

Public Health Sub-Committee Orientation Session 1 – Governance Education

December 2, 2024

Office of the Medical Officer of Health Public Health Services

BOH24025

Orientation Overview

 Overview of Public Health Sub-Committee orientation Good governance education session (Karima Kanani) Public health in Hamilton – Part 1: History & fundamentals 2024 priorities Overview of public health in Ontario (Loretta Ryan & Monika Turner) Public health in Hamilton – Part 2: Programs & Services 2025 Annual Service Plan & Budget Community health status Renewed priorities and action plans Financial information 	Session 1 December 2	Session 2 January 13	Session 3 February 24	Session 4 March 17
	 Health Sub-Committee orientation Good governance education session (Karima Kanani) Public health in Hamilton – Part 1: History & fundamentals 	 health in Ontario (Loretta Ryan & Monika Turner) Public health in Hamilton – Part 2: 	 Plan & Budget Community health status Renewed priorities and action plans Financial 	diversity and inclusion into decision-making processes (Evelyn

Note: Following this orientation, relevant ongoing education will be provided as reports are brought forward



Public Health Governance: Hamilton's Journey

March 2021

Community members began delegating in support of restructuring the Board of Health to include community representatives with health expertise and lived experience.

February / April 2023

Council directed staff to consult with Advisory Committees, community partners, healthcare professionals, and the public about options for the Board of Health's governance.

November 2023 – January 2024

Results & recommendations from the consultation were shared back with relevant City committees and approved by Council.

November 2022

New term of City Council began.

Summer 2023

MASS LBP carried out consultations via meetings, interviews, and a public survey.



Public Health Governance: Hamilton's Journey Cont'd...

Council approved:

- In principle, a semi-autonomous Board of Health governance structure with features similar to City of Toronto and City of Ottawa
- As an interim solution, until legal authorization is received to implement a semi-autonomous Board of Health governance model, a Public Health Sub-Committee be established to include six City Council members, six community representatives, and one education representative

The application for the semi-autonomous Board of Health governance structure is still under review by the Province.



GOVERNANCE EDUCATION SESSION

HAMILTON PUBLIC HEALTH SUB-COMMITTEE

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DECEMBER 2, 2024





AGENDA

- 1. Legal Framework of Public Health Governance
- 2. Public Health Governance in Hamilton
- 3. Good Governance in Practice
- 4. Hallmarks of Collaborative Governance



- Health Protection and Promotion Act, 1990
- Ontario Public Health Standards: Requirements for Programs, Services and Accountability (June 2021)
- Municipal Act, 2001
- City of Hamilton Act, 1999
- By-laws, Policies and Procedures



- Health Protection and Promotion Act (HPPA)
 - The HPPA is provincial legislation that creates Boards of Health and establishes Board of Health powers and authority (HPPA, s. 49)
 - Board of Health has oversight of Public Health Programs and Services, Community Health Protection and Communicable Diseases (HPPA, s. 61)
 - Board of Health appoints Medical Officer of Health, responsible for management of Public Health Programs and Services (HPPA, s. 67(1),(3))



- Ontario Public Health Standards: Requirements for Programs, Services and Accountability (2021)
 - Every Board of Health is to comply with Public Health Standards for mandatory program/services (HPPA, s. 7)
 - Calls on Boards of Health to implement strategies to reduce health inequities and meaningfully engage priority populations
 - Boards accountable for good governance practices to ensure effective functioning
 - Requires that Boards of Health have local by-laws and governance policies on variety of matters including selection of Board of Health members based on skills, knowledge, competencies and representatives of the community, where able to recommend to the appointing body



- Where the governance and mandate is tied to the municipality, then also subject to the Municipal Act, 2001
 - Includes Board of Health in definition of "Local Board" (s.1(1))
 - Includes provisions on procedure by-laws for calling, place and proceedings of meetings



- Hamilton Board of Health is also subject to City of Hamilton Act, 1999
 - City has the powers, rights and duties of a Board of Health under HPPA (s. 11)
 - Hamilton City Council operates and functions as the Board of Health
 - Hamilton Board of Health does not have separate By-laws/Policies, it is governed by the City of Hamilton By-Law No. 21-021(By-law to Govern the Proceedings of Council and Committees of Council)
 - Through City By-law, Council creates Committee to make recommendations to the Board of Health



• There are different types of Board of Health structures in the province

Single-Tier	Municipal Council serves as Board of Health; no citizen appts or provincial appts
Regional	Operates under regional government (upper tier); no citizen appts or provincial appts
Autonomous	Admin structure of health unit and municipality are separate; multiple municipalities with representation; may include citizen appts and provincial appts
Semi- Autonomous	Municipal Council appoints members to separate board but retains authority for budget/staffing; includes citizen appts but no provincial appts

