

**AGENDA**  
**MIDDLESEX-LONDON BOARD OF HEALTH**  
**Performance Appraisal Committee**

Microsoft Teams  
Thursday, July 7, 2022 at 10:10 a.m.

**1. ELECTION OF CHAIR, PERFORMANCE APPRAISAL COMMITTEE**

**2. DISCLOSURE OF CONFLICTS OF INTEREST**

**3. APPROVAL OF AGENDA – July 7, 2022**

**4. NEW BUSINESS**

4.1. 2022 Medical Officer of Health and Chief Executive Officer Performance Appraisals Procedures (Report No. 01-22PA)

**5. OTHER BUSINESS**

The next meeting of the Performance Appraisal Committee is to be called.

**6. ADJOURNMENT**



TO: Members of the Performance Appraisal Committee

FROM: Matt Reid, Chair, Board of Health

DATE: 2022 July 7

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## 2022 MEDICAL OFFICER OF HEALTH AND CHIEF EXECUTIVE OFFICER PERFORMANCE APPRAISALS PROCEDURES

### **Recommendations**

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

- 1) *Receive Report No. 01-22PA, re: “2022 Medical Officers of Health and Chief Executive Officer Performance Appraisals Procedures” for information;*
- 2) *Revise the Appendices to Policy G-050 “MOH and CEO Performance Appraisals Procedure” to reflect the Performance Appraisal Committee as a standing committee ([Appendix A](#));*
- 3) *Approve the performance appraisal process, supporting documents, and timelines ([Appendix A](#)); and,*
- 4) *Direct staff to action the activities outlined in the MOH and CEO Performance Appraisals Checklist, as amended ([Appendix A](#)).*

### **Key Points**

- 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 and the Performance Appraisal Committee for 2022 was struck.
- The appendices associated with Policy G-050 require updating to reflect the Performance Appraisal Committee’s status as a standing committee.
- 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 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. It was also moved and carried that the Performance Appraisal Committee for 2022 be struck.

The most recent performance appraisal of the current Chief Executive Officer (CEO) was conducted in 2021; a performance appraisal of the current Medical Officer of Health (MOH) has not yet been conducted.

The Performance Appraisal Tools for the MLHUs MOH and CEO were 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 Governance Committee. In 2021, these tools were updated and the process of collecting feedback to inform the appraisal was simplified by utilizing available technology in the form of an on-line 360-degree feedback tool facilitated by The Achievement Centre. The Board of Health renewed its approval of this appraisal process when the Board approved Policy G-050 Medical Officer of Health and Chief Executive Officer Performance Appraisal in 2021.

## Revising Appendices to Policy G-050

With the approval of the Performance Appraisal Committee as a standing committee, the appendices to Policy G-050, which identify the committee as a sub-committee of the Governance Committee, require revisions to reflect the Performance Appraisal Committee's status as a standing committee. Proposed revisions are included as [Appendix A](#) for review and approval by the Board of Health.

### Next Steps

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

This report was prepared by the Chair, Board of Health.

A handwritten signature in black ink that reads "Matthew Reid". The signature is written in a cursive, slightly slanted style.

Matthew Reid  
Chair, Middlesex-London Board of Health

## **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**

1. Program Excellence – This area focuses on how the MOH and the CEO has 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 has 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 has 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.

## Key Steps

4. The ~~Governance Committee~~ **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. ~~responsible to strike a performance appraisal sub-committee made up of members of the Governance Committee and/or other Board of Health Members as may be deemed appropriate.~~
2. **At its first meeting each year, the Performance Appraisal Committee approves its reporting calendar, initiates a Terms of Reference Review every two years, and sub-committee reviews and approves the performance appraisal process, supporting documents required and timelines for the year.** ~~tool.~~
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. This timing allows the results of the current years planning and year-end outcomes to be considered.
5. The performance appraisal forms **s** (Appendix A-1 or Appendix A-2) is **are** completed by the ~~sub-~~**C**ommittee 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:
    - i. All Board of Health members;
    - ii. All direct reports of the MOH the CEO;
    - iii. 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 ~~sub-~~**C**ommittee from a list of names for each sector provided to them by the MOH and the CEO.

