

TOWN OF FORT FRANCES

AGENDA - March 12, 2012

MEETING

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COUNCIL MEETING

(Session No. 41) 6:10 p.m. to 6:25 p.m.

- 1.1 Call to Order
- 1.2 Prayer
- 1.3 Non-agenda items identified to be considered later in this meeting
- 1.4 Disclosure of pecuniary interest and the general nature thereof.

Delegations/Deputations

- 2.1 Announcement re: Budget Public Meeting March 26, 2012 4

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- 3.1 Summary Report 5
- 3.2 Items Referred from Committee of the Whole
- 3.3 Financial request from Bruce Caldwell re: 13th Annual Fly-in, Drive-in BBQ at the Fort Frances Airport - June 3, 2012. 6-7

Approval of Council Minutes *

- 4.1 Sessions No. 39 and 40 dated February 27 and March 5, 2012.

Approval of Committee of the Whole Minutes *

- 5.1 Sessions No. 49 and 50 dated February 27 and March 5, 2012.

Resolutions from tonight's Committee meeting

By-Laws

- 7.1 10/12 8-34
 - A By-Law to approve an Emergency Plan.
- 7.2 11/12 35-36
 - A By-Law to Establish Tax Ratios for Prescribed Property Classes.
- 7.3 12/12 37
 - A By-Law to approve a contract to Wagner Construction Canada ULC for 2011 Road Reconstruction and Watermain Improvements.
- 7.4 13/12 38
 - A By-Law to authorize the entering into of certain lease agreements at the Fort Frances Municipal Airport.
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 - A By-Law to approve an employment agreement with Jason Kabel and for his appointment as Manager of Community Services for the Town of Fort Frances.

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9.6 Letter dated February 28, 2012 from Ontario Small Urban Municipalities (OSUM) respecting 2012 OSUM Conference and Trade Show - May 2-4, 2012 - Huntsville and 2012 Nomination Form for OSUM Executive Committee.	53-54
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Non-agenda Items - 6:20 p.m.

*** Previously distributed to Council**

**** Items can be viewed by contacting the Clerk**

Town of Fort Frances

Notice Regarding Approval of 2012 Budget

TAKE NOTICE that pursuant to the requirements of the *Municipal Act, 2001* and By-Law No. 64/02, Council of the Corporation of the Town of Fort Frances at its meeting to be held on March 26th, 2012 following the Committee of the Whole meeting in the Council Chambers at the Civic Centre, proposes to consider a by-law to adopt the Town's 2012 budget.

The public is invited to attend this meeting to hear a presentation on the budget by administration and to make written or oral presentations of their own to Council either in support of or in opposition to the budget proposal. For additional information, please contact Laurie Witherspoon, Treasurer at 274-5323, ext. 248.


Glenn Treftlin, Town Clerk

Agenda Item # 3.1

THE TOWN OF FORT FRANCES

REPORT TO: Mayor and Council
FROM: G. Treftlin
SUBJECT: Town of Fort Frances
Council Meeting - Monday, March 12, 2012
Consent Agenda Items

1. Items referred from Committee of the Whole:
See individual reports.
2. Financial request dated February 24, 2012 from Bruce Caldwell re: 13th
Annual Fly-in, Drive-in BBQ at the Fort Frances Municipal Airport on June
3, 2012.
 - will be referred to Administration and Finance Executive Committee
for recommendation.


GT/kl

March 8, 2012



Agenda Item # 3.3

February 24, 2012

Mayor & Council
The Corporation of the Town of Fort Frances
320 Portage Avenue
Fort Frances, Ontario
P9A 3P9



Dear Mayor Avis and Council:

This year we will be holding our 13th Annual Fly-in, Drive-in BBQ at the Fort Frances Airport on June 3, 2012 from 10 am to 2 pm. In addition, the #908 Rainy Lake Air Cadets will be sponsoring the barbeque portion of the event and I have attached a poster for your information. We hope that you or a representative will be able to attend this event.

At this time, we would like to ask the Town of Fort Frances for approximately \$1000 to cover expenses and any other incidentals that may arise for this exciting event. Your contribution would be deeply appreciated.

Yours truly,

Bruce Caldwell

Bruce Caldwell

Refer to Administration and Finance Executive Committee for recommendation

☒ OK
☐ Recommended
☐ Includes my input
☐ Recommended as amended/with comment
☐ Not recommended
☐ Will Speak to this
☐ Other

March 7, 2012
Date: *M. McCaig*
M. McCaig, Administrator

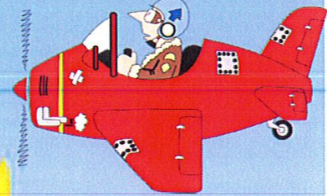
**13th Annual
Fly in, Drive in
BBQ**



Sunday, June 3, 2012

10 am—2 pm

Fort Frances Airport



**Homebuilts ♦ Wheel Planes ♦ RC Aircrafts
Amphib Planes ♦ Old Cars ♦ Motorcycles**

**BBQ catered by the
#908 Rainy Lake
Air Cadets**



**Antique Car Show
sponsored by the
INTERNATIONAL
EARLY IRON CAR
CLUB**

**FOR MORE INFORMATION CONTACT:
BRUCE CALDWELL (807) 274-3070**

Agenda Item # 7.1

TOWN OF FORT FRANCES

By-Law No. 10/12

(A By-Law to approve an emergency plan)

WHEREAS the *Emergency Management and Civil Protection Act*, R.S.O. 1990, c.E.9, (the "Act"), at Section 3, requires that every municipality shall formulate an emergency plan governing the provision of emergency services during an emergency and the procedures under and the manner in which employees of the municipality and other persons will respond to the emergency;

AND WHEREAS Section 3. of the Act further requires that the council of the municipality adopt the emergency plan by by-law;

AND WHEREAS pursuant to the "Act", at Section 3, every municipality shall review and, if necessary, revise its emergency plan every year;

AND WHEREAS on December 12, 2011, Council, as recommended by the Community Services Executive Committee, approved an updated Emergency Plan for the Town of Fort Frances.

NOW THEREFORE Council of the Corporation of the Town of Fort Frances HEREBY ENACTS as follows:


1. That the Town of fort Frances Emergency Plan being Schedule "A" attached hereto as part of this by-law be hereby adopted.
2. That Schedule "A" to Town of Fort Frances By-Law No. 22/04 being an emergency response plan adopted by said By-Law No. 22/04 be hereby rescinded.

This by-law shall come into force and take effect upon final passing thereof.

Read three times and finally passed in open Council this 12th day of March 2012.

- ☒ OK
- ☐ Recommended
- ☐ Includes my input
- ☐ Recommended as amended/with comment
- ☐ Not recommended
- ☐ Will Speak to this
- ☐ Other

Date:

March 7, 2012 
M. McCaig, Administrator

1.0 INTRODUCTION**1.1 Preamble**

Municipal departments routinely respond to situations requiring fire, police, ambulance, and public works services; however, some situations may escalate beyond the scope of normal operations. These situations need to be dealt with via an emergency plan. The Town of Fort Frances Emergency Plan is a generic and flexible document, adaptable to any emergency situation.

While many emergencies could occur within the Town of Fort Frances, the most likely to occur are: severe storms, floods, air or rail crashes, toxic or flammable gas leaks, transportation incidents involving hazardous materials, electric power blackouts, uncontrollable fires, explosions, or any combination thereof. **(See Appendix J)**

The Town of Fort Frances Emergency Plan is a tool to assist emergency personnel in their response to such situations. In order to use this tool to its full potential, it is important that all personnel are aware of their roles and responsibilities within the response framework. To help increase this awareness, the Town of Fort Frances Emergency Plan provides for training, exercises, and evaluation.

1.2 Title

This document is the **Town of Fort Frances Emergency Plan**, herein referred to as the "Plan".

1.3 Aim

The aim of the Plan is to provide a set of generic action guidelines to increase the Town's ability to efficiently and effectively deploy services and resources to protect the property and the health, safety, and welfare of the residents of the Town of Fort Frances during emergency situations.

1.4 Amending Formula

Any amendments to the Town of Fort Frances Emergency Plan require an amending by-law approved by Town Council. The appendices do not form part of the Plan; proposals for amendments to the Plan or its appendices shall be submitted to the Community Emergency Management Coordinator.

TOWN OF FORT FRANCES
BY-LAW NO. 10/12
SCHEDULE "A"

1.5 Emergency – Defined

Emergencies are situations, or threats of serious impending situations, that will adversely affect a significant number of persons, properties or areas. By their nature or magnitude, these situations may require municipal expenditures, requests for additional resources, provisions for emergency shelter, or evacuation. These situations are distinct from normal operations where coordinated activities among agencies are adequate to resolve the situation.

1.6 Definitions

“Administrator” is responsible for running the EOC and coordinating all information and strategies of the CCG to all responding agencies.

“Command Post” is the central control/communications centre from which the Incident Commander will coordinate on-site activities and communicate with the Emergency Operations Centre and other operational sectors

“Municipal Emergency Control Group (MECG)” Is responsible for supporting the actions of all agencies responding to an emergency, defining overall strategy, and planning for secondary effects of any emergency or disaster.

“Community Emergency Management Program Committee” is a group appointed by Council that shall advise the council on the development and implementation of the municipality’s emergency management program and shall conduct an annual review of the municipality’s emergency management program and shall make recommendations to the council for its revision if necessary.

“Emergency Information Officer” is the individual appointed to act as the primary media and public contact for the municipality in an emergency

“Emergency Operations Centre (EOC)” is the physical facility from which the Municipal Emergency Control Group supports the response effort of all the responding agencies to an emergency. This facility is located at a predetermined location with an alternate location designated if the primary EOC is not accessible.

“Incident Commander” is the individual responsible for directing and coordinating at the emergency site the actions of all the responding agencies. Statutory interest, or the municipal emergency control group in circumstance will establish the incident command position where the emergency is diffuse in nature. The position may change due to the evolution of the incident. The incident commander will report to the Municipal Emergency Control Group information relevant to the safety and security of the community

“Media Centre” is the location from which information, approved by the Municipal Emergency Control Group, is provided to the media. The centre will also monitor the emergency’s media coverage to provide the Municipal

Emergency Control Group with effective strategies on dealing with media issues. Media emergency site tours, interviews, and photo opportunities are coordinated through the Media Centre.

“**Sector Officer**” is the individual representing his/her agency and may be based on as functional description or a geographic description. The sector officer will answer directly to the incident commander.

“**Scribe**” is responsible to the Administrator to assist him/her in the Emergency Operations Centre

2.0 AUTHORITY

2.1 The Emergency Management Act & Civil Protection Act

The *Emergency Management & Civil Protection Act, R.S.O. 1990, c. E.9*, as amended, is the primary authority enabling passage of the by-law adopting the Plan. Important measures authorized under the legislation which form part of the Plan are:

- Expenditure of monies associated with the formulation and implementation of the Plan;
- Authorization for municipal employees to take appropriate action before formal declaration of an emergency;
- Procedures to be taken for safety and/or evacuation of persons in an emergency area;
- Designation of a Member of Council who may exercise powers and perform the duties of the Head of Council under the Plan during the absence or inability of the Head of Council to act;
- Establishment of committees and designation of employees to be responsible for reviewing the Plan, to train employees in their functions, and to implement the Plan during an emergency;
- Authorization to obtain and distribute materials, equipment, and supplies during an emergency; and
- Authorization to attend to such other matters as is considered necessary or advisable for the implementation of the Plan during an emergency.

2.2 Protection from Liability for Implementation of the Plan

Section 11 of the *Emergency Management & Civil Protection Act, R.S.O. 1990, c.E.9, as amended*, states:

- (1) No action or other proceeding lies or shall be instituted against a member of council, an employee of a municipality, a minister of the Crown or a Crown employee for doing any act or neglecting to do any

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act in good faith in the implementation or intended implementation of an emergency management program or an emergency plan or in connection with an emergency. 2002, c. 14, s. 14.;

- (2) Subsection (1) does not relieve a municipality of liability for the acts or omissions of a member of council or an employee of the municipality referred to in subsection (1), and the municipality is liable as if subsection (1) had not been enacted and, in the case of a member of council, as if the member were an employee of the municipality. R.S.O. 1990, c. E.9, s. 11 (3).

2.3 Public Accessibility to the Plan

Section 10 of the *Emergency Management & Civil Protection Act* provides that an emergency plan must be available to the public during regular business hours at the municipal office.

The Plan will be made available to the public at the Office of the Town Clerk in hard copy format, and may be viewed at anytime in PDF format on the town web site.

2.4 Freedom of Information and Protection of Privacy

Any personal information collected under the authority of the Plan shall be used solely for the purpose of planning, preparing and responding to emergencies as defined within the Plan and the release of any information under this Plan shall be made in conformity with the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.M.56, as amended.

3.0 DECLARATION OF AN EMERGENCY

3.1 Authority to Declare

The *Emergency Management & Civil Protection Act*, R.S.O. 1990, c. E.9, as amended, Section 4(1) states:

"The head of council of a municipality may declare that an emergency exists in the municipality or in any part thereof and may take such action and make such orders as he or she considers necessary and are not contrary to law to implement the emergency plan of the municipality and to protect property and the health, safety and welfare of the inhabitants of the emergency area."

3.2 Notification to the Minister of Public Safety and Correctional Services

Under the *Emergency Management & Civil Protection Act*, R.S.O. 1990, c. E.9, as amended, states the Mayor must immediately notify the Minister of Public Safety and Correctional Services through the Duty Officer at Emergency Management Ontario of the declaration of an emergency. To notify the Minister's office call:

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Emergency Management Ontario

1-866-314-0472

The verbal declaration of an emergency to EMO shall be followed by a written declaration on Municipal letterhead faxed to the Duty Officer at 1-416-314-6220

Upon declaring an emergency, the Mayor will further notify:

1. Town council Members
2. Public
3. Neighbouring community officials, as required
4. Local members of Federal and Provincial Parliaments

PLAN IMPLEMENTATION

4.1 Assembling the Municipal Emergency Control Group

On receipt of an official request from a member of the Municipal Emergency Control Group, Fort Frances Fire and Rescue Service shall implement the "Emergency Plan – Alert Procedure" (**see Appendix A**).

Fort Frances Fire and Rescue Service 911

Municipal Emergency Control Group members may be directed to report to the Emergency Operations Centre or be placed on standby. Upon being notified, it is the responsibility of all Municipal Emergency Control Group Members to inform their staff and volunteer organizations.

4.2 Activation of the Plan

If requested to report to the Emergency Operations Centre the Municipal Emergency Control Group shall activate the Plan, be responsible for establishing an overall strategy to mitigate the risk to the community, for providing the necessary support and resources to the operational agencies, and for establishing a communication plan for notification of the public and the media.

4.3 Action Prior to Activation

When an emergency exists but has not yet been declared to exist, community employees may take such action(s) under this emergency response plan as may be required to protect property and the health, safety and welfare of the Town of Fort Frances.

4.4 Actions of Emergency Response Agencies

Upon notification of an emergency, response agencies shall perform duties and responsibilities as outlined in the Plan, or shall place personnel on stand-by until further notice.

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Each agency responding to the emergency shall report to the incident commander for assignment

4.5 Chain of Command

Each agency responding to the emergency shall operate within their organizational structure. For purposes of strategic direction all sector officers will take direction from the incident commander, tactical direction will be established at the sector officer level and tasks completed from that direction.

4.6 Emergency Operations Centre

The Emergency Operations Centre shall be established at Town Hall (320 Portage Avenue), downstairs. The backup location is the maintenance building at the Fort Frances Airport.

The first arriving Municipal Emergency Control Group members are responsible for setting up the Emergency Operations Centre. The Community Emergency Management Coordinator (CEMC) is responsible for maintaining a level of preparedness within the Emergency Operations Centre by updating all print material and equipment. For a layout of the Emergency Operations Centre and equipment required, see **Appendix D for main EOC or Appendix E for back-up EOC.**

4.7 Media Centre

The media centre will be established in the council chambers or other location as deemed necessary by size or type of incident.

The Emergency Information Officer is responsible for setting up and maintaining the media centre.

4.8 Communications

Each responding agency is responsible for establishing its own telecommunications links with its Municipal Emergency Control Group representative.

4.9 Emergency Operations Centre Message Traffic

Due to the high volume of message traffic that will occur during the response to an emergency, a procedure must be used to effectively manage the handling of these messages. A hierarchy of all messages to and from the Emergency Operations Centre shall be in accordance with the following designations:

Critical is any message with implications of imminent death or serious injury to any person or groups of persons. Emergency alerts or immediate action directives are included in this category. Emergency

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messages take priority over all other traffic and should be used only when absolutely required.

Priority is assigned to important messages with a specific time limit or may result in a significant impact. It also includes those official messages not covered in the "emergency" category.

Routine covers most administrative or non-critical messages that are not time limited, including routine logistics support.

It is the responsibility of the originator of the message to designate the message according to the above hierarchy. The line(s) dedicated to incoming calls to the Emergency Operations Centre shall be operated by support staff under the direction of the Administrator - EOC Manager, and shall be responsible to ensure that all messages are properly classified and routed to their intended recipients. The message form is shown in **Appendix F**.

4.10 Command Post

The incident commander shall establish a temporary command post at the emergency site. The temporary command post shall be replaced by a mobile or fixed command post as determined by the incident commander and the agency with proprietary interest. All inter-agency communications shall be channeled through this command post and a direct link will be established with the Emergency Operations Centre.

4.11 Dissemination of Decisions by the Municipal Emergency Control Group

Decisions by the Municipal Emergency Control Group shall be transmitted to the incident commander through their agency representative. The Administrator - EOC Manager or alternate, shall coordinate this function.

4.12 Evacuation

Refer to **Appendix G** "Town of Fort Frances Evacuation Plan".

4.13 Request for Assistance

Assistance may be requested from the Province of Ontario or Federal Government at any time without any loss of control or authority. Assistance also may be requested from neighbouring municipalities and/or the private sector as required (see **Appendix B** "Resource Contact List").

4.14 Termination of a State of Emergency

The Mayor or alternate or Council as a whole or the Premier of Ontario can officially declare the termination of the emergency at any time and shall notify:

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1. Minister of Public Safety (Emergency Management Ontario)
2. Town Council
3. Public and Neighbouring Communities
4. Members of Provincial and Federal Parliament
5. Duty Officer (Notice of termination faxed to 1-416-314-6220)

5.0 MUNICIPAL EMERGENCY CONTROL GROUP

5.1 Composition of the Municipal Emergency Control Group

Emergency response operations will be directed and controlled by the following officials or their alternates at an Emergency Operations Centre:

- Mayor
- Town Administrator
- Scribe
- OPP Detachment Commander
- Fire Chief, Community Emergency Management Coordinator
- Manager of Operations and Facilities
- Emergency Information Officer
- Superintendent of Power Corporation

Not all members of the Municipal Emergency Control Group have to be present for the EOC to function and it therefore may function with only a limited number of persons depending upon the emergency. In addition an emergency does not have to be declared to have the group meet.

Other Town staff, government officials, and outside experts may be called by the Administrator to join the Municipal Emergency Control Group for resource and advisory purposes. These individuals do not have to be appointed by council as their invitation is specific to their expertise.

The following are members of the Community Emergency Management Program Committee

- Emergency management co-coordinator as appointed by Council.
- Senior municipal official as appointed by Council.
- Members of the council, as appointed by Council.
- Municipal employees responsible for emergency functions appointed by Council.
- Northwestern Health Unit representative as appointed by Council.
- Rainy River District Social Services Board rep. appointed by Council.
- Abitibi representative as appointed by Council.
- Hospital representative as appointed by Council.
- Ambulance manager as appointed by Council.
- MNR representative as appointed by Council.
- Rainycrest Administrator as appointed by Council.
- CISM representative as appointed by Council.
- Union Gas representative as appointed by Council.

5.2 Responsibilities of the Municipal Emergency Control Group

Planning (Operating/Business) Cycle

Members of the Municipal Emergency Control Group shall gather at regular intervals to inform each other of actions taken and problems encountered. The Administrator - EOC Manager, will establish frequency of planning cycles and agenda items. Maps and status boards shall be prominently displayed and kept up to date by the Duty Officer.

The incident commander shall schedule regular briefings with sector officers.

The Municipal Emergency Control Group is primarily mandated to address the ongoing, or potentially expanding threat to the broader community, including the health, safety and well being of persons; property and infrastructure; essential services; the environment; the local economy, and to instill a level of confidence to the public.

The responsibilities of the Municipal Emergency Control Group are to:

- (1) advise the Mayor as to whether an emergency should be declared, and what part of the municipality should be designated as the emergency area;
- (2) ensuring that Emergency Management Ontario has been notified of declared or impending emergencies;
- (3) ensuring an incident commander has been appointed;
- (4) activating the Town of Fort Frances emergency response plan;
- (5) authorizing the expenditure of money;
- (6) managing information, including maintenance and retention of events log and records pertaining to expenditures;
- (7) maintaining a log outlining decisions made and actions taken;
- (8) managing emergency information;
- (9) directing the movement of equipment and resources beyond the immediate emergency site(s);
- (10) ordering evacuations as necessary based on site requirements of the incident commander;
- (11) discontinuing utilities or services on a wide scale;
- (12) directing the use of municipal resources;
- (13) arranging extra resources (human and material);

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- (14) liaising with other municipalities and other levels of government, including the activation of mutual aid agreements;
- (15) recommending the termination of the state of emergency, when appropriate;
- (16) implementing a recovery strategy; and
- (17) participating in post-emergency debriefings.

5.3 Mayor

Upon learning of a potential emergency, the Mayor should consider the possible need for activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedure" (**see Appendix A**).

The Mayor or alternate shall:

- (1) declare an emergency to exist. Complete the "Declaration of an Emergency" form (**see Appendix F**);
- (2) notify the Minister of Community Safety and Correctional Services of the declaration of an emergency and of the termination of an emergency;
- (3) take action to make orders, not contrary to law, to implement the Plan and to protect the property, health, safety, and welfare of the inhabitants of the Town;
- (4) participate in decision making, determining priorities, and issuing strategic directives through the Town Administrator for the resolution of the emergency;
- (5) request assistance from senior levels of government, when required;
- (6) in consultation with the Town Administrator, approve news releases and public announcements;
- (7) as the Town of Fort Frances's key spokesperson, address the media as soon as possible after declaring an emergency. Staff advisors shall accompany the Mayor to address technical questions;

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- (8) keep Council updated regarding the situation and actions being taken to resolve the emergency;
- (9) terminate the emergency at the appropriate time and ensure all concerned have been notified.

5.4 Town Administrator – EOC Manager

Upon learning of a potential emergency, the Town Administrator should consider the possible need for activation of the Plan, and if warranted, shall trigger the “Emergency Plan – Alert Procedure” (**see Appendix A**).

The Town Administrator or alternate shall:

- (1) chair the meetings of the Municipal Emergency Control Group;
- (2) participate in decision making, determining priorities, and issuing strategic directives for the resolution of the emergency;
- (3) organize and supervise all activities within the Emergency Operations Centre;
- (4) advise the Municipal Emergency Control Group on administrative matters including Corporate Policies and Procedures;
- (5) conduct planning Cycle meetings on a scheduled basis;
- (6) disseminate decisions or directions to all response agencies made by the Municipal Emergency Control Group;
- (7) in conjunction with the Municipal Emergency Control Group direct the appointment of an liaison officer.
- (8) in the Mayor’s or designates absence, or at the request of the Mayor or designate, assume the Mayor’s responsibilities in the Emergency Operations Centre;
- (9) approve news releases and public service announcements from the EOC prior to their release;
- (10) liaise with town managers or chief administrative officers of neighbouring municipalities affected by the emergency or providing assistance to Town of Fort Frances emergency operations;
- (11) maintain a detailed log of all actions taken by the Town Administrator;
- (12) coordinate and chair a post-emergency debriefing of all key personnel involved in the emergency operations;
- (13) prepare a post-emergency report for submission to Town Council.

5.5 Emergency Information Officer

The Emergency Information Officer or alternate shall:

- (1) advise the Municipal Emergency Control Group on matters pertaining to public information, public affairs, and media relations;
- (2) gather, process and disseminate information for use by the Municipal Emergency Control Group;
- (3) upon approval of the Administrator or designate, release information to the public and media;
- (4) direct the establishment and operation of a Media Centre, a Call (Information) Centre, and an emergency site media centre;
- (5) issue public announcements, instructions, or warnings as directed by the Mayor or designate or Administrator;
- (6) provide public relations support as required;
- (7) coordinate all media requests, including arrangements for supervised tours near the emergency site(s);
- (8) arrange for photo or video records of the emergency operations;
- (9) maintain a detailed log of all actions taken by the emergency information officer;
- (10) participate in a post-emergency debriefing.

5.6 Scribe

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The scribe or alternate will:

- (1) assist the town administrator with their functions as requested;
- (2) ensure that timely and correct information is displayed on the main event board within the Emergency Operations Centre;
- (3) maintain a detailed log of all actions taken by the Municipal Emergency Control Group;
- (4) coordinate the provision of clerical staff to assist in the Emergency Operations Centre as required;
- (5) if directed by the Mayor or designate, ensure that all councillors are advised of the declaration and termination of the emergency;
- (6) if directed by the Mayor or designate, arrange a special Council meeting(s);
- (7) coordinate the arrangements for identification cards to be issued to the Municipal Emergency Control Group, town support staff and external resource personnel as required;
- (8) setup and maintain the operation of feeding, sleeping and meeting areas at the Emergency Operations Centre as required;
- (9) participate in a post-emergency debriefing and provide reports as requested by the town administrator;
- (10) ensure the security of the Emergency Operations Centre.

5.7 OPP Detachment Commander

Upon learning of a potential emergency, the Detachment Commander should consider the possible need for activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedure" (**see Appendix A**).

The Detachment Commander or alternate shall:

- (1) provide the Municipal Emergency Control Group with information and advice on law enforcement matters;
- (2) participate in decision making, determining priorities, and issuing strategic directives for the resolution of the emergency;
- (4) activate the OPP Emergency Call Out Procedures;
- (5) establish a communications link with the Police Incident Commander;
- (6) direct the establishment of inner and outer perimeters around the emergency site(s);
- (7) direct and control the dispersal of crowds within the emergency site(s);
- (8) direct the movement of emergency vehicles to and from the emergency site(s);
- (9) coordinate the arrangements for police operations with other municipal, provincial, or federal departments and arrange for additional supplies and equipment as required;
- (10) maintain law and order in evacuation and reception centres and other temporary facilities;
- (11) protect property and maintain law and order at the emergency site(s);
- (12) maintain a detailed log of all actions taken by the OPP;
- (13) participate in a post-emergency debriefing, and provide reports as requested by the Town Administrator.

5.8 Fire Chief

Upon learning of a potential emergency, the Fire Chief should consider the possible need for the activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedure" (**see Appendix A**).

The Fire Chief or alternate shall:

- (1) provide the Municipal Emergency Control Group with information and advice on fire service matters;
- (2) participate in decision making, determining priorities, and issuing strategic directives for the resolution of the emergency;
- (3) Ensure an incident commander or sector officer has been appointed to control operations at the emergency site.
- (4) establish a communications link with the onsite fire officer;
- (5) if required activate mutual aid arrangements for the provision of additional firefighting resources and equipment;
- (6) arrange for additional equipment and materials as required;
- (7) coordinate assistance with other municipal, regional, provincial, or federal departments and agencies;
- (8) maintain a detailed log of all actions taken by the Fort Frances Fire and Rescue Service;
- (9) participate in a post-emergency debriefing and provide reports as requested by the Town Administrator.

5.9 Community Emergency Management Coordinator

Upon learning of a potential emergency, the CEMC should consider the possible need for the activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedure" (**see Appendix A**).

The CEMC shall:

- (1) be responsible and accountable for the development and implementation of the Town of Fort Frances emergency management program;
- (2) provide the Municipal Emergency Control Group with information and advice on emergency management and progress of the program;

5.10 Manager of Operations and Facilities

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Appendix D

Upon learning of a potential emergency, the Manager of Operations and Facilities should consider the possible need for activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedures" (**see Appendix A**).

The Manager of Operations and Facilities or alternate shall:

- (1) provide the Municipal Emergency Control Group with information and advice on engineering and transit matters;
- (2) participate in decision making, determining priorities, and issuing operational directives through the Administrator - EOC Manager for the resolution of the emergency;
- (3) Ensure an incident commander or sector officer has been appointed to control operations at the emergency site.
- (4) direct and coordinate all Public Works operations in accordance with the Plan and directions issued by the Municipal Emergency Control Group;
- (5) maintain liaison with flood control centres, conservation and environmental agencies and be prepared to conduct relief or preventative operations;
- (6) provide engineering, personnel, materials, supplies, and equipment as required in support of emergency operations;
- (7) arrange for and coordinate provision and use of personnel, engineering materials, and equipment from other municipal, regional, provincial, or federal departments or private/commercial agencies;
- (8) assist with traffic control and emergency operations by clearing emergency routes, assisting the police in closing and opening roadways, marking obstacles, installing emergency road signs, and other actions as required;
- (9) coordinate the provision and use of all transportation resources in support of evacuation or other emergency operations as required;
- (10) coordinate the provision of emergency potable water, supplies, and sanitation facilities in support of emergency operations;
- (11) maintain liaison with regional public works and utility service agencies (i.e. hydro, gas, telephone, cable) and issue directions for the disconnection and reconnection of services
- (12) coordinate efforts to re-establish essential services;
- (13) coordinate debris removal activities;
- (14) coordinate demolition or securing of all "unsafe" buildings as directed by the Chief Building Official;

Agenda Item # 7.1

Appendix D

- (15) coordinate Public Works support for restoration and clean-up activities following the termination of the emergency;
- (16) maintain a detailed log of all actions taken by the Public Works Department;
- (17) participate in a post-emergency debriefing and provide reports as requested by the Town Administrator.

5.11 Superintendent of the Power Corporation

Upon learning of a potential emergency, the Superintendent of Power Corporation should consider the possible need for activation of the Plan, and if warranted, shall trigger the "Emergency Plan – Alert Procedures" (**see Appendix A**).

- (1) provide the Municipal Emergency Control Group with information and advice on electrical matters;
- (2) participate in decision making, determining priorities, and issuing strategic directives through the Administrator - EOC Manager for the resolution of the emergency;
- (3) Ensure an incident commander or sector officer has been appointed to control operations at the emergency site.
- (4) discontinue private or public electrical service in the emergency area if continuation of electrical service constitutes a hazard to public safety.
- (5) provide alternate supplies of electrical power where necessary and practicable
- (6) maintain a detailed log of all actions taken by the Power Corporation;
- (7) participate in a post-emergency debriefing and provide reports as requested by the Town Administrator.

6.0 SUPPORT GROUPS

6.1 Introduction

Municipal Emergency Control Group support groups may be formed from Town staff and personnel from other government agencies and organizations. Their advice, resources and information will assist the Municipal Emergency Control Group in making decisions. The Administrator - EOC Manager is responsible

for notifying support group personnel to report to the Emergency Operations Centre.

6.2 Incident Commander

The incident commander shall:

- (1) organize and coordinate the response at the emergency site(s) with all sector officers;
- (2) assess the situation under existing and potential conditions by consulting with sector officers and other agencies, take/authorize any action appropriate to preserve life, protect property and otherwise mitigate the adverse effects of the emergency;
- (3) coordinate with the Municipal Emergency Control Group and sector officers to ensure that the necessary equipment, supplies, and personnel are available;
- (4) provide, at regular intervals, information updates and reports regarding activities at the emergency site to the Municipal Emergency Control Group;
- (5) schedule briefings with individual and collective sector officers as to agency response status;
- (6) activate or coordinate with agencies, the evacuation of the immediate area or any area likely to be placed at risk, if warranted by conditions,
- (6) consider response alternatives and determine appropriate response actions (evacuation, containment, etc.) in consultation with sector officers and the Municipal Emergency Control Group;
- (7) establish an on-site command post at an appropriate distance from the emergency area that provides a good vantage point from which access to the emergency site can be controlled;
- (8) brief sector officer regarding the situation as they become involved;
- (9) obtain background information from those involved in the emergency or those who may have witnessed the incident, concerning the nature of hazardous material(s) and/or situation(s). Consult with experts, as required, to mitigate the emergency;
- (10) develop an emergency site organization plan/layout with the assistance of sector officers and establish inner and outer perimeters and staging areas to control access to and movement within emergency site(s);
- (11) coordinate the release of information at the scene with the emergency information officer and the Municipal Emergency Control Group;

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Appendix D

- (12) request, from the Municipal Emergency Control Group, logistical support for emergency operations and personnel at the scene;
- (13) ensure the overall safety of the emergency site, in particular that safety precautions are enforced regarding wearing personal protective equipment
- (14) In consultation with sector officers, develop a demobilization plan for all resources within the emergency site. Implement this plan upon official notification of the termination of the emergency;
- (15) ensure that all sector officers have established work schedules for their personnel at the emergency site(s);
- (16) maintain a detailed log of all actions taken
- (17) participate in a post-emergency debriefing and provide such reports as requested by the Administrator.

