

Wednesday, October 11, 2023 – 9:30 a.m. County of Renfrew Administration Building

AGENDA

| 1. | Call to order. | |
|-------|---|-------------|
| 2. | Land Acknowledgement. | |
| 3. | Roll call. | |
| 4. | Disclosure of pecuniary interest and general nature thereof. | <u>Page</u> |
| 5. | Adoption of minutes of previous meetings held on September 13 and September 27, 2023. | 2 |
| 6. | Delegations: None at time of mailing. | |
| 7. | Administration Department Report: None at time of mailing. | |
| 8. | Emergency Services Department Report. | 8 |
| 9. | Long-Term Care Department Report. | 13 |
| 10. | Board of Health Minutes of July 25, 2023. | 23 |
| 11. | New Business. | |
| 12. | Closed Meeting: None at time of mailing. | |
| 13. | Date of next meeting (Wednesday, November 15, 2023) and adjournmen | t. |
| NOTE: | a) County Council: Wednesday, October 25, 2023. a) Submissions received from the public, either orally or in writing may | become part |

of the public record.



HEALTH COMMITTEE

Wednesday, September 13, 2023

A meeting of the Health Committee was held on Wednesday, September 13, 2023, at 9:30 a.m. at the County Administration Building, Pembroke, Ontario.

Present were: Chair Michael Donohue

Warden Peter Emon Vice-Chair Neil Nicholson Councillor Debbi Grills Councillor Valerie Jahn

Councillor Jennifer Murphy
Councillor Rob Weir

Councillor Mark Willmer

City of Pembroke Reps: Councillor Patricia Lafreniere

Councillor Troy Purcell

Staff Present: Craig Kelley, Chief Administrative Officer/Clerk

Mike Blackmore, Director of Long-Term Care Michael Nolan, Director of Emergency Services Jason Davis, Director of Development and Property

Laura LePine, Director of Community Services

Jennifer Dombroskie, Manager, Community Housing

Gwen Dombroski, Deputy Clerk

Tina Peplinskie, Media Relations and Social Media Coordinator

Rhonda Chaput, Administrative Assistant III

Chair Donohue called the meeting to order at 9:30 a.m.

Chair Donohue recited the land acknowledgement, identifying that the meeting was being held on the traditional territory of the Algonquin People.

The roll was called, and no pecuniary interests were disclosed.

RESOLUTION NO. H-C-23-09-99

Moved by Councillor Weir Seconded by Councillor Grills

THAT the minutes of the August 16, 2023, meeting be adopted. CARRIED.

The meeting agenda was amended to include a closed session to discuss a proposed or pending acquisition or disposition of land.

The Director of Emergency Services, and the Director of Community Services provided a PowerPoint presentation, regarding the creation of a Mental Health, Addictions and Homelessness Hub that aligns with the County of Renfrew Strategic Plan for Community Wellness and Healthcare, and Attainable Housing and Infrastructure.

RESOLUTION NO. H-C-23-09-100

Moved by Councillor Purcell

Seconded by Warden Emon

THAT the Health Committee direct staff to establish Terms of Reference and funding options to create a mobile Mental Health, Addiction, and Homelessness Health Hub. NOT VOTED ON.

RESOLUTION NO. H-C-23-09-101

Moved by Warden Emon

Seconded by Councillor Lafreniere

THAT the Health Committee direct staff to draft a Terms of Reference and investigate funding opportunities to create a mobile Mental Health, Addiction, and Homelessness Health Hub to present at the October Health Committee meeting for approval. CARRIED.

Emergency Services Report

The Director of Emergency Services overviewed the Emergency Services Department Report and Addendum, attached as Appendices A and B.

RESOLUTION NO. H-C-23-09-102

Moved by Councillor Willmer

Seconded by Councillor Nicholson

THAT the Health Committee recommend to County Council to adopt a By-law authorizing the Warden and CAO/Clerk to sign a renewal of the Agreement between the County of Renfrew Paramedic Service and Arnprior Regional Health to deploy Paramedics in the Emergency Department. CARRIED.

RESOLUTION NO. H-C-23-09-103

Moved by Councillor Purcell

Seconded by Councillor Weir

THAT the Emergency Services Department Report and Addendum attached as Appendices A and B be approved. CARRIED.

Committee recessed at 10:51 a.m. and reconvened at 11:00 a.m., with all members present except Laura LePine, Director of Community Services, and Jennifer Dombroskie, Manager of Community Housing.

Long-Term Care Report

The Director of Long-Term Care overviewed the Long-Term Care Report which is attached as Appendix C.

RESOLUTION NO. H-C-23-09-104

Moved by Councillor Weir

Seconded by Councillor Grills

THAT the Health Committee recommends to County Council that Policy G-009 Smoking Regulations with a review date of March 1, 2023, for the County of Renfrew Long-Term Care Homes, Bonnechere Manor and Miramichi Lodge remain applicable for an additional six-month period. CARRIED.

RESOLUTION NO. H-C-23-09-105

Moved by Councillor Lafreniere Seconded by Councillor Jahn

THAT the Health Committee recommend to County Council that the Restorative Care staffing complement at Bonnechere Manor is increased by two (2) full-time Physiotherapy Assistant positions (2,080 hours x 2) from existing part-time hours effective October 22, 2023. AND FURTHER THAT the Finance and Administration Committee be so advised. CARRIED.

RESOLUTION NO. H-C-23-09-106

Moved by Councillor Nicholson Seconded by Councillor Willmer

THAT the Health Committee recommend County Council award the Nurse Call System Upgrade Phase Two and Phase Three projects as per the County of Renfrew GA-01 Procurement of Goods and Services Policy, Section 20.7 for the quoted price of \$175,308.72 excluding HST to Cimtel Inc. / Wireless RNA Technology Inc. for KPI Software, Smart Report Module, 30 Corridor Displays and cabling and integration of Mitel Head End which was approved through the Miramichi Lodge 2023 Capital Budget. AND FURTHER THAT the Finance and Administration Committee be so advised. CARRIED.

RESOLUTION NO. H-C-23-09-107

Moved by Councillor Nicholson Seconded by Councillor Murphy

THAT the Health Committee recommend that County Council approve the reallocation of \$11,404 for the emergency repair to the energy recovery ventilation unit #4, from the \$25,000 previously approved in the 2023 Miramichi Lodge Budget for a study of the energy recovery ventilation rooftop system. AND FURTHER THAT the Finance and Administration Committee be so advised. CARRIED.

RESOLUTION NO. H-C-23-09-108

Moved by Warden Emon Seconded by Councillor Grills

THAT the Long-Term Care Department Report attached as Appendix C be approved. CARRIED.

Councillor Weir vacated the meeting at 11:30 a.m.

