



Haldimand-Norfolk Health Unit – Board of Health

January 5, 2021
2:00pm
Council Chambers*

Live Stream: www.norfolkcounty.ca/watch-norfolk-county-meetings/

*Due to Covid-19 restrictions, there is no public access to Council Chambers. Proceedings are web-streamed live and archived on the County's website. Deputations are presented electronically.

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11. Adjournment

Contact Information

Andy Grozelle, County Clerk

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Meeting schedules available online at http://www.norfolkcounty.ca/council_meetings/



Haldimand-Norfolk Board of Health

By-Law 2021-01-BH

Being a By-Law to amend the Procedural By-Law 2017-10-BH To Govern the Procedures of The Haldimand-Norfolk Board of Health and All of Its Committees, the Calling of Meetings and the Conduct of Its Members.

WHEREAS Section 238 of the *Municipal Act, 2001*, S.O. 2001, c.25, as amended, provides for the adoption of a procedure for governing the calling, place and proceedings of meetings;

AND WHEREAS Bill 187, *The Municipal Emergency Act, 2020* amends the *Municipal Act, 2001*, S.O. 2001, c.25 to permit electronic participation in meetings by Council Members in open and closed session proceedings during an emergency declared by the municipality or Province;

AND WHEREAS the Haldimand-Norfolk Board of Health deems it desirable to permit Board members to participate electronically during meetings declared during an emergency.

NOW THEREFORE the Haldimand-Norfolk Board of Health hereby resolves as follows:

1.1 THAT the following Definition be added to the Procedural By-Law 2017-10-BH

“Attendance – Shall mean physical attendance at a meeting excluding the exemptions provided in this By-Law and those established in Section 238 (3.3) of the *Municipal Act 2001, S.O. 2001 c. 25* that provide for electronic participation including inclusion as quorum for the Haldimand-Norfolk Board of Health and its Committees Members during an officially declared emergency or mandated lock-down”

1.2 THAT the Procedural By-Law 2017-10-BH be addition of a section 4.9 to read as follows:

“4.9 Board Electronic Participation

- a) Board Members may participate in meetings electronically during an emergency declared by the Province or Norfolk County or during a time that the Haldimand Norfolk Health Unit is designated as a Stage 1 (Lockdown) area under the regulations of Reopening Ontario (A Flexible Response to COVID-19) Act, 2020, S.O. 2020, c. 17;

- b) Electronic participation shall only occur during the time period of a formally convened meeting being held in accordance with Section 4 of the Procedural By-Law;
- c) Technical downages or disconnections of electronic Board attendees do not invalidate the business conducted by the Board. In cases where the Board becomes aware that electronic attendees are absent they may recess for a brief period to allow them to rejoin. If technical, network or other issues do not allow the member to rejoin the meeting shall continue with their absence noted in the minutes.”

1.3 THAT Section 7.7 of the Procedural By-Law respecting Deputations be amended to read “(5) five minutes” in place of “(10) ten minutes”;

2. The effective date of this By-Law shall be the date of passage thereof.

ENACTED AND PASSED this 5th day of January 2021.

Chair

County Clerk

Advisory Committee Meeting – December 17, 2020

Board of Health Meeting – January 05, 2021

Subject: Public Health Agency of Canada Funding Grant for Harm Reduction Surveillance
Report Number: H.S.S. 20-26
Division: Health and Social Services
Department: Haldimand Norfolk Health Unit
Purpose: For Decision

Executive Summary:

The Public Health Agency of Canada (PHAC) has provided one-time funding support to the Haldimand-Norfolk Health Unit (HNHU) harm reduction team's effort in surveillance measures of fatal and non-fatal drug-related harms. This report is to advise the Board of Health (BOH) about the capital-funding grant for the adaptation of a surveillance tool to track substance use related harms in Haldimand-Norfolk counties, and to seek approval for the recruitment of one (0.6 FTE) Temporary Full Time (TFT) staff for the implementation of the project.

