*

Carried

APPROVAL OF MINUTES

It was moved by **M. Steele, seconded by A. DeViet**, *that the MINUTES of the July 20, 2023 Performance Appraisal Committee meeting be approved.*

Carried

CONFIDENTIAL

At **5:04 p.m.**, it was moved by **M. Newton-Reid, seconded by A. DeViet**, *that the Board of Health (Performance Appraisal Committee) will move to closed session to consider matters regarding personal matters about identifiable individuals, including municipal or local board employees.*

Carried

At **5:57 p.m.**, it was moved by **M. Steele, seconded by A. DeViet**, *that the Performance Appraisal Committee return to public session from closed session.*

Carried

OTHER BUSINESS

The next meeting of the Performance Appraisal Committee is scheduled for Thursday, December 14, 2023, however this meeting will no longer be needed.

It was moved by **M. Steele, seconded by A. DeViet**, *that the Thursday, December 14, 2023 Performance Appraisal Committee meeting be cancelled.*

Carried

ADJOURNMENT

At **5:58 p.m.**, it was moved by **M. Steele, seconded by A. DeViet**, *that the meeting be adjourned.*

Carried

MICHELLE SMIBERT
Committee Chair

MATTHEW NEWTON-REID
Board Chair

DRAFT

MIDDLESEX-LONDON BOARD OF HEALTH

REPORT NO. 01-24PAC

TO: Chair and Members of the Performance Appraisal Committee
FROM: Stephanie Egelton, Executive Assistant to the Board of Health
DATE: 2024 April 18

**2024 MEDICAL OFFICER OF HEALTH AND CHIEF EXECUTIVE OFFICER
PERFORMANCE APPRAISALS PROCEDURES**

Recommendation

It is recommended that the Performance Appraisal Committee recommend to the Board of Health to:

- 1) *Receive Report No. 01-24PAC re: “2024 Medical Officer of Health and Chief Executive Officer Performance Appraisals Procedures” for information;*
 - 2) *Approve the performance appraisal process, supporting documents, and timelines as amended in [Appendix A](#); and*
 - 3) *Direct staff to action the activities outlined in the MOH and CEO Performance Appraisals Checklist for 2024.*
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Report Highlights

- At the June 16, 2022 meeting of the Board of Health, the Performance Appraisal Committee was made a standing committee of the Board of Health.
- In consultation with the Medical Officer of Health (MOH) and Chief Executive Officer (CEO), it is proposed to the Committee that the categories for the performance appraisal be amended to reflect the current expectations and responsibilities of the MOH and CEO.
- It is noted that for 2024, there will be both an internal and external stakeholder engagement per Policy G-050 MOH and CEO Performance Appraisals.
- [Appendix A](#) to Policy G-050 outlines the procedure for the performance appraisals.

Background

At the June 16, 2022 meeting of the Middlesex-London Board of Health, the Board approved amendments to Policy G-290 “Standing and Ad Hoc Committees” ([Report No. 10-22GC](#)) which changed the Performance Appraisal Committee from an ad hoc sub-committee of the Governance Committee to a standing committee of the Board of Health.

The most recent performance appraisal of the Medical Officer of Health (MOH) and Chief Executive Officer (CEO) was conducted in October 2023.

The Performance Appraisal Tools for the MLHUs MOH and CEO were first developed in 2015 following a review of the Ontario Public Health Organizational Standards, templates provided by the Association of Local Public Health Agencies, best practices for performance appraisals, and input from the Committee. Each year, the Performance Appraisal Committee reviews the procedures and provides a recommendation to the Board of Health for approval.

Revising Appendices to Policy G-050 MOH and CEO Performance Appraisals

Upon consultation with the MOH and CEO, it is proposed that the performance appraisal categories be amended to reflect accurate work assessments.

CEO

- **Community Engagement, Partner Relations, and System Leadership** – This area reflects on the CEO's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.
- **Employee Engagement and Teaching** – This area reflects how the CEO creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.
- **Organizational Excellence** – This area reflects on how the CEO is ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.
- **Personal and Professional Development** – This area reflects on how the CEO are conducting their own personal and professional development.

MOH

- **Public Health Excellence** – This area reflects the MOH's performance with regards to: public health threats and issues; population health measures; the use of health status data; evidence-informed decision making; and the delivery of mandated and locally needed public health services as measured by the accountability indicators.
- **Community Engagement, Partner Relations, and System Leadership** – This area reflects on the MOH's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.
- **Employee Engagement and Teaching** – This area reflects how the MOH creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.
- **Organizational Excellence** – This area reflects on how the MOH are ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.


- **Personal and Professional Development** – This area reflects on how the MOH are conducting their own personal and professional development.

Next Steps

It is recommended that the Committee recommend to the Board of Health to approve the changes as outlined in [Appendix A](#) and approve the performance appraisal process, supporting documents, and timelines contained therein, as well as direct staff to action the activities outlined in the MOH and CEO Performance Appraisals Checklist if applicable.