6.3 Northwestern Health Unit Representative

The Medical Officer of Health or Health Unit Representative shall:

- (1) provide the Municipal Emergency Control Group with information and advice on matters pertaining to public and/or environmental health;
- (2) participate in decision making, determining priorities, and issuing operational directives for the resolution of the emergency, as requested by the Municipal Emergency Control Group;
- (3) receive and distribute vaccine in the event of a pandemic;
- (4) liaise with the Ministry of Health, Public Health branch;
- (5) provide recommendations regarding the evacuation of buildings or areas for reasons of health;
- (8) coordinate response to disease related emergencies or anticipated emergencies such as epidemics, in accordance with the Ministry of Health policies;
- (9) liaise with the Manager of Operations and Facilities regarding the provision and testing of potable water and sanitation facilities;
- (8) liaise with the Director of Ontario Works and other agencies on areas of mutual concern regarding health services in emergency areas including: food safety, counseling of victims, general safety and sanitation, accommodation standards, air monitoring, provision of home care services;
- (9) maintain detailed log of actions taken by the Northwestern Health Unit;

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Appendix D

- (10) participate in a post-emergency debriefing and provide reports as requested by the Administrator;
- (11) coordinate with the Community Care Access Centre for appropriate home care for any early discharge of patients.

6.4 Rainy River District Social Services Board Representative

- (1) coordinate assistance from other municipal, regional, provincial, federal departments, or private agencies; Control community service agencies to assist at reception, and other tasks as directed by group
- (2) maintain a detailed log of all actions taken by the Community Services Division;
- (3) participate in a post-emergency debriefing and provide reports as requested by the Administrator.

6.5 Media Communications

- (1) The Municipal Emergency Control Group shall use B93 FM to inform emergency personnel and the public of the situation and of the action to be taken. In the event that B93FM is unable to broadcast, KBWH FM (99.5) will be the alternate station.

6.6 Hospital Official

- (1) provide the Community Control Group with information and advice;
- (2) implement the hospital emergency plan;
- (3) coordinate with ambulance services the transportation and delivery of casualties to hospital and/or treatment centres.

6.7 Ambulance Service Representative

The ambulance service representative or alternate shall:

- (1) provide the Community Control Group with information and advice on health service matters;
- (2) participate in decision making, determining priorities, and issuing operational directives to support the resolution of the emergency
- (3) activate the appropriate emergency call out procedures;
- (4) coordinate the acquisition of ambulance resources as required by the incident commander or sector officer;

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- (5) coordinate with senior police officials the movement of ambulances to and from the emergency site(s);
- (6) coordinate with other emergency services and duty officer for the provision of triage and treatment at the emergency site(s), casualty collection posts, and the distribution of casualties in accordance with the plan and directions issued by the Community Control Group;
- (7) coordinate the provision of special emergency health service resources at the emergency site (i.e. ambulances, support units, paramedics, ambulance helicopters, etc.);
- (8) coordinate with the MOH in time of epidemics for the provision of triage and emergency treatment at the emergency site(s), casualty collection posts and the distribution of casualties.
- (9) provide the main radio communication link among health services and RRDSSAB Health Services Manager for notifying and requesting assistance of the Ontario Ministry of Health and Long Term Care, Emergency Health Services;
- (10) liaise with the Medical Officer of Health and assist with the organization and transportation of persons in health care facilities, homes for the aged, nursing and rest homes, and disabled citizens that need to be evacuated;
- (11) maintain a detailed log of all actions taken by the ambulance service;
- (12) participate in a post-emergency debriefing and provide reports as requested by the Administrator.

6.8 Red Cross, if requested:

- 1 Coordinate (lead role) the provision of emergency feeding, reception, accommodations, clothing, identification, registration and inquiry,
- 2 Provide registration and inquiry services and assist at reception center(s) as required
- 3 Provide first aid services at evacuation centers and other locations required.
- 4 Maintain a detailed log of all actions taken and provided reports are requested by the administrator-EOC Managers/CCG Fort Frances
- 5 The Canadian Red Cross staff or designates will act as public information Liaison at all disaster response, concerning Canadian Red Cross matters
- Responding to the dispatch call by arriving on the scene within three hours from call.

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- Volunteers will, at minimum wear Red Cross lanyard and identification card, as well as a Canadian Red Cross vest.
- Canadian Red Cross will provide for immediate emergency needs, such as lodging, comfort kits, food and clothing and family reunification, for a period of up to 72 hours or as needed
- The Canadian Red Cross team leader will assess the situation and the needs of the victims.
- The Canadian Red Cross team leader, or designate, will liaise at the emergency scene with RRDVSP Team Leader/s.

6.9 Rainy River Districts Victim Services Program, will provide, on request:

1. Team leaders that will dispatch the correct number of RRDVSP volunteers as requested RRDSSAB or CRCS
2. Volunteers will take direction from a RRDVSP team leader, liaise with the RRDSSAB and CRCS staff/ volunteers on –scene, and follow their own protocols within their mandate.
3. Provide victims with emotional support, practical assistances and referral information in keeping with the policies.
4. Follow-up services with victims with regard to emotional, practical and referral support in the days following the event, if victims have consented. If at any time, a further need is identified that can be met by CRC or RRDSSAB, victims will be referred to their services for additional assistance
5. Volunteers with proper identification and emergency vests
6. Personal services (if applicable) for referrals to, hospital, clinics, veterinarians, pet shelters, clergy, spiritual advisors, access to counseling services, local transportation, etc.
7. Provide (dependant on numbers) emergency, one- time personal hygiene supplies for all adults, diapers etc.

6.10 Amateur Radio Operators

1. If requested, the Fort Frances amateur radio operators shall provide radio equipment and operators at the Emergency Operations Centre and other locations as required and directed by the Municipal Emergency Control Group. It shall also maintain a detailed log of all actions taken and provide reports as requested by the Administrator

6.11 Ministry of Natural Resources

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- 1, If requested, the Ministry of Natural Resources shall provide additional personnel and equipment as required. They shall also maintain a detailed log of all actions taken and provide reports as requested by the Administrator. The MNR shall be accessed through the duty officer for EMO

6.12 Chief Building Official

- 1, If requested, the chief building official shall coordinate with the manager of operations and facilities the securing unsafe buildings, or demolition of structures found to be unsafe. The CBO shall also maintain a detailed log of all actions taken and if requested participate in a post-emergency debriefing.

6.13 Critical Incident Stress Management Team

1. If requested, the CISM team will work with the administrator and/or Incident Commander to provide debriefings and follow-ups for emergency service personnel and community intervention as required.

7.0 TRAINING AND EVALUATION

7.1 Introduction

Training, exercise, and evaluation form the basis for ensuring that collective efforts at all levels can be properly coordinated and controlled. Effective emergency response is possible only when people understand the Plan and have had the opportunity to practice the procedures.

The Plan must provide for:

- (1) the education of Town staff concerning emergency preparedness and their responsibilities established within the Plan;
- (2) individual and collective training to ensure personnel are prepared to implement the Plan; and
- (3) exercises and evaluations to practice and confirm the state of readiness of Town staff to respond to an emergency.

7.2 Definitions

Simulated Exercises:

Individual control agencies practice operational procedures without the actual deployment of personnel or resources. Common approaches to this type of exercise include paper exercises and tabletop discussions. The actions of upper and lower operations are simulated by the exercise design staff.

Specialty Exercises:

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Appendix D

These exercises practice response to a specific risk such as: bomb threats, aircraft disaster, major flooding, or radiation spill. These types of exercises can involve a simulated approach or actual deployment of resources.

Communication Exercises:

These exercises are designed to test the emergency notification procedures or to practice or evaluate communication resources.

Emergency Operations Centre Exercises:

The Emergency Operations Centre staff shall convene to test and develop operational procedures, problem solving skills, communication systems, and interoperability within the Town of Fort Frances and other outside agencies. The conduct of these exercises is usually in the form of a paper or communication exercise with staff participating as the Emergency Site Manager and representing coordinated departmental control centres.

7.2 Definitions - continued

Major Exercise:

This exercise involves the physical deployment of resources in response to a staged emergency situation. It may be undertaken by a single department or agency, or may be conducted in conjunction with others.

Mass Exercise:

This is a wide-scale, comprehensive exercise that involves all, or the majority of responding agencies and the actual deployment and exercise of resources at all levels. A mass exercise includes the activation of the Municipal Emergency Control Group, Emergency Operations Centre and one or more emergency sites.

7.3 Training

Each Department is responsible for conducting individual, team, and combined training to ensure that staff are prepared to perform the tasks and responsibilities outlined in their respective Emergency Response Procedures.

7.4 Exercises

The purposes of exercises are:

- (1) to practice, test, evaluate, and improve plans and operational capabilities;
- (2) to promote and refine co-operation and coordination among operational teams, staff, and support groups, and command and control elements;
- (3) to stimulate and maintain interest and enthusiasm.

Agenda Item # 7.1

Appendix D

Departments are responsible for developing and conducting simulated, specialty, communication, and major exercises within their departments.

The Municipal Emergency Control Group shall conduct a minimum of one exercise each year. This may be a simulated or communication exercise.

7.5 Evaluation

Each department or agency is responsible for the evaluation of its emergency response procedures and the readiness of its respective organization. Significant occurrences that limit or preclude an organization from performing the responsibilities outlined in the plan must be reported to the fire chief.

8.0 PLAN MAINTENANCE AND REVISION

8.1 Plan Maintenance and Revision

An Emergency Planning & Evaluation Committee chaired by the Community Emergency Management Coordinator or designate, will be composed of staff from various town departments and outside agencies. The committee will be responsible for keeping the plan (and its appendices) current with respect to legislation, agency roles and responsibilities and any other pertinent information.

Town departments are responsible for reviewing and amending their internal sub-plans annually.

The Emergency Planning & Evaluation Committee will review and revise the Plan in January of every year, and any amendments shall be distributed to all of the Plan holders in a timely manner (see **Appendix I**, Distribution List).

TOWN OF FORT FRANCES

BY-LAW NO. 11/12

(A By-Law to Establish Tax Ratios for Prescribed Property Classes)

WHEREAS the Corporation of the Town of Fort Frances is required to establish tax ratios pursuant to s.308 of the *Municipal Act, 2001*, S.O. 2001 c.25, as amended;

AND WHEREAS the tax ratios determine the relative amount of taxation to be borne by each property class;

AND WHEREAS the property classes have been prescribed pursuant to Section 7 of the *Assessment Act*, R.S.O. 1990, c.A.31, and Part II of O.Reg. 282/98 (optional large industrial class has been adopted);

AND WHEREAS on March 5, 2012 Council gave direction on the tax ratios to be established for use in 2012.

NOW THEREFORE Council of the Corporation of the Town of Fort Frances HEREBY ENACTS as follows:

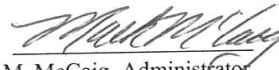
1. That for the taxation year 2012, the tax ratio for property in:

- a) the residential property class is 1;
- b) the multi-residential property class is 2.597000;
- c) the commercial occupied property class is 2.026121;
- d) the commercial vacant/excess property class is 1.418285
- e) the industrial occupied property class is 2.811688;
- f) the industrial vacant/excess property class is 1.827597;
- g) the large industrial occupied property class is 5.127100;

- ☒ OK
- ☐ Recommended
- ☐ Includes my input
- ☐ Recommended as amended/with comment
- ☐ Not recommended
- ☐ Will Speak to this
- ☐ Other

Date:

March 7, 2012


M. McCaig, Administrator

Agenda Item # 7.2

- h) the large industrial vacant/excess property class is 3.332615;
- i) the pipelines property class is 2.526858;
- j) the farm property class is 0.25;
- k) the managed forests property class is 0.25.

This By-Law shall come into force and take effect on final passing.

READ THREE TIMES and finally passed in open Council this 12th day of March 2012.

R. Avis, Mayor

G. Treftlin, Clerk

Agenda Item # 7.3

TOWN OF FORT FRANCES

BY-LAW NO. 12/12

(Being a by-law to approve a contract awarded through the public tender process - the *Municipal Act, 2001*, R.S.O. 2001, c.25.)

WHEREAS on June 27, 2011, Council awarded a contract (11-OF-09) to Wagner Construction Canada ULC for 2011 Road Reconstruction and Watermain Improvements in phase 1 to be completed in 2011 and phase 2 to be completed in 2012;

AND WHEREAS Phase 1 of the contract has been completed and Phase 2 is now ready to proceed;

NOW THEREFORE Council for the Corporation of the Town of Fort Frances HEREBY ENACTS as follows:


1. That pursuant to the award of a contract under Tender 11-OF-09 the contracts in the form of contract documents dated June 2011 and February 2012 with Wagner Construction Canada ULC prepared by Engineering Northwest Ltd. be approved for the Mayor and Clerk to sign and affix the Corporate Seal thereto.

This by-law shall come into force and take effect on the final passing thereof.

READ THREE TIMES and finally passed in open Council this 12th day of March 2012.

- ☒ OK
- ☐ Recommended
- ☐ Includes my input
- ☐ Recommended as amended/with comment
- ☐ Not recommended
- ☐ Will Speak to this
- ☐ Other

Date:

March 7, 2012 

M. McCaig, Administrator

Agenda Item # 7.4

TOWN OF FORT FRANCES

BY-LAW NO. 13/12

(Being a by-law to authorize the entering into of certain lease agreements at the Fort Frances Municipal Airport - the Municipal Act, 2001, S.O. 2001, c. 25.)

WHEREAS on January 23rd, 2012, Council authorized the entering into of certain lease agreements at the Fort Frances Municipal Airport.

NOW THEREFORE Council for the Corporation of the Town of Fort Frances HEREBY ENACTS as follows:

1. That the following lease renewal agreements with term January 1, 2012 to December 31, 2012 in the form attached hereto as schedules to this by-law be approved for the Mayor and Clerk to sign and fix the Corporate Seal thereto:
 - a) Enterprise Rent-A-Car Canada Limited (Counter Space lease), being Schedule "A",
 - b) Enterprise Rent-A-Car Canada Limited (Parking Spaces lease), being Schedule "B",
 - c) North-Air Services (Counter Space lease), being Schedule "C",
 - d) North-Air Services (Parking Spaces lease), being Schedule "D";
 - e) Bearskin Lake Air Service LP (Counter & Storage Space), being Schedule "E".

This by-law shall come into force and take effect on the final passing thereof.

READ THREE TIMES and finally passed in open Council this 12th day of March 2012.



TOWN OF FORT FRANCES

BY-LAW NO. 14/12

(Being a by-law to approve an employment agreement with Jason Kabel and for his appointment as Manager of Community Services for the Town of Fort Frances, the *Municipal Act, 2001*, S.O. 2001, c. 25, Section 8.)

WHEREAS on March 5, 2012, Council approved a report from the Human Resources Manager with regard to an employment agreement with Jason Kabel and his appointment as Manager of Community Services for the Town of Fort Frances.

NOW THEREFORE Council for the Corporation of the Town of Fort Frances HEREBY ENACTS as follows:

1. That the contract of employment with Jason Kabel in the form attached to a report dated February 29, 2012 from the Human Resources Manager be approved for the Mayor and Clerk to sign and affix the Corporate Seal thereto.
2. That effective April 16, 2012, Jason Kabel is appointed to the office of Manager of Community Services;
3. That the appointment of George Bell as Manager of Community Services effective June 30, 2012 is terminated on his retirement from office.

This by-law shall come into force and take effect on the final passing thereof.

READ THREE TIMES and finally passed in open Council this 12th day of March 2012.

Agenda Item # 8.1



Assisted Living



OK



Recommended



Includes my input



Recommended as amended/with comment



Not recommended



Will Speak to this



Other

For council direction
March 7 2012 *M. McCaig*
Date: M. McCaig, Administrator

Wednesday, March 7, 2012

Dear Community Partner,

The local Assisted Living Action Group (ALAG) cordially invites you to a Strategic Planning Meeting facilitated by Lori Maki, being held:

**Monday, March 26, 2012 from 8:00 am – 1:00 pm at Sister Kennedy
Centre - 401 Nelson St, Fort Frances
Lunch will be provided**

ALAG is providing the opportunity for community partners and individuals to provide their input on the implementation of a survey and to determine current and future housing, safety and service needs of seniors. As well, we will be assessing the level of commitment of seniors in the Rainy River District who may wish to access these services. Please give this matter your serious consideration, as we know that seniors are a valuable and contributing sector of our communities.

As there are concerns regarding the availability of future economic resources to meet the increasing demand of the aging population, the ALAG is working towards an innovative community solution and the development of a 20 to 30 year plan.

It is vital that we receive input from all community partners and seniors in order to better assess the needs of area residents. We feel that this is an excellent opportunity to provide your input and become involved in an exciting and rewarding venture with potential social and economic benefits to our District. We value your input and look forward to your RSVP by March 20, 2012 by calling Krista Nielson at 274-9827, ext. 239 or email knielson@nwhu.on.ca.

Sincerely,

Erma Armit, Robert Shultz

Mrs. Erma Armit, Assisted Living Action Group, Chairperson

Mr. Robert Shultz, Seniors and Law Enforcement Together, Chairperson

cc: Community Partner Invitation List (see reverse)

Page 1 of 2

**Strategic Planning Session
Community Partner Invitation List**

Northwestern Health Unit
Northwest Independent Living Services
Riverside Health Care Facilities
Seniors and Law Enforcement Together
Ontario Provincial Police
Rainy River District Social Services Administration Board
Town of Fort Frances Mayor & Council
Town of Fort Frances CEO
Fort Frances Economic Development
Canadian Mental Health Association Older Adults Program
Rainy River Valley Safety Coalition
Community Care Access Centre
Sunset Country Metis
United Native Friendship Centre
Revera Living
Rainy River District Municipal Association
Local Health Integration Network
Rainycrest Residents' Council
Fort Frances Clinic Health Team
Sister Kennedy Centre Board of Directors
Meals on Wheels
Tribal Health Authority
Gizhewaadiziwin Health Access Centre

Agenda Item # 9.1

Council Info -



21 Wolsley Street
Kenora, ON
P9N 3W7

February 24, 2012

Glen Treftlin, Municipal Clerk
Town of Fort Frances
320 Portage Avenue
Fort Frances, ON P9A 3P9

Dear Glen Treftlin:

RE: Northwestern Health Unit Levy 2012

The attached invoice indicates your community's obligated contribution to the cost-shared Mandatory Programs in disease and health promotion and protection, as provided by the Northwestern Health Unit in the region specified under the *Health Protection and Promotion Act*.

This annual contribution of \$366,238.53, to be paid in twelve payments of \$30,519.88, due on the first day of each month, should be sent to the Accounting Department, Northwestern Health Unit, 21 Wolsley Street, Kenora, Ontario, P9N 3W7. As in previous years, late payments will be charged at a rate of 1.25% per month.

If you require clarification regarding your levy contribution, please do not hesitate to contact me at (807) 468-3147, extension 3256.

Sincerely,

Lois Bailey
Chief Financial Officer

LB/ldm

CC: Mark Perrault, Chief Executive Officer
John Albanese, Chair, Board of Health

Enc. 1

NORTHWESTERN HEALTH UNIT

21 Wolsley Street
Kenora ON
P9N 3W7

Public Health Levy Notice
January 01 – December 31, 2012

Population (1)	6,741
Per Capita Levy	\$54.33
Total Annual Levy	\$366,238.53
Monthly installment (due on first day of every month)	\$30,519.88

The total municipal share of the annual cost-shared budget of the Northwestern Health Unit is \$2,462,236.00 divided over nineteen municipalities with a total population of 45,320.

- (1) Municipal population per the most recent enumeration (in 2010) conducted under Section 15 of the Assessment Act.

Terms: Net 30 days. Interest will be charged monthly at the rate of 1.25% on the outstanding balance.

Agenda Item # 9.2



March 6, 2012

To Whom It May Concern /Town Council:

This is a letter of interest related to the property formerly the Huffman School, or the property formerly the Fort Frances Public Library.

My name is Bill Krag and I have been a life long resident of the town of Fort Frances. I have several rental properties in town and one industrial site. I am interested in converting either of the above mentioned properties to housing units for special needs groups within our community. For example; handicapped, mental health, elderly or geared to income. If the town was willing to sell either of these properties I would be willing to purchase one for the purposes mentioned above.

I feel the community would benefit from any type of multi-use facility and I am willing to provide the means of building one.

Sincerely,

A handwritten signature in blue ink that appears to read 'B. Krag'.

Bill Krag

...

Agenda Item # 9.3

Mark McCaig/Frances
07/03/2012 08:21 AM

To Kathy Lawson/Frances@Frances
cc
bcc
Subject Fw: Vet Committee

For council info

----- Forwarded by Mark McCaig/Frances on 03/07/2012 08:21 AM -----



"Kim Jo Bliss"
<kjbherefords@xplornet.com
>
03/06/2012 01:59 PM

To "Kim Jo Bliss" <kjbherefords@xplornet.com>
cc
Subject Vet Committee

Hello

I have been asked to mail out to each of Municipalities a copy of the brochure of where we send out Vet Contract Fee to. (I will be billing once again early April.) They feel many are unaware of what the provincial committee does – so they would like to pass along as much info. as possible.

I will attach the request – and please let me know if you have any questions or cannot open the attachment.

Thanks and I will be in touch early April.

1) MNDM sends out a survey to users of the VAP, so they mail out a survey to every 5th visit claimed that the Vets note on their expense claim forms.

In this survey Melissa Gainer from MNDM, pointed out that there is a very low score when they ask if the people who use the VAP...are they aware of NPAHN. To increase that awareness we have re-done our brochure and put it on a pdf format, which I'm going to attach. We were wondering if you, the local VSC person, would go to the township office, where you get your VSC fees paid from and ask the municipal office if they would include the brochure in their next newsletter that they normally send out when they mail their tax bill to their rate payers. We were thinking that they might be able to download the pdf form and include it right into their newsletter. Try out the idea and let me know how it goes. We thought of this idea because we cannot get the names of the clients that the Vets call on so maybe the municipal

...

Agenda Item # 9.3

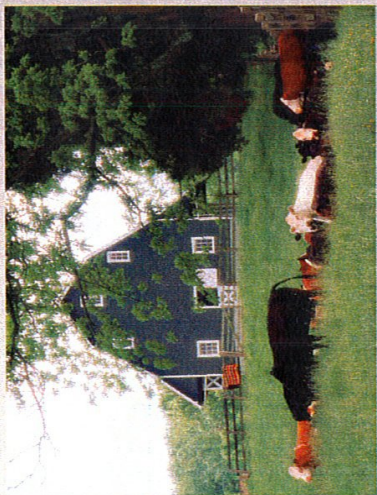
offices could help to inform the rate payers of another program that they support in their community.

Kimmie Jo
KJB Herefords
R.R. # 2
Emo, ON
POW 1E0
807-482-2863 (home)
807-275-9706 (cell)



npahn brochure (1).pdf

Northern Producer Animal Health Network



NPAHN

"To contribute to the development and maintenance of a viable and diverse livestock industry in Northern Ontario through the provision of veterinary services to livestock owners and support activities including veterinary recruitment, retention, as well as producer education and communication."

Contact

Gord Mitchell

NPAHN Executive Secretary

42 Lake Drive

Huntsville, On P1H 1E7

(705) 789-2062

mitchg@vianet.ca

"Growing Rural Development Through Farming"



Veterinary Assistance
Program
(VAP)

Ministry of Northern
Development and
Mines (MNDM)

Northern
Producer
Animal
Health Net-
work
(NPAHN)

Designated Area
Veterinary Associa-
tion (DAVA)

Veterinarian Service Committees (VSC)

Algoma, Bruce Peninsula, Cochrane South, Cochrane/Glackmeyer, Dryden, East Parry Sound, Haliburton, Hearst, Kapuskasing, Kenora, Manitoulin, Muskoka, North Hastings, North Parry Sound/East Nipissing, Rainy River, Renfrew, Temiskaming, Timmins, Thunder Bay, West Nipissing/East Sudbury, West Sudbury, West Parry Sound

All Livestock Owners



What is NPAHN?



**Northern
Producer
Animal
Health
Network**

The umbrella organization for the 22 Veterinary Service Committees serviced by the Vet Assistance Program.

What is VAP?

**Veterinary
Assistance
Program**

The Veterinary Assistance Program (VAP) helps promote the viability of livestock industry by supporting the provision of large animal veterinary services. This program is run through the Ministry of Northern Development and Mines. MNMNM offsets the travel, locum and continuing education costs incurred by the participating Veterinarians.



Who Qualifies for the Veterinary Assistance Program?

Veterinary practices located in the designated program areas that are registered with the CVO and maintain an accredited Food-Producing Animal mobile. A participating veterinary practice is designated to the program by the local VSC.

Participating Producers include livestock owners located in the designated program areas, who own or care for at least one horse, bovine, sheep, goat, swine, poultry, bison, deer, rabbit, or animal maintained in captivity for producing fur, velvet, or meat.



Where can you find NPAHN Members?

You can find us at:

www.northernproduceranimalhealthnetwork.ca

Or contact:

Gord Mitchell
NPAHN Executive Secretary
42 Lake Drive
Huntsville, On P1H 1E7
(705) 789-2062
mitchg@vianet.ca



NPAHN's Mission

- Promote the development, sale and export of agricultural products by making veterinary service available to northern and remote communities
- Promote educational opportunities for owners of large animals in health production and management
- Set up local VSC's that assess the animal health needs of their local agricultural communities and advise the program manager of the VAP of modifications that will keep the program current to the needs of livestock owners





Office of the City Clerk

February 24, 2012

To all Ontario municipalities with any of hospitals, post secondary institutions or provincial correctional institutions:

Dear Sir/Madam:

RE: CITY COUNCIL MEETING – CITY OF KINGSTON SUPPORT FOR INCREASE IN PROVINCIAL PAYMENT-IN-LIEU OF TAXES – FEBRUARY 21, 2012

I would confirm that Kingston City Council at its regular meeting held on February 21st, 2012, approved the following resolution, being Clause 1., New Motions:

- 1) *Moved Councillor Glover*
Seconded Councillor Schell

WHEREAS in 1970 the rate of provincial payments in lieu of taxes for universities was arbitrarily set at \$25 per full time student; and

WHEREAS in 1973 that was doubled to \$50 per student and the payment was expanded to include hospitals and provincial correctional institutions; and

WHEREAS in 1987 that rate was increased by 50%, still without apparent justification, to \$75 per student and bed; and

WHEREAS that rate has remained constant since that time despite the fact that inflation would in 2012 require an almost doubling the payment (\$146); and

WHEREAS at least sixty-five communities have called for an increase in payments; and

WHEREAS heads of universities are supporting that call; and

WHEREAS Premier McGuinty has looked to the municipalities of the province to be the economic engine of Ontario; and

WHEREAS the payments in lieu of taxes do not meet the actual costs of municipalities to provide the necessary services for the various institutions, thus placing an unfair tax burden on their property tax payers, thereby jeopardizing a municipality's ability to meet infrastructure demands, and consequently weakening their ability to act as economic engines;

The Corporation of the City of Kingston
216 Ontario Street, Kingston, ON K7L 2Z3

Phone: (613) 546-4291 ext. 1247

Fax: (613) 546-5232

jbolognone@cityofkingston.ca

Agenda Item # 9.4

THEREFORE BE IT RESOLVED THAT the City of Kingston calls on the government of the Province of Ontario to include in the budget now being prepared an increase to the payments in lieu of taxes; and

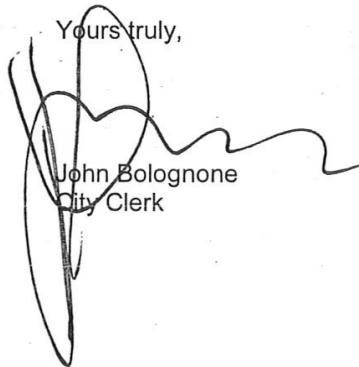
THAT the City of Kingston calls on the Province of Ontario to meet with the host municipalities for the purpose of reviewing the basis for payments in lieu of taxes, and determining a stable foundation going forward for those payments that meets associated costs prior to the 2013 budget cycle; and

THAT copies of this motion be sent to: the Premier Dalton McGuinty; the Honourable Dwight Duncan, Minister of Finance; the Honourable John Gerretsen, MPP for Kingston and Islands; all Ontario municipalities with any of hospitals, post secondary institutions or provincial correctional institutions; the Large Urban Mayors Caucus of Ontario (LUMCO); the Eastern Ontario Mayors Committee (EOMC), and the Association of Municipalities of Ontario (AMO).

CARRIED UNANIMOUSLY

Should you have any questions or concerns regarding this matter, please do not hesitate to contact me.

Yours truly,



John Bolognone
City Clerk

/ja

File No.

The Corporation of the City of Kingston
216 Ontario Street, Kingston, ON K7L 2Z3

Phone: (613) 546-4291 ext. 1247

Fax: (613) 546-5232

jbolognone@cityofkingston.ca

Agenda Item # 9.5



**Hatch Mott
MacDonald**

→ Council Info
cc D. Brown 2011-03-01
Hatch Mott MacDonald
2800 Speakman Drive
Mississauga, ON L5K 2R7
www.hatchmott.com



February 23, 2012

Mr. Mark McCaig
Administrator
Town of Fort Frances
320 Portage Avenue
Fort Frances, ON P9A 3P9

Dear Mr. McCaig:

RE: Completion of Study Notice
Class Environmental Assessment for Provincial Transportation Facilities
Hwy 602, Rainy River Tributary Culvert Replacement
4 km West of the Easterly Junction of Hwy 11 and Hwy 602
MTO File: GWP 6938-10-00

Please be advised that the Transportation Environmental Study Report (TESR) for the above noted project has been prepared. The TESR has been completed in accordance with MTO's Class Environmental Assessment for Provincial Transportation Facilities, and has been filed with the Ministry of the Environment for information and monitoring purposes.

The Completion of Study notice is attached, which identifies the locations where the TESR is available for viewing and outlines details about MTO's Class Environmental Assessment process. This notice will be placed in the Rainy River Record on February 28, 2012 and Fort Frances Times on February 29, 2012. The 30-day public review period will therefore end on March 30, 2012.

If you have any comments, concerns or questions, or would like additional information about the study, please feel free to contact me.

Sincerely yours,

FER:

Philip D. Murray, M. Eng., P.Eng.
Manager Bridges and Roads
T 905-403-4265 F 905-855-2607
philip.murray@hatchmott.com

PM:bw

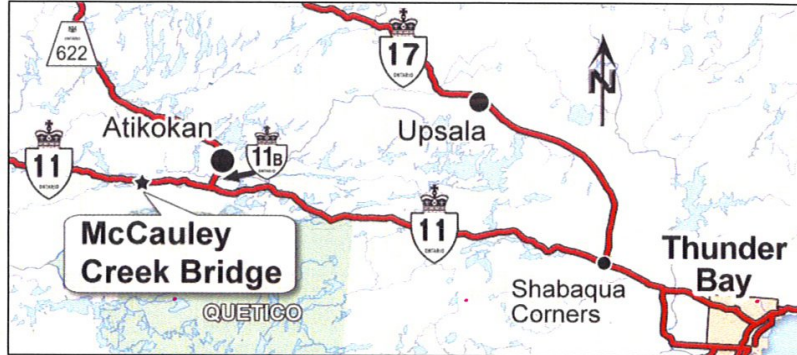
Enclosure

cc: R. Kriscuinas, MTO
P. DeCal, MTO
D. Wiersema, ENL

McCauley Creek Bridge Replacement PROJECT STEP-DOWN

THE PROJECT

The **Ministry of Transportation (MTO)** has completed a study for the replacement of the McCauley Creek Bridge located on Highway 11, 23.6 kilometres west of Highway 11B.



The existing bridge and piers will be removed and replaced with a single span prefabricated box girder structure on new foundations. This option was selected to:

- minimize disruption to the creek by avoiding in-water placement of the structure
- simplify on-site construction
- reduce construction time
- minimize disruption to traffic.

The bridge will be replaced at the existing location with no change to the horizontal alignment of the highway. To maintain the existing navigation clearance under the bridge and to accommodate the deeper girders, the vertical alignment of the highway will be raised by approximately 0.4 metres at the bridge. A single lane will remain open to signalized traffic throughout the duration of the work. Additional information about this project is available at: www.enl-tbay.com/mccauley.html.

THE PROCESS

This project has followed the Class Environmental Assessment for Provincial Transportation Facilities (2000) process for a Group B project. Based on the information collected during the study process, it has been determined that this project will not result in any significant environmental effects. Accordingly, MTO is proposing to step-down this project from a Group B to a Group C project. If this project is stepped down to a Group C project, a Transportation Environmental Study Report will not be prepared and no future public notices will be provided for this project.

You have a right to request that this project remain a Group B project. Should you wish to make this request, please contact the representative below by March 22, 2012. If no objections are received by this date, the project will be stepped down to a Group C project.

COMMENTS

To obtain additional information or to provide comments, please contact:

Philip Murray, M. Eng., P. Eng.
Manager Bridges
Hatch Mott MacDonald
2800 Speakman Drive
Mississauga, ON L5K 2R7
tel: 905-403-4265 (call collect)
fax: 905-855-2607
e-mail: philip.murray@hatchmott.com

Information will be collected in accordance with the Freedom of Information and Protection of Privacy Act. With the exception of personal information, all comments will become part of the public record.



