

**Board of Health for the
Peterborough County-City Health Unit
AGENDA
Governance Committee Meeting
Wednesday, September 3, 2014 – 2:00 – 4:00 p.m.
(Board Room, 10 Hospital Drive, Peterborough)**

1. **Call To Order**
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 22, 2014](#)
6. **Business Arising from the Minutes**
 - 6.1 Fundraising – Next Steps (Pellizzari)
7. **Correspondence**
8. **New Business**
 - 8.1 Resignation of Rosanna Haroutounian, Provincial Appointee (Pellizzari)
 - 8.2 Status of the alPHa Board of Health Toolkit (Pellizzari)
 - 8.3 [Staff Report: Board Travel Insurance \(Woodford\)](#)
 - 8.4 **Policies and Procedures for Review**
 - a. [2-110 By-Law Number 2, Banking and Finance](#)
 - b. [2-130 By-Law Number 4, Appointment of Auditor](#)
 - c. [2-160 By-Law Number 7, Execution of Documents](#)
 - d. [2-180 By-Law Number 9, Procurement of Goods and Services](#)
 - e. [2-200 Duties and Responsibilities of Board Members](#)
 - f. [2-270 Conduct of Board Members](#)
 - g. [Position Description, Medical Officer of Health](#)

9. **In Camera to Discuss Confidential Personal Matters**
10. **Motions from In Camera for Open Session**
11. **Date, Time and Place of Next Meeting**
12. **Adjournment**

Parked Items

- *Tracking Compliments (from BOH, Jan. 8/14)*

**Board of Health for the
Peterborough County-City Health Unit
MINUTES
Governance Committee Meeting
Thursday, May 22, 2014 – 1:30 – 3:30 p.m.
(City and County Rooms, 150 O’Carroll Avenue, Peterborough)**

Present: Mr. Jim Embrey, Chair
Dr. Rosana Pellizzari, Medical Officer of Health
Mayor Mary Smith
Ms. Alida Tanna, Administrative Assistant, Recorder
Mr. Scott McDonald
Mr. Brent Woodford, Director of Corporate Services

Regrets: Chief Phyllis Williams

1. Call To Order

The meeting was called to order at 1:35 p.m.

2. Confirmation of the Agenda

MOTION:

That the Agenda be approved as circulated.

Moved by: Mayor Smith

Seconded by: Mr. McDonald

Motion carried. (M-2014-08-GV)

3. Declaration of Pecuniary Interest

Nil.

4. Delegations and Presentations

None.

5. Confirmation of the Minutes of the Previous Meeting

5.1 March 26, 2014

MOTION:

That the minutes of the Governance Meeting held on March 26, 2014 be approved and provided to the Board of Health at its next meeting for information.

Moved by: Mr. McDonald
Seconded by: Mayor Smith
Motion carried. (M-2014-09-GV)

6. Business Arising from the Minutes

6.1 Fundraising – Next Steps

With respect to fundraising, Members felt that input from staff would be valuable to discern a focus for any fundraising initiative the Board may undertake. The Committee requested that a brainstorming session or round table exercise to explore options/next steps could be considered for the All Staff Day which is scheduled to take place in October 2014. They also recommended that out of that exercise, an ad-hoc group of select Board Members and interested staff could be struck to consult on this further. **ACTION: Dr. Pellizzari will take this back to the All Staff Day Planning Committee for consideration.**

Other items of note discussed:

- fundraising experience would be a desired skill set for any future Provincial Appointees; and
- the ad-hoc working group could look at the new facility and identify spaces which can be sponsored through corporate or individual donations.

MOTION:

That the Governance Committee recommend to the Board of Health at its next meeting to:

- *direct staff to prepare a donation package for Board of Health Members, to be distributed in October of each year, to encourage Members to donate annually to eligible Health Unit programs; and,*
- *call for volunteers from its Members to take part personal calls of appreciation, on a quarterly basis, to current donors to eligible Health Unit programs.*

Moved by: Mayor Smith
Seconded by: Mr. McDonald
Motion carried. (M-2014-10-GV)

6.2 Honourariums for City Councillors

Mr. Woodford provided clarification to the Committee on the honourariums paid to City Councillors. If a councillor is appointed to the Board as part of his/her municipal duties, then no additional honourarium is paid out. Should a councillor wish to sit on the Board on his/her own time, they would be compensated accordingly.

6.3 Electronic Participation at Meetings

a. Response from Sudbury

- b. Response from Porcupine
- c. Proposed Change to By-Law 3

Arising from a previous request, staff proposed changes to By-Law Number 3 to address electronic participation at meetings. Supporting documentation was provided in the form of procedures from Sudbury and Porcupine which included language allowing for electronic participation in special circumstances.

Further revisions were made by Members in the meeting.

MOTION:

That revised By-Law #3, Calling of and Proceedings at Meetings, be brought forward to the next Board of Health meeting for approval.

