

**Board of Health Manual**  
**Public Health Sudbury & Districts**  
**By-Law**

**Category**

Board of Health By-Laws

**Section**

By-laws

**Subject**

By-law 04-88

**Number**

G-I-30

**Approved By**

Board of Health

**Original Date**

June 23, 1988

**Revised Date**

September 17, 2020

**Review Date**

September 17, 2020

**To Regulate the Proceedings of the Board of Health**

The Board of Health for the Sudbury and District Health Unit enacts as follows:

**Interpretation**

1. In this By-law:
  - a) “Act” means the *Health Protection and Promotion Act*. S.O. Ontario, Chapter 10 as amended;
  - b) “Board” means the Board of Health for the Sudbury and District Health Unit
  - c) “Chair” means the person presiding at the meeting of the Board;

- d) "Chair of the Board" means the chair elected under the Act, which reads:  
  
At the first meeting of a board of health in each year, the members of the board shall elect one of the members to be chair and one to be vice-chair of the board for the year.
- e) "Committee" means a committee of the Board, but does not include the Committee of the Whole;
- f) "Committee of the Whole" means all the members present at a meeting of the Board sitting in Committee;
- g) "Council" means the Council of any constituent municipality;
- h) "Meeting" means a meeting of the Board;
- i) "Member" means a member of the Board;
- j) "Quorum" means a majority of the members of the Board who are present at a Board meeting;
- k) "Secretary" means the Secretary of the Board of Health.
- l) "Absences" means a Board member who is not present at a Board meeting for the purpose of establishing quorum

### **General**

2. As per section 49. (2) of the Health Protection and Promotion Act, the Board shall have no fewer than three and no more than thirteen municipal members. R.S.O. 1990, c. H.7, s. 49 (2). In addition, the Lieutenant Governor in Council may appoint one or more persons as members of the board of health as long as the number of Lieutenant Governor in Council appointees are fewer in number than the municipal members of the board of health. R.S.O. 1990, c. H.7, s. 49 (3).

Where a vacancy occurs in a Board of Health by the death, disqualification, resignation or removal of a member, the person or body that appointed the member shall appoint a person forthwith to fill the vacancy for the remainder of the term of the member.

3. In all the proceedings at or taken by this Board, the following rules and regulations shall be observed and shall be the rules and regulations for the order and dispatch of business at the Board, and in the Committee thereof.
4. Except as herein provided, the rules of order of the Parliament of Canada, Bourinot shall be followed for governing the proceedings of this Board and the conduct of its members.

5. A person who is not a member of the Board or who is not a member of the council shall not be allowed to address the Board except upon invitation of the Chair subject to written request to the Secretary at least two weeks prior to the scheduled meeting.
6. Persons who have not requested in writing to address the Board may address the Board provided two-thirds of the Board are in agreement.
7. No persons shall smoke in the health unit buildings or on health unit premises.

### **Convening a Regular Meeting**

8. Regular monthly meetings shall be held at a date and time as determined by the Board which is normally the 3rd Thursday of the month at 1:30 p.m. with the exception of March, July, August and December when regular Board meetings are not scheduled.

It is expected that commitments to regularly scheduled Board meetings be honoured by the Board members.

The Board may, by resolution, alter the time, day or place of any meeting.

Board members are expected wherever possible to attend meetings in person.

Subject to any conditions or limitations in the Health Protection and Promotion Act and/or the Municipal Act, a member who participates in an open meeting through electronic means is deemed as present and counted for the purpose of establishing quorum. All members present, either in-person or members participating electronically, will have full participation, including voting rights. Further, electronic participation is also permitted for a meeting which is closed to the public.

The electronic means will enable the member to hear and to be heard by the other meeting participants. Normal board of health meeting rules and procedures will apply with necessary modifications arising from electronic participation.

### **Convening a Special Board Meeting**

9. A special meeting shall not be summoned for a time which conflicts with a regular meeting or a meeting previously called of (participating) council(s) or municipality(s).

A special meeting may be called by the Chair of the Board of Health.

The Secretary shall summon a special meeting upon receipt of a signed petition of the majority of Board members, constituting a quorum, for the purpose and at the time mentioned in the petition.

## Notice of Meetings

10. The Secretary shall give notice of each regular and special meeting of the Board and of any Committee to the members thereof and to the heads of divisions concerned with such meeting.

The notice shall be accompanied by the agenda and any other matter, so far as is known, to be brought before such meeting.

The notice shall be provided to each member no later than one week prior to the day of the meeting.

