



**Board of Directors
Tuesday, December 20, 2022**

Supper at 5:00 p.m. at 643 Park Road North

Agenda for Open Meeting (following supper, approx. 5:45 p.m. – 6:00 p.m.)
or by Zoom: <https://us02web.zoom.us/j/81376824715?pwd=cTRybFJoa3orMUxmQ2pvVFFIS3hJQT09>
Meeting ID: 813 7682 4715 Passcode: 304511

1. **Call to Order**
2. **Land Acknowledgment**
3. **Agenda - Additions, Deletions, Approval** **Decision**
4. **Staff Presentation** **Information**
5. **Staff Recognition (5 years of service)**
6. **Riverside Hub Video – PowerPoint** **Information**
7. **Conflict of Interest Declarations** **Declaration**
8. **Approval of Minutes – November 22, 2022** **Decision**
9. **Business Arising from Minutes**
 - a.
10. **Executive Reports**
 - a. Chair's Report - MCCSS Interim Report **Information**
 - b. Treasurer's Report – November 2022 **Decision**
 - c. CEO's Report **Decision**
11. **Committee Reports**
 - a. Policy Review Committee **Decision**
 - b. Nominating Committee **-**
12. **New Business**
13. **Correspondence**
 - a. BDO **Information**
 - b. Health and Safety Virtual Walkthrough **Information**
14. **In-Camera - Motion to move in-camera** **Decision**
15. **In-Camera Reports (as appropriate)** **Decision**
16. **Adjournment – Motion to adjourn** **Decision**

Next Meeting: Tuesday, January 24, 2023 at 5:30 p.m.

Land Acknowledgment

In recognizing the land, we are expressing gratitude and appreciation to those whose territory we reside on. It is a way of honouring the Indigenous people who have always been living and working on this land. Land acknowledgements do not exist in a past tense - colonialism is a current ongoing process, and we need to build our mindfulness of our present participation.

The city of Brantford and surrounding area is on the traditional territory of the Anishnawbe, the Haudenosaunee, and the Neutral peoples. Anishnawbe peoples are also known as Ojibway, Chippewa, Mississauga, and Algonquin, and include the Mississaugas of the Credit First Nation. Haudenosaunee peoples are also known as Six Nations and Iroquois – these nations formed the Haudenosaunee Confederacy. Neutral peoples (also called Attawandaron) are so named due to their tendency to avoid conflict and are made up of many distinct nations that were decimated by colonial diseases; remaining members were mostly adopted into the Haudenosaunee Confederacy.

The Haldimand Treaty of 1784 guaranteed the exclusive use of 950,000 acres along the Grand River for members of these communities; however they have less than 5% of that today.





Riverside
Hub

Community Hub Project

An Infrastructure project serving
Brantford/Brant and Surrounding Areas

2022



Riverside Hub

Who we are, what
we're doing, and why...



We are a partnership of ten mental health, social recreation, developmental service, and wellness organizations working together to construct a 171,000 square foot community hub in Brantford's downtown core.

Our goal is to address critical concerns with our current facility capacity, safety, accessibility and overhead costs by co-locating in a single space. This space, a community hub, will ensure that our services are more accessible, while also creating more opportunities for improved health, resource sharing, relationships, and belonging.

Our Partners

Coming together to build a stronger Community



Mental Health & Developmental
Services



Supportive LGBTQ2+ Advocacy
Committee



Mental Health & Autism Supports
for Children



Health, Health Promotion, and
Food Security Services



Brantford Hospital - Outpatient
Mental Health Services



Mental Health and Crisis Supports,
Safe Beds



Addictions, Mental Health, Housing
and Employment Services



Housing and Employment
Supports



Social Recreation and Inclusion
programs for youth with disabilities



Peer Support, Social Recreation,
and Employment

Background



- Started in 2019 with an exploration of community needs to inform a renovation of Willowbridge's existing space
- Found that Willowbridge's challenges were experienced across the community
- Put together a committee of like-minded organizations interested in co-locating in a single space for the benefit of the community
- Worked hard to understand the needs of each and every partner and community member





Community & Partner Feedback

Brantford has identified major concerns with social service facilities:

Accessibility

Many Social Service facilities are hard to reach by transit, are not fully wheelchair accessible, have poor lighting and poor ventilation

Privacy & Safety

Social Service facilities have serious issues with security for staff and clients, and layout/ design do not allow for privacy during sessions

Affordability

Extremely high overhead costs & lease payments (over \$1,000,000 / year) for outdated spaces with no partner input

Capacity

Demand for services are at an all-time high, but Facilities are too small to expand programs

Suitability

Programming spaces do not suit the needs of the community or programming

Diversity

Social Service facilities are not welcoming to diverse communities and in some cases present as unsafe

Our Vision

Addressing the Community's needs

- 175,000 sq ft of welcoming, accessible, and innovative integrated mental health and social recreation hub in the downtown core
- A facility that is purpose designed and shows the community that they matter
- A coordinated access point for streamlined mental health services in Brantford
- An integrated digital health strategy that reduces administration and creates a positive client experience
- Exploration of shared elements for seamless client experiences and economies of scale:
 - Shared reception
 - Shared HR
 - IT systems
 - Operating and facility costs
 - Warm intake
 - Communications/marketing





Hub Amenities

In addition to service and programming spaces, the hub will offer a broad range of public-access amenities and spaces

Creative Spaces

Bookable art, music, prayer, exercise and meditation rooms



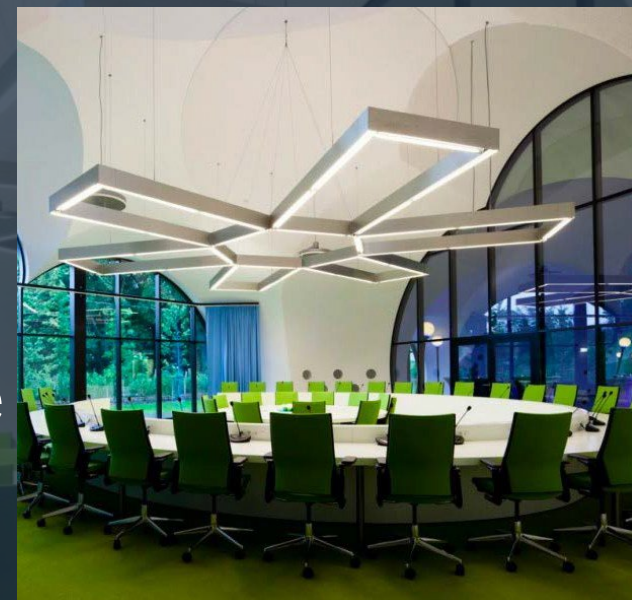
Outdoor Spaces

Community Gardens, Rooftop patio, playgrounds, Bike-share & repair, greenspaces



Conference Centre

Bookable banquet, conference, meeting, office, and work-share spaces



Cooking Spaces

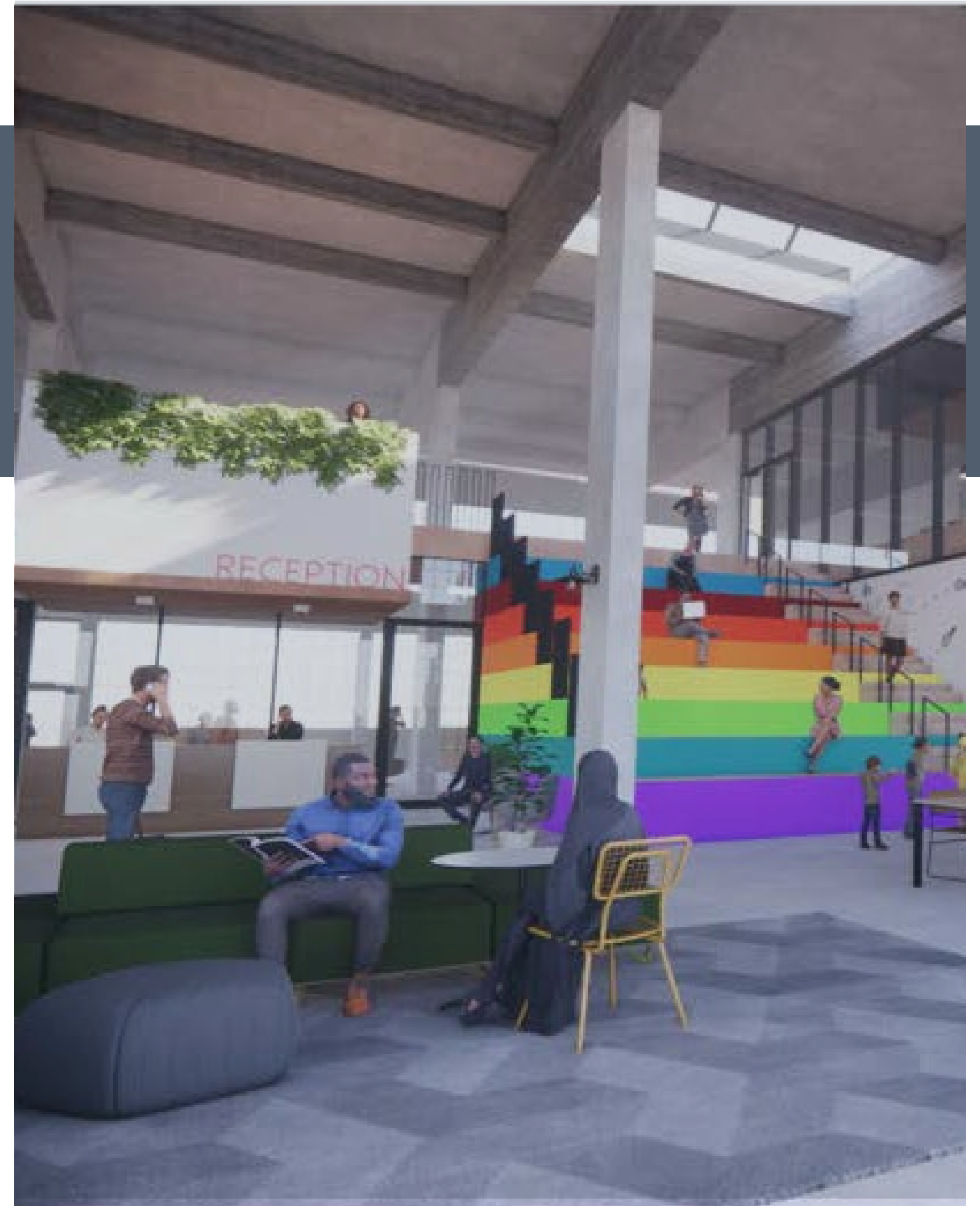
Community Cafe, teaching kitchens, banquet centre, farmers' market



Our Plan



- To incorporate as a new organization by June, 2022 with a full Board of Directors and staff
- Complete a feasibility study into the East Side of the Icomm Dr. Parking Garage and obtain property by August, 2022
- Complete a shovel-ready design and project components by November, 2022
- Apply for a Federal infrastructure grant, like the Investing in Canada Infrastructure project, and apply for various ministry capital funds in the fall of 2022
- Start construction on our community hub and open the doors by 2026





Progress So Far

In 2019, the hub partners formed a committee that has been meeting bi-weekly for over 3 years. We have achieved the following:

Governance

With OTF support, hired a governance consultant to develop a structure and plan to incorporate in spring, 2022

Fundraising

With OTF support, have developed a fundraising plan that will raise \$2.5 million when ready to launch

Architectural Design

Engaged Architects and to lead us through a feasibility study. Have initial renderings and design.

Building Site

Brantford City Council approved a site feasibility study on the East Side of the Icomm Dr. Parkade

Communications

With the support of OTF, will have a full brand and website by June, 2022 ready to launch

Public Engagement

With the support of OTF, we have additional Indigenous, neighbourhood, and community focus groups planned for summer



The Business Case

What will this project cost & how can we pay for it?



We are hiring a consultant to build out an in-depth business plan, but in the interim, our estimates include:

- Assuming 171,000 sq. ft., construction at start of 2023, allowing for contingencies, furnishings and a cost escalation of 15.6%, the hub's total cost is = \$87,000,00

With only a traditional mortgage and typical infrastructure grant contributions from federal/ Provincial government, this amount is affordable for hub partners with mortgage/finance payments of \$1,068,112.92 - same as current.

Current plan is to apply for an Infrastructure Grant (such as Investing in Canada Infrastructure Program (ICIP)):

Federal/Provincial support for 74%.....	\$64,380,000
Hub Capital Campaign.....	\$2,500,000
Commercial Mortgage/ financing.....	\$21,000,000
Total:	\$87,000,000

Hub partners expect to raise money through ministry contributions and grants that will reduce the estimated need for commercial mortgage expenses. In addition, the project budget is extremely conservative and allows for an over 20% contingency.

Overall, operating expenses will be reduced significantly for partners via cost-sharing, resource sharing, and efficiencies in operations. Once the mortgage is paid off, this money can be reinvested in frontline service

Our Team

The Riverside Hub has been helped along by numerous community consultants, organizations, and volunteers.



