



HEALTH AND SOCIAL SERVICES ADVISORY COMMITTEE

Monday September 27, 2021
9:30 a.m.

Microsoft Teams meeting

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13. Next Meeting – October 25, 2021

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Alternative Average Market Rent

Haldimand Norfolk Housing Corporation

Agenda:

- 3 Definitions
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- 15-16 Benefits of AAMR
- 17 Recommendation



Definitions

Median Market Rent (MMR)

The result of CMHC's annual Rental Market Survey, this represents the median of all rents currently being paid. This universe will range from long tenanted rent-controlled units to newly rented market units. Senior levels of government, in particular CMHC, utilize this benchmark for scoring on funding applications.

Alternate Average Market Rent (AAMR)

The Ministry of Municipal Affairs and Housing (MMAH) allows for the Service Manager (SM) to submit a Local Market Rent Survey and Business Case to be considered in approving AAMR's. Particularly CMHC will alternatively rely on these approved AAMR's instead of the MMR's in their funding applications.

How does AAMR Affect The Community?

RGI Units

Establishing an AAMR for the service area has no affect on households living in an RGI unit. RGI unit rents are established and controlled by the Housing Services Act and cannot be changed.

Households on the Waitlist

Households on the waitlist are eligible to live in RGI units, thus if they are placed in RGI units, their rents will not have increased. With the approval of an AAMR for the service area, they will have a greater opportunity to find affordable units. Without the approval of an AAMR, their options are limited to either RGI units with a long waitlist (up to 8 years) or market units which they cannot afford.

How does AAMR Affect The Community?



Rent Geared to Income
Takes households from the waitlist

AAMR
Takes households that are paying > 30% of Income on Housing (ex. in SA = 3,000 households)

How Does AAMR Affect The Community?

Portable Housing Units/Allowances

Establishing an AAMR for the service area will not affect households using a portable housing allowance. Households using a portable housing allowance pay affordable rents (80% of market rents) with the 20% difference paid by the allowance.

Households Facing Housing Affordability Issues

Households who pay more than 30% of their pre-tax income will have a greater opportunity to find affordable units with the approval of AAMR. Without the approval of an AAMR, their options are mainly limited to market units, which they cannot afford, while also not eligible for RGI units.

How Does AAMR Affect The Community?

Households Facing Deep Housing Affordability Issues

Households who pay more than 50% of their pre-tax income will have a greater opportunity to find affordable units with the approval of AAMR. Without the approval of an AAMR, their options are limited to either RGI units with a long waitlist (up to 8 years) or market units, which they cannot afford.

Community Housing Organizations

Providers such as HNHC, Dunnville Non-Profit Housing Corp. will be able to obtain federal and provincial funding and have access to a greater range of funds with the approval of an AAMR, which can be used to maintain existing units and for new housing units.

How Does AAMR Affect The Community?

Private Community Organizations and Developers

Easier access to obtain federal and provincial funding and a greater range of funds with the approval of an AAMR for new housing units. Currently affordable rents are below RGI rents and are not economically feasible.



How Does AAMR Affect The Community?

Service Manager / Haldimand and Norfolk County

With the approval of an AAMR, they will be able to obtain federal and provincial funding and a greater range of funds, foster an environment that allows community housing organizations and developers to create more affordable housing options for more residents, while not affecting households housed in RGI units.

Financially, funds garnered from federal and provincial sources will lower the cost to maintain existing RGI units and build new units.

Issues With MMR

Over-representing Older Stock in Small Communities

With smaller communities not experiencing the rental unit growth experienced in larger communities, the data is skewed to older rent controlled units bringing down the MMR.

Poor Data Quality in Small Communities

CMHC labels the reliability of their survey data, expressing this quality in an A – D grade. Haldimand and Norfolk’s survey data isn’t as high scoring as other municipalities with Norfolk’s Bachelor data receiving a “C” and Haldimand’s not scoring at all.

Issues With MMR

Materially Trailing Relative to Large Municipalities

As an example, Norfolk's 1Bed MMR is \$700 while Toronto Central's is \$1,650. The important comparison between these is that the cost to build in Toronto vs. Norfolk is the same aside from land costs. When the Local Housing Corporations (LHC's) are competing for funding to build, the smaller communities become handicapped in their applications without the AAMR's.

Below RGI Affordability Benchmark

With most senior levels of government requiring 80% of MMR or less to achieve affordable rents, this puts extreme downwards pressures on affordable rents in Haldimand and Norfolk. In the case of Norfolk, a 1Bed 80% MMR would be need to charge no more than \$560. This creates a situation where RGI tenants could be paying more in rent than an affordable unit tenants not waitlist eligible.

Prior to AAMR Study

Rent Matrix Comparison

	Norfolk County				
	Housing Income Limits	Max HILs Rent	CMHC 80% MMR	Observed Market Rent	Assumed Market Rent
Bachelor	24,500	613	440	800	900
1 Bed	31,000	775	560	1,200	1,000
2 Bed	38,000	950	592	1,600	1,400
3 Bed	43,500	1,088			1,800
4 Bed	54,000	1,350			2,000
5 Bed	54,000	1,350			2,200

Comparison - AAMR Study

Bedroom Type	Norfolk County			Recommended AAMR - Service Area	
	Housing Income Limits	Max HILS Rent	CMHC 80% MMR	80% of Recommended AAMR	Recommended AAMR
Bachelor	\$24,500	\$613	\$440	\$772	\$965
1 Bedroom	\$31,000	\$775	\$560	\$1,049	\$1,312
2 Bedroom	\$38,000	\$950	\$592	\$1,311	\$1,639
3 Bedroom	\$43,500	\$1,088	N/A	\$1,446	\$1,808
4 Bedroom	\$54,000	\$1,350	N/A	\$1,780	\$2,225

Comparison - AAMR Study

Bedroom Type	Haldimand County			Recommended AAMR - Service Area	
	Housing Income Limits	Max HILS Rent	CMHC 80% MMR	80% of Recommended AAMR	Recommended AAMR
Bachelor	\$24,500	\$613	N/A	\$772	\$965
1 Bedroom	\$31,000	\$775	\$600	\$1,049	\$1,312
2 Bedroom	\$38,000	\$950	\$611	\$1,311	\$1,639
3 Bedroom	\$43,500	\$1,088	\$660	\$1,446	\$1,808
4 Bedroom	\$54,000	\$1,350	N/A	\$1,780	\$2,225

Benefits of AAMR

Higher Scoring on Funding Applications

For CMHC's Co-Investment program which funds both New Developments and Repair & Renewal of existing housing stock, the amount of funding provided is directly tied towards achieving deeper affordability targets. With AAMR's being used in place of MMR's, more units in any given development would meet deeper affordability targets and thus giving higher scoring.

	Answer	Weighted Score	Percentage score
Affordability		150	100%
What percentage of units are at rental costs less than 80% of median market rent?	→ 5. Above 50% of units at rental cost of less than 80% of Median Market Rent	75	
For units that are designated as affordable, what is the average rental amount?	→ 5. Designated affordable units, on average, are below 50% of the Median Market Rent	75	
<ol style="list-style-type: none"> 1. Designated affordable units, on average, are at or above 80% of the Median Market Rent 2. Designated affordable units, on average, are within 70 - 79% of the Median Market Rent 3. Designated affordable units, on average, are within 60 - 69% of the Median Market Rent 4. Designated affordable units, on average, are within 50 - 59% of the Median Market Rent 5. Designated affordable units, on average, are below 50% of the Median Market Rent 			

Benefits of AAMR

Higher Operating Cash Flows

With AAMR's being higher than MMR's, the rental revenues within the developments will be able to generate higher Net Operating Income's (NOI) without the need for any additional subsidy. This increased NOI can result in a more sustainable and self-funded development.

Less Municipal Funding Required

The increased NOI, in the case of new developments, will result in an increased ability to take-on debt. This ability to afford more debt will directly reduce the upfront contribution needed from the county to fully fund the development.

Recommendation

It is strongly recommended that the Service Manager prepare a business plan for submission to the Ministry of Municipal Affairs and Housing (MMAH)

This will allow HNHC to:

1. Access more upper-level government funding
2. Reduce the contribution required from Haldimand and Norfolk counties
3. Provide more financially sustainable developments
4. Repair and renew existing assets

thank you!



Alternative Average Market Rent

Haldimand Norfolk Housing Corporation

Advisory Committee Meeting – September 27, 2021

Council-In-Committee – October 12, 2021

Subject: Request for Affordable Housing Alternate Average Market Rent (AAMR)
Report Number: HSS 21-17
Division: Health and Social Services
Department: Haldimand Norfolk Social Services and Housing
Purpose: For Decision

Executive Summary:

Through the Regeneration and Strategic Asset Management Planning process, the Haldimand Norfolk Housing Corporation (HNHC) brought forward a request to the Social Services & Housing department to request an Alternate Average Market Rent (AAMR) for affordable housing. This request, if approved by Council would then be submitted to the Ministry of Municipal Affairs and Housing for consideration and approval. The HNHC commissioned a study from Haerko Inc., the consultants who were retained for the regeneration and strategic asset management plans, to support their request. The study is attached to this staff report.

The purpose of this staff report is to present the AAMR study to Council with analysis of potential impacts, both positive and potentially negative, of implementing the AAMR as recommended by the consultant and to seek Council direction on whether to submit this request to the Ministry of Municipal Affairs and Housing for their approval.

Discussion:

The housing continuum includes three different types of rental housing based on the rent levels paid by the tenant: social or rent-geared-to-income (RGI) housing, affordable housing and market rent housing.

RGI Housing is non-profit rental housing that the municipality administers through the Social Services and Housing department and supports through annual operating subsidies. This is rental housing that was transferred from the Province to the municipalities in 2001. Applicants for RGI housing must apply through the centralized waiting list and must meet the eligibility criteria as set out in the provincial *Housing Services Act (HSA)*. The amount of rent that is paid by the tenant is calculated using the *HSA* formula. Generally speaking tenants pay rent based on their income (usually 30%

of their gross monthly income) and tenants receiving Ontario Works or Ontario Disability Benefits pay a set amount of rent each month based on the provincial rent and utility scales set out in the *HSA* for social assistance recipients.

Affordable housing is rental housing where the level of rent paid by the tenant is set at a rate that is lower than the average market rent. For affordable housing that has received capital and/or operating funding from a government funding program, this level is 80% of the average market rent. Each year the Ministry provides the Social Services & Housing Department with the average market rents per unit size as determined by the Canada Mortgage and Housing Corporation and the 80% level of the average market rent (AMR). The 80% of AMR is the maximum rent that an affordable housing landlord can charge if they are connected to the Social Services and Housing Department through a funding contribution agreement (e.g. Investment in Affordable Housing, Social Infrastructure Fund, Home for Good, National Co-Investment Fund).

Market rent is rental housing where the level of rent paid by the tenant is set by the landlord and based on what the market can bear and any stipulations set out in the *Residential Tenancies Act*. Market rent landlords are not governed by the *Housing Services Act* as they don't receive funding for capital or operating expenses from a level of government. If a landlord has a building that is mixed income (some affordable units and some market units), then they would only receive funding for the affordable units and would only be subject to the 80% AMR rent levels for the affordable units. Private market rental units are not within the scope of the Social Services & Housing department except to broadly encourage the development of rental housing in general.

This report applies only to affordable housing and the associated rent levels.

Currently, each year the Social Services & Housing Department receives a communication from the Ministry with the market rent levels per unit size as determined by Canada Mortgage and Housing and the 80% AMR levels to be used as the affordable rents. For 2021, the rent levels are as follows.

Unit Size	Average Market Rent	80% AMR	Maximum Allowable Affordable Rent
Bachelor	\$582	\$466	\$466
1 Bedroom	\$759	\$607	\$607
2 Bedroom	\$778	\$622	\$622
3 Bedroom	Data not available	Data not available	\$794
4 Bedroom	Data not available	Data not available	\$856

The maximum allowable affordable rent is the highest level of rent that can be paid by a tenant living in affordable housing.

Through the planning process for the Regeneration Master Plan and the Strategic Asset Management Plan, the Housing Corporation and their consultants brought forward the

concern that the average market rents that are being used to calculate the maximum allowable affordable rent are out of date and not reflective of the current market rents being charged in Haldimand and Norfolk Counties, and they requested that alternate average market rents, or AAMR's, be requested from the Ministry. The consultants undertook a study of the market rents in the two County service area which is attached to this staff report and, based on the study, are recommending the following AAMR's.

Unit Size	Alternate Average Market Rent	80% AAMR	Difference between 80% AAMR and 80% AMR
Bachelor	\$965	\$772	+ \$306
1 Bedroom	\$1312	\$1049	+ \$442
2 Bedroom	\$1639	\$1311	+ \$689
3 Bedroom	\$1808	\$1446	+ \$652
4 Bedroom	\$2225	\$1780	+ \$924

As is noted above, one of the reasons for the request for AAMR's is that the current AMR's as provided by the Ministry do not reflect the actual market rents being charged in the Counties. Connected to this, the concern is that developers are not able to build viable affordable housing without significant capital and/or operating subsidies from levels of government if they are not able to obtain adequate revenues from tenant rents. Staff acknowledge that the market level rents are substantially higher than what is currently used to calculate affordable rent levels.

It is also important to acknowledge that the cost of housing both for home ownership and rental has been and continues to be very high and that the cost of housing is not affordable for community members whose income is government assistance or who have employment income that is at or close to minimum wage. In setting AAMR's, Staff want to try to avoid unintended, negative consequences such as creating increased affordability challenges for some of our more vulnerable community members and potentially not addressing or even increasing homelessness or risk of homelessness.

To assist Council in decision making, Staff are providing the following scenarios to show the true affordability challenges with the AAMR levels that are being proposed.

Scenario #1: Single Senior (65 years +) whose income is Old Age Security including the Guaranteed Income Supplement living in a one bedroom apartment with rent at 80% AAMR.

Monthly Income: \$1562
 Rent: \$(1049)
 Heat and Hydro: \$(100)
 Tenant Insurance: \$(10)
 TV and Phone: \$(100)
 Medications: \$ (50)
 Food: \$ (200)

Total Estimated Expenses: \$ 1509

In this scenario, with estimated expenses including minimal expenses for medication and food, no expenses for a vehicle and no expenses for items like toiletries, clothing or entertainment, this person has \$53 left over at the end of the month. Additionally, 73% of their monthly income is being used for basic shelter costs. Staff would not consider this to be affordable as any additional expenses would leave the person with not enough money.