Background and Discussion:

In a situational assessment carried out in 2019, harm reduction was identified as one of the priority areas for the Haldimand-Norfolk Health Unit (HNHU). The need for action was justified by the rise in opioid overdoses. The HNHU currently lacks a coordinated strategy to address opioid and substance use related harms within the two counties. This is in part, due to the inability of the HNHU to access real-time surveillance data on the substance use activities.

In August 2020, the HNHU submitted a proposal in response to a funding announcement by the PHAC, for a time-limited, one-time funding support to public health units for initiatives that further efforts to implement or evaluate surveillance of fatal and non-fatal drug-related harms.

The PHAC, in November 2020, awarded the HUUHU a one-time funding grant of \$80,000 for the adaptation of a surveillance tool to track substance use related harms in Haldimand-Norfolk counties. The grant provides the HNHU the opportunity to launch efforts for on-going systematic collection, analysis, and interpretation of substance data

necessary for harm reduction programming. The surveillance tool will provide a centralized reporting platform that conveys real-time data to the Health Unit staff, and facilitates better communication and information dissemination to staff, community and stakeholders.

This tool also helps the HNHU fulfil the MOHLTC Harm Reduction Program Enhancement requirement “to support the implementation and/or enhancement of opioid overdose early warning systems in their jurisdiction that will allow for the timely identification of, and response to, a surge in opioid overdoses”.

No additional funds are required from the BOH. The grant funding will support the adaptation and implementation of the surveillance tool, as well as fund the recruitment of a temporary full time staff to drive the project and deliver on expected outcomes.

Financial Services Comments:

The one-time grant of \$80,000 is anticipated to be sufficient to cover costs associated with the Harm Reduction Surveillance project; including the hiring of a 0.6 Project Lead, current staff time that will be spent on the project (if approved), as well as any operating costs to meet all project deliverables. With the project deliverables being completed internally, staff anticipate only 5% of costs will be related to operating and the remainder will be used towards staffing.

The Proposed 2021 Board of Health Budget includes \$80,000 in funding and expenditures as a Council Approved Initiative. If the Board does not approve to continue with the project, the budget will be amended accordingly.

Haldimand

Haldimand Finance staff have reviewed this report and agree with the information provided by Norfolk Financial Services. Future costs over and above the funding envelope would be cost shared based on the applicable cost sharing agreement, and should be ranked and evaluated during the appropriate budget process.

Interdepartmental Implications:

Norfolk:

Haldimand:

This 100% funded initiative supports a Haldimand County corporate strategic pillar in providing sustainable services that promote the well-being of communities and contribute to the health of residents. It is anticipated that Norfolk staff will monitor the progression of the project implementation and stay within the funding initiative so there is no levy impact.

It is also understood that once implemented, this will provide staff with access to real-time surveillance data on substance use activities to assist in developing a coordinated strategy to address opioid and substance use related harms within both counties.

Consultation(s):**Strategic Plan Linkage:**

This report aligns with the 2019-2022 Council Strategic Priority "Build Solid Foundations".

The funding grant for the Harm Reduction surveillance tool is linked to Norfolk County's commitment in creating a culture of efficiency and continuous improvement.

It also supports Haldimand County's vision to meet community needs and make Haldimand County a great place to live.

Conclusion:

It is recommended that the BOH accept the one time funding of \$80,000 from the PHAC to support the adaptation of a surveillance tool to track substance use related harms in Haldimand-Norfolk counties, and approve the recruitment of one (1) TFT staff for the implementation of the project.

Recommendation(s):

THAT Board of Health report HSS 20-26, Public Health Agency of Canada Funding Grant for Harm Reduction Surveillance, be received as information;

AND THAT Board of Health accept the Public Health Agency of Canada (PHAC) one-time funding of \$80,000.00;

AND FURTHER THAT the Board of Health approve one (0.6 FTE) Temporary Full Time (TFT) staff to support the program.

