

Unionville Home Society

GOVERNANCE COMMITTEE MEETING

AGENDA

Tuesday, March 11, 2025

5:00pm – 6:30pm

In-person (UHS Conference Room at Union Villa)/Zoom Meeting (Hybrid)

Committee Members:	Samantha van Velzen (Chair), Glenn Crosby (IPC), Philip Enright, Dan Horchik, Robert Cattle
UHS Staff:	Abby Katz Starr (President & CEO), Julie Horne (CFO & Privacy Officer), Monique Wilson (Director, Business Operations), Evelyn McGrogan (Sr. Administrative Assistant)
Regrets:	Philip Gunn (Ex-Officio)

#	Agenda Item	Encl.	Lead	Time
1.	Call to Order		Chair	5:00 – 5:05pm
2.	Roll Call and Appointment of Committee Meeting Chair and Recording Secretary			
3.	Confirmation of Quorum Present			
4.	Confirmation of Proper Notice Given			
5.	Declaration of Conflicts of Interest			
6.	Approval of the Agenda	√		
7.	Approval of the Minutes - January 28, 2025	√	Chair	
8.	Business arising from the Minutes		Chair/ Abby Katz Starr	5:05pm
9.	Update from Nominating Committee		Glenn Crosby	5:10pm
10.	Follow-up Risk Management	√	Monique Wilson/ Abby Katz Starr	5:15-5:30pm
11.	In-Camera Policy	√	Abby Katz Starr	5:35-5:50pm
12.	Discussion on Legal Costs	√	Abby Katz Starr	5:50-6:05pm
13.	Corporate Incident Response and Escalation Policy	√	Abby Katz Starr	6:05-6:20pm
10.	Adjournment/Date and Time of Next meeting: Wednesday May 14, 2025 - 5:00-6:30pm		Chair	6:30pm

Unionville Home Society

GOVERNANCE COMMITTEE MEETING

Tuesday, January 28, 2025

5:00 – 6:30 p.m.

In-person (UHS Conference Room at Union Villa)/Zoom Meeting (Hybrid)

MINUTES

Committee Members Present:	Samantha van Velzen (Chair), Philip Gunn, Philip Enright, Dan Horchik, Glenn Crosby (IPC), Robert Cattle
UHS Staff:	Abby Katz Starr (CEO), Julie Horne (CFO), Monique Wilson (Director, Business Operations), Evelyn McGrogan (AA)
Regrets:	N/A

1. Call to Order

Samantha van Velzen called the meeting to order at 5:06pm.

2. Roll Call and Appointments of Meeting Chair and Recording Secretary

A roll call was completed. Samantha van Velzen and Evelyn McGrogan were appointed meeting Chair and Recording Secretary, respectively.

3. Confirmation of Quorum Present

It was declared that a quorum of the Directors was present.

4. Confirmation of Proper Notice Given

All of the Directors having been given proper notice of the meeting and being present or having waived notice, the meeting was declared to be regularly constituted in accordance with the by-laws of the Corporation.

5. Conflict of Interest

No conflicts of interest were declared.

6. Agenda

MOTION BD/25/01/28

Moved: Phil Enright

Seconded: Dan Horchik

That the Agenda be approved as presented.

CARRIED

7. Approval of Minutes - November 20, 2024

MOTION BD/25/01/28

Moved: Rob Cattle

Seconded: Dan Horchik

That the Minutes from the November 20, 2024 Governance Committee be approved as presented.

CARRIED

8. Business Arising from the Minutes

8.1 Risk Management Registry 2024-2025

Monique Wilson presented the proposed Risk Management strategy that senior leadership would be using. It is based on CARF and the Ministry, requirements on what we must report on risk, potential cause/impact, probability, mitigation strategy, indication of success, cost/resource.

Each risk links to a strategic pillar, potential impact, probability of it happening, and mitigation strategy. There are nine risks which are the priorities that we propose to report on to Governance and then the Boards. We will report quarterly to the Board on the following priority items – Epidemics, Higher incidents of residents with responsive behaviours, Critical incidents, Cyber Security Threat, Physical building frailties (aging faster than expected, maintenance upgrades, replace), Fraud, Staff recruitment/retention, Sudden departure of executive leadership. Question was raised about Black Swan events – these are rare, unpredictable, and potentially devastating occurrences that are difficult to predict.

We are proposing sharing a Risk Management Dashboard – this is the report that the Governance Committee will receive quarterly, listing the priorities that are more likely to be active prior to presentation to the Boards.

We should be reporting on these risks, it is a combination of what we're obligated to do under our insurer HIROC, as well as under CARF. It's the right time to do this, and these are the things that the Board should know about on a regular basis.

Monique described the overarching risk legend – red, yellow, green. It was suggested that the UHS Risk Management Registry include a piece that identifies the current temperature of a certain risk at each quarter. Abby noted that we likely have not captured all risks but perhaps have captured the lion's share of them. If the Board determines we missed some, they can always be added.

Samantha van Velzen noted that the Board should be provided with background on risk so that they are clear about it, and know what their obligations are to review the risks and make decisions based on them. She asked that there be an explanation page added to the document to provide guidance for the Board. A second suggestion was made to shade the entire cell yellow or red where a significant risk has been identified, as this will assist the Board to immediately identify the risk and need for action.

Abby explained that this risk assessment first came to the Senior Leadership Team, using CARF as a way to decide impact and probability. Abby also had some discussion with Advantage Ontario and the CEO Alliance, they looked at what 27 or 28 other homes were doing on risk.