The draft Terms of Reference for the Performance Appraisal Committee is noted in Report No. 02-24PAC, Appendix B. It is noted that there are substantial changes for the Governance Committee and Board of Health's consideration at the April 18, 2024 meetings due to the proposed changes to scoring categories for the performance appraisals of the Medical Officer of Health and Chief Executive Officer.

This report was prepared by the Executive Assistant to the Board of Health, with consultative support from the Chief Executive Officer and Medical Officer of Health.



Stephanie Egelton, MPA
Executive Assistant, Board of Health

This report refers to the following principle(s) set out in Policy G-490, Appendix A:

- The good governance and management requirements as outlined in the [Ontario Public Health Standards: Requirements for Programs, Services and Accountability](#).

This topic has been reviewed to be in alignment with goals under the Middlesex-London Health Unit's [Anti-Black Racism Plan](#) and [Taking Action for Reconciliation](#), specifically recommendations involving governance.



MOH AND CEO PERFORMANCE APPRAISALS

PURPOSE

An essential part of determining the health unit's performance is the appraisal of the Medical Officer of Health (MOH) and Chief Executive Officer (CEO). The MOH and CEO are accountable to the Board of Health for leading the health unit and implementing Board direction and decisions. The MOH and CEO together manage all aspects of the health unit's operations.

POLICY

The performance appraisal is a systematic process to support and assess job performance in relation to established criteria and organizational objectives. The evaluation should not only highlight the achievement of desired outcomes but reflect how well the outcomes were achieved. It should emphasize how the MOH and the CEO's performance reflects the health unit's values, vision, mission, mandate and policies and contributed to the achievement of the strategic goals.

It is one of several processes used by the Board of Health, the MOH, and the CEO to negotiate, articulate and review progress in meeting agreed upon performance standards and expectations.

Refer to the appendices for the MOH and CEO Performance Appraisal Procedure and additional tools to assist with the process.

APPENDICES

- Appendix A – MOH and CEO Performance Appraisal Procedure
- Appendix A-1 – MOH Performance Appraisal Form
- Appendix A-2 – CEO Performance Appraisal Form
- Appendix B – MOH and CEO Performance Appraisal Checklist
- Appendix C – MOH and CEO Performance Appraisal – Stakeholder Feedback Process
- Appendix C-1 – MOH Performance Appraisal – Sample Stakeholder Email
- Appendix C-2 – CEO Performance Appraisal – Sample Stakeholder Email
- Appendix D – Sample Stakeholder Listing

APPLICABLE LEGISLATION AND STANDARDS

Ontario Public Health Standards: Requirements for Programs, Services, and Accountability, 2018

RELATED POLICIES

- G-010 Strategic Planning
- G-020 MOH and CEO Direction

MOH AND CEO PERFORMANCE APPRAISALS PROCEDURE

Principles

1. An essential part of determining the health unit's performance is the appraisal of the Medical Officer of Health (MOH) and the Chief Executive Officer (CEO). The MOH and CEO are accountable to the BOH for leading the health unit and for implementing its decisions. The MOH and CEO lead and manage all aspects of the health unit's operations.
2. The performance appraisal is a systematic process used to support and assess job performance in relation to established criteria and organizational objectives. The evaluation should not only highlight the achievement of desired outcomes but reflect how well the outcomes were achieved. It should emphasize how the performance of both the MOH and the CEO reflects the health unit's values, vision, mission, mandate and policies and has contributed to the achievement of the strategic goals.
3. It is one of several processes used by the Board of Health and the MOH and the CEO to negotiate, articulate and review progress in meeting agreed upon performance standards and expectations.

Areas of Focus

CEO

- **Community Engagement, Partner Relations, and System Leadership** – This area reflects on the CEO's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.
- **Employee Engagement and Teaching** – This area reflects how the CEO creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.
- **Organizational Excellence** – This area reflects on how the CEO is ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.
- **Personal and Professional Development** – This area reflects on how the CEO are conducting their own personal and professional development.

MOH

- **Public Health Excellence** – This area reflects the MOH's performance with regards to: public health threats and issues; population health measures; the use of health status data; evidence-informed decision making; and the delivery of mandated and locally

needed public health services as measured by the accountability indicators.

- **Community Engagement, Partner Relations, and System Leadership** – *This area reflects on the MOH's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.*
- **Employee Engagement and Teaching** – *This area reflects how the MOH creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.*
- **Organizational Excellence** – *This area reflects on how the MOH are ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.*
- **Personal and Professional Development** – *This area reflects on how the MOH are conducting their own personal and professional development.*