Scenario #2: Full-time (40 hour / week) minimum wage worker living in a one bedroom apartment with rent at 80% AAMR.

Gross Monthly Income:	\$2,296
Mandatory Payroll Deductions (15%):	\$(344)
Rent:	\$(1049)
Heat and Hydro:	\$(100)
Tenant Insurance:	\$(10)
TV and Phone:	\$(100)
Transportation (Car Insurance and Gas):	\$(200)
Food:	\$(200)
Total Estimated Expenses:	\$2003

In this scenario, with estimated expenses including minimal expenses for food and transportation for work purposes and no expenses for medications, toiletries, clothing or entertainment, this person has \$293 left at the end of the month. Staff have likely underestimated mandatory payroll deductions and have not included any additional employer specific deductions for items such as health benefits or uniforms which can be a possibility in the service industry. This does not leave much allowance for unexpected emergency expenses such as medication or car repairs and does not allow if a worker's hours should be reduced below 40 hours per week. Additionally, this person is paying 50% of their gross monthly income and 59% of their net (take home) monthly income in basic shelter costs. According to housing affordability standards, this would not be considered affordable as more than half of their actual monthly income is being spent on shelter (rent, heat and hydro). If this individual was a single parent who had additional expenses for their child for food, clothing, medication, etc. this scenario would be even more unaffordable and a two bedroom apartment at the 80% AAMR would not be attainable at all.

Staff did not calculate scenarios for individuals whose income is either Ontario Works or Ontario Disability Program benefits, as the proposed AAMR's are entirely out of their reach.

Staff acknowledge that the proposed rent levels may be affordable for couples who have more than one seniors' pension or who have more than one source of employment income and individuals who are making more of a living wage which has been estimated to be \$17-\$18 per hour in Haldimand and Norfolk.

In determining whether or not to approve the requested AAMR's, Staff respectfully suggest that it is important for Council to consider two questions: Who are the community members we are trying to house in affordable housing?, and, What is the overall goal of affordable housing development? Staff are concerned that, if the proposed AAMR levels are approved, we will not be able to provide these new developments as attainable and affordable options for individuals who are on the social housing waiting list, in emergency housing, at risk of homelessness and those who are homeless.

It should be noted that the number of RGI units in the Haldimand and Norfolk housing portfolio remains constant at this time. Therefore there is not a reduction in RGI units, meaning the same number of units are available for those with deeper affordability needs going forward. Although this will not necessarily reduce the number of people on the central waiting list, it will not necessarily cause it to grow either. What it will do is target a different sector in need of housing – those who do not necessarily meet the eligibility requirements to be placed on the central waiting list, yet they cannot afford market rent or home ownership.

Staff acknowledge that approving the proposed AAMR's may make it easier for developers to build viable affordable housing buildings and also, that the business cases for new affordable housing development that are contained within the HNHC Regeneration Master Plan are based on the assumption of AAMR approval. If the AAMR's are not approved, the HNHC will need to secure additional funding in order to proceed with the planned developments.

From a development perspective, Staff understand the reasoning of the request however from a true affordability perspective, Staff find it challenging to recommend support.

As an alternative, Council could decide to defer this report and direct Staff to undertake investigation with the Ministry, the Ontario Municipal Social Services Association and surrounding municipalities to bring forth AAMR levels that are closer to a true reflection of the actual market rents but would be affordable for a broader scope of community members.

At this time, given the analysis above and the affordability concerns, Staff are only able to recommend that Council receive the staff report and AAMR Study as information.

Financial Services Comments:

Norfolk

Staff agree with comments provided by Haldimand Financial Services staff below.

The Housing Corporation's budget is funded largely through rent revenue and municipal subsidy. By increasing rent revenue through the proposed AAMR, it is anticipated the

municipal subsidy would decrease, or that the funds would be held in reserve. These funds could then be used to offset anticipated increases in municipal subsidy from the asset strategies as detailed in the HNHC's Regeneration Master Plan, and presented within Council report HSS 21-12.

However, the increase from AMR to AAMR is quite substantial. Staff recommend time to provide further financial analysis in order to present Council with additional alternatives.

The report as presented does not contain any current year direct financial implications. Additional analysis would be required to determine future financial impacts.

Haldimand

From strictly a financial perspective, the increase to the AMR may reduce the required financial support from the respective municipalities for any existing or new Affordable Housing units. However, if the AMR is unattainable for a larger portion of the sector in need of supportive housing, it could lead to increased financial pressures on the municipality to provide alternative affordable housing options within the County.

As noted, there is the potential for increased AMR to make construction of new, mixed unit developments more financially affordable which could lead to an increase in Affordable Housing units and less financial support at the municipal level.

It would also appear that an increase in the AMR could have potential financial impacts on the Rent Supplement and Housing Allowance Programs. Although increased AMR would provide enhanced supports for the targeted groups of these services, it could lead to less people being supported if Provincial funding is not increased to offset the financial impacts of the increased AMR.

As a result, the unintended financial consequences could lead to an overall increase in needs for municipal support under the various supportive housing initiatives.

Specifically for Haldimand, the business case for the proposed new build by the HNHC in Dunnville is predicated on an increase in the AMR to make the building financially sustainable/revenue neutral. If the AMR is not increased, the loss in annual revenues needs to be offset from other revenue sources and it is not intended to be funded by increased Haldimand County contributions.

Interdepartmental Implications:

Norfolk

Haldimand

Haldimand staff have reviewed the report and concur with the information contained within it, recognizing this is a challenging issue. Haldimand staff would suggest that it is

important for the Advisory Committee to determine the target segment of the population that it is trying to address by providing housing that is affordable. If the goal is to continue to reduce the central waiting list, of which is made up of individuals and families from across Ontario, then approving updated AAMR's will most likely not help to achieve that goal, as those on the waiting list are more likely to need RGI housing, and an AAMR does not impact RGI. However if the goal is to address a segment of the population that is not eligible to be on the central waiting list, yet still cannot afford market rents or home ownership without some degree of subsidy, then revising the AAMR may help to address this segment. By providing more incentive for private development of affordable housing, there is a potential for additional affordable housing units overall, and notably units that do not require the same degree of municipal financial contribution that is currently necessary.

Consultation(s):

Strategic Plan Linkage:

This report aligns with the 2019-2022 Council Strategic Priority "Focus on Service".

Explanation:

The Social Services & Housing Department, as the Consolidated Municipal Services Manager for housing and homelessness is responsible for recommending programs, services and policies that support as many community members as possible to access affordable housing and prevent homelessness.

Conclusion:

As part of the Regeneration Master Plan process, and the development of the associated business cases for new affordable housing development, the HNHC commissioned a study for Alternate Average Market Rents. If approved, these rent levels would be a significant increase over the current allowable affordable rents. While this may assist developers in building new affordable housing, Staff are concerned that these rent levels will be unaffordable for individuals who are social assistance recipients, people with disabilities, seniors and those who are employed and earning minimum wage. For this reason, Staff are unable to recommend approval but could conduct research and bring back a future report on what would be an alternate average market rent level that would be more truly affordable.

Recommendation(s) of Health and Social Services Advisory Committee:

Recommendation(s):

THAT Report, HSS 21-17, Request for Affordable Housing Alternate Average Market Rent (AAMR), be received as information.

Attachment(s):

AAMR Study Completed by Haerko Inc.

