	Month	MRP(s)	September	November	January	February	April	May
	Date		27	29	17	28	25	30
	Focus		Q1 & Orientation / Work Plan	Q2	Board Nominations Work	Q3 & QIP	IACP & Indicators HSAA/MSAA	Q4
	Terms of Reference Requirements							
1.0 General Responsibilities	Recommend an annual work plan to the Board based on following terms of reference  Present a year-end report to the Board  Annually review, confirm and recommend revisions to the Board policies for which they have oversight responsibilities	llse llse	Draft committee work plan reviewed as part of orientation + terms of reference  Review Governance oversight policies at committee orientation  Policy revision recommendations  Policies for Sep Meeting I-1 Mission & Values I-2 Strategic Planning II-1 CEO Selection/Succession V-B-4 Board Goals/Workplan V-B-6 Meeting without Management Present V-B-10 Review of Board Policies	Policy revision recommendations  Policies for Nov Meeting V-A-3 Position Description Chair V-A-4 Position Description Board & Committee Chairs V-A-6 Position Description BOD V-A-7 Pos Description – Past Chair V-B-7 Board & Cttee Attendance V-B-8 Board & Ind Director Eval V-B-11 Removal of Director	Touchpoint + amendment of Board work plan  Review of Approach to Annual Board Policy Review  Policy revision recommendations  Policies for Jan Meeting V-A-2 Board Standing & Special Committees V-2 COI Provisions for the Board V-3 Board Code of Conduct V-4 Confidentiality V-B-0 Process to Nom Director V-B-1 Process Select Officers V-B-2 Process to Nom Chair, Directors, External Members V-C-0 PEA Selection to Board & Committees	Confirm year end committee report framework questions  Policy revision recommendations  Policies for Feb Meeting II-2 CEO Direction II-3 CEO Perf. Evaluation II-4 CEO Compensation II-6 COS Direction & Succession II-7 COS Perf Evaluation II-8 COS Compensation III-2 Performance Monitoring	Coordinate proposed amendments from February Committee meetings on policy or bylaw changes  Note: Bylaw amendments are confirmed by Partnership Council  Policy revision recommendations  Policies for April Meeting III-4 Ethics & PBDM VI-1 Relations with UHKF VI-2 Corporate Comms VI-4 Naming KHSC Assets VI-5 Temp Removal of Religious Icons	Final executed work plan provided with year-end committee report  Draft year-end committee reports  Final review of bylaw and policy revisions recommendation to June Board  Note: Include in compliance report to Partnership Council  Policies for May Meeting V-1 Governance Framework V-A-1 Director & Ext Member Declaration Process V-B-3 Board Orientation & Education V-B-5 Board Mtgs, Agenda Development & Use of Consent Agenda
	Ensure principle-based decision-making guides all committee discussions and decision-making and incorporating the Catholic Health Ethics Guide at the HD site	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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	Other duties as assigned by the Board	Pichora	CEO Updates on Partner Relations – standing item	Ontario Health Team Update CEO Updates on Partner Relations – standing item	CEO Updates on Partner Relations – standing item	CEO Updates on Partner Relations – standing item	Ontario Health Team Update  CEO Updates on Partner Relations – standing item	CEO Updates on Partner Relations – standing item
2.0 Governance & Nominations	Establish, for board approval, the annual board work plan and ensure standing committees develop work plans that reflect their terms of reference and the board's work plan	llse	Draft standing committee work plans / TOR compliance confirmed (will be discussed at August 31 Board Committee Chairs Planning Session)		Mid-year review of 2022-23 Board Work Plan ensure deliverables are being met / adjusted		2022-23 Master Board & Committee Schedule recommended to Board for approval	Recommend for approval, 2023-24 Board Work Plan
Governance 8	Review and recommend best practice in terms operating structure of the Board and its committees; including committee size, structure, mandates, and procedures for effective governance	Ilse	Confirm Rules of Order and provide confirmation to KHSC Board	Identify survey tool to seek input on KHSC's new board committee reporting structure  (OHA/Accreditation Survey) – Meeting Effectiveness Survey Confirm draft Expression of Interest Form questions to support 2023-24board selection process.  Draft #1  2023-24 Board Committee Comps (in advance of Board Chair 1:1 mtgs in January 2023)	Discuss KHSC Board & Committee structure and size / recommend any adjustments to KHSC January board meeting  Briefing on selection process to bring forward recommendations for Patient Experience Advisors to serve on KHSC board committees for 2023-24	Complete/report on Patient Experience Advisor selections for 2022-23 Board Committee Compositions  Draft #2 2023-24 Board Committee Comps post 1:1 mtgs with individual members	Explore rules of order and confirm for 2023-24	Final 2023-24 Board Committee Comps and overall Officer Succession Plan

