
South East Health Unit

formerly



BOARD OF HEALTH MEETING AGENDA PACKAGE

WEDNESDAY, FEBRUARY 26, 2025

at 10:30 a.m.

458 Laurier Boulevard, Brockville

Join Zoom Meeting

<https://us06web.zoom.us/j/89604078399?pwd=ga1ISbkhRVEKVCftpnVXF83ENyY8K.1>

Meeting ID: 896 0407 8399

Passcode: 964056

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**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, February 26, 2025 - Brockville

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. APPROVAL OF THE AGENDA

5. APPROVAL OF THE MINUTES OF PREVIOUS MEETING

[Schedule 5](#)

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

7. COMMITTEE REPORTS

7.1 **Finance Committee Update** – Councillor Koiner

7.1.1 Motion to Appoint Dr. Allin to Finance Committee

7.1.2 2025 Budget

[Schedule 7.1.2](#)

7.2 **Governance Committee Update** – Mayor Jones

8. NEW BUSINESS

8.1 Merger Progress Update – January 1 to February 19, 2025

[Schedule 8.1](#)

8.2 Board of Health Meeting schedule

[Schedule 8.2](#)

9. INFORMATION ITEMS (see website)

[Schedule 9.0](#)

10. ADJOURNMENT



BOARD OF HEALTH OPEN SESSION MINUTES

Wednesday, January 22, 2025

1:00 p.m. (Auditorium)

Minutes of the meeting of the South East Health Unit held at 221 Portsmouth Avenue, Kingston, ON, in-person and through MS Teams.

In attendance:

- In-Person: Stephen Bird, Councillor Conny Glenn, Councillor Judy Greenwood-Speers, Mayor Robin Jones, Councillor Sean Kelly, Councillor Anne-Marie Koiner, Councillor Peter McKenna, Councillor Jeff McLaren, Mayor Jan O'Neill, Dr. David Pattenden, Barbara Proctor, Councillor Bill Roberts, Warden Nathan Townend
- Virtual: Councillor Michael Kotsovos, Melanie Paradis, Chris Seeley
- Regrets: Dr. Jeffrey Allin, Reeve Richard Kidd
- Officers: Dr. Hugh Guan, Dr. Linna Li, Dr. Piotr Oglaza, Suzette Taggart, Dr. Ethan Toumishey
- Guest: Amy C. Dale (Partner, Harrison Pensa LLP)

1. CALL TO ORDER

Chair J. O'Neill called the meeting to order at 1:02 p.m.

2. TERRITORIAL ACKNOWLEDGEMENT

Spoken by Chair J. O'Neill.

3. ROLL CALL

Roll call was taken by Recorder, K. Thompson.

4. ADDRESS FROM THE CHAIR

The second meeting of the South East Health Unit (SEHU) opened with Chair J. O'Neill expressing gratitude for being elected and emphasizing the importance of teamwork for the success of the merger. The collective effort of the Medical Officer of Health, Deputy Medical Officers of Health, staff, and partners in providing programs and services to residents across the vast geographic area we represent was highlighted.

Meeting protocols, including Roberts Rules of Order and a code of conduct, were emphasized to maintain focus and respect. Chair J. O'Neill outlined the process for submitting agenda items and noted that the Governance Committee would oversee future board of health by-law development.

The Chair and MOH/CEO are SEHU's official spokespersons, with all interview requests directed to the Communications Team. Representatives should follow the prepared common message if approached for comments.

It was reported that Dr. P. Oglaza will establish a process of developing a framework of indicators to report to the board of health on progress of the merger as well as operations across the entire region.

Board members were encouraged to introduce themselves and state their goals for participating, with notes being recorded.

1. **Chair J. O'Neill** aims to reduce health inequities in rural areas through awareness and program evaluation, supported by a framework to track merger and regional operations progress.
2. **C. Seeley**, provincial representative from Napanee, emphasized improving population health outcomes and reducing health inequities.
3. **Councillor M. Kotsovos**, highlighted healthcare as a priority and emphasized collaboration in the newly formed board of health.
4. **M. Paradis**, a provincial representative from Belleville, focused on maternal and child health and advocating for healthcare access and resources for children in the region.
5. **Dr. D. Pattenden** emphasized his provincial advocacy role and alignment with government initiatives. He expressed his commitment to continue advocating on behalf of our Medical Officers of Health regarding public health matters.
6. **Councillor S. Kelly** seeks to strengthen public health's voice in municipalities and address issues like homelessness and food insecurity.
7. **Councillor B. Roberts**, stressed the need for services in Eastern Ontario through innovation and efficiencies, supporting the Chair's focus on health inequities.
8. **Councillor P. McKenna** outlined goals for SEHU integration, governance, and maximizing service delivery.
9. **Mayor R. Jones**, emphasized balance and unity on the board of health, addressing social justice issues like homelessness and other issues impacting our region, such as human trafficking.
10. **Warden N. Townend** focused on building partnerships, establishing effective governance, and ensuring long-term success post-merger.
11. **Councillor J. McLaren** prioritized SEHU integration, public trust, and keeping up with innovative technologies in public health.
12. **S. Bird**, a retired lawyer, highlighted his governance focus and interest in ensuring effective operations and service delivery.
13. **Councillor J. Greenwood-Speers**, Vice-Chair, emphasized being results-oriented, promoting transparency, and fostering broad collaboration.

