AGENDA MIDDLESEX-LONDON BOARD OF HEALTH Finance & Facilities Committee

Thursday, March 5, 2020 9:00 a.m. 399 Ridout St. North, London, Ontario MLHU Boardroom, Middlesex County Building

- 1. DISCLOSURE OF CONFLICTS OF INTEREST
- 2. APPROVAL OF AGENDA
- 3. APPROVAL OF MINUTES February 6, 2020 and February 13, 2020
- 4. BUSINESS
 - **4.1** 2019 Board of Health Remuneration (Report No. 008-20FFC)
 - **4.2** Q4 Financial Update and Factual Certificate (Report No. 009-20FFC)
 - 4.3 2019 Visa / Vendor Payments (Report No. 010-20FFC)
 - **4.4** Public Sector Salary Disclosure Act 2019 Record of Employees' Salaries and Benefits (Report No. 011-20FFC)

5. OTHER BUSINESS

5.1 Next meeting Thursday, April 2, 2020 at 9:00 a.m.

6. CONFIDENTIAL

The Finance & Facilities Committee will move in-camera to consider matters regarding a trade secret or financial information, supplied in confidence to the local board, which if disclosed, could reasonably be expected to prejudice significantly the competitive position or interfere significantly with contractual or other negotiations of a person, group of persons or organization, and a trade secret or financial information that belongs to the municipality or local board and has monetary value, and to approve confidential minutes from its February 6, 2020 meeting.

7. ADJOURNMENT



PUBLIC MINUTES FINANCE & FACILITIES COMMITTEE

399 Ridout St. N.

Middlesex-London Health Unit Board Room Thursday, February 6, 2020 9:00 a.m.

MEMBERS PRESENT: Ms. Kelly Elliott (Chair)

Ms. Aina DeViet Ms. Tino Kasi Mr. Ian Peer

REGRETS: Ms. Maureen Cassidy

OTHERS PRESENT: Mr. Bob Parker, Board of Health Member

Dr. Christopher Mackie, Secretary-Treasurer

Ms. Lynn Guy, Executive Assistant to the Medical Officer of Health

(Recorder)

Ms. Laura Di Cesare, Director, Corporate Services

Mr. Brian Glasspoole, Manager, Finance

Mr. Joe Belancic, Manager, Procurement and Operations

Mr. Jordan Banninga, Manager, Program Planning and Evaluation

Ms. Cynthia Bos, Manager, Human Resources Ms. Kendra Ramer, Manager, Strategic Projects

Ms. Nicole Gauthier, Manager, Privacy, Risk and Governance Ms. Rhonda Brittan, Manager, Healthy Communities and Injury

Prevention

Mr. Jeff Cameron, Manager, IT

Dr. Alex Summers, Associate Medical Officer of Health

Ms. Heather Lokko, Director, Healthy Start

At 9:00 a.m., Dr. Mackie called the meeting to order and opened the floor to nominations for Chair of the Finance & Facilities Committee for 2020.

It was moved by Ms. DeViet, seconded by Mr. Peer, that Ms. Elliott be nominated for Chair of the Finance & Facilities Committee for 2020.

Carried

Ms. Elliott accepted the nomination.

Dr. Mackie called three times for further nominations. None were forthcoming.

It was moved by Ms. DeViet, seconded by Mr. Peer, that Ms. Elliott be acclaimed as Chair of the Finance & Facilities Committee for 2020.

Carried

Chair Elliott reviewed the Committee's membership to ensure quorum.

DISCLOSURES OF CONFLICT OF INTEREST

Chair Elliott inquired if there were any disclosures of conflict of interest. None were declared.

APPROVAL OF AGENDA

It was moved by Ms. DeViet, seconded by Mr. Peer, that the *AGENDA* for the February 6, 2020 Finance & Facilities Committee meeting be approved.

Carried

APPROVAL OF MINUTES

It was moved by Mr. Peer, seconded by Ms. DeViet, that the MINUTES of the December 5, 2019 Finance & Facilities Committee meeting be approved.

Carried

NEW BUSINESS

4.1 2020 Terms of Reference and Annual Reporting Calendar (Report No. 001-20FFC)

The Terms of Reference and Reporting Calendar were attached to this report to help guide Committee members throughout the year.

It was moved by Mr. Peer, seconded by Ms. Kasi, that the Finance & Facilities Committee approve Report No. 001-20FFC re: "Terms of Reference and Reporting Calendar."

Carried

4.2 2020 Proposed Budget (Report No. 002-20FFC)

Dr. Mackie noted that the Annual Service Plan (ASP) is the tool that the Health Unit uses to report its budget to the Ministry of Health.

Dr. Mackie provided a Program Budget Marginal Analysis (PBMA) overview. Recognizing that all programs and activities are valuable, the PBMA process asks staff to consider opportunities for investment and/or disinvestment in their programs to provide the best possible delivery of programs and services to clients while ensuring the least negative impact.

Mr. Glasspoole provided an overview of the 2020 budget considerations, including inflationary pressures related to cost-of-living increases for staff; incremental premises cost in connection to the relocation to Citi Plaza, and PBMA-related disinvestments of \$493,388.

Mr. Glasspoole provided a three-year (2018–20) budget overview. He noted that the overall proposed budget for 2020 shows an increase of \$707,034 over last year. Components of this increase include: an increase of \$2,561,400 for the 100%-funded Ontario Seniors Dental Care Program, an increase of \$166,846 from the City of London to support local cannabis enforcement and education, and a decrease of \$2,096,759 from MCCSS for children's screening programs.

There was discussion in regard to projecting how the municipalities' contributions may change. Mr. Glasspoole said he didn't feel that it would be a double-digit increase. Dr. Mackie noted that the City and the County have not put increased amounts in their budgets, but are reporting it as unknown.

Mr. Banninga reviewed the Divisions, including the teams and their respective programs. He explained the grouping of public health interventions into programs as related to specific diseases, topics, or populations. These interventions assist the program in achieving the desired outcomes. He noted that today the Finance & Facilities Committee would be looking at programs and interventions.

Mr. Peer mentioned the great amount of work that has gone into developing the ASP document. As most attendees had not had time to read through the entire document, Dr. Mackie asked that the focus today be on changes to the FTE count and budget. Staff will speak to each of these topics as required.

Dr. Mackie discussed the changes in Emergency Management, under the Emergency Management Standard, and noted that the reduction in one FTE resulted from not replacing an exiting Program Assistant. The remaining duties will now be performed by the Administrative Assistant to the Director.

