

AGENDA

LONDON & MIDDLESEX COMMUNITY HOUSING (LMCH)

Board of Directors Meeting

Corporate Boardroom
1299 Oxford Street East, Unit 5C5
London, Ontario, N5Y 4W5

Thursday, January 20, 2022

5:30 PM – 6:30 PM

Board Members:

Aynsley Anderson

Gary Bezaire

Tammy Brooks

Shellie Chowns

Adrian Cornelissen

Shawn Lewis

John Millson

Josh Morgan

Directors:

Andrea Mackenzie

Phil Renaud

Diana Taplashvily

CEO:

Paul Chisholm

Item	Pg.	Lead	Time
1. Call to Order		S. Chowns	5:30
2. Recognition of Indigenous Peoples and Lands Statement		S. Chowns	
3. Completion and Acceptance of Agenda		S. Chowns	
4. Disclosure of Interest			5:35
5. Approval of Minutes of Previous Meetings a. December 16, 2022 Public Minutes		S. Chowns	
6. Communications a. none		S. Chowns	
7. Delegations none			
8. Presentations none			
9. Consent Agenda Items a. Staff Report 2022- 01 CEO Report b. Staff Report 2022 - 02 2021 Annual Internal Review Summary c. Staff Report 2022 - 03 Update on Community Engagement Update		P. Chisholm A.Mackenzie	5:50
10. In Camera Matters a) A matter pertaining to the progression of litigation, including matters before administrative tribunals, affecting the Corporation b) An update to a matter in respect to risk management		P. Chisholm P. Chisholm	
11. Reports and Business a. Staff Report 2022 - 04 Selection Process for Tenant Board Director b. Staff Report 2022- 05 Vacancy Management Update Report c. Staff Report 2022- 06 Capital Projects Annual Update – 2021- 2022 d. Staff Report 2022 -07 2021 Human Resources Performance Measures e. Staff Report 2022- 08 Annual review of key Policies – Health and Safety f. Staff Report 2022- 09 Workplace Violence, Harassment and Sexual Harassment Policy g. Staff Report 2022 -10 CMHC Project Status Report h. Staff Report 2022- 11 Planned 2022 Service Contract Tenders		P. Chisholm A. Mackenzie P. Renaud P. Renaud K. Graham K. Graham P. Renaud	

i. Staff Report 2022 –12 Request for Proposal for Asbestos Surveys and Reassessments (4 Year Contract)			
j. New Business / Enquiries		S. Chowns	
12. Meeting Adjournment		S. Chowns	6:15

Recognition of Indigenous Peoples and Lands Statement

We would like to begin by acknowledging the treaty territory of the Anishnaabeg, which is defined within the pre-confederation treaty known as the London Township Treaty of 1796. Throughout time, this region has also become the current home to the Haudenosaunee and Leni-Lenape Nations.

BOARD OF DIRECTORS MEETING MINUTES

December 16, 2021, at 5:30 p.m.
 London & Middlesex Community Housing
 Boardroom, 1299 Oxford Street East, Unit 5C5, London, Ontario, Canada

Board Members in Attendance:

Shellie Chowns, Chair*

Aynsley Anderson*

Adrian Cornelissen*

John Milson*

Josh Morgan*

Tammy Brooks*

Gary Bezaire*

Shawn Lewis*

Senior Leadership in Attendance:

Paul Chisholm, CEO

Andrea Mackenzie, Director of Tenant Services

Diana Taplashvily, Director of Finance & Corporate Services

Phil Renaud, Director of Property Services & Asset Management

Angela Serra, Communications Specialist

* *Virtual Attendance via Zoom*

1. Call to Order	S. Chowns called the meeting to order at 5:42 p.m.
2. Recognition of Indigenous Peoples and Lands	<p>S. Chowns provided the recognition address at 5:42 p.m.:</p> <p><i>We would like to begin by acknowledging the treaty territory of the Anishinaabeg, which is defined within the pre-confederation treaty known as the London Township Treaty of 1796. Throughout time, this region has also become the current home to the Haudenosaunee and Leni-Lenape Nations.</i></p>
3. Completion and Acceptance of the Agenda	<p>Regarding the completion and acceptance of the agenda, G. Biz moved, A. Anderson seconded that the agenda BE ACCEPTED and APPROVED as presented.</p> <p>APPROVED at 5:44 p.m.</p>

4. Disclosures of Interest	S. Chowns called for conflict of interest declarations with respect to the agenda. No conflicts of interest declared at 5:43 p.m.
5. Approval of Board Meeting Minutes dated October 21, 2021	Regarding the Board Meeting Minutes of November X, 2021, G. Biz moved, A. Anderson seconded that the Minutes BE APPROVED . CARRIED at 5:44 p.m.
6. Communications	Letter from the City Clerk re: Director
7. Delegations	n/a
8. Presentations	n/a
<p>9. Consent Items</p> <p>a. Staff Report 2021-BOD-64 CEO Report</p> <p>b. Staff Report 2021-BOD-65 Vacancy Update</p> <p>c. Staff Report 2021-BOD-72 Community Engagement Update</p>	<p>a. Regarding Staff Reports <i>a. to c.</i>, J. Milson moved, and G. Bezaire seconded that all reports BE APPROVED at 5:49. MOTION PASSED at 6:04 p.m.</p> <p>b. Regarding Staff Reports <i>a. to c.</i>, J. Milson moved, and G. Bezaire seconded that all reports BE APPROVED at 5:49. MOTION PASSED at 6:04 p.m.</p> <p>c. Regarding Staff Reports <i>a. to c.</i>, J. Milson moved, and G. Bezaire seconded that all reports BE APPROVED at 5:49. MOTION PASSED at 6:04 p.m.</p>
10. In Camera	n/a
<p>11. Reports and Business</p> <p>a. Staff Report 2021-BOD-66 Audit Engagement</p> <p>b. Staff Report 2021-67</p>	<p>a. Regarding Staff Report 2021-BOD-66, Audit Engagement Request G. Bezaire moved, and J. Morgan seconded that the report BE RECEIVED. MOTION PASSED AT 6:11 p.m.</p>

<p>Contract Award-Security Services</p> <p>c. Staff Report 2021-68 Contract Award-Generator Replacement 30 Baseline</p> <p>d. Staff Report 2021-69 Contract Award-Generator Replacement 85 Walnut</p> <p>e. Staff Report 2021-70 Contract Award-Energy Management System</p> <p>f. Staff Report 2021-71 Staff Pay Increase</p> <p>g. Staff Report 2021-73 2022 Board Work plan</p>	<p>b. Regarding Staff Report 2021-67, Contract Award- Security Services, S. Lewis moved, T. Brooks seconded that the report BE APPROVED. MOTION PASSED AT 6:21 p.m.</p> <p>c. Regarding Staff Report 2021-68, Contract Award-Generator Replacement 30 Baseline, G. Bezaire moved, A. Cornelissen seconded that the report BE APPROVED. MOTION PASSED AT 6:27 p.m.</p> <p>d. Regarding Staff Report 2021-69, Contract Award-Generator Replacement 85 Walnut, G. Bezaire moved, J. Milson seconded that the report BE APPROVED. MOTION PASSED AT 6:30 p.m.</p> <p>e. Regarding Staff Report 2021-70, Contract Award- Energy Management System, G. Bezaire moved, J. Morgan seconded that the report BE APPROVED. MOTION PASSED AT 6:37 p.m.</p> <p>f. Regarding Staff Report 2021-71, Staff Pay Increase, J. Milson moved, A. Cornelissen seconded that the report BE APPROVED. MOTION PASSED AT 6:41 p.m.</p> <p>g. Regarding Staff Report 2021-73, Board Work plan, T. Brooks moved, G. Bezaire seconded that the report BE RECEIVED. MOTION PASSED AT 6:48 p.m.</p>
<p>12. New Business</p>	
<p>13. MEETING ADJOURNMENT</p>	<p>A. Anderson moved, and A. Cornelissen seconded that the meeting BE ADJOURNED. MOTION PASSED AT 7:11 p.m.</p>

Shellie Chowns, Chair

Paul Chisholm, CEO

STAFF REPORT 2022-01

TO: LMCH Board of Directors

FROM: Paul Chisholm, Chief Executive Officer

SUBJECT: CEO Update

DATE: Janaury 13, 2022

PURPOSE:

To purpose of the report is to provide updates to the Board on the status of key initiatives previously approved, introduce items that may come before the Board in future meetings and to provide updates on meetings, events or operational activities that may be of interest to the Board.

RECOMMENDATION:

That the CEO Update report **BE RECEIVED** for information.

UPDATES:

COVID Operational Update

The Omicron Variant of COVID-19 has proven to be highly infectious. In addition to the impact on individual staff, tenants, and members of the community there is the risk that this variant will disrupt the operations of LMCH. In addition to reinforcing existing COVID safety protocols LMCH took additional measures to ensure staff and tenants safety, including; moving to a remote work model for staff, closing community rooms/lounges in buildings, adding enhanced cleaning in our multi-residential sites and responding to only emergency and urgent work orders.

With the above measures in place, we had no absences due to COVID over the Holiday period. Starting January 4, 2022, we noted an increase in staff absences after testing positive, being a close contact of someone who has tested positive and covid related absences due to closures of schools, childcare, etc. The week of January 4th saw 20% of staff impacted (16) with 4 of these staff able to work remotely during this period. The numbers for the week of January 10th were significantly lower and staff have started tor return to work who had been off the week of January 4th.

There was no disruption in operations, and we continue to monitor the situation.

Impact of Winter Weather Conditions and COVID Closures at our sites.

With winter weather conditions in London, LMCH traditionally experiences an increase in those unsheltered seeking shelter in our buildings. In most instances these situations are quietly managed by staff in a respectful way and without incident. With the Omicron Variant causing many drop-in programs in the community to close, LMCH is experiencing an increase in issues related to guests and the unsheltered in our buildings.

While we are experiencing an increase in issues at most of our downtown core sites, the increase at our 580 Dundas site are significantly disruptive to the management of this site and LMCH's ability to maintain a clean, quiet and well maintained environment for our tenants. LMCH is working closely with staff, our security provider, and other stakeholders to address this issue. Initial steps have been to increase security presence on the site and discussions are ongoing on how to address some of the root cause issues to prevent this in the future.

REIMAGINE Southdale

LMCH has received initial feedback from the City on some of the planning matters related to the project and initial costing for the development. Clarification from the City has been helpful and will support the final application once approval is received from the Board. Initial unit cost is higher than original project estimates due to both inflation and supply chain uncertainty that is having shorter term impacts on both cost and timelines.

LMCH has initiated conversations with City Finance on how to manage the timing of project cashflow and will be meeting with Housing Development Corporation later in January to provide an update on the project. The current plan is to bring forward recommendation and a fulsome update for this project at the February meeting of the Board.

Right to Disconnect

Bill 27 (Working for Workers Act, 2021) was passed on November 30, 2021. It is omnibus legislation which makes changes to the current Employment Standards Act. The specific amendment that impacts us is the Right to Disconnect. LMCH will be required to have a written policy on disconnecting from work by March 1, 2022. While there are currently no definitive specifications, it is expected that guidelines will be published that will give us direction on the policy as well as address the nature of our business and our need to have 24/7/365 services available to our tenants.

A policy is currently being drafted for review and LMCH is committed to ensuring that we are in legislative compliance and will have a policy by the deadline of March 1, 2022.

Staffing Updates

Work continues to fill vacant positions at LMCH. This includes vacancies created through attrition as well as new positions created through Business Case # 19.

Melissa Young joined LMCH on January 4, 2022 in the role of Executive Assistant. Melissa will support the Board of Directors as well as the Senior Leadership Team and be a key liaison with the City of London and other stakeholders.

Staff are at the interview stage for a number of roles including Community Safety Specialist and Maintenance Repair. Competitions for Communications Specialist and a number of other roles have recently closed, and screening is underway.

PREPARED BY:
PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

STAFF REPORT 2022 - 02

TO: Board of Directors

FROM: Andrea Mackenzie, Director of Tenant Services

SUBJECT: Annual Internal Review Summary

DATE: January 14, 2022

PURPOSE:

The purpose of this report is to provide the Board of Directors for LMCH with an annual overview of the Internal Reviews completed by our organization.

RECOMMENDATION:

That, on the recommendation of the Director of Tenant Services, the following report **BE RECEIVED** for information purposes.

BACKGROUND:

LMCH provides Rent-Geared-to-Income (RGI) to eligible households in the City of London and Middlesex County. This Program is legislated under the Housing Services Act which sets out program framework, identifies key program requirements and identifies where the Service Manager (City of London) or the housing provider is permitted to exercise discretion. One of the key requirements of this program is the right to an appeal for certain adverse decisions, which are known as an internal review.

Under prior Boards of Directors there were a number of subcommittees that board members participated in, one of which was an ad hoc Tenant Appeals Committee. When decisions were made by LMCH staff around Rent-Geared-to-Income (RGI) calculations, loss of RGI subsidy, eligibility for housing, refusal to offer, etc. Individuals were provided with an opportunity to appeal this decision first internally through our appeal process that was managed by LMCH staff and then there was an opportunity for a secondary appeal where individuals would have to seek delegation status to appear before a Board Appeals Committee.

The Housing Division for the City of London developed a procedure outlined in the Housing Division Notice (HDN) #2013-194 (**attached as Appendix 1**) that outlined what delegated responsibility Housing Providers had in the determination of continuing eligibility for rent-geared-to-income

assistance, the appendices will outline this process as well as the specific areas addressed by this review system.

LMCH implemented this new process for current tenants who may wish to file an Internal Review related to the size of the unit they are eligible for, the amount of RGI rent payable, or more frequently to appeal the cessation of eligibility. In additional, clarification was sought from the Housing Division about the organizations refusal to offer, and LMCH was directed by the Service Manager to move all appeals/reviews through this process moving forward, as such the ad hoc Tenant Appeals Committee was discontinued.

OVERVIEW:

Since the implementation of the revised review process in 2014, LMCH has averaged 13 internal reviews per year.

In 2021, there were a total of fourteen internal reviews completed by LMCH staff, the breakdown of the reviews is as follows:

Three appeals were requesting a review of the Rent-Geared-to-Income (RGI Calculation). All of these decisions were upheld.

Three appeals were requesting a review of RGI Eligibility, an example of which is a tenant has lost RGI eligibility after 24 months at market rent. Should tenants have a decrease in income or loss of employment they would have to reapply for an RGI subsidy although would be allowed to do so in-situ, as per HDN#2021-253 (**attached as Appendix C**). Two of these decisions were upheld and one was overturned upon review.

Three appeals were requesting a review of household type and size tenants were eligible for. Tenants had completed joint tenancy applications along with a request for larger units, which were originally denied. Upon receipt of the internal review all of these decisions were upheld.

Although not traditionally eligible for internal review, five formal requests were received from residents asking for a review of a transfer denial. Two of these refusals were upheld while three were overturned, in these three instances tenants were requesting a transfer under the Special Priority (SPP) category and while none of the individuals met the criteria for SPP a determination was made that they would be offered a transfer as a medical accommodation.

CONCLUSION:

The Internal Review is an important part of the review of decisions made by housing providers that have an impact on tenants. LMCH will continue to work to ensure our tenants understand the RGI Program requirements and will work with them to support the assessment of their ongoing program eligibility.



We make every effort to ensure communication and the documents being sent from LMCH support the understanding of decisions made, provide sufficient explanation for our decisions and, should the tenant choose, request a review of the decision.

Attachments:

- Appendix 1 – HDN#2013-194
- Appendix 2 – Internal Review Form & Final Review Form
- Appendix 3 – HDN#2021-253

PREPARED and SUBMITTED BY:	
Andrea Mackenzie Director of Tenant Services	
REVIEWED and CONCURRED BY:	REVIEWED and CONCURRED BY:



P.O. Box 5035
267 Dundas Street
London, ON
N6A 4L9

London
CANADA

Housing Division Notice

Date: September 3, 2013

HDN#2013-194

This applicable legislation/policy is to be implemented by the housing provider(s) under the following programs:

Please note, if your program is not checked, this change is not applicable to your project.

<input type="checkbox"/>	Federal Non-Profit Housing Program
<input checked="" type="checkbox"/>	Private Non-Profit Housing Program
<input checked="" type="checkbox"/>	Co-operative Non-Profit Housing Program
<input checked="" type="checkbox"/>	Municipal Non-Profit Housing Program (Pre-1986)
<input checked="" type="checkbox"/>	Local Housing Corporation

SUBJECT: NOTICES AND REVIEWS OF DECISIONS (*Replaces HDN#2002-04*)

- Appendix 1: Quick reference chart for notices and reviews including overview of timelines
- Appendix 2: Procedures for notices of decisions
- Appendix 3: Procedures for internal reviews of decisions
- Appendix 4: Procedure for final review body for review of certain decisions

PURPOSE:

To provide Social Housing Providers, Applicants and Tenants/Members procedures and standards related to notices of decisions, internal reviews of decisions, and a final review body for review of certain specific decisions as identified within the *Housing Services Act 2011* (HSA).

COMPLIANCE STANDARD:

General:

As detailed in the local housing Service Agreement, Housing Providers have been delegated the responsibility of determining continuing eligibility for rent-gear-to-income assistance. It is

therefore the responsibility of the Housing Provider to communicate decisions to households in a proper and timely manner. It is important that the Housing Provider follow the Act, Regulations, and local rules as the timelines vary based on the situation.

Please note that the Opportunities to Comment was eliminated in HDN 2011-168

Notices and Reviews:

The Housing Service Act 2011 (Ontario Reg. 367/11, Section 138 and 139) requires that Service Managers establish a system under which households (and Social Housing Providers) can request reviews of specific social housing decisions and where applicants can request reviews of social housing application decisions (e.g. priority and eligibility).

The review system, including considerations to maintain existing internal review requirements under the former *Social Housing Reform Act* (SHRA), must be outlined within a local rule under the HSA (through a Housing Division Notice).

The specific areas addressed by this review system are outlined in the HSA, Section 155 to 159 and Regulations (subject to amendment). These include:

- a) Eligibility for RGI assistance;
- b) Size and type of unit for which a household is eligible;
- c) Priority category (for applicants and transfer requests);
- d) Amount of RGI rent payable;
- e) Eligibility for special needs housing applicants;
- f) Cessation of eligibility; and
- g) Any other decisions subsequently prescribed by legislation.

The review system covers rent-geared-to income (RGI) eligibility, RGI subsidy calculations, adjustments, suspensions and discontinuations, decisions related to eligibility for specific occupancy standards, special requirements and related accommodation size or type, and decisions related to waiting list priorities and categories.

HSA Reg 367, s. 138 requires that no one who participated in the original decision may participate as a member of the review body. Members of the review body must be knowledgeable about the relevant provisions of the Act and Regulations. No one who discussed the decision with the decision maker may participate as a member of the review body, and no member of the review body may discuss the decision with the decision maker except during the course of the review.

Final reviews of a review body are limited to specific decisions identified within the Act and Regulations. It will remain a local standard that any such reviews are preceded by existing internal review practices.

Principles:

The following principles guide all notices and reviews:

- Fair:* Consistent decisions made in direct compliance with regulations and local rules with understanding of specific situations and unique circumstances
- Efficient:* Timely decisions, not resource intensive, no cost/low cost to administer

- Impartial:* Nonbiased by decision maker with transparent processes.
- Simple:* Reviews and decisions are as simple as possible to understand and administer.
- Accountable:* Actions and results are known and shared.
- Confidential:* Personal information is only used for its prescribed intent.
- Distinct:* Focused only on prescribed HSA areas.
- Sound:* Reflecting sound judgment through clear process and enforceable decisions.
- Accessible:* Be accessible to tenants and housing providers

LOCAL RULE / ACTION:

The attached Appendices reflect the local rule procedures, standards and timeframes to be used by all Social Housing Providers and the Service Manager related to social housing Notices of Decisions, Internal Reviews of Decisions and Final Reviews of Decisions.

Where the Social Housing Provider is requesting a review of a decision by the Service Manager, the same general rules outlined in Appendices 2 and 3 will apply, noting that the Social Housing Provider will be identified as the Party requesting the review and the Service Manager will be the responding Party, in accordance with Section 157 of the HSA (Reviews requested by housing providers).

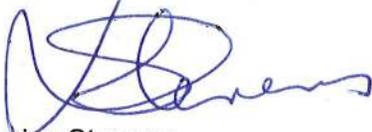
These appendices also address notifications and decisions made by the Housing Access Centre and the procedures which will be used for a final review.

This local standard is effective immediately.

Social Housing Providers are required to inform their Board of Directors about this local rule as well as any substantive business changes that it may require at the earliest opportunity.

