
South East Health Unit

formerly



BOARD OF HEALTH MEETING AGENDA PACKAGE

WEDNESDAY, JANUARY 22, 2025

at 1:00 p.m.

Kingston Main Office
221 Portsmouth Avenue

**Please note there will be a
Closed Session
during this meeting**

Microsoft Teams [Need help?](#)

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Meeting ID: 293 116 711 44

Passcode: xy3NV7So

To ensure a quorum we ask that you please RSVP to
clovell@hpepha.ca or 613-966-5500 Ext. 231.

Hastings Prince Edward Public Health
179 North Park St.
Belleville, Ontario K8P 4P1
613-966-5500 | 1-800-267-2803
Fax: 613-966-9418

Kingston, Frontenac and Lennox
& Addington Public Health
221 Portsmouth Ave.
Kingston, Ontario K7M 1V5
613-549-1232 | 1-800-267-7875
Fax: 613-549-7896

Leeds, Grenville & Lanark
District Health Unit
458 Laurier Blvd.
Brockville, Ontario K6V 7A3
613-345-5685 | 1-800-660-5853
Fax: 613-345-2879

South East Health Unit

formerly



BOARD OF HEALTH AGENDA Wednesday, January 22, 2025 - Kingston

1. CALL TO ORDER

2. LAND ACKNOWLEDGEMENT

South East Health Unit are located on the traditional territory of Indigenous peoples dating back countless generations. We would like to show our respect for their contributions and recognize the role of treaty making in what is now Ontario. Hundreds of years after the first treaties were signed, they are still relevant today.

3. ROLL CALL

4. ADDRESS FROM THE CHAIR

4.1 Introductions around the table

5. APPROVAL OF THE AGENDA

5.1 Motion to amend agenda re timing of closed session

6. APPROVAL OF THE MINUTES OF PREVIOUS MEETING

[Schedule 6](#)

7. APPROVAL OF PREVIOUS MINUTES OF THE LEGACY AGENCIES

7.1 Hastings Prince Edward Public Health

– Wednesday, December 4, 2024

[Schedule 7.1](#)

7.2 Kingston, Frontenac, and Lennox and Addington Public Health

- Wednesday, November 27, 2024 and Tuesday, December 3, 2024

[Schedule 7.2](#)

7.3 Leeds, Grenville and Lanark District Health Unit

– Thursday, December 19, 2024

[Schedule 7.3](#)

7.4 South East Transition Team – Friday, December 20, 2024

[Schedule 7.4](#)

8. DISCLOSURE OF PECUNIARY INTEREST AND / OR CONFLICT OF INTEREST

9. CLOSED SESSION

THAT the Board of Health convene in closed session for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically (k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board.

10. RISING AND REPORTING OF CLOSED SESSION

11. NEW BUSINESS

- 11.1 Proposed Board of Health Meeting Schedule [Schedule 11.1](#)
- 11.2 Finance Committee Draft Terms of Reference [Schedule 11.2](#)
- 11.3 Finance Committee Membership
- 11.4 2025 Budget Planning Assumptions [Schedule 11.4](#)
- 11.5 Governance Committee Draft Terms of Reference [Schedule 11.5](#)
- 11.6 Governance Committee Membership
- 11.7 Meeting schedule for Finance and Governance Committees

12. INFORMATION ITEMS ([see website](#)) [Schedule 12.0](#)

13. ADJOURNMENT



DRAFT MINUTES OF MEETING

Wednesday, January 1, 2025

Virtual

3:00 p.m.

In Attendance: (all virtually)

MOHs: Dr. Piotr Oglaza, Dr. Linna Li, Dr. Ethan Toumishey, Dr. Hugh Guan

Councillors: Judy Greenwood-Speers, Peter McKenna, Conny Glenn, Sean Kelly, Jeff McLaren, Michael Kotsovos, Bill Roberts

Mayors: Jan O'Neill, Robin Jones; Warden Nathan Townend

Provincial Reps: Stephen Bird, Barb Proctor, Dr. Jeffrey Allin, Melanie Paradis, Chris Seeley

Recorder: Catherine Lovell

Regrets: Reeve Richard Kidd, Councillor Anne-Marie Koiner, David Pattenden

1. Call to Order (Chair, Dr. Piotr Oglaza)

Dr. Oglaza called the meeting to order at 3:03 p.m.

Dr. Oglaza asked for media individuals to announce themselves. Attending were Ms. Michelle Dorey Forestell for the Kingston Whig Standard and Mr. Ronald Zajac for the Brockville Recorder & Times.

2. Territorial Acknowledgement

A territorial acknowledgement was spoken by Dr. Oglaza.

Roll call of the membership was taken by the Recorder.

3. Election of Chair and Vice Chair

Nominations were opened for Board Chair. There were two nominees: Mayor Jan O'Neil and Councillor Peter McKenna, both agreeing to stand. Each nominee was given time to give an introduction of themselves and state why they want to be Chair. Voting ensued resulting in Mayor Jan O'Neill being elected as the Chair of the Board.

At this point Chair O'Neill took over chairing the meeting.

.../2

Nominations for Vice Chair were opened. There were three nominees: Councillor Judy Greenwood-Speers, Warden Nathan Townend and Councillor Peter McKenna. Councillor McKenna stepped down leaving two nominees. Each nominee was given time to give an introduction of themselves and state why they want to be Vice Chair. Voting ensued resulting in Councillor Greenwood-Speers being elected as the Vice Chair of the Board.

4. Approval of Agenda for meeting on January 1, 2025

It was MOVED by Councillor McKenna and SECONDED by Councillor Roberts THAT the Board of Health approve the agenda of the meeting for January 1, 2025.

CARRIED

5. Disclosure of Pecuniary Interest and the General Nature Thereof

No conflicts of interest were declared in the meeting.

6. New Business

6.1 Approval of Appointments of Medical Officers of Health

It was MOVED by Councillor Kelly and SECONDED by Councillor Greenwood-Speers THAT the Board of Health approve the appointments of Dr. Piotr Oglaza as Medical Officer of Health (MOH) and Chief Executive Officer, Dr. Linna Li as Deputy MOH, Dr. Ethan Toumishey as Deputy MOH and Dr. Hugh Guan as Associate MOH.

CARRIED

6.2 Approval of Board of Health By-laws

It was MOVED by Councillor Glenn and SECONDED by Councillor Roberts THAT the Board of Health approve by-law No. 1 – Conduct of Affairs, by-law No. 2 – Banking and Finance, and by-law No. 3 – Management of the Property as circulated.

CARRIED

6.3 Appointment of Finance Committee Members

It was MOVED by Mayor Jones and SECONDED by Councillor Kotsovos THAT the Board of Health approve the membership of the following Board members who have shown interest in sitting on the Finance Committee. Those members being: Councillor Konier, Councillor Greenwood-Speers and Councillor McKenna.

CARRIED

6.4 Approval of OMERS Employer Amalgamation

It was MOVED by Mr. Stephen Bird and SECONDED by Councillor McLaren THAT the Board of Health approve the resolution referenced as Item 6.4 in the Board Agenda Package as circulated and will forthwith be submitted to the OMERS Administration Corporation.