Moved by: Mr. McDonald
Seconded by: Mayor Smith
Motion carried. (M-2014-11-GV)

6.4 Staff Report: Board of Health Policy Revisions regarding Human Rights and Discrimination; Workplace Violence and Harassment (Woodford)

MOTION:

That the Governance Committee direct staff to:

- *revise policy 2-90, Human Rights and Discrimination;*
- *revise and combine policy 2-92, Workplace Harassment and policy 2-94, Workplace Violence and rename it 'Workplace Violence and Harassment Prevention'.*

Moved by: Mayor Smith
Seconded by: Mr. McDonald
Motion carried. (M-2014-12-GV)

7. Correspondence

None.

8. New Business

8.1 Staff Report: Signing Authorities

MOTION:

That the Governance Committee request the Board of Health approve the Director, Public Health Programs be appointed as a cheque signing officer for payment purposes.

Moved by: Mr. McDonald
Seconded by: Mayor Smith

Motion carried. (M-2014-13-GV)

8.2 Policies and Procedures for Review

a. Authority and Jurisdiction

The Committee noted no further changes or updates to the document.

b. Delegation of Authority

The Committee noted no further changes or updates to the document.

c. Delegation of Authority (Procedure)

MOTION:

That revised procedure 2-211, Delegation of Authority, be brought forward to the next Board of Health meeting for approval.

Moved by: Mayor Smith

Seconded by: Mr. McDonald

Motion carried. (M-2014-14-GV)

d. Staff Reports and Presentations to the Board of Health

Due to the administrative nature of the document, the Committee recommended that this should be an organizational procedure and reviewed by the Health Unit's Executive Committee as per standard practice.

8.3 Strategic Plan – Implementation Updates

Staff requested feedback from the Committee regarding the frequency of updates on the implementation of the Board's strategic plan. The Committee felt that an annual update would be sufficient. This was incorporated into procedure 2-211, Delegation of Authority (item 8.2.c).

9. In Camera to Discuss Confidential Personal Matters

MOTION:

That the Governance Committee go In Camera to review confidential personal matters.

Moved by: Mr. McDonald

Seconded by: Mayor Smith

Motion carried. (M-2014-15-GV)

MOTION:

That the Committee rise from In Camera.

Moved by: Mayor Smith

Seconded by: Mr. McDonald
Motion carried. (M-2014-16-GV)

Motions for Open Session

MOTION:

That the Governance Committee recommend to the Board of Health at its next meeting to:

- *advocate for the Ministry of Health and Long-Term Care to provide stable funding and advise Ontario public health units of the anticipated allocation on a rolling three-year basis; and,*
- *engage all Ontario Municipalities for support.*

Moved by: Mr. McDonald
Seconded by: Mayor Smith
Motion carried. (M-2014-17-GV)

10. Date, Time and Place of Next Meeting

Wednesday, September 3, 2014, 1:00 – 3:00 p.m., Board Room, 10 Hospital Drive, Peterborough.

11. Adjournment

Prior to adjournment, the Committee reviewed the status of the parked items. With respect to the tracking of compliments, follow up was noted. **ACTION: Mayor Smith will inquire about current practice through the Police Board. Dr. Pellizzari noted that the Executive Committee would also give this further thought.**

MOTION:

That the meeting be adjourned.

Moved by: Mayor Smith
Seconded by: Mr. McDonald
Motion carried. (M-2014-18-GV)

The meeting was adjourned at 2:40 p.m.

Parked Items

- *Tracking Compliments (from BOH, Jan. 8/14)*
- *Status of alPha toolkit for BOHs (Pellizzari, from March 26/14)*
- *Review Code of Conduct (request from Mayor Smith from March 26/14)*

Chair

Recorder

Staff Report

Board Travel Insurance

Date:	September 3, 2014	
To:	Governance Committee	
From:	Dr. Rosana Pellizzari, Medical Officer of Health	
<i>Original approved by</i>		<i>Original approved by</i>
Rosana Pellizzari, M.D.		Brent Woodford, Director, Corporate Services

Recommendations

That the Governance Committee:

- direct staff on the amount of travel insurance to carry on Board members;
- advise staff if Senior Management (Medical Officer of Health, Directors, Chief Nursing Officer) should be added under the Board's travel policy; and
- inform the Board of the recommendation.

Financial Implications and Impact

Board members are currently insured for \$100,000 travel/accident insurance. Additional quotes are being requested and staff would like Board direction on the amount of insurance to carry. The amount of coverage and number of staff covered will affect the premium.

Decision History

This is a new issue for Governance and the Board.

Background

Staff are obtaining quotes for property, liability and other insurances. One of the insurances carried by the Board is for Board travel and accident insurance.

Currently the Board insures 11 members for \$100,000 per member at a cost of \$407. Regardless of the insurer, the number of insured will have to increase to 12 to reflect the recent increase in Board membership.

An alternate insurer will provide coverage for Board members and is offering coverage for Senior Management (Medical Officer of Health, two Directors and the Chief Nursing Officer). Staff have been unable to confirm but believes this coverage is an option for the Board.

The travel accident insurance will cover the specified members when traveling on business. The plan will not cover staff traveling from home to work but will cover staff if they travel to locations other than their office for business purposes. Board members will be covered from home to the Health Unit or for any other travel undertaken by the member.