AUTHORIZATION:

Original signed by



Louise Stevens
 Director, Municipal Housing

- Appendix 1: Quick reference chart for notices and reviews including overview of timelines**
- Appendix 2: Procedures for notices of decisions**
- Appendix 3: Procedures for internal reviews of decisions**
- Appendix 4: Procedure for final review body for review of certain decisions**

APPENDIX 1:

QUICK REFERENCE CHART FOR NOTICES AND REVIEWS INCLUDING OVERVIEW OF TIMELINES

Timeline		Action	Reference	Notes
Notice of Decision	As per timelines set for Housing Providers (HP) and Housing Access Centre (HAC).	Decision is made.	Appendix 1	Housing Provider (HP) or Housing Access Centre (HAC) makes a decision related to the HSA where a review is allowed.*
	Notices given within 5 days after decision.	Notice of Decision issued by decision-maker.*		Applicant/Tenant is INFORMED of decision including: <ul style="list-style-type: none"> if they don't agree, they can call the office to "talk about" the decision (some kind of indication that this needs to be done first) Process on how to initiate an Internal Review Decision letter will include the statement, in various languages, that "this letter is important; if you can't understand it, then please have it translated."
If Applicant/Tenant/Member DISAGREES with Notice of Decision... Have 10 days to submit a Request for an Internal Review.				Encourage positive resolution through discussion whenever possible but this cannot delay the formal timelines related to a Request for an Internal Review.*
Internal Review	Internal Review is completed within 10 days of receipt.	Informal Review = Discussion between Applicant/Tenant and Decision-maker.	Appendix 2	The Applicant/Tenant can call and speak informally with decision-maker to determine if a resolution is possible. Any revised decision through this informal process should be confirmed by the HP/HAC in writing. This step cannot be skipped; it needs to be completed before, or parallel to, the formal request. Applicant/Tenant is reminded/provided the format for submitting a Request for an Internal Review and of the fact that it must be submitted by a certain date (refer to original decision letter). <i>If the Applicant/Tenant is satisfied with the answer at this point, then the process stops. Informal discussion is noted and no further action taken.</i>
		Formal Review = Request for Internal Review Form submitted and received by HP/HAC.		Formal Reviews are logged and tracked internally to the HP or HAC.
	Internal Review reviews decision.	Formal Review conducted by person not involved in original decision.		
	Response to Internal Review issued within 5 days of decision (or 15 days of request received).	Notice of Internal Review Decision letter issued in response.		Response letter includes details on how to request a Final Review if not satisfied with Internal Review decision. <i>If the Applicant/Tenant is satisfied with the answer at this point, then the process stops. Formal discussion is noted and no further action taken.</i>
If Applicant/Tenant/Member DISAGREES with Internal Review... Have 10 days to submit a Request for a Final Review.				Applicant/Tenant is reminded/provided the format for submitting a Request for a Final Review and of the fact that it must be submitted by a certain date.
Final Review	Clerk will notify Requestor within 10 days re: Final Review date.	Final Appeal Review = Request for Final Review submitted and received by Review Body	App 3: 7.1	Logged; given to Review Body consisting of person/people who was/were not involved in the original decision or the Internal Review decision.
	(Dismissal of Proceeding within 10 days of receipt if nec.)	Final Review Body reviews decision.	App 3: 8.1, 8.2	A dismissal of a proceeding would relate to matters outside the jurisdiction of the Chair.
	Final Decision within 10 days of Final Review. Decision issued to Applicant/ Tenant within 5 days of Decision.	Notice of Final Appeal Review Decision letter issued in response.	App 3: 14.3, 14.4	Decision is made; Letter mailed; changes made to file, if applicable. Applicant is notified that decision is FINAL within a month of applying for a Final Review and within 2 months of Notice of Decision.

* Where applicable, the Social Housing Provider may also be an Applicant/Requesting Party in a request for a review of a decision made by the Service Manager to the Social Housing Provider. The same process and conditions apply.

APPENDIX 2: PROCEDURES FOR NOTICES OF DECISIONS

General:

Restrictions and requirements for written notices are related to the following:

- Determining Eligibility for Assistance;
- Type and Size of Accommodation;
- Waiting List Category;
- Amount of geared-to-income rent;
- Deferral of geared-to-income rent;
- Eligibility for Special Needs Housing;
- Type of Accommodation - Special Needs Housing; and
- Waiting Lists for Special Needs Housing.

Required Content of Letters:

A notice must contain the following:

1. A statement of the date the decision to which the notice relates was made;
2. A statement of the date of the notice;
3. If a member of the household may request a review of the decision under HSA,
 - (i) a statement of the reasons for the decision; and,
 - (ii) a statement that the member of the household is entitled to request a review; and,
 - (iii) information on how to request a review and what the deadline is for doing so; and
4. If no member of the household may request a review of a decision under HSA, a statement that the decision is final.

A notice must be given to the household **within 5 days after the decision to which the notice relates is made**. (See Appendix 3 Section 1 for definition of "day" and Appendix 3 Section 4 for calculation of time).

Notices must comply to and reference applicable sections of the HSA and Regulations.

Compliance:

The power to review decisions is delegated to housing providers through Service Agreements. Housing Providers deliver Notices of Decisions. The Service Manager will ensure that there is a process of documenting and providing Notices of Decisions within appropriate timeframes and legislative compliance.

APPENDIX 3: PROCEDURES FOR INTERNAL REVIEWS OF DECISIONS

General:

A member of a household may request an internal review of the above noted decisions.

The general procedures for all internal reviews include:

1. An applicant or social housing household may request a review **within 10 days** of being notified of the decision. (See Appendix 4 Section 1 and 4 for definition and calculation of DAY);
2. A request for review must be in writing; and
3. Review processes are based on reasonableness and decisions reflect the merits of each situation. (i.e. Submission dates should not be a primary impediment to a review).

No individual who participated in the making of the decision being reviewed shall participate in the review of that decision. This requirement may necessitate **Housing Providers making amendments to their bylaws, policies and/or reviewing their committee structure in order to deal with this requirement.**

The internal review shall be completed **within 10 days** after the request for the review is received and written notice of the result of the review be provided to the household **within 5 days** after the review is completed. (See definition of DAY in Appendix 4 Section 1 and 4).

The written notice will either overturn the related Notice of Decision or uphold that decision reaffirming the process identified above within the Notice of Decision. If upholding the initial Notice of Decision, details will be provided outlining the process for a final review, where applicable to the Final Review Body. (See Appendix 4).

Required Content of Letters:

A notice of decision related to an internal review must contain the following:

1. A statement of the date and original decision to which the notice of decision was made;
2. A statement of the date of the notice of decision of the internal review;
3. The outcome of the decision and a statement of the reasons for the decision;
4. A statement that the household is entitled to request a final review (if applicable);
5. Information on how to request a final review and the deadlines for doing so; and
6. A statement that the decision is considered final unless overturned through a final review.

A notice must be given to the household **within 10 days after the decision to which the notice relates is made.** (See definition of DAY in Appendix 4 Section 1 and 4).

Notices of decisions of internal reviews must comply to and reference applicable sections of the HSA and Regulations.

Compliance:

The review of decisions is delegated to Housing Providers through Service Agreements. Housing Providers deliver Notices of Decisions, manage Internal Review policies and practices, and must provide proof of such as requested to the Service Manager. The Service Manager will ensure that a process of Final Review exists.

APPENDIX 4: PROCEDURE FOR FINAL REVIEW BODY FOR REVIEW OF CERTAIN DECISIONS

General:

A member of a household may request a Final Review of certain decisions.

The procedures for Final Reviews are outlined below and include:

1. An applicant or social housing household may request a Final Review **within 10 days** of being notified of the decision on an Internal Review. (See Procedure section 1 and 4 for definition and calculation of DAY).
2. A request for review must be in writing.
3. The Final Review Processes (below) are based on reasonableness and decisions reflect the merits of each situation.
4. All decisions made through a Final Review are final.

Review Body:

A Final Review Body within the *Housing Services Act 2011* (HSA) provides an independent and final review of internal review decisions as described within the appendices of this HDN. A request for a final review will be allowed for those certain decisions identified within the HSA upon completion of an Internal Review and Notification of the Decision.

The Review Body will be comprised of the Director of Housing or senior Housing Division Management designate who is informed in the HSA and associated regulations and related local rules, principles and procedural fairness, and was not involved in the decision, as well as a Recording Clerk providing administrative support and not participating in the final review decision. Housing or other City staff or other subject matter experts may be called upon for knowledge and information.

Requesting a Final Review:

Requests for Final Reviews will be received in writing (by fax, post, courier, hand delivered, email) and include a copy of the Internal Review Notice of Decision and any associated supporting documents.

Requests for Final Review are to be addressed as follows:

Attention: Request for Final Review
Director, Housing Division
P.O Box 5035
267 Dundas Street, 3rd Floor
London, ON N6A 4L9

Compliance:

The following procedures will be used for the establishment and management of a Final Review Body (Review Body) for certain decisions within the Housing Services Act.

Procedures for Final Review Body (for the Review of Certain Decisions):

PURPOSE:

To ensure just decisions based upon the facts and laws relating to matters adjudicated upon within the jurisdiction of the Housing Services Act and related local rules.

1. DEFINITIONS

1.1 In these Rules, unless otherwise required or noted, the following terms are defined as follows:

"Chair" or "Review Body Chair" means the Chair of the Social Housing Service Manager or their senior management designate;

"City" means The Corporation of the City of London Housing Division;

"Recording Clerk" means the City of London Housing Division staff person assigned to assist in receiving and cataloguing Requests for Final Review, supporting documents, and decisions;

"Day" means any day other than a Holiday as defined below (See "Holiday");

"Decision" means a final action or direction made by the Chair in response to a Request for a Final Review;

"Document" includes a written document book of account and information recorded or stored by means of any device including, but not limited to, a file, photograph, chart, graph, or plan;

"Electronic Review" refers to a Final Review made by conference telephone call or some other form of electronic technology allowing persons to hear one another;

"Holiday" means any Saturday or Sunday; New Year's Day; Family Day; Good Friday; Easter Monday; Victoria Day; Canada Day; Civic Holiday; Labour Day; Thanksgiving Day; Christmas Day; Boxing Day; and extended holiday closure, and any special holiday proclaimed by the Governor General of Canada or the Lieutenant Governor of Ontario, and where New Year's Day or Canada Day falls on a Saturday or Sunday, the following Monday is a holiday, and where Christmas Day falls on a Saturday or Sunday, the following Monday and Tuesday are holidays, and where Christmas Day falls on a Friday, the following Monday is a holiday;

"Oral Review" means a Final Review Proceeding at which the Parties attend in person;

"Party" means a person (or persons) who is either the requester of a Final Review or the responding housing provider or the Housing Access Centre;

"Review", Final Review" or "Final Review Proceeding" refers to formal matters and proceeding before the Chair of the Social Housing Service Manager Review Body to re-examine a decision with an intent of applying final authority under the role of Service Manager for social housing related to certain decisions within the HSA;

"Rules" means these rules;

"Service Manager" refers to the legislated responsibilities of the City of London Housing Division in administering and delivering social housing in the City of London and County of Middlesex;

"Written Review" means a Final Review Proceeding held by means of the exchange of documents whether in written form or by electronic means.

2. APPLICATION

- 2.1 These Rules apply to Final Reviews before the Chair of the Social Housing Review Body exercising the authority of the Service Manager under the HSA for certain decisions identified within the act and associated regulations, local rules (identified locally as Housing Division Notices).
- 2.2 In accordance with Section 158 of the HSA Regulations, *The Statutory Powers Procedure Act* does not apply to these rules or to the review of Certain Decisions under the HSA and should have no effect on decisions made under other statutes or laws outside of the authority of this Review Body.

3. INTERPRETATION

- 3.1 These Rules shall be broadly interpreted so as to ensure the most just and expeditious determination of a Final Review on its merits.
- 3.2 Where procedures are not provided for in these Rules, the Chair may do whatever is necessary and permitted by law to effectively determine the matter before him or her.
- 3.3 The Chair may exercise any of his or her powers under these Rules on his or her own initiative or at the request of a Party.
- 3.4 A defect in form or other technical breach will not make a Final Review invalid.
- 3.5 Where a Party to a Final Review has not complied in full with any Rule or procedural decision or order, the Chair may:
- (a) grant all necessary amendments or other relief, subject to such conditions as the Chair considers just; or,
 - (b) adjourn the proceeding until it is satisfied that such Rule or order has been complied with; or,
 - (c) take such other steps as the Chair considers just and reasonable.

4. CALCULATION OF TIME

- 4.1 To calculate time under these Rules or a procedural order:
- (a) Where there is a reference to a number of days between two events, they shall be counted by excluding the day on which the first event happens and including the day on which the second event happens; and,
 - (b) Where the time for doing an act under these Rules expires on a holiday, the act may be done on the next day that is not a holiday; and,
 - (c) where a time of day is mentioned in these Rules or in any order in a proceeding, the time referred to shall be the time observed locally in the City of London; and,
 - (d) Where a document is received after 4:00 p.m. on any day or at any time on a holiday, the document shall be deemed to have been received on the next day that is not a holiday.

5. EXTENDING OR ABRIDGING TIME

- 5.1 A Chair may extend or abridge any time prescribed in these Rules unless it is unreasonable to do so.

6. FILING OR SUBMITTING OF DOCUMENTS

- 6.1 Filing of any document to the Recording Clerk prior to a Final Review may be done by personal delivery, by ordinary or registered mail, by fax transmission, by courier, by email or otherwise as the Chair may order.
- 6.2 Documents filed with the Recording Clerk shall be made available by that Party to other Parties.
- 6.3 Where a document is submitted, the Recording Clerk shall date stamp the document. Subject to Rule 4.1, the date of the receipt stamp on the document shall be deemed to be the date of filing, unless the Chair orders otherwise. A Party may request confirmation from the Clerk that a document filed was properly received.
- 6.4 Where a filing is made by fax, the document shall include a cover page containing the following items:
- (a) the name, address and telecommunication numbers of the sender; and,
 - (b) the date and time the document is transmitted; and,
 - (c) the telephone number from which the document is transmitted; and,
 - (d) the total number of pages transmitted including the cover page; and
 - (e) the name and telecommunication numbers of a person to contact if a problem arises with the transmission of the fax.
- 6.5 The Chair may direct that where a document is filed by electronic transmission, by email, or by fax, the original and all copies required shall be delivered by a specified time.

7. REQUEST FOR A FINAL REVIEW

- 7.1 Where a Requester requests a Final Review before the Social Housing Service Manager Review Body, the request shall be in writing and shall be filed with the Recording Clerk within **10 days** of receiving the Notice of Internal Review Decision under contention and shall include:
- (a) an identification of the Requester(s) and any other Parties to the Final Review; and,
 - (b) the addresses, telephone numbers, email address and, where available, fax number for each person identified in clause (a); and,
 - (c) the name, address, telephone number, and email address of any advocate or support representative with a form authorized and signed by the requesting Party; and,
 - (d) whether special services or accommodation are required for an Oral or other review including translation services or services for the visually or hearing impaired; and,
 - (e) the reasons in support of the Final Review; and,
 - (f) the signature of the Requester(s).
- 7.2 Within 10 days after receiving a Request for a Final Review, the Recording Clerk shall notify the Requester, if:
- (a) the documents are incomplete; or,
 - (b) the documents are received after the time required for filing a Request for a Final Review has elapsed; or,
 - (c) a decision has been made by the Chair under Section 8; or,
 - (d) there is some other technical defect in the notice of appeal.

- 7.3 Where the Clerk determines not to process a Request for a Final Review due to a deficiency listed in Rule 7.2, the Recording Clerk shall provide the Party filing the request notification of such decision, specifying the deficiencies which need to be corrected. Such notice shall advise that the request for Review may be commenced upon the Party correcting the deficiencies listed in the notice except if the notice has been received after the time required for commencing the proceeding has elapsed. Requests for Reviews denied for reasons of time requirements shall be reviewed by the Chair.
- 7.4 Subject to Rules 7.2 and 7.3, upon receipt of a Request for a Review pursuant to Rule 7.1, the Recording Clerk shall set the Final Review date, location and format of the Review. Reviews will proceed as Written Reviews unless otherwise requested by the Requesting Party. Upon setting the Review Proceeding date and determining the location and format of the Review, the Clerk shall provide a written Notice of a Review to the Requester and required Parties.
- 7.5 A Notice of a Final Review shall contain:
- (a) reference to the regulation or rule under which the Review is being requested; and,
 - (b) a statement reflecting if an Oral hearing is being requested; and,
 - (c) any other information the Clerk or Chair considers necessary for the proper conduct of the Review Proceeding.
- 7.6 In addition to the requirements for a Notice of Final Review set out in Rule 7.5, a Notice of Final Review for an Oral Review Proceeding shall contain:
- (a) the location of the Final Review Proceeding; and,
 - (b) a statement that the Review will open to the public unless determined by the Chair that it is unreasonable to do so.
- 7.7 In addition to the requirements for a Notice of Final Review set out in Rule 7.5, a Notice of Final Review for an Electronic Review Proceeding shall:
- (a) contain details about the manner in which the review will be held; and,
 - (b) be reflective that it is being held with the consent of Parties.
- 7.8 In addition to the requirements for a Notice of Final Review set out in Rule 7.5, a Notice of Review for a Written Review Proceeding shall contain:
- (a) a statement that the Parties will be required to exchange documents with other Parties; and,
 - (b) a statement that the Parties will have an opportunity to ask questions in writing on the documents, which the other Parties will be required to answer, and will have an opportunity to make submissions; and,
 - (c) a statement that the Chair shall hold a Written Review unless if a Party requests otherwise.

8. DISMISSING PROCEEDINGS WITHOUT A REVIEW

- 8.1 The Chair may dismiss a proceeding without a Final Review if:
- (a) the request is frivolous, vexatious or is commenced in bad faith; or,
 - (b) the proceeding relates to matters that are outside the jurisdiction of the Chair or the decisions as outlined in the *Housing Services Act, 2011*; or,
 - (c) some aspect of the requirements for the Request for Final Review has not been met.
- 8.2 The Chair shall give a Notice of Decision dismissing the proceeding to the Requester and other Parties if deemed necessary, setting out the reasons for the dismissal and informing the Parties of their ability to provide any clarifying reason that the Review should be heard by written submissions to the Chair within 10 days of the Notice.

9. PROCEDURAL ORDERS

- 9.1 In any proceeding, the Chair may issue an order governing the conduct of the proceeding.
- 9.2 The Chair may, at any time during a proceeding, amend any order which he or she has issued.
- 9.3 The Chair may, where satisfied that the special circumstances of the proceeding so require, vary or waive compliance with all or any part of any Rule at any time by making an order.
- 9.4 Where a provision of these Rules is inconsistent with a procedural order, the procedural order shall prevail.
- 9.5 Procedural orders made by the Chair may include requests for further information, an exchange of documents, or other forms of disclosure but will not include motions or summonses.

10. REVIEW BODY – FINAL REVIEW PROCEEDINGS

- 10.1 The Chair may hold:
 - (a) an Oral Review; or,
 - (b) a Written Review; or,
 - (c) an Electronic Review; or,
 - (d) a Final Review Proceeding which combines one or more of the above formats.
- 10.2 A Requester or other Party to a proceeding may have an advocate or personal representative to provide support, subject to the Chair being satisfied that:
 - (a) the person is entitled to be heard by the Chair; and,
 - (b) the representative is authorized to represent the person in the proceeding; and,
 - (c) the authorization has been filed and is in effect before the Review Proceeding; and,
 - (d) the advocate or representative is not making verbal declarations of fact in the absence of the person they are representing. They can present documents and make reference to materials already provided.
- 10.3 If a person requires a translator at any time during a proceeding, the person must provide the translator at the person's expense unless the Chair deems an Oral or Electronic Review a requirement.
- 10.4 Final Review Proceedings shall generally be considered open and public.
- 10.5 No person shall take or attempt to take a photograph, motion picture, video recording, or other recording capable of producing visual or aural representations by electronic means or otherwise, at any Final Review Proceeding unless reason and notice are provided to the Chair.
- 10.6 Unless the Chair directs otherwise, the process for all Review Proceedings shall be comprised of the Chair and Recording Clerk and be conducted as follows:
 - (a) the Chair will call the Proceeding to order and may advise any Parties present (at an Electronic or Oral Review) of the review process;
 - (b) at Electronic or Oral Reviews, the Chair may decide which of the Parties it wishes to hear from first, but it is customary that the Party whose decision has already been made (E.g., the Housing Access Centre, a Housing Program Officer, or a Housing Service Provider proceed first with a review of the existing decision;
 - (c) at Written Review Proceedings, written submissions and any supporting information will be noted for record by the Recording Clerk in the same order as noted above;
 - (d) there will be opportunity, but no requirement, for witnesses or cross questioning in Electronic and Oral Review Proceedings;

- (e) the Chair may ask questions of the Parties, witnesses, or staff at any time;
- (f) this process is subject to change by the Chair if a fairer way of proceeding is identified;
- (g) the Chair may reserve the right to make final decisions either at the Review Proceeding or following and the Chair may adjourn a Review Proceeding at any time on such conditions as he or she considers just.

10.7 Where a requesting Party is notified of an Oral or Electronic Review and does not attend at the time, manner, or place appointed, the Chair may proceed in that person's absence and without further notice to that person. If no written submission is available, the matter shall be dismissed.