14. **B. Proctor**, with four decades of healthcare experience, focused on addressing rural and urban healthcare needs, particularly for seniors.
15. **Councillor C. Glenn**, a registered Kinesiologist, emphasized the role of prevention in healthcare and the importance of governance for effective public health operations.
16. **Councillor A. Koiner**, former municipal Treasurer, emphasized addressing housing and homelessness and offered her finance experience to the Finance Committee.
17. **Dr. L. Li, Deputy Medical Officer of Health**, outlined her portfolios, which include mental health and substance use, environmental health, and community health. Dr. Li emphasized her passion for public health's role in promoting thriving communities by addressing upstream factors, going beyond just preventing disease.
18. **Dr. E. Toumishey, Deputy Medical Officer of Health**, highlighted his focus on infectious and communicable diseases, knowledge management, and early years programs. He expressed excitement about the formation of the new team and the ongoing developments at the SEHU.
19. **Dr. H. Guan, Associate Medical Officer of Health**, focus is on knowledge management, which involves research, development, and innovation in public health, such as artificial intelligence tools. He also works part-time in infectious disease, balancing dual roles in his professional work.
20. **Dr. P. Oglaza, Medical Officer of Health and CEO**, emphasized his vision for a resilient public health system, focusing on health equity, rural services, and addressing societal issues like homelessness through innovation and collaboration.

5. **APPROVAL TO AMEND THE AGENDA**

It was MOVED by Councillor C. Glenn and SECONDED by Warden N. Townend THAT the Board of Health approve moving the closed session to after Agenda Item #12 Information Items.

CARRIED

6. **APPROVAL OF THE AGENDA**

It was MOVED by Mayor R. Jones and SECONDED by Councillor B. Roberts THAT the Board of Health approve the agenda of Wednesday, January 22, 2025, as amended.

CARRIED

7. **APPROVAL OF PREVIOUS MEETING MINUTES**

It was MOVED by Councillor THAT the Board of Health approve the minutes for the meeting of the Board held on Wednesday, January 1, 2025, as circulated.

CARRIED

8. APPROVAL OF PREVIOUS MINUTES OF LEGACY AGENCIES

It was MOVED by Councillor P. McKenna and SECONDED by Warden N. Townend THAT the Board of Health approve the previous minutes of the legacy agencies and specifically, Hastings Prince Edward Public Health; Kingston, Frontenac, and Lennox and Addington Public Health; Leeds, Grenville and Lanark District Health Unit; and the South East Transition Team as circulated.

CARRIED

9. DISCLOSURE OF CONFLICT OF INTEREST

No conflicts were declared.

10. NEW BUSINESS**10.1 Proposed Board of Health Meeting Schedule**

It was MOVED by Mayor R. Jones and SECONDED by B. Proctor THAT the Board of Health approve the proposed meeting schedule of the Board, with an amendment to a start time of 10:30 a.m.

CARRIED

10.2 Finance Committee Draft Terms of Reference

The terms of reference for the Finance Committee were reviewed and discussed, with clarification provided.

It was MOVED by Mayor R. Jones and SECONDED by Warden N. Townend THAT the Board of Health approve the draft Terms of Reference of the Finance Committee as circulated.

(15 in favour / 2 in absence / 1 opposed / 0 abstention) CARRIED

10.3 Finance Committee Membership

The membership of the Finance Committee, in addition to the Board Chair as an ex-officio member, and the MOH/CEO or designate and Corporate Service Director or designate as ex-officio, non-voting members, was confirmed.

It was MOVED by Mayor R. Jones and SECONDED by Councillor B. Roberts THAT the Board of Health recognize Councillors J. Greenwood-Speers, A. Koiner, P. McKenna, and provincial appointee M. Paradis as the members who have shown interest in serving on the Committee as the Finance Committee.

CARRIED

10.4 Governance Committee Draft Terms of Reference

It was MOVED by Mayor R. Jones and SECONDED by Warden N. Townend THAT the Board of Health approve the draft Terms of Reference of the Governance Committee as circulated.

CARRIED

10.5 Governance Committee Membership

The membership of the Governance Committee, in addition to the Board Chair as an ex-officio member, and the MOH/CEO or designate and Corporate Service Director or designate as ex-officio, non-voting members, was confirmed.

It was MOVED by Mayor R. Jones and SECONDED by Warden N. Townend THAT the Board of Health recognize provincial appointees S. Bird and B. Proctor and municipal appointees Councillor J. Greenwood-Speers, Mayor R. Jones, and Warden N. Townend as the members who have shown interest in serving on the Committee as the Governance Committee.

