

**Board Members:**

Phil Squire- Chair

Gary Bezaire

Tammy Brooks

Shellie Chowns

John Corboy

Shawn Lewis

Hadleigh McAlister

Mayor Grantham

Cara Awcock

**LMCH Leadership**

Paul Chisholm,  
CEO

Andrea Mackenzie,  
Director of Tenant  
Services

Diana Taplashvily,  
Director Finance  
and Corporate  
Services

Trevor  
Whittingham,  
Senior Manager,  
Asset Management

Christine Poirier,  
Senior Manager,  
Property Services

Dirk Volschenk,  
Manager Human  
Resources

**PUBLIC AGENDA**

**LONDON & MIDDLESEX COMMUNITY HOUSING  
(LMCH)**

**Board of Directors Meeting**

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

**Thursday, March 16, 2023**

**5:30 PM – 7:30PM**

<b>Item</b>	<b>Pg.</b>	<b>Lead</b>	<b>Time</b>
1. Call to Order		P. Squire	5:30
2. Recognition of Indigenous Peoples and Lands Statement		P. Squire	
3. Completion and Acceptance of Agenda		P. Squire	
4. Disclosure of Interest			5:35
5. Approval of Minutes of Previous Meetings a. February 16,2023 Public Minutes		P. Squire	
6. Communications City of London Council Resolution – Tenant Director Position		P. Chisholm	
7. Delegations none			
8. Presentations none			
9. In Camera Matters:  a) A matter pertaining to or including the Corporations privacy and security.  b) A matter with respect to an employment-related matter.  10. Consent Agenda Items:  a. Staff Report 2023- 15 CEO Report b. Staff Report 2023- 16 Vacancy Management Update Report		D. Taplashvily  D. Volschenk         P. Chisholm	5:50
I. Reports and Business  <u>Finance Committee Reports for information:</u> II. Overview of reports provided by Committee Chair – S.Chowns  III. FC- 23- 15 Q4 KPI Report IV. FC- 23- 16 Q4 2022 Financial Results V. FC-23- 17 Capital Work Update Board Report VI. FC- 23- 19 Facility Condition Index (FCI) Update			

<p><u>Finance Committee Reports for Board Approval:</u></p> <p>c) <b>Staff Report 2023- 17</b> City of London Insurance Program report and invoice.</p> <p>d) <b>Staff Report 2023- 18</b> Contractor Award – Roofing Replacement – Kent St (RFP 2022-0007-01)</p> <p><u>HRCG Reports for Approval</u></p> <p>e) <b>Staff Report 2023- 19</b> Human Resources and Governance DRAFT Work Plan</p> <p>f) <b>Staff Report 2023- 20</b> Health &amp; Safety Policy (annual update) and Workplace Violence, Harassment, and</p> <p>g) <b>Staff Report 2023- 21</b> Update of Smoke-Free Workplace Policy</p> <p>h) <b>Staff Report 2023- 22</b> Delegation Policy</p>		<p>D. Taplashvily</p> <p>P. Chisholm</p> <p>D. Volschenk</p> <p>D. Volschenk</p> <p>D. Volschenk</p> <p>D. Volschenk</p>	
<p><b>11.</b> New Business / Enquiries</p>		<p>P. Squire</p>	
<p><b>12.</b> Meeting Adjournment</p>		<p>P. Squire</p>	<p>7:30pm</p>

## Recognition of Indigenous Peoples and Lands Statement

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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 Lenni-Lenape Nations.

## BOARD OF DIRECTORS PUBLIC MEETING MINUTES

February 16, 2023, at 5:30 p.m.  
London & Middlesex Community Housing  
Boardroom, 1299 Oxford Street East, Unit 5C5, London, Ontario, Canada

### Board Members in Attendance:

Phillip Squire, Chair \*

Shawn Lewis \*

Tammy Brooks\*

Shellie Chowns\*

John Corboy\*

Hadleigh McAlister\*

Mayor Grantham\*

### Absent

Gary Bezaire\*

### Senior Leadership in Attendance:

Paul Chisholm, CEO

Andrea Mackenzie, Director of Tenant Services

Diana Taplashvily, Director of Finance & Corporate Services

Dirk Volschenk, Manager of Human Resources

\* *Virtual Attendance via Zoom*

1. Call to Order	P. Squire called the meeting to order at 5:31 p.m.
2. Recognition of Indigenous Peoples and Lands	<p>P. Squire provided the recognition address at 5:31 p.m.</p> <p><i>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 Lenni-Lenape Nations.</i></p>
3. Completion and Acceptance of the Agenda	Regarding the completion and acceptance of the agenda, <b>MOVED</b> by S. Chows, seconded by C. Grantham, <b>PASSED</b> 5:31PM

4. Disclosures of Interest	P. Squire called for conflict-of-interest declarations with respect to the agenda. No conflicts - of- interest declared at 5:31 PM..
5. Approval of Board Meeting Minutes	Regarding the Board Meeting Minutes of December 15, 2022, <b>MOVED</b> by S. Chowns , seconded By S.Lewis, that the Minutes <b>BE ACCEPTED</b> and <b>APPROVED, CARRIED</b> at 5:32 PM. <b>ALL In favour.</b>
6. Communications	NONE
7. Delegations	n/a
8. Presentations	n/a
9. Consent Items	
a. Staff Report 2022- 73 CEO Report	<p>P.Chishlom provided an overview of the report.</p> <ul style="list-style-type: none"> <li>• Community Safety and Multi Year Budget reviewed</li> <li>• Capital Funding for Phase 2 of ReImagine Southdale project was approved.</li> <li>• LMCH County tenant experiences discussed</li> </ul> <p><b>MOTION to RECEIVE</b> the report, <b>MOVED</b> by J. Corboy, seconded by T. Brooks , report <b>ACCEPTED</b> by ALL, at <b>CARRIED</b> at 5:46pm</p>
b. Staff Report 2022-74 Vacancy Management Report	<p><b>MOTION to RECEIVE</b> the report, <b>MOVED</b> by S.Chowns, seconded by S. Lewis Report <b>ACCEPTED</b> by ALL, <b>CARRIED</b> at 6:07PM</p> <p>P.Chishlom provided an overview of the report.</p> <ul style="list-style-type: none"> <li>• Vacancy monthly targets and strategies to bring vacancy rates back to target discussed</li> <li>• The 16 Units reserved for the ReImagine project were reviewed</li> <li>• Priority list of units to complete, Unit repair cost and tenant rental income discussed</li> <li>• Vendor Process and unit turn around reviewed</li> </ul>



<p>10. In Camera</p>	<p>a) A matter pertaining to the progression of litigation, including matters before administrative tribunals, affecting the Corporation.</p>
<p>11. Reports and Business</p> <p>a) Staff Report 2023 - 03 Update on Selection Process for Tenant Board Director</p> <p>b) Staff Report 2023 – 04 2023 Board Work Plan</p>	<ul style="list-style-type: none"><li>• SubCommittee Chair S. Chowns provided an overview of the Tenant Director candidate process. Candidate was selected by the Sub Committee and a recommendation of appointment letter will be sent to the City of London on Feb 17<sup>th</sup>, for SPPC and City council approval.</li></ul> <p><b>MOTION to APPROVE</b> the report and Candidate recommendation S.Chowns, seconded by Lewis, ALL in Favour, <b>PASSED</b> at 6:12PM.</p> <p>Report overview provided by P. Chisholm</p> <p><b>MOTION to RECEIVE</b> the Work Plan report, MOVED by S. Chowns, seconded by Mayor Grantham, All in Favour <b>PASSED</b> 6:14PM.</p> <p><u>Finance Committee Reports for information:</u></p> <ul style="list-style-type: none"><li>• Overview of reports provided by Committee Chair – S.Chowns</li></ul> <p>I. FC- 23-01 2023 Finance Committee Workplan II. FC- 23-02 Director of Finance &amp; Corporate Services Update III. FC- 23-03 Director of Property Services &amp; Asset Management Update IV. FC- 23-05 CMHC Q4 Year End Report</p> <p><b>MOTION to RECEIVE</b> the reports for information, MOVED S,Chowns, seconded by J. Corboy, All in Favour <b>PASSED</b> 6:15PM</p>



Finance Committee Reports for Board Approval:

c) Staff Report  
2023- 05 Reimagine  
Southdale 2021-  
0027 SPA  
– Development  
Agreement Security  
Internal & External  
Works

d) Staff Report  
2023- 06 RFT  
2022-0003-  
01 Elevator  
Modernization  
Baseline

e) Staff Report  
2023- 07 RFT  
2022-0003-02  
Elevator  
Modernization  
Commissioners

f) Staff Report  
2023- 08 RFT  
2022-0003-  
03 Elevator  
Modernization  
Simcoe

g) Staff Report  
2023- 09 RFT  
2022-0003-04  
Elevator  
Modernization  
Hale

**MOTION to RECIEVE** reports C- K ,**MOVED** by S. Chowns,  
seconded by T.Brooks, **ALL** in Favour **PASSED** 6:16PM



h) Staff Report  
2023- 10 RFT  
2022-0003-05  
Elevator  
Modernization  
Dundas

i) Staff Report  
2023- 11 RFT  
2022-0003-06  
Elevator  
Modernization  
William

j) Staff Report  
2023- 12 RFT  
2022-0003-07  
Elevator  
Modernization  
Dorchester

k) Staff Report  
2023- 13  
Contractor  
Award –  
Generator  
Replacement – 170  
Kent St. (RFP 2021-  
0004)

l) Staff Report  
2023- 14  
Contractor  
Award – Balcony  
Restorations 202  
McNay St. –  
(RFT 2023-0012)

**MOTION to RECEIVE** the report, **MOVED** by S. Chowns ,  
seconded by J.Corboy , ALL in Favour **PASSED** 6:17PM.

	<p><u>Tenant Services Committee Reports for Information:</u></p> <ul style="list-style-type: none"> <li>• Report Overview provided by Committee Chair – J. Corboy</li> </ul> <p>I. TS- 23- 01 2023 Tenant Services Committee Workplan</p> <p>II. TS- 23- 05 REIMAGINE Soutdale Annual Update 2022</p> <p>III. TS- 23- 06 Work order and service report 2022 Overview</p> <p><b>MOTION to RECEIVE</b> the Tenant Services Committee Reports for Information, Reports I, II,III <b>MOVED</b> by J. Corboy, seconded by MayorGrantham, All in Favour, <b>PASSED</b> at 6:21pm</p>
<p><b>New Business</b></p>	<ul style="list-style-type: none"> <li>• Discussion on January Workshop</li> <li>• LMCH Housing perception in the community</li> <li>• February 28<sup>th</sup> DRAFT of Housing and Homeless summit report will be released</li> <li>• TAC meeting overview</li> <li>• Discussion on county redevelopment, in conjunction with regeneration strategie.</li> </ul>
<p><b>13. MEETING ADJOURNMENT</b></p>	<p><b>ADJOURNED, ALL in Favour ,PASSED</b> at 6:38PM.</p>

\_\_\_\_\_  
Phil Squire, Chair

\_\_\_\_\_  
Paul Chisholm, CEO



P.O. Box 5035  
300 Dufferin Avenue  
London, ON  
N6A 4L9

March 8, 2023

P. Chisholm  
Chief Executive Officer  
London & Middlesex Community Housing

I hereby certify that the Municipal Council, at its meeting held on March 7, 2023 resolved:

That Cara Awcock BE APPOINTED to the London & Middlesex Community Housing Board of Directors for the term ending December 31, 2025 (Third Class); it being noted that the Strategic Priorities and Policy Committee received a communication from S. Chowns, Board of Directors, London & Middlesex Community Housing with respect to this matter. (4.4/10/SPPC) (2023-C05)

M. Schulthess  
City Clerk  
/hw

cc: C. Awcock  
S. Chowns, Board of Directors

## Finance Committee Report 2023- 15

**TO:** LMCH Finance Committee

**FROM:** Diana Taplashvily, Director of Finance & Corporate Services

**SUBJECT:** Key Performance Indicators (KPIs)

**DATE:** February 27, 2023

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### PURPOSE:

The purpose of this report is to provide information on Key Performance Indicators tracked by LMCH and reported to the Board on a quarterly basis.

