



**Board of Directors  
Agenda for Open Meeting  
Tuesday, April 26, 2022 at 5:30 p.m.**

Join Zoom Meeting

<https://us02web.zoom.us/j/83351392223?pwd=MVVxZDByZTYrbnhXYUZqVWVRVUJkdz09>

Meeting ID: 833 5139 2223

Passcode: 749779

1. **Call to Order**
2. **Land Acknowledgment**
3. **Auditor**, Bobby Turnbull
4. **Agenda - Additions, Deletions, Approval** **Decision**
5. **Conflict of Interest Declarations** **Declaration**
6. **Approval of Minutes** – March 29, 2022 **Decision**
7. **Business Arising from Minutes**
  - a.
8. **Executive Reports**
  - a. Chair's Report
  - b. Treasurer's Report – March 31, 2022 **Decision**
  - c. CEO's Report **Decision**
9. **Committee Reports**
  - a. Policy Review Committee **Decision**
  - b. Nominating Committee - recruitment
10. **New Business**
  - a. Date for MCCSS Program Supervisor to attend Board Meeting **Direction**
11. **Correspondence**
  - a. MCCSS COVID-19 Updates Memo **Information**
12. **In-Camera - Motion to move in-camera** **Decision**
13. **In-Camera Reports** (as appropriate) **Decision**
14. **Adjournment – Motion to adjourn** **Decision**

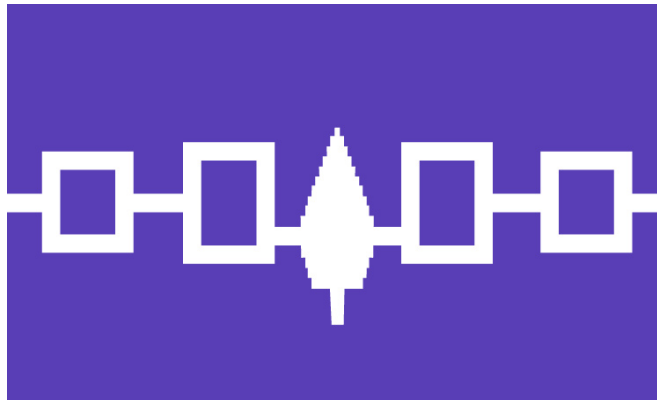
**Next Meeting:** Tuesday, May 24, 2022 at 5:30 p.m.

## Land Acknowledgment

The Six Nations of the Grand River unifies all Haudenosaunee peoples under the Great Tree of Peace. They are currently the only First Nation community that includes all six Haudenosaunee nations. Located along the banks of the Grand River, the Six Nations of the Grand River is the most populous First Nation in Canada. Lands promised under the 1784 Haldimand Treaty are only a fraction (5%) of the land that was promised.

The Six Nations:

- Seneca – Onondowahgah, meaning The People of the Great Hill, also referred to as the Large Dark Door
- Cayuga – Guyohkohnyoh, meaning The People of the Great Swamp
- Onondaga – Onundagaono, meaning The People of the Hills
- Oneida – Onayotekaono, meaning The People of the Upright Stone
- Mohawk – Kanienkahagen, meaning The People of the Flint.
- Tuscarora - Known as Ska-Ruh-Reh, meaning The Shirt Wearing People.



The Ayenwahtha Wampum Belt documents the establishment of the Haudenosaunee Confederacy. From right to left, the belt depicts the territory of the Mohawk, Oneida, Onondaga, Cayuga and Seneca. The Tuscarora became the Confederacy's sixth nation in 1722. The first five nations to join the Confederacy are depicted in white, a colour of peace, over a background of purple, a colour of war. This acknowledges the conflict that predated their confederation. It also articulates how the concept of *kanikonhri:yo* (a good mind) can lead to peace and healing.



**Board of Directors – Open Meeting Minutes  
Tuesday, March 29, 2022  
Zoom Meeting**

**Present**

Chair:	Susan Fitzgerald
Vice Chair & Treasurer:	Kelly Skrzypek
Secretary:	Greg Hackborn
Past Chair:	Mike DeBruyn
Directors:	Brian Konst, Laura Miedema
Chief Executive Officer:	Jane Angus
Lead Service Planning Coordinator:	Alison Hilborn
Executive Assistant:	Cindy Landry (recorder)

**Regrets** - Elizabeth Abraham, Alyssa Brimmer

1. **Call to Order**  
Susan called the meeting to order at 5:30 p.m.
2. **Land Acknowledgment**  
Susan read the land acknowledgment.
3. **Agenda - Additions, Deletions, Approval**  
**Motion:** To approve the agenda.  
Mike and Brian. **Carried.**
4. **Conflict of Interest Declarations**  
None declared
5. **Approval of Minutes – February 22, 2022**  
**Motion:** To accept the minutes from February 22, 2022.  
Brian and Greg. **Carried.**
6. **Business Arising from Minutes**
  - a. Board of Directors' Matrix – Mike, Susan and Brian  
It was concluded that there is nothing to change with our current process.  
Possibly in the future there may be a change if there is ever a pool of applicants.
  - b. Suicide and Threat Prevention Policy revisions  
For your information – revisions made as discussed.
7. **Executive Reports**
  - a. Chair's Report – nothing to report.

b. Treasurer's Report – February 28, 2022

**Motion:** To approve the Treasurer's report as presented.  
Kelly and Greg. **Carried.**

c. CEO's Report

Direction from the Board is required on the following:

1. Do we maintain our COVID-19 Vaccination Policy which outlines the requirement for vaccination reporting to us (the province no longer requires this)?
2. Do we continue to expect disclosure of vaccination status as a condition of employment, similar to Woodview?
3. Do we add a statement to our Pandemic Safety Plan about vaccination being a key defense in the ongoing management of COVID-19 and that staff are strongly recommended to get vaccinated/receive their boosters as soon as they are eligible?

Discussion

Ask for some direction on what other Contact's are doing?

No one has raised any flags to challenge this, so let's leave it.

In the future we may have to put this policy back in place, so leave as is.

This is not a policy about clients requiring vaccination.

Jane to find out what other people are doing and ask Elizabeth if she has an opinion and if we should seek legal counsel? Feeling is that we are not out of the woods yet regarding COVID.

**Motion:** To approve the CEO report as presented.  
Mike and Laura. **Carried.**

**8. Committee Reports**

- a. Policy Review Committee – nothing
- b. Nominating Committee – Directors Terms  
Mike is at the end of his 3 year term in June. We need to actively recruit another board member.

**9. New Business**

- a. 2022-2023 Budget  
**Motion:** To approve the 2022-2023 budget as presented.  
Kelly and Mike. **Carried**

Working on a new format and the direction from the Board is to have the two Ministry columns showing only. They do not need to see the details and the classifications.

**10. Correspondence** – no correspondence

**11. In-Camera**

**Motion:** To move in camera at 6:06 p.m.  
Greg and Kelly. **Carried.**

**12. In-Camera Reports** (as appropriate)


**13. Adjournment**

Meeting adjourned at 6:55 p.m.