CARRIED

6.5 Approval of Board of Health Meeting Dates, Times and Locations

It was MOVED by Ms. Melanie Paradis and SECONDED by Councillor Roberts THAT the Board of Health approve that regular board meetings will be held on the fourth Wednesday of each month at 10:30 a.m. with locations to be determined.

CARRIED

6.6 Notice of Motion

A Notice of Motion was put forth by Mayor Jones to have discussion at the next regular meeting of the Board around the Governance Committee.

7. Adjournment

It was MOVED by Councillor Kelly and SECONDED by Ms. Barb Proctor THAT the Board of Health meeting for January 1, 2025 be adjourned at 4:21 p.m.

CARRIED



BOARD OF HEALTH MEETING MINUTES

Wednesday, December 4, 2024

Hastings Prince Edward Public Health (HPEPH)

Present: Ms. Jan O'Neill, Mayor, Municipality of Marmora & Lake, County of Hastings, Chair
 Dr. Jeffrey Allin, Provincial Representative
 Mr. Sean Kelly, Councillor, City of Belleville
 Mr. Michael Kotsovos, Councillor, City of Quinte West, Vice Chair
 Ms. Barbara Proctor, Provincial Representative
 Mr. Bill Roberts, Councillor, Prince Edward County
 Mr. Garnet Thompson, Councillor, City of Belleville

Regrets: Mr. David McCue, Councillor, City of Quinte West
 Ms. Kimberly Carson, Mayor, Limerick Township, Hastings County
 Ms. Melanie Paradis, Provincial Representative
 Mr. Phil St. Jean, Councillor, Prince Edward County

Also Present: Dr. Ethan Toumishey, Medical Officer of Health and CEO
 Ms. Shelly Brown, Director of Community Programs
 Mr. David Johnston, Director of Corporate Services
 Ms. Nancy McGeachy, Director of Clinical Programs
 Ms. Catherine Lovell, Executive Assistant

1. CALL TO ORDER

Chair O'Neill called the meeting to order at 9:31 a.m.

2. **LAND ACKNOWLEDGMENT** - Spoken by Chair O'Neill.

3. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

None

4. APPROVAL OF THE AGENDA

THAT the agenda for the Board of Health (Board) meeting on Wednesday, December 4, 2024 be approved as circulated.

MOTION:

Moved by: Bill

Seconded by: Garnet

CARRIED

5. CLOSED SESSION

THAT the Board of Health convene in closed session for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically, (b) personal matters about an identifiable individual, including municipal or local board employees.

MOTION:

Moved by: Garnet
Seconded by: Barb
CARRIED

6. MOTIONS ARISING FROM CLOSED SESSION

THAT the Board endorse the actions approved in the Closed Session and direct staff to take appropriate action.

MOTION:

Moved by: Michael
Seconded by: Bill
CARRIED

7. APPROVAL OF THE MINUTES OF THE PREVIOUS BOARD MEETING

7.1 Meeting Minutes of Wednesday, October 2, 2024

THAT the minutes of the regular meeting of the Board held on October 2, 2024 be approved as circulated.

MOTION

Moved by: Garnet
Seconded by: Bill
CARRIED

8. BUSINESS ARISING FROM THE MINUTES – None

9. COMMITTEE REPORTS – SOUTH EAST TRANSITION TEAM

9.1 Minutes of meeting held on October 10, 2024

9.2 Minutes of meeting held on November 5, 2024

THAT the SETT Committee reports be received as circulated.

MOTION:

Moved by: Sean
Seconded by: Bill
CARRIED

10. COMMITTEE REPORTS – FINANCE AND GOVERNANCE

- 10.1 Governance – 2024 Risk Management Progress Report
- 10.2 Finance – 2024 Third Quarter Revenues and Expenses
- 10.3 Finance – 2025 Budget Approval

THAT the Committee reports be received as circulated.

MOTION:

Moved by: Garnet

Seconded by: Bill

CARRIED

THAT the 2025 budget be approved by the Board of Health as circulated.

MOTION:

Moved by: Bill

Seconded by: Garnet

CARRIED

11. REPORT OF THE MEDICAL OFFICER OF HEALTH

THAT the Board of Health receive the Medical Officer of Health's report as circulated.

MOTION:

Moved by: Sean

Seconded by: Jeff

CARRIED

Councillors Thompson and Kelly talked about the local program, Operation Red Nose that is now in operation. It was mentioned there were 25 rides given on Friday and 40 rides on Saturday. A great start to the program. Other discussion ensued.

12. STAFF REPORT

- 12.1 Maternal Mental Health – Perinatal Mood Anxiety Disorders

THAT staff reports be received as circulated and presented.

MOTION:

Moved by: Garnet

Seconded by: Jeff

CARRIED

Public health nurses, Suzanne White and Alison Dubien presented this topic. Following the presentation a few members noted that the numbers for our area are alarming and the category that stands out the most are women under 25 years in their perinatal period. It was noted that numbers are so high because the program is doing such a good job of identifying these individuals.

13. CORRESPONDENCE AND COMMUNICATIONS – None**14. NEW BUSINESS**

14.1 Board of Health 2025 meeting schedule

THAT the Board approve the proposed 2025 meeting schedule as circulated.

MOTION:

Moved by: Sean

Seconded by: Bill

CARRIED

14.2 Approval of Voluntary Merger and Vote

WHEREAS:

- ◆ The Provincial Government has now approved the intended merger;
- ◆ The Provincial Government has committed to providing sufficient merger funding for all work done in connection with the merger during the period from April 1, 2024 to March 31, 2025 and has also committed to providing continued merger funding for the period up to and including March 31, 2027, and the Board of Health is satisfied that this funding commitment will enable a successful merger;
- ◆ The Board of Health's negotiation, due diligence, consultations, and merger implementation plans have reinforced the potential benefits of a merger among these three health units;

NOW THEREFORE be it resolved as follows:

1. The Hastings and Prince Edward Counties Health Unit (HPEPH) merge with Kingston, Frontenac and Lennox and Addington Health Unit (KFL&A PH) and the Leeds, Grenville and Lanark District Health Unit (LGLDHU) to create a new public health unit known as the South East Health Unit; AND
2. The HPEPH hereby reaffirms its intention to continue its cross-board merger engagement with KFL&A PH and LGLDHU through its representation on the South East Transition Team in accordance with previous Board of Health motion on March 27, 2024; AND
3. The Hastings Prince Edward Board of Health and the Medical Officer of Health/CEO of the organization shall undertake the actions required to be ready for a legal merger by January 1, 2025.

MOTION:

Moved by: Sean

Seconded by: Michael

CARRIED

Dr. Toumishey explained the process the agency has gone through and that the Board is now being asked to reiterate their support for the merger. Some discussion ensued.

15. INFORMATION ITEMS – The details of each item can be found on the Health Unit's website at hpePublicHealth.ca.

16. DATE OF NEXT REGULAR MEETING – To be determined

17. ADJOURNMENT

THAT this meeting of the Board of Health be adjourned at 10:51 a.m.

MOTION:

Moved by: Sean
Seconded by: Garnet
CARRIED

Jan O'Neill, Board Chair
Hastings Prince Edward Board of Health



MINUTES OF THE GENERAL MEETING OF THE BOARD OF HEALTH

Wednesday, November 27, 2024

13:00 (Boardroom)

Minutes of the meeting of the Kingston, Frontenac and Lennox and Addington Board of Health held at 221 Portsmouth Avenue, Kingston, ON, and through MS Teams, on November 27, 2024.