### RECOMMENDATION:

That the Finance Committee RECEIVE the Key Performance Indicators (KPIs) report for information.

### REASONS FOR RECOMMENDATIONS:

The attached report meets the requirements as set out by the Board of Directors.


**Appendix A:** LMCH BOD KPI summary, with unaudited, preliminary Q4 2022 data.

**Appendix B:** The data dictionary for LMCH BOD reported KPIs.

### SIGNATURE:

PREPARED and SUBMITTED BY:	STAFF CONTACT:
DIANA TAPLASHVILY DIRECTOR FINANCE & CORPORATE SERVICES	AHMAD MIAN BUSINESS ANALYST

## Appendix A: LMCH Board of Directors KPI Summary

	Q4 2022	Q3 2022	Q2 2022	Q1 2022	Avg. 2022	Avg. 2021
	Current Quarter	Previous Quarter				
<b>Category/Metrics</b>						
<b>Human Resources KPI Metric Summary</b>						
Full Time Staff	84	75	69	72	74	72
Full Time Equivalent (FTE) <sup>Ω</sup>	85.39	76.43	70.47	73.26	75.39	73.36
Business Case 19 Related Hires	21	20	19	19	20	14
<b>Finance, Information Technology and Data Science KPI Metric Summary</b>						
Surplus/(Deficit)	\$12	\$1,365,669	\$335,081	(\$255,516)	N/A	N/A
Rent Arrears	\$1,143,684	\$1,065,373	\$869,969	\$676,415	\$1,143,684	\$294,987
Rent Collection Percentage	91.60%	89.59%	87.32%	80.71%	84.42%	90.48%
Percentage of Tenants in Good Financial Standing	78.44%	76.52%	77.22%	77.35%	76.95%	85.62%
<b>Tenant Services KPI Metric Summary</b>						
Total Evictions	4	3	16	13	36	49
Units Leased	83	89	81	97	350	344
<b>Property Services KPI Metric Summary</b>						
Total Vacant Units	156	136	134	146	572	626
Total Vacancy Rate	4.75%	4.14%	4.08%	4.44%	4.35%	4.69%
Cost of Vacancy <sup>†</sup>	\$117,990	\$114,210	\$115,830	\$132,840	\$120,218	\$120,628
<b>Regeneration and Capital KPI Metric Summary</b>						
Percentage Spent vs Approved Budget <sup>‡</sup>	25.64%	12.31%	6.78%	4.12%	25.64%	31.12%
FCl Score <sup>**</sup>	-	-	-	-	-	-
<p>Ω Derivation excludes On Call Manager Hours  <sup>‡</sup> 'Percentage Spent vs Approved Budget' has been adjusted to reflect projects with anticipated spend in 2022.  <sup>†</sup> Derived from KPMG 'Cost of Vacancy' Metric.</p>						

## Appendix B: LMCH Board of Directors KPI Data Dictionary

### Human Resources KPI Metric Summary

Full Time Staff – The number of full-time employees at the end of the reporting period

Full Time Equivalent (FTE) – Quarterly average FTE based on overtime hours, with respect to work (paid) days for a given period

Business Case 19 Related Hires – The number of accumulated LMCH staff related to Business Case 19 for a given period.

### Finance, Information Technology and Data Science KPI Metric Summary

Surplus/(Deficit) – The amount leftover / (excess of expenditure) compared to budget for a given period.

Rent Arrears – Total money owing by tenants for rent, for a given period.

Rent Collection Percentage – The percentage of tenant rent collected with respect to amount owing, year-to-date for a given period

Percentage of Tenants in Good Financial Standing – The number of tenants who are current with rent charges for a given period

### Tenant Services KPI Metric Summary

Total Evictions – The total number of evicted LMCH tenants for a given period.

Average Length of Tenancy for Current Tenants – The time duration as an LMCH tenant (Current) for a given period

Units Leased – The total number of units rented for a given period.

### Property Services KPI Metric Summary

Total Vacant Units – The total number of vacant units for a given period.

Total Vacancy Rate – The percentage of the total vacant units with respect to our total LMCH portfolio count (3282) for a given period

Cost of Vacancy – The cost due to lost rent revenue on vacant units for a given period

### Regeneration and Capital KPI Metric Summary

Percentage Spent vs Approved Budget –  $(\text{Money Spent}/\text{Approved Budget}) \times 100\%$  For projects with anticipated spend within the reporting year

FCI Score – The percentage within each FCI score status ("Excellent", "Very Good", "Good", "Fair", "Poor", "Deficient") for a given period.

## Finance Committee Report 2022- 16

**TO:** Finance Committee, Board of Directors

**FROM:** Bushra Walji, Finance Manager

**SUBJECT:** Q4 2022 Financial Results

**DATE:** February 27, 2023

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### **PURPOSE:**

The purpose of this report is to share the unaudited financial results for LMCH for the period ending December 31, 2022.

### **RECOMMENDATION:**

That the December 31, 2022, Financial Performance Results, and its Operating Summary Report BE RECEIVED for information.

### **REASONS FOR RECOMMENDATIONS:**

The following report provides a high-level analysis of LMCH's December 2022 Operating Financial Results.

The YTD operating results on December 31, 2022, ended with an operating surplus of \$12. A favourable result of \$12 to the budget.

### **Operations Revenue**

Total revenue showed a favorable variance of \$919,189 over the 2022 budget:

- Positive variances to the budget were realized in rental revenue of \$1,274,266, \$46,887 in tenant recoveries, \$100,054 interest revenue, and \$4,038 in antenna licenses. Analysis of variance indicates that the positive variance in rental revenues comes from an increased number of tenants being moved to full market rent and the subsequent lag in getting required documents to return the household to receipt of subsidy.
- Positive variances in revenues are offset by higher-than-anticipated net bad debt write-offs (\$518,819). For 2022 Net Bad Debt Writeoff includes provisions for past and current tenants.

## Expenditures

Total expenditures showed unfavorable variance of (\$ 935,756) over the 2022 budget, offset by \$116,294 favorable variance in Salaries, wages, and benefits due to turnover and extended hiring.

Building Maintenance, Materials and Services was the primary driver for the variance with an unfavorable variance of (\$1,038,690). LMCH continues to experience high demand for maintenance and repairs due to the age of buildings and infrastructure. An unfavorable variance is driven by costs in Building General (\$529,290), Pest Control (\$371,811), Snow Removal (\$221,594), Cleaning (\$107,078), Sundry materials & services (\$48,797), Waste Removal (\$26,862) Vandalism (\$16,614) and Roofing (\$15,956), Plumbing (\$15,648), and Life safety Systems (\$9,792).

Utilities have an unfavorable variance of (\$148,571) and were offset with a favorable variance of \$124,837 in Property and \$10,374 in Administration.

Please see attached report for a detailed analysis.

## Appendix A – DECEMBER 2022 Operating Results

### SIGNATURE:

PREPARED and SUBMITTED BY:	STAFF CONTACT:
DIANA TAPLASHVILY DIRECTOR of FINANCE & CORPORATE SERVICES	BUSHRA WALJI MANAGER of FINANCE



## Finance Committee Report 2023- 17

**TO:** LMCH Board of Directors, Finance Committee

**FROM:** Paul Chisholm, Chief Executive Officer

**SUBJECT:** Capital Work Update Report for the month of March 2023

**DATE:** Feb 27, 2023

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### **PURPOSE:**

The purpose of this report is to provide the Finance Committee an update of the status of the organization's capital projects and provide information on the progress which is expected over the next quarter.

### **RECOMMENDATION:**

That the Finance Committee **RECEIVE** the March 2023 capital work update report for information.

### **BACKGROUND:**

In accordance with the LMCH Asset Management Plan (AMP) and City of London approved Multi-Year Budget (MYB), the LMCH capital work program addresses asset and infrastructure maintenance, renewal, and replacement in a way that mitigates risk while endeavoring to maintain reasonable and acceptable living conditions for all tenants.

This Report includes status highlights of capital projects through the middle of February 2023.

### **Capital Project Status Review**

Between 2020-2023 the LMCH Board of Directors has instructed staff to complete 163 Capital Projects. A full listing of Approved Capital Projects and Current Status is included as part of Appendix A.

### 2020 Capital Projects

- 40 projects
- 93% (35 Projects) are completed or cancelled.
- 8% (3 Projects) remain in progress. All three projects are major electrical infrastructure improvements. In spring 2022 we entered into contracts for all three upgrades, but the lead time on new generators is extremely long. We expect these projects to be complete in summer 2023.

### 2021 Capital Projects

- 43 projects
- 65% (28 Projects) are completed or cancelled.
- 7% (3 projects) have a contractor engaged and we are waiting for either delivery of material or warmer weather to begin construction.
  - Kent St generator replacement.
  - Tecumseh roof replacement.
  - Limberlost site paving
- 19% (8 projects) are currently in active construction.
  - Penny Lane kitchen remodel.
  - Elevator Control Modernizations Engineering (7).
- 2% (1 project) are currently being scoped or with an engineering firm to assist with designs.
  - Asphalt Restoration & Replacements.

### 2022 Capital Projects

- 37 Projects.
- 11% (4 Projects) are completed or cancelled.
- 46% (17 projects) are currently in progress – in most cases contracts have been awarded and the contractors are waiting on delivery of material to begin work on site.
  - 7 projects relate to elevator modernization.
  - 4 projects are major electrical upgrades.
  - 3 are small projects needed to address fire system deficiencies found on annual inspections.
  - 1 is for roadway and parking lot repairs at various sites.
  - 1 is for roof repairs/replacement.
  - 1 is related to capital flooring purchases.
- 22% (8 Projects) in Engineering/scoping.
  - 2 are for fencing repairs.
  - 2 Fire panel/ system repairs
  - 2 projects are related to Stairwell repairs.
  - 1 project is to replace the MUA air unit at Tecumseh.
  - 1 project is related to radiator heating repairs.

- 14% (5 projects) are under review by staff to determine how to best proceed with the work.
  - 3 projects relate to upgrades to garbage infrastructure.
  - 1 project is for a mechanical system audit.
  - 1 project is for a minor fire alarm upgrade.

### 2023 Capital Projects

- 43 Projects
  - 79% (34 Projects) in engineering/scoping.
  - 7% (3 projects) in progress.
  - 5% (2 Projects) are completed or cancelled.
  - 2% (1 Project) is currently has the contract awarded. McNay balcony restorations.
  - 2% (1 project) is for contingency.
  - 5% (2 Projects) are recurring.

	2020	2021	2022	2023
<b>Cancelled</b>	5	11	2	2
<b>Completed</b>	30	18	2	0
<b>Contract Awarded</b>	0	2	0	1
<b>In progress</b>	3	8	17	3
<b>Procurement Underway</b>	0	1	2	0
<b>Engineering/Scoping</b>	0	0	8	34
<b>Contingency</b>	2	1	1	1
<b>Under Review</b>	0	2	5	0
<b>Recurring</b>	0	0	0	2
<b>Grand Total</b>	<b>40</b>	<b>43</b>	<b>37</b>	<b>43</b>

### HIGHLIGHTS:

- First phase balcony restoration work is scheduled to begin in March 2023 at 202 McNay St. Each of the three (3) phases will take approximately six (6) weeks with total completion expected by the end of July 2023. (2023-0012).
- Electrical Circuit Breakers & Panels upgrades are currently underway at three (3) LMCH high-rise buildings (William, Tecumseh & Dundas). This work is expected to be completed during Q2-2023 (2022-004).
- Work has begun on-site at the Penny Lane homes in Strathroy to refresh the kitchens including new cabinets and countertops. This work is expected be completed in Q2-2023 (2021-0012).

