



## POLICY AND PROCEDURE MANUAL

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POLICY AND PROCEDURE MANUAL

Policy Covering:	<b>Development and Maintenance of Board Policy Manual</b>		
Effective:	May 2021	Category: General Information	Policy # 1
Reviewed:	April 2022		
Board Approved:	April 2021	Supersedes Policy #/Dated: NEW	Page 1 of 1
Issued By:	Board Chair		

**Policy:**

It is the policy of the Board of Directors of the Hanover and District Hospital Foundation (HDHF) to develop and review every two years, the Board policies which provide guidelines for the conduct and business of the Board.

**Procedure:**

The Board of Directors Manual will contain only those “subjects” which will affect the Board. All other manuals of Hanover and District Hospital Foundation shall be subordinate to and in accordance with the Board of Directors Manual. The Foundation Bylaws supersede the Manual.

All Board policies or procedures must be reviewed with the By-laws and amendments submitted as necessary to accurately reflect current Board practices.

All policies and procedures will be processed through the Policy and Procedure/By-law Committee and require final Board approval. Policies issued prior to Board approval will be titled “draft”; however, these will carry the full weight of a Board Policy. The Board Manual is issued under the authority of the Board of Directors of HDHF.



**POLICY AND PROCEDURE MANUAL**

	<b>Mission, Vision, and Value Statements</b>			
Effective Date:	October 15, 2019	Section:		Policy # <b>2</b>
Reviewed Date:	January 2021			
	April 2022			
Reviewed By:	Board of Governors	Supersedes Policy #/Dated:		Page 1 of 1
		2/September 20, 2012		
Issued By:	Board Chair			

**MISSION:**

To raise funds and encourage lifelong commitment from our varied constituents to support the Hanover and District Hospital in providing quality care to all.

**VISION:**

Greater access to quality rural health care by engaging our community in special events, social campaigns and legacy opportunities to develop innovative strategies to continue the Foundation’s legacy of inspiring others to invest and engage with our cause.

**VALUE:**

Community, Compassion, Collaboration Achieving more by working together.

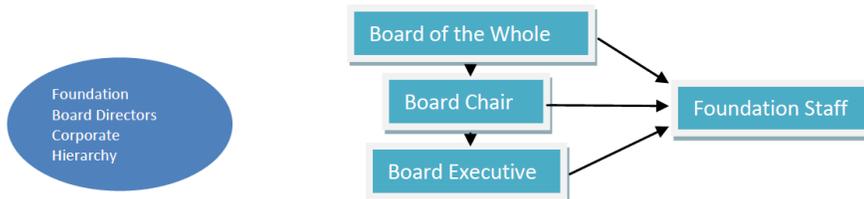
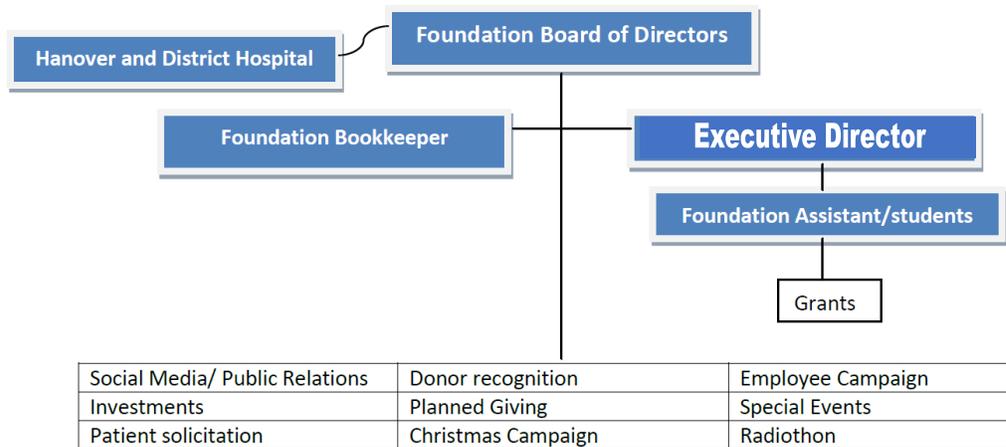
**POLICY AND PROCEDURE MANUAL**

<b>Policy Covering</b>	Organizational Chart		
<b>Effective Date</b>	May 2021	<b>Category:</b> Board Policy	<b>Policy # 3</b>
<b>Reviewed:</b>	April 2022		
<b>Board Approved</b>	May 2021		Page 1 of 1
<b>Issued by:</b>	Board Chair		

**Policy:** It is the policy of the Board of Directors of Hanover and District Hospital Foundation to accurately follow the lines of communication within the corporation and services provided.

The Board of Directors has the ultimate responsibility. The board chair oversees the work of the board and the organization's staff. The Board Chair keeps the Board Executive informed. Board Executive consists of Board Chair, Vice chair(s), Treasurer and Past Chair.

**Appendix A:**  
Organizational Chart



**POLICY AND PROCEDURE MANUAL**

Policy Covering:	Corporate Membership		
Effective Date:	October 15, 2019	Category	Board policy
Reviewed Date:	January 2021 April 2022		Policy # 4
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 1
Issued By:	Board Chair		
		7/April 20, 2000	

**PROCEDURE:**

Annual membership in the Corporation will be effective as of the annual meeting on the fourth Thursday in May of each year unless otherwise stated.

The voting members of the Foundation consist of the Hospital Board of Governors and the Foundation Board of Directors.

## POLICY AND PROCEDURE MANUAL

Policy Covering: <b>Board Director Succession</b>			
Effective Date: May 2021	Reviewed: April 2022	Category: Board Process	Policy # 5
Board Approved: April 2021	Supersedes Policy #/Dated: New policy		Page 1 of 18
Issued By: Board Chair			

**Policy:**

It is the policy of the Board of Directors of Hanover and District Hospital Foundation to maintain a balance between experienced and new Directors and ensure the necessary skills, knowledge and experience needed are in place to effectively steer the organization both now and in the future.

**Procedure:**

The Nominating Committee manages succession planning for the board and board executive positions. The board Nominating Committee will strive to recruit potential candidates relevant to the needs of the board. This committee will review existing board strengths and identify gaps in core skills and knowledge, as well as review personal qualities of the board members. The committee’s role will include discussion of anticipated vacancies caused by resignations or retirements and taking steps to ensure proper succession planning for these positions.

An effective Board needs Directors who possess diverse skill sets, experiences and knowledge. The key goal in selecting Directors is to select a blend of people that can work as a well-rounded team in fulfilling the board’s duties and responsibilities. While the specific skills required will differ, there are some core skills that should be represented on the board. Not all Directors will possess all of these skills, but the board as a whole should possess them.

The Board Succession Policy sets out an open, accountable and fair process by which the Board Nominating Committee can evaluate candidates seeking to be Directors under the following qualities/criteria:

Core Skills and Knowledge

1. Leadership skills – the ability to influence positive strategic behaviour and inspire donations;
2. Strategic planning – the skill to review the Foundations’ Strategic Plans, Mission Vision and Values and Goals & Objectives through constructive questioning and suggestion;

3. Organizational knowledge - be aware of all hospital foundations' role and progress: past and present;
4. self directed - to learn and have the commitment to attend board meetings, committee meetings, conferences, review Rules for not-for-profit and charitable Corporations Act and Charity Act Ontario;
5. Financial understanding – the ability to interpret and comprehend the financial material: operational and capital budgets, general financial reporting requirements;
6. Pertinent legal knowledge - possess an understanding of the individual directors' responsibilities and legal duties as well as an awareness and overseeing of organizational compliance with federal and provincial laws;
7. Risk management – the proficiency to manage areas of major risk to the organization;
8. Communication skills – both verbal and written; an appreciation of the importance of the reputation of the HDH-Foundation ; recognition and respect for the role of the Board Executive and Executive Director in communicating with stakeholders; experience with or knowledge of social media; and
9. Team building skills – the ability to work with others for a common goal.

While each Director will bring a range of **core skills and knowledge** to a board, there are personal qualities that are advantageous:

Personal Qualities:

1. Instinct – demonstrates sound business instincts, insight, and judgment, can quickly identify/summarize the root cause of an issue or idea ;
2. Integrity – demonstrates reliability in fulfilling duties and responsibilities, acts ethically;
3. Interpersonal skills- actively participates as a team player, listens well, respectful of others, tactful but succinctly able to speak his/her point of view openly and honestly, demonstrates skills of mediation, creative problem solving, negotiation, and communication;
4. Curiosity and courage – demonstrates skill and ability to ask questions for clarity and the courage to endure and challenge fellow board members or management when required;
5. No conflict of interest or hidden agenda : exhibits a genuine interest in the organization; and
6. Active and positive contributor – comes to meetings well read, well prepared, and willing to contribute.

The Nominating Committee will recommend a slate of nominees for election to the board at the annual meeting, in accordance with the following process and will also make recommendations to the board to fill any mid-term vacancies on the Board.

The following process is to be followed by the Nominating Committee:

1. The Board Nominating Committee will adhere to sections 4.02 and 4.10.1, of the By-laws, and any other relevant provisions in determining which candidates will be nominated to stand for election at the annual meeting of the Corporation.
2. The Nominating Committee will conduct a skills and knowledge audit of the existing Directors and will attempt in the nominating process to maintain a good balance of skills, knowledge and experience on the Board. **Appendix A** will be used as a guideline by the Nominating Committee.
3. In February of each year, the Nominating Committee will ask all Directors to complete a self-assessment (Appendix B) of their individual performance as a Director and indicate their intentions with respect to re-election to the Board. Director re-appointment is subject to the self-evaluation and review by the Nominating Committee, against pre-determined indicators of performance such as rates of committee attendance, preparedness, participation in Foundation activities outside of Board and Committee work, level of interaction with Community, etc. Current Directors wishing to stand for re-election will submit Appendix C, in accordance with 4.02 and 4.10.1 of the By-Laws, to the Executive Director who will forward it to the Chair of the Nominating Committee for review.
4. As directed by the Board of Directors, the Nominating Committee will take the following steps:
  - a) Advertise vacancies in local media noting skills and knowledge required.
  - b) Receive formal application by interested individuals;
  - c) Review applications/candidates against the Board profile;
  - d) Select candidates for interview;
  - e) Interview short listed candidates; and
  - f) Identify a slate of candidates for recommendation to the Board based on the skills, knowledge and personal qualities as presented through their applications and/or interviews.
5. Interested applicants from the Community are to complete the Application to become a Director (Appendix D) and Skills Experience Audit (Appendix A). Applicants meeting the requirements will be requested to provide a police background check and references, and after their review, the applicant may be interviewed by the Nominating Committee to determine their qualifications to serve as a Director (Appendix D and F). Upon successful completion of these steps, the selected names will be put forward by the Nominating Committee to the Board of the Whole at least 60 days prior to the Annual General Meeting.
6. Applicants who do not meet the basic qualifications set out in section 4.01 of the By-Laws, and the criteria outlined in this Policy, or who do not fill the identified gaps as determined by the skills and experience audit, will be advised of their ineligibility to serve as Directors by the Board Nominating Committee prior to the Annual General Meeting of the Corporation. Any applicant not chosen for nomination, who wishes to appeal, must do so by presenting to the Board of the Whole. It will be the Board's decision whether the applicant's name should stand for election at the Annual General Meeting of the

Corporation.

7. Any member of the Board whose term of office expires in a given year will not participate in the nomination process in any way. The Board will appoint Directors who are not standing for re-election in that year to perform the nomination related duties of the Board Nominating Committee.
8. The Board Nominating Committee Chair will be responsible for conducting an exit interview for any outgoing Board Directors using the Board Director Exit Interview Template (Appendix G).

**Appendix A:**

Skills and Experience Audit for Directors

**Appendix B:**

Board Directors' Self Evaluation Tool

**Appendix C:**

Nomination Form

**Appendix D:**

Application to Become a Director

**Appendix E:**

Board of Director Applicant Interview Form

**Appendix F:**

Board Candidate Interview Assessment Form

**Appendix G:**

Board Director Exit Interview Template

**Appendix A to Board Policy #5**

**Knowledge, Skills, and Experience:**

Please indicate your areas of knowledge, skills, and experience by rating yourself below. It is not expected that you possess knowledge, skills or experience in all the areas set out in the table. Please indicate only those areas that apply to you.