Please refer to attachment “A” for levels of coverage and costs. (The Board would be insuring the *Class I*)

Coverage for other salaried and hourly staff is not recommended as PCCHU provides other disability insurances.

Rationale

Governance has not reviewed Board travel insurance for over twenty years.

Strategic Direction

This recommendation addresses the Board’ strategic direction of quality and performance.

Contact:

Brent Woodford
Director Corporate Services
(705) 743-1000, ext. 2310
bwoodford@pcchu.ca

Attachments:

Attachment A – Travel Accident Insurance

TRAVEL ACCIDENT INSURANCE

Travel Accident Insurance is designed to protect our client's trustees, employees and volunteers who are exposed to the hazards of travel on behalf of the insured health organization.

AIG Insurance Company of Canada is the insurer for this policy and provides flexible coverage options that can be customized. All plans provide Accidental Death and Dismemberment coverage, the core benefit of this product. Coverage allows the health organization to designate and select coverage for specific classes including weekly accident indemnity benefits. These benefits are paid in addition to any other insurance – the insured health organization pays the premium and benefits are paid directly to the covered individual or his/her beneficiary.

The following provides a breakdown of the classes of coverage currently available on the policy:

Class I	Directors, Trustees, Senior and Professional Staff
Class II	All other Salaried and Hourly employees
Class III	Volunteers
Class IV	Hospital Personnel – Air Ambulance Transfer (Ontario)
Class V	Volunteer Ambulance Drivers/Attendants
Class VI	Ground Ambulance Drivers/Attendants (Manitoba)
Class VII	Air Ambulance (Manitoba)

Participating organizations may access any combination of classes for coverage - benefit options range from Principal Sum for accidental death and dismemberment from \$10,000 to \$500,000 or more, depending on the class of coverage selected. Weekly benefits and special features such as exposure and disappearance coverage are also included. For selected specific policy coverage, please refer to our Premium and Coverage Summary and Rates as follows:

TRAVEL ACCIDENT PREMIUM AND COVERAGE SUMMARY

DESCRIPTION OF POLICY COVERAGE	LIMIT OF LIABILITY	DEDUCTIBLE	ANNUAL PREMIUM
Principal Sum for Loss of Life	as required	Nil	is based on
Sample Limits	\$ 50,000		the number of
	\$100,000		people insured
	\$250,000		
	\$500,000		
Classes of Insured People			
Class I:	Board & selected staff (usually senior staff - Directors, Trustees, Senior & Professional Staff)		
Class II:	Other salaried employees and hourly employees		
Class III:	Volunteers		
Class IV:	Hospital Personnel – Air Ambulance Transfer		
Class V:	Volunteer Ambulance Drivers/Attendants		
Class VI:	Ground Ambulance Drivers/Attendants		
Class VII:	Air Ambulance (Manitoba)		

Optional Additions to Coverage	Benefit	Deductible	Annual Premium
Weekly Accident Indemnity			
Total Disability <i>payable if an insured person is totally and permanently disabled and unable to perform any work</i>	Payable as indicated on certificate	No deductible	Based on the number of people insured
<i>Payable for a maximum of 104 weeks</i>	<i>Amount payable can be increased/reduced at the organization's request – please refer to rate sheet</i>	No deductible	Based on the number of people insured
Weekly Accident Indemnity			
Partial Disability <i>(payable if an insured person is partially disabled and is expected to return to some form of work as defined in policy)</i>	Payable as indicated on certificate		
<i>Payable for a maximum of 52 weeks</i>	<i>Amount payable can be increased/reduced at the organization's request – please refer to rate sheet</i>	No deductible	As above
Policy Subject to an Aggregate Limit:	\$2,500,000 per accident		

There are no geographical restrictions; coverage is worldwide.

AIG INSURANCE COMPANY OF CANADA – TRAVEL ACCIDENT RATES			
<u>Principal Sum</u>	<u>Weekly Accident Indemnity</u>		<u>Cost/Insured</u>
	Total	Partial	
<i>CLASS I – Directors, Trustees, Senior & Professional Staff</i>			
\$ 50,000			\$ 4.00
\$100,000			\$ 8.00
\$200,000			\$15.00
\$250,000			\$18.00
\$300,000			\$21.00
\$ 50,000	\$300.	\$150.	\$10.00
\$100,000	\$300.	\$150.	\$13.00
\$100,000	\$500.	\$250.	\$25.00
\$150,000	\$300.	\$150.	\$17.50
\$150,000	\$500.	\$250.	\$28.00
\$200,000	\$300.	\$150.	\$19.00
\$200,000	\$500.	\$250.	\$30.00
\$250,000	\$150.	\$ 75.	\$20.00
\$250,000	\$300.	\$150.	\$21.00
\$250,000	\$500.	\$250.	\$32.00
\$300,000	\$300.	\$150.	\$25.00
\$300,000	\$500.	\$250.	\$34.00
\$500,000	\$300.	\$150.	\$36.00
\$500,000	\$500.	\$250.	\$45.00
<i>CLASS II – Salaried & Hourly Employees</i>			
\$300,000	\$500.	\$250.	\$21.00
\$300,000	\$300.	\$150.	\$15.00
\$300,000	N/A	N/A	\$10.00
\$250,000	\$250.	\$125.	\$10.00
\$250,000	\$500.	\$250.	\$19.00
\$100,000	\$250.	\$125.	\$ 8.00
\$100,000	\$500.	\$250.	\$13.00
\$200,000	\$500.	\$250.	\$17.00
\$200,000			\$ 6.00
\$150,000	\$500.	\$250.	\$15.00
\$150,000			\$ 4.50
\$100,000			\$ 3.00
\$ 75,000			\$ 2.50
\$ 50,000	\$300.	\$150.	\$ 2.00
<i>CLASS III - Volunteers</i>			
\$150,000			\$4.00
\$100,000			\$3.00
\$100,000	\$150.	\$75.	\$6.00
\$100,000	\$150.	\$125.	\$7.00
\$ 75,000			
\$ 50,000	\$150.	\$75.	\$3.00
\$ 50,000			\$2.00
\$ 20,000	\$150.	\$75.	\$2.50
\$ 10,000	\$150.	\$75.	\$2.00
<i>CLASS IV – Hospital Personnel – Air Ambulance Transfer (Ontario)</i>			
Refer to Class I Rates			