Submitted By:

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Health and Social Services



Haldimand and Norfolk County

**Business Case Submission
Alternate Average Market Rent (AAMR) effective January 1, 2021
Program Maximum Rent for:**

**Rental Housing Capital Component, Rent Supplement/Housing Allowance and CMHC National Housing Strategy
Programs
Haldimand and Norfolk County**

1. Purpose of this Submission

The purpose of this submission is to request the approval of the Ministry of Municipal Affairs & Housing (MMAH) to allow Health and Social Services Haldimand and Norfolk to implement Alternate Average Market Rents (AAMR) and to continue to use the same AAMR for programs that require an annual maximum market rent commencing January 1, 2021. The request to harmonize the AAMR's for programs that require an annual maximum market rent would apply to:

- a) All Rental Housing Capital Programs
- b) All CMHC programs under the National Housing Strategy (e.g., Co-investment New Construction and Renewal and Repair, etc.)
- c) All Rent Supplement/Housing Allowance Programs; and
- d) Any subsequently delivered programs funded by a senior level of government where an Average Market Rent (AMR) must be established.

2. Reasons for the Request

Health and Social Services Haldimand and Norfolk requires AAMR's for the following reasons:

- a) To harmonize rents and ensure consistency and equality between and across all programs in the Haldimand and Norfolk County service area.
- b) Recognition that the Fall 2020 CMHC AMR data to be used in 2021 does not capture or reflect current actual market rent amounts and quickly changing trends in Haldimand and Norfolk Counties.
- c) To continue to achieve depth of affordability measurements for projects built under Rental Housing Capital Component Programs or Programs under the CMHC National Housing Strategy by using more accurate market rents.
- d) Rent Supplement and Housing Allowance Programs:
 - To accurately reflect the quickly changing and fluid dynamics of the Haldimand and Norfolk County rental market with respect to vacancy de-controlled rent amounts.
 - To prevent the need to only access lower rent units of inferior quality and standards and ensure continued access to quality, affordable housing in the Haldimand and Norfolk County region.

3. **Background**

a) **General**

On behalf of Health and Social Services Haldimand and Norfolk, Haerko Inc. undertook a market rental survey of available multi-residential one, two, three and four-plus bedroom apartments, semi-detached and single detached rentals in Haldimand and Norfolk County during February 2021. The survey included acceptable locations, building conditions, reputable landlords, and apartment buildings. The counties of Haldimand and Norfolk are considered separate zones within the CMHC Rental Housing Portal. The survey information and data in this report was analyzed and is presented based on the same approach.

Table 1 Total Population of Buildings Surveyed

The following Table 1 illustrates the need to establish AAMR's for the Haldimand Norfolk Service Area. The results of the Haldimand and Norfolk County survey indicate that the Fall 2020 CMHC AMR values lag significantly behind current market rent conditions in 2020 and do not reflect the current market rent values. Rent is defined and applied in this report as per the CMHC Rental Market Survey as follows:

Rent: *The rent refers to the actual amount tenants pay for their unit. No adjustments are made for the inclusion or exclusion of amenities and services such as heat, hydro, parking, and hot water. For available and vacant units, the rent is the amount the owner is asking for the unit. It should be noted that the average rents reported in this publication provide a sound indication of the amounts paid by unit size and geographical sector. Utilities such as heating, electricity and hot water may or may not be included in the rent.*

This information may be found under the following link: <https://www03.cmhc-schl.gc.ca/hmip-pimh/en/TableMapChart/RmsMethodology>

Table 1 Need for Haldimand and Norfolk County AAMR

		UNIT TYPE				
		Bachelor	One Bedroom	Two Bedroom	Three Bedroom	Four Bedroom
Haldimand County	2021 CMHC CMA AMR from Fall 2020 Survey	**	748	807	**	**
	2021 Survey AMR	1040	1336	1388	1823	2246
Norfolk County	2021 CMHC CMA AMR from Fall 2020 Survey	**	765	779	**	**
	2021 Survey AMR	915	1291	1858	1783	2150
** Data suppressed to protect confidentiality or data not statistically reliable. (CMHC Portal Notes)						

4. Framework and Proposed AAMR's for Haldimand and Norfolk County

The data to assess and determine the 2021 Haldimand and Norfolk County AAMR's is presented in the attached Appendix 1.

To achieve a fair and reasonable approach in establishing AAMR's for all programs required to implement a maximum rent feature and ensure successful and sustainable delivery of the respective programs, the following framework was adopted to establish the 2021 AAMR's.

Haerko Inc. conducted an in-depth market survey of primary and secondary market rental units throughout Haldimand and Norfolk County. This was done primarily through digital research and utilized various resources such as rental listing websites, realtor websites, and property management companies. Secondly, contact was made to multiple apartment buildings and property management companies to contribute additional market data.

Haerko Inc. staff that completed the survey indicated that data for bachelor units was the most difficult to obtain with a limited number of bachelor vacancies being posted, as well as four+ bedroom units in Norfolk County.

The combined AMR in both Table 3 and Appendix 1 was achieved through the average of the total number of surveyed units from both Haldimand and Norfolk County.

5. Request for MMAH Approval

Health and Social Services Haldimand and Norfolk requests MMAH approval to adopt the AAMR amounts provided in Table 2 for all programs that require a maximum market rent amount effective January 1, 2021:

Table 2 Haldimand and Norfolk County Proposed 2021 AAMR

	UNIT TYPE				
	Bachelor	One Bedroom	Two Bedroom	Three Bedroom	Four Bedroom
County of Haldimand	1040	1336	1388	1823	2246
County of Norfolk	915	1291	1858	1783	2150
Combined and Recommended AAMR	<u>965</u>	<u>1312</u>	<u>1639</u>	<u>1808</u>	<u>2225</u>
Note: All figures are rounded to the nearest whole number.					

6. Proposed 2021 Haldimand and Norfolk County AAMR's Impact on Tenants

a) Rent Supplement and Housing Allowance Programs

The proposed AAMR's will create the opportunity for expanded choices in securing quality, affordable housing in a tight rental market. Conversely, the proposed AAMR's will assist in avoiding situations where an applicant has little to no alternative but to secure sub-standard housing. Health and Social

Services Haldimand and Norfolk has appropriately utilized rent supplements and housing allowances to stabilize populations that meet Ministry preferred priority target groups (e.g., survivors of domestic violence and human trafficking, chronically homeless, Indigenous, and youth). A positive impact for applicants and tenants under Rent Supplement and Housing Allowance programs is anticipated with the enhanced support they will receive under the Housing First and Homelessness programs. Rent Supplements and Housing Allowances are fully funded by provincial funding received by the Social Services and Housing Department and are only available as funding permits. All programs are currently operating at full capacity with waiting lists.

b) Rental Housing Capital Programs and CMHC Programs Under the National Housing Strategy

There is no impact on existing tenants occupying units built/renovated under Rental Housing Capital Programs and the CMHC programs under the National Housing Strategy. In addition, adopting the proposed AMMR's will provide a more accurate measurement of the Depth of Affordability for projects funded under these programs. Furthermore, this increased revenue will improve the viability of projects which have the potential to result in the construction of more affordable housing and/or increase the amount of federal funding for qualifying projects.