Present: Mr. W. Garrod (Chair), Councillor C. Glenn, Councillor J. Greenwood-Speers, Councillor J. McLaren, Dr. D. Pattenden, Councillor N. Townend (13:47), Councillor B. Tozzo (Virtual)

A. Armitage (Visual Aids Moderator), A. Bradshaw, M. Carter, S. Donnelly, Dr. T. H. Guan, A. MacMillan, R. Mather, D. Mayer, Dr. P. Oglaza (MOH/CEO), F. Seaton, Z. Shah, C. Shingler, S. Taggart, K. Thompson, (Recorder)

Regrets: Mr. C. Seeley

Guests: Michelle Dorey Forestell (Kingstonist), Dr. M. Wan (Queen's Public Health & Preventive Medicine Resident), Dr. B. Ma (Queen's Family Medicine Resident),

1. Call to Order

Chair W. Garrod called the meeting to order.

2. Territorial Acknowledgement (Board Chair)

Chair W. Garrod read this agency's territorial acknowledgement.

3. Roll Call

Roll call was taken by K. Thompson.

4. Conflict of Interest

No conflicts of interest were declared.

5. Approval of Consent Agenda

It was MOVED by Dr. D. Pattenden and SECONDED by Councillor J. McLaren THAT the Board of Health approve the consent agenda for the meeting of November 27, 2024.

CARRIED

6. Approval of General Agenda

It was MOVED by Councillor C. Glenn and SECONDED by Councillor J. Greenwood-Speers THAT the Board of Health approve the general agenda for the meeting of November 27, 2024.

CARRIED

7. Approval of the Minutes of the General Meeting held October 23, 2024

It was MOVED by Dr. D. Pattenden and SECONDED by Councillor J. Greenwood-Speers THAT the Board of Health approve the minutes of the general meeting of October 23, 2024.

CARRIED

Presentations

8. Food Guide Friendly Recreation Centre Project

Angela MacMillan, Public Health Dietitian, highlighted this agency's longstanding commitment to improving food environments, addressing challenges such as the lack of healthier options and facilities not meeting healthy criteria. Past efforts, such as the "Super Snackables" social marketing campaign and mascot, were paused during the pandemic but are now gradually resuming.

The Food Guide-Friendly (FGF) pilot project marked a key step forward. This initiative is a voluntary program designed to encourage publicly funded institutions to create healthier food environments by increasing the availability and appeal of nutritious foods and beverages through strategies such as pricing, placement, and promotion. In 2022, Health Canada consulted with KFL&A Public Health on FGF principles for recreation settings, and in 2023, KFL&A Public Health agreed to lead a pilot project testing these principles in local recreation facilities. The pilot included recruitment, food environment assessments, patron surveys, goal setting, action plans, implementation, and post-assessment evaluations.

Three sites initially joined the pilot, but one withdrew. Baseline assessments revealed limited availability of fruits, vegetables, whole grains, and lean proteins, with many patrons expressing interest in healthier options. Sites committed to offering more fruits, vegetables, lower-sugar snacks, and whole grain products, implementing changes from January to March 2024. Evaluation showed increased availability of nutritious options and a 20.3 percent rise in FGF item sales, while overall sales remained steady. Patron surveys indicated that 35 percent tried a new item, and 89 percent expressed willingness to repurchase. Staff interviews highlighted challenges such as costs, food waste, and consumer habits, though participants valued Health Canada's tools and public health support.

The project demonstrated opportunities for improving recreation food environments but underscored barriers, such as like financial concerns and food waste of quickly perishable items. Next steps include streamlining FGF tools, supporting local sites with resources and assistance, and promoting consumer awareness to encourage demand for healthier choices in recreation settings.

9. Community Report Update

Dr. P. Oglaza provided a community update, highlighting:

- In October, KFL&A Public Health celebrated Children's Vision Month by promoting OHIP-covered eye exams and free glasses for kindergarten students through the *Eye See, Eye Learn* program. Outreach efforts included e-newsletter inserts for schools, print bookmarks targeted at kindergarten students, and paid social media ads directed at adults aged 18–65 in the KFL&A region. Engagement data collected between October 7 and November 5 revealed that print bookmarks were effective, with a 2 percent engagement rate (77 times) compared to the e-newsletter inserts' 0.3 percent engagement rate (67 times). Among print resources, QR code scans were notably effective, accounting for 80 percent of engagements compared to 20 percent through friendly URLs. Social media ads reached a larger, less targeted audience but generated the highest overall engagement.

These findings highlight the importance of combining print materials, QR codes, and social media promotion to effectively reach diverse audiences. While continuing to promote OHIP-covered visual health services, KFL&A Public Health has paused school-based vision screening for the 2024–2025 school year in light of proposed regulatory changes under the Health Protection and Promotion Act.

- This fall, Respiratory syncytial virus (RSV) immunization eligibility was expanded to include all residents of retirement homes, with the vaccine preventable disease and infection prevention and control teams supporting on-site clinics. A total of 601 retirement home residents were vaccinated, achieving 81 percent coverage. For infants and high-risk children, all children born in 2024 and up to 12 months of age are eligible for monoclonal antibody RSV protection, with eligibility extended to 2 years for those meeting high-risk criteria. Hospitals, as primary access points, began providing RSV immunizations to live births on November 1, supported by a supply of Beyfortus immunization that became stable in early November. The vaccine preventable disease team is collaborating with hospitals, obstetrical care providers, and primary care to ensure access for eligible children, with KFL&A offering additional immunization through the Partnership for Well Baby Care Clinic. As of November 18, KFL&A has distributed 769 doses of infant RSV immunization to community partners, 200 doses to hospitals, and administered 80 doses in our own clinics.

Throughout the respiratory season, KFL&A will provide COVID-19, flu, and RSV immunization clinics and outreach for individuals with limited access to primary care or pharmacy services, including children under 5 without primary care and individuals experiencing homelessness.

- Over the past year, KFL&A Public Health has developed the Automated Opioid News Event-based Surveillance (AONES), a new tool designed to enhance drug poisoning crisis surveillance. Funded by a Public Health Ontario Locally Driven Collaborative Project grant, the tool uses artificial intelligence to filter news articles across North America, identifying relevant drug crisis information. AONES captures critical details about drug alerts, including substances involved, their characteristics (e.g., color, form, and effects), incident details, affected populations, and locations. By supplementing traditional surveillance methods, it identifies emerging issues in the drug supply. The tool is publicly available to assist public health unit staff and harm reduction workers nationwide.

Discussion Items

10. Report of the Medical Officer of Health/Chief Executive Officer

The report of the Medical Officer of Health/Chief Executive Officer was included in the agenda for reference but was not discussed.

11. South East Transition Team Update

A meeting with the ministry was held on November 26, 2024, where progress on the merger was discussed, with optimism about its success. Pending provincial approval of

funding, all three boards of health will need to hold a special meeting to approve the merger. Significant efforts have already been made by the South East Transition Team, Medical Officers of Health, and staff, with further work anticipated.

