

GEORGIAN BAY GENERAL HOSPITAL

Application to Serve on the Board of Directors

1. Instructions

- (a) To apply to be a member of the Georgian Bay General Hospital Board of Directors, you must complete this form and submit it with a copy of your current resume or a brief biographical sketch.
- (b) Please submit your completed form and resume or biographical sketch by mail, fax, or e-mail to the following address:

Administration Office
Georgian Bay General Hospital
111 St. Andrews Drive, P.O. Box 760,
Midland, ON L4R 4P4
Fax: (705) 526-9938
ATTN: Jacki Dumont
- (c) The deadline for applications is 4:00pm, Saturday, April 7, 2018.
- (d) Interviews for shortlisted applicants are scheduled for April 16th & 17th, 2018.
- (e) For more information about the application process, please contact: Jacki Dumont at 705-526-1300, Ext. 5011 or dumontj@gbgh.on.ca.

2. Applicant Contact Information

Surname:		First Name:	
Home Address:			
City:	Province:	Postal Code:	
Home Phone Number:	Business Phone Number:		
E-mail Address:			
Preferred Method of Contact:	Home Phone <input type="checkbox"/>	Business Phone <input type="checkbox"/>	E-mail <input type="checkbox"/>

3. Eligibility Criteria and Conditions of Appointment

- (a) Directors must be at least 18 years old.
- (b) Undischarged bankrupts are ineligible to serve as directors.
- (c) Directors must be mentally competent and of sound mind and are ineligible if found otherwise by a court in Canada or elsewhere.
- (d) Directors must reside or be employed in the Hospital's Catchment Area
- (e) A director is expected to commit the time required to perform board and committee duties. The minimum time commitment is likely 12-16 hours per month.
- (f) Directors must fulfill the requirements and responsibilities of their position, for example, preparing for and attending board and committee meetings, upholding their fiduciary obligation to the hospital, and working cooperatively and respectfully with other board members. Directors must

comply with the *Public Hospitals Act* and other legislation governing the hospital, the hospital's by-laws and policies, and all other applicable rules.

- (g) Directors must sign a Declaration confirming their agreement to adhere to their fiduciary duties and board and hospital policies.
- (h) In the case of an elected Director, cannot be a spouse, child, sibling or parent of, or live in the same household with, an employee or member of the Medical Staff of the Corporation, or is the spouse of a child, sibling or parent of an employee or member of the Medical Staff of the Corporation, except by resolution of the Board.
- (i) Must not be an excluded person.

Excluded Person" means:

- elected officials at the municipal, provincial or federal level
- any member of the medical staff other than the members of the medical staff appointed to the Board pursuant to the Public Hospitals Act;
- any employee other than the current Chief Executive Officer or Chief Nursing Executive; and
- any individual who has been within the preceding five (5) year period an employee of the Corporation.

TERM:

Directors shall not be elected or appointed for a term that will result in the Director serving more than nine (9) consecutive years or a cumulative total of more than twelve (12) years. After completion of nine (9) consecutive years such Director may also be eligible for re-election or re-appointment for another term or terms (to a cumulative maximum of twelve (12) years) if three (3) or more years have elapsed since the termination of his or her last election or appointment.

4. Conflict of Interest Disclosure Statement

Directors must avoid conflicts between their self-interest and their duty to the hospital. In the space below, please identify any relationship with any organization that may create a conflict of interest, or the appearance of a conflict of interest, by virtue of your being appointed to the board.

5. Knowledge, Skills, and Experience

- (a) The board seeks a complementary balance of knowledge, skills, and experience. Please indicate your areas of knowledge, skills, and experience by completing Schedule A to this application.
- (b) Please list current or prior board experience:

- (c) Which areas of board work are of particular interest to you?

- (d) Please describe any linkages you have or may have had with other health care groups within the community:

- (e) Have you ever been a member of the Board of Directors for the Georgian Bay General Hospital, Huronia District Hospital or the Penetanguishene General Hospital? If so, please list your start and end date.

6. Declaration

By submitting this application, I declare the following:

- (a) I meet the eligibility criteria and accept the conditions of appointment set out above.
- (b) I have read and agree to comply with the following:
 - (i) Position Description – Board of Directors' Duties and Expectations of a Director.
 - (ii) Board Code of Conduct.
 - (iii) Conflict of Interest Policy.
- (c) I certify that the information in this application and in my resume or biographical sketch is true.

Signed: _____ Dated: _____

Schedule A
Knowledge, Skills, and Experience

Please indicate your areas of knowledge, skills, and experience by checking off the relevant boxes in the table below. **It is not expected that you possess knowledge, skill or experience in all the areas set out in the table. Please indicate only those areas that apply to you.**

Finance			Risk Management		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Business Management			Information Technology		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Human Resources Management			Labour Relations		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Health care administration and policy and health system needs, issues, and trends			Education		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Clinical			Research		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Government and Government Relations			Quality and Performance Management		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Legal			Board and Governance		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Strategic Planning			Public Relations and Communications		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Patient and Health Care Advocacy			Ethics & Evidence Based Decision Making		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Construction & Project Management			Accounting		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Diversity Issues			Political Acumen		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Quality & Patient Safety Management			Stakeholder Engagement		
<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced

Is French your first language? Yes No Other _____

Do you self-identify as any of the following: First Nations Metis Inuit

Describe other skills, knowledge or experience that you feel you will bring to the Board:
