



## MIDDLESEX-LONDON HEALTH UNIT

### ADMINISTRATION MANUAL

**SUBJECT:** STRUCTURE AND RESPONSIBILITIES OF THE BOARD OF HEALTH      **POLICY NUMBER:** 2-010

**SECTION:** Board of Health      Page 1 of 3

**IMPLEMENTATION DATE:** July 8, 1992

**APPROVED BY:** Board of Health

**REVISION DATE:** June 1, 1995

**SIGNATURE:**

December 18, 1996

July 20, 2000

November 18, 2004

June 21, 2006 (Directors Committee)

2008 October 16 (Board of Health)

2010 January 21 (Board of Health)

2010 November 18 (Board of Health)

2011 February 17 (Board of Health)

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### PURPOSE

To outline the structure and responsibilities of the Board of Health.

### POLICY

The Board of Health is an autonomous body responsible for the governance of the Health Unit in accordance with Section 49 (1), (2), (3) of the *Health Protection and Promotion Act (HPPA)*, R.S.O.1990 as amended, which outlines the composition of boards of health and R.R.O. 1990, Regulation 559 re Designation of Municipal Members of Boards of Health

The Board of Health will serve as an advocacy body for public health.

### PROCEDURE

#### 1.0 Board of Health Structure

##### 1.1 Board of Health Appointments

The Board of Health consists of municipal and provincial appointees. Each member's term of office is determined by the appointing body.

The number of Board members and their representation is as follows:

- City of London – 3 appointees
- County of Middlesex – 3 appointees
- Province of Ontario – 5 appointees

##### 1.2 Vacancies and Re-appointments

Vacancies on the Board will be filled by appointment by the body represented, that is the municipality or province.

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Terms of office for provincial appointees may be renewed by applying to the Public Appointments Unit of the Ministry of Health and Long-Term Care. **Appendix B, Provincial Appointee Reappointment Process**, will be followed with respect to reappointment of provincially appointed board members.

### 1.3 Committee Structure

Each year at its inaugural meeting, the Board will:

- i. Elect a Chair, Vice Chair and Secretary-Treasurer
- ii. Decide whether to establish standing committees or to have the Board deal with all matters directly.

The Chair of the Board rotates on an annual basis to one of the appointees of the County of Middlesex, the City of London or the Province of Ontario.

The Board will enact bylaws (See **APPENDIX A**) to provide for the management of property; banking and finance; Board of Health proceedings; the duties of the Auditor and power designation related to the Municipal Freedom of Information and Protection of Privacy Act.

Bylaws will be reviewed by the Board of Health in the calendar year following a municipal election (every four years).

## 2.0 Responsibilities

The Board of Health oversees the interpretation, implementation, management and advocacy for the health programs and services described in the HPPA for persons in the City of London and County of Middlesex.

The Board of Health is accountable to the Minister of Health and Long-Term Care for interpretation of policies, the local administration and implementation of public health programs. The Board of Health appoints a Medical Officer of Health (MOH) who has been approved by the Minister of Health and Long-Term Care. The Board delegates responsibility to administer these programs to the MOH in his/her capacity as the Executive Officer (HPPA, 1990, S.67(1)). The MOH reports regularly to the Board at monthly meetings on the conduct of the programs of the Board.

Individual Board members will represent the decision of the Board of Health to their respective appointing bodies. The Board of Health advocates for the Health Unit, which includes programs and services, budgetary issues and broader public health issues.

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### 3.0 Access to the Board of Health

The Medical Officer of Health/Chief Executive Officer (MOH/CEO) prepares the agenda for all Board meetings. Requests for community or staff presentations to the Board are made to the MOH.

Directors may attend all Board of Health meetings.

Agendas, reports and minutes of all regularly scheduled meetings of the Board are available to all staff and the public and are posted to the Health Unit website at the universal resource locator (URL) of [www.healthunit.com](http://www.healthunit.com).

Board meetings are open to the public. Whenever practicable, the Board of Health will provide appropriate alternate means of public attendance at Board meetings, including but not limited to internet streaming of meetings through the Health Unit website, [www.healthunit.com](http://www.healthunit.com). Further details regarding public presentations to the Board are documented under Bylaw No. 3 (See **APPENDIX A**).

The Board of Health believes that physical presence of members at meetings greatly enhances its deliberations. Physical attendance is therefore the desirable, usual and expected method of participation in meetings. However, the Board also recognizes the usefulness and effectiveness of providing for electronic meetings and electronic participation in Board meetings by individual board members. Electronic participation at regularly scheduled board meetings is at the discretion of the Chair and is considered an exceptional measure intended to cater for unavoidable conflicts and emergencies.

Board meetings may also be conducted electronically\* (i.e., by videoconference or teleconference) where time or circumstances make this a better means of conducting Board of Health business, provided that the proceedings ensure public access and otherwise comply with the provisions of Board of Health By-law No.3. (See APPENDIX A, Middlesex-London Board of Health By-laws). At the subsequent meeting of the Board of Health after any meeting(s) that had been held by teleconference or video conference, the Board will approve the minutes of any preceding electronic meeting(s).

Further details regarding electronic participation in Board meetings are documented in APPENDIX C, Electronic Participation in Board Meetings.

**\* A meeting is determined to have been conducted electronically when a majority of board members in attendance are not physically present.**