**Next Meeting:** Tuesday, April 26, 2022 at 5:30 p.m.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair's Signature

	MINISTRY FUNDS			March 31, 2022
	2020-2021 Actual	2021-2022 Forecast	2021-2022 Actual	Notes
<b>REVENUE</b>				
Access - Children's (MCCSS)	1,200	1,200	1,200	
DS Children's Specialized (MCCSS)	185,315	185,315	185,315	
RPAC (MCCSS)	692	692	692	
Coordinated Service Planning (MCCSS)	261,100	261,100	261,100	
Complex Needs (MCCSS)	65,280	65,280	65,280	
FASD (MCCSS)	135,000	180,000	180,000	
URS	0	138,318	138,160	
Access Intake Service Planning (MOH)	334,093	351,493	351,493	
Service Coordination Process (MOH)	14,566	14,566	14,566	
<b>Sub-Total Ministry Actual Revenue</b>	<b>997,246</b>	<b>1,197,964</b>	<b>1,197,806</b>	
Off-Setting Revenue Info Services (211-\$43,114; Findhelp \$1,404)	44,225	44,518	45,953	
DSO (off-setting revenue in Access Intake Serv Planning)	10,000	10,000	10,000	
COVID-19 Expenses Offsetting Funds from Woodview	84,954	0	0	
Amortization Deferred Capital Contributions	0	0	0	
<b>TOTAL Revenue</b>	<b>1,136,425</b>	<b>1,252,482</b>	<b>1,253,759</b>	
<b>Applied from Projects</b>	<b>10</b>	<b>0</b>	<b>411</b>	
<b>Applied from Unrestricted Funds</b>			<b>202</b>	
<b>EXPENSES</b>				
<b>Salaries</b>	<b>791,578</b>	<b>796,624</b>	<b>861,454</b>	Expenses categories align with new Ministry definitions URS and one-time fiscal
<b>Benefits</b>	<b>122,515</b>	<b>137,193</b>	<b>137,302</b>	
Mandatory Benefits (CPP, EI, EHT)	52,510	53,305	57,851	
Benefits Other (WSIB, group benefits )	70,005	83,888	79,451	
<b>Training (education, meetings, recruitment - staff &amp; board)</b>	<b>8,542</b>	<b>5,500</b>	<b>10,273</b>	
Staff Development	6,977	4,500	7,285	
Staff and Board Expenses	1,565	1,000	2,988	
<b>Transportation &amp; Communication</b>	<b>8,643</b>	<b>7,800</b>	<b>17,372</b>	
Travel	520	500	473	
Communication - (Postage, Bell, Cozzmic)	8,123	7,300	16,899	
<b>Building Occupancy (Lease, Insurance, Repairs &amp; Mtce)</b>	<b>42,683</b>	<b>47,133</b>	<b>46,672</b>	
Lease & Building Maintenance	33,264	33,764	33,610	
Insurance Expense	9,419	13,369	13,062	
<b>Professional/Contracted-out (legal, audit, bank, payroll services, client Translation, consultant fees)</b>	<b>14,705</b>	<b>31,650</b>	<b>54,479</b>	
Audit, Legal, Bank Charges, Payroll, Other	12,735	22,450	23,131	
Purchased Client Services	710	3,200	1,593	
Consulting	1,260	6,000	29,755	URS and financial
<b>Other Program/Service Expenditures (Advert/Promo, Dues/Fees for Memberships, all other not classified)</b>	<b>22,518</b>	<b>27,400</b>	<b>49,442</b>	
Promotion and Membership Fees	4,019.67	3,800	15,773	
IT - Maintenance & DataBase Service (Backup Server,KCL, EMHware)	18,498	23,600	33,669	
<b>Supplies &amp; Equipment</b>	<b>26,746</b>	<b>24,624</b>	<b>77,379</b>	
Furniture and Office Supplies	4,682	7,000	36,747	
IT software & IT equipment & photocopier	22,064	17,624	40,633	
<b>COVID-19 Expenses, offset funds from Woodview \$84,894</b>	<b>98,505</b>	<b>0</b>	<b>0</b>	
Amortization Deferred Capital Contributions	0	0	0	
<b>Contingency</b>	<b>0</b>	<b>174,558</b>	<b>0</b>	
<b>TOTAL Ministry Expenses</b>	<b>1,136,435</b>	<b>1,252,482</b>	<b>1,254,372</b>	
<b>Ministry Surplus (Loss)</b>	<b>0</b>	<b>0</b>	<b>0</b>	

Quick Books Cash Balance*	60,740	
Internally Restricted BHN	16,374	
QuickBooks Balance	44,366	
TD Account Actual Balance	136,918	*
Outstanding Transactions	0	
Cash Balance (TD - Outstanding)*	136,918	
Restricted Lease Funds	26,464	GIC bank statement balance \$26,955.90 (Difference \$491.90)
Unrestricted Funds Balance	13,297	Used \$202 from unrestricted funds to balance.

	PROJECT FUNDS			March 31, 2022
	2020-2021 Actual	2021-2022 Forecast	2021-2022 Actual	Notes
REVENUE				
Your Guide	0	23,240	23,240	
FASD Caregiver Support Group	4,260	4,500	4,500	
Community Project Grants	0	0	0	
Sifton Family Foundation Grant (for Parker's Project)	10,000	0	0	
Other (Accrued, Interest Earned, Staff payments, <b>GIC Interest</b> , Miscellaneous)	3,485	1,000	521	
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	
TOTAL Projects Revenue	17,745	28,740	28,260	
EXPENSES				\$23,239.78 deferred
Your Guide	0	23,240	23,240	
FASD Caregiver Support Group	4,260	4,500	4,592	
Sifton Family Goundation Grant (Parker's Project)	10,000	0	0	
Other Expenses (Staff personal charges i.e.: postage, Miscellaneous)	202	100	18	
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	
Applied to Ministry	10		411	
Total Projects Expenses	14,462	27,840	27,850	
Projects Surplus (Loss)	3,273	900	0	

TOTAL MINISTRY AND PROJECTS			
<b>TOTAL REVENUE</b>	<b>1,154,169</b>	<b>1,281,222</b>	<b>1,282,020</b>
<b>TOTAL EXPENSES</b>	<b>1,150,897</b>	<b>1,280,322</b>	<b>1,282,222</b>
<b>TOTAL Surplus (Loss)</b>	<b>3,273</b>	<b>900</b>	<b>-202</b>

ACCRUED EXPENSES 2021-2022	Amount	Amount Paid	Date Paid
Translation - March 2022	350.00		
Ceridian HR - March 31, 2022	320.00		
Audit Expenses - 2021-2022 Fiscal Year	13,200.00		
Cozzmic - April 15, 2022 for March 2022	181.92		
Bell - April 15, 2022 for March 2022	225.00		
Retro 1% - Salary and benefits 2021-22 Fiscal Year	9,491.00		
Backup Server CTSit	5,269.50		
Group Benefits	444.75		
<b>TOTAL ACCRUED</b>	<b>29,482.17</b>	<b>0.00</b>	

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

<b>HST Refund</b>	6,761.65
<b>HST Paid/yet to be Refunded</b>	15,812.33
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	
<b>Month's Transaction Totals</b>	
Total revenue deposited	243,244.33
Total cheques written	127,620.39
Total withdrawals	320,186.38