Action Items

12. Health Canada's Radon Guideline

Radon is a colorless, odorless gas that poses a significant health risk, as it is the leading cause of lung cancer among non-smokers and contributes to 16 percent of lung cancer deaths in Canada. While Health Canada recommends mitigation for radon levels above 200 Bq/m³, the World Health Organization (WHO) has set a lower guideline of 100 Bq/m³ due to evidence showing increased cancer risks even at moderate radon exposure. This discrepancy between guidelines causes confusion and reduces the likelihood of mitigation actions when levels are below Health Canada's threshold. Testing for radon is simple and cost-effective, with Health Canada-approved tests available for purchase and best conducted during the colder months. In 2018, KFL&A Public Health conducted a study that revealed that over 21 percent of homes tested exceeded Health Canada's guideline, and 52 percent exceeded the WHO's limit, highlighting the need for clearer, unified guidance. Aligning Health Canada's radon guideline with the WHO's limit could prevent approximately 700 radon-attributable lung cancer deaths annually in Canada and facilitate policies to support mitigation efforts, ultimately reducing the burden of lung cancer in communities.

It was MOVED by Councillor C. Glenn and SECONDED by Councillor J. Greenwood-Speers THAT the KFL&A Board of Health urges Health Canada to establish a new radon guideline for residential homes, public buildings and indoor workplaces that aligns with the World Health Organization's radon limit of 100 Bq/m³;

AND THAT the KFL&A Board of Health urges Health Canada to continue to recommend the reduction of radon levels to as low as reasonably achievable below the new radon guideline level, and send correspondence to:

The Honourable Mark Holland, Minister of Health

AND FURTHER THAT this correspondence be copied to:

- **Dr. Theresa Tam, Chief Public Health Officer**
- **Mark Gerretson, Member of Parliament, Kingston and the Islands**
- **Shelby Kramp-Neuman, Member of Parliament, Hastings – Lennox and Addington**
- **Scott Reid, Member of Parliament, Lanark – Frontenac – Kingston**
- **Association of Local Public Health Agencies**
- **All Ontario Boards of Health**

CARRIED

13. Preschool Speech and Language Deferred Revenue Funds

In 2010, the Board of Health approved the allocation of reserve funds to support the Healthy Babies Healthy Children (HBHC) and Preschool Speech and Language (PSL)

programs in response to a budget freeze by the Ministry of Children and Youth Services. These funds were intended to preserve service levels and were placed in separate deferred revenue accounts for each program. As of November 14, 2024, \$26,459.67 remains in the PSL account. However, following the divestment of the PSL program to KidsInclusive in May 2023, these funds can no longer serve their original purpose. It is proposed that the Board of Health redirect these funds to the HBHC program to enhance early childhood services, particularly in addressing tooth decay in rural populations through home visits and fluoride varnish initiatives. This reallocation aligns with the original intent of supporting early year services for children and addresses the growing demand for such services in the community.

It was MOVED by Dr. D. Pattenden and SECONDED by Councillor J. Greenwood-Speers THAT the KFL&A Board of Health redirect the funds from the Preschool Speech and Language Program deferred revenue account to the Healthy Babies Healthy Children program to augment this service in the KFL&A region.

CARRIED

Information Items

14. Monitoring Food Affordability in KFL&A

The 2024 Cost of Eating Healthy report, released in November, highlights the critical issue of food insecurity in the KFL&A region, where one in three households experiences inadequate or insecure access to food due to financial constraints. Food insecurity is a significant public health problem, linked to chronic conditions, mental health disorders, and profound health inequities. KFL&A Public Health monitors local food affordability as mandated by the Ontario Public Health Standards, using tools based on Health Canada's National Nutritious Food Basket to compare the cost of food and housing with incomes for various households. The 2024 results highlight that individuals and families on fixed incomes, social assistance, or earning minimum wage face substantial financial shortfalls, making it difficult to afford basic needs. For instance, a family of four on Ontario Works in Kingston ends each month with a \$-505 balance. The report emphasizes that income-based solutions are essential to addressing food insecurity, as food charity and food-based interventions fail to tackle its root cause: inadequate income. The findings were shared with community partners, municipal leaders, and the public through social media, email, and an upcoming joint media release in collaboration with other Eastern Ontario public health units to raise awareness of food insecurity as a public health crisis.

15. alpha InfoBreak – November 2024

The alpha InfoBreak was included in the agenda for reference but was not discussed.

It was MOVED by Councillor J. Greenwood-Speers and SECONDED by Councillor N. Townend THAT information items 14 and 15 be received.

CARRIED

16. Board Members' Questions

There were no questions.

17. Move In Camera

**It was MOVED by Dr. D. Pattenden and SECONDED by Councillor J. McLaren
THAT the Board of Health meeting move In-Camera.**

CARRIED

18. Report and Motion(s) from the In-Camera Session (will be included at the next regular meeting, if applicable.)

None at this time.

19. Adjournment

As this is Councillor Brandon Tozzo's last meeting with the KFL&A Board of Health, Chair Garrod recognized him for his contributions and wished him well in his future endeavors.

It was MOVED by Councillor N. Townend and SECONDED by Councillor J. Greenwood-Speers THAT the Board of Health meeting of November 27, 2024 be adjourned.

CARRIED

Date of Next Meeting: January 22, 2025 - TBC

Chair

Recorder

MINUTES OF THE SPECIAL MEETING OF THE BOARD OF HEALTH

Wednesday, December 3, 2024

09:30 (Boardroom)

Minutes of the meeting of the Kingston, Frontenac and Lennox and Addington Board of Health held at 221 Portsmouth Avenue, Kingston, ON, and through MS Teams, on December 3, 2024.

Present: Mr. W. Garrod (Chair), Councillor P. Chaves, , Councillor J. Greenwood-Speers, Councillor J. McLaren, Mr. C. Seeley (Virtual), Councillor N. Townend

A. Mazur (Visual Aids Moderator), Dr. T. H. Guan, K. Monaghan, D. Mayer, Dr. P. Oglaza (MOH/CEO), F. Seaton, Z. Shah, C. Shingler, S. Stewart, S. Taggart, K. Thompson, (Recorder)

Regrets: Councillor C. Glenn, Dr. D. Pattenden

Guests: Michelle Dorey Forestell (Kingstonist), Dr. M. Wan (Queen's Public Health & Preventive Medicine Resident), Dr. B. Ma (Queen's Family Medicine Resident)

1. Call to Order

Chair W. Garrod called the meeting to order and welcomed Councillor P. Chaves as the new City of Kingston municipal appointee following Councillor B. Tozzo's end of term.

2. Territorial Acknowledgement (Board Chair)

Chair W. Garrod read this agency's territorial acknowledgement.

3. Roll Call

Roll call was taken by K. Thompson.

4. Conflict of Interest

No conflicts of interest were declared.

5. Approval of General Agenda

It was MOVED by Councillor N. Townend and SECONDED by Councillor J. Greenwood-Speers THAT the Board of Health approve the special agenda for the meeting of December 3, 2024.

CARRIED

6. Voluntary Merger Funding

The voluntary merger of the KFLAPH, HPEPH, and LGLDHU reflects the government's August 2023 initiative to strengthen public health. Dr. P. Oglaza reiterated that the merger aims to create greater capacity to enhance emergency response, improve public health services, and address health equity across the regions.

