

BOARD MEMBER APPLICATION

Please return this completed form and resume **by April 4, 2025** to:

WHGH Board of Directors
Charlene Charles, EA to the President & CEO/Coordinator of Board Affairs
West Haldimand and Norfolk General Hospitals
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Surname:		First Name:	
Home Address:			
City:	Province:	Postal Code:	
Status:		Employed:	Retired:
Home Phone #:		Business Phone #:	
E-Mail Address:			
Preferred Method of Contact: Home Phone Business Phone E-Mail			

Eligibility Criteria and Conditions of Appointment

- a) Directors must be at least 18 years old.
- b) Undischarged bankrupts are ineligible to serve as directors.
- c) Current or former hospital employees, their immediate family members, current or former medical or professional staff members are ineligible to serve as directors (unless the Board determines otherwise).
- d) A director is expected to commit the time required to perform board and committee duties. The minimum time commitment is likely 7-10 hours per month. Reliable internet is required as meetings may be both virtual and in-person
- e) Directors must fulfill the requirements and responsibilities of their position, for example, preparing for and attending board and committee meetings, upholding their fiduciary obligation to the hospital and working cooperatively and respectfully with other board members. Directors must comply with the *Public Hospitals Act* and other legislation governing the hospital, the hospital's by-laws and policies, and all other applicable rules.
- f) Directors must have their principal residence or carry-on business within the catchment area (Haldimand County)
- g) Directors must sign a Declaration confirming their agreement to adhere to their fiduciary duties and board and hospital policies.

Please briefly state your reasons for wishing to become a Director of the West Haldimand General Hospital Board of Directors:

Conflict of Interest Disclosure Statement:

Directors must avoid conflicts between their self-interest and their duty to the hospital. In the space below, please identify any relationship with any organization that may create a conflict of interest, or the appearance of a conflict of interest, by virtue of being appointed to the Board.

Knowledge, Skills and Experience:

The Board seeks a complementary balance of knowledge, skills and experience. Please indicate your areas of knowledge, skills and experience by completing **Schedule A** to this application.

Please list current or prior Board experience:

Which areas of the Board work are of particular interest to you?

Declaration:

By submitting this application, I declare the following:

- a) I meet the eligibility criteria and accept the conditions of appointment set out above.
- b) I certify that the information in this application and in my resume or biographical sketch is true.

Signature: _____ Date: _____

Schedule A

Application for Membership
(Please include resume or brief bio)
Knowledge, Skills and Experience

Please indicate your areas of knowledge, skills and experience by checking off the relevant boxes in the table below. It is not expected that you possess knowledge, skill or experience in all the areas set out in the table. Please indicate only those areas that apply to you.

<i>Knowledge, Skills, Experience</i>	<i>Advanced</i>	<i>Intermediate</i>	<i>Basic</i>	<i>None</i>
Board Governance				
Board Leadership				
Business Management				
Clinical				
Diversity Issues				
Ethics/Spiritual Care				
Finance				
Government & Government Relations / Political Acumen				
Health Care Administration & Policy				
Human Resource Management / Labour Management				
Information Technology				
Legal				
Patient & Health Care Advisory				
Public Affairs & Communications				
Quality, Safety & Performance Management				
Risk Management				
Stakeholder Engagement				
Strategic Planning				

Board Roles and Responsibilities

PURPOSE

To ensure that the board has a shared understanding of its governance role, the board has adopted this Statement of the Roles and Responsibilities of the Board.

RESPONSIBILITY OF THE BOARD

The board is responsible for the overall governance of the affairs of the corporation.

Each director is responsible to act honestly, in good faith and in the best interests of the corporation and, in so doing, to support the corporation in fulfilling its mission and discharging its accountabilities.

STRATEGIC PLANNING AND MISSION, VISION AND VALUES

The board participates in the formulation and adoption of the hospital's mission, vision and values.