Lack of receipt of the notice shall not affect the validity of holding the meeting or any action taken thereat.

The notice for calling a special meeting of the Board shall state the business to be considered at the special meeting and not business other than that stated in the notice shall be considered at such meeting except with the unanimous consent of the members present and voting.

The public is made aware of regular board meetings or board committee meetings through the Public Health Sudbury & Districts website as per the *Municipal Act*, 238 subsection 2.1

## Preparation of the Agenda

11. The Secretary, in conjunction with the Medical Officer of Health/Chief Executive Officer, shall have prepared for the use of members at the regular meetings the agenda as follows:

- Call to Order
- Roll Call
- Declaration of Conflict of Interest
- Delegations/Presentation
- Consent agenda *which normally shall include:*
  - Minutes of Previous Meeting
  - Business Arising from Minutes
  - Report of Standing Committees
  - Report of the Medical Officer of Health/Chief Executive Officer
  - Correspondence
  - Items of Information
- New Business
- Addendum
- In-Camera
- Rise & Report
- Announcements/Enquiries
- Adjournment

12. For special meetings, the agenda shall be prepared when and as the Chair of the Board may direct or, in default of such direction, as provided in the last preceding section so far as is applicable.
13. The business of each meeting shall be taken up in the order in which it stands upon the agenda, unless otherwise decided by the Board.

### **Commencement of Meetings / Quorum**

14. As soon as there is a quorum after the hour fixed for the meeting, the Chair of the Board, or Vice-Chair or person appointed to act in their place and stead, shall take the chair and call the members to order.
15. If the person who ought to preside at any meeting does not attend by the time a quorum is present, the Secretary shall call the members to order and a presiding officer shall be appointed by majority vote to preside during the meeting or until the arrival of the person who ought to preside.
16. If there is no quorum within 15 minutes after the time appointed for the meeting, the Secretary shall call the roll and take down the names of the members then present, and the meeting shall then adjourn until such time as quorum is available.
17. Upon any member directing the attention of the Chair to the fact that a quorum is not present, the Secretary, at the request of the Chair, shall within three minutes following such request, record the names of those members present and advise the Chair, if a quorum is, or is not, present.

### **Rules of Debate and Conduct of Members at the Board**

18. The Chair shall preside over the conduct of the meeting, including the preservation of good order and decorum, ruling on points of order and deciding all questions relating to the orderly procedure of the meetings, subject to an appeal by any member to the Board from any ruling of the Chair.
19. Each deputation will be allowed a maximum of one speaker for a maximum of 10 minutes, but a member of the Board may introduce a deputation in addition to the speaker or speakers. Normally, a deputation will not be heard on an item unless there is a report from staff on the item or upon agreement of two-thirds of the Board present.

The Board shall render its decision in each case within seven days after deputations have been heard.

20. When a member finds it impossible to attend any meeting, the onus is upon the member to advise the Secretary prior to the holding of such meeting of his wishes with respect to items on the agenda or matters appearing therein in which he is vitally interested.

Three consecutive absences by a member of the Board of Health will be reviewed by the Chair, following which notification will be forwarded to the appropriate municipality or council.

Board members who are elected or appointed representatives of their municipalities shall be bound by the rules of attendance that apply to the councils of their respective municipalities. Failure to attend without prior notice at three consecutive Board meetings, or failure to attend a minimum of 50% of Board meetings in any one calendar year will result in notification of the appointing municipal council by the Board chair and may result in a request by the Board for the member to resign and/or a replacement be named.

Board members appointed by the Lieutenant Governor-in Council are answerable to the Board of Health for their attendance. Failure to provide sufficient notice of non-attendance at three consecutive meetings or failure to attend a minimum of 50% of Board meetings without just cause may result in a request by the Board for the member to resign.

21. If the Chair desires to leave the chair for the purpose of taking part in the debate or otherwise, the Chair shall call on another member to fill his place until he resumes the Chair.
22. Every member, prior to speaking to any question or motion, shall respectfully address the Chair.
23. When two or more members ask to speak, the Chair shall name the member who, in his opinion, first asked to speak.
24. A member may speak more than once on a question, but after speaking shall be placed at the foot of the list of members wishing to speak.

No member shall speak to the same question at any one time for longer than ten minutes except that the Board upon motion therefore, may grant extensions of time for speaking of up to five minutes for each time extended.

25. Subject to this section, no member may ask a question of the previous speaker except with the consent of such previous speaker and then only to clarify any part of the previous speaker's remarks and such question shall be stated concisely.