11. SUPPORTING DOCUMENTS FOR FINAL REVIEW PROCEEDINGS

- 11.1 The Chair may receive supporting documents at a Final Review Proceeding, at the discretion of the Chair based on the information or document.
- 11.2 Supporting documents, forms, ledgers, etc. may be received without procedures related to their admissibility.
- 11.3 Nothing in Rule 11.1 or 11.2 overrides the provisions of any act expressly limiting the extent to or purposes for which any oral statement, documents, or things may be admitted or used as supporting documents in a Final Review Proceeding.
- 11.4 Where the Chair is satisfied as to its authenticity, a copy of a document or other thing may be received as a supporting document at a Final Review Proceeding.
- 11.5 Where a supporting document has been received, the Chair may, or the person producing it or entitled to it may, with the leave of the Chair, require the document to be photocopied and the copy held by the Chair as part of the Final Review.
- 11.6 In any Final Review Proceeding before the Chair, a statement, letter, or form respecting a Matter related to the Review purporting to be signed or authorized by a representative of the City of London Housing Division or any other City of London authorized staff person will, in the absence of evidence to the contrary, be received as a statement of fact.
- 11.7 The Chair may, in making a decision, take notice of any generally recognized or technical facts, information or opinions within his or her specialized knowledge.

12. OTHER PARTIES AS WITNESSES

- 12.1 Unless recognized by the Chair as a requirement (and noted in the Notice of an Oral or Electronic Review), witnesses will not be required at Final Review Proceedings. Statements from other Parties may be submitted as supporting documents, and must include sufficient information about the Party as to be able to verify their identity and the validity of the statements or information.
- 12.2 There shall be no undue harassment or embarrassment or questioning of a witness as he or she is giving a statement. The Chair may disallow anything stated that is part of a vexatious or irrelevant matter during a Proceeding.
- 12.3 The Chair may at any time during a Proceeding direct that a witness be called or recalled for further examination.

12.4 The Chair has no statutory authority to compel or require persons to be present or provide statement and, as such, relies on the best information available.

13. SUBMISSIONS AND SUPPORTING DOCUMENTS IN WRITTEN REVIEWS

13.1 Where a proceeding is conducted in writing, the statement of any required witnesses shall be given by a signed statement.

13.2 All Parties are entitled to receive copies of every document that the Chair receives in a Final Review Proceeding.

14. DECISIONS

14.1 The Chair will determine the issues before him or her as he or she considers just. All decisions of a Chair shall be in writing and shall be considered final.

14.2 The Chair does not have the power to award costs of the proceedings to any Party.

14.3 The Chair will provide his or her decision with his or her reasons in support of the decision, if any, to the Clerk. This may not be at the Final Review Proceeding but at a reasonable time following the completion of the review and generally within 10 days of the review, unless special consideration or additional information is required.

14.4 The Clerk shall send a written copy of the Notice of Final Decision by standard post to the last known address of the Requester within 5 days of the date of decision. If no known address is available, the letter will be held on file. An electronic copy of the decision will be provided to the Housing Provider or Housing Access Centre, whichever is applicable, for record. No other member of the household will be provided with the notice of final decision either by the Chair, Housing Division, or the Housing Provider unless prearranged and authorized by the Requester.

14.5 The Chair may at any time correct a typographical error, error of calculation, misstatement, ambiguity, technical error or other similar error made in his or her decision, direction or order.

15. RECORD OF PROCEEDINGS

15.1 The Clerk shall compile an electronic record of Final Review Proceedings before a Chair which shall include:

- (a) the Notice of the Final Review Proceeding;
- (b) all Final Decisions of Review Proceedings made by the Chair;
- (c) all supporting documents filed at the proceeding subject to any limitation expressly imposed within the *Housing Services Act 2011* or any other Act on the extent to or the purposes for which any such documents may be used in a proceeding;
- (d) any other documents that in the opinion of the Clerk or the Chair should be included in the record of proceedings;
- (e) a summary of review decisions for reporting purposes. These will be shared with the Social Housing Operational Advisory Committee for recommendations and further policy considerations.

Social Housing FINAL REVIEW

Information and Application



Information for Social Housing Applicants and Tenants/Members Regarding Final Reviews of Certain Decisions

What are Final Reviews?

Final Reviews are conducted by the City of London Housing Division on matters that have already been addressed through an internal review by either the Housing Access Centre or the social housing provider.

Final reviews are specific to social housing/ rent-g geared-to-income issues governed under the *Housing Services Act, 2011* and related local rules.

This **DOES NOT INCLUDE** matters that fall under the *Residential Tenancies Act, 2006* or issues related to co-operative housing.

Questions?

See your Housing Provider or visit or call the City of London Housing Division:

Website: www.london.ca/housing

Email: housing@london.ca

Phone: 519-661-0861

When and How do I Request a Final Review?

You must already have requested an internal review and have received a Notice of Decision letter on the internal review.

Please complete the **Request for Final Review form** on the back side of this brochure (or on Page 2 of the online version). Please include a copy of the Notice of Decision letter(s) that you received.

Send your request for a Final Review by mail or drop off to:

REQUEST FOR FINAL REVIEW
Attention: Manager, Housing Services
Citi Plaza, 355 Wellington Street, Suite 248
London, ON N6A 3N7

The request **must** include: your full name, current address, the reason you disagree with the internal review decision (why you want a final review), any information you feel may be useful in support of your request, and your signature.

Your request **must** be received within 10 days from the date you received the Notice of Internal Review decision letter.

Please Note:

You will be contacted within 10 business days from when the City receives your request with further details on your Final Review.



Request for Final Review

For office use only

Client number

Final Review requested by

Last name		First name and middle initial	
Telephone number?		Can we leave a message at this number? <input type="radio"/> Yes <input type="radio"/> No	
Alternate contact name & telephone number		Can we leave a message at this number? <input type="radio"/> Yes <input type="radio"/> No	
Apartment number	Current address		
City	Province	Postal code	E-mail address

1. Attach your Notice of Internal Review Decision letter.

2. Reason(s) for the request for the final review.

- Eligibility for rent-geared-to-income assistance
- Size and type of unit that a household is eligible for
- Priority category (for new applicants and transfers)
- Amount of rent-geared-to-income rent payable
- Eligibility for special needs housing applicants
- Ending of eligibility for special needs households
- Other (Please specify): _____

3. Why do you disagree with the decision made? *Below please write a brief explanation why **and** attach supporting documentation.*

4. Is an in-person meeting being requested. (Final Reviews do not require an in-person meeting unless requested) Yes No

5. Do you have an advocate/secondary representative? Yes No If yes, please complete the following.

Contact name of advocate/secondary representative	Agency name	Contact number
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You must sign this Request for Final Review form. It must be received by the Housing Division within 10 business days from your receipt of the Notice of Internal Review Letter Decision you are appealing. Make sure that the information you give is complete. Your signature also allows the Final Review Body to contact your advocate or representative to discuss the matter on your behalf.

The personal information collected on this form is collected under the authority of the *Housing Services Act, 2011* and will be used to determine suitability and eligibility for housing, continuation of housing and the appropriate rent scale and rent geared-to-income charge. Questions about this collection should be addressed to the Manager, Housing Services at Citi Plaza, 355 Wellington Street, Suite 248, London, ON N6A 3N7.

By signing this form I hereby provide consent for my personal information to be disclosed to housing providers, other municipal or provincial departments and agencies that assist in the provision of social housing and social agencies providing social assistance.

The information that has been provided on this form is to the best of my knowledge accurate. I understand it will be used for the purpose of reviewing my eligibility for social housing.

Signature of applicant/tenant/member (You must be 16 years of age or older to request a Final Review.)

Date signed

For Housing Division use only

Decision made			
Date received	Date of internal review	Date review letter sent	Signature

Social Housing INTERNAL REVIEWS

Information and Application



Information for Social Housing Applicants, Tenants/Members Regarding Internal Reviews of Certain Decisions

What Decisions can be Reviewed?

Internal Reviews are specific to social housing/
rent-gear-to-income issues governed under
the *Housing Services Act, 2011* and related local rules.

This DOES NOT INCLUDE matters that fall under the
Residential Tenancies Act, 2006 or issues
related to co-operative housing.

Questions?

See your Housing Provider or visit or call
the City of London Housing Division:

Web: www.london.ca/housing
Email: housing@london.ca
Phone: 519-661-0861

When and How do I Request an Internal Review?

To request an Internal Review, you must already have
received a written **Notice of Decision** from either the
Housing Access Centre or your social housing provider
regarding a matter governed under social housing rules.

**Internal Reviews are submitted directly to either the
Housing Access Centre or your social housing provider**—whoever provided you with your Notice of Decision.

Please complete the **Request for Internal Review** available on the back of this brochure (or on Page 2 of the online version).
Please include a copy of the Notice of Decision letter that you received.

Requests **must also include:** your full name, current address, signature, and the reason you disagree with the
decision (why you want a review), as well as any information you feel may be useful to support your request.

Your request **must** be received within 10 days from the date you received the Notice of Decision.

Please note:

**A decision on your Internal Review will be sent to you
within 15 business days of receiving your request.**



Request for Internal Review

For office use only

Client number

Review requested by

Last name		First name and middle initial		
Telephone number		Can we leave a message at this number? <input type="radio"/> Yes <input type="radio"/> No		
Alternate contact name & telephone number		Can we leave a message at this number? <input type="radio"/> Yes <input type="radio"/> No		
Apartment number	Current address			
City	Province	Postal code	E-mail address	

1. Attach your Notice of Decision letter.
2. Reason(s) for the request for the internal review.
 - Eligibility for rent-geared-to-income assistance
 - Size and type of unit that a household is eligible for
 - Priority category (for new applicants and transfers)
 - Amount of rent-geared-to-income rent payable
 - Eligibility for special needs housing applicants
 - Ending of eligibility for special needs households
 - Other (Please specify): _____
3. Why do you disagree with the decision made? *Below please write a brief explanation why and attach supporting documentation.*

Please note: You must sign this request form and deliver it by mail or in person within 10 business days of receipt of the Notice of Decision you are appealing. To avoid delays, make sure that the information you give is complete.

For reviews of Housing Access Centre Decisions

For reviews of Housing Provider Decisions

Send to: Housing Division
 379 Dundas Street - Suite 116
 London, Ontario, N6B 1V5
 or by fax to: 519 661-4466
 or email: housing@london.ca

send to your Social Housing Provider

London & Middlesex Housing Corporation
 c/o Director of Tenant Administration
 1299 Oxford Street East, Unit 5C5
 London Ontario, N5Y 4W5

Office hours: Monday to Thursday 8:30 a.m. to 12:00 p.m. and 1:00 p.m. to 4:00 p.m.; Friday 8:30 a.m. to 12:00 p.m.

The personal information collected on this form is collected under the authority of the *Housing Services Act, 2011* and will be used to determine suitability and eligibility for housing, continuation of housing and the appropriate rent scale and rent geared-to-income charge. Questions about this collection should be addressed to the Director of Municipal Housing at P.O. Box 5035, 3rd Floor, London, ON N6A 4L9.

By signing this form I hereby provide consent for my personal information to be disclosed to housing providers, other municipal or provincial departments and agencies that assist in the provision of social housing and social agencies providing social assistance to the resident.

The information that has been provided on this form is to the best of my knowledge accurate. I understand it will be used for the purpose of reviewing my eligibility for social housing.

Signature of applicant/tenant/member (You must be 16 years of age or older to request an Internal Review.)

Date signed

For Housing Division use only

Decision made			
Date received	Date of internal review	Date review letter sent	Signature



Housing Services
355 Wellington Street,
Suite 248
London, ON
N6A 3N7



Housing Division Notice

Date: February 1, 2021

HDN# 2021 – 253

This applicable legislation/policy is to be implemented by the housing provider(s) under the following programs:

Please note if your program is **not checked**, this change is **not applicable** to your project.

√
√
√
√
√

Federal Non-Profit Housing Program

Private Non-Profit Housing Program

Co-operative Non-Profit Housing Program

Municipal Non-Profit Housing Program (Pre-1986)

Local Housing Corporation

Subject: IN-SITU POLICY

(Replaces HDN # 2005 – 88 & HDN 2002 - 36)

1. PURPOSE:

To establish guidelines for determining rent-geared-to-income (RGI) eligibility for current tenants paying the full market rent for a unit within a designated social housing provider in London-Middlesex

2. BACKGROUND AND COMPLIANCE STANDARD:

Market paying tenants currently renting with a designated social housing providers may apply for RGI in their current unit. This is called an in-situ application, and it is made directly to the housing provider and subsequently, to the Service Manager for a Final Decision if the Housing Provider believes the tenant meets the criteria.

Ontario Regulation 367/11, s. 48 of the Housing Services Act, 2011 states that the housing provider may, with the approval of the service manager, select a household that already occupies a unit in a designated housing project as a household to receive rent-geared-to-income assistance. This regulatory provision is the foundation for the in-situ policy.

3. POLICY

- I. The in-situ policy provides access to RGI assistance for current households renting a market unit within a designated social housing provider on compassionate grounds.
- II. This policy is intended to support market households who experienced an involuntary and permanent loss of income, which results in their inability to pay the market rent of their current unit.
- III. Without RGI support, these households would be at a significant risk of being evicted from their market unit and enter into homelessness.
- IV. To be eligible for in-situ policy, the household must meet **all** of the following eligibility criteria.

In-Situ Household Eligibility Criteria	
	The household must meet RGI eligibility
	The household has been in living in a unit paying market rent for 24 consecutive months
	The household must meet occupancy standards for which they are eligible for regarding acceptable dwelling size. <i>Overhoused tenants are not eligible for in-situ</i>
	The household's loss of income is permanent and involuntary with no reasonable expectation of being able to continue to pay market rent in the future.
	The Housing Provider must be below their RGI portfolio target

- V. Households approved for in-situ will be eligible to receive a RGI subsidy to live in their current unit.
- VI. The tenant must notify their Housing Provider that they request to be considered for in-situ consideration.
- VII. The housing provider must review the tenant's situation to the eligibility criteria noted and make a formal request to the Service Manager, in writing, if they support the tenant's request for in-situ consideration.
- VIII. Only the Service Manager can approve, in writing, a household(s) for in-situ policy.

The following provides examples of situations that may or may not be eligible under the in-situ policy:

Circumstances Eligible for In-Situ Priority	Circumstances NOT Eligible for In-Situ Priority
<ul style="list-style-type: none"> • Loss of a family member (e.g., death) that was contributing to the household's income • Sudden disability or critical illness acquired by a household member that restricts this household member from continuing to work and generate sufficient income • Inability to continue to pursue meaningful income due to health challenges resulting from being 70+ years or older. 	<ul style="list-style-type: none"> • Loss of employment that is not permanent (e.g., temporary dismal or redundancy) • Family breakdown and/or martial separation that has not resulted in a permanent loss of income. • Maternity leave • Incarceration of a member of the household

4. ACTION:

The following provides an overview of the roles and responsibilities of the tenant, housing provider and Service Manager during the in-situ consideration review process.

Tenant

- 1) The tenant must inform their housing provider that they wish to be considered for RGI assistance in their current unit as defined within the in-situ policy.
- 2) The tenant must provide all necessary information to the housing provider as it relates to the in-situ eligibility criteria.
- 3) If the tenant is approved for RGI assistance through in-situ eligibility, they must complete a general application for RGI eligibility.

Housing Provider

- 4) The housing provider must review the tenant's request for RGI assistance under the in-situ policy and compare their circumstance to the eligibility criteria.
- 5) If the housing provider believes there is alignment between the tenants' situation and the in-situ eligibility criteria, the housing provider, and/or their respective Board, will notify the Service Manager in writing.
- 6) The letter from the housing provider to the Service Manager must outline the household(s) situation and how their specific circumstance warrants an in-situ policy review.

Service Manager

- 7) The Service Manager will review the in-situ submission and may, if required, follow up with the housing provider for more information.
- 8) The Service Manager will review the request and will make a decision, in writing, to the housing provider within ten (10) business days.
- 9) If approved, the Service Manager will contact the tenant to complete a general RGI application form, if required.

Effective immediately, the policies and procedures in this Housing Division Notice are to be implemented by all Housing Providers in the City of London and County of Middlesex included under the provisions of Ontario Regulation 367/11, s. 48, under the Housing Services Act, 2011, S.O. 2011, c.6, Sched. 1.

5. AUTHORIZATION:

Original Signed By

Dave Purdy
Manager, Housing Services

Date: February 1st, 2021

STAFF REPORT 2022 - 03

TO: Board of Directors

FROM: Preet Chhokar, Community Engagement Manager

SUBJECT: Community Engagement Update

DATE: January 11, 2022

RECOMMENDATION:

That, on the recommendation of the Community Engagement Manager, the following report **BE RECEIVED** for information purposes.

PURPOSE:

The purpose of this report is to provide updates on the Community Engagement department and community outreach initiatives.

COMMUNITY ENGAGEMENT UPDATE:

The Community Engagement team has seen many changes in support and programming due to this current wave of Covid and lounge/community room closures. We are working closely with community partners to adapt programs and support services to be able to still serve the community, but in a safe manner. Some programs have stalled their winter start date until this wave of Covid subsides and other community partners are collaborating with us to adapt and provide emergency or basic needs support to our communities. Covid uncovered a huge gap in access to services when many agencies went to virtual support. Many tenants were not equipped with the technology (many seniors) and the lack of digital literacy to be able to navigate the web. We are helping those that have shown interest in virtual programming apply to receive computers from some non-profits agencies that have refurbished computers to give away. We are also working with community partners to provide letters of support and grant applications to be able to receive the much-needed technology to eliminate barriers to participation for our tenants to access virtual support and programming.

Reimagine Southdale: Our team is working with tenants and offering one on one support on a consistent basis to navigate the relocation and help re-settle families into their new location. Every family has a unique situation, that requires systems navigation and resource referrals to make sure they are supported throughout the move. So far, we have supported 8 families to resettle into their communities of choice and the additional families are in the process of moving. This month we will be developing a virtual workshop to host our 3rd community conversation, where tenants will participate in a Beehive session, where they will consult one another, brainstorm ideas to improve their communities and programming.

Tenant Advisory Council: Plans for recruitment will begin this month for applications to join the TAC. Due to COVID and making sure there are no barriers to participate in the application process, we will be reviewing ways to incorporate a virtual application and interview processes.

In addition to the applications and recruitment, we will be seeking a community selection panel made up of members of the community (community partners etc.) to conduct interviews for new applicants.

Post-Secondary Readiness Program: This is a yearly program, running for 5 weeks in the winter and is facilitated by CDW and the CEM. This program supports tenants to apply for higher education. The Post-Secondary Readiness program is currently in week four of five. There are approximately four tenants that are preparing to apply to a certification or program, and another few that are gathering information to assist them in the future. Currently there are seven tenants with action plans for their pathway and another half dozen that require ongoing support in prepping for their next steps in higher learning.

Kings Social Work Placements: Due to COVID the the BSW students are providing counselling like services, community engagement workshops, virtually and are finding creative ways to engage the community virtually. They are helping tenants eliminate the barrier to participation in virtual programming by applying for a free laptop initiative run by a nonprofit organization. These are refurbished laptops that the tenants get to keep!

Community Outreach:

Glen Cairn Neighbourhood Resource Center: The fresh food market pop up is continuing at our family sites. GCNRC staff in collaboration with our team will be providing fresh produce boxes for families that have registered for the program.

VON: We are supporting our community partners VON in adapting their in-house meal service to provide catered meals delivered to our 6 senior's sites during this winter season. Tenants can register to receive cooked meals. Each site sees over 30 tenants registered to receive meals on a weekly basis.

Creativity Kits: The team collaborated with Creativity London in December, to reach out to our senior sites to register for creativity kits of their choosing for the holiday season. Our team delivered these kits to over 50 senior tenants during the week leading up to Christmas, and our Team will hold on to extra creativity kits to give out to residents during this season.

Wharnccliffe Holiday Meal: LMCH provided a holiday meal for 100 tenants at Wharnccliffe. The meals were made by Youth Opportunities Unlimited and LMCH staff along with Kings Social worker students were on site December 22, 2021, distributing these meals door to door to our community members.

Simcoe/Dundas Outreach: In collaboration with the London Community Chaplaincy, we handed out 75 breakfast bags per community to those tenants that registered to receive one at Simcoe and Dundas on Dec 21st and Dec 22nd. These breakfast bags include items to create their own holiday meal and other items to help them through the holiday season.



SIGNATURE:

PREPARED and SUBMITTED BY:	
Preet Chhokar Community Engagement Manager	
REVIEWED and CONCURRED BY:	REVIEWED and CONCURRED BY:

STAFF REPORT 2022 – 04

TO: Board of Directors

FROM: Paul Chisholm, Chief Executive Officer

SUBJECT: Selection Process for Tenant Board Director

DATE: January 13, 2022

PURPOSE:

To receive approval of the process to review the applications received for the vacant Tenant Board Director position.

RECOMMENDATION:

That the Board **APPROVE** the following recommendations:

1. Create a subcommittee to review applications for the Tenant Board Director Position with the following membership:
 - a. 3 Directors
 - b. 1 Community Partner; and
 - c. 1 LMCH Senior Staff Member
2. Direct the Sub-committee members to use the framework established through the attached Guiding Principles for LMCH Board Recruitment.
3. Delegate the authority to nominate the Tenant Board Director candidate(s) to the Chair of the Sub-Committee.
4. Authorize LMCH staff to take the necessary steps to give effect to the above recommendation(s).

BACKGROUND:

The City of London is the sole shareholder of LMCH. LMCH receives direction from the Shareholder through a number of ways, including, the Shareholder Direction and by-laws

passed by the Shareholder. Attachment 1 is the “Recruitment Process for Director Appointment” established by the Shareholder for LMCH.