 In January 2024, Hamilton City Council approved moving from a single-tier Board of Health to a semi-autonomous Board of Health for Hamilton



- Process to move to a semi-autonomous Board of Health requires amendments to legislation by the Province and local by-laws
- Timeline at the discretion of the Province
- In the interim, to advance towards the new structure:
 - The Mayor has dissolved the Public Health Standing Committee (made up of City Councilors)
 - Council has established this Public Health Sub-Committee comprised of six City Councilors, six community representatives, and an education representative



- What is the role of the Public Health Sub-Committee?
 - The Sub-Committee will make recommendations to the Board of Health
 - Currently, City Council continues to be the Board of Health and responsible for the duties and mandate of the Board of Health under law
 - Duties and mandate of the Public Health Sub-Committee can be found in its terms of reference



- Terms of Reference for Public Health Sub-Committee states responsibilities as follows:
 - To consider and recommend to Council on policy matters and emerging issues related to Public Health
 - To provide advice and guidance to Public Health Services including input to Strategic Planning initiatives to ensure alignment with Council's Mission, Vision, Values and Goals
 - To steward relevant public health legislation when providing advice and guidance to Public Health Services, including the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability, the Health Equity Guideline, 2018, and the Relationship with Indigenous Communities Guideline, 2018
 - To consider and recommend to Council the overall service levels in relation to the delivery of Public Health programs



- Terms of Reference for Public Health Sub-Committee states responsibilities as follows:
 - To consider and recommend to Council policies governing equitable service delivery of Public Health Services
 - > To consider and monitor program implementation and performance through staff reports
 - To consider the public health needs of the community and recommend advocacy by Council to address these needs
 - To receive delegations from the public and conduct public hearings as required by statute and Council specific to the mandate of this committee on matters under the Sub-Committee
 - Matters that have the potential of litigation and are under the mandate of this Sub-Committee, with all matters having definite litigation going to the General Issues Committee
 - To consider recommendations of any Sub-Committees and/or Task Forces which reports directly to the Public Health Sub-Committee



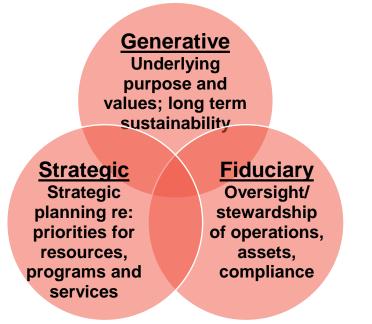
- What is "Governance"?
 - Process to enable effective oversight and decision-making for an organization and stewardship of its strategic direction

• Why Good Governance?

Best practices in governance enable quality and effective decision-making leading to improvements in programs, services and resources to meet community need



Governance is Multi-Faceted





- Ontario Public Health Standards (2021), includes Good Governance for Boards of Health (not exhaustive):
 - Strategic plan, service plan, performance reporting, accountability
 - Comply with governance requirements of HPPA
 - Develop/implement policies/by-laws for functioning of the Board, including rules of order for meetings and selection of members based on skills, knowledge, competencies and community representation, where able
 - > Have a risk-management framework
 - Provide governance direction to administration
 - Engage in community and multi-sectoral collaboration, including relationships with Indigenous communities
 - > Aware of emerging issues and trends
 - Engage in self-evaluation of governance practices



- Duty of Public Health Sub-Committee
 - Standard of Care: discharge authority and duties with honesty, in good faith, and in the best interests of the Health Unit
 - Objective Standard: what diligence would a reasonably prudent person exercise in comparable circumstances?



- How to fulfil Standard of Care?
 - Engage in risk-assessed due diligence
 - Avoid conflicts of interest
 - Work effectively with City Staff



Engage in Risk-Assessed Due Diligence

- Adopt a systematic process of identifying, analyzing, evaluating and responding to risks/vulnerabilities
- Use a holistic approach that addresses risk from a 360 lens in an integrated way; consider all key risk areas
- Analyze risks based on likelihood and probability and options to bring these risks to acceptable levels based on risk tolerance of the Sub-Committee
- Establish a consistent risk assessment framework