CARRIED

10.6 Meeting Schedule for Finance and Governance Committees

It was confirmed that the first meeting of the Finance Committee, to review the draft budget, will be held at the Kingston Office and virtually on February 19, 2025, at 1:00 p.m. The Finance Committee members will follow up with the remaining dates of their 2025 meetings.

The Governance Committee members will follow up with the dates of their 2025 meetings.

10.7 2025 Budget Planning Assumptions

The SEHU 2025 cost-shared budget assumptions include a 1 percent increase in base funding from the Ministry of Health, varying municipal contributions, and a 5 percent rise in operating expenses. Employee salaries will follow collective agreements, and the Medical Officers of Health salaries will align with the minimum base salary requirements under the MOH/AMOH Compensation Initiative. The Ministry is providing \$10.6 million in merger funding for the first year to support transition and stability. Despite funding challenges, SEHU's budget projects a healthier financial position due to the merger. To ensure financial stability, SEHU will harmonize provincial contributions, develop a sustainable municipal framework, and implement multi-year forecasting. The budget will be approved by the Board of Health at a future meeting that meets the Ministry's deadline.

It was MOVED by Councillor S. Kelly and SECONDED by S. Bird THAT the Board of Health approve the 2025 budget planning assumptions as circulated to be used in finalizing the draft 2025 budget that will be brought to the Board in February.

CARRIED

11. **INFORMATION ITEMS**

Chair J. O'Neill brought to members' attention that the itemized information items can be found on the agency's website.

12. **CLOSED SESSION**

It was MOVED by Councillor S. Kelly and SECONDED by B. Proctor THAT the Board of Health convene in closed session at 3:40 p.m. for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act.

CARRIED

13. **RISING AND REPORTING OF CLOSED SESSION**

The Board of Health moved out of the closed session at 3:42 p.m. There were no reports.

14. **ADJOURNMENT**

It was MOVED by Mayor R. Jones and SECONDED by Councillor C. Glenn THAT this meeting of the Board of Health be adjourned at 3:43 p.m.

CARRIED

South East Health Unit

formerly



Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Suzette Taggart, Director of Corporate Services
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and Chief Executive Officer
Date:	Wednesday, February 26, 2025
Subject:	2025 Budget
Nature of Board Engagement	<input 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:	MOTION: THAT the Board of Health approve the 2025 Budget for the cost-shared and related budgets for the South East Health Unit as circulated.
Background:	<p>The draft 2025 cost-shared and 100% funded budget for South East Health Unit is attached for review and approval by the Board of Health.</p> <p>Budget development process:</p> <p>Budget preparation and approvals for cost-shared and 100% funded programs are commonly completed prior to the fiscal year, which begins January 1 of each year. For 2025, this process was delayed by the late approval by the Ministry of Health for the merger of Hastings Prince Edward Public Health (HPEPH), Kingston Frontenac and Lennox & Addington Public Health (KFLAPH), and Leeds Grenville and Lanark District Health Unit (LGLDHU).</p> <p>The South East Health Unit's 2025 draft budget has been prepared using the financial information that was compiled by each legacy agency in 2024; however, to address the agency's anticipated deficit and to comply with provincial requirements to provide a balanced budget, merger funds have been used for salary stabilization (i.e., a merger recovery of \$1,490,000).</p> <p>Background:</p> <p>The legacy agency's Boards of Health were made aware of the fiscal challenges facing HPEPH, KFLAPH and LGLDHU without the approved merger and related funding, which provided context for the Board's decision to proceed with the merger. By proceeding with the voluntary merger, funds are available to support</p>

business continuity and maintain the delivery of high quality programs and services as well as support the merger transition and stabilization costs, including temporary human resources, capital and building improvements, consulting services, wage harmonization, communication and engagement services, change management, professional development, information technology infrastructure and the modernization of technology and support for municipalities as their contributions are harmonized.

The funding formula for provincial contributions to local public health units is under review, but no details or timeline for release and implementation of this work is currently known. The provincial contribution for 2025 budget is limited to 1% base increase to the cost-shared budget which is considered inadequate when compared to the increased cost of operations, including but not limited to negotiated compensation increases.

Budget Summary:

South East Health Unit works with multiple funders: 61% of total revenue from the Ministry of Health, 24% of total revenue from partner municipalities, 9% of total revenue from the Ministry of Children, Community and Social Services and the remaining 6% of total revenue from other sources. Majority of the agency's expenditures are from the investment of employees at 80%, with the remaining 20% of expenditures resulting from physical offices and resources, information technology, telecommunications, travel, professional development, contracted professional services, and program materials.