Agenda Item # 9.6



Larry J. McCabe, Secretary-Treasurer
57 West St., Goderich, ON N7A 2K5
lmccabe@goderich.ca

February 28, 2012



Dear Head of Council, Members of Council and Municipal Staff,

RE: 2012 OSUM Conference & Trade Show

Please join us in the Town of Huntsville at Deerhurst Resort for the OSUM 59th Annual Conference and Trade Show from May 2nd to May 4th, 2012. This year's theme is the "Municipal Leaders Summit."

Registration, accommodation and program information have been distributed by the Town of Huntsville and general inquiries may be directed to Kate Austin at 1-705-789-4771, ext. 33 or at kate@huntsvillelakeofbays.on.ca. Cheques for registration fees should be made payable to "The Huntsville/Lake of Bays Chamber of Commerce."

Additional Conference and Tradeshow details can also be provided by Ted Blowes, Conference and Trade Show Coordinator at 519-393-5877 or ted.b@quadro.net or by clicking on the OSUM Conference link at www.huntsville.ca or www.osum.ca

For those interested in serving on the OSUM Executive Committee, a nomination form is enclosed and will be received by the undersigned until April 13, 2012.

The Conference Program has a wide variety of topics and allows for opportunity for delegate participation. There will be more than 75 Exhibitors in attendance. Please plan on attending the Conference to obtain current information on municipal issues.

We are pleased to announce that OSUM 2013 will be hosted by the Town of New Tecumseth at the Nottawasaga Inn May 1st to 3rd, 2013.

Yours truly,

Larry J. McCabe
Administrative Officer

LJM/af1

Encl.

...

Agenda Item # 9.6

ONTARIO SMALL URBAN MUNICIPALITIES
Section of Association of Municipalities of Ontario

2012 NOMINATION FORM

Nomination for OSUM Executive Committee

Name of Nominee _____

Representing Municipality of _____

Is the municipality a current member of the Association of Municipalities of Ontario?

YES ☐ NO ☐ (please check one)

Title _____

Address _____

Telephone _____

Fax _____

E-mail _____

Background information (municipal service, areas of municipal interest, etc.)

Nominees should be aware that OSUM is not responsible for the cost of expenses associated with OSUM activities. Those interested should have a Municipal Council motion supporting their nomination.

Signature of Nominee

Signature of Nominator

Date

Signature of Seconder

*Please return to Larry J. McCabe c/o Town of Goderich,
57 West Street, Goderich ON N7A 2K5 by April 13, 2012 by 4:00 p.m.*

Agenda Item # 9.7

**Ontario Human
Rights Commission**

Office of the Chief Commissioner
180 Dundas Street West, 9th Floor
Toronto ON M7A 2R9
Courier postal code: M5G 1Z8
Tel.: (416) 314-4537
Fax.: (416) 314-7752

**Commission ontarienne
des droits de la personne**

Cabinet de la commissaire en chef
180, rue Dundas ouest, 9^e étage
Toronto ON M7A 2R9
Code postal pour livraison : M5G 1Z8
Tél. : (416) 314-4537
Télec. : (416) 314-7752



February 21, 2012

Dear Colleagues,

I am pleased to present *In the zone: Housing, human rights and municipal planning*. This new Ontario Human Rights Commission guide offers your municipality information about your legal obligations, and about the tools and best practices you can apply to connect human rights and housing when making zoning and planning decisions.

In the zone is designed to be a practical tool for municipal planners, councillors, housing service managers, district social services boards and others who make decisions about planning and zoning for housing. It is also a resource for organizations and advocates working with municipalities to advance human rights in housing.

Over the past few years, the OHRC has dealt with many different zoning issues with cities across Ontario. While each municipality and each housing issue is unique, some common themes emerged. *In the zone* was written to capture these themes, and to help the OHRC send a consistent message to every municipality in Ontario.

The guide offers the OHRC's best advice on:

- The legal obligation to take steps to overcome discriminatory opposition to affordable housing
- Focusing on legitimate land use planning, not "people zoning" – in other words, not using zoning to keep certain people out of some neighbourhoods
- Making sure public meetings focus on planning issues, not the people who will live in the housing
- Not using minimum separation distances to limit housing options for people protected under *Code* grounds.

The OHRC consulted planning experts, planning and human rights lawyers, housing providers and advocates to make sure the guide reflects a wide range of views. Connecting human rights and housing is more than just a "good thing to do." Under Ontario's *Human Rights Code*, it's the law, and this guide will help your municipality make the law a lived reality for your residents.

I encourage you to review the guide, and use it as a tool to guide your own work to create municipalities, communities and neighbourhoods where all residents are included and welcome.

Please contact Jacquelin Pegg (jacquelin.pegg@ohrc.on.ca) if you would like more information on our work to advance human rights in housing across Ontario. If you would like extra copies of the guide for your contacts or constituents, please email us at communications@ohrc.on.ca and specify whether you would like English or French copies, or a combination of both. The new guide, along with many other relevant publications, is also available on our website – www.ohrc.on.ca

Yours truly,

Barbara Hall, B.A., LL.B., Ph.D (hon.)
Chief Commissioner



CCM# MGT2010-000226

Agenda Item # 9.8



Kathy Lawson/Frances
08/03/2012 09:20 AM

To
cc
bcc
Subject



"AMO Communications"
<Communicate@amo.on.ca>

08/03/2012 08:59 AM

Please respond to
AMOWatchFileTeam@amo.on.
ca

To town@fort-frances.com
cc
Subject AMO Watch File - March 8, 2012

AMO Watch File not displaying correctly? [View the online version](#) | [Send to a friend](#)
Add Communicate@amo.on.ca to your safe list



Watch File

March 8, 2012



In This Issue

- How to stretch every municipal dollar using investments.
- Leverage LAS & AMO's leadership and valuable programs to save your municipality money.
- OMAFRA releases new Community Attractiveness Tool.
- AFP/P3 Infrastructure Workshops for Municipalities.
- Career opportunities with Milton, Callander and Thunder Bay DSSAB.
- *Links to full text articles below.*

Eye on AMO/LAS Events

LAS and MFOA are offering [Investment Basics Seminars](#) to help staff and elected officials enhance their understanding of available investment options for their municipal organizations, as well as infrastructure planning and cash flow forecasting considerations. Sessions are planned for London, King City (GTA), and Smiths Falls. Space at each session is limited so [register early](#).

What value do LAS/AMO programs offer for municipalities? Attend a [no-cost information sessions](#) to learn about key issues in municipal risk management, managing group benefit cost trends, our cost-saving aggregation programs, and the Federal Gas Tax Program including some exceptional municipal projects.

Ontario Municipal Knowledge Network (OMKN)

Following its successful introduction at the ROMA/OGRA Conference, you can now access the [Community Attractiveness Indicators for Newcomers Tool](#).

The Municipal Wire

With presentations by PPP Canada and Infrastructure Ontario, the Alternative Financing and

Agenda Item # 9.8

Procurement (AFP)/Public-Private Partnerships (P3) Infrastructure Workshops will cover topics such as: the basics of the AFP/P3 project delivery; case studies, challenges and solutions; and the P3 Canada Fund (eligibility, application process, and key considerations). Workshops are planned for Thunder Bay (March 22), London (March 22) and Kingston (March 27). For more information please contact: marketing@infrastructureontario.ca.

Career/Employment Opportunities

Senior Manager, Human Resources - Town of Milton. Interested applicants should submit a cover letter and resume by March 9, 2012 to: Town of Milton, Dept. of Corporate Services, 150 Mary St., Milton, ON L9T 6Z5; Attn: Human Resources; Fax: 905-875-5414; email: miltoncareers@milton.ca.

Manager, Parks and Open Spaces - Town of Milton. Interested applicants should submit a resume by March 16, 2012 to: Town of Milton, Dept. of Corporate Services, 150 Mary St., Milton, Ontario L9T 6Z5; Attn: Human Resources; Fax: (905) 875-5414; email: humanresources@milton.ca.

Municipal Clerk - Municipality of Callander. Qualified candidates are invited to submit a cover letter and resume "Confidential" on or before March 30, 2012 to: Human Resources, Attention: CAO, Municipality of Callander, 280 Main Street North, PO Box 100, Callander, ON P0H 1H0; email: humanresources@callander.ca.

Economic Development Manager - Municipality of Callander. Qualified candidates are invited to submit a cover letter and resume marked "Confidential" on or before March 30, 2012 to: Human Resources, Attention: CAO, Municipality of Callander, 280 Main Street North, PO Box 100, Callander, ON P0H 1H0; email: humanresources@callander.ca.

Manager, Assets - Thunder Bay District Social Services Administration Board (TBDSSAB). Applications must be received by 4:30 p.m. (EST) on March 16, 2012. Visit TBDSSAB for application forms and more information.

AMO Contacts

[AMO Watch File Team](#)

[Conferences/Events](#)

[Policy and Funding Programs](#)

[LAS Local Authority Services Limited](#)

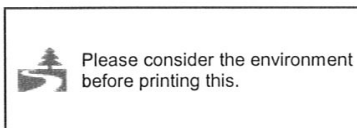
[MEPCO Municipal Employer Pension Centre of Ontario](#)

[OMKN Ontario Municipal Knowledge Network](#)

[Media Inquiries Tel: 416.729.5425](#)

[Municipal Wire, Career/Employment and Council Resolution Distributions](#)

*Disclaimer: The Association of Municipalities of Ontario (AMO) is unable to provide any warranty regarding the accuracy or completeness of third-party submissions. Distribution of these items does not imply an endorsement of the views, information or services mentioned.