7. Contact Information


Health and Social Services Haldimand and Norfolk

Name Ms. Heidi VanDyk
Title Director
Contact info. 519-426-6170 x. 3122 heidy.vandyk@hnhss.ca

Haerko Inc

Name Mr. Hans Kogel
Title President
Contact Info 226-348-5204 hkogel@haerkoinc.co

Appendix 1 - Rental Market Survey by Unit Type

 2021 Rental Rates - Bachelor Unit						
Contact Name Landlord / Compar	Building Type	Rental Rate	County	Town	Address	
Murray Kijiji	Apartment	\$ 845.00	Norfolk	Port Dover	301 Main Street	
Adam freerentads.com	Apartment	\$ 700.00	Norfolk	Simcoe	14 Robinson St.	
Julie freerentads.com	House	\$ 1,200.00	Norfolk	Port Dover	Brown St.	
n/a Kijiji	Apartment	\$ 1,200.00	Haldimand	Dunnville	<i>Info not provided</i>	
Andy Virk Local Sachem Newspaper	Apartment	\$ 880.00	Haldimand	Caledonia	172 Argyle St N	
Haldimand - AMR	\$	1,040.00				
Norfolk - AMR	\$	915.00				
Combined - AMR	\$	965.00				

DRAFT



2021 Rental Rates - One Bedroom Unit

Contact Name Landlord / Company	Building Type	Rental Rate	County	Town	Address
Andy Virk Caledonia Luxury	Apartment	\$ 1,260.00	Haldimand	Caledonia	<i>Info not provided</i>
Jo-Ann kijiji	Apartment	\$ 1,400.00	Haldimand	Dunnville	121 Main St. E
n/a kijiji	Apartment	\$ 1,350.00	Haldimand	Cayuga	22 Talbot St W
n/a kijiji	Apartment	\$ 1,150.00	Haldimand	Cayuga	22 Talbot St W
Guimero Holdings	Apartment	\$ 1,129.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
Not Provided kijiji	House	\$ 2,150.00	Haldimand	Dunnville	49 Old River Rd
Guimero Holdings	Apartment	\$ 1,219.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
Guimero Holdings	Apartment	\$ 1,029.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
Paul kijiji	Apartment	\$ 1,850.00	Norfolk	Simcoe	<i>Info not provided</i>
Alexander Realtor.ca	Apartment	\$ 1,850.00	Norfolk	Waterford	89 Bruce Street
Not Provided	Apartment	\$ 1,200.00	Norfolk	Simcoe	<i>Info not provided</i>
Greg kijiji	Apartment	\$ 1,175.00	Norfolk	Simcoe	306 South Drive
Oak	Apartment	\$ 1,175.00	Norfolk	Simcoe	53 Oakwood Ave
Oakdale Apartments	Apartment	\$ 1,175.00	Norfolk	Oakdale	53 Oakdale
Sunridge	Apartment	\$ 1,150.00	Norfolk	Waterford	46 Auty St.
Gloria Kijiji	Apartment	\$ 1,050.00	Norfolk	Port Dover	88 Kolbe Dr
Brandon Auty	Apartment	\$ 995.00	Norfolk	Waterford	46 Auty St.
Haldimand - AMR	\$	1,335.88			
Norfolk - AMR	\$	1,291.11			
Combined - AMR	\$	1,312.18			



2021 Rental Rates - Two Bedroom Unit

Contact Name Landlord / Compar	Building Type	Rental Rate	County	Town	Address
Gumiero Holdings	Apartment	\$ 1,229.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
Gumiero Holdings	Apartment	\$ 1,129.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
Gumiero Holdings	Apartment	\$ 1,319.00	Haldimand	Dunnville	102, 112, 122 & 130 Argyle St. N
<i>Info not provided</i> Kijiji	Apartment	\$ 900.00	Haldimand	Dunnville	201 Broad St E
Donald Plouffe Realtor.ca	House	\$ 2,000.00	Haldimand	Hagersville	5 Alexis Drive
Andy Virk Caledonia Luxury	Apartment	\$ 1,440.00	Haldimand	Caledonia	<i>Info not provided</i>
Krysten Kijiji	House	\$ 1,700.00	Haldimand	Dunnville	<i>Info not provided</i>
Greg Kijiji	Apartment	\$ 1,795.00	Norfolk	Simcoe	11 Mill Pond Ct
Tom Kijiji	Apartment	\$ 2,500.00	Norfolk	Port Dover	13 Drayton St
Penny Kijiji	Apartment	\$ 1,600.00	Norfolk	Simcoe	21 Kent St S
Anthony Kijiji	Apartment	\$ 1,200.00	Norfolk	Simcoe	256 Cedar St.
Greg Kijiji	House	\$ 1,300.00	Norfolk	Simcoe	312 Colborne St N
Brandon Auty Sunridge Apartments	Apartment	\$ 1,575.00	Norfolk	Waterford	46 Auty St.
John Notarianni Realtor.ca	House	\$ 3,250.00	Norfolk	Port Dover	80 New Lakeshore Rd
Paul Kijiji	House	\$ 1,650.00	Norfolk	Simcoe	<i>Info not provided</i>
Haldimand - AMR	\$	1,388.14			
Norfolk - AMR	\$	1,858.75			
Combined - AMR	\$	1,639.13			



2021 Rental Rates - Three Bedroom Unit

Contact Name Landlord / Company	Building Type	Rental Rate	County	Town	Address
Ashish Kijiji	House	\$ 2,400.00	Haldimand	Caledonia	34 Oaktree Drive
Saqib Kazmi Realtor.ca	House	\$ 2,190.00	Haldimand	Caledonia	32 Oaktree
Info not provided Kijiji	House	\$ 1,650.00	Haldimand	Caledonia	29 Inverness St
Mark Kijiji	Apartment	\$ 1,575.00	Haldimand	Dunnville	201 Broad St E.
McKenzie	Townhouse	\$ 1,300.00	Haldimand	Jarvis	50 Peel St. E
Alan Dean Realtor.ca	Townhouse	Not included - Outlier \$3,500.00	Norfolk	Port Dover	114 Brown Street
Jaipal Kijiji	Townhouse	\$ 2,100.00	Norfolk	Simcoe	Adams Ln
Eric Kijiji	Apartment	\$ 1,800.00	Norfolk	Simcoe	Info not provided
Info not provided Kijiji	Apartment	\$ 1,450.00	Norfolk	Simcoe	Info not provided
Haldimand - AMR	\$	1,823.00			
Norfolk - AMR	\$	1,783.33			
Combined - AMR	\$	1,808.13			



2021 Rental Rates - Four Bedroom Unit

Contact Name Landlord / Company	Building Type	Rental Rate	County	Town	Address
Feefa Khan Realtor.ca	House	Not included - Outlier \$3,400.00	Haldimand	Caledonia	25 Derby Crescent
Rami Kijiji	House	\$ 2,600.00	Haldimand	Caledonia	7 Malcolm Crescent
Marcus Premakumar Realtor.ca	House	\$ 2,400.00	Haldimand	Caledonia	32 Sumac Drive
Aizaz Kijiji	Apartment	\$ 2,400.00	Haldimand	Caledonia	34 Maclaughlin Ave
Aizaz Kijiji	Apartment	\$ 2,400.00	Haldimand	Caledonia	Maclaughlin Ave
Ruchi Chawla Kijiji	House	\$ 2,375.00	Haldimand	Caledonia	8 Fleming Crescent
N/a Kijiji	House	\$ 2,100.00	Haldimand	Jarvis	Main St N
McKenzie	Townhouse	\$ 1,450.00	Haldimand	Jarvis	50 Peel St. E
Shawn Spence Kijiji	House	\$ 2,200.00	Norfolk	Simcoe	4 Anderson Ave
Nafia	House	\$ 2,100.00	Norfolk	n/a	Info not provided
Haldimand - AMR	\$	2,246.43			
Norfolk - AMR	\$	2,150.00			
Combined - AMR	\$	2,225.00			



HEALTH AND SOCIAL SERVICES ADVISORY COMMITTEE MINUTES

9:30 a.m.

