



UNAPPROVED MINUTES – SECOND MEETING

BOARD OF HEALTH

PUBLIC HEALTH SUDBURY & DISTRICTS

BOARDROOM, SECOND FLOOR

THURSDAY, FEBRUARY 20, 2025 – 1:30 P.M.

BOARD MEMBERS PRESENT

Ryan Anderson
Robert Barclay
Michel Brabant
Renée Carrier

René Lapierre
Abdullah Masood
Ken Noland
Michel Parent

Mark Signoretti
Natalie Tessier

BOARD MEMBERS REGRET

Guy Despatie
Natalie Labbée

STAFF MEMBERS PRESENT

Kathy Dokis
Stacey Gilbeau
Emily Groot

M. Mustafa Hirji
Sandra Laclé
Stacey Laforest

Rachel Quesnel
Renée St Onge

M. SIGNORETTI PRESIDING

1. CALL TO ORDER AND TERRITORIAL ACKNOWLEDGMENT

The meeting was called to order at 1:30 p.m.

- City of Greater Sudbury Council motion dated January 21, 2025, re: appointment of Natalie Labbée to the Board of Health for Public Health Sudbury & Districts
- Thank you letter to René Lapierre from the Acting Medical Officer of Health and Chief Executive Officer dated February 13, 2025

The Board Chair announced that N. Labbée has been appointed by the City of Greater Sudbury to the Board of Health for Public Health Sudbury & Districts, replacing Pauline Fortin. N. Labbée extended her regrets for today's Board meeting.

Today is R. Lapierre's last Board of Health meeting. He was thanked for serving as the Board of Health Chair for Public Health Sudbury & Districts for 10 years and a letter of recognition is included in the agenda package.

2. ROLL CALL

3. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST

The agenda package was pre-circulated. There were no declarations of conflict of interest.

4. DELEGATION/PRESENTATION

i) Recruitment and Retention

- Troy Haslehurst, Manager, Human Resources, Corporate Services Division
- Julia Demianiuk, Human Resources Officer, Corporate Services Division

Troy Haslehurst, Manager of Human Resources and Julia Demianiuk, Human Resources Officer were invited to co-present regarding recruitment and retention at Public Health Sudbury & Districts.

Similar to other organizations, Public Health Sudbury & Districts is facing market challenges including shortages and increased demand for talent. PHSD is experiencing skill gaps as baby boomers retire and exit the workforce. Greater competition in the labour market is impacting employee retention. Budget constraints and economic uncertainty, particularly for publicly funded organizations, compound recruitment challenges.

COVID-19 also had a substantial staffing impact on the agency's staffing with an increase in hiring and turnaround. The staffing complement surged in 2021 and 2022, before declining in 2023 when recovery work began to transition its COVID-related efforts to regular program work.

Challenges currently being faced include competing demands for health professionals, recruitment challenges due to difficulties in matching or exceeding total compensation packages such as relocation allowance. There has been an increase in employees moving on to job opportunities with other organizations or retiring earlier than expected. Staff leaves have increased requiring recruitment of temporary staff.

The multiple strategies being implemented or maintained to address the recruitment and retention challenges and to ensure PHSD is an employer of choice were summarized.

Questions and comments were entertained, and it was noted that these challenges are also being experienced in other public health units, including in the north. It was clarified that executive search firms have and continue to be used at times when agency recruitment

efforts are not producing desired candidates for specific roles. Trends are also monitored, including through exit interviews and cultural surveys.

It was clarified that PHSD collaborates and has strong connections with educational institutions and there is good work undertaken through the Chief Nursing Officer, Professional Practice Manager and robust professional development program as well as student placement programs.

In response to a question regarding trends with retirements such as whether unplanned retirements happen consistently, it was noted that an operational Policy and Procedure is being restored post-pandemic and reports will resume being shared regularly with senior management.

The presenters were thanked.