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BOARD OF HEALTH FOR THE NORTHWESTERN HEALTH UNIT

MEETING MINUTES
Regular Board of Health Meeting
Friday, January 20, 2012
Dryden Holiday Inn Express Meeting Room

~~~~~

**MEMBERS PRESENT:** John Albanese – Chair; Julie Roy – Vice-Chair  
Jim Belluz, Dennis Brown, Dave Canfield, Mel Fisher, Russ Fortier, Margaret Harland,  
Paul Ryan, Doug Squires, Bill Thompson

**PARTICIPATING:**

Dr. Jim Arthurs, Medical Officer of Health (MOH)  
Mark Perrault, Chief Executive Officer (CEO)  
Dorothy Strain, Executive Assistant (Recording Secretary)

#### 1. CALL TO ORDER

Chair John Albanese called the meeting to order at 8:30 a.m.

#### 2. APPROVAL OF AGENDA

2.1 Move: Agenda Item # 9, Appointment of 2010 Bank Signing Officers: to follow  
Agenda #7 (Appointment of 2012 Board Contact Person....), to be Agenda Item #8

##### 2.2 Additions to Agenda

Agenda #10, In Camera Session:

- 10.1 Medical Officer of Health Performance Appraisal Update

*No. 1-2012. Moved by D. Squires, Seconded by D. Brown and Carried:  
THAT the Agenda for the Board of Health meeting dated January 20, 2012, be  
approved as amended.*

#### 2 DECLARATIONS OF PECUNIARY INTEREST & GENERAL NATURE THEREOF

None was declared.

#### 4. MINUTES OF BOARD OF HEALTH MEETING, DECEMBER 2, 2011

*No. 2-2012. Moved by M. Harland, Seconded by D. Canfield and Carried:  
THAT the Minutes of the Board of Health meeting held December 2, 2011, be approved as  
written.*

## 5. BOARD OF HEALTH ELECTIONS

### 5.1 OFFICERS

#### 5.1.1 Report of Nominating Committee – *Provided by Paul Ryan, Nominating Committee*

All Board of Health members were contacted regarding nominations for the Election of Officers and membership to the Executive Committee for 2012.

By-Law #1 (Constitution of the Board of Health) directs that names may be added to the ballot, or removed, at the time of the election.

Before the vote, a candidate may request to address the meeting for three minutes.

Two members consented to stand for election for the position of Chair of the Board of Health: John Albanese, Julie Roy.

Three members consented to stand for election for the position of Vice-Chair: John Albanese, Russ Fortier, Julie Roy.

Five members consented to stand for election to the Executive Committee: Mel Fisher, Russ Fortier, Margaret Harland, Julie Roy, Paul Ryan

#### 5.1.2 Appointment of Chair of Election

Mark Perrault, CEO, was appointed Chair of the Election.

#### 5.1.3 Call for Nominations: Position of Chair

John Albanese and Julie Roy consented to let their name stand for election to the position of Chair. The Chair of the Election called for further nominations. There were no further nominations from the floor.

*No. 3-2012. Moved by D. Canfield, Seconded by D. Squires and Carried: THAT nominations for the position of Chair of the Board of Health be closed.*

John Albanese and Julie Roy addressed the meeting prior to the vote.

Ballots were distributed and a vote was conducted. The Chair of the Election declared John Albanese to be Chair of the Board of Health for 2012.

#### 5.1.4 Call for Nominations: Position of Vice-Chair

John Albanese, Russ Fortier and Julie Roy consented to let their name stand for election to the position of Vice-Chair.

At the meeting, Mr. Fortier withdrew his name from the ballot. As John Albanese was elected Chair, the Chair of the Election directed that Mr. Albanese's name be withdrawn from the ballot.

The Chair of the Election called for further nominations. There were no further nominations from the floor.

## Agenda Item # 10.1

BOARD OF HEALTH MEETING MINUTES January 20, 2012 3

**No. 4-2012. Moved by B. Thompson, Seconded by M. Harland and Carried:**  
*THAT nominations for the position of Vice-Chair of the Board of Health be closed.*

The Chair of the Election declared Julie Roy to be Vice-Chair of the Board of Health for 2012.

### 5.2 EXECUTIVE COMMITTEE MEMBERSHIP

#### 5.2.1 Call for Nominations: Membership of Executive Committee

The following people consented to let their name stand for election to the Executive Committee: Mel Fisher, Russ Fortier, Margaret Harland, Julie Roy, Paul Ryan.

Per direction of By-Law #1, Constitution of the Board of Health, article 8.2, the Board Vice-Chair is a member of the Executive Committee (and Committee Chair). The Chair of the Election directed that Julie Roy's name be withdrawn from the ballot.

The Chair of the Election called for further nominations. There were no further nominations from the floor.

**No. 5-2012. Moved by D. Brown, Seconded by M. Fisher and Carried:**  
*THAT nominations for membership to the Executive Committee be closed.*

Ballots were distributed and a vote was conducted. The Chair of the Election declared the following to be elected to membership of the Executive Committee for 2012:

Russ Fortier

Margaret Harland

Paul Ryan

**No. 6-2012. Moved by M. Harland, Seconded by D. Squires and Carried:**  
*THAT all ballots be destroyed.*

**No. 7-2012. Moved by D. Squires, Seconded by R. Fortier and Carried:**  
*THAT the report of the Nominating Committee be accepted as presented.*

John Albanese assumed the Chair of the meeting.

Board of Health members recessed at 9:15 a.m.

John Albanese called the meeting to order at 9:25 a.m.

### 6. APPOINTMENT OF BOARD OF HEALTH REPRESENTATIVE, STRATEGIC PLANNING WORKING GROUP

Mark Perrault reviewed the planning process for a new strategic plan. Membership to the Strategic Planning Working Group, as directed by the Terms of Reference, includes a Board of Health member. Timeline for the new strategic plan is December 31, 2012.

**No. 8-2012. Moved by D. Brown, Seconded by D. Canfield and Carried:**  
*THAT Russ Fortier be appointed as the Board of Health representative member to the Northwestern Health Unit Strategic Planning Working Group.*



## 7. APPOINTMENT OF 2012 BOARD CONTACT PERSON, FOR REQUESTS FOR INFORMATION UNDER THE MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

*No. 9-2012. Moved by D. Canfield, Seconded by D. Squires and Carried:*

*THAT, for the year 2012 and in accordance with Northwestern Health Unit Policy, 'Freedom of Information Requests', the Board of Health appoints John Albanese, Chair, as the Northwestern Health Unit's "Head of the Institution" for the Municipal Freedom of Information and Protection of Privacy Act, 1989;*

*AND THAT all powers and duties of the "Head of the Institution" under the Municipal Freedom of Information and Protection of Privacy Act, 1989, be delegated to Mark Perrault, Chief Executive Officer.*

## 8. APPOINTMENT OF 2012 BANK SIGNING OFFICERS

*No. 10-2012. Moved by M. Harland, Seconded by D. Canfield and Carried:*

*THAT the Board of Health for the Northwestern Health Unit authorizes:*

*John Albanese, Chair*

*Julie Roy, Vice-Chair*

*Dr. James Arthurs, Medical Officer of Health*

*Mark Perrault, Chief Executive Officer*

*Lois Bailey, Chief Financial Officer*

*to be a bank signing authority for the Northwestern Health Unit, effective January 20, 2012.*

## 9. SENIOR MANAGEMENT REPORTS

### Medical Officer of Health Report

*Submitted by Dr. Jim Arthurs, Medical Officer of Health*

The year 2011 has come to an end. This late December day is cold, clear and sunny and seems a good time to both reflect and look forward to another new year. For me, 2012 marks the beginning of my fourth year as Medical Officer of Health for the Northwestern Health Unit.

I recall my own thoughts from over a decade ago when I had begun to change careers—from providing health care individually to studying public health and prevention at Tulane and Oregon Health Sciences University. My thoughts then and now have the same focus—prevention, or more specifically chronic disease prevention and the illnesses that occur due to poor choices and certain behaviors. Our program for Chronic Disease has another branch—injury prevention. Most injuries are preventable and, again, they most often arise from poor choices and a long list of unhealthy behaviours, often the result of unhealthy environments.

Interestingly, today I have re-read the 2010 Annual Report of the Chief Medical Officer of Health of Ontario, Dr. Arlene King: Health, Not Health Care – Changing the Conversation. It was released in December 2011. Dr. King and I have asked the same question on multiple occasions. I first started thinking along the lines of illness and injury prevention in the early 1990s while an emergency physician and medical director for the North Idaho Health Network (NIHN). I just received a New Year email from the former Chairman of NIHN's

## Agenda Item # 10.1

BOARD OF HEALTH MEETING MINUTES January 20, 2012 5

Board and a physician colleague of mine. On a personal note, Mike was also my family physician when "we" decided my high blood pressure needed medication treatment. For me and millions of others, hypertension and most chronic diseases can be controlled but rarely cured.

Also interesting is that the focus of the 2004 Annual Report by then CMOH Dr. Sheela Basrur was "Healthy Weights, Healthy Lives". The two reports are similar, though six years apart. Dr. King's report of 2009 also addressed Healthy Living, specifically chronic disease related to the social determinants of health. In 2007 Dr. David Williams' CMOH Report addressed chronic disease along with infectious disease prevention. Public Health has been raising the awareness of chronic disease for a lot of years; and yet the rates of cardiovascular disease, hypertension, stroke, diabetes and others continue to rise.

What is Public Health?

Perhaps we remember it as immunizations and infectious disease.

It is still that, of course, but one might say that today it encompasses all of medicine.

- We all expect safe drinking water, safe food supplies, clean air and a safe environment.
- We expect to stay healthy, live a long life and to have good friends, neighbors, close family and support.
- We don't always expect outbreaks, disasters, chemical spills or contamination, emerging infectious disease, resistant bacteria, terrorism, and we certainly have not prepared well for the growing epidemic of chronic disease and its social and financial impact on families and governments around the globe.

Dr. King's 2010 Report so well matches my current and past thoughts that my report to you includes excerpts from her report:

Public health is the science and art of promoting health. It does so based on the understanding that health is a process engaging social, mental, spiritual, and physical well-being. Public health acts on the knowledge that health is a fundamental resource to the individual, to the community and to society as a whole and must be supported by soundly investing in living conditions that create, maintain and protect health.

Ilona Kickbusch, Director  
Division of Health Promotion,  
Education and Communication  
World Health Organization

Health, Not Health Care – Changing the Conversation, p.2

*Excerpts from "Letter from the CMOH"...*

... What are, generally speaking, the greatest threats to health in our society today? Obesity. Tobacco and alcohol abuse. Chronic conditions like diabetes, cancer, heart disease. Injuries. Put any 100 experts in a room to talk about how to alleviate these threats, and you won't hear about wait times. You won't hear about doctor shortages... You will hear about healthy child development and eliminating health inequities and food insecurity. You will hear, in other words, a conversation about a great many things, few if any of them related to actual health care.

## Agenda Item # 10.1

BOARD OF HEALTH MEETING MINUTES January 20, 2012 6

... I am using this annual report to expand on the idea that it is time for a different public health "conversation", and to continue advancing the argument I made in my 2009 annual report—that it is time to shift our focus from health care to prevention. Public health is, quite simply, about prevention. It is about fewer people getting sick. It is about fewer people getting injured. It is about more people living long and healthy lives...

Health, Not Health Care – Changing the Conversation, p.2,3

Excerpt from "Health, Not Health Care "...

The Public Health Agency of Canada lists 12 determinants of health...

- Income and social status
- Social support networks
- Education and literacy
- Employment/working conditions
- Social environments
- Physical environments
- Personal health practices and coping skills
- Healthy child development
- Biology and genetic endowment
- Health services
- Gender
- Culture

Health, Not Health Care – Changing the Conversation, p.6

Excerpt from "What is Healthy Public Policy?...

Healthy public policy has two overarching and closely linked goals: the prevention of illness and injuries, and reducing health inequities...

- Health starts, long before illness, in our homes, schools, and jobs
- All people should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education or ethnic background
- Your neighborhood or job shouldn't be hazardous to your health
- Your opportunity for health starts long before you need medical care
- Health begins where we live, learn, work and play
- The opportunity for health begins in our families, neighborhoods, schools, and jobs.

Health, Not Health Care – Changing the Conversation, p.12

= WE ALL HAVE A ROLE TO PLAY: Dr. Arlene King

While the above words belong to Dr. King they are truly my sentiments during these Holiday vacation days. I sincerely recommend that each of you read the entire 2010 Annual Report of the Chief Medical Officer of Health of Ontario.



### **So what are we, the Northwestern Health Unit, doing about it?**

We have several provincially funded programs that work daily with our clients and target populations:

- In-home visits by Healthy Babies, Healthy Children program staff;
- In media and promotion, education, consultations, cooking classes, and many more within our program of Chronic Disease and Injury Prevention;
- Through our Dental program--hygiene and oral health, disease prevention, Healthy Smiles Ontario programs;
- Our Sexual Health programs for sexually transmitted infectious diseases, and blood borne diseases;
- In our immunization and Infectious Disease Control programs;
- In our Tobacco Control and Environmental Enforcement programs, and
- Our Speech, Language, Blind, Low Vision programs.

You can see that this list includes all of our delivery programs and all seven of our program managers.

New for 2012, the Ministry of Health and Long-Term Care along with health units' input have created 14 indicators now included in our signed Accountability Agreements. They have established baseline measurements for each health unit, and improvement targets for 2012. We also are now six months into immense help from our Continuous Quality Improvement Coordinator.

What does this mean? All health units are being challenged to be held accountable. To date this accountability is not connected to funding, rather connected to reports and comparisons among health units.

Frankly, our baselines numbers are quite poor. We have a large geographical and rural area with small populations. One could say that we are not doing very well. One could also say that with poor baselines numbers, improving our outcomes may be less challenging than some.

Or, this could be a huge challenge.

### **So what can I, our managers and all of our staff do?**

Get focused; get imaginative; "think outside the box"; work hard to learn better our target populations and think of new ways to reach them more effectively. We have plans to utilize social media and other media and promotion sources.

Most important are our continued efforts to build trust among teams and individuals and our continued team-building efforts. With trust, all things can become more effective, more efficient, less expensive and are implemented faster with sooner positive outcomes.

### **What can you and our Board of Health members do?**

Many of the 12 social determinants of health are about schools, housing, jobs, employment, working conditions and physical environments.

These are NOT about health care—they are about healthy communities, safe recreation, available and affordable housing, food security and more. You are our policy setters, our fiscal strength, our provision of strategic direction and for cost-shared programs, our funders.

This is not a project that any of us can do alone. We must all be working together and engaging our community stakeholders in any way and every way possible.

**In other words--It is what we do and it is our mission!**

I offer my best to all of you and your families for a Happy, Safe and Productive New Year.

### **Epidemiology Report**

*Submitted by Lee-Ann Nalezty, Epidemiologist*

The month of December has been a challenge with completion of survey analysis, responding to specific requests and fewer work days due to statutory holidays. It has been a pleasure working with Valdine McEwen, Bed Bug Project Lead, on the bed bug survey. With over 200 surveys completed, a lot of information was gleaned regarding the presence of bed bugs in our region. The introduction of Sharepoint as a communication tool in the work place has been exciting. Lee Pitt, IT Coordinator, and Pam Baxter, Administrative Assistant, have been exemplary in showing me how to use this tool. The time set aside for learning sessions has resulted in a rewarding experience.

I participated in a Northern Ontario Data Summit Teleconference on December 8, 2011. Participants were from various mental health and addiction organizations in the north. The teleconference focused on the data products that are available, and the progress of their website. Their website can be accessed at [www.nordsummit.wordpress.com](http://www.nordsummit.wordpress.com)

A review of the Ministry of Health and Long-Term Care's Accountability Indicators, baselines and targets with managers took place. It was important to learn how the Ministry arrived at their targets for the Health Unit's indicators. Staff identified areas where improvements in documentation of activities are required.

### **Infectious Disease Control**

*Submitted by Donna Stanley, Manager, Infectious Diseases*

#### Seasonal Influenza

As of December 23, the Northwestern Health Unit has administered 97% of the total number of influenza 'shots' given by the Health Unit during the whole 2010 season, October through May. Influenza vaccine will continue to be available until spring.

We have not to date (23 December) received any lab reports for influenza disease in our area. There is some influenza activity in southern Ontario and in the prairies and western provinces.

### Communicable Diseases

A higher than expected number of cases of pertussis (whooping cough) was detected over the past several weeks. The cases were each geographically distinct, not connected. Pertussis is a disease that is normally circulating in the adult population and can be a nuisance to adults since the cough can last for months, but it is most dangerous to babies. Babies are routinely immunized against this disease beginning at age two months. Our team is promoting immunization against pertussis disease in adults who have frequent contact with babies, to increase protection.

### Infection Control

An institutional outbreak of gastroenteric disease has been well managed by facility staff with support of Northwestern Health Unit team members. We have anecdotal reports of both respiratory and gastroenteric disease among community members in many parts of the region, but no schools are currently reporting high rates of absenteeism.

### **Sexual Health, STI/BBI, Early Detection of Cancer**

*Submitted by Gillian Lunny, Manager, Sexual Health*

#### Sexual Health Program

Training for our new e-charting system, Xwav, will be implemented in our non-clinic sites starting this month. We hope to have all Sexual Health program staff trained by spring. This month we will also try to run statistics off XWave; which will enable the staff to no longer manually fill out stats on every client we see.

#### Early Detection of Cancer (EDC) Program

During January the EDC team has planned to support MANuary: a month dedicated to promote and encourage awareness of Testicular Cancer. This cancer is most common among young men between 15-29 years of age. We did a small promotion last year and were surprised at the lack of knowledge amongst the target group.

For this year's campaign, public health nurses will be distributing posters and educational materials for health teachers in the regional high schools. Northwestern Health Unit/MANuary flash drives and information will be distributed to the target group at the high schools, as well as via social media with Facebook ads.

#### Needle Exchange Program

In order to support safe disposal in our communities, we have ordered two new products. The first are steel, locked sharps disposal units that mount to walls indoors. These are relatively small but can be used in areas where there may be a security risk with the plastic units. We have so far had these mounted in Sioux Lookout and Kenora.

We have also received three drop boxes. These are steel, locked sharps disposal units that are designed to be outdoors. We will be assessing where these and our three older ones can be placed in order to best support our clients in disposing safely.



### Enforcement

*Submitted by Jennifer McKibbin, Manager, Enforcement*

The Enforcement program teams – Environmental and Tobacco – held separate two-day face-to-face team meetings in the final months of 2011. We started the process of developing updated and comprehensive program procedures for each of our programs. It is expected to take a number of months to complete the process, but 2012 will see the completion of an enforcement procedure manual for the whole team under the expert guidance of Alex Berry, Continuous Quality Improvement Coordinator. Updated Program Plans for 2012-2014 have also been started by individual staff as program leads, and are expected to be complete by the end of January.

### Safe Water Program

The safe water program continues to support municipal water operators when Boil Water Advisories are required on their systems. The sub-zero temperatures often result in more activity in this program, but so far this winter it has been "quiet".

### Small Drinking Water Systems (SDWS) Program

The public health inspectors team and support staff completed the on-line data entry of all known small drinking water system prior to the Ministry of Health and Long-Term Care's deadline of December 31, 2011. The number of SDWS systems in our region as of December 31, 2011, was 893. There is still a small discrepancy between our records and those of the Ministry that will be corrected as the resulting Directives are completed over the first quarter of 2012. The task of getting this work done took a herculean effort by all the enforcement staff, and I commend them to the Board for their efforts.