Key Budget Highlights:

- The municipal contribution increased by 6.00% for HPE, 1.00% for KFLA, and 5.00% for LGL municipalities over 2024.
- Employee salaries increased as per their legacy's health unit's collective agreements (i.e., HPEPH and KFLAPH 2.5% and LGLDHU 3.5% January to March and 3.0% on April 1).
- Most operating expenses increased by 5.00%.

Some program areas continue to experience significant pressure related to the addition of work associated with provincial priorities, including:

- **Vaccine Preventable Diseases:** With the introduction of the respiratory syncytial virus (RSV) tracking, the agency has increased responsibilities for the management and distribution of vaccines for primary care as well as the administration to infants/children and support to long-term care/retirement homes.
- **Emergency Preparedness:** A new Emergency Management Guideline added additional requirements for local public health units to support emergency preparedness across multiple program areas and health hazards.
- **Substance Use Prevention and Harm Reduction:** Supporting public health programming to address fatal and nonfatal drug poisoning, and changes in the availability and access to harm reduction services, and mental health supports.

Most of the 2024-2025 merger funds will support our agency's building occupancy, including the payment of both HPEPH and KFLAPH mortgages

(\$8,558,000). The remaining funds are directed to support the seamless integration of the three legacy agencies including dedicated term staff and consultants to align and integrate corporate services and program teams' systems, practices, and processes to efficiently work together in the future.

Next steps and recommendations:

Given the addition of the merger funds, it is important that we take a strategic financial approach that addresses current public health needs and pressures, while supporting highly valued staff to sustain critical public health work, while avoiding undue hardship on local funders. Throughout 2025, we will continue to work closely with the Board of Health to accomplish the objectives of the voluntary merger (and to strengthen public health) as we focus attention on making financial decisions that build a strong foundation for the success of South East Health Unit.

- Implement a more consistent and thorough annual budgeting and program review method (e.g., Program Based Marginal Analysis (PBMA) or Zero-based) for allocating resources to balance our agency's budget, health outcomes, and services.
- Utilize forecasting tools to enable better decision-making to optimize planning, budgeting, and addressing the agency's future financial challenges.
- Develop strategic priorities to guide the agency when evaluating human resources and program and service delivery, proactively redirect resources to program and service areas where there are existing pressures.
- Conduct an extensive review of agreements and approaches to identify areas of overspending related to building occupancy, operations, and technology infrastructure, with a goal to improve and modernize systems, processes and programs in the most cost-effective way.
- Allocate year two merger funds to critical elements (e.g., community and client relationships, employee retention, technology and systems integration, communication and change management, cultural integration, facilities management, and dedicated integration staff and consultants) to be prepared to address the complexities and challenges that may arise in the first year following the merger.

SOUTH EAST HEALTH UNIT
Strengthening Public Health
April 2024/March 2025 Year One Merger Budget

	Minor Capital	Planning Grant Capital	Merger Activity	Total
REVENUES				
MINISTRY OF HEALTH				
Annual Grants and One-Time Grants	150,000	300,000	10,422,385	10,872,385
TOTAL REVENUES	150,000	300,000	10,422,385	10,872,385
EXPENSES				
1 Building Occupancy			8,558,000	8,558,000
2 Municipal Levy Harmonization			600,685	600,685
3 Salary/Wage Harmonization			15,000	15,000
4 Staff			956,700	956,700
5 Governance			27,000	27,000
6 Information Technology			150,000	150,000
7 Project/Change Management			15,000	15,000
8 Communications			20,000	20,000
9 Other - Travel and Accomodations			-	-
10 Other - Professional Services			80,000	80,000
11 Capital	150,000	-	-	150,000
TOTAL EXPENSES	150,000	-	10,422,385	10,572,385
SURPLUS/(DEFICIT)	-	300,000	-	300,000

Explanatory Notes - EXPENSES**1 Building Occupancy**

Includes payment of Brockville office mortgage for 12 months, payout of Kingston and Belleville office mortgages.

2 Municipal Levy Harmonization

Includes support for gradual harmonization process and minimize the financial burden on our local municipalities.

3 Salary/Wage Harmonization

Includes contracting with consultant to begin this work.

4 Staff

Includes backfill replacement of some positions and staffing for the merger office as well as addressing staff stabilization pressures.

5 Governance

Includes Board expenses related to planning and implementation of merger.

6 Information Technology

Includes reviewing existing systems and obtaining consult to determine direction, as well as updating security and aligning legacy LGLHU users to MS 365.

7 Project/Change Management

Includes training for leadership staff as well as planning first all staff event.

8 Communications

Includes contracting with consultant to work on new branding for SEHU.

9 Other - Travel and Accomodations

There are no defined expenses expected in this category.

10 Other - Professional Services

Includes consultants (e.g., project management) and legal (e.g., labour relations, corporate) guidance with Board related to implementation of merger.

11 Capital

Includes elevator repair at Brockville office, and investigation of renovatons at all sites.