Advanced = 3      Good = 2      Fair = 1      None = 0

Finance/Accounting .....	3	2	1	0
Business Management .....	3	2	1	0
Fundraising/Philanthropy .....	3	2	1	0
Clinical/ Patient & Health Care Advocacy .....	3	2	1	0
Government & Government Relations /Political Acumen .....	3	2	1	0
Construction & Project Management .....	3	2	1	0
Legal .....	3	2	1	0
Strategic Planning .....	3	2	1	0
Risk Management .....	3	2	1	0
Information Technology .....	3	2	1	0
Confidentiality & Privacy.....	3	2	1	0
Education .....	3	2	1	0
Ethics /Research .....	3	2	1	0
Quality & Performance Management .....	3	2	1	0
Board Governance .....	3	2	1	0
Public Affairs & Communications including Social Media.....	3	2	1	0

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**Appendix B to Board Policy #5**

## Board Director Self Evaluation Tool

Please rate each statement on a scale of 1 to 5

	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree	NA/ Don't Know
<b>Governance Role</b>						
1. I am familiar with the board's by-laws and policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I maintain confidentiality and comply with conflict of interest policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I support board decisions once they are made.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I understand the distinction between the board's role to set direction and provide oversight and employee's role to lead and direct the operations of the Foundation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I understand the board's role and process in overseeing the Executive Directors' annual performance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I commit the time required to fulfill my Director's governance and fundraising responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Knowledge of the Organization and the Environment</b>						
7. I understand the Foundation's strategic plan, including mission, vision and value statements, and take these into account when making decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I am comfortable with my level of knowledge about the Foundation's programs and role within the local community and catchment area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. While not necessarily an expert, I have a good understanding of the corporation's:						
a. Financial performance and condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Quality performance and measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Key areas of risk and associated risk mitigation strategies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I understand and take into account the corporation's accountability to funders and key stakeholders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I keep current on sector issues and trends that may have an impact on the organization or the needs of the community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I effectively apply my knowledge, experience and expertise to matters before the board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I ask questions or request information to help me make informed decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I exercise sound and balanced judgement considering all sides of issues before the board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. I bring a strategic focus in assessing situations and reaching conclusions.	<input type="checkbox"/>					
16. I am satisfied with my level of contribution as a Director.	<input type="checkbox"/>					
	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree	NA/ Don't Know
<b>Effective Behaviour and Relationships</b>						
17. I read materials in advance and come prepared for meetings.	<input type="checkbox"/>					
18. I listen well and respect other's ideas and perspectives.	<input type="checkbox"/>					
19. I communicate effectively with my fellow Directors at board and committee meetings.	<input type="checkbox"/>					
20. I am comfortable and constructive when expressing a minority opinion.	<input type="checkbox"/>					
21. I develop and maintain sound relationships as a team player with fellow Directors.	<input type="checkbox"/>					
22. I respect the contributions of board committees, being careful at board meetings to build on, not re-do, the work already done by committees.	<input type="checkbox"/>					
23. While maintaining my independence as a Director, I interact respectfully, cooperatively and appropriately with the Board Directors and Executive Director, students and allied staff.	<input type="checkbox"/>					
24. I take advantage of board education opportunities to increase my effectiveness as a Director.	<input type="checkbox"/>					

**Development Questions**

1. In terms of furthering your professional development as a Director and contributing more to the board, please identify two or three areas that you would like to personally focus on next year.

2. Looking ahead, are there other committees or board officer positions that you are interested in, or other ways you might like to contribute?

3. What support or educational opportunities would be beneficial to your development?

**Appendix C to Board Policy # 5**



**RECOMMENDATION FOR  
NOMINATION TO THE BOARD OF DIRECTORS**

I, \_\_\_\_\_, agree to let my name  
(name)  
stand as a member of the Hanover and District Hospital Foundation Board  
of Directors. If elected, I will serve as a Director in accordance with the  
Foundation By-laws and the Board of Directors Manual of Hanover and  
District Hospital Foundation.

\_\_\_\_\_  
Signature

In accordance with the Hospital By-laws, Section 4.01.2 c&d , the following two  
members support this recommendation.

\_\_\_\_\_  
*Print and Sign*

\_\_\_\_\_  
*Print and Sign*

**Hanover and District Hospital Foundation**

*Application to Become a Director and Statement and Acknowledgment of Eligibility*

**1. Instructions:**

- a) To apply to be a Director on the Hanover and District Hospital Foundation Board of Directors, you must complete this form and submit it with a copy of your current resume.
- b) Please submit your completed form and resume by mail or e-mail or in person to the following address:

Hanover and District Hospital Foundation,  
 90-7th Avenue, Hanover, ON N4N 1N1  
[awaincott@hdhospital.ca](mailto:awaincott@hdhospital.ca)

- c) The deadline for applications is sixty days prior to the date of the annual meeting of the Corporation.
- d) For further information about the application process, please contact the Executive Director 519-364-2341 x 203.

**2. Applicant Contact Information:**

<b>Last Name:</b>		<b>First Name:</b>	
<b>Home Address:</b>			
<b>City:</b>		<b>Province:</b>	<b>Postal Code:</b>
<b>Number of years at this address:</b>			
<b>If the above has been your residence for less than 3 months, please give previous residential address:</b>			
<b>Home Phone Number:</b>		<b>Business Phone Number:</b>	
<b>E-mail Address</b>		<b>Work Address: (if not applicable, please indicate):</b>	
<b>Preferred Method of Contact:</b> Home Phone <input type="checkbox"/> Business Phone <input type="checkbox"/> E-mail <input type="checkbox"/> Cell Phone <input type="checkbox"/>			

**3. Eligibility Criteria and Conditions for Appointment.**

1. I am at least eighteen (18) years of age;
2. I am not an undischarged bankrupt;
- 3.
4. ;
5. I am not a member of municipal council nor intend to run for council in the near future.
6. I will not profit from my role as a Director and will avoid all situations which conflict with my interests

- |  | Yes                      | No                       | If yes, please provide details |
|--|--------------------------|--------------------------|--------------------------------|
| • Have you ever been convicted of a criminal offence relating to financial dishonesty, tax evasion, theft, fraud or any other criminal offence relevant to operating a charity?  | <input type="checkbox"/> | <input type="checkbox"/> |                                |
| • Have you been convicted of a non-criminal offence within the past 5 years, relating to financial dishonesty or any other offence relevant to the operation of a charity, including charitable fundraising legislation, consumer protection legislation and securities legislation? | <input type="checkbox"/> | <input type="checkbox"/> |                                |
| • Have you been a Director, officer or manager of a charity during the period that charity engaged in serious non-compliant conduct that resulted in a revocation of charitable status, within the past 5 years?   | <input type="checkbox"/> | <input type="checkbox"/> |                                |
| • Have you ever been a promoter of a tax shelter that resulted in the revocation of a charity’s charitable status?   | <input type="checkbox"/> | <input type="checkbox"/> |                                |

**4. Conflict of Interest Disclosure Statement:**

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

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**5. Knowledge, Skills, and Experience:**

I understand the board seeks a complementary balance of personal qualities, knowledge, skills, and experience. I have indicated my areas of knowledge, skills and experience by completing Appendix A.

**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 certify that the information in this application and in my resume is true.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Personal information will be used and disclosed  
only to facilitate the selection process for the Board.  
If selected for election, the information will be held for the purpose of  
conducting the business of the Board and the Corporation.*

**Board Director Applicant Interview**

***Appendix E to Board Policy # 5***

Date/Time: \_\_\_\_\_

Interviewer: \_\_\_\_\_

#	Asked by	Question	Answer/Comments
1		Could you tell us about yourself, give us a brief summary of your career, and include what you regard to be your outstanding qualities as applicable to meeting the criteria for our Foundation Board?	
2		This role can be time consuming with monthly board meetings ,committee meetings and project management with fund raising events. Will you be able to commit a reasonable amount of time?	
3		What are your reasons for joining the HDHF Board?	
4		<p>Please speak about your understanding of the communities, and the broader health care needs in relation to fundraising.</p> <p><i>FYI This question is to Demonstrates an understanding of health care needs of the community served i.e. awareness of the catchment area, funding raising projects/issues, physician recruitment...</i></p>	

#	Asked by	Question	Answer/Comments
5		What is your understanding of the differences between governance and operational issues of the Corporation?	
6		In the event that the Board adopts a position to which you disagree, but consensus rules, will you be able to publicly support the Foundation's decision? <i>i.e. CT scanner</i>	
7		What specific expertise will you bring to the Board?	
8		Will you be able to take into consideration the needs of all of the catchment area of the corporation in your decision-making? (no hidden agendas)	
9		What type of person should be in the role of Chair/ Past Chair?	
10		Do you see yourself in the role of Chair of the Foundation or Treasurer? Have you been in a Governance leadership role?	

#	Asked by	Question	Answer/Comments
11		In five words describe how you feel your colleagues/peers would describe your “strengths” <i>(Looking for flexible, open-minded, team player actively involved .... approachable)</i>	
12		In five words describe how you feel your colleagues/peers would describe your “weaknesses”.	
13		Summarize why we should put your name forward to the Corporation for election to the Board.	
14		Is there anything we haven’t asked you that you feel is important for us to know, to consider you for this position?	
15			

Personal Notes:



**Board Candidate Interview Assessment**

**Appendix F to Board Policy # 5**

Applicant's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Instructions: Rate applicant on scale shown by circling appropriate number and enter score in right column.

SECTION	COLUMN					SCORE
	I	II	III	IV	V	
1. understands the health care trends and needs of the community served	Above Requirements (12)	Meets Requirements (10)	Slightly short of requirements (8)	Marginal (5)	Below Requirements (0)	
2. experience he/she can offer	Above Requirements (12)	Meets Requirements (10)	Some Experience (8)	Related Experience (5)	No Experience (0)	
3. understands the diverse needs of a rural community i.e. awareness of unique issue of their catchment area –for fundraising ideas, etc.	Above Requirements (12)	Meets Requirements (10)	Some (8)	Minimal (5)	None (0)	
4. interpersonal skills - ability to get along with others; tact in dealing with the public	Excellent (5)	Good (4)	Average (3)	Acceptable (2)	Poor (0)	
5. awareness of health care trends and Foundation projects	Excellent (5)	Good (4)	Average (3)	Acceptable (2)	Poor (0)	
6. diligence - willingness to work	Excellent (5)	Good (4)	Average (3)	Acceptable (2)	Poor (0)	
7. awareness of governance and operational roles	Excellent (5)	Good (4)	Average (3)	Acceptable (2)	Poor (0)	
	43 - 56	37 - 42	24 - 36	1 - 23	<b>TOTAL</b>	

Excellent †      Good †      Average †      Acceptable †      Poor †

General Comments: \_\_\_\_\_



Applicant's name should be forwarded to the Annual Corporation Meeting for election

Yes

No

Signature of Interviewers(s) \_\_\_\_\_

## **Board Director Exit Interview Template**

1. How would you describe your board experience? What did you like about being on the Foundation? What things about the Board could use improvement?
  
2. Were board and committee meetings productive? Was your time used effectively? Did you feel that you were able to make a difference?
  
3. Did you feel like your contributions to the Foundation were fully appreciated? Did you feel you were listened to and respected in meetings?
  
4. Did you feel prepared for your board Foundation responsibility? Were Foundation board expectations made clear? Were you surprised by anything? What do you wish you had known when you joined the Board but did not know?
  
5. What do you think about how decisions were made by the Board? Any suggestions for improvement?
  
6. What are some things that would be important to tell future Foundation Board candidates about the Board?
  
7. What is the single most important project or process the Foundation Board has accomplished in the last year? What should it next undertake?
  
8. Overall, how would you suggest improving the working of this board?

9. In what ways would you like to stay involved?

General Comments:

Signature: \_\_\_\_\_

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Confidentiality of Board Business and Affairs</b>		
Effective Date:	October 15, 2019	Category	Policy # 6
Reviewed Date:	January 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated: 10/September 20, 2012	Page 1 of 2
Issued By:	Board Chair		

**POLICY:**

It is the policy of the Board Directors that the directors owe to the Hospital Foundation, a duty of confidence not to disclose to another person or entity or use for their own purpose, confidential information concerning the business and affairs of the Hospital Foundation received in their capacity as Directors.

**PROCEDURE:**

1. Each Board Director will sign Appendix A of this policy annually, and it will be retained on file.
2. Prior to each Board meeting, all materials mailed to Directors shall be considered confidential until discussed by the full Board.
3. The Board shall hold in the strictest confidence and discuss in-camera all matters such as labour relations, litigation, personnel matters, proposed or pending acquisition of property and any other matter determined from time to time by the Board.
4. The meetings of the Board are open and all minutes of Board meetings are available on request by members save and except proceedings held in-camera.
5. The Chair or such person as they may delegate shall act as spokesperson for the Foundation and the Board. Every Director shall respect the confidentiality of matters before the Board and shall ensure that no statement not authorized by the Board is made to the press or public. Board members should not disclose to or discuss with outsiders, policy or operating issues before the Board.



APPENDIX A- Policy 6 -PLEDGE OF CONFIDENTIALITY:

Hanover and District Hospital Foundation  
Pledge of Confidentiality  
For Board Directors

I acknowledge that I have read, understand, and will abide by Board Policy #10 (Confidentiality of Board Business and Affairs).

I understand and agree that, as a Board Director, I must respect the privacy of others at Hanover and District Hospital as well as information arising during Board meetings.

I will consider as confidential all information that I may hear or see directly or indirectly concerning a patient, visitor, a doctor, a volunteer, or a member of hospital personnel and will avoid seeking information concerning any of these.

I will consider all information discussed during in-camera meetings as confidential and I recognize that it must not be discussed with anyone, once I leave the meeting.

I recognize that any breach of confidentiality on my part could result in being removed as a Director of the Board of the Hanover and District Hospital Foundation.

I will disclose confidential information only when properly authorized or when obligated legally to do so.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Code of Conduct</b>		
Effective Date:	September 24 2021	Category	Policy # <b>6a</b>
Reviewed Date:	April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 2
		New	
Issued By:	Board Chair		

**POLICY:** It is the policy of the Board of Directors of the Hanover and District Hospital Foundation to support the vision, mission, values and maintain the code of conduct.

The Board expects of itself and its Members ethical, businesslike and lawful conduct. This includes proper use of authority and appropriate decorum when acting as Board members. It expects its members to treat one another and staff members with respect, cooperation, integrity and a willingness to deal openly, objectively and fairly on all matters.