RESOLUTION NO. H-C-23-09-109

Moved by Councillor Willmer Seconded by Warden Emon

BE IT RESOLVED THAT the Health Committee move into a closed meeting pursuant to Section 239 of the Municipal Act, 2001, as amended to discuss a proposed or pending acquisition or disposition of land by the municipality or local board – Town of Renfrew.

Time: 11:31 a.m. CARRIED.

RESOLUTION NO. H-C-23-09-111

Moved by Councillor Purcell Seconded by Councillor Lafreniere

THAT this meeting resume as an open meeting. Time: 12:15 p.m. CARRIED.

New Business

Councillor Purcell provided a notice of motion that he would be providing a resolution for the October Health Committee Report for the establishment of a warming centre.

RESOLUTION NO. H-C-23-09-112

Moved by Councillor Nicholson Seconded by Councillor Jahn

THAT this meeting adjourn and that the next regular meeting be held on October 11, 2023. Time: 12:30 p.m. CARRIED.



SPECIAL MEETING OF HEALTH COMMITTEE

Wednesday, September 27, 2023

A special meeting of the Health Committee was held on Wednesday, September 27, 2023, at 9:50 a.m. at the County Administration Building, Pembroke, Ontario.

Present were: Chair Michael Donohue

Warden Peter Emon Vice-Chair Neil Nicholson Councillor Debbi Grills Councillor Valerie Jahn

Councillor Jennifer Murphy

Councillor Rob Weir Councillor Mark Willmer

And Others: Councillor David Mayville

Councillor James Brose Councillor Dan Lynch

City of Pembroke Reps: Councillor Patricia Lafreniere (attended virtually)

Regrets: Councillor Troy Purcell

Staff Present: Craig Kelley, Chief Administrative Officer/Clerk

Mike Blackmore, Director of Long-Term Care

Jason Davis, Director of Development and Property

Laura LePine, Director of Community Services

Lee Perkins, Director of Public Works

Mathieu Grenier, Deputy Chief, Emergency Services Curtis Farrell, Acting Deputy Chief, Emergency Services

Tina Peplinskie, Media Relations and Social Media Coordinator

Gwen Dombroski, Deputy Clerk

Rhonda Chaput, Administrative Assistant III

Chair Donohue called the meeting to order at 9:50 a.m.

Chair Donohue recited the land acknowledgement, identifying that the meeting was being held on the traditional territory of the Algonquin People.

The roll was called, and no pecuniary interests were disclosed.

Emergency Services Report

Deputy Chief Mathieu Grenier overviewed the Emergency Services Department Report which is attached as Appendix I.

Councillor Nicholson attended the meeting at 9:55 a.m.

RESOLUTION NO. H-C-23-09-113

Moved by Councillor Grills

Seconded by Councillor Jahn

THAT the Health Committee recommend that County Council adopt a By-law to amend By Law 103-23, signed June 28, 2023, for an amended Agreement between the County of Renfrew, and Ontario Health for funding to support the Renfrew County Virtual Triage and Assessment Centre for the term April 1, 2023, and ending on March 31, 2024, ("Fiscal Year"), to include additional funding for physician compensation in the amount of \$1,316,250, for total of \$4,416,250. CARRIED.

RESOLUTION NO. H-C-23-09-114

Moved by Councillor Murphy Seconded by Councillor Weir

THAT the Health Committee recommend that County Council adopt a By-law authorizing the Warden and CAO/Clerk to sign a Memorandum of Understanding between the County of Renfrew and the Petawawa Centennial Family Health Team (PCFHC) for administration of the Integrated Virtual Care (IVC) component of the VTAC program to provide attachment for previously unattached patients and provide physician services to the VTAC and IVC program. CARRIED.

RESOLUTION NO. H-C-23-09-115

Moved by Councillor Weir

Seconded by Councillor Willmer

THAT the Emergency Services Department Report, which is attached as Appendix I, be approved. CARRIED.

RESOLUTION NO. H-C-23-09-116

Moved by Councillor Jahn

Seconded by Councillor Lafreniere

THAT this meeting adjourn and the next regular meeting be held Wednesday, October 11, 2023.

Time: 9:57 a.m. CARRIED.

COUNTY OF RENFREW

EMERGENCY SERVICES REPORT

TO: Health Committee

FROM: Michael Nolan, Director of Emergency Services/Chief, Paramedic Service

DATE: October 11, 2023

SUBJECT: Department Report

INFORMATION

1 Mental Health, Addictions and Homelessness

At the September meeting Committee directed staff to create a Terms of Reference and investigate funding opportunities to create a mobile Mental Health, Addiction, and Homelessness Health Hub to present at the October Health Committee meeting for approval. The following attached as Appendix ES-I, is the basis for which an implementation plan will be based upon.

2. Oxford County – Visit to County of Renfrew Community Paramedic Program

Paramedics from the Oxford County Community Paramedic Program visited our Community Paramedic Program on September 12, 2023, to learn more about RCVTAC, general community paramedic programming, community paramedic educational requirements, documentation standards, and quality control measures.

3. Paramedic Services – Awards and Recognition

- Commander Amber Hultink will be a guest presenter at the Rural Community Hospice Day, hosted by Home Hospice North Lanark and Beth Donovan in Carleton Place, Ontario, on Friday, November 10, 2023. With the theme of The Power of Community Connection, exploring the unique experience of Hospice Palliative Care in small communities.
- Commander Hultink has been nominated by St. Lawrence College for the Premier's Award celebrating Ontario's outstanding graduates. The ceremony will be held at the Sheraton Centre Toronto Hotel on Monday, November 27, 2023.
- An article, co-authored by Deputy Chief Mathieu Grenier, titled, Violence Against Emergency Healthcare Workers: Different Perpetrators, Different Approaches, in the Journal of Aggression, Conflict and Peace, has won an award for Outstanding Paper in the 2023 Emerald Literati Awards.

 Advanced Care Paramedic, Matthew Lasek represented the Paramedic Service at Recovery Day, held on September 22, 2023, at Low Square in Renfrew, Ontario, hosted by McKay Manor. Recovery Day was held in support of stigma reduction and increased wellness, and to celebrate the many pathways to increased wellness in our community.

4. Emergency Management Program Committee

Every municipality must form a committee responsible for overseeing the development and implementation of its Emergency Management (EM) Program. The formation of a Municipal Emergency Management Program Committee (EMPC) is a key organizational step toward making the EM process more effective at the local level.

Responsibilities of the Emergency Management Program Committee

The EMPC's main responsibility is to oversee the development, implementation, and maintenance of the Municipal Emergency Management Program, including the Municipal Emergency Response Plan (ERP), public education program, training, and exercises. The EMPC is also accountable for the annual review of the municipality's EM program.