AIG INSURANCE COMPANY OF CANADA – TRAVEL ACCIDENT RATES (cont.)			
<u>Principal Sum</u>	<u>Weekly Accident Indemnity</u>		<u>Cost/Insured</u>
	<i>Total</i>	Partial	
<i>CLASS V – Volunteer Ambulance Drivers / Attendants</i>			
\$100,000	\$300.	\$150.	\$20.00
\$100,000	\$150.	\$75.	\$15.00
\$100,000			\$10.00
\$50,000	\$150.	\$75.	\$10.00
\$50,000			\$ 8.00
\$10,000			\$ 2.50
<i>CLASS VI – Ground Ambulance Drivers / Attendants (Ontario)</i>			
\$100,000	\$500.	\$250.	\$26.00
\$150,000	\$500.	\$250.	\$28.00
\$200,000	\$500.	\$250.	\$30.00
\$250,000	\$500.	\$250.	\$32.00
\$300,000	\$500.	\$250.	\$34.00
<i>MANITOBA CLASS VI – Ground Ambulance Drivers / Attendants</i>			
100,000	\$500.	\$250.	\$25.00
100,000			
50,000	\$500.	\$250.	\$16.00
<i>MANITOBA CLASS VII – Air Ambulance</i>			
TBA			

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-110	Title: By-Law Number 2 – Banking and Finance
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 1989-10-11
Date (YYYY-MM-DD): 2012-09-12		Author: Director, Corporate Services
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.

By-Law Number 2 Banking and Finance

1. In this By-law:
 - 1) "Act" means the Health Protection and Promotion Act;
 - 2) "Board" means the Board of Health for the Peterborough County-City Health Unit;
 - 3) "Chairperson of the Board" means the Chairperson elected under the Act;
 - 4) "Vice-Chairperson of the Board" means the Vice-Chairperson elected under the Act;
 - 5) "Medical Officer of Health" means the Medical Officer of Health of the Board as defined under the Act and Regulations; and
 - 6) "Director, Corporate Services" means the business administrator of the Board as defined in the Regulations under the Act.
2. The Board shall enter into an agreement with a recognized chartered bank or trust company which will provide the following services:
 - 1) a current account;
 - 2) the provision of cancelled cheques on a regular basis together with a statement showing all debits and credits;
 - 3) the payment of interest at a rate to be negotiated between the Board and the bank or trust company for all surplus funds held in each account;
 - 4) payroll services;
 - 5) the lending of money to the Board as required; and
 - 6) advice and other banking services as required.

3. Once every five years tenders shall be called by the Director, Corporate Services for banking services.
4. The Chairperson and Vice-Chairperson of the Board, the Medical Officer of Health, **Director, Public Health Programs** and the Director, Corporate Services shall be authorized:
 - 1) to sign cheques drawn on a current account; and
 - 2) to borrow money from a bank or trust company.

All cheques shall require two signatures and the Chairperson and Vice-Chairperson of the Board shall not sign the same cheque.

~~No person shall sign a cheque made payable to themselves.~~ **No person may approve a payment to themselves.**

5. The Medical Officer of Health, **Director, Public Health Programs** and Director, Corporate Services shall be authorized:
 - 1) to deposit with or negotiate or transfer to a bank or trust company (but only for the credit of the Board) any and all cheques, promissory notes, bills of exchange or orders for payment of monies;
 - 2) to receive all paid cheques and vouchers and to arrange, settle, balance and certify all books and accounts between the Board and the bank or trust company;
 - 3) to sign the form of settlement of balances and releases of the bank or trust company;
 - 4) to receive all monies and to give acquittance for the same; and
 - 5) to invest excess or surplus funds in interest-bearing accounts or short-term deposits.

This By-law shall be deemed to have come in to force on the 11th date of October, 1989.

Dated at the City of Peterborough the 25th date of October, 1989.