A further suggestion was made to have another tab showing the flow of review for risk, noting that this would be an important piece so that we are all following timelines, eg. Reviewed by Governance Committee, reviewed by UHS Board, and showing the roles of each group, so that everyone understands what they are required to do.

Request was made to bring this Risk Management Strategy back to the next Governance Committee meeting before it goes to the Board for review.

8.2 Wyndham Gardens – Rental Policy Waivers

Draft waivers prepared by BLG as directed by the WGAU Board were presented to the Committee – one for the host to sign, as well as one for each participant to sign if necessary (dependent on the risk assessment of the activity). Question was raised as to why there is a need for a Participant Waiver. Abby noted that the Participant waiver had been suggested by our law firm, in case the host wants to hold an event that could be more susceptible to participant injury, eg. axe-throwing event or something similar. It was noted that most of the events that the Residents are having include family dinners, birthday parties, anniversary parties, etc., but there could always be the possibility of a different kind of event that could warrant such a waiver.

Several Committee members expressed that the waivers seem too aggressive, and that perhaps the language could be more relaxed. It was also suggested that language included in the rental policy itself should also be included in the waiver, eg. Liable for fees noted in the rental policy and that they assume all risks. Question was raised about the actual rental fee for rooms at Wyndham Gardens currently at \$50.00 for an 8-hour event – how does that even cover the cost of clean-up? It was noted that the rental fee is not high enough for room rental. A question was raised about whether UHS should be considered a releasee, as there are UHS employees who work at Wyndham Gardens. Abby will have further discussion with legal counsel about these waivers, and they will be brought back to the next Governance Committee meeting.

9.0 UHS Board In-Camera Meeting Protocol

The Committee discussed issues around minutes being taken at an In-Camera Session, whether or not it is required under legislation. It was determined that no legislation requires the taking of minutes for In-Camera Sessions, but historically UHS has always taken such minutes and filed them in a sealed envelope in the CEO Office. There was a suggestion that no minutes should be taken during In-Camera Sessions. It was also suggested that decisions should not be made during In-Camera Sessions, all decisions should be made once the group has risen from any In-Camera Session, and should be reported in minutes of the meeting. In-Camera Sessions are held to give Committee or Board members the opportunity to speak openly and freely about issues, without feeling pressured. If the issues are about personnel, it was noted that this needs to be documented somehow. What if a claim was made against the Board at some point – shouldn't we have documentation that can be referred to about discussions held?

Abby was asked to have further discussion with legal counsel about In-Camera Sessions, including whether minutes should be taken during those sessions, and if so, who holds those minutes, and whether decisions can be made during In-Camera Sessions. Abby to report back to the next Governance Committee meeting.

9.1 Launching Nominations Committee

Glenn noted that he has approached the following people and they have agreed to serve on the Nominations Committee. He is proposing the following members to form the Nominations Committee – Glenn Crosby, Chair, Phil Gunn, Phil Enright, Amaar Naqi, Deb Ambrose, Tracey Deline and David Rackus.

With regard to nominations, Glenn suggested that it is more effective to see people's work on Committees, before suggesting that they be nominated for a Board position.

MOTION BD/25/01/28

Moved: Dan Horchik

Seconded: Rob Cattle

That the following persons be appointed to the Nominations Committee for the UHS Board – Glenn Crosby (Chair), Phil Gunn, Phil Enright, Amaar Naqi, Deb Ambrose, Tracey Deline, David Rackus.

CARRIED

9.2 Board Portal

Question was raised as to why the Board portal is no longer being used to house Board and Committee materials and minutes, as well as why the historical material has been removed from the Portal. It was so much easier to find materials on that portal rather than digging through emails in search of materials, especially when attending a meeting virtually. Abby will speak with Maria Dimson, Director, Development & Communications to determine more about the Board portal.

10.0 Adjournment/Date of Next Meeting

MOTION BD/25/01/28

Moved: Glenn Crosby

Seconded: Philip Gunn

That the meeting be adjourned at 6:21 p.m.

CARRIED

Date of Next Meeting – changed to Tuesday, March 11, 2025, 5:00 – 6:30 p.m. – UHS Conference Room, and hybrid meeting using ZOOM.