Development & Design

MTE Consulting - Engineering
+VG Architects
Tworow Architect
Melloul Blamey Construction
Ken Karakas - Remax Realtor

Trillium Consultants

Gravity Inc - Communications
Meridian Edge - Governance
Waterous Holden Amey Hitchon - Legal
KCI Philanthropy - Fundraising

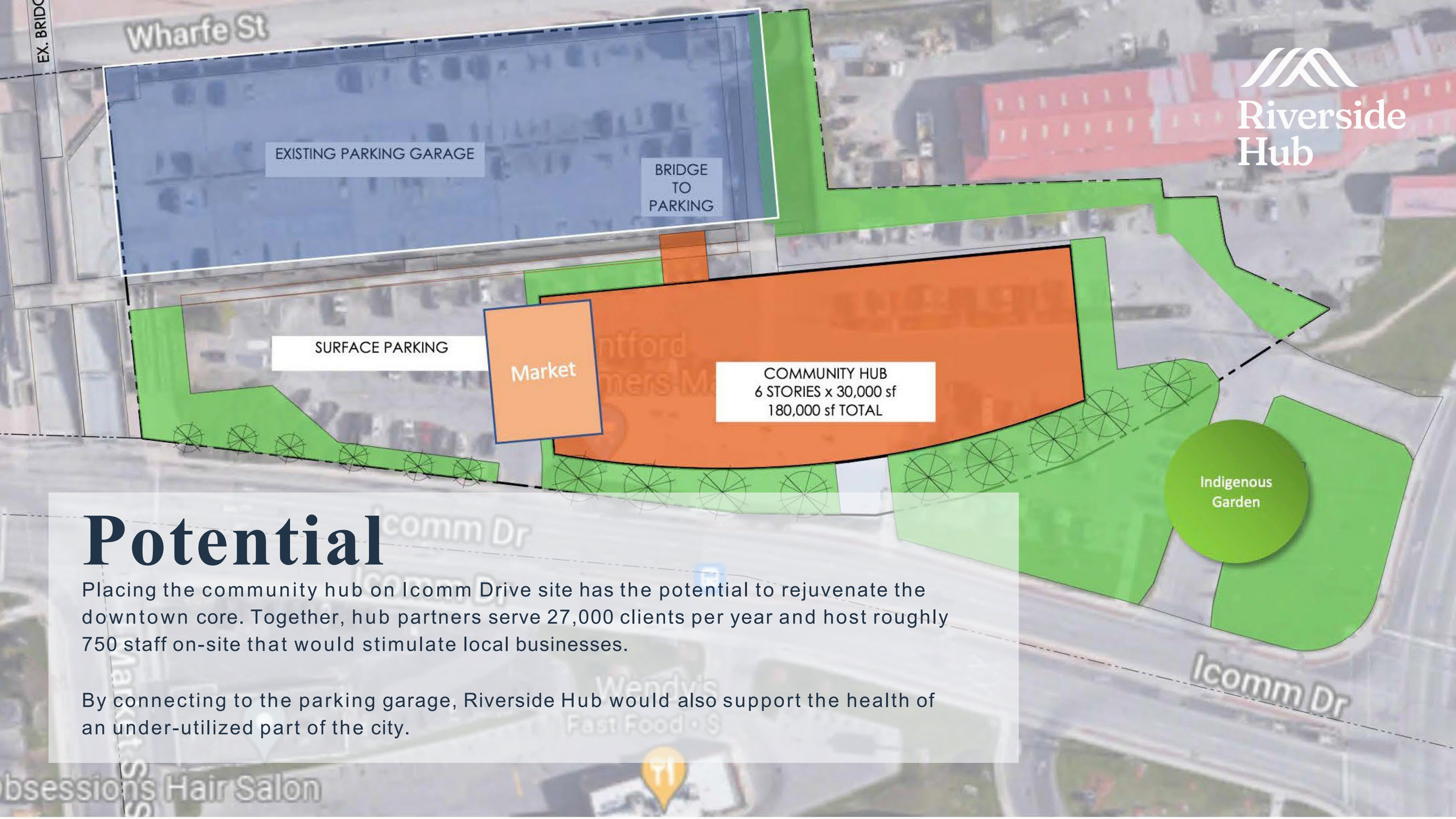
Supporters

MPP Will Bouma
Mayor David Bailey
Brian Hutchings - City of Brantford CAO
City Councillors
Eva Salter - Regional Infrastructure Advisor

The Site

The Riverside Hub is currently exploring the East Side of the Icomm Dr. parkade to determine the site's feasibility as a potential hub location





Potential

Placing the community hub on Icomm Drive site has the potential to rejuvenate the downtown core. Together, hub partners serve 27,000 clients per year and host roughly 750 staff on-site that would stimulate local businesses.

By connecting to the parking garage, Riverside Hub would also support the health of an under-utilized part of the city.





**Board of Directors Minutes for the Open Meeting
Tuesday, November 22, 2022**

Present:

Vice Chair/Treasurer:	Kelly Skrzypek
Secretary:	Greg Hackborn
Directors:	Brian Konst, Laura Miedema, Emily Miller
Chief Executive Officer:	Jane Angus
Manager of Service Coordination:	Alison Hilborn
Executive Assistant:	Cindy Landry (recorder)

Regrets: Susan Fitzgerald, Jenna Dierick, Elizabeth Abraham

1. Call to Order

Kelly Skrzypek called the meeting to order at 5:30 p.m.

2. Land Acknowledgment

The Land acknowledgment was read by Kelly.

3. Agenda - Additions, Deletions, Approval

Motion: To approve the agenda.

Greg and Emily. **Carried.**

4. Conflict of Interest Declarations

None declared.

5. Approval of Minutes – October 25, 2022

Motion: To accept the minutes from October 25, 2022.

Greg and Laura. **Carried.**

6. Business Arising from Minutes - none

7. Executive Reports:

a. Chair's Report – Time of Board Meetings

Motion: To approve with the continuation of the monthly meetings at 5:30 p.m.

Laura and Greg. **Carried.**

b. Treasurer's Report – October 2022.

Motion: To approve the Treasurer's report as presented.

Emily and Laura. **Carried.**

- c. CEO's Report - Emailed separate to package: CEO Report Addendum - Communication and Counsel to the Board
Reviewed the URS stats and outcomes. The board recommends funding for 4 URS Coordinators for next fiscal year.

Motion: To approve advocating for annualized funding for 4 URS Coordinators in the next fiscal year.
Emily and Laura. **Carried.**

Motion: To approve the Mission, Vision and Values Statements as written.
Greg and Laura. **Carried.**

Motion: To approve CEO's report as presented.
Laura and Brian. **Carried.**

8. Committee Reports

- a. Policy Review Committee – no report.
- b. Nominating Committee – no report.

9. New Business

- a. CEO Performance Review
CEO Performance Review should be completed annually. Encrypt and forward to Susan and Kelly, templates for Jane's review and a copy of the letter from past chair Patrick Parent.
- b. MCCSS Interim Report; MOH Budget and Interim Report
The MCCSS Interim Report extended the due date until December 19.
MOH 2022-23 Budget and Interim Reporting is due November 30, 2022 and will require email approval.

10. Correspondence – none

11. In-Camera

Motion: To move in-camera at 6:25 p.m.
Greg and Emily. **Carried.**

12. In-Camera Reports

13. Adjournment - Kelly adjourned the meeting at 6:40 p.m.

Next Meeting: Tuesday, December 20, 2022
Dinner at 5:00 p.m. with Staff Team
Virtual or In-person Meeting to follow about 5:45 p.m.

Date


Chair's Signature



Board of Directors
Open Report from the Chair
December 20, 2022


Email approval was received for the following recommendation:

1. Approve the MOH Budget and Interim Report for submission.
Susan, Laura, Jenna, Kelly, Elizabeth, Brian
2. Approve the MCCSS Interim Report (April 1 – October 31, 2022) for submission.
Susan, Kelly, Laura, Jenna, Brian

	November 30, 2022					
		2021-2022 Actual	2022-2023 BUDGET	2022-23 MCCSS Forecast	2022-23 MOH Forecast	2022-2023 Forecast
REVENUE						
Access - Children's (MCCSS)	1,200	1,200	1,200		1,200	800
DS Children's Specialized (MCCSS)	185,315	185,315	185,315		185,315	123,547
RPAC (MCCSS)	692	692	692		692	464
Coordinated Service Planning (MCCSS)	261,100	261,100	261,100		261,100	174,068
Complex Needs (MCCSS)	65,280	65,280	65,280		65,280	43,520
FASD (MCCSS)	180,000	180,000	180,000		180,000	120,000
Urgent Response Service (MCCSS)	138,160	3,776,999	3,776,999		3,776,999	2,518,003
Access Intake Service Planning (MOH)	351,493	351,493		351,493	351,493	234,333
Service Coordination Process (MOH)	14,566	14,566		14,566	14,566	9,710
Sub-Total Ministry Actual Revenue	1,197,806	4,836,645	4,470,586	366,059	4,836,645	3,224,445
Off-Setting Revenue Info Services (211-\$43,114; Findhelp \$1,404)	45,953	44,518	44,518	0	44,518	33,447
DSO (off-setting revenue in Access Intake Serv Planning)	10,000	0	0		0	0
Amortization Deferred Capital Contributions	0	0			0	0
TOTAL Revenue	1,253,759	4,881,163	4,515,104	366,059	4,881,163	3,257,892
Applied from Projects	698				0	0
Applied from Unrestricted Funds	0					
EXPENSES						
		154,587				
Total Salaries	861,454	1,070,101	913,669	251,363	1,165,032	729,415
Staff Salaries	861,454		815,685	220,660	1,036,345	729,415
ACA Salaries	0		97,984	30,703	128,687	0
Benefits	137,302	202,000	173,477	47,251	220,728	115,488
Mandatory Benefits (CPP, EI, EHT)	57,851		75,582	0	75,582	50,609
Benefits Other (WSIB, group benefits)	79,451		97,895	0	97,895	64,880
Training (education, meetings, recruitment - staff & board)	10,365	14,000	10,900	4,500	15,400	10,326
Staff Development	7,285		8,000	3,000	11,000	4,827
Staff and Board Expenses	3,080		2,900	1,500	4,400	5,499
Transportation & Communication	107,439	69,600	69,875	26,800	96,675	23,256
Travel	473		2,875	200	3,075	838
Communication - (Postage, Bell, Cozzmic)	16,892		17,000	9,100	26,100	6,993
Promotion and Membership Fees	15,773		11,000	2,500	13,500	4,411
IT software & IT equipment & photocopier	40,633		22,500	7,500	30,000	7,418
IT - Maintenance and DataBase Service (Backup Server,KCL, EMHware)	33,669		16,500	7,500	24,000	3,595
Building Occupancy (Lease, Insurance, Repairs & Mtce)	46,672	63,855	46,621	20,000	66,621	30,781
Lease and Building Maintenance	33,610		35,521	14,000	49,521	22,500
Insurance Expense	13,062		11,100	6,000	17,100	8,281
Professional/Contracted-out (legal, audit, bank, payroll services, consultant fees)	52,886	27,063	21,000	10,000	31,000	20,313
Audit, Legal, Bank Charges, Payroll, Other	23,131		19,000	10,000	29,000	20,313
Consulting	29,755		2,000	0	2,000	0
Other Program/Service Expenditures (Dues/Fees for Memberships, all other not classified)	1,593	3,248,160	2,003,000	1,000	2,004,000	945,159
Purchased Client Services	1,593		2,003,000	1,000	2,004,000	945,159
Supplies & Equipment	36,747	31,797	34,402	5,145	39,547	2,990
Furniture and Office Supplies	36,747		34,402	5,145	39,547	2,990.48
Amortization Deferred Capital Contributions	0		0	0	0	0
Contingency				0	0	0
TOTAL Ministry Expenses	1,254,457	4,881,163	3,272,944	366,059	3,639,003	1,877,729
Ministry Surplus (Loss)	0		1,242,160	0	1242160	1,380,163

Quick Books Cash Balance*	1,421,248
Internally Restricted BHN	16,374
QuickBooks Balance	1,404,874
TD Account Actual Balance	1,431,476
Outstanding Transactions	10,229
Cash Balance (TD - Outstanding)*	1,421,248
Restricted Lease Funds	26,464
Unrestricted Funds Balance	10,226

GIC bank statement balance \$26,955.90 (Difference \$491.90)

 November 30, 2022	PROJECT FUNDS			
	2020-2021 Actual	2022-2023 BUDGET	2021-2022 Forecast	2022-2023 YTD
REVENUE				
Your Guide	23,240	23,240	23,240	0
FASD Caregiver Support Group	4,500	4,500	4,500	4,500
Other (Accrued, Interest Earned, Staff payments, GIC Interest , Miscellaneous)	692	1,000	1,000	295
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	0
TOTAL Projects Revenue	28,432	28,740	28,740	4,795
EXPENSES				
Your Guide	0	23,240	0	0
FASD Caregiver Support Group	4,500	4,500	4,500	2,283
Other Expenses (Staff personal charges i.e.: postage, Miscellaneous)	196	1,000	500	0
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	0
Applied to Ministry	698	0		0
Total Projects Expenses	4,696	28,740	5,000	2,283
Projects Surplus (Loss)	23,038	0	23,740	2,513

TOTAL MINISTRY AND PROJECTS

TOTAL REVENUE	1,282,191	4,909,903	4,909,903	3,262,687
TOTAL EXPENSES	1,259,153	4,909,903	4,886,163	1,880,012
TOTAL Surplus (Loss)	23,038	0	23,740	1,382,675

ACCRUED EXPENSES 2022-2023	Amount	Amount Paid	Date Paid
Translation - March 2022	350.00	93.55	April 27, 2022
Ceridian HR - March 31, 2022	320.00	302.47	April 26, 2022
Audit Expenses - 2021-2022 Fiscal Year	13,200.00	10,881.90	June 8, 2022
Cozzmic - April 15, 2022 for March 2022	181.92	204.68	April 15, 2022
Bell - April 15, 2022 for March long distance	225.00	58.12	April 13, 2022
Retro 1% - Salary and benefits 2021-22 Fiscal Year	9,491.00	9,509.79	April 13, 2022
Backup Server CTSit	5,269.50	5,269.51	April 5, 2022
Group Benefits	444.75		
TOTAL ACCRUED	29,482.17	26,320.02	

AMORTIZATION	Annual 20/21
Equipment/Furniture	4,256
Computers	11,615
Software	37,029
Amortization MCCSS	52,900

HST Refund	6,754.39
HST Paid/yet to be Refunded	5,311.50

HST is paid at time of cheque issued, yet bookkeeping & financial report take out the rebate which will be refunded; this reflects the rebate which balances the cheque written to the bookkeeping/financial report.