A significant milestone was reached in April 2024 with the submission of a comprehensive business case outlining the parameters and funding requirements for the merger. Since

then, collaborative efforts with the Ministry have finalized a budget of \$10,872,385 for the first fiscal year (April 2024–March 2025). This budget is distributed across the three health units to accommodate their current operational structures, as they remain separate entities for accounting purposes until the merger finalizes on January 1, 2025. KFL&A Public Health’s allocated portion of this budget is \$3,944,900.

A key detail highlighted in a letter dated December 2, 2024, addressed to Chair Garrod, is the government’s commitment to provide 100 percent provincial funding support for this merger, and in principle, also provide commitment for eligible out-year merger costs, subject to regulatory changes and appropriate financial reporting.

The approved budget supports several critical initiatives necessary for the merger’s success, including mortgage buyouts of office buildings, consultant reports, information technology assessments, and other foundational activities. These efforts are aimed at ensuring a smooth transition.

The process has been marked by strong collaboration, political will, and widespread enthusiasm. The SETT, formed in November 2023, demonstrated unity and commitment, with all members expressing interest in joining the new board, ensuring continuity. The leadership of the Medical Officers of Health and the dedication of staff have been instrumental in overcoming challenges and advancing progress.

Chair Garrod noted that over the past year, the board has consistently made thoughtful and impactful decisions, and the merger decision stands as one of the most significant. Public health has always been guided by the principle of health equity, ensuring that everyone, regardless of their location, receives the same high level of service. This inclusive and unified approach has been a hallmark of the board’s work and is expected to continue with the new board.

Recognition is due to the exceptional leadership of Dr. Ian Gemmill, Dr. Kieran Moore, and Dr. Piotr Oglaza, whose contributions have positioned KFL&A Public Health as one of the leading boards in the province. Staff, both past and present, deserve immense gratitude for their dedication and hard work, which will remain critical as all frontline staff transition to the new board without cuts.

Finally, heartfelt thanks are extended to the Board of Health, whose support and commitment have been instrumental during challenging times. Serving as chair over the past two years has been an honor, and the collaboration and dedication of this board have been exemplary. Thank you all for your contributions to KFL&A Public Health and its enduring legacy.

It was MOVED by Councillor N. Townend and SECONDED by Councillor J. Greenwood-Speers THAT:

WHEREAS:

- The Provincial Government has now approved the intended merger;
- The Provincial Government has committed to providing sufficient merger funding for all work done in connection with the merger during the period from April 1, 2024 – March 31, 2025, and has also committed to providing continued merger funding for the period up to and including March 31,

2027, and the Board of Health is satisfied that this funding commitment will enable a successful merger;

- The Board of Health's negotiation, due diligence, consultations, and merger implementation plans have reinforced the potential benefits of a merger among these three health units.

NOW THEREFORE be it resolved as follows:

1. The Kingston, Frontenac and Lennox and Addington Health Unit (KFLAPH) merge with Hastings and Prince Edward Counties Health Unit (HPEPH) and Leeds, Grenville and Lanark District Health Unit (LGLDHU) to create a new public health unit known as the South East Health Unit; AND
2. The KFLAPH hereby reaffirms its intention to continue its cross-board merger engagement with HPEPH and LGLDHU through its representation on the South East Transition Team in accordance with previous Board of Health motion on March 27, 2024; AND
3. The KFLAPH Board of Health and the Medical Officer of Health/CEO of the organization shall undertake the actions required to be ready for a legal merger by January 1, 2025.

6 in favour / 2 in absence / 0 opposed / 0 abstention. CARRIED

7. Board Members' Questions

There were no questions.

8. Adjournment

It was MOVED by Councillor J. Greenwood-Speers and SECONDED by Councillor P. Chaves THAT the Board of Health meeting of December 3, 2024 be adjourned.

CARRIED

Date of Next Meeting: January 22, 2025 - TBC

Chair

Recorder



Minutes of the Board of Health Regular Meeting
Thursday, December 19, 2024
Lanark Room
3:55 pm – 4:37 pm

Present:

Peter McKenna, Chair	Ruth Lockett
Toni Surko, 1 st Vice Chair	Regrets: Tory Deschamps
Robin Jones, 2 nd Vice Chair	Anne-Marie Koiner
Stephen Bird	
Jane Fullarton	Linna Li, Medical Officer of Health
Richard Kidd	Heather Bruce, Executive Assistant
Rebecca Ferguson, Director, Population Health and Clinical Services	Shani Gates, Director, Corporate Services Elaine Murkin, Manager

1. Call to Order

Peter McKenna called the meeting to order at 3:55 pm and advised that this is the last Board of Health meeting for the Corporation of the Leeds, Grenville and Lanark District Health Unit that was founded in 1947.

2. Traditional Land Acknowledgement Statement

Peter McKenna read the land acknowledgement statement.

3. Approval of the Agenda

The agenda items were reviewed.

*Motion: That the agenda of the December 19, 2024 Regular Meeting be approved as circulated.
Motion Carried.*

4. Conflict of Interest Declaration

None declared.

5. Consent Agenda

Motion: That the following items on the consent agenda be approved as circulated:

5.1. Approval of the Minutes from the Board of Health Regular Meeting held on November 28, 2024

*5.2. Approval of the Minutes from the Special Board of Health Meeting held on December 5, 2024
(amended)*

5.3. General Correspondence

5.4. Duty of Care Report Summary

5.5. Board of Health Glossary of Acronyms

5.6. Report from the Finance, Audit, Property, and Risk Management Committee
Motion Carried.

Item 5.2. has been amended to include information regarding harmonizing of the municipal levy and fiscal implications for municipalities.

6. New Business:

6.1. Health Unit Retrospective Presentation

Linna Li shared a Health Unit retrospective with board members outlining services delivered throughout various era’s. (Appendix #1) Peter McKenna thanked Dr. Li and staff for the presentation.

6.2. Certificates of Appreciation

Certificates of appreciation were presented to board members for their service on the LGL Board of Health.

6.3. Merger Update

Peter McKenna advised that the last SETT meeting will be held on December 20, 2024 in Kingston. Membership from LGL on the South East Health Unit (SEHU) Board will be Richard Kidd, Robin Jones, Anne-Marie Koiner and Stephen Bird. A focus of the new Board will be geography and how to deliver services to underserved rural areas in a different way. An election of officers for the positions of Chair and Vice Chair will take place at the January 1, 2025 SEHU meeting and the current three Board Chairs are letting their names stand. By-laws will be discussed as well and it will be an open meeting by Zoom at 3:00 pm.

The SETT has recommended that Dr. Oglaza be the MOH/CEO and that Dr. Li and Dr. Toumishey be Deputy MOHs. Headquarters will be in Kingston as it is the most central for everyone. Board meetings will likely rotate between locations. A suggestion was made to make signing authorities a priority at the January 22, 2025 South East Health Unit meeting.

6.3.1. SETT Minutes November 5, 2024

No discussion.

6.3.2. SETT Minutes November 26, 2024

No discussion.

7. Adjournment

Motion: That the meeting adjourn at 4:37 pm.

Motion Carried.

Peter McKenna, Chair

Date

Heather Bruce, Executive Assistant

Date

c: Board members

SOUTH EAST TRANSITION TEAM OPEN SESSION MINUTES

Friday, December 20, 2024 KFL&A Public Health 10:00 am Auditorium A

In Attendance: (in person)

MOHs: Dr. Piotr Oglaza, Dr. Linna Li, Dr. Ethan Toumishey.