- Modernization on seven (7) LMCH high rise buildings have had contracts awarded to three (3) separate Elevator Contractors. Elevator Modernizations (Baseline, Commissioners, Simcoe, Hale, Dundas, William & Dorchester) to be completed in Q4-2023. (2022-0003).
- Mobilization for roof replacements 39 Tecumseh is underway. The three (3) building's roofs are expected to be completed during Q2-2023 (2021-0006B).

<b>PREPARED and SUBMITTED BY:</b>	<b>STAFF CONTACT:</b>
<b>PAUL CHISHOLM, CHIEF EXECUTIVE OFFICER</b>	<b>BILL LESLIE MANAGER, CAPITAL PROJECTS &amp; CONSTRUCTION</b>

## Finance Committee Report 2023- 19

**TO:** LMCH Finance Committee

**FROM:** Paul Chisholm, Chief Executive Officer

**SUBJECT:** Facility Condition Index (FCI) Update

**DATE:** February 27, 2023

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### RECOMMENDATION:

That the LMCH Finance Committee RECEIVE the Facility Condition Index (FCI) Update report for information purposes.

### BACKGROUND:

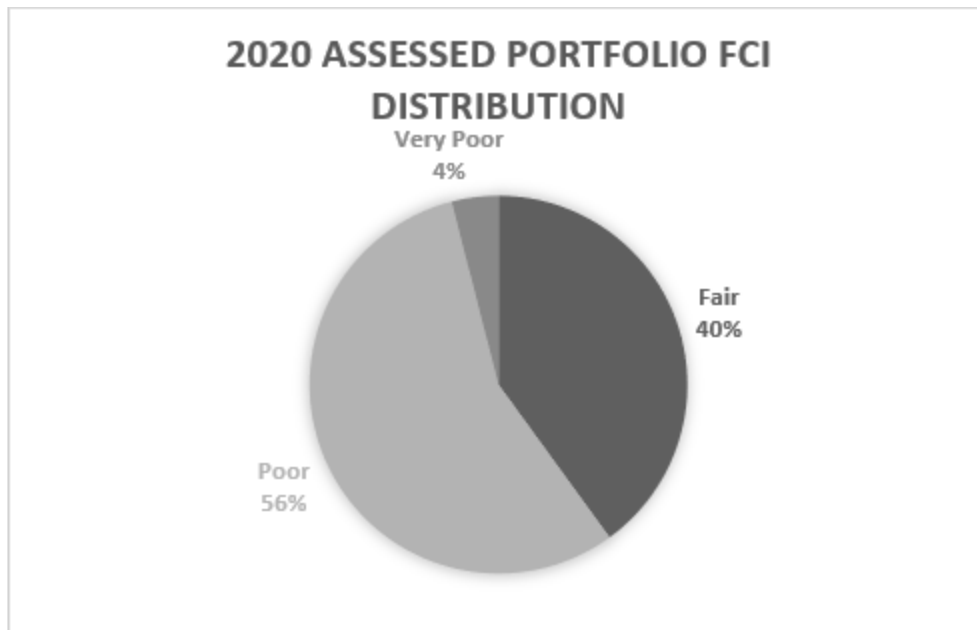
London Middlesex Community Housing utilizes a software package, VFA Facility, to track the condition of our properties and their components. The software contains data that lists the current condition of each building element, their estimated remaining lifespan, and a cost of replacement. Based on this data, along with an estimated replacement value for the entire site, a metric called the Facility Condition Index (FCI) can be calculated.

$$FCI = \frac{\sum_{i=0}^2 \text{Investments required in year } i}{\text{Total replacement cost}}$$

The FCI metric is used to quickly evaluate the aggregate condition of a building. A score of 1.0 or above would suggest that a building needs more investment to fix than it would take to build new, and a score of 0.0 indicates that the building and its components are in perfect condition. The numeric rating can be used to place a site into the following buckets:

FCI Score	Category
0.00 – 0.05	Very Good
0.06 – 0.2	Good
0.21 – 0.40	Fair
0.41 – 0.60	Poor
0.61 or greater	Very Poor

In 2015, LMCH contracted with a consulting firm, called Accruent, to conduct building condition assessments on all of our sites, and populate the data within the VFA system. This information was used to calculate FCI metrics for each site, and was used as the basis for our Asset Management Plan, and to support various business cases which were submitted to the city. In aggregate, our portfolio of buildings was assessed to be POOR condition. Figure 1 below (taken from the Asset Management Plan) shows a breakdown of properties and their assessed condition.



*Figure 1*

In 2020 LMCH contracted with a different consulting firm, Pretium Engineering, to complete a new assessment of all properties within our portfolio. As part of this exercise Pretium and LMCH leadership analyzed the previous assessment and the methodology used by Accruent to ensure that it was appropriate. As a result of this analysis, a number of changes were made to ensure we were capturing accurate, useful, and realistic information. These changes and a summary of their impacts were provided to the board in Staff Report 2021-21 – FCI Update. Most significantly, the frequency and scope of many replacement requirements was adjusted to reflect work that might actually be completed. For example, Accruent’s data suggested that HVAC duct work should be ripped out and replaced at the end of its typical lifespan. Pretium recognized that, unless the ducts are in poor condition, the asset can still be used as intended and does not need to be entirely replaced. The financial investment required to maintain that ductwork, then, was significantly reduced.

Pretium completed their assessment work in three phases: 1/3 of our building portfolio in 2020, 1/3 in 2021, and the final portion in 2022. Now that all of their data has been uploaded into VFA, we have a more accurate and realistic view of the condition of our building portfolio. The distribution of building FCI scores, as of the end of 2022, is shown in Figure 2

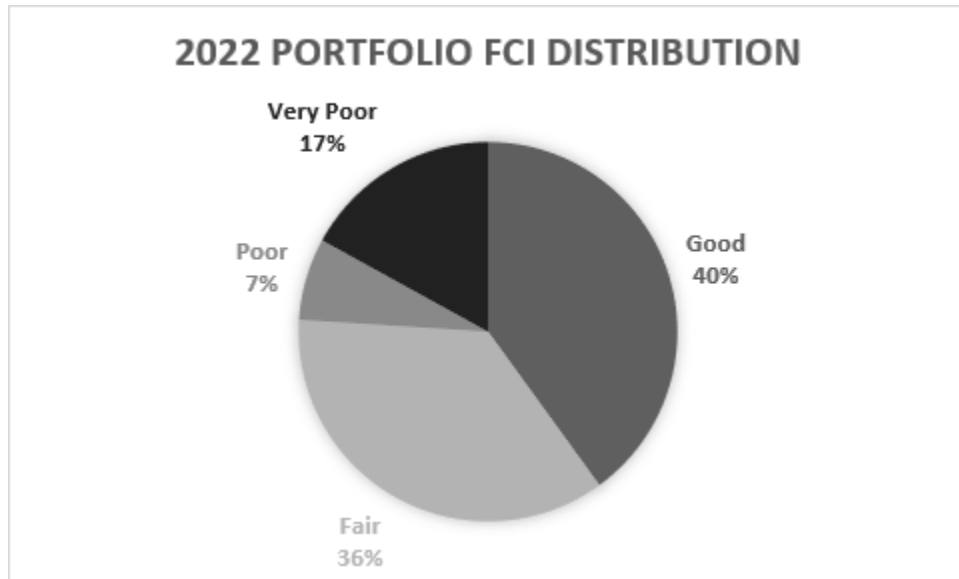


Figure 2

The overall, portfolio wide, condition of our buildings is now considered to be FAIR.

Now that we have an accurate picture of the condition of our buildings, the Asset Management team can select and deliver projects which will renew and extend the useful life of our facilities. The team will continue to manage the data and update it as building components are replaced. With ongoing capital investments from the City of London, CMHC, and other sources, we will work towards all of our properties rating as fair or better. In addition to ongoing data maintenance, it is our plan to initiate 3rd party Building Condition Assessments every 5 years. The next independent review of our sites is planned to occur between 2025-27.

## CONCLUSION

With the adoption of a new methodology to complete our Building Condition Assessments, we now have a more robust data set, which is more reflective of where we truly need to invest our time and money. While the cumulative FCI score for all our assets now indicates our buildings are in fair condition, there is still significant variability across the portfolio. Our poor and very poor condition buildings require

significant investment to ensure that all our tenants have access to the safe and supportive environment we promise them.

In addition, since the FCI calculation includes only requirements needed in the next two years, other buildings can easily slide back to poor condition if we fail to proactively invest in their renewal.

<b>PREPARED and SUBMITTED BY:</b>	<b>STAFF CONTACT:</b>
<b>PAUL CHISHOLM, CHIEF EXECUTIVE OFFICER</b>	<b>TREVOR WHITTINGHAM MANAGER, PORTFOLIO STRATEGY DEVELOPMENT</b>



## STAFF REPORT 2022-15

**TO:** LMCH Board of Directors  
**FROM:** Paul Chisholm, Chief Executive Officer  
**SUBJECT:** CEO Update  
**DATE:** March 10, 2023

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### **PURPOSE:**

The 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:**

#### **Health & Homelessness Summit**

Over the past months LMCH staff have been engaged in discussions with other community stakeholders in London on how to better deliver healthcare and housing for the most marginalized community members in London.

This report has been adopted by London City Council and will provide a framework for the action required to make meaningful system change. Attached to this report is the final report of the Summit for your review and we at LMCH looks forward to continuing this conversation with our community partners.

## Reimagine Southdale

Work continues on this project to finalize floorplans, develop the procurement plan and other critical path items. LMCH would like to highlight:

- LMCH has received the second round of feedback from the City of London on the Site Plan Approval. This is the final approval required to initiate the project. LMCH will respond to the latest comments around March 21, 2023. City approval or additional comments are expected in Mid-April.
- Community Space has been designed based on feedback received to date, to provide a mix of uses and will be further adjusted based on feedback from partners.
- Work with Community Partners will continue with additional engagement planned for the end of March.
- LMCH now has vacant possession of the 18 units being demolished as part of Phase 1 of the project.

## Community Safety

LMCH continues to focus on community safety across our sites.

- Overnight security at three sites continues (Dundas, Simcoe & Wharncliffe) with mobile security patrols active seven (7) days a week across other sites;
- Additional weekend security has been added to our Dundas site to respond to site specific issues.
- Additional London Police Services patrols are taking place on a regular at our Dundas site.
- Access Control upgrades continue across many of our communities to provide FOB access to laundry spaces, community rooms, garbage chute rooms and building entrances. This work is part of the CMHC Funding as well as regular capital investment.
- Talks continue with London Police Service to coordinate community level meetings for tenants to support community safety.

**Human Resources 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. LMCH is pleased to be making progress in recruitment:

- YTD in 2023 has LMCH has hired 4 new staff and a Co-Op Student in Human Resources.
- There are currently nine (9) open competitions, two (2) carried over from 2022 and seven (7) competitions initiated in 2023 at varying stages of the recruitment process:
  - Field Supervisor – 1 Temporary Role
  - Accounts Payable Coordinator – 1 Permanent Role
  - Property Services Manager – 2 Temporary Roles
  - Property Services Coordinator – 1 Permanent Role
  - Tenant Services Team Lead – 1 Temporary Role
  - Maintenance Repair Staff – 2 Permanent Role
  - HR Assistant – 1 Permanent Role
  - Community Development Worker – 1 Permanent Role
  - Procurement Officer – 1 Permanent Role

**ATTACHMENT:**

**APPENDIX A: H&H-Whole of Community-System Response-FINAL**

<b>PREPARED BY:</b>
<b>PAUL CHISHOLM CHIEF EXECUTIVE OFFICER</b>

FEBRUARY 2023

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# People Centred and Housing Centric

Health & Homelessness in London, Ontario:  
A Whole of Community System Response

# The Context

London is experiencing a health and homelessness crisis. Community members are suffering and some of them are dying on our streets.

