

A meeting of the Board of Health for Oxford Elgin St. Thomas Health Unit was held on Thursday, October 23, 2025, commencing at 1:05 p.m.

**PRESENT:**

Ms. C. Agar	Board Member
Mr. J. Couckuyt	Board Member
Mr. J. Herbert	Board Member
Ms. K. Hobbs*	Board Member
Mr. G. Jones	Board Member (Vice Chair)
Ms. B. Martin	Board Member (Chair)
Mr. D. Mayberry	Board Member
Mr. M. Peterson	Board Member
Mr. L. Rowden	Board Member
Mr. M. Ryan	Board Member
Mr. D. Shinedling	Board Member
Mr. E. Taylor	Board Member
Mr. S. Molnar*	Board Member
Dr. N. Tran	Medical Officer of Health (ex officio)
Ms. C. St. John	Chief Executive Officer (ex officio)
Ms. W. Lee	Executive Assistant

**GUESTS:**

Ms. J. Gordon	Administrative Assistant
Ms. L. Malott	Health Promoter
Ms. J. Picavet	Health Promoter
Ms. M. Van Den Neucker	Manager, Healthy Foundations
Mr. P. Heywood	Program Director
Ms. S. MacIsaac	Program Director
Mr. D. McDonald	Director, Corporate Services and Human Resources
Ms. M. Nusink	Director, Finance
Ms. C. Richards*	Manager, Foundational Standards
Ms. J. Rabaey*	Senior Communications Coordinator
Mr. Y. Santos	Manager, IT
Mr. D. Smith	Program Director

*\*Represents virtual participation*

**REGRETS:**

Mr. D. Warden	Board Member
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**REMINDER OF DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF  
WHEN ITEM ARISES**

**1.1 CALL TO ORDER, RECOGNITION OF QUORUM**

The meeting was called to order at 1:05 p.m.

**1.2 AGENDA**

**Governance Standing Committee report**

**Resolution # (2025-BOH-1023-1.2)**

Moved by G. Jones

Seconded by M. Peterson

That the agenda for the Southwestern Public Health Board of Health meeting for October 23, 2025, be approved as amended.

Carried.

The Chair noted the Governance Standing Committee Report would be presented in the Open Session of the Board of Health meeting, positioned after the Chief Executive Officer Report and numbered as 5.5 Governance Standing Committee Report for October 23, 2025.

**1.3 Reminder to disclose Pecuniary Interest and the General Nature Thereof when Item Arises.**

**2.0 APPROVAL OF MINUTES**

**Resolution # (2025-BOH-1023-2.1)**

Moved by M. Peterson

Seconded by D. Mayberry

That the minutes for the Southwestern Public Health Board of Health meeting for September 25, 2025, be approved.

Carried.

**3.0 CONSENT AGENDA**

No items.

**4.0 CORRESPONDENCE RECEIVED REQUIRING ACTION**

No items.

**5.0 AGENDA ITEMS FOR INFORMATION.DISCUSSION.DECISION**

## **5.1 Review of the Ontario Early Adversity and Resilience Framework**

M. Van Den Neucker introduced L. Malott and J. Picavet who presented the Early Adversity and Resilience Framework.

M. Ryan asked whether the presentation slides would be shared, and staff confirmed they would be made available on the portal.

D. Shinedling asked how the framework accounts for and respects cultural differences. M. Van Den Neucker and L. Malott explained that staff work in culturally sensitive ways, learning from families' own parenting practices while promoting evidence-based approaches.

L. Rowden inquired whether hospitals were involved in the framework's development and how trauma-informed care is addressed in hospital settings. L. Malott indicated that the framework was developed with broad input across health units, though hospital representation was uncertain.

D. Mayberry expressed concern about the limited number of public health nurses (nine across 130 schools) and questioned whether this was sufficient to help teachers understand and address students' early adversity. He supported the framework but emphasized that public health alone cannot meet the scope of need.

C. St. John noted that the framework is designed to be multi-sectoral, providing common, evidence-based tools for schools, child welfare, and community partners. M. Van Den Neucker agreed, emphasizing that it brings together multiple agencies to identify gaps and coordinate community efforts. She added that the initiative is still in its infancy but will help guide long-term strategies across the lifespan. L. Malott added that the benefits will not be seen immediately but that early interventions should lead to measurable improvements over time.

D. Mayberry reiterated his support for the framework but questioned how it could move from concept to implementation given current economic pressures and workforce shortages.

K. Hobbs asked whether the framework could be shared with hospitals and the Ministry of Health to seek funding support. L. Malott confirmed that it has been presented to the Ministry, that its language appears in the new Ontario Public Health Standards (OPHS), and that while Southwestern Public Health (SWPH) has not yet shared it broadly with community partners, many local organizations are already doing similar work.