Attachment(s):

N/A

Submitted By:
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General Manager, Health & Social
Services
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City Clerk's Office

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December 20, 2020

SENT VIA E-MAIL

To: Interested Parties**Subject:** Opioid Poisoning Crisis in Toronto - Update (Item HL23.2) (see Part 13 of the Board of Health's decision on page 3 which is addressed to Interested Parties)

The Toronto Board of Health, during its meeting on November 16, 2020, adopted Item [HL23.2](#), as amended, and:

1. Reiterated its call urging the Federal Minister of Health to use the authority under the Controlled Drugs and Substances Act to permit the simple possession of all drugs for personal use, the need for which has become critical as the opioid poisoning crisis continues to worsen during the COVID-19 pandemic and, further, to support the immediate scale up of prevention, harm reduction, and treatment services.
2. Urged the Federal Minister of Health to provide additional funding for longer-term safer supply programs, injectable medications, and other safer supply options, including for stimulants.
3. Reiterated its request urging the Provincial Minister of Health to:
 - a. convene a multi-sectoral opioid overdose task force comprised of public health officials, community-based service providers, people with lived and living experience of drug use, and family members;
 - b. support and fund the implementation of a spectrum of safer supply options, including listing high-dose injectable formulations of hydromorphone on the Ontario Drug Benefit Formulary; and
 - c. dedicate funding for overdose-related grief and trauma supports for frontline workers, people who use drugs, and family members.
4. Urged the Provincial Minister of Health to:
 - a. create and fund an Urgent Public Health Need Site (UPHNS) program for Ontario to facilitate the implementation of these lifesaving services in a variety of settings;

- b. provide funding to pilot and evaluate virtual and/or telephone-based supervised consumption services as well as in-person peer supervision in congregate or residential settings to complement the current service options;
 - c. allocate some of the new treatment funding recently announced to evidence-based, on-demand treatment services in Toronto; and
 - d. designate harm reduction and treatment services as essential services and provide funding to ensure that these services can effectively operate and meet the needs of people who use drugs during the COVID-19 pandemic.
5. Requested the Provincial Minister of Health to reinstate funding for the Overdose Prevention Sites operated by Street Health and St. Stephen's Community House given the urgent and ongoing need for these lifesaving health services.
 6. Requested the Provincial Minister of Health to expand the criteria for naloxone distribution to allow service providers to administer naloxone to clients in their programs.
 7. Requested the Provincial Minister of Health to collect and provide socio-demographic data, such as sexual orientation, Indigenous identity, race or ethnicity, and income status, on fatal and non-fatal overdoses in Toronto to better understand who is being impacted to inform overdose responses.
 8. Urged the Health Professions Regulatory Advisory Council to review the regulatory changes in British Columbia, consult with current safer supply prescribers about the regulatory issues they are facing, and advise the Provincial Ministry of Health and the relevant regulatory colleges on how to address regulatory uncertainties to support the expansion of safer supply initiatives in Ontario.
 9. Requested the Medical Officer of Health to report on the status of conversations with the City of Toronto, enforcement agencies, and the Federal and Provincial Governments on decriminalizing the simple possession of drugs for personal use.
 10. Requested the Medical Officer of Health to work with the Executive Director, Social Development, Finance and Administration, to include the decriminalization of the simple possession of all drugs for personal use as a key plank in the City of Toronto's Community Safety and Wellbeing Plan in recognition of the differential and negative impacts that this criminal law has on equity-seeking groups in Toronto such as Black and Indigenous peoples.
 11. Requested the Medical Officer of Health, in consultation with the General Manager, Shelter, Support and Housing Administration, to continue to work with community partners toward urgently expanding the overdose prevention response and other harm reduction measures in shelters.
 12. Requested the Medical Officer of Health to work with community partners and City divisions on options to expand grief and trauma supports for people who use drugs, family members, and service providers who are impacted by the opioid poisoning

crisis.

13. Directed that the report (November 5, 2020) from the Medical Officer of Health be forwarded for information and consideration to all Boards of Health in Ontario, the Council of Medical Officers of Health, the Urban Public Health Network, the Canadian Public Health Association, the Ontario Public Health Association, the Ontario Medical Association, the Registered Nurses' Association of Ontario, the Canadian Association of Chiefs of Police, the Ontario Association of Chiefs of Police, the Federation of Canadian Municipalities, and the Association of Municipalities of Ontario.

To view this item and background information online, please visit:

- <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2020.HL23.2>.