There are many complex factors that have led us to this crisis point, not the least of which, a dramatic increase in the volume and complexity of health and housing needs and impacts.

Throughout 2022, Londoners from all sectors and backgrounds said loud and clear that something needed to change, to save lives, to better deliver healthcare and housing for the most marginalized community members in London, and to address the whole of community impacts of this crisis.

This call for change led to *London's Health & Homelessness Summits and the Whole of Community System Response* outlined here.

# Summit Process & Progress

The Health & Homeless Summits were convened collaboratively by *City of London, CMHA Thames Valley Addiction & Mental Health Services, London Health Sciences Centre, London Police Service, Middlesex London Health Unit, Middlesex-London Paramedic Service, and St. Joseph's Healthcare London.*

In all more than **200 individual leaders** from all backgrounds and areas of expertise, representing more than **70 local organizations**, came together over three summits in November and December 2022 and January 2023, *with a pledge to do things differently.*

They came together across a range of sectors – from community health and social services, institutional healthcare, education, emergency services, business and economic development, land and housing development, City of London staff, and staff from other levels of government – and agreed to:

- Build on the great work already underway
- Recognize the things that are not working as well
- Collaborate and innovate on new cross-sector and multidisciplinary solutions
- Speak in one voice to the funders who have the ability to resource a system response to this very real and dire crisis
- And most importantly to engage, listen to and co-design a system solution with those who have lived and living experience as a foundational element of this important work

## The work and progress included:

### | In Summit 1:

The group confirmed their shared intention to work together and began to build new relationships, reviewed the health and homelessness data for our community, and learned about the local best practices and collaborative efforts that already exist and can be built on. Then they set to work to identify all of the opportunities and challenges that need to be addressed with a new system solution, and began to identify the core components of that potential system. **In all, 20 priority needs and considerations were identified across four categories** – *Foundations & Governance, Service Delivery, System Resources, and Advocacy, Engagement & Communications.*

### | In Summit 2:

The group forged ahead with new relationships and continued to collaborate to focus on defining the specific requirements for the service delivery and system foundations identified in the first session. They were: *integrated intake and coordinated outreach, low barrier 24/7 spaces, increasing health, wellness and treatment options, a continuum of supportive housing, workforce development, data collection and measurement, policies and procedures, standards of care.*

Over the course of the first two sessions, through many generative, cross-sector discussions and breakout sessions, **the need for coordinated system transformation was readily identified.**

This cross-sectoral group also identified **five critical foundations needed** to ensure successful system operation, including:

### **1 Workforce Development**

Encompassing attraction, retention and engagement in a collaborative, shared strategy, including greater resources to hire, train and boost the wellbeing of frontline workers

### **2 System Governance**

Defining the governance, leadership and accountability structure for the system

### **3 Standards of Care**

Establishing sector wide standards of care to improve consistency in approaches to outreach and intake, harm reduction, anti-racism and anti-oppression practices, low barrier spaces

### **4 Shared Systems, Processes & Supports**

Developing common policies, procedures, tools and training to support the system and the delivery of consistent, high quality care, and to support businesses and community members with tools and supports; additionally including the review of policies, procedures and bylaws to support the whole of community response

### **5 Centralized Data & Measurement**

Developing centralized data sources, impact measurements and new or enhanced assessment tools

### In Summit 3:

The group dove deep into a review of the draft system model, which was based on the collective input of all participants across the first two summits. They then broke into facilitated peer groups with fellow subject matter experts in specific sectors, to provide feedback and ask questions about the model, including working groups for: *frontline leaders, operational leaders, organizational leaders, land and housing development leaders, business and economic development organizations, and funders and community partners.*

The following **proposed system response** was authored collectively by all summit participants, using insights collected in all three community sessions, and enhanced based on the real-time and post-event feedback opportunities offered to all participants.

**Ultimately, the proposed system aims to support the whole community**—those who are most marginalized, those working in the system, and those trying to provide support, including businesses and community members who also experience the impacts of this crisis.





## Our Shared Purpose

We exist to provide hope, healthcare and homes to those who are marginalized and experiencing homelessness in our community, of all backgrounds and experiences.

**We believe that housing is healthcare and a fundamental human right.**

We place the highest priority on providing direct connections to the right housing and housing supports for every

individual, and on building a sense of belonging for all.

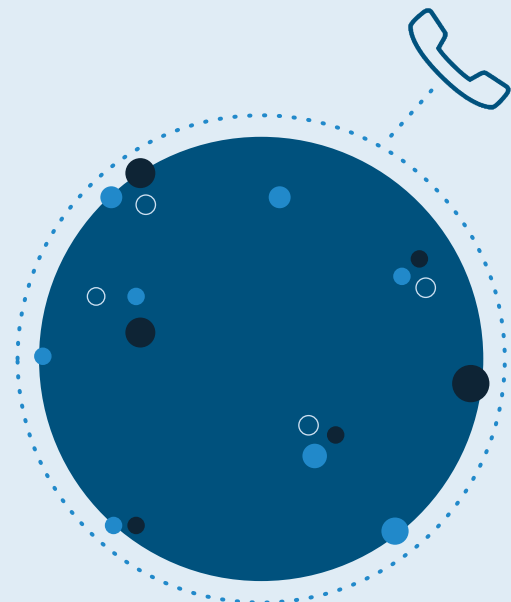
Our people centred, housing centric system meets people where they are, without judgment, offering culturally safe, low barrier, inclusive care that is violence and trauma informed, built on an anti-racism and anti-oppression framework and underpinned by a consistent harm reduction approach.



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## All Doors Lead Here

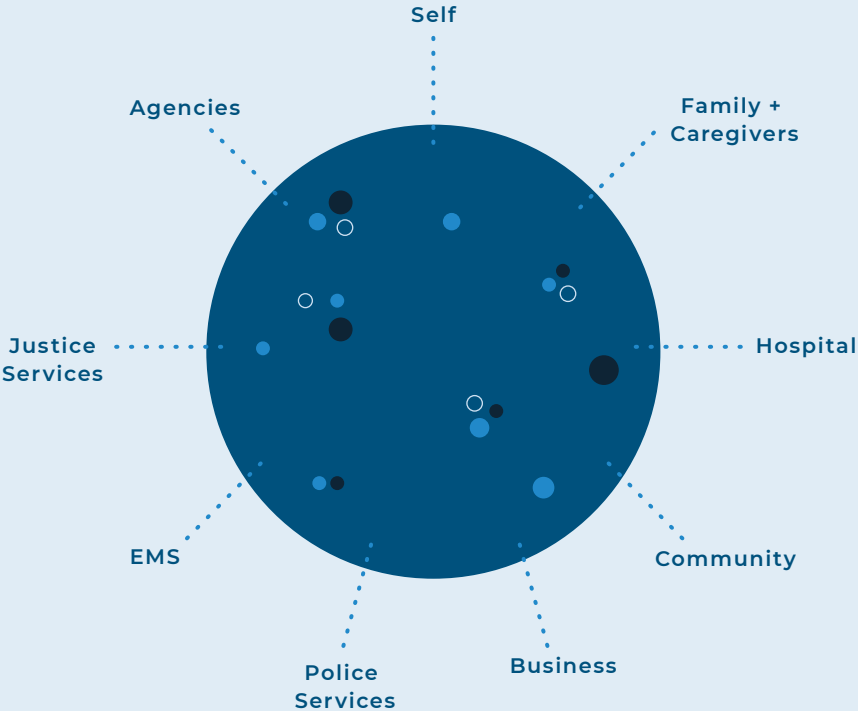
This is one system with no wrong door and multiple locations to meet people where they are, offering a range of common functions in an integrated, multi-agency and interprofessional model, that is population-specific to meet unique demographic and care needs, supported by one central phone number for referral, and designed to ensure timely and direct pathways to housing.



# Working Differently Together

A “no wrong door” approach.

“DOORS” (Referral Sources)



## “DOORS”

## CORE FUNCTIONS

- Self
- Family + Caregivers
- Hospital
- Community
- Business
- Police Services
- EMS
- Justice Services
- Agencies

- Coordinated multi-agency intake
- Coordinated outreach & warm transfers
- Transportation
- Basic needs (food, shower, laundry, rest)
- Quick access to acute & primary care
- Housing access support
- Income supports
- Integrated care planning
- Translation
- Intentional connections to health & wellness services (e.g. harm reduction via Carepoint, mental health, treatment, stabilization, general medical)
- 24/7 safe spaces (population-specific, including private, semi-private, congregate, flexibility to come and go)
- Transitional, medical respite and crisis stabilization beds
- Justice system services
- One number to call for referral

Timely and Direct Pathways to Housing

## Housing is Healthcare:

Timely and direct pathways to the right housing for each individual based on their needs, supported by increased housing stock of the right types, locations and supports.

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### SUPPORTIVE HOUSING CONTINUUM \*

**Highest support** (interdisciplinary, 24/7 supports on site)

**Range of supportive housing options** connected to individuals in private housing (with continued support on daily, weekly, other basis; could include but is not exclusive to developmental services and long-term care)

**Independent living**

*\*Dependent on an expanded housing stock*

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## A Common Purpose & Practice:

Powered by shared values, principles and foundations.

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### VALUES + PRINCIPLES

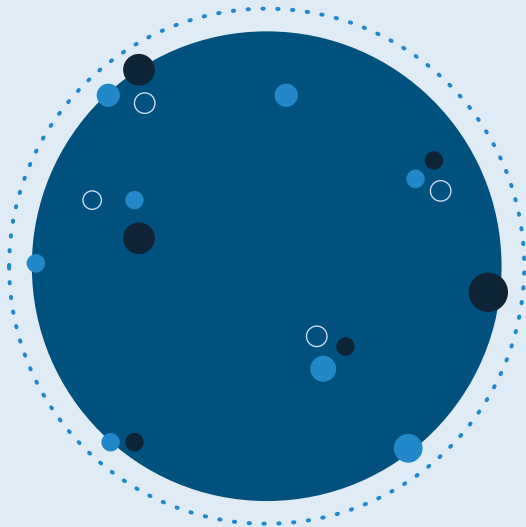
- Respecting individual experience
- Ensuring choice in care
- Promoting dignity
- Anti-racism and anti-oppression framework
- Harm reduction approach
- Trauma and violence informed
- Culturally safe
- Informed by social determinants of health
- Co-designed with providers and those with lived and living experience, and centering those voices
- Shared accountability and engagement
- Communication and transparency
- Continued commitment to prevention and advocacy
- A supportive system of mutual respect and care

## A Common Purpose & Practice continued:

### CRITICAL SYSTEM FOUNDATIONS

- Workforce Development
- System Governance
- Standards of Care
- Shared Systems, Processes & Supports
- Centralized Data & Measurement

# Our Whole of Community Response | By the Numbers



*Multiple locations, population specific, with a common set of functions and direct connections to the right housing.*

### NETWORK OF HUBS

12-15 total hub locations across the community (*5 to start*).

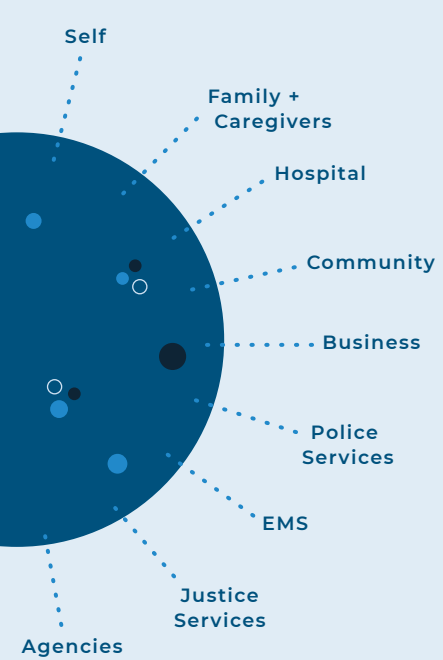
25-30 people served per location, depending on acuity and population needs.