**Procedure:**

Board members shall be bound by the following Code of Conduct:

1. Board Members must represent unconflicted loyalty to the interests of the Foundation. This accountability supersedes any conflicting loyalty such as that to advocacy or interest groups and membership on other boards or staffs. It also supersedes the personal interest of any member acting as an individual or organizational consumer of the organization’s services. Members are accountable to exercise the powers and discharge the duties of their office honestly and in good faith. Members shall exercise the degree of care, due diligence and skill that a prudent person would exercise in comparable circumstances.
2. Board members shall not use their positions to obtain any benefits, or employment for themselves, family members, or close associates. Should a member desire contracts or paid employment from the Foundation through events, he or she must first resign.
2. Board members may not attempt to exercise individual authority over the Foundation and its assets except as explicitly set forth in Board policies.
3. Board members’ interaction with the Foundation staff must recognize that any individual member or group of members does not have authority other than that explicitly stated in Board policy.
4. Board members’ interaction with the public, press or other entities must recognize the same limitation and the similar inability of any member(s) to speak for the Board except to repeat explicitly stated Board decisions; however, it is understood that the main spokespersons to the press will be the Board Chair, Executive Director, and Past Chair or as delegated by the Board Chair
5. Board members shall be familiar with the by-laws, regulations, policies and organizational structure of the Foundation, as well as the rules of procedure and proper conduct of a meeting so that any decision of the Board may be made in an efficient, knowledgeable and expeditious fashion.

6. Board members shall regularly attend meetings and events of the Board of Directors. If a Board member should be absent without sufficient cause for three meetings of the Board within the Board year they may be dismissed as a governor by special resolution of the Board. The Chair shall contact any member falling short of attendance requirements, as outlined above, and request a written explanation for the Board's consideration.
7. Board members are expected to be prepared for meetings, seeking clarification of pending issues and any information not provided in the meeting package so as to enable informed decision-making, it being understood that the Executive Director will be available for consultation with members of the Board
8. Support all actions taken by the Board of Directors even when in a minority position on such actions. Respect the principle of Board collegiality, meaning an issue may be debated vigorously, but once a decision is made it is the decision of the entire Board, and is to be supported. The board speaks with one voice. Those governors who have voted against a motion must adhere to and support the decision of a majority of the governors.
9. A Board member who is found to have violated the Code of Conduct shall be informed in writing and shall be allowed to present his views of such alleged breach at the next Board meeting. The complaining party must be identified. If the complaining party is a member, he and the respondent member shall absent themselves from any vote upon resolution of censure or other action that may be brought by the members. Board members who are found to have violated the Code of Conduct may be subject to censure which in extreme cases may result in dismissal from the Board.
10. It is recognized that directors bring to the board diverse background, skills and experience. All debates shall take place in an atmosphere of mutual respect and courtesy.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Conflict of Interest</b>		
Effective Date:	April 2022	Category	Policy # 6b
Reviewed Date:			
Reviewed By:	Board of Directors	Supersedes Policy #/Dated: New	Page 1 of 2
Issued By:	Board Chair		

**POLICY:** It is the policy of the Board of Directors of Hanover and District Hospital Foundation to require Directors to declare conflicts of interest.

All directors have a duty to ensure that the trust and confidence of the public in the integrity of the decision-making processes of the board are maintained by ensuring that they and other members of the board are free from conflict or potential conflict in their decision-making. It is important that all governors understand their obligations when a conflict of interest or a potential conflict of interest arises.

This policy applies to all governors including ex-officio governors and all non-board members of committees.

Governors and non-board committee members shall avoid situations in which they may be in a position to declare a conflict of interest. The by-laws contain provisions with respect to conflict of interest that must be strictly adhered to. In addition to the by-laws, the process set out in this policy shall be followed when a conflict or a potential conflict arises.

Description of Conflict of Interest

The situations in which a potential conflict of interest may arise cannot be exhaustively set out. Conflicts generally arise in the following situations:

1. Interest of a Governor “Wearing Two Hats”
  - a) When a governor transacts with the corporation directly or indirectly. When a governor has a significant direct or indirect interest in a transaction or contract with the corporation.
2. Interest of a Relative
  - a) When the corporation conducts business with suppliers of goods or services or any other party of which a relative or member of the household of a governor is a principal, officer or representative.
3. Gifts
  - a) When a governor or a member of the governor’s household or any other person or entity designated by the governor, accepts gifts, payments, services or anything else with whom the corporation may transact business (including a supplier of goods or services) for the purposes of (or that may be perceived to be for the purposes of) influencing an act or decision of the board.
4. Acting for an Improper Purpose

- a) When a governor exercises their power motivated by self-interest or other improper purposes. A Governor must act solely in the best interest of the corporation. A Governor who is a nominee of a particular group must act in the best interest of the corporation even if this conflicts with the interests of the nominating party.
- 5. Appropriation of Corporate Opportunity
  - a) When a governor diverts to their own use an opportunity or advantage that belongs to the corporation.
- 6. Duty to Disclose Information of Value to the Corporation
  - a) When a governor fails to disclose information that is relevant to a vital aspect of the corporation's affairs.

**Process for Resolution of Conflicts and Addressing Breaches of Duty:**

Disclosure of Conflicts

A governor who is in a position of conflict or a potential conflict shall immediately disclose such conflict to the board by notification to the chair or any vice chair of the board. The disclosure shall be sufficient to disclose the nature and extent of the governor's interest. Disclosure shall be made at the earliest possible time and prior to any discussion and vote on the matter.

Abstain from Discussions

The governor shall not be present during the discussion of the matter in which he or she has a conflict and shall not attempt in any way to influence the voting.

**Process for Resolution of Conflicts and Addressing Breaches of Duty:**

All governors shall comply with the requirements of the by-laws. It is acknowledged that not all conflicts or potential conflicts may be satisfactorily resolved by strict compliance with the by-laws. There may be cases where the perception of a conflict of interest or breach of duty may be harmful to the corporation notwithstanding that there has been compliance with the by-laws.

A governor may be referred to the process outlined below in any of the following circumstances:

1. Circumstances for Referral

Where any governor believes that the governor or another governor:

- a) Has breached his or her duties to the corporation;
  - b) Is in a position where there is a potential breach of duty to the corporation;
  - c) Is in a situation of actual or potential conflict of interest; or
  - d) Has behaved or is likely to behave in a manner that is not consistent with the highest standards of public trust and integrity and such behaviour may have an adverse impact on the corporation.
2. Process for Resolution
- The matter shall be referred to the following process:
- a) Refer the matter to the chair or where the issue may involve the chair, to any vice chair, with notice to the President/CEO.
  - b) The Chair (or vice chair as the case may be) may either (i) attempt to resolve the matter informally, or (ii) refer the matter to an ad hoc sub-committee of the board established by the chair with the member in question not present. This sub-committee shall report to the board.

It is recognized that if a conflict, or other matter referred cannot be resolved to the satisfaction

of the board (by simple majority resolution) or if a breach of duty has occurred, a governor may be asked to resign or may be subject to removal pursuant to the by-laws and the Corporations Act.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Donor Recognition/Thank you Policy</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>7</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 2
		3/March 17, 1992	
Issued By:	Board Chair		

**Policy:**

It is the policy of the Foundation to ensure that those who support the Hanover and District Hospital Foundation through donations receive recognition that is warm, appropriate, equitable and consistent. It has been developed with the attitude that all gifts are important, that nurturing each donor is the responsibility of the Hanover and District Hospital Foundation and that a monetary gift is never more important than individual relationships.

**OBJECTIVES:**

Through this policy, the Foundation hopes to:

- cultivate relationships with existing donors and encourage them to reach higher levels of giving
- attract new donors
- ensure that, in fairness to donors to the Hanover and District Hospital Foundation, one clearly stated policy of recognition is applied at all times.

**BACKGROUND: DEFINITION OF A DONATION:**

Donations are considered to be any of the following: cash, readily marketable securities, real estate, personal property, in-kind gifts, receiptable services, irrevocable life-insurance policies and bequests.

**POLICY:**

With the exception of monthly donors, who receive their charitable tax receipt and thank you at the end of the year, all donations regardless of dollar value will be acknowledged with a thank you letter within a period of 10 (ten) days signed by the Executive Director, Chair, or Designate. A tax receipt when required will accompany the letter.

Donors will receive information newsletters, invitations, and/or other materials as deemed appropriate.

All donations are entered into the Foundation computer data base in the appropriate donor file as a permanent record.

The Foundation agrees to respect and observe any donor’s wish for anonymity.



Donors of \$ 500 or more, when appropriate and possible, will receive a handwritten letter or telephone call from the chair or designate.

Memorial Gifts - In acknowledgement to families who designate the Hospital Foundation for donation in memoriam, a letter will be mailed as soon as possible. Individual thank you letters will also be sent to the donor for memorial gifts.

Planned gifts will be recognized on the endowment donor wall/mural for gifts over \$ 5,000. Living donors will be recognized at the discretion of the planned giving team. Permission to recognize endowment gifts for those who have passed on will be obtained from the estate.

Categories for the specific planned giving wall are:

Friend	\$ 5,000 to 24,999
Patron	\$ 25,000 to 49,999
Sponsor	\$ 50,000 to 99,999
Life Benefactor	\$ 100,000 and over

Major one time donations or pledges (not cumulative) may be recognized at the discretion of the Board of Directors as deemed appropriate, such as a donor plaque and/or media presentation.

Accumulation of donations by one individual over a duration of a calendar year will be recognized. (i.e. 3 - 200 donations = \$ 600).

Donations of personal property or securities may be recognized at the discretion of the Board of Directors as deemed appropriate. Gifts will be valued at the net, not gross amount, realized from the sale of the property. If the Foundation elects not to sell personal property or securities for any reason, the gift will be given a value when the gift is accompanied by an independent appraisal prepared by an independent appraiser.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Social Media</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>8</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 2
		11/September 20, 2012	
Issued By:	Board Chair		

**PURPOSE:**

It is the Policy of the HDH Foundation to outline the Social Media protocols that will assist Foundation staff or designate to effectively use social media technologies to advance the fundraising and public relations goals of the Foundation.

Social media site(s) are monitored daily and any posts, responses or comments are posted exclusively by Foundation staff or designates and do not necessarily represent the views of the Hanover and District Hospital. Please note that the Foundation and the Hospital are separate organizations that share a common goal: improving patient care and a positive media image. Funds raised through the Foundation help to enhance the Hospital’s programs and services in order to deliver the best care possible.

The HDH Foundation’s Social Media Policy objectives are to:

- Facilitate and promote better communication between the Foundation and its donors, partners and the general public;
- Provide guidelines on how the Foundation can optimize social media technologies while minimizing the potential liabilities;
- Set parameters for the type of content that is acceptable for publishing on social media sites;
- Offer guidelines on how the Foundation can manage inappropriate or derogatory input/content from individuals who interact with the Foundation’s social network sites.

**SOCIAL PLATFORMS:**

The Social Media Policy is designed to govern social media platforms that include, but are not limited to: Facebook, YouTube, LinkedIn, Twitter, Instagram

**TYPES OF POSTING:**

Postings to social media sites can include but are not limited to: articles, photographs, videos, blogs and any other such interactive media forms.

**CONFIDENTIALITY & OTHER LEGAL REQUIREMENTS:**

Confidential or proprietary information about the Hanover & District Hospital Foundation, its donors, volunteers, staff and other partners (including the staff, patients and partners of the Hanover & District Hospital) cannot be published on social media sites.

Slandorous, libelous or otherwise illegal content is prohibited from being published on social media sites.

Compliance with all copyright and/or intellectual property right laws must be upheld when publishing to a social media site.

#### POSTING ON SOCIAL MEDIA SITES:

The following guidelines will assist with ensuring social media technologies are used to benefit the Foundation's work:

- The use of social media technology will assist with accomplishing the public relations and fundraising goals of the Foundation.
- Information and material about the Foundation that would not be presented in a public forum is not acceptable to be published on a social media site.
- Professionalism and good judgment should be the benchmark for the content of posts on social media sites.
- The information posted on social media sites should be accurate and timely.
- If a Foundation staff member or volunteer is making a personal post and they are not representing the Foundation, the individual is personally responsible for his/her posts. They may be held liable for defamatory or libellous comments.
- The Foundation reserves the right to remove postings that are inappropriate, abusive, discriminatory, offensive or unlawful.

#### RESPONDING TO POSTS ON SOCIAL MEDIA SITES:

The above guidelines also apply to responding to posts made on Hanover & District Hospital Foundation social media sites.

#### ENDORSEMENTS VIA SOCIAL MEDIA CHANNELS:

The Foundation does not endorse any product, business, cause or political affiliation that is made via the Foundation's social media channels except to recognize sponsorships and donations.

#### ACCOUNTABILITY:

Any concerns or issues that arise from the use of social media that is not addressed in the Social Media Policy are the responsibility of the Hanover & District Hospital Foundation Board of Directors.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Special Events</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>9</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 1
		4/May 17, 2001	
Issued By:	Board Chair		

**PROPOSED NEW FOUNDATION SPECIAL EVENTS:**

It is the policy of the Foundation that new events will be realistically evaluated and approved by the Foundation Board of Directors based on the following criteria - profitability, demands on staff and directors’ time, availability of volunteers, public relations value, and conflict with existing events. A representative from the Foundation Board of Directors must be a member of any ad hoc team established for a special event.

**APPROVED AND EXISTING SPECIAL EVENTS:**

Each event will be critiqued and evaluated by the Foundation Board of Directors as soon as possible after completion to determine if repetition of the event is desirable.

