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AGENDA Corporation of the Township of Tay Council Wednesday, April 26, 2023 - 7:00 PM Council Chambers

Tay Township Municipal Office 450 Park Street, Victoria Harbour

A meeting of Council will be held Wednesday, April 26, 2023 in the Council Chambers commencing at **7:00 PM.** To view the live stream visit the Tay Township <u>Youtube Channel</u>.

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Call to Order Moment of Reflection Approval of the Agenda Resolution: That the Council Meeting Agenda for April 26, 2023, be approved. **Disclosure of Interest** Presentation / Delegations 5.1. Krystal Galbraith, Re: Bill 5 - "Stopping Harassment and Abuse by Local Leaders Act" Bill 5 - Stopping Harassment and Abuse by Local Leaders Act Presentation 5.2. Gail Hunt, President & CEO, RVH & Jason Reynar, VP Strategy, Communications & Stakeholder Relations, **RVH, Re: Partnering for a Healthy Future** RVH - Partnering for a Healthy Future Presentation 5.3. Michelle Atrache (108 Mitchells Beach Road), Re: Property Tax Interest/Penalties Relief Request (written request only) Atrache Request - 108 Mitchell's Beach Road Consent List Resolution: That the Consent List for April 26, 2023, and the Recommendations contained therein be adopted as Resolutions of Council. 6.1. Adoption of Minutes 6.1.1. Council Minutes - March 22, 2023 Council Minutes - March 22, 2023 6.1.2. Closed Session - Council Minutes - March 22, 2023

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Recommendation: That Staff Report CS-2023-34 regarding the 2023 Operating and Capital Budget be received; and		
	ne related by-law be brought forward for adoption later meeting.	
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applauds local cycling business for provincial award win 03 21 2023

8.14. Release - County of Simcoe - Warden Proclaims National Volunteer Week 04 12 2023

<u>Release - County of Simcoe - Warden Proclaims National</u> <u>Volunteer Week 04 12 2023</u>

- 9. Notice of Motions
- 10. Closed Session

10.1. Retire to Closed Session

Resolution:

That Council retire to a Closed Session at (time) p.m. under authority of the Municipal Act, Section 239(2)(b) personal matters about an identifiable individual, including municipal or local board employees.

10.2. Confidential CS-2023-35, Municipal Clerk, Re: 2022-2026 Council Committee Member Appointments

Recommendation:

That Confidential Staff Report No. CS-2023-35, dated April 26, 2023, regarding Amendments to 2022-2026 Council Committee Appointments be received; and

That Staff be provided direction regarding the proposed amendments to the appointment of Committee and Board Members; and

That the appropriate by-law to amend By-law 2022-67 – A By-law to Confirm Appointments to Committees of Council, Local Boards and various other external Committees as deemed necessary, be presented later in the meeting.

10.3. Rise from Closed Session

Resolution:

That Council rise from Closed session at (time) p.m. and return to the regular meeting.

11. By-laws

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Resolution: That By-laws 2023-16, 2023-22, 2023-23, 2023-24, 2023-25, 2023-26, 2023-27, 2023-29, and 2023-30, be read a first, second and third time and finally passed. 11.1. By-law No. 2023-16 - Being a By-law to amend 182 - 184 Schedule 'B' to By-law 2021-66, being a By-law to **Establish User Fees and Service Charges for the** Township of Tay (Cemetery Fees) By-law No. 2023-16 11.2. By-law No. 2023-22 - Being a by-law to authorize a 185 - 192 Memorandum of Understanding between the Corporation of the Township of Tay and the Corporation of the City of Barrie for the Provision of Special **Operations Services** By-law No. 2023-22 By-law No. 2023-22 Schedule A 11.3. By-law No. 2023-23 - Being a By-law to amend Zoning 193 - 195 By-Law No. 2000-57 to permit and regulate Accessory **Dwelling Units** By-law No. 2023-23 11.4. By-law No. 2023-24 - A By-law to adopt Amendment 196 - 199 No. 46 to the Official Plan for the Township of Tay (Accessory Dwelling Units) By-Law No. 2023-24 11.5. By-law No. 2023-25 - Being a By-law to amend Zoning 200 - 201 By-Law No. 2000-57 by rezoning lands described as Concession 9, Lot 6 (1767 Rosemount Road), Part 1 of R-Plan 51R-31171 (1810 Gratrix Road), (1900 Gratrix Road) PINS ending 0105(LT) and 0104 (LT) from the Rural "RU" Zone and Environmental Protection "EP" Zone to the Environmental Protection Exception Three "EP-3" Zone By-law No. 2023-25 11.6. By-law No. 2023-26 - Being a By-Law to amend By-law 202 2022-67 to confirm appointments to Committees of Council, Local Boards and various other external **Committees as deemed necessary** By-law No. 2023-26

	11.7.	By-law No. 2023-27 - Being a By-law to adopt the estimates of sums required during the year, to provide for the adoption of tax rates, and further, to provide for penalty and interest in default of payment thereof for 2023 By-law No. 2023-27 By-law No. 2023-27 Schedule A	203 - 207
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13.	Confirming By-law		
	13.1.	By-law No. 2023-28 - Confirmation By-law No. 2023-28	210
		Resolution: That By-law 2023-28, being a by-law to adopt the proceedings of the April 26, 2023, Council meeting be read a first, second and third time and finally passed.	
14.	Adjour	Adjournment	

Resolution: That this Regular Meeting of Council adjourn at (time) p.m.

Supporting Bill 5, Stopping Harassment and Abuse by Local Leaders Act. It's needed. #The WomenOfONTARIOSayNo



Ontario Private Members Bill 5

Multiple Ontario municipalities have learned the hard way in the last few years about the lack of tools in theMunicipal Act for holding councillors accountable for workplace harassment.

Currently, the most severe penalty that can be imposed on a municipal councillor is the suspension of pay for 90 days. There is no process for removing councillors from office.



Ontario Private Members Bill 5

Bill 5 seeks to address this. The Bill amends the inicipal Act, 2001 and the City of Toronto Act, 2006.

The Stopping Harassment and Abuse by Local Leaders Act will permit municipalities to direct the Integrity Commissioner to apply to the court to vacate a member's seat for failing to comply with the municipality's workplace violence or harassment policies.



Ontario Private Members Bill 5

This helps keep workplaces safe. It's accountability, through a transparent and fair process that should exist but doesn't.

Our Ask Today:

For council to pass a motion to endorse Bill 5 and write a letter of support to be sent to local MPPs, Premier Doug Ford, the Minister of Municipal Affairs and Housing, the Association of Municipalities of Ontario and MPP for Orléans, Stephen Blais.



RVH Regional Health Centre Partnering for a healthy future





For over 125 years, RVH has supported you and your families

- Open 24 hours per day, 7 days a week, 365 days a year
- Last year, RVH cared for over 13,000 patients from **North Simcoe**

Midland, Penetanguishene, Tiny, Tay and **Christian Island**

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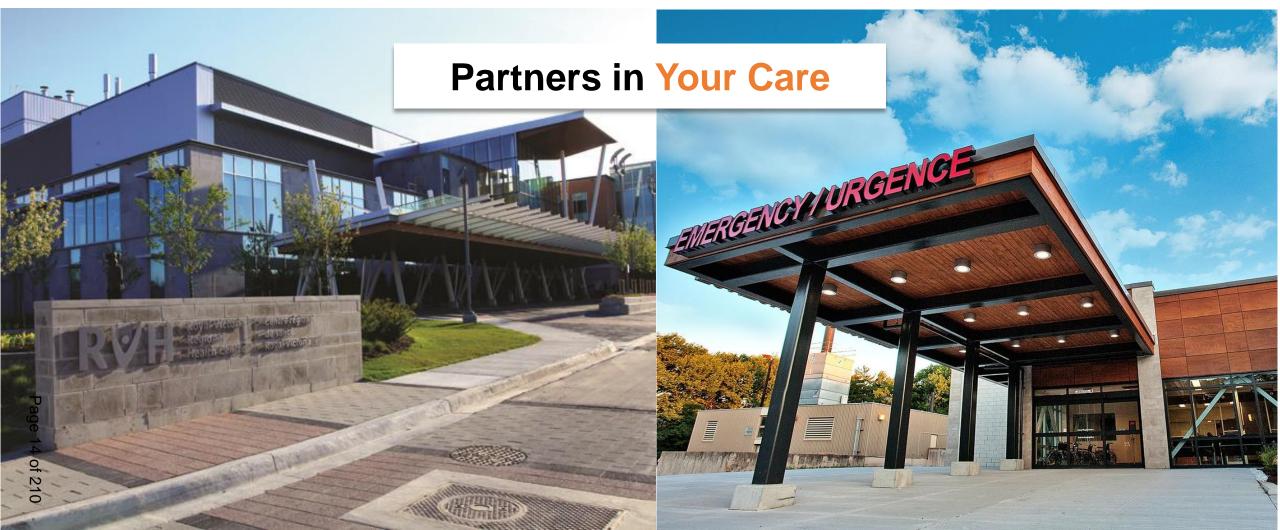
Lois Yanuzzi

- One of over 1,430 cancer patients from North Simcoe
- 13 per cent of total cancer patients



Right Royal Victoria Regional Health Centre





RVH Regional Programs Diagnostic Imaging

Almost 1,000 patients from Tay

> 9 per cent of total Tay residents



RVH Regional Program Child and Youth Mental Health

> 19 children from Tay accessed specialized mental health services last year

RVH Regional Program Cardiac Care

- Over 420 patients from Tay
- 8 Tay patients received life-saving treatment through our Code STEMI protocol





In 2022, RVH treated 2,230 Tay residents

That's **20 per cent** of the Tay Township's population

RVH is here for the residents of Tay Township

Partners in Patient Portal

> RVH

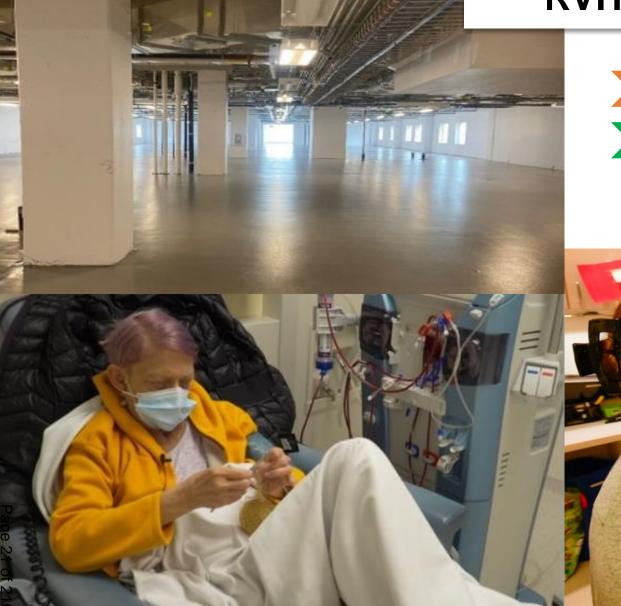
GBGH

- Collingwood General Marine Hospital
- Headwaters Health Care Centre





RVH Top Priorities



- 15-bed CCU Expansion
- > 15-chair Dialysis Clinic Expansion



RVH North Campus



- Neonatal Intensive Care ٠
- Imaging Services

Inpatient Beds

- **Operating Rooms** ٠
- Expanded Emergency



RVH Needs Your Support

Advocacy with Provincial Government

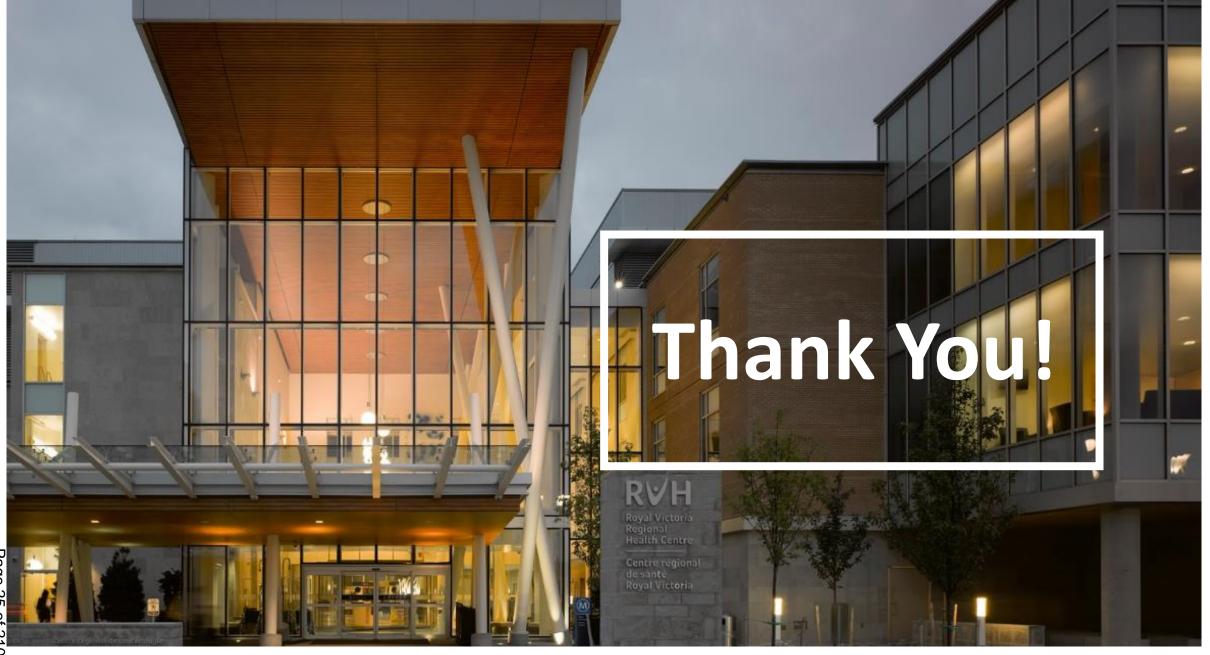
Local Municipal awareness & support for Regional Services



John Faragher

RVH Cancer Centre patient

Now in full remission and back to enjoying his life



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From:	
To:	Katelyn Johns
Subject:	Re: Interest/Penalties - 108 Mitchell"s Beach Road
Date:	April 12, 2023 1:35:30 PM
Attachments:	image001.png
	image002.png
	108 Mailing Instruction.pdf

Hi Katelyn,

Find below, I also have attached the letter from my lawyer I reference below. Please let me know if anything else is needed from me to move this along.

I am the owner of 108 Mitchells Beach Road in Victoria Harbour, since June 11, 2020. I was contacted through email by Sheryl Robitaille in early February of this year (2023), asking me to provide an updated mailing address as "all" my mail was being returned. This includes all my property tax statements and water bills since taking ownership of the residence, which were left unpaid as I never received an account number or bills from the township. Turns out the mail was being sent to an incorrect address, despite my lawyer's instruction providing the correct mailing address at time of purchase (lawyer letter attached). Sheryl informed me that it's up to the property owner to inform the township of the correct mailing address, which I did and have proof of.

On another note, the township is able to see that no property tax / water bills have been paid since I took ownership, and was seeing the mail being returned, unopened, for a couple years. I don't understand why the township didn't take initiative to confirm the mailing address they're sending is indeed the correct one and matches what was sent by my lawyer at time of purchase.

Once informed of the outstanding tax and water bills, I paid off the full outstanding balance, including any penalties, in order to show good intention. Had I received the bills to the mailing address my lawyer specified in 2020, all accounts would have been paid in full as expected. Because of all this, I believe I'm entitled to relief from the interests and penalties that were accrued. I did my role and informed the town of my correct mailing address, and have proof of this from my lawyer. The township failed to send my mail to this mailing address.

I understand that administration mistakes happen. However, despite fulfilling my responsibility as a homeowner to inform the township of the correct mailing address, this financial implication of accrued penalties has fallen on me. That isn't right.

Thank you for your consideration in this matter. Michelle Atrache

David W.R. Hammond, B.Sc., LL.B.

Barrister, Solicitor & Notary Public 3036 Preserve Drive, Oakville, Ontario, L6M 0T9 Voice: (289) 725-6069 ▲ Facsimile: (289) 725-6071 ▲ Cellular: (416) 988-6982 ▲ email: dwrhammond@bellnet.ca

June 11, 2020

By email only to KLaRose@tay.ca

Attention: Kim La Rose Deputy Treasurer Tay Township 450 Park Street, PO Box 100, Victoria Harbour, ON L0K 2A0

Dear Kim;

Re: Atrache purchase from Pt 1,2 &3, 51R9`52; Tay Pt E1/2 & W1/2 Lt 13 Con 5 Tay Pt 1,2 &3, 51R9`52; Tay 108 Mitchells Beach Road, Victoria Harbour, Ontario L0K 2A0

I am the solicitor acting for the Purchaser in the above-captioned transaction which closed successfully on June 11, 2020/

I enclose for your records a copy of the electronically registered Transfer/Deed.

Please note the address for service is <u>2428 Old Carriage Road</u>, <u>Mississauga</u>, <u>ON L5C</u> <u>3G4</u> and not as shown on the Transfer/Deed.

Thank you for your kind attention to this matter.

Yours truly;

David W.R. Hammond DWRH/cch

Encl.

The Corporation of the Township of Tay

Council Meeting Minutes

Wednesday, March 22, 2023, 7:00 p.m. Council Chamber Tay Township Municipal Office 450 Park Street Victoria Harbour, Ontario

Present:	Mayor Walker Deputy Mayor Norris Councillor Bumstead Councillor La Chapelle Councillor Larmand Councillor Raymond Councillor Talbot
Staff Present:	Andrea Fay - Chief Administrative Officer Shawn Aymer - General Manager, Protective and Development Services Saleem Sandhu - Treasurer Katelyn Johns - Municipal Clerk Elizabeth Smith – Manager of Communications and Technology
Also Present:	Linda Rodenburg – Interim Principal, Lakehead University Orillia Campus (Item 5.1.)

1. <u>Call to Order</u>

Mayor Walker called the meeting to order at 7:00 p.m.

2. <u>Moment of Silent Reflection</u>

Mayor Walker called for a moment of silent reflection.

3. <u>Approval of the Agenda</u>

Moved by Councillor Raymond Seconded by Deputy Mayor Norris

That the Council Meeting Agenda for March 22, 2023, be approved.

Carried.

4. Disclosure of Interest

There were no disclosures made.

5. <u>Presentations / Delegations</u>

5.1 <u>Lakehead University - Linda Rodenburg, Interim Principal, Orillia</u> <u>Campus, Re: Lakehead University's Orillia Campus</u>

Linda Rodenburg, Interim Principal, Orillia Campus, Lakehead University provided a presentation regarding the Lakehead University Orillia Campus. Ms. Rodenburg extended and invitation to members of Council to attend the campus for a tour.

5.2 <u>Public Comment Re: By-law No. 2023-14 Authorize Sale of Land</u> <u>- 548 Second Avenue</u>

No comments were received regarding proposed By-law 2023-14 - Authorize Sale of Land - 548 Second Avenue.

6. <u>Consent List</u>

Moved by Councillor Talbot Seconded by Councillor La Chapelle

That the Consent List for March 22, 2023 and the Recommendations contained therein be adopted as Resolutions of Council.

Carried.

6.1 Adoption of Minutes

6.1.1 2023-02-22 Council Meeting Minutes

6.1.2 2023-02-22 Planning Public Meeting Minutes

6.2 <u>Reports of Various Committees</u>

- 6.2.1 2023-03-08 Protective and Development Services Committee Minutes
- 6.2.2 2023-03-08 Operational Services Committee Minutes
- 6.2.3 2023-03-09 Corporate Services Committee Minutes
- 6.2.4 2023-03-09 Modernization and Corporate Initiatives Committee Minutes
- 6.2.5 2023-03-02 Joint Accessibility Advisory Committee Minutes
- 6.2.6 2023-03-07 Heritage Committee Minutes
- 6.2.7 2023-03-07 Community Policing Committee Minutes
- 6.2.8 2023-03-13 Seniors Advisory Committee Minutes
- 6.2.9 2023-03-14 Horticulture Committee Minutes

6.2.10 2023-03-15 Committee of Adjustment Minutes

6.2.11 2023-01-17 Library Board Minutes

6.3 <u>Municipal Report</u>

6.3.1 2023-03-01 Municipal Report

7. Staff Reports / Other Business

7.1 CS-2023-24 Treasurer, Re: Auditor Appointment

Moved by Councillor Larmand Seconded by Councillor Bumstead

That Item CS 2023-24, regarding the Auditor Appointment for 2022 be received; and

That Pahapill and Associates Chartered Professional Accountants be appointed as the Auditors for the Township of Tay for the 2022 year; and

That staff be authorized to sign any necessary documents related to this appointment.

Carried.

7.2 <u>OS-2023-14 General Manager of Operational Services, Re: 2022</u> Drinking Water Summary Reports for (O.Reg. 170/03, Schedule 22): Tay Area Drinking Water System (Large Municipal Residential), Rope Drinking Water System (Small Municipal Residential)

Moved by Councillor Talbot Seconded by Councillor Raymond

That Item OS 2023-14, dated March 22, 2023 regarding the 2022 Summary Reports for the Tay Area Drinking Water System and the Rope Drinking Water System, be received; and

That the Ministry of the Environment, Conservation and Parks (MECP) be notified of Council's receipt of the 2022 Drinking Water Summary Reports

Carried.

7.3 <u>Delegation Follow-Up</u>

7.3.1 Lakehead University - Linda Rodenburg, Interim Principal, Orillia Campus, Re: Lakehead University's Orillia Campus

Council generally discussed the delegation and directed Staff to organize a tour of the Lakehead University Orillia Campus.

8. <u>Correspondence Received</u>

- 8.1 <u>Correspondence Culture Alliance At-Large Committee</u> <u>Members Wanted - 2023-02-23</u>
- 8.2 <u>Correspondence Georgian Bay District Secondary School -</u> <u>Commencement - 2023-03 01</u>
- 8.3 Correspondence Martyr's Shrine Thank you 2023-02-27
- 8.4 <u>Release County hits the 200,000 tonnes mark for curbside</u> organics collected - 2023-03-01
- 8.5 <u>Release County launches 2023 Age-Friendly Seniors Housing</u> <u>Grant Program - 2023-02-28</u>

- 8.6 <u>Release Flags flying high across Simcoe County for ITSTARTS</u> <u>Month 2023-03-01</u>
- 8.7 <u>Release International Day for the Elimination of Racial</u> <u>Discrimination - 2023-03-13</u>

9. <u>Closed Session</u>

9.1 <u>Retire to Closed Session</u>

Moved by Councillor Talbot Seconded by Councillor Bumstead

That the Council retire to a Closed Session at 7:26 p.m. under authority of the Municipal Act, Section 239(2)(b) personal matters about an identifiable individual, including municipal or local board employees.

Carried.

9.2 <u>Confidential CS-2023-23 Municipal Clerk, Re: 2022-2026 Council</u> <u>Committee Member Appointments</u>

Council received Confidential Staff Report No. CS-2023-23, dated March 22, 2023, regarding Amendments to 2022-2026 Council Committee Appointments and provided staff with direction regarding citizen member appointments to the various Committees and Boards of Council. By-law 2023-18 to be brought forward in open session for consideration.

9.3 <u>Rise from Closed Session</u>

Moved by Councillor Talbot Seconded by Councillor Raymond

That Council rise from Closed Session at 7:34 p.m. and return to the regular meeting.

Carried.

10. <u>By-laws</u>

Moved by Councillor Larmand Seconded by Deputy Mayor Norris That By-laws 2023-14, 2023-15, 2023-17 and 2023-18 be read a first, second and third time and finally passed.

Carried.

- 10.1 By-law 2023-14 Authorize Sale of Lands 548 Second Avenue
- 10.2 <u>By-law 2023-15 Amend By-law 2017-127 Procedure By-law</u> (Committee of the Whole)
- 10.3 <u>By-law 2023-17 Appoint Tile Drainage Inspectors Shawn</u> <u>Berriault & Taylor Craig</u>
- 10.4 <u>By-law 2023-18 Amend By-law 2022-67 Committee and Board</u> <u>Members Appointments</u>

11. Notice of Motions

There were no items for this portion of the Agenda.

12. <u>Council Announcements</u>

Individual Members of Council advised of various items, events and activities in the Municipality for information purposes.

12.1 <u>Verbal Update, Mayor Walker, Re: Thomson Terminals</u> <u>Recognition - April 6, 2023</u>

Mayor Walker announced that a reception would be held on April 6, 2023 at 11:00 a.m. in Council Chambers to recognize the work of Jim and Sally Thomson of Thomson Terminals, Eric Conroy, Wayne Coombes and Friends of Keewatin for their on-going generosity in providing toys for children in need in North Simcoe.

13. Confirming By-law

13.1 By-law 2023-19 Confirmation

Moved by Councillor Raymond Seconded by Councillor Bumstead

That By-law 2023-11 being a by-law to adopt the proceedings of the March 22, 2023, Council meeting be read a first, second and third time and finally passed.

Carried.

14. Adjournment

Moved by Councillor La Chapelle Seconded by Councillor Talbot

That this Regular Meeting of Council adjourn at 7:48 p.m.

Carried.

Mayor

Municipal Clerk

The Corporation of the Township of Tay

Planning Act Public Meeting Minutes

Wednesday, March 22, 2023, 6:30 p.m. Council Chamber Tay Township Municipal Office 450 Park Street Victoria Harbour, Ontario

- Present: Mayor Walker Deputy Mayor Norris Councillor Bumstead Councillor La Chapelle Councillor Larmand Councillor Raymond Councillor Talbot
- Staff Present:Andrea Fay Chief Administrative Officer
Shawn Aymer General Manager, Protective and
Development Services
Shawn Berriault General Manager, Operational
Services
Saleem Sandhu Treasurer
Katelyn Johns Municipal Clerk
Elizabeth Smith Communications Specialist
Todd Weatherell Manager of Planning and
Development Services

1. <u>Call to Order</u>

2. <u>Disclosure of Interest</u>

There were no disclosures made.

3. Statement of Public Notice

3.1 <u>Notice of Public Meeting for Proposed Zoning By-law Amendment</u> (1767 Rosemount Road, 1810 Gratrix Road & 1900 Gratrix <u>Road</u>)

The Chair advised that this is a Public Meeting of Council held in compliance with 34 of the Planning Act. The proposed application this evening is with respect to an Amendment to Zoning By-law Number 2000-57, as amended. The application that is subject to the public hearing this evening is municipally known as 1767 Rosemount Road, 1810 Gratrix Road, 1900 Gratrix Road and a parcel of land identified as Roll Number 4353-040-005-54905.

All persons present will be given the opportunity to ask questions and comment on the proposed zoning by-law amendment. Any person who did not receive notice of the public meeting and requires notice of the passage of a Zoning By-law regarding the application should leave their name and address with the Clerk.

Tonight's meeting will have two parts. The first part consists of the Public Meeting as required under the Planning Act where Council will consider and hear comments on the proposal. This is the opportunity for Council to hear from residents who wish to express their comments and/or concerns on the proposed land use changes. Everyone who wishes to speak and ask a question or comment on the application will be given the opportunity. At the conclusion of the Public Meeting, Council will reconvene into its regular session. This portion of the meeting is open to the public and you are invited to stay and listen to the Council meeting. However, no further opportunity for public comment will be provided on the application. The application before us will be voted at an upcoming Council meeting. A recommendation report will be prepared and will be presented to Council from staff after the public meeting has been held.

In accordance with the Planning Act, if a person or public body does not provide comments at the Public Meeting or a written submission prior to the final Council decision the Ontario Land Tribunal may, on an appeal; dismiss the appeal on the basis that no concerns were raised during the public process. If you have concerns or comments regarding the Application, they should be expressed this evening.

Todd Weatherell, Manager of Planning and Development Services advised that a notice of public meeting for the proposed Zoning By-law Amendment (1767 Rosemount Road, 1810 Gratrix Road & 1900 Gratrix Road) was issued on March 2, 2023 and described the method by which notice of this meeting was given and is of the opinion that the requirements of the Planning Act to provide notice have been met.

4. Planning Act Public Meeting

4.1 <u>Manager of Planning and Development Services, Re: Proposed</u> <u>Zoning By-law Amendment (1767 Rosemount Road, 1810</u> <u>Gratrix Road & 1900 Gratrix Road</u>)

Todd Weatherell, Manager of Planning and Development Services provided a Power Point presentation regarding the proposed Zoning By-law Amendment (1767 Rosemount Road, 1810 Gratrix Road & 1900 Gratrix Road).

Mr. Weatherell noted that one piece of correspondence was received just prior to the Public Meeting from Talpines POA regarding the proposed amendment.

4.2 <u>Question & Clarification Period - Public</u>

The Chair inquired if there were any questions or clarification from the audience in regards to this matter and outlined the process for those who wish to make an oral statement. The following public comments were presented:

Peter Lindeman (1793 Gratrix Road) - Provided comment in favour of increasing environmental protections of the subject properties, however questioned the owner's 'end goal' with rezoning and joining the lands. Mr. Weatherell confirmed that any future applications to rezone the subject lands would be subject to all standard approval processes.

Walter Czuba (1762 Rosemount Road) - Provided comment regarding his concern for wildlife that live on the subject lands.

Mr. Weatherell confirmed that this rezoning would increase the environmental protection of the lands.

4.3 Question & Clarification Period - Council

The Chair inquired if there were any questions or clarification from members of Council in regard to this matter. The following comments were presented:

Councillor Raymond inquired regarding the processes required for any further rezoning of the subject lands. Mr. Weatherell confirmed that any future applications for rezoning would be subject to the standard processes required by the Planning Act.

Mayor Walker confirmed that the proposed rezoning was a requirement of the Ontario Land Tribunal decision.

Deputy Mayor Norris stated that with the proposed rezoning, any removal of trees would be under the supervision of the County of Simcoe and the Ministry of Natural Resources.

5. Final Statement by the Chair

The Chair noted that there were no further comments related to the proposed Zoning By-law Amendment and at that time closed the public meeting. The Chair reminded those present that if they wish to receive notice of passing of the proposed Zoning By-law Amendment with respect to this Application that they should leave their name, address, and email address with the Township Planning Department. This can be done by emailing the planning department at <u>Planning@tay.ca</u> or by calling 705-534-7248 extension 220.

6. Adjournment

Moved by Councillor Talbot Seconded by Councillor Raymond

That this Planning Act Public Meeting adjourn at 6:52 p.m.

Carried.

Mayor

Municipal Clerk

The Corporation of the Township of Tay

Special Council Meeting Minutes

Monday, March 27, 2023, 9:00 a.m. Council Chamber Tay Township Municipal Office 450 Park Street Victoria Harbour, Ontario

- Council Present: Mayor Walker Deputy Mayor Norris Councillor Bumstead Councillor La Chapelle Councillor Larmand Councillor Raymond
- Council Absent: Councillor Talbot

Staff Present:Andrea Fay - Chief Administrative Officer
Shawn Aymer - General Manager, Protective and
Development Services
Shawn Berriault - General Manager, Operational
Services
Saleem Sandhu - Treasurer
Katelyn Johns - Municipal Clerk
Elizabeth Smith - Manager of Communications and
Technology
Lindsay Bryant - Manager of Human Resources (Item
6.2 only)

1. Call to Order

Mayor Walker called the meeting to order at 9:00 a.m.

2. <u>Approval of the Agenda</u>

Moved by Councillor Raymond Seconded by Deputy Mayor Norris

That the Special Council Meeting Agenda for March 27, 2023, be approved.

Carried.

3. Disclosure of Interest

Councillor Raymond declared a pecuniary interest related to Item 5.1. CS-2023-25 Treasurer, Re: 2023 Operating and Capital Budget Second Draft, specifically the Wages and Benefits portion of the Budget, as he has a family member employed by the Township.