100 high support housing units immediately (*and 600 over 3 years*).

*\*Numbers are very much draft only and will be determined through co-design process.*

# Our Whole of Community System Response At-a-Glance

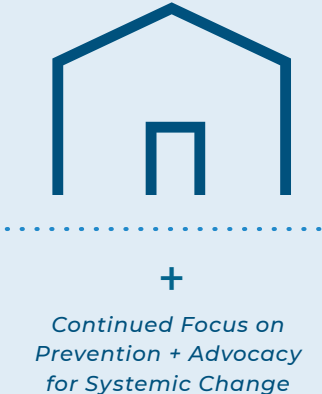
## Network of Hubs with Multiple Referral "Doors"



## Purpose-Built with Common Core Functions

- Coordinated multi-agency intake
- Coordinated outreach & warm transfers
- Transportation
- Basic needs (food, shower, laundry, rest)
- Quick access to acute & primary care
- Housing access support
- Income supports
- Integrated care planning
- Translation
- Intentional connections to health & wellness services (e.g. harm reduction via Carepoint, mental health, treatment, stabilization, general medical)
- 24/7 safe spaces (population-specific, including private, semi-private, congregate, flexibility to come and go)
- Transitional, medical respite and crisis stabilization beds
- Justice system services
- One number to call for referral

## Timely + Direct Pathways to Housing



Shared Values, Principles + System Foundations

# Respecting & Listening to Indigenous Colleagues

We have a commitment to greater representation and an effective process that is not designed in a colonial way, respecting the deep knowledge and consultation already inherent in the Giwetashkad Strategy.

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## BASED ON THE GIWETASHKAD STRATEGY WE WILL:

**Support an Indigenous-led** system response, recognizing the definition of Indigenous homelessness as separate and distinct from the common colonialist definition of homelessness

**Ensure representation** in overall system governance and implementation co-design

**Follow the lead** of Indigenous colleagues in this process

**Respect** the intention to honour all relations in defining next steps

## A Continued Focus on Prevention

While there is widespread agreement amongst participants on the system response, there is also a strong and continued focus on prevention and advocacy to address the systemic issues that cause community members to experience health and homelessness issues. It is important to underscore that this priority has not been lost, and will continue to be a top focus of all involved in the system response.

## Next Steps

Work on system governance and implementation co-design will begin in March. Consistent with the founding values and principles of the summit process, this work will be open and inclusive to all leaders from the sector. An important part of the co-design work will be consultation with those who have lived and living experience, and frontline workers. Communications, community engagement and advocacy will also continue, within the London community and with other levels of government.

### A Note on the Health & Homelessness Fund for Change

Inspired by the dire local need and the work of the summit participants across sectors, a generous London family, who wishes to remain anonymous, has come forward to provide an **historic \$25 million dollar gift** to fund the system response.

This gift, which has been established as a fund with London Community Foundation, represents by far *the largest single private donation in the history of our community to address health and homelessness*. The family has *further* pledged another **\$5 million in matching funds**, which means that if our community comes to the table with \$5 million, they will match it, creating **a fund that totals \$35 million dollars**.

**This historic gift is a testament to the belief in the process and to the work that everyone involved in the system design process has contributed to and will continue to contribute to.**

## STAFF REPORT 2023- 16

**TO:** LMCH Board of Directors  
**FROM:** Paul Chisholm, CEO  
**SUBJECT:** Vacancy Management Report  
**DATE:** March 10, 2023

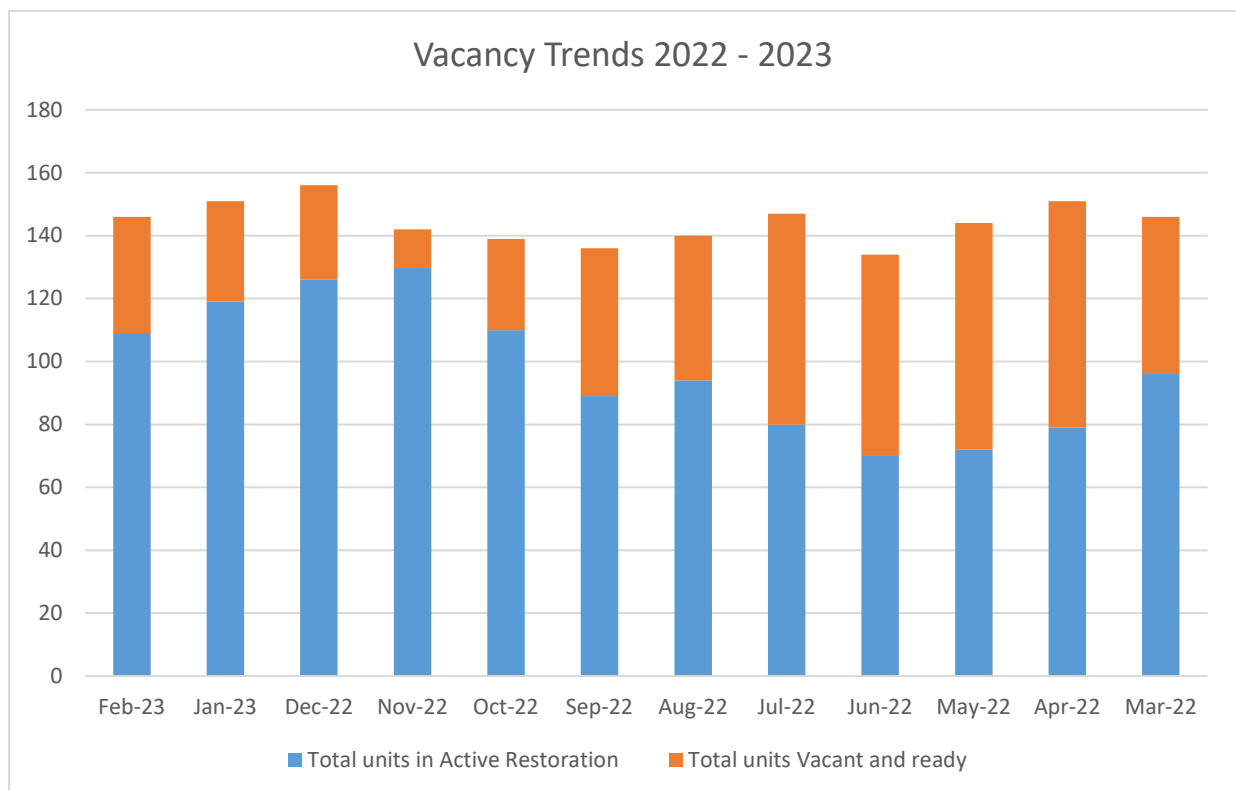
### Purpose:

To update the Board of Directors regarding the status of LMCH’s Vacancy Management progress with the objective of achieving a three percent (3%) total vacancy.

### RECOMMENDATION:

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

### OVERVIEW:





**Monthly Vacancy Progress (Reported as of Feb 28<sup>th</sup>, 2023)**

- 1. 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%)

Count (Units)	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
Total units in Active Restoration	109	119	126	130	110	89	94	80	70	72	79	96
Total units Vacant and ready	37	32	30	12	29	47	46	67	64	72	72	50
<b>Total Vacancy (Units Available)</b>	<b>146</b>	<b>151</b>	<b>156</b>	<b>142</b>	<b>139</b>	<b>136</b>	<b>140</b>	<b>147</b>	<b>134</b>	<b>144</b>	<b>151</b>	<b>146</b>

Vacancy Rate	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
Total units in Active Restoration	3.3%	3.6%	3.3%	2.7%	3.3%	2.7%	2.8%	2.4%	2.1%	2.2%	2.4%	2.9%
Total units Vacant and ready	1.1%	1.0%	0.9%	1.4%	0.9%	1.4%	1.4%	2.0%	1.9%	2.2%	2.1%	1.5%
<b>Total Vacancy (Units Available)</b>	<b>4.4%</b>	<b>4.6%</b>	<b>4.8%</b>	<b>4.3%</b>	<b>4.2%</b>	<b>4.1%</b>	<b>4.2%</b>	<b>4.4%</b>	<b>4.1%</b>	<b>4.4%</b>	<b>4.5%</b>	<b>4.4%</b>

## 2. Non-Rentable Units:

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

- 6 units are on hold as part of CMHC Accessible Unit Project
- 6 units are vacant and undergoing restoration for fire or as part of insurance claims
- 17 units at our Southdale Project are vacant awaiting demolition as part of the Reimagine Southdale project.

## 3. Active Restoration:

The active restoration category includes all remaining units that are slated for restoration and rental. The target for units in active restoration is 2% of the portfolio or 66 units. At the end of February there were 109 units in active restoration which was 3.6 % of the portfolio.

There were 35 units restored in February that took an average of 156 days to return to rent ready.

Age of Units Restored in Period (Count)	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
0-15 days	1	0	0	0	0	1	0	0	0	0	0	0
16-30 days	2	2	1	0	1	4	1	2	1	2	4	1
31-60 days	1	4	4	1	5	7	1	7	6	10	13	10
61-90 days	2	8	4	3	6	7	6	6	10	3	7	5
91+ days	29	24	23	6	8	14	7	9	11	16	22	15
Total units restored	35	38	32	10	20	33	15	24	28	31	45	31
Average # of days in restoration	156	122	116	124	95	84	84	101	95	112	107	96

At the end of February 2023 there were 109 units in active restoration down from 119 at the end of January 2023. Units in active restoration at the end of February had been vacant for an average of 92 days as of 28<sup>th</sup> February 2023.

Age of Units in active Restoration (Count)	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
0-15 days	15	9	10	15	18	9	15	8	10	17	15	16
16-30 days	11	18	18	15	14	18	15	24	16	10	14	11
31-60 days	22	22	24	29	20	20	31	20	22	24	15	16
61-90 days	24	20	26	17	17	23	12	14	13	4	8	11
91+ days	37	50	48	54	41	19	21	14	9	17	27	42
Total units in Active Restoration	109	119	126	130	110	89	94	80	70	72	79	96
Average # of days in restoration at month end	92	101	97	90	82	71	63	56	56	59	76	91

**4. Active Rental Stock:** These are the 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). The target for Active Rental Stock is 1% of the portfolio or 33 units.

In the month of February, 31 units were leased that had been rent ready for an average of almost 17 days. In addition to units leased an additional 27 units were accepted by tenants to be leased in March and future periods.

Age of Units Leased in the Period (Count)	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
0-15 days	22	11	8	6	11	3	5	0	6	10	5	23
16-30 days	5	5	6	9	8	8	5	9	4	9	2	8
31-60 days	3	2	4	4	5	11	9	8	13	10	7	8
61-90 days	1	0	1	4	1	4	2	9	5	3	0	2
91+ days	0	0	3	4	9	9	2	5	4	2	1	2
<b>Total units Leased</b>	31	18	22	27	34	35	23	31	32	34	15	43
<b>Average # of days to commit the unit</b>	17	14	54	48	56	64	42	63	47	36	27	28

At the end of February, the active rental stock was 37 units or 1.1 % of the portfolio. The average days units were in Active Rental at the end of February was 13 days.

Age of Units Vacant and Available (Count)	2023 Feb	2023 Jan	2022 Dec	2022 Nov	2022 Oct	2022 Sept	2022 Aug	2022 Jul	2022 Jun	2022 May	2022 April	2022 Mar
0-15 days	31	29	23	7	17	25	18	20	24	22	26	23
16-30 days	3	2	3	2	6	9	0	4	9	6	14	2
31-60 days	3	0	2	0	2	1	9	18	10	26	14	19
61-90 days	0	0	1	3	2	4	4	12	8	8	13	4
91+ days	0	1	1	1	2	8	15	13	13	10	5	2
Total units Vacant and ready	37	32	30	12	29	47	46	67	64	72	72	50
Average # of days vacant and ready	13	13	13	24	32	41	63	52	47	42	37	31

### Period Summaries:

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

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

LMCH leased 31 units and future leased an additional 28 during this reporting period.

