

CITY OF HAMILTON PUBLIC HEALTH SERVICES Office of the Medical Officer of Health

ТО:	Mayor and Members Public Health Committee
COMMITTEE DATE:	April 2, 2024
SUBJECT/REPORT NO:	Selection Criteria and Policy and By-Law Changes to Implement the Public Health Sub-Committee (BOH24003) (City Wide) (Outstanding Business List Item)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Rachel Harris (905) 546-2424 Ext. 4239
SUBMITTED BY:	Dr. Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services
SIGNATURE:	

RECOMMENDATION

- (a) That the Criteria for the Selection of Community and Education Representatives on the Public Health Sub-Committee, as outlined in Appendix "A" to Report BOH24003, be approved;
- (b) That the Terms of Reference for the Public Health Sub-Committee, as outlined in Appendix "B" to Report BOH24003, be approved;
- (c) That the Amendments to the Corporate Policy Appointment of Citizens to the City's Local Boards, as outlined in Appendix "C" to Report BOH24003, be enacted by Council;
- (d) That Council direct staff to initiate the process for recruiting community and education representatives for the Public Health Sub-Committee once the Amendments to the Corporate Policy Appointment of Citizens to the City's Local Boards are enacted;
- (e) That Appendix "D" attached to Report BOH24003, respecting the Amendments to By-law 21-021, A By-Law to Govern the Proceedings of Council and Committees of Council, be enacted by Council once the existing Public Health Committee has been dissolved by the Mayor pursuant to section 284.8(1) of the *Municipal Act*;

and,

(f) That Item 2024-A(b), respecting the interim solution to establish a Public Health Sub-Committee, be removed from the Public Health Committee Outstanding Business List.

EXECUTIVE SUMMARY

In January 2024, following an education session and a community consultation, Council approved recommendations to request that the Province of Ontario authorize a semi-autonomous Board of Health for Hamilton and make any required changes to the *City of Hamilton Act, 1999* and the *Health Protection and Promotion Act* (see Public Health Committee Report BOH23039). This process is anticipated to take up to two years. In the interim, Council supported dissolving the Public Health Standing Committee and establishing a Public Health Sub-Committee comprised of six City Council members, six community representatives, and an education representative. As directed by Council, this report recommends the selection process and criteria for the community and education representatives, the Terms of Reference, and the amendments to corporate policies and By-laws required to operationalize the Public Health Sub-Committee.

The proposed selection process is aligned with the Corporate Policy – Appointment of Citizens to the City's Local Boards, with some Amendments to allow for additional community input. In developing the selection criteria, the consultation findings (see Public Health Committee Report BOH23039), the Ontario Public Health Standards, the criteria outlined in the amending motion that provided direction to the consultation, and the criteria used for Ottawa and Toronto's Board of Health were considered.

Alternatives for Consideration – Not Applicable

FINANCIAL - STAFFING - LEGAL IMPLICATIONS

Financial: Not Applicable.

Staffing: Not Applicable.

Legal: Changes to both the Corporate Policy – Appointment of Citizens to the

City's Local Boards and By-law 21-021, A By-Law to Govern the Proceedings of Council and Committees of Council, are required.

Pursuant to section 284.8(1) of the *Municipal Act*, the Mayor can dissolve the existing Public Health Standing Committee. Council then has the power to establish a new Public Health Sub-Committee. No legislative changes are required. Refer to Policy Implications and Legislative

Requirements Section for details.

HISTORICAL BACKGROUND

Beginning in March 2021, Hamilton community members delegated in support of restructuring the Board of Health so that it would also include community representatives. Delegates advocated for the need to include health expertise and the perspectives of community members from equity-deserving groups when making public health decisions. Staff were directed to consult with Advisory Committees, community partners, healthcare professionals, members of the public, and other interested stakeholders, such as City Council members, to explore options for the Board of Health's governance. The consultation found that there was substantial and widespread support to transition to a semi-autonomous Board of Health comprised of City Council members, community representatives, and an education representative. While Council approved, in principle, transitioning to a semi-autonomous Board of Health in January 2024, Provincial approval and legislative changes are required to change the structure of the Board of Health. This process is expected to take approximately two years.