Yours sincerely,

Julie Lavertu

Julie Lavertu
Board Secretary
Toronto Board of Health

Sent (via e-mail) to the following individuals and organizations:

- Algoma Public Health Board of Health, c/o Lee Mason, Chair
- Brant County Board of Health, c/o John Bell, Chair
- Chatham-Kent Board of Health, c/o Councillor Joe Faas, Chair
- Durham Region Health and Social Services Committee, c/o Regional and Councillor Bob Chapman, Chair
- Eastern Ontario Health Unit Board of Health, c/o Syd Gardiner, Acting Chair
- Grey Bruce Health Unit Board of Health, c/o Mitch Twolan, Chair
- Haldimand-Norfolk Health Unit Board of Health, c/o Mayor Kristal Chopp, Chair
- Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health, c/o Doug Elmslie, Chair
- Halton Region Board of Health, c/o Gary Carr, Halton Regional Chair
- Hamilton Board of Health, c/o Mayor Fred Eisenberger, Chair
- Hastings Prince Edward Public Health Board of Health, c/o Jo-Anne Albert, Chair
- Huron Perth Public Health Board of Health, c/o Councillor Kathy Vassilakos, Chair
- Kingston, Frontenac and Lennox & Addington Health Unit Board of Health, c/o Deputy Warden - Frontenac Islands Denis Doyle, Chair
- Lambton County Board of Health, c/o Kevin Marriott, County Warden and Chair
- Leeds, Grenville & Lanark District Health Unit Board of Health, c/o Doug Malanka, Chair
- Middlesex-London Health Unit Board of Health, c/o Maureen Cassidy, Chair
- Niagara Region Public Health & Social Services Committee, c/o Regional Councillor Pat Chiochio and Regional Councillor Barbara Greenwood, Co-Chairs
- North Bay Parry Sound District Health Unit Board of Health, c/o Nancy Jacko, Chair
- Northwestern Health Unit Board of Health, c/o Doug Lawrance, Chair
- Ottawa Board of Health, c/o Councillor Keith Egli, Chair

- Peel Board of Health, c/o Nando Iannicca, Regional Chair
- Peterborough Public Health Board of Health, c/o Mayor Andy Mitchell, Chair
- Porcupine Health Unit Board of Health, c/o Sue Perras, Chair
- Region of Waterloo Board of Health, c/o Karen Redman, Regional Chair
- Renfrew County and District Board of Health, c/o Janice Visneskie Moore, Chair
- Simcoe Muskoka District Health Unit Board of Health, c/o Deputy Mayor Anita Dubeau, Chair
- Southwestern Public Health Board of Health, c/o Warden Larry Martin, Chair
- Public Health Sudbury and Districts Board of Health, c/o Councillor René Lapierre, Chair
- Thunder Bay District Board of Health, c/o Councillor James McPherson, Chair
- Timiskaming Health Unit Board of Health, c/o Mayor Carman Kidd, Chair
- Wellington-Dufferin-Guelph Public Health Board of Health, c/o Mayor and Councillor George Bridge, Chair
- Windsor-Essex County Health Unit Board of Health, c/o Warden Gary McNamara, Chair
- York Region Community and Health Services Committee, c/o Regional Councillor Gino Rosati, Chair
- Gordon Fleming, Manager, Public Health Issues, Association of Local Public Health Agencies, Council of Medical Officers of Health
- Dr. Cory Neudorf, President, Urban Public Health Network
- Ian Culbert, Executive Director, Canadian Public Health Association
- Pegeen Walsh, Executive Director, Ontario Public Health Association
- Allan O'Dette, Chief Executive Officer, Ontario Medical Association
- Dr. Doris Grinspun, Chief Executive Officer, Registered Nurses' Association of Ontario
- Peter Cuthbert, Interim Executive Director, Canadian Association of Chiefs of Police
- Jeff McGuire, Executive Director, Ontario Association of Chiefs of Police
- Carole Saab, Chief Executive Officer, Federation of Canadian Municipalities
- Brian Rosborough, Executive Director, Association of Municipalities of Ontario

cc (via e-mail):