- d. Their observed behavior of the MOH and the CEO; and
  - e. A meeting with each the MOH and the CEO to discuss preliminary findings and to set future goals.
6. A meeting with each the MOH and the CEO to discuss preliminary findings and to set future goals. The sub-Committee provides verbal updates to the Board of Health throughout the process.
  7. The sub-Committee will determine who will meet with each the MOH and the CEO to discuss the performance appraisal. This should include the Chair of the Board.
  8. The MOH and the CEO may provide any additional or written comments.
  9. 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.
  10. 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.
  11. 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**

**APPENDIX A-1**  
To Policy G-050

<b>Name:</b>	
<b>Title:</b>	

<b><i>This performance appraisal is due on:</i></b>	
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<b>It reviews the performance for the period:</b>	
<b>From:</b>	<b>To:</b>

<b>And sets objectives for the period:</b>	
<b>From:</b>	<b>To:</b>

<b>The following <u>RATING SCALE</u> is used in this performance appraisal:</b>	
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.**

<b>Program Excellence</b> – <i>This area reflects on how the MOH has 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.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Responds effectively to health hazards and provides effective control of communicable diseases under the Health Protection and Promotion Act (HPPA).</li> </ul>					
<ul style="list-style-type: none"> <li>Champions coordinated approaches and engagement of clients and community partners in planning and evaluation of programs and services.</li> </ul>					
<ul style="list-style-type: none"> <li>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).</li> </ul>					
<ul style="list-style-type: none"> <li>Anticipates and plans for major trends in needs and services.</li> </ul>					
<ul style="list-style-type: none"> <li>Uses evidence-informed decision making in developing programs and services to meet community needs.</li> </ul>					
<ul style="list-style-type: none"> <li>Considers health equity in all program work.</li> </ul>					
<ul style="list-style-type: none"> <li>Ensures processes are in place to regularly evaluate public health programs and services, seeking ways to improve efficiency and effectiveness.</li> </ul>					



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

<b>Client and Community Impact –</b> <i>This area reflects on the MOH's representation of the health unit in the community.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Contributes to increasing community awareness about public health.</li> </ul>					
<ul style="list-style-type: none"> <li>Promotes productive relationships with the media and acts as a resource to the media regarding public health issues.</li> </ul>					
<ul style="list-style-type: none"> <li>Promotes productive relationships, maintains regular communication and strong working partnerships with external stakeholders including boards of education, business, labour, government, media, health care providers, community organizations, citizen groups and the Ministry of Health and Long-Term Care.</li> </ul>					
<ul style="list-style-type: none"> <li>Seeks new and innovative ways to work with partners to advance mutual goals in the community.</li> </ul>					
<ul style="list-style-type: none"> <li>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</li> </ul>					

<p>whenever feasible. Provides helpful explanation where legislatively or otherwise constrained. Researches/facilitates appropriate contact when referral is necessary.</p>					
<p><b>Comments: (Include major strengths in this area of focus and any areas that may need future development)</b></p>					
<p><b>Employee Engagement and Learning</b> – <i>This area reflects on how the MOH has 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.</i></p>	<p>Exceeds Expectations</p>	<p>Meets Expectations</p>	<p>Partially Meets Expectations</p>	<p>Additional Growth Required</p>	<p>n/a</p>
<ul style="list-style-type: none"> <li>Promotes a positive working environment. Advocates integrity, empowerment, collaboration and striving for excellence among staff. Sets a professional example for staff.</li> </ul>					
<ul style="list-style-type: none"> <li>Allocates resources to maximize departmental and program effectiveness. Proposes revision to staff structure and numbers as necessary. Collaborates with</li> </ul>					

<p>the management team on opportunities for sharing/reallocating existing staff/resources wherever possible. Explores alternatives such as cost-sharing/joint services with other agencies and/or contract services.</p>				
<ul style="list-style-type: none"> <li>Provides adequate supervision and direction of direct-reporting staff. Includes working with them to identify and prioritize short and longer-term goals. 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. Recognizes and commends staff for outstanding work. Identifies and deals with performance concerns quickly and effectively by dealing with performance/communication/disciplinary issues in an appropriate manner.</li> </ul>				
<ul style="list-style-type: none"> <li>Maintains effective communication with staff. Fosters a workplace climate conducive to open communication. Holds regular Management meetings. Institutes feedback mechanisms to gauge leadership effectiveness.</li> </ul>				

<ul style="list-style-type: none"> <li>Identifies areas where staff training and development would be of benefit to the team and/or agency as a whole. Encourages staff commitment and ownership to upgrading and maintaining job related effectiveness. Promotes the view of training as a shared responsibility between staff and the health unit. Supports planning of short- and long-term departmental training and development initiatives.</li> </ul>				
<ul style="list-style-type: none"> <li>Regularly evaluates corporate services, seeking ways to improve efficiency and effectiveness.</li> </ul>				
<ul style="list-style-type: none"> <li>Exhibits excellent time management skills. Systematically organizes own time. Commits to and meets deadlines. Respects others' time. Is punctual for meetings.</li> </ul>				
<ul style="list-style-type: none"> <li>Sets and achieves personal and professional development objectives.</li> </ul>				
<p><b>Comments: (Include major strengths in this area of focus and any areas that may need future development)</b></p>				