**EXPECTED NET PROCEEDS OF SPECIAL EVENTS:**

It should be the goal of all Foundation special events that the net profit realized will be 50% or more of the gross proceeds of the event, or the event should have significant public relations value.

**EVENTS TO BE ORGANIZED BY OUTSIDE GROUPS FOR THE BENEFIT OF THE HANOVER AND DISTRICT HOSPITAL FOUNDATION:**

The same criteria where applicable will be used as if the event was organized by the Foundation itself. At the discretion of the Foundation Board a representative from the Foundation Board of Directors may be appointed to the outside group’s organization for the event. Proceeds may be designated by the group to any approved project of the Foundation. All publicity may be publicized at the discretion of the Executive Director when the Hospital’s/Foundation’s name is used in connection with the event. The Foundation accepts no financial or legal liability for the event.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Christmas Campaign</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>10</b>
Reviewed Date:	October 15, 2019 April 202		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 1
		5/September 12, 1990	
Issued By:	Board Chair		

**PROCEDURE:**

It is the policy of the Foundation that The Christmas Campaign provide an opportunity for the Foundation to recognize and further thank donors for their contributions over the past five years. The program will include an appeal letter and is directed toward past donors in order to establish an ongoing relationship.

Christmas Campaign appeal letters will be mailed approximately the last week of November. The campaign package will include a reply card and postage paid envelope.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Investments</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>11</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated: 8/April 27, 2017	Page 1 of 5
Issued By:	Board Chair		

**1.0 PURPOSE:** This investment policy has been prepared to ensure that:

- 1.1 The assets of the Hanover and District Hospital Foundation, (hereinafter referred to as the “Foundation”), together with the investment income to be earned shall be invested in a prudent manner, with due diligence and the advice of a professional manager.
- 1.2 All securities held in the investment portfolio and all investment policies and procedures must conform to the investment specifications outlined in the Trustee Act of Ontario. Full consideration must be made in regards to rate and length of investments in accordance with Foundation plans to disburse funds to the Hanover and District Hospital.
- 1.3 The assets of the Foundation primary long-term account shall be invested and re-invested with a view to generate sufficient growth of capital to preserve the purchasing power of assets. To attain this goal, we are willing to accept more variable returns in the short run in order to achieve better potential returns in the long term at a moderate tolerance of risk.
- 1.4 The Foundation will ensure these investment policy guidelines are being followed. This policy can be amended at any time but must be formally reviewed once a year. Any changes shall only be effective when they have been presented to, and approved by the Foundation Board. Any such change will be promptly communicated to the investment manager or managers appointed by the Foundation.

**2.0 FOUNDATION RESPONSIBILITIES:**

The Foundation will:

- 2.1 establish and amend the investment policy;
- 2.2 review trade confirmations and a monthly statement itemizing all transactions;

- 2.3 monitor the portfolio's performance quarterly;
- 2.4 review annually the policy statement including an ongoing review of return expectations, risk tolerance, and time horizon. To assist in this task the Foundation will meet annually with the respective institution investment advisor(s);
- 2.5 invest and/or redeem assets in accordance with this policy statement; and
- 2.6 retain the services of professional investment management to select investments for the fund(s) in accordance with the objectives established.

### 3.0 FUNDS:

- 3.1 The Foundation is responsible for two funds - operating endowment, and a capital equipment fund.
- 3.2 The endowment fund is to be held as a permanent fund. Only investment income or Canada Revenue Agency designated amounts will be disbursed to assist with current projects. This fund will consist of non-receipted donations and planned gifts (bequests, etc.) unless directed otherwise by the donor. At no time shall donors be coached or persuaded as to where their donation should be invested. All donors wishing to give a planned gift to the endowment fund are encouraged to seek the independent advice of their legal or financial counsel. Any changes or discontinuation of the endowment fund shall require 75% approval of the full Foundation. Prior to undertaking any such discontinuance, regard should be had to the advice of the Corporations accountant specifically with regard to any adverse tax consequences as a result of the discontinuance of this fund. The endowment funds will be invested to achieve sufficient growth of capital.
- 3.3 The operating fund will consist of all donated funds which are subject to distribution on an annual basis or funds accumulated under the terms of accumulation privileges granted by the Canada Revenue Agency from time to time. The operating funds will be invested to achieve sufficient growth of capital. All donations unless specifically restricted are earmarked for current designated projects and committees. The Foundation adheres to the Canada Revenue Agency recommendations to minimize operational expenses to 20% of donated revenue received. Income received will not fund Hospital operational expenses.

### 4.0 OBJECTIVES:

- 4.1.1 A maximum of 40% of the endowment fund may be invested in equities. Equity investments are open to the global market and may consist of common stocks, installment receipts, American Depository Receipts, convertible preferred

- stocks, and convertible fixed-income securities. Common stocks and convertible preferred stocks shall be of good quality, be listed on a recognized stock exchange, and have adequate market liquidity relative to the size of the investment.
- 4.1.2 For portfolio number two, no equity securities will be held. The portfolio will consist of fixed and floating rate securities and cash.
  - 4.1.3 The Foundation will allow for some market drift above the threshold not exceeding 2%.
  - 4.2 The equity portfolio will be well diversified to avoid undue exposure to any single economic sector, industry group, or individual security. The market value of any one equity investment managed by an outside manager shall not exceed 10% of the market value of the manager's portfolio. No equity investments will be made in any company with a market value capitalization of less than \$100 million.
  - 4.3 Fixed income securities should be selected and managed in order to ensure an appropriate balance in quality, maturity and coupon with such factors to be consistent with current economic and market conditions and taking into consideration our investment purpose. The fixed income portion of the portfolio should be well diversified to avoid undue exposure to a single economic sector or individual issuer (excluding obligations of the Canadian government, any provincial government, or their agencies). The minimum quality standard for bonds and debentures in the endowment or operating fund will be at least an "A" rating, yet may include "BBB" rated bonds and for preferred securities "R-1" or better by a recognized rating agency.

If a government's or a corporation's securities are downgraded below the minimum rating necessary to qualify for inclusion in the fund, no new investments may be made, but existing investments may be retained and disposition of such investments will be at the discretion of the Foundation. A minimum of 15% of the fixed income portfolio must be invested in Government securities. The market value of any one issuer of fixed income securities shall not exceed 10% of the market value of the manager's portfolio.
  - 4.4 Short term investments will consist of individual fixed income securities such as certificates of deposit, commercial paper, treasury bills, money market funds and other similar instruments with less than five years to maturity. The short term investments will be utilized to fulfill our disbursement obligations as dictated by Revenue Canada on an annual basis. Bonds should be spread across a range of maturity dates. Operating funds are limited only to short term investments.

- 4.5 The following investments are prohibited: No part of the operating or endowment fund shall be invested in non-marketable securities, other than guaranteed investment certificates or similar instruments, except for specific real estate transactions that require special board approval prior to implementation. No investment shall be made in a non-arm's length transaction with any member of the Foundation, or any employee or consultant to the Foundation.
- 4.6 Investment manager(s) will be appointed by the Foundation to act on our behalf and shall have investment discretion consistent with our investment objective/guidelines. Any manager or other agent or advisor providing services in connection with the investment of the fund(s) shall accept and adhere to this policy in accordance with the above established objectives.

#### 5.0 CONFLICT OF INTEREST:

- 5.1 A conflict of interest is defined as any event in which any member of the Foundation, or any employee of or consultant to the Foundation, may gain any financial or other advantage from the knowledge of, or participation in, an investment decision of the operating or endowment fund, or any circumstance that could reasonably be interpreted as impairing the individual's ability to render unbiased and objective advice or to fulfill the individual's fiduciary responsibilities to act in the best interest of the Foundation. All individuals involved with the investments of the Foundation must be cognizant of the possibility that conflicts, or perceived conflicts, may arise and must make timely and full disclosure in accordance with generally accepted concepts of fiduciary responsibilities. The individual declaring a conflict of interest shall not participate in the discussion nor vote on the issue causing the conflict, and at the request of any member of the Foundation, shall withdraw from that particular portion of the meeting.
- 5.2 The Foundation shall satisfy itself that an appropriate policy regarding conflicts of interest exists and is followed by any manager appointed by the Foundation. As a minimum, the Code of Ethics and Standards Professional Conduct adopted by the Association of Investment Management and Research shall be expected to apply to such manager.
- 5.3 The failure of a person to comply with the procedures described in the Section shall not of itself invalidate any decision, contract, or other matter.

#### 6.0 OTHER:

- 6.1 The Foundation shall have the right to retain any securities, real estate, or other investments given in kind to the Foundation for such period of time as it shall

determine, even though such investments do not qualify under the terms of this policy, or are prohibited investments as listed under 4.5. This is a special provision and it is the responsibility of the Foundation to recommend appropriate remedies as well as require 75% approval of the full Foundation before implementing any of these changes.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Banking</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>12</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated: 14/September 12, 1990	Page 1 of 1
Issued By:	Board Chair		

**PROCEDURE:**

As a check and balance for the Foundation, all bank statements mailed to the Foundation apart from the Scotiabank Visa bill, which must be opened and paid upon receipt, will remain unopened for review by the Treasurer.

It is the responsibility of the Treasurer and bookkeeper to review these statements against the books reported by the Bookkeeper.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Employee Campaign</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>13</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated: 6/October 11, 1990	Page 1 of 1
Issued By:	Board Chair		

**POLICY:**

It is the policy of the Foundation that hospital staff are provided an opportunity to donate to the Foundation through payroll deductions.

**PROCEDURE:**

During each new employee orientation, staff members are provided with the opportunity to make a bi-weekly direct deposit or payroll deduction towards the Foundation general fund. Payroll deductions will commence within the first pay period thereafter.

Employees may at any time join the employee giving program by visiting the Foundation Office.

The employee giving program provides an opportunity to take part in an employee lottery weekly draw. By entering the draw, employees accept that these donations become ineligible for an official tax receipt. If employees do not wish to participate in the lottery, but still wish to donate through payroll deduction, an annual tax receipt will be issued for the total accumulative donations at the end of the year.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Patient Solicitation</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>14</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 1
Issued By:	Board Chair		

**PROCEDURE:**

The HDH Foundation respects the patient’s right to privacy of information. Limited patient information including patient name and address will be collected following a 90 day window from the patient’s most recent visit. Any solicitation materials sent to the patient will be well thought out and unobtrusive.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Naming Recognition</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>15</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 11
		13/November 2016	
Issued By:	Board Chair		

**PHILOSOPHY:**

The naming of health care assets belonging to the Hanover and District Hospital (HDH) is an important yet sensitive matter. Each name that is added to the facility in recognition of a philanthropic gift depicts the important role of donors and demonstrates the impact that our hospital has within the community.

Naming of hospital assets and facilities provide us with an opportunity to thank donors and to develop ongoing relationships throughout the entire community. The Hanover and District Hospital Foundation (hereinafter referred to as the Foundation) proudly recognizes donors with naming opportunities that balance public and private interests. We celebrate and recognize the achievements and efforts of donors. HDH and the Foundation encourage continued investment in the facilities and programs that will benefit hospital patients for generations to come.

**OBJECTIVE:**

The Naming Recognition Policy has been developed in order to ensure that the act of acknowledging public investment, achievement, and leadership within the community in relation to HDH and its assets is supported.

Through this policy, HDH and the Foundation hope to:

- Provide a consistent framework and approval process regarding the naming of the hospital assets.
- Identify guiding principles to support naming decisions
- Assist and support the philanthropic work of the Foundation within the Hospital to attract and recognize donors
- Continue to cultivate relationships with existing donors and encourage them to reach higher levels of giving
- Identify the bodies of authority for making naming decisions

**BACKGROUND:**

Donations are considered to be any of the following: cash, readily marketable securities,

real estate, personal property, in-kind gifts, irrevocable life-insurance policies and bequests.

Naming opportunities may include, but shall not be limited to: new construction, significant renovation or addition of space, any asset, tangible or intangible, as deemed appropriate by the hospital.

Decisions to name facilities/functions/programs shall be compatible, with the Hospital's vision, mission and values. The approval of a naming opportunity should not result in additional costs for the Hospital or the Foundation without prior approval.

No naming opportunity should be approved if it:

- is likely to have a negative impact on the image or reputation of the Hospital or the Foundation;
- Would call into serious question the public respect for the Hospital or the Foundation;
- Implies endorsement of a partisan political or ideological position. This does not preclude use of the name of an individual who has previously held public office; and
- Implies endorsement of a specific commercial product. This does not preclude using the name of an individual or company that manufactures or distributes commercial products.

Donations must represent a significant portion of the cost or replacement cost of the facility/function/program to be named. The donor recognition will be relevant to the value of the donation received.

#### **POLICY:**

Hospital approval is required in instances where the entire facility or a department is proposed to be named or renamed.

The Hospital and the Foundation shall mutually agree on a comprehensive list of naming opportunities associated with a capital campaign.

All naming opportunities that involve naming of the building, external facilities, departments and/or any structure that has an exterior name shall be approved by the Hospital.

All naming opportunities that involve gifts/donations >\$50,000 shall be approved by a Naming Committee consisting of the following:

- The Foundation Executive Director
- The Hospital President and CEO
- The Foundation Chair, or a Director appointed by the Chair
- A Hospital Board Chair or a Governor appointed by the Board

A Donor wall development plan must be approved by the Foundation Executive and the Hospital President and CEO or representative.