AKS:EM

UHS RISK MANAGEMENT REGISTRY - 2025/26
Risk Priority List

CARF Standard	Strategic Goal	Risk	Potential Cause/Impact	Potential Impact	Probability	Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands						
									Estimated	Actual					
Programs & Services	Sustainable Organization	Epidemic	Risk of health and safety to Residents, Staff, Services and Business Integrity	H	M	Update policies, checklists, Emergency Preparedness/DR Plan, Outbreak Mgmt Plans - Critical Response Teams in place; Strengthen partnerships with Health Units, Hospitals and other partners. Continuous review of data to establish continuous improvement strategies	CEO	Policies updated, Protocols and Practices documented and staff trained, Outbreak Mgmt Program created to link with Emerg Plan, Local Hosp is advisor to UHS on practices. Create pandemic response teams Q1 2024/25. Continuous policy review and updating;							
Programs & Services	Sustainable Organization	Higher incidents of residents with responsive behaviours	Highly responsive behaviours and severity of dementia behaviours appears to impose Violence/Abuse to staff involving residents	H	H	Review and update H&S assessments; enhanced training; enhance recruitment practices to include specialized training and orientation;	Dir Bus Ops; Administrator; DOC; HR Manager	100% of identified staff trained in GPA, 100% of Training in dementiability undertaken, high intensity funding, enhanced admissions processesby Q3 2024/25 (current uptodate med and psych records; care plan meetings altered to suit needs of resident)							
Programs & Services	Sustainable Organization	Critical incidents	Risk of order or fine	M	H	Update Investigation Process; training refresh on practices and investigative techniques	Administrator; DOC; Dir Bus Ops; HR Manager	Low Ministry response and reduction in CI's							
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact x			Probability x			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands		
				H	M	L	H	M	L				Estimated	Actual	
Info Mgmt Technology	Sustainable Organization	Cyber Security Threat	Loss of some or all systems and information; loss of finances	x				x			Liaise with new IT Vendor to develop Anti Cyber Secutiry protocols; fire walls in place; participate in provincial cyber security program; relying on vendor to oversee the successful monitoring of systems and security etc. training/notifactions/communications etc.	CFO	100% of staff being trained in cybersecurity (how to identify, how not to responde etc); reduction in percentage of phishing emails responded to		
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact x			Probability x			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands		
				H	M	L	H	M	L				Estimated	Actual	
Financial	Sustainable Organization	Physical building frailties - aging faster than predicted - mainteance upgrade replace	Challenges with ability to fund capital repairs within the current envelope.	x				x			Anticipating preventative maintenance practices. Consider enhanced fundraising strategies and multi year action plan development and implementation and implementation of the recommendations of the building condition study.	Dir EVS; Dir Dev & Comms	Reduction in costs associated with repairs and replacements; Successful development of fundraising strategies that address facility infrastructure		

Financial	Sustainable Organization	Fraud	loss of significant funds, reputational damage due to fraudulent financial activities;							Policies re: accountability and processes; more rigorous oversight of expenditures/payments; continuous communications with financial institutions; cheque prevention process; EFT vs manual. As a result of our recent experiences we have established necessary processes and practices, training in place	CFO	Reduction in the incidents of fraud; 100% of staff trained; 100% vendors are on EFT		
CARF Standard	Strategic Goal	Risk	Risk Sub Category	Potential Impact x			Probability x			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
HR	Sustainable Organization	Staff recruitment retention	Staff Shortages - risk of understaffing and reliance on agency staff impacting finances and CA. due to limited funds and a change in the workforce wanting to work remotely; RPN PSW salary disparity with market; employee to resident ratio much higher than in the acute care setting							Enhanced recruitment strategy; review opportunity for incentives, innovation. Change posting approach - adopt marketing approach; increase use of social media outreach regarding postings; Offer education and training unique to UHS - York Seneca etc, innovation etc; working with Prov and other partners to communicate LTC is a career of choice and UHS as an employer of choice; Develop knowledge transfer opportunities with staff	Dir of Bus Ops	25% reduction in the use of external agencies; All lines filled; 100% of identified staff have the required training for their roles; Increase in staff satisfaction survey results.		
HR	Sustainable Organization	Sudden departure of executive leadership	Insufficient systems in place to continue operations without potential reporting delays due to: Complexities in the LTC funding model that limits the candidate pool; a complex 3 corporation structure and current financial systems integration knowledge and specialized expertise that is held within one historical area.							Create comprehensive succession plan within the Finance department; training internal candidates on the intricacies of existing systems and processes; development of knowledge transfer plan; instruction manuals; creation of backup with administrator rights on all systems.	CEO, CFO; Dir Bus Ops	Interim vacancy management plan and implementation end of Q4; and longer term succession plan role identified and staffed by Q 2025/26; knowledge transfer plans in place by Q4 2024/25; . 100% of current systems operations documented and shared		

HIROC		Potential Impact/Severity		Probability	
Water/Sewage	Wrongful Dismiss		Very likely or expected to occur or has occurred.		Significant impact; likely that business may be halted, significant loss (\$, life, services, assets, reputation)
Patient Falls	Windstorms		Might occur or might occur under certain circumstances or may occur about half the time.		Medium impact and ramifications. Action required to mitigate risk
Visitor Falls	Employee Fraud		Unlikely to occur, rare occurrence or may only occur in exceptional circumstances.		Minor impact, monitor, no action required
Fire Losses	Status of patient				
Mgmt of complaints					

UHS RISK MANAGEMENT REGISTRY - 2025/26

HIROC		Lead/Co-Leads: Abby Katz Starr - President and CEO		Priority Item
Water/Sewage	Wrongful Dismiss	Contributors: Terry Collins-Administrator, Sameer Singh Dir infrast & Enviro Serv, Julie Horne-CFO, Maria Dimson-Dir DevCom, Monique Wilson-Dir Bus Ops		
Patient Falls	Windstorms	Potential Impact/Severity		Probability
Visitor Falls	Employee Fraud	High	Very likely or expected to occur or has occurred.	High
Fire Losses	Status of patient	Medium	Might occur or might occur under certain circumstances or may occur about half the time	Medium
Mgmt of complaints		Low	Unlikely to occur, rare occurrence or may only occur in exceptional circumstances.	Low