The Shareholder communicated this opportunity to previous applicants for the Tenant Board Director Position and LMCH conducted additional outreach through direct communication with tenant groups we work with and general e-mail outreach to tenants.

As of January 13, 2022 the City Clerk had forwarded 20 applications received from tenants which is an increase in applicants that were received in 2021 during the original recruitment for Tenant Board Directors.

The Shareholder has requested that the nomination be received by 9:00 AM January 31, 2022.

The recommendations set out in this report are consistent with the requirements of the Shareholder and respect the timelines requested by

Attachment 1: Recruitment Process for Director Appointment

Attachment 2: Guiding Principles LMCH Board Recruitment

RECOMMENDED BY:
PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

APPENDIX “C”

Recruitment Process for Director Appointments

The following appointment process be established for the London & Middlesex Community Housing Inc. (LMCH):

1. Establish a sub-committee of the board of directors to assist with the recruitment and nomination process. This sub-committee should be comprised of members of the board, members of LMCH Administration and community members. This sub-committee would then submit nominations to Municipal Council for consideration.
2. The recruitment and nomination process should be informed by foundational principles (e.g. anti-racism and anti-oppression, inclusion and participation, good governance, leadership and accountability) the Shareholders Agreement as well as the Board terms of Reference which outlines the authority and responsibility requirements and general duties of the board.
3. LMCH should assist the City in reaching out to the community seeking applications during the recruitment process.
4. A comprehensive orientation and training program should be developed and include such items as the Board Code of Conduct, Board's Terms of Reference and procedures for the holding of meetings.

Guiding Principles for Screening and Selection of LMCH Board Members

These guiding principles are intended to help the Governance Sub-committee (the Committee) comprised of current LMCH Board Members, staff from London Middlesex Community Housing's (LMCH) Senior Leadership Team as well as community partners in the interviewing process to enable the Committee to make informed recommendations on prospective board members to City Council.

The Committee members are mindful that the application process and vetting of applicants for LMCH's Board of Directors needs to be objective and free from barriers that may prevent or dissuade broader community members from applying.

The Committee members will ensure that we use our community networks to attract Indigenous peoples, members of visible minority groups, people with disabilities, women, as well as LGBTQ2S community members to ensure qualified individuals from traditionally disadvantaged groups be welcomed to participate in this process and to help lead the governance of this organization.

In consultation with the Committee the following parameters were identified as our lead guiding principles for the Board recruitment process:

LMCH's CARE Values:

Collaboration We recognize that no single person or idea can solve affordable housing's complex challenges. We believe that people working together can create greater impact than any one individual or even one organization can accomplish alone. By coordinating with diverse community stakeholders and networks, we will pursue purposeful partnerships that are well designed and supported. We will work with tenants, partners and neighborhoods – listening, challenging and sharing – to better understand and respond to the needs of our tenants and communities.

Commitment We perform our duties with utmost commitment and regard to the high standards expected of a Local Housing Corporation to deliver social housing and supports. We are responsible to our tenants, our employees and our sole shareholder, the City of London. We commit to doing the right thing and we will reject professional and ethical shortcuts.

Accountable We are accountable for our actions. We accept responsibility for our performance and we share the results of our work in an open, honest and transparent manner. Demonstrating integrity and responsible stewardship of our resources, we expect the best of ourselves and our stakeholders — personally and professionally. We will cultivate individual and team accountability creating an environment where people can make a difference.

Accessible Access to services and supports positively impacts well-being, social participation, education, health and employment. Accessibility is important for our tenants' quality of life as it creates the potential to take advantage of opportunities for successful social mobility and to access health services, goods and services within the community. We will provide all services and information resources, regardless of technology, format, or methods of delivery, that are readily, equally, and equitably accessible to all tenants.

Respect We respect people as individuals and create environments where fairness, trust and equitable treatment define how we work. We approach our work with a deep respect for different opinions and seek to find common ground. No matter how difficult the issue or circumstances, we treat those we encounter with respect and dignity. We insist on a culture of respect as the foundation of our work together and recognize that words and actions matter.

Responsive We provide the highest possible quality of responsive service informed by meaningful consultation and delivered in a professional manner. We will listen to our tenants and respond by putting proactive solutions in place to meet their needs in a creative and fiscally responsible manner.

Equity is the foundation of LMHC's Values. We value equity, inclusion, and dignity for all regardless of their background, point-of-view or position in life. Seeking to achieve fairness and justice for all, we will recognize the individual needs of tenants required to achieve and maintain housing stability, health, and well-being. We will ensure the dignity of all people and we demonstrate the value of diversity through our honest, caring and ethical interactions and practices.

Excellence We go above and beyond ordinary and strive towards the exceptional and extraordinary in each and everything we do. We pursue excellence by: nurturing and sustaining innovation and invention; achieving quality in our work, relationships, and outcomes; delivering on our mission, vision and values; providing better services to tenants; strengthening our credibility among tenants, decision-makers, and the public; delivering tangible results recognizing that excellence in creativity, problem solving and teamwork is critical to our success.

Beyond LMCH's organizational values the Committee will also adopt the following principles for this recruitment process:

Anti-racism The policy or practice of opposing racism and promoting racial equality.

Anti-oppression A methodology focusing on both process and outcome, and a way of structuring relationships between individuals that aim to empower users by reducing the negative effects of hierarchy in their immediate interaction and the work they do together.

Inclusion An organizational effort and practice in which different groups or individuals having different backgrounds are culturally and socially accepted and welcomed, and equally treated. Inclusive cultures make people feel respected and valued for who they are as an individual or group.

We are committed to ensuring that we follow the Ontario Human Rights Code (OHRT) and best practices from the Ontario Human Rights Commission (OHRC) when conducting interviews for Board member applicants.

The Ontario Human Rights Code states that every person has a right to equal treatment with respect to employment without discrimination or harassment because of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, record of offences, marital status, family status or disability.

The right to “equal treatment with respect to employment” covers every aspect of the workplace environment and employment relationship.

The Canadian Human Rights Act entitles all individuals to equal opportunities without regard to race or colour, national or ethnic origin, religion, age, family or marital status, sex (including pregnancy or childbirth), pardoned convictions, disability (either physical or mental or as the result of dependence on alcohol or drugs), or sexual orientation.

Section 8 of the Act states that:

It is discriminatory practice

- (a) To use or circulate any form of application for employment, or*
- (b) In connection with employment or prospective employment, to publish any advertisement, or make any written or oral inquiry*

That expresses or implies any limitation, specification or preference based on a prohibited ground of discrimination.

Application Review

The application process for perspective Board members will be led by City of London staff. The current Declaration of the Sole Shareholder identifies under section 6.0 Shareholder Matters

6.2 Shareholder to Appoint Directors. The Shareholder shall appoint the Board in accordance with the following:

- (a) Eligibility for Board Membership. To be eligible as a Director, an individual must to be statutorily disqualified from being a director under the Ontario Business Corporations Act (OBCA) or otherwise, and shall be a resident Canadian, residing in or paying property taxes to the City of the County of Middlesex. In addition, members of Council and County Council who act as Directors:
 - (i) Shall have been elected to such office by qualified electors pursuant to the provisions of the Municipal Elections Act, 1996, as amended or shall have been appointed as a member of Council pursuant to section 263 (Filling Vacancies) of the Municipal Act, 2001, as amended.
 - (ii) Shall be approved as candidates for the Board by resolution of Council or County Council, as applicable.
- (c) Qualifications of Directors. In appointing Directors to the Board, the Shareholder shall give due regard to the qualifications of Citizens with the aim of ensuring that the Board collectively represents a range of relevant expertise including with respect to:
 - (i) Social Housing,

- (ii) Community Development,
- (iii) Business and Financial Management,
- (iv) Corporate governance responsibilities,
- (v) Organizational development,
- (vi) Labour relations,
- (vii) Legal and/or legal aid experience,
- (viii) Landlord and tenant and social services matters.

The development of a new process that will be outlined in an updated Declaration of the Sole Shareholder will provide an opportunity for this Subcommittee to conduct an assessment review on the suitability of people under consideration for Board positions for LMCH.

The Subcommittee needs to ensure that any information being sought through a more extensive application process is relevant to the Board role and to be cautious that we not let discriminatory elements affect the selection process.

The assessment process must be fair and focus on each candidate's ability to perform the essential duties of their role. The Subcommittee should develop set questions in advance, to be asked of all the applicants. The questions should be based on bona fide requirements. Before the formal assessment starts, the Subcommittee will create an answer guide showing the desired answers and a marking scheme. The Subcommittee will also develop a decision matrix and finalize weighting of each category in advance of review of applications and then each member of the Subcommittee can record and score each candidate's answers against this guide.

As part of the process of reviewing applications the Subcommittee could follow up to seek clarification from candidates, this would need to be done with all candidates and the additional information received would then need to be provided to Council.

This kind of approach will help the Committee avoid making decisions based on subjective considerations such as "suitability". This process should be the same for each candidate and determined in advance, subject to accommodation needs.

The decision-making process should be uniform, consistent, transparent, fair, unbiased, comprehensive, and objective. Once the recommendations are made the Subcommittee should be able to document non-discriminatory reasons for recommending or not recommending each candidate.

Written records from the interview and the entire competition should be kept for at least six months if no complaint about the process is made, and longer if a human rights claim is made.

Decision Matrix

To be developed at Committee (Sample Only)

LMCH Board Member	Applicant 1	Applicant 2	Applicant 3	Applicant 4
Quantitative Requirements				
Education				
Previous Board Experience				
Resident of London/Middlesex County				
Resident of LMCH				
Social Housing Experience				
Corporate Governance Responsibilities				
Legal and/or Legal Aid Experience (Esp Landlord & Tenant)				
Organizational Development				
Community Development Experience				
Qualitative Requirements				
Exceptional/Very good communications skills				

STAFF REPORT 2022 –05

TO: Board of Directors

FROM: Phil Renaud, Director of Assets and Property Services & Andrea Mackenzie, Director of Tenant Services

SUBJECT: Vacancy Management Update

DATE: January 14, 2022

RECOMMENDATION:

That the Vacancy Management Update report **BE RECEIVED** for information.

Purpose:

To update the Property & Tenant Services committee regarding the status of LMCH’s Vacancy Management progress with the objective of achieving a three percent (3%) total vacancy.

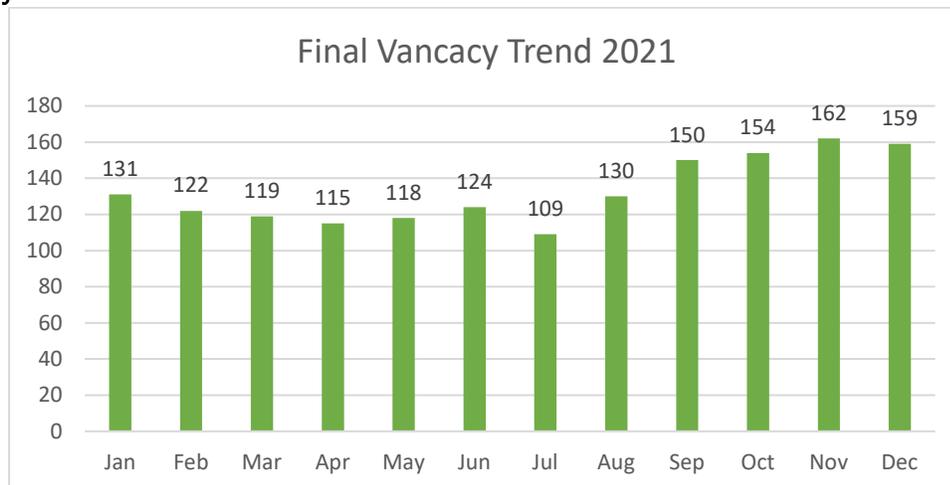
December 2021 Progress (Reported as of December 31st, 2021)

- Total Vacancy:** This includes all units within LMCH portfolio that are not occupied. It is inclusive of units that are Non-Rentable or in Active Restoration and Rent Ready Stock. (Target: 3%)

Total Vacancy: 5.5% or 182 units

Future Leased: 0.7% or 23 units

Final Vacancy: 4.8% or 159 units



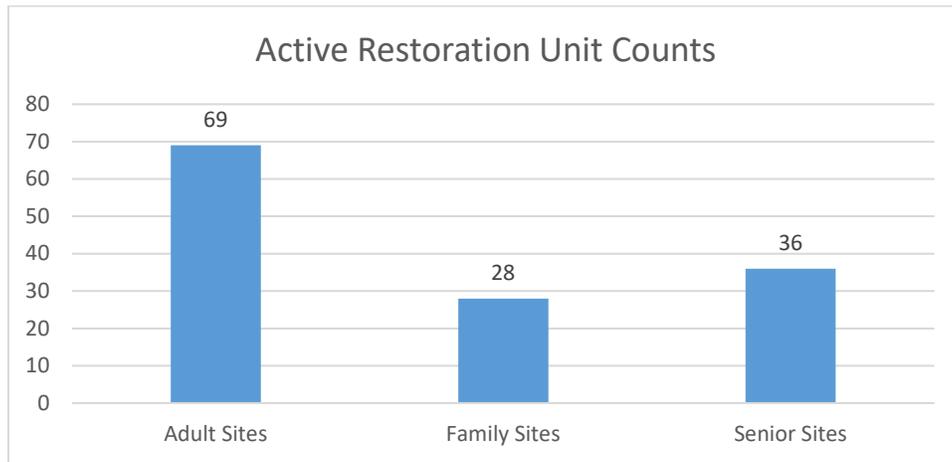
1. Non-Rentable or in Active Restoration:

The non-rentable category includes units that do not have a predictable rent ready projection date due to a construction project (e.g., units are being used for broader portfolio improvements).

Non-Rentable: 0.06% or 2 unit

The active restoration category includes all remaining units that are in pre-pest clearance as well as any units that are pest cleared and are now in active restoration. (Target: 2%)

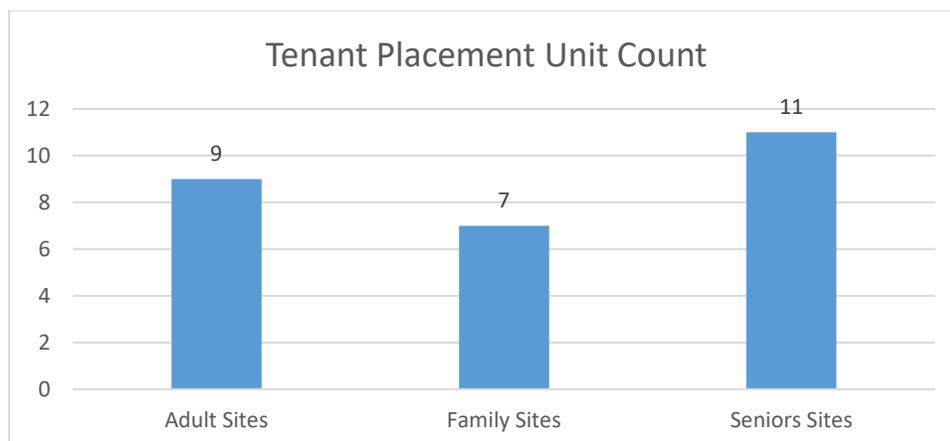
Active Restoration: 4.05% or 133 units at the end of December.



Average time the units are in Active Restoration Stock as of December 31st, 2021: 92 days.

2. Active Rental Stock: These are all units that are rent ready and available to offer. Units leave this category when they are future leased or leased (when the actual lease is signed and keys are handed to the new tenant). (Target: 1%)

Active Rental Stock: 0.8% or 27 units at the end of December.



Average time the units are in Active Rental Stock as of December 31st, 2021: 18.4 days.

Period Summaries:

LMCH had a total of 25 new units confirmed vacant in the month of December which have been added to the active restoration stock.

LMCH restored a total of 35 units during this same time-period.

LMCH leased 21 units and future leased an additional 23 during this reporting period.

2021 Vacancy Overview

- Vacancies increased 21% through the course of 2021- from 131 January 2021 to 159 as of December 2021.
- There were approximately 32 move outs on average per month. Number of move outs increased from an average of 26 a month in the first 6 months of the year, increasing to an average of 38 units a month for the last 6 months of the year.
- There were approximately 37 units restored each month in. The average number of units made rent ready in the first six months was 47 per month and this decreased to 27 units per month in the last half o the year.
- There was an average of 94 units in active restoration each month. As of December 31, 2021, the number units in active restoration was133.
- LMCH expects to restore 50 units in January 2022.

PREPARED and RECOMMENDED BY:	PREPARED and RECOMMENDED BY:
PHIL RENAUD, DIRECTOR, Assets and Property Services	ANDREA MACKENZIE, Director, Tenant Services

STAFF REPORT 2022-06

TO: Board of Directors

FROM: Bill Leslie, Manager, Capital Projects & Construction

SUBJECT: Capital Projects Annual Update – 2021- 2022

DATE: January 7, 2022

PURPOSE:

The purpose of this report is to provide the BOD with an update on the Capital Projects from 2021 with a look forward on what to expect in 2022.

RECOMMENDATION:

It is recommended that the Board of Director RECEIVE this report for information.

BACKGROUND:

London Middlesex Community Housing (LMCH) set out in 2021 with a Capital Budget of \$6,781,049. This is a significant increase from the standard \$2,200,000 annual budget provided by the shareholder in previous years, based on needs revealed in Facilities Condition Index.

FUNDING SOURCE CODE	FUNDING SOURCE	2021 BUDGET
LMH 261822	Public Housing Major Upgrades	\$2,367,390
LMH 2620	CMHC Co-Investment	\$508,422
LMH 2619	LMCH Infrastructure Gap	\$3,905,237
TOTAL		\$6,781,049

2021 PROJECTS:

During the 2021 year, the Capital Projects & Construction Team has continued to make asset improvements to LMCH properties. Capital improvements benefit tenant health & safety, comfort, and enjoyment while in many cases improving energy efficiency and reducing greenhouse gas emissions. The 2021 projects are in accord with LMCH’s Strategic Plan, with particular connection to our goal to “Improve, Renew and Maintain the Homes we offer”.

The 2021 Capital works budget included approximately 40 projects. Some highlights from the list of completed projects include the following:

- Accessible playgrounds were installed at four locations: Southdale Rd. (1), Marconi Blvd. (1) & Limberlost Rd. (2)



Figure 1 Limberlost Playground during Construction



Figure 2 Marconi Playground during Construction

- New exterior doors & windows were installed at all 14 London scattered units as well as 6 County units in Newbury.
- Elevator upgrades to the “Car Operating Panels” (COP’s) and “Hall Call Stations” at 8 LMCH high rise buildings. The new COP’s include vandal resistant buttons, car position (floor) indicator, telephone, fan, and emergency lighting with battery. The Hall Call Stations are mounted and include fire service on the top and bottom floors. The stainless-steel COP’s and hall panels have been extended so that the button heights are code and compliant for wheelchair access. Braille plates have also been installed to the doorjambes to indicate floor levels.

- Simcoe balcony restoration included concrete repairs with installation of new solid panel aluminum railings. The west side of the building has been completed to date. The east side of the building is scheduled to begin in March 2022.



Figure 3- Simcoe Balcony Restorations



Figure 4- Simcoe Balcony Restorations

- 39 Tecumseh received a new fire panel. The fire panel installation was very labour intensive, as the work included connections to new devices in each tenant suite, common areas and service rooms in each of the three buildings. The new fire panels enhance tenant safety, while ensuring that First Responders can locate the source of a fire immediately upon arrival to a fire call.



Figure 7- Tecumseh Ave., Fire Signaling Device



Figure 8- Tecumseh Ave., Fire Panel

- Make-up air unit to Solar Wall connections were completed at 4 of LMCH's largest

buildings. Insulated plenums were fabricated and installed with booster fans to draw solar heated air into the make-up air units. Energy efficiency is expected to improve by an approx. \$31,000 annual savings on natural gas while reducing greenhouse gas emissions by approx. 185 tons annually.