As an interim solution until Provincial authorization is received, Council also approved changes to the Public Health Standing Committee. The current Public Health Standing Committee, comprised of all members of City Council, would be dissolved by the Mayor per section 284.8(1) of the *Municipal Act*. Once dissolved, a Public Health Sub-Committee comprised of six City Council members, six community representatives, and an education representative would be established. Like the current Public Health Standing Committee, the Public Health Sub-Committee would report to the Board of Health. In this interim period, the Board of Health would continue to be City Council.

In January 2024, staff were directed by Council to prepare for approval the qualifications and criteria for the selection of the community representatives to ensure that Public Health Sub-Committee members represent the community and have the necessary skills and competencies. The qualifications and criteria for the Public Health Sub-Committee are intended to be the same as what could be used for the semi-autonomous Board of Health. As such, guidance specific to Board composition from the Ontario Public Health Standards and other public health units with semi-autonomous Boards of Health are included in the "Relevant Consultation" section, below.

¹ City of Hamilton Council Meeting Minutes (February 8, 2023). Item 7.7: Motion on Recommendations for a Board of Health Advisory Committee. https://pub-hamilton.escribemeetings.com/FileStream.ashx?DocumentId=352532

² City of Hamilton Council Meeting Minutes (April 12, 2023). Revised Audit, Finance, and Administration Committee Report 23-005 Amended Item 6.0 (a)(ix): Restructuring the Board of Health Standing Committee. https://pub-hamilton.escribemeetings.com/FileStream.ashx?DocumentId=361310

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

Amendments to the Corporate Policy: Hamilton City Council – Appointment of Citizens to the City's Local Boards are required to define the selection process and criteria for community and education representatives. These changes are outlined in Appendix "C" to Report BOH24003. In addition, changes to By-law No. 21-021, By-law to Govern the Proceedings of Council and Committees of Council, are required to remove the references to the Public Health Committee that would not apply to the Public Health Sub-Committee, such as the sections on the Committee's composition and who would serve as Chair and Vice Chair. These changes also include removing the former Appendix "B" to By-law No. 21-021, which outlined the Public Health Committee's duties. These duties are now included in the Terms of Reference for the new Public Health Sub-Committee, attached as Appendix "B" to Report BOH24003.

No legislative changes are required to dissolve the Public Health Standing Committee and establish a Public Health Sub-Committee. Once Public Health Sub-Committee members are selected, the Mayor can dissolve the existing Public Health Standing Committee pursuant to section 284.8(1) of the *Municipal Act*. At this time, Council can establish the Public Health Sub-Committee.

RELEVANT CONSULTATION

MASS LBP, a public policy firm with governance and consultation expertise, undertook the consultation to explore options for Hamilton's Board of Health governance. In total, 928 members of the public participated in an online survey, 63 key informant interviews and meetings were held with Advisory Committees, community partners, healthcare professionals, and City Council members, and approximately 50 community members attended a community consultation led by the Hamilton Anti-Racism Resource Centre and the Hamilton Centre for Civic Inclusion. Each of these approaches asked participants to reflect on elements of effective governance for the Board of Health, and participants identified desired skills, qualifications, and competencies.

Consultation participants felt that health expertise, lived experience, and governance skills were important attributes for those governing local public health. Health expertise includes experience in public health, an understanding of health equity, and having members with expertise from health or community organizations, including frontline perspectives. Many participants also emphasized the importance of lived experience to ensure that those governing local public health are reflective of the diverse community they serve. Skills and experience in governance, such as strategic planning, collaboration, leadership, conflict management, and budget and legal knowledge, were also identified. These strategic and fiduciary components of governance were also highlighted in the Governance Education Session presented to the Public Health

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Standing Committee by Karima Kanani, Partner at Miller Thomson LLP.³ In addition, consultation participants shared that the selection process should be transparent and based on best practices, a skills matrix, demographic data to ensure representation, and community consultation.

The Ontario Public Health Standards also provide governance guidance under the Good Governance and Management Practices domain. This includes that Boards of Health should develop policies or by-laws related to the "selection of board of health members based on skills, knowledge, competencies and representatives of the community." This is similar to the guidance in the Governance Education Session, which advised for Board members to be "identified based on personal attributes and technical competencies, collectively reflecting proficiencies for a skills-based Board inclusive of diversity and representative of the community."

