

Document Name:	CEO and COS Position Description		
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Classification:	Board of Directors	Section: Leadership	
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POLICY STATEMENT:

Given that President & Chief Executive Officer (CEO) and the Chief of Staff (COS) report to the Board of Directors, it is the Board's responsibility to ensure that the President & CEO position and the COS position are clearly defined in accordance with legislative, regulatory, contractual, and Accreditation requirements, and that the roles, responsibilities, and accountabilities are reviewed regularly and reflect the organization's commitment to quality, safety, equity, and people-centred care.

PROCEDURE:

The Board of Directors will ensure the ongoing development, maintenance, and review of comprehensive and current position descriptions for both the President & CEO and the COS, ensuring that:

- Each role's responsibilities and accountabilities are clearly defined.
- The descriptions clarify the separate responsibilities of governance and executive leadership while also outlining areas of collaboration between the two.
- Is written using inclusive, neutral, and non-discriminatory language.
- The descriptions reflect the hospital's mission, vision, values, and strategic direction.
- Is informed by input from the President & CEO and reflects collaboration between the executive and the governing body.
- Complies with all relevant laws, regulations, and contractual obligations.

Responsibilities of the Governing Body

The Board of Directors will:

- Approve and maintain up-to-date position descriptions for both the President & CEO and the COS.
- Review the Position Description at a minimum every three years or as required due to legislative or organizational changes.
- Seek and incorporate input from the President & CEO and the COS during development and revision.
- Ensure alignment with the organization's mission, vision, values, and strategic direction.

Position Description Requirements

Each position description will include:

a. General Role Summary

- A high-level overview of the role and its purpose within the organization.

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b. Reporting Relationship

- Clarifies accountability to the Board of Directors and, where applicable, shared accountability with other system or medical oversight bodies.

c. Key Responsibilities and Accountabilities

- **President & CEO:** Organizational leadership; operational and financial oversight; strategic plan execution; system partnerships; people-centred care delivery; compliance with laws and regulations.
- **Chief of Staff:** Medical leadership; professional practice standards; credentialing and privileging; physician engagement and performance; quality of medical care; supporting a culture of clinical excellence.

d. Stakeholder Accountability

- Clear accountability to patients, families, the workforce, volunteers, and community partners for the delivery of safe, effective, and equitable care.

e. Governance Interface

- Role in supporting effective governance through communication, reporting, and collaboration with the Board.

f. Inclusion, Diversity, Equity, Anti-Racism, Accessibility (IDEAA)

- Responsibilities in advancing IDEAA values within the hospital and the broader health system.

Review and Revision Process

- The Board, in collaboration with the President & CEO and the COS, will review the Position Description during the CEO's performance review cycle or when significant changes occur in organizational structure, governance requirements, or external regulations.
- Revisions will be formally approved by the Board and documented.

REFERENCES:

1. HGMH Corporate Bylaws
2. Professional Staff Bylaws
3. Accreditation Canada

Appendix A – President & Chief Executive Officer Position Description

Accountabilities / Responsibilities:

Board of Directors

- Plans, organizes, assumes the preparation and participates in the Board of Directors meetings and its committees, provides the members with all of the elements necessary to the understanding of administrative issues directly or indirectly related to the missions and mandates of HGMH;
- Provides assistance to the members of the Board of Directors in the formulation of the Hospital directions, regulations, and policies;
- Assures the execution of all resolutions of the Board of Directors; provides pertinent information to the members of the different levels of the structure; assures follow-up of the directions and decisions of said Board;
- Assures the proper functioning of all the committees provided in the organizational plan and regional networks / committees;
- Forms all the internal committees necessary to the good functioning of the Hospital, determines their objectives, their authority, and their composition;
- Submits to the Board of Directors the organizational and functional structure of the Hospital, in relation with the missions and objectives to attain;
- On an annual basis or when necessary, provides the Board of Directors with a comprehensive report on its administration, stating, namely, the degree of achievement of the objectives set at the beginning of the year, and the difficulties encountered;
- Recommends the action plans as well as the implementation and assessment mechanisms regarding the outcome;
- Submits the Hospital operating plan to the Board of Directors for its approval and provides regular monitoring against the plan;
- On behalf of the Hospital, signs the contracts authorized by the Board of Directors and makes sure that they are respected;
- Informs the Board of Directors on the different policies and directives issued from the Ontario Ministry of Health MoH and Ontario Health (OH) that are pertinent to the Board of Director's deliberations and decisions;
- Complies with all applicable legislations.