All naming decisions shall be supported by appropriate and complete documents including written documentation stipulating rationale and conditions underlying the naming decision. All naming decisions shall be documented and filed with the Foundation office.

All agreements with donors for named recognition require the donor to complete a Named Gift Agreement (Appendix A). An end date for the naming right should be agreed upon and included in the Named Gift Agreement. The Hospital and the Foundation shall honour naming in accordance with the Named Gift Agreement which is made with the donor.

The Hospital and the Foundation reserve the right to revoke a naming right as a result of the following circumstances (see Procedure for Renaming, Adding or Removing Names)

- actions or conduct by an already honored person, which the Hospital or the Foundation deems inappropriate
- failure of an honored person to fulfill agreed upon obligations

Publicity surrounding the naming of an asset shall be coordinated by the Foundation in collaboration with the hospital. Form and content of naming signage is the responsibility of the Executive Director and shall be approved by the Foundation and Hospital Board of Governors. Signage shall be in compliance with the Hospital's visual identity standards.

Donor naming signage may only be procured for a named physical asset after approval has been granted.

If a corporation or business name changes, signage, and other naming devices may be changed at the cost to the donor or to the Foundation based on the discretion and approval of the Executive Director, Foundation Chair and Hospital President and CEO.

When it is proposed that a facility or room within a building be relocated within the same building, or to a different building, provided that the new facility or room will serve the same original purpose, no recommendation or approval under this policy is required to relocate the name.

Naming opportunities shall require a minimum contribution, as established by the Hospital and Foundation, and may change from time to time based on the size of the project and related costs.

Naming opportunities may be assigned for a living person, in memory of a person or after a business or corporation.

Naming associated with a particular facility or endowment shall not preclude further naming within the same facility / program / functional area.

#### ROLES:

The donor will work in collaboration with the Naming Committee. Which is comprised of the Foundation Executive Director, the Hospital President and CEO, and the Foundation Board Chair and the Hospital Board Chair or a governor appointed by the Board.

The Naming Committee shall:

- Consider naming proposals and signage recognition for donations >\$50,000 based on this policy;
- Consider requests for reconsideration based on this policy;
- Consider the revocation of naming rights as required;
- Review all Named Gift Agreements to ensure that the Hospital's interests are adequately protected; and
- Make recommendations to the Foundation and HDH Board of Governors for consideration and approval.

The HDH Foundation shall:

- Consider and respond to all requests for Naming based on this Policy in a timely manner;
- Act as the primary liaison for Naming recommendations/ requests;
- Provide information to donors/applicants on the interpretation of this policy;
- Negotiate Named Gift Agreements in compliance with this policy;
- Protect the confidentiality of Named Gift Agreements to the extent practicably possible;
- The management of this policy including policy education, monitoring, implementation and amendment is the responsibility of the Chair of the Foundation or its Executive.

The Donor shall:

- Provide the Foundation with the necessary documentation and information as requested;
- Execute and honour a Named Gift Agreement as outlined in this Policy; and
- Honour the Gift Schedule.

#### RENAMING ENTIRE FACILITY:

Statistical data is maintained by the Ministry of Health and Long Term Care based on the name of the facility. Renaming thereby needs approval of this Ministry and the

Naming Committee. It will be the Hospital's responsibility to determine feasibility.

When a facility is requested to be renamed, (add a second name or remove a name from a facility) Foundation representatives will make all reasonable efforts to inform in advance the original donor or honoree and/or their immediate family.

The Foundation, in consultation with the donor will coordinate a communication/media plan jointly with the Hanover and District Hospital Board of Governors.

#### NAMING REQUESTS, PROPOSALS, AND RECOMMENDATIONS

Following a recommendation from the Naming Committee the Foundation shall discuss various options of recognition with donors. Recognition may be in the form of naming opportunities and/or public recognition.

The Foundation Executive Director will determine and submit the following information:

- Current market valuation of the proposed naming opportunity;
- Intended use of funds;
- Proposed term of Named Gift Agreement;
- Proposed rights and benefits;
- Demonstrated support from key stakeholders (members, users, donors, funders);
- Draft signage proposal and acknowledgement/recognition plan; and
- Draft Naming Rights Agreement.

The Foundation will treat this information as confidential. They will consider the request/proposal/ recommendation and either endorse or reject the naming opportunity as presented and in collaboration with the HDH Board of Governors.

If/when endorsed, the donor will confirm all information and enter into a Named Gift Agreement.

Announcements regarding the naming shall be made only after approval by both Boards of the proposed naming and in agreement with the donor.

Document the naming decision stipulating rationale and conditions underlying the naming decision; The Executive Director is responsible for the retention of all documentation for a retaining period of the life of the Hospital plus five years.

#### RENAMING, ADDING OR REMOVING NAMES:

If a name is deemed to no longer be in the best interest of the hospital or the donor, it is possible to have a name changed, removed or revoked. The name change must be approved by the Foundation, and the Hospital Board of Governors.

A request to rename, add or remove a name from the Hospital shall conform to the following principles:

- When the use of an asset is changed due to the asset being sold, demolished, substantially renovated, rebuilt or designated for another use, the Hospital may continue to use the name, transfer the name to another comparable asset or discontinue the use of the name. It may be appropriate to place a plaque in, or on, a new building to indicate that it occupies the site of a building formerly known by another name.
- A name may be removed from the Hospital if it is determined that the actions or deeds of the individual or corporation that it is named for are not in keeping with the mission or standards of the Hospital or the Foundation.
- A naming right may be revoked at any time by the original approving committee upon completion of a request, investigation and recommendation.
  - The request must be put forward by the Hospital President and CEO, HDH Board of Governors Chair, and or Foundation Chair as requested by the Foundation. An investigation may be conducted by a third party as agreed upon by the Foundation Chair, HDH Board Governors and a donor (if feasible).
- When a named facility/department has reached the end of its useful life and will be replaced or substantially renovated, the replaced or renovated facility may be renamed in recognition of a new donor or honoree. Appropriate recognition of earlier donors or honorees may be included in the new, renovated or redeveloped facilities.

A recommendation to revoke naming rights is submitted to the naming committee.

- The Naming Committee must review the recommendation and consider the following information:
  - description of the naming right involved;
  - documentation pertaining to the original approval and subsequent name change proposal;
  - the value of the naming right;
  -
- the name of the donor;
  - reasons for recommending the revocation of the naming right;
  - names of the original approval authority who do not support revocation of the naming right and reasons for dissent; and
  - the financial impact, if any or any other impact such as reputational.

- The Naming Committee will review the recommendation and make a recommendation to the Boards.
- Decisions will be recorded and filed with the Foundation.
- All public communication surrounding the revocation of a naming right involving buildings will be handled in partnership between the Hospital and the Foundation.

#### RIGHT TO FIRST REFUSAL:

- The Hospital assets are not named in perpetuity.
- The original donor has the right to make another gift (on the entity already named) before a naming opportunity is made available to others.
- It is expected that a renewing donor to a named space will provide a gift that reflects the current value of the space, not the original value.

#### Procedure

- Re-evaluate price associated with the identified named space at the end of each time period to keep current with comparables in the market.
- If the existing donor does not wish to renew their gift, the donor's name will be removed from the named space.
- See Procedure Renaming, Adding or Removing Names.

**NAMED GIFT AGREEMENT BETWEEN:**

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*(herein called the "Donor")*

**AND:**

**The Hanover and District Hospital Foundation**

*(herein called the "Foundation")*

**AND:**

**Hanover and District Hospital**

*(herein called "THE HOSPITAL")*

The parties hereto covenant and agree as follows:

**I. Purpose of Agreement**

The purpose of this agreement is to summarize the mutual understanding of the Donor and the Foundation regarding gifts as described in this document. This Agreement will be made part of the Foundation's records.

**II. The Foundation**

The Foundation represents that it is a charitable organization (Charitable Registration # 12678 1442 RR0001), for which the Donor is or will be entitled to a charitable contribution tax deduction under the rules and regulations of the Canada Revenue Agency. Upon receipt of the Gift and as permitted by law relating to the manner in which the Gift is made, the Foundation agrees to issue and deliver to the Donor an official receipt, (or series of receipts, as appropriate) for income tax purposes.

**III. The Gift** To further the wishes of the Donor to assist the Foundation in carrying out its work, and in consideration of the undertaking given by the Foundation as set out in this Agreement, the Donor agrees to make a Gift to the Foundation in the amount of

\$ \_\_\_\_\_  
(the "Gift") in Canadian currency.



The Gift will be made in the following form and according to the following schedule:

\$\_\_\_\_\_ will be presented in the form of \_\_\_\_\_

on the \_\_\_\_\_ Day of \_\_\_\_\_ year \_\_\_\_\_.

The remaining \$\_\_\_\_\_ will be distributed to the HDH Foundation within \_\_\_\_\_ and at the discretion of the donor.

The Foundation expresses its sincere appreciation to the Donor.

#### **IV. Purpose of the Gift**

The purpose of the Gift(s) is to support

The Donor understands that the Foundation is relying on and will rely on these gifts in the planning and budgeting for Foundation initiatives. The Foundation will pursue similar commitments from others and may refer to these gifts when encouraging others to make such commitments.

The Foundation will seek out competitive interest rates from a variety of banks and will hold the funds in the account with the highest percentage rate on return. Any interest accumulated by the Foundation from the Gift will be reinvested into the project for the purpose specified by the donor.

#### **V. Recognition**

In grateful recognition of the Donor's generosity, the Donor will receive named recognition as outlined.

#### **VI. Term of the Named Recognition**

The term of the named recognition will be for \_\_\_\_\_ years (the period of \_\_\_\_\_ to \_\_\_\_\_) commencing at a public unveiling.

#### **VII. Approval**

Naming rights are subject to the approval of the Hanover and District Hospital as outlined in the *Naming Policy* effective:

\_\_\_\_\_, 20\_\_\_\_.

#### **VIII. Revocation**

Named recognition may be revoked, if in the opinion of the approving authority (Foundation Board of Directors and HDH Board of Governors), circumstances respecting a recognized individual, organization or corporation contradict the mission, ethics and values of the Hospital or the Foundation.

#### **IX. Commitments of the Foundation**

The Foundation agrees that it shall make every reasonable effort to maintain the Gift recognition referred to in Section VI.

#### **X. Binding Obligation**

The Donor intends this Gift Agreement to be fully enforceable and binding. The naming is contingent upon fulfillment of this pledge.

#### **XI. Contact Information**

The contact person designated by the Foundation is the Executive Director.

Position: Executive Director

**Address:** Hanover and District Hospital Foundation  
90 – 7<sup>th</sup> Ave.  
Hanover, ON  
N4N 1N1

**Phone:** 519-364-2340 Ext. 203

**Email:** [awaincott@hdhospital.ca](mailto:awaincott@hdhospital.ca)

#### **XII. Publicity**

Neither party shall disclose the terms of this agreement to any third party without the prior written consent of the other party.

#### **XIII. Governing Law**

The agreement shall be governed by the laws of the Province of Ontario and the laws of Canada applicable therein.

#### **XV. Miscellaneous**

Naming does not imply ownership of assets. It is understood that the Hospital and the Foundation will retain ownership of any and all assets,

intellectual property or other obtained as a result of these gifts.

The Hospital retains the right to manage and control the facility through this agreement. This Agreement ensures to the benefit of and is binding upon the parties and their respective heirs, executors, successors and assigns.

If a corporation or business name changes, signage and other naming devices may be changed at the cost to the donor with the approval of the original approving authorities.

The Donor hereby acknowledges that this Named Gift Agreement is acceptable and in keeping with the intent of the Gift.

The effective date of this agreement shall be the date it is signed by both parties.

**IN WITNESS WHEREOF this Agreement has been executed and delivered by the parties.**

By: \_\_\_\_\_  
**Signature of the Donor** **Date**

\_\_\_\_\_  
**Print name (and title /company as applicable)** **Date**

I/We have authority to bind the Corporation.(Seal)

By: \_\_\_\_\_  
**Foundation Chair** **Date**

By: \_\_\_\_\_  
**Hospital President and CEO** **Date**

Address: HDH and the Foundation Address:  
90 – 7<sup>th</sup> Avenue  
Hanover, ON N4N 1N1

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Planned Giving</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>16</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 6
		8/May 18, 2000	
Issued By:	Board Chair		

**OVERVIEW:**

Hanover and District Hospital Foundation is a registered charity which gratefully accepts charitable gifts from living donors and by bequest. The Hanover and District Hospital Foundation always encourages donors to discuss these proposed planned gifts with their legal and/or tax advisors to ensure they are receiving a complete and accurate explanation of all implications of the gift.

**WHAT IS A GIFT:**

As of 2007, Revenue Canada’s position or definition of what constitutes a gift states that: *“A gift is a voluntary transfer of property without valuable consideration to the donor. However, under proposed legislation, for gifts made after December 20, 2002, a transfer of property for which you received an advantage will still be considered a gift for purposes of the Income Tax Act as long as we are satisfied that the transfer of property was made with the intention to make a gift. An intention to make a gift will be presumed where the **fair market value (FMV)** of the advantage does not exceed 80% of the **FMV** of the transferred property. .”*

- The board may refuse to accept a conditional donation if the conditions are not consistent with the strategy of the corporation. Donors cannot choose the beneficiaries of their donations. A charity must have full discretion in deciding how to allocate its funds.
- A donation subject to a general direction from the donor that the gift be used in a particular program operated by the charity is acceptable, provided that no benefit accrues to the donor or anyone not at arm’s length to the donor.
- When a charity does not have ultimate control over donated funds, or when a benefit accrues to the donor from donated funds, these funds do not constitute a gift and are not eligible for an official donation receipt.