Although the EMPC does not play a formal role during emergencies, some of the EMPC members may also be members of the municipal emergency control group (MECG). Therefore, these members play a more official role in the municipality during an emergency, while other members of the EMPC may be called upon for support if needed.

A review of the County of Renfrew Emergency Plan and an annual exercise is required to maintain emergency management compliance. A tabletop exercise is planned for October 11, 2023.

5. Rural Ontario Municipal Association (ROMA) Conference

Recommendation: THAT the Health Committee recommend that County Council approve a delegation request at the 2024 Rural Ontario Municipal Association (ROMA) Annual Conference with the Honourable Sylvia Jones, Minister of Health, to discuss a mental health addictions and homelessness Paramedic Strategy; AND FURTHER THAT the Chair of the Standing Committee, along with the Warden, be designated to attend the delegation.

Background

The Rural Ontario Municipal Association Conference is scheduled for Sunday, January 21 - Tuesday, January 23, 2024, to be held at the Sheraton Centre Hotel - 123 Queen Street West, Toronto.

The 2024 Conference, themed, Closer to Home, will provide rural municipal leaders the opportunity to address policy issues, funding concerns, and to meet directly with Provincial Ministers on local issues. Over 1,500 municipal colleagues, provincial and federal elected officials and senior staff are anticipated to be in attendance at this event. As in the past, it is expected that the Conference will have all of the critical rural municipal issues front and centre, with excellent opportunities to be engaged, learn, network and bring innovative solutions back to our community.

Appendix ES-I

Mental Health, Addictions and Homelessness

Terms of Reference

This Terms of Reference includes an analysis of the current state of mental health, addictions, and homelessness in the County of Renfrew and the next steps in the development of an interdisciplinary team.

Background

- The number of people experiencing mental health, addictions, and substance use issues are increasing significantly across the County of Renfrew and require additional supports.
- In the Ottawa West Four Rivers (OWFR) Ontario Health Team (OHT), 35% of emergency department (ED) visits were related to mental health and addictions, often overwhelming the EDs as the first point of contact for such care.
- There has been a 75% increase in opioid-related deaths in 2021, revealing the severity of the overdose crisis.
- Hospitals are facing emergency department closures, and staff shortages have become common. Urgent action is needed to divert the strain on 911 Paramedics and emergency department flow to stabilize the system, preventing further deterioration.
- A Mental Health Wellbeing Response Team trial held in Ottawa over the past 8 months has resulted in a 66% emergency department (ED) diversion rate of mental health related calls with no adverse outcomes reported.

Next steps

We will be collaborating with community partners to complete a needs analysis to design a program and test the methodology for community engagement.

Implementing the deployment and referral model of team base care:

- Gather a list of resources and contacts for all services that can be presented to clients in an easily accessible card format that agencies can hand out to clients, so they are aware of what is currently available.
- Develop a clear referral process self-referral vs agency-led referral. Having a self-referral process initially would be more straightforward.
- Develop a Memorandum of Understanding/information-sharing agreement among all partners involved.
- Develop a consent form and shared process for clients to gain informed consent regarding the sharing of personal data and health information.
- Determine what services we can still offer to clients who do not wish to share personal information, to preserve trust and therapeutic relationship.
- Develop a clear goal for the program and process to measure progress e.g., connect to existing services, support equitable access to care, ensure basic needs of clients are met, etc.

Mental health and addictions conditions affected by homelessness.

- People with lived experience of mental health and addictions conditions are disproportionately affected by homelessness, remain homeless for longer periods of time, and have less contact with family and friends.
- While many factors can lead to homelessness, mental health plays a significant role— Ontario Health estimated 25 to 50 per cent of homeless people live with a mental health condition.
- Improving this social crisis will require new ways of helping this critically vulnerable population. The consequences of homelessness tend to be more severe when coupled with a mental health condition.

Housing and Homelessness - Community Services Department

The County of Renfrew completes a Point-In-Time homelessness count annually.

- The September 2022 Survey resulted in 43 people disclosing homelessness on September 18, 2022. The survey participants reported the following adversities:
 - physical limitations 53%,
 - medical conditions 44%,
 - mental health conditions 40%,
 - substance abuse 33%, and
 - cognitive limitations 19%.
- The County of Renfrew completes ongoing homelessness enumeration ("By-Name List") via the Built for Zero Canada initiative.
- For the period of April 1, 2023, to August 31, 2023, 58 households identified as experiencing homelessness and of this group 28 were chronically homeless (homeless for more than 6-months).
- Not all people experiencing homelessness intersect with Community Services. It is suspected
 that the ongoing homelessness count is 40% higher than what is reflected within the ByName List, and that the approximately 81 people experience homelessness monthly
 throughout Renfrew County.

Stakeholders

The County of Renfrew and additional partners in the social services area in our community proposes to implement a Mobile Health Hub to respond to the current mental health and wellness needs in the County of Renfrew.

- Renfrew County and District Health Unit
- Renfrew County Community Services Department
- RC VTAC/Renfrew County Paramedics
- Algonquins of Pikwakanagan

- Renfrew County Addiction Treatment System
- Ottawa Valley Ontario Health Team
- Ontario Addiction Treatment Centres Pembroke
- Four Rivers Ottawa West Ontario Health Team

All agencies are meeting every two weeks to come up with a strategy to maximize the services that are in place. Some services are already in place and need to develop a clear referral process to readily connect clients to all available services. By doing so in a therapeutic and non-judgemental manner, we can gather valuable feedback from clients and learn where the gaps are, and what services they feel would best help them.

Goals

Ensures that the residents and visitors to the County of Renfrew have access to the full range of quality health services they need, when and where they need them, without the burden of financial hardship.

- Connects clients with care to ensure the full continuum of essential health services, from health promotion to prevention, being inclusive of treatment, rehabilitation, and palliative care.
- Leverage existing programs and services in a team-based approach to address the identified challenges.
- Alignment with the priorities of the County of Renfrew Community Wellness and Healthcare Strategic Goal #3: supporting sustainable programs and funding for RC VTAC, community paramedicine and mental health.
- The proposed model of care expands community-based senior's health services and ensures all residents have access to primary care support, particularly in the areas of mental health, addictions, and homelessness.
- Improve access to care and services while decreasing the incidence of mental health, addictions (MHA) and homelessness related crisis use of 911 and Emergency Departments across the County of Renfrew.
- Partnerships with allied agencies and OHT's to optimize the expertise and available resources to provide the services to support these populations.

