| LEGEND |
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| **Required Organizational Practices/Performance Measures** |
| High Priority |
| Different Subsection |

| | GOVERNANCE STANDARDS REVIEW |
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| 1.0 | The roles, responsibilities, and legal obligations of the board are defined and followed. |
| 1.1 | The roles, responsibilities, and legal obligations of the board are defined and regularly reviewed. |
| 1.2 | There is written documentation that identifies the board's roles and responsibilities, as well as how those roles and responsibilities are carried out. |
| 1.3 | The board approves, adopts, and follows the ethics framework used by the organization. |
| 1.4 | The board adopts a code of ethical conduct for its members |
| 1.5 | There is a process to develop the board's by-laws and policies and update them regularly. |
| 1.6 | The board's by-laws and policies are consistent with its mandate, roles, responsibilities, accountabilities, and the organization's ethics framework |
| 2.0 | The board has the appropriate membership to fulfill its role. |
| 2.1 | The mix of background, experience, and competencies needed in the board's membership is identified. |
| 2.2 | There are established mechanisms for the board to hear from and incorporate the voice and opinion of clients and families. |
| 2.3 | The board includes clients as members, where possible. |
| 2.4 | There is a documented process that is followed to elect or appoint the chair of the board. |
| 2.5 | The roles and responsibilities of the chair are described in a position profile, terms of reference, or by-laws. |
| 2.6 | There are written criteria and a defined process for recruiting and selecting new members of the board. |
| 2.7 | New members of the board receive an orientation before attending their first meeting. |
| 2.8 | Each member of the board signs a statement acknowledging his or her role and responsiblities, including expectations of the position and legal duties. |
| 2.9 | Members of the board receive ongoing education to help them fulfill their individual roles and responsibilities and those of the board as a whole. |
| 2.10 | The board's membership policies and/or by-laws address term lengths and limits, attendance requirements, and compensation. |
| 2.11 | The board's renewal cycle supports the addition of new members while maintaining a balance of experienced members to support the continuity of corporate memory and decision-making. |
| 3.0 | There is a defined and formal process for decision making. |
| 3.1 | The ethics framework and evidence-informed criteria are used by the board to guide decision making. |
| 3.2 | Areas where decision making is shared with government, funding authorities, and other health organizations are identified. |

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| 3.3 | The information required to support decision making is available and accessible to the board. |
| 3.4 | The board has processes in place to oversee the functions of audit and finance, quality and safety, and talent management. |
| 3.5 | Required information and documentation is received in enough time to prepare for meetings and decision making |
| 3.6 | The board reviews the type of information it receives to assess its appropriateness in helping the board to carry out its role |
| 4.0 | The board works with the organization's leaders to develop the organization's mission statement. |
| 4.1 | The board works in collaboration with the organization's leaders to develop the organization's mission statement. |
| 4.2 | When developing or updating the mission statement, input is sought from team members and external stakeholders, including clients, families, and partners. |
| 4.3 | Government or the organization's shareholders are regularly consulted to confirm the appropriateness of the organization's mandate and core services and to develop a common understanding about performance expectations. |
| 4.4 | The organization's mission statement is regularly reviewed and revised as necessary to reflect changes in the environment, scope of services, or mandate |
| 5.0 | The board defines and models the organizational values. |
| 5.1 | The board works with the organization's leaders to define or update the organization's values statement. |
| 5.2 | The board collaborates with the organization's leaders to seek input from team members, clients, and families to define or update the organization's values statement. |
| 5.3 | The board provides oversight of the organization's efforts to build meaningful partnerships with clients and families |
| 5.4 | The board monitors and evaluates the organization's initiatives to build and maintain a culture of client- and family-centred care. |
| 5.5 | The board has a formal process to understand, identify, declare, and resolve conflicts of interest |
| 6.0 | The board oversees a strategic planning process to develop the organization's vision and set the strategic plan, goals, and objectives. |
| 6.1 | The board oversees the strategic planning process and provides guidance to the organization's leaders as they develop and update the organization's vision and strategic plan. |
| 6.2 | The board, in consultation with the organization's leaders, identifies timeframes and responsibility for achieving the strategic goals and objectives. |
| 6.3 | The board works with the organization's leaders to conduct an ongoing environmental scan to identify changes and new challenges, and ensures that the strategic plan, goals, and objectives are adjusted accordingly |
| 7.0 | The board recruits, selects, supports, and evaluates the CEO and ensures an organizational talent management plan is in place. |
| 7.1 | The board oversees the recruitment and selection of the CEO. |
| 7.2 | The board follows a policy on CEO compensation. |
| 7.3 | The board develops and updates the position profile for the CEO. |
| 7.4 | In partnership with the ED, the board sets performance objectives for the CEO and reviews them annually. |
| 7.5 | The board supports and commits resources to the ongoing professional development of the CEO. |