Councillors: Judy Greenwood-Speers, Peter McKenna, Nathan Townend, Conny Glenn, Sean Kelly, Jeff McLaren.

Mayors: Jan O'Neill, Robin Jones.

Provincial Reps: Stephen Bird, Wess Garrod, Barb Proctor.

Recorder: Tanya Mundell.

Virtual: Toni Surko, Reeve Richard Kidd, Councillor Michael Kotsovos.

Regrets: Dr. Jeffrey Allin, Melanie Paradis, Councillor Anne-Marie Koiner, Councillor Bill Roberts.

1. Call to Order (Chair, Wess Garrod)

Chair Garrod called the Open Session meeting to order **(at 10:00am)**.

2. Territorial Acknowledgment

The agency's Territorial Acknowledgment was read by Chair Garrod.

3. Disclosure of Pecuniary Interest and the General Nature Thereof

No conflicts of interest were declared in the closed session.

4. Welcome and introductions of newly appointed members of the SEHU Board of Health

All attendees introduced themselves.

5. Approval of Open Agenda for meeting on December 20, 2024

It was **MOVED** by Councillor Townend and **SECONDED** by Councillor Kelly **THAT** the South East Transition Team approve the agenda of the Open Session of December 20, 2024.

CARRIED.

6. Approval of the Open Session Minutes of The South East Transition Team meeting held on December 12, 2024

It was **MOVED** by Mayor Jones and **SECONDED** by Mayor O'Neill **THAT** the South East Transition Team approve the Open Minutes of December 12, 2024.

CARRIED.

7. Business Arising from the Minutes

No business arising was noted in the open session.

8. Reports from the Medical Officers of Health/Boards of Health (Verbal)

Dr. Toumishey reported that from an operational perspective HPE has been quite consumed with merger. Plenty of communications going out for staff and positive feedback has been received from staff and community partners.

Dr. Oglaza shared that many legal aspects must be in place by January 1, 2025, and thanks to good guidance from legal supports these are on track. Operationally, teams are collaborating at the director level and preparing for more in-depth engagement and branding going into the first quarter. Choosing the agency's operating name will be an opportunity to engage staff across the three regions.

Dr. Li reported that a staff event was held on December 19th to celebrate the closing of their legacy agency name.

9. Members' Roundtable

In the spirit of the roundtable held a year ago, members shared their expectations and ideas for the new merged agency and board of health.

10. New Business**10.1 Summary of progress to date and role of SETT**

A map of criteria was created and explored, the business case was submitted to the province, and the wait began. Staff continued to plan for essential pieces and work began long before an announcement came from the province. A guiding principle was that of three equal groups working to ensure success of the whole. SETT has completed the major work for the governance piece.

10.2 Draft agenda for the first meeting of the South East Health Unit Board of Health

The draft agenda for the January 1, 2025 Board of Health meeting was reviewed and minor changes were noted.

Election will take the form of secret ballot sent to the Recording Secretary and scrutineer by email. The agenda shall include the email addresses for ballots to be sent to, movers and seconders are to be recorded. Once a Chair is elected, will move to the election of a Vice Chair.

Current Provincial Appointees are anticipated to be appointed to the new board, and their status will be checked on December 31, 2024. If individuals are not confirmed to have member standing as of January 1, 2025, they will not be eligible to run for election nor vote for the Chair/Vice Chair positions. They may attend the meeting as guests.

10.3 Confirmation of Interest for Chair and Vice Chair**10.3.1 Introductions of Chair and Vice Chair candidates**

It was decided to wait until the date of the vote to hold introductions of candidates for both Chair and Vice-Chair positions.

Nominees for Vice Chair can be nominated after the chair is elected.
All candidates will have a time limit of 4 minutes for speeches.

10.4 Terms of Reference for the Finance Committee discussion

10.4.1 Number of members

Staff are working on draft Terms of Reference for the new board to consider. Waiting until the January 22, 2025 meeting to appoint committee members could delay budget approvals. BOH Chair and Vice Chair are typically on the Finance Committee.

10.5 Expression of Interest for the Finance Committee

Expressions of interest were received from:

- Anne-Marie Koiner (put forward by Mayor Jones)
- Councillor Greenwood-Speers

Additional members to be determined on or after January 1, 2025.

10.6 Regular monthly South East Health Unit BOH meeting dates, times and locations discussion

Regular meetings of the Board of Health will be held on the 4th Wednesday of each month at 10:30 am.

The meeting on January 22, 2025 will be held in Kingston. A schedule of dates and locations to be determined and will include Belleville, Brockville, and Kingston. The importance of alternating locations during year one was discussed, a factor to consider for the rotation schedule could be when weather is more conducive for driving. More meetings may be required in the first year, with fewer meetings in the long term plan.

11. Closed Session

It was MOVED by Mayor O'Neill and SECONDED by Councillor Townend THAT the South East Transition Team convene in closed session for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically,

- (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose, and
- (k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board.

CARRIED.

-- Lunch 11:30 to 12:30 p.m.—

12. Motions Arising from Closed Session

It was MOVED by Mayor Jones and SECONDED by Councillor McLaren THAT the Exhaustive Ballot System be adopted for the January 1, 2025 elections of the Chair and Vice Chair roles for the new Board of Health for the South East Health Unit.

CARRIED.

13. Date of Next Meeting

No further meetings scheduled as the work of the South East Transition Team is complete.

14. Adjournment

It was MOVED by Councillor Greenwood-Speers and SECONDED by Mayor O'Neill THAT the South East Transition Team meeting of December 20, 2024 be adjourned (at 1:35pm).

CARRIED.



2025

Board of Health Proposed Meeting Schedule

It is being proposed that Board meetings will be held the **fourth Wednesday of each month** to commence at 1:00 p.m. at the location shown in the table below or as otherwise noted. All meetings, including committee meetings, will have the option of in-person or virtual attendance.

It is requested that you **RSVP your attendance as well as non-attendance of each meeting to Catherine Lovell, Executive Assistant at clovell@hpeph.ca or call 613-966-5500 ext 231 or cell 613-921-2078.**

Date of Meeting - Kingston

January 22
April 23
September 24
December 17

Date of Meeting - Brockville

February 26
June 25
August 27
October 22

Date of Meeting - Belleville

March 26
May 28
July 23
November 26

Finance Committee Meetings

It is requested that you **RSVP your attendance as well as non-attendance of each meeting to Kathleen Thompson, Executive Assistant at kathleen.thompson@kflaph.ca or call 613-549-1232 Ext. 1147.**

Finance Committee meetings will be held on the _____ (weekday) of the month, where possible or as noted below, at **time of day**, unless otherwise announced.

Date of Meeting - Kingston

February 19

Date of Meeting - Brockville

Date of Meeting - Belleville

Governance Committee Meetings

It is requested that you **RSVP your attendance as well as non-attendance of each meeting to Heather Bruce, Executive Assistant at heather.bruce@healthunit.org or call 613-345-5685 Ext. 2248.**

Governance Committee meetings will be held on the _____ (weekday) of the month, where possible or as noted below, at **time of day**, unless otherwise announced.