5. CONSENT AGENDA

- i) Minutes of Previous Meeting**
 - a. First Meeting – January 16, 2025
- ii) Business Arising from Minutes**
- iii) Report of Standing Committees**
- iv) Report of the Medical Officer of Health/Chief Executive Officer**
 - a. MOH/CEO Report, February 2025
- v) Correspondence**
 - a. Calling for the Selection of Indigenous Municipal and Provincial Appointees to Board of Health for Public Health Sudbury & Districts
(*Related motion from Board of Health Public Sudbury & Districts [Motion #31-24](#)*)
 - Letter from Middlesex-London Health Unit Board of Health Chair and Secretary to Mark Signoretti, dated January 31, 2025
- vi) Items of Information**
 - a. Letter from alPHa Chair to the Minister of Finance regarding 2024 Pre-Budget Submission: Public Health Programs and Services, dated January 20, 2025

M.M. Hirji noted that the Joint Board/Staff Accountability Working Group is responsible to review draft Accountability Monitoring reports including annual Accountability Monitoring Reports. One of the Board members on the Joint Board/Staff Accountability Working Group is R. Lapierre and with his resignation effective following today's Board of Health meeting, a Board of Health member replacement is being sought. Anyone interested is invited to email

the Board Chair or Board Secretary.

M.M. Hirji provided highlights from the virtual alPHa Winter Symposium and the Council of Ontario Medical Officers of Health (COMOH) section meeting he attended February 12 to 14, 2025. He shared an example of resulting collaboration in that a PHSD staff who presented at the Symposium has been contacted by another health unit with a request to share our work.

In advance of the provincial election, the PHSD awareness campaign highlights the importance of sustainably funding local public health efforts. M.M. Hirji added that continues to communicate the importance of public health in all appropriate forums and audiences and encouraged Board members to raise awareness about and speak of the value of Public Health.

In response to an inquiry, it was noted that a presentation on Artificial Intelligence will be made at a future Board of Health meeting once the project work has advanced. It was shared that the needle/syringe program is tracking stats and work is underway to have the data posted to phsd.ca for the public and to greater transparency. Additional information was provided regarding the increase in flu cases this year and risk of reassortment.

11-25 APPROVAL OF CONSENT AGENDA

MOVED BY LAPIERRE– PARENT: THAT the Board of Health approve the consent agenda as distributed.

CARRIED

6. NEW BUSINESS

i) Accountability Monitoring Report

- Briefing Note from the Acting Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 13, 2025
- 2024 Accountability Monitoring Report
- Public Health Sudbury & Districts Overview of Planning and Reporting

In November 2023, the Board of Health approved the 2024–2028 Strategic Plan for Public Health Sudbury & Districts and directed the Medical Officer of Health to operationalize the Plan, ensuring regular monitoring reports to the Board of Health. The Public Health Sudbury & Districts 2024–2028 Accountability Monitoring Plan, which was approved by the Board of Health in April 2024, outlines this monitoring process. The Monitoring Report is shared yearly with the Board of Health and with other stakeholders such as staff and community.

On February 4, 2025, the Joint Board of Health/Staff Accountability Working Group met to review the draft 2024 Accountability Monitoring Report and provided comments and

direction to finalize the report for submission to the Board of Health. As a member of the Working Group, R. Barclay summarized questions and clarification that were entertained at the Working Group meeting regarding the Accountability Monitoring Report that is included in today's agenda package for the Board of Health's information. R. Barclay was thanked for his engagement and staff thanked for the final report and accompanying briefing note.

ii) Part VIII - Ontario Building Code Fee Increases

- Briefing Note from the Acting Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 13, 2025
- Revised Board of Health Manual G-I-50 By-law 01-98 and Schedule A

Public Health Sudbury & Districts is mandated under the *Ontario Building Code Act* (S.O. 1992 c. 23), to enforce the provisions of the Act and the Building Code pertaining to sewage systems. Under the authority of the *Ontario Building Code Act*, Public Health Sudbury & Districts collects fees for Part VIII (private sewage system permits) and services in order to recover all costs associated with administration and enforcement of the Act.

The current user fees have been in place and not increased since 2018. Since 2018, there has been substantial inflation in the broader economy which has similarly increased costs to deliver this program. Per budget discussions, the proposed fee increases are recommended to address these increasing program operation and delivery costs and bring Sudbury & Districts fees into line with those in other Northern Ontario health units.

In accordance with *Building Code* requirements, Public Health Sudbury & Districts has notified all contractors, municipalities, lawyers, and other affected individuals of the proposed fee increases and conducted a public meeting on January 29, 2025, to discuss the proposed changes. The notification process has now concluded with no concerns having been reported.