G. Jones asked how municipalities would be involved, particularly in planning new subdivisions.

B. Martin referred to community safety and well-being plans as one avenue. L. Malott added that municipalities can apply trauma- and violence-informed approaches in recreational programming and staff training. G. Jones noted that municipalities may redirect such initiatives back to community organizations already doing related work.

M. Ryan suggested that the framework's reference to "guide municipal planning" be revised to "guide municipal policy," to encourage municipal councils to take a leadership role in directing staff to work with public health and community partners. He proposed that the Board of Health consider sending correspondence to municipal councils requesting this collaboration. G. Jones

supported M. Ryan's suggestion but cautioned that municipal staff are already under significant workload pressures, and any new initiative would require council prioritization.

Correspondence will be sent to SWPH area municipalities as outlined above.

**Resolution # (2025-BOH-1023-5.1)**

Moved by D. Mayberry

Seconded by M. Ryan

That the Board of Health for Southwestern Public Health receive and file the Review of the Ontario Early Adversity and Resilience Framework for October 23, 2025.

Carried.

**5.2 Progress Report on Further Investments in Public Health: 2024-25 Update**

C. Richards reviewed the report.

J. Herbert commended the work completed to date and suggested that quarterly progress reports be provided beginning in January, given the level of funding attached to the initiative.

C. Agar asked how updated data on substance use and vaping could be obtained and whether 2021 data might be added. C. Richards explained that there are significant limitations in access to current youth data across Ontario, noting this as an ongoing gap. C. Agar further asked whether SWPH could develop its own survey to be distributed through schools. C. Richards replied that while possible, such a project would be costly but worth exploring. C. St. John agreed to take this question back to the staff for consideration, acknowledging that data limitations are a chronic challenge.

D. Shinedling supported the idea and suggested that the Board advocate for federal funding for improved data collection, either directly or through the Association of Local Public Health Agencies (aLPHa) and its affiliates. C. St. John supported raising the issue with the aLPHa Board and its Affiliates group, which includes APHIO (Association of Public Health Epidemiologists of Ontario) on whether any advocacy has been done at the federal level, and if not, can it be.

S. Molnar commended the report, highlighting the measurable progress but noting that much work remains. He emphasized the need for partnerships and asked about SWPH's role in municipal emergency management. D. Smith clarified that SWPH connects annually in person with upper-tier Community Emergency Management Coordinators (CEMCs) and supports lower-tier municipalities electronically, particularly in reviewing Hazard Identification and Risk Assessments (HIRAs). Dr. Tran confirmed that SWPH's involvement in emergency declarations depends on the nature of the event.

G. Jones returned to the issue of data gaps and suggested that SWPH explore collaboration with external researchers conducting rural data studies, possibly through Western University, and to contact municipal data staff for potential alignment.

P. Heywood reported that SWPH is preparing to collect local data through the Planet Youth initiative, which includes questions on vaping, tobacco, cannabis, and alcohol use. The first

dataset is expected by early 2026 and will provide a local snapshot for the Board and municipalities.

C. Agar inquired about staffing in the Nurse-Family Partnership program. D. Smith confirmed that three nurses currently manage about eight cases each, with a goal of reaching a full complement of 15–20 clients per nurse.

**Resolution # (2025-BOH-1023-5.2)**

Moved by M. Peterson

Seconded by J. Herbert

That the Board of Health for Southwestern Public Health accept the Progress Report on Further Investments in Public Health: 2024-25 Update for October 23, 2025.

Carried.

**5.3 Medical Officer of Health's Report**

Dr. Tran reviewed the report.

M. Peterson asked whether the province provided any additional funding to support the measles outbreak response. C. St. John noted that SWPH submitted a one-time in-year funding request; however, the province will not provide reimbursement if the organization has any surplus, including municipal contributions.

**Resolution # (2025-BOH-1023-5.3)**

Moved by C. Agar

Seconded by D. Mayberry

That the Board of Health for Southwestern Public Health accept the Medical Officer of Health's Report for October 23, 2025.

Carried.

**5.4 Chief Executive Officer's Report**

C. St. John reviewed the report.

D. Mayberry expressed appreciation for the comment regarding reserves and noted that November is Radon Awareness Month. He shared a personal experience with elevated radon levels despite low-risk conditions and encouraged wider public education on radon testing, noting that Oxford County libraries provide radon test kits.

M. Ryan supported increasing the reserve cap from 5% to 10% and suggested developing a projection model, similar to municipal asset management planning, to anticipate when reserves would be needed and in what amounts. He proposed that such projections be reviewed annually. M. Nusink noted that SWPH developed a 25-year capital plan in 2018 and that capital expenditures are incorporated into the annual operating budget.