Monday, July 19, 2021

Microsoft Teams Meeting

Present: Councillor Tony Dalimonte (Chair), Councillor Bernie Corbett, Councillor Stewart Patterson, Councillor Chris Van Paassen, Councillor Ryan Taylor

Also Present: Heidi Van Dyk-Ellis, Stephanie Rice, Stephanie Pongracz, Syed Shah, Matthew Harrington, Kostya Lysenko, Lori Friesen, Kristen Demeulemeester (Recorder)

Regrets: Councillor Kim Huffman

1. Disclosure of Pecuniary Interest

None were reported.

2. Additions to Agenda

Addition - 9. Other Business – Automated Chlorination System

3. Adoption/Correction of Advisory Committee Meeting Minutes

A. Health and Social Services Advisory Committee Meeting Minutes dated June 21, 2021.

The minutes of the Health and Social Services Advisory Committee meeting dated June 21, 2021, having been distributed to all Committee Members and there being no errors reported, they were there upon declared adopted and signed by Chair Dalimonte.

4. Update on Reports

A. From the June 21, 2021 Meeting

Heidi VanDyk-Ellis, Acting General Manager, advised that Staff Report HSS 21-12, Haldimand Norfolk Housing Corporation Regeneration Master Plan and Strategic Asset Management Plan was approved as presented.

5. Consent Items

6. Staff Reports / Discussion Items

6.1 General Manager

Heidy VanDyk-Ellis, Acting General Manager, Health & Social Services, provided an update on changing the HSS Advisory Committee meeting schedule. The meetings will be changed to the 4th Monday of each month and a new schedule will be provided at the next scheduled meeting.

6.2 Public Health

A. COVID-19 Update

Heidy VanDyk-Ellis, Acting General Manager, Health & Social Services, provided an update on COVID-19. Information was provided to update committee on farm, workplace and congregate setting outbreaks as well as providing additional information regarding the vaccine rollout. Online booking can be accessed through the website at www.hnhu.org or by call 519-427-5903. Letters were sent to the youth of Haldimand and Norfolk providing information on the COVID-19 vaccination, including the benefits and risks, and how to book an appointment. Currently, only the Pfizer vaccine is approved for children 12 and older by Health Canada.

B. HSS 21-14

Re: Vector-Borne Disease Program Update 2020-2021

Kostya Lysenko, Public Health Inspector, presented Staff Report HSS 21-14, Vector-Borne Disease Program Update 2020-2021 and responded to questions of Committee.

Mover: Councillor VanPassen

Secunder: Councillor Corbett

6.3 Social Services and Housing

Mover: Councillor Corbett

Secunder: Councillor Taylor

THAT Staff Report HSS 20- 14, Vector-borne Disease Program Update 2020-21, be received as information;

AND THAT the Board of Health support the HNHU's Vector-borne program activities which include active surveillance and education regarding prevention strategies for Vector-Borne Diseases.

Carried.

6.4 Quality, Planning, Accountability and Performance

7. Sub-Committee Reports

8. Communications

A. Windsor-Essex County Health Unit

Re: Appeal to the Province of Ontario – Public Health Funding

B. North Bay Parry Sound District Health Unit

Re: Public Health Funding for 2022

9. Other Business

A. Automated Chlorination System

Clarification was given regarding the change in legislation for outdoor public pools chlorination systems. Modifications are permitted to allow manual addition of chlorine. There was a small delay in providing this information to the public due to the Health Unit needing time to review the changes and ensure it was being done safely.

10. Adjournment

11. Next Meeting – Monday September 27, 2021 at 9:30 a.m.

Chair

Secretariat

Advisory Committee Meeting – September 27, 2021

Board of Health Meeting – October 6, 2021

Subject: Rabies Investigation Report Requests
Report Number: CAO 21-62
Division: Health and Social Services
Department: Haldimand Norfolk Health Unit
Purpose: For Information

Executive Summary:

The purpose of this report is to provide context to the Board about a proposed new Clerk's Department freedom of information user fee to be introduced at the upcoming October 12, 2021, Budget Committee for dog bite investigation file requests.

Discussion:

Clerk's Department is the consolidated service provider for access to information services of Norfolk County, Haldimand-Norfolk Health Unit and its affiliated boards and committees. Access to information services include processing access requests submitted under the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and for personal health information requests submitted under the Personal Health Information Protection Act (PHIPA) to the health unit.

Incoming requests received at the Clerk's Department are reviewed to determine how to manage each type of access request as a part of the broader access to information program. When access requests submitted under MFIPPA are received, it is determined if a more appropriate method for disclosure should be implemented based in part on the request wording, the frequency of the type of information that gets requested, and staff resource requirements to process the request.

Clerk's access to information services program is developed to limit processing access requests under MFIPPA to only when necessary and promote disclosure of routinely requested information outside of MFIPPA. The reason behind this approach is to promote timely service to requesters, appropriately recoup costs associated with disclosure and limit the staff resources needed for fulfilling legislative requirements of formal access requests.

Haldimand-Norfolk Health Unit collects information from health care providers, police, vets, and individuals to assess and manage potential risks from individuals who have a suspected rabies exposure through an animal bite as required by Health Protection and Promotion Act Regulation 557 section 3 (Attachment A).

Access requests under MFIPPA (FOI requests) related to rabies investigations involving dog bite incidents are becoming more routine. Animal bite investigation files consist of a Rabies Investigation Form detailing the incident of the exposure and a Rabies Investigation Report of the follow-up action completed by the Public Health Inspector. Occasionally the FOI request wording also asks for inspection records from separate municipal institutions of Haldimand or Norfolk County's By-Law Enforcement units related to the incident, resulting in either a partial request transfer or a consultation extension. FOI requests for by-law enforcement records require more staff resources as additional searches are required and a more complex review on releasing by-law enforcement records are undertaken.

Prior to 2020, rabies investigation reports for dog bite investigation FOI requests were rare. In 2020, five of eleven FOI requests received at the health unit were related to dog bite investigation files. To date in 2021, the frequency of these FOI requests has increased to eight of eleven total FOI requests.

The ability to recover or charge additional costs when processing these FOI requests is limited under MFIPPA since these requests are for personal information. In accordance with MFIPPA Regulation 823 section 6.1 (Attachment B), the only eligible additional cost for this type of personal information request is photocopying at 20 cents per page. These requests usually consist of less than 15 pages and subsequently it becomes more efficient to waive any eligible additional fees.