The selection criteria and processes from Ontario's two other semi-autonomous Boards of Health, Toronto and Ottawa, were also reviewed. Both Toronto and Ottawa use their existing citizen appointment processes for community representatives. Ottawa specifies that "all applications must outline how their qualifications, specific skills, interests and background are relevant to the work of the Board of Health." Toronto states that public members of the Board of Health should collectively demonstrate a range of listed qualifications, such as interest or skills in planning and policy development and leadership and management. Appendix "A" to Report BOH24003 notes when recommended criteria are aligned with what is used in Toronto. Many of these criteria are consistent with the criteria described in the amending motion.

During the preparation of this report, Clerks and Legal were consulted. Clerks drafted the amendments required for city policies and by-laws and provided information about the selection process.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

As specified by the Ontario Public Health Standards and reinforced in the consultation, Board of Health members should be selected based on skills, knowledge,

³ Kanani, K. (2022). Hamilton Board of Health Governance Education Session. https://pub-hamilton.escribemeetings.com/filestream.ashx?DocumentId=354790

⁴ Ministry of Health. (2021). Ontario Public Health Standards: Requirements for Programs, Services, and Accountability (Standards).

https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Ontario_Public_Health_Standards_2021.pdf

⁵ City of Ottawa. (2024). Board of Health. <u>https://www.ottawapublichealth.ca/en/publichealth-services/board-of-health.aspx</u>

⁶ City of Toronto. (2020). Board of Health. https://secure.toronto.ca/pa/decisionBody/44.do

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competencies, and be representative of the community. There are themes across the consultation results, the Ontario Public Health Standards, and the qualifications used for Toronto's Board of Health. These include that Board members should collectively have experience in public health, planning, and policy development, and have other governance skills such as conflict management, collaboration, leadership, and budget development. These themes are reflected in the recommended criteria outlined in Appendix "A" to Report BOH24003.

Another theme that emerged was the importance of selecting members that understand the perspectives of equity-deserving groups and are representative of the community. This is particularly important in the context of Public Health, which is responsible for decreasing health inequities under the Ontario Public Health Standards and the Health Equity Guideline. Understanding health equity, anti-racism, anti-Indigenous racism, inclusion, diversity, equity, and accessibility is listed as a criterion in Appendix "A" to Report BOH24003.

With regards to selecting community and education representatives, consultation participants felt it was important to have a transparent selection process. Both Toronto and Ottawa's Boards of Health use their existing citizen appointment policies. Similar to Toronto and Ottawa's policies, Hamilton's Corporate Policy – Appointment of Citizens to the City's Local Boards focuses on recruiting and selecting citizens in an open, transparent, and equitable way. As such, it is recommended to follow the existing Corporate Policy, with some amendments.

Consultation participants also felt that selection should be made based on best practices, a skills matrix, demographic data to ensure representation, and community consultation. It will be up to the Selection Committee to determine the best mix of skills and competencies for the Public Health Sub-Committee based on the listed criteria. To support the Selection Committee with selecting members who are representative of the community, demographic data are collected as part of the application form for local boards, agencies, and sub-committees. This includes the applicant's ward, gender identity, and self-identification as an Indigenous person, a member of a racialized group, or a person with a disability.

To increase community input into the selection process, the proposed Amendments to the Corporate Policy, as outlined in Appendix "C" to Report BOH24003, list several Committees, groups, and organizations who will be invited to submit interview questions for the Selection Committee's consideration. These include the Accessibility Committee for Persons with Disabilities, the Seniors Advisory Committee, the Circle of Beads/Hamilton's Urban Indigenous Consultation Circle, and the Hamilton Anti-Racism Resource Centre. Should other City of Hamilton Advisory Committees be resumed within recruitment timelines, staff will also reach out to other Advisory Committees for interview questions.

ALTERNATIVES FOR CONSIDERATION

Not Applicable.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Report BOH24003	Criteria for the Selection of Community and Education Representatives on the Public Health Sub-Committee
Appendix "B" to Report BOH24003	Terms of Reference for the Public Health Sub- Committee
Appendix "C" to Report BOH24003	Amendments to the Corporate Policy – Appointment of Citizens to the City's Local Boards
Appendix "D" to Report BOH24003	Amendments to By-law 21-021, A By-Law to Govern the Proceedings of Council and Committees of Council