The Communications Program, which falls under the Effective Public Health Practice Standard, experienced no significant changes. Discussion ensued on how to measure outcomes for this program and the increase in social media use, especially Instagram.

Program Planning and Evaluation (PPE) also falls under the Effective Public Health Practice Standard. Mr. Banninga reviewed the PPE Program. He noted that there were no significant changes to report.

The Quality and Transparency Program also reported no significant changes.

Mr. Banninga noted that the Research and Knowledge Exchange Program had seen a significant budget increase due to amalgamation of two programs. There was no change to service delivery.

Under the Health Equity Standard, Ms. Lokko provided the review for the Health Equity and Indigenous Public Health Practice programs. There was a question in regard to the first indicator as to teams consulting with HEART. Ms. Lokko said she would check the data provided to ensure accuracy.

Under the Population Health Assessment Standard, Dr. Summers provided the Population Health Assessment and Surveillance Program update. He reported no major changes and advised that the program remains stable and consistent.

Ms. Brittan provided updates for the Chronic Disease Prevention and Well-Being Team's programs, reportable under the Chronic Disease Prevention and Well-Being Standard. These programs include: Healthy Eating Behaviours; Oral Health; Physical Activity and Sedentary Behaviours; Mental Health Promotion; and Ultraviolet Radiation and Sun Safety.

There was discussion in regard to Oral Health indicators. When the indictor numbers are available for 2019, they will be brought to the Board. Ms. Brittan advised that she would contact the program manager to obtain the data.

Dr. Summers reviewed the Food Safety Program, which is within the Food Safety and Healthy Environments Team and reportable under the Food Safety Standard. Also reviewed, from this team, was the Health Hazard Response Program and the Healthy Environments and Climate Change Program.

Under the Healthy Growth and Development Standard, Ms. Lokko reviewed several programs in the Healthy Start Division: Breastfeeding and Infant Feeding; Growth and Development; Healthy Pregnancies; Mental Health Promotion; and Preconception Health.

Under the Healthy Growth and Development Standard, Dr. Summers reviewed the Healthy Sexuality Program in the EHID Division. Committee members requested more information on performance/service level indicators. Dr. Summers will ask why the 2020 target for youth accessing Birth Control Clinic services (3,000) is lower than for the previous year.

At 10:50 a.m., Chair Elliott asked for a motion to take a five-minute break.

It was moved by Ms. DeViet, seconded by Ms. Kasi, that the FFC take a five-minute break.

At 10:55 a.m., Chair Elliott called the meeting to order.

It was moved by Mr. Peer, seconded by Ms. DeViet, that the meeting proceed.

Dr. Summers updated the Committee on the programs reportable under the Infectious and Communicable Diseases Prevention and Control Standard, beginning with the Infection Prevention and Control (IPAC) Program and continuing with the other programs: Rabies and Zoonotic Disease; Respiratory, Enteric, and Other Infectious Disease; Sexually Transmitted and Blood-Borne Disease; Tuberculosis; and Vector-Borne Disease.

Dr. Summers continued his update for the EHID Division, under the Immunization Standard. The Division's programs include: Adverse Vaccine Events and Safety; Vaccine Inventory Management; and Vaccine Preventable Disease.

Ms. Brittan introduced the School Health Standard, and reviewed the Comprehensive School Health, Oral Health, and Vision programs. There was discussion in regard to mental health services available in schools, which are provided via the Comprehensive School Health Program.

The Immunization Program, also reportable under the School Health Standard, is in the EHID Division. This update was given by Dr. Summers. A Board Member asked if mandatory indicators could be highlighted in the document? Dr. Mackie noted that the mandatory indicators are not current and will shift as Public Health Modernization proceeds.

Ms. Brittan provided the update for the Substance Use and Injury Prevention Standard, beginning with the Alcohol and Cannabis Program in the Health Living Division.

Chair Elliott noted that due to limited time, the ASP review will continue at the February 13, 2020 FFC meeting.

Carried

4.3 Staff Reimbursement – Mileage (Report No. 003-19FFC)

Mr. Glasspoole noted that the mileage reimbursement rates have not been adjusted since 2014.

It was moved by Ms. DeViet, seconded by Mr. Peer, that the Finance & Facilities Committee make recommendation to the Board of Health to approve increases to employee mileage reimbursement rates, effective January 1, 2020, to \$0.55/km for the first 5,000 km and \$0.50/km thereafter.

Carried

OTHER BUSINESS

Next meeting: February 13, 2020.

CONFIDENTIAL

At 11:30 a.m., it was moved by Ms. Kasi, seconded by Mr. Peer, that the Finance & Facilities Committee move in-camera to consider matters regarding a trade secret or financial information, supplied in confidence to the local board, which if disclosed, could reasonably be expected to prejudice significantly the competitive position, or interfere significantly with contractual or other negotiations, of a person, group of persons, or organization, and a trade secret or financial information that belongs to the municipality or local board and has monetary value.

Carried

At 11:53 a.m., it was moved by Mr. Peer, seconded by Ms. Kasi, that the Finance & Facilities Committee return to public session.

Carried

ADJOURNMENT

At 11:55 a.m., it was moved by Mr. Peer, seconded by Ms. DeViet, that the meeting be adjourned.

Carried

At 11:56 a.m., Chair Elliott adjourned the meeting.

KELLY ELLIOTT Chair CHRISTOPHER MACKIE Secretary-Treasurer



PUBLIC MINUTES FINANCE & FACILITIES COMMITTEE

399 Ridout St. N.

Middlesex-London Health Unit Board Room Thursday, February 13, 2020 9:00 a.m.

MEMBERS PRESENT: Ms. Kelly Elliott (Chair)

Ms. Aina DeViet Mr. Ian Peer

REGRETS: Ms. Maureen Cassidy

Ms. Tino Kasi

OTHERS PRESENT: Dr. Christopher Mackie, Secretary-Treasurer

Ms. Lynn Guy, Executive Assistant to the Medical Officer of Health

(Recorder)

Mr. Brian Glasspoole, Manager, Finance

Mr. Jordan Banninga, Manager, Program Planning and Evaluation

Ms. Cynthia Bos, Manager, Human Resources Ms. Kendra Ramer, Manager, Strategic Projects

Ms. Nicole Gauthier, Manager, Privacy, Risk and Governance Ms. Rhonda Brittan, Manager, Healthy Communities and Injury

Prevention

Mr. Jeff Cameron, Manager, IT

Dr. Alex Summers, Associate Medical Officer of Health

Ms. Heather Lokko, Director, Healthy Start

At 9:00 a.m., Chair Elliott called the meeting to order.