**Board of Directors**  
**Report from the Chief Executive Officer - Open Meeting**  
 April 26, 2022

**Communication and Counsel to the Board**

**Q4 Stats** for January 4 – March 31, 2022:

Ministry Reporting Data	2021-22 Q4	2021-22 Q3	2021-22 Q2	2021-22 Q1	2020 - 21	Notes
<b>Total Unique</b> Children & Youth	<b>4,088</b>	3,885	3,599	3,411	3,372	<p>We have served 21% more than we did last fiscal year.</p> <p>CMH Access has increased 40% in the past year.</p> <p>There is a 7% increase in the demand for developmental service Access compared to last fiscal.</p>
Unique <b>CMH Access</b> Target 2,200 / <b>CMH Service Coordination</b>	<b>2,673</b>	2,424	2,174	1,931	1,911	
<i>Direct Hours</i>	<b>2,190</b>	1,651	1,040	635	1,851	
<i>Indirect Hours</i>	<b>7,791</b>	5,825	3,840	2,041	2,944	
<i>Unique Males (CMH)</i>	<b>1,242</b>	1,140	1,032	939	931	
<i>Unique Females</i>	<b>1,388</b>	1,247	1,109	966	959	
<i>Unique Other</i>	<b>43</b>	37	33	26	21	
<i>Unique Aged 0 – 5 (CMH)</i>	<b>242</b>	215	182	150	223	
<i>Unique Aged 6 - 10</i>	<b>791</b>	723	649	596	616	
<i>Unique Aged 11 - 14</i>	<b>785</b>	731	671	609	593	
<i>Unique Aged 15 - 18</i>	<b>855</b>	755	672	576	497	
CMH Eligible for Transition	<b>531</b>	385	199	117	247	
CMH Ended Service	<b>225</b>	167	118	46	151	
Unique <b>Complex</b> Clients Target: 120	<b>197</b>	196	195	190	214	
Unique <b>CDS Access</b> Target 1,200	<b>1,945</b>	1,891	1,834	1,756	1,813	
<i>Direct Hours</i>	<b>628</b>	476	311	184	415	
<i>Indirect Hours</i>	<b>5,355</b>	3,987	2,691	1,440	1,539	
<b>TAY</b> with Developmental Disability	<b>197</b>	201	199	185	264	
<b>RPAC</b> Target 10	<b>0</b>	1	0	1	3	
<b>Additional Access Data</b>						
<b>Total Intakes/Response</b>	<b>1,065</b>	773	501	263	966	<p>96% of intakes/ response are for the mental health sector (CMH &amp; Both). Only 68% of our Access funding is from MOH, plus we contributed an additional \$32,259 in off-setting revenue to our MOH budget to meet service demand.</p> <p>We provided 13% more service coordination supports than last year.</p>
<i>CMH</i>	<b>807</b>	575	365	198	777	
<i>CDS</i>	<b>45</b>	36	25	7	48	
<i>Both</i>	<b>213</b>	162	111	58	141	
<b>Intakes Completed by RC/SC's</b>	<b>772</b>	575	342	198	670	
<b>Total Referrals</b>	<b>1,002</b>	793	494	301	986	
<b>Service Coordination Activity</b>	<b>16,377</b>	12,330	8,145	4,580	14,542	
<b>Case Conferences</b>	<b>31</b>	28	18	12	52	
<i>CMH</i>	<b>11</b>	11	5	2	28	
<i>CDS</i>	<b>0</b>	0	0	0	1	
<i>Both</i>	<b>7</b>	5	4	3	4	
<i>CSP</i>	<b>4</b>	4	4	3	18	
<i>FASD</i>	<b>9</b>	8	5	4	1	
<b>Case Resolution Reviews</b>	<b>47</b>	31	29	18	77	





# Coordinated Service Planning Brant

CSP Ministry Report 1	2021-22 Q4	2021-22 Q3	2021-22 Q2	2021-22 Q1	2020 - 21	Notes Accumulative stats
# New Referrals Target: 60	20	16	10	6	21	83% of the 121 served in 2021-22 have an active Coordinated Service Plan on file/
# New SPC FTE Target: 0	0	0	0	0	0	
Total Coordinated Service Plans	100	89	89	80	127	
Total SPC FTE	6.1	6.1	6.1	6.1	6.1	
Total Waiting for CSP Target: 0	4	5	5	1	3	
Total Days Waiting Target: 0	584	489	410	90	126	

CSP Ministry Report 2	2021-22 Q4	2021-22 Q3	2021-22 Q2	2021-22	Notes Accumulative stats
# children/youth Active in CSP	121	124	113	141	
# New Referrals for CSP	20	16	10	21	
# New Referrals by Source Type:					
Child / Family	3	1	0	6	Usually reporting will be Q2 & Q4.  Data in red is provided by the CSP Providers and not available at the time of this report.
School / Educator	0	0	0	1	
Physician	1	1	0	0	
Other Health Provider	0	0	0	3	
Children's Aid Society	1	1	1	0	
Indigenous Child Well Being Society	0	0	0	0	
Other Indigenous Organization	1	1	1	0	
Other Children's Service Agency	14	12	8	11	
Out-of-Area Coordinating Agency	0	0	0	0	
Other Source	0	0	0	0	
# children/youth starting CSP	12	10	8	10	
# Days: Referral to 1 <sup>st</sup> SPC mtg.	301	230	138	478	
# Times Child/Family met with SPC		1,868	1,242	2,168	
Time spent by SPCs in FTE		11.4	3.78	3.45	
SPC's Direct Service Hours		1,206	775	2,252	
SPC's Indirect Service Hours		3,751	2,511	3,747	
# Leaving CSP due to Discharge	10	9	7	19	
Length Service for Discharged (days)	12,842	11,566	8,613	17,870	
# Leaving Active CSP: Inactive	11	8	4	14	
Age when Began CSP this Fiscal:					
Age 0-3	0	0	0	0	
Age 4-6	3	2	1	2	
Age 7-9	2	3	2	0	
Age 10 to 12	2	2	2	0	
Age 13-15	4	3	3	3	
Age 16-18	0	0	0	5	
Age 19-21	0	0	0	0	
# Waiting for CSP	4	5	5	3	

FASD Service Coordination						
	Q4	Q3	Q2	Q1	2020-21	Notes
# Referrals	17	14	9	4	8	Referrals are doubled compared to the previous fiscal year.
# Served Target 60	268	165	140	89	249	
# Active on Caseloads	47	43	39	34	30	
# FASD Capacity Building	24	16	13	7	17	
# Capacity Building Participants	178	122	101	54	219	
Direct Hours	643	430.75	276	140.25	171	
Indirect Hours	1,752	1,314.5	910.5	491	1,128	
# Discharged	14	10	6	1	0	
# Waiting Target 0	1	0	0	0	0	
Wait Time Target 0	8	0	0	0	0	
# Service Plans	18	9	8	6	4	