Key Steps

1. The Performance Appraisal Committee of the Board of Health is a standing committee whose membership is appointed at the inaugural meeting of the Board of Health each year, as per Policy G-290.
2. At its first meeting each year, the Performance Appraisal Committee approves its reporting calendar and reviews and approves the performance appraisal process, supporting documents required and timelines for the year. Every two years, the Performance Appraisal Committee holds a review of its Terms of Reference or as determined by the Board of Health.
3. The performance appraisal includes:
 - a. A summary and assessment of performance for the previous review period; and
 - b. The establishment of goals for the coming review period.
4. The performance appraisal process is typically initiated in the second quarter of each year. Results are presented to the Board of Health before the end of the third quarter of the year of the performance appraisal. This timing allows the results of the current years planning and year-end outcomes to be considered.
5. An external 360 Performance Appraisal will be conducted on a bi-annual basis, and an internal performance appraisal will be conducted on an annual basis.
6. The performance appraisal forms (Appendix A-1 or Appendix A-2) are completed by the Committee based on the following inputs:
 - a. Goals and targets to be achieved as articulated in the previous performance appraisal (where applicable), the strategic plan, the OPHS, and other direction provided by the Board of Health.
 - b. Evidence provided by the MOH and the CEO, which includes a completed copy of the same performance appraisal form, specified required reports and may

include other reports as deemed relevant by the MOH and the CEO.

- c. Key informant feedback collected from the following individuals using an outsourced 360 assessment tool during the bi-annual external review:
 - i. External stakeholders from each of the following sectors.
 1. Public health;
 2. Community partners;
 3. Health care; and
 4. Municipal partners.
- d. Key informant feedback collected from the following individuals during the internal annual review:
 - i. All direct reports of the MOH and the CEO
 - ii. All Board of Health members;

The stakeholders selected to provide feedback are chosen by the Committee from a list of names for each sector provided to them by the MOH and the CEO.

- e. Their observed behavior of the MOH and the CEO; and
 - f. A meeting with each the MOH and the CEO to discuss preliminary findings and to set future goals.
7. The Committee provides verbal updates to the Board of Health throughout the process.
 8. The Committee will determine who will meet with each the MOH and the CEO to discuss the performance appraisal. The Chair of the Board should be included in both the meeting with the MOH and the CEO.
 9. The MOH and the CEO may provide any additional written comments.
 10. Those in attendance at each appraisal meeting, including the MOH and the CEO, will sign the performance appraisal, acknowledging that the appraisal has been discussed and received by the MOH and the CEO.
 11. The MOH's signed performance appraisal is filed with the Executive Assistant to the Board in a sealed envelope. Only the MOH and Chair of the Board may access this sealed document.
 12. The CEO's signed performance appraisal is filed with the Executive Assistant to the Board in a sealed envelope. Only the CEO and Chair of the Board may access this sealed document.

Note: Please refer to the following appendices:

- Appendix B – MOH and CEO Performance Appraisals Checklist
- Appendix C – MOH and CEO Performance Appraisal – Stakeholder Feedback Process
- Appendix C-1 – MOH Performance Appraisal – Sample Stakeholder Email
- Appendix C-2 – CEO Performance Appraisal – Sample Stakeholder Email
- Appendix D – Sample Stakeholder Listing

MOH PERFORMANCE APPRAISAL FORM

Name: Title:

This performance appraisal is due on:
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It reviews the performance for the period: From:

And sets objectives for the period: From:
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The following <u>RATING SCALE</u> is used:	
Exceeds expectations	Performance consistently exceeds all expectations/standards. Accomplishments are clearly obvious.
Meets Expectations	Solid reliable performance that substantially meets expectations. In some instances, expectations are exceeded. In some instances, expectations are still being developed.
Partially Meets Expectations	Performance does not meet expectations in certain areas. Improvement in these areas is required. The rationale needs to be explored, goals re-negotiated and/or an action plan established.
Additional Growth Required	Performance associated with the job requires additional resources. An action plan is needed which may include, but not limited to, training, coaching or other support.
Not applicable (n/a)	The Board of Health is not able to rate this area at this time.

Append additional sheets/documentation where required/appropriate.

Once completed, discussed and all signatures obtained, the original of this form is to be retained in the Employee's personnel file which is held by the Executive Assistant to the Board of Health in a sealed envelope, accessible only to the employee and the Chair of the Board of Health.

Public Health Excellence – <i>This area reflects the MOH’s performance with regards to: public health threats and issues; population health measures; the use of health status data; evidence-informed decision making; and the delivery of mandated and locally needed public health services as measured by the accountability indicators.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Responds effectively to health hazards and provides effective control of communicable diseases under the <i>Health Protection and Promotion Act (HPPA)</i> .					
Champions coordinated approaches and engagement of clients and community partners in planning and evaluation of programs and services.					
Maintains statutory obligations through the delivery of mandated and locally needed public health services (Ontario Public Health Standards: Requirements for Programs, Services, and Accountability, 2018).					
Uses evidence-informed decision making in developing programs, interventions, and services to meet community needs.					
Considers health equity in all programs and interventions.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