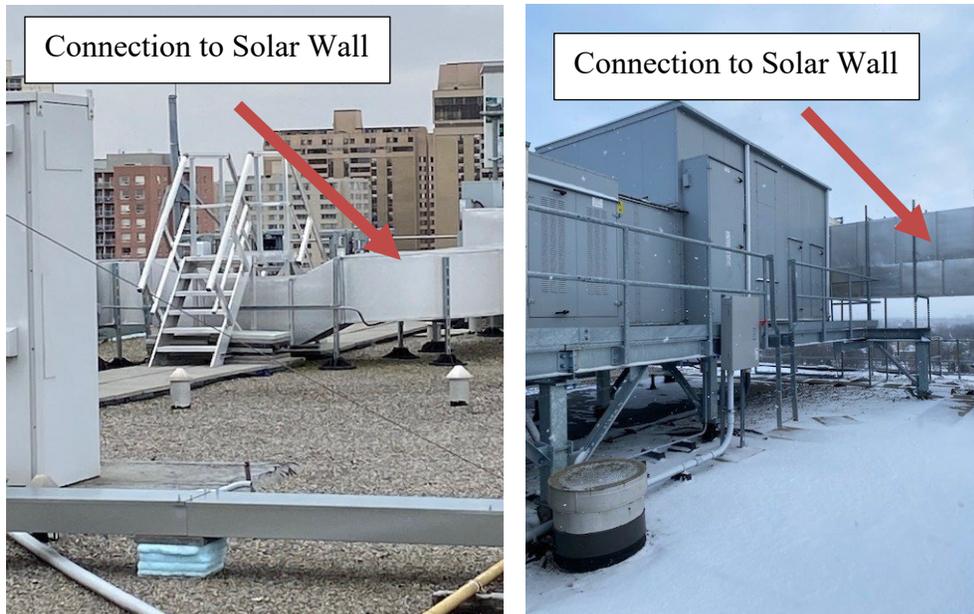


Figure 9,10- Make-up Air Plenum Connections to Solar Walls

- Tenant Safety & Security has become paramount in the planning of all Capital projects. Patterns show that automatic sliding doors have created a security breach in several of LMCH’s high-rise buildings. These doors can easily be forced open and taken off their tracks. The abuse of the automatic sliding doors has resulted in unauthorized entry to the building, property damage and regular after-hours calls to Maintenance and Contractors to repair the doors. In 2021, The Capital team started replacing the automatic sliding doors with AODA-compliant FOB-activated hinged security doors. These door conversions cost approximately \$10,000 each. To date, door replacements have been completed at 345 Wharnccliffe, 349 Wharnccliffe and 85 Walnut. Other sites with similar issues related to the sliding doors are Hale St., William St. and Kent St. These sites are currently being updated with completion expected in the Q1-2022.
- Unit Accessibility Modifications promote independent living by ensuring that tenants can comfortably stay in their homes by having modifications to their apartment suites. Modifications can be as simple as installing grab bars in a bathroom, an automatic door opener, tub cutout or as complex as a complete accessible bathroom with a roll in shower unit. LMCH received approximately 98 requests for unit modifications in 2021.
- In addition to the above highlights, 2021 included several projects that are

“Behind the Scenes” and thus, may not be visible to tenants. These projects are necessary for asset planning, health & safety or legislatively required. Some of these larger projects are:

- Comprehensive review of the high-rise fire systems
- Building Condition
- Assessments (BCA’s) 12 sites were completed
- Roof replacement, McNay Elevator Penthouse Engineering was completed on several projects where work will carry over into 2022.

London to London (L2L) – Completion of a multi-year (L2L) pilot project for the Power Forward Challenge: London Hydro and London & Middlesex Community Housing (LMCH) collaborated to install a mix of solar panels and residential batteries at 7 LMCH scattered homes and 1 high-rise building. The savings from the installations have lowered electricity costs by an average of \$500/year for tenants in scattered homes and saved approximately \$4,800 at the high-rise located at 304 Oxford St. East.



Figure 11- 304 Oxford St., Solar Panel Installation



Figure 12 – Scattered Property, Solar Panel Installation

2022 PROJECTS:

2022 projects are already well under way. Many projects have had preliminary planning and Engineering going on for several months leading up to the 2022 construction season. There are carry-over projects from 2021 that are expected to be completed in conjunction with the 2022 Capital Project schedule.

Some of the projects making huge impacts to the LMCH portfolio include:

- Elevator Modernization – 11 elevators will be completely modernized with new microprocessor-based controllers and Barrier-Free Accessibility upgrades.
 - Replacement of the drive system,
 - Fixture replacement and refurbishment or replacement of the machine, motor and door operating equipment.
 - New interior cab finishes to the walls, floor, ceiling & lights
 - A voice synthesizer for floor annunciation;
 - Handrails mounted at barrier-free heights on all non-access cab walls;
 - In-car lanterns with dual-stroke gongs to announce elevator direction.
 - New hall fixtures to lower the hall button height to meet barrier-free height requirements.

- Kitchen Cabinet & Countertop Replacements
 - 20 units on Penny Lane, Strathroy will have redesigned kitchens.
 - 3, 4, & 5 bedroom houses with small galley kitchens will have full redesign, to be open concept combining the kitchen and dining space family-centered.
 - New cabinets, counter tops, flooring, painted walls and all associated electrical and plumbing upgrades.
 - Furnace Replacements – Limberlost & Southdale/Millbank
 - Tenants of 1481 Limberlost Rd & Southdale/Millbank townhouses will enjoy the reliability, safety and functionality of new high efficiency forced air gas furnaces. These furnaces are expected to be installed during Q2 & Q3/2022.

Other notable upcoming projects:

- New roofs – 39 Tecumseh Ave (all 3 bldgs.)
- Make-up Air Unit replacements - 39 Tecumseh Ave. (bldgs. 2 & 3)
- Electrical Upgrades – Various high-rise buildings
- Mechanical Systems Comprehensive Review – All High-rise bldgs.
- Fire Annunciator replacement - 10 York St. Newbury
- Window Replacements – Various Sites
- Garbage Infrastructure Improvements – Various Family Sites
- Fencing Upgrades – Various County Properties
- Parking Lot Asphalt repairs/replacements – Huron
- Outdoor Lighting & Security Cameras – Bouleee Family Sites
- Generator Replacements – 170 Kent, 85 Walnut, 30 Base Line Rd. W.

- Site Assessments:
 - Asbestos Surveys (All Sites)
 - Roof assessments (All Sites)
 - Comprehensive Review of Mechanical Systems

- BCA's 40% of Portfolio
- Balcony Studies (McNay)

CONCLUSION:

Construction and Capital Projects are developed from VFA Asset Management software with tenant safety, building maintenance, improvement, cost efficiencies, special needs, and responsible budget planning in consideration. Factors such as longer-term improvements, legal and contractual issues are a constant reality. Factors such as conditions from funding sources are also aligned within Capital Projects. This department has completed extensive work in 2021 and has ambitious projects on the horizon for 2022 and beyond.

Note: An itemized project status report with will be submitted at the February board meeting.

PREPARED and SUBMITTED BY:	REVIEWED and CONCURRED BY:
BILL LESLIE MANAGER, CAPITAL PROJECTS & CONSTRUCTION	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER
REVIEWED and CONCURRED BY:	
PHIL RENAUD DIRECTOR of PROPERTY SERVICES & ASSET MANAGEMENT	

STAFF REPORT 2022-07

TO: Board of Directors

FROM: Kim Graham, Manager of People & Culture

SUBJECT: Human Resources Performance Measures

DATE: January 13, 2022

PURPOSE:

To provide the Board of Directors an overview of the key activities in Human Resources through 2021 and introduce some performance metrics being assessed to create a regular report on organization health from a Human Resource Perspective.

RECOMMENDATION:

That the Board of Directors receives this report for information.

BACKGROUND:

LMCH is committed to providing provides quality, accessible, affordable, and sustainable housing to those in need in our community. The work of our Human Resources Team is critical to supporting the organization in meeting this objective as well as individual staff reach their full potential at LMCH.

LMCH will develop a standard report for the Board review starting in 2022. In anticipation of these report and to better understand how LMCH is performing in relation to peer organizations LMCH will identify benchmarks for each measure to provide more context to the Board.

Human Resource 2021 Overview

Human Resource Activity Area	2021 Activity / Status
Staff Complement	<ul style="list-style-type: none"> • January 1, 2021 = 72 • Left during 2021 = 17 • Added in 2021 = 25 • As of December 31, 2021 = 80 (+8)
Recruitment	<p>36 Competitions</p> <ul style="list-style-type: none"> • 21 Complete • 9 underway • 6 rescinded • 7 postings for Business Case #19
Employee Exits	<p>17 Exits (21%)</p> <ul style="list-style-type: none"> • 13 Permanent Employees • 4 Temporary Employees
Leave Requests	<p>18 Requests</p> <ul style="list-style-type: none"> • 2 Parental • 12 sick • 4 unpaid
Sick Time	<p>80 sick days per month</p> <ul style="list-style-type: none"> • Average 1 day monthly/employee • Average 12 days annually/employee
Lost time to Injury	<p>1 day</p>
Policy Development and Review	<ul style="list-style-type: none"> • Diversity & Inclusion Policy June 2021 • Health & Safety Policy August 2021 • Workplace Violence, Harassment, and Sexual Harassment Policy August 2021 • COVID-19 Vaccination Policy September 2021
Training	<ul style="list-style-type: none"> • Mental Health First Aid – all staff • CPI (Crisis Prevention Institute) De-escalation Training – two staff (one unionized, one Management) Train-the-Trainer • Duty to Report Training (AS) – all staff on sites • First Aid - 13 staff updated • IMS (Incident Management System) - all managers that participate in On-Call

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PREPARED and RECOMMENDED BY:	RECOMMENDED BY:
	
KIM GRAHAM MANAGER OF PEOPLE & CULTURE	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

STAFF REPORT 2022-08

TO: Board of Directors

FROM: Kim Graham, Manager of People & Culture

SUBJECT: Health & Safety Policy

DATE: January 13, 2022

PURPOSE:

To receive and approve the Health and Safety Policy has been revised to align with the wording from the legislation to improve alignment and clarity.

RECOMMENDATION:

That the Board of Directors **APPROVE** the Health & Safety Policy.

BACKGROUND:

This Policy was last reviewed by the Board in August 2021. Changes in this policy have been drafted and recommended in collaboration with the LMCH Joint Health & Safety Committee. As part of the review of the policy it is being recommended that the policy be updated to align the language in the "Responsibilities" section of the policy to that found in the Ontario Occupational Health & Safety Act.

PREPARED and RECOMMENDED BY:	RECOMMENDED BY:
	
KIM GRAHAM MANAGER OF PEOPLE & CULTURE	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER



RELATED DOCUMENTATION

Legislation	<ul style="list-style-type: none">Occupational Health and Safety Act, 1990 www.labour.gov.on.ca/english/hs/laws/regulations.phpHuman Rights Code www.ohrc.on.ca
Collective Agreement	Article 31.04
Forms	<ul style="list-style-type: none">N/A
Policies	<ul style="list-style-type: none">Code of Conduct PolicyWorkplace Violence, Harassment, and Sexual Harassment PolicyHealth & Safety Orientation Manual
Other Resources	<ul style="list-style-type: none">Employee Assistance Program (EAP)

1.0 PURPOSE

London & Middlesex Community Housing (LMCH) acknowledges it has a statutory duty to take all reasonable precautions to protect employees, contractors, volunteers, visitors, and all other individuals onsite. Protecting employees from injury or occupational disease from accidents or incidents is a continuing objective. We will make every effort to provide a safe and healthy work environment for all staff. We believe all accidents are preventable and active participation at all levels will help ensure accidents are avoided. Supervisors and workers must refrain from any actions or activities that could jeopardize the health and safety of others and must work to reduce the risk of injury.

We are committed to promoting a safe and healthy workplace for all employees, contractors, volunteers, and visitors. In pursuit of our commitment, we will develop, implement, and enforce policies and procedures that promote and provide a healthier, safer work environment. We understand the importance of safety to the well-being and productivity of our employees, and strive to safeguard the workplace from injury and malfeasance through negligence.

This policy outlines the responsibilities of all parties in maintaining a safe and healthy work environment. LMCH will act in compliance with all applicable workplace health and safety legislation.



This policy applies to everyone providing service at LMCH including:

- Board Members
- Management
- Bargaining-Excluded Staff
- Unionized Employees
- Temporary Staff
- Volunteers including Students
- Contractors

2.0 SCOPE

Guidelines

Communication

LMCH encourages open communication on health and safety issues. Open communication is essential to providing an accident-free and productive work environment.

- Employees who voice or identify a health and safety concern will not be subject to reprisal or retaliation.
- Health and safety concerns will be reviewed by Human Resources. The Joint Health & Safety Committee (JHSC) or designate will initiate an investigation on each reported or potential hazard.
- Employees should inform their supervisor of any matter they perceive to be an actual or potential workplace hazard.
- Communication can be written or verbal.

3.0 RESPONSIBILITIES

Employer and HR will:

- Instruct, inform, and supervise workers to protect their health and safety.



- Assist in a medical emergency by providing any information, including confidential business information, to a qualified medical practitioner and other prescribed persons for the purpose of diagnosis or treatment.
- Appoint competent persons as supervisors. "Competent person" is a defined term under the OHSA as a person who:
 - is qualified because of knowledge, training, and experience to organize the work and its performance,
 - is familiar with the Act and the regulations that apply to the work, and
 - has knowledge of any potential or actual danger to health or safety in the workplace.
- Inform a worker, or a person in authority over a worker, about any hazard in the work and train that worker in the handling, storage, use, disposal, and transport of any equipment, substances, tools, material, etc.
- Help the JHSC and health and safety representatives to carry out their functions.
- Not employ or permit persons under the prescribed age for the employer's workplace, to be in or near the workplace.
- Take every precaution reasonable in the circumstances for the protection of a worker.
- Post a copy of the OHSA in the workplace, as well as explanatory material prepared by the Ministry of Labour, Training and Skills Development (MLTSD) that outlines the rights, responsibilities and duties of workers in both English and in the majority language in the workplace.
- Prepare a written occupational health and safety policy, review that policy at least once a year and set up and maintain a program to implement it.
- Post a copy of the occupational health and safety policy in the workplace, where workers will be most likely to see it.
- Provide the JHSC or the health and safety representative with the results of any occupational health and safety report that the employer has. If the report is in writing, the employer must also provide a copy of the parts of the report that relate to occupational health and safety.
- Advise workers of the results of such a report. If the report is in writing, the employer must, on request, make available to workers copies of those portions that concern occupational health and safety.
- Notify a Director of the MLTSD if the JHSC (or a health and safety representative) has identified potential structural inadequacies of a building, structure, or any part thereof, or any other part of a workplace, whether temporary or permanent, as a source of danger or hazard to workers.



- Supply an effective strategy to manage the occupational health and safety concerns of the company.
- Allocate and govern resources properly to achieve the health and safety requirements of employees, and ensure that policies comply with the company's legal obligations.
- Foster a workplace culture of safety with appropriate leadership.
- Review relevant policies annually for compliance and efficiency, and revise where necessary.
- Provide all relevant parties with a copy of all orders or reports issued to the employer by a Ministry of Labour inspector and inform the JHSC of any work-related incidents involving injury, death, or occupational illness.
- Liaise with government agencies to ensure workplace health and safety compliance.
- Advise on safety and health policy issues.
- Coordinate health and safety inspections, and follow up to ensure the completion of necessary corrective actions.
- Develop best practices that support a strong health and safety program.
- Design and develop accident and incident reports and investigation procedures.
- Maintain an up-to-date knowledge of applicable health and safety regulations as mandated locally, provincially, or federally.
- Design and develop company policies and procedures related to workplace safety and health issues.
- Review injury and illness trends, and identify problem areas and solutions.

Managers and supervisors will:

- Help develop, implement, and enforce company policies and procedures.
- Continually promote health and safety awareness with instruction, information, training, and supervision to ensure the safe performance of employees.
- Use the process of hazard identification, risk management, and incident investigation.
- Perform occupational health and safety inspections of the workplace to identify and control any and all hazards to employees as needed.
- Ensure that a worker works in the manner and with the protective devices, measures and procedures required by the OHSA and the regulations.
- Ensure that any equipment, protective device or clothing required by the employer is used or worn by the worker.
- Advise a worker of any potential or actual health or safety dangers known by the supervisor.



- If prescribed, provide a worker with written instructions about the measures and procedures to be taken for the worker's protection.
- Take every precaution reasonable in the circumstances for the protection of workers.
- Ensure that machinery and equipment are safe and that employees work in compliance with established safe work practices and procedures.
- Ensure that employees receive adequate training in their specific work tasks to protect their health and safety.

Employees will:

- Work in compliance with the Act and regulations.
- Use or wear any equipment, protective devices or clothing required by the employer.
- Report to the employer or supervisor any known missing or defective equipment or protective device that may endanger the worker or another worker.
- Report any hazard or contravention of the Act or regulations to the employer or supervisor.
- Not remove or make ineffective any protective device required by the employer or by the regulations other than in circumstances specified below. The only circumstance in which a worker may remove a protective device is where an adequate temporary protective device is provided in its place. Once there is no longer a need to remove the required protective device or to make it ineffective, it must be replaced immediately.
- Not use or operate any equipment or work in a way that may endanger any worker.
- Not engage in any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct. Racing powered hand trucks in a warehouse or seeing who can pick up the most boxes are examples of unlawful conduct.
- Comply with occupational health and safety policies and procedures.
- Notify managers of any health and safety concerns, so they may be dealt with promptly.
- Protect their own health and safety by working in compliance with the law, safe work practices, and procedures established by the company.
- Use appropriate personal protective equipment as required.
- Report unsafe or potentially hazardous conditions, without fear of reprisal, to their manager or Human Resources.



All staff will:

- Complete required occupational health and safety training.
- Perform duties in a manner conducive to a safe workplace, following all safety practices and procedures.
- Report any incident, injury, or hazard to their manager or supervisor.
- Report any acts of violence or harassment in the workplace.
- Promote a hazard-free workplace.
- Learn the posted emergency plan detailing the corporation's procedures pertaining to fire, weather, or medical emergency.

Joint health and safety committee members will:

- Commit to improving health and safety conditions in the workplace.
- Stimulate and raise awareness of health and safety issues in the workplace.
- Recognize and identify workplace risks and hazards.
- Develop recommendations to address risks and hazards.
- Conduct regular workplace inspections and make written recommendations.
- Recommend accident prevention and health and safety programs.
- Listen to employee complaints, concerns, and suggestions.
- Participate in health and safety inquiries and investigations.
- Advise on health and safety matters, such as personal protective equipment.
- Maintain accurate and detailed records of near misses, accidents, and injuries.
- Promote and monitor compliance with health and safety regulations.
- Monitor the effectiveness of existing health and safety programs and policies, and assist with the implementation of improvements.
- Attend regular committee meetings.

Reporting Structures

Any concerns or near misses should be reported to the appropriate manager and/or JHSC. Employees who voice or identify a health and safety concern will not be subject to reprisal or retaliation.

If an emergency occurs, employees must immediately report the incident to their Manager/designate. Appropriate responses will be dictated by the severity of the event and its effect on the health and safety of employees, visitors, and property.



An emergency is any number of unsafe conditions that pose a threat to people or property. This includes but not limited to fire or smoke; natural disaster or severe weather; chemical, biological, or radiological incidents; and structural failures.

4.0 DOCUMENT CONTROL

Date Drafted	<ul style="list-style-type: none">• January 2017
Date Approved	<ul style="list-style-type: none">• February 23, 2017
Date Revised	<ul style="list-style-type: none">• December 21, 2021
To be reviewed	<ul style="list-style-type: none">• Review and update every twelve months.• General review by all employees every twelve months.
Inquiries to Policy Owner	<ul style="list-style-type: none">• Human Resources

DRAFT

STAFF REPORT 2022 - 09

TO: Board of Directors
FROM: Kim Graham, Manager of People & Culture
SUBJECT: Workplace Violence, Harassment, and Sexual Harassment Policy
DATE: January 11, 2022

PURPOSE:

To receive and approve the Workplace Violence, Harassment, and Sexual Harassment Policy to the Board of Directors.

RECOMMENDATION:

That the Board of Directors **APPROVE** the attached Workplace Violence, Harassment, and Sexual Harassment Policy.

BACKGROUND:

LMCH staff brought a draft Workplace Violence, Harassment, and Sexual Harassment Policy to the Board of Directors in August 2021. The Board of Directors approved the policy and provided feedback on some changes they would like to see in the draft policy.

LMCH staff met with the Joint Health and Safety Committee and has incorporated the

PREPARED and RECOMMENDED BY:	RECOMMENDED BY:
KIM GRAHAM MANAGER OF PEOPLE & CULTURE	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

changes requested into the attached policy.



RELATED DOCUMENTATION

Legislation	<ul style="list-style-type: none">• Occupational Health and Safety Act, 1990, including Bills 168 & 132 www.labour.gov.on.ca/english/hs/laws/regulations.php• Human Rights Code www.ohrc.on.ca
Collective Agreement	Articles 3, 4
Forms	<ul style="list-style-type: none">• Appendix A: Workplace Violence and Harassment Incident Reporting Form• Appendix B: Workplace Violence and Harassment Incident Form – Manager Report
Policies	<ul style="list-style-type: none">• Code of Conduct Policy• Health and Safety Policy
Other Resources	<ul style="list-style-type: none">• Employee Assistance Program (EAP)• London Abused Women Centre https://www.lawc.on.ca/• Sexual Assault Centre of London/Anova http://www.anovafuture.org/• Victim Services, London Police Services https://www.londonpolice.ca/Modules/contact/search.aspx?s=jFuV9WkBBXGefKkbDlsz3geQuAleQuAl• Canadian Mental Health Association (CMHA) https://cmha.ca/

1.0 PURPOSE

London & Middlesex Community Housing (LMCH) is committed to building and maintaining a safe, productive, and healthy working environment for its employees, free from violence and harassment. LMCH will take all reasonable measures to ensure job candidates, employees, and managers are not subject to any form of violence or harassment. This commitment applies to all areas of business, including training, performance, assessment, promotions, transfers, layoffs, remuneration, and all other employment practices and working conditions.



