South East Health Unit

formerly

HASTINGS PRINCE EDWARD Public Health

KFL&A Public Health

Leeds, Grenville & Lanark District HEALTH UNIT

BOARD OF HEALTH MEETING

AGENDA PACKAGE

WEDNESDAY, July 23, 2025

at 10:00 a.m.

179 North Park Street, Belleville, ON

Please note there will be a Closed Session component to this meeting.

Join Zoom Meeting
https://ca01web.zoom.us/j/68354071608?pwd=Ri3CdEwuMVLFtk2XjnCkJCXwKvofw6.1

Meeting ID: 683 5407 1608
Passcode: 966441

Dial by your location
• +1 647 374 4685 Canada
• +1 647 558 0588 Canada

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

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

Kingston, Frontenac and Lennox & Addington Public Health
221 Portsmouth Ave.
Kingston, Ontario K7M 1V5
613-549-1232 | 1-800-267-7875
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Leeds, Grenville & Lanark District Health Unit
458 Laurier Blvd.
Brockville, Ontario K6V 7A3
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Fax: 613-345-2879

BOARD OF HEALTH AGENDA

Wednesday, July 23, 2025 – Belleville Office

1. **CALL TO ORDER**

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

3. **ROLL CALL**

4. **APPROVAL OF THE AGENDA**

   MOTION: THAT the Board of Health approve the agenda for July 23, 2025 as it has been circulated.

5. **APPROVAL OF THE MINUTES OF PREVIOUS MEETING** Schedule 5

   MOTION: THAT the Board of Health approve the minutes of the meeting held on June 25, 2025 as circulated.

6. **DISCLOSURE OF PECUNIARY INTEREST**

7. **COMMITTEE REPORTS**

   7.1 **Governance Committee Update** – Mayor Robin Jones Schedule 7.1.0

   7.1.1 **Reserve Fund Corporate Policy** Schedule 7.1.1

   7.1.2 **Appointment of External Advisors Policy** Schedule 7.1.2

   MOTION:
   THAT the Board of Health approve the two policies noted above as circulated and as recommended by the Governance Committee

   7.1.3 **Board of Health Self-Evaluation** Schedule 7.1.3

   MOTION: THAT the Board of Health receive the self-evaluation survey as circulated and agree that the survey be distributed to Board members no later than September 30, 2025.

8. NEW BUSINESS

8.1 **Merger Updates** Schedule 8.1

MOTION: THAT the Board of Health receive the merger update report(s) as circulated.

9. INFORMATION ITEMS (see website) Schedule 9

MOTION: THAT the Board of Health receive the information items as circulated.

10. CLOSED SESSION

MOTION: THAT the Board of Health convene in closed session for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically:

(b) personal matters about an identifiable individual, including municipal or local board employees, and

(k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board.

11. RISING AND REPORTING OF CLOSED SESSION

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

12. ADJOURNMENT

MOTION: THAT this Board of Health meeting be adjourned.

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BOARD OF HEALTH OPEN SESSION MINUTES

Wednesday, June 25, 2025 Kingston 10:00 a.m.

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

In attendance:

In-Person:	Mayor Jan O'Neill, Mr. Stephen Bird, Councillor Conny Glenn, Councillor Judy Greenwood-Speers, Mayor Robin Jones, Councillor Sean Kelly, Reeve Richard Kidd (arrival at 10:05 a.m.), Councillor Anne-Marie Koiner, Councillor Michael Kotsovos, Councillor Peter McKenna, Councillor Jeff McLaren (departure at 11:21 a.m.), Ms. Barbara Proctor, Councillor Bill Roberts (arrival at 10:04 a.m.), Warden Nathan Townend.
Virtual:	Dr. Jeffrey Allin
Regrets:	Ms. Melanie Paradis, Dr. David Pattenden, Mr. Chris Seeley
Officer:	Dr. Piotr Oglaza

1. **CALL TO ORDER** – Meeting was called to order at 10:02 by Chair O'Neill.

2. **LAND ACKNOWLEDGEMENT** – Spoken by Chair O'Neill.