Realization of the Hospital's Mission

- Defines the operational objectives of the Hospital which assure the realization of its mission;
- Sees that the policies and procedures of the Hospital respect the standards required by Accreditation Canada and other accreditation bodies or organizations recognized in Canada;
- On a periodical basis, assures that the assessment of the needs of the clientele and personnel is carried out, in order to re-adjust, when needed, the Hospital's programs and activities of care and services;
- Assures the quality of care and services provided to clientele.

Strategic Management / Leadership

- On a periodical basis, revises the Hospital's directions and priorities in the framework of a healthy strategic plan, taking into account the mission, the evaluation of the needs of the clientele and personnel, Ontario Health Strategic Priorities, and the MOH Action Plans;
- Assures the implementation of policies, procedures, and of integration and coordination mechanisms essential to the presentation of quality services, to a healthy resource management, and to the control of the professional act;
- Assures that the by-laws, regulations, and directives in effect at the Hospital are respected, as well as those pertaining to the collective agreements;
- Sets up problem solving and conflict management mechanisms; constantly sees to preserving balance in the work environment, favoring the autonomy of the members recognized corporations in their professional practice, while guaranteeing the respect due to each person, the pertinence and quality of services offered to the clientele, and the sound utilization of resources;

Management of Care and Services

- Institutes an ongoing care and services planning process, based on an evaluation of the clientele's needs, and on the complementarity with those services provided by the health care partners;
- Elaborates strategies for the upholding, development, or restructuring of care and services;
- Assures the actualization of care and services in accordance with the existing programs;
- Assures the implementation of a quality improvement program throughout the Hospital, by designating management staff for its coordination; ensures the participation of different professional groups and other works in the implementation of the program and of its quality improvement activities as regards care and services rendered to the clientele;
- Designates a member of the staff to be in charge for implementing the policy on users' complaints, and submits this designation to the Board of Directors;
- Transmits to the Board of Directors any recommendation or report addressed to him by the member of staff in charge for implementing the policy on users' complaints.
- Ensures the hospital operates in full compliance with all applicable laws, regulations, and healthcare standards.
- Provides oversight of the hospital's enterprise risk management framework to proactively identify, assess, and mitigate organizational risks impacting safety, operations, and reputation.
- Champions the provision of bilingual services in alignment with the hospital's designation and community needs, ensuring equitable access to care in both English and French.

Management of People

- Approves the human resources strategic plan;
- Sees to the selection and to the hiring of those reporting directly to the CEO;
- Favors mobilization, development, and expression of human resources as well as the development of an organizational culture;
- Identifies the measures to be taken in view of creating and maintaining a quality of life at work as well as a satisfying and stimulating environment amongst the Hospital in order to create a work environment conducive to staff retention;
- Sees to the elaboration, the implementation, and the follow-up of an evaluation process for management staff and non-management staff;
- Sees to the elaboration of an annual training plan for the personnel;
- Sees to the quality of the collective relations with the Hospital staff;
- Sees that a prevention program be implemented in order to protect the health and safety of the workers;

Management of Financial Resources

- Guides the budget planning process;
- Assures the parameters necessary to the preparation of the budget, recommends to the Board of Directors and sees to its execution;
- Assures the periodical evaluation of the global budget status of the Hospital;
- Foresees the strategies and the corrective measures, if necessary, in order to respect a balanced budget;
- Assures the preparation of the financial statements for the Board of Directors.

Management of Technical and Material Resources

- Sees that the Hospital Board be provided with a capital forecast;
- Assures the sound utilization and conservation of the Hospital's movables and immovable;
- Submits any urgent requests for capital worth \$5,000 or more to the Board for approval;
- Acts for and on behalf of the Board of Directors during construction projects, major renovations, or building renting, within the respect of the laws and regulations.

Management of Informational Resources

- Ensures the development, implementation, and updating of clinical and management systems in compliance with Ministry directives;
- Sees that the Hospital be provided with efficient information management systems, as much on the clinical or department levels than on the financial or operational levels.

Management of Internal Communication

- Assures the preparation of an efficient internal communication plan, accepted by the Board of Directors, and followed-up so that the Board may make its decisions based on pertinent, reliable, and comprehensive information; assures that these decisions be communicated to the required instances of individuals, and that each

group or individual of the Hospital secures, at a timely moment, the information that is useful to them in order to play their role and perform efficiently in their functions.