Community Engagement, Partner Relations, and System Leadership – <i>This area reflects on the MOH's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Contributes to increasing community awareness about public health and the Health Unit.					
Promotes productive relationships with the media and acts as a resource to the media regarding public health and organizational issues.					
Promotes productive relationships, maintains regular communication and strong working partnerships with external stakeholders including boards of education, business, labour, government, media, health care providers, comm, unity organizations, citizen groups and the Ministry of Health, as applicable.					
Seeks new and innovative ways to work with partners to advance mutual goals in the community.					
Promotes excellence in customer service within the health unit. Responds quickly and efficiently to enquiries/complaints/issues from citizens/community groups. Exhibits tact and diplomacy in dealing with citizen/group complaints. Resolves complaints to citizen/groups' satisfaction.					
Facilitate meaningful and trusting relationships with prioritized equity-deserving groups, specifically Black and Indigenous communities.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

Employee Engagement and Teaching – <i>This area reflects how the MOH creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Promotes a positive working environment. Advocates integrity, empowerment, collaboration and striving for excellence among staff. Sets a professional example for staff.					
Provides adequate supervision and direction of direct-reporting staff, working with them to identify and prioritize short and longer-term development goals. Recognizes and commends staff for outstanding work.					
Conducts meaningful performance reviews in a timely manner and identifies their strengths and areas for development. Identifies and takes actions necessary to obtain improved performance where necessary. Identifies and deals with performance concerns quickly and effectively by dealing with performance / communication / disciplinary issues in an appropriate manner.					
Maintains effective communication with staff. Fosters a workplace climate conducive to open communication. Holds regular leadership meetings. Institutes feedback mechanisms to gauge leadership effectiveness.					
Develops and implements comprehensive training, learning and development, and professional development opportunities for staff and leaders.					
Develop and implement strategies to support staff mental health and wellbeing, including addressing					

systemic factors contributing to burn out.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

Organizational Excellence – <i>This area reflects on how the MOH are ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Monitors overall financial situation demonstrating effective management of financial resources. Ensures transparency and understanding of financial processes and procedures.					
Develops innovative approaches to financing and revenue generation. Devises strategies to protect assets.					
Allocates resources to maximize departmental and program effectiveness. Proposes revision to staff structure and numbers as necessary. Collaborates with the leadership team on opportunities for sharing/reallocating existing staff/resources wherever possible. Explores innovative alternatives for model of service delivery.					
Ensures agency compliance with the Ontario Public Health Organizational Standards.					

Abides by employment and other relevant legislation including the Employment Standards Act, Labour Relations Act, Occupational Health and Safety Act, Accessibility for Ontarians with Disabilities Act and the Human Rights Code. Adheres to terms of union and other contracts.					
Ensures organizational performance is monitored in an ongoing way, through an organizational quality management system.					
Develops and maintains by-laws, policies and procedures and ensures adherence within the Health Unit. Advises and consults with the Board of Health on significant matters.					
Communicates regularly with the Chair of the Board and provides support in identifying agenda items for the Board of Health and Committee meetings.					
Ensures adequate orientation and ongoing education of Board of Health members.					
Informs Board of Health of important developments affecting Public Health and the Health Unit (e.g. legislative changes, public health emergencies, organizational problems, system development, environmental trends.) Makes recommendations as appropriate and includes financial analysis for recommendations.					
Provides appropriate and timely written and verbal reports to the Board of Health.					

Comments: (Include major strengths in this area of focus and any areas that may need future development)

Personal and Professional Development – <i>This area reflects on how the MOH are conducting their own personal and professional development.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Seeking opportunities to meet professional development goals and objectives identified in their previous performance appraisal.					
Actively engaging in personal and professional development to gain experience in areas of the organization not familiar to them.					

Comments: (Include major strengths in this area of focus and any areas that may need future development)

SIGNATURES

Medical Officer of Health

I discussed this performance appraisal with the Chair of the Board of Health and the Chair of the Performance Appraisal Committee.

I have participated in the setting of goals and targets for the next performance period, have reviewed my job responsibilities with the Chair of the Board of Health, and agree to the goals, targets and measurement standards noted above for the next performance period.

Comments

Medical Officer of Health

Date

For the Board of Health

We have discussed the performance appraisal with the Chief Executive Officer. We have reviewed the past period's work performance and goals and objectives and have discussed goals and objectives for the coming performance period. We have also discussed professional development and training needs. The goals and objectives for the coming year have been established, including job responsibilities and measurement methods.

Chair, Board of Health

Date

Chair, Performance Appraisal Committee

Date



CEO PERFORMANCE APPRAISAL FORM

Name:
Title:

This performance appraisal is due on:
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It reviews the performance for the period:
From:

And sets objectives for the period:
From:

The following <u>RATING SCALE</u> is used:	
Exceeds expectations	Performance consistently exceeds all expectations/standards. Accomplishments are clearly obvious.
Meets Expectations	Solid reliable performance that substantially meets expectations. In some instances, expectations are exceeded. In some instances, expectations are still being developed.
Partially Meets Expectations	Performance does not meet expectations in certain areas. Improvement in these areas is required. The rationale needs to be explored, goals re-negotiated and/or an action plan established.
Additional Growth Required	Performance associated with the job requires additional resources. An action plan is needed which may include, but not limited to, training, coaching or other support.
Not applicable (n/a)	The Board of Health is not able to rate this area at this time.