3. **ROLL CALL** – Conducted by Recorder, K. Thompson.

4. **APPROVAL OF THE AGENDA**

   It was MOVED by Warden N. Townend and SECONDED by Councillor J. Greenwood-Speers THAT the Board of Health approve the agenda for the June 25, 2025 meeting, with the following amendment: that Closed Session items (#8 and #9) be moved to follow the Information Items (#12).

   CARRIED

5. **APPROVAL OF THE MINUTES OF PREVIOUS MEETING**

   It was MOVED by Councillor S. Kelly and SECONDED by Ms. B. Proctor THAT the Board of Health approve the minutes of the meeting held on May 28, 2025, as circulated.

   CARRIED

6. **DISCLOSURE OF PECUNIARY INTEREST** – No conflicts were disclosed.

7. COMMITTEE REPORT

7.1 *Governance Committee Update*

7.1.1 Dr. P. Oglaza provided an overview of the Board of Health Self-Evaluation Policy, highlighting its role in meeting required standards and formalizing a consistent, biennial evaluation process. He noted the process is familiar to Board members, straightforward, and aligned with past practices. The survey will merge elements from the three legacy versions, maintaining focus on key governance domains. The policy also serves as a reminder to complete the evaluation within set timelines.

7.1.2 The revised Risk Intelligence Policy has been updated to align with current standards and adopts a more proactive approach to risk oversight. A significant change in the policy is the lowering of the reporting threshold to include medium-level risks that fall within the governance scope of the Board of Health. This adjustment ensures that the Board is informed of relevant risks within its purview. Operational risks, which are outside the Board's authority, remain excluded from reporting requirements. Additionally, the policy eliminates the obligation to report medium-level risks that are exclusively under the authority of staff.

It was MOVED by Councillor M. Kotsovos and SECONDED by Councillor B. Roberts THAT the Board of Health approve the following recommendations from the Governance Committee:

THAT the SEHU Board of Health Self-Evaluation Policy and Risk Intelligence Policy be approved as circulated.

CARRIED

7.2 Finance Committee Update

Councillor A. Koiner provided a verbal update from the Finance Committee meeting held the previous day. Field work for the 2024 audit is scheduled for June and July, with results to be presented to the Board of Health and Finance Committee in August or September. The 2024 Ministry of Health Annual Reconciliation Report is on track for completion by June 30. The year two merger budget submission has been submitted, with the committee reviewing details related to levy prioritization, program allocations, and staffing costs. As of May 31, year-to-date spending is $238,000, or approximately 40 percent of the annual budget. Staff were commended for managing the financial transition across three accounting systems in the first year of the merged organization.

8. NEW BUSINESS

8.1 By-laws, Policies & Procedures Amendments

It was MOVED by Councillor C. Glenn and SECONDED by Mr. S. Bird THAT the Board of Health approve the addition of Vice Chair to both the Governance Committee and the Finance Committee Terms of Reference as circulated; AND

THAT updates to By-law No. 1 be approved as circulated.

CARRIED

8.2 Merger Updates

Dr. P. Oglaza provided an overview of the detailed briefing note outlining progress in key areas including branding and marketing, organizational design, program harmonization, change management, organizational culture, finance, human resources, IT integration, and harmonization tools. The update emphasized the significant volume of work occurring behind the scenes in parallel with ongoing public health operations.

Board members discussed the branding process, with confirmation that a formal public launch is forthcoming and the Board will be kept informed. Questions were raised about roles related to foundational standards and school health harmonization; clarification was provided on the role's origin and relevance. The June 23 Town Hall was confirmed to have taken place with over 300 attendees. Payroll harmonization timelines were also briefly discussed.

It was MOVED by Councillor P. McKenna and SECONDED by Councillor A. Koiner THAT the Board of Health receive the merger update for information.

CARRIED

8.3 Board of Health Meeting in August

It was MOVED by Mayor R. Jones and SECONDED by Councillor B. Roberts THAT the Board of Health approve the cancellation of the meeting of the Board as set for August 27, 2025.