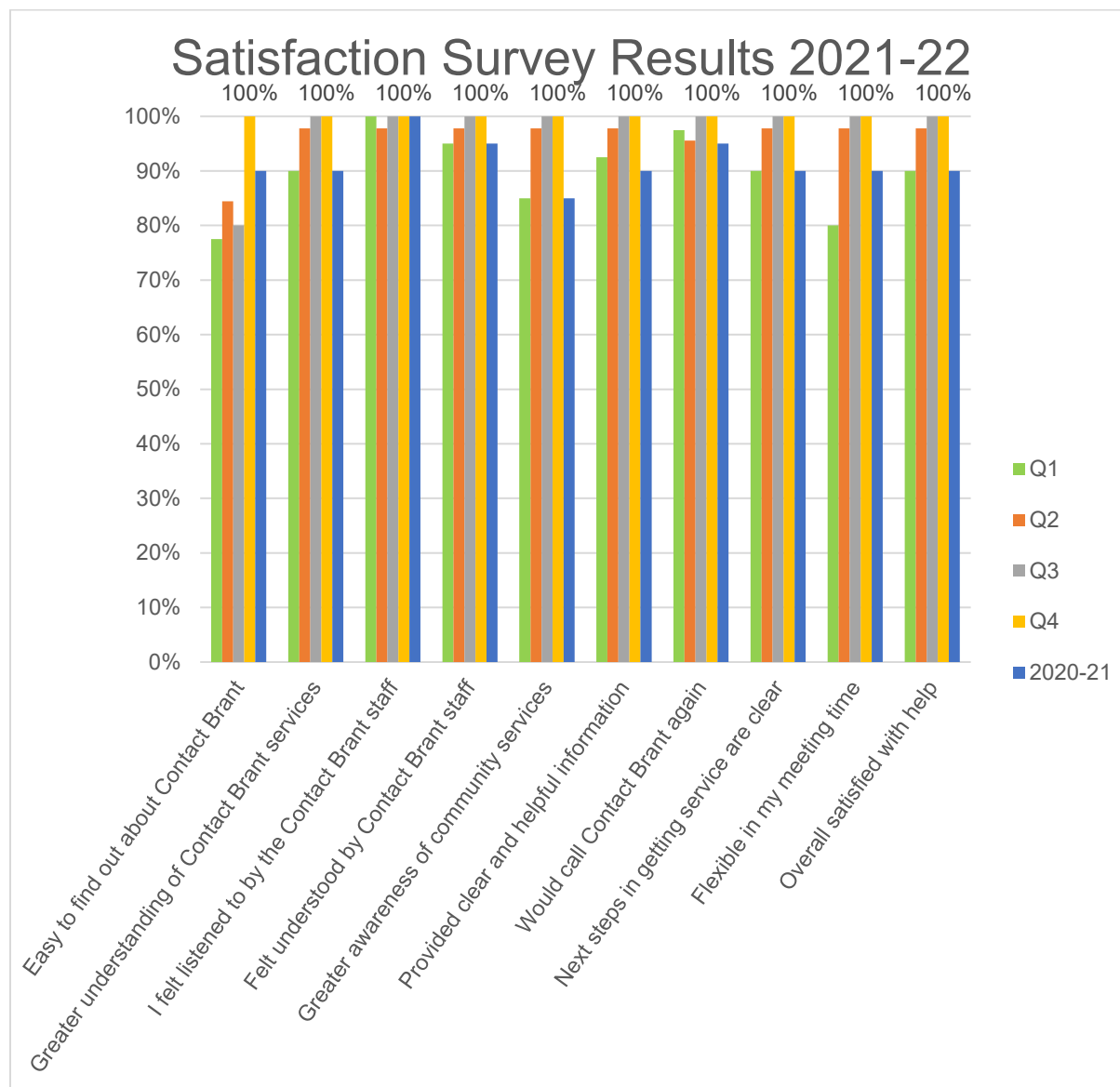


www.info-bhn.ca	2021-22 Q4	2021-22 Q3	2021-22 Q2	2021-22 Q1	2020-21	Notes
Total Records	2,442	2,476	2,550	2,561	2,576	Only 75% of our records are now used by 211. We have 95% of the number of records we had a year ago; fewer records are primarily caused by closures of services due to COVID.
- Brant Records	1,266	1,284	1,294	1,301	1,306	
- HN Records	1,080	1,095	1,103	1,104	1,113	
- 211 Records	1,825	1,852	1,865	1,881	1,893	
Updates Completed	2,107	1,443	1,112	572	2,223	Public Views are 12% lower than last year. Unique Viewers are 99% of last fiscal year's total. Unique Viewers are 1% lower than last year.
New Records Added	31	21	18	8	27	
Modified Records	2,398	1,673	1,287	696	3,024	
Deleted Records	102	61	42	23	42	
Public Views (YTD)	1,182,497	901,508	678,158	362,435	1,350,904	Social media promotion has been consistent this year and followers are increasing. Our website Views have increased 42%. Revised website information will be provided at our meeting.
Unique Viewers (YTD)	185,218	140,945	94,374	44,872	187,829	
Social Media						
# Twitter Followers - CB	1,196	1,178	1,165	1,155	1,141	
# Twitter Followers Info-BHN	85	71	62	53		
# Facebook Followers	599	576	511	487	446	
# Instagram Followers	530	504	491	476	402	
www.contactbrant.net Views	16,846	11,414	7,414	4,353	11,815	
CB Website Unique Viewers	6,338	4,146	2,550	1,337		

### Information

## Customer Service

Contact Brant requests feedback from clients using the Quality Satisfaction Survey developed with the Centre of Excellence. CSP and FASD use Ministry-directed MPOC surveys – the MPOC reports are provided to us annually.



Continue to see lower than usual scores for “Easy to find out about Contact Brant”.

Quality Satisfaction Survey (QSS) results						Notes
QSS Distribution	2021-22 Q4	2021-22 Q3	2021-22 Q2	2021-22 Q1	2020-21	
Response Rate	6%	5%	8%	6%	6%	
QSS Responses	28	19	17	8	24	
QSS Distributed	493	358	209	143	376	
Ratio Distribution to Intakes	64%	62%	61%	72%	56%	

## Quality Satisfaction Survey Client Comments

### Q4: January – March 2022

My experience with Contact Brant was a good experience.

The staff are very supportive and non-judgmental. I think they go above and beyond to listen to your concerns and help point you in the right direction. Thank you

Everything was perfect.

### Information

#### Customer Thermometer Survey

To capture more frequent feedback, we implemented a survey to gather additional feedback from clients. Email signatures include a survey through Customer Thermometer:

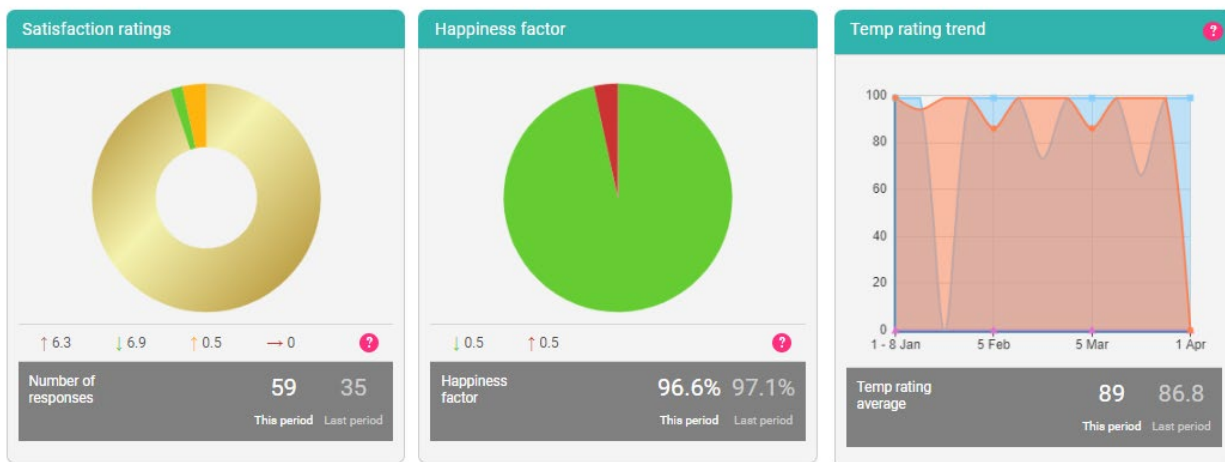
“How was the service you received from Contact Brant?”