COUNTY OF RENFREW LONG-TERM CARE REPORT

TO: Health Committee

FROM: Mike Blackmore, Director of Long-Term Care

DATE: October 11, 2023

SUBJECT: Department Report

INFORMATION

1. Renfrew County and District Health Unit – Public Health Inspection – Bonnechere Manor

Renfrew County and District Health Unit Public Health Inspector, Olha Ostafiichuk conducted a compliance inspection of the main kitchen and serveries at Bonnechere Manor on August 30, 2023. Four (4) violations of non-compliance were noted and follow up deadline dates were provided by Public Health. An action plan is already underway to ensure compliance. The report is attached as Appendix LTC-I.

2. Ministry of Long-Term Care Inspection Report – Bonnechere Manor

Ministry of Long-Term Care Inspector Shevon Thompson, conducted a Critical Incident System inspection at Bonnechere Manor on the following dates: August 17, 18, 21, 22 and 23, 2023. The following inspection protocols were used during this inspection: Resident Care and Support Services, Infection Prevention and Control, Prevention of Abuse and Neglect, Reporting and Complaints, and Falls Prevention and Management. Two (2) written notifications were issued regarding the failure to immediately report a written complaint from a family and the failure to immediately report any suspected abuse or neglect of a resident. The full report is available through the Ministry of Long-Term Care Public Reporting website: Licensee Inspection Report (Itchomes.net).

3. Annual Volunteer Recognition

In recognition of the tremendous value volunteers bring to the quality of life in our long-term care homes, an afternoon of celebration has been coordinated for Bonnechere Manor on October 18 and Miramichi Lodge on October 20, 2023. Warden Peter Emon, Health Committee Chair Michael Donohue and Chief Administrative Officer Craig Kelley, will attend to offer greetings and appreciation on behalf of the County of Renfrew.

4. Acting Administrator - Miramichi Lodge

Bonnechere Manor Administrator Dean Quade commenced parental leave for the period October 3 to December 27, 2023. In order to satisfy the Fixing Long-Term Care Act, 2021 requirement for each Home to have a designate Administrator, the Director of Long-Term Care assumed the Administrator role at Bonnechere Manor and Director of Care, Nancy Lemire assumed the role of Acting Administrator for Miramichi Lodge for this period.

RESOLUTIONS

5. Hydronic Distribution System Upgrade – Miramichi Lodge Capital Project

Recommendation: THAT the Health Committee recommend County Council award the hydronic distribution system, phase 4 project as per the County of Renfrew GA-01 Procurement of Goods and Services Policy, Section 20.7 for the quoted price of \$143,029.47 excluding HST to Honeywell Limited for the replacement of hydronic controllers with BACnet controllers which was approved through the Miramichi Lodge 2023 Capital Budget. AND FURTHER THAT the Finance and Administration Committee be so advised.

Background

The sum of \$160,000 was approved through the Miramichi Lodge 2023 Capital Budget for the hydronic distribution system phase four project. The existing Honeywell building automation system is designed to be used with Honeywell brand actuators. Pairing the upgrade actuators with the building automation system that it is designed for ensuring tempered air is paramount. Honeywell Limited was the original installer and maintains the comprehensive contract for this equipment and provided a total project cost of \$143,029.47 excluding HST for the replacement and upgrade of 179 XL10 hydronic controllers to BACnet controllers of type CPO-RS5 in all three wings (A, B and C) and on all floors, as well as one RIO LON controller in the mechanical room on the second floor to be replaced with a CPO-RL5 controller, which will increase comfort and provide energy savings.

Procurement of Goods and Services Policy GA-01, article 22.1 (c) supports that "where only one source of supply would be acceptable and/or cost effective due to compatibility, or safety and liability concerns", the requirement for competitive bid solicitation for goods, services and construction may be waived under the joint authority of the appropriate Director and the Chief Administrative Officer.

Corporate Policy GA-01, article 20.7 "awards emanating from a Request for Proposal that exceed \$150,000 require the approval of County Council." Staff is seeking Committee's recommendation to County Council to award this project to Honeywell Limited.

6. **Signing Authority – Bonnechere Manor**

Recommendation: THAT the signing authority for Bonnechere Manor trust accounts be updated to remove Sandra Blok and add Kim Prentice effective October 11, 2023; AND FURTHER THAT two (2) of the following five (5) names have signing authority: Jeffrey Foss, Mike Blackmore, Dean Quade, Shiji Pattayil and Kim Prentice.

Background

With over 25 years of service with the County of Renfrew, Administration Supervisor, Sandra Blok retired effective August 31, 2023. We wish her a long and healthy retirement. For the purpose of continuity and the promotion of standardized administration practices between the Homes, the Administration Supervisor role has been consolidated into one position. Going forward Kim Prentice will assume the Administration Supervisor role for both Bonnechere Manor and Miramichi Lodge.

Renfrew County and District Health Unit

141 Lake, Street Pembroke ON K8A 5L8

FOOD SAFETY INSPECTION REPORT

Facility Inspected: Inspection #: -13280
Bonnechere Manor Inspection Date: 30-Aug-2023

Primary owner: County of Renfrew Inspected By: Olha Ostafiichuk

Facility Type: Long Term Care Facility

Site Address: 470 Albert St Inspection Type: Required

Renfrew ON K7V 4L5 Inspection Reasons: Compliance Inspection

Site Phone: (613) 432-4873 **Violations:** 4

Opening Comments and Observations:

A regular Compliance Inspection has been conducted for the premise by Olha Ostafiichuk, PHI.

Main Kitchen has been inspected along with the three serveries: HM2, HM1 and PW.

Premises have been in operation at the time of inspection.

Construction, design and general maintenance of the premise have been assessed.

Food handling practices as well as operators' personal hygiene behaviour have been observed.

Provision of necessary supplies has been audited.

Required documentation has been reviewed.

All observations and comments are mentioned with regards to the time of the inspection.

N/S = NOT SELECTED YES = IN COMPLIANCE CDI = CORRECTED DURING INSPECTION N/A = NOT APPLICABLE N/O = NOT OBSERVED NO = NOT IN COMPLIANCE

Long Term Care Facility

FOOD HANDLING

1. Potentially hazardous foods are distributed, maintained, stored, transported, displayed, sold and offered for sale in which the internal temperature is at 4°C (40°F) or lower

CDI

Temperatures below have been taken with PHI's infrared gun thermometer.

- 1. Large batches of margarine have been observed kept at room temperature to maintain it warm at all serveries and the main kitchen.
- --> CDI: Operators have placed the margarine containers into compliant refrigerators.
- 1. NEVER keep margarine at room temperature for longer than 2 hours.
- --> Please refer to the manufacturer's label stating "Keep Refrigerated".
- --> Take out smaller batches that can be used within the period of 2 hours.
 --> Monitor the time margarine spends at room temperature and rotate it in a timely manner.
- --> It is recommended to mark on the containers the time they have been taken out.
- --> If larger batches of margarine have to be warmed up use microwave/stove or other safe means of warming instead of keeping it at room temperature.

