

**Board of Health for the
Peterborough Public Health
AGENDA
Governance Committee Meeting
Thursday, August 17, 2017 – 5:00 – 6:30 p.m.
Dr. J. K. Edwards Board Room, 3rd Floor
Jackson Square, 185 King Street, Peterborough**

1. Call to Order

Greg Connolley, Chair, Governance Committee

1.1. Opening Statement

We acknowledge that where we meet is the land and territory of the Anishnaabeg [Ah-nish-naw-beg] people, and that we gather with gratitude to our Mississauga neighbours. We say “meegwetch” to thank them and other Aboriginal peoples for taking care of this land from time immemorial and for sharing this land with those of us who are newcomers. Out of that gratitude, we are called to treat the land, its plants, animals, stories, and its Peoples with honour and respect. We are all Treaty people.

2. Confirmation of the Agenda

3. Declaration of Pecuniary Interest

4. Delegations and Presentations

5. Confirmation of the Minutes of the Previous Meeting

5.1. May 23, 2017

- Cover Report
- a. Minutes – May 23, 2017

6. Business Arising From the Minutes

7. Staff Reports

7.1. By-Laws, Policies and Procedures for Review

Dr. Rosana Salvaterra, Medical Officer of Health

- Cover Report

- a. 2-120 By Law #3 – Calling of and Proceedings at Meetings
- b. 2-140 By Law #5 - Powers, Duties and Term of Office of the Chairperson and Vice-Chairperson of the Board of Health
- c. 2-280 Complaints
- d. 2-342 Medical Officer of Health Selection

8. **Consent Items** (*NIL*)

9. **New Business**

9.1. **Board Member Self-Evaluation**

Dr. Rosana Salvaterra, Medical Officer of Health

- Cover Report
 - a. BOH Self Evaluation Form (Current)
 - b. BOH Self Evaluation Form (Proposed)

10. **In Camera to Discuss Confidential Matters** (*nil*)

11. **Motions for Open Session** (*nil*)

12. **Date, Time, and Place of the Next Meeting**

Wednesday, November 15, 2017 – 5:00 – 6:30 p.m.
Dr. J. K. Edwards Board Room, 3rd Floor
Peterborough Public Health
Jackson Square, 185 King Street, Peterborough

13. **Adjournment**

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To: BOH Governance Committee
From: Dr. Rosana Salvaterra, Medical Officer of Health
Subject: **Meeting Minutes – May 23, 2017**
Date: August 17, 2017

Proposed Recommendation:

That the minutes of the Governance Committee meeting held May 23, 2017 be approved as circulated and provided to the Board of Health at its next meeting for information.

Attachment:

[Attachment A – Governance Committee Meeting Minutes, May 23, 2017](#)

**Board of Health for the
Peterborough Public Health
DRAFT MINUTES
Governance Committee Meeting
Tuesday, May 23, 2017 – 5:00 p.m.
Dr. J. K. Edwards Board Room, 3rd Floor
Jackson Square, 185 King Street, Peterborough**

Present: Deputy Mayor John Fallis
Mr. Greg Connolley, Chair
Mayor Rick Woodcock

Regrets: Councillor Gary Baldwin

Staff: Dr. Rosana Salvaterra, Medical Officer of Health
Mr. Larry Stinson, Director of Operations
Alida Gorizzan, Executive Assistant (Recorder)

1. Call to Order

Mr. Connolley called the Governance Committee meeting to order at 5:01 p.m.

2. Confirmation of the Agenda

MOTION:

That the Agenda be accepted as circulated.

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-011-GV)

3. Declaration of Pecuniary Interest

4. Delegations and Presentations

5. Confirmation of the Minutes of the Previous Meeting

5.1. February 15, 2017

MOTION:

That the minutes of the Governance Meeting held February 15, 2017 be approved as circulated and provided to the Board of Health at its next meeting

for information.

Moved: Deputy Mayor Fallis
Seconded: Mayor Woodcock
Motion carried. (M-2017-012-GV)

6. Business Arising From the Minutes

6.1 Fundraising – Oral Update

Larry Stinson, Director of Operations

Larry Stinson provided an update on a request for proposals that would be issued shortly related to fundraising work, specifically around legacy donations. This arose from a request from the retired Board of Health Fundraising Committee to pursue establishing materials around legacy donations with the intent to contact previous donors and Board Members with this donation option.

7. Staff Reports

7.1. Staff Report: Strategic Planning

Dr. Rosana Salvaterra, Medical Officer of Health

MOTION:

That the Governance Committee of the Board of Health for Peterborough Public Health:

- *receive the staff report, Strategic Plan, for information; and,*
- *recommend to the Board of Health:*
 - *an extension to its current Strategic Plan to December 2019; and,*
 - *a proposed start date of September 2018 to commence planning for the next Strategic Plan.*

Moved: Mayor Woodcock
Seconded: Deputy Mayor Fallis
Motion carried. (M-2017-013-GV)

7.2. By-Laws, Policies and Procedures for Review

Dr. Rosana Salvaterra, Medical Officer of Health

MOTION:

That the Governance Committee recommend that the Board of Health for the Peterborough Public Health approve the following:

- 2-151, *Remuneration of BOH Volunteers, as revised.*

Moved: Mayor Woodcock
Seconded: Deputy Mayor Fallis
Motion carried. (M-2017-014-GV)

A revision was requested to policy 2-151 to note that the word 'provincial' should be added when referring to the Consumer Price Index.