Customer Thermometer 2021-22				
	Q4	Q3	Q2	Q1
Number of Responses	59	35	36	27
<b>Satisfaction Ratings</b>				
• Great	56	31	32	26
• Good	1	4	1	-
• OK	2	0	1	-
• Poor	0	0	2	1
<b>Happiness Factor</b>	<b>96.6%</b>	100%	91.7%	96.3%

#### Customer Thermometer Comments:

- First impression was great
- The service you provided for my daughter is amazing. Great people. Can't wait to hear from you



### Information

## French Language Services

In our revised MCCSS Transfer Payment Agreement, the following section outlines expectations for the provision of French Language Services (FLS) for agencies that operate in designated French-language areas. Both Hamilton and Niagara are FLS designated communities, and now that we are a regional service, we need to work towards meeting expectations. Scott, our MCCSS Program Supervisor, is aware that we will be working towards meeting this new expectation.

FLSA Designated Public Service Agency. If the Recipient is an entity designated under the FLSA, it will, at the time of budget submission, submit a compliance attestation in the form provided by the Province affirming that it meets the following criteria:

- a) permanency and quality of service;
- b) adequacy of access to service and principle of active offer;
- c) **effective representation of Francophones on its Board of Directors/Governing Body and its committees;**
- d) **effective representation of Francophones at management levels within the Recipient's organization; and**
- e) **accountability stated in the by-laws and administrative policies of the Recipient, of the Board of Directors/Governing Body and senior management for French language services.**

We specifically advertise for new staff positions to be bi-lingual or multi-lingual; however, at this time we have not secured qualified staff that could bring this asset to our agency.

### **Information**

## Follow-up re COVID-19 Vaccination Policy

I will let Elizabeth speak to her thoughts more fully at the Board meeting; however I will summarize her key point: it is a complicated situation that does not have a clear answer. She was unable to find any information pertaining to requiring proof of vaccination or medical exemption for potential new hires.

The following information was collected from other agencies regarding whether they are maintaining their COVID-19 Vaccination Policy that was originally directed by the province, as well as whether they have proof of vaccination or medical exemption as a condition of employment:

<b>COVID-19 Vaccination Policy</b>	<b>Maintaining Policy</b>	<b>Condition of Employment</b>
Agency 1	Yes, for now	No, but interview explores face to face services
Agency 2	Yes, for now	Yes
Agency 3	Yes, for now	Yes
Agency 4	No	No

### **Information**

### Follow-up re Vacation Policy

Following is information gathered from other agencies which reflects similar vacation increases based on length of service. Negotiating vacation appears to be an acceptable procedure; one agency indicated that subsequent vacation increments follow policy.

Vacation Policy	Contact Brant	Agency 1	Agency 2	Human Resource Director hcamag.com	MaRS learn.marsdd.com
Eligibility	3 weeks for 1 <sup>st</sup> 3 years; 4 weeks after 3 years; 5 weeks after 9 years; 6 weeks after 15 years	3 wks for 1 <sup>st</sup> 3 years; 4 weeks after 3 years; 5 weeks after 10 years	3 wks for 1 <sup>st</sup> 3 years; 4 weeks after 3 years; 5 weeks after 10 years	Canadian workers receive an average of 10 paid vacation days/year	62% of companies offer 3 weeks vacation to new employees; 82% provide increasing vacation with length of service
Flexibility on eligibility	No statement	ED has the discretion to allocate vacation differentially depending on an individual employee's circumstances.			It is quite common to negotiate an extra week for certain positions or skills or recognize experience
Varied entitlement by position	No	No	No		61% of ON employers provide 4 weeks to new executives
Additional statements to consider		-Reserve the right to schedule vacations or a company-wide vacation shutdown period -The manager may limit the number of employees who can take vacation at the same time.	Currently revising policy and will send once completed	Canada is among the shortest vacations in the world (2 <sup>nd</sup> last). France 30 days, Britain 28, Spain 39, Germany 33, Sweden 36, Norway 35 days, New Zealand 31	

**Recommendation:** Revise the Vacation Policy to include the CEO having the discretion to allocate vacation differentially at hire depending on position, skills, and/or experience.

### **Decision**

### **Urgent Response Service**

The MCCSS Service Description for URS is attached.

### **Information**

## Services Delivered: OAP - Urgent Response Service

### Legislation: Child, Youth and Family Services Act (CYFSA), 2017

#### Service Objective:

The goal of the OAP Urgent Response Service (URS) is to respond rapidly to a child or youth's specific, identified need to prevent further escalation or risk of harm to a child or youth, other people or property.

The OAP URS is not intended to replace existing emergency or crisis supports including local crisis services or hospital emergency room.

#### Service Description:

As part of the needs-based Ontario Autism Program, the Urgent Response Service will be available for all children and youth registered in the OAP who meet defined criteria identified through a URS intake process established by the ministry.

Where it is determined that a child or youth is not eligible for the OAP URS, a family will be supported through the OAP URS to access appropriate local supports and services within and outside of the OAP.

Where it is determined that a child or youth is eligible for the OAP URS, a URS service plan for the child or youth will be established, in consultation with a family. The establishment of the URS service plan may also involve collaboration with other relevant professionals (e.g., OAP Care Coordinator, local service providers and other professionals involved with the child and family and their immediate support system), as required. The URS service plan will provide time-limited services and supports that respond rapidly to a specific, identified need for up to 12 weeks to prevent further escalation or risk of harm to the child or youth, other people or property.

After 6 weeks, a child or youth's progress will be reviewed, in consultation with a family, and any required changes to their URS service plan will be made. A review of the child or youth's progress will be completed again prior to 12 weeks to prepare to transition and support a family to identify and access the appropriate local supports and services within and outside the OAP after discharge.

Through cross-sectoral partnerships and multi-disciplinary collaboration facilitated by the OAP Independent Intake Organization (IIO), regional service networks will be developed under the OAP that will provide a coordinated and integrated service experience for children and youth registered in the OAP as well as their caregivers. The OAP URS will be a key component of the regional service network in each MCCSS defined region. URS lead organizations will be expected to work with the IIO to achieve the broader OAP program goals and to track clients accessing the OAP URS using client ID(s) approved by the ministry. URS lead organizations across the province are also expected to work together to build a community of practice to support the consistent provision of urgent response services in each region that meet the programs guiding principles and objectives.