Readings Taken: 30-Aug-2023 12:40 - Milk in HM1 - Right Refrigerator - Top: 0°C

30-Aug-2023 12:40 - Pasta in HM1 - Right Refrigerator - Bottom : 1°C

30-Aug-2023 12:40 - Yogurt in HM1 - Right Refrigerator - Right Bottom : 3°C

30-Aug-2023 12:40 - Juice in HM1 - Left Refrigerator - Top: 3°C

Inspection # -13280 Page 1 of 7

FOOD SAFETY INSPECTION REPORT

Facility Contact: County of Renfrew

Facility Address: 470 Albert St, Renfrew ON K7V 4L5

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30-Aug-2023 12:40 - Creamer in HM1 - Left Refrigerator - Bottom : 4°C 30-Aug-2023 12:40 - Creamer in HM1 - Left Refrigerator - Right Bottom : 3°C 30-Aug-2023 12:40 - Milk in HM2 - Right Refrigerator - Top : 4°C 30-Aug-2023 12:40 - Yogurt in HM2 - Right Refrigerator - Bottom : 3°C 30-Aug-2023 12:40 - Milk in HM2 - Left Refrigerator - Top : 3°C 30-Aug-2023 12:40 - Yogurt in HM2 - Left Refrigerator - Bottom : 4°C 30-Aug-2023 12:40 - Refills in HM2 - Left Refrigerator - Right Bottom : 4°C 30-Aug-2023 12:40 - Creamers in HM2 - Left Refrigerator - Left Bottom : 4°C 30-Aug-2023 12:40 - Juice in PW Refrigerator - Top - Defrost : 6°C 30-Aug-2023 12:40 - Creamer in PW Refrigerator - Bottom - Defrost : 4°C 30-Aug-2023 12:40 - Chocolate Milk in Walk-In 2R : 3°C 30-Aug-2023 12:40 - Cucumber in Walk-In 3R : 3°C 30-Aug-2023 12:50 - Chicken in Walk-In 1R : 2°C
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2. Foods intended to be in a frozen state are distributed, maintained, stored, transported, displayed, sold or offered for sale in a frozen state until sold or prepared for use

YES

All food items intended to be frozen have been observed in a solid frozen state.

Temperatures below have been taken with PHI's infrared gun thermometer.

Readings Taken: 30-Aug-2023 12:53 - Cake in HM1 - Right Freezer : -12°C 30-Aug-2023 12:53 - Icicle in HM2 Freezer - Top : -14°C 30-Aug-2023 12:53 - Cake in HM2 Freezer - Bottom : -12°C 30-Aug-2023 12:53 - Cake in PW Freezer - Top : -11°C 30-Aug-2023 12:53 - Ambient Temperature in PW Freezer - Bottom : -9°C

30-Aug-2023 12:53 - Ambient Temperature in PW Freezer - Bottom : -9°C 30-Aug-2023 12:53 - Frozen Meals in "Pass-Through" Freezer : -17°C 30-Aug-2023 12:53 - Vegetables in Walk-In Freezer 1F : -15°C 30-Aug-2023 12:53 - Bread in Walk-In Freezer 6F : -14°C 30-Aug-2023 12:53 - Pizza in "Gluten Free" Freezer : -14°C 30-Aug-2023 12:53 - Food Samples in Freezer 2F : -15°C

3. Potentially hazardous foods are distributed, maintained, stored, transported, displayed, sold and offered for sale in which the internal temperature is at 60°C (140°F) or higher

YES

Temperatures below have been taken with PHI's infrared gun thermometer.

Readings Taken: 30-Aug-2023 20:23 - Ambient Temperature in HM1 - Steam Table : 73°C 30-Aug-2023 20:23 - Ambient Temperature in HM2 - Steam Table : 73°C 30-Aug-2023 20:23 - Ambient Temperature in HM2 - Hot Holding Mobile : 60°C 30-Aug-2023 20:23 - Chicken in PW - Steam Table : 61°C 30-Aug-2023 20:23 - Ambient Temperature in PW1 - Hot Holding Mobile : 70°C

 Equipment used for refrigeration or hot holding of potentially hazardous foods contains accurate and easily readable indicating thermometers CDI

- 1. Refrigerators in HM2 and PW have been observed with no thermometers provided.
- --> CDI: Operator has supplied the refrigeration units with thermometers.
- 2. Gages installed in hot holding carts have been observed displaying temperatures higher than ambient temperatures inside the units measured with an infrared gun thermometer:

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HM2 - PHI measurement: 60^{\circ}\text{C} - gage showing: 95^{\circ}\text{C} PW1 - PHI measurement: 70^{\circ}\text{C} - gage showing: 99^{\circ}\text{C}
```

HM1 - not observed at the time of the visit.

Probe thermometers have been observed onsite to monitor the temperature of items coming from the hot holding carts.

1. Please, ensure all refrigeration units onsite containing potentially hazardous food are provided with accurate and easily readable thermometers at all times.

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17

Facility Address: 470 Albert St, Renfrew ON K7V 4L5

- 2. Please, ensure the thermometers inserted in hot holding units are accurate, or make sure to educate all staff members not to rely on the gages and always refer to the measurements taken by probe thermometers.
- 5. Food is processed in a manner that makes the food safe to eat

YES

6. All food shall be protected from contamination and adulteration

CDI

- 1.1. Chicken thighs have been observed stored over beef at the 1F walk-in freezer.
- 1.2. Chicken and beef/pork have been observed stored on the same shelf in one container at the 1F walk-in freezer.
- --> It has been mentioned by the operator that the shelf is used for the opened packages of frozen food items.
- --> CDI: Operator has reorganized the refrigeration units.
- 2. Baked goods have been observed cooling down uncovered on a rack at the kitchen hall, occupying some of the bottom levels of the rack as well.
- --> CDI: Operators have moved the baked goods towards the top levels of the rack and have moved some of the food items to another rack.
- 1. Please, follow correct storage requirements:
- Raw fish is recommended to be stored above raw chicken and meat, but below ready-to-eat food and produce.
- Raw meat has to be stored below ready-to-eat food and produce, but above raw poultry.
- Raw poultry and eggs always have to be at the very bottom shelf.

These requirements apply to both: coolers and freezers.

- 2. Please note, bottom levels of the rack are always subjected to the risk of potential contamination from the air agitated by people passing by in case the rack is located at a busy section of the kitchen where a lot of walking occurs.
- 7. Food in a food premise that is liable under law to inspection must be obtained from a source that is subject to inspection

YES

8. Racks, shelves or pallets used for food storage must be designed to protect the food from contamination and must be readily cleanable

NO

Follow up by: 30-Apr-2024

Bare wood has been observed exposed at HM1, HM2, PW serveries:

- chipping cabinets' edges and doors
- chipping drawers' bottoms
- chipping shelving

No bare wood must be exposed at the premise due to its absorbent nature.

Please, ensure all storage units are kept in a good repair, provided with a smooth, non-porous, non-absorbent and easily-cleanable surface and are maintained in a sanitary condition at all times.

THIS IS A REPEATED INFRACTION

Please, address the issue, it must not repeat inspection to inspection with no changes. Infractions identified at the time of inspection must be corrected to make the premise is fully compliant.

- Provide racks, shelves or pallets that are designed to be readily cleanable.

Food handlers in the food premise practice good personal hygiene

YES

 Food handlers in the food premise wash their hands as often as necessary to prevent the contamination of food or food areas YES

 At least one certified food handler or supervisor is on the premise at all times during normal operation YES

Certification confirmed: Patricia Gordon Certificate expires: 2023-12-07

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Facility Address: 470 Albert St, Renfrew ON K7V 4L5

A binder with the certificates for all certified food handlers onsite has been observed.

OPERATION AND MAINTENANCE

12. The food premise is operated and maintained such that it is not a health hazard, adversely affecting the sanitary operation or the wholesomeness of food

YES

13. Every food premise shall be operated and maintained such that no room is used for sleeping purposes

YES

14. Floor or floor coverings are tight, smooth and non-absorbent and kept clean and in good repair Follow up by: 30-Apr-2024

NO

- 1.1. Chipping floor surface has been observed:
- HM2 near the dishwasher
- PW next to the floor drain
- --> It has been mentioned by Lindsay Sheppard that these floor deficiencies are scheduled to be fixed on September 7, 2023
- 1.2. A drain under the dishwashing sink at the cold side of the main kitchen has been observed repaired since the time of the last inspection.
- --> A gap has been observed between the drain fixture installed and the floor, where the sealant has not been evenly applied.
- 2.1. Food debris accumulation has been observed on the floor under the large pot at the main kitchen.
- 2.2. Sediment build up on the floor has been observed under the dishwasher at the main kitchen.
- --> This issue has been observed during the previous inspection.
- --> It has been mentioned by the operator that there had been attempts to address the issue, but the sediment accumulation stains are permanent and cannot be removed with any cleaning measures.
- --> It has been discussed with the operator that if the flooring cannot be replaced or cleaned from the stains, it has to be maintained as sanitary as reasonably possible within the existing conditions.

Please, ensure flooring is kept in good repair, provided with a smooth, non porous, non absorbent and easily cleanable surface and is maintained in a sanitary condition at all times.

- Keep floor or floor coverings tight, smooth and non-absorbent.
- The floors of every room must be kept clean and in good repair.
- 15. Walls and ceilings of rooms and passageways are readily cleanable, maintained in a sanitary condition, and kept in good repair

NO

Follow up by: 30-Apr-2024

- 1. A deteriorating wall has been observed behind the dishwasher at the HM2 servery.
- 2.1. Ceiling tiles affected by leakage stains have been observed at HM1 and HM2 serveries.
- 2.2. Metal ceiling frames have been observed severely damaged by rust throughout the facility.
- 2.3. Not operational ceiling openings have been observed at the main kitchen over the baking counter.
- 1. Please, ensure walls are kept in good repair, provided with a smooth, non porous, non absorbent and easily cleanable surface and are maintained in a sanitary condition at all times.
- 2. Please, ensure the ceiling is kept in good repair, provided with a smooth, non porous, non absorbent and easily cleanable surface and is maintained in a sanitary condition at all times.
- The walls and ceilings of rooms and passageways must be readily cleanable and must be maintained in a sanitary condition.
- Maintain walls in good repair in food-handling room
- Maintain ceilings in good repair in food-handling room

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Facility Address: 470 Albert St, Renfrew ON K7V 4L5

16. General maintenance and sanitation is satisfactory where food is processed, prepared, packaged, served, transported, manufactured, handled, sold, or offered for sale.

Follow up by: 30-Sep-2023

NO

Overall, premise has been observed maintained neatly organized and maintained in a clean and sanitary condition.

- 1. Dust accumulation has been observed on fans at HM1 and HM2 serveries.
- 1. Please, address the unsanitary items identified onsite and ensure all items at the kitchen premise are maintained clean and in a sanitary condition.
- Maintain the food premise in a clean and sanitary manner

