

**TERMS OF REFERENCE COMPLIANCE – COMMITTEE WORK PLAN
KHSC PEOPLE, FINANCE & AUDIT COMMITTEE
2022-23**

Finalize: August 17, 2022 Senior Leadership Planning Session
 Discuss: August 31, 2022 Committee Chairs Planning Session
 Endorse: Review & Endorse at September 2022 committee Mtg
 Approved by KHSC Board – October 25, 2022

Month	MRP	September	November	January	February	April	May
Date		26	28	16	27	24	29
Focus		Q1	Q2	HAPs / CAPs	Q3 HSA/MSAA, QIP 2023-24	IACP & Indicators	Q4
Terms of Reference Requirements							

1.0 General Responsibilities	recommend an annual work plan to the Board based on following terms of reference;	Bansal	Review draft work plan & recommend to Board including review of committee TOR					
	present a year-end report to the Board;	Bansal						Review draft year-end committee report and recommend to Board & ensure report captures governing body achievements
	annually review, confirm and recommend revisions to the Board policies for which they have oversight responsibilities;	Bansal	Review People, Finance & Audit oversight policies at committee orientation	Bring forward final draft on Board policy #V-B-9 on Director expenses				Final bylaw and policy revisions
	ensure principle based decision-making guides all committee discussions and decision-making; and	EVPs Ilse - Lead	Generative Topic Resource Allocation & Board Accountability	Generative Topic ALC, LTC & Patient Choice	Generative Topic TBD	Generative Topic TBD	Generative Topic TBD	Generative Topic TBD

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2.0 People	Other duties as assigned by the Board;	Multiple	Ensure orientation briefing at first meeting focusing on role to provide oversight and advice to Board on financial performance of hospital, capital, info mgmt, enterprise risk & redevelopment. To provide oversight for human resources and occ health/wellness for employees, credentialed staff, learners and volunteers CEO Update – Aligned with Committee Mandate	Ontario Health Team Update as required CEO Update – Aligned with Committee Mandate	CEO Update – Aligned with Committee Mandate	CEO Update – Aligned with Committee Mandate	Ontario Health Team Update as required CEO Update – Aligned with Committee Mandate	Review compliance attestation(s) and recommend to Board CEO Update – Aligned with Committee Mandate
	review the hospital's talent management and leadership development plan annually	Carlton	Briefing on KHSC's talent management plan					
	Review health human resource plan and labour relations reports	Carlton	Update on HHR Planning	Update on HHR Planning	Update on HHR Planning	Update on HHR Planning	Update on HHR Planning	Update on HHR Planning Annual Labour & Employee Relations Update
	review and recommend to the Board the approval of the annual occupational health and safety report	Carlton	Annual occupational health and safety report			Update on workplace violence		
	review staff and physician engagement strategy and related results	Carlton/Gillies Fitzpatrick	Update on staff and physician engagement initiatives					

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	review medical staff resource plan	Fitzpatrick/ Gillies		Update from November SEAMO Retreat including status on SEAMO 3-year HHR plan				
	ensure the integrity and completeness of the appointing and credentialing process for medical, dental, midwifery, and extended class nursing staff	Gillies Fitzpatrick	Update on KHSC's credentialing processes					
	ensure the integrity and completeness of the appointment and hiring process for employees and volunteers	Carlton					Update on KHSC's hiring process	
3.0 Finance	ensure policies are in place to provide a framework for the management of hospital investment assets;	Bansal				Discuss Investment Policy and review Investment Guidelines and compliance reporting		
	review and recommend to the Board the Hospital & Community Annual Planning Submissions (HAPS/CAPS) and internal operating and capital budgets;	Bansal	2022-23 Hospital / Community Annual Planning Submissions – COVID impacts Overview of 2022-23 internal operating and capital budgets					
	review and recommend to the Board the Hospital Services Accountability Agreement (H-SAA) and Multi-Sector Service Accountability Agreement (M-SAA); ensure oversight of performance, compliance with annual operating/capital budgets and other financial targets and annually confirm and recommend to the Board a set of key performance indicators relative to the financial position;	Multiple	Q1 report H-SAA / M-SAA financial indicators Update on outstanding one-time funding requests	Q2 report H-SAA / M-SAA financial indicators Update on H-SAA / M-SAA agreements (subject to SE LHIN timeframes)	Q3 report H-SAA / M-SAA financial indicators Recommend H-SAA / M-SAA to Board (subject to SE LHIN timeframes)	Q4 report H-SAA / M-SAA financial indicators Annual attestation – MSAA indicators		