Foundation members and its Executive are authorized to negotiate planned gift agreements with donors; provided they follow the guidelines outlined in this policy and that they obtain legal advice where appropriate.

#### CONDITIONS OF GIFT ACCEPTANCE:

Planned Giving Committee of the whole is authorized to accept gifts on behalf of the Foundation. The Foundation Board must consider before approval:

1. Any gift that, in the opinion of any of the Foundation executives, is precedent-setting, involves potentially sensitive issues or carries with it potential liability to the Hospital or Foundation; and
2. Any gift that appears to involve capital costs or operating costs.

The donor will be in agreement with *Policy #1 Gifts – Designated and Undesignated* prior to the Foundation accepting the gift.

#### RECEIPTING:

Receipts will be issued as per CRA guidelines.

#### GIFTS OF CASH OR CHEQUE:

When cash or cheques are received, they will immediately be forwarded to the Executive Director for deposit and official receipting.

#### GIFTS OF IN KIND GOODS:

Gifts in kind are non-cash gifts and can be capital property. These gifts include: securities; property (depreciable or otherwise); personal use property such as jewelry, works of art, rare books, and stamp or coin collections; a leasehold interest; a residual interest; a right of any kind; a license; a share; and inventory of a business.

Any gift in kind with costs involved must receive board approval prior to acceptance. Where appropriate, such as with certain types of equipment, an environmental or health and safety assessment is required with costs absorbed by the donor. If a gift in kind is sold, any outstanding costs will be recovered from the sale proceeds and the Foundation Executive Director should be notified of the sale details. Gifts in kind directed to the Foundation as a whole will be administered by the Foundation and its Board members.

#### GUIDELINES FOR ACCEPTING GIFTS IN KIND:

A primary challenge with gifts in kind is how to determine the value of the gift. A charity is responsible for establishing the gift's value for receipting purposes. The cost of the appraisal will be negotiated with the donor.

1. If the property value is less than \$1,000, a qualified person associated with the charity can do the appraisal.
2. If the property's value is greater than \$1,000, the appraiser should be both qualified and independent of both the donor and the charity.
3. If the value of the gift in kind is substantial (e.g., greater than \$10,000), two

independent appraisals should be obtained, using the average as the fair market value.

Once the gift has physically changed hands and the written acceptance and appraisals have been completed, a charitable tax receipt will be generated and mailed to the donor.

#### GIFTS OF ART:

In cases where the art to be gifted is not suitable for the Foundation's purposes every effort will be made by the Foundation to encourage the prospective donor to sell the art and donate the sale proceeds to the Hanover and District Hospital Foundation.

#### GIFTS OF INVENTORY OR PRODUCT:

Gifts of a company's inventory or product are eligible for a charitable tax receipt. To ensure Revenue Canada guidelines are followed, recipients of such a gift should contact the Hospital Foundation for advice prior to the donation being made. A registered charity can issue an official donation receipt to a business for the market value of a gift out of inventory.

The charity's responsibilities are:

1. determining the value of the gift;
2. determining that it has in fact received a gift;
3. If the transaction results in a material benefit to the business, such as promotion or advertising, there has been no gift at law, and the charity should not issue an official donation receipt.

Either of the two methods listed below will permit the issuing of a charitable tax receipt:

1. The donor can provide a published price list that includes the donated item(s) and receive a tax receipt equal to this price; or
2. The Foundation can issue a purchase order to the company for the item being donated. The charity pays for the service and the person then returns the payment to the charity as a gift. In such circumstances, two transactions have taken place, the first being the purchase of goods and the payment flowing there from, and the second being a proper gift.

The parties should be advised to proceed by way of an exchange of cheques. This ensures the presence of an audit trail, as the donor must account for the taxable income that would be realized as business income.

#### GIFTS OF IN KIND SERVICES:

Contributions of services, that is, of time, skills, or efforts, are not property, and therefore they do not qualify as gifts for purposes of issuing official donation receipts. Accordingly, a charity cannot issue an official donation receipt for services rendered free of charge.

A charity may issue an official donation receipt if a person provides a service to the charity, the charity pays for the service, and the person then returns the payment to the charity as a gift. In such circumstances, two transactions have taken place, the first being the provision of a service and the payment flowing there from, and the second being a gift proper.

The parties should be advised to proceed by way of an exchange of cheques. This ensures the presence of an audit trail, as the donor must account for the taxable income that would be realized as remuneration (in which case the charity may also be required to issue a T4 slip) or as business income.

#### BEQUESTS:

Sample bequest language for restricted and unrestricted gifts, including endowments, will be made available to donors and their lawyers to ensure bequests are properly designated. Donors will be invited to provide information about their bequest and, if willing, to provide the relevant section of their will to the Hospital Foundation. During probate of estates containing bequests to the Hospital Foundation and during the post-death administration of revocable trusts containing dispositive provisions benefiting the Hanover and District Hospital Foundation, an appointed representative from the Foundation or executive member, in consultation with the Foundation's legal counsel, shall represent the Foundation in all dealings with the lawyer and the executor(s) of the estate.

#### LIFE INSURANCE:

A donor may:

1. Assign irrevocably a paid-up policy to the Hanover and District Hospital Foundation
2. Assign irrevocably a life insurance policy on which premiums remain to be paid
3. Name Hanover and District Hospital Foundation as a primary or successor beneficiary of the proceeds of a policy on which premiums remain to be paid.

When ownership is irrevocably assigned to the Hanover and District Hospital Foundation, the donor is entitled to a charitable tax receipt for the net cash surrender value and any premiums subsequently paid. When a donor gives a life insurance on which premiums remain to be paid he/she can elect to pay these to the Hospital Foundation or directly to the insurance company.

#### CHARITABLE GIFT ANNUITY:

A charitable gift annuity is an arrangement whereby a donor transfers cash to the Hanover and District Hospital Foundation pursuant to an agreement authorizing the Foundation to purchase a commercial annuity that will pay the stipulated amount. Cash in excess of the amount required for the purchase of the commercial annuity is retained by the Foundation and used for purposes acceptable to the Foundation. Determination of the charitable tax receipt and taxation of the annuity payments will be in accordance with applicable Income

Tax regulations. The minimum amount Hanover and District Hospital Foundation will accept for a gift annuity is \$50,000. The cost of the commercial annuity generally should not exceed 70% to 75% of the cash transferred to result in a significant gift for the Hospital Foundation. A financial institution acceptable to the donor and to the Hospital Foundation shall be selected and the terms of the annuity contract negotiated by a representative of the Foundation or Executive.

#### GIFT OF RESIDUAL INTEREST:

A gift of residual interest is an arrangement under which property is deeded to the Hanover and District Hospital Foundation but the donor retains use of the property for life or a term of years. The donor is entitled to a charitable tax receipt for the present value of the residual interest. For these types of gifts, the donor shall continue to be responsible for real estate taxes, insurance, utilities and maintenance after transferring title to the property unless the Foundation agrees to assume responsibility for any portion of these items. The terms of the gift and responsibilities for expenses shall be specified in a deed of gift executed jointly by the donor and the Foundation.

#### CHARITABLE REMAINDER TRUST:

The charitable remainder trust is a form of residual interest gift. The donor (“settler”) transfers property to a trustee who holds and manages it. If the property is income-producing, the net income will be paid to the donor and/or other named beneficiary. When the trust terminates (either at the death of the beneficiary (ies) or after a term of years), the trust remainder is distributed to the Hospital Foundation. If the trust is irrevocable, the donor is entitled to a charitable tax receipt for the present value of the residual interest. The Hanover and District Hospital Foundation will not serve as trustee of charitable remainder trusts but may refer the donor to a trust institution that provides such a service. A charitable remainder trust may be funded with cash, securities or real estate, or any other property acceptable to the trustee. If real estate is to be contributed and the Foundation is the beneficiary, the real estate shall first be subject to a thorough review as described in the guidelines pertaining to real estate.

#### GIFTS OF REAL ESTATE:

Gifts of real estate may be made in several ways: outright; residual interest in the property, or to fund a charitable remainder trust.

#### GUIDELINES FOR ACCEPTING GIFTS OF REAL ESTATE:

1. The donor shall acquire a qualified appraisal of the property’s fair market value, at their expense.
2. The Hanover and District Hospital Foundation will issue a charitable tax receipt for the appraised value. The Foundation, however, reserves the right to secure its own appraisal and issue a receipt based on this value.
3. The donor shall provide valid documentation indicating clear title to the property; otherwise the Hospital Foundation shall determine that the donor has clear title to

- the property at the donor's expense.
4. The Hospital Foundation shall review other factors, including zoning restrictions, marketability, current use and cash flow, to ascertain that acceptance of the gift would be in the Foundation's best interests.
  
  5. The Hospital Foundation shall, if it deems necessary, have an environmental assessment conducted, which could include an environmental audit at the donor's expense, and accept the property only if it contains no toxic substances or they are moved or other remedies taken to assure the Hospital Foundation assumes no liability.

#### GIFTS OF SHARES OF PRIVATE COMPANIES:

The Hanover and District Hospital Foundation will not accept gifts of private company shares. Some exceptions may be considered for acceptance. The shares must not provide the Foundation with a residual interest in the company, for example common shares. The shares must not result in any adverse tax consequences to the Hospital Foundation and must not confer any liability upon the Foundation. Shares of private companies may be accepted if pursuant to an agreement they can be sold back to the company, other shareholders or other interested parties at a specified future date. In addition, there must be a means of valuing the shares, for purposes of issuing tax receipt, which is in accordance with Revenue Canada guidelines.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Gifts – Designated and Undesignated</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>17</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 2
		1/September 20, 2012	
Issued By:	Board Chair		

**POLICY:**

This policy applies to all Gifts.(SEE DEFINITION)

Spending of funds will be confined to budgeted programs and projects approved by the Board of the Hanover and District Hospital and also approved by a majority vote of the Foundation Board. The hospital will identify to the Foundation the needs it wishes the Foundation to support financially.

**DEFINITION:**

A gift is a voluntary transfer of property without valuable consideration to the donor.

- the donor does not receive a benefit beyond what is permitted by law
- the gift does not benefit a related person, and
- the Foundation has complete control over the use of the gift within its programs or projects

*Designated gifts*

All potential donors of Designated Gifts will be advised of this policy and have its content explained and agreed to before the gifts are accepted for deposit and/or use by the Hanover & District Hospital Foundation.

Each Designated Gift accepted towards an approved program or project will be used as designated, with the donor’s understanding that when the need for such a program or special project has been met, or cannot be completed for such reason as determined by the Foundation, any remaining amount from such Designated Gift will be directed to where needed, subject to appropriate disclosure of such redirection in advance of the campaign.

If a donor wishes to purchase a specific piece of equipment which has not been identified as a need by the hospital, the Foundation will ask the hospital administration for permission to accept these specifically designated funds. If the hospital administration believes the donor’s request is outside the current hospital objectives or planning process, the donor will be asked to either re-designate or withdraw the gift.

The donor may, if they decide, request that this donation be deposited in the Foundation's General Account to help support any specified or unspecified future project.

*Undesignated gifts*

Gifts given in general nature to the Hanover and District Hospital Foundation will be accepted.

The donor does not have to have this policy explained as the gift may be used at the Foundation's discretion towards its approved programs or projects.

In the event that a particular project has been specified and cancelled before purchase, due to unforeseen circumstances, government priorities, or any other valid reason, the donation will be used to support another approved program or project.

The board reserves the right to refuse any donation connected to an organization that is not in keeping with the values of the corporation.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Monthly Gifts</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>18</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 1
		13/September 12, 1990	
Issued By:	Board Chair		

**PROCEDURE:**

Donors making monthly donations to the hospital should receive relevant and applicable information about how their funds are used through materials such as newsletters and through an individualized Christmas Campaign. All other mail campaigns shall have limited parameters that exclude monthly donors to limit donor fatigue.

Monthly donors will receive an annual tax receipt at the end of the year along with a thank you note and/or phone call based on the level of the gift. See Policy 3: Donor Recognition.

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Foundation Staff Evaluation Procedure</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>19</b>
Reviewed Date:	February 2021 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 11
		12/April 2008	
Issued By:	Board Chair		

**PURPOSE:**

A Performance evaluation is a necessary and beneficial process that provides annual feedback to the Executive Director and Bookkeeper about job effectiveness and professional guidance. An evaluation serves as a practical board tool for reviewing and documenting performance, and to provide a continuing record of employee development.

An Evaluation enables the Board of Directors and Foundation staff to learn from the experience so that a better job can be done when designing and delivering programs and other initiatives in the future. Although the formal performance evaluation is normally completed once per year, the Board Chair and one other Director should have another formal meeting with the employees at least one other time during the course of the year to identify progress on goals, as well as to communicate new or revised goals.

The performance review is intended to be a fair and balanced assessment of an employee's performance. **Nothing covered in the performance review should be a surprise to the employee.**

Ideally, employees should not be surprised by comments in their performance evaluation. Good communication between Board Directors and the employee during the course of the year will prevent employees from losing sight of their goals and will alert both the Board and employee to performance problems that may be resolved before the formal performance evaluation.