**Program/Service Features:**

The OAP URS are focused on preventing further escalation or a risk of harm to a child or youth, other people or property identified through the presentation of one or more of the following high-risk factors at a level to qualify the child or youth as having an urgent need, but not in crisis or an emergency:

- Suicidal Thoughts or Behaviour
- Violent Thinking
- Fire Starting
- Cruelty to Animals
- Risk of Exploitation
- Self-Injurious Behaviour
- Aggression
- Inappropriate Sexual Behaviour
- Flight Risk
- Property Destruction

Where it is determined that a child or youth is eligible for the OAP URS, a URS service plan for the child or youth will be established. The URS service plan may include one or more of the following urgent response services:

- Short-term, interdisciplinary consultation with a child/youth's intervention team and/or family and/or educator(s);
- Respite up to a maximum number of hours and a maximum duration;
- Service navigation to existing services within and outside of the OAP; and/or,
- Direct support to the family and/or professionals involved to implement behaviour intervention and/or therapy techniques with the child/youth.

The ministry has entered into time-limited Transfer Payment Agreements with lead organizations in each MCCSS defined region that are accountable to the ministry for managing and coordinating the delivery of the OAP URS to support the individual needs of children and youth on the autism spectrum, in collaboration with local service providers.

**Reporting Requirements**

*The following service data will be reported on at an Interim and Final stage.  
Please refer to your final agreement for report back due dates and targets.*

Service Data Name	Definition
OAP - Urgent Response Service: Ministry-Funded Agency Expenditures	Total Ministry-funded expenses for the Transfer Payment Recipient to administer and/or deliver this service in the reporting year (cumulative)



OAP Urgent Response Service: # of unique children/youth served	Total number of children/youth eligible for OAP Urgent Response Service (URS) who accessed an OAP URS service through a 12 week service plan
OAP Urgent Response Service: # of FTE OAP Urgent Response Service Coordinators	Total # of FTE OAP Urgent Response Service Coordinators in a region

In addition, OAP URS lead organizations shall complete an annual evaluation report which is due at the end of Q4 each fiscal year (reporting template and dates will be provided separately). OAP URS lead organizations shall also provide to the ministry, from time to time, additional information, in addition to the service data elements identified in the Reporting Requirements, as required for the ministry to fulfill its provincial responsibilities.



**Policy Review Committee  
Recommendations to the Board  
April 26, 2022**

At the March 29, 2022 meeting, the Board recommended raising the executive limit to \$9,999. Two policies require revisions to address this recommendation:

- The governance policy, Financial Conditions and Activities
- The operational policy, Purchasing

**Recommendation:** Approve the revised Financial Conditions and Activities Policy and the Purchasing Policy as presented.

***Decision***

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## **POLICY EB7: FINANCIAL CONDITIONS AND ACTIVITIES**

**CATEGORY:** Executive Boundaries

**ADOPTED:** December 1999

**REVISED:** April 2022  
May 2013

**Page:** 1 of 1

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### **POLICY**

**The Chief Executive Officer must protect the financial soundness of Contact Brant and operate the organization in a sound and prudent fiscal manner, based on the Board of Director's priorities which have been established in policies and within approved budgets.**

### **PROCEDURE**

1. The Chief Executive Officer will not expend more funds than will be received in the fiscal year or indebt the organization; the Chief Executive Officer will not incur an overall negative cash position.
2. The Chief Executive Officer will not fail to settle payroll and debts in a timely manner.
3. The Chief Executive Officer will obtain comparative pricing and apply prudent protection against conflict of interest in any purchase; the Chief Executive Officer will consider local services when all other comparators are equal.
4. The Chief Executive Officer will receive Board approval prior to making any single purchase in an amount greater than **\$9,999.00 \$5,000**; the Chief Executive Officer will not split orders to avoid exceeding authorized limits.
5. The Chief Executive Officer will receive Board approval for any schedule of monthly withdrawals for purchases, any transfers between bank accounts, or any other transactions where a cheque requiring two signatures would not be utilized.
6. The Chief Executive Officer will not acquire, encumber or dispose of real property; the Chief Executive Officer will not dispose of assets with a net market value greater than **\$9,999.00 \$5,000** without Board of Directors approval.
7. The Chief Executive Officer will not place funds into any high risk investments.
8. The Chief Executive Officer will ensure an annual external audit is completed.
9. The Board of Directors will annually examine the procedures established to ensure compliance with the financial planning policy and review the need for direct inspection.



## POLICY AND PROCEDURE MANUAL

**SECTION: Financial**

**POLICY: FI 05**

**REVISED:** April 2022  
November 2014

**PAGE: 1 of 3**

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### PURCHASING

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#### **PREAMBLE**

The *Broader Public Sector Accountability Act, 2010* established rules for procurement for designated organizations which include hospitals, school boards, colleges, universities, community care access centres, children's aid societies and organizations that receive more than \$10 million in funding from the Ontario government. Organizations that receive funding from the Ontario government and that are not designated by the Act are encouraged to use the Procurement Guideline to improve openness, fairness and transparency during the procurement process.

Principles embodied in the BPS Procurement Directive:

- Accountability - Organizations are accountable for the results of their procurement decisions and the appropriateness of the processes.
- Transparency - Organizations must be transparent to all stakeholders. Wherever possible, stakeholders must have equal access to information on procurement opportunities, processes and results.
- Value for Money - Organizations must maximize the value they receive from the use of public funds. A value-for-money approach aims to deliver goods and services at the optimum total lifecycle cost.
- Quality Service Delivery - Organizations, providing front-line services must receive the right product, at the right time, in the right place.
- Process Standardization - Standardized processes remove inefficiencies and create a level playing field.

#### **POLICY**

**The Chief Executive Officer will ensure that appropriate purchasing policies and procedures are in place to manage procurement contracts fairly and effectively, ensure purchases are fiscally responsible, and purchases are made so the organization has appropriate equipment and resources to operate.**

**The Chief Executive Officer is authorized to make purchases of up to \$9,999 \$5,000 in accordance with the Executive Boundaries established by the Board of Directors.**

#### **PROCEDURE**

1. All purchases must be pre-approved by the Chief Executive Officer. The CEO must plan adequately for all purchases through budget development with the Board, or financial year-to-date reports and planning of expenditures.

- a) Depreciation of assets needs to be considered; such items as computer hardware and software should have a plan for renewal every 3 years. Annually a physical inspection and inventory will be taken of all fixed assets by the Chief Executive Officer and Executive Assistant, and a plan for purchasing will be developed with the budget based on previous years experience and identified needs.
  - b) The Executive Assistant will keep a record of major assets including all electronic equipment, office furniture items, etc.
2. All activities involved in the purchase of goods and services should be fair and transparent, and for the purpose of acquiring the best value for money. Employees will obtain comparative pricing and apply prudent protection against conflict of interest in any purchase.
- a) All qualified vendors will be provided with fair access to the purchase of goods and services. The selection of a supplier will be based upon the requirements of the agency, price, quality of the goods or services, the level of service, alternatives, references, and the timing of the delivery of the item.
3. Segregation of at least three of the five functional procurement roles will occur: Requisition (by any employee), Budgeting (CEO), Commitment (CEO), Receipt (Executive Assistant), and Payment (Executive Assistant with signatures by CEO and Board of Directors). Procurement best practices should guide decisions on purchases:



- i. Employee identifies the need for a good or service to the CEO.
- ii. CEO verifies the need and the requirements for this good/service. Do we already have it in the organization or can the requirement be met using existing resources?
- iii. The CEO identifies the procurement method (informal/routine purchases, invitational, open competitive, Vendor of Record) based on the total cost and market availability. The CEO requests an estimate for the good/services, and verifies there is money in the budget for the purchase. Estimates need to include total cost including taxes, shopping, installation, warranty, maintenance and service, disposal, consulting or training, or changes required to existing products based on new good or service. If funds are not there, how can we plan for this purchase?
- iv. The employee assigned by the CEO will complete the purchase. Wherever possible, purchases are made through accounts that will invoice the agency; otherwise employees will use Petty Cash, or pay for the approved purchase and submit for reimbursement.
- v. In some instances a written agreement may need to be drafted and approved by the CEO.
- vi. The Executive Assistant will confirm that the goods/services that we pay for have been received.