Councillor Bumstead declared a pecuniary interest related to Item 5.1. CS-2023-25 Treasurer, Re: 2023 Operating and Capital Budget Second Draft, specifically the Wages and Benefits portion of the Budget, as she has a family member employed by the Township.

4. <u>Presentations/Delegations</u>

4.1 <u>Heather Delong, Head Librarian & Heather Walker, Library Board</u> <u>Chair, Re: Library Board Budget Presentation</u>

Heather Delong, Head Librarian and Heather Walker, Library Board Chair provided a presentation regarding the 2023 Library Board Budget.

Council recessed at 9:30 a.m. and reconvened at 9:40 a.m.

Councillor La Chapelle arrived at 9:35 a.m.

5. <u>Staff Reports / Other Business</u>

Council recessed at 10:41 a.m. and reconvened at 10:57 a.m.

5.1 <u>CS-2023-25 Treasurer, Re: 2023 Operating and Capital Budget</u> <u>Second Draft</u>

Moved by Councillor La Chapelle Seconded by Councillor Raymond

That Staff Report CS-2023-25 regarding the 2023 Operating and Capital Budget be received; and

That the 2023 OCIF grant in the amount of \$961,508 be used to fund a portion of the Victoria Harbour Wastewater Plant upgrades, as outlined in Item CS-2023-25; and

That the 2023 budget request funding levels be included within the draft budget, as follows:

- Severn Sound Environmental Association \$135,749
- Georgian Bay General Hospital \$25,000
- Georgian Bay Physician Recruitment \$12,500, as a onetime grant for 2023 only
- Culture Alliance in the Heart of Georgian Bay \$10,000
- Georgian Bay Forever \$15,000, to be used on the frontage of municipally-owned properties only; and

That the 2023 funding request from the Economic Development Corporation of North Simcoe (EDCNS) be granted at 50% in the amount of \$33,990; and

That the vacant lot water and wastewater infrastructure fees be approved as outlined in Item CS-2023-25; and

That the tax rate target for Staff be set to a blended 4%; and

That the 2023 Operating and Capital Budget be approved, with the exception of Wages and Benefits as outlined in Item CS-2023-25 and forwarded to the next regular Council meeting for adoption.

Carried.

Having previously declared a pecuniary interest (see Item 3), Councillor Raymond did not participate in discussion related to Wages and Benefits during Item 5.1 CS-2023-25 – 2023 Operating and Capital Budget Second Draft.

Having previously declared a pecuniary interest (see Item 3), Councillor Bumstead did not participate in discussion related to Wages and Benefits during Item 5.1 CS-2023-25 – 2023 Operating and Capital Budget Second Draft. Moved by Deputy Mayor Norris Seconded by Councillor Larmand

That the Wages and Benefits portion of the budget, as outlined in Staff Report CS-2023-25, be approved and forwarded to the next regular Council meeting for adoption.

Carried.

6. <u>Closed Session</u>

6.1 Retire to Closed Session

Moved by Councillor La Chapelle Seconded by Deputy Mayor Norris

That Council retire to a Closed Session at 11:45 a.m. under authority of the Municipal Act, Section 239(2)(b) personal matters about an identifiable individual, including municipal or local board employees and 2(d) labour relations or employee negotiations.

Carried.

6.2 <u>Confidential CS-2023-29 Manager of Human Resources, under</u> <u>authority of the Municipal Act, S. 239 2(b) personal matters</u> <u>about an identifiable individual, including municipality or local</u> <u>board employees and 2(d) labour relations or employee</u> <u>negotiations</u>

Moved by Deputy Mayor Norris Seconded by Councillor Bumstead

That the recommendations contained within Confidential Report CS 2023-29, regarding personal matters about an identifiable individual and labour relations or employee negotiations; be received; and

That staff proceed with converting 2 contract Roads/Parks Operator/Labourer employees to 2 full-time, permanent Roads/Parks Operator/Labourer employees effective immediately.

Carried.

6.3 <u>Rise from Closed Session</u>

Moved by Councillor La Chapelle Seconded by Councillor Larmand

That Council rise from Closed Session at 11:54 a.m. and return to the regular meeting.

Carried.

7. <u>By-laws</u>

There were no items for this portion of the Agenda.

8. <u>Confirming By-law</u>

8.1 By-law No. 2023-20 Confirmation

Moved by Councillor La Chapelle Seconded by Councillor Bumstead

That By-law 2023-20 being a by-law to adopt the proceedings of the March 27, 2023 Special Council meeting be read a first, second and third time and finally passed.

Carried.

9. Adjournment

Moved by Councillor Larmand Seconded by Councillor Raymond

That this Special Meeting of Council adjourn at 11:56 a.m.

Carried.

Chair

Minutes Recorder



MINUTES Special Council Meeting

9:30 AM - Thursday, April 13, 2023 Council Chambers Tay Township Municipal Office 450 Park Street, Victoria Harbour

A Special Council meeting took place on Thursday, April 13, 2023 at 9:30 AM in the Council Chambers.

- Present: Mayor Ted Walker Deputy Mayor Barry Norris Councillor Sylvia Bumstead Councillor Gerard La Chapelle Councillor Judy Larmand Councillor Paul Raymond
- Absent: Councillor Sandy Talbot
- Staff Present: Andrea Fay, CAO/Deputy Clerk Shawn Aymer, General Manager, Protective & Development Services/Fire Chief Shawn Berriault, General Manager, Operational Services Saleem Sandhu, Treasurer Elizabeth Smith, Manager of Communications and Technology
- 1. Call to Order Mayor Walker called the meeting to order at 9:32 a.m.
- Approval of the Agenda
 Resolution:
 Moved by Councillor Paul Raymond
 Seconded by Councillor Judy Larmand

That the Special Council meeting agenda for April 13, 2023, be approved.

Carried

3. Disclosure of Interest There were no disclosures made.

4. Closed Session

4.1. Retire to Closed Session

Resolution: Moved by Councillor Sylvia Bumstead Seconded by Deputy Mayor Barry Norris

That Council retire to Closed Session at 9:34 a.m. under authority of the Municipal Act, Section 239(3.1), a meeting held for the purpose of educating or training members of Council.

Carried

4.2. Emergency Management Ontario Senior & Elected Official Workshop

Katie Gibbs, Emergency Management Ontario, provided a presentation regarding Emergency Management Ontario Senior & Elected Official Workshop.

Council recessed at 10:50 a.m. and reconvened at 11:10 a.m.

4.3. Rise from Closed Session

Resolution: Moved by Councillor Sylvia Bumstead Seconded by Deputy Mayor Barry Norris

That Council rise from Closed Session at 12:12 p.m. and return to the open Special Council meeting.

Carried

5. Confirming By-law

5.1. By-law No. 2023-21 - Confirmation

Resolution: Moved by Councillor Paul Raymond Seconded by Deputy Mayor Barry Norris

That By-law 2023-21, being a by-law to adopt the proceedings of the April 13, 2023, Special Council meeting be read a first, second and third time and finally passed.

Carried

By-law No. 2023-21

6. Adjournment Resolution:

Moved by Councillor Judy Larmand Seconded by Deputy Mayor Barry Norris

That this Special Council meeting adjourn at 12:14 p.m.

Carried

Mayor

Municipal Clerk

Minutes of the Tay Township Public Library Board

Regular Meeting Held via Video and Telephone Conference

Tuesday, February 21, 2023 1:00 p.m.

Present:	Janet McFadden, Vice Chair Heather Walker, Board Chair Laura Adams Gerard LaChapelle, Council Representative
Staff Present:	Heather Delong, Head Librarian
Attending:	Andrea Fay, Library CEO, Tay Township CAO Katelyn Johns, Municipal Clerk, Tay Township Saleem Sandhu, Treasurer, Tay Township

Regrets: Sandy Talbot, Council Representative

1. Call to Order:

The meeting was called to order at 1:00 p.m. by Heather Walker.

2. <u>Confirmation of Agenda:</u>

Moved By: Laura Adams Seconded By: Janet McFadden That the February 21, 2023 Tay Township Public Library Board Regular Meeting agenda be approved.

Carried.

3. <u>Disclosure of Interest:</u>

None were presented.

4. <u>Minutes:</u>

4.1 <u>Minutes of the January 17, 2023 Regular Board Meeting.</u> Moved by: Janet McFadden Seconded by: Laura Adams That the minutes of the January 17, 2023 Regular Board meeting be approved as circulated.

Carried.

February 21, 2023

5. <u>Business arising from the Minutes:</u>

Question regarding some of the items shown in the previous months accounts, as to their accuracy.

6. <u>Accounts</u>

6.1 January 2023 Moved By: Janet McFadden Seconded By: Laura Adams That the January 2023 accounts in the amount of \$1,520 be received.

Carried.

7. Activity Reports:

7.1 January 2023 Activity Report

The Board received for information the January 2023 Activity report.

8. Statistics:

8.1 Branch Statistics January 2023

The Board received for information the January 2023 statistics.

8.2 Historical Statistics

The Board received the Historical statistics chart for information and discussion re additional information to include, as well as information not required.

9. Items for Information:

9.1 Tay Library Newsletter February 2023

The Board received the February newsletter for information.

10. Other Business:

10.1 <u>Library 2023 Draft Budget</u> Moved by: Janet McFadden Seconded by: Laura Adams

- That the Library Board approve the 2023 capital and operating budget and forward same to Council for consideration with the following amendments:
- Adjusting salaries and wages to actuals -\$20,538
- IT support removal (salaries and benefits allocated cost) -\$2,275
- Reduce programming to \$600 (\$200 per branch) -\$4,781
- Reduce transfer from Operating to Capital to \$18,175 -\$1000

Carried.

February 21, 2023

11. Adjournment:

Moved By: Janet McFadden Seconded By: Laura Adams That the meeting of the Tay Township Public Library Board adjourn at 2:34 p.m.

Carried.

Chair: Heather Walker Head Librarian: Heather Delong

February 21, 2023



MINUTES Horticulture Committee Meeting

2:00 PM - Tuesday, April 11, 2023

Admin Boardroom, 450 Park Street, Victoria Harbour

The Horticulture Committee met in the Admin Boardroom on Tuesday, April 11, 2023 at 2:00 PM.

Present:	Member Marina Josey	
	Member Susan Read	
	Member Jean Rutherford	
	Member Ann Todt	
	Member Mary Warnock	
	Member Jeff Argue	

- Absent: Councillor Sandy Talbot Member Joslyn McDowell
- Staff Present: Bryan Anderson, Manager of Parks, Recreation and Facility Services
- 1. Call to Order meeting called to order at 2:03pm
- Approval of the Agenda
 Recommendation:
 Moved by Member Marina Josey
 Seconded by Member Jean Rutherford

That the Horticulture Committee Agenda for April 11, 2023, be approved.

Carried.

- 3. Disclosure of Interest
- 4. Committee Business

4.1. Approval of March 14, 2023 meeting minutes

March 14, 2023 meeting minutes approved.

4.2. Gardens at Municipal Office – workplan/date

The Committee decided that they will work on the clean-up for the gardens at the Municipal Office on Monday April 24th.

4.3. Tay Blooms Newsletter

The Committee was very pleased with the turnout of the newsletter. Big Thanks to Ann for taking on this project for the Committee. <u>TTHC Spring 2023 Newsletter 3.25.1</u>

4.4. Farm equipment – move to Waverley?

The Committee spoke to the volunteer group in Waverley who helps with the gardens in that community. They would like to see the farm equipment from the Municipal Office garden re-purposed to a garden in Waverley if possible. Township Staff will investigate the possibility of this move.

4.5. Tay Blooms event - Saturday June 3rd

Township Staff will contact the County of Simcoe about the availability of Mulch for the event. Committee members will check to see if SSEA can attend again this year. Township Staff to work on promoting the event.

4.6. Assembly of Bike Baskets (date, who can help)

Committee members will assemble the flowers for the bikes Thursday April 27th.

5. Correspondence Received

5.1. Portarama request (email)

The Committee discussed whether they are able to attend the event again this year. Several Committee members are away the Victoria Day long weekend. Marina thinks she will be able to attend and can man a booth alone. She will confirm by next meeting.

5.2. Shrine Letter

The Committee received a letter from the Shrine regarding the 'Friendship Garden' on their property. The Shrine would like the 'Tay' garden cleaned-up by June 5th. The Committee will make sure the garden is looking great by this date.

- 6. Next Meeting: May 9th, 2023, 2:00pm Admin Boardroom
- 7. Adjournment

Recommendation: Moved by Member Jean Rutherford Seconded by Member Mary Warnock

That this Horticulture Committee meeting adjourn at 3:21 p.m.

Carried

MINUTES Community Policing Committee Meeting



7:00 PM - Tuesday, April 11, 2023

Council Chambers, 450 Park Street, Victoria Harbour

The Community Policing Committee met in the Council Chambers on Tuesday, April 11, 2023 at 7:00 PM.

Present:	Councillor Sylvia Bumstead
	Member Robert Hartwell
	Member Beverley Hostyn
	Member Harry Joel Rumney
	Member David Wark

Absent:

Staff Present: Justin Rounds, Supervisor, Municipal Law Enforcement Services

- 1. Call to Order Chair D. Wark Called meeting to order at 7:00pm
- 2. Approval of the Agenda The committee adopts the agenda as prepared.
- 3. Disclosure of Interest None were presented at this time.

4. Committee Business

4.1. Election of Vice Chair

J. Rumney nominated himself with no contest. J. Rumney was unanimously voted as Vice chair.

4.2. Organization and discussion on the future of Tay CPC

Members of CPC discussed what programs and educational presentations the public may be interested in including crime prevention, internet security scams and focused speed enforcement.

PC J. Milne stated that it would be possible to have a guest speaker

present various topics from OPP. Further planning would be required.

J. Rumney requested that the township provide communication for the public regarding CPC meetings and look into the possibility to host meetings at different locations throughout the township.

R.Hartwell discussed his interest in having a presentation on mental health awareness.

4.3. Motion to add OPP monthly report to future Tay CPC agendas.

PC J. Milne to present monthly report on police activity throughout the township of Tay.

- 5. Correspondence Received No correspondence received at his time.
- 6. Next Meeting: May 9, 2023
- 7. Adjournment

Recommendation: Moved by Member Robert Hartwell Seconded by Member Harry Joel Rumney

That this Community Policing Committee meeting adjourn at 8:30 p.m.

Carried



MINUTES Committee of the Whole Meeting

9:00 AM - Wednesday, April 12, 2023

Virtual Meeting

The Committee of the Whole met virtually on Wednesday, April 12, 2023 at 9:00 AM.

- Present: Mayor Ted Walker Deputy Mayor Barry Norris Councillor Sylvia Bumstead Councillor Gerard La Chapelle Councillor Judy Larmand Councillor Paul Raymond
- Absent: Councillor Sandy Talbot
- Staff Present: Andrea Fay, CAO/Deputy Clerk Shawn Aymer, General Manager, Protective & Development Services/Fire Chief Shawn Berriault, General Manager, Operational Services Saleem Sandhu, Treasurer Katelyn Johns, Municipal Clerk Elizabeth Smith, Manager of Communications and Technology Bryan Anderson, Manager of Parks, Recreation and Facility Services Lindsay Bryant, Manager of Human Resources Jason Craig, Manager of Building Services/CBO Rick Wayne, Manager of Roads and Fleet Services Justin Rounds, Supervisor, Municipal Law Enforcement Services Teslyn Heron, Planning Technician Lacey McKay, Senior Executive Assistant
- 1. Call to Order

Mayor Walker called the meeting to order at 9:01 a.m.

2. Approval of the Agenda Resolution: Moved by Deputy Mayor Barry Norris Seconded by Councillor Gerard La Chapelle

That the Committee of the Whole Agenda for April 12, 2023, be approved. Carried

3. Disclosure of Interest

Deputy Mayor Norris declared a pecuniary interest related to Item 7.2. CS-2023-30, Treasurer, Re: 2023 Grant Applications Municipal Grants, as he is a member of the Royal Canadian Legion, Waubaushene Branch.

Councillor Raymond declared a pecuniary interest related to Item 7.2. CS-2023-30, Treasurer, Re: 2023 Grant Applications Municipal Grants, as his wife is Co-Chair of the Port McNicoll Recreation Committee and he volunteers with the Port McNicoll Anglers and Hunters.

4. Presentations / Delegations

4.1. Carla Aedo & Warren Conlan (346 Robins Point Road), Re: Property Tax Interest/Penalties Relief Request

Carla Aedo & Warren Conlan (346 Robins Point Road) provided a presentation to Committee of the Whole regarding a Property Tax Interest/Penalties Relief Request.

Mayor Walker turned the floor over to Deputy Mayor Norris to Chair the Protective and Development Services portion of the meeting. <u>Correspondence from Carla Aedo & Warren Conlan (346 Robins Point</u> Road), Re: Property Tax Interest/Penalties Relief Request

5. Protective & Development Services - Staff Reports

5.1. PDS-2023-22, Planning Technician, Re: Additional Dwelling Units (ADU's)

Recommendation: Moved by Councillor Paul Raymond Seconded by Councillor Gerard La Chapelle

That Item PDS 2023-22 dated April 12, 2023, regarding Additional Dwelling Units (ADU's) be received; and

That Official Plan Amendment 46 and Zoning By-Law Amendment 2023-ZBA-02 to allow for ADU's within the Township be approved; and

That the appropriate by-laws be brought forward at a future meeting for Council's consideration.

Carried

PDS-2023-22 PDS-2023-22 Schedule 1 PDS-2023-22 Schedule 2

5.2. PDS-2023-24, Manager of Planning and Development Services, Re: Zoning By-law Amendment - 1767 Rosemount Road, 1810 Gratrix Road and a parcel of land identified as Roll Number 4353-040-005-54905 (Artenosi)

Recommendation: Moved by Councillor Sylvia Bumstead Seconded by Councillor Judy Larmand

That Item No. PDS-2023-24, dated April 12, 2023 regarding 1767 Rosemount Road, 1810 Gratrix Road, 1900 Gratrix Road and a parcel of land identified as Roll Number 4353-040-005-54905, be received, and

That a portion of the lands known as 1767 Rosemount Road, 1810 Gratrix Road, 1900 Gratrix Road and a parcel of land identified as Roll Number 4353-040-005-54905, be rezoned from the Rural "RU" Zone and Environmental Protection "EP" Zone to the Environmental Protection Exception Three "EP-3" Zone to satisfy Ontario Land Tribunal Settlements for Applications 2021-B-09, 2021-B-10, and 2021-B-11; and

That the portion of the lots occupied with the residential use, be separated from the retained application lands and assembled by the Appellant under the same title as other parcels owned by the Appellant adjoining or in close proximity to the Application Lands; and

That the appropriate By-law be brought forward for Council's consideration.

Carried

PDS-2023-24 PDS-2023-24 Schedule 1 PDS-2023-24 Schedule 2 Submission to Council re Artenosi application

5.3. PDS-2023-26, General Manager of Protective and Development Services/Fire Chief/CEMC, Re: Special Operations Services Agreement

Recommendation: Moved by Councillor Gerard La Chapelle Seconded by Councillor Paul Raymond That Item PDS-2023-26, dated April 12 2023, regarding a Special Operations Services Memorandum of Understanding (MOU), be received; and

That the necessary by-law be presented to Council for consideration to authorize the Mayor and Clerk to enter into a multi-year Special Operations Services MOU between The Corporation of The City of Barrie and The Corporation of The Township of Tay that extends from the years 2023 to 2027.

Carried

PDS-2023-26 PDS-2023-26 Schedule 1

5.4. PDS-2023-27, Manager of Planning and Development Services, Re: Monthly Activity Report

Recommendation: Moved by Councillor Judy Larmand Seconded by Councillor Sylvia Bumstead

That Item PDS 2023-27 dated April 12, 2023, regarding the Monthly Activity Report – Planning, be received.

Carried

PDS-2023-27

5.5. PDS-2023-29, Supervisor of Municipal Law Enforcement Services, Re: Monthly Activity Report

Recommendation: Moved by Councillor Sylvia Bumstead Seconded by Councillor Paul Raymond

That Item PDS-2023-29 dated April 12, 2023, regarding MLEO Monthly Activity Report, be received.

Carried

PDS-2023-29

5.6. PDS-2023-30, Manager of Building Services/Chief Building Official, Re: Monthly Activity Report

Recommendation: Moved by Councillor Judy Larmand Seconded by Councillor Gerard La Chapelle

That Item PDS-2023-30, dated April 12, 2023, regarding the Monthly Activity Report – Building Services Division, be received.

Carried

PDS-2023-30

5.7. PDS-2023-28, Deputy Fire Chief/Fire Prevention Officer, Re: Monthly Activity Report

Recommendation: Moved by Councillor Sylvia Bumstead Seconded by Councillor Paul Raymond

That Item PDS-2023-28, dated April 12, 2023, regarding Deputy Fire Chief/Fire Prevention Officer Monthly Activity Report, be received.

Carried

PDS-2023-28

5.8. PDS-2023-25, General Manager of Protective and Development Services/Fire Chief/CEMC, Re: Monthly Activity Report

Recommendation: Moved by Councillor Gerard La Chapelle Seconded by Councillor Sylvia Bumstead

That Item PDS-2023-25, dated April 12, 2023, regarding Monthly Activity Report – General Manager/Fire Chief/CEMC be received.

Carried

PDS-2023-25

Deputy Mayor Norris returned the floor to Mayor Walker who then turned it over to Councillor Raymond to Chair the Operational Services portion of the meeting.

6. Operational Services - Staff Reports

6.1. OS-2023-14, Manager of Parks, Recreation and Facility Services, Re: Monthly Activity Report

Recommendation: Moved by Deputy Mayor Barry Norris Seconded by Councillor Sylvia Bumstead

That Item OS-2023-14 dated April 12, 2023, regarding the Monthly Activity Report – Manager of Parks, Recreation and Facilities Services, be received.

Carried

<u>OS-2023-14</u>

6.2. OS-2023-15, Manager of Roads and Fleet Services, Re: Monthly Activity Report

Recommendation:

Moved by Councillor Judy Larmand Seconded by Deputy Mayor Barry Norris

That Item OS-2023-15 dated April 12, 2023, regarding the Monthly Activity Report for the Manager Roads and Fleet Services be received.

Carried

<u>OS-2023-15</u>

6.3. OS-2023-16, General Manager of Operational Services, Re: Monthly Activity Report

Recommendation: Moved by Councillor Judy Larmand Seconded by Deputy Mayor Barry Norris

That Item OS-2023-16 dated April 12, 2023, regarding the Monthly Activity Report for the General Manager, Operational Services be received.

Carried

<u>OS-2023-16</u>

Councillor Raymond turned the floor over to Mayor Walker who then turned it over to Councillor La Chapelle to Chair the Corporate Services portion of the meeting.

7. Corporate Services - Staff Reports

7.1. CS-2023-22, Municipal Clerk, Re: Amendments to Fees and Service Charges By-law - Cemetery Fees

Recommendation: Moved by Deputy Mayor Barry Norris Seconded by Councillor Sylvia Bumstead

That Item CS-2023-22, dated April 12, 2023, regarding Amendments to the User Fees and Service Charges By-law 2021-66 (Schedule 'B' – Cemetery Price List), be received; and

That the fee increases outlined in Item CS-2023-22 be approved; and

That the appropriate by-law be presented at the next regular Council meeting for consideration.

Carried

<u>CS-2023-22</u> <u>CS-2023-22 Schedule 1</u>

7.2. CS-2023-30, Treasurer, Re: 2023 Grant Applications

Recommendation: Moved by Deputy Mayor Barry Norris Seconded by Councillor Judy Larmand

That Staff Report CS-2023-30 regarding the 2023 Municipal Grant Applications be received; and

That grants be approved for the 2023 budget year as follows:

- Coldwater & District Agricultural Society \$200
- Georgian Bay Cancer Support Centre \$1,900
- Port McNicoll Anglers & Hunters \$1,000
- Portarama Family Festival \$2,500
- Royal Canadian Legion Waubaushene Branch \$1,300
- Sistema Huronia Music Academy \$1,000
- Talpines Property Owners Association \$1,000
- Tay Bike Day \$500
- Tay Canada Day Committee \$3,000
- The Karma Project \$2,000
- Warm and Cozy Children's Charity \$1,000
- Waubaushene Santa Claus Parade \$1,300
- Port McNicoll Cemetery Insurance \$1,344
- Port McNicoll Lion's Club in lieu of taxes \$1,890
- Graduation Awards \$1,600
- Simcoe County Bursary Program \$1,000
- Legion Donations Remembrance Day \$400
- Community Reach \$2,066

Carried

CS-2023-30 2023 Municipal Grant Applications final (1)

7.3. CS-2023-31, Treasurer, Re: 2022 Council and Committees Remuneration and Expenses

Recommendation: Moved by Deputy Mayor Barry Norris Seconded by Councillor Paul Raymond

That Item CS-2023-31, dated April 12, 2023, regarding the 2022 Remuneration and Expenses for Council and Committees be received.

Carried

<u>CS-2023-31</u> <u>CS-2023-31 Schedule 1</u>

7.4. CS-2023-33, Manager of Human Resources, Re: Annual Staff

Appreciation Day - Municipal Office Closure

Recommendation: Moved by Councillor Judy Larmand Seconded by Councillor Sylvia Bumstead

That Item CS-2023-33, dated April 12, 2023, regarding the Annual Staff Appreciation Day - Municipal Office Closure be received; and

That the CAO be authorized to close the Municipal Office at 12:30 pm on August 17, 2023, for Staff Appreciation Day (rain or shine), to allow staff to attend the event as generally outlined in Item CS-2023-33; and

That the CAO be authorized to close the Municipal Office at 12:30 pm on Staff Appreciation Day on an annual basis if the Staff Appreciation Day event has received annual budgetary approval to take place.

Carried

<u>CS-2023-33</u>

7.5. CS-2023-28, Municipal Clerk, Re: Monthly Activity Report

Recommendation: Moved by Deputy Mayor Barry Norris Seconded by Councillor Sylvia Bumstead

That Item CS-2023-28, dated April 12, 2023, regarding the Monthly Activity Report – Municipal Clerk, be received.

Carried

<u>CS-2023-28</u>

7.6. CS-2023-32, Manager of Human Resources, Re: Monthly Activity Report

Recommendation: Moved by Councillor Judy Larmand Seconded by Councillor Paul Raymond

That Item CS-2023-32, dated April 12, 2023, regarding the Monthly Activity Report for Human Resources, be received.

Carried

<u>CS-2023-32</u>

7.7. CS-2023-34, Chief Administrative Officer, Re: Monthly Activity Report

Recommendation: Moved by Councillor Paul Raymond Seconded by Deputy Mayor Barry Norris

That Item CS-2023-34, dated April 12, 2023, regarding the Monthly Activity Report for the Office of the Chief Administrative Officer, be received.

Carried

<u>CS-2023-34</u>

Councillor La Chapelle turned the floor back to Mayor Walker who then turned if over to Councillor Raymond to Chair the Modernization and Corporate Initiatives portion of the meeting.

8. Modernization and Corporate Initiatives - Staff Reports

8.1. MCI-2023-06, Manager of Communications and Technology, Re: Monthly Activity Report

Recommendation: Moved by Councillor Judy Larmand Seconded by Deputy Mayor Barry Norris

That Item MCI-2023-06, dated April 12 2023, regarding the Monthly Activity Report for Communications and Technology, be received.

Carried

MCI-2023-06

Councillor Raymond turned the floor back over to Mayor Walker to chair the remainder of the meeting.

9. Other Business

There were no items for this portion of the Agenda.

- 10. Items for Information
 - **10.1.** Correspondence from Simcoe County District School Board, dated March 24, 2023, Re: Need for Greater Provincial Investment in our Schools

Simcoe County District School Board - 03 24 2023

10.2. Correspondence from Amanda Grant, E4 Deputy Zone Commander, Royal Canadian Legion Branch 545, Port McNicoll, dated March 13, 2023, Re: Tay Memorial Banner Program/Banners4Veterans Association

Royal Canadian Legion - 03 13 2023

10.3. Correspondence from St. Theresa's Catholic High School, dated March 1, 2023, Re: 2022-2023 Graduation Ceremonies St. Theresa's Catholic High School - 03 01 2023 **10.4.** Presentation from Avail Consulting, Re: Community Safety and Well-Being (CSWB)

Community Safety and Well-Being (CSWB)

10.5. Correspondence from MP Adam Chambers dated April 3, 2023, Re: Response to Tay Township Supports and Requests Support - Great Lakes and St. Lawrence Cities Initiative, Re: \$1 Billion Booster for Freshwater Health Campaign Adam Chambers - 04 03 2023

Budget 2023 - A Made In Canada Plan

- 10.6. Correspondence from Lynn Morton, dated March 31, 2023, Re: **Issues During Water Service Replacement, 18 Sunset Court** Lynn Morton - 03 31 2023
- 10.7. Correspondence from Minister Steve Clark dated April 6, 2023 regarding the 60 day consultation period on the proposed new Provincial Planning Statement

Steve Clark - 04 06 2023

11. Delegation Follow-Up

11.1. Carla Aedo & Warren Conlan (346 Robins Point Road), Re: **Property Tax Interest/Penalties Relief Request**

Council requested that a staff report on the matter discussed be brought forward for consideration at a future meeting.

12. General Discussion - Committee/Staff Question & Answer Period

Councillor Raymond initiated a discussion surrounding the dissolution of the Modernization and Corporate Initiatives Committee. The Committee generally discussed that the Manager of Communications and Technology would report through the Corporate Services section of Committee of the Whole and that a Steering Committee comprised of members of the Senior Leadership Team, the Manager of Communications and Technology and a member of Council be struck to meet quarterly regarding Modernization and Corporate Initiatives. The Committee directed staff to bring forward a report to a future meeting for consideration.

13. Closed Session

13.1. Retire to Closed Session

Resolution: Moved by Deputy Mayor Barry Norris Seconded by Councillor Paul Raymond

That Committee of the Whole retire to a Closed Session at 10:35

a.m. under authority of the Municipal Act, Section 239(2)(c) a proposed or pending acquisition or disposition of land by the municipality or local board (Item 13.2.) and Section 239(2)(b) personal matters about an identifiable individual, including municipal or local board employees (Item 13.3.)

Carried

13.2. Confidential Item CS-2023-27, Municipal Clerk, under authority of the Municipal Act, Section 239, (2)(c) a proposed or pending acquisition or disposition of land by the municipality or local board (Inquiry to Purchase Township Lands)

Confidential Item CS 2023-27 dated April 12, 2023, regarding a proposed or pending acquisition or disposition of land, was received and Council provided direction to staff regarding the Inquiry to Purchase Township land, as outlined in Confidential Item CS 2023-27.

Following discussion on this item, Committee spoke briefly regarding the Tay Memorial Banner program with the related item being included earlier on the agenda.

13.3. Confidential Item CS-2023-26, Senior Executive Assistant, under authority of the Municipal Act, Section 239, (2)(b) personal matters about an identifiable individual, including municipal or local board employees (2023 Citizen of the Year)

Confidential Item CS 2023-26, dated April 12, 2023, regarding the 2023 Citizen of the Year was received and Staff were provided direction regarding the declaration of the 2023 Citizen of the Year.

13.4. Rise from Closed Session

Resolution: Moved by Deputy Mayor Barry Norris Seconded by Councillor Gerard La Chapelle

That Committee of the Whole rise from Closed session at 11:24 a.m. and return to the regular meeting.

Carried

14. Adjournment

Resolution: Moved by Councillor Judy Larmand Seconded by Deputy Mayor Barry Norris

That this Committee of the Whole meeting adjourn at 11:27 a.m.