MOTION:

That the Governance Committee recommend that the Board of Health for the Peterborough Public Health approve the following:

- 2-153, *Board Remuneration Review, as amended.*

Moved: Deputy Mayor Fallis
Seconded: Mayor Woodcock
Motion carried. (M-2017-015-GV)

MOTION:

That the Governance Committee recommend that the Board of Health for the Peterborough Public Health approve the following:

- 2-170, *By-Law Number 8, Building Code Act - Sewage Systems, as revised.*

Moved: Deputy Mayor Fallis
Seconded: Mayor Woodcock
Motion carried. (M-2017-016-GV)

MOTION:

That the Governance Committee recommend that the Board of Health for the Peterborough Public Health approve the following:

- 2-200 *Effective Governance By Effective Board Members, revised (formerly entitled Duties and Responsibilities of Board Members); and,*
- *retire 2-270, Conduct of Board Members.*

Moved: Deputy Mayor Fallis
Seconded: Mayor Woodcock
Motion carried. (M-2017-017-GV)

8. Consent Items

9. New Business

9.1. Board Chair Position Description

Dr. Rosana Salvaterra, Medical Officer of Health

Deferred. Staff were directed to check with other local public health agencies on Board Chair position descriptions.

9.2. **Board Member Self-Evaluation**

Dr. Rosana Salvaterra, Medical Officer of Health

Deferred.

9.3. **Accountability Framework and Organizational Requirements Consultation Document**

Dr. Rosana Salvaterra, Medical Officer of Health

MOTION:

That the Governance Committee receive the Accountability Framework and Organizational Requirements Consultation Document for information.

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-018-GV)

MOTION:

That the Governance Committee direct staff to:

- *provide feedback to the Ministry of Health and Long-Term Care on the Accountability Framework and Organizational Requirements Consultation Document prior to the June 9th deadline; and,*
- *specify in the response the issue of expanding reporting requirements as it relates to concerns regarding capacity, specifically for smaller local public health agencies.*

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-019-GV)

10. **In Camera to Discuss Confidential Matters**

MOTION:

That the Governance Committee go In Camera to discuss one item under Section 239(2)(d), Labour relations or employee negotiations, at 6:45 p.m.

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-020-GV)

MOTION:

That the Governance Committee rise from In Camera at 7:15 p.m.

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-021-GV)

11. Motions for Open Session

The Chair reported the following from the closed session:

- Governance Committee Minutes – Closed Session dated November 1, 2016 - acknowledged by the Committee.
- Negotiations – There was direction given to staff respecting negotiations.

12. Date, Time, and Place of the Next Meeting

Thursday, August 17, 2017 – 5:00 – 6:30 p.m.
Dr. J. K. Edwards Board Room, 3rd Floor
Peterborough Public Health
Jackson Square, 185 King Street, Peterborough

13. Adjournment

MOTION:

That the meeting be adjourned.

Moved: Deputy Mayor Fallis

Seconded: Mayor Woodcock

Motion carried. (M-2017-022-GV)

To: BOH Governance Committee

From: Dr. Rosana Salvaterra, Medical Officer of Health

Subject: By-Laws, Policies and Procedures for Review

Date: August 17, 2017

Proposed Recommendation:

That the Governance Committee recommend that the Board of Health for Peterborough Public Health approve the following:

- *2-120 By Law #3 – Calling of and Proceedings at Meetings (revised)*
- *2-140 By Law #5 - Powers, Duties and Term of Office of the Chairperson and Vice-Chairperson of the Board of Health (revised)*
- *2-280 Complaints (revised)*
- *2-342 Medical Officer of Health Selection (revised).*

Background:

Policies 2-280 and 2-342 have been brought forward as per the Committee’s 2017 work plan.

By-Law #3 has been amended given the [Modernizing Ontario’s Municipal Legislation Act, 2017](#), which came into force on May 30, 2017. The Act allows for electronic participation at Board of Health meetings. Clarification was requested at the Boards of Health Section meeting at the Association of Local Public Health Agencies (aLPHa) Annual Conference in Chatham, Ontario (held in June) regarding the new legislation. aLPHa staff inquired with the Ministry of Municipal Affairs which confirmed that procedural by-laws now have the option to spell out:

- if electronic participation is permitted for open meetings;
- by what means will permitted electronic participation take place (e.g., webinar, teleconference); and,
- what an electronic participant has the right to do (e.g., just listen, actively participate in discussion, make motions, and/or vote on matters put before the Board).

Lastly, at the May 23rd meeting, the Committee requested that staff inquire with other local public health agencies whether any had Board Chair position descriptions to share. By Law #4 has been amended with proposed changes upon review of the various documents that were received.

Attachments

[Attachment A – 2-120 By Law 3 – Calling of and Proceedings at Meetings](#)

[Attachment B – 2-140 By Law 5 - Powers, Duties and Term of Office of the Chairperson and Vice-Chairperson of the Board of Health](#)

Attachment C – 2-280 Complaints

Attachment D – 2-342 Medical Officer of Health Selection

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-120	Title: By-Law Number 3, Calling of and Proceedings at Meetings
Approved by: Board of Health		Original Approved by Board of Health
Signature:		On (YYYY-MM-DD): 1989-10-11
Date (YYYY-MM-DD): 2015-12-09		Author:
Reference: Bill 68, Modernizing Ontario's Municipal Legislation Act, 2017		

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By-Law Number 3 Calling of and Proceedings at Meetings

Section 1 - Interpretation

In this By-law:

- 1.1. "Act" means the *Health Protection and Promotion Act*;
- 1.2. "Board" means the Board of Health for ~~the Peterborough County City Health Unit~~ [Peterborough Public Health](#);
- 1.3. "Director, ~~Corporate Services of Operations~~" means the business administrator of the Board as defined in the Regulations under the Act;
- 1.4. "Chairperson" means the presiding officer at a meeting;
- 1.5. "Chairperson of the Board" means the Chairperson elected under the Act;
- 1.6. "Committee" means an assembly of ~~two or more~~ members, [appointed by the Board of Health](#), that must meet together to transact business [on behalf of the Board](#);
- 1.7. "Councils" means the municipal Councils of the Corporations of the County of Peterborough and the City of Peterborough, and the Councils of Curve Lake and Hiawatha First Nations;
- 1.8. "Medical Officer of Health" means the Medical Officer of Health of the Board as defined under the *Act* and *Regulations*;

- 1.9. "Meeting" means an official gathering of members of the Board or a committee to transact business;
- 1.10. "Member" means a person who is appointed to the Board by a Council or the Lieutenant Governor-in-Council or a person who is appointed to a committee by the Board;
- 1.11. "Motion" means a formal proposal by a member in a meeting that the Board or a committee take certain action;
- 1.12. "Resolution" means a motion that is carried at a meeting by a majority vote in the affirmative of the members present; and
- 1.13. "Vice-Chairperson of the Board" means the Vice-Chairperson elected under the Act.

Section 2 – General

- 2.1. The rules in this By-law shall be observed in the calling of and the proceedings at all meetings of the Board and committees.
- 2.2. Except as herein provided, the most recent edition of Robert's Rules of Order shall be followed for governing the calling of and proceedings of meetings of the Board and committees.

2.3. No persons shall consume alcohol or tobacco products at a meeting.

2.4. Electronic participation in public meetings may be approved by the Board of Health Chair in special circumstances. Participation in closed session is not permitted.

2.5. A member who participates in a meeting through electronic means is deemed to be present at the meeting with full participation rights and full voting rights, however they shall not be counted in determining whether or not a quorum of members is present at any point in time.

2.3-2.6. The electronic means must enable the member to hear and to be heard by the other meeting participants. Acceptable formats include teleconference, videoconference or webinar, whichever is reasonably available. Normal board of health meeting rules and procedures will apply with necessary modifications arising from electronic participation.

Section 3 - Convening of Meetings

- 3.1 The Medical Officer of Health shall call the first meeting of each calendar year.
- 3.2 The first meeting shall be held after the municipal members, appointed to the Board by their respective councils, are confirmed, and shall be held no later than the 1st day of February.
- 3.3 At the first meeting of each calendar year, the Board shall:
 - 3.3.1 elect the Chairperson and the Vice-Chairperson of the Board for the year;

- 3.3.2 appoint members to its committees;
 - 3.3.3 fix, by resolution, the date and time of regular meetings; and,
 - 3.3.4 establish the honourarium paid to each member eligible for compensation in accordance with the Health Protection and Promotion Act.
- 3.4 A meeting may be rescheduled or cancelled due to the following circumstances:
- 3.4.1 in the event that an emergency has been declared by the Medical Officer of Health;
 - 3.4.2 if there is indication from members in advance of the meeting that quorum will not be achievable; or
 - 3.4.3 if upon consultation with the Medical Officer of Health, the Chairperson determines there is insufficient business to be considered.
- In all instances, the Chairperson will poll members to obtain consensus to proceed with a cancellation. If approval is obtained through a majority vote, members will be notified and a public notice will be issued.
- 3.5 The Chairperson of the Board can call a special meeting and shall call a special meeting at the written request of a majority of the members.
- 3.6 The Medical Officer of Health shall:
- 3.6.1 give notice of the first and each regular and special meeting;
 - 3.6.2 ensure that the notice accompany the agenda and any other matter, so far as known, to be brought before such meeting;
 - 3.6.3 cause the notice to be delivered to the residence or place of business of each member or by e-mail or telephone so as to be received not later than two clear days in advance of the meeting.
- 3.7 The lack of receipt of the notice shall not affect the validity of the holding of the meeting or any action taken thereat.
- 3.8 No business other than that stated in the notice of a special meeting shall be considered at such meeting except with the unanimous consent of the members present.

Section 4 - Agenda and Order of Business

- 4.1 The Medical Officer of Health shall have prepared for the use of each member at the first and regular meetings an agenda of the following items.
- 4.1.1 Call To Order
 - 4.1.2 Confirmation of the Agenda

- 4.1.3 Declaration of Pecuniary Interest
- 4.1.4 Delegations and Presentations
- 4.1.5 Confirmation of the Minutes of the Previous Meeting
- 4.1.6 Business Arising from the Minutes
- 4.1.7 Staff Reports
- 4.1.8 Consent Items
- 4.1.9 New Business
- 4.1.10 In Camera to Discuss Confidential Matters
- 4.1.11 Motions from In Camera for Open Session
- 4.1.12 Date, Time and Place of the Next Meeting
- 4.1.13 Adjournment
- 4.2 Any items not included on the prepared agenda may be added by resolution.
- 4.3 Agenda packages will be posted on the [Health Unit's Peterborough Public Health](#) website on the same day that agendas are distributed to Board of Health members.
- 4.4 On the day following Board of Health meetings, Board members will be contacted and advised of the date, time, and location of the next meeting, and asked about their availability for the next meeting.
- 4.5 The business of each regular meeting shall be taken up in the order described in section 4.1 of this By-law unless otherwise decided by the members.
- 4.6 Consent Items are items to be considered for the Consent portion (4.1.8) of the agenda and shall be determined by the Medical Officer of Health. Matters selected for Consent Items are to be routine, housekeeping, information or non-controversial in nature.
 - 4.6.1 If the Board wishes to comment or seek clarification on a specific matter noted in the list of Consent Items, the member is asked to identify the item and clarification or comment will be provided or made. An item(s) requiring more than clarification or comment will be extracted and moved to the New Business section of the agenda. The Consent Items, exclusive of extracted items where applicable, can be approved in one resolution.
 - 4.6.2 Matters listed under Consent Items shall include an explanatory note as follows:
"All matters listed under Consent Items are considered to be routine, housekeeping, information or non-controversial in nature and to facilitate the Board of Health's consideration can be approved by one motion".
 - 4.6.3 Consent Items will include:

- Staff Reports and Presentations – Information, Housekeeping and Non-Controversial.
- Correspondence – Direction and Information. A Correspondence Report will be prepared and included in the Consent Items section of the agenda. The report will be divided into two sections as follows, Correspondence for Direction and Correspondence for Information. Where possible each item of correspondence for direction will have a staff recommendation included.
- Committee Reports.

- 4.7 New Business items are those that have not been discussed by meeting attendees previously and that do not belong in staff or Committee reports.
- 4.8 The Chairperson of the Board shall direct the preparation of an agenda for a special meeting.
- 4.9 The business of each special meeting shall be taken up in the order as listed on the agenda of such meeting unless otherwise decided by the members.

Section 5 - Commencement of Meetings

- 5.1 As soon as there is a quorum after the time fixed for the meeting, the Chairperson or Vice-Chairperson of the Board or the person appointed to act in their place and stead, shall take the chair and call the members to order.
- 5.2 A quorum for any meeting of the Board or a committee shall be a majority of the appointed members.
- 5.3 If the Chairperson or Vice-Chairperson of the Board or the Chairperson of a committee does not attend a meeting by the time a quorum is present, the Medical Officer of Health shall call the members to order and a presiding officer shall be appointed to preside during the meeting or until the arrival of the person who ought to preside.
- 5.4 Upon any members directing the attention of the Chairperson to the fact that a quorum is not present, the Medical Officer of Health, at the request of the Chairperson, shall record the names of those members present and advise the chairperson if a quorum is or is not present. If there is no quorum within thirty minutes after the time fixed for the meeting, the Chairperson shall then adjourn until the day and time fixed for the next meeting.

Section 6 - Delegations and Debate

- 6.1 The Chairperson shall preside over the conduct of the meeting, including preserving good order and decorum, ruling on points of order and deciding all questions relating to the orderly proceedings of the meeting.

- 6.2 Any individual or group who wishes to make a presentation to the Board shall make a written request to the Chairperson of the Board up to a minimum of twenty-four hours before the start of the meeting.
- 6.3 The Chairperson of the Board (in consultation with the Medical Officer of Health) shall decide whether the delegation may make a presentation at a meeting and accordingly, shall inform the individual or group whether their request has been approved or denied.
- 6.4 The Chairperson shall give due consideration to the length of the agenda and the number of delegation requests received, and may limit the number of delegations to a maximum of five (5) per meeting.
- 6.5 All delegations appearing before the Board shall be permitted to speak only once on an item, unless new information is being brought forward, and/or unless permission is given by the Chairperson of the Board, in consultation with the Medical Officer of Health.
- 6.6 Delegations and presentations of general interest shall not exceed ten minutes except when answering questions posed by the Chairperson for clarification.
- 6.7 Unless otherwise directed by resolution, no action respecting a delegation will be taken until the Board has had an opportunity to discuss the delegation and to receive advice from the Medical Officer of Health.
- 6.8 The Board will be informed of all requests from delegations and the disposition of such requests and, upon review, the Board may reverse the decision of the Chairperson of the Board by resolution.
- 6.9 Every member shall address the Chairperson respectfully previous to speaking to any motion.
- 6.10 When two or more members ask to speak, the Chairperson shall name the member who, in their opinion, first asked to speak.
- 6.11 If the Chairperson desires to leave the Chair to participate in a debate or otherwise, they shall call on the Vice-Chairperson to fill their place until they resume the Chair.
- 6.12 A member may speak more than once to a motion, but after speaking, shall be placed at the foot of the list of members wishing to speak.
- 6.13 No member shall speak to the same motion at any one time for longer than ten minutes except that extensions for speaking for up to five minutes for each time extended may be granted by resolution.
- 6.14 6.14.1 A member may ask a question of the previous speaker and then only to clarify any part of their remarks.
- 6.14.2 When it is a member's turn to speak, before speaking, they may ask questions of the Medical Officer of Health or staff present, to obtain

information relating to the matter in question and with the consent of the speaker, or other members may ask a question of the same persons.

6.14.3 All questions shall be stated concisely and shall not be used as a means of making statements or assertions.

6.14.4 Any question shall not be ironical, offensive, rhetorical, trivial, vague or meaningless or shall not contain epithet, innuendo, ridicule, or satire.