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	regularly review the hospital's financial statements;	Bansal	Review & discuss financial results including COVID impacts	Review & discuss financial results including COVID impacts		Review & discuss financial results including COVID impacts	Review & discuss financial results including COVID impacts	Review & discuss financial results including COVID impacts
	review related elements of bargaining mandates as brought forward by management;	Carlton	Update on collective bargaining activities for fiscal 2022-23 including recent arbitration awards				Update on collective bargaining impacting current fiscal year including recent arbitration awards	
	review impact of sick, vacation and WSIB;	Carlton				Update on financial impact of non-worked compensation related items		
	monitor debt obligations and repayment planning;	Bansal		Receive report on debt obligations and repayment planning				
	recommend according to board policy capital and operating expenditures that exceed management's spending authority;	Multiple	As required	As required	As required	As required	As required	As required
	as prescribed by Board policy, approve/recommend the financial aspects of proposed business cases, contracts and transactions related to operations;	Multiple	As required	As required	As required	As required	As required	As required
	recommend the signing authority & banking resolution, and signing officers and approval of the Board authorized trust accounts;	Bansal	Briefing on KHSC's signing authority guidelines to Board					Confirm adjustments to Banking Resolution/Officer succession post June Board/AGM/Special

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4.0 Audit	assess and review all aspects of the relationship with external auditors and recommend reappointment, or replacement of the auditors including remuneration;	Bansal				Discuss performance of external auditors on interim audit activities		Recommend to Board reappointment or replacement of external auditors
	review scope of the external annual audit and recommend the annual audited financial statements and the external auditors' report;	Bansal	Review status of prior year external audit recommendations			Review and endorse the proposed fiscal 2022-23 external audit plan Receive results of interim external audit activities	Review draft format for audited financial statements and note disclosures	Review draft audited financial statements, note disclosures and audit findings and special audit reports with external auditors and recommend to Board
5.0 Property, Facilities & Development	review capital redevelopment and infrastructure project proposals, including funding strategies, which require approval by the Local Health Integration Network and the Ministry of Health and Long-term Care;	Wells Pearce / Bansal	Receive Redevelopment reports as required	Receive redevelopment reports as required Update from UHKF on local share funding to support redevelopment		Receive Redevelopment reports as required	Receive Redevelopment reports as required Update from UHKF on local share funding to support redevelopment	Receive Redevelopment reports as required
	review quarterly reports from management on the status of capital development and infrastructure projects;	Wells Pearce / Bansal	Q1 Update on major capital development & infrastructure projects	Q2 Update on major capital development & infrastructure projects		Q3 Update on major capital development & infrastructure projects		Q4 Update on major capital development & infrastructure projects
6.0 Information Technology	review periodic reports from management related to major projects of information management technology functions, including regular financial reporting;	Gamache O'Leary	Q1 Update on major IT projects including regional HIS project	Q2 Update on major IT projects including regional HIS project		Q3 Update on major IT projects including regional HIS project		Q4 Update on major IT Projects including regional HIS project
	review processes in place to safeguard information sources including patient confidentiality;	Gamache O'Leary				Receive overview of processes in place to safeguard information FOI compliance		

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7.0 Strategy Performance Targets	ensure progress on KHSC strategy and annual corporate plan by reviewing assigned performance indicators;	Multiple	Receive Q1 Strategy Performance Report	Receive Q2 Strategy Performance Report		Receive Q3 Strategy Performance Report	Review 2023-24 IACP & QIP and associated indicators for recommendation to May 2023 KHSC Board Session on ACP & SPI	Receive Q4 Strategy Performance Report
8.0 Integrated Risk Management Domains	ensure robust process for integrated risk management framework at KHSC;	Carter	Receive plan for revised approach to IRM and development of risk profile	As required		Receive Updated KHSC Risk Profile		As required
	receive the internal control reports and monitor management's resulting action plans;	Multiple	Review status update of prior year internal control review recommendations	Discuss & obtain approval for current year internal control review activities			Receive current year internal control report and discuss management's response to recommendations	
	review and confirm the appropriateness and effectiveness of the internal control processes including key policies;	Bansal		Discuss proposed internal control framework				
	confirm the type and amounts of insurance carried by the hospital;	Carter		Receive annual update on all insurance claims (post HIROC annual visit in October)				
	Monitor and report on the integrated risk domains assigned to this committee which include: <ul style="list-style-type: none"> o To be defined through the development of new risk profile 	Carter + Bansal, Carlton, Gamache-O'Leary	Receive plan for revised approach to IRM and development of risk profile	As required	Receive Updated KHSC Risk Profile	As required	As Required	As required
9.0 Board Reporting Requirements	Board reports due at CEO's office Board mailing date Board meeting date	Ralston	October 10 October 17 October 24	December 1 December 5 December 12	January 19 January 23 January 30	March 13 March 20 March 27	April 27 May 1 May 8	June 5 June 12 June 19