CARRIED

9. INFORMATION ITEMS

Councillor C. Glenn extended thanks for the timely communication on extreme heat events, noting increased public outreach during the current heatwave and highlighting projections of a significant rise in the number of extreme heat days annually. The importance of continued efforts to keep the public informed was emphasized.

It was MOVED by Councillor C. Glenn and SECONDED by Warden N. Townend THAT the Board of Health receive the information items as circulated.

CARRIED

10. CLOSED SESSION

It was MOVED by Councillor C. Glenn and SECONDED by Councillor S. Kelly THAT the Board of Health convene in closed session for the purposes of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically (k) a position, plan, procedure, criteria, or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the Board or the Agency.

CARRIED

11. RISING AND REPORTING OF CLOSED SESSION

It was MOVED by Warden N. Townend and SECONDED by Councillor C. Glenn THAT the Board of Health endorse the actions approved in the closed session and direct staff to take appropriate action.

CARRIED

12. ADJOURNMENT

It was moved by Warden N. Townend and SECONDED by Councillor B. Roberts THAT this Board of Health meeting be adjourned at 11:35 a.m.

CARRIED

Jan O'Neill, Board Chair
South East Health Unit

Schedule 7.1.0

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Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Board of Health Governance Committee
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and CEO
Date:	Wednesday, July 23, 2025
Subject:	**Policy Review - Reserve Fund and Appointment of External Advisors**
Nature of Board Engagement	☒**For Information** ☐Strategic Discussion ☒**Board approval and motion required** ☐Compliance with Accountability Framework ☐Compliance with Program Standards
Action Required:	**MOTION:** THAT the Board of Health approve the two policies noted above as circulated and as recommended by the Governance Committee.
Background and Current Status	One of the responsibilities of the Governance Committee is the review of Board policies to ensure appropriate structures and procedures are in place and make recommendations to the Board for approval. The Governance Committee is recommending that the two policies listed below be approved by the SEHU Board of Health. A Reserve Fund Corporate Policy has been created to meet the operational needs of the organization and to provide for emergencies and future expenditures. This is a South East Health Unit administrative policy that outlines the use of reserve funds for the organization. (7.1.1.1) An Appointment of External Advisors Board of Health policy has been developed to ensure that the SEHU effectively leverages external expertise to provide specialized professional services or advice on matters pertaining to the Board of Health's oversight while maintaining accountability and alignment with organizational goals. (7.1.1.2)

South East Health Unit

ADMINISTRATIVE POLICY MANUAL

Subject: Reserve Fund Policy **Number: xx-xxx**

Issued by: Board of Health

Original Issue: 2025 07
Revised:NEW/yyyy.mm

Purpose
To provide guidance on the establishment, maintenance, and use of reserve funds at South East Health Unit (SEHU) to ensure a transparent and accountable financial resources process.

Policy and Procedure

1. The Board of Health (BOH) has the power under s. 417(1) of the Municipal Act, 2001 to establish and maintain reserve funds for contingency, emergency, or other unforeseen expenditures that are necessary for the proper functioning of SEHU and for future capital requirements.

2. Any reserve fund(s) will be established by resolution of the BOH. Except as otherwise expressly provided for herein, contributions to and withdrawals from the reserve fund(s) will be approved by the Medical Officer of Health (MOH) / Chief Executive Officer (CEO) within their Executive Spending Limit of $250,000 and all contributions to and withdrawals above the MOH/CEO Executive Spending Limit will be approved by resolution of the BOH.

   Once reserve funds are accessed by the MOH/CEO within their Executive Spending Limit they must inform the BOH of the amount of reserve funds used, the purpose for the use of the reserve funds, identify which reserve fund was accessed, and provide any further information such as replenishment and maintenance of adequate financial reserves.

3. Establishing and maintaining reserve funds will enable SEHU, through the BOH, the MOH/CEO and staff, to perform its functions and fulfill its obligations under the *Health Protection and Promotion Act*, the Ontario Public Health Standards, and any other applicable legislation, regulation, standard or policy. SEHU will comply with the requirements of funding sources and will follow generally accepted Canadian accounting principles for non-profit organizations.

