

NORTH BAY REGIONAL HEALTH CENTRE (NBRHC)

Policy and Procedure		Policy Number	ADM-BO-004		
Title Board Evaluation And Governance Review		Policy category			
		<input type="checkbox"/> Departmental <input type="checkbox"/> Organization Wide <input checked="" type="checkbox"/> Board			
		Manual		Board	
		<input type="checkbox"/> New	<input checked="" type="checkbox"/> Minor	<input type="checkbox"/> Major	<input type="checkbox"/> Reviewed, no change
Origination Date		Developer			
Effective Date <small>(date this version came into effect)</small>	Reviewed by Governance June 11, 2015 Approved by Board October 16, 2015 Approved by Governance October 26, 2017 Approved by Board November 9, 2017	Governance Committee			
Cross References (NBRHC or legacy organization policies) Not applicable		Comparable Policy from service provider within NBRHC Facility Not applicable			

NOTE: This is a **CONTROLLED** document for internal use only, any document appearing in a paper form should **ALWAYS** be checked against the online version prior to use.

1.0 Policy

To ensure effective governance, each year the Board will evaluate its performance and that of individual Directors. In the interest of governance excellence and accountability, comprehensive reviews will be conducted annually and reports presented to the Board on governance effectiveness. Opportunities for improvement, identified through the evaluation and review processes, will be reflected in ongoing governance effectiveness initiatives and director orientation and development activities.

2.0 Minor Revision History

Not applicable

3.0 Definitions

Not applicable

4.0 Materials required

Board Governance Evaluation Questionnaire – available via Administrative Assistant
 Board Director Evaluation Questionnaire – available via Administrative Assistant
 Peer Evaluation Questionnaire – available via Administrative Assistant

5.0 Procedure

Each year (March-April) the Chair of the Board will request Directors to complete the following evaluation tools:

- GCE Board Self-Assessment: Annually the Board participates in this survey through the Governance Centre of Excellence (GCE). Comparisons with other participating

hospitals are available, along with individual results. The Board will formally receive and discuss the results of their evaluations at a regular Board meeting.

- Board Director Self Evaluation Questionnaire: Results are submitted to the Board Chair for review. One-to-one meetings will be held between the Board Chair and individual Directors prior to the end of the Board year (June).
- Peer Evaluation Questionnaire: Completed by each voting Board member (Peer Evaluation results to be submitted to the Board Chair after collation by a 3rd party.)

Through the Governance Committee the Board regularly reviews evaluation processes, structure and policies with a view to ensure that practices remain up to date and at a high level.

Opportunities for improvement and specific learning needs will be incorporated into the Director Orientation Program and targeted development activities throughout the Board year.

6.0 Appendices/Educational Materials

Not applicable

7.0 References

Not applicable

8.0 Content Experts/Stakeholders

Content Expert/Stakeholder	Date Sent
Governance Committee	October 2017
Board of Directors	November 2017

9.0 Signing Authority Approval

Position	Date Signed
Chair, Board of Directors	November 9, 2017