### Conclusion

Corporate target for vacant units is 100 units. The sub targets set are 66 units in Active Restoration and 33 units are in Active Rental stock.

With 109 units in Active Restoration, this measure remains 43 units above target. Units for the past three months exceed monthly average target of 30 units restored. Focus continues to be managing vacancy with a combination of in-house staff and vendors to achieve target. A number of units with potential ACM (Asbestos Containing Material) in the floor material are on temporary hold until contractor identified to remediate the units safely. Work continues other units outside of this subset of units to meet or exceed the target.

With the active vacancy filling activity, the number of vacant and ready units available for offer have been reduced to less than the target of 33 units.

<b>PREPARED and RECOMMENDED BY:</b>
<b>PAUL CHISHOLM, CEO</b>



## STAFF REPORT 2023- 17

**TO:** LMCH Board of Directors

**FROM:** Diana Taplashvily, Director of Finance & Corporate Services

**SUBJECT:** 2023 SIRF and Insurance Premiums payable to the City of London

**DATE:** March 10, 2023

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### **PURPOSE:**

The purpose of this report is to seek the LMCH Board of Directors **APPROVAL** to pay the annual premium for coverage through the City of London Self Insurance Reserve Program.

Board approval is required for this contract award, as it exceeds the \$75,000 financial approval limit of LMCH's CEO as set out in "Purchasing Policies and Guidelines".

### **RECOMMENDATION:**

That the Board of Directors:

1. Authorize LMCH to participate in the City of London Self Insurance Reserve Fund (SIRF) Program and Vehicle Insurance.
2. Authorize LMCH to make a payment to the City of London for the full cost of the SIRF Program for coverage year 2023 which is currently estimated in the amount of \$167,633 and Vehicle Insurance Premiums of \$1,194.11.
3. Recommend to the Board of Directors that LMCH participates in the SIRF Program and approve the payment in full of the invoice received from the City of London for these programs.
4. Authorize LMCH staff to take the necessary steps to give effect to the above recommendations.

### **FINANCE COMMITTEE UPDATE:**

The Finance Committee met on March 6, 2023, to review 2023 SIRF and Insurance Premiums payable to the City of London. The Committee members discussed the report details and Approved a recommendation to forward the report to the Board of Directors for approval.

## BACKGROUND:

LMCH works closely with the Risk Management Team at the City of London to receive support, advice and to ensure LMCH has the appropriate level of insurance in place.

The Risk Management team provides the following critical services:

- Acts as an Agent for LMCH with the Housing Services Corporation to provide property, general liability, and other core insurance programs.
- This insurance coverage comes to the Board under a separate cover in the fall each year.
- Acts as an Agent for LMCH to put vehicle insurance in place. This annual fee is included in the attached invoice from the City of London.
- Administers the Self Insurance Reserve fund for the City of London, including setting the annual contribution for LMCH and other participants.
- Ensures liability claims related to insurable events are assessed and managed in the interest of LMCH.
- Supports LMCH staff in claim administration, reimbursement of expenses and other activities related to these programs.

The SIRC Program provides additional insurance coverage to LMCH for eligible claims.

- For large claims that would normally be covered by property or other liability programs, the SIRC Program reduces the deductible payable to the insurance provider to \$1,000 from approximately \$25,000 reducing direct cost to LMCH by \$24,000.
- The SIRC Program also covers small claims not traditionally processed as part of the primary insurance program as the claim amount is lower than the deductible. This would include vandalism, floods, criminal acts where the damage is between \$2,500 and \$25,000.



The SIF program reduces the cost of adverse events like fires, flood and vandalism and allows LMCH focus on addressing the damage related to the claim regardless of the current financial position.

The SIF Program runs from January 1, 2023, to December 31, 2023. The Contribution for participants is calculated based on claims submitted to the City over prior years and is finalized in March of each year.

## FINANCIAL IMPACT

The contribution required from LMCH in 2023 is estimated at \$168,957.11. The premium has increased by 13% from \$149,213.91 paid for 2022. The value is based on loss history, open claim reserves, and exposure.

The increase for 2023 is in line with the number and amount of claims filed. These funds are included in the LMCH operating budget and assist the organization in managing the financial uncertainty related to fires, floods, and other adverse insurable events.

## SIGNATURE:

PREPARED and SUBMITTED BY:
DIANA TAPLASHVILY, DIRECTOR OF FINANCE & CORPORATE SERVICES

## STAFF REPORT 2023- 18

**TO:** LMCH Board of Directors

**FROM:** Paul Chisholm, Chief Executive Officer

**SUBJECT:** Contractor Award – Roofing Replacement – Kent St (RFP 2022-0007-01)

**DATE:** March 10, 2023

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### **PURPOSE:**

The purpose of this report is to inform the LMCH Board of Directors, and receive Board approval to award a contract for the installation of a new roofing system on 170 Kent St

Board of Directors approval is required for this contract award as it exceeds the \$75,000 financial approval limit of LMCH’s CEO as set out in the LMCH “Purchasing Policies and Guidelines”.

### **RECOMMENDATION:**

That the LMCH Board of Directors APPROVE the following recommendations:

1. Approve the award of the work to Always Roofing for the sum of \$648,793 (before taxes) to perform the work as specified in tender RFP 2022-0007-1 for the new roof at 170 Kent Street.
2. Recommend that this contract ward be approved by the Board of Directors of LMCH.
3. Authorize LMCH staff to take the necessary steps to give effect to the above recommendation(s).

### **FINANCE COMMITTEE UPDATE:**

The Finance Committee met on March 6, 2023, to review Contractor Award – Roofing Replacement – Kent St (RFP 2022-0007-01). The Committee members received clarification on the section of the report that discussed the percentage of completed projects in conjunction with cancelled projects referred to in the report. It was confirmed that the projects listed were not being cancelled but deferred. The report details and a recommendation to forward the report to the Board of Directors for approval was APPROVED by the Committee.

## **BACKGROUND:**

IRC Consulting Engineers completed a condition review of the roofs of all LMCH properties in the fall of 2022. They produced a report which gave detailed condition assessments and suggested timelines for the removal and replacement of the roofs at all sites. The roof at Kent St was identified as being in poor condition and recommended for replacement as soon as funding was available. The LMCH Asset Management team immediately began work with a Roofing Consultant to create a design and specification which could be put on market to have the roof replaced in Spring 2023.

## **PROJECT OVERVIEW:**

The project is for the full removal and replacement of the existing roofing system on all 3 roof surfaces of the building. LMCH records indicate that this roof was last replaced circa 2010.

The full scope of work includes:

- Removal of the existing stone ballast, EPDM roofing membrane and all the insulation below,
- Installation of new tapered insulation to ensure that rainwater travels properly to roof drains and does not pond on the roof
- Installation of new modified bitumen roofing membrane
- New flashings and other sheet metal components to finish the work
- Replace with a e have selected a high-quality membrane which comes with a comprehensive 20-year warranty to eliminate future operational costs for service calls and ensure the roof has a longer life span than our previous membrane.

## **PROCUREMENT PROCESS:**

An RFP was posted to Bids & Tenders and closed in Feb 2023. Fourteen (14) companies registered for the competition, twelve firms attended the mandatory site walkthrough, and six (6) bid submissions were received.

The Consulting Engineering firm used for the project, Edison Engineers, completed a thorough review of all bids and issued a recommendation letter to LMCH.

In addition to the Engineer's recommendation letter, LMCH staff scored the RFP using an evaluation matrix which weighed technical proficiency, company reputation, project schedule, as well as price. After evaluation on all these dimensions, Always Roofing was determined to be the preferred proponent. Always Roofing's bid submission satisfied all mandatory requirements. Also, the professional references submitted by the proponent were contacted to verify that they would be able to fulfill the tender as per the project contract.

**FINANCIAL IMPACT:**

The 2022 Capital Budget has \$602k allocated to project 2022-0007 to complete various roofing repairs. In addition, there was money allocated to roofing in the 2021 Capital Budget (2021-0006). This project is currently underway but is expected to come in under budget. We will reallocate \$150,000 from that project to ensure there is sufficient construction contingency.

2022-0007 - LMH2619 - LMCH Infrastructure Gap	\$602,383
2021-0006 – LMH2619 – LMCH Infrastructure Gap	\$150,000
<b>Total Budget</b>	<b>\$752,383</b>
<b>Fixed Fee Contract</b>	<b>\$648,793</b>

**LEGAL IMPACT / RISK MANAGEMENT:**

Vendor insurance, WSIB and performance bonds were included in the bid submission received from Always Roofing. These should provide sufficient assurances that Always can complete the job successfully.

The scope of this project includes work that will require the use of a crane to lift material onto the roof. This will require that the building’s rear parking lot is closed briefly. Tenant communication and mitigation strategies will be put in place by the LMCH Project Manager.

Also, this project requires the removal of some asbestos containing materials, which are components of the existing roof. These have been sampled and a full hazardous materials report provided to all the proponents. The abatement will be completed by a subcontractor of Always Roofing, and the costs of the work have been included in the fixed fee contract. As this work will happen outdoors, we anticipate very little risk to workers or tenants.

<b>PREPARED and SUBMITTED BY:</b>	<b>STAFF CONTACT:</b>
<b>PAUL CHISHOLM CHIEF EXECUTIVE OFFICER</b>	<b>TREVOR WHITTINGHAM MANAGER, PORTFOLIO STRATEGY DEVELOPMENT</b>

## STAFF REPORT 2023- 19

**TO:** LMCH Board of Directors  
**FROM:** Paul Chisholm, CEO  
**SUBJECT:** Human Resources and Governance Committee Work Plan 2023  
**DATE:** March 10, 2023

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### **PURPOSE:**

To receive the Draft Human Resources and Governance (HRG) Committee Work Plan for review and revision.

### **RECOMMENDATION:**

That LMCH Board of Directors APPROVE the attached 2023 HRG Committee Work Plan.

### **BACKGROUND:**

LMCH staff brings forth a draft HRG Committee Work Plan every year. The Committee is requested to review the work plan and determine if there are additional items that should be scheduled to come before the committee.

The Terms of Reference for the HRG Committee notes that there is a minimum of four (4) meetings per year. The current schedule of meetings has the Board of Directors meeting 4-5 times a year. Should the Committee determine that more frequent meetings are required staff will work with the Committee to add these meetings to support the work of the committee.

Human Resources and Governance Committee meet on March 8<sup>th</sup>, to review and approved the HRGC 2023 Workplan.