Carried



Staff Report

To:CouncilDepartment:Corporate ServicesReport Number:CS - 2023-34Meeting Date:April 26, 2023Subject:2023 Operating and Capital Budget Third Draft

Recommendation

That Staff Report CS-2023-34 regarding the 2023 Operating and Capital Budget be received; and

That the related by-law be brought forward for adoption later in the meeting.

Executive Summary

The budget process was undertaken with knowledge that Council was looking to find efficiencies where possible to meet a target rate increase of 3%.

The initial draft submitted totaled additional costs of \$1,187,222 or 13.97% increase. Senior Leadership Team, Leadership Team and finance Staff met to review each division's budget. During this process, accounts were reviewed looking at the prior year spending as well as a three-year average to see if budget increases or decreases are required based on historical data.

The first draft budget was presented to Council on February 15, 2023, along with Staff Report CS 2023-15 showing a tax impact of \$769,511 which was equal to 9.05% increase. Staff was directed to bring forward a second draft of the 2023 budget at next meeting on March 27, 2023.

Senior Leadership and Staff met several times between February 15 and March 23 to continue to finetune the budget. Staff presented the second draft budget to Council on March 27, 2023, along with Staff Report CS 2023-25 which had an estimated net increase of \$501,204 or 5.75%. With the potential utilization

of the tax rate stabilization reserve the municipal portion would be 3.48%. The blended rate including Council and School Board would be 3%. Staff was directed to bring forward a revised draft with a 4% blended rate.

The current (revised) draft budget being presented to Council today has an estimated net increase of \$498,233 or 5.86%. Should Council wish to draw \$57,000 from the tax rate stabilization reserve, the municipal portion would be 5.13%. When that rate is blended by including both the County and School Board, the blended tax rate would be 4.0%.

Background/Analysis/Options

Staff received direction on the following items during the March 27th Special Council Meeting. All related items have been reflected in this third draft budget:

- Reduced EDCNS funding by 50% to \$33,990;
- Increased SSEA funding by \$4,202;
- Added GBGH Physician Recruitment \$12,500 (one time grant for 2023 only);
- Added Georgian Bay Forever \$15,000 to be used for phragmites clean up on the frontage of municipally owned properties only;
- 2023 OCIF grant funding to be applied to the Victoria Harbour Wastewater Plant upgrades \$961,508;
- Increased annual vacant lot Water and Wastewater infrastructure fees to \$178 (Water) and \$189 (Wastewater);
- Included Library Board Municipal Grant in the amount of \$477,768 with \$65,943 being direct flow through.

PROJECTS/CAPITAL EXPENDITURES (yellow sheets)

The 2023 second draft budget provides for \$18.09 million in projects/capital expenditures, including water and wastewater as noted on Schedule 2.

2022 SURPLUS

In order to mitigate tax increases projects that are seen to be a one time only, expenditures are funded through the annual surplus. The estimated 2022 surplus is between \$150,000 to \$200,000. Staff are in the process of finalizing the 2022 year-end. Once this is complete, Staff will provide a report regarding the 2022 surplus.

Currently the Community Risk Assessment for \$16,000 and the tree removal contract for \$40,000 is to be funded from the anticipated surplus.

2022 RESERVE BALANCES

The Auditors have prepared the draft financial statements for the 2021 year end. Staff can provide Council with the actual reserve balances as of December 31, 2021 the related financial reports have been finalized. We won't know actual reserve balances for 2022 until following 2022 year end which is anticipated to be July 2023.

TAX RATE STABILIZATION RESERVE

The tax rate stabilization reserve is a fund which enables Council to phase in large or unexpected increases in costs over multiple years. \$60,000 was budgeted to be used in 2022 to reduce the tax rate increase. The current balance in this reserve is approximately \$588,000. This reserve can be used to reduce the percentage increase in municipal taxes. The following scenarios shows the percentage changes using different amounts of this reserve.

Scenario 1: Using \$0 from the Tax Rate Stabilization Reserve the blended tax rate increase would be 4.34%

Balance in Tax Rate Stabilization Reserve	Amount Used in 2023 Budget	Balance
\$588,000	\$0	\$588,000

Per \$100,000 Assessed Value for Residential Tax Class

	2022	2023	Change	
		3 rd Draft	\$	%
Municipal & Policing	\$665	\$703	\$37.82	5.69%
County	\$279	\$289	\$9.77	3.50%
School	\$153	\$153	-	-
Annual Taxes (Blended)	\$1,097	\$1,145	\$47.59	4.34%
Monthly Tax Increase			\$3.97	

Scenario 2: Using \$57,000 ($$85,000 \times 0.67\%$) from the Tax Rate Stabilization Reserve the blended tax rate increase would be 4%

Balance in Tax Rate Stabilization Reserve	Amount Used in 2023 Budget	Balance	
\$588,000	\$57,000	\$531,000	

Per \$100,000 Assessed Value for Residential Tax Class

	2022	2023	Change	
		3 rd Draft	\$	%
Municipal & Policing	\$665	\$699	\$34.09	5.13%
County	\$279	\$289	\$9.77	3.50%
School	\$153	\$153	-	-
Annual Taxes (Blended)	\$1,097	\$1,141	\$43.86	4.00%
Monthly Tax Increase			\$3.66	

Staff proposes scenario 2 which would meet the 4% target set by Council based on our blended rate while still maintaining \$531,000 in the tax stabilization reserve for future years.

Average Household Impact for 2023	3 Taxation Purposes:
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	Balance in Tax Rate Stabilization Reserve	Amount Used in 2023 Budget			Bala	nce		
	\$588,000	TR = 4% \$57,00		TR = 4% \$57,000 \$531,		,000 \$531		
	\$588,000	TR = 3% \$232,9		900 \$355		355,100		
Average Assessed Value for Residential Tax Class: \$241,212					2			
			4%			3%	Char	nge
Mun	icipal & Policing	\$1,		1,686.20 \$1,		659.68	\$26.	52
Cou	nty		\$69	6.62	\$696.62		-	
Scho	lool		\$36	9.05	\$3	69.05	-	
Ann	ual Taxes (Blended)		\$2,751.87 \$2,7		725.35	\$26.	52	
Annua	al Tax Increase (to 2022 assessed vo	value) \$105.8		5.86	\$	79.34	\$26.	52
Mon	thly Tax Increase		\$8.82		\$	6.61	\$2.2	21

A 4% blended rate would increase the taxes for 2023 on an average assessed home valued at \$241,212 by \$105.86 annually or \$8.82 monthly when compared to 2022 taxation.

For comparison purposes a 3% blended rate would increase the taxes for 2023 on an average assessed home valued at \$241,212 by \$79.34 annually or \$6.61 monthly when compared to 2022 taxation.

CONCLUSION

The initial draft submitted by Staff totaled \$1,187,222 or 13.97% increase. Following meeting with the Senior Leadership the first draft budget was totaled at (\$769,511) or 9.05%. The second draft budget was at \$501,204 or 5.75%. The current (third draft) is totaled at \$498,233 or 5.86% (\$638,237 less \$140,004 absorbed by 1.65% growth). Should Council wish to draw \$57,000 from the tax rate stabilization reserve, the municipal portion would be 5.13%. When that rate is blended by including both the County and School Board, the blended tax rate for 2023 would be 4.0%.

Attachments

Schedule 1 - 2023 Annual/Operating expenditures (Green sheets)
Schedule 2 - 2023 Projects/Capital expenditures (Yellow sheets)

Prepared By Saleem Sandhu, Treasurer	Date
Approvals	April 18, 2023
Andrea Fay, Chief Administrative Officer	April 19, 2023

	2022 Actual	2022 Budget	2023 Budget
TAXES			
TAXES OWN PURPOSES			
Regular Billing	8,407,124	8,407,063	8,407,063
Tax Write Offs and Supplemental Billing	79,142	80,000	80,000
Grants in Lieu Grants in Lieu Allocation	48,332 51,587	46,657 50,971	46,657 50,971
TAXES OWN PURPOSES NET	8,586,185	8,584,691	8,584,691
		0,001,001	0,001,001
EDUCTATION TAX LEVY			
Levy	(2,787,717)		(2,750,011)
Regular Billing	2,760,546	2,757,838	2,757,838
Tax Write Offs Grants in Lieu	22,080	-	-
Grants in Lieu Grants in Lieu Allocation	43,760 (51,587)	43,760 (51,587)	43,760 (51,587)
TOTAL EDUCATION TAX LEVY	(12,918)	-	-
COUNTY TAX LEVY			
Levy	(4,257,728)		(4,225,593)
Regular Billing	4,203,570	4,203,542	4,203,542
Tax Write Offs Grants in Lieu	39,002	- 22,051	-
Grants in Lieu Allocation	21,864	- 22,051	22,051
TOTAL COUNTY TAX LEVY	6,708	-	-
POLICING LEVY			
Levy	(1,635,880)	(1,618,510)	(1,618,510)
Regular Billing Tax Write Offs	1,611,940	1,609,851	1,609,851
Grants in Lieu	15,567 8,373	- 8,659	- 8,659
	0,373	0,039	0,039
WATER LEVIES			
Tile Drainage	-	31	31
TOTAL WATER LEVIES		31	31
TOTAL TAXATION	8,579,975	8,584,722	8,584,722

	2022 Actual	2022 Budget	2023 Budget
COUNCIL			
REVENUE:			
Grants	8,600	-	-
Transfers from Reserves / Reserve Funds	100,000	106,459	6,459
TOTAL REVENUE	108,600	106,459	6,459
EXPENSES:			
Salaries and Benefits	183,502	184,272	228,262
Contracted Services	3,717	10,000	8,000
Grants & Donations	170,310	160,000	72,500
Council Committees	12,009	13,459	13,459
Other (Staff Appreciation, Training, Internet & Telephone)	29,238	33,500	41,500
TOTAL EXPENSES:	398,776	401,231	363,721
TOTAL COUNCIL	(290,176)	(294,772)	(357,262)

			2023 Budget
CORPORATE SERVICES			
REVENUE:			
User Fees and Service Charges	84,481	117,568	98,329
Penalties and Interest	272,370	250,000	250,000
Licences, Permits, Rents	55,477	50,700	57,500
Land Sales	17,953	35,000	20,000
Investment & Interest Income	272,589	126,300	230,000
Transfers from Reserves / Reserve Funds Other	5,693	25,903	9,000
TOTAL REVENUE	1,042,328 1,750,891	1,105,961 1,711,432	1,000,440 1,665,269
TOTAL REVENUE	1,750,891	1,711,432	1,005,209
EXPENSES:			
Administrative / Overhead			
Salaries and Benefits	1,277,914	1,315,530	1,315,981
Contracted Services	206,845	115,058	337,871
Health & Safety	5,906	11,715	10,400
Computer Maintenance	177,071	75,000	76,500
Insurance	79,073	93,237	125,903
Allowance for Doubtful Accounts	, - -	· -	í -
Election	28,170	17,500	-
Other - (Postage, Advertising, Supplies, etc.)	104,830	97,161	105,791
Municipal Buildings - (Office, Old VH Firehall, Albert St)			
Utilities	58,289	50,529	42,890
Materials & Equipment Expenditures	6,116	16,300	16,300
Repairs and Maintenance	26,694	23,000	23,000
Transfer to Own Funds			
Capital/Reserves	359,334	165,000	264,500
Election		105,000	16,000
Proceeds from Land Sales		29,000	6,500
TOTAL EXPENSES:	2,330,242	2,009,030	2,341,636
		_,,	
TOTAL CORPORATE SERVICES	(579,351)	(297,598)	(676,367)

	2022 Actual	2022 Budget	2023 Budget
PROTECTIVE AND DEVELOPMENT SERVICES			
Policing			
REVENUE:			
Fines and Penalties Taxation Levied for Policing	14,292 1,635,880	55,000 1,618,234	30,000 1,727,076
Transfers from Reserves / Reserve Funds	· · · ·	148,347	80,000
Other TOTAL REVENUE	27,623 1,677,795	100 1,821,681	(47,413) 1,789,663
EXPENSES Contracted Services	1,811,676		1,789,163
Opp Paid Duty	-	1,811,181 10,000	-
Port McNicoll OPP Office Allowance for Doubtful Accounts	-	500	500
Donations to Others		-	-
TOTAL EXPENSES	1,811,676	1,821,681	1,789,663
TOTAL POLICING	(133,881)	-	-
PROTECTIVE AND DEVELOPMENT SERVICES Municipal Law Enforcement, Fire, Emergency Preparedness			
REVENUE:			
Grants User Fees and Service Charges	5,083 1,020	800 900	800 900
Fines and Penalties	12,375	9,000	9,000
Licences and Permits Transfers from Reserves / Reserve Funds	45,489 17,645	60,000 17,500	60,000 17,500
Other	80,251	34,300	23,300
TOTAL REVENUE	161,863	122,500	111,500
EXPENSES			
Administrative / Overhead			
Salaries and Benefits	549,365	566,859	623,535
Volunteer Compensation Contracted Services	277,397 41,880	267,149 61,076	288,440 53,476
Emergency Preparedness	12,444	15,221	15,341
COVID-19 expenses Communications	28,647 41,522	- 49,103	- 49,213
Equipment and Materials	50,023	48,450	48,450
Staff Vehicles Fire Prevention	28,912 3,916	21,335 3,800	22,735 3,800
Volunteer Training	44,657	46,084	46,084
Debt (Interest and Principal) Insurance	89,047 52,066	106,690 63,586	106,690 71,089
Other	63,810	65,000	65,685
Fire Halls			
Utilities Building Repairs and Maintenance	33,443 21,623	34,146 19,175	32,944 17,125
Vehicle Operating Costs	82,742	60,724	64,024
Antique Fire Truck	225	1,923	500
Transfer to Own Funds	242.000	242.000	250.000
Fire Equipment & Buildings By-Law Vehicle	243,000 1,500	243,000 1,500	258,000 1,500
Capital Projects and Equipment	33,400	31,200	31,200
		4 704 004	1 700 000
TOTAL EXPENSES	1,699,619	1,706,021	1,799,831
TOTAL MUNICIPAL LAW ENFORCEMENT, FIRE, EMERGENCY PREPAREDNESS	(1,537,756)	(1,583,521)	(1,688,331)

	2022 Actual	2022 Budget	2023 Budget
OPERATIONAL SERVICES Roads, Engineering, and Fleet Services			
REVENUE			
	2 1 0 0		
Grants User Fees and Service Charges	2,100 39,310	- 30,000	- 30,000
Licences, Permits, Rents	1,950	7,000	2,500
Transfers from Reserves / Reserve Funds	25,000	25,000	25,000
Other	37,751	500	30,000
TOTAL REVENUE	106,111	62,500	87,500
EXPENSES			
Administrative / Overhead			
Salaries and Benefits	1,239,018	1,418,667	1,468,989
Insurance / Insurance Deductible	141,820	122,187	154,158
Contracted Services Communications	9,564 680	20,500 4,486	24,300 4,562
Roads Building, Shop, and Fleet Supplies	138,015	73,770	66,667
Debt (Interest and Principal)	68,048	68,889	68,889
Other	35,686	23,500	40,950
Operations			
Bridges and Culverts	37,303	32,000	38,000
Roadside Maintenance	127,282	151,500	191,500
Hardtop Maintenance Loosetop Maintenance	100,378	121,000	121,000
Winter Maintenance	85,045 161,887	174,000 105,000	174,000 120,000
Signs, Guiderails, Sidewalks, etc.	17,972	89,525	89,604
Vehicles and Equipment			
Heavy Service			
Diesel, License, and Insurance	87,222	80,897	91,297
Repairs and Maintenance	65,699	63,000	63,000
Light & Medium Service			
Diesel, License, and Insurance	39,625	33,529	33,529
Repairs and Maintenance	11,806	15,000	15,000
Equipment			
Diesel, License, and Insurance	58,643	47,461	52,461 77,600
Repairs and Maintenance	93,655	77,600	77,000
Mechanic Materials and Equipment	15,071	10,000	13,000
Streetlighting	113,391	162,284	139,084
Transfer to Own Funds			
Infrastructure/Bridges	80,000	80,000	85,000
Municipal Fleet	236,000	236,000	243,000
Reserve repayment Capital	323,685 537,219	323,685 537,219	- 914,456
Cupitul	557,215	557,219	514,450
TOTAL EXPENSES	3,824,714	4,071,699	4,290,046
TOTAL ROADS, ENGINEERING, AND FLEET SERVICES	(3,718,603)	(4,009,199)	(4,202,546)

	2022 Actual	2022 Budget	2023 Budget
OPERATIONAL SERVICES			
Wastewater			
REVENUE			
Billings	2,478,015	2,438,594	2,565,648
Grants (Includes Deferred Revenue) Late Payment Penalties	- 17,553	- 15,000	- 15,000
Transfers from Reserves / Reserve Funds	-	181,346	181,346
Interest Vacant Lot Levies	87,082 20,252	30,000 25,742	114,075 25,742
TOTAL REVENUE EXPENSES	2,602,902	2,690,682	2,901,811
Administrative / Overhead			
Salaries and Benefits	109,461	93,346	146,051
Insurance / Insurance Deductible Contracted Services	55,037 578,273	59,565 655,020	65,384 665,288
Communications	4,330	4,960	5,200
Master Servicing Study	-	33,967	33,967
Plant Supplies and Equipment Chemicals	473 18,115	-	-
Other	24,022	35,176	35,177
Port McNicoll			
Hydro, Water, and Gas Collection Repairs and Maintenance	164,107 42,755	222,242	186,593 35,000
Building Repairs and Maintenance	17,971	12,026	20,000
Sludge Disposal	99,179	71,244	71,244
TWP. Vehicles and Equipment Rental Chemicals and Testing	-	-	1
Debt (Interest and Principal)	123,687	123,687	123,687
Other (Taxes, Grass Cutting)	25,345	7,475	7,475
Victoria Harbour	125 221	154 202	147 507
Hydro, Water, and Gas Collection Repairs and Maintenance	125,221 33,377	154,202	147,597 30,000
Building Repairs and Maintenance	183,915	41,514	150,000
Sludge Disposal TWP. Vehicles and Equipment Rental	183,224	169,237	169,237
Chemicals and Testing	-	-	-
Debt (Interest and Principal) Other (Taxes, Grass Cutting)	130,076 42,549	161,569 33,950	161,569 42,950
	12,515	55,550	12,550
Vehicles Fuel, License, and Insurance	8,614	_	_
Repairs and Maintenance	741	-	-
Transfer to Own Funds			
Vehicle Reserve Transfer Transfer to Reserve	1,552	- 811,502	- 805,392
	897,032		
TOTAL EXPENSES	2,869,056	2,690,682	2,901,811
TOTAL WASTEWATER	(266,154)	-	-

	2022 Actual	2022 Budget	2023 Budget
OPERATIONAL SERVICES Water			
REVENUE			
Billings Grants	2,988,642	2,935,090	2,995,238
Late Payment Penalties	26,381	25,000	25,000
Transfers from Reserves / Reserve Funds Interest	- 69,632	90,608 40,000	90,608 61,425
Vacant Lot Levies	32,449	40,000	40,016
Other	50	1,000	1,000
TOTAL REVENUE	3,117,154	3,131,714	3,213,287
EXPENSES			
Administrative / Overhead			
Salaries and Benefits Insurance / Insurance Deductible	158,493 57,894	123,779 62,658	153,058 68,778
Contracted Services	699,809	777,522	791,107
Communications	8,940	8,000	8,400
Master Servicing Study	-	100,000	100,000
Plant Supplies and Equipment Water Debt - DCA (Interest and Principal)	959 89,483	3,000 90,599	3,000 90,599
C of A Upgrades Debt (Interest and Principal)	489,254	489,393	489,393
Other	32,449	37,750	37,750
Tay Area WTP			
Hydro, Water, and Gas	121,280	115,352	134,899
Equipment Repairs and Maintenance	82,659	67,323	67,323
Building Repairs and Maintenance	6,049	-	10,000
Chemicals, Testing, and Disposal Contracted Services	10,872 7,179	- 22,000	- 7,323
Other (Taxes, Grass Cutting)	17,150	17,100	17,100
Tou Aven Weter Distribution			
Tay Area Water Distribution Hydro, Water, and Gas	41,424	40,005	34,257
Equipment Repairs and Maintenance	153,338	87,532	120,000
TWP. Vehicles and Equipment Rental	71	-	-
Contracted Services Other (Taxes, Grass Cutting)	71,547 9,939	43,187 10,375	71,498 10,375
Other (Taxes, Glass Cutting)	5,535	10,375	10,375
Rope WTP	15.000	24 625	45.075
Hydro and Telephone Equipment Repairs and Maintenance	15,203 29,925	21,685 26,666	15,876 26,666
Building Repairs and Maintenance	29,925	- 20,000	
Chemicals, Testing, and Disposal	301	-	-
Other (Taxes, Outside Services)	2,858	2,425	2,425
Vehicles			
Fuel, License, and Insurance	11,599	-	-
Repairs and Maintenance	6,910	-	-
Transfer to Own Funds			
Transfer to Reserve	1,053,522	985,363	953,460
TOTAL EXPENSES	3,179,107	3,131,714	3,213,287
TOTAL WATER	(61,953)	-	<u> </u>
	(01,000)		

	2022 Actual	2022 Budget	2023 Budget
PROTECTIVE AND DEVELOPMENT SERVICES Planning and Development Services			
REVENUE			
Grants (Includes Deferred Revenue) User Fees and Service Charges Licences and Permits Transfers from Reserves / Reserve Funds Other TOTAL REVENUE	2,100 60,147 342,859 - 50 405,156	49,000 330,891 97,100 - 476,991	85,000 375,000 75,000 - 535,000
EXPENSES			
Planning and Development Salaries and Benefits Contracted Services Economic Development Official Plan Development Charge Study Severn Sound Environmental Association Sustainable Severn Sound Administrative / Overhead Building Salaries and Benefits	263,867 35,693 67,980 - 114,538 - 6,281 256,283	334,291 57,000 70,660 15,000 30,000 131,547 - 15,910 296,679	366,362 41,097 35,990 16,000 60,000 135,749 - 18,960 280,028
Contracted Services	25,050	-	-
Septic Reinspection Program Vehicles Administrative / Overhead	- 6,078 16,097	9,212 21,500	- 9,212 22,900
Heritage Committee	2,384	5,200	5,200
Transfer to Own Funds Transfer to Reserve	15,000	15,000	15,000
TOTAL EXPENSES	809,251	1,001,999	1,006,498
TOTAL PLANNING AND DEVELOPMENT SERVICES	(404,095)	(525,008)	(471,498)

	2022 Actual	2022 Budget	2023 Budget
SUPPLEMENTAL INFORMATION EXTERNAL AGENCIES			
Severn Sound Environmental Association Sustainable Severn Sound	114,538	131,547	135,749
North Simcoe Economic Development Corporation	67,980	68,660	33,990
Georgian Bay Forever	15,000	15,000	15,000
Community Donations Wendat	135,310	125,000	25,000
Other (Culture, Cancer Support)	10,000	10,000	10,000
Georgian Bay General Hospital	25,000	25,000	37,500
	367,828	375,207	257,239
OPERATIONAL SERVICES Parks, Recreation and Facility Services			
Parks, Recreation and Facility Services			
REVENUE			
Grants (Includes Deferred Revenue)	-	-	-
Program Registration	85,639	108,200	104,200
Tay Community Rink Community Rentals	58,005 29,960	23,000 31,774	32,000 30,513
Donations	5,925	3,000	5,000
Other (Prior Year Surplus and Grass Cutting) TOTAL REVENUE	31,862 211,391	30,525 196,499	31,125 202,838
EXPENSES			
Recreation Programming			
Salaries and Benefits Administrative / Overhead	100,353 16,131	102,215 17,150	105,808 22,150
Camp and Program Costs	39,670	46,200	55,400
Parks			
Salaries and Benefits	842,072	809,538	825,943
Insurance / Insurance Deductible	40,263	61,680	53,772
Administrative / Overhead Parks, Facilities, and Diamonds	63,934 171,161	57,065 196,182	61,650 145,448
Community Centres	38,298	35,417	33,409
Grant Program Expenses	-	-	-
Vehicles and Equipment			
Vehicle Fuel, License, and Insurance	24,271	22,447	22,447
Vehicle Repairs and Maintenance Equipment Rental and Fuel	9,964 3,127	10,000 5,000	10,000 5,000
Equipment Repairs and Maintenance	9,614	15,000	15,000
Library Grant	511,729	511,729	477,768
Transfer to Own Funds			
Transfer to Own Funds Municipal Fleet, Buildings, Trail/Docks	118,000	118,000	172,500
Capital	63,500	63,500	63,500
TOTAL EXPENSES	2,052,087	2,071,123	2,069,795
TOTAL PARKS, RECREATION AND FACILITY SERVICES	(1,840,696)	(1,874,624)	(1,866,957)

Township of Tay		
2023 Projects/Capital Summary		
Expenditures		
Corporate Services	\$	82,523
Protective & Development Services		841,640
Operational Services - Fleet		459,400
Operational Services - Roads & Bridges		3,205,638
Operational Services - Wastewater		12,228,493
Operational Services - Water		1,052,000
Operational Services - Park, Recreation & Facilities		189,000
Building		33,556
Total	\$	18,092,250
Funding Sources:		
Tax Rate	\$	920,794
Municipal Reserves		3,275,549
Investment - Hydro		95,500
Trail / Cap Infra Reserve		76,500
Modernization Fund		106,079
Development Charges		88,362
DCA Debt		1,395,000
Debt Financing		10,386,985
Grants		991,508
Gas Tax		332,033
Prior Year's Surplus		5,440
Other		418,500
Total	\$	18,092,250

By-law 2023-xx	Schedule "2"
TOWNSH	IP OF TAY
2023 PROJECTS	/CAPITAL BUDGET
CORPORATE SERVICES	
PRIOR YEARS SURPLUS TRANSFER FROM RESERVES Contingency Reserve (Modernization Fund) Municipal Buildings Municipal Equipment /Bldg. Vehicle Fund (\$9,000)	- \$ (72,523) _ (10,000)
COMPUTER HARDWARE ACQUISITION PC/Monitor Replacement	10,000
COMPUTER SOFTWARE ACQUISITION Service Request Manager (SRM) File Manager/Laserfiche upgrade CloudPermit for By-Law	10,000 52,500 10,023
TOTAL CORPORATE SERVICES	\$ 0

By-law 2023-xx	Schedule "2"
TOWNSHIP OF TAY	
2023 PROJECTS/CAPITAL BUDGET	
PROTECTIVE AND DEVELOPMENT SERVICES EMERGERENCY PREPAREDNESS MUNICIPAL LAW ENFORCEMENT FIRE	
TRANSFER FROM OPERATING BUDGET PRIOR YEAR SURPLUS TRANSFER FROM RESERVES Municipal Fleet (Fire Capital) Municipal Buildings	\$ (31,200) (5,440) (800,000) (5,000)
Community Risk Assessment	16,000
EQUIPMENT Port McNicoll (Hall #4) - Pumper Victoria Harbour (Hall #5) - Rescue Vehicle	640,000 160,000
EQUIPMENT Bunker Gear	20,640
BUILDING IMPROVEMENTS Port McNicoll (Hall #4) - Bay Door	5,000
TOTAL EMERGENCY PREPAREDNESS, MUNICPAL LAW ENFORCEMENT, AND FIRE	\$ -

By-law 2023-xx	Schedule "2"
TOWNSHIP OF TAY	
2023 PROJECTS/CAPITAL BUDGET	
OPERATIONAL SERVICES ROADS VEHICLES & EQUIPMENT	
TRANS FROM RESERVES PRIOR YEAR SURPLUS	\$ (459,400) -
EQUIPMENT 1 Ton Crew Cab/Dump	97,000
EQUIPMENT 1/2 Ton Pickup	55,000
EQUIPMENT Sidewalk Tractor	248,000
EQUIPMENT Plow Blade for Loader Tar and Chip Machine Hydraulic Packer for Vac Truck	17,000 37,000 5,400
TOTAL ROADS VEHICLES & EQUIPMENT	\$ -
ROAD OPERATIONS	
GOVERNMENT OF CANADA (GAS TAX REBATE) TRANSFER FROM OPERATING BUDGET TRANSFER INVESTMENT INCOME FROM OPERATING PRIOR YEAR SURPLUS	\$ (332,033) (826,094) (48,500)
TRANS FROM RESERVE FUNDS TRANSFER FROM RESERVES	(90,649)
Debt Financing DCs Internal Loan - from Future Capital Reserve	(1,450,000) (88,362) (370,000)
2023 ROAD PROGRAM TENDERED CONTRACTS Details to be determined	1,385,638
INFRASTRUCTURE/BRIDGES TENDERED CONTRACTS Road Bridge work - various locations	1,450,000
PUBLIC WORKS OTHER Diesel pump & tanks	370,000
TOTAL ROAD OPERATIONS	<u> </u>

TOWNSHIP OF TAY

2023 PROJECTS/CAPITAL BUDGET

WASTEWATER

	PROVINCE OF ONTARIO (OCIF FORMULA BASED)	(961,508)
-	Vastewater Reserve	(935,000)
	DCA (Debt)	(1,395,000)
Ľ	Debt Financing	(8,936,985)
C	COLLECTION SYSTEM	
Е	EQUIPMENT	
	Capital Contingency Allowance	20,000
	Equipment Replacement First Avenue Sewage Lift Station	30,000 70,000
	Infiltration Repairs MH and Pipes	50,000
C	Collection System Pipe Replacement	600,000
P	PM WASTEWATER TREATMENT PLANT	
N	No planned capital projects/purchases for 2023	
v	/H WASTEWATER TREATMENT PLANT	
v	/FD Replacement PM Booster	10,000
C	Chlorine Analyzer Replacement VH WWTP	16,000
	Phase 2 Revised EAAS Project - Design and Contract Administration	929,025
C	Construction -revised EAAS project	10,503,468
т	TOTAL WASTEWATER	\$-

TOWNSHIP OF TAY

2023 PROJECTS/CAPITAL BUDGET

WATER

TRANSFER INVESTMENT INCOME FROM OPERATING TRANSFER FROM RESERVES Water Capital Reserve Vehicle Reserve	(816,500) (140,000)	\$ (95,500) (956,500)
DISTRIBUTION SYSTEM		
ENGINEERING 2023 Watermain Replacement/Refurbishment Program		872,000
EQUIPMENT New Membrane Cartridges Train 1 Rope WTF 2 New Turbidity Analysers Fire Hydrant Replacement Program 4-5 per year Tay Area Treatment Plant Basement Piping		22,000 23,000 35,000 60,000
TAY AREA WATER TREATMENT PLANT		
EQUIPMENT Equipment replacement		40,000
TOTAL WATER	-	\$ -

By-law 2023-xx	Sch	nedule "2"
TOWNSHIP OF TAY		
2023 PROJECTS/CAPITAL BUDGET		
OPERATIONAL SERVICES PARKS, RECREATION AND FACILITY SERVICES		
GRANTS - COUNTY OF SIMCOE PROVINCE OF ONTARIO	\$	(30,000)
PRIOR YEAR SURPLUS TRANS OPERATING BUDGET TRANSFER FROM RESERVES Municipal Reserves - Infrastructure/Bridges		(63,500) -
Municipal Reserves - Buildings Capital Infrastructure Reserve Municipal Reserve - Tay Shore Trail/Albert Street Docks Municipal Reserves - Fleet / Equipment Parks & Recreation Reserve Municipal Reserves Fund - DCs		(5,000) (40,000) (30,000) (14,000) (6,500)
EQUIPMENT Ball Diamond Groomer Beach Groomer		7,000 7,000
SUNSET PARK Kitchen Refurbishment		5,000
TAY SHORE TRAIL LAND IMPROVEMENTS Signage Upgrade		60,000
TAY COMMUNITY RINK BUILDING IMPROVEMENTS Sanitary Lateral Replacement Rink Building to Calvert		40,000
WAVERLEY PARK Play Structure Replacement		70,000
TOTAL PARKS, RECREATION AND FACILITY SERVICES	\$	-

-

-

\$

TOWNSHIP OF TAY

2023 PROJECTS/CAPITAL BUDGET

PLANNING AND DEVELOPMENT SERVICES

No planned capital projects/purchases for 2023

TOTAL PLANNING AND DEVELOPMENT SERVICES

By-law 2023-xx	Scł	edule "2"
TOWNSHIP OF TAY		
2023 PROJECTS/CAPITAL BUDGET		
BUILDING SERVICES		
Modernization Fund	\$	(33,556)
CloudPermit		33,556
TOTAL BUILDING SERVICES	-\$	0





County of Simcoe, Office of the Warden and CAO III0 Highway 26, Midhurst, Ontario L9X IN6 simcoe.ca

FOR IMMEDIATE RELEASE

Bi-weekly Leaf and Yard Waste Collection starts April 10

Midhurst/ March 31, 2023 – The County of Simcoe's popular curbside Leaf and Yard Waste Collection program is set to start April 10 in Zone One, running until the end of the week of May 29. These biweekly collections include leaves, grass, branches (sized and bundled appropriately), and other appropriately prepared garden waste. Residents are reminded to use kraft paper yard waste bags, compostable bags, cardboard boxes, or open-ended rigid containers when placing leaf and yard waste at their regular collection point.