4. Audited financial statements shall be presented to the BOH annually that contain information about each reserve fund balance and changes to that balance during the year. SEHU shall endeavour to offset any unexpected expenditures within the annual operating budget for all programs and services, where possible, without jeopardizing programs. When there is an exceptional cost in a given year that cannot be paid out of the annual operating budget, the appropriate reserve fund may be used to mitigate undue hardship on program delivery.

5. Without limiting its ability to establish and maintain other reserve funds,
   A. The BOH will establish and maintain a General Operating Reserve which shall be established and maintained as set out below:

      (i) General Operating Reserve

   The General Operating Reserve shall be funded from retainable surplus funds generated through operations. Drawing funds from this reserve fund will be approved by the MOH/CEO when within their Executive Spending Limit; otherwise, the BOH will approve the use of funds. The MOH/CEO will inform the BOH and make them aware of the situation. One separate bank account will be established to manage and track funds related to the General Operating Reserve and will be separately tracked in the financial system.

   B. The BOH may, from time to time, establish Restricted Reserve(s) Funds which shall be established and maintained as follows:

      (i) Restricted Reserve Fund(s)

   Circumstances may arise where funds received or generated must be used for a specific purpose and will need to be 'parked' for a period of time until spent. In these situations, a unique reserve will be created. One separate bank account will be setup to track all Restricted Reserve(s). In the financial system each unique reserve fund will be tracked separately. Drawing funds from this reserve(s) fund will be approved by the MOH/CEO when within their Executive Spending Limit; otherwise, the BOH will approve the use of funds. The MOH/CEO will inform the BOH and make them aware of the situation.

Additional Information

1. As required pursuant to s. 417(2) of the *Municipal Act*, 2001 and s. 52(4) of the *Health Protection and Promotion Act*, the BOH shall seek the consent of the councils of the majority of the municipalities within the health unit served by the BOH prior to establishing any reserve fund for the purpose of acquiring real property.

References

Health Protection and Promotion Act
Municipal Act, 2001

South East Health Unit

ADMINISTRATIVE POLICY MANUAL

Subject: Reserve Fund Policy **Number: xx-xxx**

Issued by: Board of Health

Original Issue: 2025 07
Revised:NEW/yyyy.mm

Ontario Public Health Standards

Related Documents

Authorizing Signature:

_____
Dr. Piotr Oglaza
Medical Officer of Health & Chief Executive Officer

SOUTH EAST HEALTH UNIT

BOARD OF HEALTH POLICIES AND PROCEDURES

POLICY:	Appointment of External Advisors	Original Date:	July 23, 2025
NUMBER:	BOH-2025-05	Revised Date:	July 23, 2027

PURPOSE:

To outline the process for appointing external advisors to provide specialized professional services or advice on matters pertaining to the Board of Health's (BOH's) oversight, accountability, and stewardship responsibilities.

POLICY:

External advisors may be retained by the Medical Officer of Health/Chief Executive Officer (MOH/CEO) or designate, as required, subject to the availability of budget and applicable procurement policies of the organization. The BOH will make such appointments in accordance with all applicable legislation and its own by-laws.

Such advisors may include, but are not limited to the following:

(i) Legal Counsel,
(i) Financial Advisors,
(ii) Accountants or Auditors,
(iii) Engineers or Property Managers, and
(iv) Management and Human Resource Consultants.

External advisors will be licensed under the appropriate governing body, where such exists, and will be at arms-length from the members of the BOH and Senior Management.

PROCEDURE:

External advisors, within their area of expertise, shall:

(i) Perform duties as may be required by the Board, the MOH/CEO or designate,

(ii) Have a right to access, as required, during reasonable hours, all books, records, documents, accounts, and vouchers of the BOH and SEHU as required in order to complete their duties,

(iii) Be entitled to require from the members of the Board and from the officers of the Board such information and explanations as, in their opinion, may be necessary to enable them to carry out such duties as are prescribed by the appointment.