### **Appendix A: 2023 Human Resources and Governance Committee Draft Work Plan**

RECOMMENDED BY:
PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

### 2023 Human Resources & Governance Committee Work Plan

Committee Meeting Date	Board Meeting Date	Anticipated Agenda Items
Wednesday Feb 22 <sup>nd</sup>	March 16 <sup>th</sup>	<p><b>In Camera</b></p> <ul style="list-style-type: none"> <li>• 2022 Labour Relations report</li> <li>• Discussion Item: Collective Bargaining</li> </ul> <ul style="list-style-type: none"> <li>• Human Resources Manager Update</li> <li>• Review of Draft Workplan</li> <li>• Q4 2022 Human Resources Update Report</li> <li>• Health &amp; Safety Policy (annual update)</li> <li>• Workplace Violence, Harassment, and Sexual Harassment Policy (annual update)</li> <li>• Delegation Policy</li> </ul>
Wednesday April 26 <sup>th</sup>	May 18 <sup>th</sup>	<ul style="list-style-type: none"> <li>• Human Resources Manager Update</li> <li>• Q1 Human Resources Update Report</li> <li>• Procurement Policy</li> </ul>
Wednesday July 26 <sup>th</sup>	August 17 <sup>th</sup>	<ul style="list-style-type: none"> <li>• Human Resources Manager Update</li> <li>• Q2 Human Resources Update Report</li> <li>• Performance Management Program</li> </ul> <p><u>In Camera</u></p> <ul style="list-style-type: none"> <li>• 2023 Review of Collective Bargaining Framework</li> </ul>
Wednesday Nov 22 <sup>nd</sup>	December 14 <sup>th</sup>	<ul style="list-style-type: none"> <li>• Human Resources Manager Update</li> <li>• Q2 Human Resources Update Report</li> <li>• 2024 Salary report</li> </ul> <p><u>In Camera</u></p> <ul style="list-style-type: none"> <li>• Collective Bargaining Updates</li> </ul>

\*Dates to be finalized with Committee Members

## STAFF REPORT 2023- 20

**TO:** LMCH Board of Directors

**FROM:** Dirk Volschenk, Manager of Human Resources

**SUBJECT:** Annual update of Occupational Health and Safety Reports

**DATE:** March 10, 2023

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### **PURPOSE:**

To provide an update on the Health and Safety Policy and Workplace Violence, Harassment and Sexual Harassment Policy of the organization which has been reviewed and/or updated in terms of the organization's obligations under the Occupational Health and Safety Act, 1990.

### **RECOMMENDATION:**

That the LMCH Board of Directors:

1. Receive and Approve the attached Health and Safety Policy;
2. Receive and Approve the attached Workplace Violence, Harassment and Sexual Harassment Policy;
3. Authorize LMCH staff to take the necessary action to give effect to the above recommendations.

### **HUMAN RESOURCES and GOVERNANCE COMMITTEE UPDATE:**

The HRGC met on March 8th to review the Annual update of the Occupational Health and Safety Reports. The Committee reviewed staff training surrounding these policies and the LMCH Joint Health and Safety committees input on these policies. After discussion and review the Committee approved the reports.

### **BACKGROUND:**

It is a requirement under the Occupational Health and Safety Act to review both of these policies as required or at least annually. These policies were last reviewed and approved by the Board in January 2022. As part of the review for 2023 LMCH worked with Ahria Consulting to ensure policies were compliant with the legislation and worked with the Joint Health and Safety Committee to review all recommendations made.

After review by Ahria Consulting and the Joint Health and Safety Committee, no updates are being recommended for the Health and Safety Policy.

The Workplace Violence, Harassment, and Sexual Harassment was reviewed, and updates were recommended to include a broader definition and commitment around Domestic

Violence as well as more clearly defining the Responsibilities of Employers, Supervisors and Employees in terms of the Policy.

The Joint Health and Safety Committee also identified a need for a broader review of the Policy against the realities of the organization, specifically in respect of our changing Tenant population and members of the public in our properties. This will be completed during the course of 2023.

### **Conclusion**

Once approved both policies will be shared with all staff and they will be required to confirm that they read and understand the policies.

### **ATTACHMENTS:**

**APPENDIX A:** Health Safety Policy January 2023 update

**APPENDIX B:** Workplace Violence Harassment and Sexual Harassment Policy February 2023 update

RECOMMENDED BY:
DIRK VOLSCHENK, MANAGER, HUMAN OF RESOURCES





## RELATED DOCUMENTATION

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

### 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"><li>• January 2017</li></ul>
Date Approved	<ul style="list-style-type: none"><li>• February 23, 2017</li><li>• Update approved by Board of Directors January 20, 2022</li></ul>
Date Revised	<ul style="list-style-type: none"><li>• January 31, 2023</li></ul>
To be reviewed	<ul style="list-style-type: none"><li>• Review and update every twelve months.</li><li>• General review by all employees every twelve months.</li></ul>
Inquiries to Policy Owner	<ul style="list-style-type: none"><li>• Human Resources</li></ul>



RELATED DOCUMENTATION

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

**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, sexual harassment, bullying, discrimination, or any other unwelcomed behaviour. This commitment applies to all areas of business, including training, performance, assessment, promotions, transfers, layoffs, remuneration, and all other employment practices and working conditions. 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.

## 2.0 DEFINITIONS

In accordance with the *Occupational Health and Safety Act* and the *Ontario Human Rights Code*, the following definitions apply to our Workplace Harassment and Violence Program.

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).

Domestic Violence: Domestic violence refers to violent or abusive acts committed by one family or household member against another, such as child, elder, or spousal abuse. Domestic violence can refer to physical harm, or behavior that is controlling, coercive, or threatening. It can occur in any kind of intimate relationship -- married or unmarried, living together, or simply dating.

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 LMCH, 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.

Bullying and harassing behaviour does not include:

- Expressing differences of opinion.
- Offering constructive feedback, guidance, or advice about work-related behaviour.
- Reasonable action taken by an employer or supervisor relating to the leadership and direction of employees or the place of employment (e.g., managing a worker's performance, taking reasonable disciplinary actions, assigning work).

### 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 LMCH'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 LMCH, 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 employees or the workplace that helps manage, guide, or direct employees 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.

#### **4.0 PREVENTION**

Preventing violence, harassment, bullying, and sexual harassment is everyone's responsibility. All employees or person's acting on behalf of LMCH is expected to:

- Set a good example.
- Act against workplace violence/harassment.
- Refrain from comments and/or behaviour that is considered violent/harassment in nature.
- Express their disapproval if they encounter or witness violent or harassing behaviour in the workplace.

#### **5.0 RESPONSIBILITIES**

LMCH will not tolerate any level of workplace violence or harassment directed at employees, between employees, by tenants towards employees, or by an employee towards a member of the public or a tenant. We take every reasonable precaution to prevent or minimize violence and harassment in the workplace. Any employee, whether knowingly or not, who fails to follow any rule outlined, will be subjected to the disciplinary process, up to and including termination of their employment and subject to the provisions of the Collective Agreement (if applicable) or any other relevant policy or legislation.



**LMCH shall:**

- Provide information, instruction, and supervision to employees to protect their health and safety as it relates to workplace violence and harassment;
- Take every reasonable precaution to protect employees from workplace violence and harassment;
- Review and update this policy at least annually, and develop and maintain a workplace violence and harassment program to eliminate identified hazards from the workplace;
- Post a copy of this policy in a conspicuous location in the workplace;
- Ensure supervisors/managers are competent in dealing with workplace violence and harassment matters;
- Investigate all incidents and complaints for workplace violence and harassment; and
- Assist the joint health and safety committee, in carrying out functions related to workplace violence and harassment, and provide them with copies of any reports, investigations, or documents related to workplace violence and harassment.

**Employees shall:**

- Not engage in any level of workplace violence or harassment.
- Work in compliance with all applicable legislation and all policies and procedures related to workplace violence and harassment prevention;
- Report all instances of workplace violence and harassment they become aware of to their supervisor or management;

**Supervisors/Managers shall:**

- Ensuring their behaviour always reflects this policy.
- Advise employees of all potential or real hazards and dangers they are aware of involving workplace violence and harassment;
- Provide employees with written instruction when necessary to prevent workplace violence and harassment; and
- Take every reasonable precaution to protect employees from workplace violence and harassment.



## 6.0 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 employees 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.

LMCH 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 an employee is likely to be exposed to Domestic Violence in the workplace, LMCH 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 LMCH 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. LMCH 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.

### 7.0 DOCUMENT CONTROL

Date Drafted	<ul style="list-style-type: none"><li>January 2017</li></ul>
Date Approved	<ul style="list-style-type: none"><li>February 23, 2017</li><li>Update approved by Board of Directors January 20, 2022</li></ul>
Date Revised	<ul style="list-style-type: none"><li>February 13, 2023</li></ul>
To be reviewed	<ul style="list-style-type: none"><li>Review and update every twelve months (in consultation with the JHSC)</li><li>General review by all employees every twelve months</li></ul>
Inquiries to Policy Owner	<ul style="list-style-type: none"><li>Human Resources</li></ul>



**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:		Height:
Last Name:					Weight:
Home Address:		Cell Telephone #	Email Address:		Hair Colour:
City:	Postal Code	Assailant's Gender:			Eye Colour:
Work Location:					Race:
Relationship of Assailant to Victim ( <i>if any</i> ):				Distinguishing Features:	
<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> )				Use of Weapons ( <i>if any</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"/> 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"/>	<input type="checkbox"/> Workplace Bullying	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Other (please specify):		



SECTION 5	
If an employee was injured, the manager must complete a WSIB Form 7	
Was victim or assailant injured: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:	Was medical treatment provided to: (a) Victim <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:  (b) Assailant <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:
Date WSIB form submitted:	
Was victim referred to counseling? <input type="checkbox"/> No <input type="checkbox"/> Yes	Was assailant referred to counseling? <input type="checkbox"/> No <input type="checkbox"/> Yes

SECTION 6	
Police notified? <input type="checkbox"/> No <input type="checkbox"/> Yes Date Notified: Time Notified:	
Responding Police Officer Name:	Badge #:
Was assailant arrested? <input type="checkbox"/> No <input type="checkbox"/> Yes	
If yes: Date of arrest:	Time of arrest:
Restraining order issued: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown	
If yes: Date:	Time:
If yes, what were the charges?	

SECTION 7
List of witnesses (attach witness reports):





**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 2023- 21

**TO:** LMCH Board of Directors

**FROM:** Dirk Volschenk, Manager of Human Resources

**SUBJECT:** Update of Smoke-Free Workplace Policy

**DATE:** March 10, 2023

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### PURPOSE:

To provide the LMCH Board of Directors the updated Smoke-Free Workplace Policy which has been reviewed and updated to better reflect best practice recommendations.

### RECOMMENDATION:

That the LMCH Board of Directors:

1. Receive and Approve the attached Smoke-Free Workplace Policy;
2. Forward this policy to the Board of Directors for Approval; and
3. Authorize LMCH staff to take the necessary action to give effect to the above recommendations.

### BACKGROUND:

The organization's current Smoke-Free Workplace Policy has been in place since 2010. This policy needs to be updated as there have been significant changes in the types of smoking.

The Policy has been updated to address the smoking of electronic cigarettes and cannabis and include these types of smoking under the scope of the Policy.

### HUMAN RESOURCES and GOVERNANCE COMMITTEE UPDATE:

The HRGC met on March 8th to review the Updated Smoke-Free Workplace Policy and the Committee approved the report.

## Conclusion

Once approved the policy will be shared with all staff and they will be required to confirm that they read and understood the policy.

## ATTACHMENTS:

APPENDIX A: Smoke Free Workplace Policy

PREPARED and SUBMITTED BY:
Dirk Volschenk Manager, Human Resources



## RELATED DOCUMENTATION

<b>Legislation</b>	<ul style="list-style-type: none"> <li>Smoke-Free Ontario Act, 2017</li> <li>Occupational Health and Safety Act, 1990, relevant regulations</li> <li>Municipal bylaws, Smoke Free Public Places PH-10 enacted February 17, 2003 and Smoke Free Workplaces PH-11 consolidated April 22, 2003</li> <li>Residential Tenancies Act 2006</li> </ul>
<b>Collective Agreement</b>	N/A
<b>Forms</b>	N/A
<b>Policies</b>	
<b>Other Resources</b>	

### 1.0 PURPOSE

London & Middlesex Community Housing Inc. maintains a commitment to the health and safety of all its employees. Smoking has been scientifically proven to be harmful to the health of both smokers and non-smokers who come into contact with second-hand smoke. In the interest of promoting a safe and healthy work environment, London & Middlesex Community Housing Inc. has adopted a smoke-free workplace policy in accordance with the *Smoke-Free Ontario Act, 2017*. Signs will be posted at each entrance and exit of the workplace to ensure employees and guests are aware that smoking is prohibited.