The solution staff are presenting is to process rabies investigation file requests as personal health information requests under PHIPA beginning in 2022. Processing animal bite investigation requests are eligible under PHIPA for the following three reasons:

- Haldimand-Norfolk Health Unit is a health information custodian as defined in PHIPA section 3(1) paragraph 6 (Attachment C Part 1)
- Both the Rabies Investigation Form and the follow-up Rabies Investigation Report contain personal health information as defined in PHIPA section 4(1)(a) (Attachment C Part 2) as the information relates to the physical health of the victim who requests the records by describing the sustained injury from the animal bite.
- The personal health information is contained within a mixed record as defined within PHIPA section 4(3) (Attachment C Part 3), making the whole record eligible to be considered personal health information.

Processing rabies investigation report requests as personal health information requests is beneficial because staff can better manage the request and it enables more cost

recovery and aligns with the actual costs to provide the information. Access requests can be made easier and more efficient when processed under PHIPA compared to MFIPPA, creating a compounding effect of more timely responses to the requester without limiting their rights to appeal to the Information and Privacy Commissioner (IPC). The annual reporting burden to the IPC is lessened and our PHIPA stats will accurately reflect the type of information requests received at the health unit.

Rabies investigation report requests will be completed in accordance with the legislative requirements of processing a personal health information request outlined in PHIPA section 54 (Attachment C Part 4). Subsection 11 permits charging fees as prescribed or an amount not exceeding reasonable cost recovery. Staff will review the costs associated with processing rabies investigation reports under PHIPA and present a prescribed fee at reasonable cost recovery for consideration at the October 12 Budget Committee User Fees. The user fee will be listed under the freedom of information category with the Clerk's Department. Fee waivers can be considered upon request and in accordance with PHIPA for individuals who cannot afford the fee.

FOI requests may still be separately submitted to either Norfolk or Haldimand County, however access to law enforcement records are limited. A review of IPC orders related to dog bite requests for information found that dog bite investigation file requests submitted through MFIPPA is limited to By-law enforcement units for information regarding complainants contact information. Staff will work with the requester at intake to identify limited access issues with the request wording and assist in reformulating the request to maximize access or redirect them to submit a personal health information request with the health unit.

Requesting personal health information in neighboring local public health units is limited to describing the process outlined in legislation without specifying the types of personal health information that gets requested. A procedural outline specific to rabies investigation report requests will be posted in early 2022 on the Access to Information Services webpage for clarity to the public given the unique consolidated service provider relationship with Clerk's Department.

Financial Services Comments:

Norfolk

One area of the budget process includes that is all departments continue to develop user-paid initiatives for their services based on the user fee policy established by Council and on projected costs of providing services. Staff should also take an aggressive approach to maintaining existing revenue levels wherever possible and focus on areas where new or expanded sources of revenues can be developed. Staff's recommendation to establish a new fee is innovative and follows established budget guidance.

To develop this fee for Council's consideration, Financial Services staff will work with the Clerk's Department and the Haldimand Norfolk Health Unit to determine the full cost recovery for providing this service.

Haldimand

Haldimand Finance staff have reviewed this report and agree with the information provided by Norfolk Financial Services.

Interdepartmental Implications:***Norfolk***

Environmental Health will continue with retrieving rabies investigation forms and investigating reports the same way as when rabies investigation report requests were processed under MFIPPA.

Haldimand

Haldimand supports initiatives in providing information to the public in a simpler and cost effective manner through routine disclosure when applicable; while also recognizing that importance and legislative requirement to safeguard personal information.

Consultation(s):

Public Health Department was consulted.

Financial Services was consulted to determine procedures in establishing a user fee for rabies investigation report requests.

Strategic Plan Linkage:

This report aligns with the 2019-2022 Council Strategic Priority "Focus on Service" as the updated procedure intends to provide clarity and efficiency on access to information services at the Haldimand-Norfolk Health Unit.

Conclusion:

Rabies investigation report requests will be processed as personal health information requests under PHIPA beginning in 2022 with a reasonable cost recovery fee applied upon approval of the 2022 user-fee by-law in November 2021. Changes to the process will be updated on the access to information services webpage.

Recommendation(s):

THAT Staff Report CAO 21-62 regarding Rabies Investigation Report Requests be received as information.

Attachments:

Attachment A – Health Protection and Promotion Act Regulation 557 Section 3

Attachment B – Municipal Freedom of Information and Protection of Privacy Act Regulation 823 section 6.1

Attachment C – Personal Health Information Protection Act sections 3(1), 4(1)(3), 54

Submitted By:
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Chief Administrative Officer
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Attachment A

Health Protection and Promotion Act Regulation 557 Section 3

3. (1) A medical officer of health who receives information under section 2 and who finds any person has been exposed to a rabid or suspected rabid animal so as to require rabies post-exposure prophylaxis shall provide information, including details of exposure and prophylaxis administered, to the Ministry. O. Reg. 501/17, s. 2 (1).

(2) A medical officer of health or public health inspector who is of the opinion that a dog, cat or ferret may be rabid shall cause the dog, cat or ferret to be confined and isolated for at least ten days from all animals and persons, except the person caring for the dog, cat or ferret,

- (a) at the place of residence of the person caring for the dog, cat or ferret, if the dog, cat or ferret is free from symptoms of any disease; or
- (b) in a pound or veterinary hospital at the expense of the municipality in which the person caring for the dog, cat or ferret resides if the dog, cat or ferret exhibits symptoms of any disease or if, in the opinion of the medical officer of health or public health inspector, the person is unlikely to confine and isolate the dog, cat or ferret. R.R.O. 1990, Reg. 557, s. 3 (2); O. Reg. 501/17, s. 2 (2).

Attachment B**Municipal Freedom of Information and Protection of Privacy Act Regulation 823**

6.1 The following are the fees that shall be charged for the purposes of subsection 45 (1) of the Act for access to personal information about the individual making the request for access:

1. For photocopies and computer printouts, 20 cents per page.
2. For records provided on CD-ROMs, \$10 for each CD-ROM.
3. For developing a computer program or other method of producing the personal information requested from machine readable record, \$15 for each 15 minutes spent by any person.
4. The costs, including computer costs, that the institution incurs in locating, retrieving, processing and copying the personal information requested if those costs are specified in an invoice that the institution has received. O. Reg. 22/96, s. 2; O. Reg. 93/07, s. 2.

Attachment C

Part 1:

Personal Health Information Protection Act Section 3(1)

Health information custodian

3 (1) In this Act,

“health information custodian”, subject to subsections (3) to (11), means a person or organization described in one of the following paragraphs who has custody or control of personal health information as a result of or in connection with performing the person’s or organization’s powers or duties or the work described in the paragraph, if any:

6. A medical officer of health of a board of health within the meaning of the *Health Protection and Promotion Act*

Part 2:

Personal Health Information Protection Act Section 4

Personal health information

4 (1) In this Act,

“personal health information”, subject to subsections (3) and (4), means identifying information about an individual in oral or recorded form, if the information,

- (a) relates to the physical or mental health of the individual, including information that consists of the health history of the individual’s family

Part 3:

Mixed records

(3) Personal health information includes identifying information that is not personal health information described in subsection (1) but that is contained in a record that contains personal health information described in that subsection. 2009, c. 33, Sched. 18, s. 25 (3).

