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<b>Board Member Peer Evaluation Policy</b>			
<b>Date Issued: 2024-01-25</b> <b>Date Review/Revised:</b> <b>Next Review Date: March 2025</b>			
<b>Owner:</b> Common Board of Directors (Common Board)	<b>Reviewer(s):</b> Governance and Nominating Committee	<b>Approver:</b> Governance and Nominating Committee	

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Except as expressly stated to the contrary herein, these Terms of Reference apply to both the Alexandra Marine & General Hospital (AMGH) and the South Huron Hospital (SHH). AMGH and SHH are referred to individually and collectively as the Hospital.

### **Purpose**

The Board Member Peer Evaluation Policy aims to establish a structured and transparent process for evaluating the performance and contributions of individual board members. This policy is designed to enhance accountability, foster continuous improvement, and ensure the board's effectiveness in fulfilling its responsibilities.

### **Scope**

This policy applies to all members of the Common Board and is to be conducted monthly or as deemed necessary by the board.

### **Key Principles:**

1. **Confidentiality:** All information collected during the peer review process is confidential and will only be shared with the board members directly involved in the evaluation by the HHS Board Chair. Confidentiality is essential to encourage honest and constructive feedback.
2. **Fairness and Objectivity:** The peer review process will be fair, unbiased, and based on subjective criteria. Evaluations should focus on the board member's performance, contributions, and adherence to the organization's values and goals.
3. **Criteria for Evaluation:** Evaluation criteria may include attendance and participation in meetings, commitment to the organization's mission, strategic thinking, communication skills, collaboration with other board members, adherence to ethical standards, and any specific responsibilities outlined in the board member's position description.

4. Action Plans: If areas for improvement are identified, the board member, in consultation with HHS Board Chair, should create an action plan outlining steps for improvement. The HHS Board Chair or a designated committee may provide support in implementing these plans.
5. Documentation: All evaluations, feedback, and action plans will be documented and stored securely for future reference. This documentation will contribute to the board's continuous improvement efforts.
6. Annual Reporting: A summary report of the peer review process, without disclosing individual board members' confidential feedback, will be presented to the entire board. This report should highlight overall strengths, areas for improvement, and any systemic issues identified during the process.
7. Review of Evaluation: A review of the evaluation results will be done bi-annually by the Chair Governance and Nominating. Any concerns will be brought forward to the HHS Board Chair.

### **Review and Amendments**

This policy will be reviewed annually by the Governance and Nominating Committee, which may recommend amendments based on the board's evolving needs and best practices in governance.

Approval Process	Governance & Nominating Committee:	2024-XX-XX
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