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		Plan				HSAA/MSAA	
Terms of Reference Requirements							
Ensure and oversee the process for evaluation of performance of Board as a whole, for individual board members, and the Chair and Vice Chair(s), and ensure recommendations for improvement are addressed and considered where appropriate in board and committee appointment process	llse	Committee Chair evaluation update and timeline	Review board effectiveness survey process taking into consideration Accreditation Canada effective governance tool + new standards  Approach and framework with full Board / confirm timelines + discuss selection of Third-Party Evaluator to support Board effectiveness processes	January 1:1 meetings with Chair – high level report & plan / feedback to officers, individual board & committee members	Committee Chair results + next steps	Update on feedback to Officers & Committee Chairs on evaluation input	

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			Plan				HSAA/MSAA	
	Terms of Reference Requirements							

		Board of Direct	ctors Nominations Process	Fimeline & Deliverables for 2	022-23		
Ensure and oversee the nominations and selection process of directors and board officer positions for approval by the Board (+ other KHSC Board appointments to other bodies)  Timeline for board selection process: Ad in paper – January 28, 2023 Applications received by – February 8, 2023Apps distributed to Cttee – February 13, 2023 Shortlist for Interview at Governance – Feb 28, 2023 Email invitation to candidates – Feb 28, 2023 Interviews: March 15 & 16, 2023 Follow up email to continue: March 20, 2023 Reference checks by: March 27, 2023 Results to committee: April 3, 2023 Gov Agenda package: April 18, 2023 Gov meeting: April 25, 2023 – proposed slate Board package: May 1, 2022 Board mtg: May 8, 2023 – proposed slate Partnership Council: proposed slate KHSC AGM/Special: June 19, 2023 final slate	llse	Review critical path for Board nominations process and provide update to October Board meeting (explore structure of nominations process around External Community Members (PC&Q/PF&A/Research) and ECFAA Required Member of Staff for PC&Q  Note: Board to report to Partnership Council at its November meeting	Finalize Expression of Interest Form, confirm whether adjustments are needed to skills matrix + issue EOI to Board in early December (consider adding a section to have board members complete skills matrix of the board as a whole and not just for self-identifying)  Board Officer Timeline & De	Review board and committee attendance for bylaw compliance in advance of Jan 1:1 Chair meetings  Results of EOI discussed; board vacancies confirmed; skill requirements endorsed for draft board advertisement. Board briefed at January 30th meeting	Shortlist Candidates for Interview/Board and Committee positions  Review and confirm Interview Panel participants  Review and confirm interview questions and schedule	Final draft slate for KHSC Board  Note: recommendation to Partnership Council as part of compliance report at May meeting	
Ensure and oversee the nominations and selection process of directors and board officer positions for approval by the Board (+ other KHSC Board appointments to other bodies)	llse		Confirm succession questions and process as part of Expression of Interest process for officer and committee chair positions in 2023-24	Board Chair / Governance Chair share results from 1:1 meetings; additional elected member interest in office, committee chair positions may be identified through these discussions	Gov Chair will undertake confidential discussions with the Chair and Vice Chair to confirm desire to: continue in current role / desire to take up Immediate Past Chair Role and Incoming Chairs support for this position; confirm process by which new Vice Chair is selected	Governance Chair confirms that outcome has been reached / Chair and Vice Chair  Governance Chair confirms with Board Chair desire to take up Past Chair Board position; also confirms Incoming Chair's support for this position	Finalize 2023-24 Vice Chair position for recommendation to Board at KHSC special meeting that follows annual general meeting