<p><b>Governance</b> – <i>This area reflects on how the MOH has 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 responsibility for actions, decision 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: Requirements for Programs, Services, and Accountability, 2018, other funder requirements and direction provided by the Board of Health.</i></p>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Ensures agency compliance with the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability, 2018.</li> </ul>					
<ul style="list-style-type: none"> <li>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.</li> </ul>					
<ul style="list-style-type: none"> <li>Provides appropriate and timely written and verbal reports to the Board of Health. Writes and speaks clearly. Reports are easily understood by the Board of Health members.</li> </ul>					

**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
<b>Program Excellence</b>				
<b>Community and Client Impact</b>				
<b>Employee Engagement and Learning</b>				
<b>Governance</b>				

**Comments – (Include comments with respect to the major strengths of the MOH/CEO and areas for future development.)**

**GOALS FOR THE NEXT PERIOD – BY AREA OF FOCUS**

<b>Program Excellence</b>	<b>Key Performance Indicator</b>

<b>Client and Community Impact</b>	<b>Key Performance Indicator</b>

<b>Employee Engagement and Learning</b>	<b>Key Performance Indicator</b>

<b>Governance</b>	<b>Key Performance Indicator</b>

<b>Personal Development</b>	<b>Key Performance Indicator</b>

<b>Other</b>	<b>Key Performance Indicator</b>



**SIGNATURES**

**Medical Officer of Health**

I discussed this performance appraisal with the Chair of the Board of Health.

I have participated in the setting of goals and targets for the next performance period, have reviewed by 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**

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**Medical Officer of Health** **Date**

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**For the Board of Health**

We have discussed the performance appraisal with the Medical 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.

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**Chair, Board of Health** **Date**

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**Member, Performance Appraisal Committee** **Date**

## CEO PERFORMANCE APPRAISAL FORM

<b>Name:</b>	
<b>Title:</b>	

<b><i>This performance appraisal is due on:</i></b>	
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<b>It reviews the performance for the period:</b>	
<b>From:</b>	<b>To:</b>

<b>And sets objectives for the period:</b>	
<b>From:</b>	<b>To:</b>

<b>The following <u>RATING SCALE</u> is used in this performance appraisal:</b>	
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.**

<p><b>Program Excellence</b> – This area reflects on how the CEO has 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.</p>	<p>Exceeds Expectations</p>	<p>Meets Expectations</p>	<p>Partially Meets Expectations</p>	<p>Additional Growth Required</p>	<p>n/a</p>
<ul style="list-style-type: none"> <li>Promotes coordinated approaches and engagement of clients and community partners in planning and evaluation of programs and services.</li> </ul>					
<ul style="list-style-type: none"> <li>Anticipates and plans for major trends in needs and services.</li> </ul>					
<ul style="list-style-type: none"> <li>Considers health equity in all program work.</li> </ul>					
<ul style="list-style-type: none"> <li>Ensures processes are in place to regularly evaluate public health programs and services, seeking ways to improve efficiency and effectiveness.</li> </ul>					

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

<b>Client and Community Impact</b> – <i>This area reflects on the CEO's representation of the health unit in the community.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Contributes to increasing community awareness about public health.</li> </ul>					
<ul style="list-style-type: none"> <li>Promotes productive relationships with the media and acts as a resource to the media regarding public health issues.</li> </ul>					
<ul style="list-style-type: none"> <li>Promotes productive relationships, maintains regular communication and strong working partnerships with external stakeholders including boards of education, business, labour, government, media, health care providers, community organizations, citizen groups and the Ministry of Health and Long- Term Care.</li> </ul>					
<ul style="list-style-type: none"> <li>Seeks new and innovative ways to work</li> </ul>					

<p>with partners to advance mutual goals in the community.</p>					
<ul style="list-style-type: none"> <li>• 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. Researches/facilitates appropriate contact when referral is necessary.</li> </ul>					
<p><b>Comments: (Include major strengths in this area of focus and any areas that may need future development)</b></p>					