(iv) Be entitled to attend any meeting of the members of the Board and to receive all notices relating to any such meetings that any member is entitled to receive, and to be heard at any such meeting that they attend or any part of the business of the meeting that concerns their area of professional expertise.

(v) Complete an Oath of Confidentiality and Statement of Privacy, if deemed appropriate.

(vi) Enter into a Contract for Service, as deemed appropriate.

(vii) Be regularly evaluated for the quality of service in relation to the contract terms and receive clear expectations and performance feedback.

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Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Board of Health Governance Committee
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and CEO
Date:	Wednesday, July 23, 2025
Subject:	**Board of Health Self-Evaluation**
Nature of Board Engagement	☒**For Information** ☐Strategic Discussion ☒**Board approval and motion required** ☐Compliance with Accountability Framework ☐Compliance with Program Standards
Action Required:	**MOTION:** THAT the Board of Health receive the self-evaluation survey as circulated and agree that the survey be distributed to Board members no later than September 20, 2025.
Background and Current Status	As outlined in the Governance Committee Terms of Reference, one of the responsibilities of the Committee is to conduct a Board self-evaluation and make recommendations for improvement on Board effectiveness and engagement. Information from legacy HPE, KFLA and LGL BOH self-evaluations was compiled and reviewed at the Governance Committee meeting held on July 8, 2025. As requested by members, links will be added to resource items to assist members when completing the evaluation at the time of distribution. The Governance Committee is recommending that a BOH self-evaluation take place in the fall and that the Board receive the survey for information.

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Board of Health Self-Evaluation

Date

This survey gives Board members a chance to reflect on how the Board is doing as a governance body and to identify possible areas to improve.

Your participation in this survey is voluntary. We are, however, hopeful that all Board members will participate in this important feedback process.

Please answer the questions with full candour, knowing that your responses will remain confidential. All results will be grouped together and will not contain any individual information.

We hope that this survey will help the Board to set priorities and motivate us to work even more effectively together to fulfill our responsibilities as Board of Health members.

The survey results will be presented at the _____ Board of Health meeting.

For each statement, please check the response that best describes your opinion.

BOARD ROLES AND RESPONSIBILITIES				
1. **The Board understands/performs its role in financial oversight.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **The Board understands/performs its role in strategic planning.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **Board members have adequate knowledge of the Board's responsibilities.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **Board members demonstrate a clear understanding of the role of the Board.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **Board members have a clear understanding of the role of the Medical Officer of Health/CEO and the Executive Team.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. **The Board has the sub-committees needed to maximize Board efficiency. (i.e. Finance, Governance)**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
7. **The Board is adequately prepared to oversee an emergency situation.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
8. **The Board assesses the MOH's performance in a systematic way in accordance with agency policy.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
9. **The Board focuses primarily on governance issues and does not become overly involved in management/operational issues.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
10. **The Board has adequate information to approve the annual budget.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
11. **The Board receives adequate information on agency compliance with applicable legislation.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
12. **Board members are familiar with the HPPA and the Board of Health by-laws and policies that govern the Board of Health.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
13. **Board members are aware and have a clear understanding of the organizational requirements of the Board of Health as set out in the Ontario Public Health Standards – Organizational Requirements.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
14. **Board members are aware of their powers, limitations, restrictions and legal**				

liabilities.				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*

15. ***What suggestions would you make to clarify the roles and responsibilities of BOH members?***

BOARD DECISION-MAKING				
1. **The Board has appropriate input into the development of the agenda.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
2. **The Board has adequate background information about agenda items.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
3. **The Board uses sound decision-making processes.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
4. ***Three things that could be done to improve Board decision-making are:***				

BOARD AWARENESS				
1. **The Board is well-informed and kept up-to-date about the operations of the organization through program presentations and MOH Verbal Updates.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
2. **The Board is well-informed and kept up-to-date about the Board's governance role through regular BOH meetings and MOH updates.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
3. ***Is there something more that Board members need in meetings to be a more effective Board member?***				