DISCLOSURES OF CONFLICT OF INTEREST

Chair Elliott inquired if there were any disclosures of conflict of interest. None were declared.

APPROVAL OF AGENDA

The walk-on report "One-Time Funding Requests to the Ministry of Health" (Report No. 002-20FFC) was added to the agenda.

It was moved by Ms. DeViet, seconded by Mr. Peer, that the amended **AGENDA** for the February 13, 2020 Finance & Facilities Committee meeting be approved.

Carried

BUSINESS

4.1 2020 Proposed Budget (continued from the February 6 meeting) (Report No. 002-20FFC)

The committee continued its review of the 2020 Annual Service Plan (ASP), beginning on page 289. The floor was opened to discussion when requested by Board members.

Continuing under the Substance Use and Injury Prevention Standard, there was discussion in regard to the distribution of child booster seats. Ms. Brittan provided an update, noting that pre-booster seats are closely monitored and are provided to families with the most critical need.

The Falls Prevention and Healthy Aging Program is part of the Healthy Living Division. Chair Elliott suggested that the Health Unit consider increasing collaboration within the county, as many seniors there do not have personal support workers.

Also reportable under the Substance Use and Injury Prevention Standard is the Opioids and Other Drugs Program in the Environmental Health and Infectious Diseases Division (EHID). Chair Elliott noted that she had spoken with the fire chief in Thames Centre who advised her that they are starting to carry Naloxone kits in the fire engines. Chair Elliott suggested that program staff get in touch with lower-tier fire stations to provide more information.

In regard to the Road and Off-Road Safety, Mr. Peer asked about program funding. Ms. Brittan responded that the Health Unit might receive some funding under a newly announced grant.

Dr. Mackie reported on the Southwest Tobacco Control Area Network (SWTCAN) and noted that a rumour had been circulating recently that the TCANs would be dissolved. He advised that this is not the case and that, during the Public Health Modernization consultations, the importance of the TCANs had been noted.

Regarding the Tobacco Control and Electronic Cigarettes Program, discussion ensued on having sufficient resources to meet the program goals, perform the policy work, and meet regulations.

The Violence Prevention Program was mentioned, but it was felt that no further discussion was needed.

In regard to the Seniors Dental Program, it was noted that the program is 100% funded for this year. Dr. Mackie said it was not clear, at this time, what the funding will look like for next year.

Under the Safe Water Standard, the following programs were discussed:

<u>Drinking Water</u>: Travel expenses decreased over the past year due to the recently completed Public Health Inspector review. An intentional process was undertaken to make travel more efficient.

It was noted that for private well inspections, consultations are carried out on a by-request basis. Dr. Mackie provided additional information.

Chair Elliott asked that the Health Unit reach out to lower-tier municipalities to inquire whether MLHU could provide materials to be included in their mailouts, such as brochures and/or links to Facebook posts about well water, testing, consultations, etc.

Recreational Water: No additional discussion was required.

Small Drinking Water System: No additional discussion was required.

One of the many programs in the Healthy Organization Division, Strategic Projects was reviewed under the Delivery of Public Health Programs and Services Standard. No additional discussion was required.

Finance was reviewed under the Fiduciary Requirements Standard. Ms. DeViet asked Mr. Glasspoole to provide an update on capital assets.

Procurement was also reviewed under the Fiduciary Requirements Standard. Ms. DeViet asked about competitive bids and what is meant by decreasing the level of activity. It was noted that due to the relocation, the number of bids was higher than normal in 2019, but should decrease the following year.

For the Governance, Human Resources, Information Technology, Operations, and Privacy and Records programs in the Healthy Organization Division, reportable under the Good Governance and Management Practices Standard, it was felt that no additional discussion was needed.

There was some discussion related to the Risk Management program, also in the Healthy Organization Division. Dr. Mackie advised the Committee about a local cannabis vendor who had been selling vaping products contrary to regulations, and the attendant enforcement-related risks with respect to meeting the Health Unit's mandate.

It was moved by Ms. DeViet, seconded by Mr. Peer, that the Finance & Facilities Committee recommend that the Board of Health:

- 1) Approve the 2020 Proposed Budget in the gross amount of \$35,309,015, as appended to Report No. 002-20FFC re: "2020 Proposed Budget";
- 2) Forward Report No. 002-20FFC to the City of London and the County of Middlesex for information; and
- 3) Direct staff to submit the 2020 Proposed Budget to the Health Unit's funding agencies in the formats they require.

Carried

4.2 One-Time Funding Requests to the Ministry of Health (Report No. 002-20FFC)

Dr. Mackie noted that the Ministry has two funding processes, one of them for one-time funding requests. Mr. Glasspoole provided additional information on three such requests, which will be submitted to the Ministry for consideration and which pertain to:

- Public Health Inspector practicum positions;
- Funds for replacement of furniture; and
- Funds to cover increased staffing expenditures in regard to Novel Coronavirus

These one-time funding requests will be added to the Annual Service Plan submission. It is not known when or if the funding will be received.

It was moved by Mr. Peer, seconded by Ms. DeViet, that the Finance & Facilities Committee make recommendation to the Board of Health to:

- 1) Approve Appendix A, outlining One-Time Funding Requests totalling \$511,055; and
- 2) Direct staff to submit the funding requests in the 2020 Annual Service Plan to the Ministry.

Carried

OTHER BUSINESS

Next FFC meeting: March 5, 2020, at 9:00 a.m.

At 9:39 a.m., Chair Elliott adjourned the meeting.

ADJOURNMENT

Chair

At 9:39 a.m., it was moved by Mr. Peer, seconded by Ms. DeViet, that the meeting be adjourned.

Carried

KELLY ELLIOTT	CHRISTOPHER MACKIE

Secretary-Treasurer

MIDDLESEX-LONDON HEALTH

MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 008-20FFC

TO: Chair and Members of the Finance & Facilities Committee

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2020 March 5

2019 BOARD OF HEALTH REMUNERATION

Recommendation

It is recommended that the Finance & Facilities Committee review and recommend that the Board of Health receive Report No. 008-20FFC re: "2019 Board of Health Remuneration" for information.

Key Points

- Section 49 of the *Health Protection and Promotion Act* outlines reimbursement of Board of Health members.
- Under Section 284 (1) of the *Municipal Act*, 2001, the City of London and Middlesex County Administration are required to report on the remuneration paid to Council members, including remuneration paid to members of Council by boards and commissions.