<b>Employee Engagement and Learning</b> – <i>This area reflects on how the CEO has 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.</i>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Promotes a positive working environment. Advocates integrity, empowerment, collaboration and striving for excellence among staff. Sets a professional example for staff.</li> </ul>					
<ul style="list-style-type: none"> <li>Allocates resources to maximize departmental and program effectiveness. Proposes revision to staff structure and numbers as necessary. Collaborates with the management team on opportunities for sharing/reallocating existing staff/resources wherever possible. Explores alternatives such as cost-sharing/joint services with other agencies and/or contract services.</li> </ul>					
<ul style="list-style-type: none"> <li>Provides adequate supervision and direction of direct-reporting staff. Includes working with them to identify and prioritize short and</li> </ul>					

<p>longer-term goals. 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.</p> <p>Recognizes and commends staff for outstanding work. Identifies and deals with performance concerns quickly and effectively by dealing with performance/communication/ disciplinary issues in an appropriate manner.</p>				
<ul style="list-style-type: none"> <li>• Maintains effective communication with staff. Fosters a workplace climate conducive to open communication. Holds regular Management meetings. Institutes feedback mechanisms to gauge leadership effectiveness.</li> </ul>				
<ul style="list-style-type: none"> <li>• Identifies areas where staff training and development would be of benefit to the team and/or agency as a whole. Encourages staff commitment and ownership to upgrading and maintaining job</li> </ul>				

<p>related effectiveness. Promotes the view of training as a shared responsibility between staff and the health unit. Supports planning of short- and long-term departmental training and development initiatives.</p>					
<ul style="list-style-type: none"> <li>Regularly evaluates corporate services, seeking ways to improve efficiency and effectiveness.</li> </ul>					
<ul style="list-style-type: none"> <li>Exhibits excellent time management skills. Systematically organizes own time. Commits to and meets deadlines. Respects others' time. Is punctual for meetings.</li> </ul>					
<ul style="list-style-type: none"> <li>Sets and achieves personal and professional development objectives.</li> </ul>					
<p><b>Comments: (Include major strengths in this area of focus and any areas that may need future development)</b></p>					



<p><b>Governance</b> – <i>This area reflects on how the CEO has 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 CEO’s responsibility for actions, decision 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: Requirements for Programs, Services, and Accountability, 2018, other funder requirements and direction provided by the Board of Health.</i></p>	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Additional Growth Required	n/a
<ul style="list-style-type: none"> <li>Monitors overall health unit financial situation demonstrating effective management of financial resources. Ensures transparency and understanding of financial processes and procedures.</li> </ul>					
<ul style="list-style-type: none"> <li>Develops innovative approaches to financing and revenue generation. Devises strategies to protect health unit assets.</li> </ul>					
<ul style="list-style-type: none"> <li>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.</li> </ul>					

<ul style="list-style-type: none"> <li>• Develops and maintains health unit by-laws, policies and procedures and ensures adherence within the health unit. Advises and consults with the Board of Health on significant matters.</li> </ul>					
<ul style="list-style-type: none"> <li>• Communicates regularly with the Chair of the Board of Health and provides support in identifying agenda items for the Board of Health and Committee meetings.</li> </ul>					
<ul style="list-style-type: none"> <li>• Ensures adequate orientation and on-going education of Board of Health members.</li> </ul>					
<ul style="list-style-type: none"> <li>• 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.</li> </ul>					
<ul style="list-style-type: none"> <li>• Provides appropriate and timely written and verbal reports to the Board of Health. Writes and speaks clearly. Reports are easily understood by the Board of Health members.</li> </ul>					

**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
Program Excellence				
Community and Client Impact				
Employee Engagement and Learning				
Governance				

**Comments – (Include comments with respect to the major strengths of the MOH/CEO and areas for future development.)**

**GOALS FOR THE NEXT PERIOD – BY AREA OF FOCUS**

<b>Program Excellence</b>	<b>Key Performance Indicator</b>

<b>Client and Community Impact</b>	<b>Key Performance Indicator</b>

<b>Employee Engagement and Learning</b>	<b>Key Performance Indicator</b>

<b>Governance</b>	<b>Key Performance Indicator</b>

<b>Personal Development</b>	<b>Key Performance Indicator</b>

<b>Other</b>	<b>Key Performance Indicator</b>

**SIGNATURES**

**Chief Executive Officer**

I discussed this performance appraisal with the Chair of the Board of Health.

I have participated in the setting of goals and targets for the next performance period, have reviewed by 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**

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**Chief Executive Officer** **Date**

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**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.