CARF Standard	Strategic Goal	Risk	Potential impact	Potential Impact			Probability			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
Legal Compliance	Sustainable Organization	Operational interruption	Ministry intervention; data management gaps; fines; delays in processing transactions and challenges in understanding planning and acting on potential risk		x				x	Development of overarching organizational Risk Management and Quality Assurance/Performance Improvement Frameworks. Individual department checklists and contingencies and redundancies are in place to meet business, program and services functions	CEO; Dir of Bus Ops	Operational frameworks in place that ensure we manage, monitor and control internal processes and practices: eg risk registry and reporting process developed by Q2 2024/25; QA Framework enhanced by Q3 2024/25		
Q4 Report Back														
Legal Compliance	Sustainable Organization	Loss of accreditation	Loss of Reputational Damage and funding due to inability to meet CARF Standards and Requirements and lose accreditation		x				x	Review of CARF requirements and standards against current practices.	CEO; Dir of Bus Ops	Successful accreditation with minimal recommendations		
Q4 Report Back														
Legal Compliance	Sustainable Organization	Black Swan Event	An uncommon or unforeseen occurrence that is extremely rare, has a major impact, and is unpredictable in nature they include financial risk, reputational risk, resident risk, supply chain risk, and risk of legal actions, fines etc.	x					x	Review existing Threat Risk/Hazard Assessment; Emerg Pln, Critical Response Team identified, strengthen internal business processes (eg. AP; contract mgnt etc); identify and implement technology solutions that digitize current manual processes offer speed, agility and flexibility.	Critical Response Team, SLT, Board	Technology plan created by Q4 2024/25; updated Emerg Plan Q4;		
Q4 Report Back														
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact			Probability			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
Programs & Services	Sustainable Organization	★ Epidemic	Risk of health and safety to Residents, Staff, Services and Business Integrity	x				x		Update policies, checklists, Emergency Preparedness/DR Plan, Outbreak Mgmt Plans - Critical Response Teams in place; Strengthen partnerships with Health Units, Hospitals and other partners. Continuous review of data to establish continuous improvement strategies	CEO	Policies updated, Protocols and Practices documented and staff trained, Outbreak Mgmt Program created to link with Emerg Plan, Local Hosp is advisor to UHS on practices. Create pandemic response teams Q1 2024/25. Continuous policy review and updating		
Q4 Report Back														
Programs & Services	Sustainable Organization	HIROC Requirements	Appendix A - HIROC RiskAssessmetn Chicklist		x				x	insurers require participating in the program provides a reduction in insurance premium y reporting. We are enhancing our internal co-ordination processes. Some risks may be duplicated based on their potential impact. See HIROC Register	Administrator, Dir IES; Dir Bus Ops; CFO	Mandatory Compliance and reporting requirements submitted on time by Mid Sept 2024		
Q4 Report Back														
Programs & Services	Sustainable Organization	Higher incidents of residents with responsive behaviours ★	Highly responsive behaviours and severity of dementia behaviours appears to impose Violence/Abuse to staff involving residents	x			x			Review and update H&S assessments; enhanced training; enhance recruitment practices to include specialized training and orientation;	Dir Bus Ops; Administrator; DOC; HR Manager	100% of identified staff trained in GPA, 100% of Training in dementiability undertaken, high intensity funding, enhanced admissions processesby Q5 2024/25 (current uptodate med and psych records; care plan meetings altered to suit needs of resident)		

Q4 Report Back														
Programs & Services	Sustainable Organization	Critical incidents 	Risk of order or fine		 x		 x			Update Investigation Process; training refresh on practices and investigative techniques	Administrator; DOC; Dir Bus Ops; HR Manager	Low Ministry response and reduction in CI's		
Q4 Report Back														
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact x			Probability x			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
Info Mgmt Technology	Sustainable Organization	loss of technical infrastructure	Potential of loss or harm related to technical infrastructure or the use of technology. Loss of internet; Loss of access to resident data; loss of information; resulting in manual processing causing data errors impacts resident care financial processes		 x				 x	Undertake external review of system security; Create/Update IM & Tech policies that support operations in the absence of technology. Regularly audit users and policy. Create multi year technology plan including; upgrade vendor service support. Old tech equipment to be upgraded, ensure all equip and users are on the same platform windows 10 - 11 prior to Oct 2025	CEO, CFO	Vendor service support upgrade Q1 2024/25; Enhance cyber security monitoring and protocols Q2 2024/25; Update acceptable use policy and communicate to staff; when an incident occurs the plan is enacted and issues resolved within 48 hrs 100% of the time		
Q4 Report Back														
Info Mgmt Technology	Sustainable Organization	Privacy Breach	Privacy Risk due to inability to maintain security of information and Systems						 x	Undertake external review of system security; Create/Update IM & Tech policies. Regularly audit users and policy. Ongoing training of staff on the importance of privacy and confidentiality; Create multi year technology plan	CEO, CFO	Create policies (acceptable use;; Privacy) . Sign on banner for all users implemented; Additional resource identified and trained to provide support; staff trained on the importance of privacy and confidentiality; reduction of incidents at 0%		
Q4 Report Back														
Info Mgmt Technology	Sustainable Organization	Cyber Security Threat 	Loss of some or all systems and information; loss of finances					 x		Liaise with new IT Vendor to develop Anti Cyber Security protocols; fire walls in place; participate in provincial cyber security program; relying on vendor to oversee the successful monitoring of systems and security etc. training/notifactions/communications etc.	CFO	100% of staff being trained in cybersecurity (how to identify, how not to respond etc); reduction in percentage of phishing emails responded to		
Q4 Report Back														
Info Mgmt Technology	Sustainable Organization	Interruptions in payroll processing	Risk of increased delays in payroll processing increased errors and increased resource duplication of efforts due to lack of software integration with financial and human resource systems.			 x			 x	Review Software options based on financial needs assessment in order to procure an integrated platform with fin, payroll, HR and Scheduling	CFO	Review existing technology capabilities to establish if enhancements to technology can meet financial needs and future interoperability with other UHS functions (scheduling, payroll etc) ; ADP Demonstration has provided insight into what approach UHS can take, more vendors presentations by end of Q3		
Q4 Report Back														
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact x			Probability x			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
Financial	Sustainable Organization	Payment Processing Delays	Reputational damage and loss of vendor trust ; missed financial gain or loss (fees; savings etc)			 x			 x	Conduct financial structure review, obtain recommendations, develop action plan strategies to address issues, Reviewing processes and practices of staff to ensure processes are followed (training etc); ensuring automated systems are user friendly	CFO	Action plan developed and strategies to reduce complexity implemented, enterprise wide technology enabler launched. Shared financial reporting with UHS and SALC is no longer an issue in funding		
Q4 Report Back														