- vii. The Executive Assistant will create the cheque to pay the invoice; the cheque will be signed by two approved signatories, usually the CEO and an Executive member of the Board of Directors.
- 4. When a major purchase (over \$10,000) is considered, a minimum of 3 suppliers will be invited to submit a bid (Request for Proposal); these will be maintained in a file by the Executive Assistant.
  - a) Bid submission date and closing time must be clearly stated in competitive procurement documents; the closing date of a competitive procurement process must be on a normal working day (Monday to Friday, excluding provincial and national holidays). Submissions that are delivered after the closing time must be returned unopened.
  - b) The Chief Executive Officer will make a recommendation to the Board, with the rationale based on an evaluation matrix, for the choice of provider; the decision of the Board of Directors will be final.
  - c) The evaluation matrix will include the mandatory criteria identified in the request for bids, total cost, quality, transition costs, servicing, experience and expertise, and capacity of supplier to meet procurement requirements.
  - d) The market for potential vendors will be searched through networking with other organizations, internet search and checking references.
- 5. Comparative pricing will be completed for routine purchases wherever possible. Use of the provincial Vendors of Record will be considered as part of the comparative pricing process, as well as supplier catalogues/websites.
- 6. Local services will be considered when all other comparators are equal.

April 12, 2022

**MEMORANDUM TO:** Ministry of Children, Community and Social Services  
(MCCSS) service providers and/or licensees

**FROM:** Linda Chihab  
Director, West Region

**SUBJECT:** MCCSS COVID-19 Updates – April 12, 2022

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We are expecting case counts to ebb and flow in Ontario over coming months as we contend with new variants that may present new challenges even for fully vaccinated staff and residents.

As the remaining provincially mandated public health measures are scheduled to be lifted at the end of this month and the shift to reliance on personal responsibility and choice in public settings continues, people in high-risk settings will continue to face heightened vulnerabilities to COVID-19 and also contribute to staffing challenges. **It is critical that MCCSS-funded and licensed service providers remain vigilant in the risk mitigation efforts and measures that have proven effective throughout the pandemic:**

- Vaccination
- Active screening
- Surveillance testing
- Universal masking for source control
- Personal protective equipment
- Physical distancing
- Cleaning and disinfection
- Ventilation and air quality control – CO<sub>2</sub> monitors and HEPA filters
- Early return to work strategies

To this end, I am writing to share with you updates and reminders on the following measures and supports for service providers:

1) COVID-19 Guidelines for MCCSS-funded and/or Licensed Congregate Living Settings (April 2022)

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- 2) Revised interim direction for MCCSS-Funded and/or Licensed Congregate Living Settings (April 2022)
- 3) Resident Vaccination Survey – April reporting deadline
- 4) Reminders for Adult Developmental Services Day Support Programs
- 5) Personal Protective Equipment (PPE) Supply
- 6) Extension of the Provincial Antigen Screening Program (PASP)
- 7) Reminders re Ventilation and Air Quality
- 8) Ministry of Health Guidance Updates
- 9) General Reminder

## 1) COVID-19 Guidelines for MCCSS-funded and/or Licensed Congregate Living Settings (April 2022)

MCCSS has consulted with the Ministry of Health (MOH) and the Office of the Chief Medical Officer of Health (OCMOH) on updates to our ministry-specific COVID-19-related measures for congregate living settings (CLSs) to reflect the latest realities of the pandemic.

The attached **COVID-19 Guidelines for MCCSS-funded and/or Licensed Congregate Living Settings (April 2022)** aligns closely with MOH's recently updated [COVID-19 Guidance: Congregate Living for Vulnerable Populations](#), which supports local public health units (PHUs) in their COVID-19 response in congregate living settings. The MCCSS guideline also includes some modified and/or additional requirements for MCCSS-funded and/or licensed CLSs that the Ministry has deemed appropriate.

Substantive updates to the guidance have been flagged within as well as summarized in an appendix for ease of reference.

## 2) Revised Interim Direction for Congregate Living Settings

Rapid antigen testing continues to be proven to support reducing the risk of spreading of COVID-19.

In response to the current COVID-19 surge, service providers are required to increase asymptomatic rapid antigen screening for all staff, students and volunteers who enter the setting, regardless of vaccination status, to **3 times per week (7-day period) no later than April 15, 2022**.

### *Reminder*

While service providers should continue to fully utilize staffing strategies in their continuity of operations plan to avoid and mitigate situations of staffing shortages, the MCCSS interim direction references to the [Management of Cases and Contacts of](#)

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[COVID-19 in Ontario](#). Service providers should also work with the local PHU on additional staffing risk management.

*For reference*

**[April 2022 INTERIM DIRECTION and the COVID-19 Guidance for MCCSS-funded and/or Licensed Congregate Living Settings](#) (attached).**

**[April 2022 INTERIM DIRECTION –Youth Justice Services Custody and Detention Facilities](#) (attached) and the [Guidance to Youth Justice Facilities](#).**

### **3) Resident Vaccination Survey – next reporting deadline: May 13, 2022**

Please provide an update on the vaccination status for current/active residents (and Supported Independent Living clients) during the April 1-30, 2022 reporting period **by May 13, 2022** using the [Resident Survey](#).

The survey again asks for updates on the status of booster doses for those who were already fully vaccinated. Please continue to promote the critical importance of vaccination, including medically recommended boosters, to people participating, living and working in your service settings. Current evidence shows that a third dose restores protection from Omicron infection to between 50 and 70%.

Information related to fourth doses for residents will be requested and added to the survey for future reporting periods.

Note: Service providers will not be asked to report staff, student, and volunteer vaccination rates until further notice.

### **4) Reminders for Adult Developmental Services (DS) Day Support Programs**

Adult developmental services community participation support (day support) programs are reminded that the following COVID-19 preventative measures remain in effect:

#### *Surveillance Testing*

In addition to maintaining COVID-19 screening protocols, and subject to availability of rapid antigen tests, adult developmental services day support settings that are currently providing in-person congregate programs are required to test:

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- All staff/students/volunteers (regardless of vaccination status). The frequency of testing will **increase to a required 3 times per week (7-day period)** no later than April 15, 2022.
- Visitors prior to entry to the setting (regardless of vaccination status) unless the visitor presented a negative rapid antigen screening result at the same location the day before.

Program participants are not required to complete a test.

### *Universal Masking for Staff*

Regardless of vaccination status, all staff in MCCSS-funded day supports programs must, at minimum wear a medical (surgical/procedure) mask for source control at all times except when:

- Eating and drinking (and maintaining physical distance of at least 2 metres / 6 feet from others).
- Alone outside.
- Alone in an office.