Date of Meeting - Kingston

Date of Meeting - Brockville

Date of Meeting - Belleville

As at January 13, 2025

[ROMA Conference](#) – January 19-21, 2025 – Sheraton Centre Hotel, Toronto, ON

[AMO Conference](#) – August 17-20, 2025 – Ottawa, ON ([Hotel booking](#) starts January 14)

South East Health Unit

formerly



Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Dr. Piotr Oglaza, Medical Officer of Health and CEO
Date:	Wednesday, January 22, 2025
Subject:	Terms of Reference for the Draft Finance and Governance Committees
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input checked="" type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	THAT the Board of Health adopt the Terms of Reference for each of the Finance and Governance Committees as presented.
Background:	<p>Through pre-merger discussions of the South East Transition Team it was raised that the Board of Health for the South East Health Unit should have a committee structure including Governance and Finance committees.</p> <p>Based on legal advice and to facilitate creation of these committees by the newly established South East Health Unit Board of Health, a draft Terms of Reference document has been prepared for each of these committees.</p> <p>The draft TORs reflect the role of these committees in support of the overall governance function of the Board of Health.</p>

SOUTH EAST HEALTH UNIT BOARD OF HEALTH FINANCE COMMITTEE TERMS OF REFERENCE

PURPOSE

The purpose of the Finance Committee (Committee) is to provide advice to the Board of Health (Board) in fulfilling its financial oversight responsibilities such as financial planning and investment, financial reporting and risk management related to the finances of the organization.

The Committee ensures accountability of the South East Health Unit (SEHU) in compliance with the Health Protection and Promotion Act (HPPA), Public Health Accountability Framework per the Ministry of Health Ontario Public Health Standards: Requirements for Programs, Services and Accountability (OPHS) and all other applicable legislation and regulations.

RESPONSIBILITIES

Specific duties and responsibilities will include, but are not limited to, the following:

1. Review the annual budget, both cost-shared and 100% funded and make recommendations to the Board.
2. Review quarterly year-to-date financial results, analyse and assess financial performance against approved budget and make recommendations to the Board.
3. Review annual draft audited financial statements and auditor's report with the external auditors and make recommendations to the Board as required.
4. Monitor the accumulation and utilization of operating and capital reserve funds on an annual basis in conjunction with the external auditors.
5. Review budget funding assumptions and forecasting of municipal contributions for obligated municipalities.
6. Review year end financial settlements and reports as required.
7. Review financial updates and year end projections for variances, resource allocation plans and decisions, and make recommendations thereon.
8. Gain reasonable assurance that the accounting practices, policies, internal financial controls and reports and forecasts are reasonable, comprehensive and managed in an efficient and effective manner.

STRUCTURE

- ◆ The Committee is a standing committee of the Board of Health.
- ◆ Committee members are selected during the first Board meeting of the year.
- ◆ Total membership of the Committee will not be more than a quorum of the total Board membership.
- ◆ A quorum of the Committee is required for recommendations to the Board.
- ◆ The Committee will meet either in person or virtually.
- ◆ Changes to the membership of the Committee may be made at the discretion of the Board in order to accommodate changes in Board membership.
- ◆ Any Board member is welcome to attend a Finance Committee meeting as an observing, non-voting member.
- ◆ The Terms of Reference will be reviewed and/or revised every two years.
- ◆ All Finance Committee meetings will run in accordance with SEHU by-laws, Robert's Rules and the Municipal Act.

MEMBERSHIP

- ◆ Membership consists of up to six (6) Board members;
 - At least three (3) municipal appointees; and
 - At least one (1) provincial appointee.
 - The Board Chair will be an ex-officio member of the Committee;
- ◆ The Medical Officer of Health/CEO or designate and the Corporate Service Director or designate will be an ex-officio, non-voting members of the Committee.

TERM OF MEMBERSHIP

- ◆ Members will be expected to stand on the Committee for a two-year term with the provision that this term can be extended depending on interest from other Board members.

FREQUENCY OF MEETINGS

- ◆ The Committee will meet quarterly or four (4) times per year, or as required. Notwithstanding the previous, a meeting of the Committee may be called by the Chair of the Committee, the Board Chair or the Medical Officer of Health/CEO.
- ◆ An annual schedule of meetings will be established and distributed to all members of the Board.

CHAIR, RECORD KEEPING AND COMMUNICATIONS

- ◆ One member of the Committee will be elected as the Chair at the first Committee meeting held at the beginning of the year. For consistency, Chairs are encouraged to serve a minimum period of two years.
- ◆ The Chair of the Committee has overall responsibility to conduct the proceedings of the Committee, encourage discussion of members and present summary reports to the Board.
- ◆ Recommendations made by the Committee will be presented at the next Board meeting by the Chair of the Committee for approval by the Board, as required.
- ◆ An agenda shall be drafted by the Medical Officer of Health/CEO in consultation with and approved by the Finance Committee Chair and/or the Board Chair.
- ◆ Meeting materials will be provided to the Committee in advance of each meeting as prescribed in By-law No. 1.
- ◆ Minutes will be recorded by the Executive Assistant to the Medical Officer of Health/CEO or designate.

South East Health Unit

formerly



Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Suzette Taggart, MBA, Director, Corporate Services and John Wickson, CPA, CMA, FMVA, PCP, Manager, Finance
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and CEO
Date:	Wednesday, January 22, 2025
Subject:	2025 Budget Planning Assumptions
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input checked="" type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	THAT the Board of Health receive the information contained herein as circulated.
Background:	<p>A summary of the draft 2025 cost-shared budget assumptions for the South East Health Unit (SEHU) have been compiled for the Board's review.</p> <p>The overarching 2025 cost shared budget assumptions are:</p> <ul style="list-style-type: none"> ◆ A 1.00% increase from 2024 in base funding from the Ministry of Health. ◆ The municipal contribution will increase from 2024 to 6.00% for Hastings Prince Edward (HPE), 1.00% for Kingston, Frontenac and Lennox & Addington (KFL&A), and 5.00% for Leeds, Grenville and Lanark (LGL) municipalities. ◆ Employee salaries will increase as per their legacy health unit's collective agreements. ◆ Other operating expenses will increase by 5.00%. ◆ The Medical Officer of Health (MOH), Deputy MOHs, and Associate MOH (AMOH) base salaries will be aligned with the average base salary as per the MOH/AMOH Compensation Initiative, allowing SEHU to access additional salary top-up support through this initiative. <p>As part of the Strengthening Public Health Initiative, the Ministry of Health is committed to providing merger funding over the next three fiscal years, April to March (2024-25, 2025-26 and 2026-27), to support voluntary merger implementation, transition, stabilization and business continuity costs. The funding and expenses related to this initiative will be tracked separately from the</p>