Financial	Sustainable Organization	Physical building frailties - aging faster than predicted - maintenance upgrades to be replaced	Challenges with ability to fund capital repairs within the current envelope.	x				x		Anticipating preventative maintenance practices. Consider enhanced fundraising strategies and multi year action plan development and implementation and implementation of the recommendations of the building condition study.	Dir EVS; Dir Dev & Comms	Reduction in costs associated with repairs and replacements; Successful development of fundraising strategies that address facility infrastructure		
Q4 Report Back														
Financial	Sustainable Organization	Collective Bargaining	Increasing costs associated with bargaining			x			x	Ongoing nurturing and maintenance between labour management and the employer; working with experienced negotiators to arrive at successful bargaining. Maintaining a keen awareness of the labour environment in the sector.	SLT	Reduction in grievances; successful Collective Bargaining outcomes		
Q4 Report Back														
Financial	Sustainable Organization	Fraud	loss of significant funds, reputational damage due to fraudulent financial activities;		x				x	Policies re: accountability and processes; more rigorous oversight of expenditures/payments; continuous communications with financial institutions; cheque prevention process; EFT vs manual. As a result of our recent experiences we have established necessary processes and practices, training in place	CFO	Reduction in the incidents of fraud; 100% of staff trained; 100% vendors are on EFT		
Q4 Report Back														
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact			Probability			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
HR	Sustainable Organization	Staff recruitment retention	Staff Shortages - risk of understaffing and reliance on agency staff impacting finances and CA. due to limited funds and a change in the workforce wanting to work remotely; RPN PSW salary disparity with market; employee to resident ratio much higher than in the acute care setting		x			x		Enhanced recruitment strategy; review opportunity for incentives, innovation. Change posting approach - adopt marketing approach; increase use of social media outreach regarding postings; Offer education and training unique to UHS - York Seneca etc, innovation etc; working with Prov and other partners to communicate LTC is a career of choice and UHS as an employer of choice; Develop knowledge transfer opportunities with staff	Dir of Bus Ops	25% reduction in the use of external agencies; All lines filled; 100% of identified staff have the required training for their roles; Increase in staff satisfaction survey results.		
Q4 Report Back														
HR	Sustainable Organization	Sudden departure of executive leadership	Insufficient systems in place to continue operations without potential reporting delays due to: Complexities in the LTC funding model that limits the candidate pool; a complex 3 corporation structure and current financial systems integration knowledge and specialized expertise that is held within one historical area.		x			x		Create comprehensive succession plan within the Finance department; training internal candidates on the intricacies of existing systems and processes; development of knowledge transfer plan; instruction manuals; creation of backup with administrator rights on all systems.	CEO, CFO; Dir Bus Ops	Interim vacancy management plan and implementation end of Q4; and longer term succession plan role identified and staffed by Q 2025/26; knowledge transfer plans in place by Q4 2024/25; . 100% of current systems operations documented and shared		
Q4 Report Back														
CARF Standard	Strategic Goal	Risk	Potential Impact	Potential Impact			Probability			Mitigation Strategy	Person Accountable	Indication of Success	Cost/Resource (FTE and/or \$) In thousands	
				H	M	L	H	M	L				Estimated	Actual
Choose an item	Choose an item													
Q4 Report Back														

Risk Management Dashboard - Q4 Report Back

Programs & Services

<p>Not On Target </p> <p>Quarterly Result</p> <p>Response teams created Q3; All staff trained in outbreak management; All related policies updated Q2</p>	<h3>Epidemic</h3> <p>Risk of Health & Safety to Residents & Staff</p>	
 <p>Response Teams Created</p>	 <p>Teams Trained</p>	 <p>14 Policies Updated</p>

<p>On Target </p> <p>Quarterly Result</p> <p>100% staff trained in GPA; 95% staff trained in dementiability; with remainder in Q1 2025; new SW recruited to refocuss admissions enhanceent; 100% of identified Careplans enhanced.</p>	<h3>Higher Incidents of Responsive Behaviours</h3> <p>Can impose Violence/Abuse to staff involving residents</p>		<p>On Target </p> <p>Quarterly Result</p> <p>Investigations Processess enhanced; Training refresh held quarterly; Reductions in Cis and no orders or fines for 24/25</p>	<h3>Critical Incidents</h3> <p>Risk of Order or Fine</p>	
<p>Percentage of EE's trained</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>100% in GPA</p> </div> <div style="text-align: center;">  </div> <div style="text-align: center;"> <p>75% in Dementiability</p> </div> </div>		<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>47%</p> <p>Reduction in Ci's</p> </div> <div style="text-align: center;">  </div> <div style="text-align: center;"> <p>0</p> <p>Orders/Fines to date</p> </div> </div>			