### Health Hazards Program

The interim report regarding the findings of our bedbug assessment is due for submission to the Ministry in mid-February 2012, with the final report due March 31. A public version of the report, written with the lay reader in mind, will be developed for release within the same time period, along with broad distribution of the bedbug information pamphlets.

### Part 8 (Sewage) Program

In 2011 we received a total of 234 sewage applications in the region – coincidentally, exactly the same number of permits as in 2010. The Part 8 program is now in off-season mode with filing and follow-up paperwork being the activities for the next few months

### Food Safety Program

Regular inspections of food premises and Safe Food Handlers training workshops continue throughout the region.

### Tobacco Control Program

Recruitment is underway for the new crop of youth test shoppers for compliance checks in 2012.

## Dental Health

*Submitted by Dawn Sauve, Manager, Dental Health*

### Funding Received/ Collaboration with Other Agencies

Healthy Smiles Ontario (HSO):

In early December the mobile dental office (MDO) finished seeing clients in Fort Frances and moved to Rainy River. We completed the clinic there on December 15 and moved the MDO to heated storage until the spring. We will continue to run community clinics, and in the middle of January we will run a HSO community clinic at the Mary Berglund Community Health Centre clinic in Ignace. After that we hope to run a clinic at Pickle Lake.

On December 6, Dr. Arthurs, Dr. Cooney, dental consultant, Lois Bailey, Chief Financial Officer, and I had a very useful teleconference with four Ministry of Health and Long-Term Care representatives. We discussed numerous items including the October 25, 2011, Northern Pilot report; the community clinic and private practice components of the HSO program; the MDO; and the HSO promotional campaign. The purpose of the teleconference was to request continuation of the Northern Pilot.

At the end of December we had 89 clients enrolled in the HSO program. This number is higher than our projected number (78) for 2011. We are pleased with how the program has rolled out in the Northwestern Health Unit area.

HSO Promotion Strategy:

Our HSO health promotion campaign went very well. We participated in five Santa Claus parades throughout the district. We used the opportunity to showcase our state-of-the-art mobile dental office (MDO) in three of the parades (Kenora, Dryden and Vermilion Bay). In keeping with the festive season we decorated the MDO with numerous Christmas lights, decorations and wreaths. In the other two parades (Ear Falls and Rainy River), staff either put in a float or walked with a banner promoting the Health Unit and the HSO program. It is exciting to note that we won third place in the Ear Falls parade with our float.

Overall, staff and volunteers handed out well over 3,300 toothbrushing bags, which also contained HSO literature for parade watchers. It was very exciting to hear positive feedback from many members of the public and staff, along with an increase in inquiries for the program. We would like to thank all the Northwestern Health Unit staff, their family members, and the public who volunteered their time to wear their HSO/NWHU toques and help us hand out toothbrushing bags. Their efforts and time was greatly appreciated and fun was had by all.

As well as the parades we had other exciting promotional activities that took place, for example, dental coupons in all Christmas Cheer hampers throughout the district; HSO buttons; a "Send Us Your Smiles" radio contest; radio banners; television advertising at numerous hospitals; displays at numerous locations, etc.

## Chronic Disease and Injuries

*Submitted by Tanis Fretter, Manager, Chronic Disease & Injuries*

In 2011 the team identified four key areas to focus our work on:

- 1) Policy development (with schools, workplaces and municipalities)
- 2) Partnership building (in all communities; including more non-traditional partners)



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- 3) Skills development (capacity building with priority populations and partners)
- 4) Community need (identifying needs; build plans based on need)

While our reporting for last year is still being completed, here are a few highlights from 2011.

We held two team trainings to increase our capacity in policy development by better understanding the needs of the partners we want to work with, specifically schools and municipalities. In March the team gathered in Dryden for a workshop designed to help us gain a better understanding of how we can approach and work with municipalities to help make our communities healthier places to live, learn, work and play. In October we met again to hear from school community representatives about how our two systems can better integrate.

We also hosted three regional skill-building opportunities for our partners. In March the Northwestern Health Unit hosted Speaking of Parenting workshops in Dryden and Fort Frances. Facilitated by the SEARCH Institute, the goal of the workshops was to help community groups and individuals gain the skills and knowledge needed to introduce the 40 developmental assets approach to parents and caregivers, with the intent of helping them to build stronger, more positive relationships with their adolescents and teens. In May we partnered with the Rainy River Recreation Centre to offer High Five training. The 1.5-day workshop was designed to help after-school program staff, early childhood educators, education assistants, recreation staff, coaches, instructors and front-line leaders improve the quality of programs. At the end of June the Youth Action on Drugs project partnered with the RCMP to provide a 'Kids and Drugs' facilitator training workshop in Kenora. As a result, 19 service providers from across the region were certified to deliver the workshops for parents.

The team offered several new skill builders for community members as well, including several pole walking workshops made possible with financial support from the Canadian Association for the Advancement of Women in Sport (CAAWS). Numerous classes, such as grocery store tours, resistance band training and a beginner running program were held in conjunction with the Diabetes Strategy communication campaign last fall.

In the spring, we released the final reports of the community needs assessment work done to our partners across the region, as part of the Healthy Communities Fund Partnership Stream. A community picture was prepared for each of the 12 participating communities, as well as one regional picture summarizing the common themes from across the districts. Many team members received positive feedback from partners about the reports, including how useful the data has been in some of their own planning and proposal development processes.

We are looking forward to more new partnerships, programs and policy work in 2012.

### **Family Health**

*Submitted by Kim Gardiman, Manager, Family Health*

In 2011 the Family Health Team, working in Child Health, Reproductive Health and the Healthy Babies, Healthy Children program, planned and implemented activities to meet the

Ontario Public Health Standards (OPHS) for Child and Reproductive Health and the Ministry of Children and Youth Services (MCYS) Protocols for the Healthy Babies Healthy Children (HBHC) Program. Although the annual reports and data have not been rolled up for 2011, I would like to touch on a few highlights from 2011 on behalf of the Family Health Team.

### Community Network Participation

Public health nurses (PHNs) in all of our communities actively participate in a variety of community networks and coalitions, including: the Kenora Family Connection, Breastfeeding Coalitions, Safe Kids' Committee, Healthy Communities, Coming Together for Kids, Kenora Care Team, Child and Family Health Network, Maternal Child Committee, Diabetes Steering Committee, Next Generation Coalition... just to name a few. Collaborating with partners and participating in local networks and committees have allowed us opportunities for joint information sharing, assessing community gaps and overlaps, addressing needs of the communities, to participate in community events, provide information on the services and supports available through the Northwestern Health Unit and ultimately bring awareness of the importance of creating safe and/or supportive environments that promote healthy outcomes for individuals and families in our catchment area.

### Education and Support

PHNs provided a variety of educational opportunities to target populations, including women in their childbearing years, pregnant women and their partners, teens, families and community partners:

- Preconception Health Presentations were provided by our PHNs to individuals in their child bearing years (i.e., marriage preparation group) and to high school students in some communities.
- PHNs provided prenatal classes to expectant women and their partners in the Health Unit's catchment area. These sessions were offered in group settings and on a one-to-one basis as required.
- Breastfeeding education was offered as a component of the prenatal curriculum or on a one-to-one basis.
- Breastfeeding support was provided by PHNs in person, by telephone and at community programs such as the Best Start Hubs.
- Health Before Pregnancy-A Life Plan, is a new preconception health resource developed for those wanting information before having children.
- Prenatal Smoking Cessation information continues to be provided to prenatal clients.
- Annual Prenatal update for all PHNs and community partners teaching prenatal classes.
- Our Reproductive Health program planning team collaborated with Best Start Health Nexus to offer the *Young Mothers Living in Poverty* workshop. Content included rates of poverty, teen parents, First Nations issues, the impact of poverty on parenting and strategies to reduce the impact. Sixteen community partners attended the event along with Northwestern Health Unit Parenting Partners and PHNs.
- Parenting information and support were also provided by PHNs at Best Start Hubs. This included PHNs giving information regarding parenting, breastfeeding/infant feeding, child growth and development, healthy living, etc. Parents had the opportunity to stop in at the hub, and talk with a PHN from the Health Unit.



Family Health program staff had the opportunity to take part in a variety of training as appropriate, including but not limited to the following:

- Infection Prevention & Control
- Keys to Caregiving
- Make the Connection
- Food and Nutrition
- Smoking Cessation
- Decision Making
- Fetal Alcohol Syndrome
- Violence Against Women
- Young Mothers Living in Poverty
- Healthy Mothers Healthy Babies
- Parent/Caregiver Interaction Scales
- Promoting Maternal Mental Health During Pregnancy
- Non Violent Crisis Intervention,
- Strengthening Connections with Schools
- Physical Activity and Pregnancy,
- Speaking of Parenting, Food Safety

### Community Awareness/Campaigns

Using one or a variety of media formats including local radio, newspaper, website, outreach visits, displays and newsletter opportunities, we promoted services and supports for Child and Reproductive Health, including Prenatal Classes and Reproductive Health, Positive Parenting and World Breastfeeding Week.

During the month of September our Preconception Health Campaign focused on health before pregnancy. Staff promoted the message of a "Life Plan", which uses personal goals about an individual's future to help make healthy choices that are best for them. Many people underestimate the impact that their health and lifestyle choices before conception can have on their children. The Life Plan is a way to take control of one's life and future. Among other things, the Life Plan also recommends a balanced diet and supplements like folic acid; maintaining a healthy weight; and regular physical activity. It also tells you what to look for in your family history that may affect future children.

In June, we held our annual Prenatal Class Campaign which provided information about where prenatal education is offered in our communities. These sessions help expectant parents prepare for a new baby and include topics such as prenatal nutrition, physical activity promotion, breastfeeding and preparation for labour and delivery.

"Parenting... your most important job!" campaign ran in November, 2011. The campaign focused providing positive messages to parents on attachment, spending quality time with children and being a positive role model. Radio ads relaying the messages ran throughout the region and a media release was sent to all media outlets. We were quite fortunate to have Jayme Blythe, PHN in Kenora, featured on the "Good Morning Kenora" TV show. Jayme discussed the campaign and provided information about available supports to families throughout the region. Banners were also created by the Child Health team and circulated to our community offices for display, and will be available for use for upcoming years.

World Breastfeeding Week was celebrated during the week of October 1-7, 2011. This year's theme was "Breastfeeding Support: Stay Connected". During World Breastfeeding Week 2011, the Northwestern Health Unit encouraged new mothers to stay connected through local support groups, parenting programs and the social media. The message was expanded to include promotions for the family to "stay connected" using baby carriers and to keep their baby close, spending time together doing fun activities and to have family meals around the kitchen table together. Many of our PHNs working in Family Health

worked with community partners to host or attend an event during World Breastfeeding Week in an effort to enhance breastfeeding awareness, support and knowledge.

### Baby Friendly Initiative (BFI)

Our work towards achieving BFI designation continued in 2011. The Northwestern Health Unit recognizes that breast milk promotes optimal growth and development of children, and **that support has a positive impact on breastfeeding initiation and duration rates. The Baby Friendly Initiative (BFI) creates a supportive environment at all levels within our organization and is a standard of achievement for breastfeeding promotion.** BFI plaques summarizing the Breastfeeding Committee for Canada's BFI Integrated 10 Steps Practice Outcome Indicators for Hospitals and Community Health Services have been developed for display in client waiting areas in each of our offices, and will be distributed in 2012.

In 2011, the Ministry of Health Promotion and Sport worked with public health units to establish indicators for Child Health and Reproductive Health. The BFI was selected as the indicator for Child Health and, after reviewing baseline data, the Ministry worked with us to establish performance targets for 2012-13. Our baseline was established, identifying us at the *intermediate* stage of working towards our BFI; with our target moving to *advanced* work in 2012 and ultimately be *designated* with our BFI status in 2013.

### **Speech, Hearing and Vision**

*Submitted by Debbie Cousineau, Manager, Speech, Hearing and Vision*

As part of the North Words' community sessions, the Fort Frances staff partnered with the Rainy River District School Board's Speech & Language program to offer a "Play Date" for families. This event was held at Robert Moore School on December 7 from 5:00 to 7:00 p.m., and included a healthy dinner for families who attended the event. The purpose of the evening was to provide an opportunity for families to interact and 'play' with their children in a variety of fun activities. It is through these kinds of play-based activities that children develop necessary speech, language, literacy, and critical thinking skills. A number of activities were available for families to experience, including an 'object art' station, playdough, blocks, shaving cream centre, bubbles and a 'what if...' science centre. All centres used items that families typically have in their homes and demonstrated what children learn through play-based activities. Over 250 participants attended the "Play Date" and included children from infancy through primary grades. Feedback from families was very positive and a follow-up event will be planned for the spring.

### **Chief Executive Officer Report**

*Submitted by Mark Perrault, Chief Executive Officer*

The end of 2011 and beginning of 2012 was an eventful time at the health unit, as year-end projects wrapped up and a series of unusual incidences occurred. It is these incidents which I first like to address, as they are an indicator of the kind of staff that we have at the Health Unit.

In one incident, a member of the public in mental distress entered our Fort Frances office. The situation had potential to end up in violence, but the calm professionalism of our staff



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de-escalated the situation until police arrived. Special thanks needs to go out to Kathy Jewell, Alex Berry, Tammy Hughes and Kim Gardiman for helping to ensure that no harm came to either the person in distress or to staff.

On a Friday night in Sioux Lookout, one of our office external doors failed to lock. Two of our staff members, Joanne Van Horne and Karen Kulchyski, stayed past 7 p.m. working with our IT staff (Matt Weare, Neil Bird and Lee Pitt) in Kenora to fix the problem. Karen's husband managed to secure the door using lumber until the issue was finally resolved.

Then on Monday, January 9, I received an early call from our Kenora Wolsley Street landlord that a toilet tank had broken on the floor above us and there was some water damage to our offices. That was an understatement! The damage is extensive. We have lost as many as nine workstations (desks, computers and phones); and some files have received water damage. Luckily, our server room was undamaged. What was remarkable was the take-charge attitude of staff. Immediately upon arrival at work our Occupational Health & Safety team assessed the situation and instructed staff to avoid dangerous situations. Important files and documents were immediately assessed and steps taken to preserve the damaged ones. There are far too many staff to thank in this report and I fear omitting someone, so I just want to say, thank you for your humour, hard work and dedication to safety.

### Other Updates

Office Upgrades: During December significant renovations were completed on our Sioux Lookout office. We now have a meeting room (large enough for a Board of Health meeting) and have significantly improved both accessibility and privacy. We also completed renovations in Rainy River, also to improve accessibility and overall aesthetics. In Ignace, Mary Berglund Community Health Centre has entered into a lease agreement for its new downtown space, and we are currently reviewing floor plans for our sub-lease within that space. We have nearly finalized the floor plans for the new Kenora office, and details such as flooring and office colours are being worked on.

The Voice Over IP (Internet Phone) system equipment has been purchased. implementation started this week (with an emphasis on our Wolsley Street location to replace damaged phones).

The first phase of position evaluations have been completed as part of our accreditation goal to renew our job descriptions and performance appraisal processes.

### **Finance Report**

*Submitted by Lois Bailey, Chief Financial Officer*

Total revenues for the eleven months ending November 30, 2011, are \$14,078,036 and total expenditures \$13,193,904 resulting in an excess of revenues over expenditures of \$884,132. The cost shared programs (not including Healthy Babies, Healthy Children) are reporting a surplus of \$711,492; whereas the 100% funded and other programs are contributing \$172,638. The reported surplus is significant; however, a number of large expenditures will be reflected in the month of December and several year-end adjustments will be recorded in the 2011 fiscal year.



### Cost Shared Programs

As per the attached report titled "Cost Shared & Unorganized", revenues and funding for the reporting period exceed budget for the first time this year mainly due to the timing of the transfer payments from the Ministry of Health and Long-Term Care. Ministry-approved one-time projects include the Market Square renovation project of \$180,000 (\$135,000 funded) and the Voice Over IP (Internet Phone) project for \$240,000 (\$180,000 funded). The Ministry has flowed \$302,815 of the \$315,000 total funding as of November 30. The Market Square project was completed prior to March 31; however, the Voice Over IP (Internet Phone) project was just underway in November with only \$13,814 of the estimated \$240,000 in expenses incurred by November 30. When this report was submitted all hardware has been received and the project is in full swing.

Actual cost-shared and unorganized territories expenditures are \$9,701,682 compared to the budget of \$10,348,755. Salaries, wages and benefits are underutilized by \$269,405 (net) to date. In addition to the unfilled sick leave and maternity leaves throughout the year, the recent resignation of several employees in November is contributing to the growing variance. The new funding for the Chief Nursing Officer position has also freed up salary dollars beginning October 1. Other expense lines that are significantly underspent include equipment, software and leaseholds (\$88,427), purchased services (\$84,608) and program supplies and services (\$35,408).

The decision to purchase a van in 2011 was deferred to 2012 to obtain quotes, and to compare makes, models and prices. Consequently, the capital budget will not be fully spent. Purchased services continue to be underspent, and the reasons discussed in past reports continue to be valid. For example, underutilization of the Children In Need of Treatment (CINOT) program has resulted in a variance of \$36,046 to date. Most programs will have fully utilized program supply and services budgets by year-end.

### 100% Funded Programs

As per the report titled "100% Funded Programs", total revenues for the eleven months are \$3,664,861 compared to the budget of \$3,592,828 (a difference of \$72,033). Funding for the various programs are either as expected or more than budget. The mobile dental services program has reported revenues of \$23,562 from third party billings.