The board ensures the hospital's development and adoption of a strategic plan that is consistent with its mission and values and which will enable the hospital to realize its vision. The board participates in the development of and ultimately approves the strategic plan.

The board oversees operations for consistency with the strategic plan and strategic directions.

The board receives regular briefings or progress reports on the implementation of strategic directions and initiatives.

The board ensures that its decisions are consistent with the strategic plan and the mission, vision and values.

The board annually conducts a review of the strategic plan as part of a regular annual planning cycle.

PERFORMANCE MEASUREMENT AND MONITORING

The board is responsible for establishing a process and a schedule for monitoring and assessing performance in areas of board responsibility, including:

- Fulfillment of the strategic directions in a manner consistent with the mission, vision and values;
- Oversight of management performance;
- Quality of patient care and hospital services;
- Financial conditions;
- External relations; and
- The board's own effectiveness.

The board ensures that management has identified appropriate measures of performance.

QUALITY OVERSIGHT

The board is responsible for establishing policies and plans related to quality, including the Quality Improvement Plan.

The board ensures that policies and improvement plans are in place related to quality of care, patient safety, patient experience and access.

The board monitors quality performance against the board-approved quality improvement plan, performance standards and indicators.

The board ensures that management has plans in place to address variances from performance standards, indicators and the board oversees implementation of remediation plans.

FINANCIAL OVERSIGHT

The board is responsible for stewardship of financial resources, including ensuring availability and overseeing the allocation of financial resources.

The board approves policies for financial planning and approves the annual operating and capital budget.
The board monitors financial performance against the budget.
The board approves investment policies and monitors compliance.
The board ensures the accuracy of financial information through oversight of management and approval of annual audited financial statements.
The board ensures management has put measures in place to ensure the integrity of internal controls.

RISK IDENTIFICATION AND OVERSIGHT

The board is responsible to be knowledgeable about risks inherent in the organization's operations and ensures that appropriate risk analysis is performed as part of board decision-making.
The board oversees management's risk management program.
The board ensures that appropriate programs and processes are in place to mitigate against risk and for ensuring there are plans in place to prevent and manage such risks.

OVERSIGHT OF MANAGEMENT

The board recruits and supervises the CEO by:

- Developing and approving the CEO job description;
- Undertaking a CEO recruitment process and selecting the CEO;
- Reviewing and approving the CEO's annual performance goals;
- Reviewing CEO performance and determining CEO compensation;
- Ensuring succession planning is in place for the CEO and senior management; and
- Exercising oversight of the CEO's supervision of senior management as part of the CEO's annual review.

The board develops a process for selection and review of the Chief of Staff and ensures the process is implemented and followed.

The board reviews the Chief of Staff's performance and sets the Chief of Staff's compensation.

The board develops, implements and maintains a process for the selection of other medical leadership positions, as required under the hospital's by-laws or the *Public Hospitals Act*.

STAKEHOLDER COMMUNICATION AND ACCOUNTABILITY

The board identifies the organization's stakeholders and understands stakeholder accountability.

The board ensures the organization appropriately communicates with stakeholders in a manner consistent with accountability to stakeholders.

The board contributes to the maintenance of strong stakeholder relationships.

The board performs advocacy on behalf of the hospital with stakeholders where required, in support of the mission, vision, values and strategic directions of the hospital.

GOVERNANCE

The board is responsible for the quality of its own governance.

The board establishes governance structures to facilitate the performance of the board's role and enhance individual director performance.

The board is responsible for the recruitment of a skilled, experienced and qualified board.

The board ensures ongoing board training and education.

The board assesses and reviews its governance by periodically evaluating board structures, including board recruitment processes and board composition and size, number of committees and their Terms of Reference, processes for appointment of committee chairs, processes for appointment for board officers and other governance processes and structures.

LEGAL COMPLIANCE

The board ensures that appropriate processes are in place to ensure compliance with legal requirements.