Review/Revisions

On (YYYY-MM-DD): 2010-07-07

On (YYYY-MM-DD): 2006-04-12

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: 2-130	Title: By-Law Number 4 – Appointment of an Auditor
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 1989-10-11
Date (YYYY-MM-DD): 2008-01-09		Author: Director, Corporate Services
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.

By-Law Number 4 A By-Law to Provide for the Appointment of an Auditor

1. In this By-law:
 - (1) "Board" means the Board of Health for the Peterborough County-City Health Unit; and
 - (2) "meeting" means an official gathering of the Board in one place to transact business.
2. In accordance with the Municipal Act, Section 296, Subsection (10), as the Board is a local board of more than one municipality, the auditor of the municipality which is responsible for the largest share of the operating costs of the local board is required to audit the local board.
3. The auditor shall:
 - (1) audit the accounts and transactions of the Board;
 - (2) perform such duties as are prescribed with respect to local boards under the Municipal Act and the Municipal Affairs Act;
 - (3) perform such other duties as may be prescribed by the Board that do not conflict with the duties as set out in subsection (2) of section 3 of this By-law;
 - (4) have a right of access at all reasonable hours to all books, records, documents, accounts and vouchers of the Board and is entitled to require from the Board such information and explanation as in his/her opinion may be necessary to carry out such duties as set out in subsections (2) and (3) of section 3 of this By-law; and
 - (5) be entitled to attend any meeting, to receive all notices relating to any such meeting and to be heard at any such meeting that he/she attends on any part of the business that concerns him/her as auditor.

This By-Law shall be deemed to have come in to force on the 11th day of October, 1989.

Dated at the City of Peterborough the 12th day of October, 1989.

Review/Revisions

On (YYYY-MM-DD): 2008-01-09

On (YYYY-MM-DD): 2006-04-12

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

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-160	Title: By-Law Number 7 – Execution of Documents
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 1989-10-11
Date (YYYY-MM-DD): 2012-09-12		Author: Director, Corporate Services
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.

By-Law Number 7 Execution of Documents

- In this By-law:
 - "Act" means the Health Protection and Promotion Act;
 - "Board" means the Board of Health for the Peterborough County-City Health Unit;
 - "Chairperson of the Board" means the Chairperson elected under the Act;
 - "Vice-Chairperson of the Board" means the Vice-Chairperson elected under the Act;
 - "Medical Officer of Health" means the Medical Officer of Health of the Board as defined under the Act and Regulations; and
 - "Director, Corporate Services" means the business administrator of the Board as defined in the Regulations under the Act.
- Except as otherwise directed by the Board, the Chairperson and Vice-Chairperson of the Board, the Medical Officer of Health, **Director, Public Health Programs** and the Director, Corporate Services shall be authorized to sign any class of or particular contract, arrangement, conveyance, mortgage, obligation or other document.
- Only one signature of the signing officers set out in section 2 of this By-law shall be required for a contract, arrangement, conveyance, mortgage, or other document with a pecuniary value of less than \$10,000. For a contract, arrangement, conveyance, mortgage, or other document with a pecuniary value of ~~\$10,000~~ **\$25,000** or more, two signatures of the signing officers set out in section 2 of this By-law shall be required. One signature will be the Chairperson of the Board of Health or in the absence of the Chairperson, the Vice-Chairperson of the Board of Health. The

second signature will be the Medical Officer of Health or in the absence of the Medical Officer of Health, the Director, Corporate Services.

4. The Medical Officer of Health and/or Director of Corporate Services are authorized to sign Provincial Accountability Agreements as required.

This By-law shall be deemed to have come in to force on the 11th day of October, 1989.

Review/Revisions

On (YYYY-MM-DD): 2010-10-28

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

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

On (YYYY-MM-DD):

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-180	Title: By-Law Number 9 – Procurement of Goods and Services
Approved by: Board of Health		Original Approved by Board of Health
Signature: _____		On (YYYY-MM-DD): 2007-10-10
Date (YYYY-MM-DD): 2012-12-12		Author: Director, Corporate Services
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.

By-Law Number 9

A By-Law to Provide for the Procurement of Goods and Services

1. In this By-law:
 - (1) "Act" means the Health Protection and Promotion Act.
 - (2) "Board" means the Board of Health for the Peterborough County-City Health Unit; and
 - (3) "Medical Officer of Health" means the Medical Officer of Health of the Board as defined under the Act and Regulations.
 - (4) "Director, Corporate Services" means the business administrator of the Board as defined in the Regulations under the Act.
2. The Board shall utilize fair, responsible, and efficient methods to secure the supplies, equipment, accommodation, and services needed to implement the Board's programs and services.
3. Board policies and procedures shall ensure that purchasing decisions are based on price, suitability, availability, impact of employee health and safety and the environment, and stability and integrity of, and previous experience with, the vendor.
4. The following procurement limitations shall apply.
 - (1) For items having an estimated cost of less than \$1,000.00 excluding taxes, competitive quotations will be obtained where feasible. In some circumstances, non-competitive pricing may occur to allow for the procurement of goods and services in an efficient and timely manner.