When it is a member's turn to speak, before speaking he may ask questions of the Medical Officer of Health/Chief Executive Officer or Secretary, in order to obtain information relating to the report or clause in question and, with the consent of the speaker, other members of the Board may ask a question of the same official.

A member's question shall not be ironical, rhetorical, offensive, contain epithet, innuendo, satire or ridicule, be trivial, vague or meaningless, or contain questions and answers.

26. Any member may require the question or motion under discussion to be read at any time during the debate, but not so as to interrupt a member while speaking.

27. A member shall not:

- speak disrespectfully of the Reigning Sovereign, any member of the Royal Family, the Governor-General or a Lieutenant-Governor;
- use offensive words or unparliamentary language at the Board meetings;
- disobey the rules of the Board or decision of the Chair of the Board, on questions of order or practice or upon the interpretation of the rules of the Board;
- leave his seat or make any noise or disturbance while a vote is being taken and until the result is declared; or
- interrupt a member while speaking except to raise a point of order.

28. In case any member persists in a breach of the foregoing section after having been called to order by the Chair, the Chair shall without debate put the question, "Shall the member be ordered to leave his seat for the duration of the meeting?"

If the Board votes in the affirmative, the Chair shall order the member to leave his seat for the duration of the meeting.

If the member apologizes, the Chair, with the approval of the Board, may permit him to resume his seat.

### **Questions of Privilege and Points of Order**

29. A member who desires to address the Board upon a matter which concerns the rights or privileges of the Board collectively, or of himself as a member thereof, shall be permitted to raise such matter of privilege. A breach of privilege is a wilful disregard by a member or any other person of the dignity and lawful authority of the Board. A matter of privilege shall take precedence over other matters. When a member raises a point of privilege, the Chair shall use the words "Mr./Mrs. \_\_\_\_\_ state your point of privilege". While the Chair is ruling on the point of privilege, no one shall be considered to be in possession of the floor.

30. When a member desires to call attention to a violation of the rules of procedure, he shall ask leave of the Chair to raise a point of order and after leave is granted, he shall state the point of order with a concise explanation and then not speak until the Chair has decided the point of order.

Unless a member immediately appeals to the Board, the decisions of the Chair shall be final.

If the decision is appealed, the Board shall decide the question without debate and its decision shall be final.

31. When the Chair calls a member to order, the member shall immediately cease speaking until the point of order is dealt with then he shall not speak again without the permission of the Chair unless to appeal the ruling of the Chair.

## Motions and Order of Putting Questions

32. A motion for introducing a new matter shall not be presented without notice unless the Board, without debate, dispenses with such notice by a majority vote and no report requiring action of the Board shall be introduced to the Board unless a copy has been placed in the hands of the members at least one day prior to the meeting, except by a majority vote, taken without debate.
33. Every motion presented to the Board shall be written.
34. Every motion shall be deemed to be in possession of the Board for debate after it is presented by the Chair, but may, with permission of the Board, be withdrawn at any time before amendment or decision.
35. When a matter is under debate, no motion shall be received other than a motion:
  - to adopt,
  - to amend,
  - to defer action,
  - to refer,
  - to receive,
  - to adjourn the meeting, or
  - that the vote be now taken.

36. A motion to refer or defer shall take precedence over any other amendment or motion except a motion to adjourn.

A motion to refer shall require direction as to the body to which it is being referred and is not debatable.

A motion to defer must include a reason and a time period for the deferral and is not debatable.

37. When a motion that the vote be now taken is presented, it shall be put to a vote without debate, and if carried by a majority vote of the members, the motion and any amendments thereto under discussion shall be submitted to a vote forthwith without further debate.

A motion relating to a matter not within the jurisdiction of the Board shall not be in order.

38. Only one amendment at a time can be presented to the main motion and only one amendment can be presented to an amendment, but when the amendment to the amendment to the amendment has been disposed of, another may be introduced, and when an amendment has been decided, another may be introduced.

The amendment to the amendment, if any, shall be voted on first, then if no other amendment to the amendment is presented, the amendment shall be voted on next, then if no other amendment is introduced, the main motion, or

if any amendment has carried, the main motion as amended shall be put to a vote.

Nothing in this section shall prevent other proposed amendments being read for the information of the members.

