

SOUTH HURON HOSPITAL ASSOCIATION

SECTION	BOARD		
TITLE	GOVERNANCE & PLANNING COMMITTEE – TERMS OF REFERENCE		
APPROVAL	<hr/>		
	Board Chair		
DATE	Oct. 23, 2003 <i>(original date)</i>	June 25, 2004 <i>(revised date)</i>	Sept. 2006 <i>(revised date)</i>
	Oct. 2006 <i>(revised date)</i>	Nov. 2009 <i>(revised date)</i>	

MEMBERSHIP

Chair of the Board
 Vice-Chair of the Board (*Chairperson of the Committee*)
 Past-Chair of the Board (*or alternate*)
 Chief Executive Officer (*non-voting*)
 Board Member
 Medical Staff Representation

FREQUENCY OF MEETINGS

The Committee shall meet a minimum of four (4) times a year and/or at the call of the Chair of the Committee.

RESPONSIBILITIES

To the extent that the Board delegates these governance responsibilities to the committee, the committee is responsible for the following duties:

1. Assemble and review the names of potential nominees for the Board in accordance with the by-laws, considering the nominee's potential contributions to the Board and the Board's current requirements including the need for Board diversity.

2. Recommend a slate of nominees for directors to the membership of the corporation at the Annual General Meeting.
3. Participate in succession planning for director and officer positions on the Board and nominate officers for election or appointment to the Board.
4. Ensure there is a process for adequate orientation and provision of continuing education opportunities for the Board.
5. Ensure a process is in place to evaluate the Board's performance in relation to its responsibilities.
6. Periodically review and revise governance policies, processes and structures as required.
7. Ensure there is a process for administration to report areas of non-compliance with current legislation applicable to directors and recommended solutions.
8. Ensure the development, ongoing monitoring and implementation of the hospital's strategic plan for South Huron Hospital Association, which includes a clinical services and medical manpower plan.
9. Set and review annual priorities for the hospital providing regular progress reports to the Board.
10. Lead in the evaluation of the Chief of Staff every two (2) years.
11. Perform such other duties as may be requested by the Board.

Evaluation

Annually (May) each committee member will complete committee self-assessment template (attached). The results of the self-assessment will be utilized to measure and improve committee effectiveness.

The Chair of the committee will receive completed forms and report results to committee members at the following meeting.