- (2) For items costing \$1,000.00 to \$24,999.00 excluding taxes, three written quotations will be obtained. The Director, Corporate Services or designate will determine the successful quotation in consultation with the requisitioner.
- (3) For items costing \$25,000.00 or more excluding taxes, competitive quotes will be called by the Director, Corporate Services. Submissions will be analyzed by the Director, Corporate Services or designate, for review by the Medical Officer of Health. Recommendations shall be presented to the Board for consideration and decision. Following the awarding of a tender, significant changes to prices or terms previously approved by the Board must be submitted to the Board for approval.

Calling for quotations and tendering may be waived in emergency and extraordinary circumstances approved by the Medical Officer of Health and the Chairperson of the Board.

The use of credit cards to purchase goods and services, and designation of cardholders, shall be approved by the Medical Officer of Health. Each credit card shall have a set limit as established by the Board from time to time. All purchases shall be within the established monthly limit. Credit cards shall only be used by the designated cardholder.

To ensure that the Board is receiving the best value and to encourage competition, the Board shall review during the annual budget approval process:

- audit and banking services in accordance with governing legislation and relevant Board By-laws;
- insurance services; and
- laboratory, legal services, telephone, and utilities.

This By-law shall be deemed to have come in to force on the 11th day of October, 2007.

Dated at the City of Peterborough the 10th day of October, 2007.

Review/Revisions

On (YYYY-MM-DD):

On (YYYY-MM-DD):

On (YYYY-MM-DD):

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-200	Title: Duties and Responsibilities of Board Members
Approved by: Board of Health		Original Approved by Board of Health On (YYYY-MM-DD): 1986-12-10 Author: Governance Committee
Signature: _____		
Date (YYYY-MM-DD): 2012-05-09		
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

The Board of Health is the governing body, the policy maker of the Health Unit. It monitors all operations within the Health Unit and is accountable to the citizens of Peterborough County and City, Curve Lake and Hiawatha First Nations, and to the Government of Ontario.

The duties of the Board of Health are carried out under the authority the [Health Protection and Promotion Act](#) and its Regulations. Board of Health members have the responsibility for delivery of local public health programs and services by:

- Ensuring that the structure of the board facilitates effective governance and respects partnerships with municipalities and First Nations.
- Operating in a manner that promotes an effective board, effective communication and transparency.
- Developing a shared vision for the organization, establishing the organization's strategic directions, and governing the organization to achieve their desired vision.
- Understanding their fiduciary roles and responsibilities, ensuring that their operations are based on the principles of transparency and accountability, and that board of health decisions reflect the best interests of the public's health.

- Ensuring that the board is responsive to the needs of the local communities and shows respect for the diversity of perspectives of its communities in the way it directs the administration of the health unit in planning, operating, evaluating and adapting its programs and services.
- Ensuring that the administration of the board of health uses a proactive, problem solving approach to establishing its operational directions, demonstrates its organizational priorities and objectives through its actions on program delivery, and functions in an efficient and effective manner.

Review/Revisions

On (YYYY-MM-DD):

On (YYYY-MM-DD):

On (YYYY-MM-DD):

On (YYYY-MM-DD):

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-270	Title: Conduct of Board Members
Approved by: Board of Health		Original Approved by Board of Health On (YYYY-MM-DD): 1995-05-10
Signature: _____		Author: Governance Committee
Date (YYYY-MM-DD): 2012-05-09		
Reference: 2-120, By-Law #3, Calling of and Proceedings at Meetings		

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POLICY

The Board of Health expects of itself and its members ethical and prudent conduct. This commitment includes proper use of authority and appropriate decorum in group and individual behaviour when acting as Board members.

1. Board members must endeavour to represent the interests of the Board of Health in carrying out its mission.
2. Board members' interaction with the Medical Officer of Health or with staff must recognize the lack of authority in any individual Board member or group of Board members.
3. Board members' interaction with the public, media, or other entities must recognize the limitation and inability of any Board member or Board members to speak for the Board.
4. Board members will make no judgements on the performance of the Medical Officer of Health or staff except as that performance is assessed against explicit board policies by the official process.
5. Board members shall maintain confidentiality concerning all information relating to the Board of Health/Peterborough County-City Health Unit which is considered private and privileged.
6. Board members are obligated to prepare for meetings and to participate productively in discussion, always within the boundaries of discipline established by the Board.

7. Board members are required to identify when they are in a conflict of interest and excuse themselves from discussion and decision making.

Review/Revisions

On (YYYY-MM-DD):

On (YYYY-MM-DD):

On (YYYY-MM-DD):

On (YYYY-MM-DD):

Peterborough County-City Health Unit

This document reflects the general details considered necessary to describe the principle functions and duties as required for proper evaluation of the classification and shall not be construed as a detailed description of all the work requirements that may be inherent in the classification.

Classification:	Medical Officer of Health
Approved by:	Board of Health October 12, 2011
Directly responsible to:	Board of Health
Supervises:	Directors
Provides functional direction and guidance to:	Administrative Assistant to the Medical Officer of Health Communications Supervisor

Main Purpose

The Medical Officer of Health, is the Chief Executive Officer of the Health Unit and reports to the Board of Health on issues relating to public health, the implementation and management of programs and services under the Health Protection and Promotion Act and any other applicable Act, organizational structure, and the business operations of the Health Unit.