FIDUCIARY OBLIGATIONS				
1. **Board members fulfill their fiduciary responsibilities and understand their Board obligations including Conflict of Interest.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*

OVERALL FUNCTIONING				
1. **Board members work well together.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **Board members participate in effective orientation and avail themselves of opportunities for ongoing education.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **In order to actively participate in BOH meetings, members thoroughly review materials in advance of the meeting.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐

BOARD OF HEALTH INFORMATION SHARING AND RESOURCES				
1. **Board members find the SEHU Board Orientation Binder helpful.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **I would prefer the BOH Orientation binder be sent as an electronic document rather than keeping an actual binder and the paper associated with it.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **I use my Orientation binder consistently and add new information as I get it.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **I am able to interpret, analyze, and assess financial information, reports, and proposals.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **I understand the role of measurement and evaluation of programs and services of the organization.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. ***What suggestions might you have to improve the process of information sharing?***				

MEETINGS				
1. **Meeting materials are received sufficiently in advance to be thoroughly reviewed by Board members.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **Materials prepared for review enable Board members to participate actively in the discussion and make an informed decision.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **Meetings are structured so there is sufficient time for discussion of decision items.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **The Board deals with in-camera business appropriately.**				

Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
5. **Use of Zoom technology is working well for meetings.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
6. **Board members participate in meetings in a positive and respectful manner.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*

BOARD RELATIONS				
1. **There is sufficient time allocated for the full discussion of issues at Board meetings.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
2. **Board members have adequate opportunities to ask questions at Board meetings.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
3. **As a Board member, I feel comfortable asking a probing question.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
4. **As a Board member, I feel comfortable raising an issue that might be unpopular**.				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
5. **A climate of mutual trust and respect exists among Board members.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
6. **A climate of mutual trust and respect exists between the Board and CEO.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
7. **A climate of mutual trust and respect exists between the Board and staff.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
8. **A climate of mutual trust and respect exists between the Board of Health and the Executive Team.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
9. **Board members assist in developing and maintaining positive relations with key stakeholders.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
10. **Board members are active in promoting a positive image of the agency in the community.**				
Strongly Agree ☐	*Agree ☐*	*Disagree ☐*	*Strongly Disagree ☐*	*Not Sure ☐*
11. ***Are there any areas for improvement in Board of Health relations?***				

BOARD CHAIR				
1. **The Board Chair conducts the meeting in a way that moves the business of the Board forward**.				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **The Board Chair allows adequate time for all sides of an issue to be heard and debated and encourages participation.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **The Board Chair and the Board demonstrates understanding of the Chair's role as the spokesperson for the Board.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐

PLANNING AND PRIORITIES				
1. **As a Board member, I am aware of the annual goals, priorities and responsibilities of the agency.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **The Board is familiar with the organization's annual budget planning process and is clear with its role.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **The Board ensures the agency's strategic plan is being implemented.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **The Board ensures the agency's strategic plan is considered when making Board decisions.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **The Board has a good understanding of how the organization spends its financial resources.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. **The agency has appropriate policies and procedures in place to manage risk.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
7. ***Do you have any other comments or suggestions that will help the Board of Health increase its effectiveness?***				

Schedule 7.1.3

ORGANIZATION MISSION, VALUES AND STRATEGIC PLAN				
1. **I know the organization's vision and understand my role in ensuring this vision is realized.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **I know the organization's mission and understand my role in ensuring this mission is realized.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **I know the four values of the organization.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **I feel the Board of Health exemplifies the four values of the organization.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **I know the organization's five strategic priorities.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. **I have a clear understanding of how the organization is going to achieve the five strategic priorities.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
7. **I have a clear understanding of how the organization measures success.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
8. **I am confident the organization identifies areas of improvement and continually works to make improvements.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
9. **I enjoy being on the Board of Health, and feel I have had the opportunity and skills to contribute to the success of the organization.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
10. ***Achieving our Strategic Plan is vitally important to the organization. How can we improve this process?***				

