



A meeting of the Board of Health for Oxford Elgin St. Thomas Health Unit was held on Thursday, November 28, 2024 commencing at 1:03 p.m.

PRESENT:

Ms. C. Agar	Board Member
Mr. J. Couckuyt*	Board Member
Mr. J. Herbert	Board Member
Mr. G. Jones	Board Member (Vice-Chair)
Ms. B. Martin	Board Member (Chair)
Mr. D. Mayberry	Board Member
Mr. S. Molnar*	Board Member
Mr. L. Rowden	Board Member
Mr. M. Peterson	Board Member
Mr. M. Ryan	Board Member
Mr. D. Warden	Board Member
Ms. C. St. John	Chief Executive Officer (ex officio)
Dr. J. Lock	Acting Medical Officer of Health (ex officio)
Ms. W. Lee	Executive Assistant

GUESTS:

Ms. K. Bastian	Manager, Strategic Initiatives
Ms. J. Gordon	Administrative Assistant
Mr. P. Heywood	Program Director
Ms. S. Maclsaac	Program Director
Mr. D. McDonald	Director, Corporate Services and Human Resources
Ms. M. Nusink	Director, Finance
Ms. C. Richards	Manager, Foundational Standards
Ms. N. Rowe*	Manager, Communications
Mr. Y. Santos	Manager, Information Technology
Mr. D. Smith	Program Director

MEDIA:

Mr. Joe Konecny*	Aylmer Express
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**represents virtual participation*

REGRETS:

Mr. J. Preston	Board Member
Mr. D. Shinedling	Board Member

**REMINDER OF DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF
WHEN ITEM ARISES**

1.1 CALL TO ORDER, RECOGNITION OF QUORUM

The meeting was called to order at 1:04 p.m.

1.2 AGENDA

Resolution # (2024-BOH-1128-1.2)

Moved by M. Ryan

Seconded by D. Warden

That the agenda for the Southwestern Public Health Board of Health meeting for November 28, 2024 be approved as amended.

Carried.

1.3 Reminder to disclose Pecuniary Interest and the General Nature Thereof when the Item Arises, including any related to a previous meeting that a member may not have been in attendance for.

1.4 Reminder that meetings are recorded for minute-taking purposes, and open session portions are publicly available for 30 days after being posted on Southwestern Public Health's website.

2.0 APPROVAL OF MINUTES

Resolution # (2024-BOH-1128-2.1)

Moved by J. Herbert

Seconded by M. Peterson

That the minutes for the Southwestern Public Health Board of Health meeting for October 24, 2024 be approved.

Carried.

3.0 CONSENT AGENDA

No items.

4.0 CORRESPONDENCE RECEIVED REQUIRING ACTION

No items.

AGENDA ITEMS FOR INFORMATION.DISCUSSION.DECISION

5.1 Acting Medical Officer of Health Report for November 28, 2024

Dr. J. Lock presented her report.

J. Herbert inquired about concerns regarding the spike in Covid-19 cases. Dr. Lock explained that while periodic spikes are expected post-pandemic, they remain concerning due to ongoing risks for vulnerable populations.

G. Jones asked whether the data collected on children's well-being included physical, mental, and social health. Dr. Lock noted that the effort involves a holistic approach, covering physical health, mental well-being, and social engagement indicators. She noted that while there are some surveys in place, they are not consistently conducted, thus requiring continued collaboration with educational councils to enhance data collection tools.

S. Molnar asked about differences in strategic priorities between regional engagement efforts. Dr. Lock attributed these to local needs assessments and specific health challenges identified in Elgin and Oxford.

Dr. Lock also provided an update on a local measles cluster linked to a wedding in New Brunswick. The health unit's rapid response helped contain the outbreak, supported by a rapid response from provincial and community partners. However, one community exposure has been reported thus far. Dr. Lock expects measles will remain an active concern and staff are responding and following up on case and contact management, and she noted SWPH does have high vaccination rates in the community as its first line of defense.

B. Martin asked for clarification on the immunization schedule for measles, mumps, and rubella (MMR vaccine). Dr. Lock advised that the MMR vaccine is given in two doses at one and four years of age, providing lifelong immunity. Adults born before 1970 likely have natural lifelong immunity from native infection, while those born after 1970 who received only one dose may not have lasting immunity. A second dose is recommended for individuals in higher-risk settings, such as healthcare workers. While a blood test for immunity exists, it is generally more practical to receive a second dose if there are concerns about immunity.