- Dr. Eileen de Villa, Medical Officer of Health, Toronto Public Health



Haldimand-Norfolk Health Unit – Special Board of Health Minutes

December 1, 2020
2:00pm
Council Chambers**

Present:	Chair Chris Van Paassen, Tom Masschaele, Michael Columbus, Ian Rabbitts, Ryan Taylor, Amy Martin, Kim Huffman
Absent with Regrets:	Kristal Chopp, Roger Geysens
Also Present:	Marlene Miranda, Dr. Shanker Nesathurai, Jason Burgess, Kevin Klingenberg

Approval of Agenda/Changes to the Agenda (Item 1)

1. **(Rabbitts/Masschaele)**

THAT the agenda be approved amended to include the following amendments:

Withdrawal - 3. A) Special Minutes – October 27, 2020

Withdrawal - 5. B) Draft letter – Resolution No. 4 October 27, 2020

Replace - 5. C) Agricultural Advisory Board Minutes October 27, 2020

Add - 4. B) Christmas staffing

Carried.

Disclosure of Pecuniary Interest (Item 2)

Adoption/Correction of Board of Health Meeting Minutes (Item 3)

A) Board of Health - November 3, 2020

The minutes of the Board of Health Meeting dated November 3, 2020 having been circulated for review and there being no errors or omissions noted were declared as adopted, signed by the Chair and Board Clerk and affixed with the Corporate Seal.

Staff Reports/Discussion Items (Item 4)

A) Medical Officer of Health Update

Dr. Nesathurai provided an update to the Board of Health. Staff responded to questions of the Board of Health.

2. (Martin/Rabbitts)

THAT the update from Dr. Nesathurai, Medical Officer of Health be received as information.

Carried.

B) Christmas staffing

Board Member Huffman inquired about staff working on December 25th and January 1st, and Marlene Miranda responded to her question.

Communications (Item 5)

- A) Evelyn Eichenbaum Manager, Citizen & Legislative Services/Clerk, Haldimand County
Re: Board of Health Governance

3. (Rabbitts/Masschaele)

WHEREAS the Haldimand Norfolk Health Unit services the needs of residents in both Haldimand County and Norfolk County;

AND WHEREAS the Board of Health, which governs decision-making for residents in both municipalities, consists of the Mayor and eight members of Norfolk Council;

AND WHEREAS Haldimand County is obliged to cover 40% of funding for the Health Unit with no governance representation on policy, program, or budget matters;

AND WHEREAS the current model of the Board of Health creates potential access and accountability issues due to lack of representation of Haldimand County;

AND WHEREAS members of Haldimand County Council would like to see a new governance structure established that includes members of Haldimand County Council as part of the decision-making body,

NOW THEREFORE BE IT RESOLVED THAT the Board of Health be requested to consider support for a modified governance structure that would incorporate members of Haldimand County Council as voting members of the Board of Health;

AND THAT staff be directed to develop options for a revised Board of Health governance structure, identify an implementation process, and report back to an upcoming Council in Committee meeting on next steps;

AND FURTHER THAT this resolution be forwarded to Norfolk County Council for their consideration.

Carried.

- B) Agricultural Advisory Committee Minutes - October 27, 2020 - (referred to BOH by Norfolk County Council November 17, 2020)

4. (Taylor/Rabbitts)

THAT Agricultural Advisory Board Minutes of October 27, 2020 be received as information;

AND FURTHER THAT staff be directed to bring back a report regarding issues identified in Motion 1, Motion 2 and Motion 3 of these Minutes.

Carried.

General Announcements (Item 6)

Confirming By-Law (Item 7)

- A) By-Law 2020-12-BH

Being a By-Law to Confirm the Proceedings of The Regular Board of Health for the Haldimand-Norfolk Health Unit at this Board of Health Meeting held on the 1st of December, 2020.

5. (Rabbitts/Taylor)

THAT By-Law 2020-12-BH Being a By-Law to Confirm the Proceedings of The Board of Health on the 1st Day of December, 2020 be approved, signed by the Chair and Clerk and affixed with the Corporate Seal.

Carried.

Adjournment (Item 8)

6. (Taylor/Rabbitts)

THAT the Board of Health adjourned at 3:22 pm.