	27 Q1 & Orientation / Work Plan	29 Q2	17 Board Nominations Work	28 Q3 & QIP	25 IACP & Indicators	30 Q4
		Q2	Board Nominations Work	Q3 & QIP		Q4
					HSAA/MSAA	
llee	Deview of Orientation		Daview Deard Education			T
iise	Checklist		Plan / identify gaps for 2023-24 board year to include Institute for Patient			
llse	Confirm that committee orientation sessions including TOR review and discussion		& Failing Centiled Care			Review committee terms of reference and adjust according to bylaw/policy changes
	Review committee terms of reference and adjust according to bylaw/policy changes					
llse	Review Governance oversight policies at orientation					Final review of bylaw and policy revisions recommendation to June Board
Thesberg/ Pichora	As required	As required	As required	As required	As required	As required
	Ilse Thesberg/	Ilse Confirm that committee orientation sessions including TOR review and discussion  Review committee terms of reference and adjust according to bylaw/policy changes  Ilse Review Governance oversight policies at orientation  Thesberg/ As required	Ilse Confirm that committee orientation sessions including TOR review and discussion  Review committee terms of reference and adjust according to bylaw/policy changes  Ilse Review Governance oversight policies at orientation  Thesberg/ As required As required	Checklist  Checklist  Plan / identify gaps for 2023-24 board year to include Institute for Patient & Family Centred Care  Ilse  Confirm that committee orientation sessions including TOR review and discussion  Review committee terms of reference and adjust according to bylaw/policy changes  Ilse  Review Governance oversight policies at orientation  Thesberg/  As required  As required  As required	Checklist  Checklist  Plan / identify gaps for 2023-24 board year to include Institute for Patient & Family Centred Care  Ilse  Confirm that committee orientation sessions including TOR review and discussion  Review committee terms of reference and adjust according to bylaw/policy changes  Ilse  Review Governance oversight policies at orientation  Thesberg/  As required  As required  As required  As required	Checklist  Checklist  Plan / identify gaps for 2023-24 board year to include Institute for Patient & Family Centred Care  Ilse  Confirm that committee orientation sessions including TOR review and discussion  Review committee terms of reference and adjust according to bylaw/policy changes  Ilse  Review Governance oversight policies at orientation  Thesberg/  As required  As required  As required  As required  As required

Finalize: August 17, 2022 Senior Leadership Planning Session Discuss: August 31, 2022 Committee Chairs Planning Session Endorse: Endorsed at September 27, 2022 committee Mtg Approved by KHSC Board – October 25, 2022

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	Terms of Reference Requirements							
						<u> </u>		
3.0 Alignment	Review alignment of KHSC strategy with Ministry of Health and Ontario Health - East strategies annually and as needed;	llse				Update on Development of Annual Corporate Plan for 2022-23	Ensure alignment with 2023-24 integrated annual corporate plan deliverables	As required
3.0 Strategic Partnerships & Alignment	Ensure processes are in place to build and maintain relationships with MOH, OH-E, health system partners and local community;	Exec team Pichora Ilse		Ontario Health Team Update as required  Regional HIS project update at KHSC Board Committees – focus on partnership relations			Ontario Health Team Update as required  Confirm KHSC Board cross appointment Volunteer Services/ Auxiliary for 2023-24	
Strai	Ensure processes and agreements are in place to support University Hospitals Kingston Foundation and donors;	llse	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations	CEO Updates on Partner Relations – standing item As required – corporate naming recommendations
	rangotor i oundation and donors,		Receive confirmation of UHKF Board cross appointment to KHSC Board for 2022-23				Confirm KHSC Board cross appointment to UHKF Board for 2023-24	Consider UHKF Board Slate for 2023-24 / recommendation to KHSC Board for Endorsement
4.0	Develop a process to oversee the performance and compensation of the chief executive officer and chief of staff;	Carlton	Confirm that pay for performance for 2021-22 has been completed	Update provided on annual learning plans for 2022-23		Briefing on PSSD for 2021	Ensure QIP link to performance metrics for 2023-24	2022-23 Pay for Performance recommendation to Board
4.0 CEO & COS Performance			Discuss approach to 360 performance review / confirm product and timelines – report to KHSC Board			Update on CEO Learning Plan  Update on COS Learning Plan		Confirm Approach to 2023- 24 P4P Performance Metrics
CEO	Develop a position description for the chief executive officer and chief of staff for approval by the board;	Carlton					Provide CEO and COS position descriptions to support 2023-24 evaluation process	