Risk Management Dashboard - Q4 Report Back

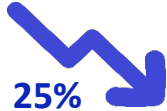
Information Technology

Cyber Security Threats
Loss of systems, information, finances

On Target

Quarterly Result

Third Party Vendor onboarded; staff notification of expectations; training held in Q3

25%  **1**

Decrease in Phising Cyber Incidents to Date

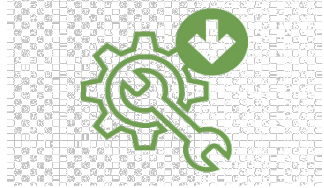
Finance

Aging Building
Challenges funding capital repairs

Not On Target

Quarterly Result

Building study recomm's underway; preventative maintenance practices in place; fundraising strat's & action plan underway



\$\$ cost avoidance

Fraud
Loss of funds, reputational damage

On Target

Quarterly Result

Policies updated; EFT now rigorously practiced; Goal is 100% of vendors on EFT; 100% staff have been trained.

95%

Vendors on EFT vs Manual Chq

People and Culture


Staff Recruitment & Retention
Shortages, reliance on Agencies, Remote Work, \$, ee to resident ratio

Not on Target

Quarterly Result

10% reduction in use of agency staff 24/25; HR Marketing video in progress; utilizing auto renew function with Indeed; enhanced exit interview process

10%
Reduction in use of Agencies

 **86%**
Over 86% staff surveyed happy with UHS

50%
Increase in Job fairs with on the spot hires

Departure of Senior Leadership
Challenges recruiting - complex 3 corp structure; complex LTC funding modle; Historical knowledge in one funcitonal area

On Target

Quarterly Result

Phase 1 Org Trans in place creating succession plan for LTC and Business Operations; longer term succession plan role identified and staffed by Q2 2025/26;



Phase 1 Organizational Transition implemented

April - December 2024

Recruitments	47
Resumes vetted	1691
Phone interviews held	332
Onsite Interviews held	119
LOA Activities (net new)	48
Terminations	39

n

SAMPLE

Evelyn McGrogan

To: Evelyn McGrogan
Subject: FW: correction to the in camera meeting protocol

From: Carre, Katherine <kcarre@blg.com>
Sent: February 20, 2025 9:52 AM
To: Abby Katz Starr <akatzstarr@uhs.on.ca>
Subject: RE: correction to the in camera meeting protocol

CAUTION: This email is from an EXTERNAL sender. Do not click on links or attachments or reply unless you recognize the sender and know the content is safe. When in doubt, please contact Indusflow Systems.

Hi Abby,

Please see my notes **in red** below.

Kind regards,

Kat

From: Abby Katz Starr <akatzstarr@uhs.on.ca>
Sent: February 12, 2025 3:31 PM
To: Carre, Katherine <kcarre@blg.com>
Subject: RE: correction to the in camera meeting protocol

Hi Kat

At our Governance meeting last week, I brought the revised version of the In-camera policy and there were a couple of questions as follows:

1. There were differing opinions as to whether Boards must keep minutes of in-camera sessions. A couple of the lawyers stated that in their view, no decisions were made at these in-camera meetings, instead matters were discussed and then brought back to the Board for a decision and then it was captured in the Board minutes. Others disagreed. So is it somewhere in ONCA or is it a protocol in guidance (like Roberts Rules) or just a best practice.
 - This question somewhat depends on how “in camera” is being defined. People tend to use the term to describe a variety of different scenarios. A true in camera meeting of the board of directors is simply a meeting of directors with no one else present. This is a board meeting like any other and minutes reflecting all resolutions and decisions made should be taken and kept confidential.
 - In camera meetings are not defined under the *Not-for-Profit Corporations Act, 2010* and there is no statutory guidance on this specifically - by-laws and policies can set out the procedures to be followed but there are no specific requirements in this regard.

- If no decisions are being made in camera, then simply noting in the minutes that the board moved in camera for discussion only may be sufficient.
 - There is a requirement to keep minutes reflecting all board resolutions/decisions, so this is really the key consideration.
 - Note that the ONCA provides at Section 92(1)d) that a corporation shall prepare and maintain records containing the minutes of meetings of all directors and any committee of directors. Also, regarding evidence that a resolution was passed, Section 38 of the ONCA provides that unless a ballot is demanded, an entry in the minutes of a meeting of the directors to the effect that the chair of the meeting declared a resolution to be carried or defeated is, in the absence of evidence to the contrary, proof of the fact without proof of the number or proportion of the votes recorded in favour of or against the resolution.
2. The second question is whether all decisions (i.e. the minutes) should be made available to the public? And if yes, does that include decisions taken in- camera?
- Unless special legislation, or the articles or by-laws provide otherwise, the public is not entitled to access minutes of the board of directors of an Ontario not-for-profit corporation or charity.
 - The ONCA only provides that directors and the auditor have access to minutes of director meetings (and in some cases court appointed investigators or government officials as well, but that is not applicable here).

As always, many thanks

Abby

ABBY KATZ STARR

President and CEO

E: akatzstarr@uhs.on.ca

T: (905) 477-2822 ext 4254

M: (416) 518-0632

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UNIONVILLE HOME SOCIETY

Union Villa LTC • Wyndham Gardens Apartments of Unionville • Unionville Home Society Foundation

A progressive community where older adults thrive: aging well and living better

www.uhs.on.ca

IN-CAMERA SESSIONS OF THE BOARD, COMMITTEES AND TASK FORCES

POLICY: [NTD: Format to match other policies?]