Carried.

Board of Health Chair

Deputy Clerk

Board of Health – January 05, 2021

Subject: Delegated Authority – Confidential Information Sharing
Haldimand County
Report Number: CAO 20-38
Division: Office of the Chief Administrative Officer
Department: Administration
Purpose: For Decision

Executive Summary:

At the Norfolk County Council-In-Committee Meeting of December 8, 2020 there was a request for staff to present options to delegate authority to facilitate timely sharing of confidential information with Haldimand County.

Discussion:

Norfolk County serves as the Consolidated Service Manager (CSM) for Health and Social Services in Haldimand and Norfolk. This creates a unique relationship between the two municipalities.

In 2000 the Transition Board overseeing the new structures for both Haldimand and Norfolk approved of a system where a Health and Social Services Advisory Committee reported to Norfolk Council or the Haldimand-Norfolk Board of Health. This structure was then subsequently endorsed by the Ministry and became the established reporting protocol.

The larger challenge with this structure relates to concerns around appropriate representation from Haldimand County. Options to address representation will be advanced in a future report. The focus of this report is the sub-issue of reporting delays created by the existing structure.

Staff reports going to the Health and Social Services Committee usually take an additional Board of Health cycle to come forward. This can create difficulties in dealing with time-sensitive matters. To address this staff are requesting that the Norfolk County Chief Administrative Officer be permitted to provide confidential information to Haldimand County in instances where the Haldimand-Norfolk Board of Health will consider the matter in less than thirty (30) days. This change won't alter the approved

reporting structure, however does provide options to address time-sensitive items without going to the Health and Social Services Committee.

As all delegated authorities should have accountability and transparency measures built in the two such requirements have been built into the proposed delegation By-Law:

- 1) Review and approval of the BOH Chair (or Vice-Chair in the Chairs absence);
- 2) Annual public reporting by the CAO or GM of Health of Social Services on the utilization of this delegation.

Financial Services Comments:

N/A

Interdepartmental Implications:

This delegation will assist the Haldimand-Norfolk Health Unit in meeting tight deadlines.

Strategic Plan Linkage:

N/A

Explanation:

This report is related to a process improvement to better facilitate information sharing as a result it doesn't directly link to established priorities.

Conclusion:

Staff recommend that the Board of Health adopt the delegation By-Law. This approval is an important process improvement and will ensure all sharing of confidential information is sanctioned under Council authority.

Recommendation(s):

THAT Report CAO 20-38 respecting Delegated Authority – Confidential Information Sharing Haldimand County, be received as Information.

Attachment(s):

By-Law 2021-02-BH

Submitted By:
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Chief Administrative Officer
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Prepared By:
Andy Grozelle
County Clerk
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Haldimand-Norfolk Board of Health

By-Law 2021-02-BH

Being a By-Law to Delegate Authority to for the sharing of Confidential Information to Haldimand Council and Senior Haldimand County staff pertaining to the Health Unit and Items under the jurisdiction of Norfolk County/Haldimand-Norfolk Health Unit as the Consolidated Service Manager

WHEREAS Section 23.1 of the *Municipal Act, 2001*, S.O. 2001, c. 25 provides that a municipality may delegate certain powers and duties;

AND WHEREAS Section 8(1) of the *Municipal Act, 2001*, S.O. 2001, c. 25, as amended, provides in part, that the powers of a municipality under this or any other Act shall be interpreted broadly so as to confer broad authority on the municipality to enable the municipality to govern its affairs as it considers appropriate and to enhance the municipality's ability to respond to municipal issues;

AND WHEREAS The *Town of Norfolk Act, 1999*, S.O. 1999, c. 14, *Sched. D* and The *Town of Haldimand Act, 1999*, S.O. 1999, c. 14, *Sched. B* in combination with the *Final Report of the Haldimand-Norfolk Transition Board of November 16, 2000* establish a system where all items to come before the Haldimand-Norfolk Board of Health first are required to be reviewed by the Health and Social Services Advisory Committee;

AND WHEREAS Time sensitive matters cannot always be brought before the Health and Social Services Advisory Committee prior to being considered by the Haldimand-Norfolk Board of Health and the Membership of the Health and Social Services Advisory Committee consist entirely of elected officials of Haldimand County and Norfolk County Councils.