6.15 Any member who has the floor may require the motion under discussion to be read.

Section 7 - Decorum and Discipline

7.1 A member shall not:

7.1.1 speak disrespectfully of Her Majesty the Queen or any member of the Royal Family, the Governor-General, a Lieutenant Governor, the Board or any member thereof;

7.1.2 use offensive words or unparliamentary language;

7.1.3 disobey the rules of the Board or a decision of the Chairperson or the Board on questions of order, practice or an interpretation of the rules;

7.1.4 speak other than to the matter in debate;

7.1.5 leave their seat or make any disturbance when the Chairperson is putting a question and while a vote is being taken and until the result is declared; and

7.1.6 interrupt a member while speaking except to raise a point of order.

7.2 If a member commits an offense, the Chairperson shall interrupt and correct the member.

7.3 If an offense is serious or repeated, the Board may decide, by resolution, not to permit the member to resume speaking.

7.4 If a member ignores or disregards a decision of the Chairperson or the Board, the Chairperson shall not recognize the member except to receive an apology by the member and until it has been accepted by the Board.

7.5 If a member persists in committing an offense, the Board may order, by resolution, the member to leave the meeting and not resume their seat until they have tendered an apology and it has been accepted by the Board.

Section 8 - Questions of Privilege and Points of Order

- 8.1 The Chairperson shall permit any member to raise a question relating to the rights and benefits of the Board or one or more of the members thereof and questions of privilege shall take precedence over all other motions except to adjourn and to recess.
- 8.2 When a member desires to assert that a rule has been violated, they shall ask leave of the Chairperson to raise a point of order with a concise explanation and then shall not speak until the Chairperson has decided on the point of order.
- 8.3 The decision of the Chairperson shall be final unless a member appeals immediately to the Board.
- 8.4 If the decision is appealed, the Board shall decide the question "Shall the decision of the chair be sustained?" by majority vote without debate and its decision shall be final.
- 8.5 When the Chairperson calls a member to order, the member shall cease speaking immediately until the point of order is dealt with and they shall not speak again without the permission of the Chairperson unless to appeal the ruling of the Chairperson.

Section 9 - By-laws

- 9.1 No motion to pass a By-law shall be considered unless written notice has been received by the members in the manner set out in section 3.6 of this By-law.
- 9.2 A motion to pass a By-law shall be carried by a two-thirds vote in the affirmative of the members present at that meeting.
- 9.3 A By-law shall come in to force on the date of passing thereof unless otherwise specified by the Board.
- 9.4 No motion for the amendment or repeal of the By-laws, or any part thereof, shall be considered unless written notice has been received by the members in the manner set out in section 3.6 of this By-law.
- 9.5 A motion to amend or repeal the By-laws, or any part thereof, shall be carried by a two-thirds vote in the affirmative of the members present at the meeting at which the amendment or repeal is to be considered.

Section 10 - Motions

- 10.1 Every motion shall be verbal unless the Chairperson requests that the motion be submitted in writing.
- 10.2 Debate on a debatable motion shall not proceed unless it has been seconded.
- 10.3 Every motion shall be deemed to be in possession of the Board for debate after it has been presented by the Chairperson, but may, with permission of the members who moved and seconded a motion, be withdrawn at any time before amendment or decision.

10.4 A main motion before the Board shall receive disposition before another main motion can be received except a motion:

- 10.4.1 to adjourn;
- 10.4.2 to recess;
- 10.4.3 to raise a question of privilege;
- 10.4.4 to lay on the table;
- 10.4.5 to order the previous question (close debate);
- 10.4.6 to limit or extend limits of debate;
- 10.4.7 to postpone definitely (defer);
- 10.4.8 to commit or refer;
- 10.4.9 to postpone indefinitely (withdraw); or
- 10.4.10 to amend;

which have been listed in order of precedence.

10.5 When a motion that the vote be taken is presented, it shall be put to a vote without debate, and if carried by resolution, the motion and any amendments under debate shall be put forthwith without further debate.

10.6 A motion relating to a matter not within the jurisdiction of the Board shall not be in order.

10.7 A motion to adjourn a meeting or debate shall be in order, except:

- 10.7.1 when a member has the floor;
- 10.7.2 when it has been decided that the vote be now taken; or
- 10.7.3 during the taking of a vote;

and when rejected, shall not be moved again on the same item.

Section 11 - Voting

11.1 Only one primary amendment at a time can be presented to a main motion and only one secondary amendment can be presented to a primary amendment, but when the secondary amendment has been disposed of, another may be introduced, and when a primary amendment has been decided, another may be introduced.

11.2 A secondary amendment, if any, shall be voted on first, and, if no other secondary amendment is presented, the primary amendment shall be voted on next, and if no other primary amendment

is presented, or if any amendment has been carried, the main motion as amended shall be put to a vote.

- 11.3 A main motion may be divided by resolution and each division thereof shall be voted on separately.
- 11.4 After the Chairperson commences to take a vote, no member shall speak or present another motion until the vote has been taken on such motion.
- 11.5 Every member present at a meeting shall vote when a vote is taken unless prohibited by statute and if any member present refuses or fails to vote, he shall be deemed as voting in the negative.
- 11.6 Any member may require that a vote be recorded.
- 11.7 If a member disagrees with the declaration by the Chairperson of the result of any vote, the member may object immediately and require that the vote be retaken and recorded.
- 11.8 After any matter has been decided, any member may move for reconsideration of the matter at a subsequent meeting in the same year but no discussion of the question that has been decided shall be allowed until the motion for reconsideration has carried by two-thirds of the members, and no matter shall be reconsidered more than once in the same calendar year.