Management of External Relations

- Assures the upholding of the necessary relations with the community, Ontario Health, and the MOH, as well as with all other institutions or bodies or organizations concerned by the Hospital's mission;
- Assures an active representation of the Hospital amongst bodies, organizations, or committees to which they are invited to participate on a consultation or complementarity basis and develops strategies in that respect;
- Assures that the competent authorities, such as the MOH, are aware of the needs of the Hospital's clientele and does the representations which are essential in order to secure the necessary resources;
- Assures the respect of the agreements with the different teaching institutions in relation with the Hospital;
- Elaborates, with a collaboration, in an external communication policy and assures its functioning on the local and regional levels, vis-à-vis the media, social groups, and the associations concerned by the Hospital's activities;
- Favors the upholding of good relations with the media so as to inform the population of the decisions that, in one way or another, might affect and/or interest them;
- Assures that pertinent information concerning the Hospital is communicated to the external instances and to the public.

In accordance with the Corporate By-law:

- serve as an *ex-officio* non-voting Director.
- serve as an *ex-officio* member of all Committees.
- serve as the Board Secretary, unless otherwise determined by the Board; and
- perform such other duties as directed by the Board from time to time.

Key Competencies:

- Innovative, strategic, and inspiring leadership;
- Ability to credibly communicate with individuals, committees, and larger groups;
- Ability to influence;
- Flexibility and versatility;
- Empathy and concern for people;
- Ability to speak publicly;
- Excellent communication skills in both English and French (written and spoken) preferred;

Appendix B – Chief of Staff Position Description

Accountabilities / Responsibilities:

Board of Directors

- Participates in the Board of Directors meetings and its committees;
- Report regularly to the Board on the work and recommendations of the Medical Advisory Committee and any other matters about which the Board should have knowledge;
- Be accountable to the Board for the organization of the Credentialed Staff, the quality of care given by such staff, and the appropriate utilization of resources by all Departments;
- Advise the Medical Advisory Committee and the Board with respect to the quality of medical, diagnosis, care, and treatment provided by Credentialed Staff members to patients;
- Develop, recommend for Board-approval, and implement a Clinical Services Resource Plan, that considers current and future requirements, the health system, and the community, and identify resource implications;
- Working with the Board, periodically review and recommend changes to the Professional Staff By-law.

Strategic Management/Leadership

- Serve as a member of the Corporation's senior leadership team.
- Establish and maintain a positive, accountable, and collegial working relationship with the Board and the President and Chief Executive Officer characterized by decisive leadership, candor, and transparency, that is aligned with the mission, vision and values of the Corporation.
- Report to the Medical Advisory Committee on the activities of the Corporation, including the utilization of resources and quality assurance.
- Participate in the development of the Corporation's mission, vision, and values, and strategic plan.
- Through the Chiefs of Department, ensure adequate orientation, supervision, and assessment of the Credentialed Staff.
- Working with the Chiefs of Department and the Credentialed Staff Association, ensure the development of a continuing education program for the Credentialed Staff.
- Lead the Credentialed Staff appointment, reappointment, and credentialing process, and be responsible for any complaints, mediation, or disciplinary action regarding the Credential Staff.
- Working with the Chief Nursing Executive, review and monitor Hospital committee structures and processes.
- Work in partnership with the President and Chief Executive Officer and the Medical Advisory Committee to ensure alignment of clinical programs with the Corporation's strategic plan.

- Ensure systems are in place, in consultation with the President and Chief Executive Officer, for the review, development, and implementation of new programs and services and/or changes to existing programs and services.
- Consult with the President and Chief Executive Officer with respect to clinical programs and services, including the introduction of any new clinical programs and services and/or changes to existing programs and services.
- Demonstrate fiscal responsibility and support the President and Chief Executive Officer in ensuring fiscal accountability in accordance with the Board-approved budget for the fiscal year, and report any serious or recurring misuse of Hospital resources to the President and Chief Executive Officer.
- Work in partnership with the President and Chief Executive Officer to ensure capital projects are strategically aligned with the Corporation's mission and vision and provide strategic oversight and support to enable effective implementation and evaluation.
- Ensure a process for the regular review of the performance of the Chiefs of Department.
- Receive and make written recommendations regarding the performance evaluations of the Chiefs of Department concerning annual re-appointments.
- Advise the Credentialed staff on current Hospital policies, objectives, and rules.
- Delegate appropriate responsibility to the Chiefs of Department.

In accordance with the Corporate Bylaws

- Serve as an ex-officio non-voting Director
- Perform such other duties as directed by the Board from time to time.

Key Competencies:

Though this position is grounded in understanding hospital governance, this role requires a high degree of emotional intelligence, professionalism, accountability, discretion, objectivity, demonstration of the ability to work well with others, follow-through, and performance management. Bilingualism is an asset.

Required Qualifications:

- Active Staff in good standing