Materials for collection should be placed curbside by 7 a.m. on Monday of the collection week for each area. Collection will occur during the week, not necessarily on residents' regular collection day. To determine your collection zone, please refer to the <u>2023 Waste Management Calendar</u>. The schedule is also available on the Simcoe County Collects App, which is free to download from the App Store or Google Play.

Spring 2023 leaf and yard waste will be collected throughout the week in each zone as follows:

Zone One

April 10, 2023 April 24, 2023 May 8, 2023 May 22, 2023

Zone Two

April 17, 2023 May 1, 2023 May 15, 2023 May 29, 2023

Leaf and yard waste collection will also occur in July and October.

This schedule and program does not apply to the cities of Barrie and Orillia.

The County of Simcoe is composed of sixteen member municipalities and provides crucial public services to County residents in addition to providing paramedic and social services to the separated cities of Barrie and Orillia. Visit our website at **simcoe.ca**.

Chris Hedley Public Relations Consultant County of Simcoe, Service Simcoe Department 705-715-7654 (mobile) Chris.Hedley@simcoe.ca - 30 -

Collin Matanowitsch Public Relations Manager County of Simcoe, Service Simcoe Department 705-734-8386 (mobile) <u>Collin.Matanowitsch@simcoe.ca</u>



County of Simcoe, Office of the Warden and CAO

County of Simcoe, Office of the Warden and CAO IIIO Highway 26, Midhurst, Ontario L9X IN6 simcoe.ca

FOR IMMEDIATE RELEASE

County of Simcoe Paramedic Services launches Paramedic for a Day contest

Midhurst/April 17, 2023 – In honour of Paramedic Services week, which takes place May 21 to 27, 2023 County of Simcoe Paramedic Services are once again hosting their annual Paramedic for a Day contest. Grade 5 and 6 students residing in Simcoe County are asked to create a short (maximum two minutes) video that best showcases what to do when the first responder is you.

The deadline to enter is May 16, 2023, at 8 p.m. The winning entry will be announced at County of Simcoe Council on May 23, with the winner receiving a visit to their home from a paramedic crew, along with an ambulance tour. The crew will also present the winner with a First-Aid Kit and take part in a photo opportunity.

To enter, please transfer video files to <u>paramedic4aday@simcoe.ca</u> using the free WeTransfer platform at <u>www.wetransfer.com</u>. Be sure to include the student's name, name of parent/guardian, home phone number, and what school the student attends.

Full contest details can be found at https://www.simcoe.ca/paramedicforaday.

The County of Simcoe is composed of sixteen member municipalities and provides crucial public services to County residents in addition to providing paramedic and social services to the separated cities of Barrie and Orillia. Visit our website at **simcoe.ca**.

- 30 -

Collin Matanowitsch Manager, Public Relations County of Simcoe, Service Simcoe Department 705-734-8386 (mobile) Collin.Matanowitsch@simcoe.ca Jennifer Straw Senior Public Relations Consultant County of Simcoe, Service Simcoe Department 705-790-5979 (mobile) Jennifer.Straw@simcoe.ca



March 27, 2023

Dear Heads of Councils and Councillors,

We, the Association of Ontario Road Supervisors (AORS), are writing you on behalf of all our municipal members to raise awareness and solicit your support by objecting to a new fee proposed by Enbridge Gas. Enbridge has announced their intention to implement a new charge to third-party contractors and other utilities for utility locates. Third-party contractors will include Ontario municipalities and contractors working on their behalf. Enbridge Gas will apply a charge of \$200 CAD (plus applicable taxes) per locate request where a field locate is required. The need for municipalities and their contractors to request these locates when doing road construction and maintenance is due to utilities being present in municipal right of ways, which municipalities across the province have allowed at no cost to the utility.

Enbridge has stated that the *Getting Ontario Connected Act* passed into law in April 2022 has resulted in changes to the *Ontario Underground Infrastructure Notification System Act* and has caused Enbridge to make significant investments in associated operational investments. The concern being raised by our members, your public works staff, is that Enbridge will be just the beginning of these additional fees, with other utility companies implementing similar charges. These new charges will have significant impacts on municipal budgets.

As examples of what impacts this announcement might have on municipalities, based on 2022 municipal locate requests alone, it is estimated that this new fee would directly cost the Municipality of Central Huron approximately \$35,000 annually, the City of Belleville approximately \$90,000 annually and the Town of Espanola approximately \$7,300 annually. It is important to note that these are direct costs alone. Any subcontractors working on behalf the municipality requesting locates will be charged this same cost, and these costs will have to be borne by someone – meaning the subcontractors will put this cost back to the municipality. Then there will be the added administrative costs at both ends of the transaction. It is difficult to determine this quickly the true fulsome costs to your budget. This will also add an extra item into tendering projects, as it will create concerns on both sides on who is responsible for these costs.

By Enbridge Gas passing on these locate costs to municipalities, these costs are borne by all ratepayers across the municipality, and not only those who use this utility.

We would like to request your Council consider passing the following resolution:

WHEREAS, Enbridge recently made an announcement of their intention to begin charging third-party contractors and other utilities \$200 CAD (plus applicable taxes) for utility locates where a field locate is required;

AND WHEREAS, third-party contractors include Ontario municipalities;

AND WHEREAS, these locate requests are only required as Ontario municipalities have allowed utilities to use municipal right of ways at no charge to the utilities;

AND WHEREAS, this announcement of new downloaded costs will negatively impact the budgets of Ontario municipalities which are already burdened;

AND WHEREAS, if Enbridge is successful in implementing this new charge, a precedence is set for other utility companies to also begin charging for locates;

THEREFORE IT BE RESOLVED, that the <insert your municipality name> strongly opposes these utility locate costs being downloaded to Ontario municipalities by Enbridge Gas or other utilities;

AND THAT, the Province of Ontario's Ministry of Public and Business Service Delivery make it clear that these costs must be borne by the utilities themselves;

AND THAT, this decision be forwarded to Minister of Public and Business Service Delivery Kaleed Rasheed, Minister of Infrastructure Kinga Surma, Minister of Energy Todd Smith, Premier Doug Ford, <insert your municipality name>'s MPP, the Association of Ontario Road Supervisors and the Association of Municipalities of Ontario.

Furthermore, AORS will be sending your public works senior managers and directors a survey to further investigate the true costs of this proposed fee on your budgets. We ask you to encourage your staff to complete this survey so we can better advocate on your behalf.

If you require additional information, please do not hesitate to contact us.

Sincerely,

Maker

John Maheu Executive Director johnmaheu@aors.on.ca

14 Il ANDA

Kelly Elliott Marketing and Communications Specialist kellyelliott@aors.on.ca



BuildingUp: 10-Year Housing Strategy Achieved

Backgrounder

ABOUT OUR COMMUNITY 10-YEAR AFFORDABLE HOUSING AND HOMELESSNESS PREVENTION STRATEGY (2014-2024)

- Approved by Simcoe County Council in January 2014, Our Community 10-Year Affordable Housing and Homelessness Prevention Strategy outlines steps for the development and implementation of creative solutions for increasing affordable housing for all residents in Simcoe County across a continuum of housing options.
- In 2014 the County committed to a minimum target of 2,685 new affordable housing units throughout the region by 2024.
- The County of Simcoe is currently in year <u>nine</u> of its Our Community 10-Year Affordable Housing and Homelessness Prevention Strategy and has invested almost \$220 million towards its goals.

SIMCOE

ACHIEVING OUR TARGET ONE YEAR EARLY

 As of December 31, 2022 (one year ahead of schedule), the County of Simcoe had not only met, but exceeded, it's goal of 2,685 new units with a total of 2,775 new units created between January 1, 2014 – December 31, 2022. AFFORDABLE HOUSING UNITS CREATED SINCE 2014



BUILDING UP OUR COMMUNITIES: WHAT IS NEXT FOR THE 10-YEAR STRATEGY?

• The County of Simcoe is committed to continuing BuildingUp our communities and creating more affordable places to live for our residents through the conclusion of the strategy. We are currently building our next strategy, which will include ambitious, achievable, and attainable targets through innovative, forward-thinking strategies.

CONTRIBUTIONS TO 77 TIFFIN STREET BUILD

• This build began in early Summer 2022, and the first residents are expected to move in during the month of April 2023. The Province contributed \$2.5 million to the project through the SSRF funds with the remainder of project funding from the social services reserve. The County will fund operations once it is up and running, largely from provincial funds. On the continuum of housing, the Tiffin Street Building is a "supportive housing" project.

SINCE BUILDING UP

SPOTLIGHT ON LARGER AFFORDABLE RENTAL HOUSING PROJECTS

Since the inception of its affordable housing strategy in 2014, the County of Simcoe has created a number of larger new affordable rental housing projects and other innovative designs, including:

Second Street, Collingwood (two

buildings, including 55 and 92 units, completed Spring 2019)

Two unique mixed-use buildings opened in Spring 2019 offering affordable housing for singles, families, and seniors, along with onsite services such as an EarlyON Child and Family Centre. This site is also home to a community hub for social, community and health services.

Zoo Park Road, Wasaga Beach (99 units,

completed Spring 2020) Owned and operated through the Simcoe County Housing Corporation (SCHC). This site offers affordable housing for singles, families, and seniors.

Maple Street, Victoria Harbour, Tay

Township (41 units, completed Fall 2020) Opened in Fall 2020, this building features accessible trails and is located near public parks, shopping and amenities. The site offers affordable rental housing for seniors and persons with disabilities.

BUILDS CURRENTLY UNDERWAY (NOT INCLUDED IN THE CURRENT TARGETS)

The County is currently at various stages of the planning and building process for larger rental developments.

The rental development in Orillia, the **County Orillia Campus** Project when complete, will be the largest build to date, with 130 mixed affordable residential units for seniors, families, and individuals, as well as a number of community services in this campus-style development. This is expected to open in late 2023/early 2024.

The build currently beginning in **Bradford West Gwillimbury** will be a 50-unit affordable residential building will include rentals for both families and seniors. The expected completion of this building will be in late 2024.

The conceptual site plan for the **Rose Street build in Barrie** was approved by County Council in 2021. The conceptual plan includes a layout to accommodate a 150-unit building with a mix of one, two, and three bedroom units. <u>If approved by</u> <u>Council</u>, shovels could go in the ground as early as spring 2024.

ADDITIONAL FUNDING AND PROGRAMS

In addition to large developments, the County supports housing across the entire continuum which has contributed to the 10-year target. These include **supportive and transitional housing** such as **Lucy's Place** in Barrie (*completed in 2019*) and **Tiffin Street** (*completed in 2023*). The County also supports **private and not-for-profit sector builds**, funds **Secondary Suites**, supports through **Ontario Renovates** (a program that provides funding for renovations), offers a **Homeownership** program and more to ensure that needs are met across the entire housing continuum.



Georgian Bay General Hospital Foundation 1112 St. Andrew's Drive, P.O. Box 760 Midland, ON L4R 4P4, CANADA 705-526-GIVE (4483) | gbghf.ca foundation@gbgh.on.ca

The continued commitment

thom the Township of Tay to GABGHH is greatly appreciated. THANK You for advocating for the healthcare our communities

March 2, 2023

Mayor Ted Walker The Corporation of the Township of Tay 450 Park St PO Box 100 Victoria Harbour, ON LOK 2A0

Dear Mayor Walker,

On behalf of Georgian Bay General Hospital (GBGH), I would like to thank you for your recent donation to the Foundation's Impact Fund. Your gift will help to address the most urgent capital priorities for our hospital. You are ensuring that GBGH will continue to provide high quality health care close to home.

This year, more than 32,000 patients will visit GBGH when they are injured, ill and vulnerable. Because you have chosen to invest in your hospital, your care teams will have access to the medical equipment and technology that they need to provide accurate diagnosis, determine effective treatment, and provide compassionate care on the road to recovery.

Your business receipt is attached. If you would like to receive future receipts by email, please send your name, mailing and email addresses to foundation@gbgh.on.ca. If you have any questions or comments, please contact the Foundation office at (705) 526-GIVE (4483) or email the address above.

Thank you again for your support of the hospital.

Sincerely,

Nicole Fragtocck

Nicole Kraftscik Executive Director, Georgian Bay General Hospital Foundation



BUSINESS RECEIPT Georgian Bay General Hospital Foundation 1112 St. Andrew's Drive, P.O. Box 760 Midland, ON L4R 4P4, CANADA 705-526-GIVE (4483) | gbghf.ca foundation@gbgh.on.ca Charitable Registration No: 11896 5789 RR0001

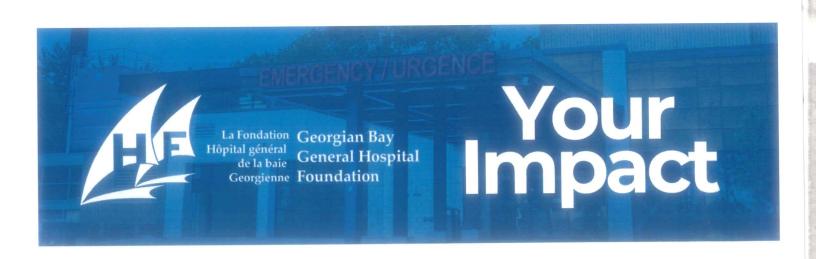
Date: Amount: 2/24/2023 \$25,000.00

The Corporation of the Township of Tay 450 Park St PO Box 100 Victoria Harbour, ON LOK 2A0

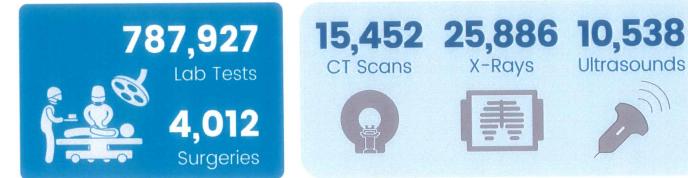
Nicole Fragtocck

Nicole Kraftscik, Executive Director Georgian Bay General Hospital Foundation

For more information on registered charities, please visit Canada Revenue Agency canada.ca/charities-giving

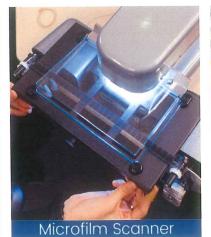


YOU are making a difference! 40,239



Thanks to your generous support, here are some of the major IMPACT purchases that you helped to make possible in 2022:

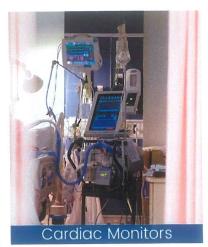
Helping equip our hospital





X-Rays

Fresh Food Menu







It was so very kind of you to send me such a wonderfully generous message following the death of my beloved mother. Your most thoughtful words are enormously comforting, and I cannot tell you how deeply they are appreciated at this time of immense sorrow.

Channes R

OurCare | NosSoins

Ontario Priorities Panel on Primary Care:

New perspectives and possibilities for primary care in Canada

Members' Report

March 2023

Page 102 of 210

Visit the OurCare website: ourcare.ca

Explore OurCare data: data.ourcare.ca

Learn more about deliberative processes: masslbp.com



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Chair's Note



Peter MacLeod OurCare Ontario Panel Chair

Principal, MASS LBP

This report is a testament to the dedication and hard work of 35 Ontarians who volunteered their time and expertise to this critical conversation about the future of primary care in Ontario. Cumulatively, they invested some 1,300 hours in this process. The result? 23 significant recommendations that hold the potential to bring about transformative change.

The collaborative process undertaken by the panel also represents a constructive approach to finding common ground and making sense of complex issues like health reform. By bringing together diverse perspectives and experiences, the panel aims to foster an environment where meaningful dialogue can take place. This inclusive method not only enriches the quality of the recommendations but also sets a powerful example for future policy-making endeavors — concerning our health system and beyond. The panel's work provides a blueprint that governments to make the province's primary care system more equitable, accessible and sustainable. By engaging citizens in such a meaningful way, the process empowers individuals to help shape public policy while also fostering a sense of shared responsibility. Far from being apathetic or self-interested, the panel's work demonstrates the readiness of Ontarians to step up and step into critical debates.

This is why I would like to extend my gratitude to the 35 Ontarian volunteers who devoted their time and energy to this panel. Their contributions are timely call to action for policy-makers who we hope will hear and heed their advice. To our partners, guest speakers, funders and stakeholders, I also want to extend our thanks for your support and contributions to this process.

Sincerely,

120m

Peter MacLeod Chair, Primary Care Priorities Panel



Page 105 of 210

What policy makers should know



Dr. Tara Kiran, OurCare Principal Investigator

Family Physician, St. Michael's Hospital Academic Family Health Team Scientist, MAP Centre for Urban Health Solutions, St. Michael's Hospital, Unity Health Toronto

Fidani Chair in Improvement and Innovation, University of Toronto

Primary care is in crisis. More than 6.5 million people in Canada don't have a family doctor or nurse practitioner they can see regularly for care. And the situation is poised to get worse with fewer graduating medical students choosing family medicine as a career and many currently practising physicians thinking of leaving practice – retiring or working in other parts of the system.

Primary care is the front door to the health system and without it people are left on their own—struggling to care for new problems, manage existing ones, or access other parts of the system. They also don't get the benefit of preventive care that would keep them healthy in the long run.

We need to do something differently. But what?

I've sat at many meetings with policy-makers, fellow clinicians, administrators and researchers to discuss ideas for reform. But all too often, these discussions stall. And usually there is a distinct group missing from the conversation – members of the public.

OurCare is bringing those voices of the public to the forefront so we can design a better system based on the values, needs and priorities of those it's meant to serve.

This report summarizes the recommendations from 35 members of the public who live in Ontario—people from across the province who are at different life stages, come from different backgrounds and didn't know each other before OurCare. These 35 panelists spent nearly 40 hours together learning about primary care from some of the top experts in the field and deliberating with each other to come to consensus on recommendations for a better system.

The values they articulate and the specific recommendations set out a bold vision for primary care—one that I hope we can act on together.

To start, the Ontario panelists reaffirmed the importance of primary care for all.

Equity is a foundational value and related to many of the other values they articulate—that primary care should be public and universal, accessible, patient-centred, and holistic, intersectional and culturally responsive.

They feel strongly that every person in Ontario should get the care they need regardless of background, socio-economic status, location, or mental or physical capabilities.

They also emphasize the value of continuity and ongoing relationships in primary care and that high-quality primary care should also be data-enabled, evidence-based, accountable and transparent.

Their recommendations keep these values front and centre.

They recommend an expansion of medicare to include mental health, eye care, dental care and medications. They want to see better links between primary care clinics and community agencies to better address the social determinants of health. They propose more upstream investment in public health and primary care to help save money downstream in the long run.

They expressed immense frustration at not being able to access their own health records or those of family members they care for. They recommend that the government legislate interoperability between all electronic medical record (EMR) systems with the goal of creating a patient portal that could be accessed through a person's health card (or by other means for those without a health card).

They make several recommendations to address the crisis in the primary care workforce including increasing the number of family medicine residency spots, accelerating integration of international medical graduates, prioritizing recruitment and training of health professionals from equity-seeking communities and including a component of family medicine training for all specialists.

Perhaps the boldest recommendations relate to changing how the primary care system is organized. They want to see us move away from having solo family practitioners paid fee-for- service towards a future where all Ontarians have access to a team-based primary care home, expanding models like Family Health Teams, Community Health Centres, and Aboriginal Health Access Centres. The roll out of teams should prioritize underserved communities and walk-in clinics should be amalgamated into the team models.

In order to ensure every person in Ontario have a primary care home, they recommend automatic rostering similar to the public school system. They say health teams should be mandated to accept any patient from their catchment area but also articulate ways in which some patient choice should be maintained.

Finally, they make recommendations to strengthen patient education and system accountability. They suggest a campaign to educate people about their healthcare rights, the value of primary care and how to navigate the healthcare system. They want community members involved in governance of primary care teams and have the provincial government establish an independent body to measure outcomes related to the core values outlined in this report. They want to see the federal government crack down on loopholes within the Canada Health Act.

On February 12, 2023, the OurCare Ontario panelists presented their recommendations for a better system to Matt Anderson, CEO of Ontario Health and other key system leaders. The values and recommendations they spoke to resonated for all in the room.

We know we need to fix primary care. We've known for some time what some of the key issues are. All too often, there is disagreement about the specific solutions and way forward.

The OurCare Ontario panelists have told us what needs to be done. They had the courage, resolve, patience, and mutual respect to listen carefully to each other and key experts, compromise where needed, and agree on a shared vision for a better primary care system. Now it's time for the rest of us to act.

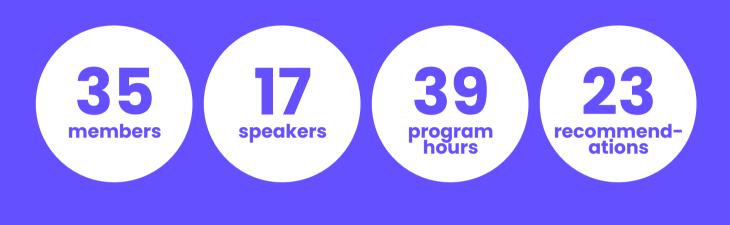
Dr. Tara Kiran OurCare Principal Investigator

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Ontario Priorities Panel At-a-Glance



Members' Values

Equity • Accountability • Continuity

Data-Enabled • Transparency

Public and Universal • Evidence-based

Sustainable • Accessible • Patient-Centred

Holistic, Intersectional, and Culturally Responsive

Recommendation highlights:

Expand team-based care to every resident of Ontario

Expand access to mobile care and comprehensive virtual care models.

Connect stand alone walk-in clinics to team-based care organizations.

Implement province-wise automatic rostering system for patients that maintains an element of patient choice.

Develop a centralised digital referral platform for specialist care.

Ensure patient access to personal health data

Legislate and enforce Interoperability data standards

Expand OHIP coverage to mental health, vision, dental, and pharmacare.

Expand our understanding of primary care to include Indigenous modes of thinking and knowing.

Increase the number of seats for primary care residencies.

Invest a greater proportion of total healthcare funding in primary care.

Develop accountability measures for each of the values identified by the Panel. Monitor and assess compliance.

Hold Ontario accountable to the principles of the Canada Health Act.

Review, consolidate, and revitalize existing health care bills of rights.

<u>Strengthen links between</u> primary care practitioners and community agencies.

Ensure community members are included in the governance of primary care organizations.

Integrate newcomer practitioners and improve accreditation processes for immigrant primary care providers.

Examine and address the reasons fewer medical students are choosing to practice comprehensive family medicine.

Foster a culture of lifelong learning, culturally safety and collaboration at medical education sites.



Understanding the panel process

A Priorities Panel is a long-form deliberative process that typically involves 36 to 48 randomly selected residents. These residents are chosen using a process called a civic lottery, a random selection method that prioritizes fairness and wide representation. The individuals selected for a priorities panel come together to learn about, and then advise public authorities on, divisive and complex issues that typically involve trade-offs or compromises. The panel members' objective is to reach a consensus on a series of recommendations that can be directed to government, professional associations, and society at large.

What is a Civic Lottery?

A civic lottery is a balanced way of selecting the members of a priorities panel. It is based on a form of sortition that uses a randomized selection process to recruit panelists from a pool of volunteers that have indicated their interest in serving on the panel. The result is a group of volunteers that broadly matches the demographics of the jurisdiction it represents. Over 1,250 invitees volunteered for the Ontario Priorities Panel. These volunteers had completed the OurCare National Survey and indicated their interest in the panel by answering a few demographic questionnaire. Participants were selected through a stratified lottery process — better known as a civic lottery. This process ensured that members of the panel were fairly selected and broadly representative of Ontario's demographics.

OurCare deliberately sought to overrepresent residents we know are underserved by the primary health care system: racialized, lower income, newcomer, and gender non-conforming residents, and those who live in rural, remote, or northern regions of the province. In short, the panel was composed in such a way as to deliver good demographic diversity and to ensure we heard from residents who are most disadvantaged by the current system.

OurCare Program and process

The Ontario Priorities Panel, consisting of 35^{*}members from across the province, met online three times beginning November 2022, and then over four days in Toronto in February. During their time together, panel members learned about primary care in Ontario and other jurisdictions; they heard from 17 subject matter experts in presentations or moderated discussions. The members also spent a significant amount of time in conversation with each other as they engaged in a series of facilitated conversations that culminated in the consensus recommendations put forward in this report.

Session 1: Saturday, November 26, 2022

The first session oriented the panel members to the process, and to Ontario's primary care system. It began with a welcome from the Panel Chair, Peter MacLeod and the Principal Investigator, Dr. Tara Kiran. Peter talked about the panel's mandate and task, and explained that deliberative processes like a priorities panel are different from a focus group or town hall in that everyone is asked to think about the broader public and to consider the interest of those they represent. Members then had the opportunity to meet one another in small breakout groups.

Peter then delivered a short presentation about Canada's healthcare system, its history, and how it has evolved and continues to evolve. The Canada Health Act and Medicare were also discussed.

Dr. Elizabeth Muggah, Senior Clinical Advisor at Ontario Health, was the panel's first guest speaker. She presented an overview of primary care in Ontario and shared some population health statistics. She described the four Cs of primary care – first contact, comprehensiveness, coordination, and continuity – and made the case for how strong primary care systems benefit individuals and communities.

Owing to personal and health-related circumstances, one member stepped away early in the process, and three members were unable to travel to Toronto for the final sessions



Dr. Muggah also shared some population health statistics and described how health outcomes differ across groups, reflecting the circumstances or context in which people live. The presentation covered the evolution of primary care delivery in Ontario, touching on the different ways primary care is organized and funded in Ontario. Dr. Muggah also spoke about the current crisis in healthcare and how a stronger primary care system was part of the solution.

Members had the opportunity to ask questions of Dr. Muggah before heading into small group discussion about the values that should guide a renewed primary care system.

Session 2: Saturday, December 10, 2022

The session began with a welcome and recap from Peter MacLeod who reminded members of their mandate and how a high-functioning primary care system leads to better patient outcomes, lower system costs and more equity.

Dr. Tara Kiran presented features from primary care systems in some OECD comparator countries (Finland, the United Kingdom, and the Netherlands) highlighting how these differ from the current delivery and structure of primary care in Ontario. She discussed various features of primary care systems such as practice and rostering models, funding and payment models, use of information systems and data sharing, after hours and urgent care, and accountability measures. After Q&A, members went into small groups to discuss the pros and cons of the different features, and to identify which features should be available to all Ontarians.

Session 3: Saturday, January 21, 2023

Session 3 focused on access to care for equity-deserving groups. After the welcome and recap of the previous sessions, Peter introduced a video recorded by Dr. Andrew Pinto, Director of the Upstream Lab. Dr. Pinto defined equitable care as giving individuals what they need to be healthy, rather than providing the same level of care to everyone regardless of their needs. He highlighted the importance of social determinants of health contextual factors such as income, housing, and education – that significantly impact health outcomes. He also shared some

ideas on how to increase equity in primary care, such as implementing a needs-based funding model and creating a network of primary care providers committed to tackling the social determinants of health.

Following Dr. Pinto's video, Peter moderated a discussion with Dr. Jonathan Fitzsimon, Medical Lead of Renfrew County, Francis Garwe Chief Executive Officer at Carea Community Health Centre, and Dr. Sarah Newbery, Assistant Dean Physician Workforce Strategy at Northern Ontario School of Medicine University.

Each guest described some of the challenges they encountered in their work in rural, remote and northern areas of the province, and with racialized, urban populations. Each speaker also gave examples of interventions that could help improve access and lead to better health outcomes for these equity-deserving populations. These interventions included health care outreach programs, mobile clinics, and the use of technology to improve access to care. Overall, the discussion underscored how critical it is to address health inequities and ensure that people who experience social

and economic disadvantages have access to the health care services they need.

After the Q&A, the OurCare Panel members spent time discussing how to ensure a focus on equity in a renewed primary care system.

This was the last of the virtual sessions, and the members adjourned looking forward to the Toronto meetings in February.

Session 4: Thursday, February 9, 2023, Toronto

The Toronto sessions kicked off on Thursday evening with a presentation followed by dinner. The Panel Chair, Peter MacLeod, welcomed everyone to Toronto and kicked off the in-person sessions.

Dr. Tara Kiran presented findings from OurCare's National Survey. She provided an overview of the survey, including its purpose and structure. The survey gathered insights from Canadians about their experiences with primary care, and their preferences and priorities for the future of primary care. The survey was available online from September

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20 to October 25 2022, and disseminated through multiple channels: by Vox Pop Labs and their proprietary panel, and through an open link circulated to OurCare collaborators and partners, amplified through a social media campaign, and earned media.

Dr. Kiran's presentation described who responded to the survey (over 9,000 completed responses) its methodology and some of its limitations. Key findings include the startling figure that more than 6.5 million adults in Canada do not have regular access to primary care. People in Ontario were more likely to have a regular family doctor or nurse practitioner (86%) than people in some other regions. Among those who did not have a doctor 17% were not looking for one. Other key findings included a preference (88%) for care to be offered close to home, and overwhelming endorsement (97%) that every person in Canada have a relationship with a primary care provider. When asked what mattered most, a greater proportion of respondents (65%) felt it was very important that their provider know them as a person, and consider all the factors that affect their health.

Dr. Kiran then took questions from the members about the survey and the

first evening session ended with a preview of what members could expect over the next three days.

Session 5: Friday, February 10, 2023, Toronto

On February 10, the Toronto Sessions included a presentation about Indigenous models of care from Dr. Janet Smylie, a short presentation from Dr. Jane Philpott, and a discussion about the role of virtual care and corporations in primary care.

Dr. Janet Smylie, Research Chair in Advancing Generative Health Services for Indigenous Populations in Canada at St. Michael's Hospital joined the members before lunch, and introduced them to Indigenous models of care and worldviews. She emphasized that Indigenous peoples have distinct cultures, languages, and experiences of health and wellness that must be recognized and respected in primary care reform. She discussed the importance of recognizing the colonial history of healthcare delivery in Canada and the ongoing health disparities faced by Indigenous peoples, including higher rates of chronic diseases, mental health challenges, and substance use

disorders. Dr. Smylie also described principles that guide Indigenous models of care — cultural safety, self-determination, and community-based care — and called for greater integration of Indigenous ways of knowing and healing into mainstream primary care.