Append additional sheets/documentation where required/appropriate.

Once completed, discussed and all signatures obtained, the original of this form is to be retained in the Employee's personnel file which is held by the Executive Assistant to the Board of Health in a sealed envelope, accessible only to the employee and the Chair of the Board of Health.

Community Engagement, Partner Relations, and System Leadership <i>– This area reflects on the CEO’s representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Promotes productive relationships, maintains regular communication and strong working partnerships with external stakeholders including Boards of Education, business, labour, government, health care providers, community organizations, citizen groups and the Ministry of Health, as applicable.					
Seeks new and innovative ways to work with partners to advance mutual goals in the community.					
Promotes excellence in customer service within the health unit. Responds quickly and efficiently to enquiries/complaints/issues from citizens/community groups. Exhibits tact and diplomacy in dealing with citizen/group complaints. Resolves complaints to citizen/groups’ satisfaction whenever feasible. Provides helpful explanation where legislatively or otherwise constrained.					
Facilitates meaningful and trusting relationships with prioritized equity-deserving groups, specifically Black and Indigenous communities.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

Employee Engagement and Teaching – <i>This area reflects how the CEO creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Promotes a positive working environment. Advocates integrity, empowerment, collaboration and striving for excellence among staff. Sets a professional example for staff.					
Provides adequate supervision and direction of direct-reporting staff. Includes working with them to identify and prioritize short and longer-term development goals. Recognizes and commends staff for outstanding work.					
Conducts meaningful performance reviews in a timely manner and identifies their strengths and areas for development. Identifies and takes actions necessary to obtain improved performance where necessary. Identifies and deals with performance concerns quickly and effectively by dealing with performance / communication / disciplinary issues in an appropriate manner.					
Maintains effective communication with staff. Fosters a workplace climate conducive to open communication. Holds regular leadership meetings. Institutes feedback mechanisms to gauge leadership effectiveness.					
Develop and implement comprehensive training, learning and development, and professional development opportunities for staff and leaders.					
Develop and implement strategies to support staff mental health and wellbeing, including addressing systemic factors contributing to burn out.					

Comments: (Include major strengths in this area of focus and any areas that may need future development)

Organizational Excellence – <i>This area reflects on how the CEO is ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Monitors overall financial situation demonstrating effective management of financial resources. Ensures transparency and understanding of financial processes and procedures.					
Develops innovative approaches to financing and revenue generation. Devises strategies to protect assets.					
Allocates resources to maximize departmental and program effectiveness. Proposes revision to staff structure and numbers as necessary. Collaborates with the leadership team on opportunities for sharing/reallocating existing staff/resources wherever possible. Explores innovative alternatives for model of service delivery.					
Ensures agency compliance with the Ontario Public Health Organizational Standards.					

Abides by employment and other relevant legislation including the Employment Standards Act, Labour Relations Act, Occupational Health and Safety Act, Accessibility for Ontarians with Disabilities Act and the Human Rights Code. Adheres to terms of union and other contracts.					
Ensures organizational performance is monitored in an ongoing way, through an organizational quality management system.					
Develops and maintains by-laws, policies and procedures and ensures adherence within the health unit. Advises and consults with the Board of Health on significant matters.					
Communicates regularly with the Chair of the Board and provides support in identifying agenda items for the Board of Health and Committee meetings.					
Ensures adequate orientation and ongoing education of Board of Health members.					
Informs Board of Health of important developments affecting Public Health and the Health Unit (e.g. legislative changes, public health emergencies, organizational problems, system development, environmental trends.) Makes recommendations as appropriate and includes financial analysis for recommendations.					
Provides appropriate and timely written and verbal reports to the Board of Health.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

Personal and Professional Development – This area reflects on how the CEO are conducting their own personal and professional development.	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
Seeks opportunities to meet professional development goals and objectives identified in their previous performance appraisal.					
Actively engages in personal and professional development to gain experience in areas of the organization not familiar to them.					
Comments: (Include major strengths in this area of focus and any areas that may need future development)					

SUMMARY OF OVERALL PERFORMANCE

AREA OF FOCUS	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required
Community Engagement, Partner Relations, and System Leadership				
Employee Engagement and Teaching				
Organizational Excellence				
Personal and Professional Development				
Comments – (Include comments with respect to the major strengths of the CEO and areas for future development.)				

GOALS FOR THE NEXT PERIOD – BY AREA OF FOCUS

<u>Community and Client Confidence</u>	<u>Key Performance Indicator</u>
<u>Employee and Student Engagement and Learning</u>	<u>Key Performance Indicator</u>
<u>Organizational Excellence</u>	<u>Key Performance Indicator</u>
<u>Personal and Professional Development</u>	<u>Key Performance Indicator</u>

SIGNATURES

Chief Executive Officer

I discussed this performance appraisal with the Chair of the Board of Health and the Chair of the Performance Appraisal Committee.

