



TO: Chair and Members of the Board of Health
FROM: Bryna Warshawsky, Acting Medical Officer of Health
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NOVEMBER 2012 BOARD OF HEALTH SELF-ASSESSMENT SURVEY RESULTS

Recommendation

It is recommended that Report No. 006-13 re 'November 2012 Board of Health Self-Assessment Survey Results' be received for information.

Key Points

- Six of nine (67%) of active Board Members responded to the survey.
- Detailed findings are presented in Appendix A.
- Further discussion of the findings will enhance the self-assessment process, including identification of opportunities and an action plan to improve performance and outcomes.

Introduction

Board of Health members completed a self-assessment survey in November 2012 to fulfill requirement 4.3 of the Ontario Public Health Organizational Standards according to which the Board must conduct a self-evaluation process of governance practices and outcomes at least every other year. Using agreement ratings to 20 statements, the following six concepts were assessed in the survey:

- A. Knowledge and Information Needs: *Members remain abreast of major developments in governance and public health best practices, including emerging practices among peers;*
- B. Meeting and Decision-Making Processes: *Decision-making is based on access to appropriate information with sufficient time for deliberations;*
- C. Response to Important Issues: *Any material notice of wrongdoing or irregularities is responded to in a timely manner;*
- D. Reporting Systems to the Board: *Reporting systems provide the board with information that is timely and complete;*
- E. Compliancy with Regulatory Requirements: *Compliance with all federal and provincial regulatory requirements is achieved; and*
- F. Strategic Outcomes: *The board as a governing body is achieving its strategic outcomes.*

Results

Six of the nine active board members completed the survey - a 67% response rate. Across the 20 statements there were varying levels of agreement. The statements to which all (or nearly all) respondents agreed or disagreed are highlighted below. Please see [Appendix A](#) for detailed findings, including results for statements with more of a split between agreement and disagreement.

Agreement

All respondents **agreed** or **strongly agreed** to the following statements:

- The Board ensures that decisions are based on accurate, timely and the best available information.
- The Board ensures processes are in place to identify, assess and manage any risks to the Health Unit.
- The Board follows the process for handling urgent matters between meetings.
- The Board ensures that the Board bylaws are followed.
- The Board is in compliance with all regulatory requirements related to the BOH, the MOH, and all applicable regulatory requirements related to the Health Unit.
- The Board ensures the Health Unit is responsive to needs of local communities.

Nearly all (83% or 5) respondents **agreed** or **strongly agreed** with the following statements:

- The Board keeps abreast of relevant trends, events and emerging issues in public health.
- Board members come prepared to participate in the discussion and decision-making so that all necessary board business is addressed.
- All Board members participate in important board discussions.
- Board members do a good job of encouraging and dealing with different points of view.
- The Board has adequate information to monitor organizational performance (e.g. knowledge of programs and services offered; delivery of Ontario Public Health Standards and protocols; work force issues, MOH/CEO performance assessment, etc.).
- The Board focuses on strategic long-term results and substantial policy issues rather than operational detail.

Disagreement

Nearly all (83% or 5) respondents **disagreed** or **strongly disagreed** with the following statements:

- The Board has a common understanding of the Board's mandate, scope, and authority.
- The Board is able to interpret and assess financial information to oversee financial performance effectively.

Comments

Comments were provided by only four respondents and provide some further insight to the concepts noted above. Different perspectives/experiences represented by Board members were identified as both a strength and a challenge of the Board by several respondents. The ability to have challenging conversations was noted by two respondents as a strength of the Board however, two also noted that listening to opposing perspectives was a challenge. The budget and outside pressures were also identified as challenges.

When asked about the most important thing a Board Member could recommend for action or discussion, several respondents indicated conflicts of interest or the multiple 'hats' that each Board Member wears should be addressed. Other issues raised were concentrating on mandate and ensuring careful consideration of comments and their implications, including comments to the media.

Topics for further education or training included Robert's Rules, governance issues and conflict of interest. It is noteworthy that in the ranking section of the survey, half of the respondents disagreed with the statement that 'The board is satisfied with the ongoing education it receives in order to fulfill its responsibilities'.

Conclusion

The response rate to the survey was lower than usual. As well, there were a very small number of comments making it difficult to ensure that the comments represent the feelings of the Board as a whole.

By conducting this survey, the Board of Health has completed its requirement for self-assessment. However, the self-assessment process can be enhanced by discussion among Board Members about opportunities for improvement in performance and action to make those improvements.

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



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| <p>This report addresses the following requirement(s) of the Ontario Public Health Organizational Standard 4.3.</p> |
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