2.0 SCOPE

This policy applies to everyone providing service at LMCH including:

- Board Members
- Management
- Bargaining-Excluded Staff
- Unionized Employees
- Temporary Staff
- Volunteers including Students
- Contractors

Acts of violence or harassment against or by any employee will not be condoned or tolerated by LMCH. This policy outlines LMCH's violence and harassment program, including how incidents of violence and harassment will be handled and investigated.

Definitions

Complainant: A person who has made a complaint about another individual who they believe committed an act of violence or harassment against them.

Respondent: A person whom another individual has accused of committing an act of violence or harassment.

Workplace harassment: Engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome, or workplace sexual harassment.

Workplace sexual harassment: Engaging in a course of vexatious comment or conduct against a worker in a workplace because of sex, sexual orientation, gender identity, or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant, or deny a benefit or advancement to the worker and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Workplace violence: The exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker; an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker; or a statement or behaviour that is reasonable for a worker to interpret



as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

Bullying: Engaging in actual or perceived acts or verbal comments that could mentally hurt or isolate a person in the workplace.

- Sometimes, bullying can involve negative physical contact as well.
- Bullying usually involves repeated incidents or a pattern of behaviour that is intended to intimidate, offend, degrade or humiliate a particular person or group of people.
- It has also been described as the assertion of power through aggression.
- Bullying can be face-to-face or cyber-bullying.

Discrimination: Engaging in differential treatment of an individual or group of individuals which is based, in whole or in part, on one or more than one of the prohibited grounds of discrimination and which has an adverse impact on the individual or group of individuals. Discrimination may be direct (from an individual or group of individuals) or systemic (through systems and attitudes perpetuated within organizations).

Workplace:

- At the workplace, including all LMCH facilities, work sites, and vehicles;
- Any land, premises, locations or things at, upon, in or near where the business of LMCH is being conducted;
- At employment-related social functions;
- In the course of work assignments outside the workplace;
- During work-related travel;
- Over the telephone, if the conversation is work-related; or
- LMCH-related activities, including Corporation-sanctioned social functions, or business performed at any other location away from the Corporation, during or outside of normal working hours.
- Elsewhere, if the person is there as a result of work-related responsibilities or a work-related relationship.



3.0 PROCESS

This policy has been developed in consultation with the LMCH Joint Health & Safety Committee (JHSC). It will be reviewed annually, or more frequently if necessary to ensure that it accurately represents the LMCH prevention program.

LMCH will provide all employees with appropriate training and information regarding the corporation's violence and harassment prevention practices and procedures. Employees are responsible for adhering to this policy, and should report every incident of violence and/or harassment immediately to management. This includes any incidents that have been witnessed, experienced by, or reported to an employee.

For the purposes of this policy, workplace harassment or violence can occur:

- At the workplace, including all LMCH facilities, work sites, and vehicles;
- Any land, premises, locations or things at, upon, in or near where the business of LMCH is being conducted;
- At employment-related social functions;
- In the course of work assignments outside the workplace;
- During work-related travel;
- Over the telephone, if the conversation is work-related; or
- LMCH-related activities, including Corporation-sanctioned social functions, or business performed at any other location away from the Corporation, during or outside of normal working hours.
- Elsewhere, if the person is there as a result of work-related responsibilities or a work-related relationship.

Reasonable action taken by an employer or supervisor relating to the management and direction of workers or the workplace that helps manage, guide, or direct workers or the workplace and appropriate employee performance reviews, counselling, or discipline by a manager does not constitute harassment.

Reasonable management actions would be part of a manager's or supervisor's normal work function, and could include changes in work assignments, scheduling, job assessment and evaluation, workplace inspections, implementation of health and safety measures, and disciplinary action.

Violence Risk Assessment

LMCH will conduct a risk assessment of the work environment to identify potential risks that could affect the organization and the health and safety of employees and will institute measures to eliminate or control any identified risks to employee safety.

The following factors will be considered during the assessment:

- Past incidents of violence;
- Violence that is known to occur in similar workplaces;
- The circumstances in which work takes place, including the type of work and conditions of work;
- The interactions that occur in the course of performing work; and
- The physical location and layout of the workplace.

The risk assessment may include reviews of records, security reports, employee incident reports, staff perception surveys, health and safety inspection reports, first aid records, or other related records. Areas that will be considered and may contribute to risk of violence include but are not limited to contact with the public, exchange of money, and working alone or at night.

LMCH will provide the JHSC with a written copy of the assessment and advise of the results. The JHSC has various powers, including monitoring health and safety in the workplace, identifying hazards in the workplace, and recommending health and safety improvements where and when required.

LMCH will disclose information to workers who are likely to encounter a known person with a history of violence in the performance of their job duties, or if there is a potential risk of workplace violence as a result of interactions with the person with a history of violence. However, LMCH will only disclose personal information that is deemed reasonably necessary to protect the worker from harm.

Workplace Violence and Harassment Program

Control Measures and Procedures

The following measures have been implemented to eliminate or reduce the identified risks of workplace violence:

- Access control measures at buildings and offices



- Emergency buttons at front counter
- Trespassing procedure
- Master Trespass List
- Non-Tenant Safety Alerts
- Safety Alerts
- Email alerts – active emergency situations
- Third party Security Guards
- Community Safety Unit presence and interventions
- Non violent crisis intervention training
- Body-Worn Cameras
- CCTV system upgrades and additional camera installations

Reporting Incidents of Workplace Violence and Harassment

An employee who believes they have been subject to violence or harassment should submit a complaint to their immediate Manager/designate. The complaint should be made as soon as possible following the incident and must include the following information (See Appendix A and Appendix B):

- The date and time of the incident;
- The name of any persons involved in the incident;
- The name of any persons who witnessed the incident; and
- A thorough description of what occurred.

An employee who believes they have been subject to harassment may also choose to confront the harasser without filing a formal complaint. They can confront the harasser directly or through writing, detailing the unwelcome behaviour and requesting it to stop.

If the alleged harasser is the employee's manager, or in a position of power, the complainant is welcome to file a complaint with Human Resources. If the alleged harasser is the employee's manager and working in Human Resources, the complainant is welcome to file a complaint with a Director.



Immediate Assistance Procedures

The following measures and procedures should be followed when an incident of violence has occurred or is likely to occur and immediate assistance is required:

- Get yourself to a safe space if possible
- Immediately call emergency services by dialing 911
- Inform immediate supervisor
- Use other resources available (example: emergency phone line, safety alert app, panic button, contact Community Safety Unit)

Investigation Procedures

Once a complaint has been received, LMCH will complete a thorough investigation. The organization will ensure that, where practicable, the investigation is completed within 90 days of the complaint being filed.

The investigation will include:

- Informing the respondent of the complaint;
- Interviewing the complainant and any persons involved in the incident;
- Identifying and interviewing any witnesses; and,
- Obtaining statements from all parties involved.

All of the above information will be documented and used to determine whether an incident of violence or harassment occurred. If necessary, LMCH may employ outside assistance or request the use of legal counsel.

A copy of the complaint, detailing the complainant's allegations will be provided to the respondent, who will be invited to reply in writing to the complainant's allegations. The reply will be made known to the complainant before the case proceeds.

The company will take all measures to prevent any disclosure of the incident and the identities of the parties involved, unless the disclosure is necessary for the investigation, for taking corrective action, or required by law.

Results of Investigation

Upon completion of an investigation, LMCH will provide both the complainant and respondent a written summary of the findings of the investigation and may include any



information regarding corrective action that has been or will be taken as a result of the investigation. This written notification will be provided within ten working days of the investigation being completed, and will not include the investigation report unless required by law.

Confidentiality

Control Measures

Where LMCH determines that violence or harassment has occurred, control measures will be implemented to eliminate or control the risk of violence or harassment to a worker as a result of the investigation. These control measures will be determined on a case-by-case basis, depending on the situation investigated. Any control measure enacted will be communicated to the complainant and respondent, as well as any other employees the measure affects.

Disciplinary Measures

Any disciplinary action will be determined by Human Resources, in coordination with the appropriate Manager, and will be proportional to the seriousness of the behaviour or action involved in the incident.

If LMCH determines that an employee has been involved in an incident of violence or harassment towards another employee, immediate disciplinary action will be taken, up to and including immediate dismissal.

Domestic Violence

If LMCH becomes aware that domestic violence is likely to expose an employee to physical injury in the workplace, the corporation will take every precaution reasonable in the circumstances for the protection of the worker.

Recommendations to Victims

LMCH will provide appropriate assistance to any employee who is a victim of violence or harassment. LMCH recommends that a worker who has been harmed as a result of an incident of violence at the workplace consult their health care provider for treatment or referral for post-incident counselling.

LMCH provides an EAP to all staff. Information is posted in the offices and is available through Managers and Human Resources.



The Right to Refuse Unsafe Work

As per the Occupational Health & Safety Act, employees have the right to refuse work that they believe is unsafe to themselves or another worker. A worker who believes that they are endangered by workplace violence may also refuse work. Upon refusing to work, the employee must report the circumstance of the refusal to their manager. An investigation will follow in the presence of a JHSC representative.

Fraudulent, Malicious, or Vexatious Complaints

It is a violation of this policy for anyone to knowingly make a fraudulent, malicious, or vexatious complaint, or to provide false information about a complaint. Unfounded or frivolous allegations may cause both the respondent and the company significant damage. Any employee who knowingly makes a false allegation related to violence or harassment will be subject to immediate disciplinary action, up to and including termination of employment.

Recordkeeping

LMCH will ensure that appropriate records of complaints and investigations relating to incidents of violence and workplace harassment are kept, including:

- A copy of the complaint or details about the incident;
- Any records related to the investigation, including notes;
- A copy of the investigation report (if applicable);
- A summary of the investigation results, including the reports provided to the complainant and respondent; and
- A copy of any corrective action taken to address the complaint or incident.

Confidentiality

LMCH will not disclose the name of a complainant or a respondent or the circumstances related to the complaint to any person except where disclosure is necessary to investigate the complaint or take corrective action with respect to the complaint, or required by law. The corporation will only disclose the minimum amount of personal information or details necessary for these purposes.

All records of harassment, and subsequent investigations, are considered confidential and will not be disclosed to anyone except to the extent required by law. LMCH will do



everything reasonably possible to protect the privacy of any individuals involved and to ensure that complainants and respondents are treated fairly and respectfully.

Policy Review

In accordance with the *Occupational Health and Safety Act*, this policy will be posted in a conspicuous place in the workplace and reviewed annually.

4.0 DOCUMENT CONTROL

Date Drafted	<ul style="list-style-type: none">• January 2017
Date Approved	<ul style="list-style-type: none">• February 23, 2017
Date Revised	<ul style="list-style-type: none">• December 3, 2021
To be reviewed	<ul style="list-style-type: none">• Review and update every twelve months (in consultation with the JHSC)• General review by all employees every twelve months
Inquiries to Policy Owner	<ul style="list-style-type: none">• Human Resources



Appendix A: Workplace Violence and Harassment Incident Reporting Form

Complete this form if you are the victim of OR witness to an alleged incident of workplace violence, workplace harassment, or workplace domestic violence incident. Print or photocopy additional copies as needed. Sign and forward this report to your supervisor and/or HR.

Name:	Date and time of Incident:	Date Incident Reported:
<input type="checkbox"/> Victim <input type="checkbox"/> Witness	Address/location of incident:	
Name of alleged perpetrator:		Your Relationship to the perpetrator:
Assailant's Description		
Height:		
Weight:		
Hair Colour:		
Eye Colour:		
Race:		
Distinguishing Features:		
Check the box describing the incident:		
<input type="checkbox"/> Threatened by email or other written communication	<input type="checkbox"/> Assault	<input type="checkbox"/> Robbery
	<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Stalked
<input type="checkbox"/> Threatened Verbally	<input type="checkbox"/> Assaulted with Weapon	<input type="checkbox"/> Bomb Threat
<input type="checkbox"/> Threatened with a Weapon	<input type="checkbox"/> Arson	<input type="checkbox"/> Mischief to Property
<input type="checkbox"/> Workplace Harassment	<input type="checkbox"/> Workplace Bullying	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Other (please specify):		



Describe the incident in detail. Include what happened, where, who was involved, other witnesses, what you heard, saw, etc.

Please provide the names and contact information, if known, of any additional witnesses; the name of any persons involved in the incident:

Signature:

Date:

Person Receiving this Report:

Date:



Appendix B: Workplace Violence and Harassment Incident form – Manager Report

As soon as is reasonably possible, Managers of employees or an area impacted by workplace violence should document incidents by completing and filing this report form to the Human Resources Manager. Not all questions may be applicable to each particular circumstance reported.

SECTION 1	
Date of Incident:	Date of Report:
Location of Incident, be specific (include map or sketch if necessary):	

SECTION 2	
Victim's Information	Victim's Contact Information
First Name:	Contact Phone Number(s):
Last Name:	
Home Address:	Email Address(es):
City:	
Postal Code:	
Job Title:	
Manager's Name:	
Time Manager notified:	Date Manager Notified:



SECTION 3				
Assailant's Information		Assailant's Contact Information		Assailant's Description
First Name:		Work Telephone Number:	Home Telephone Number:	
Last Name:				
Home Address:		Cell Telephone #	Email Address:	
City:	Postal Code	Assailant's Gender:		
Work Location:				
Relationship of Assailant to Victim (<i>if any</i>):			Use of Weapons (<i>if any</i>):	
<input type="checkbox"/> Co-worker <input type="checkbox"/> Family <input type="checkbox"/> Supervisor <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Tenant <input type="checkbox"/> Other (<i>please describe</i>)			Did the Assailant use a weapon? <input type="checkbox"/> Yes <input type="checkbox"/> No	
			If yes, describe:	
			Describe how it was used:	

SECTION 4		
<input type="checkbox"/> Threatened by email or other written communication	<input type="checkbox"/> Assault	<input type="checkbox"/> Robbery
<input type="checkbox"/> Threatened Verbally	<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Stalked
<input type="checkbox"/> Threatened with a Weapon	<input type="checkbox"/> Assaulted with Weapon	<input type="checkbox"/> Bomb Threat
<input type="checkbox"/> Workplace Harassment <input type="checkbox"/>	<input type="checkbox"/> Arson	<input type="checkbox"/> Mischief to Property
<input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Workplace Bullying	<input type="checkbox"/> Domestic Violence



SECTION 8

Measures taken to prevent recurrence:

SECTION 9

Is the victim presenting any concerns that have not been addressed?

SECTION 10

Current status of Assailant, if known (arrested, discipline, transferred, etc.):



SECTION 11	
Manager's Information	Contact Information
First Name:	Contact Phone Number(s):
Last Name:	
Home Address:	Email Address(es):
Time Manager notified:	
Date notified:	
Relationship to victim or assailant, if any:	
_____	_____
Name of person completing this report	Date report completed

Signature	



STAFF REPORT 2022-10

TO: Board of Directors
FROM: Wendy Groves, Construction & Project Manager
SUBJECT: CMHC Project Status Report
DATE: January 11, 2022

PURPOSE:

This report is intended to **BE RECEIVED** for information that attributed to secure funding of \$40,136,090 through CMHC as well as to provide a breakdown of fund allocation and construction timeframes.

BACKGROUND:

LMCH has been collaborating with CMHC since 2019 to define a program that meets CMHC requirements under the Renovation, Repair and Renew funding program. The program that LMCH team members developed followed the guidelines to the extent possible of the National Housing Co-Investment Fund – “Minimum Environmental & Accessibility Requirements – Repairs and Renewals”. The criteria requirements include increasing accessibility at common areas as well as retrofitting 20% of interior units to meet accessibility requirements, while also achieving 25% energy savings and GHG reductions by year end 2027.

LMCH identified several energy projects to be verified that when fully implemented would meet the energy savings targets set by CMHC. These projects were then modeled by the consulting group Efficiency Engineering (EE) who substantiated project performance levels. In addition, LMCH retained an architect to provide commentary of project feasibility for accessibility projects defined by National Housing. Together with these reports LMCH identified and provided project objectives, implementation plans, and measurable outcomes as identified in the CMHC Co-Investment Fund Portfolio Plan.

As of February 25, 2021 CMHC, by way of Letter of Intent, confirmed to LMCH that the provided documentation submitted by LMCH achieved CMHCs criteria for funding. The City of London denoting their commitment to the program signed as guarantor on June 16, 2021.

On November 25, 2021 LMCH in conjunction with the City of London (COL) as guarantor executed the loan agreement with CMHC of \$40,136,090. The funding allocation consists

of \$ 15,533,989 as a forgivable loan and \$24,602,101 repayable loan with the City of London guaranteeing \$37,000,000.

Energy Efficiency Project Changes in 2021

Throughout the initiation and planning stage an in-depth analysis of each project was conducted in 2021 to assess feasibility and demonstrate financial viability. This included comprehensive site assessments, detailed project costing, assessment of Return on Investments and the availability of program funds to complete the work. Based on consultant estimates to the original energy program and total project costs estimates, a cost reduction of \$12 million dollars was required. The projects that have been deselected in response to high costs and feasibility include:

- *Exterior Insulation and Finishing System (EFIS):* A system to wrap the exterior building providing insulation to the building. Per modeling this was not proven to be a viable project as the Net Present Value is negative, has a Capital Payback of over 50 years, and savings are 1/3 of that compared to the Energy Management System (EMS) and 10 times more expensive than EMS.
- *Energy Recovery Ventilator (ERV):* A replacement system for the existing Make Up Air Units (MUA) at Wharnccliffe. The existing MUAs are approximately 5 years old and are in good working condition. The MUAs are over sized for each of the properties and was the rationale for the ERV. Upon further investigation and modeling it was determined that the installation of a Variable Frequency Drive (VFD) to the existing MUAs would automate and control the air flow based on time of day and volume of air flow. Replacing the ERV project with the VFD project is over a \$500,000 savings.
- *Home Winterization Program:* Consisted of various small projects geared to the townhouses which included attic & basement insulation, new thermostat and some pipe wrapping. Upon completing several air tests and surveys this program was proven non-viable. Existing attic insulation met the minimum requirements, attic insulation was present at all units surveyed. To replace the anticipated energy savings the following projects were selected, LED light installation at exterior family units and property, digital thermostat replacement at family sites, LED light replacement at common areas at Wharnccliffe.

The reselection of projects has been methodical ensuring energy criterion requirements & budgets are achieved, awareness of the impact to tenants while ensuring the assets is maintained. The energy program developed will exceed 25.5% energy savings and 27% reduction in GHG emissions.

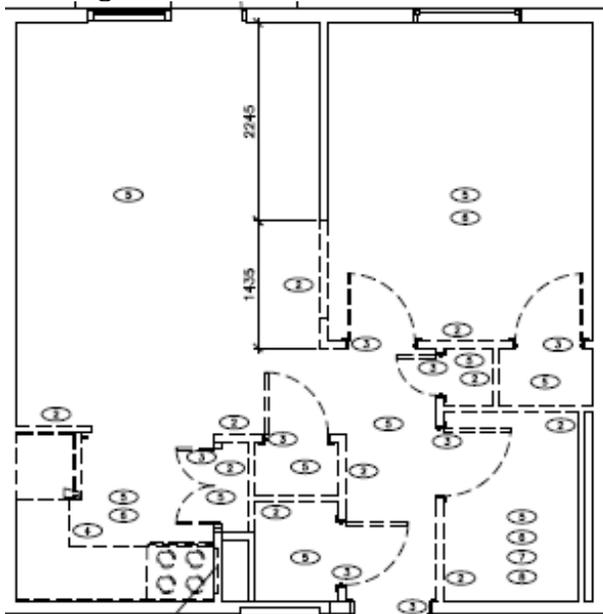
Accessibility Project Changes in 2021

CMHC has set out the specific retrofits to obtain the minimum standards for accessibility in the program. Original floorplans for accessibility improvements have been reviewed and revised with the support of 1721 Architects to support the unit size and configuration at the 7 multi-residential sites involved in the program. To support this element of the program LMCH has worked with Architect 1721 to develop two options for accessibility that meet the requirements of CMHC. By incorporating the two approaches LMCH will meet the 20% target within budget and provide accessible accommodation that has been underrepresented for years.