SOUTH EAST HEALTH UNIT
2025 BUDGET - Explanatory Notes - REVENUES
For Board of Health Approval - February 26, 2025

	Budget 2025
1. MINISTRY OF HEALTH	
a) Mandatory Programs - Cost shared, HPE	\$ 10,721,100
b) Mandatory Programs - Cost shared, KFLA	12,831,100
c) Mandatory Programs - Cost shared, LGL	9,211,900
<i>The Ministry of Health (MoH) issues an accountability agreement each year outlining the terms of transfer payments to public health. For 2025, the MoH has committed to 1% growth funding. The following program areas are covered by cost shared funding:</i>	
Foundational Standards	
Population Health Assessment	
Health Equity	
Effective Public Health Practice	
Emergency Management	
Program Standards	
Chronic Disease Prevention and Well-Being	
Food Safety	
Healthy Environments	
Healthy Growth and Development	
Immunization	
Infectious and Communicable Diseases Prevention and Control	
Safe Water	
School Health	
Substance Use and Injury Prevention	
d) 100% Programs - Ontario Seniors Dental Care Program, HPE	1,448,000
e) 100% Programs - Ontario Seniors Dental Care Program, KFLA	1,021,700
f) 100% Programs - Ontario Seniors Dental Care Program, LGL	983,900
Total Ministry of Health Accountability Agreement	\$ 36,217,700
c) Annual Grants and One-Time Grants	
<i>The Compensation Grant is approved on an annual basis to offset the total compensation of the Medical Officer of Health. Funding will be requested for four PHI Practicum students to complete their studies; two at legacy HPE, one each at legacy LGL and legacy KFLA, over the summer of 2025. These are expected to be the only opportunities for one time funding in 2025.</i>	
MOH Compensation Grant	421,200
Public Health Inspector Practicum Students	60,000
Total Annual and one-time funding Ministry of Health Grants	\$ 481,200

2. MUNICIPAL LEVY

<i>City of Kingston</i>	4,467,000
<i>United Counties of Leeds & Grenville</i>	1,512,000
<i>Lanark County</i>	1,387,000
<i>City of Belleville</i>	1,307,567
<i>City of Quinte West</i>	1,105,488
<i>County of Lennox & Addington</i>	1,443,000
<i>Hastings County</i>	987,246
<i>Frontenac County</i>	864,000
<i>Prince Edward County</i>	610,297
<i>City of Brockville</i>	462,000
<i>Town of Smiths Falls</i>	193,000
<i>Town of Gananoque</i>	112,000
<i>Town of Prescott</i>	85,000

Total Municipal Levy	\$ 14,535,598
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3. MINISTRY OF CHILDREN, COMMUNITY & SOCIAL SERVICES

a) Healthy Babies Healthy Children HPE	1,239,578
b) Healthy Babies Healthy Children KFLA	1,288,483
c) Healthy Babies Healthy Children LGL	1,132,974
d) Preschool Speech & Language Program LGL	1,542,645

MCCSS funds the Healthy Babies Healthy Children (HBHC) program and the Preschool Speech and Language program; an increase was realized in 2024 and no increase is anticipated for 2025. These programs are based on a March 31 fiscal year end.

4. HEALTH CANADA

Health Canada funds the Children's Oral Health Initiative (COHI) at legacy HPE; no increase is anticipated for this contract. This program has a March 31 fiscal year end.

39,000

Legacy LGL is supporting Leeds Grenville Paramedic Service – Community Paramedic Program, as part of the United Counties of Leeds and Grenville is supporting the delivery of the Peer-Led Integrated Care Hub Outreach Service Program through Health Canada's Substance Use and Addictions Program (SUAP) Funding. They will act as a single point of access to the Peer-Led Integrated Care Hub Outreach Service Program for all clients in Brockville and area. This is the funding for November 2024 to March 2026.

1,280,216

5. PUBLIC HEALTH AGENCY OF CANADA

The Public Health Agency of Canada fund the Canada Prenatal Nutrition Program (CPNP) at legacy KFLA; no increase is anticipated for this contract. This program has a March 31 fiscal year end.

89,988

6. PUBLIC HEALTH ONTARIO SHARED LIBRARY SERVICES PROGRAM

The Shared Library Services Partnership (SLSP) provides Ontario public health units without an in-house library with access to up-to-date information and scientific resources. The SLSP is designed to support and strengthen relationships and promote knowledge exchange among public health units.

138,186

7. MCMASTER UNIVERSITY PARENT-CHILD RELATIONSHIP PROGRAM

The McMaster Parent-Child Relationship Program (PCRP) provides operational oversight to support the uptake and utilization of resources by HBHC and Nurse-Family Partnership programs across Ontario's 29 public health units.

96,342

8. EXPENDITURE RECOVERIES

Expenditure recoveries include vaccine recoveries, seniors dental recoveries, contraceptives, food safety training and interest earnings on transfer payments.

705,500

9. TRANSFER FROM MERGER FUNDS FOR SALARY STABILIZATION

Planned stabilization coverage for legacy LGL deficits.