Duties and Responsibilities

1. **Recommends to the Board of Health the Health Unit's structure. Health Unit structure to the Board of Health.**

~~Recommends an organizational structure that supports the effective and efficient delivery of programs and services, and the business operations of the Health Unit.~~

2. **Ensures a process is in place for the development and communication of the Health Unit's vision, mission, and values.**

~~Recommends to the Board of Health and participates in the process to develop and communicate the organization's vision, mission, and values.~~

3. Ensures the development, implementation, communication, review, and evaluation of a strategic plan.

~~Ensures that strategic planning is conducted on a regular basis and that a strategic plan is developed, implemented, communicated, reviewed, and evaluated.~~

4. Recommends appropriate and relevant Board of Health policies and positions.

~~Recommends policies that:~~

- ~~• are comprehensive;~~
- ~~• are in accordance with governing legislation; and~~
- ~~• provide a policy framework within which staff can define the health needs of the community and design programs and services to meet these needs.~~

5. Approves organizational policies and procedures.

~~Approves procedures that execute Board of Health policies, ensuring that these are:~~

- ~~• appropriate;~~
- ~~• effective; and~~
- ~~• efficient.~~

~~Ensures that all organizational policies are:~~

- ~~• appropriate;~~
- ~~• effective; and~~
- ~~• efficient.~~

6. Implements all mandatory and local public health programs as prescribed by the Health Protection and Promotion Act, the Ontario Public Health Standards and other programs or services as approved by the Board of Health.

~~Ensures that effective and efficient programs are developed, implemented, and evaluated.~~

~~Applies expertise to identify and address community health risk factors and service gaps.~~

~~Ensures that current relevant research methodologies are applied in determining the need for community health interventions and in evaluating their effectiveness.~~

~~Enforces within the limits provided by statutes all pertinent government regulations and by laws.~~

7. Provides leadership and co-ordinates response to public health emergencies.

~~Ensures that community public health hazards are anticipated and prevented where possible, and are promptly and adequately investigated and controlled should they develop.~~

~~Participates as a member of municipal Emergency Operations Control groups as required.~~

~~Ensures that an Emergency Response Plan for the Health Unit is developed, tested, communicated, reviewed, and implemented.~~

8. Identifies fiscal requirements and makes recommendations to the Board of Health.

~~Recommends to the Board of Health the funding required to meet the Health Unit's objectives, priorities, and legislated obligations.~~

~~Ensures the preparation of all annual program budgets and operational plans for Board of Health approval.~~

~~Ensures the implementation of financial systems and controls that are consistent with Ministry guidelines and Board By-laws and policies that are in keeping with generally accepted accounting practices.~~

~~Monitors expenditures. Recommends reallocation of resources as required.~~

9. Ensures appropriate, competent, adequate, and effective human resources.

~~Recommends to the Board of Health the number and type of staff required for the effective and efficient delivery of programs and services.~~

~~Approves the position description for each Health Unit job classification.~~

~~Recommends policies and approves procedures that ensure effective human resources recruitment, selection, orientation, supervision, discipline, evaluation, redeployment, and termination of staff.~~

~~Participates in collective bargaining as required by the Board of Health. Identifies impact of, and makes recommendations regarding proposals tabled at negotiations. Makes recommendations for changes to collective agreements to facilitate the provision of programs and services.~~

10. Recruits and supervises Directors.

~~Recruits Directors according to governing legislation and Board of Health policies and procedures.~~

~~Assigns Directors in a manner that facilitates achievement of the Health Unit's goals and objectives.~~

~~Supervises Directors according to governing legislation and Board of Health policies and procedures.~~

11. Prepares reports.

~~Ensures that reports prepared by the Medical Officer of Health and staff are:~~

- ~~• comprehensive;~~
- ~~• prepared in a timely manner; and~~
- ~~• submitted to the Board of Health when appropriate.~~

12. Ensures the appropriate management of property.

~~Recommends to the Board of Health accommodation that:~~

- ~~• complies with applicable statutory requirements contained in municipal, provincial, and/or federal legislation; and~~
- ~~• supports the effective and efficient delivery of programs and services.~~

~~Ensures that all property owned, leased, or rented by the Board of Health is managed according to Board of Health By laws.~~

13. Attends and participates in meetings.

~~Ensures the development of and adherence to the Terms of Reference for all Health Unit standing committee meetings.~~

~~Chairs:~~

- ~~• the first meeting of the Board of Health until the election of Chairperson and Vice Chairperson in accordance to Board of Health By Laws;~~
- ~~• meetings of the Health Unit's Executive and Management Committee according to the committees' Terms of Reference; and~~
- ~~• other committee meetings as specified in committee Terms of Reference.~~

~~Attends:~~

- ~~• all meetings of the Board of Health and subcommittees; and~~
- ~~• other meetings as required.~~

~~Maintains contact with, and/or membership on, relevant health-related local, regional, and provincial entities, including committees, associations, and societies.~~

14. Establishes and maintains effective communication.

Provides functional direction and guidance to the Communications Supervisor.