Section 12 - Committees

- 12.1 The Board may strike committees and appoint members to such committees to consider such matters as directed by the Board.
- 12.2 The Medical Officer of Health shall preside over the first meeting of each calendar year until a Chairperson and Vice-Chairperson of the committee are elected by its members.
- 12.3 The Chairperson of a committee shall:
 - 12.3.1 preside over all meetings of the committee;
 - 12.3.2 report on the deliberations and recommendations of the committee to the Board; and
 - 12.3.3 perform such other duties as may be determined from time to time by the Board or the committee.
- 12.4 The Chairperson of a committee may appoint non-Board members to the committee.
- 12.5 The number of non-Board members of a committee shall not exceed the number of Board members of the same committee at any time.
- 12.6 The number of Board members on a committee shall not be a majority of the members of the Board of Health.
- 12.7 It shall be the duty of a committee:

- 12.7.1 to report to the Board on all matters referred to it and to recommend such action as it deems necessary;
 - 12.7.2 to forward to an incoming committee for the following year any matters not disposed of; and
 - 12.7.3 to provide to the Board any information relating to the committee that is requested by the Board.
- 12.8 All committees shall be dissolved no later than immediately preceding the first meeting as set out in section 3 of this By-law.
- 12.9 The Board may dissolve, by resolution, any committee at any time.

Section 13 - Minutes

The Medical Officer of Health shall ensure that full and accurate minutes are kept of the proceedings of all meetings including a text of the By-laws and the resolutions passed by the Board.

Review/Revisions

- On (YYYY-MM-DD): 2015-09-09**
- On (YYYY-MM-DD): 2014-06-11**
- On (YYYY-MM-DD): 2013-12-11**
- On (YYYY-MM-DD): 2013-04-10**
- On (YYYY-MM-DD): 2010-10-13**
- On (YYYY-MM-DD): 2007-10-11**
- On (YYYY-MM-DD): 2005-01-12**
- On (YYYY-MM-DD): 2003-07-03**
- On (YYYY-MM-DD): 1998-10-28**
- On (YYYY-MM-DD): 1992-10-14**



Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-140	Title: By-Law Number 5 Powers, Duties and Term of Office of the Chairperson and Vice-Chairperson of the Board of Health
Approved by: Medical Officer of Health		Original Approved by Board of Health On (YYYY-MM-DD): 1989-10-25
Signature: _____		Author:
Date (YYYY-MM-DD): 2016-09-14		
Reference: Health Protection and Promotion Act, R.S.O. 1990, c. H.7, Section 48 to and including Section 51, and R.R.O. 1990, Regional 559		

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**By-Law Number 5
Powers, Duties and Term of Office of the
Chairperson and Vice-Chairperson of the Board of Health**

1. In this By-law:
 - 1.1. "Board" means the Board of Health for the Peterborough County-City Health Unit, also referred to as Peterborough Public Health;
 - 1.2. "Chairperson of the Board" means the Chairperson elected under the Act;
 - 1.3. "Vice-Chairperson of the Board" means the Vice-Chairperson elected under the Act;
 - 1.4. "Committee" means an assembly ~~of two or more~~ members, appointed by the Board of Health, that must meet together to transact business on behalf of the Board;
 - 1.5. "Council" means the municipal councils of the Corporations of the County of Peterborough and the City of Peterborough; and the Councils of Curve Lake First Nation and Hiawatha First Nation;
 - 1.6. "Member" means a person who is appointed to the Board by a council or the Lieutenant Governor in Council or a person who is appointed to a committee by the Board.

2. The officers of the Board shall be:

2.1. ● _____ the Chairperson of the Board; and

2.2. ● _____ the Vice-Chairperson of the Board.

3. The Chairperson of the Board ~~shall~~ is elected at the first meeting of the year and has the following responsibilities:

- Provide leadership to the Board of Health (BOH).
- Ensure the BOH meets its obligations and fulfills its governance role while respecting and understanding the role of management.
- Preside at all meetings of the BOH and ensure meetings are efficient and effective:
 - set agendas for Board meetings and ensure that matters dealt with at Board meetings adequately reflect the Board's role;
 - ensure that Board meetings are conducted in an orderly manner, according to applicable legislation and BOH By-Laws and Policies;
 - facilitate and move forward the business of the Board, ensuring that relevant information is made available to Board members in a timely manner;
 - encourage all Board members to actively and respectfully participate in discussions on agenda topics, providing for fair and appropriate debate on issues relevant to the agenda;
 - rule on procedural matters during Board meetings; and
 - facilitate the Board in reaching consensus.
- Ensure the effectiveness of standing Committees of the BOH:
 - The Chairperson serves as an ex-officio member on all BOH Committees to which he/she has not been appointed a member.
 - As an ex-officio member to all committees, the Chairperson retains the rights and privileges afforded to other committee members, such as the right to vote, however they are not counted when determining the number required for a quorum of the Committee.
- Represent the BOH as required at public or official functions and act as the official spokesperson of the BOH, or designate another Board member to do so.
- Oversee the Board's evaluation processes and provide constructive feedback to BOH members.
- Sign on behalf of the BOH, any class of or particular contract, arrangement, conveyance, mortgage, obligation or other document.
- Serve as a mentor to other Board of Health members and ensure that all Board of Health members contribute fully to the work of the Board.
- Act on non-attendance at Board of Health or Board Committee meetings.
- Ensure the effectiveness of the Medical Officer of Health:

- Serve as the Board of Health central point of official communication with the MOH and counsel the MOH regarding Board's expectations and concerns.
- Facilitate co-operative relationships and foster a collaborative work environment for BOH members and the MOH.
- Lead in monitoring and evaluating the performance of the MOH. A performance appraisal should be scheduled before the end of the MOH's probationary period, and then at least every two (2) years, preferably around the MOH's anniversary date.
- Meet with the MOH at the beginning and end of the Chair's term to review the annual work plan, which includes the setting of professional development goals.
- Approve vacation, conference and expense requests for the MOH.
- Other duties and powers as are from time to time determined by the BOH.