**PROCESS:**

1. To assist the Board Executive in conducting the performance review of the Executive Director and Bookkeeper, evaluation forms are circulated to all Board Directors for input/comments regarding the performance of the Foundation staff. Forms will be distributed early January each year. The Executive Committee may include input from the President and CEO and/or HDH Human Resources for the Executive Director and or BDO for the Bookkeeper. The President/CEO and or HDH Human

Resource person may be involved in the process of distributing information instruments and the retrieval of responses if agreeable. Included with the information will be the employees sick time and accumulated lieu time provided by HDH Human Resources.

2. The Board Directors shall be given a minimum of two weeks' notice for returning the reports to the Board Chair or HDH Human Resources.( January Board Meeting) Board Directors are asked to provide comments that are objective and accurate. Comments should correlate with the rating scale provided. An employee need not be rated as Outstanding or Very Good in every category. (see chart for rating categories).
3. Board Directors will be provided with the evaluation forms, an employee documented summary of the prior year and an annual report of activity and achievements to be used as a source of information for evaluations. The Executive Director and Bookkeeper may also table his or her professional goals for the up-coming year. Final reports of activity and achievement for an evaluation year must be submitted by the end of December for consideration in the evaluation process.
4. Only members of the Executive Committee may view the completed questionnaires or tabulated responses. The Executive will develop a summary report on the major accomplishments of the year as well as professional goals for the same period.
5. At the February meeting of the Board, during the in-camera session, in the absence of the Executive Director and Bookkeeper, the Chair of the Board will report the results of the appraisal process. The report will reflect the strengths of the Foundation staff and include any recommendations for improvement.
6. Following Board acceptance of the report, the Board Chair and at least one other member of the Executive Committee will share the results of the appraisal process with the Foundation staff privately and separately. The evaluation should be signed by the employee and the Board Chair.
7. Once the summary evaluation has been Board approved, all related materials will be destroyed by the Chair and the other member of the Executive Committee. Reports and recommendations will only be held by HDH Human Resources and the Executive Director.

Strict confidentiality will be maintained throughout the appraisal process.

#### PERFORMANCE EVALUATION RATINGS:

<b>OUTSTANDING: (OS)</b>	<b>Far exceeds requirements and standards of regular duties.</b> Outstanding performance is marked by initiative and high quality of work. An outstanding performance rating far exceeds the requirements and standards of the position.
<b>VERY GOOD: (VG)</b>	<b>Exceeds requirements and standards of regular duties.</b> Very good performance indicates that the employee regularly exceeds all position requirements.
<b>GOOD: (G)</b>	Good performance is that which meets the regular requirements of the position adequately and competently. Good is not marginal, if performance is considered marginal, it should <b>not</b> be given a rating of good.
<b>IN NEED OF IMPROVEMENT: (INOI)</b>	<b>Staff in this category is performing marginally and are not meeting the requirements of the position.</b> Specific plans should be outlined for correcting areas of below standard performance. Deficiencies should be clearly identified and a timeline for improvement established, including follow-up evaluation(s). Employees in this category should be cautioned about the consequence of continued less than satisfactory work.
<b>UNSATISFACTORY: (US)</b>	<b>Performance, which is unsatisfactory, does not meet the requirements of the position.</b> Staff in this category should be identified and counseled regarding their performance prior to issuing an unsatisfactory annual review as they may be denied salary increases or terminated.

APPENDIX A- EVALUATION FORM:

NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_

Start Date: \_\_\_\_\_

PURPOSE OF REVIEW	<input type="checkbox"/> Probationary
	<input type="checkbox"/> Annual      Other _____

RATING SCALE	High Performer <b>OUTSTANDING</b> would hire you without question. Collaborate stretch goals	VERY GOOD: Set stretch goals	Good Set goals	Needs improvement {PIP needs to be developed}	Unsatisfactory 1 I would not hire back
	FACTORS	COMMENTS			
	RATING	Strengths & Contributions	Opportunities for Improvement		
<b>A. Sustainability &amp; Growth</b>					
Eager to change for the good of the organization. Strives for continuous professional development.	<input type="checkbox"/>	List examples of professional development achieved:	Opportunities for improvement:		
<b>B. People &amp; Teams</b>					
Knows and displays the organizational values on a day to day basis and is a role model to others within the organization and positive liaison with Community and HDH.  Demonstrates high commitment to making things better for the organization as a whole.	<input type="checkbox"/>	List examples of improvements of contributions within the organization	Opportunities for Improvement:		
<b>C. Partnerships &amp; Communication</b>					
Comes to work and performs meetings with a positive attitude	<input type="checkbox"/>	Comments:	Opportunities for Improvement:		

<b>D. Needs Based Service</b>			
Works with staff and community to achieve organizational goals	<input type="checkbox"/>	<b>Comments:</b>	<b>Opportunities for improvement:</b>
<b>E. Quality &amp; Safety</b>			
Demonstrates the behaviours of quality & safety awareness in all aspects of work ) <i>office tidy, fundraising events and galas are safe environment ect</i>	<input type="checkbox"/>	<b>List examples of quality improvement initiatives and safety awareness the employee has been involved with and or initiated:</b>	<b>Opportunities for improvement:</b>
Adheres to all policies & procedures and demonstrates positive organizational code of conduct. Aware of Foundation bylaws and policies.	<input type="checkbox"/>	<b>Review Code of Conduct in detail check marking each item and signing off.</b>	

TO BE COMPLETED BY EMPLOYEE <u>ONLY</u>	
SUCCESSION/CAREER PLANNING/TRAINING & EDUCATION	
<b>GOALS:</b>	
<b>PLANS TO ACHIEVE GOALS: (indicate specific area(s) for development, course of action, time frame, etc.)</b>	

*The signature confirms that I understand the contents of this appraisal and have had an opportunity to discuss the results.*

\_\_\_\_\_

Employee Signature

\_\_\_\_\_

Date

---

*Board Chair Signature*

*Date*

---

*Treasurer Signature*

*Date*

Hanover and District Hospital Foundation

JOB DESCRIPTION

POSITION: **Executive Director**  
SUPERVISOR: **Foundation Board of Directors**

**KEY ACCOUNTABILITIES:**

- Reports directly to the HDH Foundation Chair and Board of Directors.
- Supports a fundraising strategy that optimizes the generation of revenue for the Foundation.
- Develops and oversees the implementation of the Foundations programs and the implementation of the financial processes in concert with the Foundation bookkeeper while ensuring the safety of the Foundation assets and ensuring adherence to Board policies, procedures and internal controls and all regulations regarding non-profit organizations.
- Avoids conflict of interest and acts with care, honesty and diligence in all foundation matters.

**KEY RESPONSIBILITIES:**

- Internal Communications
- External Communications with Board guidance
- Provides leadership and management while creating an annual Marketing and Communication Plan
- Oversees and implements the appropriate resources to ensure the ongoing orientation of new directors and other volunteers
- Board Governance
- Financial Performance
- Develops and maintains Social Media content and related policies (including but not limited to Instagram, Twitter, Facebook)
- In partnership with the Board, develops and produces written and electronic communication and material for other media including newspapers, billboards, videos, brochures and Foundation website.
- Works with the Treasurer, Bookkeeper and Board Chair to produce an annual report.
- Community Engagement: Acts as HDH Foundation Ambassador ensuring the Mission, Vision and Values are fulfilled throughout the community while maintaining relationships with the various organizations and service clubs. Works with Foundation directors and key contacts to build and develop relationships with

strategic partners.

- Engage with Fundraising and developing other funding sources while working with volunteers and students including supervision of Grant Proposals and Research with students and other volunteers.
- Supports Physician Retention & Recruitment initiatives in collaboration with the R&R Chair and HDHF board of directors.
- Foster and maintain positive relationships with Hanover and District Hospital staff, physicians and volunteers. Work closely with staff from HDH to identify fundraising needs, and communicate those needs to volunteers and donors.

#### **LEADERSHIP**

- Collaborates with Board of Directors about all aspects of the Foundation's activities
- Develop strategies to address both threats and opportunities in order to remain competitive in fundraising market
- Assists in the process of recruiting and orientation of Board Directors. Oversees and recognizes contributions of general volunteers.
- Supports and maintains involvement of directors and volunteers in Committee work.
- Assists with the R&R Chair, property management of the physician retention and recruitment house responsibilities including the overall financial and operational management and addressing tenant concerns, collecting rent, dealing with maintenance, and managing the budget.

#### **ADMINISTRATION**

- Develops and implements annual operational plans which incorporate goals and objectives that reflect the strategic directions of the Foundation.
- Works in collaboration with the Bookkeeper and Board Treasurer, and the Board to prepare a comprehensive budget.
- Administers the approved budget and with the Treasurer reports on the monthly cash flow of the organization, monitoring our overall efficiency goal
- Acts as recording secretary for the foundation board

**Performs other duties as assigned by the Board**

#### **CANIDATE QUALIFICATIONS**

- University or College Degree or Graduate Certificate in Fundraising, Philanthropy, Business, human resources or related discipline.
- Experience in a fundraising and philanthropic environment with experience in volunteer and event management

- Certified Fund Raising Executive (CFRE) designation considered to be an asset but not required
- Experience developing, managing and adhering to budgets. Knowledge of investment principles and in reading, creating and understanding financial documents including cash flow, budgets, income statements, balance statements and statements of functional expenses.
- Demonstrated competencies in all aspects of social media.
- Familiarity or willing to learn a donor management system.
- Knowledge of the Grey-Bruce region or rural regional healthcare considered to be an asset
- Knowledge of charitable gift vehicles, tax and estate planning
- Strong Microsoft Office skills including Outlook, Word, Excel and PowerPoint
- Strong written and oral communication skills
- Ability to use discretion, judgement and tact in handling sensitive or confidential information and situations.

**Working Conditions**

- Travel is required; the incumbent must possess a valid driver's license and have use of a car
- The nature of this full time position is such that evening, and some weekend, work is required

Developed: January 2022

References: Meaford Hospital Foundation Job Description



# Hanover and District Hospital Foundation

## JOB DESCRIPTION

**POSITION:** Foundation Bookkeeper

**SUPERVISOR:** Foundation Board of Directors

### KEY ACCOUNTABILITIES:

A part-time contract position, under the direction and supervision of the Board of Directors, is responsible for providing financial summary responsibilities for the Hospital Foundation.

### PRINCIPAL DUTIES:

- Develops reports of ongoing financial summaries to the Hospital Foundation Board of Directors.
- Works with the Executive Director to prepare bank deposits and to transmit funds for deposit, prepares accounts payable accounts, reconciles monthly bank statements, assists in preparation of the annual budget, and prepares monthly financial statements for the Board to review.
- Is responsible for preparing monthly financial statements such as the Balance Sheet, Income Statement, Budget statement, and supplementary schedules as required.
- Prepares necessary monthly closing entries, and enters and reconciles these entries in the QuickBooks Accounting System.
- Format financial statements in an Excel worksheet which involves exporting the financial information from QuickBooks, and using V-Lookup formula to create the financial statements.
- The monthly closing entries involve preparation of the following:
  - monthly investment account entries
  - monthly surplus clearing account entry
  - monthly accruals for revenue or expense items not yet processed
  - reconcile bank accounts
- Maintains an investment portfolio for the operation and endowment accounts.

- Works in collaboration with the Executive Director to file "GST" applications, government consumer and relations submissions for corporate changes and compliance with Revenue Canada guidelines
- Year-End closing responsibilities include the following:
- To work closely with the appointed Auditors to provide them with the detail information they require to complete their Audit of our accounting records
- To prepare T4A's and annual reporting requirements
- To set up accruals for any items not yet recorded on our books (receivable or payable), that pertain to the year being closed out
- Performs other duties as directed by the Foundation Board

#### **QUALIFICATIONS AND KEY COMPETENCIES**

- Accounting Knowledge and experience up to and including financial statements
- High level of proficiency in quickbooks and excel including managing V lookup formula
- Prior bookkeeping experience required
- Formal Post Secondary Accounting Education
- Attention to detail

#### **Hours of Work**

- Hours of work are flexible but must occur within the hospital administrative staff's normal work day. The bookkeeper will work sufficient hours each week to complete the necessary weekly accounting duties, with additional time spent preparing month end financial statements.

Developed: January 2021

Revision Dates: revamped January 2022

**POLICY AND PROCEDURE MANUAL**

Policy Covering:	<b>Terms of Reference - Committees</b>		
Effective Date:	October 15, 2019	Section:	Policy # <b>20</b>
Reviewed Date:	October 15, 2019 April 2022		
Reviewed By:	Board of Directors	Supersedes Policy #/Dated:	Page 1 of 9
Issued By:	Board Chair		

**COMMITTEE MEMBERS AND QUORUM:**

A committee is formed with up to five committee members consisting of at least one board director to act as committee chair. The Foundation Chair acts as an ex-officio member of all committees except Nominating Committee if the Chairs’ term is up

**FREQUENCY OF MEETINGS:**

As determined by Committee.

**ROLES AND RESPONSIBILITIES:**

A committee or task force may be created from time-to-time as determined by the board for purposes of the development of events, or to work on a time-limited specific task or project.

**APPENDICES:**

- Board Executive Committee
- Finance and Planning Committee (committee of the whole)
- Nominating Committee
- Planned Giving Committee
- Public Relations/Social Media committee
- By-Law/Policies and Procedure Committee
- Physician Recruitment

**TERMS OF REFERENCE**  
**EXECUTIVE COMMITTEE**

**PURPOSE:**

React on behalf of the Board as the Board Executive in cases of *urgent emergency situations* or at the call of the chair on such matters as deemed appropriate.