Ensures that all stakeholders are informed in a timely manner of emerging and current public health issues.

Ensures that the Board of Health is informed in a timely manner about issues that may have an impact on the Health Unit and its programs and services.

Ensures that current reliable information on public health issues is provided to the media and other public information sources.

Acts as a principal information source to the community on public health matters and Health Unit programs, services, and policies.

Acts as a spokesperson for the Board of Health on public health issues.

Communicates effectively by:

- fostering and facilitating positive working relationships; and
- using techniques that promote team building, and mutual respect in all interactions with the community, peers, and colleagues.

15. Enforces relevant Acts, Regulations, and By-laws.

~~Enforces relevant Acts, Regulations, and By-laws as required by law.~~

16. Executes documents.

~~Executes documents according to Board of Health By-law Number 7 – A By-law to Provide for the Execution of Documents.~~

~~Signs medical directives.~~

17. Provides orientation to the Health Unit, and education and training on issues relevant to community health.

~~Provides orientation willingly and as requested.~~

~~Provides in-service education to Health Unit staff as required.~~

~~Is available as a teaching resource to community groups and agencies.~~

18. ~~Works with, and has access to, the highest level of confidential organizational, legal, labour relations, financial, personnel, and client information, including confidential in-camera matters referred to the Board of Health.~~

~~Processes, maintains, and disposes of confidential information according to governing legislation, policies, procedures, and guidelines.~~

19. **Assumes responsibility for related duties as required or assigned by the Board of Health.**

~~Completes special projects and assignments as required.~~

20. **Ensures that a representative of the Health Unit is available to respond to telephone calls placed to the Health Unit outside of regular business hours.**

~~Ensures that an after hours on-call system is developed, implemented, and maintained.~~

~~Responds to requests for consultation and calls to work outside of normal work hours willingly and promptly.~~

~~Follows policies, procedures, and established practices, and uses knowledge appropriately when responding to after hours telephone calls.~~

~~Refers or seeks advice on difficult or emergency situations appropriately.~~

~~Ensures follow-up of emergency situations as necessary.~~

21. **Exchanges information with members of the Board of Health, Directors, Managers, Health Unit staff, municipal and provincial staff, elected and appointed officials, the public, clients, representatives of other organizations, Health Unit staff, physicians, lawyers, representatives of the media, and service providers for the purpose of completing assigned tasks.**

~~Follows governing legislation, policies, procedures, and instructions when exchanging information.~~

22. **Ensures back-up coverage for position and provides back-up coverage for other Medical Officers of Health.**

~~Ensures that back-up coverage for position is approved by the Board of Health as required.~~

~~Provides back-up coverage as requested.~~

23. ~~Uses agency resources effectively and efficiently.~~

- ~~Uses human, fiscal, and material resources effectively and efficiently by: knowing what resources are available within the Health Unit and making maximum use of these resources;~~
- ~~managing time appropriately; and~~
- ~~avoiding duplication of effort.~~

Job Requirements

Formal Education

1. Licensed to practice medicine by the College of Physicians and Surgeons of Ontario.
2. A fellowship in community medicine from The Royal College of Physicians and Surgeons of Canada- **OR** A a certificate, diploma, or degree from a university in Canada that is granted after not less than one academic year of full-time post graduate studies or its equivalent in public health comprising:
 - i) epidemiology;
 - ii) quantitative methods;
 - iii) management and administration;
 - iv) disease prevention and health promotion; ora qualification from a university outside Canada that is considered by the Minister of Health and Long-Term Care to be equivalent to the qualifications set out above.

Section 2 does not apply to a Medical Officer of Health or Associate Medical Officer of Health who was employed by a Board of Health on the 1st day of July, 1984.

Skills

1. Strong leadership, management, team building, and supervisory skills.
2. Strong communication (oral and written), interpersonal, and customer service skills.
3. Strong planning, organizing, multi-tasking, analytical, and problem-solving skills.
4. Strong initiative, dependability, creativity, and attention to quality of work skills and abilities.

Other

1. Current member of the Ontario Medical Association and the Council of Medical Officers of Health.
2. Access to transportation.

NB: The Medical Officer of Health is responsible for obtaining and maintaining coverage through the *Canadian Medical Protective Association (CMPA)* or equivalent.

Physical/Mental/Visual Demands

Must be capable of:

1. concentrating intensely daily for periods up to two hours;
2. meeting strict or multiple deadlines daily;
3. managing conflicting daily demands on time; and
4. driving an automobile weekly for periods up to two hours, monthly for periods up to three hours.

Working Conditions

1. Exposed to normal daily office environment.
2. Exposed to situations monthly that require stringent safety measures to prevent illness or injury.
3. Exposed to angry, upset, weekly or hostile individuals.
4. Can be called in to work 24 hours a day 7 days a week.
5. Drives an automobile bi-weekly.
6. Works overtime weekly.

Consequence of Errors

Physical injury, illness, or death to many individuals.

Permanent or temporary environmental damage.

Embarrassment to the organization and loss of goodwill and trust.

Potential litigation.

Significant financial loss.

Errors would be detected outside of the Health Unit.