	<p>normal cost-shared budget. In year one, the merger support funding is approximately \$10.6 million.</p> <p>Some examples of how the merger funds will support the implementation and transition costs are temporary dedicated human resources, capital and building improvements, consulting services, wage harmonization, communication strategies, community engagement services, change management, professional development, information management, information technology infrastructure and the modernization of technology to enhance program and service delivery.</p> <p>More examples of how the merger funds will support business continuity and stabilization costs are staffing and process improvement initiatives to maintain the delivery of programs and services, support for municipalities as their contributions are harmonized, and investments to support strategies to address extraordinary costs for delivering public health programs (e.g., diseases of public health significance).</p> <p>Budgeting challenges continue as the increase to our provincial base funding fails to keep up with negotiated salary increases and the decline of our purchasing power when the costs of goods and services continue to increase (Consumer Price Index 2021-2023 range 3.4% to 6.8%). The most significant component of the 2025 cost-shared budget is salaries and benefits, representing approximately 80% of the budget. The pre-merger 2025 budget projection for the legacy health units indicated that two health units were in a deficit position, needing to utilize financial reserves. The merged 2025 budget projection indicates a healthier financial position for SEHU with no need to access financial reserves.</p> <p>During 2025, what will we do to stay financially healthy?</p> <ul style="list-style-type: none"> ◆ Work with the Ministry of Health to harmonize the provincial contributions across the three legacy health unit regions. ◆ Develop and work with the Board and applicable Committees on an equitable and sustainable municipal contribution and reserve framework. ◆ Provide multi-year forecasting to better understand the merged entity's future financial challenges. This will enable better decision-making to optimize capacity, stability, and sustainability to deliver public health programs and services in the South East region. ◆ A review of contractual service vendors and providers to find cost reductions by streamlining the operating needs of the three legacy health unit agencies.
<p>Recommendations</p>	<p>The Board of Health approve the 2025 cost-shared overarching budget assumptions as presented, with the understanding that the SEHU budget will be presented at the 2025 February Board of Health meeting.</p>

SOUTH EAST HEALTH UNIT BOARD OF HEALTH GOVERNANCE COMMITTEE TERMS OF REFERENCE

PURPOSE

The purpose of the Governance Committee is to assist the Board of Health in fulfilling its oversight responsibilities and support effective corporate governance in compliance with the Health Protection and Promotion Act and the Public Health Accountability Framework outlined in the [Ontario Public Health Standards: Requirements for Programs, Services, and Accountability](#) (OPHS).

The committee will also assist Board of Health in gaining reasonable assurance as to the effectiveness of its governance role, board, committee and members' effectiveness, and board renewal, nominations and elections.

RESPONSIBILITIES

Specific duties and responsibilities will include the following:

1. Review the Board policies, by-laws and Committee terms of reference every two years to ensure appropriate structures and procedures are in place and make recommendations to the Board for approval.
2. Monitor for compliance with all government-related statutory requirements, by-laws and policies. This includes but is not limited to the OPHS, the Public Health Funding and Accountability Agreement and other key funding contracts.
3. Make recommendations to the Board with regard to governance and nomination issues. Review the qualifications of potential candidates for the position of Board Chair and Vice-Chair and prepare a list of qualified candidates to be presented for election at the first Board meeting of the year.
4. Conduct a performance evaluation of the Medical Officer of Health/CEO at a minimum every two years.
5. Identify the appropriate composition, mix of skill sets, qualifications, expertise and diversity required by the Board and its Committees and prepare an inventory of Board member knowledge and skills related to Board functions.
6. Organize orientation, continuing education and training for Board members as necessary to enable the Board to fulfill its mandate effectively.
7. Conduct a Board self-evaluation and make recommendations for improvement on Board effectiveness and engagement every two years.
8. Ensure that a risk management program is in place and reviewed regularly.
9. Review and report to the Board on conflict of interest matters as necessary.
10. Recruit and recommend community members for consideration for appointment as provincial appointees to the Board.
11. Through working with the Medical Officer of Health/CEO or designate, obtain expertise and assistance from outside legal, governance or other advisors as required to assist in the execution of Committee responsibilities. Use of these outside legal, governance or other services, shall receive prior approval by the Board of Health.
12. Develop an annual Committee budget and submit it to the Medical Officer of Health or designate to be included in the overall Board of Health's budget.

STRUCTURE

- The Committee is a standing committee of the Board of Health.
- Committee members are selected during the first Board meeting of the year.
- At no time should the total membership of the Committee be more than a quorum of the total Board membership.
- A quorum of the Committee is required for recommendations to the Board.
- The Committee will meet in person or virtually.
- Changes to the membership of the Committee may be made at the discretion of the Board in order to accommodate changes in Board membership.
- Any Board member is welcome to attend a Governance Committee meeting as an observing, non-voting member.
- The Terms of Reference will be reviewed and/or revised every two years.
- All Governance Committee meetings will run in accordance with SEHU by-laws, Robert's Rules and the Municipal Act.

MEMBERSHIP

- Membership consists of up to six (6) Board members:
 - At least three (3) municipal appointees; and
 - At least one (1) provincial appointee.
 - The Board Chair will be an ex-officio member of the Committee
- The Medical Officer of Health/CEO or designate will be an ex-officio, non-voting member of the Committee.

TERM OF MEMBERSHIP

- Members will be expected to stand on the Committee for a two-year term with the provision that this term can be extended depending on interest from other Board members.

FREQUENCY OF MEETINGS

- The Committee will meet twice a year or as required. Notwithstanding the previous, a meeting of the Committee may be called by the Chair of the Committee, the Board Chair or the Medical Officer of Health/CEO.
- An annual schedule of meetings will be established and distributed to all members of the Board.

CHAIR, RECORD KEEPING AND COMMUNICATIONS

- One member of the Committee will be elected as the Chair at the first Committee meeting held at the beginning of the year. For consistency, Chairs are encouraged to serve a minimum period of two years.

- The Chair of the Committee has overall responsibility to conduct the proceedings of the Committee, encourage discussion of members and present summary reports to the Board.
- An agenda shall be drafted by the Medical Officer of Health/CEO in consultation with and approved by the Governance Committee Chair and/or the Board Chair.
- Recommendations made by the Committee will be presented at the next Board meeting by the Chair of the Committee for approval by the Board, as required.
- Meeting materials will be provided to the Committee in advance of each meeting as prescribed in By-law No. 1.
- Minutes will be recorded by the Executive Assistant to the Medical Officer of Health/CEO or designate.

January 22, 2025

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Listing of Information Items Board of Health Meeting – January 22, 2025

1. Haliburton, Kawartha, Pine Ridge District Health Unit – Letter to Minister Ha’ra Saks re Health Canada’s Order Amending Schedules 2 and 3 of the Tobacco and Vaping Products Act (Flavours) and Standards for Vaping Products’ Sensory Attributes Regulation dated December 5, 2024
2. Sudbury & Districts Public Health – Letter to Minister Jones re: Calling for the selection of Indigenous municipal and provincial appointees for Board of Health for Pubic Health Sudbury & Districts dated December 5, 2024
3. Sudbury & Districts Public Health – Letter to Minister Jones re: Calling for the selection of Indigenous municipal and provincial appointees for Board of Health for Pubic Health Sudbury & Districts dated December 5, 2024
4. Middlesex-London Health Unit – Report No. 82-24 – Monitoring food affordability and implications for public policy and action (2024) dated December 12, 2024
5. Middlesex-London Health Unit – Food insecurity infograph 2024
6. Media release – South East Health Unit dated January 2, 2025
7. Ministry of Health – Memorandum to Medical Officers of Health and Chief Executive Officers re: strengthening public health updates dated December 23, 2024
8. Public Health Ontario - January 2025 InfoBreak

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The above information items can be found on the South East Health Unit legacy health unit websites by going to their websites.