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**Canadian Mental Health Association**

**Lambton Kent Branch Board of Directors Information Package**

The Canadian Mental Health Association has a long history of providing excellent mental health support throughout Canada.

Locally, the two branches in Sarnia and Chatham merged to form one branch: CMHA Lambton Kent in 2011.

CMHA Lambton Kent is a rapidly growing provider of professional health and health related services for people with mental illness, their families and the broader community. Working in a highly demanding and dynamic health care delivery environment, CMHA has been recognized for our leadership, innovation and excellence at the local, provincial, and national levels.

**VISION**

Mentally healthy people in a healthy society.

**MISSION**

As a leader and champion for mental health, CMHA Lambton Kent provides services and facilitates access to the resources people require to maintain and improve mental health. Our efforts promote community integration, build resilience, and support recovery from mental illness and addictions.

**KEY VALUES AND PRINCIPLES**

• Embracing the voice of people with mental health issues  
• Promoting inclusion   
• Working collaboratively   
• Influencing the social determinants of health   
• Focusing on the mental health needs of all age groups   
• Using evidence to inform our work   
• Being transparent and accountable

Our vision defines the overall outcome that we are working towards. Our mission describes our purpose and unique contribution. Our values and principles underlie our thinking and actions.

**What does CMHA Lambton Kent do?** We strive to:

* Provide a range of responsive programs in an atmosphere of mutual sharing
* Educate the wider community regarding mental health issues
* Develop and operate community-based mental health programs for people requiring support
* Work closely with other related services in the community
* Participate in developing other suitable programs in the community

Governing our organization is one of the most critical roles someone can play at CMHA Lambton Kent. That is why we recruit a variety of skill levels for every seat on the board.

**What is the Job of Board Members?**

* “Effective Governance….means ensuring that the appropriate process and structures are in place to direct and manage an organization’s operations and activities, and to ensure that they function well. The ultimate goal of good governance is to ensure the effectiveness, credibility and viability of the organization”.

**What will be expected of me as a Board Member?**

* Board Members are expected to attend and actively participate in board meetings (one meeting per month – 9 per year), and occasional special meetings and planning sessions.
* In addition, Board Members monitor the strategic plan, business plan, and annual budget, and help make decisions that guide the organization’s progress.
* You will also participate in regular evaluation of the board’s performance.

**Responsibilities of the Board**

* Ensure the organization moves forward fulfilling its mission and vision
* Monitor the Organizational Strategic Business Plan
* Ensure that the CEO has the resources for the organization to fulfill its mission and to finance its programs
* Provide financial oversight and accountability
* Maintain effective governance of the organization by using broad policies and objectives
* Ensure legal and ethical integrity and accountability of the organization
* Recruit and orient new board members and assess board performance
* Select and appoint a CEO to whom responsibility for the management of CMHA Lambton Kent is delegated

**General Expectations of the Board**

* Regularly participate in board meetings, committees and important related meetings
* Make a serious commitment to participate actively in board and committee work
* Stay informed about board and committee issues, prepare for meetings, and review and comment on minutes and reports
* Get to know other board members and build collegial working relationships that contribute to consensus
* Be an active participant in the board evaluation and planning efforts
* Avoid any conflict of interest
* Disclose all material facts and relationships, and refrain from voting when there is a conflict of interest
* Maintain confidentiality
* Participate in fundraising or special events

**Opportunity**

CMHA Lambton Kent has developed a Strategic Business Plan. The plan envisions a diverse, effective Board of Directors that is qualified to guide the organization, assumes its defined role and responsibilities, is willing and able to actively participate in board leadership and is motivated by CMHA Lambton Kent’s Mission.

This is an excellent opportunity to assist in ensuring the continued success of CMHA Lambton Kent. As a board member you will enhance your career development and utilize your professional skills in a capacity that promotes the highest standards for services.