1,490,000

TOTAL BUDGETED REVENUES

\$ 60,277,410

SOUTH EAST HEALTH UNIT
2025 BUDGET - Explanatory Notes - EXPENSES
For Board of Health Approval - February 26, 2025

This budget portrays the first year as a merged entity representing legacy health units; Hastings Prince Edward, Kingston, Frontenac, and Lennox & Addington and United Counties of Leeds and Grenville and the County of Lanark. Throughout 2025, we will be working towards functioning as one entity while determining a base budget for future years.

1. SALARIES & WAGES

This budget represents legacy staffing levels to maintain the high level of service our communities expect.

2. EMPLOYEE BENEFITS

Employee benefits are expected to increase at a significant rate due to utilization. In addition, increases to the Enhanced CPP program. Overall, benefits amount to 28 per cent of salaries. This category includes statutory benefits (CPP, EI, EHT and WSIB), OMERS pension plan contributions, group health, dental and life insurance and a per cent in lieu for part-time and contract staff.

3. STAFF TRAINING

It is anticipated that our compliance and discretionary training will continue to be available for all staff throughout the year.

4. TRAVEL EXPENSES

Travel expenses account for staff travel throughout the vast geographical boundaries of South East Health Unit, to deliver services including the inspection of food and water premises, immunization and dental clinics in the communities and healthy babies home visits.

5. BUILDING OCCUPANCY

Building occupancy expenses include the building loans, branch office leases, maintenance costs, cleaning services and supplies for all locations of the organization. Inflationary increases are forecast to all ongoing maintenance costs. Regular upkeep items have been factored for all locations.

6. OFFICE EXPENSES, PRINTING, POSTAGE

Office expenses have been combined from three legacy organizations to maintain past levels.

7. PROGRAM MATERIALS, SUPPLIES

Program materials and supplies budget are based on individual program plans and expectations for 2025.

8. PROFESSIONAL & PURCHASED SERVICES

The majority of budget for professional and purchased services reflects dental, denturist and lab fees in the Ontario Seniors Dental Care program. Additionally, the Substance Use and Addictions Program at legacy LGL covers support navigators, nurse practitioners and paramedicine staff.

9. COMMUNICATION COSTS

This reflects current expenses for telephone, cell phone, internet and fax lines.

10. INFORMATION TECHNOLOGY

This is to cover existing contracts and service agreements while merger efforts develop to combine all IT infrastructure into one entity. These increased expenses will be covered by separate merger funding.

11. CAPITAL EXPENDITURES

Contingency funds for unexpected capital repairs.

South East Health Unit

formerly



Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Susan Stewart, Director of Merger Office
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and Chief Executive Officer
Date:	Wednesday, February 26, 2025
Subject:	Merger Progress Report – January 1 to February 19, 2025
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	No action required.
Background and Current Status	<p>The Merger Office was created to guide, coordinate and support the integration of our new joined agency.</p> <p>Role of the Merger Office</p> <p>The Merger Office serves as the single point of accountability for managing the merger implementation. By providing project management to merger-related initiatives, the Merger Office will help with:</p> <ul style="list-style-type: none"> • Consistency: Ensuring a unified approach to planning, decision-making and reporting to reduce duplication and confusion. • Accountability: Centralizing oversight to align all activities, resources and decisions with the merger's objectives. The Merger Office is currently working on an accountability framework that will provide a consistent manner to report on progress to the Board of Health and the SEHU staff. • Support: Providing guidance, resources and expertise to staff navigating changes. • Transparency: Maintaining trust through regular updates and clear communication. <p>How will the Merger Office support merger projects?</p> <p>The Merger Office will lead functional teams, which are groups of staff with subject matter expertise for a given project, to execute merger-related tasks and harmonize policies, systems, and programs (e.g., human resources, information technology, communications, etc.). The Merger Office will also help staff address</p>

challenges related to the merger, offer support to merger-related work and seek feedback from staff to help make the transition as smooth as possible.

The Merger Office Team

The Merger Office has four team members representing the three legacy public health units.

- Sheryl Farrar – Sheryl was with HPEPH for 20 years with her last role being the Manager of the Healthy Schools Team.
- Susan Filion – Susan was with LGLDHU for six years with her last role being an Administrative Assistant for the Population Health Department.
- Katie Jackson – Katie was with LGLDHU for 17 years with her last role being Foundational Standards Manager.
- Susan Stewart – Susan was with KFL&APH for 20 years with her last role being the Director of the Community Health and Wellbeing Portfolio.

The Merger Office is not a physical location but a team. The above team members are working in their legacy agency locations.

Attached is a presentation on the South East Health Unit Merger Office. This was recently presented at the 2025 alPHa winter symposium. The presentation outlines the following:

- The role of the Merger Office;
- The strategic importance and value of the Merger Office;
- The functions of the Merger Office;
- How the Merger Office is structured within the South East Health Unit; and
- The Merger Office role in change management and communication.