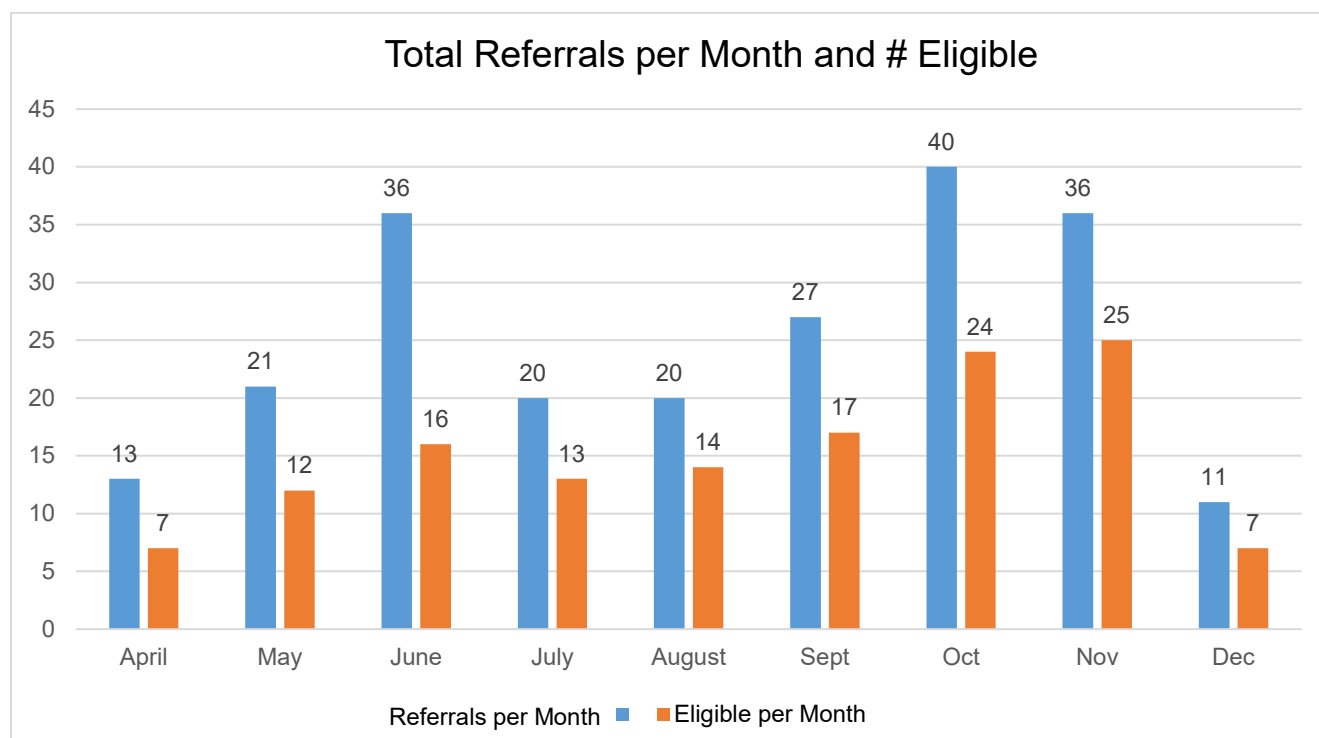
Month's Transaction Totals	
Total revenue deposited	403,050.00
Total cheques written	197,162.94
Total withdrawals	302,837.73



Board of Directors
Report from the Chief Executive Officer - Open Meeting
December 20, 2022

Communication and Counsel to the Board

URS Ontario Autism Program: Urgent Response Service	Dec. 13, 2022	2022-23 Q2	2022-23 Q1	Notes
Referrals Year-to-Date	227	141	71	If we had not hired the 4 th URSC, the current caseload size for 3 Coordinators would be 30! MCCSS Caseload Target is 22 per Coordinator at a time. With 4 URSC, the caseload averages 23 each. We are averaging over 20 eligible per month projected # we will serve this year is over 200 (target is 190).
Eligible Year-to-Date	133	78	33	
% of MCCSS Annual Target (190 eligible)	70%	41%	17%	
Current Active	91			
In Screening Process	4			
Discharges Year-to-Date	42			
Peer Support Navigator	45	22	0	



New OAP registrant numbers for March 1, 2022 have just been provided by MCCSS. A year ago, MCCSS identified a target of **202** to be served in URS in 2023 – 24. The new numbers indicate our target should be **241**. Our average new URS clients/month may reflect that we can expect even more than 241 clients next year. We will need to advocate for an appropriately adjusted budget to serve this increased number.

This number also reflects 4 URS Coordinators will be needed (22 caseload, 3 times per year, totals 66 per URSC. 241 divided by 66 = 3.7).

Information

Children's Treatment Centre SmartStart Hubs

All CTC's will be implementing SmartStart Hubs in the new year. Lansdowne and Contact Brant continue to meet to coordinate how we will communicate our single point of access/main door mandates, as well as how we can seamlessly share information, with consent, to connect children and families to the services they need, no matter what door they first enter.

Attached is the MOU with Lansdowne that we were requested to sign by MCCSS.

Information

Payroll Costs

Ceridian is increasing their fees by 8.1% effective January 1, 2023. This will only be a minimal annual increase of less than \$5.00. However, it should be noted that they have recently outsourced their support services out of country, and their services have not been as helpful as in the past.

Information

SMARTSTART HUBS

PARTNERSHIP MEMORANDUM OF UNDERSTANDING (MOU)

BACKGROUND

Children's Treatment Centres (CTCs) and Surrey Place will be serving as SmartStart Hubs. SmartStart Hubs will be a clear entry point (main door) to services for families with concerns about their child's development and day to day functioning related to development. SmartStart Hubs are intended to provide seamless and coordinated connections to appropriate further assessments and services with local formal and informal service Partners.

The Ministry of Children, Community and Social Services (the "MCCSS") requires a Partnership MOU with some Partners and information sharing agreements with all Partners and has set out guidelines on key terms.

DEFINITIONS

"CTC" means [Lansdowne Children's Centre];

"Formal Partners" means (1) service providers/organizations that may be a first point of contact for families accessing children's services, and will provide supported connections to the SmartStart Hubs; or (2) those who the SmartStart Hubs will be required to connect families with, based on an understanding of their needs;

"MCCSS" means the Ministry of Children, Community and Social Services;

"Parties" means the CTC and the Partner collectively and "Party" means any one of them;

"Partner(s)" means Formal Partner(s);

"PHIPA" means the Personal Health Information Protection Act, 2004 (Ontario) and the regulations thereunder;

"Personal Health Information" has the meaning ascribed in PHIPA and includes personal information;

"SmartStart Hubs Guidelines" means the MCCSS SmartStart Hubs Policy and Practice Guidelines and the MCCSS SmartStart Hubs Implementation Markers and Capacity Building Guide, as amended from time to time;

"Supported Connection" means that the organization making the connection contacts the service provider on behalf of the family, and shares relevant information with the service provider to support the streamlined connection;

Any other capitalized terms are as referenced in the SmartStart Hubs Guidelines.

1. OBJECTIVES

Partner acknowledges that the objectives of the SmartStart Hubs are described by MCCSS as:

- (a) to act as a clear entry point (main door) to services for families with concerns about their child's development and day to day functioning related to development, and early identification of strengths, goals and needs;
- (b) to use a consistent, strengths-based child and family-centered approach;
- (c) to provide streamlined connections to assessments and services through Supported Connections; and
- (d) to provide early access to family-based supports to leverage and build on families' existing capacity to support their children at home and in the community.

SmartStart Hubs will not be a mandatory access point for child development and special needs services and families do not have to go through the SmartStart Hubs to access services. A diagnosis is not required to access the SmartStart Hubs.

2. CTC AS SMARTSTART HUB

MCCSS has designated the CTC to serve as a SmartStart Hub. In the event that MCCSS terminates the SmartStart Hub program, directs the CTC to cease as a SmartStart Hub or does not provide adequate funding to the CTC, the CTC may amend or terminate this MOU.

3. CONDITIONS TO PARTICIPATION

To participate with the SmartStart Hub at the CTC as a Partner, your organization must enter into and maintain in good standing such other ancillary agreements as may be required by the CTC from time to time, including the following:

- (a) Consent to Information Sharing

ROLES AND RESPONSIBILITIES

3.2 CTC Roles and Responsibilities

The CTC shall be accountable to MCCSS for the implementation and operation of the SmartStart Hub at the CTC in accordance with requirements and obligations for SmartStart Hubs as set out in the SmartStart Hub Guidelines and other MCCSS directions and guidelines provided to the CTC.

3.3 Partner Roles and Responsibilities

Partners will also be required to meet certain requirements and obligations from the SmartStart Hub Guidelines. For Partners to participate in the SmartStart Hub at the CTC, the Partner shall comply with all MCCSS requirements and guidelines, including:

- (a) act as a point of contact with the children's service sector for families and provide/receive Supported Connections to/from the SmartStart Hub at the CTC with relevant information to prevent families from having to retell their story;
- (b) collect information from the child and family for Supported Connections, with client consent satisfactory to the CTC for SmartStart Hub purposes;
- (c) work with the CTC to build capacity towards a common service experience using common tools in accordance with service standards and expectations of MCCSS;
- (d) work toward engaging families with Culturally-Safe Services, which are responsive and promote equity, Anti-Racism, Anti-Oppression and anti-Ableism; and
- (e) work toward a service culture that has a Strengths-Based Approach and Solution-Focused Practice, that is child and family centered and Trauma-Informed.

Partner shall be solely responsible for all costs/expenses of the Partner in relation to participation with the SmartStart Hub, if any, and shall be solely responsible for personnel and services of the Partner.

Partner shall comply with CTC protocols for the SmartStart Hub and shall provide to the CTC information as may be reasonably requested by the CTC from time to time for the purpose of implementing and operating the SmartStart Hub at the CTC.

3.4 Limitations

Partner acknowledges that the CTC is not providing any commitment to any volume of referral to Partner from the SmartStart Hub at the CTC. On referral to Partner, the CTC shall not be responsible for Partner wait times nor for clinical assessments or services rendered by Partner and any clinical decision-making by Partner based on the referral information provided. CTC cannot guarantee and makes no representations or warranties in regards to the completeness and/or accuracy of the referral information.

CTC acknowledges that the Partner is not providing any commitment to any volume of referral from the Partner to the SmartStart Hub at the CTC. On referral to the CTC, the Partner shall not be responsible for the SmartStart Hub functions at the CTC. The Partner cannot guarantee and makes no representations or warranties in regards to the completeness and/or accuracy of the referral information.

4. PRIVACY AND CLIENT INFORMATION

4.1 Compliance

The Parties shall, and shall ensure that all its representatives, agents, directors, officers and employees strictly comply with the requirements of all relevant privacy and confidentiality legislation.

Collection, use and disclosure of personal health information by the Partner shall comply with PHIPA, applicable legislation and any information sharing and access agreements, protocols as may be required by the CTC for the SmartStart Hub.

4.2 Consent

The Parties shall obtain express consent from the client or substitute decision maker, with client consent satisfactory to the CTC for SmartStart Hub purposes. Where the client or substitute decision maker has expressly withheld or withdrawn consent to such collection, use or disclosure, the Parties shall not collect, use or disclose Personal Health Information.

4.3 Custody and Control

Records of Personal Health Information are and shall remain the property of the CTC or the Partner respectively that creates them and shall be deemed to be within their custody or control. If and to the extent that Partner collects and retains personal health information from the CTC as a Partner in the SmartStart Hub, such Partner shall be deemed to have custody or control of such personal health information for the purposes of PHIPA. Partner shall take reasonable steps to ensure the physical, administrative and technological security of the personal health information within its control.

4.4 Breach Notification

Partner shall advise the CTC forthwith if it becomes aware of any loss or theft of Personal Health Information, or any unauthorized access, use or disclosure of Personal Health Information collected, used or disclosed for Supported Connections through the SmartStart Hub at the CTC and provide reasonable particulars. Partner shall take all reasonable efforts to mitigate and address the breach including invoking their privacy breach protocol.

The CTC shall advise affected Partners forthwith if it becomes aware of any loss or theft of Personal Health Information, or any unauthorized access, use or disclosure of Personal Health Information collected, used or disclosed for Supported Connections through the SmartStart Hub at the CTC, and provide reasonable particulars.

The Parties shall work together to ensure their respective obligations for breach notification under PHIPA, if any, are fulfilled.