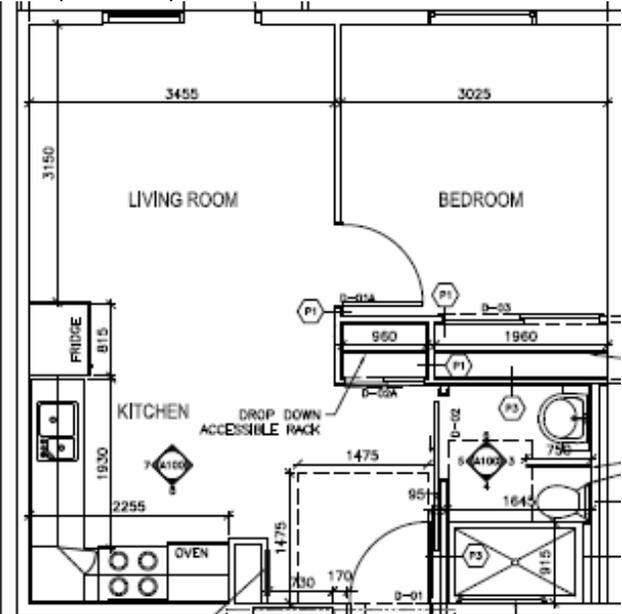
Accessible Option 1	Accessible Option 2 – Hybrid model
<p>Designed to meet the needs of restricted mobility (wheelchair user); elements may include:</p> <ul style="list-style-type: none"> - Relocated AODA compliant entry door - Automatic entry door - Revised unit layout - Lavatory – roll in shower with AODA fixtures and barn door. - Kitchen – modified counters and AODA appliances - Strobe light and smoke detectors. 	<p>Designed to meet the needs of limited mobility (walker user); elements may include</p> <ul style="list-style-type: none"> - Automatic entry door - Lavatory – walk in shower with AODA fixtures and barn door. - Kitchen – new millwork with AODA appliances. - Strobe light and smoke detectors

30 Baseline Design Development:

Existing



Proposal Option



Construction Timelines – Highrise Properties

Projects	Simcoe	Baseline (seniors)	Mc Nay (seniors)	Dundas	Walnut (senior)	Kent (senior)	345 & 349 Wharnclyffe
Unit Retrofits per year	12 units – 2022 12 units - 2023 11 units – 2024	27 units – 2022 28 units - 2023 27 units – 2024	22 units – 2022 22 units - 2023 22 units – 2024 22 units – 2025	10 units – 2024 10 units - 2025	20 units - 2022 20 units - 2023 20 units – 2024 15 units – 2025	18 units – 2022 18 units - 2023 18 units – 2024 11 units - 2025	16 units – 2022 16 units - 2023 18 units - 2024
Common Area Renos	Q3 - 2022	Q3 - 2022	Q3 – 2023	Q3 – 2023	Q3 – 2024	Q3 – 2023	Q3 - 2024
Energy Mgmt. System	Aug, 2022	Sept. 2022	May 2022	June 2022	July 2022	April 2022	Mar 2022
Energy Retrofit	Q3 - 2024	Q3 - 2024	Q3 - 2025	Q3 - 2025	Q3 - 2025	Q3 - 2025	Q3 - 2024
VFD at Make Up Air Units	Mar 2022		Mar 2022		Mar 2022	April 2022	April 2022

Total quantity of unit retrofits per property achieves the requirements as outlined in the CMHC Co Investment Plan. Total units retrofitted per year may vary dependent on tenant turnover.

Construction Timelines – Family Sites

Projects	Marconi	Allan Rush	Pond Mills	Boulee	Huron
Furnace & Hot water Tank Replacement	Q2/Q3 2025	Q2/Q3 2025	Q2/Q3 2025	Q2/Q3 2025	Q2/Q3 2025
Energy Retrofits	Q3 2022	Q3 2022	Q3 2022	Q4 2022	Q4 2022
Exterior works	2022 2025	2024	2025	2024	2025
Windows		Q3 2023	Q3 2023		
Doors		Q3 2023			

Next Steps for 2022

Project Activity	Estimated Timing
Execution of Energy Management System (EMS) Contract	January 2022
Complete Build Out Accessible Unit Mockup	February 2022
Tender Award for Architect	February 2022
Tender Award for Variable Frequency Drive (Wharnclyffe MUA)	February 2022
Tender Award for Measurement and Verification Consultant	March 2022
EMS Installation Start Date	March 2022

FINANCIAL IMPACT:

The selected projects outlined below satisfy the criterion requirements as set out by CMHC and the National Housing Co-Investment Fund within budget. Budget estimates have been developed in collaboration with trades and consultants.

Budget Allocation	Budget Estimate
Unit Retrofits - Accessible	\$ 18,289,275
Common Area Renos - Accessible	\$ 2,255,000
Energy Mgmt. System	\$ 1,302,461
Energy Retrofit	\$ 394,166
VFD at Make Up Air Units	\$ 33,000
Furnace & Hot Water Tank Replacement	\$ 4,149,600
Exterior works	\$ 3,435,000
Windows & Doors	\$ 1,803,000
Total Hard Costs	\$ 31,661,501
Total Soft Costs	\$ 2,628,034
Contingency	\$ 4,265,608
Interest and Non HST Rebate	\$1,580,946
Total	40,136,089

Risk:

The installation of a robust EMS (energy management system) is the highest impact project identified by EE. To mitigate risk, commencing with the EMS project was a strategic decision. This will maximize the quantitative operational cost savings as well as receiving energy incentive rebates early in the program. Within one year a study will be conducted which will establish the anticipated trends of energy reduction and allow for adjustments if required in the coming years to meet the 25% target criteria.

Product cost increases, inflation and product procurement have had a significant impact to construction industry over the last year. Ongoing monitoring of the market will take place to best interpret when a project should be executed to obtain the greatest value for work incurred whilst ensuring assets and tenants needs are considered.

PREPARED and SUBMITTED BY:	
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NAME POSITION	
REVIEWED and CONCURRED BY:	REVIEWED and CONCURRED BY:
NAME DIRECTOR	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER



STAFF REPORT 2022-11

TO: Board of Directors

FROM: Phil Renaud, Director, Property Services and Asset Management

SUBJECT: Planned 2022 Service Contract Tenders

DATE: January 11, 2022

PURPOSE:

To provide information relating to the service contracts that will be tendered in 2022.

RECOMMENDATION:

That the Board RECEIVE for information this review of the service contracts that will be tendered during 2022.

BACKGROUND:

LMCH issues Request for Proposals to get competitive pricing for work that is not completed directly by LMCH. LMCH staff assess the RFP submissions based on identified requirements and make recommendation to the Board of Directors on the award of the contract.

The RFP process allows LMCH to meet key compliance requirements where it is not practical to maintain this expertise on staff and for the provision of service where the capital or human investment required to support the work makes the provision of the service directly cost prohibitive.

Contracts are typically 1-3 three years and have the ability to extend for additional time should both parties agree. Several the service agreements are set to be tendered in 2022. The tendering process will review the scope of work, product requirements as well as the performance management and quality control measures/programs

Service Contract	Current Annual Value	Current Expiry Date	Tender Date
Public Space Cleaning London Sites	\$571,335	June 30, 2022	End of Q1
Public Space Cleaning County Sites	\$99,795	June 30, 2022	End of Q1
Elevator Maintenance	\$78,700		Q2
Fire Alarm/Sprinkler System testing and verification services	\$87,000	June 30, 2022	Q2
Snow Removal Services all Sites	\$720,597	June 30, 2022	Q3
Landscape Management Services	\$70,000	December 15, 2022	Q3

In addition to the RFP’s listed above, LMCH will initiate the tender process for smaller service contracts in a number of areas including preventive maintenance for HVAC and generator systems as well as painting contracts.

TENANT IMPACT:

LMCH will strive to reduce negative impact on tenants and adjust service requirements to better meet the needs of our tenants and our buildings.

FINANCIAL IMPACT:

LMCH has not completed the full tender process for a number of these services for a number of years. As such, it is expected that contract prices will increase through the tender process. LMCH will make every effort to control these increases through the changes to the scope of work and other changes to the contracts.

LEGAL IMPACT / RISK MANAGEMENT:

There are no anticipated legal or risk management issues as we will ensure all contractors provide proof of proper insurance(s) and abide by LMCH policies while on site and in our buildings.

PREPARED and SUBMITTED BY:	
NAME Phil Renaud POSITION Director of Property Services	
REVIEWED and CONCURRED BY:	REVIEWED and CONCURRED BY:
NAME DIRECTOR	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

STAFF REPORT 2022-12

TO: Board of Directors

FROM: Scott Robertson, New Construction Project Manager

SUBJECT: Request for Proposal for Asbestos Surveys and Reassessments
(4 Year Contract)

DATE: January 14, 2022

PURPOSE:

To provide a review of the recommendation for award of the contract for LMCH Asbestos Surveys and Reassessments (4 Year Contract)

RECOMMENDATION:

That the Board approve the following recommendations:

1. Approve the award of the contract to Pinchin Environmental for the sum of \$117,520.00 (exclusive of taxes) to conduct an asbestos survey of all LMCH sites and a reinspection of sites for 3 additional years.
2. Authorize LMCH staff to take the necessary steps to give effect to the above recommendation

BACKGROUND:

Under the Occupational Health and Safety Act (OHSA), asbestos is prescribed as a designated substance. Regulation 278/05 is applicable to construction projects and in building and repair operations. Section 30 of the Act requires the owner of a project to prepare a list of designated substances on the project, including asbestos, and make it available to a constructor. If any work on the project is tendered, the person issuing the tenders must include, as part of the tendering information, a copy of the list of all designated substances for the project, prepared and maintained by the owner. This section of the Act applies to the owners of residential properties who undertake projects, and repair work and helps to ensure that constructors, employers, and workers who carry out these projects and repairs are aware of the presence of asbestos in these buildings.

The purpose of the asbestos surveys is to document the type, location, condition, and quantity of asbestos containing materials (ACMs) at LMCH's properties. In addition, for all properties where ACMs are documented, an asbestos management plan (AMP) must be prepared. LMCH requires the full asbestos surveys to be completed in year one (1) and has included the annual update of the surveys and management plans for a further three (3) years.

REASON FOR RECOMMENDATION:

An RFP was posted to Bids & Tenders on November 22, 2021 and closed on December 13, 2021. Nine (9) submissions were received. The submissions were evaluated and scored, factoring; Bid compliance, Fees, Qualifications and Comparable projects as outlined in the Selection Criteria section of the tender.

The project must be divided into two phases:

- Phase 1 includes the asbestos surveys and AMP for all portfolios. These are to be completed in 2022; and
- Phase 2 includes the asbestos reassessments and updates to the AMP. These are to be completed annually in 2023, 2024, and 2025.

Pinchin Environmental submitted the successful bid and is recommended for the work. Pinchin's submission satisfied all mandatory requirements, and they have significant experience working with community housing providers. Their bid is competitive, and LMCH has confidence that they will be able to meet the requirements of the RFP.

TENANT IMPACT:

This work will have minimal direct impact on tenants. The surveys and assessments use a sampling methodology that limits the number of units the vendor will need to access. It is expected that vacant units within the buildings can be used to complete this work. Should access to occupied units be required, this will be done respecting the notice requirements set out in the Residential Tenancies Act and will be conducted in a manner that respects all applicable COVID Protocols.

FINANCIAL IMPACT:

As this is a regulatory compliance project and was not budgeted within the 10-year capital planning, 2022 Capital General Contingency funds will be used to fund this project.

LEGAL IMPACT / RISK MANAGEMENT:

Completion of the site surveys and preparation of an Asbestos Management Plan for LMCH will bring the organization into compliance with Ontario Regulation 278/05 and eliminate any future potential non-compliance fines and/or legal action.

Ongoing Risk management will be supported through the development of an Asbestos Management Policy (February 2022) as well as an organization Asbestos Management Program (Q3 2022) that will provide a framework to safely manage ACM that may be found during the surveys.

ATTACHMENTS:

Attachment 1: LMCH RFP - Asbestos Surveys & Reassessments

PREPARED and SUBMITTED BY:	
Scott Robertson New Construction Project Manager	
REVIEWED and CONCURRED BY:	REVIEWED and CONCURRED BY:
Phil Renaud DIRECTOR of Property Services & Asset Management	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER



**LONDON &
MIDDLESEX**
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**Request for Proposal
for
Asbestos Surveys and Reassessments
(4 Year Contract)**

RFP #: 2020-0032

RFP Issued November 22, 2021

PROPOSAL SUBMISSION DEADLINE

Monday, December 13, 2021
2:00pm EST

Late Submissions Will Not Be Accepted

DEADLINE FOR QUESTIONS

Wednesday, December 1, 2021
2:00pm EST

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1 INTRODUCTION AND BACKGROUND

At London & Middlesex Community Housing, we believe that housing is the foundation of a better tomorrow. LMCH provides 3,282 housing units across 32 properties for more than 5,000 people. Those who call LMCH home are a diverse cross-section of low-income individuals including families, seniors, adults, and new Canadians.

Mission: We provide and maintain homes in a safe and supportive environment to meet the needs of the people we serve in our communities.

Vision: We envision healthy and safe homes and communities in London and Middlesex. Leading by example. LMCH will help make a difference and positively impact lives using housing as the foundation.

LMCH's portfolio is comprised of numerous high-rise and low-rise multi-unit residential buildings. For the purposes of this RFP, the buildings have been grouped into two portfolios; Adult/Senior and Family Sites.

The Adult/Senior portfolio is comprised of 15 mid to high-rise buildings in London and six low rise buildings in Middlesex County. The Family Sites portfolio is comprised of 12 townhouse complexes located in London.

LMCH requires asbestos surveys and asbestos management plans for their buildings to ensure that asbestos is being managed in accordance with the Ontario Occupational Health and Safety Act and Ontario Regulation 278/05 Designated Substance – Asbestos on Construction Projects and in Buildings and Repair Operations (O.Reg. 278/05).

In this document the terms bidder, consultant, and contractor are equivalent.

2 OBJECTIVE

LMCH is seeking proposals from consultants to complete asbestos surveys, asbestos reassessments, and to prepare asbestos management plans for LMCH's properties, over a four-year term.

The objective of this RFP, therefore, is to solicit bids from, and engage, a qualified consultant who will enter into a contract with LMCH to complete the scope of work as outlined in Section 4.

The contract will be for four years and will commence on Monday 3-Jan-22.

3 PREVIOUS SURVEYS

Asbestos surveys were completed in 2008 for the buildings in the Adult/Senior portfolio. These surveys included a review of all accessible common areas and one rental unit per building. The reassessment of asbestos containing materials (ACMs) within these buildings was completed in 2016, 2017, and 2019. The reassessments did not include any new areas or units.

Asbestos surveys were completed in 2019 for the buildings in the Family Sites portfolio. These surveys included a review of 10% of the units within each townhouse complex.

Asbestos management plans have not been prepared for any of LMCHs properties included in this proposal.

4 SCOPE OF WORK

The purpose of the asbestos surveys is to document the type, location, condition, and quantity of asbestos containing materials (ACMs) at LMCH’s properties. In addition, for all properties where ACMs are documented, an asbestos management plan (AMP) must be prepared. The condition of the ACMs must be assessed and the AMPs updated on an annual basis for the term of the contract.

The project is to be divided into two phases:

Phase 1 includes the asbestos surveys and AMPs for both portfolios. These are to be completed in 2022.

Phase 2 includes the asbestos reassessments and updates to the AMPs. These are to be completed annually in 2023, 2024, and 2025.

LMCH’s properties that are included in the RFP are provided in Tables 1 and 2, below.

Table 1: Properties in Adult/Senior Portfolio

	Address	City	# Units	# Floors
1	136 Albert St.	London	82	6
2	200 Berkshire Dr.		89	8
3	580 Dundas St.		151	9
4	304 Oxford St. W.		109	6
5	241 Simcoe St.		217	12
6	39 Tecumseh Ave. E.		38	2
7	345 Wharncliffe Rd.		145	8
8	349 Wharncliffe Rd.		145	8
9	872 William St.		70	6
10	170 Kent St.		212	12
11	202 McNay St.		252	11
12	632 Hale St.		146	8
13	85 Walnut St.		232	14
14	1194 Commissioners Rd. W.		126	7
15	30 Baseline Rd. W.		251	9

	Address	City	# Units	# Floors
16	49 Bella St.	Strathroy	51	2
17	125 Head St.		25	1
18	249 Ellen St.	Parkhill	10	1
19	2061 Dorchester Rd.	Dorchester	16	2
20	157 Simpson St.	Glencoe	21	2
21	10 York St.	Newbury	10	1

Table 2: Properties in Family Sites Portfolio (Townhouses)

	Address	City	# Units	
1	1481 Limberlost Rd.	London	160	
2	160-430 Boule St.		130	
3	961-1183 Huron St.		110	
4	Southdale (931-1225 Southdale Road and 551 to 605 Millbank Dr.)		166	
6	370 Pond Mills Rd.		81	
7	1-34 Barberry Ct.		Allan Rush Complex	34
8	82-100 Primrose Ct.			19
9	35-48 Ivy Ct.			14
10	35-48 Vinewood Ct.			33
11	243-245 Marconi Blvd.		51	
12	152-218 Marconi Blvd. (semi-detached)		34	

4.1 Phase I - Asbestos Surveys

The scope of work for the asbestos surveys is as follows:

1. Coordinate a start-up meeting (video/teleconference) with LMCH during which the project team will be introduced, and the overall direction and expected outcomes of the project will be discussed. Major milestones, such as completion dates for field activities and submission of draft and final reports should be included in the discussion.
2. Review available relevant documents (previous survey reports etc.). These will be provided by LMCH upon project award.

3. Provide a schedule for the site work for review and approval by LMCH.
4. LMCH will provide notification to tenants and will coordinate site access based on the schedule provided.
5. Complete site visits for all LMCH properties listed above during which potential ACMs should be identified.
6. Collect samples of all potential ACMs identified.
 - a. Sampling must be completed in accordance with *Ontario Regulation 278/05*.
 - b. Sampling must be non-destructive (i.e. discreet sampling only).
7. Submission of the samples to an accredited laboratory (eg. AIHA LAP, CALA, NVLAP) for asbestos analysis. Laboratory analysis must be completed in accordance with O.Reg. 278/05.
8. Prepare one report per portfolio which provides the results of the survey. The reports must include the following:
 - a. Cover Page.
 - a. Executive Summary.
 - b. Table of Contents.
 - c. Introduction/Background
 - d. Discussion of Applicable Regulations.
 - e. Sampling Methods.
 - f. Results.
 - g. Discussion.
 - h. Recommendations for removing, or repairing ACMs which are in poor condition.
 - i. Photographic log of materials sampled.
 - j. Laboratory certificates of analysis.
 - k. Inventory of asbestos containing materials in Excel format. The inventory should include the following for each ACM identified:
 - i. Type (eg. vinyl floor tile, drywall joint compound etc.).
 - ii. Location.
 - iii. Condition.
 - iv. Whether it is friable or non-friable.
 - v. The type and % of asbestos for all friable ACMs.
 - vi. Quantity.
9. Prepare one AMP per building or townhouse complex (i.e. not per portfolio) where ACMs are present. The AMPs must be prepared in accordance with O.Reg. 278/05 and should include:
 - a. Background information on asbestos.
 - b. Information on applicable regulations.
 - c. An evaluation of the accessibility of each identified ACM.
 - d. The asbestos inventory.

- e. Recommendations to manage each ACM (i.e. remove, repair, maintain in place).
- f. Work procedures.

The AMPs should include sufficient information to adequately manage ACMs and to prevent exposure to airborne asbestos fibres. The AMPs should be prepared in a manner such that they can easily be reviewed and updated.

10. Both the survey reports and AMPs should be submitted electronically to LMCH in draft format for review and comment. Final reports should be submitted in electronic format within 2 weeks of receiving LMCH's review comments.
11. Prepare and submit to LMCH weekly email updates to ensure the Phase 1 of the project is progressing well and in accordance with expectations.

For the Adult/Senior portfolio all common areas and at least 15% of the units must be included in the survey.

For the Family Sites portfolio all common areas and at least 10% of the units must be included in the survey. The units surveyed cannot be the same as those included in the 2019 survey.

Both the interior and exterior (excluding roof assemblies) of the buildings should be included in the survey. An explanation must be provided for any areas or materials which are excluded from the survey. Materials which cannot be sampled but may contain asbestos, should be listed in the report and inventory as Presumed ACMs.

4.2 Phase 2 - Asbestos Reassessments

The scope of work for the asbestos reassessments for each year is as follows:

1. Coordinate a start-up meeting with LMCH (video/teleconference) during which the any changes to the project team and major milestones, such as completion dates for the field activities and updated asbestos inventory and AMP reports, will be discussed.
2. Complete site inspections during which the condition of known ACMs at LMCH's properties will be assessed. All materials deemed to be ACMs during the 2022 asbestos surveys as well as ACMs documented in previous reports, shall be inspected.
3. Collect samples of any potential ACMs not previously sampled and submit them for laboratory analysis. Sample collection and analysis must be completed in accordance with O.Reg. 278/05.
4. Update the asbestos inventories and AMPs.
 - a. A letter report should accompany the updated inventories/AMPs which includes recommendations for the repair or removal any ACMs deemed to be in poor condition along with a photographic log of these ACMs.
5. The letter reports and updated inventories AMPs should be submitted electronically to LMCH in draft format for review and comment. The final versions should be submitted in electronic format within 2 weeks of receiving LMCH's review comments.

6. Prepare and submit to LMHC weekly email updates to ensure the Phase 2 of the project is progressing well and in accordance with expectations.

5 PROPOSAL PREPARATION INSTRUCTION

A separate technical and fee proposal should be prepared as outlined in Sections 5.1 and 5.2.

For the proposals to be considered, the bidder must clearly demonstrate that they meet the submission requirements set out in Section 6.

5.1 Technical Proposal

In the technical proposal, the bidder should demonstrate their understanding of the Scope of Work outlined in Section 4.

Sections 5.1.1 through 5.1.6 provide guidelines for what are required in the technical proposal and correspond to the evaluation criteria outlined in Section 7. Each of these sections should be addressed in the proposal in the same order as provided. Failure to do so may reflect negatively on the evaluation.

5.1.1 Qualifications (5 Points)

Provide a corporate profile of the organization.

5.1.2 Company Experience (10 Points)

Provide a description of the organizations experience in completing projects of similar size and scope.