In the afternoon, members heard from Dr. Jane Philpott, former Member of Parliament and Minister of Health. Dr. Philpott is now Dean of the Faculty of Health Sciences, Director of the School of Medicine at Queen's University. She joined the members over Zoom. She spoke about partnerships that Queen's University is pursuing to both increase access to primary care for people in Kingston, and to increase access to medical school training for Indigenous students in Northern Ontario. Following a short Q&A with Dr. Philpott, members resumed their conversations before breaking for the evening.

Members re-convened at 6pm for dinner followed by a moderated discussion about the role of virtual care and corporations. Peter introduced each guest speaker and gave them each a few minutes to share their perspectives on the promise, the challenges and the path forward for virtual care in Ontario, as well as the role of private, for-profit platforms in the delivery of virtual care.

The speakers – Dr. Sheryl Spithoff, research scientist at Women's College Research Institute, Dr. Brett Belchetz, Co-Founder and CEO, Maple, and Dr. Ewan Affleck from College of Physicians & Surgeons of Alberta – each brought distinct perspectives on the issues. Dr. Belchetz argued that for-profit companies like Maple could provide efficient and innovative care delivery models that fill gaps in the current system, while Dr. Spithoff raised concerns about the potential for harms of for-profit driven care. Dr. Affleck spoke of structural and systemic issues that impede data sharing between healthcare providers and with patients themselves, and the real-world harms this poses for patients. A lively Q&A with the OurCare members wrapped up the evening and the day.



Session 6: Saturday, February 11, 2023, Toronto

The members began their third day in discussion with each other about potential solutions that would address issues with the current primary care system. Before breaking for lunch, Peter moderated a discussion with four guests who each spoke about their visions for a better primary care system. Dr. Dominik Nowak, Assistant Professor at University of Toronto, highlighted the importance of teamwork in providing quality healthcare, patient-centred care. Dr. Kamila Premji, Assistant Professor at University of Ottawa discussed the trade-offs involved in leveraging virtual care to improve access to patients in remote areas. She emphazised that while virtual care can be helpful, it's essential to be mindful of the need for continuity and in-person care where necessary. Dr. Mekalai Kumanan, President of the Ontario College of Family Physicians suggested that the primary care sector's value is not fully leveraged because providers are working in isolation from each other, and she also highlighted the important of

expanding team-based care to address the human resources crisis and ensure care for all residents in Canada. Dr. Robert Bell, former Deputy Minister of Health and Long-Term Care, felt the public needed to push politicians to hold the health system accountable using measures that meaningfully describe and monitor high-quality care. He also advocated for expanding the definition of primary care to include mental health and other features.

The evening session featured an Ask Me Anything segment, moderated by Chair Peter MacLeod, with guest Dr. Danielle Martin, Professor and Chair of the Department of Family and Community Medicine at the University of Toronto. Peter encouraged members to test some of their recommendations with Dr. Martin, and he opened up the conversation by asking her for her top recommendations for primary care reform. She described investments in team-based models with human and data infrastructure, below market rent for primary care practices in high-rent urban areas, and better access to data for patients and providers as key system reforms that would deliver better care for more people.

terday's group ind amend recommendations order to...", we recommend that...

Session 7: Sunday, February 12, 2023, Toronto

On February 12, the final day of the Toronto sessions, members spent the morning finalizing their recommendations and drafting sections of their report. At 11:30am, 20 health sector leaders joined the group to listen to the members read out their work.

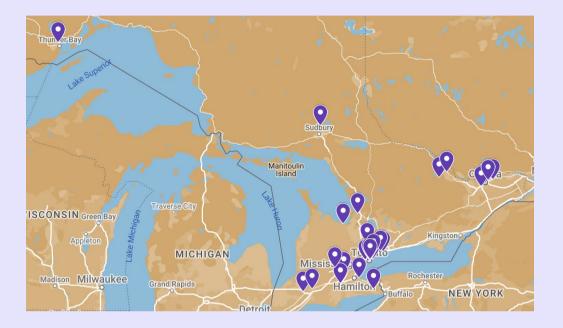
Dr. Tim Rutledge, CEO of Unity Health Toronto welcomed the guests and the panel to the hospital, and thanked the members for their time. Fifteen members then approached the podium to read sections of the report. The Honourable Elizabeth Dowdeswell, Ontario's Lieutenant Governor, delivered recorded remarks to the members thanking them for their time and commitment to furthering democratic practice through their work on the panel. Dr. Matt Anderson, CEO of Ontario Health, then delivered closing remarks, thanking the members for their time and effort. Dr. Anderson commented on the salience and richness of the members'

recommendations, particularly those related to patient rostering, data and technology, and the consideration of equity that ran throughout. He assured them that there was alignment between what he'd heard and conversations underway between the province and sector.

Following remarks from panel members to the invited guests, and from the guests to the panel members, Dr. Anderson and Dr. Kiran distributed Certificates of Public Service to each panel member, acknowledging and documenting their contribution to the conversation about the future of primary care in Ontario.

Panel Snapshot

35 members*



Gender:

17 - Women 16 - Men 1 - non-binary person 1 non-disclosed

Age:

5 - 18-29 years old: 5 13 - 45-64 years old: 13 9 - 30-44 years old: 9 8 - 65+ years old: 8

Members who identify as Indigenous: 3

Health:

29 - Good, Very Good, or Excellent 6 - Fair or Poor

Members who have been in Canada less than 10 years: 5

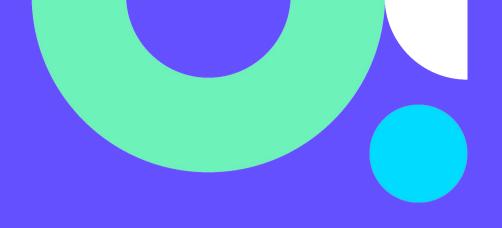
Geography:

- 7 East
- 8 West
- 2 North

18 - GTHA

Members who identify as part of a racialized group: 15

*Owing to personal and health-related circumstances, one member stepped away early in the process, and three members were unable to travel to Toronto for the final sessions.



The Members' Report of the OurCare Ontario Priorities Panel on Primary Care

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Who we are and why we volunteered

Collectively, we are Ontario, and we care about primary care.

We are a diverse cross-section of residents from various regions of Ontario. The range of needs and experiences we represent reflect those of Ontarians at large.

We have varying levels of interaction with, and access to, the health care system.

We volunteered for this panel because we wanted to work with a group of diverse people to address the primary care needs, desires, and concerns of our whole province. We're here because we care about our communities, and the generations still to come.

To continue to benefit from our system, we must all learn how best to support it by finding ways to participate in decision-making. It is our duty and responsibility to help steward the health care system. We volunteered to take on that responsibility and to set an example for others of what meaningful participation can look like. We are united in our belief in universal public health care as a unifying force for all Ontarians. We wanted to examine how to improve health outcomes for the public by returning to the fundamental ideals of a universal, public system, while adapting to the emerging and evolving primary care needs of our communities.

We are here because we care about primary care.

What we see and what we learned

When it comes to healthcare, there is much more that unites us than divides us. We have to give people the ability and opportunity to participate meaningfully, and to contribute to shaping our health care system. Participating on this panel showed us that people have passion and a wealth of creative ideas — that every individual has the ability to collaborate to help build an effective system. We think everyone would benefit by engaging in this type of process and that many would do so if they had the opportunity.

We understand that the issues related to health care are nuanced, complex, layered and fraught. We heard first-hand about the devastating impact of Covid on medical professionals and the health care system — a group of people and a system that were already tremendously overburdened.

We heard how much primary care providers care about their work and their patients and how difficult it is for them to do their jobs in our current system. We learned about discontinuities in the system and how this causes actual harm.

We know that health and wellbeing begin with primary care and necessitate addressing the social determinants of health and the inequities that exist across multiple systems. Investing in robust primary healthcare protects and reduces stress on health care resources that should be used for acute or emergency care.

Change will be challenging, but our healthcare system cannot survive without it. The pandemic revealed cracks in the system that have been a long time in the making, and now we're at a breaking point. Our learning and work together has made us optimistic that change can happen; our support for that change has resulted in this report. We refuse to wait for another pandemic to make essential change happen.

The problems we want solved

Our primary care system is in crisis and on the verge of collapse. We have identified five major challenges that need to be addressed.

- 1. Our primary care system is fragmented. This results in a duplication of services in a time of scarcity, inefficiencies and long wait times, and unreasonable administrative burden for providers. Patients experience gaps in their care, and do not know what their rights are or what to expect: where to go when things go wrong, and how different parts of the system are supposed to work together.
- 2. Our system is inequitable with significant disparities in access to and quality of care. Marginalization, systemic bias and stigma result in differential outcomes that disadvantage those who are already vulnerable. Anti-oppressive, culturally responsive care is inconsistently applied or

available, and not everyone experiences care that puts their needs and perspective at the centre. The system lacks accountability because we are not monitoring performance or ensuring a consistent standard of high quality care meets the needs of diverse populations.

- 1. We have obsolescent data systems in a digital world. We are relying on outdated information technology and practices. Most of our information systems don't communicate with each other, or with patients.
- 2. We have a crisis in health human resources. We are hemorrhaging medical professionals, including primary care providers. Burnout, onerous administrative burden, and the complexity of the work are pushing existing providers out of practice, and we are not planning for the next generation of primary healthcare providers.
- 3. Primary care is not prioritized in health system planning. The system is not prioritizing investment in public access, health promotion and preventative care despite knowing that primary care and preventing illness reduces healthcare costs, leads to improved outcomes for patients, and results in a more equitable system.

Our Values

Equity

Equity in primary health care refers to the distribution of resources, efforts, and access so that every person living in Ontario, regardless of background, socio-economic status, location, or mental or physical capabilities can get the care they need. An equitable system is accessible by default, inclusive by design, and adapts to a range of needs and circumstances. Equity in primary health care ensures everyone can receive the care they need in a timely fashion, promotes dignity and respect for all patients, and empowers each person to be an active partner in their care decisions. Achieving equity in primary health care requires acknowledging privilege at both the systemic and individual levels, in order to create a fair and equitable system for all.

Continuity

Continuity in primary health care improves health outcomes for individuals by emphasizing consistent and ongoing care throughout their lives, regardless of age, health status, or location. Continuity of care is characterized by individuals having a relationship with a primary care team who knows and remembers them, and can provide informed care based on their medical history, their family and the context in which they live. Continuity requires that individuals own their medical records and have access to them at all times, and that these are shared across all levels of care a patient receives.

Accountability

Accountability in primary care refers to the responsibility of the system and providers to adhere to inclusive standards that reflect the needs of all stakeholders. Measures of accountability are co-designed with all stakeholders, including patients, and allow for adjustment and adaptation when standards are not met. The importance of accountability in primary care cannot be overstated, as it empowers patients to advocate for their care, rebuilds trust between citizens and health service providers, and ensures that patients receive quality care.

Data-Enabled

The benefit of a data-enabled health care system is to provide patients and providers with timely access to medical records, measure improvements in public health care over time, enable communities to identify needs and gaps, and to proactively plan for better health outcomes for individuals and groups. A data-enabled system would allow patients to access and share their records with providers, and help providers to deliver appropriate care.

Accountability, transparency and trust are strengthened when data is collected and analyzed in an ethical and equitable manner, accurately representing diverse communities and perspectives.

Transparency

Transparency emphasizes open, honest communication and education among all stakeholders about all aspects of the healthcare system. This includes information about an individual's health care file, how funding decisions are made, and the different types of care models available to patients. Transparent policies and regulations are publicly driven and developed, help individuals understand their rights, build confidence in the system, and promote equality and respect for all individuals. Transparency also addresses the inherent bias in data collection and methodology and helps to ensure that data is collected and used in a fair and equitable manner.

Public and Universal

Public and universal primary care means that comprehensive health care is provided to all people living in Ontario in a timely manner. Public and universal care prioritizes patient-centred care and emphasizes accountability, accessibility, and equity in the delivery of healthcare services. These services are free at the point of service. Public and universal also relates to the comprehensiveness of care covered by public insurance so that it includes all aspects of physical and mental health and well-being.

Evidence-based

Evidence-based primary care means that healthcare providers and systems are informed by data and up-to-date scientific evidence when making decisions and creating treatment plans. Evidence-based care empowers practitioners to make informed decisions and provide the best possible care. At a community level, incorporating data and evidence helps the system proactively plan for better care and respond more effectively to regional health crises.

Sustainability

Sustainability in primary care involves ensuring that the health care system is equipped to handle the changing needs and demands of the population. This involves not only financial structures but also a flexible approach that can adapt to new challenges and uncertainties. A sustainable healthcare system should be built to last and not be susceptible to changing government ideologies, so that its benefits may be enjoyed by future generations. Sustainability also means ensuring primary care practitioners experience job satisfaction and security, and that working in primary care is attractive to future graduates, new Canadians, and others seeking employment in the healthcare field.

Accessibility

Accessibility in primary care recognizes and prioritizes the right of individuals to receive quality healthcare services without barriers or discrimination. This means creating a system that is equitable, inclusive by design, and responsive to the diverse needs of patients, regardless of their ability, background, location, or socio-economic status.

Accessibility ensures that diversity and inclusiveness are promoted by recognizing the strengths and unique needs of different communities and individuals. It leads to improved health outcomes and increased patient satisfaction by removing barriers and reducing wait times. And by ensuring that everyone has access to care, regardless of their circumstances, accessibility helps reduce health disparities and promotes health equity.disparities and promotes health equity.

Patient-Centred

Patient-centred primary care recognizes the crucial role of patients as active and informed participants. This approach centres patients in the decision-making process, taking into account their unique needs, preferences, and goals, leading to a more personalized and effective plan of care. Empowering patients to be part of their own health journey can lead to improved outcomes, increased patient satisfaction, and reduced burden on the health care system. This approach views the physical, mental, and emotional well-being of the patient as interlinked components of overall health and wellness, and is crucial in promoting preventive care and reducing the need for reactive interventions.







Holistic, Intersectional, and Culturally Responsive

Holistic, intersectional, and culturally responsive primary care considers the whole person and aims to create a safe and supportive environment for patients and providers. This approach addresses the physical, mental, and social needs of patients and acknowledges the interconnections between cultural backgrounds and personal experiences that may impact their health. It is supported through mandatory, ongoing training for health care practitioners to develop competencies in deconstructing biases, improving active listening skills, and understanding their patients' unique needs. This value emphasizes a team-based approach, including providers from diverse specialties, to address patients' interconnected needs and equalize health outcomes for all. This approach focuses on promoting reciprocal social accountability and building relationships that lead to improved health outcomes for the entire community.



Our Recommendations

A. Public Education

In order to address public distrust and confusion, increase patient agency in primary health care, and encourage Ontarians to push for a better, more accountable system, we recommend:

- I. Educating the public on their rights, including their right to their medical records by creating a "Health Rights 101" for all Ontarians.
- II. Educating Ontarians on the value of primary care by developing an education campaign that outlines its contribution towards long-term health and a better quality of life.
- III. Helping the public navigate the current system efficiently by creating a "Train the Trainer" campaign focused on grass roots level community engagement to ensure every Ontarian is reached – to be reviewed periodically for relevance.

B. Interoperability

In order to address patients' lack of access to their own medical records, confusion over data privacy legislation, and the inability of health records to be communicated in a timely manner across the medical system, we urgently need to reduce harm to patients by legislating the interoperability of Electronic Medical Records (EMR) systems. This may include reviewing and amending existing legislation.

- I. We recommend legislating that all EMR systems meet certain requirements including:
 - Common data standard that allows interoperability;
 - Patient portal for accessing and reviewing one's own information;
 - Push-style updates across all health records, so that providers have immediate access to any changes in a patient's record;
 - Ability to assign family members or next of kin access;
 - Ability to access files throughout the medical system, with different tiers of access for different providers (e.g. pharmacist or specialists get access to only medically pertinent information); and
 - Adherence to best practices in digital accessibility standards, as well as data privacy requirements that necessitate clear, plain language patient consent for any sharing of patient information beyond what is required by healthcare providers.

Your health card would be the primary – but not only – point of access to your health record.

- II. We recommend establishing a body (e.g. Health Records Ontario) that oversees and ensures patients' access to their own records. This body would have responsibility for:
 - Improving data literacy among the public;
 - Functioning as a patient ombudsperson, ensuring patients can access and navigate their own records;
 - Facilitating practitioners and organizations to transition to new EMR systems; and
 - Enacting proportionate penalties for breach of established EMR legislation, where necessary to protect the public good.

III. We recommend establishing a data governance body that focuses on data and technology, made up of independent subject matter experts and experts from other jurisdictions and organizations with well-established data frameworks.

This body will offer guidance on ethical use of data, including what data should be collected, who gets access, and conditions for data used in research. This body could also encourage publicly accountable research and research that is used to develop public health metrics at different scales.

This body will review data privacy standards periodically and suggest which providers get access to which tier of an individual's medical records. They will also establish an approved list of EMR providers, updated as needed.

C. Expansion of coverage

- I. In order to reduce long-term system costs and improve health outcomes, we recommend primary care coverage be comprehensive so as to include all aspects of a person's health. This includes OHIP coverage of services such as mental health, vision, dental, and medications. This would ensure that an unmet health need, such as mental health, doesn't jeopardize existing treatment or care plans.
- II. In order to support the seamlessness of care, we recommend creating links between primary care and community agencies to improve access to non-medical resources for residents of Ontario. This may include housing, welfare, transportation and poverty supports, all of which directly impact a person's ability to pursue long-term health goals.
- III. In order to accommodate the needs of diverse populations, we recommend expanding our understanding of care and medicine to include Indigenous modes of thinking and knowing.

D. Models of Care

- I. In order to alleviate pressure downstream (in emergency departments and other acute care settings), improve outcomes for patients, and increase equity, we recommend that the provincial government increase the proportion of funding it directs to the primary care system; it should invest more money upstream in primary care.
- II. In order to reduce provider burnout and provide more access to comprehensive care, the Ontario public wants the primary care system to move away from solo providers towards models of team-based care, like Family Health Teams (FHTs), Community Health Centres (CHCs), and Aboriginal Health Access Centres (AHACs). The team-based model should be expanded to ensure all residents of Ontario have a Primary Care Home
 - The government should invest more in FHTs/CHCs/AHACs administrative and technological infrastructures, and in team-based practice where doctors work with other healthcare providers like nurse practitioners, social workers, and pharmacists.
 - The rollout of CHCs should prioritize underserved geographies and communities.
 - The funding model for these FHTs/CHCs/AHACs should account for the population needs in the catchment area.
 - The government should invest in more mobile care options.
 - Independent walk-in clinics should be amalgamated into FHTs, CHCs or AHACs.
- III. To ensure that every Ontarian has a primary care home, the government should move towards automatic rostering similar to the public school system. While health teams should be mandated to accept any patient from their catchment area, it is important to maintain an element of patient choice. Patients should be:
 - Encouraged but not forced to change providers when they move to a new neighbourhood;
 - Able to choose among multiple health team practices in their neighbourhood, when available;

- Able to opt out of or find another team, without penalty, to accommodate gender, language, and other social or cultural preferences; and
- Able to request a specific provider within a team.
- IV. In order to standardize the referral process, reduce administrative burden and reduce wait times for specialist care, we recommend developing a centralized digital referral platform that allows providers and primary care teams to see which specialists are accepting referrals. The platform would outline a specialist's scope of practice and allow appointment bookings.
- V. In order to increase access to primary care for Ontarians who don't currently have access, we recommend prioritizing the expansion of comprehensive virtual care models to those with mobility challenges and to those in rural, remote, and Northern areas. The long-term goal, however, is to offer publicly-owned and accountable virtual care to all Ontarians.
 - These virtual care models could provide 24/7 access to an in-person visit with a nurse or community paramedic who are then able to virtually connect patients to a physician. These models should be connected to primary care teams and free at the point of service.
 - The government should continue to address the virtual divide with ongoing investments to ensure every Ontarian has access to affordable, reliable internet service.
 - In the short term, public institutions like libraries, community centres, or municipal buildings should offer internet access and private space for virtual care appointments.





E. Accountability

Public trust in medical care has never been lower. Current legislation meant to ensure accountability is ineffective and rarely enforced. Therefore, the following are our recommendations on accountability.

- I. In order to ensure that accountability criteria are relevant and impactful, we recommend that the government establish a publicly-funded independent body, with representation from health care providers, those with lived experience, and subject matter experts, to measure outcomes for each of the values outlined in the OurCare report – assessed and enforced at a local level.
- II. In order to ensure accountability is enforced, we recommend this independent body be authorized to assess compliance with the identified outcomes, through a fully-resourced primary care advocate office that will:
 - I nvestigate individual reports of non-compliance;
 - Determine effective disciplinary measures;
 - Support individuals involved; and
 - Compile data for research.
- III. In order to ensure every Canadian receives an appropriate level of health care, we recommend that the federal government:
 - Hold the provinces accountable for the criteria and conditions laid out in the Canada Health Act; and
 - Close the loopholes that allow providers to charge fees for medically necessary services, in ways that are inconsistent with the Canada Health Act.

- IV. In order to clarify rights, expectations, and responsibilities of patients and healthcare providers, we recommend that a comprehensive and revitalized health care bill of rights be consolidated through:
 - A review of existing legislation and provisions, and
 - Feedback from public and patient experience.
- V. In order to be accountable to communities they serve, we recommend that FHTs, CHCs, and other primary care organizations involve community members in determining the metrics to be used and the service to be provided in their communities.

F. Recruitment and medical education

- I. In order to train practitioners with diverse lived experience who are prepared and supported to serve all communities, we recommend Ontario's medical schools and the provincial government create awareness of and facilitate barrier-free pathways to primary care medical education, especially in equity-deserving communities. As part of reducing barriers, review admission requirements with an eye to equitable access.
- II. In order to fill gaps of care and ensure primary care practitioners reflect the diversity of our society, we recommend medical schools and regulating bodies integrate newcomer practitioners and accelerate and improve processes to accredit immigrant primary care providers.
- III. In order to increase the supply of primary care providers and renew enthusiasm among practising providers, medical schools and regulatory bodies need to examine and address the reasons that medical students choose not to specialize in family medicine and/or do not opt to practise comprehensive family medicine, such as:

- Offering centralized administrative support and technology infrastructure to family health teams and primary care providers to increase time available for focused delivery of primary care;
- Showcasing and demonstrating the value of primary care to society's well-being and better health outcomes; and
- Examining other issues impacting these choices, such as the shortage of practitioners, and the burnout primary care providers are experiencing.
- IV. Primary care is at the core of quality patient-centred health care. It is essential that all medical practitioners appreciate the foundational nature of primary care and the added value it provides to the health care system. To support this, we encourage medical schools and regulatory bodies to consider how family medicine residency opportunities might be included as a part of all specialist training.
- V. In order to increase system capacity long term and ensure primary care providers are linked to our current and future demographics, geographic needs, and populations, the government in partnership with medical schools must significantly increase the number of seats for primary care residents. They should review these requirements regularly and adjust to meet projected future needs. The methodology behind this process must be transparent. Specific attention should be paid to increasing residency placements in underserved communities and rural and remote locations.
- VI. In order to produce practitioners who have the flexibility and adaptive expertise to meet evolving needs and methods, medical schools and training hospitals should shift their approach to medical education to one that supports and promotes comprehensive and substantive lifelong learning, cultural safety training and a collaborative mindset.



Meet the members

MOHAMMAD ABU-RSHAID

Hi! My name is Mohammad and I am a fourth-year forensic psychology student at Laurier, and I work in an HR unit. I really enjoy working with people and solving people's problems. I am an immigrant from the Middle East who moved to Canada in 2011 and have lived in the Waterloo region for the majority of that time.

I live with one sophisticated cat and an awesome partner. I like to volunteer in relevant community organizations: I sit on the Students' Union Board of Directors and was elected to a regional Board Advisory Committee for a credit union. I hope to work as a policy analyst in the government sector. I wanted to join this Panel because primary care physicians have turned my life around, and I wouldn't be here without them.

GEORGE BABU

I am a father of two young kids, a tech entrepreneur, and an avid runner, cyclist, and snowboarder. I recently became a pilot, and am building experience so I can volunteer with Hope Air, a charity that provides medical flights for folks in remote regions of Ontario.

I started my career working for Mayor McCallion at Mississauga City Hall, joined BlackBerry in the late '90s as an engineer, and worked for the venture group at the Ontario Municipal Employees Retirement System (OMERS) Pension Fund. I co-founded two tech companies (one in the software space and one in robotics) and a venture fund that invested in a number of digital health startups. I am currently starting a new company working at the intersection of tech and climate change.

DAVID BIAGIONI

I was born in Melbourne, Australia, and my family migrated to Canada in 1968 as I approached my 18th birthday and my probable draft into the Australian military for service in Vietnam. Tertiary education followed in Toronto and I completed my academic studies with a carpentry apprenticeship. My various lives have been bicycle mechanic, woodworker, filmmaker, and holographer. In 1992, I moved back to Australia and worked as a carpenter until my return to Canada in 2015. My reason for volunteering for the OurCare panel is that I believe strongly that universal healthcare is important to the foundation of a civilized society. I am now a retired, recovering carpenter, happy to once again be in Canada, where I will remain having realized that weather isn't everything.

PAUL CUMMINGS

Hello! My name is Paul Cummings and I am from the beautiful village of Victoria Harbour, Ontario. We are part of a larger township called Tay and we have four such villages or towns within the township. We are surrounded by beautiful Georgian Bay, and on foot, I can be at the waterfront within seven minutes. In the winter, our village population drops to about 500, while in the summer months, it can grow to over 1,000. I have lived here for 12 years and love it!!!

I volunteered because I feel our primary health care system is in serious trouble and I would like to be part of the solution. This panel, I believe, will play a fundamental role in recommending ways to improve the system, from the bottom (those of us that receive care) to the top (Provincial and Local Health Networks, Provincial and Federal governments, and all of the associations vested in seeing our final recommendations who are capable of making useful and necessary changes for improvement).

Fun facts... Although I am Indigenous and do have status, unfortunately, my sense of direction is horrible. I recently went for what should have been a short walk in the woods following a trail, then several trails broke off from the one — bottom line, I got lost in the forest for five hours. I finally found a road, had no idea where I was, and finally had to ask someone passing by. I was 10 minutes from home and would have known that had I just walked up a small hill and finally realized the street I was on. Filthy, covered in cobwebs and tired, I finally made it home!

CAROLYN CURRAN

I grew up in Sault Ste. Marie and have lived most of my life in New York City. For 50 years, I led organizations and educational programs as a non-profit manager in community arts both locally and nationally. One of my favourite jobs was running the performing arts centre in St. Croix in the US Virgin Islands and being involved in Caribbean culture. In the '90s, I developed the chronic illness Myalgic Encephalomyelitis (ME) that kept me bedridden for three years -1 jokingly call this my Rip Van Winkle period. I proactively sought traditional and alternative medical treatments which enabled me to regain about 80% of my normal function. This experience ignited my passion for health care delivery and policy. I decided to return to Toronto in 2017 to live closer to my extended family, finding the health care system a challenge that I'd like to learn more about and contribute ideas for improvement.



ROBERTA DELLA PICCA

I gratefully contribute to various organizations that make our communities more vibrant. A number of these focus on community health and wellness awareness, using expressive/community-engaged arts and various forms of Indigenous storytelling, Ancestral knowledge, and ceremonies extremely powerful methods of outreach. These are outstanding ways of "broaching" subjects sensitive in nature, such as systemic and intergenerational trauma, suicide, depression, sexual abuse, addictions, domestic violence, HIV/AIDS, hepatitis C, etc.

I am volunteering for the Panel because, for the past 50 years, I have been passionate about health care and healing in my community, county, and province.

An interesting fact about myself is that I have had the honour and pleasure of having participated in the community-focused creation of the first (in Canada) Outdoor Monument — a Pebble Mosaic — to commemorate survivors of gender-based violence.

RENATA DEREGE-BRAGA

My name is Renata, my pronouns are she/her. I live in Toronto. I am a recently retired Environmental Instrument Field Technician, a job that took me to many very remote and very beautiful places all over Canada. I miss some aspects of my job but I am enjoying retirement completely. I have three grown daughters who live nearby and a deranged cat that lives with me. I don't remember initially signing up for this but when I was approached by the OurCare team, I was intrigued and keen to participate because I have many opinions about primary care in Ontario and considerable experience within the system.

KEVIN DONALDSON

I am a PhD candidate in Political Science at York University. I have fibromyalgia, MDD, and autism. I love discussing the nuance of policy and debating how society organizes and manages its resources. My research focuses on central banking and the Covid pandemic in Canada, and I currently teach Gender Studies. I believe firmly in the need for socially/government/democratically owned agencies which are held accountable for managing healthcare, and would like to see a shift away from the processes of marketization/privatization which were so popular in the '90s.

I am also a huge fan of board games and tabletop role-playing games and have spent many hours facilitating collective storytelling.

JANNE DONER

I emigrated to Toronto from Scotland when I was three years old. I have lived in a number of communities in Ontario but Collingwood has been my home for over 40 years. I'm retired now from the banking and financial sector and my latter few years running a rural post office.

I have one son who has been living in California since last February. Since I no longer have pets of my own, I enjoy dog walking and pet-sitting for friends and neighbours. I am the cat nanny too when several of my friends go away.

I enjoy gardening and watching birds at my feeders, and I belong to a thriving Collingwood Cinema Club. In milder weather, I ride my bike or walk many of the beautiful trails along Georgian Bay and I do a bit of snowshoeing and cross-country



skiing in the winter. We have a lot of great live music events that I love to attend, especially if there is dancing!

I have recently been delivering bread donations from a bakery to several families in our community. In the summer months, I volunteer at the Sheffield Park Black History Museum in Clarksburg.

TARA DWIVEDI

I am Tara (she/her) from central Ottawa. Born in India, Ottawa is where I was raised & have lived ever since. I volunteered because I'm concerned about the current and future state of healthcare in Canada. Access to appropriate health care is fundamental to individual, community, and societal well-being. I hope to learn more about what led to the current crises and to contribute to solutions for positive systemic change without compromising the values of universal public healthcare.

I come into this as a neurodivergent, 40-something-year-old woman and mother of an adult daughter. My lived experience includes lifelong challenges with mental illnesses and invisible disabilities, usually existing at some level of poverty. At the same time, I'm aware of the privileges I have relative to many others. All this naturally informs my perspective, but I only bring my individual voice to the table and can't claim to represent anything bigger. I've experienced good and bad, benefits and harms in the healthcare system over my life. Finding good primary care close to home over 10 years ago has been so helpful. But having this shouldn't be a matter of luck for anyone! For me, the concept of healthcare can't ignore the bigger context, aka the social determinants of health.

On a brighter note, I value lifelong learning and enjoy music, dance classes, and identifying edible and medicinal plants in my area. Food motivated, I love finding a local bakery, ice cream shop, and café / tea shop wherever I am. Currently unable to work, I volunteer a little bit at a local women's shelter. I hope to find work in the near future where I can use and further develop data analysis skills. Longer term, my goal is to train to work with data in a meaningful area, perhaps in the field of healthcare information.

KELSY ERVIN

My name is Kelsy (she/her) and I am a mom and neuroscience PhD candidate living on a farm near Cambridge, Ontario. I volunteered for this panel because healthcare is an issue that is very important to me. I believe that access to affordable healthcare is a human right, and I am troubled by the trajectory of healthcare policy in Ontario. As a scientist, I want to see evidence-based policies set in place that can do the most good for the most people, and I am frustrated by the ways in which politics hinders public health policy. When I'm not on my soapbox, I enjoy horseback riding, hiking with my dog, and living-room dance parties with my three-year-old.