5. REPORTING

Partner agrees to provide reports to the CTC as required for MCCSS reporting and submissions as requested by the CTC.

6. COMPLAINTS MANAGEMENT

Partner shall maintain a complaints management process. If the CTC is contacted by an individual wishing to make a complaint related to the Partner and its services, the CTC shall direct the complainant to the Partner and the Partner shall address the complaint in a timely manner.

The CTC shall maintain a complaints management process. If the Partner is contacted by an individual wishing to make a complaint related to the SmartStart Hub at the CTC, the Partner shall direct the complainant to the CTC and the CTC shall address the complaint in a timely manner.

7. PUBLICITY AND COMMUNICATIONS

7.1 Use of Name and Trademark

Partner shall not use the name of the CTC or any CTC insignia, logos, trademarks or other intellectual property without the prior written permission of the CTC. Partner acknowledges and agrees that its name, insignia, logos and/or trademarks may be used in public communications related to the SmartStart Hub at the CTC from time to time with prior notice to Partner. Any other use of Partner's name, insignia, logos and/or trademarks shall require the prior written permission of Partner.

7.2 SmartStart Hubs Name and Trademark

Partner may use the name "SmartStart Hub" and any associated trademarks but acknowledges that such use is governed by MCCSS and may only be used in accordance with MCCSS direction from time to time and CTC protocols for the SmartStart Hub.

7.3 Communications

Communication regarding SmartStart Hub or this MOU shall be in accordance with directions of MCCSS and the CTC.

8. TERM AND TERMINATION

8.1 Term

The term of the MOU shall commence on execution by both Parties and remain in effect until terminated in accordance with the terms hereof.

8.2 Termination of MOU

The MOU may be terminated:

- (a) by either Party on not less than thirty (30) days' notice;
- (b) immediately in the event that MCCSS terminates or ceases operation of SmartStart Hubs or the CTC

provides notice of termination due to inadequate funding; or

- (c) on notice from a Party in the event that the other Party is in breach of its obligations under this MOU and has failed to cure the breach to the satisfaction of the other Party within five (5) days.

9. INDEMNIFICATION AND INSURANCE

The CTC does not make, and hereby disclaims, any and all express and/or implied conditions, representations or warranties in relation to the SmartStart Hub. The CTC shall not be liable for any losses resulting directly or indirectly from a SmartStart Hub referral to a Partner and Partner hereby waives and releases the CTC from any claims and liability related thereto. The Partner agrees that it will indemnify and hold harmless the CTC, its directors, officers employees and agents from any and all claims, demands, actions, suits, losses, costs, charges, expenses, damages and liabilities whatsoever sustained, suffered or incurred by reason of or in connection with the business or activities of the Partner, or Partner's breach of this MOU. Partner shall maintain insurance satisfactory to meet its indemnity obligations (of a minimum of \$2,000,000.00) herein and shall provide proof of insurance upon request.

10. GENERAL

10.1 MOU Binding

This MOU shall be binding and enforceable by the Parties.

10.2 Corporate Authority

Each Party represents and warrants that it is and will continue to be for the Term of this MOU, a validly existing legal entity with the full power and authority to enter into and perform its obligations under this MOU and such obligations do not and will not conflict with or constitute a breach of any agreement by which it is bound.

10.3 Entire Agreement

This MOU comprises the entire agreement between the Parties relating to the subject matter hereof.

10.4 Amendments

The Partners acknowledge and agree that this MOU may be amended on not less than thirty (30) days written notice from the CTC and/or Partner.

10.5 No Assignment

Partner shall not assign this MOU without prior written consent from the CTC which shall not be unreasonably withheld.

10.6 No Waiver

No waiver of any provision of this MOU or of any right or remedy hereunder, will be effective unless in writing and signed by the Party against whom such waiver is sought to be enforced. No delay in exercising, no course of dealing with respect to, or no partial exercise of any right or remedy hereunder will constitute a waiver of any other right or remedy, or future exercise thereof.

10.7 Survival

Sections 4 (Confidentiality and Client Information), 7 (Publicity and Communications), and Section 9 (Indemnification and Insurance) shall survive the termination of this MOU.

10.8 Relationship of the Parties

Each Party enters into and performs this MOU as an independent contractor of the other Party. This MOU will not be construed as constituting a relationship of employment, partnership, joint venture or any other form of legal association, except as expressly set forth in this MOU. Each Party acknowledges that its personnel are not employees of the other and that it shall be solely and exclusively responsible for its services and personnel.

10.9 Dispute Resolution

In the event that a dispute arises among the Parties, every effort will be made to resolve the dispute as effectively and quickly as possible. All disputes shall first be referred to the CEO's/Executive Directors of the Parties who shall, acting in good faith, seek to resolve the dispute or conflict in an amicable and constructive manner.

10.10 Counterparts

This MOU may be executed in counterparts each of which shall constitute an original and all of which taken together shall constitute one and the same instrument.

Lansdowne Children's Centre

Per: _____

Name: Rita-Marie Hadley

Title: Executive Director

Per: _____

Name: Name

Title: Title

I/We have the authority to bind the corporation

Contact Brant

Per: _____

Name: Name

Title: Title

Name: Name

Title: Title

I/We have the authority to bind the corporation



**Policy Review Committee
Recommendations to the Board
December 20, 2022**

HR Covered provides consultation services for both human resources as well as health and safety. Their consultants drafted recommended policies for our organization. Attached is the Health and Safety Policy Manual.

With the approval of the Health and Safety Policy Manual, some current policies and practices should be changed:

1. The *Business Continuity Policy* should be revised to remove the information regarding the Emergency Response Plan, which is now included in the Health and Safety Manual, *Emergency Preparedness and Response Policy*.
2. The *Pandemic Safety Plan* should be discontinued as it is now covered in the Health and Safety Policy Manual, in the *Communicable Disease Prevention Policy*, as well as the *COVID-19 Workplace Safety Plan Policy*.
3. The *COVID-19 Vaccination Policy* should be discontinued as it is now included in the Health and Safety Policy Manual, in the *COVID-19 Workplace Safety Plan Policy*.

Recommendation:

1. Approve the Health and Safety Policies and Procedures outlined in the Health and Safety Policy Manual.
2. Approve the revised Business Continuity Policy as presented; discontinue the *Pandemic Safety Plan* and the *COVID-19 Vaccination Policy*.

Decision



POLICY AND PROCEDURE MANUAL

SECTION: Administrative

POLICY: AD 10

Revised Date: December 2022

July 2022; February 2017; September 2015;
November 2014

PAGE: 1 of 11

BUSINESS CONTINUITY POLICY

PREAMBLE

Creating and maintaining a Business Continuity Plan will ensure that Contact Brant has the resources and information needed to deal with emergencies. An emergency can impose overwhelming demands and/or significantly restrict access to resources, which include human, material, information, and expertise.

Every organization is at risk from potential disasters including natural disasters (e.g., tornadoes, floods, blizzards, fire); accidents and threats; sabotage; power and energy disruptions; communications, transportation, safety, and service sector failure; environmental disasters (e.g., pollution, hazardous material spills); or cyber-attacks and hacker activity. **Also refer to the Health and Safety Policy, *Emergency Preparedness and Response*.**

An Emergency Response Plan is also part of this Business Continuity Policy to ensure compliance with the Ontario Regulation 191/11 Accessibility for Ontarians with Disabilities Act, 2005.

POLICY

Contact Brant will have a Business Continuity Plan in place to identify the resources, procedures and information needed to deal with emergencies.

Employees will be familiar with and prepared to follow the Business Continuity Plan to ensure service delivery to clients as soon as possible following any emergency and/or disaster.

Employees will be familiar with and prepared to follow the Emergency Response Plan to ensure human safety, minimize damage to property, and ensure rapid, responsive communication to all parties involved.

PROCEDURE

1. Annually, the Chief Executive Officer will review with the Board the potential risks that are most likely to occur. Following are those risks deemed most likely to occur, and requiring risk management through the Business Continuity Plan:
 - 1.1. Natural and Other Emergency situations including tornadoes, earthquakes, blizzards, and fire
 - 1.2. Accidents **including medical emergencies**
 - 1.3. Major Power and Energy disruptions
 - 1.4. **Infectious Diseases/** Pandemics
 - 1.5. Technological disruptions.

2. Employees are responsible to mitigate any risks by identifying any potential threats and solutions, both in the on-going risk management and in the case of an actual emergency, to their Supervisor.
3. Following are the sections of the Business Continuity Plan to be addressed:
 - A. Governance to outline roles and responsibilities
 - B. Business Impact Analysis
 - C. Plans for Business Continuity
 - D. Readiness Procedures – Refer to the *Emergency Preparedness and Response Policy*.
 - E. Quality assurance
 - F. Emergency Response Plan.

A. Governance

1. The Chief Executive Officer will annually review the Business Continuity Plan with the Board of Directors and ensure the Plan addresses the risks most likely to occur as well as the essential services and resources that are required to continue operations.
 - 2.1 The Chief Executive Officer, Manager of Service Coordination and the Executive Assistant supporting the Board will be responsible for the oversight, initiation, testing and audit of the Business Continuity Plan in communication with the Chair of the Board or alternate.
2. During any emergency, the Board of Directors should be prepared to meet more frequently to address issues arising from the emergency. The Board should make recommendations on the overall course of action based on the information regarding operations received from the Chief Executive Officer, or alternate, who is responsible to monitor the situation daily; act as an emergency resource to the Chief Executive Officer, or alternate; and help to determine the substance of news releases for on-going interruptions.
3. The Chief Executive Officer must ensure information is up to date and provided to the Board of Directors to help inform decision making.
4. It is the intention of Contact Brant to operate in accordance with existing policies and procedures, both governance and operational.

B. Business Impact Analysis

1. The Chief Executive Officer will annually ensure employees review the Business Impact Analysis to recommend to the Board the organization's critical business services and the priority of services for continuous service delivery and rapid recovery, as well as identifying internal and external impacts of disruptions.
2. Identifying the critical business services that must be delivered is based on the Contact Brant Mission Statement and the severity of impact a disruption could cause; prioritization of the services is also based on the anticipated minimal time of recovery needed to continue these services after a disruption and a potential loss of revenue that otherwise could be caused. Following are the identified critical business services:

- 2.2 Coordination of services for families may be especially important during a community disaster, especially for those most in need; the Case Resolution function may need to be implemented to address individuals at risk. Coordination supports could be implemented at a minimum once communication systems are available.
 - 2.3 Information, especially general information provided by the municipality or province, may be especially important during a community disaster and Contact Brant, as a recognized access point and manager of the Information Database utilized by 211, may be able to play a key role. Information services could be implemented at a minimum once communication systems are available.
 - 2.4 Intake and referral to appropriate services to be responsive to families and community partners, may be especially important during a community disaster where families will experience increased stress. Intake and referral could be implemented at a minimum once communication systems are available, or staff are able to travel to meeting sites.
 - 2.5 Payment of the organization's bills, including employees' salaries, should be completed in a timely fashion. This could be implemented at a minimum once communication systems are available.
3. Internal resources may further impact the disruption and need to be considered in each situation, including but not limited to: employee availability, corporate assets (facilities, computers, computer applications, data), financial (additional expenses related to implementing the continuity plan, length of time of emergency), and intangible losses (damage to reputation).
 4. External factors may further impact disruptions and need to be considered in each situation, including but not limited to: suppliers, support services (security, technology support, phone and internet suppliers), finance institutions, transportation, insurance providers, government services, legal services, health and safety services, other community services).

C. Plans for Business Continuity

1. At a minimum, the following business options should be maintained or resumed as soon as possible:
 - Phone reception
 - Provision of Information, including management of the Community Information website to ensure updated records for the community and 211
 - Intake and Referral
 - Service Coordination including Case Resolution for complex needs, and
 - Financial Accountability including payments and financial statements.
2. In the case of any temporary closures of the Contact Brant office, employees are expected to complete work at home or an alternate location, wherever possible:
 - Employees are provided with home office equipment including an office phone and computer. ~~will leave voice mails indicating they will be checking their messages and returning calls, and will follow-up regularly throughout the day.~~

- Resource Coordinators, Service Coordinators, Urgent Response Coordinators, Community Navigator and Peer Support Navigator can also complete calls by their agency-provided cell phone.
 - The Administrative Assistant, or alternate, will ensure that the answering machine message is changed ~~and a sign is posted on the entrance door, wherever possible,~~ to reflect that the office is temporarily closed and the reason, with anticipated timelines for re-opening.
 - The Executive Assistant will post on notice on the Contact Brant website indicating the office is temporarily closed and the reason, with anticipated timelines for re-opening.
 - The Community Information website can continue to be updated, helping to disseminate information.
 - ~~The Chief Executive Officer, or alternate, will contact the local radio station to have announcements made regarding the office closure, wherever possible.~~
 - The Chief Executive Officer, or alternate, will communicate with staff about the temporary closure and when the Contact Brant office will re-open.
3. ~~Employees should consider~~ Recovery arrangements ~~available, such as internal~~ should be made with external ~~contractors including~~ telecommunications, IT Supports, backup systems:
- 3.1 The contracted IT Support, as well as web-based databases EMHware and Community Information, provide offsite backup and should be expected to make systems and records available to employees as soon as possible, according to the contractual agreements.
 - 3.2 Employees can access email and the databases from off-site with passwords through agency home office equipment, which may make it possible to carry on services quite quickly if access to the office site is limited. Employees should work from their home if the Contact Brant office site is not accessible or usable.
 - ~~3.3 Some employees are provided with mobile phones that can be used by any employee in case of interruption in phone services at the Contact Brant office.~~
 - 3.4 Intake information including the Common Tool for Intake and associated information and forms can be completed utilizing paper copies if access to the database is not available. Data can be input at a later date.
 - 3.5 Referral packages to agencies can be handwritten or typed as a Word document if the database is not available.
 - 3.6 Meetings can be held by teleconference, ~~videoconference~~, or at other sites.
 - 3.7 ~~All employees are expected to participate in the process of rebuilding following an emergency, to the best of their ability.~~
4. The Chief Executive Officer will ensure an alternate location for services if the office site is not accessible for an extended period of time after any emergency or disaster.