Members of staff and other guests may be invited to attend meetings of the board of directors of Unionville Home Society and its affiliated corporations (“UHS”, the “organization”), and committee and task force meetings of the board of directors of UHS (the “Board”), subject to the procedures for in-camera sessions established by the Board as outlined herein. **[NTD: Consider having separate rules for committees and task force in-camera sessions.]**

In-camera sessions serve a legitimate purpose and are accepted principles of good governance; however, their use should be limited to the criteria set out in this policy. In-camera sessions will be used to focus on confidential items and should not be used to keep information secret or to protect an individual or the organization from scrutiny.

Scope

This policy applies to all meetings of the Board, and all committee and task force meetings of the Board (the “Meetings”).

Purpose of In-Camera Sessions [NTD: The by-laws do not address in-camera sessions.]

From time-to-time discussions at Meetings must be kept confidential and include only Board members. The following criteria support the need for an in-camera session:

- a. Labour relations or human resource issues and employment matters including Chief Executive Officer (“CEO”) evaluation or matters relating to management of personnel;
- b. Legal advice which is subject to solicitor/client privilege;
- c. Matters that are or may be the subject of litigation (civil or criminal);
- d. Items concerning negotiations carried out by or for the organization;
- e. Matters involving property where the disclosure of information could reasonably be expected to result in the premature disclosure of a proposal or project or an undue financial loss or gain to a third party;
- f. Items where protection of a third party’s personal or personal health information and privacy is involved;
- g. Matters involving Board governance, self-evaluation results, peer review or internal problems;
- h. In the case of internal or external auditors needing to access the Board directly;
- i. Consideration of whether an item is to be discussed in camera; and
- j. Other matters that, in the opinion of the majority of the members of the Board, committee or task force, should be confidential. **[NTD: What about fundraising or sale or acquisition of real property?]**

In-Camera Sessions as a Standing Agenda Item

Due to the need to maintain confidentiality of sensitive issues and as a matter of good governance, every Meeting agenda shall allocate time for an in-camera discussion towards the end of each Meeting. Typically, the need for an in-camera session shall be determined prior to the Meeting so as to provide the necessary documentation for discussion if necessary. Although in-camera sessions are to be included as an agenda item for every Meeting, in-camera discussions are not inevitably required each time. Rather the practice is intended to provide the opportunity as required, to discuss those confidential matters where disclosure to non-Board members might be detrimental to an individual or the organization, in accordance with the criteria outlined above.

Participation

The chair will determine and announce who will remain in the Meeting and the rationale for excluding any individuals if requested. Allowances can be made to include any parties the Board, committee or task force requires for the specific issues being discussed. With the consent of the Board or committee or task force, staff members on the advice of the CEO may be invited to attend in-camera sessions of the Board, committee or task force. **[NTD: In-camera really refers to meetings of the Board members only, so we may want to define it more precisely if that is not the intention. Individual conflicts of interest are a different concept and should not be confused with the need to go in-camera to maintain confidentiality of sensitive matters.]**

PROCEDURE:

Agenda

Should a particular matter arise during a Meeting that triggers the need for an in-camera session under the established criteria set out herein, the need for the in-camera discussion must be called promptly and moved to the end of the agenda wherein the in-camera session has already been allocated for this purpose and in-camera Meeting procedures shall be followed. Should the chair feel that the item warrants immediate discussion they can move to amend the agenda and move the in-camera time slot up in order to address the issue sooner.

A member may also request the opportunity to go in-camera during the discussion of specific reports and recommendations, based on the defined in-camera criteria set out in this policy.

An in-camera item may be waived on an agenda if no member identifies a need.

Materials and Staff Resources

Materials for distribution to the Board, committee or task force members for in-camera sessions are confidential and in-camera discussions are confidential unless the Board, committee or task force formally decides otherwise. However, it is important to note that in-camera minutes may be used in court.

Resolution

A resolution to go in-camera shall be tabled, and the resolution should voluntarily disclose as much information as possible. The resolution must include, at a minimum, the general nature of its subject matter and the fact that the Meeting is being closed for this specific reason. A sample motion is provided here:

Sample Motion

Moved

Seconded

THAT the _____ [Board/Committee/Task Force] go into a closed in-camera session to discuss an item which relates to _____ [indicate all that apply] and the following staff members remain in attendance: _____.

Discussion and Voting

The Board, committee or task force chairs are responsible for managing the Meeting process and must take care to ensure that only those items on the agenda identified to be held in-camera are discussed

and that topics remain focused on sensitive, confidential, or litigious topics in line with the criteria outlined herein and not for special or personal interests or day to day operations. All persons attending an in-camera session will treat matters and discussion with the utmost confidentiality.

Voting during in-camera session is restricted to procedural matters or for giving directions or instructions to officers, employees, or agents of the corporation. The chair shall prohibit discussion of any matter that was not disclosed in the resolution authorizing the in-camera discussion. **[NTD: This implies that no decisions are made in-camera – is that the case? If not, wording should be adjusted. Is this because there are quorum issues in-camera?]**

Minutes

In-camera minutes are taken by the recording secretary in order to provide a legal record. In the event the recording secretary has been excused from the in-camera session of the Meeting, members present shall appoint a recorder to document the proceedings. Personal notes shall not be taken by members during in-camera sessions.

Approval of In-Camera Minutes

Approval of in-camera minutes shall be at the next in-camera session of the Board, committee or task force Meeting and shall be voted on in closed session.