A summary of three representative projects should be provided. The summaries should include:

- Project name.
- Summary of scope of work completed.
- Relevance to the current project.
- Proposed project team members that participated in these projects.

5.1.3 Project Team Experience (20 Points)

Provide an organizational chart of the project team and their respective roles.

Provide a CV for each member of the team which includes the following:

- Education, employment history, and professional designations.
- Number of years of relevant experience.
- Example projects that the team member lead or participated in and their role.

5.1.4 References (15 Points)

Provide three references from individuals who can verify the quality of the completed in projects of similar scope.

Names and contact information (company, agency etc., email and phone) must be provided for each client reference.

5.1.5 Approach & Methods (40 Points)

Discuss the general approach to completing assignments of this nature.

Prepare a work plan that describes the specific methods that will be used to complete this project. Include a level of effort matrix that clearly indicates each task, team member involvement, and associated hours for tasks and team members to complete the project.

Include commentary on sampling where occupants may be present.

5.1.6 Sample Report (10 Points)

Include a sample report for a project that is similar to the one outlined in this RFP.

5.1.7 Value-Added (Up to 10 Bonus Points)

The bidder may provide additional information to that outlined in Sections 5.1.1 through 5.1.6 that demonstrates why they may have a competitive advantage. This information, however, must be limited to 2 pages. Information which exceeds this limit will be disregarded.

This section may also include value-added services which could be provided at additional cost should LMCH choose to accept them. Additional costs should be outlined in the Fee Proposal (see Section 5.2 below).

5.2 PRICE PROPOSAL

The bidder shall provide firm pricing to provide the services requested in the Scope of Work (Section 4).

Pricing shall be provided on the Bid Form included in Appendix A.

All costs incurred for laboratory analysis and any other disbursements must be included in the cost of services provided on the Bid Form.

6 SUBMISSION CRITERIA

The following criteria must be met for the proposal to be considered for staged evaluation:

- The proposals must be in English.
- A copy of the bidder's current insurance certificate (refer to section 9.4 below for details).
- The proposal must include a cover letter which contains:
 - The bidder's legal entity name, address, and phone number.
 - Name and signature of an officer or agent fully authorized to execute contracts for the bidder.
 - The name, phone number, and email of the contact person for the bidder.

- One electronic copy of both the technical and fee proposals in PDF format, must be submitted via Bids & Tenders Procurement Platform on or before the submission deadline of **2:00pm EST on 13th of December 2021.**
- The file names for the technical and fee proposals should be:
 - RFP #2020-0032 - Technical Proposal
 - RFP #2020-0032 – Price Proposal
- **The price proposal document must be password protected by the bidder.**

7 EVALUATION CRITERIA

Evaluation of proposals will be a two-stage process based on the following weighting:

Technical Proposal: 70%

Price Proposal: 30%

7.1 Stage 1 – Technical Proposal Review

The available base points are 100.

A bonus allotment of 10 points is also available based on value-added services.

The base and bonus point breakdown, by requirement, is described in Section 5.1.

The bidder must score a minimum of 75 base points:

- in order to proceed to Stage 2, and
- in order to have the opportunity to earn bonus points.

For bidders that achieve a score of 75 or greater, LMCH will request the password to their price proposal.

7.2 Stage 2 – Price Proposal Review

The winning price proposal will be the lowest submission value. Bids which LCMH deems to be unrealistically low or high may be rejected at LMCH's discretion.

7.2.1 Scoring

Price proposals will be scored as follows:

$(\text{Bidder Technical Score}) \times 0.7 + \frac{\text{Low Price}}{\text{Bidder Price}} \times 30 = \text{Bidder Score.}$

The highest overall score will be offered the opportunity to enter into a contact with LMCH.

Table 3: Example Scoring Scenario

Bidder	Technical Score	Total Price	Score (Out of 100)
1	91	\$100,000	$(91 \times 0.7) + (75/100 \times 30) = 86.2$
2	77	\$75,000	$(77 \times 0.7) + (75/75 \times 30) = 83.9$
3	85	\$90,000	$(85 \times 0.7) + (75/90 \times 30) = 84.5$

Bidder 1 achieves the highest score.

8 RFP SCHEDULE

The following milestones are planned for this RFP:

Table 4: RFP Schedule

Milestone	Date
RFP Issued	Monday 22-Nov-21
Deadline for Receipt of Questions	Wednesday 1-Dec-21 at 2:00pm EST
Proposal Submission Deadline	Monday 13-Dec-21 at 2:00pm EST
Evaluation of Submissions	Tuesday 14-Dec-21 to Friday 17-Dec-21
Notification of Project Award	Tuesday 21-Dec-21
Deadline for Receipt of Debriefing Requests	Tuesday 21-Dec-21 at 2:00pm EST

8.1 Questions

Questions regarding this RFP should be submitted via the Bids and Tenders Procurement Platform. Questions emailed will not receive a response.

Questions must be received on or before the deadline provided in Table 4. A response will not be provided for questions received after this date.

Contact with other LMCH employees other than name contact above, regarding this RFP will result in disqualification.

8.2 Amendments and Addenda

Any modifications to this RFP will be posted publicly on the Bids and Tenders Procurement Platform.

Responses to questions will be provided to all bidders via an addendum which will be posted on the Bids and Tenders Procurement Platform.

8.3 Debriefing

After contract award, bidders may request a debriefing on the results of the RFP process. The request must be received in writing on or before the deadline provided in Table 4.

Debriefing requests should be submitted via email to:

Name: Scott Robertson
Email: srobertson@LMHC.ca
Subject Line: RFP #2021-0031 Asbestos Surveys and Reassessments – Debriefing

Responses will be provided by LMCH in writing via email.

9 GENERAL

The cost to prepare this proposal is the responsibility of the bidder. No cost incurred prior to receipt of a signed contract or written authorization from LMCH, can be charged to any resulting contract.

Joint venture proposals will not be accepted.

The proposal will remain valid and irrevocable for a period of sixty days following the closing date.

LMCH reserves the right to accept the proposal which it deems most advantageous, and to reject any or all proposals, whether the prices offered are the lowest or not. LMCH may accept or reject any proposal which in the opinion of LMCH is incomplete, obscure, irregular, contains exceptions or counter offers, or which is non-compliant with the terms of the RFP. LMCH is under no obligation to award a contract and reserves the right to terminate the proposal process at any time, and to withdraw from discussion with any or all of the bidders who have responded.

The bidder must have the legal capacity to enter into legally binding contracts.

The form of contract will be provided by LMCH.

Bidders must identify potential conflicts of interest that may arise as a result of their response to this RFP or subsequent award of the contract. Non-disclosure of any potential conflicts of will result in disqualification of the proposal or termination of the contact.

9.1 Communication

Primary contacts and communication protocols will be established during the start-up meeting.

9.2 Deliverables

Deliverables must be provided as per the schedule outlined in Table 5.

Table 5: Schedule of Deliverables

Milestone	Date
Phase 1 – Asbestos Surveys	
Site Work & Sample Analysis	Monday, 4-Apr-22
Final Asbestos Survey Reports & Management Plans	Monday, 30-May-22
Phase 2 – Asbestos Reassessments	
Site Work & Sample Analysis (if required)	
Year 1	Friday, 17-Mar-23
Year 2	Monday, 11-Mar-24
Year 3	Friday, 21-Mar-25
Final Letter Report & Updates to Asbestos Inventories & Management Plans	
Year 1	Wednesday, 31-May-23
Year 2	Friday, 31-May-24
Year 3	Friday, 30-May-25

9.3 Payment Terms

Invoicing will be according to completion of milestones as outlined in the Bid Form (Appendix A).

9.4 Insurances

Minimum insurance requirements will be as follows:

- Commercial general liability – \$5 Million
- Errors and Omissions - \$1 Million per occurrence, \$2 Million aggregate.

Bidders must include a current copy of their insurance certificate with their proposal submission.

Valid WSIB certificate: Bidders must include a current copy of their WSIB certificate with their proposal submission.

9.5 On-Site Compliance Requirements

9.5.1 General

While on LMCH property, contractors and their staff (collectively, the contractor) will abide by on-site compliance requirements as specified here, and any additional provisions contained in the contract.

9.5.2 Identification

The contractor shall produce identification when requested by either LMCH staff or tenants, otherwise entry may be denied, and associated fees for services may be rejected.

Proper identification consists of **both** a company business card (or ecard), and government issued photo identification.

9.5.3 Smoke Free Workplace

No smoking is permitted on LMCH property.

9.5.4 Workplace Violence, Harassment and Discrimination

LMCH has a zero tolerance for any acts of violence, harassment or discrimination within its buildings, communities or surrounding properties. Any reports of improper behaviour by Contractors or their workers/employees will be investigated and if found to be true may result in termination of the contract and/or reporting of the behavior to authorities.

9.5.5 Biohazards

Biohazards and/or insect pests (i.e. bed bugs, roaches, ants, etc.) may exist on all LMCH properties. Contractors are responsible for taking all necessary precautions.

9.6 COVID-19

LMCH requires that all personnel working on-site carry their enhanced COVID-19 vaccine certificate and produce the certificate for inspection and access to the site. This must be accompanied by proper identification as per 9.5.2.

LMCH's COVID-19 policy will be provided upon project award.

10 Intellectual Property

LMCH will retain ownership of all reports produced under the terms of the contract.

11 General Conditions

11.1 LMCH Rights

LMCH reserves the following rights, to be exercised in its sole, absolute and unfettered discretion, without any liability whatsoever to any Bidders:

To reject any and all proposals.

To cancel this RFP at any time, without penalty or cost to LMCH and to reissue a new RFP for the same or similar work.

To modify any and all requirements stated in the RFP at any time prior to the possible awarding of a contract.

To seek clarification of the contents of any submission, or to require a Bidder to submit further documentation.

To waive strict compliance with the terms of the RFP.

To meet with some or all of the Bidders to discuss aspects of their respective submissions; however, LMCH is not obliged to seek clarification of any aspect of a submission.

To negotiate for the modification of any single proposal.

To verify any information from third parties and receive additional information regarding any respondent, its directors, officers, shareholders or owners, and any other party associated with the Bidder's submission, as LMCH may require.
If only one proposal is received, to accept or reject it.

To not accept the lowest priced or highest ranked submission.

To not accept any submission.

To accept a non-compliant submission.

To consider and apply any other evaluative criteria as LMCH may see fit.

To re-advertise for proposals, if desired.

To alter the procurement schedule, procurement process, procedures or objectives.

11.2 Other

Bidders are solely responsible for their own expenses in preparing and submitting proposals, and for any negotiations or discussions with LMCH or its representatives and consultants, relating to or arising from this RFP.

By submitting a proposal and participating in the process as outlined in this Request for Proposal, bidders expressly agree that no contract of any kind is formed under, or arises from, this Request for Proposal, prior to the signing of a formal written contract.
LMCH/Owner and its representatives, agents, consultants and advisors will not be liable to a bidder for any claims, liabilities, cost, express loss or damage incurred, sustained or suffered by bidder prior or subsequent to, or by reason of the acceptance or non-acceptance by LMCH of any proposal, or by reason of the delay in the acceptance of the proposal.

By submitting a proposal, the bidder, and each firm, corporation or individual member of the bidder, represents and confirms to the Client, with the knowledge and intention that the Client may rely on such representation and confirmation, that its proposal has been prepared without collusion or fraud, and in fair competition with proposals from other bidders.

All proposal documents are the property of LMCH. Extracts of proposals, including criteria and analysis to determine best value, may be included as part of a recommendation to LMCH. This information will be part of a public document. Bidders should indicate in their proposal which parts of the proposal, if any, are exempt from disclosure under the Municipal Freedom of Information and Protection of Privacy Act."

The information submitted in response to this RFP will be treated in accordance with relevant provisions of the Municipal Freedom of Information and Protection of Privacy Act. The information collected will be used solely for the purposes stated in this Request. The Bidder

does, by submission of a proposal, accept that the information contained in it will be treated in accordance with the process set out in the section of this Request.

Bidders shall treat all information received through this RFP process and subsequent contract award as confidential and will not disclose such information to any person except with the prior written consent of the Client.

Any Contract resulting from this Request for Proposal will be governed by and will be construed and interpreted in accordance with the laws of the Province of Ontario.

At this time, Security Clearance Checks are not required.

APPENDIX A – BID FORM
RFP 2020-0032
Asbestos Surveys and Reassessments

The bidder confirms that its proposal has taken into consideration all information provided in the RFP including all attachments and subsequent addenda (if any). The total number of addenda received by the bidder was_____.

The bidder confirms the proposal constitutes a valid and irrevocable offer which is open to acceptance by LMCH for sixty days from the closing date and time specified in Section 8.

Milestone	Deliverable	Amount
Phase 1 – Asbestos Surveys		
1	Site Work & Sample Analysis	\$
2	Final Asbestos Survey Reports & Asbestos Management Plans	\$
Phase 2 – Asbestos Reassessments		
3	Site Work & Sample Analysis (if required)	
	2023	\$
	2024	\$
	2025	\$
4	Final Letter Report & Updates to Asbestos Inventories & Management Plans	
	2023	\$
	2024	\$
	2025	\$
	Total (Base Fees and Disbursements)	
	HST	
	Grand Total	
5	Value Added Services (if applicable)	\$

Please provide the total number of samples and the cost per sample included in Milestone 1, above.

Total # of Samples:	Unit Price Per Sample:
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Organization

Submitted By: _____

Address: _____

Phone: _____

Authorized Signing Authority

Name: _____

Signature: _____

Date: _____

APPENDIX B
Requirements on LMCH Property

PART 1 - GENERAL

Contractors and their employees, agents, subcontractors and other designees (hereinafter referred to as “forces”) shall be required to comply with the conditions and terms hereinafter specified while completing assignments under this contract on the properties of London & Middlesex Community Housing (hereinafter “LMCH”).

PART 2 - IDENTIFICATION

All contractors and their forces shall carry proper firm and personal photo identification and shall produce same when requested by either LMCH staff or tenants. Permission to enter the job site may be denied without proper identification. Invoices for labour/service calls will not be paid when entry has been denied because of failure to provide proper identification. In these situations, costs of such trips/service calls will be borne by the Contractor. Repeated failures to carry proper identification will result in the contractor being removed from the Pre-Qualification List.

Proper identification may include the following:

- Firm identification includes uniforms with the firm name clearly identified, a business card or I.D. card issued by the firm
- Personal identification includes a firm/employee photo I.D. card or driver’s license
- When available, the applicable Work Order (WO) or a copy of it.

PART 3 - SMOKE FREE WORKPLACE

LMCH is a smoke-free workplace. The workplace is defined as any building or structure on the properties operated by LMCH including, but not limited to, dwelling units (either apartments or family housing units). It does not extend to the grounds of the properties or designated smoking areas. Failure to adhere to the smoke-free workplace policy will result in the contractor being removed from the Pre-Qualification List.

PART 4 – WORKPLACE VIOLENCE, HARASSMENT & DISCRIMINATION

LMCH has a zero tolerance policy for any acts of violence, harassment or discrimination within its buildings, communities or surrounding properties. Contractors and their forces shall comply with all applicable human rights and criminal legislation and policies while on properties owned and/or operated by LMCH. Any reports of improper behaviour by Contractors or their forces towards any person, including, but not limited to, LMCH staff, tenants and visitors, will be thoroughly investigated. If it is determined that a Contractor or its forces has engaged in the above conduct, it

will result in the Contractor being removed from the Pre-Qualification List. The London & Middlesex Community Housing Policy is included below.

PART 5 – SITE CONDITIONS

All contractors should be aware of the potential existence of biohazardous materials and/or insect pests, including, but not limited to, bed bugs, roaches, and ants on all LMCH properties. Contractors are responsible for taking all required personal protective measures when working under the above conditions. Contractors are deemed to have provided this notice to all subcontractors appointed to work on the premises and are responsible for ensuring that the said subcontractors are also taking appropriate protective measures. LMCH shall not be liable for any injury sustained as a result of a failure to subscribe to proper protective measures given these potential hazards.

RESIDENT SATISFACTION SURVEY

LMCH IS INTERESTED IN GETTING YOUR COMMENTS ON THE QUALITY OF WORK, SERVICE AND PRODUCT THAT YOU RECEIVED.

Please specify work completed:

Date of Work:

YES	NO	
		Was the work completed by a contractor?
		Was the work completed by on-site service staff?
		Are you satisfied with the work that was done?
		Did the service staff/contractor clean up the work area before leaving?
		Did you receive enough notice before work started?
		If you need to prepare your home before the work started, did someone tell you what to do?
		Was the service staff/contractor considerate and polite?
		Did the service staff/contractor respect your home, lawns and gardens?
		Was the work area left clean each day?
		Did the service staff/contractor consider your safety while performing the work?
		Do you think the work was done in a reasonable amount of time?

OTHER COMMENTS:

Tenant Name:	Signature:
Address:	
Unit #:	Telephone #: (519) -

(Please Print)

***** End of Section *****

RACE & ETHNIC RELATIONS POLICY

STATEMENT OF PRINCIPALS

London & Middlesex Community Housing fully support the principle embodied in the *Canadian Charter of Rights and Freedoms*, the *Ontario Human Rights Code*, and the Ontario Policy on Race Relations of every person's right to equal treatment with respect to employment, accommodation, contracts, goods, services, facilities, membership in unions, vocational associations, self-governing professions and employment agencies, without discrimination because of race, ancestry, place of origin, colour, ethnic origin, citizenship, religion, creed, sex, age, sexual orientation, marital status, family status, disability, receipt of public assistance or record of offences. Harassment in any form that stems from any of the above-listed prohibited grounds of discrimination, in particular unwelcome sexual advances and solicitations, is strictly prohibited. Within the context of this principle, LMCH has developed the Race and Ethnic Relations policy, which the Contractor and its forces must adhere to. .

Ontario has a strong history of providing a home for individuals from diverse racial and ethnic backgrounds and is increasingly becoming a multi-racial, multi-ethnic society. This diversity contributes to Ontario's cultural, social and economic enrichment, and LMCH is committed to fostering this diversity in its workforce and communities.

LMCH will continue to work towards ensuring that:

- All LMCH staff, members, tenants, applicants, contractors, and committee members' right to equal treatment without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, creed, sex, sexual orientation, marital status, family status, disability, and receipt of public assistance or record of offences is respected.
- All LMCH tenants live in an environment free from any form of racial or ethnic discrimination and harassment.
- All LMCH staff work in an environment free from any form of racial or ethnic discrimination and harassment.
- LMCH policies and practices are not directly or indirectly discriminatory in their effect.
- All tenants and staff are made aware that racial or ethnic discrimination or harassment of any form will not be tolerated.
- Harmonious race and ethnic relations are fostered among tenants and staff.
- Incidents which arouse racial or ethnic conflict and tension are appropriately addressed.

RACE & ETHNIC RELATIONS POLICY

The London & Middlesex Community Housing is committed and will work to ensure that:

1. All residents, employees, board members, applicants for housing or employment, contractors, service providers and committee members' right to equal treatment and respect is honoured and upheld;
2. All residents and employees live and work in a harmonious environment which is free from discrimination and harassment on the basis of race, ancestry, place of origin, colour, ethnic origin, religion, creed, sex, sexual orientation, marital status, family status, disability, receipt of public assistance or record of offences;
3. Policies and/or practices are not directly or indirectly discriminatory in their effect;
4. Every effort is made to overcome systemic barriers to housing or employment;
5. All applicants, residents and employees are notified that racial/ethnic discrimination or harassment of any form will not be tolerated; and,
6. Incidents arising from what is perceived to be racial/ethnic conflict or tension within the housing communities or in the workplace will be promptly addressed.

PART 6 - RESIDENT SATISFACTION SURVEY

LMCH values and is committed to providing quality customer service to our tenants. As a method of monitoring tenant satisfaction, a service questionnaire is given to our tenants upon completion of any maintenance work in their building or complex. This provides our tenants with an opportunity to comment on the level of performance and service they have received. This applies to Contractors assigned to work within their units, buildings or communities. Any reports of unsatisfactory service from Contractors or their forces will be promptly investigated and repeated unsatisfactory service will result in the contractor being removed from the Pre-Qualification List. The questionnaire is included below.

APPENDIX C
LMCH Equity Policy

Statement of Principles

“London & Middlesex Community Housing fully supports the Canadian Charter of Rights and Freedoms and the Ontario Human Rights Code. Every person has a right to equal treatment. Violence, Harassment and discrimination are prohibited.”

The London & Middlesex Community Housing will work to ensure that:

1. All tenants/residents, directors, officers, employees, applicants for Housing or applicants for employment, contractors, service providers, and committee members have right to equal treatment and respect.
2. All employees, directors, officers, tenants/residents, applicants and contractors are made aware that discrimination or harassment of any kind will not be tolerated.
3. All persons living in London & Middlesex Community Housing communities and all employees working for London & Middlesex Community Housing will work together to enjoy an environment which is free from discrimination and harassment on the basis of race, ancestry, place of origin, color, ethnic origin, citizenship, religion or creed, sex, sexual orientation, handicap, age, marital status, family status, receipt of public assistance or record of offences.
4. Every effort is made to correct policies and procedures which may cause systemic barriers to housing or employment.
5. Incidents that cause conflict and tension within housing communities or the workplace are appropriately addressed.

******* End of Section *******