~~3.1. preside at all meetings of the Board;~~

~~3.2. represent the Board at public or official functions or designate the Vice-Chairperson or another Board member to do so;~~

~~3.3. be ex-officio, a member of all committees to which he/she has not been appointed a member; and~~

~~3.4. perform such other duties as may be determined from time to time by the Board.~~

~~As an ex-officio member to all committees, the Chairperson retains the rights and privileges afforded to other committee members, such as the right to vote, however they are not counted when determining the number required for a quorum of the Committee.~~

4. The Vice-Chairperson shall have all the powers and performs all the duties of the Chairperson of the Board in the absence or disability of the Chairperson of the Board together with such powers and duties, if any, as may be assigned from time to time by the Board.
5. The terms of all officers of the Board shall expire when their successors are elected and no later than immediately preceding the first meeting as set out in section 3 of By-law Number 3.

Review/Revisions:

On (YYYY-MM-DD): 2016-09-14

On (YYYY-MM-DD): 2015-12-09 (review)

On (YYYY-MM-DD): 2013-09-11

On (YYYY-MM-DD): 2010-10-13

On (YYYY-MM-DD): 2007-10-11

On (YYYY-MM-DD): 2006-03-06

On (YYYY-MM-DD): 2005-01-12

On (YYYY-MM-DD): 1998-10-28

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-280	Title: Complaints, Public
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 1997-02-12
Date (YYYY-MM-DD): 2015-09-09	Author: Medical Officer of Health	
Reference:		

NOTE: This is a **CONTROLLED** document for internal use only, any document appearing in a paper form should **ALWAYS** be checked against the online version prior to use.

POLICY**Objective**

All complaints received from members of the public, stakeholders, and partners will be addressed in a timely manner, in writing, and in accordance with Board of Health By-laws, policies, and procedures.

All complaints received by members of the Board of Health will be referred to the Medical Officer of Health for investigation and follow up.

PROCEDURE

1. The complainant will be requested to submit their complaint in writing. If assistance is required this will be provided by ~~Health Unit~~ Peterborough Public Health (PPH) staff. Submissions can also be ~~made through the Health Unit web site: <http://www.pcchu.ca/contact/contact-us/submit-a-complaint/>~~ sent via e-mail to info@peterboroughpublichealth.ca.
2. One copy of the complaint is forwarded to the applicable Director and another copy is forwarded to the Medical Officer of Health. The Director has fourteen days to investigate and prepare a response to the complaint. A copy of the Director's response to the complaint is forwarded to the Medical Officer of Health.
3. If the response is not satisfactory to the complainant he or she will be directed to the Medical Officer of Health for follow-up.
4. Board members will forward all complaints received from the public, stakeholders, and partners to the Medical Officer of Health.

5. The Medical Officer of Health will investigate the complaint and issue a report to the Board member within two weeks.
6. If the issue is not resolved to the satisfaction of the Board member, the issue will be brought to the attention of the Chairperson of the Board of Health.
7. The Chairperson of the Board of Health, in consultation with the board member who received the complaint and the Medical Officer of Health, will attempt to resolve the issue.
8. If the issue is not resolved, the Chairperson of the Board of Health will refer the matter to the Board of Health for a final decision. The parties involved would be invited to present their concerns to the Board of Health.
9. The Medical Officer of Health will produce an annual summary report of complaints for the Board of Health. This report will be provided ~~at the first meeting of the~~ to the Board no later than in the first quarter of the following year.

Review/Revisions

On (YYYY-MM-DD): 2009-02-11 (Board)

On (YYYY-MM-DD): 2015-09-09 (Board – procedure 2-281 incorporated)

On (YYYY-MM-DD):

On (YYYY-MM-DD):

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-342	Title: Medical Officer of Health Selection
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 2013-04-13
Date (YYYY-MM-DD): 2015-06-10		Author: Medical Officer of Health
Reference: Guide to Medical Officers of Health (MOH), Associate MOH and Acting MOH Appointments (Ministry of Health and Long-Term Care, May 2015) <i>attached</i>		

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POLICY:**Objective:**

To establish a formal system for the recruitment and selection a Medical Officer of Health.

Policy Statement:

The Peterborough ~~County-City Public~~ Health ~~Unit~~ recognizes the basic principles inherent in the Human Rights Code that illustrate the inherent dignity and worth of every person, and to provide for equal rights and opportunities without discrimination. All employment decisions will be based on the applicant's ability to do the job and not on factors that are unrelated to the job.

- 1.0 The hiring process for a Medical Officer of Health will be the responsibility of the Board of Health with assistance from the Director of ~~Corporate Services~~Operations (DO) and Human Resources ~~Advisor~~Manager.
- 2.0 The Board is responsible for assuring that the employee possesses all the qualifications, knowledge, skills, and abilities required to perform the duties of the position.
- 3.0 Qualifications for Boards of Health staff can be found in *Regulation 566, of the Health Protection and Promotion Act, R.R.O 1990.*
- 4.0 Selection of the successful candidate(s) will be responsibility of the Board of Health.