• International Standards Organization (ISO) ERM Principles

1. Creates values for objectives of health, reputation, profits, compliance etc., less the costs of risk management	6. Based on the best available information including historical data, expert opinion etc., tempered with the quality and availability of the information	
2. An integral part of organizational processes including project management, strategic planning, auditing and all other processes	7. Tailored to the organization, its objectives, its risks and its capabilities	
3. Part of decision making through analysis and evaluation to understand risk and determine its acceptability as treated	8. Takes human and cultural factors into account in addition to technical and other "hard" factors that impact the likelihood of consequences	
4. Explicitly addresses uncertainty and how it can be modified	9. Transparent and inclusive so that communications and consultation with stakeholders and others keeps the risk management and risk criteria current and relevant	
5. Systematic, structured and timely and produces repeatable and verifiable outcomes and decisions	10. Dynamic, iterative and responsive within a "continuous improvement" environment that responds to changes in context, trends, risk factors and other internal and external factors	



Avoid Conflicts of Interest

- Municipal Conflict of Interest Act applies to elected officials, and appointed members of advisory committees and boards.
- Sub-Committee members have a *disqualifying* conflict of interest if they cannot participate impartially in the decision-making process related to the matter either because:
 - to do so would not be mean non-compliance with the Municipal Conflict of Interest Act, or
 - the individual's relationship to persons/bodies involved in the matter or affected by the decision is so close, a reasonable person would conclude that the individual could not effectively carry out their public duty with impartiality



Avoid Conflicts of Interest

- If in a disqualifying conflict of interest, members shall not participate in decision-making and shall not attempt to influence an outcome, whether the decision to be made is to be made by:
 - the Sub-Committee
 - the Board of Health, or
 - a member of staff with delegated authority or operational responsibility
- See Procedural Handbook for Citizen Appointees to City of Hamilton Local Boards for Code of Conduct with Conflict of Interest rules and procedures



Work Effectively with City Staff

- Staff will ensure all Sub-Committee members are provided with the same information on matters to be discussed at Committee
- Define role and responsibility of Sub-Committee and City Staff
- Be mindful of scope and priority of requests for City Staff support
- Council, Mayor, Board of Health, and Medical Officer of Health have authority and obligations defined by law
- Receipt of professional opinion of City Staff in good faith
- See Council-Staff Relationship Policy



What is Collaborative Governance?

Collaborative governance is an approach involving bringing together stakeholders, including government and community, to jointly address shared issues through a process of open communication, engaging different viewpoints and developing mutual understanding and goals



Best Practices for Advancing Collaborative Governance

- Interrupt Bias
- Create Culture of Inclusivity
- Identify Shared Purpose and Goals
- Drive Consensus



Interrupt Bias

- Community-based governance approach aimed at improving EDI; unconscious bias is one of the key challenges in advancing EDI
- Unconscious biases are underlying attitudes and beliefs that people unconsciously attribute to another person or group; can affect your behavior or decisions without you realizing it
- First step to interrupting bias is awareness build EDI fluency and engage in active listening and intentional decision-making



Create Culture of Inclusivity

- A committee culture where voices and views of all committee members are heard, valued and respected
- City procedures advance culture of inclusivity, provide that (Procedural Handbook for Citizen Appointees to City of Hamilton Local Boards):
 - All members must fully participate with open discussion and honest feedback
 - Chair to support all members to participate in discussion; members should share speaking time
 - Members to uphold the Code of Conduct and respect rules of order and each other



Identify Shared Purpose and Goals

- To foster collaboration, ensure a shared understanding of the mission, vision, values, and interests the Sub-Committee is seeking to advance
- On matters before the Sub-Committee, identify collective expectations and desired outcomes
- Working towards a common purpose facilitates collaborative decision-making
- Reflect and re-evaluate to ensure continued alignment



Drive Consensus

- Council By-Laws establish voting procedures but hallmark of collaborative governance is first striving for consensus
- True collaborative decision-making is integrating the whole table in a consensus-driven model that works through differences in views to attempt to find common ground that can be accepted by all
- Will not be possible in every instance but will create a culture of trust and collaboration among Sub-Committee members
- Once decision made by the Sub-Committee or the Board of Health, Code of Conduct requires members to refrain from making negative and disparaging comments about processes, decisions, other members or staff



SUMMARY

- Hamilton Board of Health evolving to a semi-autonomous model
- Public Health Sub-Committee interim measure to advance EDI and community engagement
- Public Health Sub-Committee has a broad mandate for recommendations to the Hamilton Board of Health
- All committees encouraged to embrace good governance practices in committee work, including risk assessed decision-making, avoidance of conflicts of interest, and effective engagement with City Staff
- Public Health Sub-Committee is a forum for collaborative governance with community representation; encouraged to interrupt bias, advance inclusivity, and drive consensus-based decision-making with shared purpose

FORWARD TOGETHER



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QUESTIONS?