Background

<u>Section 49 of the *Health Protection and Promotion Act*</u> (HPPA) speaks to the composition, term, and remuneration of Board of Health members. Subsections (4), (5), (6), and (11), below, relate specifically to remuneration and expenses.

Remuneration

(4) A board of health shall pay remuneration to each member of the board of health on a daily basis and all members shall be paid at the same rate. R.S.O. 1990, c. H.7, s. 49 (4).

Expenses

(5) A board of health shall pay the reasonable and actual expenses of each member of the board of health. R.S.O. 1990, c. H.7, s. 49 (5).

Rate of remuneration

(6) The rate of the remuneration paid by a board of health to a member of the board of health shall not exceed the highest rate of remuneration of a member of a standing committee of a municipality within the health unit served by the board of health, but where no remuneration is paid to members of such standing committees the rate shall not exceed the rate fixed by the Minister and the Minister has power to fix the rate. R.S.O. 1990, c. H.7, s. 49 (6).

Member of municipal council

(11) Subsections (4) and (5) do not authorize payment of remuneration or expenses to a member of a board of health, other than the chair, who is a member of the council of a municipality and is paid annual remuneration or expenses, as the case requires, by the municipality. R.S.O. 1990, c. H.7, s. 49 (11).

In relation to Section 49 (6), the Board of Health's meeting rate for 2019 was \$151.49 per meeting.

2019 Remuneration and Expenses

Under Section 284 (1) of the *Municipal Act*, 2001, the City of London and Middlesex County Administration are required to report on the remuneration paid to Council members, including remuneration paid to members of Council by boards and commissions. The remuneration report, attached as <u>Appendix A</u>, includes stipends paid for meetings and reimbursements for travel and related expenses that the Health Unit provided to each Board of Health member in 2019.

In addition to the regular Board of Health meetings, in 2019 the Board of Health operated three committees: the Finance & Facilities Committee, which met nine times in 2019; the Governance Committee, which met four times; and the Relocation Advisory Committee, which met four times.

The membership of the 2019 committees was as follows:

Finance & Facility Committee:

Mr. Matt Reid (Chair) Ms. Tino Kasi

Ms. Trish Fulton Ms. Maureen Cassidy

Ms. Kelly Elliott

Governance Committee:

Ms. Aina DeViet (Chair) Ms. Maureen Cassidy

Ms. Elizabeth Peloza Mr. Ian Peer

Ms. Trish Fulton

Relocation Advisory Committee:

Mr. Ian Peer (Chair) Mr. John Brennan Mr. Michael Clarke Ms. Trish Fulton

Mr. Matt Reid

Consistent with Section 49 (11) of the *Health Protection and Promotion Act*, city councillors Ms. Maureen Cassidy, Ms. Arielle Kayabaga, and Ms. Elizabeth Peloza did not receive remuneration for any Board of Health or committee meetings unless acting in the capacity of Chair.

This report was prepared by the Healthy Organization Division.

Christopher Mackie, MD, MHSc, CCFP, FRCPC

Medical Officer of Health / CEO

MIDDLESEX-LONDON BOARD OF HEALTH 2019 REMUNERATION REPORT

Board Member	Boa	rd/Committee Meetings	Board Mtg. Travel	Other Mtgs./ Conferences	C	Other Travel & Accomm.	Total
		J					
Mr. John Brennan	\$	2,726.82	\$ 151.49	\$ 605.96	\$	41.31	\$ 3,525.58
Ms. Maureen Cassidy ¹		113.61	-	507.65		22.51	643.77
Mr. Michael Clarke		2,120.86	264.50	151.49		-	2,536.85
Ms. Aina DeViet		2,120.86	332.92	1,211.92		35.97	3,701.67
Ms. Kelly Elliott		2,423.84	266.34	151.49		-	2,841.67
Ms. Trish Fulton (Chair)		4,317.44	18.76	1,363.41		0.45	5,700.06
Ms. Tino Kasi		1,666.39	-	-		-	1,666.39
Ms. Arielle Kayabaga ¹		-	-	-		-	-
Mr. Ian Peer		3,370.65	302.98	-		-	3,673.63
Ms. Elizabeth Peloza ¹		-	-	-		-	-
Mr. Matt Reid		4,090.23	168.51	1,720.72		766.18	6,745.64
TOTAL	\$	22,950.70	\$ 1,505.50	\$ 5,712.64	\$	866.42	\$ 31,035.26

Notes:

¹⁾ Remuneration for meetings for City Councillors is included in their annual salary which is paid by the City of London (unless councillor is acting in a Chair capacity)



MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 009-20FFC

TO: Chair and Members of the Finance & Facilities Committee

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2020 March 05

Q4 FINANCIAL UPDATE AND FACTUAL CERTIFICATE

Recommendation

It is recommended that the Finance & Facilities Committee review and recommend to the Board of Health to receive Report No. 009-20FFC re: Q4 Financial Update and Factual Certificate for information.

Key Points

- The 2019 approved budget assumes a zero percent increase in Mandatory Programs funding from the Ministry of Health and Long-Term Care (MOHLTC).
- After fully offset the planned agency gapping budget of \$1,124,269, the organization applied a full-year spending surplus, currently estimated to be \$400,000 to relocation related expenses
- Included in the financial update is a signed factual certificate, which provides assurance that financial and risk management functions are being performed.

Background

The Board of Health approved the 2019 operating budget on February 14, 2019 (Report No. 007-19FFC). The approved budget includes a \$250,000 contribution to the Technology and Infrastructure Reserve Fund and assumes no increase in Mandatory Programs funding from the MOHLTC.

Financial Highlights

The Budget Variance Summary, which provides budgeted and actual expenditures for the full operating year for the programs and services governed by the Board of Health, is attached as <u>Appendix A</u>. This analysis is based on the original budget for 2019 as approved by the Board of Health and outlined to the Board of Health in Report 007-19FFC.

The Board of Health had previously approved (Report No. 029-19FFC) the allocation of variance funds, after those required to offset the agency gapping budget to relocation-related expenses to a maximum of \$1 million in 2019. After fully offset the planned agency gapping budget of \$1,124,269, the organization applied a full-year spending surplus, currently estimated to be \$400,000 to relocation related expenses incurred during the year. Applying these funds will reduce the amount of funding that the organization will eventually need to borrow to finance the outfit of new premises at Citi Plaza.

Factual Certificate

A signed factual certificate, attached as <u>Appendix B</u>, is to be signed by senior Health Unit administrators responsible for ensuring certain key financial and risk management functions are being performed to the best of their knowledge. The certificate is revised as appropriate on a quarterly basis and submitted with each financial update.