ROB FLEURY

Having worked in various design firms, in construction management, and as a managing partner of a small architecture firm, I decided to become an entrepreneur and open my own company. I now operate HP Home Design which is a residential design firm in Sudbury, Ontario.



I am a certified Passive House Designer and an advocate of energy efficiency and sustainable design. I studied Architectural Technology and graduated in 2004. I volunteer with Sudbury's Community Energy and Emissions Plan (CEEP) to develop solutions for a net-zero community by 2050.

Growing up in Innisfil, Ontario, and later living in several cities across the province, I currently live in the small town of Hanmer, north of Sudbury. I am happily married with two kids, an II-year-old girl and 9-year-old boy. I enjoy camping with my family, fishing, playing video games, and training in jiu-jitsu.

CHERYL GABARET

I'm a 49-year-old single woman from Scarborough who believes firmly that everyone needs an advocate in the medical system. I want to take part in this panel because I feel that I am a perfect example of someone who trusts so little in primary care as it exists now that I'm guilty of showing up at hospital ERs for care with an apologetic "I'm sorry, I know the system is overburdened, but this is my only workable option." I hold on to my relationships with my specialists longer than I should because I feel there is no general medicine net to catch me if I fall. I'm excited about taking part in these conversations, being a faithful conduit of what I'm hearing from others, communicating honestly about my own feelings, and helping shape constructive feedback for consideration in the next stages of this project.

I love animals, I love to travel, I am always looking for recommendations for good vegan restaurants, and I am the world's best aunt!

MADELYN GOLD

I'm a multiracial (Russian Jewish, Caribbean, and French) 56-year-old female with dreadlocks, adopted by an all-white Jewish family. Working in a community organization for over seven years, I've seen the stigmatization, marginalization, and anti-oppressive attitudes towards folks who use drugs. Some healthcare providers are not harm reduction friendly and treat patients unfairly or, worse, not at all. I'm hoping my input will provide advocacy for a harm reduction framework. I'm not smart, I'm emotionally intelligent.

MATTHEW GORMAN

I was born and grew up in Richmond Hill, just north of Toronto in York Region. I now call Whitby in Durham Region home, where I live with my wife and three Labrador Retrievers. I work as a product manager for a large human capital management company, where I design and build applications relating to data and analytics. I volunteered for this panel because I believe the delivery of primary care is vital to the overall success of our health system. In my free time, I like to game, read, paddle, and camp.

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LEE HERALD

My name is Lee, and I use they/them pronouns. I live in Toronto. I'm a child and youth care practitioner and currently run an after-school program in the East York neighbourhood of Toronto. I like cake, collecting books, and geography quizzes. I chose to participate in this project because 2SLBTQ* folx are rarely represented in research that is not specifically about our community. While I cannot and should not speak for the entire community, I believe that my insights and comments are valuable.

MWENYEMKUU HUSSUN

My name is Mwenyemkuu Hussun. I am 58 years old. Born and raised in Kenya, I studied tourism in Kenya. I arrived in Canada in 2000 as a refugee. I could not work in the area of my training as Kenya and Canada have different tourism products. I became sick in 2009 and started developing seizures, so essentially I am living with a disability. It's for this reason I am volunteering — any decisions made regarding delivery of health care will have a direct impact on me.

HUGUETTE JEAN-FRANÇOIS

I'm an accessibility evangelist and a project manager with many years of experience in IT. As well as solid field experience in project management in the federal government, non-profit, international, and private sectors, I have extensive experience designing accessible teaching materials and training in both project management and computer-related skills. I have a very good knowledge of accessibility. I'm a dedicated person with superior interpersonal skills. I'm a self-motivated, team-oriented, highly reliable and responsible individual, with a strong work ethic. I have oral and written proficiency in French, English, Spanish, German, and Creole. I also have excellent research and organizational skills. A team player, I combine excellent interpersonal and communications skills, flexibility, and judgment with an ability to work independently and to handle multiple priorities and deadlines.

KENNETH JOHNSON

Il applied to participate in this healthcare consultation as the front end of the baby boomers. I am 76 and as a result have experienced healthcare as a child in Hamilton when our doctor always visited us at home when we were sick. Fast forward to the present time experiencing a whirlwind of personal doctors for my family's care as retirements and career changes had us go through five doctors in five years for my family's care!

We had to deal with the loss of my mom and mother-in-law in the past 10 years, exposing us to incredible difficulties in health care to assist them in the last stage of their lives!

I have been retired 16 years and am experiencing the usual health complications of age. I tend to talk too much and repeat stories endlessly. I love the beaches of the world with my wife, three adult children, and seven grandchildren.

I worked as a factory labourer, steel worker, social worker, engineering sales manager, employment counsellor, psychology professor, counselling specialist, international consultant, and I am also an active member of the American Psychologists Association. Never held one job longer than 7 years!



EDITH LAW

A Canadian-born retiree of Chinese and Irish patronage, I represented my school as an international exchange student in Ecuador. The following year, I married and returned to Ecuador where I resided for 20 years. I learned the Spanish language and participated in cultural activities. I taught English as a Second Language at an all-girl Catholic school and tutored international executives to polish their English/Spanish language skills. In 1987, I returned to Canada and worked as a legal assistant. In 1990, I moved to Toronto to work in international trade law. These days, I enjoy plotting the genealogy of my family and listening to the laughter of my great-grandchildren.

PETER MAZZUCCO

I was born in Etobicoke in the west end of Toronto to immigrant parents, and I spent the first 20 years of my life there before moving to various Toronto neighbourhoods. Currently, I live outside of Toronto in the town of Ajax.

My education consisted of the "school of hard knocks," which eventually led me to study at the University of Toronto Scarborough Campus. I was accepted into the Arts Administration Degree Program where I chose a double major in economics and theatre.

After university, I worked in the corporate world in the fields of logistics and supply chain management in the live music and event industry, before moving into business-to-business sales. During that time, I ventured into live theatre, TV, and film performance, which I still do on occasion. When my daughter began university this year, I realized that I am able to devote my time to other things that I feel are important to me and that affect all of us. OurCare is a great opportunity for me to be involved in an issue which I am passionate about. I believe that universal and accessible healthcare is extremely important. I am also becoming more involved in my community. I have contacted my councillor and will be attending council meetings and getting involved on issues that matter to my corner of the world. After OurCare, I will be exploring getting involved with other issues that impact our society, such as the environment and education. (My daughter is doing her undergraduate degree in education and child studies which will lead to a B.Ed degree.)

Thank you to the OurCare team for allowing me to be involved with this panel.

JOSHUA MCCOY

I'm Joshua McCoy, I grew up on a dairy farm near the city of Ottawa, and have been a longtime resident of Renfrew County. It is, I think, apparent that we have some challenges facing our healthcare system: a number of which I have experienced firsthand on my own account. I have been for most of my life an impassioned advocate for Canadian history, through community theatre as a teenager, historical reenactment as an adult, and music throughout.



FIONA MCMURRAN

I'm a retired university lecturer living in Welland, where we moved 38 years ago. I live with my husband, who has a mental illness, and our adult autistic daughter, who also suffers from epilepsy. Our healthcare needs have generally been well served, although the loss of specialist doctors over the years has necessitated trips to Hamilton for my daughter's epilepsy care. In 2006, I became involved with local citizens' groups fighting to keep Niagara's small local hospitals open in the face of government consolidation of services into large regional hospitals. This determined effort provoked an investigation by then-Ontario Ombudsman, André Morin, published in 2010 as a report entitled "The LHIN Spin." Nothing has been resolved since then and I continue to be an advocate for the kind of healthcare envisioned by Tommy Douglas, still only partially achieved through the Canada Health Act.

ELISCIA MCPHEE

My career has mainly been in adult learning and has varied in terms of industry. So far I have been really fortunate to be working at a place where inclusion, belonging, and diversity are embraced, which makes it a great place to work. I grew up out west but have made Toronto my home and enjoy this city and province — it has a lot to offer for my love of dance, food, and connection to people. The opportunity to participate in the OurCare Panel has been another great experience where I had the opportunity to hear, learn, and share perspectives and models of healthcare being executed all over Ontario. My hope is that we continue to look at new ways to ensure all Ontarians have access to all needed healthcare.

SHIREEN NOBLE

I'm privileged to work, play, and live on the unceded ancestral territory of the Algonquin Anishinabeg (colonially: Ottawa).

I'm Shireen (she/her), and I've been interested in social justice and equity for a long time. My studies in public health and my work in youth sexual health and relationship education have provided me the opportunity to learn more about these issues, and I'm excited to continue learning with you folks!

I am an avid baker (I make thousands of cookies at the holidays!), quilter, swimmer, and dog lover (ask me about my dog, Macy!)

TANYA OMEROD

I grew up in Hamilton and briefly lived in Toronto while going to school. I left university and returned home to help care for my mother when she got sick. I eventually decided to finish my education, graduating from the biotechnology program at Mohawk College in 2020. I spent the last two years exploring Ontario, experiencing the diverse communities and ecosystems this province has to offer, while always on the lookout for the best fish and chips. I volunteered for this panel because I have a lot of care and concern for the state of our healthcare system, and hope for a future primary care system that is more accessible, equitable, properly funded, and encourages proactive health care instead of reactive sick care.



PETER REID

I grew up in a rural fishing community called Hopeall on the island of Newfoundland. I first moved to Ontario in 2008, stayed for a year, and relocated to Labrador in 2009. I returned to Ontario in 2011 where I have lived since — first in Toronto and now in Markham.

I am a social worker by education and have practised in a variety of settings including long-term care, the HIV/AIDS sector, child protection, healthcare and now education.

I enjoy listening to music of various genres, singing, and playing the piano. I'm amazed by nature — in particular, forests and waterfalls. I enjoy trying new cuisines and embracing the food diversity available in the GTA.

I felt compelled to volunteer for the panel as I am concerned about the future of healthcare for myself and fellow Ontarians in terms of quality, access, and sustainability.

DUANE STANLEY

I live in Brantford, Ontario. I am employed full-time as a quality manager with Slacan Industries Inc. I volunteered for this panel as my wife is a health care worker, and we have been living through the pandemic with the same fears as everyone else for our family. I am a father of two girls and enjoy playing golf, video games, and board/card games with my family. I have had the need of our medical system for a few health issues in the past. I look forward to having some input and say with the direction our government is going with the future of our health care system.

G. STEGELMANN

I am an artist living in rural Southwestern Ontario. I grew up in the country and, after more than two decades in cities, decided to return. I volunteered for the OurCare panel because I wanted to know more about how our health care system works. I value expert guidance, but also feel public policy is often frustratingly opaque and arm's length. With real understanding, citizens can better contribute to the creation of smart social infrastructure; I'm excited for opportunities to learn and participate. My educational background is in liberal arts/English Literature. My partner is an elementary school teacher.

MIROSLAV "MIKE" SUTA

Hi, my name is Miroslav (Mike) Suta, and I was named after my father. Both of my parents are from the Czech Republic. I was born in Trenton, Ontario. I'm bilingual in English and Spanish. I learned Spanish when I lived in the Dominican Republic (seven years) and Cali, Colombia (one year).

I am retired, having previously worked as a heavy truck mechanic and in sales. I live in London and enjoy my time with my partner Debbie and our two pups, a Golden Retriever and a Goldador.

In 2010, I worked in Whistler, B.C., on the hydrogen hybrid bus project that was part of the Winter Olympics event.

I am looking forward to being on this panel and to hopefully improve our heath care system, which I see as being under attack.

REBECCA SZETO

My name is Rebecca. I am from Windsor, Ontario. I enjoy cycling in my spare time. I volunteered for this panel because I caregive for relatives who use our healthcare system regularly, and I want to see the ways primary care will grow for the future in a sustainable and economical way.

RAJESH TALPADE

My wife and I immigrated to Canada from India 22 years ago. Fortunately, it was not the first time we had been to North America, so not much of a shock. We decided to continue our journey a little further north, moving up to Thunder Bay, Ontario, for university after a few years. My wife and I love the Northwest for its geographic openness and the ability to engage in a lot more outdoor activities than both of us had growing up. We have one teenage daughter who is presently in her second year of university at Lakehead.

My university degree in nursing and subsequent work as a front-line nurse has allowed me the opportunity to see the gaps and challenges faced by Canadians in accessing equitable healthcare. As a practising nurse practitioner, I chose to be associated with this focus group as I feel a broader provincial representation would allow for a more detailed report to bring about positive and tangible change in our healthcare system.

JOSEPHINE VINCENT

I have an atypical path. I started with med school, then switched to arts, and finally graduated in business and marketing. I'm a very curious person — if you don't see me geeking out on random subjects, you will most likely find me exploring the city, trying new restaurants, or baking. My love for food even led me to a degree in French pastry. After extremely varying work experiences, I finally settled for consulting, where I help different clients improve their processes and strategies. I strongly believe that access to health care is a right, not a privilege. Joining the panel is an opportunity to make a small contribution in improving our system.

ALAN WOLSKE

Hi! I'm Al Wolske from the GTA area where I have lived all my life raising five children here. So far, I also have five grandchildren and we are all in the GTA.

I spent many years working in the building supply and contracting industry, from working in the retail side at my own hardware store in Whitby to building schools for the York Region District School Board.

In 2003, I was diagnosed with Guillain-Barré syndrome, which has left me with limited use of my legs and a forced early retirement.

Most of the last 20 odd years, I have been teaching myself how to use my legs to walk and volunteering with local groups that I can help with DIY home projects. I can't do the physical parts anymore but I can still teach and help with the details that make a project come together.

I appreciate the chance to join this panel. I hope to get a better understanding of Ontario's medical system and to share my experiences and frustrations with it.

AMELIA ZINDROS

Hello, my name is Amelia. I am a mom to seven children, ranging in age from 25 to 2. I started off doing this very young!

I am a very social person who loves interacting with people. As a young mom, I wanted to be a nurse and had even started to pursue it, but an education counsellor told me I was too old and didn't have the grades, so I gave up. My passion is still there, though, so every time someone in my circle takes a trip to the hospital, they call me. That's as good as it gets. I do, however, now appreciate that I've raised children and that in itself is a very important job. I love to create change, however small, and because of my story I have seen all sorts of situations. I love adventures, vintage anything, and laughing.

I am looking to take a PSW (personal support worker) course to try and build back up what I see as a broken system.

Speakers

Seventeen experts generously gave their time and shared their knowledge with the Ontario Priorities Panel on Primary Care. The Panel extends its sincerest thanks to each of them.

Dr. Ewan Affleck is a graduate of the McGill School of Medicine, and Dalhousie University where he studied history, Ewan Affleck worked and lived in northern Canada for 30 years. He is currently serving as the Senior Medical Advisor - Health Informatics, College of Physicians & Surgeons of Alberta, and is the past Chief Medical Information Officer of the Northwest Territories. He is currently a member of the Expert Advisory Group of the pan-Canadian Health Data Strategy, and is the chair of the Alberta Virtual Care Working Group. In 2013, he was appointed to the Order of Canada for his contribution to northern health care, and currently sits on the Order of Canada Advisory Committee.

Matthew Anderson is an experienced healthcare leader, team-builder and advocate for positive change. Before joining Ontario Health, Matthew was President and CEO of Lakeridge Health. At Ontario Health, Matthew is leading one of the largest mergers in healthcare history bringing together 22 agencies. Matthew began his career in data analytics and IT. He became Vice President and Chief Information Officer at University Health Network in 2000. In 2008, he was named CEO of the Toronto Central Local Health Integration Network and in 2010, became CEO of William Osler Health System.

Dr. Brett Belchetz is the CEO and Co-founder of Maple (getmaple.ca), Canada's leading virtual care platform connecting patients and healthcare providers like doctors and therapists for online medical visits in minutes. He's also an emergency room physician in Toronto, and a Senior Fellow at the Fraser Institute. In addition, Brett's passion for healthcare communication and policy have led him to work as an on-air medical expert for large television stations in Canada, including CTV and Global News, as well as a contributor to outlets such as the National Post. Previously, Brett worked as a management consultant with McKinsey & Company.

Dr. Robert Bell is an experienced orthopedic surgeon, clinician-scientist, and educator. He completed his medical education and internship at McGill University in 1976, and started his career as a general practitioner and emergency physician. Throughout his career, Bell has held several leadership positions, including Chief Operating Officer at Princess Margaret Hospital and CEO of the University Health Network. Bell was also appointed Deputy Minister of Health and Long-Term Care, where he supported the passage of several important acts and initiatives, such as the Patient's First Act and OHIP+ Children and Youth Pharmacare. **Dr. Jonathan Fitzsimon** graduated from Sheffield University Medical School (U.K.) in 2007. From 2009–2010 he worked as a volunteer physician in Oruro, Bolivia, before returning to the U.K. to complete the General Practice Specialty Training Program. He moved to Ontario in 2014 and started a family practice in Renfrew County. In 2020, Dr. Fitzsimon was appointed as Medical Lead of the Renfrew County Virtual Triage and Assessment Centre, Medical Lead of the Petawawa Integrated Virtual Care program and Assistant Professor at the University of Ottawa, Department of Family Medicine. He was previously Chief of Medicine at Arnprior Regional Health. Dr. Fitzsimon was the recipient of the OMA's 2021 Glenn Sawyer Service Award.

Francis Garwe is the Chief Executive Officer at Carea Community Health Centre and one of the provincial Health Systems Strategic Advisors for the Ontario Health Advisory Council. He is on the Ontario Tech University Board of Governors (OnTechU). Francis is the current provincial chair for the Black Health Committee (BHC), overseeing the development and design of the Black Health Strategy to address policy gaps and health services disparities across Ontario. He is also an Adjunct Faculty at Schulich Executive Education Centre in the Healthcare Management program, York University. He serves as one of the University of Toronto's MD Admissions File Reviewers and Interviewer for their MD program.

Dr. Tara Kiran is the Fidani Chair in Improvement and Innovation at the University of Toronto and Vice-Chair of Quality and Innovation at the Department of Family and Community Medicine. She practises family medicine at the St. Michael's Hospital where she is also a Scientist in the MAP Centre for Urban Health Solutions. Dr. Kiran completed her family medicine residency at McMaster University in 2004 and spent her first couple of years in practice as a locum in Indigenous communities in northern Ontario and in Community Health Centres in urban Toronto. She practised at the Regent Park Community Health Centre from 2006 to 2010 before joining St. Michael's in 2011.

Dr. Mekalai Kumanan, President of the Ontario College of Family Physicians, attended Dalhousie University for her undergraduate studies, Master of Health Administration degree and medical school before completing her residency at the University of Western Ontario. Since 2008, Dr. Kumanan has served the community of Cambridge, Ontario as a family physician with Two Rivers Family Health Team. Dr. Kumanan is the current Chief of Family and Community Medicine at the Cambridge Memorial Hospital. She has been an active leader with the Cambridge North Dumfries OHT, first as a Governance Co-Design Group Member and as a member of both the Primary Care Collaborative and the Steering Committee.

Dr. Danielle Martin is Professor and Chair of the Department of Family and Community Medicine (DFCM), University of Toronto. Dr. Martin is an active family physician and a respected leader in Canadian medicine. In 2006, her first year in practice, she helped launch Canadian Doctors for Medicare, the voice for Canadian physicians who believe in "a high quality, equitable, sustainable health system built on the best available evidence as the highest expression of Canadians caring for one another".

Dr. Liz Muggah is the Senior Clinical Advisor for Primary Care at Ontario Health. She is an Associate Professor in the Department of Family Medicine and her research and educational contributions have focused on enhancing primary care quality and equity and advancing physician wellness. She completed her medical degree at McMaster University, her Family Medicine residency at the University of Ottawa and received her Master of Public Health at Harvard University.

Dr. Sarah Newbery is a rural generalist family physician in practice in the community of Marathon for 24 years. She is currently Associate Dean Physician Workforce Strategy for the Northern Ontario School of Medicine and is Chief of the Staff at North of Superior Health Care Group. She is a past president of the Ontario College of Family Physicians.

Dr. Dominik Nowak is a family doctor and health leader. In addition to his clinical practice, Dr. Nowak's mission is to build teamwork across the health system. Dr. Nowak trained at McMaster University and went on to finish a Master of Health Administration at the Institute of Health Policy, Management and Evaluation at the University of Toronto. Dr. Nowak is currently a faculty member at the Dalla Lana School of Public Health and the Department of Family and Community Medicine at the University of Toronto, and he is President elect 2023 - 2024 of the Ontario Medical Association. He is a recipient of the College of Family Physicians of Canada Award of Excellence for his leadership in Canadian healthcare.

Dr. Jane Philpott is the Dean of the Faculty of Health Sciences, Director of the School of Medicine at Queen's University, and CEO of the Southeastern Ontario Academic Medical Organization. She is a medical doctor, a Professor of Family Medicine, and former Member of Parliament. From 2015 to 2019 she served as federal Minister of Health, Minister of Indigenous Services, President of the Treasury Board and Minister of Digital Government. She currently serves as the Ministers' Special Advisor for the Ontario Health Data Platform and was recently elected to the Canadian Academy of Health Sciences. **Dr. Andrew Pinto** is the founder and director of the Upstream Lab, a research team focused on tackling social determinants, population health management and using data to enable proactive care. He is a Public Health and Preventive Medicine specialist and family physician at St. Michael's Hospital in downtown Toronto, and an Associate Professor at the University of Toronto. He is also the Associate Director for Clinical Research at the University of Toronto Practice-Based Research Network (UTOPIAN) and the lead for artificial intelligence in a new initiative at the Department of Family and Community Medicine on how new technologies will change healthcare.

Dr. Kamila Premji is a family physician practising comprehensive family medicine in a community-based clinic in Ottawa. She is an Assistant Professor with the University of Ottawa, where she holds the Junior Clinical Research Chair in Family Medicine. She is also completing a PhD in Family Medicine through Western University. Inspired by her practice, she is passionate about research examining primary care access, care continuity, and health system integration.

Dr. Janet Smylie is a respected international leader in the field of Indigenous health. One of Canada's first Métis physicians, her 25 year career has been focused on addressing inequities in the health of Indigenous peoples in Canada by bridging gaps in health knowledge and practice. She has completed a Master of Public Health at John Hopkins University. She currently holds a Tier 1 Canada Research Chair in Advancing Generative Health Services for Indigenous Populations in Canada at St. Michael's Hospital where she directs the Well Living House Action Research Centre for Indigenous Infant, Child and Family Health and Wellbeing and is an active staff physician. She continues part time clinical work as a consulting family physician at Seventh Generation Midwives Toronto.

Dr. Sheryl Spithoff is a family doctor, an Assistant professor at the University of Toronto, and a Scientist at Women's College Research Institute. Her research aims to improve the health and wellbeing of people who use substances. She also conducts research at the intersection of health systems, new technologies and commercial interests.

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OurCare Priorities Panel

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Appendix

Minority Reports

Members were encouraged to share all points of view throughout the Assembly process. Discussion remained lively but respectful throughout the proceedings, and while some minor differences in opinion remained, every member of the Assembly endorsed the recommendations in this final report. However, members also were given the opportunity to write a minority report if they wished to highlight any points of agreement or disagreement, or to include their own commentary.

Fiona McMurran

Since the task was to address primary care in the province of Ontario, we did not discuss jurisdictional issues that involve the federal government, although it administers the Canada Health Act and funds a large percentage of provincial and territorial healthcare. Theoretically, the federal government has both the authority and the means to ensure that recommendations such as ours on primary care are actually implemented and then adhered to by the provincial governments and territories.

Yet the federal government has shown considerable reluctance to enforce the Canada Health Act. In our recommendations, we have called for an expansion of public health insurance coverage to areas such as mental health. The Trudeau government is moving forward with dental care, but its stated intention to introduce pharmacare seems to have stalled.

Changing the healthcare system to prioritize primary care will require considerable cooperation between both levels of government. Health insurance is provincial, and provinces and territories have the authority to list and delist services. Canadians should be able to count on receiving good healthcare no matter what province or territory they live in, but the fact is that different governments, both federal and provincial/territorial, have different priorities and opinions on public healthcare. How can we create a health system that Canadians can count on to withstand the vicissitudes of changing political landscapes?

G. Stegelmann

While crafting our report, all discussion around health included references to mental health. We felt compelled to mention it every time, specifically, explicitly. We knew failure to do so in our recommendations could mean neglecting its inclusion. But why do we have to distinguish between physical and mental health? CBT and talk therapy builds neural networks, much as physiotherapy builds muscle. Psychiatric drugs address chemical deficits/surfeits in the same way insulin or anticoagulants do. Yet, we still perceive "physical" ailments as substantial, while "mental' health is framed as something abstract-problems that may or may not be related to temperament, willpower, or character. No one says "We don't do physio in this family," or "I don't believe in insulin." No one decides to "work through" a broken bone on their own. So why, in treating our (very corporeal) brains, do we still waver in seeking or delivering care?

Language is culture. The words we choose encode shared beliefs, signal priorities and, eventually, inform policy. When language draws a line between body and mind, they become separate entities. When the umbrella term of "health" refers to everything but mental health, it perpetuates a hierarchy of perceived need and fuels stigma. Governing bodies ultimately feel justified classifying many (and especially early) mental health interventions as elective, omitting crucial services and providers from primary care coverage.

But nothing exists in a vacuum. Our recommendations in this report address providers and patients, accessibility, education, technology, etc., because the only way to repair any structure is to consider the whole. So it is with our bodies, each system contingent and acting on the rest. Breaking healthcare into discrete pockets of need creates policy blindspots and undermines our ability to address issues - individually and societally-in meaningful, sustainable ways. In defining a comprehensive, universal healthcare system, we must accept our bodies as undivided. Right down to the language we use (or don't) we need to embed the conviction that our minds are as quantifiably valuable as muscle and bone. As a result we will know, when policy-makers say "health," it means all health.

Glossary

Capitation model: In a capitated payment system, doctors receive a set fee for each person on their roster, rather than per service provided. The fee may be adjusted based on age, sex, or other factors. Ontario's capitation model adjusts fees for age and sex but is considering accounting for complexity.

Chronic disease: Chronic diseases are long-lasting illnesses with generally slow progression. They can have multiple causes, share common risk factors, and often impact quality of life and daily activities, requiring long-term management from individuals, healthcare providers, and communities.

Community Health Centres (CHCs): CHCs are non-profit organizations offering primary health and health promotion programs for individuals, families, and communities. Governed by a community-elected board, CHCs serve specific geographic or community groups. They provide various services directly to populations, with clinical care being only a small part of their operations. Physicians at CHCs receive a fixed salary.

Family Health Teams (FHTs): FHTs are primary healthcare organizations comprising nurse practitioners, registered nurses, social workers, dietitians, and other professionals working with family physicians to provide care for their community. FHTs ensure local health and community needs are met. Physicians are self-employed in this model.

Fee-for-service Model (FFS): In traditional FFS, self-employed physicians are compensated for each service rendered, as outlined in provincial schedules of benefits. Physicians don't need to work in groups or formally roster patients under this model.

Local Health Integration Networks (LHINS): LHINS were health authorities responsible for regional administration of public healthcare services in Ontario from 2007 to 2019. In 2019, the Government of Ontario amalgamated various agencies into Ontario Health, and the 14 LHINS were brought under its six regions. **Ontario Health Teams (OHTs):** OHTs are groups of providers and organizations responsible for delivering coordinated care to a defined population. They bring together different sectors within a community to better coordinate services.

Primary Care: Primary care is first-contact, accessible, continuous, comprehensive, and coordinated person-focused care, usually delivered by a family doctor or nurse practitioner. It involves first contact accessibility, continuity, comprehensiveness, and coordination.

Primary Health Care: Primary health care is a whole-of-society approach to organize and strengthen national health systems, bringing services closer to communities. It includes integrated health services, addressing broader social issues affecting health, and empowering individuals, families, and communities.

Salary model: Physicians receive a regular wage based on units of time, often accompanied by a contract outlining practice responsibilities and privileges.

Social Determinants of Health: Social determinants of health are non-medical factors influencing health outcomes, including economic policies, social norms, social policies, and political systems. They significantly affect health inequities within and between countries.

Social Stigma: Social stigma is the disapproval or discrimination against individuals or groups based on perceived characteristics that distinguish them from others in society.

Systemic Bias: Systemic bias, or institutional bias, is the inherent tendency of a process to support particular outcomes, referring to human systems like institutions that lead to inequitable outcomes, whether intentionally or unintentionally.

About OurCare

OurCare is a national conversation with everyday people about the future of primary care. The project is led by Dr. Tara Kiran, a family doctor and renowned primary care researcher. OurCare has three stages:

1. National Research Survey

The survey was online from September 20th to October 25th, 2022. More than 9,500 Canadians completed the survey, sharing their perspectives and experiences. Vox Pop Labs co-designed and executed the survey.

2. Priorities Panels

Priorities Panels will be held in five regions: Nova Scotia, Quebec, Ontario, British Columbia and a territory or Prairie province. MASS LBP is codesigning and executing the panels with OurCare advisors and local delivery partners.

3. Community Roundtables

Two community roundtables will be hosted in each of the five regions, focusing on equity-deserving groups that we did not hear enough from during stages 1 and 2. MASS LBP is co-designing and executing the community roundtables with OurCare advisors and local community organizations.

OurCare Project Partners

OurCare is funded by:

Health Canada

Health Canada is the Federal department responsible for helping Canadians maintain and improve their health, while respecting individual choices and circumstances. Production of this document has been made possible through a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.

Staples Canada - Even the Odds Campaign

Staples and MAP have come together to create Even the Odds: an initiative to raise awareness of inequity in Canada and to help build vibrant, healthy communities. The partnership is based on the shared belief that everyone should have the opportunity to thrive. Even the Odds funds research and solutions to help make the future fair for everyone. Learn more at staples.ca/eventheodds

Max Bell Foundation

Max Bell Foundation began making grants to Canadian charities in 1972. Today, the Foundation supports innovative projects that are designed to inform public policy change in four program areas: Education; Environment; Health & Wellness; and Civic Engagement & Democratic Institutions. The Foundation also delivers the Public Policy Training Institute, a professional development program designed to help participants more effectively engage in the public policy process, and PolicyForward, a future-oriented speaker series that brings thought leaders together to discuss the intersections of policy, technology, and innovation.

OurCare is based at:

MAP Centre for Urban Health Solutions

MAP Centre for Urban Solutions is a research centre dedicated to creating a healthier future for all. The centre has a focus on scientific excellence, rapid scale-up and long term community partnerships to improve health and lives in Canada. MAP is based at St. Michael's Hospital in Toronto.

St. Michael's Hospital, Unity Health Toronto

St. Michael's Hospital is a Catholic research and teaching hospital in downtown Toronto. The hospital is part of the Unity Health Toronto network of hospitals that **Aurkates P**rovidence Healthcare and St. Joseph's Health Centre. **67**

OurCare Supporters

Department of Family & Community Medicine, University of Toronto

The University of Toronto's Department of Family & Community Medicine is the largest academic department in the world and home to the World Health Organization Collaborating Centre on Family Medicine and Primary Care.

St. Michael's Foundation

Established in 1992, St. Michael's Foundation mobilizes people, businesses and foundations to support St. Michael's Hospital's world-leading health teams in designing the best care - when, where and how patients need it. Funds support state-of-the-art facilities, equipment needs, and research and education initiatives. Because St. Michael's Foundation stops at nothing to deliver the care experience patients deserve.