Merger Progress

One of the centralized functions of the Merger Office is monitoring and reporting on key merger success indicators. The Merger Office is currently working on an accountability framework to report on merger progress and outcomes. As this is currently in development, attached is information on the progress of merger activities from January 1 to February 19, 2025.

SOUTH EAST HEALTH UNIT
Merger Activities January 1 to February 18, 2025

Domain	Project	Status	Notes
Governance	Board of Health established	Completed	Inaugural meeting on January 1 and regular meetings scheduled.
	Board of Health by-laws created	Completed	By-Law No. 1 - Conduct of the Affairs; By-Law No. 2 - Banking and Finance; and By-Law No. 3 - Management of the Property. Approved at January 1 Board of Health meeting.
	Board of Health policies	In progress	
	Committees established	Completed	Finance and Governance Committees created and approved at January 22 Board of Health meeting.
	Approve 2025 budget	In progress	Draft budget being brought to the Board of Health (BOH) on February 26, 2025
Finance	New accounting structure	Completed	All three legacy PHUs are using the same accounting structure in preparation for a single agency budget.
	Draft 2025 budget	Completed	Managers of finance have drafted a 2025 budget that reflects the SEHU. This is going to the BOH for approval.
Human resources	Executive level organizational design	Completed	The BOH approved the Medical Officer of Health (MOH), and Deputy MOH positions. The Chief Nursing Officer, Director of Corporate Services and the Acting Director of Corporate Services have been determined.
	Director level organizational design	Completed	The senior level structure has been determined and Directors have been assigned their portfolios. The Directors now make up the Operations Committee and meet regularly.
	Management level organizational design	In progress	Program directors are currently working to determine the number of managers in each portfolio and the role of each manager.
	Non-union compensation review	In progress	This is divided into three sections: 1. wages and salary grid harmonization and pay equity; 2. benefit harmonization; and 3. terms and conditions of employment. There is a separate process for unionized employees that follows the process outlined in the Public Sector Labour Relations Transition Act (PSLRTA).

Domain	Project	Status	Notes
	New letters of employment for non-unionized staff	Completed	Letters of employment were issued to all non-union employees for January 1, 2025.
Legal	Merger reported to Canada Revenue Agency	Completed	
	Main office for legal purposes established	Completed	221 Portsmouth Avenue, Kingston, ON
	Review of contracts	In progress	A law firm has been hired to review contracts and to identify the notification process required for all vendors/agencies with which each legacy PHU has a contract
IT	IT assessment is completed	Completed	An IT assessment has been completed that includes a number of recommendations. A priority project will be looking at getting all legacy agencies on the same IT system to enhance communication and coordination.
Branding and Marketing	Staff engagement on brand identity	In progress	The SEHU requires a new brand. The branding and marketing consultancy firm has held engagement sessions with key groups in SEHU including the Executive Committee, Operations Committee and the Communications team. There is currently a survey out for staff to collect their input on the brand identity for the SEHU. This will be used to create a new logo and tag line.
Change Management and Communications	Merger newsletter created	Completed	The Merger Office is establishing a regular newsletter to keep staff apprised of merger activities and progress. This newsletter will also be used to answer questions submitted by staff. The inaugural newsletter was launched on February 13, 2025.
	Process created for staff to ask questions about the merger	Completed	We have created a survey link that all staff can use to submit questions to the merger office.
	Creating centralized platform for merger news that all staff can access	In progress	We are establishing a single platform that all staff will be able to access for information about the merger. This will be a centralized repository for FAQs and other important merger information.
	Change management plan	In progress	The Merger Office is working to develop a comprehensive change management plan.

Domain	Project	Status	Notes
	Building a new culture	In progress	The Executive and Operations teams had a facilitated discussion on culture and values.
Merger Office	Team selected	Completed	Consists of staff from all three legacy agencies. There is a Director from legacy KFL&A Public Health, a Manager from HPE Public Health and a Manager from LGL District Health Unit. The Merger Office team works collectively to provide project management support to the merger projects.
	Mandate and structure determined and communicated to staff	Completed	The mandate and structure of the Merger Office has been approved by the Executive Committee and communicated out to staff in the Merger Office newsletter.
	Project management tools	Completed	Has access to a suite of project management tools that will allow all merger projects, their progress, decisions and risks to be documented and tracked.
	Road map	In progress	Creating a roadmap of the merger journey for staff and Board of Health members so that there is a shared understanding of how the merger will progress.
	Accountability framework	In progress	Developing a standardized accountability framework that can be used to keep the Board of Health and staff apprised of how the merger is progressing.