39. When the question under consideration contains distinct propositions, upon the request of any member, the vote upon each proposition shall be taken separately.
40. After the Chair commences to take a vote, no member shall speak to or present another motion until the vote has been taken on such motion, amendment or sub-amendment.
41. Every member eligible to vote at a meeting of the Board, when a vote is taken on a matter, shall vote therein unless prohibited by statute; and, if any member eligible to vote at a meeting persists in refusing to vote, he shall be deemed as voting in the negative.
42. If a member disagrees with the announcement by the Chair of the result of any vote, he may object immediately to the Chair's declaration and require that the vote be retaken.
43. When a member eligible to vote at a meeting requests a roll call vote, all members eligible to vote, unless prohibited by statute, shall vote in alphabetical order with a call for the Chair's vote to be the last taken. A roll call vote and the names of those who voted for and against the resolution shall be noted in the minutes unless the Board is in-camera. The Secretary shall announce the results of the vote.
44. Any member, including the Chair, may propose or second a motion and all members including the Chair shall vote on all motions except when disqualified by reasons of interest or otherwise; a tie vote shall be considered lost. When the Chair proposes a motion, he shall vacate the chair to the Vice-Chair during debate on the motion and reassume the chair following the vote.
45. After any matter has been decided, any member who voted therein with the majority may move for a reconsideration at the same meeting or may give notice of a motion for reconsideration of the matter for a subsequent meeting in the same year, but no discussion of the question that has been decided shall be allowed until the motion for reconsideration has carried, and no matter shall be reconsidered more than once in the same year. For the purposes of this section, the word "year" shall mean the period from January 1st to December 31st in the same year.

### **Adjournment**

46. A motion to adjourn the Board meeting or adjourn the debate shall be in order, except:

- when a member is in possession of the floor;
  - when it has been decided that the vote be now taken; or,
  - during the taking of a vote;
- but no second motion to the same effect shall be made until after some intermediate proceedings have taken place.
47. Every communication intended to be presented to the Board must be fairly written or printed and must not contain any impertinent or improper matter and shall be signed by at least one person.
48. Every such communication shall be delivered to the Secretary before the commencement of the meeting of the Board.

### **Secretary for the Board**

49. It shall be the duty of the Secretary:
- to attend or cause an assistant to attend all meetings of the Board;
  - to keep or cause to be kept full and accurate minutes of the meetings of all the Board meetings, text of by-laws and resolutions passed by it; and
  - to forward a copy of all resolutions, enactments and orders of the Board to those concerned in order to give effect to the same.

### **Appointment and Organization of Committees**

50. At the first meeting in any year, the Board shall appoint the members required by the Board to standing committees.
51. The Board may appoint committees from time to time to consider such matters as specified by the Board.

### **Conduct of Business in Committees**

52. The rules governing the procedure of the Board shall be observed in the Committees insofar as applicable.
53. It shall be the duty of the Committee:
- to report to the Board on all matters referred to them and to recommend such action as they deem necessary;
  - to report to the Board the number of meetings called during a year, at which a quorum was present, and the number of meetings attended by each member of the Committee; and
  - to forward to the incoming Committee for the following year any matter undisposed of.
54. The procedures of the Board with respect to:
- incurring of liabilities and paying of accounts;
  - contacts and expenditures;
  - petty cash;
  - tenders and quotations;

shall be in accordance with By-law 01-88 and 01-93.

### **Corporate Seal**

55. The corporate seal of the Board shall be in the form impressed herein and shall be kept by the Executive Officer or the Secretary of the Board.

### **Execution of Documents**

56. The Board may at any time and from time to time, direct the manner in which and the person or persons who may sign on behalf of the board and affix the corporate seal to any particular contract, arrangement, conveyance, mortgage, obligation, or other document or any class of contracts, arrangements, conveyances, mortgages, obligations or documents.

### **Duties of Officers**

#### **Chair and Vice-Chair**

At the first meeting of a board of health in each year, the members of the board shall elect one of the members to be chair and one to be vice-chair of the board for the year.

57. The Chair of the Board shall:

- preside at all meetings of the Board;
- represent the Board at public or official functions or designate another Board member to do so;
- be ex-officio a member of all Committees to which he has not been named a member;
- perform such other duties as may from time to time be determined by the Board.

58. The Vice-Chair shall have all the powers and perform all the duties of the Chair of the Board in the absence or disability of the Chair of the Board, together with such powers and duties, if any, as may be from time to time assigned by the Board.

When undertaking the duties outlined above, the Vice-Chair shall be paid, in lieu of his regular Board member per diem, a fee as stipulated in Board of Health policies.

59. The Vice-Chair shall preside during in-camera sessions.

60. When it is moved and carried that the Board recess and go in-camera, the Chair shall vacate the Chair and the Vice-Chair shall preside over the Board sitting as a Committee of the Whole

Board of Health in-camera matters shall be as per F-III-10 Freedom of Information.