Resolution # (2024-BOH-1128-5.1)

Moved by G. Jones

Seconded by D. Mayberry

That the Board of Health for Southwestern Public Health accept the Acting Medical Officer of Health's report for November 28, 2024.

Carried.

5.2 Chief Executive Officer's Report

C. St. John reviewed her report.

J. Herbert asked for clarity on process for passing multiple motions noted in the report.

B. Martin responded the CEO would deliver the entire report first, after which questions would be entertained about the report up to the budget. Following this, the Board would go through each motion individually.

Resolution # (2024-BOH-1128-5.2-3.1)

Moved by D. Warden

Seconded by M. Peterson

That the Board of Health approve the third quarter financial statements for Southwestern Public Health as presented.

Carried.

Resolution # (2024-BOH-1128-5.2-3.2)

Moved by G. Jones

Seconded by J. Herbert

That the Board of Health approve the Board Chair signing the engagement letter and audit planning letter received from Graham Scott Enns as presented, in preparation for the upcoming 2024 financial audit.

Carried.

M. Ryan asked about population growth projections, which C. St. John confirmed were sourced from the Ministry of Finance. He further inquired whether the proposed 3.9% budget increase was reasonable, with M. Nusink noting that the Consumer Price Index (CPI) was 3.4%.

G. Jones sought clarification on the 17% increase in benefits. C. St. John explained that the rise was due to increased usage and the high cost of biologics in the pharmaceutical sector. D. McDonald added that SWPH had surveyed other health units, which reported similar increases ranging from 10% to 25%. D. Warden asked whether the benefits policy was reviewed for competitiveness. D. McDonald confirmed that the policy undergoes a market review every three years to ensure competitive rates.

L. Rowden asked when the ONA contract would be reviewed, with C. St. John confirming it expires December 31, 2024 and negotiations will commence early in 2025. He also expressed concern about rising costs. B. Martin interjected that detailed discussions on contracts would

require a closed session, and L. Rowden indicated he did not wish to move to closed to discuss further.

G. Jones asked how staff movement was tracked. C. St. John explained that this is managed through the annual service plan and tracked by the Finance Director.

D. Warden asked whether the proposed 3.9% budget increase included the full budget or specific program areas. C. St. John clarified that it referred to the overall budget. D. Warden then suggested considering using surplus funds to offset the increase.

S. Molnar asked if there had been a mid-year amendment to service levels. C. St. John clarified that such adjustments were made in 2023 and incorporated into the base budget per Board direction. S. Molnar noted due diligence was done and the programs are giving good value.

D. Mayberry discussed the burden of public health costs, noting that lower-income residents pay less in taxes but benefit significantly from health services. He asked whether reserves were included in the budget, with C. St. John responding that no, she did not include reserves in the budget presented, explaining that only the Board could allocate reserves to cover any budgetary pressures.

D. Mayberry asked whether any of the projected \$1 million surplus would need to be returned. M. Nusink confirmed that no, the \$1M surplus does not have to be returned to the Ministry of Health and that the Ministry of Health had agreed, in writing, that the surplus fully belonged to the Board of Health.

M. Ryan followed up, asking whether any asset management concerns might require surplus allocation. M. Nusink stated that no immediate needs were identified but noted that capital requests under \$1 million could be 100% funded by the Ministry if required.

B. Martin formally proposed the motion, with J. Herbert moving and S. Molnar seconding.

D. Warden requested a recorded vote.

D. Mayberry recommended allocating \$745,000 of the projected surplus to reserves, bringing the total to roughly \$1 million, and using the remaining funds to reduce the municipal levy.

D. Mayberry pointed out that given the new OPHS, new funding formula, 2% population growth, inflation, and new employee contracts, having \$1 million in reserve may not be enough.

M. Ryan expressed hesitation about voting without seeing specific figures in writing. C. St. John clarified that the final surplus figure would not be known until the 2024 year has been audited. The surplus figure would be shared with the Board by the auditors in April 2025. In the interim, M. Nusink provided a rough estimate of the 2024 surplus at the meeting, noting it is still draft.

A five minute break was taken to allow time to amend the motion on the table based upon the Board's discussion.

The amended motion was read aloud, specifying that "any 2024 surplus be carried forward to be applied to SWPH's reserve in 2025." The amendment to the budget motion was moved by D.

Mayberry and seconded by M. Peterson. M. Ryan asked for a breakdown of the percentage impact to the three obligated municipalities in light of the amended motion. M. Nusink shared the new number to the group and verbally summarized the change to the budget line related to the obligated municipalities.