Part 4:**Personal Health Information Protection Act Section 54****Response of health information custodian**

54 (1) A health information custodian that receives a request from an individual for access to a record of personal health information shall,

- (a) make the record available to the individual for examination and, at the request of the individual, provide a copy of the record to the individual and if reasonably practical, an explanation of any term, code or abbreviation used in the record;
- (b) give a written notice to the individual stating that, after a reasonable search, the custodian has concluded that the record does not exist, cannot be found, or is not a record to which this Part applies, if that is the case;
- (c) if the custodian is entitled to refuse the request, in whole or in part, under any provision of this Part other than clause 52 (1) (c), (d) or (e), give a written notice to the individual stating that the custodian is refusing the request, in whole or in part, providing a reason for the refusal and stating that the individual is entitled to make a complaint about the refusal to the Commissioner under Part VI; or
- (d) subject to subsection (1.1), if the custodian is entitled to refuse the request, in whole or in part, under clause 52 (1) (c), (d) or (e), give a written notice to the individual stating that the individual is entitled to make a complaint about the refusal to the Commissioner under Part VI, and that the custodian is refusing,
 - (i) the request, in whole or in part, while citing which of clauses 52 (1) (c), (d) and (e) apply,
 - (ii) the request, in whole or in part, under one or more of clauses 52 (1) (c), (d) and (e), while not citing which of those provisions apply, or
 - (iii) to confirm or deny the existence of any record subject to clauses 52 (1) (c), (d) and (e). 2004, c. 3, Sched. A, s. 54 (1); 2007, c. 10, Sched. H, s. 20 (1, 2).

Providing reasons

(1.1) A custodian acting under clause (1) (d) shall not act under subclause (1) (d) (i) where doing so would reasonably be expected in the circumstances known to the person making the decision on behalf of the custodian to reveal to the individual, directly or indirectly, information to which the individual does not have a right of access. 2007, c. 10, Sched. H, s. 20 (3).

Time for response

(2) Subject to subsection (3), the health information custodian shall give the response required by clause (1) (a), (b), (c) or (d) as soon as possible in the circumstances but no later than 30 days after receiving the request. 2004, c. 3, Sched. A, s. 54 (2).

Extension of time for response

(3) Within 30 days after receiving the request for access, the health information custodian may extend the time limit set out in subsection (2) for a further period of time of not more than 30 days if,

- (a) meeting the time limit would unreasonably interfere with the operations of the custodian because the information consists of numerous pieces of information or locating the information would necessitate a lengthy search; or
- (b) the time required to undertake the consultations necessary to reply to the request within 30 days after receiving it would make it not reasonably practical to reply within that time. 2004, c. 3, Sched. A, s. 54 (3).

Notice of extension

(4) Upon extending the time limit under subsection (3), the health information custodian shall give the individual written notice of the extension setting out the length of the extension and the reason for the extension. 2004, c. 3, Sched. A, s. 54 (4).

Expedited access

(5) Despite subsection (2), the health information custodian shall give the response required by clause (1) (a), (b), (c) or (d) within the time period that the individual specifies if,

- (a) the individual provides the custodian with evidence satisfactory to the custodian, acting on a reasonable basis, that the individual requires access to the requested record of personal health information on an urgent basis within that time period; and
- (b) the custodian is reasonably able to give the required response within that time period. 2004, c. 3, Sched. A, s. 54 (5).

Frivolous or vexatious requests

(6) A health information custodian that believes on reasonable grounds that a request for access to a record of personal health information is frivolous or vexatious or is made in bad faith may refuse to grant the individual access to the requested record. 2004, c. 3, Sched. A, s. 54 (6).

Effect of non-compliance

(7) If the health information custodian does not respond to the request within the time limit or before the extension, if any, expires, the custodian shall be deemed to have refused the individual's request for access. 2004, c. 3, Sched. A, s. 54 (7).

Right to complain

(8) If the health information custodian refuses or is deemed to have refused the request, in whole or in part,

- (a) the individual is entitled to make a complaint about the refusal to the Commissioner under Part VI; and

(b) in the complaint, the burden of proof in respect of the refusal lies on the health information custodian. 2004, c. 3, Sched. A, s. 54 (8).

Identity of individual

(9) A health information custodian shall not make a record of personal health information or a part of it available to an individual under this Part or provide a copy of it to an individual under clause (1) (a) without first taking reasonable steps to be satisfied as to the individual's identity. 2004, c. 3, Sched. A, s. 54 (9).

Fee for access

(10) A health information custodian that makes a record of personal health information or a part of it available to an individual under this Part or provides a copy of it to an individual under clause (1) (a) may charge the individual a fee for that purpose if the custodian first gives the individual an estimate of the fee. 2004, c. 3, Sched. A, s. 54 (10).

Amount of fee

(11) The amount of the fee shall not exceed the prescribed amount or the amount of reasonable cost recovery, if no amount is prescribed. 2004, c. 3, Sched. A, s. 54 (11).

Waiver of fee

(12) A health information custodian mentioned in subsection (10) may waive the payment of all or any part of the fee that an individual is required to pay under that subsection if, in the custodian's opinion, it is fair and equitable to do so. 2004, c. 3, Sched. A, s. 54 (12).



Toronto District School Board

Letter: Compulsory Vaccinations for Eligible Students

Friday, September 3, 2021

Categories: [Board and Trustee Governance](#)

September 3, 2021

Dear Minister Lecce, Dr. Moore and Dr. De Villa,

On behalf of the Toronto District School Board (TDSB), I am writing you to ask that COVID-19 vaccinations be added to the list of compulsory vaccinations for all eligible students.

The health and safety of our students, staff and school communities is and will always be our main priority as we navigate our way through this pandemic. This commitment consists of advocating for and implementing health and safety measures that further protect our communities from the spread of the virus, including, but not limited to, masking, ventilation, and vaccinations.

As you know, medical professionals and government officials in our city, province and country continue to advise the public that vaccinations are our greatest defence against COVID-19 and that being fully vaccinated significantly reduces the risks of the most serious outcomes of COVID-19, including the variants of concern to date. This is why the Board passed a motion to develop a mandatory COVID-19 vaccination procedure to cover all TDSB staff, trustees and visitors to disclose and provide proof of vaccination status so that our schools and workplaces remain as safe as possible for students and staff alike. However, we believe we can do more to protect our communities and that it's paramount that we do so.

In keeping with this, we are asking that COVID-19 vaccinations be added to the list of compulsory vaccinations for all eligible students. This would further protect our students, staff and their families from the virus and help keep our schools open, which is of the utmost importance to the learning and well-being of our students.

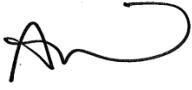
I would also like to mention that this request is supported by the Ontario Public School Boards' Association, as seen in a [statement](#) released on Aug. 17, 2021.

We hope that you highly consider our request as the new school year fast approaches and majority of our students are returning to in-person learning.

As always, I am available to discuss this at your earliest convenience.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Alexander Brown'. The signature is fluid and cursive, with a large initial 'A' and a long, sweeping underline that ends in a hook.

Alexander Brown

Chair, Toronto District School Board

Cc: The Ontario Public School Boards' Association; All Ontario Public School Boards

Tags:



Health and Social Services Advisory Committee

2021-2022 Meeting Schedule

All meetings are held on the fourth Monday of each month at Norfolk County Council Chambers, 50 Colborne Street, Simcoe or via Microsoft Teams at 9:30a.m. (unless otherwise specified).

2021

September 27
October 25
November 22

2022

January 24
February 28
March 28
April 25
May 23*
June 27
July 25
August 22
September 26
October 24
November 28

*If required, will be rescheduled due to Victoria Day

Contact Information

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