NOW THEREFORE the Haldimand-Norfolk Board of Health hereby enacts as follows:

1. DEFINITIONS

In this By-Law:

- i) "Health-Unit" shall mean The Haldimand-Norfolk Health Unit
- ii) "Board" shall mean the Haldimand-Norfolk Board of Health

2. GENERAL

- 2.1 All authorities and powers delegated in this By-Law may be further designated in writing and are conveyed automatically to those performing the duties of a position in an Acting or interim capacity.
- 2.2 The Health Unit and the Corporation of Norfolk County retains sole ownership of all confidential information provided to Haldimand County and requires that Haldimand County maintains it as confidential pursuant to the overall requirements of the *Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56* with specific considerations of Sections 9, 10 and 11 and the *Personal Health Information Protection Act, 2004*
- 2.3 This By-Law does not represent an agreement between Norfolk County or the Health Unit with Haldimand County to share information. This By-law may be amended, suspended or repealed at any time at the sole discretion of the Board.

3. CHIEF ADMINISTRATIVE OFFICER – NORFOLK COUNTY

- 3.1 That the Chief Administrative Officer shall be permitted to provide confidential information to Haldimand County Council and senior staff pending the following criteria are met:
 - a) The issue is time sensitive and will be brought before the Board in a period of less than thirty (30) days for decision;
 - b) The Board Chair or in their absence the Board Vice-Chair reviews the material and agrees to the sharing of information;
- 3.2 Notwithstanding Section 3.1 the Health and Social Services Advisory Committee may refer any items to both Haldimand County and the Board for review and comment as they deem appropriate.
- 3.3 The Chief Administrative Officer or General Manager of Health and Social Services shall provide a public annual summary outlining all the occasions where this delegated authority was utilized.

4. BOARD CHAIR

- 4.1 The Board provides a limited exemption to Section 10.2 of the Code of Conduct for Council Members, By-Law 2018-34, to allow the position of the Chair or Vice-Chair authority to review confidential information developed under Section 3.1 of this By-Law and approve sharing of the confidential information with Haldimand County.

4.2 A decision by the Chair or Deputy Chair upon a request under 3.1 b) shall be limited to need under section 3.1 a) decisions upon non-time sensitive referrals to Haldimand County shall remain the purview of the Health and Social Services Advisory Committee and/or the Board.

5. ENACTMENT/REPEAL

This By-Law comes into effect immediately upon the date of passage.

ENACTED AND PASSED this 5th Day of January, 2021.

Chair

Norfolk County Clerk



The Board of Health

By-Law 2021-03-BH

Being a By-Law to Confirm the Proceedings of The Board of Health for the Haldimand-Norfolk Health Unit at this Board of Health Meeting held on the 5th of January, 2021.

WHEREAS Section 56 of the Health Protection and Promotion Act, R.S.O. 1990, c.H.7, as amended, provides that every Board of Health shall pass a by-law respecting the calling and proceedings at meetings;

AND WHEREAS it is deemed expedient that the proceedings of the Board at this Board of Health Meeting be confirmed and adopted by By-Law.

NOW THEREFORE the Board of Health for the Haldimand-Norfolk Health Unit hereby enacts as follows:

1. That the actions of The Board of Health for the Haldimand-Norfolk Health Unit at this Board of Health Meeting held 5th Day of January, 2021, and each motion and resolution passed and other action taken by The Board of Health for The Haldimand-Norfolk Health Unit at this meeting are hereby adopted and confirmed as if all such proceedings were expressly embodied in this By-Law.
2. That the Chair of the Board of Health and proper officials of the Haldimand-Norfolk Health Unit are hereby authorized and directed to do all things necessary to give effect to the actions of The Board of Health referred to in the preceding section hereof.
3. That the Mayor and Clerk are authorized and directed to execute all documents necessary in that behalf and to affix thereto the Seal of Norfolk County.

ENACTED AND PASSED this 5th Day of January, 2021.

Chair

County Clerk