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	Oversee chief executive officer and chief of staff recruitment, selection and succession planning;	Carlton/ Board Chair/ Pichora & Fitzpatrick	Update on overall succession planning for executive team and physician leadership				Reaffirm candidates for sudden CEO and COS succession planning	
	Develop and conduct a process to review the performance of the chief executive officer and chief of staff and report the results to the Board;	Carlton					Confirm approach to 2022-23 CEO and COS Performance Evaluation Process	Draft written performance review reports finalized / provided to KHSC Board at June meeting
	Establish, in co-operation with the chief executive officer and chief of staff, their annual performance agreement for review and approval by the Board and ensure quarterly reporting on performance objectives;	Carlton/ Ilse	Q1 CEO & COS Performance Objectives Reporting	Q2 CEO & COS Performance Objectives Reporting		Q3 CEO & COS Performance Objectives Reporting		Q4 CEO & COS Performance Objectives Reporting  Recommend to Board on 2023-24 Performance Agreement & Performance Metrics
	Oversee the chief executive officer's and chief of staff's supervision of management and management succession plan;	Carlton/ Pichora/ Board Chair					Briefing from CEO and COS on executive leadership succession framework	
5.0 KHSC Strategy & Annual Corporate Planning Process	Ensure robust process of strategy development and annual corporate planning including performance reporting is in place recognizing the primary function of the Board will be to approve the long-term strategy and annual corporate plan;	llse	Receive Q1 Strategy Milestone Report	Receive Q2 Strategy Milestone Report	Touchbase on 2022-23 Annual Corporate Plan in advance of January HAPs submission	Receive Q3 Strategy Milestone Report  Update on Development of 2022-23 IACP Work	Review 2023-24 IACP & QIP and associated indicators for recommendation to May 8 KHSC Board Session on ACP & SPI	Receive Q4 Strategy Milestone Report  Final draft of 2023-24 indicators performance measurement system for 2023-24 IACP (post January HAPs/HSAA/ MSAA Board approval)

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6.0 KHSC Performance Targets	Ensure progress on KHSC strategy and annual corporate plan by reviewing assigned performance indicators;	llse	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 8 KHSC Board Session on ACP & SPI	Receive Q4 Strategy Performance Report
7.0 Mission	Monitor and report to the Board on matters of mission and ethics and make recommendations to the Board to ensure that the overall mission, vision, values of KHSC are consistent with the missions and values of KGH and HDH and that campusspecific missions of HDH and KGH are maintained in accordance with the KHSC Operating Agreement;	llse					Review draft year-end compliance report & attestation to KHSC May 8 Board & Partnership Council regarding Mission at HDH and KGH to ensure compliance with Operating Agreement	
8.0 Integrated Risk Domains	Monitor and report on the integrated risk domains assigned to this committee which include:  To be defined through the development of new risk profile	Carter	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

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9.0 ements	Standard 13.9: The governing body prepares an annual report of its achievements	llse				To Be Determined	To Be Determined	
9.0 Accreditation Requirements	GFT Question 9: Our governance processes need to better ensure everyone participates in decision making	llse/Carter	To Be Determined					
ccreditati	Question 19: There is a process for improving individual effectiveness when non-performance is an issue	Board Chair						
4	Question 20: As a governing body, we regularly identify areas for improvement and engage in our own quality improvement initiatives	llse						
	Question 21: As individual members, we need better feedback about our contributions to the governing body	Board Chair						
10.0 Board Reporting	Board reports due at CEO's office Board mailing date Board meeting date	Cuddington	October 10 October 17 October 24	December 2 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