This report was prepared by the Finance Team, Healthy Organization Division.

Christopher Mackie, MD, MHSc, CCFP, FRCPC

Medical Officer of Health / CEO

MIDDLESEX-LONDON HEALTH UNIT NET BUDGET VARIANCE SUMMARY

As at December 31, 2019

Appendix A (009-20FFC)

	Y	2019 FD ACTUAL (NET)	2019 YTD BUDGET (NET)	(ARIANCE OVER) / UNDER	% VARIANCE	DECEMBER FORECAST	2019 ANNUAL NET BUDGET	S	ANNUAL URPLUS / (DEFICIT)	% VARIAI	ICE Comment / Explanation
Environmental Health & Infectious Disease Division												
Office of the Director	\$	299,210	\$ 297,938	\$	(1,272)	-0.4% \$	299,210	\$ 297,938	\$	(1,272)	-0	Higher than planned spending for VPD Training & Facilitation (\$18,000) will be offset by favourable variances in training budgets in other EHID departments. This additional expense is largely offset by favourable wages \$11,368 and benefits \$2,685 in the Travel Clinic as the recovery of these costs was unplanned.
Emergency Management		143,640	180,848		37,208	20.6% \$	143,640	180,848	\$	37,208	20	Lower spending in salaries \$15,359 and benefits \$4,283 due to staff vacancy, unplanned reduction in benefits cost for manager coupled with lower than planned spending on 6% program costs due to community emergency response volunteers (CERV) recruitment pause \$5,000, suspension of travel \$1,582 and lower purchases of promotional materials \$4,334
Food Safety & Healthy Environments		1,668,921	1,707,955		39,034	2.3%	1,668,921	1,707,955	\$	39,034	2	Lower spending in salaries \$3,448 and benefits \$4,669 due to gapping for PHI position. 3% Lower spending in travel \$2,981, program supplies \$6,703 and staff development \$6,044 and special risk budget in other program costs \$1,500 partly augmented by higher revenues \$5,942 and allocation of one-time funding revenue \$7,500.
Infectious Disease Control		1,683,267	1,814,317		131,050	7.2%	1,683,267	1,814,317	\$	131,050	7	Lower spending in salaries \$93,505 and benefits \$48,026 due to salary gapping for PHI and PHN positions, lower staff development \$2,993 and greater efficiencies with translation fees and outsourced computer services \$4,920 partly offset by unplanned program costs for IGRA blood testing related to an active TB case (\$15,714).
Safe Water, Rabies & Vector-Borne Disease		1,294,542	1,385,067		90,525	6.5%	1,294,542	1,385,067	\$	90,525	6	Lower spending in salaries related to band differential for manager position \$10,901, staff development \$4,427, professional service contracts due to renegotiated terms 5.5% \$44,942, travel \$12,095, program supplies \$7,010 and unplanned revenue \$11,962 were partly offset by higher than planned equipment purchases for Vector Borne Diseases (\$2,774).
Sexual Health		2,718,615	2,732,418		13,803	0.5%	2,718,615	2,732,418	\$	13,803	0	Lower than planned spending for salaries and wages \$25,572, benefits \$14,303, program supplies, notably oral contraceptives \$130,792 and travel \$6,785 contributed to lower expenditures for the Clinic. These savings were offset by lower than planned revenues (\$184,824). For HIV Prevention and Control, higher costs for outreach workers and professional fees in connection with the consumption site were more than offset by funding received from Regional HIV/AIDS Connection (RHAC) \$24,011.
Vaccine Preventable Disease		1,532,758	1,448,804		(83,954)	-5.8%	1,532,758	1,448,804	\$	(83,954)	-5	Higher spending for wages (\$98,128) and benefits (\$9,675) to cover unplanned staff vacancies and additional casual hours for clinics and schools and lower than planned revenues from vaccines (\$16,885) partly offset by reduced spending for program supplies \$33,994, travel \$4,810 and staff development \$1,740.
Total Environmental Health & Infectious Disease Division	\$	9,340,953	\$ 9,567,347	\$	226,394	2.4% \$	9,340,953	\$ 9,567,347	\$	226,394	2	4%
Healthy Living Division												
Office of the Director	\$	268,152	\$ 379,454	\$	111,302	29.3% \$	268,152	\$ 379,454	\$	111,302	29	Lower spending in salaries \$74,094 and benefits \$17,813 reflecting vacant policy 3% advisor position. Lower spending anticipated in travel \$3,502 program supplies \$5,143, professional services \$5,000, staff development \$3,125 and program and equipment costs \$2,801.
Child Health		1,578,916	1,672,200		93,284	5.6%	1,578,916	1,672,200	\$	93,284	5	Lower spending in salaries \$62,537 and benefits \$18,059 due to unfilled PHN vacancy and position gapping. Lower spending for travel \$4,984, staff development \$3,565 and other program costs \$5,420 were partly offset by Ontario Student Drug Use and Health Survey oversampling costs (\$2,216).

MIDDLESEX-LONDON HEALTH UNIT NET BUDGET VARIANCE SUMMARY

As at December 31, 2019

Appendix A (009-20FFC)