**MEMBERSHIP:**

- a) the Chair of the Board;
- b) the Vice-Chair of the Board;
- c) the Treasurer;
- d) the Immediate Past Chair; and
- e) the Executive Director by invitation only (non-voting).

**QUORUM:**

A quorum shall be one more than half the members entitled to vote.

**CHAIR:**

The Chair of the Board will chair the Executive Committee

**RESPONSIBILITIES:**

The Executive Committee shall:

- a) Exercise the full powers of the Board in any matter of administrative urgency;
- b) Report any action taken under a) to the Board at the first opportunity;
- c) Make recommendations to the board on the purchase of all capital equipment not foreseen in the approved annual budget;
- d) Study and advise or make recommendations to the Board or the Executive Director on any matter as directed by the Board; and

**FREQUENCY OF MEETINGS:**

Meet at the call of the Chair.

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Terms of Reference**  
FINANCE/PLANNING COMMITTEE

**PURPOSE:**

The Finance Committee will be the Board Committee of the Whole, responsible for the financial governance and administration of the operational resources of the Corporation.

**MEMBERSHIP:**

10 or more elected Board Directors, 3 Ex-officio  
Only elected Directors are entitled to vote.

**QUORUM:**

A quorum shall be one more than half the members entitled to vote.

**CHAIR:**

The chair will be the Treasurer of the Foundation.

**RESPONSIBILITIES:**

**Budget Planning and Oversight:**

- Ensure that there are processes in place for the development of an annual operating budget;
- Review and recommend to the board financial assumptions used to develop the operating budget, capital budget, and strategic plan;
- Review and recommend to the board the annual operating plan, and the capital plan and budget;
- Review monthly financial performance and compare actual performance against budget;
- Review and recommend to the Executive Director and Investment Advisor to address variances between budget and actual performance; and
- Monitor implementation of plans to address variances and report to the board.

**Long Term Planning:**

- Review and recommend to the board long term -financial goals and long-term revenue and expense projections;
- Review, with management, industry developments and legislative changes that may have an impact on the financial resources or performance and report to the board; and
- Review the status of the Human Resources Plan.

**Asset Management:**

- Ensure there are processes in place to manage the assets of the organization; and
- Review and make recommendations concerning material asset acquisitions not contemplated in the annual operating plan.

**Financial Transactions:**

- Review and make recommendations to the board concerning banking arrangements/investments; and

**Investments:**

- Review and recommend to the board the organization’s investment policy; and
- Monitor investment performance for compliance with the investment policy.

**Internal Controls and Risk Management:**

- Oversee, review, and make recommendations to the board concerning management’s risk management processes;
- Review and make recommendations concerning the adequacy of financial resources;
- Review and make recommendations concerning insurance coverage;
- Identify unusual risks and oversee management’s plan to address unusual or unanticipated risks and make recommendations to the board; and
- Review and make recommendation concerning the quality and integrity of management’s internal controls.

**Other:**

- Such other matters as may be referred by the board, from time to time.

**6. FREQUENCY OF MEETINGS:**

The Committee will have nine regular meetings per annum or at the call of the chair.

\_\_\_\_\_  
Chair Treasurer

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Terms of Reference  
Nominating Committee**

**PURPOSE:**

To fill any vacancies on the Board and nominate Directors for consideration by the Board for election or appointment as Officers of the Corporation.

**MEMBERSHIP:**

The Nominating Committee of the Board shall consist of the following:

- a) Three Governors – whose terms are not about to expire; one of whom has Board Executive experience; and
- b) The Executive Director as a non-voting member.

**QUORUM:**

A quorum shall be one more than half the members entitled to vote. (2)

**CHAIR:**

An immediate past Board Chair or Board Director whose term is not about to expire. The Chair of this committee should have Executive Experience.

**RESPONSIBILITIES:**

The Nominating Committee shall:

- a) Nominate persons for election as governors of the Board to fill any vacancies on the Board in accordance with Board Policy.
- b) Nominate Directors for consideration by the Board for election or appointment as Officers of the Corporation. In selecting Directors for nomination for election or appointment as Officers of the Corporation, the Committee shall review participation and attendance at previous Board and Committee meetings; and
- c) Ensure candidates are informed of the responsibilities of Board Members in regard to participation and attendance at Board Meetings and committee work.

**FREQUENCY OF MEETINGS:**

Annually and from time to time as needed.

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Terms of Reference  
By-Law Procedure and Policy Committee**

**PURPOSE:**

The By-law, Policies and Procedures Review Committee reports to the Board of Directors and is responsible for reviewing and recommending amendments to Foundation By-laws, policies and procedures to ensure that these documents are meeting legislative requirements and serving the needs of the Foundation.

**MEMBERSHIP:**

Corporate By-law Review:

- a) Three elected members of the Board of Directors; and
- b) Foundation Executive Director.

**QUORUM:**

A quorum shall be one more than half the members entitled to vote. (2)

**CHAIR:**

A Board Director will Chair the By-law P&P Review Committee

**RESPONSIBILITIES:**

To review the By-laws / policies and procedures of Hanover and District Hospital Foundation every other year (odd year) by January and to make any recommendations or changes required on or before March Board meeting; and  
To recommend those changes no later than is required under the Foundation’s notice of meeting requirements for amendments to be considered at the Annual Meeting.

**FREQUENCY OF MEETINGS:**

The Committee meets annually and as required during the year to review the By-laws and the Policies and Procedures.

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**TERMS OF REFERENCE  
PLANNED GIVING COMMITTEE**

**PURPOSE:** Hanover and District Hospital Foundation is a registered charity which gratefully accepts charitable gifts from living donors and by bequest. The Hanover and District Hospital Foundation always encourages donors to discuss these proposed planned gifts with their legal and/or tax advisors to ensure they are receiving a complete and accurate explanation of all implications of the gift.

**MEMBERSHIP:**

The Planned Giving Committee shall be a committee of the Board and consist of the following:

- a) four Directors
- b) the Executive Director as a nonvoting member.

**QUORUM:**

A quorum shall be one more than half the members entitled to vote. (3)

**CHAIR:**

A Board Director.

**RESPONSIBILITIES**

Conduct meetings according to policy that outlines the purpose of the committee and the roles of the members.

Minutes clearly describes such things as:

- The purpose of the fund (endowment)
- Source of funds
- Investment and administration of the fund
- Expenditure of the income

**FREQUENCY OF MEETINGS**

The Committee will have six regular meetings per annum or at the call of the chair.

\_\_\_\_\_  
Board Chair

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Terms of Reference**  
**Public Relations Committee / Social Media**

**Designated Spokesperson**

In all cases, only the Foundation Chair, Executive Director and /or designate as determined at the time, will have the authority to provide statements to the press or public about Foundation matters.

**PURPOSE:** The **goal** of this committee for Public Relations/Social media policy is to set expectations for appropriate behavior and ensure that the Foundation’s posts will not expose the corporation to legal problems or public embarrassment.

All Foundation Directors are assigned the responsibility of sharing approved information through their social media. They should do so with a helpful and positive attitude, recognizing that the media fulfils an important role in the community and are a key factor in maintaining good communication between the foundation, hospital and its patients, visitors, citizens and supporters.

**MEMBERSHIP:** The Public Relations Committee shall be a committee of the Board and consist of the following:

- a) three -four Directors – with knowledge/experience social media
- b) the Executive Director as a nonvoting member.

**QUORUM:**

A quorum shall be one more than half the members entitled to vote.

**CHAIR:**

A Board Director.

**RESPONSIBILITIES:** Think before you post the following:.

- Sharing proprietary or confidential Foundation information.
- Posting information or pictures of Donations, shared HDH news, Foundation events.
- NEVER Post defamatory, derogatory, or inflammatory content.

**Terms of Reference  
Physician Recruitment**

**PURPOSE:** To assist HDH and The Hanover Medical Group in the recruitment and retention of physicians and other health professionals.

**MEMBERSHIP:** One Foundation Director and the HDH Executive Manager Human Resources & Physician Recruitment.

**QUORUM:** TWO (2)

**CHAIR:** A Director of the Foundation

**RESPONSIBILITIES:** Attend various recruitment fairs, in concert with the Foundation Executive Director keep updated recruitment material, host various social gatherings, draft physician contracts and enter in negotiations with prospective physicians.

**FREQUENCY OF MEETINGS:** Once per month or on an as needed basis at the call of the Chair.

These meetings are not minuted however the representative provides monthly reports to the Board of Directors.

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Chair

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Coordinator

Policy Covering: <b>COVID-19 VACCINATION POLICY</b>			
Effective Date:	November 2021	Category: Covid Status	Policy #
Reviewed:	April 2022		
Board Approved:	November 2021	Supersedes Policy #/Dated: NEW	Page 1 of 3
Issued By:	Board Chair		

**POLICY:**

HDHF supports and recognizes the hospital policy OHS ES 215 that high vaccination rates are the most effective, evidence-based approach to protecting all individuals from COVID-19, including patients, staff, volunteers, learners and contractors. This includes the staff of the Foundation and all volunteer Board Directors.

All Foundation Staff were required to be fully vaccinated against COVID-19 by September 13, 2021, 2022, unless there is an approved medical exemption.

All Foundation Board Directors are required to be fully vaccinated against COVID-19 by December 15, 2021 unless there is an approved medical exemption.

**PURPOSE:**

The purpose of this policy is to support the Hospital and its policy and expectations with regards to COVID-19 immunizations. This policy aligns with HDH policy.

**SCOPE:**

This policy applies to all employees of the Foundation and Foundation volunteers, students/learners carrying on activities or other business in the hospital regardless of how often they are on site.

**DEFINITIONS:**

- **Students/Learners** – all unpaid or paid learners.
- **Volunteers** – all volunteers, including the HDH Board of Governors, members of the HDH Foundation Board of Directors,
- **Fully Vaccinated** means having received the full series of a COVID-19 vaccine or combination of COVID-19 vaccines approved by the World Health Organization (ex. Two doses of a two-dose vaccine series, or one dose of a single-dose vaccine series); and having received the final dose of the COVID-19 vaccine at least 14 days ago. *This may include booster vaccine(s) in the future.*

## **PROCEDURES & RESPONSIBILITIES:**

### **Current Foundation Employees:**

Individuals must declare their vaccination status by September 13, 2021. Where an individual fails to declare their vaccination status by this date, they will be placed on an unpaid leave of absence and may be subject to discipline up to and including termination of employment. Proof of full vaccination against COVID-19; or written proof of a medical exemption must be provided to the Occupational Health and Safety Department.

### **Medical Exemptions**

Medical exemptions must be provided by a licensed in Ontario physician or nurse practitioner that sets out: (i) a documented medical reason for not being fully vaccinated against COVID-19, and (ii) the effective time-period for the medical reason.

There are very few medical exemptions to the COVID-19 vaccine. These include:

- Severe allergic reactions or anaphylaxis to a previous dose of a COVID-19 vaccine or to any of its components and who have been assessed by an allergist/immunologist to review methods for possible (re)administration of a COVID-19 vaccine.
- Diagnosed episode of myocarditis/pericarditis after receipt of an initial dose of an mRNA vaccine may result in a delayed dose of second dose due to this medical exemption
- Time-limited medical reason causing a delay in receiving the vaccine (ex. Medical procedure or treatment)

HDH Hospital policy details the exemptions further.

### **Requirements for Board Directors/Volunteers:**

Board Directors/Volunteers must provide proof of full vaccination status in order to provide volunteer services for the Foundation Board or entering the building. Exceptions will only apply to those with an approved medical exemption.

### **Requirements for Students, Learners:**

Individuals must be fully vaccinated to work and/or attend placement with HDHF. Medical exemptions must be received, approved and recorded by their educational institution or employer, and communicated to HDH OHS department. Those with an approved medical exemption will be required to provide proof of a negative antigen test to their employer/educational institution prior to commencement of each date of work/placement on-site at HDH. Individuals may be required to provide proof to HDH OHS upon request.

### **Confidentiality**

Pursuant to the Chief Medical Officer of Health's Directive 6 for Public Hospitals, HDH is required to provide, when asked, statistical information related to Covid vaccine numbers to the Office of the Chief Medical Officer of Health or the Ministry of Health. No identifying information will be provided to the Ministry in relation to this policy; all statistical information will be provided in aggregate form.

Medical information relating to an individual's proof of vaccination and/or the reason(s) for not receiving a COVID-19 vaccination and rapid antigen testing will remain in the employee's confidential Occupational Health file for the purposes of contact tracing, policy compliance and

minimizing risks to staff and patients. Vaccination status will be released for purposes of COVID-19 Case Contact, Outbreak Management processes and staffing.

**Non-Compliance**

Failure to comply with the terms of this policy may result in discipline, up to and including termination of employment for Foundation staff, and/or discontinuation of student service or loss of position of Board Director.

**APPENDIX:**

Appendix A – COVID-19 Vaccine – Sunnybrook Health Sciences Centre E-learning Module

**REFERENCES:**

1. Directive #6 for Public Hospitals, issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7  
[https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/vaccination\\_policy\\_in\\_health\\_settings.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/vaccination_policy_in_health_settings.pdf)
2. Grey Bruce Health Services, Draft COVID-19 Vaccination Policy, 2021
3. Huron Perth Health Alliance, Draft COVID-19 Vaccination Policy, 2021
4. St. Thomas Elgin General Hospital, Draft COVID-19 Vaccination Policy, 2021