- 4.1. The Chief Executive Officer will annually review the Business Continuity Plan and Emergency Response and Preparedness Policies with employees to ensure preparedness in case of an emergency.
- 4.2. All employees are expected to use reasonable judgment on how to respond in case of an emergency, follow Contact Brant policies and procedures, and participate in an annual review of the Business Continuity Plan to be prepared for emergency situations to assist in the organization's response.
- 4.3. In the short term, all employees will be expected to complete work at home, or in another location, wherever possible.
5. The Chief Executive Officer, in consultation with the Board of Directors, will ensure adequate insurance, health and safety policies and procedures, staff training, and workplace health and safety measures are in place to minimize the organization's risks, as well as to minimize the time that services are not available.
6. Following are procedures for business continuity related to the potential risks identified by the Board of Directors:

6.1. Natural and Other Disasters

- Weather and Environmental Conditions:

When the local school boards cancel school transportation and close schools in the City of Brantford due to weather or environmental conditions, including but not limited to tornadoes, earthquakes and blizzards, the Contact Brant office will be temporarily closed so employees do not have to travel into work. The Chief Executive Officer or alternate will identify when the office will re-open.

Employees should plan ahead when weather forecasts implicate poor weather the next day, to be prepared to work at home in case of office closure.

Employees will follow procedures outlined in this policy under 'C. Plans for Business Continuity', item 2, regarding temporary closures of the Contact Brant office, where employees are expected to complete work at home or an alternate location, wherever possible.

Note: The Contact Brant lease identifies that snow removal is the landlord's responsibility.

- Fire:

Following a fire, employees should not access the office site unless the Fire Department authorizes the safe access to the building. If the building is deemed accessible and workmen are required in the building, the Chief Executive Officer or an alternate should be on site to ensure protection of resources.

- Employees must implement reasonable precautions to avoid fire hazards and follow the Health and Safety Policy to reduce risk. Fire alarms, smoke detectors and fire extinguishers are part of the risk management and detailed in the Health and Safety Policy.

6.2. Accidents and Threats

- All employees are expected to be knowledgeable on health and safety policies and procedures, and take all reasonable actions and responsibility for ensuring the work environment is safe to minimize risk of accidents and threats.
- All employees are expected to be knowledgeable on the possibility of potential threats and allegations to staff, and take all reasonable actions and responsibility for ensuring their safety, according to the Staff Safety Policy, AD-11.
- All employees will receive crisis intervention training.

6.3. Power and Energy Disruptions

- Power and energy disruptions may not affect cell phones and laptops, which should be utilized as needed.
- If power and energy disruptions are only limited to the Contact Brant office, employees should work at home.
- The Chief Executive Officer, or alternate, should use best judgment regarding temporary closure of the office depending on the projected length of the power or energy disruption, temperature especially in winter months, or the lack of lighting or water in the office.
- All employees will follow procedures outlined in this policy under 'C. Plans for Business Continuity', item 2, regarding temporary closures of the Contact Brant office, where employees are expected to complete work at home or an alternate location wherever possible.
- If workmen are required in the building, the Chief Executive Officer or an alternate may be required to be on site.

6.4. Pandemics

- A flu pandemic occurs when a novel virus which is virulent and easily transmitted infects humans. Contact Brant will recognize a pandemic that is confirmed by public health authorities, and follow the directions communicated by the public health authorities.
- The Chief Executive Officer, or alternate, should closely monitor the health of employees, and use best judgment regarding flexible scheduling of hours or sending an employee home due to infectious disease symptoms. Employees would be expected to use sick benefits, including longer term benefits, if required.
- The Chief Executive Officer, or alternate, should closely monitor the health and safety of employees, and use best judgment regarding the closure of the office to the general public and/or employees in consultation with the Brant County Health Unit/Medical Officer of Health.
- If employees are directed not to attend the office, employees will follow procedures outlined in this policy under 'C. Plans for Business Continuity', item 2, regarding temporary closures of the Contact Brant office, where employees are expected to complete work at home or an alternate location wherever possible.

7. The Chief Executive Officer, or alternate, is responsible for directing the organization on a day to day basis. The Chief Executive Officer, or alternate, will need to consider the following in having the office remain open, and/or continuing services:

- Employee sickness, or employees staying at home to care for family members who are ill, or children not in school due to closures. The Sick Leave and Leave of Absence Policies should be considered; vacation time can also be used.
- To address employee's fear of coming into work due to possible exposure to the virus, information from the Brant County Health Unit will be utilized to inform employees. The Telework Policy may be considered to allow work flexibility, and the Health and Safety Policy/practices should assist in helping employees proceed with their jobs. Employees can also use vacation time.
- If an employee is quarantined by Public Health officials, the employee must provide the employer with a written confirmation from a Public Health official including the quarantine period. A leave may be paid through consideration of the following policies: Sick Leave, Leave of Absence, Telework, or Vacations and Holidays; additionally, the long-term disability benefit plan may be accessed.
- Employees are expected to follow health and safety policies and procedures; additionally employees should follow guidelines by the City of Brantford and the Brant County Health Unit to reduce risk of infection (e.g., washing, limiting face-to-face contact/interviews, coughing/sneezing guidelines).
- All employees should consider vaccinations as recommended by the Medical Officer of Health and their own doctor.
- Employees should report any evidence of a communicable disease that could seriously endanger the health of others to the Chief Executive Officer, or alternate, as well as the Brant County Health Unit.
- In the event that the CEO or designate are unavailable due to a pandemic, the Board of Directors may need to designate a decision maker. Additionally, the other Contact agencies could be available for consultation.

7.1. Technological Disruptions

Technological disruptions could occur due to IT provider services, IT maintenance services, or cyber attacks and hacker activity.

- The Chief Executive Officer will ensure the following are in place to minimize risk: adequate back-up systems, firewalls, policies regarding computer and internet use, use of passwords, and frequent password changes.
- Employees will ensure use of passwords and will bring any concerns regarding IT resources or access to the attention of the Administrative Assistant, Executive Assistant, and/or IT maintenance services.

D. Readiness Procedures

1. Refer to the *Emergency Preparedness and Response Policy*.
2. The Chief Executive Officer will annually review the Business Continuity Plan and **Emergency Response and Preparedness Policy** with employees to ensure preparedness in case of an emergency.
3. All employees are expected to use reasonable judgment on how to respond in case of an emergency, follow Contact Brant policies and procedures, and participate in an annual review of the Business Continuity Plan to be prepared for emergency situations to assist in the organization's response.
4. ~~Disaster recovery plans may need to be considered following an emergency; all employees are expected to participate in the process of rebuilding following an emergency, to the best of their ability.~~

E. Quality Assurance

1. Following any emergency, the Chief Executive Officer will facilitate a review of the response by both employees and the Board, and incorporate recommendations into new business practices, policies, and procedures.
2. Employees and the Board should build on any experiences in disruptions of service, including occasional interruptions or closures due to weather, brief power outages, and the agency's 2008 and 2012 moves to new sites.
3. The Chief Executive Officer will facilitate an annual review with both employees and the Board regarding the business and operational practices.

F. Emergency Response Plan

1. The Chief Executive Officer will ensure that an Emergency Response Plan is posted (Appendix 1). The Emergency Response Plan shall apply to Contact Brant employees, volunteers, and visitors on, in, or around the premises.
2. The Emergency Response Plan will include procedures for Fire, Natural Disasters, Bomb Threats, Water/Heat/Utility Disruptions, and Missing Persons.
3. Employees need to be aware that the Emergency Response Plan may need to be provided in a format that takes into consideration individual needs, as well as that supports may be required to some individuals in emergency situations.
 - 4.1 Employees will work with the individual, as soon as practicable, to identify solutions and options that take into consideration their needs. Alternative options include but are not limited to enlarged text; communication support either in person or over the phone; ensuring the individual's support person is aware of the Plan.
4. **Emergency Survival Kit:** One of the best ways to prepare for an emergency, regardless of the type, is to prepare an Emergency Survival Kit. As a best practice, emergency survival kits should include enough supplies to survive for 72 hours. The Emergency Survival Kit includes:
 - Flashlights (located in hallway and CEO's office)
 - Cell phones that will work in a power outage
 - A well-stocked First Aid kit (located in copier area); the First Aid Station has additional supplies and is located in the storage cupboards
 - Manual can opener (located in the kitchen)
 - Bottled water (located in the copier area).



Emergency Response Plan

Employees need to be aware that the Emergency Response Plan may need to be provided in a format that takes into consideration individual needs, as well as that supports may be required to some individuals in emergency situations.

Contact Brant employees will work with the individual, as soon as practicable, to identify solutions and options that take into consideration their needs. Alternative options include but are not limited to: communication support either in person or over the phone; documents provided via email or website; ensuring the individual's support person is aware of the Plan; documents provided in enlarged text or Braille.

FIRE Emergency Response Plan Procedures:

If you hear a fire alarm, all individuals in or around the premises will:

- Remain calm and encourage others to remain calm.
- Evacuate the building immediately, using the nearest and safest exit.
- Close all doors behind you as you leave.
- Report to the designated "Emergency Evacuation Area" (sidewalk on Park Road North).
- Immediately report employees or visitors who have remained in the building.
- Dial 9-1-1 to notify the authorities - follow any and all instructions. Provide your name, correct address of the fire (643 Park Road North, Brantford, N3T 5L8) and the location of the fire in the building.
- Use the fire extinguisher *only if deemed safe to use rather than exit the building.*
- *Do not return into the building until it has been declared safe to do so by the Fire Department.*

If you are unable to leave the area or building due to fire or heavy smoke:

- Remain calm.
- Close all doors to prevent the entry of smoke and fire.
- Dial 911 to notify the authorities and inform them of who and where you are.
- Signal to the Fire Fighters, by any means possible, to draw attention to you.
- If possible, seal all cracks where smoke can get in.
- Crouch low to the floor if smoke begins to enter your area.
- Move to the nearest protected location in the room or area.
- Wait to be rescued and remain calm.
- Do not leave the area.
- Do not panic.
- Listen for instructions or information which may be given by authorized personnel.

NATURAL DISASTERS Emergency Response Plan Procedures:

A “weather watch” means that conditions are favourable for severe weather to develop.

A “weather warning” means that severe weather has been sighted in the vicinity.

- Remain calm and encourage others to remain calm in a weather warning.
- Account for all employees and visitors ensuring that everyone is safely inside the facility.
- Close all windows, curtains and blinds.
- Move away from windows and doors.
- Gather individuals in the basement; if the basement is unavailable, gather in windowless or other enclosed areas.
- Listen to weather reports for updates and instructions.
- Do not leave the area until the weather warning has been lifted.

POWER Disruptions Procedures:

In the event of a major power outage:

- Remain calm and encourage others to remain calm.
- Gather flashlights and other needed supplies.
- Check on all employees and visitors to ensure their safety.
- If the power outage is prolonged, the Chief Executive Officer or designate will consider sending everyone home for the remainder of the day.

In the case of other utility disruptions, all attempts will be made to determine the cause of the disruption and the probable length of shutdown. Where required, the local utility provider shall be contacted to assess and resolve the situation. If the shutdown is prolonged, dismissing employees for the day shall be considered by management.

Bomb Threats; Chemical, Biological, Nuclear Hazards Procedures:

In the event of a bomb threat, or if a contaminant, virus, or other harmful agent poses an immediate threat, all employees and visitors are to:

- Remain calm and encourage others to remain calm.
- Evacuate the building immediately.
- Report to the designated "Emergency Evacuation Area" (sidewalk on Park Road North).
- Dial 9-1-1 to notify the authorities and follow any and all instructions.

MISSING PERSON Procedures:

During an emergency, ensure that all necessary steps are taken when an employee or visitor cannot be accounted for:

- Two individuals, usually the CEO or designate, will engage in a systematic search, both inside and immediately outside the premises, if safe to do so.
- Should a search of the premises prove unsuccessful or not be safe to complete, call 9-1-1 and provide a description of the missing person, or a photograph.
- Emergency Responders will assume control of the search at this point.
- All previously contacted persons and law enforcement shall be notified if the missing person turns up due to search or of their own accord.



POLICY AND PROCEDURE MANUAL

Section: Administrative

POLICY: AD 14

Policy Date: September 2022
November 2021; September 2021; October 2021

Page: 1 of 8

COVID-19 Vaccination Policy

PREAMBLE

Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, severe outcomes including hospitalizations and death due to COVID-19. Achieving high immunization rates with service providers who regularly provide essential close contact and direct interventions will support achieving protection for those we serve.