The Board of Health will be bound by the *Health Protection and Promotion Act, R.S.O. 1990*, with respect to the hiring of Board of Health staff as follows:

Medical Officer of Health

Section 62:

- 1.0 Every Board of Health,
 - a) shall appoint a full-time Medical Officer of Health; and
 - b) may appoint one or more Associate Medical Officers of Health of the Board of Health, R.S.O. 1990, c.H.U, s.62

Vacancy

- 2.0 If the position of Medical Officer of Health of a Board of Health becomes vacant, the Board of Health and the Minister, acting in concert, shall work expeditiously towards filling the position with a full-time Medical Officer of Health, 2002, c.32, s. 171.

Eligibility for Appointment

Section 64:

No person is eligible for appointment as a Medical Officer of Health or an Associate Medical Officer of Health unless,

- a) he or she is a physician;
- b) he or she possesses the qualifications and requirements prescribed by the regulations for the position, and
- c) the Minister approves the proposed appointment, R.S.O. 1990, c. H.7, s. 64.

Chief Medical Officer of Health May Act Where Risk to Health

Section 77.1:

- 3.0 For the purpose of section 77,1, subsection 1, the Chief Medical Officer of Health,
 - a) may exercise anywhere in Ontario
 - i. any of the powers of a Board of Health, including the power to appoint a Medical Officer of Health or Associate Medical Officer of Health (*acting*) and
 - ii. any of the powers of a Medical Officer of Health.

PROCEDURE

- 1.0 Posting of the position:
 - 1.1 When a vacancy arises, the Board will determine the nature and placement of advertisement (i.e., internal/external, local, out-of-town, professional journals/ newsletters, etc.).
 - 1.2 The ~~Director Corporate Services~~DO will draft the advertisement and send to the Board for approval.
 - 1.3 The ~~Director Corporate Services~~DO and Board to finalize dates for posting, closing, and reviewing applications.
- 2.0 Selection of Applicants:
 - 2.1 An interview committee will be established by the Board consisting of no fewer than 2 interviewers.
 - 2.2 The committee will screen applications.
 - 2.3 The ~~Director of Corporate Services~~DO will contact candidates to arrange interviews.
- 3.0 The interview process:
 - 3.1 The committee formulates questions and format of interviews.
 - 3.2 Interviews may include the following:
 - 3.2.1 Rating system
 - 3.2.2 Position specific testing
- 4.0 Interview follow-up and selection of successful applicant:
 - 4.1 References may be asked for at any time during the selection process.
 - 4.2 References will be checked by the ~~Director of Corporate Services~~DO.
 - 4.3 The ~~Director of Corporate Services~~DO will summarize candidate's scores from the rating sheet or testing (if applicable) and present to the committee.
 - 4.4 The committee will discuss and a decision will be reached and referred to the Board for ratification.
 - 4.5 The ~~Director of Corporate Services~~DO will be responsible for follow-up and offer of employment.
- 5.0 Expenses
 - 5.1 Expenses will be considered on a case-by-case basis and must be approved by the Board.

Review/Revisions

On (YYYY-MM-DD): 2015-06-10

On (YYYY-MM-DD): 2013-04-13

On (YYYY-MM-DD):

On (YYYY-MM-DD):

To: BOH Governance Committee
From: Dr. Rosana Salvaterra, Medical Officer of Health
Subject: Board Member Self-Evaluation
Date: August 17, 2017

Proposed Recommendation:

That the Governance Committee replace the current Board of Health Member Self-Evaluation Form with the updated version provided.

Attachments

[Attachment A – Individual Board Member Self-Evaluation Form \(current\)](#)
[Attachment B – Individual Board Member Self-Evaluation Form \(revised\)](#)

Individual Board Member Self-Evaluation Form

Part 1: Are you satisfied with your performance as a board member in the following areas?

(Check (X) spaces that apply below)

	<i>VERY GOOD</i>	<i>ADEQUATE</i>	<i>NEEDS WORK</i>
Input in policy development and decision-making			
Attendance			
Participation during meetings			
Preparation			
Knowledge of the organization's operations			
Knowledge of the community			
Understanding of role & responsibilities			
Other (please specify):			
Other (please specify):			
Other (please specify):			

Part 2: What factors contributed to your performance or lack of performance in the areas above:

(please be specific)

Part 3: Here's what I would need from the organization to maintain/increase my level of board commitment:

Part 4: Do you have any other comments or suggestions that will help the board increase its effectiveness?

Individual Board Member Self-Evaluation Form

Circle the response that best reflects your opinion. The rating scaled for each statement is:

(1) Strongly Disagree; (2) Disagree; (3) Agree; (4) Strongly Agree

As a Board of Health member:

I am aware of what is expected of me as a board member	1	2	3	4
I have a good record of meeting attendance	1	2	3	4
I participate fully in meeting discussions	1	2	3	4
I feel comfortable asking questions when I don't fully understand an issue presented to the BOH	1	2	3	4
I read the meeting package in advance of our board meeting	1	2	3	4
I maintain confidentiality of all board decisions and discussions when in-camera	1	2	3	4
I promote the work of our organization in the community whenever I have a chance to do so	1	2	3	4
I am aware of what is expected of me as a board member	1	2	3	4
I am satisfied with my overall performance as a Board of Health member	1	2	3	4

What strengths do I bring to the Board of Health?

What additional information/support do I need to be more effective as a Board of Health member?

How can the Board of Health's effectiveness or performance be improved in the next 12 months?

What other comments/suggestions would you like to offer related to the Board of Health's performance?

DRAFT