Questions were entertained and it was clarified that although the recommendation includes a comprehensive review of fees conducted once every five years for the Board's approval, there will be an annual adjustment in accordance with the rate of inflation. The Board has full authority to set fees and a recommendation to further adjust rates can be brought at any time while following the public consultation process that would include the Board's final approval.

M.M. Hirji reviewed proposed revisions to amend program user fees to continue to administer the Part VIII (Sewage System) *Ontario Building Code* program on a cost-recovery basis.

12-25 AMENDMENT TO THE FEE SCHEDULE FOR SERVICES UNDER PART VIII OF THE ONTARIO BUILDING CODE AND TO BOARD OF HEALTH MANUAL BY-LAW 01-98

MOVED BY BARCLAY - TESSIER: WHEREAS the Board of Health is mandated under the Ontario Building Code Act (S.O. 1992 c. 23), to enforce the provisions of this Act and the Building Code related to sewage systems; and

WHEREAS program related costs are funded through user fees on a cost-recovery basis; and

WHEREAS the proposed fees are necessary to address current program associated operational and delivery costs; and

WHEREAS in accordance with Building Code requirements, staff have held a public meeting and notified all contractors, municipalities, lawyers, and other affected individuals of the proposed fee increases, with no concerns having been reported;

THEREFORE BE IT RESOLVED THAT the Board of Health approve the amendments in Part VIII-Ontario Building Code fees as outlined within Schedule “A” to Board of Health By-law 01-98, and

FURTHER THAT the Board of Health direct staff to plan to adjust Part VIII – Ontario Building Code fees on an annual basis in accordance with the rate of inflation, with a comprehensive review of fees conducted once every five years, for Board of Health consideration.

CARRIED

iii) Ontario Building Code – By-Law 02-02

- Revised Board of Health Manual G-I-60, By-law 02-02

M.M. Hirji noted that this proposed by-law revision is housekeeping in nature. We are required to name the person who is responsible for the Chief Building Official role and, due to a retirement, the by-law is being updated to reflect the employee in the role.

13-25 BOARD OF HEALTH MANUAL – AMENDMENT TO BY-LAW 02-02

MOVED BY NOLAND – BRABANT: WHEREAS changing personnel requires updates to this by-law,

BE IT RESOLVED THAT the Board of Health approve the proposed revision to By-Law 02-02.

CARRIED

iv) Public Health Sudbury & Districts Infrastructure Projects

- Briefing Note from the Acting Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 13, 2025

M.M. Hirji recapped the infrastructure modernization initiative at 1300 Paris Street building that the Board approved in 2020 to address aging infrastructure in a then 48-year-old building. The infrastructure modernization initiative addressed the second and third floors at 1300 Paris Street. Not within scope of the project were the district offices in Chapleau, Manitoulin Island, and Espanola, nor did the ground floor of 1300 Paris Street.

The modernization initiative in 2020 was extensive and the Board had authorized the transfer of up to \$11 million from its Reserve Funds to the operating budget as the budget for infrastructure modernization. The ultimate expenditure for infrastructure modernization was under budget at \$9.625 million, \$1.375 million less than the Board's authorized budget for this project, and remaining funds were maintained in the reserves for future needs.

The infrastructure in Espanola and Manitoulin District Offices, including paint and flooring, has aged and deteriorated and it is recommended that this work be completed. In addition, colour schemes, naming, and logos needs to be updated to reflect the organization's updated branding.

With experience gained in using the redesigned spaces at 1300 Paris Street, some collaborative spaces have not been successful and get limited use, while other spaces have been extremely well-used and have greater demand. With a better understanding of the needs of hybrid workplaces and the spaces needed to support that work, additional space modifications are recommended for 1300 Paris Street, particularly converting unused open collaborative spaces to smaller, closed offices and meeting rooms to match patterns of work. Reconfiguration of the Indigenous cultural space is also recommended to address limitations that has precluded its use for meetings as well as to provide ventilation for smudging.

The Board's support is sought to transfer up to \$879,000 from the Reserve Funds to the operating budget to offset expenses related to the supplementary infrastructure modernization projects. It was noted that Public Health Sudbury & Districts will submit a capital funding application to the provincial government for District office infrastructure improvements and if successful, we will use this funding to offset the costs.

