

BOARD MANUAL

SUBJECT: Guidance for Decision Making Process	NO.: 2-D-10
SECTION: Board Process	
APPROVED BY: Board of Directors	DATE: May 1, 2024

Policy

The intent of this guidance is to support the Board in its role as the ultimate decision-making body in the organization. The purpose of this guidance is to:

- Facilitate rigorous, comprehensive discussion on difficult decisions
- Ensure that risk and ethics are appropriately addressed in the decision-making process
- Include an appropriate hierarchy of decision-making authority within the organization

Context for Decision-Making

The health care environment is characterized by a variety of factors, including but not limited to the following, which provide the context for decision-making:

- Limited resources
- Changing demographics and shifting cultural values in society
- Increased emphasis on patient and family member/care giver involvement in decision making
- Increased public awareness and interest in health care issues
- Changing public expectations and increased requirement for public accountability and transparency
- New and evolving technologies and approaches to care
- Emphasis on individual rights and freedoms
- Respect for privacy and confidentiality
- Increased need for interdisciplinary and inter-institutional collaboration, co-operation, and integration
- Evolving governance structures and accountabilities
- The Board's accountability as included in, but not limited to, Policy 1-A-03 Board Accountability.

Guiding Principles

The following principles will guide decision-making at the Board level:

- Consistency with the organization's mission, vision, and values.
- Commitment to quality and patient centred care

- Appropriate engagement with those impacted – patients, families, staff, physicians, and or volunteers as applicable
- Appropriate due diligence to assess available options and the impact on all stakeholders
- System capacity and sustainability
- Effective and efficient use of resources
- Social costs and benefits including access and equity
- Open, transparent, and accountable processes
- Evaluation of and learning from outcomes
- Healthcare regulations and legislative responsibilities

The Decision-Making Framework

In addition to using the guiding principles above, the Decision-Making Framework includes five components:

1. Decision-making criteria and evidence of due diligence
2. Risk management
3. Financial oversight
4. Ethical Considerations
5. Delegation of Authority

1. Decision-Making Criteria

Decisions will be made based on relevant key criteria and after evidence that due diligence has occurred. The Board makes informed decisions, based on the best information available at the time, including an evaluation of alternatives and criteria for reviewing options and the rationale for a recommended option, if applicable. Materials prepared by management for the Board meetings shall, when considered appropriate by management, provide detailed information that incorporates the decision-making criteria in Appendix A.

2. Risk Management

The Integrated Risk Management Policy outlines categories of risks which the Board oversees. Management is responsible for the implementation of policies and processes to mitigate the occurrences of risk. In making decisions, the Board will consider what risks the Corporation may need to assume, the probability those risks may occur and any action to mitigate the impact of risks.

3. Financial Oversight

The Corporation's financial policies, practices and processes exist to guide the Board in governing the Corporation and protecting its overall financial health and viability.

Decisions about program changes or expansions, replacements/changes to the medical/professional staff, and capital projects will be considered based on a full business case or impact analysis.

4. Ethical Considerations

Where appropriate, the Board has access to ethical resources to guide its decision making that include access to the hospital’s ethicist. The hospital uses [The Ethical Decision-Making Process – the You Observe Deliberate Act \(YODA\) model](#). The process identifies potential questions to consider through the decision-making process. The extent to which the questions and/or process is applicable will be dependent on the nature of the decision. Further information is detailed in the following documents:

- [Ethics Framework for Health Care Providers – YODA model](#)
- [Ethics Framework for Leaders – YODA model](#)

5. Delegation of Authority

The role descriptions for both the CEO and Chief of Staff identify decisions delegated to the CEO and Chief of Staff.

Related Policies

- 2-B-5 Role Description of the CEO
- 2-B-6 Role Description of the Chief of Staff
- 2-C-20 Integrated Risk Management
- 2-C-30 Financial Objectives
- 2-C-31 Financial Planning and Performance
- 2-C-34 Approval and Signing Authority

DEVELOPED: January 15, 2014		REVISED/REVIEWED:
January 28, 2015	September 27, 2017	May 26, 2021
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Appendix A - BOARD OF DIRECTOR'S DECISION MAKING SUPPLEMENTARY GUIDE

CRITERIA	DEFINITIONS
Quality & Safety	<ul style="list-style-type: none"> outcomes are measurable and as good as can be achieved services are safe and error free and where appropriate in alignment with best practices personnel are qualified and demonstrably competent relevant staff/providers/patients have been consulted about the option(s) program/service meets the health needs of intended service recipients by providing the right service in the right place at the right time decisions are evidence-based
Sustainability	<ul style="list-style-type: none"> resources are available to fund capital and/or operating expenditures required to pursue the proposed option(s) (affordability) the option is not obsolete in the near future and can accommodate changing circumstances and needs (adaptable) qualified providers can be recruited and retained desired outcomes are achieved, consuming minimal resources (efficiency) waste and redundancy are minimized Medical/Professional Staff use their knowledge and skills to the maximum extent possible
Equity, Diversity, Inclusion and Access	<ul style="list-style-type: none"> the needs of high risk, high needs, marginalized populations are effectively met and health disparities are reduced reasonable and fair geographic access to services is achieved timely access to services in relation to need is provided need governs where services are located and how services and benefits are distributed
Maximum Benefit to Health / Risk of Not Proceeding	<ul style="list-style-type: none"> greater improvement in health status than the alternatives is achieved or achievable benefits more people than the alternatives
Public Consultation	<ul style="list-style-type: none"> public affected have been consulted with the option(s) under consideration public affected are willing to use the services as organized and located
Consistency / Alignment with Vision	<ul style="list-style-type: none"> the option(s) under consideration is consistent and aligned with the CMH Vision
Patient and Family Engagement	<ul style="list-style-type: none"> patients and families are provided the opportunity to engage in a meaningful way in considering the option(s) patient values, experiences and perspectives have been incorporated into the option(s)

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September 24, 2014	January 20, 2018	June 28, 2022
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