### 2.0 SCOPE

This Policy applies to everyone providing service at LMCH including:

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

### 3.0 DEFINITIONS

**Smoking:** The act of lighting, inhaling, or carrying of a lighted or smoldering cigar, cigarette, joint, or pipe of any kind.

**Electronic cigarette:** Under the Smoke-Free Ontario Act, 2017, a vaporizer or inhalant-type device, whether called an electronic cigarette or any other name, that contains a power source and heating element designed to heat a substance and produce a vapour intended to be inhaled by the user of the device directly through the mouth, whether or not the vapour contains nicotine.



Enclosed workplace: Under the Smoke-Free Ontario Act, 2017: The inside of any place, building, structure, or vehicle or conveyance or a part of any of them:

- That is covered by a roof;
- That employees work in or frequent during the course of their employment whether or not they are acting in the course of their employment at the time; and
- That is not primarily a private dwelling; or
- A prescribed place

## **4.0 POLICY STATEMENT**

This Smoke-Free Workplace Policy ensures a smoke-free workplace for its employees. Additionally, this policy will ensure that the common areas in our apartment building are also smoke free for tenants and visitors.

Smoking is prohibited within all LMHC offices and workshops as well as any common areas at our rental properties and includes tenant units, whether occupied or unoccupied. This includes smoking or holding lighted tobacco or cannabis, an electronic cigarette or vapour product, or consuming a prescribed substance. These common areas include all community centers, lounges, laundry rooms, elevators and stairwells and common kitchens. Tenants and their visitors are allowed to smoke in their own apartment or townhouse. Employees are prohibited from smoking in Tenant Units, even when invited by the Tenant, while they are on duty. Smoking in any LMHC vehicle or personal vehicle used during regular scheduled hours is prohibited. Smoking will be allowed in designated smoking areas outside buildings.

All materials used for smoking, including cigarette butts and matches, must be extinguished and disposed of in appropriate containers as provided.

LMHC will not discharge employees, or refuse to hire applicants on the grounds that they are smokers. LMHC has no intentions towards influencing the actions of employees' smoking habits outside of the workplace and will not pursue disciplinary action for those that smoke off of LMHC premises. LMHC will assist employees who wish to quit smoking by facilitating access to recommended smoking cessation programs and materials as available through our current group insurance policy.

### **SIGNAGE**

The company will post all necessary signs at entrances, exits, and washrooms to comply with the Smoke-Free Ontario Act, 2017.

### **RESPONSIBILITY**

The CEO, Directors and Managers must ensure that this policy is adhered to by employees, contractors, tenants and visitors in the buildings and areas under their responsibility.

### **DISCIPLINARY MEASURES**

LMHC employees who violate this policy are subject to disciplinary action.



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## ACCOMMODATIONS

Accommodations for employees relating to medical cannabis will be made on a case-by-case basis. Any employees who have an accommodation requirement are expected to inform Human Resources prior to consuming their substance in the workplace.

Non-LMHC employees who violate this policy may be requested to leave LMHC premises, or LMHC may take whatever measures it deems appropriate to ensure this policy is complied with by contacting such persons, including, but not limited to, municipal inspectors under the City of London by-laws on smoking in the workplace or in public places, or to inspectors appointed by the Minister of Health under the Tobacco Control Act.

Note, employees who witness violations are required to report the infraction to their Manager, Director or Human Resources.

## 5.0 DOCUMENT CONTROL

Date Drafted	• November 25, 2010
Date Approved	• November 25, 2010
Date Revised	• February 15, 2023
To be reviewed	• Biennially
Inquiries to Policy Owner	• Human Resources

## STAFF REPORT 2023- 22

**TO:** LMCH Board of Directors

**FROM:** Paul Chisholm, CEO

**SUBJECT:** Delegation Policy Approval

**DATE:** March 10, 2023

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### **PURPOSE:**

To inform the Human Resources and Governance Committee on the results and recommendations of the Delegation Policy which underwent an environmental scan.

### **RECOMMENDATION:**

That the LMCH Human Resources and Governance Committee:

1. Receive and approve the attached Delegation Policy;
2. Forward the policy to the Board of Directors for Approval; and
3. Authorize LMCH staff to take the necessary action to give effect to the above recommendations.

### **HUMAN RESOURCES and GOVERNANCE COMMITTEE UPDATE:**

The HRGC met on March 8th to review the Delegation Policy and the Committee approved the report.

### **OVERVIEW:**

LMCH staff have completed working on several initiatives in the areas of Governance at the request of the Board to support good governance. The Delegation Policy sets out the rules and procedures in which the Board of Directors will hear directly from tenants and members of the community. This policy is important to maintain an open line of communication between the Board of Directors and the community, including our tenant population. This report will provide an update on this initiative.

The previous Delegation Policy had not been updated since 2014 and subsequently the Board requested that an environmental scan be completed on the 13 Local Housing Corporations in Ontario as well as additional local government agencies to determine the best practices for delegations.



This matter was first reviewed by the Human Resources and Governance Committee on November 30, 2022. The HRG Committee and LMCH received an update on the progress that has been made regarding the environmental scan which has informed the updating of LMCH's Delegation Policy.

The recommendations provided by LMCH are meant to provide an opportunity for stakeholders to provide input on policies and practices to help direct the Board of Directors decision making process.

### Delegation Policy

Based on our results, the policy will include the following changes or additions based on best practices in the sector, including:

- Delegations will only take place at the Board of Directors level and not the Committee level.
- Delegation length will be set at a maximum of 5 minutes which is a reduction from 10 minutes stated in our current policy.
- Delegations will have an online option allowing presentations through online options such as Teams and Zoom. If there are multiple delegators, waiting rooms through Teams and Zoom will be set-up and monitored by the Executive Assistant.

Delegations will be managed out of the Chief Executive Office through the Executive Assistant serving as the liaison between any delegators and the Board of the Directors. The step-by-step process for delegations will remain from the previous policy which include:

1. Delegations are required to register their name and issue with the Executive Assistant at least 14 days in advance of the Board Meeting, using the *Board Delegation Form*.
2. The delegation will be referred to staff for review to determine if this is an operational concern which will be dealt with by staff or a policy concern which can be heard by the Board.
3. The Chair will have final say to declare if the delegation may present at the meeting.
4. LMCH will notify applicants in writing within 7 business days of receiving the application if the Chair has granted delegation status.
5. The Board of Directors will not hear issues specific to individuals, including but not limited to, tenants wishing to appeal LMCH decisions related to receipt of rent-geared-to-income subsidy or actions taken by LMCH under the Residential Tenancies Act.

These changes have been added to our Delegation Policy which has been attached as **Appendix A** to this report. An updated Board Delegation Form **Appendix B**.

PREPARED and RECOMMENDED BY:	STAFF CONTACT:
PAUL CHISHOLM, Chief Executive Officer	RYAN WINTER, Business Planner

## DELEGATION POLICY

### OBJECTIVE

- The objective of this policy is to provide clear guidance for individuals or groups who wish to address the board on matters involving policies which affect LMCH properties and residents.

### BACKGROUND

- London and Middlesex Community Housing (LMCH) is committed to and supports the meaningful involvement of tenants in the operations, management, and governance of their communities.
- LMCH's Board of Directors is open to receiving delegations from tenants, City Councillors, or other individuals or groups wishing to make direct representation to the Board on matters pertinent to LMCH.
- It is anticipated that most delegations will be LMCH tenants or tenant leaders who wish to address broad tenant-related policy matters.
- The Board will not permit solicitations for products or services under its Delegation Policy.
- Delegations should be mindful that the Board's role is one of setting the overall policy directions of the corporation and monitoring their achievement, rather than being operational.
- Operational matters will be referred for staff review. In accordance with LMCH's *Privacy and Confidentiality Policy*, issues identifying an individual (tenant or staff) will not be considered in public but may be heard in-camera.

### SCOPE

- This policy applies to all members of the public, including residents of LMCH properties.

### PROCEDURES

Process for Hearing Delegations:

- Processes have been developed to assist the Board and delegations to deal effectively with matters being addressed by delegations.
- Approaches vary depending up on whether the matter is an item on the Board's meeting agenda. When presenting to the Board, delegations will be accorded five (5) minutes.

- Presentations will be allowed in-person or via electronic means through either Microsoft Teams or Zoom. If multiple delegations are approved, only one delegation will be heard at a time, with the remaining delegations waiting in electronic or physical waiting rooms until it is their time to present.

Items on the Board Agenda:

- Delegations wishing to address items on the Board’s public meeting agenda will be heard at the Board meeting.
- Delegations will register with the Executive Assistant at least 24 hours before the meeting, using the *Board Delegation Form*, and will indicate the agenda item(s) on which they wish to speak.

Items not on the Board Agenda:

- Delegations are required to register their name and issue with the Executive Assistant at least 14 days in advance of the Board meeting, using the *Board Delegation Form*.
- The Chair will determine if the delegation may present at the meeting. Normally, such delegations will be referred to staff for review.
- LMCH will notify applicants in writing within 7 business days of receiving the application if they have been granted delegation status. If applicable, there will be a staff report back at the next or a subsequent Board meeting.
- Delegations are reminded that the Board considers broad policy issues rather than individual situations.
- Delegations are expected to have exhausted LMCH’s existing internal staff review processes prior to the Board considering if it will hear a matter.

<u>DOCUMENT CONTROL</u>	
Drafted:	February 8, 2023
Approved:	TBD

## Board Delegation Form

This form is used to request **Delegation Status** at a London and Middlesex Housing Corporation (LMHC) board of directors meeting, **to make a presentation to the board of directors about matters important to LMHC**. Please see LMHC's Delegation Policy for more information about the kinds of issues that the board of directors will hear. You will be given **5 minutes** for your presentation.

Your name:

Your mailing address:

Postal code:

Your phone number:

Other contact number:

Are you our tenant right now?  Yes  No

If you answered no, please tell us if you were our tenant, and the address you lived at then.

Time you were our tenant: (mm/yy)

to (mm/yy)

Your address then:

Postal code:

If your last name has changed, please tell us the name you used when you were our tenant.

Your previous name:

**Section A**—Fill out this section if you want to make a presentation to the board of directors about something that is **already on the meeting agenda**. You must return this form to the **Executive Assistant** at least **24 hours** before the board meeting. If you have **written materials** to present to the board of directors, you must give them to the Executive Assistant when you return this form. The board of directors will not read materials submitted after this deadline.

I would like to make a presentation to the board of directors about this **agenda item**:

I have written materials that I would like to present to the board of directors.

Please also complete and sign the other side of this form.

**Section B**—Fill out this section if you want to make a presentation to the board of directors about something that is **NOT on the meeting agenda**. You must return this form to the Executive Assistant at least **14 days** before the board meeting. If you have **written materials** to present to the board of directors, you must give them to the Executive Assistant when you return this form. The board of directors will not read materials submitted after this deadline.

**Note:** The board of directors is interested in **broad, tenant-related policy matters**. Operational matters (such as feedback about service) will be referred to staff for review before being considered by the board of directors. LMHC will let you know in writing within 7 business days after you return this form, if you have been granted delegation status. **If you would like to make an appeal, please complete and submit the *Request for an Appeal Form*.**

I would like to make a presentation to the board of directors about:

I have written materials that I would like to present to the board of directors.

**On the day of your presentation to the board of directors:**

- Please arrive at the board of directors meeting at least **10 minutes** before the scheduled meeting start time, and report to the Executive Assistant. He or she will let you know where you may sit, and when your presentation will be heard.
- You will have only **5 minutes** for your presentation.
- If you mention individuals in your presentation (staff members or tenants), your presentation will only be heard in camera (in private), not in the public part of the meeting.

I have read, understand and will comply with LMHC's ***Delegation Policy*** and the processes described on this form.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date