Legend

Completed
In progress -- on time
In progress -- small delay
In progress -- significant delay


South East Health Unit (SEHU) Merger Office

Dr. Ethan Toumishey MD MPH CCFP FRCPC,
Deputy Medical Officer of Health, SEHU

Susan Stewart, Director, Merger Office, SEHU

Feb. 14, 2025
2025 aPHa Winter Symposium

South East Health Unit



Role of SEHU Merger Office

Role of the SEHU Merger Office

- It acts as a central enabler and collaborates with leadership and functional teams (staff at all levels with subject matter expertise) to ensure alignment of merger activities and projects, and to ensure efficiency throughout the process.

Strategic Importance and Value

1. **Consistency:** Ensuring a unified approach to planning, decision-making, and reporting to reduce duplication and confusion.
2. **Accountability:** Centralizing oversight to align all activities, resources, and decisions with the merger's objectives.
3. **Support:** Providing guidance, resources, and expertise to staff navigating changes.
4. **Transparency:** Maintaining trust through regular updates and clear communication.

Single point of accountability for:

- **Activity Management:** Tracking all merger-related activities to ensure they are accounted for and progressing as planned.
- **Decision Facilitation:** Supporting leadership by gathering insights, escalating issues, and documenting decisions to guide the merger process.
- **Financial Oversight:** Monitoring the overall merger budget to ensure responsible and effective resource allocation.
- **Risk Management:** Identifying, addressing, and mitigating risks to keep the merger on track.
- **Communications:** Receiving and triaging communication requests, and, in collaboration with the communications teams, designing and delivering clear, consistent, and transparent messages across the organization.
- **Change Management:** Developing and maintaining a change management plan, with cross-functional inputs from the rest of the organization, to ensure the merger process fully supports the desired culture and cohesion of SEHU
- **Merger Outcomes:** Monitoring and reporting on key merger success indicators, with the support from different functions in collecting data, to ensure SEHU continues on the right trajectory to achieve the desired merger outcomes.



Function of SEHU Merger Office

South East Health Unit



Relationship of the SEHU Merger Office within the SEHU Structure

SEHU Merger Office Ecosystem

- **Executive Committee**

- A member of the Merger Office sits at the Executive Committee as an ex-officio member. This enables the Merger Office to share updates directly with the Executive Committee and bring information back to help with planning and coordination.

- **Operations Committee**

- A member of the Merger Office sits at the Operations Committee as an ex-officio member. This enables the Merger Office to share updates directly with the Operations Committee and bring information back to help with planning and coordination.

- **Functional Teams**

- Leading functional teams to execute merger-related tasks and harmonize policies, systems, and programs (e.g., human resources, information technology, communications, etc.)

- **Staff Members**

- Addressing challenges, offering support, communicating regularly, and supporting a smooth transition.



Communication and Change Management

Communication

- The SEHU Merger Office will be the central organizational structure to receive communication requests related to the merger.
- The SEHU Merger Office will triage requests and forward to the communications collaborative team for drafting and distribution.

Change Management

- The SEHU Merger Office will be setting up a Change Management Advisory Committee.
- The purpose of this group will be to provide the SEHU Merger Office with a real time reading of the temperature across the organization. They will also act as change champions across the organization.
- This committee will have representation from a variety of levels and functions from across the three legacy agencies.

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South East Health Unit

SOUTH EAST HEALTH UNIT

2025

Board of Health Meeting Schedule

Board meetings will be held on the **fourth Wednesday of each month** to commence at **10:30 a.m.** at the location shown below or as otherwise announced. 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.

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 **third Wednesday of each month** to commence at **1:00 p.m.** at the **Kingston office** as noted below or as otherwise announced.

February 19
September 17

April 16
October 15

June 18
November 19

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 **second Tuesday of the month** to commence at **1:00 p.m.** at the location shown below or as otherwise announced.

Date of Meeting - Kingston

April 8
July 8
October 7

Date of Meeting - Brockville

February 18
May 13
August 12
November 18

Date of Meeting - Belleville

March 25
June 10
September 9
December 9

As at February 19, 2025

South East Health Unit

formerly



Listing of Information Items Board of Health Meeting – February 26, 2025

1. Association of Local Public Health Agencies – Letter to Minister Bethlenfalvy re 2024 pre-budget submission: public health programs and services dated January 20, 2025
2. Simcoe Muskoka District Health Unit – Retirement announcement for Dr. Charles Gardner, Medical Officer of Health and CEO and media release dated January 15, 2025
3. Ministry of Health News Release – Ontario building safer communities with 18 additional homelessness and addiction recovery treatment hubs dated January 27, 2025 and HART Hubs call for proposals reference document
4. Sudbury & Districts Public Health – Letter to Christine Hogarth, MPP and Ministry of Health re Bill 231, 2024 An Act to enact or amend various acts related to health care dated January 28, 2025
5. South East Health Unit – Board of Health Briefing Note re Adult Dental Fund.
6. South East Health Unit – Letter from the United Way KFL&A re 2025 Emergency Assistance Fund allotment to the Dental Treatment Assistance Fund for the residents of KFL&A dated February 28, 2025.
7. Association of Public Health Agencies - February 2025 InfoBreak

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