**Application for Board of Directors**

**Part 1: Instructions**

* To apply to be a member of the Canadian Mental Health Lambton Kent Branch Board of Directors, you must complete this form and submit it with a copy of your current resume.
* Please submit your completed form and resume by mail, fax, or email to the following address:

Via Mail:

Cheryl Riedstra

Executive Assistant

CMHA Lambton Kent

210 Lochiel Street

Sarnia, ON N7T 4C7

Via Email: [criedstra@cmhalambtonkent.ca](mailto:criedstra@cmhalambtonkent.ca)

Via fax: 519-336-1923

**Part 2: Personal Identification**

To ensure our board representation, we need to know who you are, where you live, and what you do or did. If some areas make you uncomfortable, leave them blank.

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| --- | --- | --- |
| Name |  | |
| Address | Business: | |
| Home: | |
| Telephone Numbers | Business: | Home: |
| Fax Number | Business: | Home: |
| E-Mail Address | Business: | Home: |

**Part 3: Eligibility Criteria and Conditions of Nominations**

* + - 1. Applicant must be eighteen (18) or more years of age;
      2. Applicants may not be an Excluded Person.

“Excluded Person” means:

any employee or staff member of the Corporation, Chatham-Kent Health Alliance (CKHA), Bluewater Health (BWH), a Branch or CMHA National; and;

any spouse (including common law or same sex spouse), dependent child, parent, brother or sister of a person listed in (i) above;

* + - 1. Undischarged bankrupts are ineligible to serve as a director.
      2. Applicants will be required to provide a recent “Criminal Information Request” and a “Vulnerable Sector Check” obtained from the Chatham Kent or Sarnia Lambton Police Station to be placed in the Corporation’s files.
      3. Directors must fulfill the requirements and responsibilities of their position, for example, preparing for and attending board and committee meetings, upholding their fiduciary obligations and working cooperatively and respectfully with other board members. Directors must comply with legislation governing the corporation, the corporation’s by-laws and policies, and all other applicable rules.
      4. Directors must sign a Declaration confirming their agreement to adhere to their fiduciary duties and board and corporate policies.

**Part 4: Background**

Education/Employment History: (Where, When, Doing what?)

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Please list board experience:

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Please describe any linkages you may have had with various health care groups within the Erie St. Clair Local Health Integration Network (ESC LHIN):

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Community Involvement: (Where, When, Doing what?)

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**Part 5: Conflict of Interest Disclosure Statement**

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

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**Part 6: Personal Motivation**

Why do you want to join the Canadian Mental Health Association, Lambton Kent Branch Board? What do you bring to the group? What do you hope to learn:

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Describe personal or family involvements with mental health & addictions issues:

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**Part 7: Knowledge, Skills and Experience**

The board seeks a complementary balance of knowledge, skills, and experience. Please indicate your areas of knowledge, skills and experience by completing Schedule A to this application.

**Part 8: Declaration**

By submitting this application, I declare the following:

* I meet the eligibility criteria and accept the conditions of appointment set out above.
* I certify that the information in this application is true.

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

**Application for Membership: Schedule A**

**Board Knowledge, Skills and Experience Matrix**

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

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| --- | --- | --- | --- | --- | --- |
| ***Accounting*** | | | ***Mental Health Industry Specific Experience*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Advocacy*** | | | ***Labour Relations*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Board and Governance*** | | | ***Legal*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Business Management*** | | | ***Political Acumen*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Education*** | | | ***Public Affairs and Communications*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Ethics*** | | | ***Quality and Performance Management*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Finance*** | | | ***Risk Management*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Government and Government Relations*** | | | ***Strategic Planning*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Human Resources Management*** | | | ***Lived Experience (Mental Health)*** | | |
| None | Basic | Advanced | None | Basic | Advanced |
| ***Mental Health Industry Specific Knowledge*** | | | ***Indigenous*** | | |
| None | Basic | Advanced | Yes | No |  |
|  | | | ***Bilingual*** | | |
|  |  |  | Yes | No |  |
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