

<b>TITLE:</b>	<b>Chief of Staff Performance Evaluation</b>		
<b>Manual/Policy#:</b>	Board of Directors # II-5	<b>Division:</b>	CPDMH
<b>Original Issue:</b>	May 2000	<b>Issued by:</b>	Board Chair and Board Secretary
<b>Previous Date Reviewed:</b>	March 2021	<b>Approved by:</b>	Board of Directors
<b>Last Date Reviewed:</b>	November 2021	<b>Cross Reference(s):</b>	

### 1. POLICY STATEMENT:

The regular evaluation of the Chief of Staff (COS) is one of the most important responsibilities of the Board. The evaluation process provides a formal opportunity for the Board and COS to have a constructive discussion regarding clinical care at Carleton Place & District Memorial Hospital and the COS's leadership of the Medical staff.

The Board Executive Committee (the Committee) is charged with leading and implementing the COS evaluation process. The Board is involved in approving the COS's objectives, giving input into the annual evaluation process and reviewing the information that contributes to the final evaluation. The evaluation period is usually aligned to the Hospital's fiscal year to enable alignment with other key metric reporting – Quality Improvement Plan, 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. A mid-year discussion between the Board Chair and COS may be undertaken to advise on progress and provide feedback.

### 2. SCOPE:

This policy applies to the Board Executive Committee, Chief of Staff, Board of Directors and the Board Chair.

### 3. GUIDING PRINCIPLES:

The review takes place with assessment against the following benchmarks:

- A written statement of the COS's objectives for the year under review. These goals have been agreed to by the COS and the Board at the beginning of the year under review.
- The expectations set out in the job description for the position
- The Board approved COS Annual Performance Review

### 4. DEFINITIONS:

N/A

## 5. PROCEDURE

### 5.1 Goals & Objectives

The COS Goals and Objectives will be provided annually to the Committee for review and recommendation to the Board of Directors for approval at the March Board meeting.

#### 5.1.1 Goals & Objectives Mid-Year Discussion

1. The Board Chair leads the mid-year COS Goals & Objectives discussion.
2. The Board Chair will solicit input from Board members, through discussions held without the COS after a Board meeting or through other means as determined by the Committee.
3. The Board Chair will review and summarize the feedback and advice.
4. The Board Chair and COS will meet to discuss the mid-year performance. The Board Chair will invite at least one other director to participate in the discussion.
5. The Board Chair will update Board members on the discussion at the next available opportunity after the discussion with the COS.

#### 5.1.2 Goals & Objectives Year-End Review

The COS presents the results of the COS Goals and Objectives to the Board of Directors.

### 5.2 COS Performance Evaluation Year-End Review

1. The Board Chair will lead and implement the COS's year-end review process, which will be completed by the June Board meeting each year.
2. Board Directors and Senior Team will be the participants invited to complete the survey annually.
3. A 360 degree survey that includes Directors, Senior and Leadership Team members, all Medical Staff and external stakeholders will be conducted every two years.
4. The Board Chair will receive and discuss the survey results
5. The results of the survey will be sent to the COS.
6. The COS will, after receiving the evaluation results, complete a self-appraisal in written form and send a copy to the Committee Chair
7. The Committee will receive and discuss the COS's self-appraisal and the results of the survey. These assessments are then consolidated by the Board Chair into a report from the Board to the COS.
8. The Board Chair discusses the summary with the full Board before meeting with the COS.
9. The Board Chair meets with the COS to discuss the results. The Board Chair will invite at least 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.
10. A summary of the discussion is provided by the Board Chair at the In-camera session of the June Board meeting.
11. Any issues arising through this process will be discussed at a Committee meeting after the discussion with the COS.

**6. REFERENCES:**

Almonte General Hospital Board Policy II-5 Chief of Staff Evaluation

**7. APPENDICES:**

**N/A**

**Evaluation:**

This policy will be reviewed every two years.

**Timing and Responsibilities for Approval of the COS Goals & Objectives**

<b>Activity</b>	<b>Who</b>	<b>When</b>
1) The COS develops a draft set of Goals and Objectives that are reviewed by the Committee and approved by the Boards	COS  Executive Committee  Board	Approved by the boards in March each year
<b>Year End</b>		
(a) The COS presents the results of the Goals and Objectives to the Board	COS  Board	May Board meeting

<b>Mid-Year</b>		
(a) The Board Chair will gather information	Chair	
(b) The Board Chair and the COS will meet to discuss any issues or concerns any party has with respect to achieving the Goals for the year	COS Board Chair	Early to mid-November
(c) The Board Chair will update the Board Members on the discussion	Board Chair	November Board meeting
(d) Issues, if any, will be discussed at a Committee meeting	Executive Committee	December meeting and as required

### Timing and Responsibilities for the COS Performance Evaluation

<b>Activity</b>	<b>Who</b>	<b>When</b>
1. Survey on COS performance will be distributed to Directors and Senior Team or 360 as appropriate and completed	Board Chair	After the May Board meeting
<b>Year End</b>		
2. The Committee reviews the survey results and sends to the COS	Executive Committee	First week of June
3. The COS will, after receiving the evaluation, prepare a response to the evaluation and send it to the Board Chair	COS Board Chair	Second Week of June
4. The Board Chair and one other Director meet with the COS to discuss the evaluation. Professional Development Plans for the coming year will be agreed upon if required.	Board Chair COS	Second/Third week of June
5. The Board Chair will prepare a summary of the assessment process, including, for completeness, achievement against the goals and objectives, to discuss with the Board.	Board Chair	June Board Meeting
6. The Board will discuss any recommendation for compensation changes	Board	June Board meeting
7. Issues, if any, will be discussed at a Committee meeting	Executive Committee	June meeting and as required