	YTD A	2019 ACTUAL Y NET)	2019 /TD BUDGET (NET)	VARIANCE (OVER) / UNDER	% VARIANCE	DECEMBER FORECAST	2019 ANNUAL NET BUDGET	ANNUAL SURPLUS / (DEFICIT)	% VARIANCE	Comment / Explanation
Chronic Disease and Tobacco Control	1,	,362,515	1,407,541	45,026	3.2%	1,362,515	1,407,541	\$ 45,026	3.2% Lowe	er spending in salaries \$34,520 and benefits \$9,439 due to staffing gap.
Healthy Communities and Injury Prevention	1,	,036,239	1,168,241	132,002	11.3%	1,036,239	1,168,241	\$ 132,002	11.3% lower	or spending in salaries \$78,131 and benefits \$22,958 reflect hiring gap, coupled with travel expense \$8,656, program supplies \$7,243 staff development \$3,706, ssional services \$5,500 and equipment and program costs \$3,307.
Oral Health	1,	,521,000	1,609,010	88,010	5.5%	1,521,000	1,609,010	\$ 88,010		er spending for salaries \$76,019 and benefits \$18,637 for staff vacancies and lower development \$4,500 and travel \$2,000.
Southwest Tobacco Control Area Network		436,500	436,500	-	0.0%	436,500	436,500	\$ -	0.0% No va	ariances anticipated at year-end
Young Adult Health	1,	,087,351	1,137,465	50,114	4.4%	1,087,351	1,137,465	\$ 50,114	4.4% lower	er spending in salaries \$19,378 and benefits \$10,046 due to hiring gaps. In addition spending occurred on program supplies \$11,958, travel \$6,282 and professional ces \$2,290.
Total Healthy Living Division	\$ 7	7,290,672 \$	7,810,411	\$ 519,739	6.7%	7,290,672	\$ 7,810,411	\$ 519,739	6.7%	
Healthy Start Division										
Office of the Director	\$	198,317 \$	208,616	\$ 10,299	4.9%	198,317	\$ 208,616	\$ 10,299		r spending was reported in program supplies \$6,859, equipment \$1,300, program \$1,242 and travel \$630.
Best Beginnings	2,	,856,341	3,061,076	204,735	6.7%	2,856,341	3,061,076	\$ 204,735	6.7% gappi	or spending in salaries \$114,911 and benefits \$56,389 for staff vacancies and ing. Lower spending for travel \$7,735, professional services \$11,346, program lies \$12,273 and lower than planned interpreter costs \$1,790 were also reported.
Early Years Health .	\$ 1,	,587,936 \$	1,648,166	60,230	3.7%	1,587,936	1,648,166	\$ 60,230	numb 3.7% in cor partly	or spending in salaries \$35,084 and benefits \$14,782 reflect hiring gaps for a per of staff positions. Lower spending in program supplies \$18,280 due to change mmunication strategy with greater emphasis on social media. Theese variances are offset by higher travel (\$4,618), staff development (\$2,940) and other program (\$1,462).
Reproductive Health	1,	,383,257	1,400,590	17,333	1.2%	1,383,257	1,400,590	\$ 17,333	1.2% and u	er than planned program supplies \$16,497, travel \$4,729, staff development \$1,506 inplanned revenue for universal prenatal classes \$4,495 more than offset higher planned spending in salaries (\$4,834) and benefits (\$6,431).
Screening Assessment and Intervention	\$ 2,	,103,417 \$	2,103,417	-	0.0%	2,103,417	2,103,417	\$ -		ities of this team were transferred to Thames Valley Children's Centre during the quarter. Final settlement of financial position occurred prior to year-end.
Total Healthy Start Division	\$ 8	8,129,267 \$	8,421,865	\$ 292,598	3.5%	8,129,267	\$ 8,421,865	\$ 292,598	3.5%	
Office of the Chief Nursing Officer	\$	501,352 \$	684,129	\$ 182,777	26.7%	5 501,352	\$ 684,129	\$ 182,777	health 26.7% Indige divers	or spending in salaries \$91,062 and benefits \$18,418 due to vacancy for community in nurse specialist (CHNS), delay in hiring of Manager, Health Equity and enous Reconciliation and Health Promotor positions, \$68,900 related to deferral of sity and inclusion assessment and lower program supplies \$5,385 reflecting pritized team work plans.
Office of the Medical Officer of Health										
Office of the Medical Officer of Health	\$	446,995 \$	422,535	\$ (24,460)	-5.8% \$	3 446,995	\$ 422,535	\$ (24,460)	-5.8% highe (\$3,14	nce reflects overstated plan for enhanced funding from the Ministry (\$22,412) and er than planned spending in travel (\$881) and professional development meetings 46) due to COMOH Chair role and public health restructuring discussions partly t by favourable spendig in materials and supplies \$1,855.

MIDDLESEX-LONDON HEALTH UNIT NET BUDGET VARIANCE SUMMARY

As at December 31, 2019

Appendix A (009-20FFC)

	Y	2019 TD ACTUAL (NET)	2019 YTD BUDGET (NET)	VARIANCE (OVER) / UNDER	% VARIANCE	DECEMBER FORECAST	20 [.] Ann Net Bu	UAL	ANNUAL SURPLUS / (DEFICIT)	% VARIANCE	Comment / Explanation
Communications		517,598	531,684	14,08	36 2.6%	517,598	53	31,684	\$ 14,086	2.6%	Lower spending due to decision not to proceed with rebranding pending health system restructuring \$10,000, lower than planned travel \$2,308 and staff development \$2,225.
Associate Medical Officer of Health	\$	281,836	\$ 254,916	(26,92	20) -10.6%	281,836	25	54,916	\$ (26,920)	-10.6%	Variance reflects overstated plan for enhanced funding from the Ministry (\$20,909), higher than planned travel costs (\$7,270), partly offset by underspending in staff development \$1,390.
Population Health Assessment & Surveillance		576,519	593,835	17,3	16 2.9%	576,519	59	93,835	\$ 17,316		Lower salaries \$6,978 and benefits \$5,651 due to position gapping and lower than planned travel \$2,844.
Total Office of the Medical Officer of Health	\$	1,822,948	\$ 1,802,970	\$ (19,9	78) -1.1%	\$ 1,822,948	\$ 1,8	302,970	\$ (19,978)	-1.1%	
Healthy Organization Division											
Office of the Director	\$	345,488	\$ 356,499	\$ 11,0	11 3.1%	\$ 345,488	\$ 35	56,499	\$ 11,011	3.1%	Lower spending for staff development \$8,218 and professional services \$8,831 partly offset by higher than planned spending for materials and supplies (\$4,384) for RLS program and meeting expenses (\$2,230).
Finance		419,398	420,153	7:	55 0.2%	419,398	42	20,153	\$ 755	0.2%	Lower spending in program costs \$2,059 and other program costs \$300 partly offset by overtime costs (\$1,627) related to outsourcing of payroll.
Human Resources	\$	608,276	\$ 690,909	82,63	33 12.0%	608,276	69	90,909	\$ 82,633	12.0%	Lower spending in salaries \$47,424 and benefits \$26,928 due to manager vacancy and position gapping. Professional services are \$7,358 favourable as planned consulting services for Dayforce implementation were included with project implementation costs in Information Technology.
Information Technology		1,246,931	1,117,085	(129,84	46) -11.6%	1,246,931	1,11	17,085	\$ (129,846)	-11.6%	Additional spending for cell phones and end-user equipment upgrades were previously approved by the Board of Health (\$92,000) and unplanned development costs (\$49,372) for ECR (Intrahealth/Profile) were partly offset by favourable staff standby/on-call charges \$12,800.
Privacy Risk & Governance	\$	146,855	\$ 152,360	5,50	3.6%	146,855	15	52,360	\$ 5,505	3.6%	Favourable variance in benefits costs \$3,786 and program supplies \$1,624
Procurement & Operations		283,271	283,638	30	0.1%	283,271	28	33,638	\$ 367	0.1%	No signficant variance at year-end.
Program Planning & Evaluation	\$	704,183	\$ 866,533	162,3	50 18.7%	704,183	86	66,533	\$ 162,350		Lower spending in salaries \$135,482 and benefits \$27,636 related to program evaluator and manager vacancies.
Strategic Projects		266,139	263,202	(2,93	37) -1.1%	266,139	26	63,202	\$ (2,937)	-1.1%	Higher than planned costs for offsite records retention (\$3,927) partly offset by favourable spending for program supplies - Records Management \$1,029.
Total Healthy Organization Division	\$	4,020,541	\$ 4,150,379	\$ 129,8	38 3.1%	\$ 4,020,541	\$ 4,1	150,379	\$ 129,838	3.1%	
General Expenses & Revenues		2,958,872	2,751,773	\$ (207,0	99) -7.5%	\$ 2,958,872	\$ 2,7	751,773	\$ (207,099)	-7.5%	Reflects allocation of variance funds, above those required to offset the agency gapping budget, to relocation-related expenses.
Total Expenditures Before Expected Gapping	\$	34,064,605	\$ 35,188,874	\$ 1,124,20	69 3.2%	\$ 34,064,605	\$ 35,18	38,874	\$ 1,124,269	3.2%	
Less: Expected Agency Gapping Budget			(1,124,269)	(1,124,20	69)	(1,124,269)) (1,12	24,269)	\$ (1,124,269)		Agency gapping budget was fully offset by lower spending in all operating divisions.
TOTAL BOARD OF HEALTH EXPENDITURES	\$	34,064,605	\$ 34,064,605	\$	(0) 0.0%	\$ 32,940,336	\$ 34,06	64,605	\$ (0)	0.0%	