Actual expenditures are \$3,492,223 compared to budget of \$3,593,893; a difference of \$101,670. Expenditure lines related to the 100% funded programs that are underspent include purchased service (\$21,096), salaries, wages and benefits (\$64,742 net), a small variance in program supplies & services (\$11,767) and combined travel and conference/education (\$36,113).

### **CQI Coordinator Program Report, October to December 2011**

*Submitted by Alex Berry, Continuous Quality Improvement Coordinator*

Strategic Planning – Key internal stakeholders, including the Board of Health, were involved in a collaborative process to develop an effective strategic planning process. The overall process and the terms of reference for the Strategic Planning Working Group (SPWG), which will guide the process, were approved by the Board of Health at its December 2011

meeting. We expect to have the SPWG in place by the end of January with a first meeting in February.

Accountability Agreements and 2012 Targets – The technical and baseline data for the indicators to be included in our Accountability Agreement were reviewed by the health unit management team and feedback provided to the Ministry. The Ministry will use this information to set targets for 2012 and hopes to have this process completed by the end of January 2012. We begin reporting on progress towards achieving these targets in 2012, although no process has yet been identified.

Accreditation – Preparations for the April 2012 on-site visit from OCCHA are progressing well. The Accreditation Committee has met several times and evidence is being collected using SharePoint and assessed. We expect to meet all accreditation requirements and to have our evidence package ready for submission to OCCHA by March 26, 2012. We are using this year's data collection process as a pilot to refine our electronic collection and submission systems used for external audits.

Public Health Report Card (PHRC) – The basic format of the 2012 PHRC has been determined and the procedures discussed and revised based on feedback from the management team and the results of the evaluation of the 2011 PHRC. We are on track to provide the Board of Health with the 2012 PHRC by its June meeting.

CQI – Team Projects – Every health unit team (i.e., Program teams, Finance, HR and IT) has committed to engage in at least one CQI project each year, above and beyond the more general evaluative work already taking place. Discussions have begun with all team / program leaders and to date CQI projects have been identified for half of the teams in 2012.

CQI – Policy & Procedure – We are looking at a process to review and rationalize the many policy and procedure manuals, guidelines and related materials in the health unit. The outcome will be an integrated agency policy and procedure structure in the agency that is transparent, easy to maintain and accessible to all staff. At this point, discussions are being held with the program managers and admin team leaders to ensure that any new system meets the needs of staff and health unit teams. In the meantime, individual policies and procedures are being developed and/or revised as necessary.

**Submitted by Dr. James Arthurs, Medical Officer of Health, and Mark Perrault, Chief Executive Officer**

### 9.1 Report of Medical Officer of Health

Additional Verbal Report - Provided by Dr. Arthurs

Dr. Arthurs highlighted the 2010 Report of the Chief Medical Officer of Health (CMOH), Dr. Arlene King, Health, Not Health Care : Changing the Conversation. The Report explains the need to address social determinants of health as determinant influences for health and well-being of individuals and communities.

Accountability Agreements and Performance Indicators: Dr. Arthurs described the Ministry of Health and Long-Term Care's progress toward preparing indicators and a measurement



process for the success of public health programs. Fourteen indicators were recently established, with 'baselines' and related performance 'targets' for each health unit for 2012 and future years. Formal acceptance documentation involving agreements to proceed towards meeting these performance targets were recently sent to health units. Management will submit the targets identified for the Northwestern Health Unit for the Board's review at their February meeting.

Bed Bug Project: The regional survey is complete and a report is being written for the province and subsequent public release.

Dental Survey: Analysis of data is complete and the report is being prepared.

Infectious Diseases: There have been five confirmed cases of pertussis (whooping cough) in adults in the region. The cases are not connected. An adult vaccination has been developed, as a 'booster' for childhood immunization. Dr. Arthurs encouraged uptake for this adult vaccination.

Healthy Smiles Ontario (HSO) Program: The mobile dental office is now in winter storage. Program services are being provided in community facilities in Ignace and Pickle Lake. A teleconference with the Ministry of Health and Long-Term Care and Health Canada officials has been scheduled, to consider collaboration potential for the HSO program to involve First Nation clients.

#### Questions, Comments:

CMOH Report: Mel Fisher recognized the Northwestern Health Unit's activities towards addressing the priorities identified in the Report, via partnerships and collaborations with communities.

Management Report, page 4: *What can you and our Board of Health members do?* Opportunities for discussion and interaction with municipalities were considered, for conveying the importance of effective public policy for encouraging chronic disease prevention and promotion of healthy living and lifestyles.

Board of Health members noted that municipal Councils often attempt proactive activities; however, inter-agency issues and lack of communication often hamper activities. Discussion ensued regarding issues associated with access for healthy activities; and opportunities for municipal and community initiatives and projects.

All agreed upon a priority for each individual to commit to a 30-minute daily walk.

**No. 11-2012. Moved by D. Squires, Seconded by R. Fortier and Carried:**  
*THAT the Report of the Medical Officer of Health be accepted as presented.*

### **9.2 Report of Chief Executive Officer**

Additional Verbal Report - Provided by Mark Perrault

Office Update: A major flood occurred on January 15 evening on the second floor of the Kenora Wolsley office. Damage to the offices on the main floor, where the Northwestern Health Unit is situated, was described. Mark Perrault commended the staff's prompt, proactive and efficient actions for recovery and reallocation of work areas for affected staff.

## Agenda Item # 10.1

BOARD OF HEALTH MEETING MINUTES January 20, 2012 20

Office Incidences: Two recent incidents were successfully addressed and diffused by staff. Mark Perrault credited crisis intervention training provided to staff, for the tools to negotiate the situations.

Office Upgrades: Complications have arisen for the proposed new Ignace office, regarding the contracting process for the proposed building. Work is proceeding towards interior renovations for the new Kenora Office. The Voice Over IP (Internet Phone) project is underway in Kenora office with upgraded priority following the Wolsley office flood. Renovations for Sioux Lookout office are complete, and include a new meeting room.

Capital Projects: Funds will be allocated in the Current Fund for the purchase of the corporate van in 2012. Discussions will be held for accommodating other existing capital projects within the 2012 budget.

Finance Report: Gapped salaries for unfilled positions that comprised the majority of the variance for Salaries & Wages expenditure line were reviewed. Preparation for the 2012 budget continues for submission to the Board of Health at their February meeting.

### Questions:

New Kenora office: An elevator will be installed by the building owner. It will comply with the Access for Ontarians with Disabilities Act.

Healthy Communities Fund: Dr. Arthurs informed that 2011 funding was put on hold by the Ministry of Health and Long-Term Care last summer. The Ministry is now proposing reduced funding for the last quarter of 2011 and for 2012. The Health Unit is considering the cost-effectiveness for the proposed funding and associated requirements.

**No. 12-2012. Moved by D. Squires, Seconded by M. Harland and Carried:**  
*THAT the Report of the Chief Executive Officer be accepted as presented.*

Board of Health members recessed at 10:35 a.m.  
John Albanese called the meeting to order at 10:55 a.m.

### **10. IN CAMERA SESSION**

At 10:55 a.m. Board of Health members moved to an in camera session.

**No. 13-2012. Moved by D. Squires, Seconded by D. Brown and Carried:**  
*THAT the Board of Health moves to an in camera session to discuss: personal matters concerning identifiable individuals, including municipal or Board employees: NWHU Organizational Chart; Medical Officer of Health Performance Appraisal Update*

Dr. Arthurs, Mark Perrault, and Dorothy Strain left the meeting.  
Dr. Arthurs, Mark Perrault, and Dorothy Strain rejoined the meeting at 11:35 a.m.

At 12:10 p.m. Board of Health members moved out of the in camera session to resume regular business.

## Agenda Item # 10.1

BOARD OF HEALTH MEETING MINUTES January 20, 2012 21

**No. 14-2012. Moved by B. Thompson, Seconded by D. Squires and Carried:**  
*THAT the Board of Health moves out of the in camera session to resume regular business.*

Board of Health members recessed at 12:10 p.m.  
John Albanese called the meeting to order at 12:40 p.m.

### 11. RRDMA ANNUAL GENERAL MEETING, JANUARY 28, 2012

**No. 15-2012. Moved by B. Thompson, Seconded by M. Fisher and Carried:**  
*THAT the Board of Health for the Northwestern Health Unit authorizes John Albanese, Chair, to attend the Rainy River District Municipal Association Annual General Meeting in Devlin on January 28, 2012, on behalf of the Northwestern Health Unit. Fees and expenses will be paid by the Northwestern Health Unit.*

### 12. KDMA ANNUAL CONFERENCE, FEBRUARY 2-4, 2012

**No. 16-2012. Moved by M. Fisher, Seconded by P. Ryan and Carried:**  
*THAT the Board of Health for the Northwestern Health Unit authorizes John Albanese, Chair, to attend the Kenora District Municipal Association Annual Conference in Sioux Lookout on February 2-4, 2012, on behalf of the Northwestern Health Unit. Registration fees and expenses will be paid by the Northwestern Health Unit.*

### 13. alPHa WINTER SYMPOSIUM, FEBRUARY 9-10, 2012

**No. 17-2012. Moved by J. Roy, Seconded by M. Fisher and Carried:**  
*THAT the following Board of Health members are authorized to attend the Association of Local Public Health Agencies (alPHa) Winter Symposium, February 9-10, 2012, in Toronto:*  
*Julie Roy, John Albanese*  
*Expenses for this meeting will be covered by the Northwestern Health Unit.*

### 14. SCHEDULE OF 2012 BOARD OF HEALTH MEETINGS

The 2012 meeting schedule for regular Board of Health meetings was drawn up. Following confirmation of meeting locations, the schedule will be forwarded to Board of Health members. It will also be posted to the Northwestern Health Unit web site, [www.nwhu.on.ca](http://www.nwhu.on.ca) 'About Us', 'Board of Health', 'Next Regular Meeting'.

### 15. NON AGENDA ITEMS

There were no non agenda items identified.

### 16. NEXT MEETING DATE

**16.1 Board of Health Meeting**  
Date: Thursday, February 23, 2012  
Location: Dryden Holiday Inn Express  
Start Time: 8:30 a.m.



## Agenda Item # 10.1

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### 16.2 Executive Committee Meeting

Date: Tuesday, February 14, 2012

Location: Kenora Wolsley office

Start Time: 11:00 a.m.

### 9. ADJOURNMENT

Mr. Albanese adjourned the meeting at 1:00 p.m.

BOARD OF HEALTH FOR THE NORTHWESTERN HEALTH UNIT:

CONFIRMED AS WRITTEN

THIS 23 DAY OF February 2012

  
\_\_\_\_\_  
CHAIR, BOARD OF HEALTH

  
\_\_\_\_\_  
RECORDING SECRETARY

## Agenda Item # 10.2

January 2012

The January meeting of the Fort Frances Public Library Board was held in the Library on Wednesday, January 25, 2012 at 3:00 p.m. In attendance were: Chair J. Cunningham, A. Georgeson, R. Wiedenhoeft, R. Schulz, S. Tibbs, Manager of Community Services, G. Bell and Secretary-Treasurer M. Sedgwick.

A. Zucchiatti attended by teleconference

1. Conflict of Interest There were no declarations of conflict of interest at this time.
2. Non-agenda There were no non-agenda items.
3. iCompass Glen Treftlin, Clerk of the Town of Fort Frances attended the meeting to explain how the Town is using iCompass.
4. Minutes MOTION #1: A. Georgeson moved to accept the minutes of the meeting of December 14, 2011 as amended. Seconded by R. Schulz. Carried.

**G. Bell will be in further contact with the Power Corporation regarding changing the present electrical meter to a peak demand meter.**

There is one possible applicant for the vacancy on the Library Board.

Maureen Wasacase, Kenora Public Library remains the northwest representative for OLS-N Irene Moore will continue on FOPL and joins OLBA.

5. CEO MOTION #2: R. Schulz moved to establish a recruitment/selection committee for the position of CEO of the Library, consisting of J. Cunningham, A. Georgeson & R. Wiedenhoeft, with appropriate resource personnel. Seconded by S. Tibbs. Carried.
6. Report MOTION #3: A. Zucchiatti moved to receive the 2011 Annual Report. Seconded by R. Wiedenhoeft. Carried
7. Contract MOTION #4: R. Schulz moved to accept the contract with the International Falls Public Library. Seconded by S. Tibbs. Carried.
8. Family Day MOTION #5: R. Wiedenhoeft moved to have the library open on Family Day from 10 a.m. to 5 p.m. Seconded by A. Georgeson. Carried.
9. Information: The following Information Items were received:  
December Activity Report  
Donation Report

...

## ***Agenda Item # 10.2***

10. Next Meeting The next meeting will be held on February 29 at 3 p.m.

11. Adjournment MOTION #6: R. Wiedenhoeft moved to adjourn at 4:50 p.m.

## Agenda Item # 10.3

Downtown BIA – Board of Management Meeting  
Wednesday 15 February, 2012 @ 8 a.m.

Draft Minutes - motion required to approve

BIA BOARD OFFICE

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|                                                          |   |                                                        |   |
|----------------------------------------------------------|---|--------------------------------------------------------|---|
| Connie Cuthbertson - Chair<br>Northwoods Gallery & Gifts | P | Chamber of Commerce Representative                     | A |
| Ted Debenetti – Co-Chair<br>A Buck or Two                | P | RRFDC – Geoff Gillon                                   | A |
| George Emes<br>Edward Jones                              | P | John Albanese – Town Councilor<br>Town of Fort Frances | P |
| Richard Boileau<br>McTaggart                             | P | Shelley Wepruk<br>Secretary                            | P |
| Marie Therese Metke<br>Pharmisave                        | A |                                                        |   |
| Pat Gartshore<br>Gartch's International Pub              | A |                                                        |   |
| Doug Anderson<br>Betty's                                 | P |                                                        |   |
| Mike Tullio<br>Nirvana Spa                               | P |                                                        |   |



### 1. Call to Order , Call for Conflict of Interest, Call for Agenda Additions

Connie Cuthbertson chaired the meeting and called the meeting to order at 8:00 a.m. The Agenda and minutes were circulated to the members for review. Members were asked for any agenda additions or conflicts of interest, none were noted.

### 2. Approval of Minutes

#### B.I.A Board of Management Meeting –24 January , 2012

Copies of the minutes from the 24 January, 2012 Board of Management Meeting were circulated for review and approval. The following motion was made:

#### **Motion # 1 John Albanese/George Emes**

TO accept the minutes presented of the 24 January, 2012 Regular Board of Management Meeting as presented.  
ALSO to ratify all motions made on that date.

**No Against or abstentions  
CARRIED**

### 3. Accounts Payable & Financial Report

Accounts payable for December were circulated for review.

#### **Motion # 2 Richard Boileau/Shelley Wepruk**

TO accept the total payable dated June for payment in the amount of \$107.34

**No Against or abstentions**

**All in agreement – CARRIED**

## **Agenda Item # 10.3**

Downtown BIA – Board of Management Meeting  
Wednesday 15 February, 2012 @ 8 a.m. **Draft Minutes - motion required to approve**

BIA BOARD OFFICE

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### **4. BUSINESS ARISING FROM THE MINUTES**

#### **1. Promotions :**

The board will be discussing associate memberships. Although it would be beneficial to the board to have associate members, it has to come up with a package that will be both enticing and beneficial to both parties. A special meeting will be held on Tuesday, February 21, 2012 to discuss this issue.

There were mixed feeling about the Valentine's Day promotion. The next promotion will be for Easter as none has been scheduled for the March Break week. The committee will be meeting to set up future promo dates.

#### **2. Finance and Administration Committee:**

The finance committee has completed it's work on the 2012 budget. It appears that it will be the same as the 2011 budget. It was reviewed with the board members and decided to adjust the budget to include a rebate of \$200.00 from the Power Corporation for power. Once the budget has been presented at the Annual General Meeting, it will be forwarded on to the Town Hall for approval.

We will be able to include the planters in the amount of \$1,500.00 in the grant received from the Local Initiatives Fund.

AGM is set for 29 March, 2012 @ 6:00 p.m. at the Board Office. Letters will be going out to all BIA members notifying them of the meeting and asking for additions to agenda i

Shelley will be sending a thank you card to the RRFDC for the cheque of \$1,000.00 received from them.

#### **3. Maintenance Committee:**

Banners are going ahead as per schedule. The metal had to be returned due to the thinness of it. The extra metal will be part of our donation to the High School Metal Shop.

Connie has ordered the new planters.

George will be talking to Geoff regarding the re-doing of the billboards.

### **5. New Business:**

The Rainy River Future Development Corporation working on behalf of the Town of Fort Frances will be holding an open meeting on 29 February, 2012 to present the proposed use of the Rainy Lake Hotel property. The RRFDC will be using the BIA design for the platform. There will be two phases to the RLH project. The first will be the leveling and removal of the building and the second will be the erection of the proposed Market Square.

**Board of Management Minutes – 15 February, 2012**      Page 2 of 3



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## **Agenda Item # 10.3**

**Downtown BIA – Board of Management Meeting**

**Wednesday 15 February, 2012 @ 8 a.m.**

**BIA BOARD OFFICE**

**Page 1 of 3**

**Draft Minutes - motion required to approve**

It was decided that it was advisable to set some money aside should there be changes necessary to the Market Square and that at the meeting, the BIA will make the announcement that it will be committing "X" number of dollars to the project.

Although the BIA will be contributing monies to the project, it is important to make clear that the BIA will not be responsible for upkeep of the space nor of collecting monies for rentals.

Shelley will be making copies of the letter received from Geoff regarding the meeting and delivering them to Connie. Block captains will then hand deliver them to business both on Scott Street and the adjacent side avenues. It is the hope that a large number of business and property owners will attend.

### **6. Closing and Setting of Next Board Meeting**

The next meeting date will be 7 March, 2012 @ 8:00 a.m. at the BIA office.

Meeting closed at 9:00 a.m.

## Agenda Item # 10.4



OF # 28 - Minutes

### OPERATIONS & FACILITIES EXECUTIVE COMMITTEE

#### REPORT

FEBRUARY 22, 2012

A meeting of the Operations & Facilities Executive Committee was held on Wednesday, February 22, 2012 at 7:30 a.m.

**PRESENT:** Rick Wiedenhoef  
Paul Ryan  
Ken Perry  
Roy Avis  
Mark McCaig  
Doug Brown

#### **REGRETS:**

#### **GUESTS:**

1. Called to order at 7:35 a.m.
2. Non-agenda items which, because of urgency, cannot be referred to subsequent meeting, identified to be considered later in the meeting – none.

## ***Agenda Item # 10.4***

3. Disclosure of pecuniary interest and general nature thereof – none.
4. Approve Minutes from February 8<sup>th</sup>, 2012 Operations & Facilities Executive Committee Meeting. The minutes were approved as circulated.
5. TENDERS/CAPITAL/DEVELOPMENT/ENGINEERING SERVICES
6. WATER  
  
Water Treatment Plant  
  
Water Distribution System
  - January 2012 Drinking Water Systems Monthly Summary Report – the report was reviewed and will be forwarded to Council for approval.
7. SEWER  
  
Sewage Treatment Plant
  - January 2012 Wastewater Treatment Facility Monthly Report – the January report prepared by OCWA was reviewed and will be forwarded to Council as information only. No action required.
8. TRANSPORTATION  
  
Traffic Safety Advisory Committee
9. WASTE MANAGEMENT
  - Tonnage @ Landfill Site – January 2012 – the January spreadsheet was reviewed and will be forwarded to Council as information only. No action required.
  - Waste Disposal Site Monthly Inspection – January 2012 – the January inspection report was reviewed and will be forwarded to Council as information only. No action required.

## ***Agenda Item # 10.4***

### 10. AIRPORT

- Airport Statistics – January 2012 – the January spreadsheets were reviewed and will be forwarded to Council as information only. No action required.

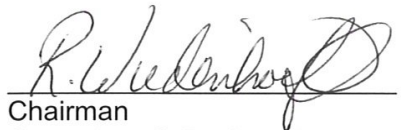
### 11. PARKS & CEMETERIES

### 12. INFORMATION REPORTS

- Monthly Operational Statistics – January 2012 – Milt Strachan – the monthly statistics were reviewed and will be forwarded to Council as information only. No action required.
- Monthly Operational Statistics – January 2012 – Doug Herr – the monthly statistics were reviewed and will be forwarded to Council as information only. No action required.

### 13. NON-AGENDA ITEMS

There being no further matters before this committee at this time; this meeting was adjourned at 8:23 a.m.



Chairman  
Operations & Facilities Executive  
Committee

  
Manager Operations & Facilities

Feb 22nd O&F Exec.doc