On August 30, 2021, MCCSS directed that Contact Brant was required to comply with the *Letters of Instruction* issued by the Office of the Chief Medical Officer of Health. This Instruction falls under the authority of subsection 2(2.1) of Schedule 1 of O. Reg. 364/20: *Rules for Areas at Step 3 and at the Roadmap Exit Step under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020 (ROA) ("Instructions")*. This policy is based on the expectations of these Instructions.

Contact Brant was a "Covered Organization" in the Vaccination Policy Requirements as we are a Transfer Payment recipient funded under CYFSA that provides services with respect to children and youth with special needs, Autism, Complex Special Needs funded services, Coordinated Service Planning, and FASD worker services. A "Required Individual" is an employee, contractor, volunteer, or student of our agency.

Additionally, we were responsible for "Third Parties" that we entered into a contract with to provide services to children and youth with special needs such as through Complex Special Needs, and Urgent Response Services funding. Contact Brant is was required to share the Ministry policy information with all third party contracts, and third parties are required to complete the reporting requirements.

Visitor and other individuals not captured in the Letter of Instruction were NOT in the scope for these requirements. Public health measures are in place to protect residents, service recipients, and staff from COVID-19 transmission - these include the safety measures and expectations that we have outlined in the Contact Brant *Pandemic Safety Plan*.

Rapid Antigen Screening Tests facilitate the identification of an individual infected with COVID-19 that regular screening protocols (e.g., symptom screening) might otherwise miss. It may therefore help prevent asymptomatic individuals from unknowingly spreading COVID-19. Frequent screening with rapid antigen tests increases the chances of early identification of cases in otherwise asymptomatic individuals. Antigen testing increases the sense of protection and security in the workplace.

Although it is an individual's right to make the decision about whether to be vaccinated or not, the Chief Medical Officer of Health strongly encourages that everyone get vaccinated.

As of September 2022, 100% of our staff are fully vaccinated!

POLICY

Contact Brant requires employees, contractors, volunteers and students to provide one of the following:

- i. **Proof of full vaccination against COVID-19, or**
- ii. **Written proof of a medical reason for not being fully vaccinated against COVID-19.**

PROCEDURES

1. Contact Brant employees are required to provide one of the following to their Supervisor:
 - a. Proof of full vaccination against COVID-19; or
 - b. Written proof of a medical reason provided by a physician or registered nurse in the extended class that sets out: (i) a documented medical reason for not being fully vaccinated against COVID-19, and (ii) the effective time period for the medical reason; or

"Fully vaccinated" is defined as at least 14 days have passed since receiving the second dose of the COVID-19 vaccine

Refer to Appendix A for further information on proof of vaccination and the written medical reason.

COVID-19 Rapid Antigen Tests

2. Regular use of COVID-19 Rapid Antigen Tests is encouraged for employees who are not fully vaccinated, as well as for vaccinated employees who may have COVID symptoms or might have been exposed to COVID.
 - a. The employee is responsible for the self-collection of specimens, proper handling of specimens, documentation and reporting of results, required actions depending upon results, and appropriate disposal of specimens, kits and other contaminated materials following the authorized protocols per the Rapid Antigen Test manufacturer's instructions, and directives per Ontario Health and their local Public Health Unit.
 - b. Where a staff receives a positive rapid antigen test result, the staff must immediately notify their Supervisor and self-isolate
 - If a staff's confirmatory test is positive, they will need to continue self-isolating and follow directions from their local public health unit.

COVID-19 Vaccination Education

3. Contact Brant provides an approved agency educational program to help individuals understand:

- How COVID-19 vaccines work.
- Vaccine safety related to the development of the COVID-19 vaccines.
- The benefits of vaccination against COVID-19.
- Risks of not being vaccinated against COVID-19; and
- Possible side effects of COVID-19 vaccination.

4. Offers of employment, as well as student and volunteer placements, will be conditional upon the individual providing one of the documentation required in Section 1 of this Policy.

Contracted Services

5. Contact Brant may enter into contracts with “Third Parties” for the provision of direct services to children and youth with special needs. Third Parties may include other Ministry-funded transfer payment agencies or private providers not licensed by the Ministry. All contracted services will be encouraged to have their employees vaccinated.

Board of Directors

6. Although the Board is not covered by the provincial expectations, they have identified that they recognize the importance of this COVID-19 Vaccination Policy and will be included in this policy.
- a. Directors of the Board will submit one of the following to the Executive Assistant:
 - i. Proof of full vaccination against COVID-19; or
 - ii. Written proof of a medical reason for not being fully vaccinated against COVID-19.
 - b. Board members need to follow the safety measures and expectations outlined in the Contact Brant *Pandemic Safety Plan* including but not limited to completion of the COVID-19 Screening prior to entering the building, physical distancing, and wearing a face mask if appropriate.

All Other Individuals

7. For all visitors entering the building, or face to face meetings that occur outside of the building, staff will follow the safety measures and expectations outlined in the Contact Brant *Pandemic Safety Plan*. This will include (i) Elimination and Substitution controls such as limiting numbers; (ii) Engineering and awareness controls such as physical distancing; (iii) Administrative control measures including completing the COVID-19 Screening for staff and others; and (iv) Personal Protective Equipment.

Daily COVID-19 Screening

8. All staff must continue to use standard COVID screening before entering the workplace or attending any in-person meetings.

Staff who are symptomatic or otherwise fail the standard COVID-19 screening, must not enter the workplace. Instead, staff are encouraged to work from home, if feeling well enough to do so.

Retention of Records

9. The Vaccination status records will only be used for the purposes of this policy and individual records will not be shared without consent.

- a. Employee vaccination status will be stored in their confidential personnel record maintained securely by the Chief Executive Officer.
- b. Board and contractor information will be stored securely in their associated confidential records maintained by the Executive Assistant.
- c. When Contact Brant no longer requires this information to be collected, the Vaccination record in each file will be securely destroyed, as per the Retention of Records Policy.

Proof of Full Vaccination against COVID-19

After vaccination, individuals with an Ontario photo health card can log in to the provincial portal to download or print an electronic COVID-19 vaccine receipt (PDF) for each dose received. The physical/hard copy receipt and email version of the receipt will resemble the following:

Ontario 

Ministry of Health
Ministère de la Santé

Name/Nom: [REDACTED]
Health Card Number/Numéro de la carte Santé: [REDACTED]
Date of Birth/Date de naissance: [REDACTED]
Date/Date: 2021-05-16, 3:43 p.m.
Agent/Agent: COVID-19 mRNA
Product Name/Nom du produit: PFIZER-BIONTECH COVID-19 VACCINE mRNA
Diluent Product: PFIZER Diluent 0.9% Sodium Chloride
Lot/Lot: [REDACTED]
Dosage/Dosage: 0.3ml
Route/Voie: Intramuscular / intramusculaire
Site/Site: Left deltoid / deltoïde gauche
You have received 1 valid dose(s) / Vous avez reçu 1 dose(s) valide(s)
Vaccine Administered By/Vaccin Administré par: [REDACTED]
Registered Practical Nurse
Authorized Organization/Organisme agréé: [REDACTED]
Note: Only valid doses are counted / Remarque: Seules les doses valides sont comptées.
Please remain on the premises for the next 15 minutes for observation. You are free to leave the vaccination clinic at 3:58 PM / Veuillez rester sur place pendant les 15 prochaines minutes aux fins d'observation. Vous pouvez quitter la séance de vaccination à 3:58 PM.

Individuals who have a red and white health card can call the *Provincial Vaccine Booking Line* at 1-833-943-3900. The call center agent can email a copy of their receipt.

Otherwise, contact the health unit in the region where you received your vaccinations and they can provide a copy of their receipt.

Proof of Medical Reason for Not Being Vaccinated

Written proof of a documented medical reason for not being fully vaccinated against COVID-19 must be provided by either a physician or a registered nurse in the extended class (see Extended Class (cno.org)). Referral and consultation support for physicians and registered nurses in the extended class is available through Ontario's eConsult Service and OTN Hub.

In some instances, the medical reason for the person not being vaccinated may be time-limited. The Ministry Instructions require that the note from the physician/nurse practitioner specifies the effective time-period for the medical reason. If time-limited, the note should indicate how long it is expected to last.

COVID-19 Rapid Test Training

Rapid antigen testing is used to detect and respond to COVID-19, a highly infectious and deadly communicable disease. Contact Brant will follow Provincial Guidance regarding rapid antigen testing as a reasonable and necessary measure to prevent, respond to, and alleviate the outbreak of COVID-19 and the associated risk to our staff and to the people that we support, in addition to the public health safety measures we practice. This Policy is also adopted to comply with our obligations under the *Occupational Health and Safety Act* to take every reasonable precaution in the circumstances to protect a worker and to comply with our obligation under applicable emergency orders, as well as government mandated rapid antigen testing for unvaccinated and partially vaccinated staff as well as the recommendations and directions of our local Public Health Unit.

Rapid antigen COVID-19 tests provide quick detection of COVID-19 (in as little as 15 minutes) with less sensitivity than regular laboratory-based COVID-19 tests. There is a higher rate of false negatives and false positives. A false negative is a result that incorrectly shows that a person does not have COVID-19, while a false positive is a result that inaccurately shows that a person does have COVID-19. Despite this, these tests are accurate enough that they can catch many asymptomatic cases of COVID-19 early.

These rapid tests are therefore used for screening to identify people who may have COVID-19 but not for diagnosis of COVID-19. ~~Those who test positive must undergo more accurate laboratory testing to confirm that they do or do not have it. The Province requires that any positive result in a rapid test means an individual must undergo a confirmatory laboratory test within 24 hours.~~

~~**Note:** In accordance with directives from Public Health, in the event of an outbreak in the staff's program location, all staff regardless of vaccination status will be required to participate in Rapid Antigen Testing.~~

~~This Policy relates to unvaccinated or partially vaccinated staff who must self-test as per policy.~~

~~Prior to self-administering a Panbio™ COVID-19 Rapid test, staff are to complete the agency's approved training and sign the *Attestation of Completion of the COVID-19 Vaccination Education*.~~

Free Rapid test kits are available in community locations such as pharmacies and grocery stores. Staff are encouraged to have tests available at home. Contact Brant will make every endeavor to have rapid test kits available at work.



Pandemic Safety Plan

June 2022

A Guide to ensuring a healthy and safe workplace due to the COVID-19 pandemic

Preamble

In March 2020, the COVID-19 pandemic affected how we operated. The Ministry of Health and the Brant Public Health Unit provided direction on how we were to operate. Social distancing was a new term introduced as a means to decrease the highly contagious virus. Both Contact Brant's Risk Management Policy (relating to pandemics) and Telework Policy were implemented with all staff working from home offices. Services continued virtually, by phone, email, text and videoconferencing. However, offering clients face-to-face services stopped, and due to Woodview closing the building, walk-ins also stopped.

This plan outlines the processes, protocols, and safety measures required to safely work in our workplace during and after a pandemic. Our goal is to ensure high quality services are available while we maintain healthy employees in a healthy work environment. Employers and workers need to consider how they can work safely and prevent the spread of COVID-19.

COVID-19 is a respiratory illness with the most common symptoms being fever, tiredness, and dry cough. See Appendix C for more information on COVID-19. According to the World Health Organization (WHO), it is safe to receive packages from areas where COVID-19 has been reported: "The likelihood of an infected person contaminating commercial goods is low, and the risk of catching the virus that causes COVID-19 from a package that has been moved, travelled and exposed to different conditions and temperature is also low." The virus does not survive on surfaces for long, and the length of shipment time and other environmental factors should inactivate the virus. If you are concerned about possible surface contamination consider these steps: (i) Wash your hands frequently with soap and water after handling materials, (ii) Use alcohol-based hand rub, with at least 60% alcohol, when soap and water are not available, and (iii) Avoid touching your face, eyes, nose or mouth.

As the province changed stay-at-home regulations and looked to services returning to normal, working safely within the office became primary. We will continue to follow directives from the Ministry of Health, Public Health Ontario, and Brant County Health Unit. It is critical that Contact Brant and employees maintain a safe work environment for staff and clients.

The Ministry of Labour, Training and Skills Development expects employers do everything reasonable in the circumstances to protect workers. They identify when determining reasonable precautions for the protection of workers during the pandemic, employers should follow the guidance provided by Public Health Ontario and the Ministry of Health:

- ✓ wash hands often with soap and water or alcohol-based hand sanitizer
- ✓ sneeze and cough into sleeve

- ✓ if a tissue is used, discard immediately and wash hands afterward
- ✓ avoid touching eyes, nose or mouth
- ✓ avoid contact with people who are sick
- ✓ avoid high-touch areas, where possible, or ensure hands are cleaned afterward
- ✓ where possible, keep 2 meters (6 feet) apart
- ✓ support control measures including robust screening, hand hygiene, cough/sneeze etiquette and frequent cleaning of high touch surfaces are important, and
- ✓ where possible, wear gloves when interacting with high-touch areas. Do not touch face with gloved hands. Take care when removing gloves. Ensure hands are washed after removing gloves.

Planning and implementation will be supported by ongoing communication across the agency. We will support Woodview in full compliance with cleaning and disinfecting schedules, as well as reporting protocols. Our plan requires a regular monitoring process that will be flexible as circumstances and directives change.

In developing this plan, guidance and webinars from government and health units were reviewed to assist with risk assessment and operating decisions. Risk Avoidance is when a business eliminates certain hazards, activities and exposures. Risk Controls involves preventative actions. Both of these methods to manage risks have been planned, and will be monitored for their effectiveness and need to evolve.