M. Peterson asked whether higher reserves might affect provincial funding decisions. C. St. John confirmed that the province does not consider local reserve levels when determining funding allocations and that the reserve consists solely of municipal contributions.

At 2:20 p.m., the meeting experienced technical difficulties due to a Wi-Fi outage, which disconnected the in-person meeting room from the virtual platform while virtual participants remained connected. The meeting reconvened at 2:25 p.m. once the issue was resolved.

**Resolution # (2025-BOH-1023-5.4-2.1)**

Moved by M. Peterson

Seconded by J. Herbert

That the Board of Health amend the BOH-FIN-010 Reserve Fund Policy per the report for October 23, 2025.

Carried.

**Resolution # (2025-BOH-1023-5.4)**

Moved by D. Mayberry

Seconded by L. Rowden

That the Board of Health for Southwestern Public Health accept the Chief Executive Officer's report for October 23, 2025.

Carried.

**5.5 Governance Standing Committee Report**

G. Jones reviewed the report and noted that individuals interested in getting involved should reach out to the Chair. G. Jones acknowledged that all members are very busy and the Chair would do their best to accommodate participation. G. Jones thanked staff for their support in developing the guidance document.

**Resolution # (2025-BOH-1023-5.3)**

Moved by M. Peterson

Seconded by G. Jones

That the Board of Health for Southwestern Public Health approve the GSC report and the recommendations contained therein for October 23, 2025.

Carried.

**6.0 NEW BUSINESS**

No items.

S. Molnar left the meeting at 2:33pm.

**7.0 TO CLOSED SESSION**

### **Resolution # (2025-BOH-1023-C7)**

Moved by M. Peterson

Seconded by L. Rowden

That the Board of Health move to closed session in order to consider one or more of the following, as outlined in the Ontario Municipal Act:

- (a) the security of the property of the municipality or local board;
- (b) personal matters about an identifiable individual, including municipal or local board employees;
- (c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- (d) labour relations or employee negotiations;
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- (g) a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- (h) information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them;
- (i) a trade secret or scientific, technical, commercial, financial or labour relations information, supplied in confidence to the municipality or local board, which, if disclosed, could reasonably be expected to prejudice significantly the competitive position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization;
- (j) a trade secret or scientific, technical, commercial or financial information that belongs to the municipality or local board and has monetary value or potential monetary value; or
- (k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board. 2001, c. 25, s. 239 (2); 2017, c. 10, Sched. 1, s. 26.

Other Criteria:

- (a) a request under the Municipal Freedom of Information and Protection of Privacy Act, if the council, board, commission or other body is the head of an institution for the purposes of that Act; or
- (b) an ongoing investigation respecting the municipality, a local board or a municipally controlled corporation by the Ombudsman appointed under the Ombudsman Act, an Ombudsman referred to in subsection 223.13 (1) of this Act, or the investigator referred to in subsection 239.2 (1). 2014, c. 13, Sched. 9, s. 22.

Carried.

## **8.0 RISING AND REPORTING OF CLOSED SESSION**

### **Resolution # (2025-BOH-1023-C8)**

Moved by M. Ryan

Seconded by G. Jones

That the Board of Health rise with a report.

Carried.

### **Resolution # (2025-BOH-1023-C3.1-1.0)**

Moved by D. Mayberry

Seconded by D. Shinedling

That the Board of Health ratify the signing of the 2025 MOH provincial application for Southwestern Public Health as presented.

Carried.

**Resolution # (2025-BOH-1023-C3.1)**

Moved by M. Peterson

Seconded by J. Couckuyt

That the Board of Health for Southwestern Public Health accept the Chief Executive Officer's Closed Report for October 23, 2025.

Carried.

**Resolution # (2025-BOH-1023-C3.2)**

Moved by G. Jones

Seconded by M. Peterson

That the Board of Health for Southwestern Public Health receive the Special Ad Hoc Building Committee Report for October 23, 2025 and that staff proceed as directed in closed session.

Carried.

**9.0 FUTURE MEETING & EVENTS**

**10.0 ADJOURNMENT**

D. Shinedling asked if the meeting could be moved to an earlier time; the Chair noted the request and said she would notify the Board of Health if the start time changed.

The meeting adjourned at 3:39 p.m.

**Resolution # (2025-BOH-1023-9.0)**

Moved by M. Peterson

Seconded by G. Jones

That the meeting adjourn to meet again on Thursday, November 27, 2025 at 1:00 p.m.

Carried.

Confirmed: \_\_\_\_\_