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| 7.6 | The board has a mechanism to receive updates or reports from the CEO. |
| 7.7 | The board, with the input of the organization's leaders, evaluates the CEO's performance and achievements annually. |
| 7.8 | The board has a succession plan for the CEO. |
| 7.9 | The board oversees the development of the organization's talent management plan. |
| 8.0 | The board oversees a process for granting and renewing privileges to health care providers. |
| 8.1 | A documented process is followed for granting privileges. |
| 8.2 | A documented process is followed to review and evaluate the performance of health care professionals who have been granted privileges. |
| 8.3 | A documented process is followed for reviewing and renewing privileges (including processes for addition of new privileges or alteration of privileges) on a regular basis |
| 8.4 | There is a documented process to address any performance issues identified with health care professionals with privileges. |
| 8.5 | The board verifies that documented processes for appeals of decisions regarding privileges are followed. |
| 9.0 | The board has an effective system of financial planning and control which supports achievement of the strategic goals and objectives. |
| 9.1 | The board approves the organization's capital and operating budgets. |
| 9.2 | The board ensures the integrity of the organization's financial statements, internal controls, and financial information systems. |
| 9.3 | The board reviews the organization's financial performance in the context of the strategic plan and key performance areas such as utilization, risk, and safety. |
| 9.4 | The board reviews and approves the organization's capital investments and major equipment purchases. |
| 9.5 | The board oversees the organization's resource allocation decisions as part of its regular planning cycle. |
| 9.6 | When reviewing and approving resource allocation decisions, the board assesses the risks and benefits to the organization. |
| 9.7 | When approving resource allocation decisions, the board evaluates the impact of the decision on quality, safety and client experience. |
| 9.8 | The board anticipates the organization's financial needs and potential risks, and develops contingency plans to address them |
| 9.9 | The board addresses recommendations in financial reports and from the ED and the organization's leaders. |
| 10.0 | The board fosters and supports a culture of patient safety throughout the organization. |
| 10.1 | The board adopts patient safety as a written strategic priority for the organization. |
| 10.2 | The board monitors organization-level measures of patient safety. |
| 10.3 | The board addresses recommendations made in the organization's quarterly patient safety reports. |
| 10.4 | The board regularly reviews the frequency and severity of safety incidents and uses this information to understand trends, client and team safety issues in the organization, and opportunities for improvement |
| 10.5 | The board regularly hears about quality and safety incidents from the clients and families that experience them. |
| 11.0 | The board strengthens relationships with stakeholders and the community. |

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| 11.1 | The board works with the ED to identify stakeholders and learn about their characteristics, priorities, interests, activities, and potential to influence the organization. |
| 11.2 | In consultation with the ED, the board anticipates, assesses, and responds to stakeholders' interests and needs. |
| 11.3 | The board works with the ED to establish, implement, and evaluate a communication plan for the organization. |
| 11.4 | The communication plan includes strategies to communicate key messages to clients and families, team members, stakeholders, and the community. |
| 11.5 | The board promotes the organization and demonstrates the value of its services to stakeholders and the community. |
| 11.6 | The board regularly consults with and encourages feedback from stakeholders and the community about the organization and its services. |
| 11.7 | The board, in collaboration with the organization's leaders, share reports about the organization's performance and quality of services with teams, clients, families, the community served, and other stakeholders. |
| 12.0 | The board works with the ED to reduce risks to the organization and promote ongoing quality improvement. |
| **12.1** | **REQUIRED ORGANIZATIONAL PRACTICE: The board demonstrates accountability for the quality of care provided by the organization.** |
| 12.1.1 | The board is knowledgeable about quality and safety principles, by recruiting members with this knowledge or providing access to education |
| 12.1.2 | Quality is a standing agenda item at all regular meetings of the board. |
| 12.1.3 | The key system-level indicators that will be used to monitor the quality performance of the organization are identified |
| 12.1.4 | At least quarterly, the quality performance of the organization is monitored and evaluated against agreed-upon goals and objectives. |
| 12.1.5 | Information about the quality performance of the organization is used to make resource allocation decisions and set priorities and expectations. |
| 12.1.6 | As part of their performance evaluation, senior leaders who report to the board (e.g., the ED, Executive Director, Chief of Staff) are held accountable for the quality performance of the organization. |
| 12.2 | The board works with the ED and the organization's leaders to develop an integrated quality improvement plan. |
| 12.3 | The board ensures that an integrated risk management approach and contingency plans are in place. |
| 12.4 | The board receives summary reports of client and family complaints received by the organization |
| 12.5 | The board monitors and provides input into the organization's strategies to address client flow and variations in service demands. |
| 12.6 | The board promotes learning from results, making decisions that are informed by research and evidence, and ongoing quality improvement for the organization and the board. |
| 12.7 | The board demonstrates a commitment to recognizing team members for their quality improvement work. |

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| 13.0 | The board regularly evaluates the performance of individual board members and its performance as a whole. |
| 13.1 | The board publicly discloses information about its governance processes, decision-making, and performance. |
| 13.2 | The board's activities and decisions are recorded and archived. |
| 13.3 | The board shares the records of its activities and decisions with the organization. |
| 13.4 | The board follows a process to regularly evaluate its performance and effectiveness |
| 13.5 | The board conducts or participates in an assessment of its structure, including size and committee structure. |
| 13.6 | The board regularly evaluates the performance of the board chair based on established criteria. |
| 13.7 | The board regularly reviews the contribution of individual members and provides feedback to them |
| **13.8** | **ACCREDITATION CANADA REQUIRED INSTRUMENT: The board regularly assesses its own functioning using the Governance Functioning Tool.** |
| 13.8.1 | The board monitors its team functioning by administering the Governance Functioning Tool at least once every accreditation cycle. |
| 13.8.2 | The board has taken action based on its most recent Governance Functioning Tool results. |
| 13.9 | The board prepares an annual report of its achievements. |
| 13.10 | The board identifies and addresses opportunities for improvement in how it functions |