I have participated in the setting of goals and targets for the next performance period, have reviewed my job responsibilities with the Chair of the Board of Health, and agree to the goals, targets and measurement standards noted above for the next performance period.

Comments

Chief Executive Officer

Date

For the Board of Health

We have discussed the performance appraisal with the Chief Executive Officer. We have reviewed the past period's work performance and goals and objectives and have discussed goals and objectives for the coming performance period. We have also discussed professional development and training needs. The goals and objectives for the coming year have been established, including job responsibilities and measurement methods.

Chair, Board of Health

Date

Chair, Performance Appraisal Committee

Date

MOH AND CEO PERFORMANCE APPRAISALS CHECKLIST

This checklist is a tool to assist the Performance Appraisal Committee in completing the performance appraisal process.

Activity	Date Completed	By
1. The performance appraisal process is initiated at the first quarter Performance Appraisal Committee meeting on an annual basis (internal) and bi-annual process (external).		
2. The Performance Appraisal Committee meets to review and confirm the performance appraisal process, supporting documents required and timelines.		
3. During the external process, the MOH and the CEO are requested to provide an updated stakeholder list for the 360 review and to complete the self-assessment portion of the appraisal.		
4. The position description, listings of Board of Health report titles both public and in-camera and goals and targets as set out in the previous performance appraisal, and any other direction provided by the Board of Health is collated.		
5. During the external process, an email is sent from the Performance Appraisal Committee Chair requesting stakeholder participation in the 360 assessment, once the stakeholder list is approved by the Committee.		
6. During the internal process, the Board Chair will meet with direct reports of the MOH and CEO.		
7. During the external process, the MOH and the CEO are given an opportunity to debrief with the consultant of the organization contracted to facilitate the 360 feedback prior to submitting the completed appraisal form.		
8. The evidence package, as identified in item 4, is received from each the MOH and the CEO, including completed appraisal form.		
9. During the external process, the Performance Appraisal Committee has a debrief meeting with the consultant of the organization requested to facilitate the 360 feedback.		

10. The Performance Appraisal Committee meets to discuss the materials and each the MOH's and CEO's completed portion of the appraisal as well as to complete the Board of Health portion of the appraisal.		
11. The two documents are then merged and sent to the Performance Appraisal Committee for review.		
12. The Performance Appraisal Committee may meet with the MOH and/or the CEO to discuss any questions they may have regarding the materials they have received.		
13. The Performance Appraisal Committee will also review the goals from the prior year and propose new ones for the coming year.		
14. Once the Performance Appraisal Committee has reviewed the materials and drafted the appraisal it is presented by the Committee in camera to the entire Board of Health for their review and approval.		
15. The Board of Health members reach agreement on the overall appraisals.		
16. The Board of Health Chair and one other member of the Performance Appraisal Committee meet with the MOH and subsequently with the CEO to provide them each with a copy of the Board's completed performance appraisal, discuss the content and provide feedback and discuss the goals for the next year.		
17. The MOH's document is then signed by the Board of Health Chair and the MOH and given to the Executive Assistant to the Board of Health to file in the MOH's personnel file.		
18. The CEO's document is then signed by the Board of Health Chair and the CEO and given to the Executive Assistant to the Board of Health to file in the CEO's personnel file.		

MOH AND CEO PERFORMANCE APPRAISAL – EXTERNAL STAKEHOLDER FEEDBACK PROCESS

1. Key informant feedback collected from the following individuals using an outsourced 360 assessment tool during the bi-annual external review:
 - i. External stakeholders from each of the following sectors.
 1. Public health;
 2. Community partners;
 3. Health care; and
 4. Municipal partners.

The stakeholders selected to provide feedback are chosen by the Committee from a list of names for each sector provided to them by the MOH and the CEO.

2. An email is sent to all selected stakeholders advising them of the name of the vendor conducting the 360, the timeline for completing the online feedback survey and assuring them of the confidentiality of their responses. Stakeholders are also invited to speak to the Chair and/or other members of the Performance Appraisal Committee if they wish to give feedback more directly.
3. The following process should be followed when emailing stakeholders selected to provide feedback:
 - i. The sample email in Appendices C-1 and C-2 can be modified or personalized as required and should be sent from the Chair of the Performance Appraisal Committee.
 - ii. If the email is being sent to multiple recipients, in order to maintain confidentiality, send the email by “blind carbon copy” (bcc) so that recipients don’t know who the other recipients are.
 - iii. Identify the vendor and ask recipients to watch for the email and reply to the survey by a specific date. This allows the Committee time to invite others to participate if the initial recipients are unable or unwilling to participate. Recipients may also forward the survey link to another recipient in their organization that they feel is better positioned to provide feedback.
 - iv. The Committee may also choose to encourage either a phone or face-to-face meeting with some stakeholders which should be determined at the time the Committee is reviewing the stakeholder listing Appendix D

MOH PERFORMANCE APPRAISAL – SAMPLE STAKEHOLDER EMAIL

Subject: Medical Officer of Health Performance Appraisal

Hello,

The Board of Health of the Middlesex- London Health Unit is in the process of completing the performance appraisal of **NAME, TITLE**.