OurCare is working with:

Ontario Advisory Group

Jennifer Rayner, Alliance for Healthier Communities Bryn Hamilton & Kavita Mehta, Association for Family Health Teams of Ontario Rick Glazier, Canadian Institutes of Health Research Francis Garwe, Carea Community Health Centre Christie Newton, College of Family Physicians of Canada Sophia Ikura, Health Commons Solutions Lab, Sinai Health System Melanie Osmack, Indigenous Physicians Association of Canada Nicole Blackman, Indigenous Primary Health Care Council Derelie Mangin, Department of Family Medicine, McMaster University Sarah Newbery, Northern Ontario School of Medicine Dana Cooper, Nurse Practitioners' Association of Ontario Mekalai Kumanan & Kimberly Moran, Ontario College of Family Physicians Zahra Ismail & Elizabeth Muggah, Ontario Health Dominik Nowak, Jim Wright & Rose Zacharias, Ontario Medical Association Nadia Surani & Darlene Wong, Ontario Ministry of Health Danielle Brown-Shreves, Restore Medical Clinics Andrew Pinto, St. Michael's Hospital, Upstream Lab & Department of Family and **Community Medicine, University of Toronto** Kamila Premji, Department of Family Medicine, University of Ottawa Mike Green, Department of Family Medicine, Queen's University Monica Aggarwal, Dalla Lana School of Public Health, University of Toronto Aisha Lofters, Department of Family and Community Medicine, University of Toronto Danielle Martin, Department of Family and Community Medicine, University of Toronto Noah Ivers, Department of Family and Community Medicine, University of Toronto Vanessa Wright, Women's College Hospital

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National Collaborating Organizations

Ako Anyaduba, **Black Physicians of Canada** Rick Glazier, **Canadian Institute for Health Research** John Feeley & Moira Teed, **Canadian Medical Association** Christie Newton, **College of Family Physicians of Canada** Benjamin Diepeveen, Kajan Ratneswaran, Susannah Taylor, Elizabeth Toller & Jocelyne Voisin, **Health Canada** Bill Callery & Jennifer Major, **Healthcare Excellence Canada** Melanie Osmack, **Indigenous Physicians Association of Canada**

Additional Collaborators

Alan Katz, Manitoba Centre for Health Policy Amanda Condon, University of Manitoba Andrew MacLean, Dalhousie University Emily Gard Marshall, Dalhousie University Goldis Mitra, University of British Columbia Isabelle Leblanc, McGill University Katherine Stringer, Dalhousie University Kim McGrail, Centre for Health Services and Policy Research Lindsay Hedden, Simon Fraser University Maggie Keresteci, Canadian Association for Health Services & Policy Research Michel Amar, Former Communications Director, Romanow Commission Mylaine Breton, University of Sherbrooke Neb Kovacina, McGill University Renee Fernandez, **BC Family Doctors** Rita McCracken, University of British Columbia Ruth Lavergne, Dalhousie University Sabrina Wong, University of British Columbia Sarah Cook, Dalhousie University Scott Garrison, University of Alberta Thuy-Nga (Tia) Pham, Island Health Vivian R Ramsden, University of Saskatchewan

Patient Advisory Groups

Canadian Medical Association's Patient Voice Advisory Group MAP Centre for Urban Health Solutions' Improving Primary Care Public Advisors Council



Panel development and facilitation

The Ontario Priorities Panel on Primary Care was designed and facilitated by MASS LBP.

MASS is Canada's recognized leader in the design of deliberative processes that bridge the distance between citizens, stakeholders, and government. For more than a decade, MASS has been designing and executing innovative deliberative processes that help governments develop more effective policies by working together with their partners and communities.

Priorities Panel Team:

Peter MacLeod, Assembly Chair Jasmin Kay, Project Director

Facilitators:

Chimwemwe Alao Lella Blumer Rahul Sabu Joseph Jasmin Kay Joanna Massie Kayte McKnight Sarah Yaffe

Civic Concierge:

Abhimanyu Singh Chaudhary

To learn more about MASS LBP work, please visit masslbp.com

To follow developments on this project, please visit ourcare.ca

Image credits: Yuri Marakov



OurCare | NosSoins



April 12, 2023

Mayor William Gordan, Town of Midland Mayor Douglas Rawson, Town of Penetanguishene Mayor Ted Walker, Township of Tay Mayor David Evans, Township of Tiny VIA E-MAIL (bgordon@midland.ca) (drawson@penetanguishene.ca) (twalker@tay.ca) (mayorevans@tiny.ca)

Dear Mayors Gordon, Rawson, Walker and Evans,

Thank you very much for sending your letter of support for the *Learn and Stay Grant Program* at Georgian College in Barrie.

RVH values our long-standing relationship with your municipalities. Although it is most often through caring for your residents, it is truly small acts of collaboration like this that can make all the difference for the communities we serve.

We look forward to presenting to your respective Councils in the coming months to share how RVH can further support your health and wellness goals for your communities.

As a regional health centre, RVH provides critical services and programs not available elsewhere in the region, including comprehensive cancer care, a regional child and youth mental health program, a regional heart program, and most recently, a PET-CT scanner will be installed in the coming year—making it an important first in our region as well.

We are proud to partner with you and to provide these important services to residents across North Simcoe Muskoka.

Once again, a heartfelt thank you. We look forward to seeing you again soon!

Warm regards,

Gail Hunt President & CEO

Jason Reynar Vice President, Strategy, Communications & Stakeholder Relations

Inspiring care... Page 173 of 210

Thankyou for your donation in memory of Edgile Lawler During a time like this we learn how much our family and friends really mean to us

Your expression of sympathy will always be remembered

Your generosity and thought fulness is appreciated by the entire family The Lawler Family



FOR IMMEDIATE RELEASE

County Council approves 2022 Accessibility Annual Status Report

Midhurst/March 24, 2023 – On March 14, 2023, County Council formally approved the 2022 Accessibility Annual Status Report, prepared by the Joint Accessibility Advisory Committee. The report highlights the County's accomplishments over the past year towards improving accessibility and removing or preventing barriers within County facilities, programs and services.

"The County is committed to delivering services and facilities that are accessible to all our residents and visitors, including people with disabilities," said Warden Basil Clarke. "The 2022 Accessibility Annual Status Report demonstrates the progress we have made in removing barriers and improving accessibility standards across the board."

The Accessibility Annual Status Report looks at the performance of programs that have a significant impact on the lives of people with disabilities in Simcoe County, such as the County's Age-Friendly Seniors Housing Grant and the Community Paramedicine Program. The report also looks at ways that County services, such as Customer Service, Solid Waste Management and Transit, accommodate people with disabilities. To read the report, visit <u>simcoe.ca/2022AASR</u>.

The annual status report is one of the requirements of the 2019-2023 Multi-Year Accessibility Plan, which was passed in 2018 by County Council. This plan was prepared in consultation with persons with disabilities and the Joint Accessibility Advisory Committee, which includes elected officials and members of the public. The newly appointed Joint Accessibility Advisory Committee is currently working on the 2024-2028 Multi-Year Accessibility Plan, which will be brought before Council later this year.

"The Joint Accessibility Advisory Committee advocates on behalf of approximately one in four County residents who live with one or more disabilities," said Joint Accessibility Advisory Committee Chair Doug Mein. "The 2022 Accessibility Annual Status Report details various proactive measures that the County and partner municipalities have taken to adapt municipal services and programs to accommodate people of all ages living with disabilities. On behalf of the Committee, we look forward to building and implementing strategies to support all residents of Simcoe County."

For more information about the County's commitment to improving accessibility standards, visit <u>simcoe.ca/accessibility</u>.

About County of Simcoe

County of Simcoe is composed of sixteen member municipalities and provides crucial public services to County residents in addition to providing paramedic and social services to the separated cities of Barrie and Orillia. Visit our website at **simcoe.ca**.

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FOR IMMEDIATE RELEASE

County launches expanded Bursary Program to support local students and families

Midhurst/March 27, 2023 – The County of Simcoe is committed to working with member municipalities to support the pursuit of higher education. Through the County's long-standing Education Bursary Program, twenty-one \$3,000 bursaries are available to County of Simcoe students attending a post-secondary institution in Canada. One bursary is guaranteed for a resident of each of the County of Simcoe's sixteen member municipalities.

For the first time, bursaries are now available to Simcoe County students entering any year of a postsecondary education anywhere in Canada. Part-time students are also now eligible for a bursary.

"The County is pleased to support students and families across the County through our expanded bursary program," said Warden Basil Clarke. "Preparing our next generation for the job market is key to our future success. With the support of all sixteen of our member municipalities and Georgian College, we look forward to offering these bursaries to both full- and part-time students and helping more families with this important investment."

The Bursary Program provides residents accepted into the program with financial assistance to access post-secondary education and training. This program is consistent with the County of Simcoe's commitment to education, as well as encouraging community involvement and civic responsibility.

For the second year running, the County is partnering with Georgian College to offer local students additional financial support. Georgian College is offering an additional \$1,500 for up to five students attending their institution who receive a student bursary through the County of Simcoe.

Eligible applicants must reside in Simcoe County, and:

- Be a resident of a <u>participating Simcoe County municipality</u> and a Canadian citizen or permanent resident
- Have graduated (or be eligible for graduation in the year of application) with an Ontario Secondary School Diploma in Simcoe County*
- In the year of application, be enrolled and/or commencing studies in an undergraduate program at a Canadian university or college as a full-time or part-time student
- Demonstrate interest in, and contribution to, their community through active participation in extracurricular activities at their school and/or in community organizations

Eligible applicants are invited to complete an <u>online application</u>, which includes the submission of a 500-word essay on a pre-determined topic, as well as an explanation as to why they should be awarded a bursary. Applicants must also provide a copy of their Grade 12 or most recent post-secondary transcript and proof of enrollment at an Ontario University or College in an undergraduate

program. Applicants must submit their online application **by July 28, 2023**. For more information about the program, visit **simcoe.ca/studentbursary**.

* Diploma must be through an accredited institution. Includes some home-schooling programs, such as the Independent Learning Centre or the Virtual Learning Centre.

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FOR IMMEDIATE RELEASE

BUILDING

County of Simcoe surpasses 10-year housing targets Continues building up communities and lives

Midhurst/March 30, 2023 – Earlier today, officials from the County of Simcoe were joined by area partners to announce that the County has achieved its housing targets set out in *Our Community 10-Year Affordable Housing and Homelessness Prevention Strategy* (2014-2024).

Announced at the site of the County's new Tiffin Street Supportive Housing Building in Barrie, which opens in the coming weeks, Warden Basil Clarke shared that the County surpassed its goal of creating 2,685 affordable homes across the County between 2014 and 2024, one year ahead of schedule. As of December 2022, the County reports that 2,755 affordable homes have been created across Simcoe County through a variety of different housing programs since the implementation of the Strategy.

Since 2014, the County has invested almost \$220 million into building up homes, lives and ultimately hope for area residents. With this achievement of creating more affordable housing a year ahead of schedule, the County is turning attention to building up communities across the County by creating more affordable homes and rentals over the next 10 years. A new 10year affordable housing strategy is expected to begin in 2024 and carry through until 2034. It will include new goals and innovative strategies to create homes for low- and middleincome families and individuals across the region. Consultation and planning began in 2022, and will continue throughout 2023, before being presented to County Council for input and approvals.





Quotes

"County Council, our team and partners, have worked incredibly hard and invested significant dollars to surpass our targets, now reaching 2,755 new units created since 2014. When I learned that the initial goal had not only been achieved, but exceeded one year ahead of schedule, I was thrilled for those whom we serve across the region. This is a true commitment to building up the lives of our residents in all of our communities. These homes do not just put a roof over people's heads, they support communities and provide a solid foundation for some of our most vulnerable residents. We look forward to continuing our commitments and building up Simcoe County."

~ Warden Basil Clarke, County of Simcoe

"This is a significant milestone achievement for the County of Simcoe, and I want to thank everyone for their hard work and dedication in reaching this ambitious goal. These new units will have a positive impact on the people of Simcoe, offering real support to the most vulnerable in the community." ~ The Honourable Steve Clark, PC, MPP, Minister of Municipal Affairs and Housing, Government of Ontario

"These new homes have been made possible in thanks to the ambitious vision of County Council, assistance from our municipal partners and collaboration with organizations across the County. They are long-term, financially responsible investments that are building up communities across the region, and will be used by hundreds of thousands of families, seniors, and individuals for decades to come. It's clear to me that a lot has changed in Simcoe County over the past 10 years, and we have already started preliminary work and consultation on our next ten-year strategy, which will help even more residents in need across the region."

~ Mina Fayez-Bahgat, General Manager of Social and Community Services, County of Simcoe

About Our Community 10-Year Affordable Housing and Homelessness Prevention Strategy

Our Community 10-Year Affordable Housing and Homelessness Prevention Strategy is BuildingUp our communities by setting real targets and goals to create more affordable housing within communities across Simcoe County. The County's strategy continues to build up support for residents by maximizing funding, achieving targets, and working with area partners to create affordable housing units for residents across the County. Targets were established in 2014, and the County continues to adapt to meet growing needs, including initial collaboration to establish our next long-term strategy. More information can be found at **simcoe.ca/ourahhps**.

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Release

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FOR IMMEDIATE RELEASE

Tourism Simcoe County applauds local cycling business for provincial award win

Midhurst/March 21, 2023 – Earlier this month, Collingwood's Georgian Trail E-Bike Rentals was recognized as a *Bicycle Friendly Business Award* winner by *Ontario By Bike*, a lead organization developing and promoting cycling tourism in Ontario. The County of Simcoe, through Tourism Simcoe County's Cycle Simcoe initiative, is extending a huge congratulations to Georgian Trail E-Bike Rentals on their award and efforts to grow cycling tourism in our region.

"Congratulations to Georgian Trail E-Bike Rentals on this tremendous achievement," said Warden Basil Clarke. "In 2022, cycling tourism generated more than \$1.3 million in visitor spending across Simcoe County, making it one of our tourism sector's most thriving areas. Greater access to e-assisted bikes, combined with entrepreneurial ideas such as this initiative, will allow for an even wider range of visitors and residents to enjoy cycling and our amazing network of trails."

The provincial award recognizes efforts of local organizations or individuals who offer exceptional services and amenities to cyclists stopping at their locations. The annual awards are open to businesses that are certified by *Ontario By Bike* as bicycle friendly, having to meet criteria that helps ensure cyclists are welcomed at businesses they choose to stop at, whether as a cycle tourist, on a longer trip, or while biking closer to home. A full list of honourees can be found at <u>ontariobybike.ca</u>.

2023 marks the 10th anniversary of Tourism Simcoe County's Cycle Simcoe initiative. The role of Cycle Simcoe is to develop a cycling experience in Simcoe County for visitors and residents that creates a positive economic impact and helps to grow regional tourism. Today, Cycle Simcoe provides support to many Simcoe County municipalities, along with Barrie and Orillia, and continues to promote and support businesses and communities in growing cycling tourism in Simcoe County.

About Tourism Simcoe County

Tourism Simcoe County (TSC) promotes Simcoe County as a four-season destination of choice by developing products and experiences and executing comprehensive marketing campaigns across a variety of multimedia platforms. TSC provides tourism leadership throughout Simcoe County by developing the local tourism industry and forging and strengthening community partnerships. TSC is committed to supporting the sustainable growth of the region's tourism assets, including, but not limited to, Agritourism, Arts, Culture and Heritage Tourism, Indigenous Tourism and Outdoor Recreation.

About the County of Simcoe

County of Simcoe is composed of sixteen member municipalities and provides crucial public services to County residents in addition to providing paramedic and social services to the separated cities of Barrie and Orillia. Visit our website at **simcoe.ca**.

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Jennifer Straw Senior Public Relations Consultant County of Simcoe, Service Simcoe Department 705-790-5979 (mobile) Jennifer.Straw@simcoe.ca Collin Matanowitsch Manager, Public Relations County of Simcoe, Service Simcoe Department 705-734-8386 (mobile) <u>Collin.Matanowitsch@simcoe.ca</u>





County of Simcoe, Office of the Warden and CAO III0 Highway 26, Midhurst, Ontario L9X IN6 simcoe.ca

FOR IMMEDIATE RELEASE

Warden Proclaims National Volunteer Week

Midhurst/April 12, 2023 – April 16 to 22 marks National Volunteer Week in Canada. This year's theme, Volunteering Weaves us Together, highlights how important volunteering is to the strength and vibrancy of our communities.

The County of Simcoe is grateful to our 110 Simcoe Strong volunteers, who last year gave more than 8,800 hours of their time to our Long-Term Care and Seniors Services locations and the Simcoe County Museum. This year, the Simcoe Strong Volunteer program is recognizing our volunteers with the theme of "sweeter than maple syrup, thanks for sticking with us", as volunteers are the roots that make strong communities.

"Thank you to all who give their most valuable gift, their time, in support of something they believe in," said Warden Basil Clarke. "Small actions can have a positive impact on our community."

The County encourages residents to take a moment this week to share a message of thanks through social media using the hashtags #NVW2023 and #WeavingUsTogether.

For more details on our Simcoe Strong Volunteer programs or to find out how you can join our tremendous team of Simcoe Strong volunteers, please visit our <u>Long-Term Care and Seniors Services</u> and <u>Simcoe County Museum</u> program pages. As noted by renowned statesman Winston Churchill, "you make a living by what you get. You make a life by what you give."

County of Simcoe is composed of sixteen member municipalities and provides crucial public services to County residents in addition to providing paramedic and social services to the separated cities of Barrie and Orillia. Visit our website at **simcoe.ca**.

- 30 -

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BY-LAW NO. 2023-16

Being a By-law to amend Schedule 'B' to By-law 2021-66, being a By-law to Establish User Fees and Service Charges for the Township of Tay

WHEREAS Section 391 of the Municipal Act, 2001, as amended requires municipalities and local boards to maintain and make available to the public a list indicating which services and activities will be subject to fees and charges and the amount of each fee or charge;

AND WHEREAS O. Reg. 30/11: GENERAL under *Funeral, Burial and Cremation Services Act, 2002, S.O. 2002, c. 33* requires cemetery operators to establish price lists for cemeteries operated by the municipality and sets out requirements for the price list;

AND WHEREAS it is deemed necessary to amend Schedule 'B', being a cemetery price list;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS:

- 1. That Schedule 'B' of By-law 2021-66 be replaced with Schedule 'B' as attached hereto.
- 2. That the Clerk is authorized to make changes to this by-law after enactment by Council to correct spelling, punctuation or grammatical errors, or errors that are of a clerical, typographical or similar nature.
- 3. This By-law shall come into force and take effect immediately after the final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26TH DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

By-law 2021-66 Schedule 'B' - Cemetery Price List

Victoria Harbour Union

	Interment Rights	Care and Maintenance	Total Before HST	HST (13%)	Total
Grave 3' x 12'	\$600	\$400	\$1,000	\$130	\$1,130

No discount provided for purchase of multiple graves

Graves may contain:

- one body, orone body & one cremated remains, or
- 6 cremated remains.

	Cost	HST	Total
		(13%)	
Corner Posts (4)	\$478.76	\$62.24	\$541.00

Burials/Opening	Cost	HST (13%)	Total
Full/Standard	\$1,136.28	\$147.72	\$1,284.00
Cremation	\$569.92	\$74.08	\$644.00

Does not include cost of a concrete vault. If desired, a concrete vault may be ordered through a funeral home.

Disinterment	Cost	HST (13%)	Total
Full/Standard	\$2,500	\$325	\$2,825
Cremation	\$1,000	\$130	\$1,130
			· · · ·

Administrative Fees	Cost	HST (13%)	Total
Transfer of Interment Rights	\$100	\$13	\$113
Duplicate Interment Certificate	\$100	\$13	\$113
Transfer Back to Municipality	\$100	\$13	\$113
Location Staking	\$75	\$9.75	\$84.75

Markers	Care and	HST	Total
	Maintenance	(13%)	
Flat Marker (over 173 sq. inches)	\$50	\$6.50	\$56.50
Upright Marker (under 4' in height or width)	\$100	\$13.00	\$113.00
Upright Marker (over 4' in height or width)	\$200	\$26.00	\$226.00

Concrete	Cost	HST	Total
Foundations		(13%)	

Width up to 14"	To 36″	\$626.00	\$81.38	\$707.38
	37" - 42"	\$694.00	\$90.22	\$784.22
	43" - 48"	\$754.00	\$98.02	\$852.02
	49" - 54"	\$812.00	\$105.56	\$917.56
	55" - 60"	\$872.00	\$113.36	\$956.76
Width up to 16"	To 36″	\$652.00	\$84.76	\$745.73
	37" - 42"	\$721.00	\$93.73	\$814.73
	43" - 48"	\$780.00	\$101.40	\$881.40
	49" - 54"	\$838.00	\$108.94	\$946.94
	55" - 60"	\$898.00	\$116.74	\$1,014.74
Width up to 18"	To 36″	\$678.00	\$88.14	\$766.14
	37" - 42"	\$748.00	\$97.24	\$845.24
	43" - 48"	\$807.00	\$104.91	\$911.91
	49" - 54"	\$865.00	\$112.45	\$977.45
	55" - 60"	\$924.00	\$120.12	\$1,044.12
Any Width over 60" c	all for pricing			

Note: All Care and Maintenance contributions are regulated by the Funeral, Burial & Cremation Services Act (FBCSA), 2002, S.O. 2002, c.33.

Staff is hereby authorized to update annual increases to the cemetery fees as established per the Township's User Fees & Service Charges Bylaw 2021-66.

Revision Date: April 26, 2023

BY-LAW NO. 2023-22

Being a by-law to authorize a Memorandum of Understanding between the Corporation of the Township of Tay and the Corporation of the City of Barrie for the Provision of Special Operations Services

WHEREAS the Municipal Act, 2001, confers on municipalities the capacity, rights, powers and privileges of a natural person for the purpose of exercising its authority under the Act or any other Act;

AND WHEREAS the City of Barrie provides Special Operations Services to the Township of Tay;

AND WHEREAS the Council of the Corporation of the Township of Tay and the City of Barrie deem it expedient to enter into an agreement for the provision of Special Operations Services;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- 1. That the Corporation of the Township of Tay and the City of Barrie enter into an Agreement attached hereto as Schedule 'A'.
- 2. That the Mayor and Clerk are hereby authorized and directed to execute the said Agreement on behalf of the Corporation and attach thereto the Corporate Seal.
- 3. That any by-law, or part thereof, inconsistent with this by-law be and is hereby repealed.
- 4. That this by-law shall come into effect on the date of its final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

MEMORANDUM OF UNDERSTANDING

FOR THE PROVISIONS OF SPECIAL OPERATIONS SERVICES

(the "MOU")

This Memorandum of Understanding made this 26th day of April 2023

BETWEEN:

THE CORPORATION OF THE CITY OF BARRIE

(the "City of Barrie")

AND:

THE COROPORATION OF THE TOWNSHIP OF TAY

(the "Municipality")

WHEREAS:

A. The City of Barrie, through its Barrie Fire and Emergency Service, has the ability to provide the technical rescue services described in Schedule A (the "Special Operations Services") and the Municipality wishes to retain the City of Barrie to provide, when requested, the Special Operations Services.

NOW THEREFORE, the parties have agreed to the following:

1. **DEFINITIONS**

In this MOU:

"BFES" means the Barrie Fire and Emergency Service

"CBRN" means Chemical, Biological, Radiological, and Nuclear

"**CBRN/Hazmat Response**" is the control or containment or mitigation of any item or agent (biological, chemical, radiological, and nuclear), which has the potential to cause harm to humans, animals, or the environment, by itself or through interaction with other factors.

"**Confined Space Rescue**" is the removal of a person/s from a fully or partially enclosed space, (a) that is both not designed or constructed for continuous human occupancy, and (b) in which atmospheric hazards may occur because of its construction, location or contents or because of work that is done in it.

"**High/Low Angle Rescue**" is the removal of a person/s using technical rope rescue techniques and equipment to safely remove victims from a location or slope exceeding 60 degrees (high angle), 30-50 degrees (steep terrain) or less than 30 degrees (low angle).

"**Ice/Water Rescue**" is the removal of a person/s from the surface of a body of water, including water in a frozen or partially frozen state.

"Trench Rescue" is the removal of a person/s from a location below the surface of the ground in which the depth is greater than the width.

"Incident Commander" is the person responsible for all aspects of an emergency response; including quickly developing incident objectives, managing all incident operations, application of resources, and overall responsibility for all persons involved.

"Simcoe County Mutual Fire Aid Agreement" means an agreement made under the provisions of the Fire Protection and Prevention Act, 1997, as amended.

"Technical Rescue" refers to those aspects of saving life or property that employ the use of tools and skills that exceed those normally reserved for firefighting, medical emergency and rescue. These disciplines include high/low angle rescue, confined space rescue, trench rescue, ice/water rescue and CBRN/Hazmat response.

2. PURPOSE

The purpose of this MOU is to set forth the terms by which the City of Barrie, through the BFES, will provide Special Operations services to the Municipality.

The Simcoe County Mutual Aid Agreement is a reciprocal mutual aid agreement for fundamental fire service delivery on a no cost recovery basis and does not include technical rescue for the purpose of this agreement.

3. ROLES AND RESPONSIBILITIES

The City of Barrie, through BFES, shall:

- a) Respond when requested by the Municipality, subject to availability and the operational needs of BFES at the time of the request.
- b) Upon arrival at an incident, and after consultation with the Incident Commander, establish and manage the operations sector. Entry into the zone will be at the sole discretion of BFES.
- c) Ensure that none of its employees, agents, representatives, or subcontractors, enters such zones without the approval of BFES upon their arrival.

The Municipality shall:

- a) Be responsible for recognizing the nature of the incident and determining whether Technical Rescue services are required. If a need is determined, the Municipality is responsible for providing BFES with appropriate information about the nature and location of the incident.
- b) Protect the site.
- c) Provide an Incident Commander, who subject to (a) above, will work within the incident command system, provide overall command of the incident, and work jointly with BFES staff and the on-scene commanders of other responding agencies.

- d) Provide additional personnel, equipment, support and agencies as may be requested by BFES
- e) Ensure that none of its employees, agents, representatives, or subcontractors, enters such zones without the approval of BFES upon their arrival.

4. ACTIVATION OF SPECIAL OPERATIONS TEAMS

Activation - shall be made by the Municipality's fire service by an authorized officer or Incident Commander to BFES Communications Branch by radio or telephone.

Response - BFES shall respond at the discretion of the senior on-duty officer, subject to the operational requirements of BFES at the time of the request for activation.

5. PAYMENT OF COSTS

Payment of Annual Fee – The Municipality shall pay an annual stand-by fee to the City of Barrie for Technical Rescue services. Payment shall be in accordance with Schedule "A", payable on January 30th of every year during this agreement. The first year shall be prorated from the time of signing to January 30th of the following year and is payable within 30 days of the signing of this MOU.

Payment of Costs – The Municipality shall pay to the City of Barrie all costs associated with the deployment of the BFES for Special Operations services within the geographical limits of the Municipality. Costs shall be in accordance with the current City of Barrie Fees By-law at the time of activation.

Invoices – The City of Barrie shall issue to the Municipality an invoice for authorized costs incurred by the City of Barrie pursuant to this MOU. Such invoice shall be issued within sixty (60) days from the date on which BFES ceases to be used in relation to an incident, unless another date is agreed to in writing by both parties. The City of Barrie shall supply the Municipality with any documentation reasonably requested in support of the invoice.

Restriction on Compensation – The City of Barrie shall not charge the Municipality for costs for which it has already been, or will be reimbursed by another organization, including another government, or agency thereof. The City of Barrie shall be liable to return to the Municipality any monies it received from the Municipality in contravention of this section. This section shall survive the expiry or termination of this MOU.

6. TERM AND TERMINATION

Term – This MOU shall come into force on the date first above written and shall, unless terminated earlier, remain in effect until December 31, 2027.

Renewal - This MOU shall automatically renew for a five (5) year period on the same terms and conditions unless a party gives written notice of termination to the other Party at least six (6) months prior to December 31, 2027.

Termination– This MOU may be terminated by either party, at any time, upon such party giving the other party six (6) months' written notice. Termination of this MOU shall not relieve any party, from any existing and outstanding obligation on its part that was incurred pursuant to this MOU prior to the date of termination.

7. DISPUTE RESOLUTION

Dispute Resolution – If any dispute arises between the Parties as to their respective rights and obligations under this MOU, the representatives of the parties named as points of contact shall attempt to settle the dispute within fourteen (14) business days of the dispute arising. If the representatives of the disputing parties are unable to resolve the dispute within fourteen (14) business days the matter can be sent to mediation.

8. RECORDS AND INFORMATION

Records – Each party shall keep and maintain all records, reports, invoices and other documentation and all costs incurred by such party under this MOU, in a manner consistent with generally accepted accounting principles and clerical practices, and shall maintain such records and keep them available for review by the other party for a period for seven (7) years from the date this MOU expires or is terminated. The parties shall be able to inspect and to request a copy of any and all such records, invoices or other documents, as the case may be, for any purpose including the completion of an audit, on providing five (5) business days' notice. This clause shall survive the termination or expiry of this MOU.

Confidential Information – The Parties agree that except where required by law, or for the purpose of performing duties or obligations under this MOU, neither party shall directly or indirectly disclose, destroy, exploit or use, either during or after the term of this MOU, any confidential information belonging to the other party, unless the other party has provided their written consent. The parties further agree that when this MOU terminates or expires, they shall return all confidential information belonging to the other party.

Media – Each Party agrees that at no time shall it directly or indirectly communicate with the media in relation to this MOU or any monies provided under the authority of this MOU unless first providing written notice to the other party. The parties shall further not publicize or issue any publication related to this MOU unless they first notify the other party in writing.

9. INSURANCE, INDEMNITY AND LIMITS ON LIABILITY

Insurance – Each party shall, at its expense, obtain and keep in force during the term of this MOU, the following insurance, satisfactory to the other party, written by an insurer licensed to conduct business in Ontario. Coverage shall include but not limited to bodily injury, personal injury, property damage, contractual liability and contain a cross liability/severability of insured clause. Each party shall name the other party as additional named insured

a. Public Liability insurance with a limit of liability of not less than \$5,000,000.00 per occurrence.

- b. Broad From All Risk Property insurance that includes coverage on a replacement cost basis, for loss or damage to any equipment or property that is being used to provide Special Operations Services.
- c. Automobile Liability insurance covering third party property damage and bodily injury liability (including accident benefits) as may be required by Applicable Laws with limits of not less than \$2,000,000 and to include all perils Loss or Damage coverage, with respect to any vehicles used to provide Special Operations Services pursuant to this MOU.
- d. .

And that 30 days prior notice of cancellation in policy terms which reduces coverage shall be given in writing to the other party.

Indemnity - Each party, shall indemnify, defend and hold harmless the other party, its councillors, employees, contractors, agents or authorized representatives (Indemnitees), both during and following the term of this MOU, from and against any and all claims, demands, suits, losses, liabilities, damages, obligations, payments, costs, fines and expenses and incurred interest thereon, including the costs and expenses of, and accrued interest in respect of any and all actions, suits, proceedings, assessments, judgments, awards, settlements and compromises relating thereto and reasonable lawyers' fees and reasonable disbursements in connection therewith (each, an Indemnifiable loss), asserted against or suffered by an Indemnitee relating to, or in connection with, or resulting from or arising out of any action or omission of the other party, its employees, contractors, agents or authorized representatives, including any of its subcontractors, consultants, agents or advisors, in connection with this MOU or Special Operations services provided hereunder, except such claims, demands, suits, losses, liabilities, damage, obligations, payments, costs, fines, expenses, and interest as are occasioned by the negligence of willful default of the Indemnitees.

No Liability – No Party shall be responsible for any delay or failure to perform its obligations under this MOU where such delay or failure is due to causes or circumstances beyond its control.