COMMUNITY ENGAGEMENT				
1. **The role of the organization is well known in our community.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **Our community is aware of the programs and service provided by the organization.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **Board members are well equipped to speak publicly about the role of Public Health and the programs and services it provides.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐

4. **Engagement with municipalities is a priority and the organization currently engages with municipalities in a satisfactory way.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **The organization is a valued resource and partner in our local communities.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. **Public Health staff at all levels are engaged with key stakeholders.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
7. **Public Health staff at all levels are engaged with the community.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
8. ***Are there any areas of improvement for the organization to engage with our communities and key stakeholders?***				

PERSONAL COMPETENCIES				
1. **I know why I am investing my time in the Board of Health.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **I am aware of what skills I bring to the Board of Health and utilize them effectively.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
3. **I feel the Board of Health works as a team.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
4. **I feel comfortable asking questions when I don't fully understand the issue.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **I am able to identify my personal training needs for the role of a Board of Health member.**				
Strongly Agree ☒	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. **I support the programs and services of the organization in a meaningful way.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
7. ***Keeping in mind your answer to the above question, how do you provide this support to the programs and services?***				

Schedule 7.1.3

LEADERSHIP				
1. **Board members arrive at meetings on time and are prepared to participate fully, to discuss, debate, and make decisions.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
2. **Board members support and encourage others in the group to participate fully.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☒	*Not Sure* ☐
3. **Board members tolerate differences of views and opinions.**				
Strongly Agree ☐	Agree ☐	Disagree ☐	Strongly Disagree ☐	Not Sure ☐
4. **As a board member, I am able to identify and analyze group problems and conflicts, and find creative solutions.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
5. **As a board member, I am confident in my ability to express myself and represent my views to Board members during discussions.**				
Strongly Agree ☐	*Agree* ☐	*Disagree* ☐	*Strongly Disagree* ☐	*Not Sure* ☐
6. ***Improvements I would like to suggest for the Board of Health.***				

ADDITIONAL COMMENTS
1. Our greatest strengths as a Board are: (list up to three)
2. Our greatest challenges as a Board are: (list up to three)
3. What priorities should occupy the Board's time and attention during the coming year or two? (list up to three)
4. How could the Board's organization or performance be improved in the next year or two? (List up to three)

Note: Subject to the development of a central location, links will be included in the survey to connect Board members with applicable materials.

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Board of Health Briefing Note

To:	South East Health Unit Board of Health
Prepared by:	Susan Stewart, Director, Merger Office
Approved by:	Dr. Piotr Oglaza, Medical Officer of Health and CEO
Date:	Wednesday, July 23, 2025
Subject:	**Merger Updates**
Nature of Board Engagement	☒ **For Information** ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards
Action Required:	No action required.
Branding and Marketing	Scott Thornley and Company (STC), the consultants supporting the development of the South East Health Unit's (SEHU's) brand identity, have provided working files, templates and assets to the SEHU Graphic Designers to begin using and provide any final revisions. The project team is developing an implementation plan to launch the new brand beginning in the fall. The launch will be a phased approach as it will take time to sunset our legacy brands and resources, and apply new branding across the organization.
Organizational Design **- Staffing Assignments**	We approached this thoughtfully and with several key priorities in mind. First and foremost, our top priority was ensuring that program operations could continue smoothly. Our programs and services are essential to the communities that we serve and minimizing any disruption in service delivery was paramount. Secondly, to the extent possible, we wanted to be able to offer staff a choice of what team they would like to work on. On June 9, a survey went out to all program and reception/front desk staff asking them to identify their top three teams on which they would like to work. This survey closed on June 12 after which staff were matched with their preferences as best as possible. Ninety-three per cent of staff were assigned to one of their top three preferences. Staff will report to their new manager in September. We are working through interim processes for time and budget approvals until we are on a shared Human Resources/Payroll and finance system(s).