Resolution # (2024-BOH-1128-5.2-3.3)

Moved by D. Mayberry
Seconded by M. Peterson

That the Board of Health amend the proposed resolution with the following statement:
...and to take its existing reserve in the amount of \$255,500 to offset the proposed municipal levy of the 2025 draft budget and that any 2024 surplus be carried forward to be applied to SWPH’s reserve in 2025.

Carried.

M. Ryan noted this was a reasonable budget, despite financial pressures such as the impact of inflation, the municipalities’ tax burden, and the limited provincial funding increase of 1%, and urged continued advocacy at all levels of government for better support. C. St. John clarified the municipal increase figure was 8.8% and a 3.9% increase overall, and acknowledged the Board’s steadfast commitment to local public health. D. Mayberry expressed concern about the budget’s adequacy given population growth but trusted staff’s thorough preparation.

Resolution # (2024-BOH-1128-5.2-3.4)

Moved by J. Herbert
Seconded by S. Molnar

That the Board of Health approve the 2025 Budgets for General Cost-Shared program, for 100% Provincially funded ongoing initiatives, and for 100% Provincially funded one-time initiatives as presented, and to take its existing reserve in the amount of \$255,500 to offset the proposed municipal levy of the 2025 draft budget and that any 2024 surplus be carried forward to be applied to SWPH’s reserve in 2025.

Carried.

Agar, Catherine	Yea
Couckuyt, Jack	Yea
Herbert, Jim	Yea
Jones, Grant	Yea
Martin, Bernia	Yea
Mayberry, David	Yea
Molnar, Stephen	Yea

Peterson, Mark	Yea
Rowden, Lee	Yea
Ryan, Marcus	Yea
Warden, David	Yea

B. Martin thanked the staff for their leadership in bringing forward the budget and the Board for balancing public health funding needs with being responsible to their communities.

Resolution # (2024-BOH-1128-5.2)

Moved by D. Mayberry

Seconded by M. Peterson

That the Board of Health accept the Chief Executive Officer's report for November 28, 2024.

Carried.

D. Warden left at 2:49 p.m.

S. Molnar noted his regrets at 2:50 p.m. and extended his holiday greetings to the group.

Quorum was maintained.

6.0 NEW BUSINESS

7.0 TO CLOSED SESSION

Resolution # (2024-BOH-1128-C7)

Moved by G. Jones

Seconded M. Peterson

That the Board of Health move to closed session in order to consider one or more the following as outlined in the Ontario Municipal Act:

- (a) the security of the property of the municipality or local board;
- (b) personal matters about an identifiable individual, including municipal or local board employees;
- (c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- (d) labour relations or employee negotiations;
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- (g) a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- (h) information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them;
- (i) a trade secret or scientific, technical, commercial, financial or labour relations information, supplied in confidence to the municipality or local board, which, if disclosed, could reasonably be expected to prejudice significantly the competitive position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization;

- (j) a trade secret or scientific, technical, commercial or financial information that belongs to the municipality or local board and has monetary value or potential monetary value; or
- (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. 2001, c. 25, s. 239 (2); 2017, c. 10, Sched. 1, s. 26.

Other Criteria:

- (a) a request under the *Municipal Freedom of Information and Protection of Privacy Act*, if the council, board, commission or other body is the head of an institution for the purposes of that Act; or
- (b) an ongoing investigation respecting the municipality, a local board or a municipally controlled corporation by the Ombudsman appointed under the *Ombudsman Act*, an Ombudsman referred to in subsection 223.13 (1) of this Act, or the investigator referred to in subsection 239.2 (1). 2014, c. 13, Sched. 9, s. 22.

Carried.

8.0 RISING AND REPORTING OF CLOSED SESSION

Resolution # (2024-BOH-1128-C8)

Moved by D. Mayberry

Seconded by J. Herbert

That the Board of Health rise with a report.

Carried.

Resolution # (2024-BOH-1128-C3.1)

Moved by J. Herbert

Seconded by M. Ryan

That the Board of Health for Southwestern Public Health accept the Chief Executive Officer's Report for November 28, 2024.

Carried.

9.0 FUTURE MEETING & EVENTS

10.0 ADJOURNMENT

M. Ryan thanked B. Martin for her leadership of the Board over the 2024 year.

The meeting adjourned at 3:03 p.m.

Resolution # (2024-BOH-1128-10)

Moved by G. Jones

Seconded by J. Herbert

That the meeting adjourns to meet again on Thursday, January 23, 2025, at 1:00 p.m. or earlier at the call of the Chair.

Carried.

Confirmed: Benia Faria