The Vice-Chair shall report the proceeding to the Board and a motion of concurrence shall be voted upon.

## **Amendments**

61. Any provision contained herein may be repealed, amended or varied, and additions may be made to this by-law by a majority vote to give effect to any recommendation contained in a Report to the Board and such Report has been transmitted to members of the Board prior to the meeting at which the Report is to be considered, but otherwise no motion for that purpose may be considered, unless notice thereof has been received by the Secretary two weeks before a Board meeting and such notice may not be waived and in any event no bill to amend this by-law shall be introduced at the same meeting as that at which such report or motion is considered.

## **Medical Officer of Health**

62. The Board of Health may institute arrangements with the Medical Officer of Health to continue to provide medical officer of health services to Public Health Sudbury & Districts during periods of leave so as to ensure that the requirements of the governing legislation continue to be met, and such that no compensation above that provided in the existing employment agreement is paid to the Medical Officer of Health.

The Medical Officer of Health, wherever possible, will advise the Board of Health Chair if such arrangements constitute an absence or inability to act of the Medical Officer of Health as per Section 69(1) of the Health Protection and Promotion Act;

Activation of an Acting MOH appointment will be delegated to the MOH with the MOH providing notice of the Acting Appointment to the Board of Health Chair. If the MOH is unable to activate an Acting MOH appointment the activation will be done by the Board of Health Chair. The Acting Medical Officer of Health must provide written consent to the appointment.

Per Section 68(2) of the HPPA, where the office of the MOH is vacant or the MOH is absent or unable to act, the Associate MOH of the board shall act as and has all the powers of the MOH.

## **Dismissal of Medical Officer(s) of Health or Associate Medical Officer of Health**

63. Per Section 66 of the HPPA, a decision by the Board of Health to dismiss a Medical Officer of Health or an Associate Medical Officer of Health from office is not effective unless:
  - the decision is carried by the vote of two-thirds of the members of the Board; and
  - the Minister consents in writing to the dismissal.

The Board of Health shall not vote on the dismissal of a Medical Officer of Health or Associate Medical Officer of Health unless the Board has given the officer:

- reasonable written notice of the time, place and purpose of the meeting at which the dismissal is to be considered;
- a written statement of the reason for the proposal to dismiss the officer; and

- an opportunity to attend and to make representation to the Board at the meeting.

### **MOH/CEO Meeting Notice and Attendance**

64. The MOH/CEO is entitled to notice of and to attend each meeting of the Board of Health and every committee of the board, but the Board may require the MOH/CEO withdraw from any part of a meeting at which the Board of a committee of the board intends to consider a matter related to the remuneration or the performance of the duties of the MOH/CEO.

### **General**

65. In this by-law, words importing the singular number of the masculine gender only shall include more person, parties or things of the same kind than one and females as well as males and the converse.

Enacted and passed by the Board of Health, Sudbury & District Health Unit this 23<sup>rd</sup> day of June 1988.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 26<sup>th</sup> day of February 1990.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 23<sup>rd</sup> day of May 1991.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 29<sup>th</sup> day of June 1992.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 22<sup>nd</sup> day of April 1993.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 28<sup>th</sup> day of April 1994.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 27<sup>th</sup> day of April 1995.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 23<sup>rd</sup> day of May 1996.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 28<sup>th</sup> day of May 1998.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 22<sup>nd</sup> day of April 1999.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 25<sup>th</sup> day of May 2000.  
 Reviewed and passed by the Board of Health, Sudbury & District Health Unit this 22<sup>nd</sup> day of February 2001.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 17<sup>th</sup> day of October 2002.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 17<sup>th</sup> day of June 2004.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 15<sup>th</sup> day of November 2007.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 18<sup>th</sup> day of November 2010.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 16<sup>th</sup> day of February 2012.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 20<sup>th</sup> day of February 2014.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 15<sup>th</sup> day of October 2015.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 16<sup>th</sup> day of June 2016.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 15<sup>th</sup> day of June 2017.  
 Revised and passed by the Board of Health, Sudbury & District Health Unit this 21<sup>st</sup> day of September 2017.  
 Revised and passed by the Board of Health, Public Health Sudbury & Districts this 21<sup>st</sup> day of June 2018.  
 Revised and passed by the Board of Health, Public Health Sudbury & Districts this 16<sup>st</sup> day of April 2020.  
 Revised and passed by the Board of Health, Public Health Sudbury & Districts this 17<sup>th</sup> day of September 2020.