Middlesex-London Health Unit FACTUAL CERTIFICATE

To: Members of the Board of Health, Middlesex-London Health Unit

The undersigned hereby certify that, to the best of their knowledge, information and belief after due inquiry, as at February 29, 2020:

- 1. The Middlesex-London Health Unit is in compliance, as required by law, with all statutes and regulations relating to the withholding and/or payment of governmental remittances, including, without limiting the generality of the foregoing, the following:
 - All payroll deductions at source, including Employment Insurance, Canada Pension Plan and Income Tax;
 - Ontario Employer Health Tax; and
 - Federal Harmonized Sales Tax (HST).

Further, staff believe that all necessary policies and procedures are in place to ensure that all future payments of such amounts will be made in a timely manner.

- 2. The Middlesex-London Health Unit has remitted to the Ontario Municipal Employees Retirement System (OMERS) all funds deducted from employees along with all employer contributions for these purposes.
- 3. The Middlesex-London Health Unit is in compliance with all applicable Health and Safety legislation.
- 4. The Middlesex-London Health Unit is in compliance with applicable Pay Equity legislation.
- 5. The Middlesex-London Health Unit has not substantially changed any of its accounting policies or principles since December 8, 2016.
- 6. The Middlesex-London Health Unit reconciles its bank accounts regularly and no unexpected activity has been found.
- 7. The Middlesex-London Health Unit has filed all information requests within appropriate deadlines.
- 8. The Middlesex-London Health Unit is in compliance with the requirements of the Charities Act, and the return for 2018 has been filed. (due by June 30th each year).
- 9. The Middlesex-London Health Unit has been named in a complaint to the Human Rights Tribunal of Ontario by a former student. The hearing has been completed and a decision to dismiss has been rendered that found no violation of human rights. The individual filed an Application to Divisional Court for a Judicial Review which was dismissed, the individual is now seeking motion for leave to appeal. MLHU has also been named in a second complaint to the Human Rights Tribunal of Ontario by the same individual. This application is in respect to the recruitment of three management positions for which he was not selected for an interview.

- 10. The Middlesex-London Health Unit has been named in a civil action in relation to inspection activities in 2017/18.
- 11. The Middlesex-London Health Unit is fulfilling its obligations by providing services in accordance with our funding agreements, the Health Protection & Promotion Act, the Ontario Public Health Standards, and as reported to the Board of Health through reports including but not limited to:
 - Quarterly Financial Updates;
 - Annual Audited Financial Statements;
 - Annual Reporting on the Accountability Indicators;
 - Annual Service Plans; and
 - Information and Information Summary Reports.

Dated at London, Ontario this 29th day of Feb	oruary, 2020	
Dr. Christopher Mackie Medical Officer of Health & CEO	Brian Glasspoole Manager, Finance	
Laura Di Cesare Director, Healthy Organization		



MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 010-20FFC

TO: Chair and Members of the Finance & Facilities Committee

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2020 March 5

2019 VENDOR / VISA PAYMENTS

Recommendation

It is recommended that the Finance & Facilities Committee receive Report No. 010-20FFC re: "2019 Vendor / VISA Payments" for information.

Key Points

- <u>Appendix A</u> provides a list of vendors that received payments totalling \$100,000 or more from the Middlesex-London Health Unit (MLHU) in 2019.
- Appendix B provides a summary of purchases made using the corporate purchase (Visa) cards.

Vendor Payments

In accordance with Section 5.17 of the Procurement Policy, the Manager, Finance, is to report annually those suppliers who have invoiced a cumulative total value of \$100,000 or more in a calendar year. Attached (Appendix A) is a list of nineteen vendors who were issued payments in excess of \$100,000 in 2019. The list includes payments associated with construction payments for fit-up of Citi Plaza, employer pension and benefit payments, building and janitorial lease payments, contracts for delivery of speech and language services, technology support, and consulting fees in connection with the relocation project.

Corporate Purchase Card (Visa) Payments

The Finance & Facilities Committee also receives an annual summary report of purchases made with corporate purchase cards. Attached (<u>Appendix B</u>) is a summary, by category, of the purchases made using the corporate credit cards in 2019. The total amount purchased using these cards was \$344,267, a decrease of \$76,155, or 18.1%, from the prior year. This was based on 1,966 transactions, a decrease of 487 transactions (19.8%). Corporate purchase cards are used frequently to facilitate efficient payment of goods and services. The top-two expense types in 2019 are Materials & Supplies, in the amount of \$121,745 (35.4%), accounting for 43.4% of the transactions; and Advertising/Health Promotion, in the amount of \$89,799 (26%), accounting for approximately 11% of the transactions.

This report was prepared by the Finance Team, Healthy Organization Division.