10. GENERAL

Points of Contact - Any notice required or permitted to be given pursuant to this MOU shall be in writing and delivered personally, sent by facsimile transmission or by registered mail to the contact persons at the following addresses:

City of Barrie:

Fire Chief Cory Mainprize (or successor) City of Barrie P.O. Box 400 Barrie, ON L4M 4T5

Municipality:

Fire Chief Shawn Aymer Township of Tay Fire Department 450 Park Street, PO Box 100 Victoria Harbour, ON L0K 2A0 Each party shall provide the other party with written notification of any changes to the address or contact information for a party set out above.

Amendments – Any changes to this MOU shall be in writing and shall be agreed to by both parties before taking effect.

Legal Relationship – In this MOU nothing gives rise to an employment relationship between the parties in respect of either party's participation in or contribution to this MOU. The parties hereto expressly acknowledge that they are independent contractors. An agency, partnership or employer – employee relationship is not intended or created by this MOU.

Laws – All Parties warrant that the Parties to this agreement shall operate in compliance with all federal, provincial or municipal laws and/or regulations.

Severability – If any terms of the MOU shall be held to be illegal, invalid, unenforceable, null, void or inoperative by a court of competent jurisdiction, the remaining terms shall remain in full force and effect.

No Waiver – the failure of the Parties to enforce any of the provisions of this MOU or any of its rights in respect thereto or to insist strict adherence to any term of this MOU shall not be considered to be a waiver of such provision, right or term or in any way affect the validity of this MOU.

IN WITNESS WHEREOF each of the Parties hereto have executed the Memorandum of Understanding effective as of the date first above written.

THE CORPORATION OF THE TOWNSHIP OF TAY

Mayor	_ Date:	_ day of	, 2023
Clerk	_ Date:	_day of	, 2023
THE CORPORATION OF THE CITY	OF BARRIE		
Mayor	_ Date:	_ day of	, 2023
Clerk	_ Date:	_day of	, 2023

SCHEDULE "A"

Services to be provided by the City of Barrie.

Stand-By fee includes all technical rescue services below.

High/Low Angle Rescue Confined Space Rescue Trench Rescue Ice/Water Rescue Hazmat

YEAR	STAND-BY FEE
2023	\$5100.00
2024	\$5200.00
2025	\$5300.00
2026	\$5400.00
2027	\$5,500.00

BY-LAW No. 2023-23

Being a By-law to amend Zoning By-Law No. 2000-57 to permit and regulate Accessory Dwelling Units.

WHEREAS the Council of The Corporation of the Township of Tay deems it desirable to amend the Town's Zoning By-Law 2000-57, as amended with provisions for accessory dwelling units on certain properties within Tay; and,

WHEREAS authority is granted pursuant to Section 34 of the *Planning Act*, R.S.O. 1990, as amended, to enact such amendments.

WHEREAS no further notice is to be given pursuant to Section 34 (17) of the Planning Act, R.S.O. 1990, as amended; and

WHEREAS Section 35.1 of the Planning Act, R.S.O. 1990, passed as part of the Province's Housing Supply Action Plan, requires local municipalities to pass by-laws that allow for accessory dwelling units on certain properties in Tay.

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- (1) Section 3, Definitions, is hereby amended as follows:
 - 1. Section 3.2.78 "Dwelling Unit, Accessory" to:

"An accessory dwelling unit shall be a self-contained dwelling unit that is physically detached, attached, and/or within the principal dwelling on a lot.".

- (2) Section 4, General Provisions, is hereby amended as follows:
 - 1. Section 4.2, Accessory Dwelling Units is hereby amended to read as follows:

Notwithstanding any other provisions of this By-law to the contrary, the following provisions shall apply to permit the construction of an accessory dwelling unit, as an accessory use to a **Single Detached Dwelling**, or **Semi-Detached Dwelling**, in the permitted residential, rural, and agricultural zones subject to the following provisions:

Notwithstanding any other provisions of this By-Law, one accessory dwelling unit is permitted in a detached dwelling in the in the R1, R2, SR, A, RU & LSR Zones provided:

- a) All existing buildings and structures on the lot are lawful and compliant with the zone provisions of their appurtenant zone.
- b) The maximum lot coverage for all detached accessory buildings and structures shall be 10%.
- c) The minimum distance between a principal dwelling unit and a detached accessory dwelling unit shall be 5 metres;
- d) The minimum gross floor area of the detached accessory dwelling unit shall be no less than 37.0 m^2 (400.0 ft²) excluding the

settlement areas of Port McNicoll and Victoria Harbour with full municipal services;

- e) Accessory dwelling units are not permitted in the Grandview Beach/Paradise Point Development Area;
- f) The minimum gross floor area of the detached accessory dwelling unit shall be no less than 37.0 m² (400.0 ft²) excluding the settlement areas of Port McNicoll and Victoria Harbour with full municipal services;
- g) The maximum gross floor area for a detached accessory dwelling unit permitted is based on the lot area chart below.

Lot Area	Maximum Dwelling Size
0 ha (0 ac.) to 0.20 ha (0.5 ac.)	0.0-56.0m ² (0-600 ft ²)
0.24 ha (0.51 ac.) to 0.4 ha (1.0 ac.)	0.0-74.0m ² (0-800 ft ²)
Greater than 0.41 ha (1.1 ac.)	0.0-111m ² (0-1200 ft ²)

- h) A detached accessory dwelling unit shall be confined to a single storey, unless located above a detached accessory structure.
- Crawlspace foundations are permitted in detached accessory dwelling unit for the purposes of containing mechanical/utility equipment (heating, cooling, plumbing, electrical), provided the same does not allow for human habitation and that same crawlspace foundation does not exceed 1.8 metres in total height. Crawlspace foundations are not included in the gross floor area of the detached accessory dwelling unit.
- j) No home occupation or home industry shall be permitted within a detached accessory dwelling unit.
- k) The maximum height of a detached accessory dwelling unit shall be 4 metres unless located above an accessory structure the maximum height shall be 6 metres in total.
- A detached accessory dwelling unit shall not be permitted to have an attached garage unless the detached accessory dwelling unit is located to the rear of the attached garage maintaining the current width or proposed width of the garage. The height for an additional residential unit will remain at 4 metres.
- m) An additional dwelling unit contained within an accessory structure shall be a permanent structure anchored to a permanent foundation.
 - 2. ADU's Contained Within the Main Dwelling on Properties Zoned R1, R2, SR, A, RU & LSR Not on Full Municipal Services will be subject to the following provisions:
- a) An accessory dwelling unit is permitted within any legally permitted single detached or semi-detached dwelling on the same lot for a maximum total of two dwelling units within the main dwelling.
- b) An accessory dwelling unit located at, or above grade shall not be larger than 50% of the gross floor area of the principal dwelling or 93 m², whichever is lesser. If located in the basement of the

principal dwelling the second accessory dwelling unit may occupy the entire basement area.

- c) For an accessory dwelling unit contained within the main building, the zone provisions in the underlying zone with respect to lot area, lot frontage, lot coverage, required yards, and building height shall apply.
- d) Detached accessory dwelling units are not permitted in the Grandview Beach/Paradise Point Development Area;
- 3. Accessory Dwelling Units within the Port McNicoll and Victoria Harbour Settlement Areas with Full Municipal Services will be subject to the following provisions:
- a) Accessory dwelling units are permitted within any legally permitted single detached, semi-detached dwelling. An accessory dwelling unit may also be permitted within an accessory building on the same lot for a maximum total of three dwelling units on a lot.
- b) An Accessory dwelling unit located at, or above grade shall not be larger than 50% of the gross floor area of the principal dwelling or 93 m², whichever is lesser. If located in the basement of the principal dwelling the second accessory dwelling unit may occupy the entire basement area.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

AMENDMENT NO. 46

TO THE OFFICIAL PLAN FOR

THE TOWNSHIP OF TAY

THE CORPORATION OF THE TOWNSHIP OF TAY

BY-LAW NO. 2023-24

A By-law to adopt Amendment No. 46 to the Official Plan for the Township of Tay.

WHEREAS the Council of the Corporation of the Township of Tay, in accordance with the provisions of the *Planning Act*, R.S.O. 1990, as amended, HEREBY ENACTS AS FOLLOWS:

- 1. THAT the attached explanatory text, policies and schedule constitute the Amendment No. 46 to the Official Plan for the Township of Tay shall be and is hereby adopted.
- 2. THAT the Clerk is hereby authorized and directed to make application to the County of Simcoe for approval of the aforementioned Amendment No. 46 to the Official Plan for the Township of Tay.
- 3. THAT this Bylaw shall come into force and take effect on the date of its final passing, subject to the approval of the County of Simcoe. Read three times and finally passed in open Council this 26th day of April, 2023.

Mayor, Ted Walker

Clerk, Katelyn Johns

THE CONSTITUTIONAL STATEMENT

PART A - THE PREAMBLE - does not constitute part of this Amendment.

PART B - THE AMENDMENT - consisting of the following text and Schedule "A", constitutes Amendment No. 46 of the Township of Tay Official Plan.

AMENDMENT NO. 46

TO THE TOWNSHIP OF TAY OFFICIAL PLAN

PART A - THE PREAMBLE

1.0 Purpose of the Amendment:

The proposed amendments are to align the Township of Tay's Official Plan policies with provincial policy regarding additional residential units. Recent changes to the Planning Act, allow additional residential units within and/or on the same lot as a detached, semi-detached or townhouse dwelling. The changes permit acessory dwelling units within a dwelling or within a detached accessory building on the same lot as a dwelling. The proposed amendments are intended to facilitate the development of acessory dwelling units throughout the Township by removing barriers that residents may currently face when creating alternate housing options.

2.0 Location:

This Amendment applies to lands within the entire geographic area of the Township of Tay.

3.0 Basis:

The provisions of Subsections 16(3), of the Planning Act, R.S.O., 1990, c.P. 13, as amended, provides that an official plan shall contain policies that authorize the establishment of accessory dwelling units by authorizing the use of an accessory dwelling unit in a single detached dwelling or semi-detached dwelling, or in a detached building or structure ancillary to a single detached dwelling or semi-detached dwelling.

PART B - THE AMENDMENT

This part of the document, entitled "Part B – The Amendment", and consisting of the following text and Schedule "A", constitutes Amendment No. 46 of the Township of Tay Official Plan.

1.0 DETAILS OF THE AMENDMENT

That Section 3.8 Accessory Dwelling Units is hereby deleted and replaced with the following:

3.8 Accessory Dwelling Units

All accessory dwelling units in existing dwellings and in new housing, shall be subject to the following criteria requirements:

(a) Accessory dwelling units shall comply with the appropriate standards and provisions established in the Zoning By-law.;

(b) Accessory dwelling units shall comply with all applicable municipal and provincial policy and legislation.;

(c) The creation of an accessory dwelling unit(s) in an existing building that is legally non-complying, the accessory dwelling unit(s) shall not cause a further non-compliance. Exceptions may be provided by the Committee of Adjustment through a minor variance to the Zoning By-law.;

(d) The lot upon which an accessory dwelling unit(s) is to be located must be connected to full municipal services; or, where the lot upon which an accessory dwelling unit(s) is to be located is serviced by a private water supply or a private sewage disposal system, the lot shall be adequate to accommodate the private services and the private services shall have capacity to adequately service the primary use and all permitted accessory dwelling units in accordance with the requirements of the applicable agency.;

(e) An accessory dwelling unit shall only be permitted within an accessory building where specifically permitted by the Zoning By-law.;

(f) An accessory dwelling unit shall not be permitted within buildings located within hazardous lands, such as flooding hazard lands, erosion hazard lands, or hazardous sites.;

(g) Parking for an accessory dwelling unit(s) shall be provided in accordance with the Zoning By-law. The Zoning By-law shall establish the required parking to be provided and maintained for the sole use of the occupant of each accessory dwelling unit.

(h) Lot creation shall not be permitted for the purpose of severing an accessory dwelling unit.;

4 IMPLEMENTATION

The provisions of the Official Plan regarding the implementation of that Plan shall also apply to this Amendment.

5 INTERPRETATION

The provision of the Official Plan, as amended from time to time, shall apply in regard to the Amendment.

BY-LAW NO. 2023-25

Being a By-law to amend Zoning By-Law No. 2000-57 by rezoning lands described as Concession 9, Lot 6 (1767 Rosemount Road), Part 1 of R-Plan 51R-31171 (1810 Gratrix Road), (1900 Gratrix Road) PINS ending 0105(LT) and 0104 (LT) from the Rural "RU" Zone and Environmental Protection "EP" Zone to the Environmental Protection Exception Three "EP-3" Zone.

WHEREAS the Council of The Corporation of the Township of Tay has received an application to rezone the lands legally known as Concession 9, Lot 6 (1767 Rosemount Road), Part 1 of R-Plan 51R-31171 (1810 Gratrix Road), (1900 Gratrix Road) PINS ending 0105(LT) and 0104 (LT).

WHEREAS the Council of the Corporation of the Township of Tay have reviewed a recommendation to amend the General Zoning By-law and has approved the recommendation; and,

WHEREAS authority is granted pursuant to Section 34 of the Planning Act, R.S.O. 1990 to enact such amendments;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- Schedule "L" to General Zoning By-law No. 2000-57, is hereby further amended by rezoning those lands described as Concession 9, Lot 6 (1767 Rosemount Road), Part 1 of R-Plan 51R-31171 (1810 Gratrix Road), (1900 Gratrix Road) PINS ending 0105(LT) and 0104 (LT) from the Rural "RU" Zone and Environmental Protection "EP" Zone to the Environmental Protection Exception Three "EP-3" Zone", as shown in Schedule "A" attached hereto, and Schedule "A" attached hereto forms part of this By-law.
- 2. That notwithstanding the provisions of Sections 26.2 and 28.2, only the following uses are permitted on the subject lands.
 - Conservation use
 - Conservation and wildlife sanctuary
 - Forest reserve
- 3. This By-law shall take force and come into effect pursuant to the provisions and regulations made under the Planning Act, R.S.O. 1990, c.P.13.

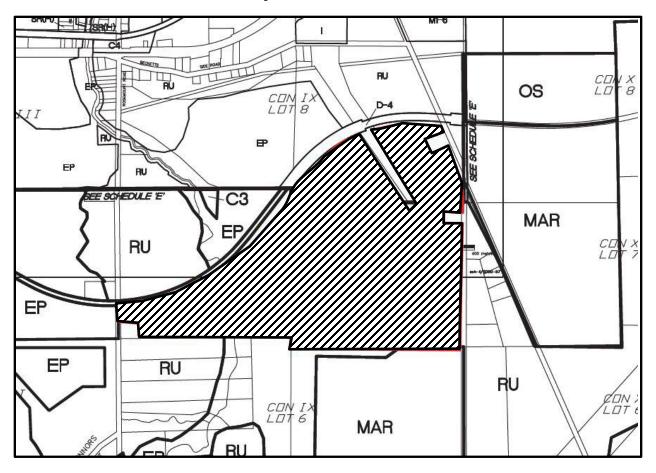
BY-LAW READ A FIRST, SECOND, AND THIRD TIME AND FINALLY THIS 26^{TH} DAY OF APRIL 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

SCHEDULE "A"

By-Law 2023-25





Lands rezoned from the Rural "RU" and Environmental Protection "EP" Zone to the Environmental Protection Exception Three "EP-3" Zone.

This is Schedule "A" to By-law No. 2023-25, passed this 26th day of April 2023.

MAYOR, Ted Walker

BY-LAW NO. 2023-26

Being a By-Law to amend By-law 2022-67 to confirm appointments to Committees of Council, Local Boards and various other external Committees as deemed necessary

WHEREAS The Corporation of the Township of Tay governs its affairs procedurally through the assistance of Standing Committees, Committees of Council and Local Boards;

AND WHEREAS it is deemed expedient to confirm additional appointments to the said Committees and Local Boards;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY HEREBY ENACTS AS FOLLOWS:

1. That Schedule "A" of By-law 2022-67, be amended to reflect the following additional appointments to the Committees of Council stated below:

Community Policing Committee

Seniors Advisory Committee

2. That Schedule "A" of By-law 2022-67, be amended to reflect the following deletions of appointments to the stated Committees of Council:

Community Policing Committee

- David Wark
- 3. That, per the Township's Code of Conduct Citizen Appointees Boards & Committee Policy, should an appointee fail to sign the Code of Conduct then their appointment shall be null and void.
- 4. That this by-law shall come into force and effect on the final passage thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

BY-LAW NO. 2023-27

Being a By-law to adopt the estimates of sums required during the year, to provide for the adoption of tax rates, and further, to provide for penalty and interest in default of payment thereof for 2023.

WHEREAS the *Municipal Act*, Section 290 provides that Councils of local municipalities shall prepare and adopt estimates of all sums required during the year;

AND WHEREAS the *Assessment Act*, R.S.O. 1990, Chapter A.31, as amended, establishes the classes of real property and methods of assessment, as well as provides for alterations to the Collector's Roll;

AND WHEREAS the *Municipal Act*, Section 312 provides for assessments made under the Assessment Act and the levying of property taxes;

AND WHEREAS Section 312 (2) of the *Municipal Act* provides that Councils of local municipalities shall pass a By-Law to levy a separate tax rate on the assessment in each property class;

AND WHEREAS Section 398 of the *Municipal Act* provides that the fees and charges imposed by a municipality on a person constitute a debt of the person to the municipality;

AND WHEREAS Section 398 (2) of the *Municipal Act* provides that the Treasurer of a municipality may add fees or charges imposed by a municipality to the tax roll and collect them in the same manner as municipal taxes;

AND WHEREAS the County of Simcoe by by-law adopts optional tools for the purpose of administering limits for the Commercial and Industrial Property Classes;

AND WHEREAS the County of Simcoe by by-law establishes the tax rates for upper tier purposes and tax ratios for 2023;

NOW THEREFORE THE MUNICIPAL COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS:

- That for the year 2023, The Corporation of the Township of Tay shall levy upon the Residential Assessment, Multi-Residential Assessment, Commercial Assessment, Industrial Assessment, Pipeline Assessment, Farmland Assessment and Managed Forest Assessment the rates of taxation per current assessment value as set out in Schedule "A" attached to this By-Law.
- **2**. That the taxes for the non-business classes shall be due and payable in two installments, namely:

June 30, 2023, and September 29, 2023

Residential Property Class Farmland Property Class Pipeline Managed Forest Railway Utility Transmission **3.** That the taxes for the business property classes shall be due and payable in two installments namely:

September 29, 2023, and November 30, 2023 Commercial Property Class Industrial Property Class

- 4. That there shall be imposed a penalty of 1.25% of the amount due for non-payment of taxes on the first day of default and additionally interest of 1.25% added on the first day of each calendar month thereafter on the balance remaining unpaid.
- 5. That the Deputy Treasurer, no later than 21 days prior to the date that the taxes are due, shall mail or cause to be mailed to the address of the residence, or place of business of each person taxed, a notice setting out the tax payment required to be made pursuant to this bylaw, the respective dates by which they are to paid to avoid penalty, and the particulars of the penalties and interest imposed by this bylaw for late payment.
- 6. That taxes shall be payable to The Corporation of the Township of Tay. Taxes are payable at the Township Office, 450 Park Street, Victoria Harbour, through banking institutions or by mail to:

P. O. Box 100 Victoria Harbour, Ontario LOK 2A0

- 7. That the Deputy Treasurer or Treasurer be and are hereby authorized to accept part payments from time to time on account of any taxes due and to give a receipt for such part payment, provided that acceptance of any part payment shall not affect the collection of any percentage charge imposed and collectable, in respect to non-payment of taxes.
- 8. That this By-Law shall come into force and take effect immediately upon the final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THE 26 DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

Schedule "A"

Township of Tay Assessment/Tax Rate Information 2023

Property Class Residential	RT		Assessment	I	Requirements	Tax Rate	Tax Ratio
Municipal		\$	1,433,065,433.00	\$	8,409,643.55	0.586829%	1.000000
Policing		\$	1,433,065,433.00	\$	1,608,208.41	0.112222%	1.000000
County		\$	1,433,065,433.00	\$	4,138,692.97	0.288800%	1.000000
Education		\$	1,435,201,433.00	\$	2,195,858.19	0.153000%	
				\$	16,352,403.12	1.140851%	
Multi-Residential	NT						
Municipal		\$	3,960,000.00	\$	23,238.43	0.586829%	1.000000
Policing		\$ \$	3,960,000.00	\$	4,443.97	0.112222%	1.000000
County		\$	3,960,000.00	\$	11,436.48	0.288800%	1.000000
Education		\$	3,960,000.00	\$	6,058.80	0.153000%	
				\$	45,177.68	1.140851%	
Multi-Residential	МТ	•		•	0.000.04	0.5000000/	4 000000
Municipal		\$	1,377,000.00	\$	8,080.64	0.586829%	1.000000
Policing County		\$ \$	1,377,000.00 1,377,000.00	\$ \$	1,545.29 3,976.78	0.112222% 0.288800%	1.000000 1.000000
Education		ֆ \$	1,377,000.00	э \$	2,106.81	0.153000%	1.000000
Education		Ψ	1,377,000.00	\$	15,709.51	1.140851%	
				Ŧ			
Commercial - Occupied	СТ	٠	44 007 745 00	¢	000 400 40	0.7470040/	4 000000
Municipal		\$	41,327,745.00	\$	296,436.10	0.717281%	1.222300
Policing County		\$ \$	41,327,745.00 41,327,745.00	\$ \$	56,688.61 145,887.04	0.137168% 0.353000%	1.222300 1.222300
Education		φ \$	41,327,745.00	\$	363,684.16	0.880000%	1.222300
		Ψ	11,021,1110.000	\$	862,695.91	2.087450%	
				•	,		
Commercial - Vacant Units	CU						
Municipal		\$ \$ \$	1,223,900.00	\$	8,778.80	0.717281%	1.222300
Policing		\$	1,223,900.00	\$	1,678.80	0.137168%	1.222300
County		\$ \$	1,223,900.00	\$	4,320.37	0.353000%	1.222300
Education		Ф	1,223,900.00	\$ \$	10,770.32 25,548.30	0.880000% 2.087450%	
				φ	23,340.30	2.00743078	
Commercial - Vacant Land	СХ						
Municipal		\$	11,377,000.00	\$	81,605.07	0.717281%	1.222300
Policing		\$	11,377,000.00	\$	15,605.65	0.137168%	1.222300
County Education		\$ \$	11,377,000.00	\$ \$	40,160.84	0.353000%	1.222300
Education		φ	11,377,000.00	Ф \$	100,117.60 237,489.16	0.880000% 2.087450%	
				Ψ	237,403.10	2.007 40070	
Commercial - Full Taxable G-I-L	СН						
Municipal		\$	231,000.00	\$	1,656.92	0.717281%	1.222300
Policing		\$	231,000.00	\$	316.86	0.137168%	1.222300
County Education		\$ \$	231,000.00 231,000.00	\$ \$	815.43 2,032.80	0.353000% 0.880000%	1.222300
Education		φ	231,000.00	φ \$	4,822.01	2.087450%	
				Ŷ	1,022101	2.007 10070	
Commercial - Small Scale Farm	C7						
Municipal		\$	30,400.00	\$	54.51	0.179320%	0.305575
Policing		\$ \$	30,400.00	\$	10.42	0.034292%	0.305575
County		\$ \$	30,400.00	\$	26.83	0.088250%	0.305575
Education		Ф	30,400.00	\$ \$	66.88 158.65	0.220000% 0.521862%	
Commercial - New to Class	хт						
Municipal	A1	\$	-	\$	-	0.717281%	1.222300
Policing		\$ \$ \$ \$	-	ф \$	-	0.137168%	1.222300
County		\$	-	\$	-	0.353000%	1.222300
Education		\$	-	\$ \$ \$ \$	-	0.880000%	
				\$	-	2.087450%	

Township of Tay Assessment/Tax Rate Information 2023

Property Class		Assessment		F	Requirements	Tax Rate	Tax Ratio	
Commercial Excess - New to Class	ΧU							
Municipal		\$	-	\$	-	0.717281%	1.222300	
Policing		\$	-	\$ \$ \$	-	0.137168%	1.222300	
County		\$ \$ \$	-	\$	-	0.353000%	1.222300	
Education		\$	-	\$	-	0.880000%		
				\$	-	2.087450%		
Commercial - New to Class	хт							
Municipal		\$	-	\$	-	0.717281%	1.222300	
Policing		\$	-	\$	-	0.137168%	1.222300	
County		\$	-	\$ \$	-	0.353000%	1.222300	
Education		\$	-	\$	-	0.880000%		
				\$	-	2.087450%		
Industrial - Occupied	п							
Municipal		\$	4,744,700.00	\$	33,203.11	0.699794%	1.192500	
Policing		\$	4,744,700.00	\$	6,349.56	0.133824%	1.192500	
County		\$	4,744,700.00	\$	16,340.46	0.344394%	1.192500	
Education		\$	4,744,700.00	\$	41,753.36	0.880000%		
				\$	97,646.49	2.058012%		
Industrial - Vacant Units	IU							
Municipal		\$	678,900.00	\$	4,750.90	0.699794%	1.192500	
Policing		\$	678,900.00	\$	908.53	0.133824%	1.192500	
County		\$	678,900.00	\$	2,338.09	0.344394%	1.192500	
Education		\$	678,900.00	\$	5,974.32	0.880000%		
				\$	13,971.84	2.058012%		
Industrial - Vacant Land	IX							
Municipal		\$	352,200.00	\$	2,464.67	0.699794%	1.192500	
Policing		\$	352,200.00	\$	471.33	0.133824%	1.192500	
County		\$	352,200.00	\$	1,212.96	0.344394%	1.192500	
Education		\$	352,200.00	\$	3,099.36	0.880000%		
				\$	7,248.32	2.058012%		
Industrial - Full Taxable G-I-L	н							
Municipal		\$	665,000.00	\$	4,653.63	0.699794%	1.192500	
Policing		\$	665,000.00	\$	889.93	0.133824%	1.192500	
County		\$ \$	665,000.00	\$	2,290.22	0.344394%	1.192500	
Education		\$	665,000.00	\$	5,852.00	0.880000%		
				\$	13,685.78	2.058012%		
Industrial - New to Class	JT							
Municipal		\$	-	\$	-	0.699794%	1.192500	
Policing		\$ \$	-	\$	-	0.133824%	1.192500	
County			-	\$	-	0.344394%	1.192500	
Education		\$	-	\$	-	0.880000%		
				\$	-	2.058012%		
Industrial - New to Class Vacant	JU							
Municipal		\$	-	\$	-	0.699794%	1.192500	
Policing		\$	-	\$	-	0.133824%	1.192500	
County		\$ \$ \$ \$	-	\$ \$ \$	-	0.344394%	1.192500	
Education		\$	-	\$ \$	-	0.880000%		
				ф	-	2.058012%		
Pipelines	PT							
Municipal		\$	4,396,000.00	\$	33,448.39	0.760882%	1.296600	
Policing		\$	4,396,000.00	\$	6,396.46	0.145506%	1.296600	
County		\$	4,396,000.00	\$	16,461.18	0.374458%	1.296600	
Education		\$	4,396,000.00	\$ ¢	38,684.80	0.880000%		
				\$	94,990.84	2.160847%		

Township of Tay Assessment/Tax Rate Information 2023

Property Class	Assessment	Re	equirements	Tax Rate	Tax Ratio
Farmlands FT					
Municipal	\$ 42,829,490.00	\$	62,833.97	0.146707%	0.250000
Policing	\$ 42,829,490.00	\$	12,015.98	0.028055%	0.250000
County	\$ 42,829,490.00	\$	30,922.89	0.072200%	0.250000
Education	\$ 42,829,490.00	\$	16,382.28	0.038250%	
		\$	122,155.12	0.285213%	
Managed Forests TT					
Municipal	\$ 9,803,514.00	\$	14,382.47	0.146707%	0.250000
Policing	\$ 9,803,514.00	\$	2,750.41	0.028055%	0.250000
County	\$ 9,803,514.00	\$	7,078.14	0.072200%	0.250000
Education	\$ 9,803,514.00	\$	3,749.84	0.038250%	

	Municipal		Policing			County	Education			Total
Total Propety Taxation	\$	8,985,231.15	\$	1,718,280.23	\$	4,421,960.67	\$	2,796,191.52	\$	17,921,663.57
Grants In Lieu of Taxation	\$	100,676.77	\$	8,793.16	\$	23,265.55	\$	57.38	\$	132,792.85
Total Levy	\$	9,085,907.92	\$	1,727,073.39	\$	4,445,226.21	\$	2,796,248.90	\$	18,054,456.42
	50%		10%			25%	15%			100%

BY-LAW NO. 2023-29

Being a By-law to appoint a Municipal Law Enforcement Officer as authorized under the provisions of the Police Services Act

WHEREAS pursuant to the Police Services Act., R.S.O. 1990, c. P.15, as amended, the Council of any municipality may appoint Municipal Law Enforcement Officers who shall be Peace Officers for the purpose of enforcing the by-laws of the municipality;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- 1. That Ieesha Dorion LeBlanc be appointed as a Municipal Law Enforcement Officer in accordance with the Police Services Act, R.S.O. 1990, c. P. 15, as amended for the Township of Tay for the term of her employment as a Municipal Law Enforcement Officer.
- 2. This By-Law shall come into force and take effect immediately upon the final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

BY-LAW NO. 2023-30

Being a By-law to appoint a Municipal Law Enforcement Officer as authorized under the provisions of the Police Services Act

WHEREAS pursuant to the Police Services Act., R.S.O. 1990, c. P.15, as amended, the Council of any municipality may appoint Municipal Law Enforcement Officers who shall be Peace Officers for the purpose of enforcing the by-laws of the municipality;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- 1. That Carter Brown be appointed as a Municipal Law Enforcement Officer in accordance with the Police Services Act, R.S.O. 1990, c. P. 15, as amended for the Township of Tay for the term of his employment as a Municipal Law Enforcement Officer.
- 2. This By-Law shall come into force and take effect immediately upon the final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker

BY-LAW NO. 2023-28

Being a By-law to adopt the proceedings of the Regular Council Meeting held on the 26th day of April, 2023

WHEREAS Section 5(3) of the Municipal Act, 2001, c.25, as amended, provides that Council's powers shall be exercised by by-law;

AND WHEREAS certain actions of Council do not require the enactment of a specific by-law;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWNSHIP OF TAY ENACTS AND BE IT ENACTED AS FOLLOWS;

- 1. Subject to Paragraph 3 of this by-law, the proceedings of the above-reference Council meeting, including all Resolutions, By-law, Recommendations, Adoptions of Committee Reports and all other motions and matters decided in the said Council Meeting are hereby adopted and confirmed, and shall have the same force and effect, as if such proceedings were expressly embodied in this by-law.
- 2. The Mayor and Clerk, or their designates, are hereby authorized to execute all such documents, and to direct other officials of the Township to take all other action, that may be required to give effect to the proceedings of the Council Meeting referred to in Paragraph 1 of this by-law.
- 3. Nothing in this by-law has the effect of conferring the status of a by-law upon any of the proceedings of the Council Meeting referred to in Paragraph 1 of this by-law where any legal prerequisite to the enactment of a specific by-law has not been satisfied.
- 4. Any member of Council who complied with the provisions of Section 5 of the Municipal Conflict of Interest Act, R.S.O., Chapter M.50 respecting the proceedings of the Council Meeting referred to in Paragraph 1 of this by-law shall be deemed to have complied with said provisions in respect of this by-law.
- 5. This By-Law shall come into force and take effect immediately upon the final passing thereof.

BY-LAW READ A FIRST, SECOND AND THIRD TIME AND FINALLY PASSED THIS 26th DAY OF APRIL, 2023.

THE CORPORATION OF THE TOWNSHIP OF TAY

MAYOR, Ted Walker