| 17. | Every food premise shall be provided with hot and cold potable running water under pressure | YES |
|-----|---|-----|
| 18. | Adequate number of handwashing stations, situated for convenient access by food handlers with required supplies | YES |
| 19. | Handwashing stations used only for the washing of employee hands | YES |
| 20. | Single-service containers and single-service articles are kept in such a manner and place as to prevent contamination of containers or articles | YES |
| 21. | Equipment, utensils and multi-service articles are of sound and tight construction, in good repair, can be readily cleaned and sanitized, and suitable for their intended purpose | YES |
| 22. | Equipment and utensils that come into direct contact with food are corrosion-resistant, non-toxic and free from cracks, crevices and open seams | CDI |

- 1. A chipping silicone spatula has been observed at the HM2 servery.
- --> CDI: Operator has voluntarily disposed of the worn out spatula.
- 2. Well-worn cutting boards which cannot be effectively sanitized have been observed onsite.
- --> CDI: Operator has voluntarily disposed of the worn out cutting boards.
- --> It has been mentioned by Lindsay Sheppard that the operators are trying to monitor the condition of all cutting boards onsite and are doing their best to keep up with replacing all the well-worn boards.
- 1. Please, ensure all utensils are kept in a good repair and can be effectively sanitized.
- --> Monitor the condition of your utensils to replace them in a timely manner in order to prevent potential food contamination coming from the particles chipping of the worn-out equipment.
- 2. Please, ensure all cutting boards are kept in a good repair, provided with a smooth, non porous, non absorbent and easily cleanable surface that can be effectively sanitized.
- --> Monitor the condition of cutting boards onsite in order to replace them in a timely manner, once they wear off.

| 23. | Vending machine that automatically mixes water to create a product is provided with potable water supply under pressure | YES |
|-----|--|-----|
| 24. | Furniture, equipment and appliances in any room or place where food is prepared, processed, packaged, served, transported, manufactured, handled, displayed, sold or offered for sale is constructed and arranged to maintain it in a clean and sanitary condition | YES |
| 25. | Table covers, napkins or serviettes used in the service of food are clean and in good repair | YES |
| 26. | Proper levels of illumination required are maintained in the food premise during all hours of operation | YES |
| 27. | Ventilation system is maintained to ensure the elimination of odours, fumes, vapours, smoke and excessive heat | YES |
| 28. | Garbage and wastes, including liquid wastes, are collected and removed from the food premise as often as is necessary to maintain the premise in a sanitary condition | YES |
| 29. | Food premise is protected against the entry of pests and kept free of conditions that lead to the harbouring or breeding of pests | YES |

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Bonnechere Manor [000-000099]

FOOD SAFETY INSPECTION REPORT

Facility Contact: County of Renfrew

Facility Address: 470 Albert St, Renfrew ON K7V 4L5

| ı acıı | ity Address. 470 Albert St, Neilliew ON N/V 4L5 | |
|--------|--|-----|
| 30. | Every room in the food premise is kept free from live birds or animals | YES |
| CL | EANING AND SANITIZING | |
| 31. | Equipment for either manual or mechanical dishwashing is available on site | YES |
| 32. | Multi-service articles shall be cleaned and sanitized after each use | YES |
| 33. | Utensils other than multi-service articles shall be cleaned and sanitized as often as necessary to maintain them in a clean and sanitary condition | YES |
| 34. | Mechanical dishwashers are maintained to provide clean wash water at the proper temperature, and a sanitizing rinse | YES |
| | Readings Taken: 30-Aug-2023 11:30 - Chlorine in Dishwasher at HM1 : 100mg/L 30-Aug-2023 11:50 - Chlorine in Dishwasher at HM2 : 100mg/L 30-Aug-2023 12:10 - Chlorine in Dishwasher at HM3 : 100mg/L 30-Aug-2023 12:40 - Wash Temperature in Dishwasher at the Main Kitchen : 60°C 30-Aug-2023 12:40 - Rinse Temperature in Dishwasher at the Main Kitchen : 80°C | |
| 35. | Manual dishwashing provides clean wash water, proper rinse, and sanitizing solution Readings Taken: 30-Aug-2023 12:35 - Quaternary Ammonium in Dishwashing Sink at the Main Kitchen: 200mg/L | YES |
| 36. | Sanitize test kit is readily available for verifying concentration of other sanitizing agents approved for use by Health Canada/CFIA | YES |
| | Chlorine and quaternary ammonium test strips have been observed onsite. | |
| 37. | Food contact surfaces washed, rinsed, and sanitized as often as necessary to maintain | YES |

Food contact surfaces sanitizing solution has been tested being at 200 ppm quaternary ammonium concentration at the PW servery.

Sanitizing solution in a cloth bucket has not been observed readily available at HM1, HM2 and the Main Kitchen. Solution has not been tested at those sections of the premise.

--> Active food handling has been occurring at the HM2 servery, while the food was being put into the steam table, but no sanitizer has been readily available at the kitchen at that time.

Please note, the sanitizing solution has to be readily available at all times during kitchen operation.

38. Cloths and towels used for cleaning, drying or polishing utensils or cleaning food contact
surfaces are in good repair, clean and used for no other purpose

39. Toxic and poisonous substances are kept separate from food, in containers bearing a label and YES used in a manner that does not contaminate food

SANITARY FACILITIES

40. Sanitary facilities kept in good repair and equipped with necessary supplies

Contacts Present During Inspection

surfaces in a sanitary condition

Lindsay Sheppard

Action(s) Taken

Actions Taken: Report Reviewed - Action Required, Food Handler Education on Site

Closing Comments:

Overall, the premise has been observed acceptably constructed and maintained in a satisfactory condition at the time of inspection.

Operators demonstrate a strong commitment to cleanliness, sanitation and food safety and are willing to comply with the Ontario Food Premise Regulation standards.

Measures have been observed onsite directed at improving premise operation since the previous inspection.

Operators take food premise requirements seriously and are working hard trying to keep up.

Inspection # -13280 Page 6 of 7

YES

Facility Address: 470 Albert St, Renfrew ON K7V 4L5

All food safety infractions onsite have been corrected during the inspection.

Most of the outstanding infractions onsite are associated with premise's construction and maintenance.

Critical behavioural infractions have been discussed with the operators and are outlined in this Inspection Report to be avoided in the future.

DEFICIENCIES identified in this Inspection Report MUST BE ELIMINATED by the DUE DATES in order for the premise to reach full compliance.

DIRECTIONS provided in this Inspection Report MUST BE FOLLOWED in order to keep the premise compliant.

AVOID having REPEATED INFRACTIONS, as ENFORCEMENT MEASURES may be applied if those are observed during following inspections.

If you have any questions or concerns regarding reaching compliance, do not hesitate to contact your area health inspector.

Findings of the inspection have been discussed with: Lindsay Sheppard.

Lindsay Sheppard has not been available to review and sign the report.

Report will be emailed to: Lindsay Sheppard at Isheppard@countyofrenfrew.on.ca .