Christopher Mackie, MD, MHSc, CCFP, FRCPC

Medical Officer of Health / CEO

2019 Vendor Payment Summary > \$100,000

Vendor Name	Total Invoiced	Comments
Michael + Clark Construction	\$4,911,176	Construction payments for fit-up of Citi Plaza
OMERS	\$4,085,476	Pension payments (Includes employee share)
Great West Life	\$1,568,907	Employer Health Benefits (including LTD paid by employees)
County of Middlesex	\$1,020,698	Lease and maintenance payments for 50 King Premises
Thames Valley Children's Centre	\$837,838	Service contracts (tykeTALK / IHP)
Stronghold Services	\$741,037	IT Service Contract (payment includes \$317,965 for managed IT services, \$258,236 for purchase of computer equipment and \$159,693 for managed software licenses, including O365 and anti-virus protection)
Regional HIV/AIDS Connection	\$627,189	Needle Exchange Program (majority 100% funded by Ministry of Health)
University of Western Ontario	\$444,723	Service contracts (tykeTALK / IHP)
Richmond Block London Corporation	\$342,813	Lease payments - 201 Queens Ave.
Elgin Audiology Consultants	\$313,700	Service contracts (Infant Hearing Program)
Endri Poletti Architect Inc.	\$244,968	Architectural fees
Woodstock General Hosp. Trust	\$229,781	Service contracts (tykeTALK / IHP)
Workplace Safety & Insurance	\$178,146	WSIB Premiums
GDI Services (Canada) LP	\$176,016	Cleaning of 50 King Street premises
Rogers Wireless	\$134,535	Wireless communications provider - includes \$76,885 of payment for purchase of new cell phones
McKesson Canada	\$133,249	Distributor for NRT and Contraceptives
CANBA Investments Limited	\$117,598	Lease related payments - Strathroy office
Rescue Social Change Group	\$110,107	Service Contract - Uprise Project SWTCAN
Canadian Security Concepts Inc.	\$100,494	Building security for 50 King

Summary of 2019 Corporate Purchase Card Purchases

Evnonco Catagory	20	18	2019				
Expense Category	Amount	# of Transactions	Amount	# of Transactions			
Accommodations / Meals	\$ 43,237	254	\$ 37,745	231			
Advertising / Health Promotion	89,262	337	89,799	218			
Computer Equipment / Supplies	4,751	13	1,380	4			
Materials & Supplies	181,797	1,178	121,745	854			
Medical / Clinic Supplies	4,735	26	4,742	38			
Memberships / Agency Fees	10,866	24	17,031	33			
Other Expenses	2,226	7	5,713	20			
Professional Development	55,419	191	44,688	202			
Travel ¹	28,129	423	21,425	366			
Total	\$ 420,422	2,453	\$ 344,267	1,966			

Notes:

1) Travel includes all modes of travel, including air, train, vehicle rentals,gas and parking costs.



MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 011-20FFC

TO: Chair and Members of the Finance & Facilities Committee

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2020 March 5

PUBLIC SECTOR SALARY DISCLOSURE ACT – 2019 RECORD OF EMPLOYEES' SALARIES AND BENEFITS

Recommendation

It is recommended that the Finance & Facilities Committee recommend that the Board of Health receive Report No. 011-20FFC re: "Public Sector Salary Disclosure Act – 2019 Record of Employees' Salaries and Benefits" for information.

Key Points

- The *Public Sector Salary Disclosure Act, 1996*, requires the Health Unit to disclose the names, positions, salaries, and taxable benefits of employees who were paid \$100,000 or more in 2019.
- The required information, to be submitted to the Minister of Finance on or before the fifth business day in March 2020, is attached as Appendix A.

Background

The *Public Sector Salary Disclosure Act*, 1996 (the Act) is intended to make Ontario's public sector more open and accountable to taxpayers. The Act requires organizations that receive public funding from the Province of Ontario to disclose annually the names, positions, salaries, and taxable benefits of employees paid \$100,000 or more in a calendar year.

The Act applies to organizations such as the Government of Ontario, Crown agencies, municipalities, hospitals, boards of public health, school boards, universities, colleges, Hydro One, Ontario Power Generation, and other public sector employers that receive a significant level of funding from the provincial government.

Compliance

The main requirement for organizations covered by the Act is to make their disclosure (or, if applicable, a statement of no employee salaries to disclose) available to the public by March 31 each year. Organizations covered by the Act are also required to send their disclosure or statement to their funding ministry or ministries by the fifth business day in March.

The Health Unit's record of employees' salaries and benefits for 2019, which will be forwarded to the Minister of Finance prior to March 6, is attached as (Appendix A).

This report was prepared by the Finance Team, Healthy Organization Division.

Christopher Mackie, MD, MHSc, CCFP, FRCPC

Medical Officer of Health / CEO

PUBLIC SECTOR SALARY DISCLOSURE ACT-2019 RECORD OF EMPLOYEE'S SALARIES AND BENEFITS

Last Name	First Name	Position Name	Reported Salary	Taxable Benefits
Albanese	Mary Lou	Program Manager	\$110,749.27	\$830.40
Brittan	Rhonda	Program Manager	\$109,922.57	\$830.47
Cramp	Anita	Program Manager	\$109,922.57	\$830.47
Dhinsa	Shaya	Program Manager	\$109,922.57	\$830.47
Di Cesare	Laura	Director	\$135,788.22	\$1,012.15
Flaherty	Brendan	Program Manager	\$110,062.61	\$830.47
Glasspoole	Brian	Manager, Finance	\$110,749.34	\$830.47
Jutzi	Darrell	Program Manager	\$109,922.57	\$830.47
Lokko	Heather	Director	\$135,788.22	\$1,012.15
Mackie	Christopher	Medical Officer of Health	\$301,655.28	\$2,040.18
Manning	Ronda	Program Manager	\$109,922.57	\$830.47
Pavletic	David	Program Manager	\$109,922.57	\$830.47
Proulx	Jennifer	Program Manager	\$104,791.90	\$790.24
Resendes	Isabel	Program Manager	\$102,733.19	\$776.08
Rowlands	Maureen	Director	\$134,707.14	\$1,003.63
Shugar	Debbie	Program Manager	\$109,922.57	\$830.47
Stobo	Linda	Program Manager	\$109,922.57	\$830.47
Summers	Alexander	Associate Medical Officer of Health	\$234,497.46	\$1,589.42
Turner	Stephen	Director	\$111,789.40	\$883.82
Vandervoort	Suzanne	Program Manager	\$109,922.57	\$830.47