Contact Brant supports the importance of tending to our own mental health. Appendix C provides a tip sheet on mental health during the current health emergency, from the Canadian Psychological Association (2020).

This plan is based on recommendations from Public Health (Canada, Ontario and Brant County), Ontario's Chief Medical Officer of Health and the Ministry of Health, Center for Disease Control, Occupational Health and Safety Act, Emergency Orders made under the Emergency Management and Civil Protection Act (EMCPA), and emerging best practices being disseminated in the public forum.

Also refer to our Health and Safety Policy;
Public Health Ontario, www.publichealthontario.ca; and
The Brant County Health Unit, www.bchu.org

Contact Brant Pandemic Safety Plan

1. It is recognized that directives regarding COVID-19 may change over time, and our Plan will be fluid to respond to these changes.
2. All employees are required to be fully engaged in their practices to decrease the spread of COVID-19 and minimize the potential risk of infection within our workplace. Contact Brant and its employees will be responsible for working safely during the pandemic by following directives from the Ministry of Health and Brant County Health Unit, as well as the Contact Brant *Pandemic Safety Plan*.
3. **Vaccination** remains a key defense in the ongoing management of COVID-19. Every eligible Ontarian is strongly recommended to get vaccinated and receive their

booster(s) as soon as they are eligible. Booster doses will help protect a person from more severe outcomes from COVID-19 and variants.

4. **Active Screening for COVID Symptoms**

- Although COVID-19 screening before coming into the office or meeting with others is no longer required, Contact Brant continues with the following procedure:
If you are sick or have any symptoms of illness related to COVID-19, work from home (if feeling well enough). **When you are feeling better but still have lingering symptoms, wear a mask when meeting with others in the office.**
- Follow the current guidelines established by the Ministry of Health for self-isolation and masking if you have been in contact/suspect you were in contact with a person with COVID, as well as if you have travelled out of the country.

5. **Personal Hygiene**

- Staff should wash their hands often with soap and water for at least 20 seconds. Use hand sanitizer with at least 60% alcohol if soap and water are not available.
- Staff should cover their mouth and nose with a tissue when they cough or sneeze or use the inside of their elbow. Throw used tissues in the trash and immediately wash hands. Staff are encouraged to avoid touching their eyes, nose, and mouth with unwashed hands.

6. **Sanitizing** – **Personal choice to sanitize any 'public' item or device is supported by Contact Brant providing sanitizing wipes and cleaners** (e.g. photocopier, door handles, washroom surfaces, meeting room surfaces, elevator buttons).

7. **Physical Distancing** - Physical distancing continues to be a Public Health recommendation. It consists of avoiding large gatherings and maintaining approximately two meters (six feet) distance between themselves and others when possible.

8. **Personal Protective Equipment (PPE)** -

- **Protective face coverings** are no longer required to be worn (effective June 11, 2022) according to the Ministry of Health. Wearing a face covering is now an individual/personal choice. The Ministry of Health encourages people at higher risk for severe illness to wear a mask.
- The Brant County Health Unit recommends:
 - Using a face covering made of tightly woven cloth or fabric (such as cotton or linen), with at least two layers that is comfortable so as not to require frequent adjustments
 - The face covering should cover your mouth, nose and chin in order to be effective
 - Your face covering may be worn all day, as long as it does not become damaged, damp or dirty. Make sure to clean your hands before you put on, adjust or remove your face covering. Avoid touching the face covering – handle only by the ear loops or tie

- Reusable face coverings should be washed with hot, soapy water after each use.
 - Dispose of disposable face masks and gloves after each use.
 - Clean face shields and other clear synthetic face coverings, as well as Plexiglas barriers, with sanitizing wipes after each use.
9. Contact Brant and its employees will use the Hierarchy of Controls identified by the Ministry of Health *COVID-19 Operational Requirements: Health Sector Restart, May 26, 2020*. The application of the following hierarchy of hazard controls is a recognized approach to containment of hazards, including health hazards, and is fundamental to occupational health and safety. Following are the [hierarchy of hazard controls](#) in order of decreasing effectiveness:

i. Elimination and Substitution Controls

Elimination and substitution are considered to be the most effective means in the hierarchy of controls.

- Work from home arrangements may continue wherever possible through virtual services.
- Staff scheduling will be used for access to your office.

ii. Engineering and Awareness Controls

These measures help reduce the risk of exposure to a pathogen or infected source hazard by implementing methods to reduce exposure by isolating the hazard from the worker and by physically distancing actions to reduce the opportunity for transmission, including:

- Physical distancing including avoiding large gatherings and maintaining approximately two meters (six feet) distance.
- Eliminate direct contact with others, such as handshakes or embracing, and avoid hand contact with surfaces touched by others as much as reasonably possible.
- Use of physical barriers like plexi-glass panels.
- Do not to use other staffs' personal items, phones, or other work tools and equipment, whenever possible. When sharing use of offices, clean and disinfect surfaces (desks, keyboards, etc.) before and after use.
- Regularly sanitize surfaces after use, i.e. kettle, Keurig, microwave, frig, photocopier, cupboard doors, etc. Staff will complete a surface cleaning in between each client or meeting with another staff (i.e. tables, chairs, desk, computer mouse and keyboard, light switch, etc.) using a disinfectant wipe or disinfectant spray and paper towel.

iii. Administrative Control Measures

Administrative control measures aim to reduce the risk of transmission of infection to staff and clients through implementing policies, procedures, training, and education with respect to infection prevention and control.

- **Staff Screening** – Although staff are no longer required to complete the Contact Brant Self-Assessment (based on the Government of Ontario's recommended screening), the tool is still available for self screening of symptoms.
- **Self-Monitoring** - All staff should follow Public Health Ontario guidelines on COVID-19 regarding self-isolation and self-monitoring.
- The agency provides sanitizing wipes and hand sanitizer.
- Provide clients choice for in-person or virtual meetings.
 - For in-person meetings, ask the client what safety measures they might prefer, if any. Contact Brant has a supply of disposable face masks that can be offered clients in a meeting.

iv. Personal Protective Equipment (PPE)

PPE controls are the last tier in the hierarchy of hazards controls and should not be relied on as a stand-alone primary prevention program. PPE consists of mask, gloves, gowns, face shields and/or eye protection that can be used to provide a barrier to help prevent potential exposure to infectious disease

- As per Contact Brant procedures, protective face coverings are a personal choice.
- Contact Brant provides fabric face masks and non-medical disposable masks. Additionally, medical masks (e.g., N95) are available for staff. Contact Brant also provides face shields, gloves and gowns.

Standards and Practices Addressing Risk of Infection and/or Transmission

10. When Should I Stay at Home?

- If you have returned from travel outside of Canada, follow the current Government of Ontario Guidelines, including for self-isolation.
- In any of the following situations, follow the current Guidelines for self-isolation and when you can attend work:
 - (i) You had close direct contact with someone who has COVID-19
 - (ii) You or someone you have close direct contact with has one or more COVID-19 symptoms
 - (iii) You have been told by a public health unit that you may have been exposed to someone with COVID-19.

11. Expectations for Employees who Feel Unwell

- Staff who have COVID-19 symptoms, even if they are mild, will notify their supervisor or alternate and should stay home. If employees are feeling well enough to work, they can complete their work from home during their self-

isolation period. If employees are not feeling well enough to work, staff are eligible for paid sick leave according to Contact Brant's Sick Leave Policy.

- Employees who, upon arrival at work or while at the office, appear to have any COVID-19 symptoms, will notify their supervisor or alternate and immediately leave the office. Call 911 if there is a medical emergency.

12. Expectations when a Staff Tests Positive for COVID and has been Working in the Office

- If an employee has tested positive, they are required to follow current Ministry of Health Guidelines about when they can return to work. The employee will notify the CEO or alternate including whether they are able to work from home or will be taking sick time.
- The CEO or alternate will advise fellow employees of their possible exposure to COVID-19 in the workplace while ensuring confidentiality as required by law. Those suspected to have been exposed will follow current guidelines from Public Health Ontario.
- An employee must report to the Chief Executive Officer or alternate if they believe they have been exposed to the virus at the workplace. The Chief Executive Officer will explore with the employee where they believe they were exposed to the virus and address any areas where the employee has concerns in the work environment or procedures.
 - If the employee believes their exposure was from the workplace, contact WSIB, Ministry of Labour, Training and Skills Development. A WSIB Form 7 must be completed by the employee. WSIB will decide where the employee was likely exposed to the virus to make a decision whether the work environment has a greater risk than anywhere else in the community as the place where the person was exposed to the virus.
 - Under the Occupational Health and Safety Act (OHSA), if an employer is advised that a worker has an occupational illness due to an exposure at the workplace, appropriate reporting must be made to the Ministry as well as a Serious Occurrence Report.

13. Expectations for Employees Caring for a Family Member with COVID

Employees should follow Public Health Ontario Guidelines on caring for a family member with COVID 19. Employees who have a family member in their household with COVID-19 should notify their supervisor; arrangements may be able to be made for working from home depending on the amount of care required and the ability to work. Contact Brant's Leave of Absence Policy permits paid and unpaid leaves of absence for employees to stay home to care for a sick family member.

14. Expectations for staff working from home during the pandemic

All employees will at some point return to the office. Everyone is responsible for providing services that will fully meet the needs of clients, which includes face-to-face meetings and the ability to respond to walk-ins.

The COVID-19 pandemic has shown the ability to provide most of our services virtually. The Board has supported a pilot hybrid model of work that includes

sharing of office space with some in the office and some working from home. At this time, Contact Brant is offering employees who have completed their probationary period for their preference for working full-time in the office, partial scheduling in office with the remainder of the workweek in their home office, or working in their home office full-time. **As this is piloted, staff input into this model will inform the agency's future plans for office space and where staff work.**

Contact Brant's Telework Policy will guide employees who work from home. Telework is "any approved arrangement in which an employee performs their duties outside of their primary office worksite at an alternate location that is suitable for the performance of duties". The Policy indicates employees must ensure their workplace is free from any personal interruptions. Each employee is responsible to maintain confidentiality. There will be some flexibility in the Telework Policy expectations where employees are temporarily working from home for an extended period:

- The Policy states the "maximum number of Telework days in a month will not exceed 4 days. In extenuating circumstances, the CEO will have the discretion to make exceptions."
The COVID-19 pandemic is an extenuating circumstance and the minimum number of days will not be in effect.

- The Policy states that a "Telework arrangement does not change the terms and conditions of employment and is not a substitute for child or other dependent care".

Contact Brant will provide some flexibility during the pandemic in response to the availability of child care and school:

- When childcare and schools are closed due to provincial direction, Contact Brant recognizes employees will have their children at home. Employees are expected to develop plans to address how they plan to meet workload expectations. The employee will discuss their plan with their supervisor. Contact Brant will be as flexible as possible in these circumstances, recognizing that the employee will need to have some time committed to parenting.
- When schools provide options for partial or full attendance at school or for home learning, and the employee chooses to have their children remain at home, the employee is expected to develop a plan to provide care for their children. The employee will communicate the plan to their supervisor that outlines how the employee will complete their work responsibilities; the CEO will make the final approval of the plan. Contact Brant will be as flexible as possible in these circumstances. The employee can consider using some vacation hours, compensatory hours, or a part-time or full-time leave of absence according to the Leave of Absence Policy to accommodate their choice. This choice does not cover home-schooling.
- When childcare and schools are fully open, the Telework Policy is clear that working at home cannot be a substitute for childcare. However, as long as provincial guidelines are in place that require children to

stay at home when exhibiting COVID symptoms, flexibility with short-term working from home can be arranged with your supervisor depending on the amount of care required and the staff's ability to work.

15. Returning to the Workplace

- We will work towards all staff returning to the workplace at some point in the future through a plan that will be developed as an agency.
- The plan may be unique to each staff as current information indicates there may be greater risk due to age, an underlying medical condition or a compromised immune system. The CEO will work with those identified staff to determine a suitable work arrangement or leave of absence, if required.
- The plan may also be unique to each staff position, based on such things as responsiveness to client in-person needs.
- Anxiety about returning to work is a different issue. Employees must speak directly with the CEO about any concerns about returning to the workplace. If all precautions have been taken and the employee continues to refuse to return to work, this could lead to a Work Refusal under the Occupational Health and Safety Act. The employee may also consider requesting an unpaid leave or an accommodation (example - a partial leave, change of working hours and days, use of vacation time).

16. Concerns about the Contact Brant Pandemic Safety Plan

- If a staff feels that the workplace or the work they are doing is unsafe, they are required to inform their supervisor or alternate immediately. The CEO or alternate will conduct an immediate investigation.
- Woodview management will be informed of any workplace concerns and Woodview's Joint Health and Safety Committee are then required to conduct an investigation.
- If the investigations conclude that the work/workplace is safe and the staff does not agree, a WSIB Form 7 claim can be filed by the employee.

17. Training and Orientation

- Contact Brant's Pandemic Safety Plan also provides employees with orientation on how to work safely. On-going communication will continue with staff to ensure everyone is aware of workplace expectations and any changing procedures. Communication may be through meetings, email, policies and procedures. Information will be reinforced through signage and informational posters.

Refer to Public Health Ontario, www.publichealthontario.ca for information and directives, as well as the Brant County Health Unit, www.bchu.org.

18. Oversight, Monitoring, & Evaluation

It is recognized that new research and recommendations will continue as many national and international studies are released, which will provide more clarity as to how to approach COVID-19.

