

TITLE:	CEO Performance Evaluation		
Manual/Policy #:	Board of Directors # II-4	Division:	CPDMH
Original Issue:	March 2013	Issued by:	Board Chair and Board Secretary
Previous Date Reviewed	October 2020	Approved by:	Board of Directors
Last Date Reviewed:	November 2021	Cross References:	N/A

1. POLICY STATEMENT:

The regular evaluation of the President and Chief Executive Officer (CEO) is one of the most important responsibilities of the Board.

Although the CEO is an employee of Almonte General Hospital (AGH), the CEO's services are shared by AGH and Carleton Place District Memorial Hospital (CPDMH). As such, the evaluation will be led by the AGH Board and both Boards will participate in the evaluation process. The Joint Governance Committee ("the Committee") will act as the coordinating body for the process to ensure fairness for the hospitals and for the CEO.

2. SCOPE:

This policy documents the Board's process for evaluating the CEO and provides a formal opportunity for the board and CEO to have a constructive discussion regarding the organizations' performance and the CEO's leadership (of the organizations).

3. GUIDING PRINCIPLES:

Evaluation of the CEO will include consideration of achievement against Board-approved Goals and Objectives, results of qualitative feedback received through surveys and other accomplishments of the CEO during the year.

The evaluation period is usually aligned to the hospital's fiscal year to enable alignment with other key metric reporting – financial, strategic, etc. An evaluation will be undertaken annually to ensure that expectations and performance are reviewed and appropriate expectations are set. A 360 degree assessment will be undertaken every two years.

The review takes place with assessment against the following benchmarks:

- A written statement of the CEO's goals and objectives for the year under review. These goals have been agreed to by the CEO and the Boards at the beginning of the year under review.
- The expectations set out in the job description for the position
- The performance of each Organization against the:
 - strategic plan
 - quality improvement plan

- operating plan / budget
- capital plan / budget, and
any other plans approved by the boards from time to time
- The Board approved President & CEO Annual Performance Review and the associated Professional Development Plan, if any.

4. **DEFINITIONS:**

Goals and Objectives: Specific, measureable, attainable, relevant and time bound outcomes aligned to the vision and strategy of the organizations that are determined and measured annually by the Boards with input from the CEO

Professional Development Plan: a list of actionable steps intended to achieve professional growth for the CEO and/or to address qualitative opportunities for improvement identified through the evaluation survey process.

5. **PROCEDURE:**

5.1 The CEO goals and objectives will be provided annually to the Committee for review and recommendation to both Boards of Directors for approval at the March Board meeting.

5.2 Mid-Year Discussion

- (a) The Board Chairs lead the mid-year CEO evaluation.
- (b) The Board Chairs will solicit input from their respective board members, through discussions held without the CEO after a board meeting.
- (c) The Board Chairs will review and summarize the feedback and advice.
- (d) The CEO will meet individually with each Board Chair to discuss the mid-year feedback. Each Board Chair will invite one other director to participate in the discussion.
- (e) Prior to the AGH Board meeting referenced below, the CPDMH Board Chair will provide a written report to the AGH Board Chair on the CPDMH feedback and will send a copy of this report to the CEO.
- (f) The Board Chairs will update their respective Board members on the discussion during the in camera portion of the next regularly scheduled Board meeting after the discussion with the CEO. The AGH Board Chair will include in his/her remarks any relevant feedback from the CPDMH Board.
- (g) Any issues arising through this process that fall within the purview of the Committee will be discussed at the next regularly scheduled Committee meeting after the discussion with the CEO.

5.3 Year-End Review

- (a) The AGH Board will lead and implement the CEO's year-end review, which will be completed by the June Board meeting each year.
- (b) In order to ensure efficient and consistent process and timing, administrative support for the year-end review process in both organizations will be provided by the Integrated Executive Assistant.
- (c) Board Directors and the CEO's Direct Reports will be the participants invited to complete the survey annually. Each Board will complete its own survey and results will be tabulated separately.
- (d) In addition to the annual survey, every two years a 360 degree survey that includes Leadership/Management Team members, medical staff and external stakeholders will be conducted.
- (e) The AGH Executive Committee will receive and discuss the results of the survey.
- (f) The results of the survey will be sent to the CEO.
- (g) The CEO will, after receiving the evaluation report, complete a self-appraisal in written form and send a copy to the AGH Board Chair.
- (h) The AGH Board Chair will send the CPDMH evaluation results and the CEO's self-appraisal individually to the CPDMH Board Chair.
- (i) The CEO will meet individually with each Board Chair to discuss the results. The Board Chair will invite one other Director to participate in the discussion. During this meeting a Professional Development Plan for the coming year may be created but is not a required annual outcome of the process.
- (j) Prior to the AGH Board meeting referenced below, the CPDMH Board Chair will provide a written report to the AGH Board Chair on the remarks and any relevant feedback from the CPDMH Board.
- (k) The Board Chairs will update their respective Board Members on the discussion during the In Camera portion of the June Board meeting after the discussion with the CEO.
- (l) Any issues arising through this process that fall within the purview of the Committee will be discussed at the next regularly scheduled Committee meeting after the discussion with the CEO.

Evaluation:

This policy will be reviewed annually.

Timing and Responsibilities for Approval of the CEO Goals & Objectives

Activity	Who	When
1) The CEO develops a draft set of Corporate Goals and Objectives for each organization that are reviewed by the Committee and approved by the Boards and additional personal goals, if required	CEO Committee Boards	Approved by the boards in March each year
Year End		
(a) The CEO presents the results of the goals and objectives to each board	CEO	May Board meeting

Mid-Year		
(a) The Board Chairs will gather information	Board Chairs	
(b) Both Board Chairs and the CEO will meet to discuss any issues or concerns any party has with respect to achieving the goals for the year	CEO Board Chairs	Early to mid-November
(c) The Board Chairs will update the Board members on the discussion	Board Chairs	November Board meeting
(d) Issues, if any, within the purview of the Committee will be discussed at an Committee meeting	Committee	December meeting and as required

Timing and Responsibilities for the CEO Performance Evaluation

Activity	Who	When
1. Survey on CEO performance will be distributed to Directors and CEO's Direct Reports or 360 as appropriate and completed	AGH Executive	After the May Board meeting
Year End		
2. The AGH Executive reviews the survey results and sends to the CEO	AGH Executive	First week of June
3. The CEO will, after receiving the evaluation, prepare a response to the evaluation and send it to the AGH Board Chair	CEO AGH Board Chair	Second Week of June
4. The AGH Board Chair consolidates the CPDMH evaluation results and CEO's self-appraisal and sends it to the CPDMH Board Chair	AGH Board Chair	Second week of June
5. The Board Chairs and one other Director meet with the CEO to discuss the evaluation. Professional Development Plans for the coming year will be agreed upon if required.	Board Chairs CEO	Second/Third week of June
6. The Board Chairs will prepare a summary of the assessment process, including, for completeness, achievement against the goals and objectives, to discuss with their respective Boards.	Board Chairs	June Board Meeting
7. The AGH Board will discuss any recommendation for compensation changes	AGH Executive Committee	June Board meeting
8. Issues, if any, within the purview of the Committee will be discussed at a Committee meeting	Committee	June meeting and as required