As part of this process you have been identified as someone who has experience in working with them and the Board feels that your relevant insight would be helpful in completing this review. On behalf of the Board I would like to request that you participate by completing an on-line survey.

Your input will remain anonymous as all data will be collected and managed by an external firm. Verbatim comments however will be entered into the report exactly as they are written.

You will receive an email on **DATE** from **NAME OF PROVIDER** from **EMAIL ADDRESS** with the survey link. The survey will take approximately 30 minutes to complete.

Please watch for this email, ensuring it does not go into your junk email or spam filter and complete the survey by the end of day on **DATE**.

If you feel it would be more appropriate for someone else within your organization to respond to this survey, please don't hesitate to contact me regarding this.

Thank you in advance,

NAME

TITLE

Board of Health, Middlesex-London Health Unit

CEO PERFORMANCE APPRAISAL – SAMPLE STAKEHOLDER EMAIL

Subject: Chief Executive Officer Performance Appraisal

Hello,

The Board of Health of the Middlesex- London Health Unit is in the process of completing the performance appraisal of **NAME, TITLE**.

As part of this process you have been identified as someone who has experience in working with them and the Board feels that your relevant insight would be helpful in completing this review. On behalf of the Board I would like to request that you participate by completing an on-line survey.

Your input will remain anonymous as all data will be collected and managed by an external firm. Verbatim comments however will be entered into the report exactly as they are written.

You will receive an email on **DATE** from **NAME OF PROVIDER** from **EMAIL ADDRESS** with the survey link. The survey will take approximately 30 minutes to complete.

Please watch for this email, ensuring it does not go into your junk email or spam filter and complete the survey by the end of day on **DATE**.

If you feel it would be more appropriate for someone else within your organization to respond to this survey, please don't hesitate to contact me regarding this.

Thank you in advance,

NAME

TITLE

Board of Health, Middlesex-London Health Unit

MIDDLESEX-LONDON BOARD OF HEALTH

REPORT NO. 02-24PAC

TO: Chair and Members of the Performance Appraisal Committee
FROM: Emily Williams, Secretary
DATE: 2024 April 18

2024 PERFORMANCE APPRAISAL COMMITTEE TERMS OF REFERENCE

Recommendation

It is recommended that the Governance Committee recommend to the Board of Health to receive Report No. 02-24PAC re: “2024 Performance Appraisal Committee Terms of Reference” for information.

Report Highlights

- The 2024 Board of Health reporting calendar, including the Performance Appraisal Committee meetings, was approved at the January 18, 2024 Board of Health meeting ([Report No. 02-24](#)).
- Performance Appraisal Committee meetings are at the call of the Chair.

Performance Appraisal Committee Reporting Calendar for 2024

The Reporting Calendar is an account of the planned activities required of the Committee and Board. The reporting calendar was approved by the Board of Health at the January 18, 2024 Board of Health meeting ([Report No. 02-24](#)).

The approved reporting calendar is affixed as [Appendix A](#).

Performance Appraisal Committee Terms of Reference for 2024

The draft Terms of Reference for the Committee is affixed as [Appendix B](#). It is noted that there are substantial changes for the Governance Committee and Board of Health’s consideration at the April 18, 2024 meetings due to the proposed changes to scoring categories for the performance appraisals of the Medical Officer of Health and Chief Executive Officer.

Next Steps

It is noted that the Governance Committee is reviewing these Terms of Reference at the April 18, 2024 meeting as part of the Governance Policy Review for Policy G-290 Standing and Ad Hoc Committees.

This report was prepared by the Secretary of the Board of Health.



Emily Williams, BScN, RN, MBA, CHE
Secretary

This report refers to the following principle(s) set out in Policy G-490, Appendix A:

- The good governance and management practice requirements as outlined in the [Ontario Public Health Standards: Requirements for Programs, Services and Accountability](#).

This topic has been reviewed to be in alignment with goals under the Middlesex-London Health Unit's [Anti-Black Racism Plan](#) and [Taking Action for Reconciliation](#), specifically recommendation #43 (Governance and Leadership, Anti-Black Racism Plan).