Organizational Design **- Reception**	We have different models for reception across the SEHU offices in terms of reporting structures. A survey has gone out to all staff who work in a reception or front desk capacity asking for their thoughts on four different models including the advantages and disadvantages of each model. This survey closes July 28.
Program Harmonization	As a health unit, we offer many different programs and services. We cannot start the harmonization process all at once. The management teams in each portfolio are currently working on identifying which programs will be harmonized first to make it manageable for the organization. The Merger Office has put together a tracking tool so that there will be regular updates on program harmonization progress. This will roll out this July. There are some harmonization projects that cross portfolios. Preliminary work has started on the following cross-portfolio projects: • Electronic Medical Record • Fax system Integration • Call intake processes • Client service standards • Medical directives • Website
Policies	A policy review cycle and process has been determined. Corporate Services have identified priority policies that will undergo the review process. The first batch of policies will go to the Management Committee on August 21 which is the start of the approval process. From here, policies will go to the Operations Committee for discussion and then to the Executive Committee for approval. The intent is to approve eight to ten policies per month.
Change Management - Training	For staff, we recognize that change can be difficult and we are committed to supporting our staff through this transformation. All staff were offered a webinar entitled *"Navigating Change at Work"*. This was offered in May and July. In addition, the webinar *"Creating Connections at Work"* will be offered to all staff in August and September.
Change Management - Change Readiness Assessment	A change readiness assessment survey will be administered at the end of every quarter throughout the merger. The second survey was sent out out June 23 and closed on July 7. Results are currently being analyzed. To assist with change management across the South East Health Unit, a Change Management Advisory Group has been struck. This committee consists of ten staff from across the organization in a variety of roles.
Change Management - Town Hall	A second Town Hall was held on June 23 for all staff. This was an important opportunity for staff to ask questions directly to the leadership team.
Change Management - Coffee and Conversation	Results from the first *Change Readiness Assessment* showed that staff were looking for more face-to-face opportunities to meet with the Executive Team. Coffee and Conversations events were held in offices across the SEHU: July 11 in Brockville, July 16 in Belleville and July 18 in Kingston. These were optional and informal events for staff to chat with members of our Executive Team.
Organizational Culture – Culture Building Events	Legacy showcase events were held to honour legacy agency work, provide an opportunity for members of the Executive Team and staff to meet each other, and to continue the development of values and culture for the SEHU. The following legacy events were held:

	• June 6 – Brockville and Smith Falls • June 13 – Belleville and Kingston
Organizational Culture – Shared Values and Desired Culture	Part of creating a new organization is establishing shared values and a desired culture. The Executive and Operations Committees worked with a consultant to draft a document outlining the values and shared elements of our desired culture. Managers have had input into the creation of the values and staff's thoughts and input were collected during planned organizational events in June. Results are being collated and will be shared with staff over the summer.
Finance and Human Resources Systems	The finance and human resources teams are evaluating systems for accounting, payroll and human resource functions. They will evaluate enterprise resource programs (ERP) along with separate systems for accounting and Human Resources (HR) and payroll. ERPs are software systems designed to streamline and integrate all core business processes. HR and Finance managers, together with their teams, have identified requirements for systems which will be used in an evaluation matrix to score systems during demonstrations.
Finance - Payroll Harmonization	We are working to harmonize our payroll work periods, payroll dates, and payroll systems. This is a necessary step to ensure consistency, efficiency, and compliance across our new organization. Communication on the timelines has been sent out to all staff. This change will not come into effect until February 2026 to give staff ample time to plan for this change.
Information Technology (IT)	Work continues towards a common Microsoft tenant for the organization with an anticipated go-live date of fall 2025. Along with the project to have a common Microsoft tenant for the South East Health Unit, a project to establish the network topology for the organization will also be completed.

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Listing of Information Items
Board of Health Meeting – July 23, 2025

1. Haliburton Kawartha Northumberland Peterborough Health Unit – Letter to Premier Doug Ford et al re preventing Intimate Partner and Gender-Based Violence (Bill 173) dated July 2, 2025
2. Association of Local Public Health Agencies (alPHa) – June InfoBreak
   ~ AMO AGM and Conference– August 17 to 20, 2025 in Ottawa

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