We will look at preventative measures on an ongoing basis and adjust as needed; make adjustments and improvements in accordance with most up-to-date public health measures; and communicate with our staff and clients.

The CEO, Manager of Service Coordination, and the Board of Directors will provide oversight on the implementation of the pandemic safety plan and on monitoring progress to ensure practices are maintained, staff and client input is sought when appropriate, and the plan is modified if and when needed in order to maintain a healthy work environment and healthy employees.

Woodview as the landlord has established procedures for our office building that Contact Brant employees must follow. Woodview management and the Joint Health and Safety Committee will also provide oversight for the office building.

CLIENT VISIT CHECKLIST

CLIENT NAME: Contact Brant	LOCATION Brantford
DATE: December 7, 2022	CONTACT NAME: Jane Angus

ONTARIO

HEALTH AND SAFETY POSTINGS

ITEM	YES	NO	N/A	COMMENTS
*Health and Safety Policy – signed and dated annually		X		OHS Policy must be signed and dated annually and posted on H&S notice board
*Workplace Violence & Harassment Policy – annual review done	X			<p>OHS (32.0.2 to 32.0.5) states a sufficient workplace violence and harassment policy and program must be developed and implemented.</p> <p>Policy must be signed and dated annually and posted on H&S notice board</p>



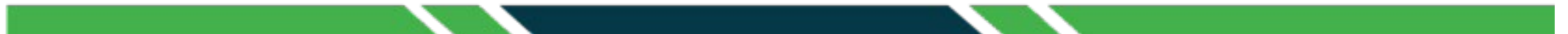
*OHSA & Regulations posted or easily available	X			OHSA The Green book must be posted on your H&S notice board The book contains a list of OH&S information resources. Green book must be up to date and current
*MOL Health & Safety at Work Poster	X			OHSA (25(2) updated "Health and Safety at Work" poster needs to be displayed on your H&S notice board
*Employment Standards Poster either posted or sent to all employees	X			OHSA Poster does not need to be posted on H&S notice board but must be provided to employees within 30 days of starting with business. This poster is available in a number of languages and should be given in the language the employee feels comfortable with
*WSIB “ In Case of Injury Poster”	X			WSIB - By law, the WSIB's "In Case of Injury" poster (Form 82) must be prominently displayed in every workplace covered by the WSIB.

*Names of Trained First Aiders Posted	X			OHS sections 8,9 and 10 names of First aid trainers must be posted on the H&S notice board. Certificate must be up-to-date
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*Emergency Phone Numbers Posted	X			Must be posted on H&S notice Board
Emergency Evacuation Map Posted		X		Must be posted on H&S notice Board
JHSC member names Posted	X			OHS R.S.O. 1990, c. O.1, s. 9 (2)
HSR chosen for business			X	A Health and Safety Representative (HSR) is required in workplaces with 6-19 workers . The role of the HSR is to support health and safety in the workplace

JHSC chosen for business	X			Section 17 of the Occupational Health and Safety Act (Act 85 of 1993), employers who employ 20 or more workers on premises must appoint a Joint Health and Safety Committee to monitor health and safety conditions.
JHSC training required	X			In Ontario, workplaces with 20 or more workers must have a joint health and safety committee (JHSC), made up of at least one worker and one employer member. The committee's primary role is to identify workplace health and safety issues and bring them to the attention of the employer. Under the Occupational Health and Safety Act, at least one worker and one employer on a JHSC must be certified.
JHSC Minutes Posted or accessible	X			OHSA sections 8(6), 8(7) and 8(8) All joint health and safety committee meetings must follow a standardized agenda to ensure consistency and should follow an order similar to the following
JHSC inspections posted	X			OHSA sections 8(6), 8(7) and 8(8)
If any MOL orders – are they posted and kept on file			X	OHSA, Sec.59(3)
If MSDSs or SDS are readily available and employees are aware of location?	X			MSDS sheets must be posted in a binder and/or near your H&S board to ensure staff are aware what chemical compounds and emergency procedures are taken if ingested, etc



FIRST AID & INCIDENT REPORTING

ITEM	YES	NO	N/A	COMMENTS
First Aid Kit Available and meets requirements in Regulation 1101	X			Regulation 1101 - Ontario Workplace Safety and Insurance Act (1997) sections 8,9 and 10 all employers are required to have a first aid station and a first aid kit at each business site.
First Aid Inspected at least quarterly	X			Regulation 1101 - Ontario Workplace Safety and Insurance Act (1997) sections 8,9 and 10 all employers are required to have a first aid station and a first aid kit at each business site and must be inspected quarterly
WSIB in case of injury either inside First Aid Kit or near it	X			<p>WSIB - By law, the WSIB's "In Case of Injury" poster (Form 82) must be prominently displayed in every workplace covered by the WSIB.</p> <p>Ensure copy of INCASE OF INJURY is inside each first aid kit or given to staff as a copy incase of injury and emergency</p>
Logbook available in or near First Aid Kit	X			Regulation 1101 - Ontario Workplace Safety and Insurance Act (1997) sections 8,9 and 10 all employers are required to have a first aid station and a first aid kit with a logbook at each business site.



Workers know who to contact for First Aid i.e. names are posted		X		Regulation 1101 - Ontario Workplace Safety and Insurance Act (1997) sections 8,9 and 10 all employers are required to have a first aid station and a first aid kit with logbook at each business site and staff must be notified who the First aid contact is
Incident Reporting – procedure in place (including required notifications)	X			OHSA section 25(2)(h) an employer has an ongoing duty to protect workers, including controlling and managing workplace hazards
Workers are trained on how to report an incident, accident, concern or hazard	X			OHSA section 25(2)(h) an employer has an ongoing duty to protect workers, including controlling and managing workplace hazards. Workers must be trained on reporting hazards to ensure all employees are protected and safe



FIRE PREVENTION

ITEM	YES	NO	N/A	COMMENTS
Fire Extinguishers Available & Accessible	X			Ontario Fire code section 6.2.4.1 (Ontario Protection and Prevention Act, 1997) requires portable fire extinguishers needs to be installed every building, in each hazardous occupancy inside a building and in each hazardous process or operation location outside the building

Fire Extinguishers inspected monthly and date on inspection tag	X			Ontario Fire Code section 6.2.7.2 (Ontario Protection and Prevention Act, 1997 states that portable fire extinguishers must be inspected and maintained in accordance with the standards set by the National Fire Protection Association, known as "NFPA 10, Standard for Portable Fire Extinguishers. Portable fire extinguisher must be regularly maintained and recharged by certified inspectors only and tags must be affixed to every portable fire extinguisher
Workers know where fire extinguishers are and how to use them		X		Ontario Fire code states workers must know where fire extinguishers are located and trained on how to use them - TRAINING REQUIRED FOR ALL STAFF



Fire Exits clear & lights are lit	X			OHS requirement 1910.37(b) states that each exit route must be clearly lit and employees can see exit signs.
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Fire Doors Closed	X			Each exit route door must be free of decorations or signs that obscure the visibility of the exit route door
Fire Alarm Pull Station	X			Fire Alarm pull station must be clearly marked and staff must be aware
Fire System Inspected	X			Ontario Fire Code states all systems must be inspected by a certified inspector and signed off on tag -
Regular Fire Drills occur (at least Annually)		X		<p>Section 2.8.3.2 of the Fire code</p> <p>Yearly fire drills are a legal requirement for all businesses. ... In addition to conducting fire drills, it is also the employer's responsibility to conduct a fire safety assessment of the premises, to inform staff about potential dangers and risks in the</p>

				workplace, train staff and implement fire safety measures Section 2.8.3.2 of the Fire code
Evacuation Plan & Procedure in place	X			Ontario Fire code Regulation 213/07 made under Ontario Fire Protection and Prevention Act 1997 states that annual fire drills be conducted for all staff
Workers Trained on evacuation plan & documented		X		Ontario Fire code Regulation 213/07 made under Ontario Fire Protection and Prevention Act 1997 states that annual fire drills be conducted for all staff and trained on evacuation drills. Documentation should be recorded in your H&S Manual

SECURITY

ITEM	YES	NO	N/A	COMMENTS
Visitor Sign in & Out process			X	
Security Cameras Available		X		

Security Alarm System in Place	X			
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Work Alone Policy for anyone working alone?		X		OHSa states that the business is committed to putting processes and procedures in place to ensure the safety of all workers who are required to work alone
Parking Lot adequate lighting (if applicable)	X			It is essential that the parking area is safe for all employees. Providing ample light ensures the safety of staff
Workplace Violence Assessment & Program in Place? Reviewed Annually	X			OHSa section 32.0.6 to 32.0.7 states a suitable workplace violence and harassment policy and program must be developed and implemented

ELECTRICAL

ITEM	YES	NO	N/A	COMMENTS
Access to Electrical Panels clear & unobstructed i.e. 36 inch (3)	X			
Breakers in panels are labeled & legible	X			
Electrical faceplate / covers are secured	X			
Electrical outlets not overloaded	X			

Electrical cords in good condition – not frayed, are secure	X			
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HOUSEKEEPING /INDOOR AIR QUALITY

ITEM	YES	NO	N/A	COMMENTS
Ventilation systems regularly inspected, tested & maintained	X			It is beneficial to the health of all employees to have your ventilation systems regularly checked.
Air inlets & exhaust free of accumulation of dust and mold	X			
Ceiling covers are in good condition – no signs of water stains	X			
Surface dust levels low	X			
Material neatly and safely piled.	X			
Walk areas are free of obstacles (inside and outside of work area) This includes the parking lot and sidewalks that client may be responsible for	X			
Floor coverings good condition	X			

OFFICE/WORK AREAS

ITEM	YES	NO	N/A	COMMENTS
Office Ergonomics: Chairs adjustable Monitor Height adjustable Workers Trained on proper workstation set up	X			
Office Equipment in good condition	X			
Bookshelves/Cabinets/Racks are secured from tipping over	X			

WORK AREAS – INDUSTRIAL and OTHER

ITEM	YES	NO	N/A	COMMENTS
Industrial racks (i.e. orange) are engineered approved and have load limits placed on racking.			X	All industrial racks must be tethered to the floor and/or wall. There is a section in each rack at the bottom that allows it to be screwed into the floor. Without doing this, it creates a tipping hazard and a potential workplace injury
Material is stacked and stored safely			X	
Racks are in good condition without dents			X	
Manual Material Handling Procedure in place if applicable			X	
Industrial Machine and Equipment are in good condition			X	
Machine Guarding in place if required			X	
Workers Trained on how to use equipment & it is documented			X	All workers need to be trained on equipment. Keep documents of training available to ensure that MOL can readily view if required
Have method to identify & assess, control risks (JSA)			X	

Forklift – drivers trained (within 3 years)			X	
Forklift Certified			X	
Forklift – daily inspection done when used			X	
HAZARDOUS MATERIALS				

Hazardous Materials are stored properly			X	
Gas cylinders stored upright			X	
MSDS or SDS readily available and workers know where they are or how to access them			X	
Workers Trained on how to use Hazardous Materials			X	
Correct Labels are in place for hazardous product i.e. supplier or workplace label			X	
Personal Protective Equipment Provided as required and in good condition			X	
WORKING AT HEIGHTS				
Regular Inspections are done for working at heights equipment i.e. ladders, elevated working platforms			X	
Ladders are stored properly and are secure			X	
Working at Heights equipment in good condition			X	

NOTES

Thank you for allowing me to complete a virtual tour of your office.

Company is working in Shared facility

Having an effective JHSC is part of the social tier. An effective JHSC will ensure a safer workplace for everybody, and it will also send a strong message to all stakeholders that the safety and well-being of all staff are valued by the employer. A joint health and safety committee (JHSC) is a forum for bringing the internal responsibility system into practice. The committee consists of labour and management representatives who meet on a regular basis to deal with health and safety issues. In Ontario, most workplaces with 20 or more workers must have a joint health and safety committee (JHSC), made up of at least one worker and one employer member. The committee's

primary role is to identify workplace health and safety issues and bring them to the attention of the employer.

Under the Occupational Health and Safety Act , at least one worker and one employer on a JHSC must be certified.

Train staff on how to use fire extinguishers. Fire extinguisher training should be a regular and vital part of all employee training. Not only does it make them more capable of fighting a fire, but it also makes them feel like a more important part of the organization and team

1. PULL... Pull the pin. This will also break the tamper seal.
2. AIM... Aim low, pointing the extinguisher nozzle (or its horn or hose) at the base of the fire. ...
3. SQUEEZE... Squeeze the handle to release the extinguishing agent.
4. SWEEP... Sweep from side to side at the base of the fire until it appears to be out.

Do space heaters need to be unplugged?

Never leave space heaters unattended. Turn off your space heater and unplug it before leaving the room or going to bed. Replace older space heaters with newer, safer models.

Even though they are typically small in size, and often touted as 100% efficient, electric space heaters use a lot of electricity. Most space heaters use on average 1,500 Watts of electricity and cost about 15¢ an hour to operate.

In the shared kitchen items sitting on top of the fridge can block the appliance's ventilation, forcing it to work harder to keep its contents cool—and this can be dangerous. Try to minimize or eliminate clutter above the fridge, especially if you're using the space to store any of the items on this list. Items can also become loose and fall when the freezer or fridge door is opened.

Understand and know shelf capacity. Overstacked shelves can cause accidents. Please review your shelf in storage room