2024 Middlesex-London Board of Health Reporting Calendar

<u>Q1 2024: January 1 – March 31</u>	<u>Q2 2024: April 1 – June 30</u>
<p>Meetings: January, February, March</p> <p>Finance</p> <ul style="list-style-type: none"> • Review Terms of Reference • Public Sector Salary Disclosure • Review and Recommend Board of Health Remuneration • Q4 Financial Update, Financial Borrowing and Factual Certificate Update <p>Risk</p> <ul style="list-style-type: none"> • Review Insurance Coverage • Annual Privacy Program Update • Q4 Risk Registry <p>Governance</p> <ul style="list-style-type: none"> • Annual Declarations – Confidentiality and Conflict of Interest • Q4 Provisional Strategic Plan and Performance Update • Board of Health Orientation • Activity Reports – CEO, MOH, Board Chair <p>Public Health Program Standards</p> <ul style="list-style-type: none"> • As required 	<p>Meetings: April, May, June</p> <p>Finance</p> <ul style="list-style-type: none"> • Q1 Financial Update, Financial Borrowing and Factual Certificate Update • Review and Recommend – Audited Financial Statements for MLHU • Recommend Budget Parameters, Planning Assumptions and Municipal Funding Targets • Review Funding and Service Level Agreements • Review and Recommend Budget Process • Visa and Accounts Payable Update <p>Risk</p> <ul style="list-style-type: none"> • Occupational Health and Safety Program Update • Q1 Risk Registry <p>Governance</p> <ul style="list-style-type: none"> • Review Governance By-laws and Policies • Initiate Board of Health Self-Assessment (every 2 years, next in 2025) • Review Governance Policies and By-Laws • Q1 Provisional Strategic Plan and Performance Update • Annual Service Plan • Annual Report and Attestation • Activity Reports – CEO, MOH, Board Chair <p>Public Health Program Standards</p> <ul style="list-style-type: none"> • Nurse Family Partnership Annual Report <p>MOH/CEO Performance Appraisal</p> <ul style="list-style-type: none"> • Initiate Terms of Reference Review (every two years in 2025) • Confirm Performance Appraisal process, supporting documents required and timelines for the year • Chair of the Board to conduct meetings with Board Members • Select Consultant to facilitate Performance Appraisal process via external and internal survey

<u>Q3 2024: July 1 – September 30</u>	<u>Q4 2024: October 1 – December 31</u>
<p>Meetings: July and September</p> <p>Finance</p> <ul style="list-style-type: none"> • Q2 Financial Update, Financial Borrowing and Factual Certificate Update • Review and Recommend Audited Financial Statements for April 1 to March 31 Programs • Review Multi-Year Budget <p>Risk</p> <ul style="list-style-type: none"> • Q2 Risk Registry <p>Governance</p> <ul style="list-style-type: none"> • Report on Public Health Funding and Accountability Agreement Indicators • Q2 Provisional Strategic Plan and Performance Update • Report on Board of Health Self-Assessment (every 2 years, next in 2025) • Review Governance By-laws and Policies • Activity Reports – CEO, MOH, Board Chair <p>Public Health Program Standards</p> <ul style="list-style-type: none"> • Q2 Management Operating System (MOS) Update <p>MOH/CEO Performance Appraisal</p> <ul style="list-style-type: none"> • Debrief with Consultant • Chair of the Board to conduct open office hours with direct reports • Review Performance Appraisal Reports 	<p>Meetings: October, November, December</p> <p>Finance</p> <ul style="list-style-type: none"> • Q3 Financial Update, Financial Borrowing and Factual Certificate Update • Review and Recommend Final Board of Health Budget • Review Employee Benefits Coverage <p>Risk</p> <ul style="list-style-type: none"> • Q3 Risk Registry <p>Governance</p> <ul style="list-style-type: none"> • Q3 Provisional Strategic Plan and Performance Update • Board of Health Orientation Planning • Activity Reports – CEO, MOH, Board Chair <p>Public Health Program Standards</p> <ul style="list-style-type: none"> • Q3 MOS Update • 2024-2025 Respiratory Season Update • Immunization of School Pupils Act Compliance Report • Monitoring Food Affordability <p>MOH/CEO Performance Appraisal</p> <ul style="list-style-type: none"> • Report Performance Appraisal Reports to the Board of Health • Report Performance Appraisal Reports to MOH and CEO

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 one-year 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:

CEO

- **Community Engagement, Partner Relations, and System Leadership** – This area reflects on the CEO's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.
- **Employee Engagement and Teaching** – This area reflects how the CEO creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.
- **Organizational Excellence** – This area reflects on how the CEO is ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.
- **Personal and Professional Development** – This area reflects on how the CEO are conducting their own personal and professional development.

MOH

- **Public Health Excellence** – This area reflects the MOH's performance with regards to: public health threats and issues; population health measures; the use of health status data; evidence-informed decision making; and the delivery of mandated and locally needed public health services as measured by the accountability indicators.
- **Community Engagement, Partner Relations, and System Leadership** – This area reflects on the MOH's representation of the Health Unit in the community and engagement with local, provincial and national stakeholders both in health and community arenas, along with engagements with local media.
- **Employee Engagement and Teaching** – This area reflects how the MOH creates a positive work environment, engages with employees, and supports employee education, leadership development, mentorship, graduate student teaching, medical student or resident teaching activities.
- **Organizational Excellence** – This area reflects on how the MOH are ensuring the optimal performance of the organization, including prudent management of human and financial resources, effective business processes, responsive risk management and good governance.
- **Personal and Professional Development** – This area reflects on how the MOH are conducting their own personal and professional development.

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.