Questions and comments were entertained, and M.M. Hirji provided an overview of the reserve funds noting that the Board of Health has established reserve funds and will ensure critical work on infrastructure does not impact municipal levies. It was also clarified with

the allocation of the recommended \$879,000 in this briefing note, the reserves would remain at 9 weeks of cash flow.

In response to a question about recent flood damage, it was clarified that funding has already been allocated to fix a pipe under the parking lot at 1300 Paris Street this spring. Broader renovations to L1 are not recommended at this point in time.

The district office renovations will be approx. \$150,000 and the main office renovations approx. \$729,000.

M.M. Hirji noted that there is a fulsome communication plan and staff will continue to be kept updated.

14-25 INFRASTRUCTURE MODERNIZATION PROJECTS: RESERVE FUNDS

MOVED BY ANDERSON – MASOOD: THAT the Board of Health, per By-Law G-I-70, authorize the transfer of up to \$879k from the Reserve Funds to the operating budget to offset expenses related to the supplementary infrastructure modernization projects.

CARRIED

v) Board of Health Manual

- Board of Health Manual By-law 04-88, G-I-30
- Board of Health Manual By-law 01-93, G-I-40

The proposed revisions were reviewed. G-I-30 reflects the recording and posting of delegations that took effect January 2025.

Proposed revisions to G-I-10 formally outlines the delegation of Board Chair approval for MOH/CEO all expenses, including credit card expenses.

15-25 BOARD OF HEALTH MANUAL – AMENDMENTS TO BY-LAW 04-88 AND BY-LAW 01-93

MOVED BY LAPIERRE – PARENT: THAT the Board of Health, having reviewed the revised by-law 04-88 and by-law 01-93, approve the contents therein for inclusion in the Board of Health manual.

CARRIED

vi) Unlearning & Undoing White Supremacy and Racism Project – Unlearning Club Launch

- Briefing Note from the Acting Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 13, 2025
- Invitation to the March 21, 2025, Unlearning Club launch event

Board members were reminded that the Unlearning Club is a structured, 18-month learning journey that reflects the Board's commitment to transformative action. The Board has

committed to monthly self-guided learning and closed group discussions. The Unlearning Project includes three additional components that make up the total of the project structure including cultural competency training, foundational obligations to Indigenous Peoples Series and Thinking Intersectionally Series.

The Unlearning Club will officially launch on March 21, 2025. To mark the beginning of this important journey, the launch event will be held in ceremony at 1300 Paris Street in the Ramsey Room, led by Nokomis (Grandmother) Martina Osawamick, followed by a feast to mark the occasion together. All Board members are invited to attend the event. The launch event is an essential part of the overall learning experience for the staff as well as Board of Health members for Public Health Sudbury & Districts. Each Board of Health member is encouraged to attend the March 21 ceremonial launch of the project.

7. ADDENDUM

None.

8. ANNOUNCEMENTS

M. Signoretti was pleased to share that, in alignment with the Board of Health motion [#41-21 Calling for the Selection of Indigenous Municipal and Provincial Appointees for Board of Health for Public Health Sudbury & Districts](#), on February 18, 2025, the City of Greater Sudbury Council agreed to appoint an Indigenous representative as one of the City of Greater Sudbury appointments on the Board of Health to fill a vacancy resulting from R. Lapierre's resignation. The City of Greater Sudbury will receive applications from Indigenous persons in the community and a representative will be appointed to the Board by the City's Nominations Committee.

M.M. Hirji announced that a meeting with indigenous partner communities will be held on Manitoulin Island and the meeting is being aligned with the June 12 Board of Health meeting date. The meeting with Indigenous partners will be held in the late morning and following lunch, the regular June Board of Health meeting will be held. Joint transportation is being explored. Board members are asked to hold June 12, 2025, in their calendars.

Board members are encouraged to complete the Board of Health meeting survey.

There is no regular Board meeting in March; therefore, the next regular Board of Health meeting will be held on Thursday, April 17, 2025, at 1:30 pm

Board members and senior managers are invited to stay for the celebration to thank R. Lapierre for his ten-year commitment as Board of Health Chair.

9. ADJOURNMENT

The meeting was adjourned at 2:49 p.m.

16-25 ADJOURNMENT

MOVED BY NOLAND -BRABANT: THAT we do now adjourn. Time: 2:49 p.m.

CARRIED

(Chair)

(Secretary)