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**Chair, Board of Health** **Date**

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**Member, Performance Appraisal Committee** **Date**

## MOH AND CEO PERFORMANCE APPRAISALS CHECKLIST

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

Activity	Date Completed	By
1. The performance appraisal process is initiated at the second quarter <del>Governance</del> Performance Appraisal Committee meeting. <del>and a sub-committee is formed.</del> Completion is expected by the end of the third quarter the current year.		
2. The <b>Performance Appraisal Committee</b> <del>sub-committee</del> meets to review and confirm the performance appraisal process, supporting documents required and timelines.		
3. 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. An email is sent from the <del>sub-committee</del> <b>Performance Appraisal Committee</b> Chair requesting stakeholder participation in the 360 assessment once the stakeholder list is approved by the <del>sub-</del> <b>C</b> ommittee.		
6. 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.		
7. The evidence package, as identified in item 4, is received from each the MOH and the CEO, including completed appraisal form.		
8. The <del>sub-committee</del> <b>Performance Appraisal Committee</b> has a debrief meeting with the consultant of the organization requested to facilitate the 360 feedback.		

9. The sub-committee <b>Performance Appraisal Committee</b> 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.		
10. The two documents are then merged and sent to the sub-committee <b>Performance Appraisal Committee</b> for review.		
11. The sub-committee <b>Performance Appraisal Committee</b> may meet with the MOH and/or the CEO to discuss any questions they may have regarding the materials they have received.		
12. The sub-committee <b>Performance Appraisal Committee</b> will also review the goals from the prior year and propose new ones for the coming year.		
13. Once the sub-committee <b>Performance Appraisal Committee</b> has reviewed the materials and drafted the appraisal it is presented by the sub-Committee in camera to the entire Board of Health for their review and approval.		
14. The Board of Health members reach agreement on the overall appraisals.		
15. The Board of Health Chair and one other member of the sub-committee <b>Performance Appraisal Committee</b> 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.		
16. The MOH's document is then signed by the Board of Health Chair and the MOH and given to the Executive Assistance to the Board of Health to file in the MOH's personnel file.		
17. The CEO's document is then signed by the Board of Health Chair and the CEO and given to the Executive Assistance to the Board of Health to file in the CEO's personnel file.		



<b>Program Excellence</b>	<b>Key Performance Indicator</b>

<b>Client and Community Impact</b>	<b>Key Performance Indicator</b>

<b>Employee Engagement and Learning</b>	<b>Key Performance Indicator</b>

<b>Governance</b>	<b>Key Performance Indicator</b>

<b>Personal Development</b>	<b>Key Performance Indicator</b>

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**Medical Officer of Health**

**Date**

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**For the Board of Health**

We have discussed the performance appraisal with the Medical 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.

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**Chair, Board of Health**

**Date**

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<b>Program Excellence</b>	<b>Key Performance Indicator</b>

<b>Client and Community Impact</b>	<b>Key Performance Indicator</b>

<b>Employee Engagement and Learning</b>	<b>Key Performance Indicator</b>

<b>Governance</b>	<b>Key Performance Indicator</b>

<b>Personal Development</b>	<b>Key Performance Indicator</b>

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**Chief Executive Officer**

**Date**

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**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.~~

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**Chair, Board of Health**

**Date**

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## **MOH AND CEO PERFORMANCE APPRAISAL – STAKEHOLDER FEEDBACK PROCESS**

1. Key informant feedback is one of the inputs into the MOH and the CEO performance appraisal process. The ~~sub-committee~~ **Performance Appraisal Committee** uses a vendor to solicit 360 feedback from the following stakeholders:
  - a. All Board of Health members;
  - b. All direct reports of the MOH and the CEO;
  - c. External stakeholders from the following sectors.
    - i. Public health
    - ii. Community partners;
    - iii. Health care; and
    - iv. Municipal.

The stakeholders selected to provide feedback are chosen by the ~~sub-committee~~ **Committee** from a list 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 the 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 ~~sub-committee~~ **Performance Appraisal Committee** and/or other members of the ~~sub-committee of the Board of Health~~ if they wish to give feedback more directly.
  
3. The following process should be followed when emailing stakeholders selected to provide feedback:
  - a. 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 ~~sub-committee~~ **Performance Appraisal Committee**.
  - b. 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.
  - c. Identify the vendor and ask recipients to watch for the email and reply to the survey by a specific date. This allows the ~~sub-committee~~ **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.
  - d. The ~~sub-committee~~ **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



**APPENDIX C-1**  
To Policy G-050

**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