“At all times” includes:

- When travelling in a vehicle for work purposes and when accompanying a participant in the community.

Service providers should determine the appropriate PPE for staff based on the organization’s risk assessment and factors specific to the staff role/function, including risk of infection including reviewing the [Public Health Ontario \(PHO\) technical brief](#) to determine if they fall within the scope of the interim recommendations on the usage of N95 respirators.

## **5) Personal Protective Equipment (PPE) Supply**

The primary access to PPE supplies continues to be through weekly completion of the non-health Critical Supplies and Equipment (CSE) survey. By completing the weekly CSE survey, MCCSS is able to automatically provide inventory top up as needed based on submitted survey data.

Beginning the week of April 4, service providers will now be provided with a 4-8 week supply of core PPE items based on their reported inventory and PPE consumption levels via the Critical Supplies and Equipment (CSE) survey. This is a proactive measure to ensure that service providers have ample supply of PPE on hand to prevent outbreaks, and keep staff, residents, and visitors safe.

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## 6) Extension of the Provincial Antigen Screening Program (PASP)

MOH has confirmed that the Provincial Antigen Screening Program (PASP) has been extended until at least July 31, 2022. Participating organization can continue to order rapid antigen tests through existing distribution channels.

Furthermore, access to antigen tests for highest-risk settings, including MCCSS congregate living settings, as well as Indigenous communities and organizations may continue to be prioritized beyond July 31, 2022 based on demand and in alignment with guidance from the Office of the Chief Medical Officer of Health.

MCCSS continues to accept new applications for the PASP. Visit the [Ontario Together Portal](#) to submit an application.

As part of the program extension, current PASP participants will receive an updated program agreement. The new agreement does not require a countersignature by participating organizations. Any organization that continues to order antigen tests through the PASP is agreeing to continue to comply with all program Terms and Conditions described in the updated agreement, including an amended termination clause. The amended termination clause will allow MOH to terminate the program upon written notice to participating organizations.

## 7) Reminders re Ventilation and Air Flow

Service providers are encouraged to leverage resources around air quality controls measures that can be taken to help reduce the spread of COVID-19.

Ventilation includes:

- dilution – opening windows and doors, increasing air exchange rates in air handling (HVAC) systems
- filtration – using filters to remove viral particles from the air

The risk of COVID-19 transmission is higher in more enclosed and crowded spaces. Good ventilation can decrease the concentration of aerosols that may be suspended in the air indoors and help reduce the chance of COVID-19 spread.

Enhancing outdoor air ventilation and/or enhancing filtration where possible and having a well-functioning HVAC system should complement other public health measures by removing and diluting virus from indoor air, thereby lowering exposure to COVID-19.

Assessment and Heating, Ventilation and Air Conditioning (HVAC) Systems in Buildings and COVID-19 adjustments to a HVAC system are best managed by a professional, as there are usually building specific issues to consider. The American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) provides guidance on COVID-19 which a HVAC professional can help apply to specific building scenarios.

Additional steps you can take:

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- use portable air cleaners
  - take periodic breaks in which occupants leave the room to air out the space
  - reduce occupancy
  - keep windows and doors open as much as possible, even just slightly in colder weather
  - adjust HVAC systems to increase the amount of fresh air and reduce recirculation
  - continue ventilation and air exchange after regular business hours
  - run exhaust fans at full capacity (for example in bathrooms and kitchens)
  - if fans are needed for temperature control, make sure you are using them [as safely as possible](#)
  - use available outdoor space whenever possible (for example, for meetings, breaks, client interactions such as curbside pick-up)
  - consider going beyond minimum standards if possible
  - carbon dioxide ([CO<sub>2</sub>](#)) sensors may be used to help identify areas with poor ventilation (they cannot identify the presence or absence of COVID-19 in the air).

During pandemic conditions, it is beneficial to keep indoor air as close to “fresh” outdoor conditions as possible, where outdoor air generally has a CO<sub>2</sub> concentration < 450 ppm. When CO<sub>2</sub> levels are consistently increasing over time, this is a strong signal that ventilation is inadequate for the number of occupants and/or their activities. However, because of the need to heat or cool air to keep the indoors comfortable, 100% fresh air is not always possible, and some amount of CO<sub>2</sub> buildup is unavoidable. Notably, the US CDC and REHVA have reduced their recommended indoor CO<sub>2</sub> levels to 800 ppm during pandemic conditions.<sup>1</sup>

Ventilation improvements should not be used instead of other control measures, such as source control masking and other controls should not be used instead of ventilation – all control measures lower risk and should be used together. The use of other control measures is particularly important in areas where it is difficult to improve ventilation.

### *Distribution of CO<sub>2</sub> Monitors*

As indicated in previous communications, MCCSS is making CO<sub>2</sub> monitors available to support improved air quality.

CO<sub>2</sub> monitors are now in stock, and available to order on the [MCCSS PPE web portal](#) through the regular process and available while supplies last. Orders may be placed for up to 5 units per site location. Orders may be combined with orders for regular PPE items to be shipped directly.

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<sup>1</sup> National Collaborating Centre for Environmental Health

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If your organization would like to request a large order for multiple sites, you may contact the PPE Team and make a special request. Please contact [MCCSSPPESupplies@ontario.ca](mailto:MCCSSPPESupplies@ontario.ca) for further information.

#### *Distribution of Replacement HEPA Filters*

MCCSS is continuing to ship replacement filters to the sites that received HEPA units between September 2021 and January 2022, with all shipments expected to be completed within the next two weeks.

### **8) Updates to Ministry of Health Guidance**

MOH has released updated versions of the following COVID-19 guidance:

[COVID-19 Guidance: Congregate Living for Vulnerable Populations](#): provides guidance to local public health units (PHU) to support their COVID-19 response in congregate living settings (CLSs) and, for the first time, activities that operate at congregate living settings for those in the community (i.e. day programs).

[Management of Cases and Contacts of COVID-19 in Ontario](#): Replaces the [COVID-19 Interim Guidance: Omicron Surge Management of Staffing in Highest-Risk Settings](#) and [COVID-19 Integrated Testing & Case, Contact and Outbreak Management Interim Guidance: Omicron Surge](#).

### **9) General Reminder**

Congregate living settings serve as homes for residents and a workplace for staff, and protective measures reflect the difference between residents not having a choice on who enters their home to provide service and their own dignity in deciding to take risks in the community.

Continued diligence related to getting vaccines and boosters, hand washing, physical distancing, choosing to use a mask and personal protective equipment, actively screening for symptoms, and staying home when sick continues to be critical in our daily lives, regardless of one's vaccination status.

I have every confidence that staff will continue to show this diligence in the workplace. While direct interactions connected to the workplace and congregate settings are key, what we do in our personal lives may also contribute directly to infection risks for those in our high-risk settings. All Ontarians including staff and people supported are strongly encouraged to continue to adhere to practices in their personal life that help stop the spread of COVID-19.

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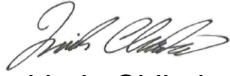
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For questions or concerns related to any of these updates, please continue to reach out to your Program Supervisor and/or ministry contact.

Placing agencies and/or agencies that contract with a third party for the provision of services are asked to please share relevant information with any unlicensed outside paid resources (OPRs) and/or third parties.

Sincerely,



Linda Chihab  
Director, West Region.

Attachments (2)

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