Keep up the hard work!

Lindsay Sheppard

I have read and understood this report:

Olha Ostafiichuk

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Renfrew County and District Health Unit "Optimal Health for All in Renfrew County and District"

Board of Health

Special Board Meeting, via Zoom

Tuesday, July 25, 2023

The Special meeting of Renfrew County and District Health **Unit's Board of Health was** held on the virtual software platform—Zoom. Members were present by audio and/or video.

Members:

Ann Aikens Chair

Vice-Chair Joanne King James Brose Member J. Michael du Manoir Member Peter Emon Member Ethel LaValley Member Jennifer Murphy Member **Neil Nicholson** Member Troy Purcell Member Carolyn Watt Member

Staff:

Heather Daly Chief Executive Officer
Dr. Jason Morgenstern Medical Officer of Health
Melissa Ziebarth Executive Assistant (Secretary)

Regrets:

Wilmer Matthews Member

1. Call to Order

Chair Aikens called the meeting to order at 1:01 p.m.

2. Land Acknowledgement

RCDHU is located on the unceded territory of the Algonquin Anishinaabe People.

We would like to honour the land and peoples of the Algonquin Anishinaabe, whose ancestors have lived on this territory for millennia, and whose culture and presence have nurtured and continue to nurture this land.

We would like to honour all First Nations, Inuit and Métis peoples, their elders, their ancestors and their valuable past and present contributions to this land.

Mìgwech

3. Agenda Approval

The agenda was reviewed.

Resolution: #1 SBoH 2023-July-25

Moved by J. King; Seconded by C. Watt;

Be it resolved that the Board approves the agenda, as amended.

Carried

4. Declarations of Conflict of Interest

There were no declarations of conflict of interest.

5. Minutes of Previous Meeting (Approval)

The Board reviewed the Tuesday, June 27, 2023 meeting minutes.

Resolution: #2 SBoH 2023-July-25

Moved by J. Murphy; Seconded by J. King;

Be it resolved that the Board approves the meeting minutes from Tuesday, June 27, 2023, as presented.

Carried

6. New Business

a. Review Procedural By-Law 2022-01 and recommendations - Resolution #4 GC 2023-May-09.

A. Aikens led the board through a lengthy discussion of the revisions, recommended by the Governance Committee. After discussion the following Resolutions were put forward for a vote.

Resolution: #3 SBoH 2023-July-25

Moved by M. du Manoir: Seconded by C. Watt:

Be is resolved that the Board amend Resolution #4 GC 2023-May-09 by deleting the section that includes the elimination of the Executive committee

as a Standing Committee.

Recorded Vote

| Yes | Name of Board Member | No |
|-----|-----------------------|--------------|
| | Aikens, M. Ann | \checkmark |
| | Brose, James | $\sqrt{}$ |
| | du Manoir, J. Michael | |
| | Emon, Peter | |
| | King, Joanne | |
| | LaValley, Ethel | $\sqrt{}$ |
| | Matthews, Wilmer | |
| | Murphy, Jennifer | |
| | Nicholson, Neil | $\sqrt{}$ |
| | Purcell, Troy | V |
| V | Watt, Carolyn | |
| 3 | TOTALS | 7 |

| Carried by: | | |
|--------------|-----|--|
| Defeated by: | 7-3 | |

Resolution: #4 SBoH 2023-July-25

Moved by J. King;

Seconded by T. Purcell;

Be it resolved that the Governance Committee recommends to the Board of Health <u>Procedural By-Law 2022-01</u> be revised as attached Including the elimination of the Executive Committee as a Standing Committee.

Carried

Recorded Vote

| Yes | Name of Board Member | No |
|-----------|-----------------------------|-----------|
| $\sqrt{}$ | Aikens, M. Ann | |
| √ | Brose, James | |
| | du Manoir, J. Michael | $\sqrt{}$ |
| $\sqrt{}$ | Emon, Peter | |
| $\sqrt{}$ | King, Joanne | |
| | LaValley, Ethel | |
| | Matthews, Wilmer | |
| | Murphy, Jennifer | $\sqrt{}$ |
| $\sqrt{}$ | Nicholson, Neil | |
| | Purcell, Troy | |
| | Watt, Carolyn | $\sqrt{}$ |
| 7 | TOTALS | 3 |

| Carried by: | 7-3 |
|--------------|-----|
| Defeated by: | |

Resolution: #5 SBoH 2023-July-25

Moved by N. Nicholson; Seconded E. LaValley;

Be it resolved that the Board adopt <u>By-Law 2023-02</u> relating to the conduct of business, known as the procedural By-Law, including the changes agreed upon today, for passage at this board meeting.

Carried

Recorded Vote

| Yes | Name of Board Member | No |
|-----------|-----------------------|----|
| | Aikens, M. Ann | |
| | Brose, James | V |
| | du Manoir, J. Michael | |
| $\sqrt{}$ | Emon, Peter | |
| | King, Joanne | |
| $\sqrt{}$ | LaValley, Ethel | |
| | Matthews, Wilmer | |
| | Murphy, Jennifer | |
| $\sqrt{}$ | Nicholson, Neil | |
| $\sqrt{}$ | Purcell, Troy | |
| | Watt, Carolyn | V |
| 6 | TOTALS | 4 |

| Carried by: | 6-4 |
|--------------|-----|
| Defeated by: | |

Discussion of Committee of the Whole Format The board discussed the suggestion that a Committee of the Whole format be considered for possible implementation in 2024.

Resolution: #6 SBoH 2023-July-25

Moved by J. Murphy; Seconded by T. Purcell;

Be it resolved that the Board give direction to staff to prepare an implementation plan for a Committee of the Whole format, including pros and cons and drafting Terms of Reference, for Board discussion no later than the end of October 2023.

Recorded Vote

| Yes | Name of Board Member | No |
|-----------|-----------------------|-----------|
| | Aikens, M. Ann | |
| | Brose, James | |
| | du Manoir, J. Michael | $\sqrt{}$ |
| $\sqrt{}$ | Emon, Peter | |
| $\sqrt{}$ | King, Joanne | |
| $\sqrt{}$ | LaValley, Ethel | |
| | Matthews, Wilmer | |
| V | Murphy, Jennifer | |
| $\sqrt{}$ | Nicholson, Neil | |
| V | Purcell, Troy | |
| V | Watt, Carolyn | |
| 9 | TOTALS | 1 |

| Carried by: | 9-1 |
|--------------|-----|
| Defeated by: | |

7. By-Laws

a. By-Law 2023-02 Procedural By-Law.

Chair Aikens asked if there were any further questions or comments.

Resolution: #7 SBoH 2023-July-25

Moved by T. Purcell; Seconded by J. Brose;

Be it resolved that the <u>Procedural By-Law 2023-02</u> be now numbered, read three times, passed and signed by the CEO and Chair.

Carried

Recorded Vote

| Yes | Name of Board Member | No |
|-----|-----------------------|----|
| | Aikens, M. Ann | |
| | Brose, James | |
| | du Manoir, J. Michael | |
| | Emon, Peter | |
| | King, Joanne | |
| | LaValley, Ethel | |
| | Matthews, Wilmer | |
| | Murphy, Jennifer | |
| | Nicholson, Neil | |
| | Purcell, Troy | |
| | Watt, Carolyn | |
| 10 | TOTALS | 0 |

| Carried by: | 10-0 |
|--------------|------|
| Defeated by: | |

8. Action List Review

a. Board reviewed the Regular BoH Action List—2023-Jun-27.

9. Closed

Resolution: #8 SBoH 2023-July-25

Moved by J. Murphy; Seconded by J. Brose;

Be it resolved that the Board move into a closed meeting at 3:10 p.m. to discuss: (b) personal matters about an identifiable individual, including municipal or local board employees.

Carried

Chair Aikens verified that all Members were alone and in a secure location before the meeting moved into the closed session and Dr. Morgenstern left the meeting at 3:11 p.m.

The Special Board of Health meeting resumed at 3:28 p.m.

Chair A. Aikens thanked Board member Wilmer Matthews for his many years of dedicated service on RCDHU Board.

A. Aikens thanked the Board and staff for their support and hard work during her years as Chair, especially during the pandemic response and our many organizational changes.

10. Adjournment

Resolution: #9 SBoH 2023-July-25

Moved by E. LaValley; seconded by J. Murphy;

Be it resolved that the Special Board meeting be adjourned at 3:30 p.m.

Carried

_____Chair

These minutes were approved by the Board at the Regular Board of Health Meeting held on Tuesday, September 26, 2023.