Access to Records & Records Retention

In-camera minutes and background reports shall be circulated to the members during the appropriate Meeting. The minutes and reports shall be collected prior to returning to an open session. All in-camera minutes and background reports shall be held by the CEO in a secure location.

When minutes are taken by the recording secretary, that person will be responsible for producing the minutes for review and approval at the following Meeting, and then once approved, placing them in a sealed envelope marked with the name of the Board, committee or task force, date of the Meeting and noted as confidential then placed in a secure locked drawer in the CEO's office.

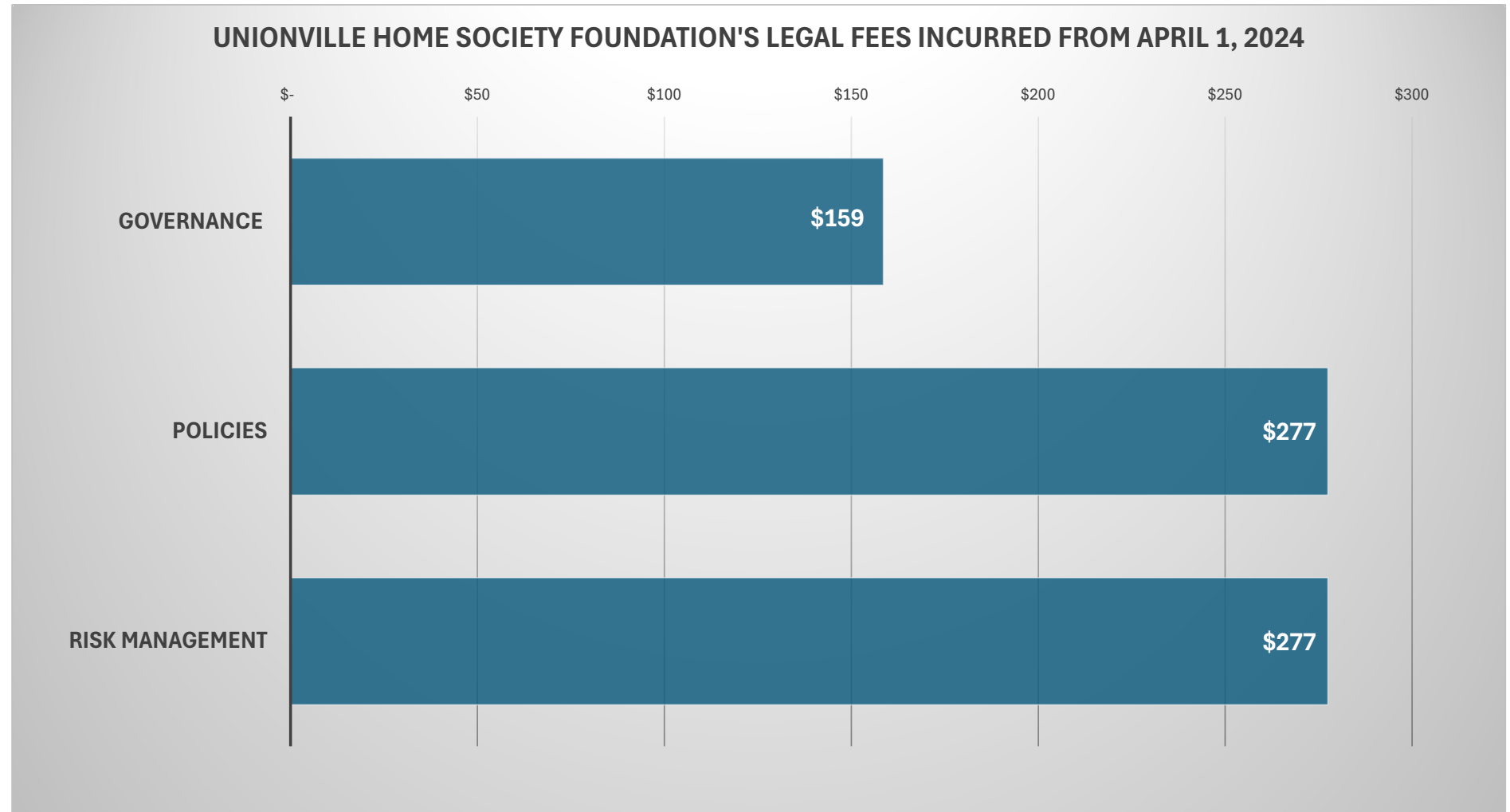
When the minutes are taken by a member who has been designated as the recorder to document the proceedings, it will be that person's responsibility to produce the minutes for review and approval at the following Meeting, and then once approved, placing them in a sealed envelope marked with the name of the Board, committee or task force, date of the Meeting and noted as confidential then given to the CEO to be placed in a secure locked drawer in the CEO's office.

Requirement for Legal Advice

From time to time, the Board, committee or task force may determine that legal advice is needed to consider a confidential matter and the President and CEO and staff should not be involved. When such a situation arises, arrangements have been made with our legal firm Borden Ladner Gervais LLP (BLG) that the chair may reach out to Katherine Carre, Counsel, BLG (kcarre@blg.com) or 416-367-6471. She is the one window contact and will ensure that the chair is connected to the right legal advisor depending on the nature of the concern and will also direct the billing to be made as follows: detailed docket to the chair for approval and a generic billing to the organization noting the prior approval of the chair but maintaining confidentiality as to the matter discussed. The documentation/detailed billing will be treated similar to in-camera minutes for record keeping and production to the auditors as needed.

Summary of Unionville Home Society Foundation Legal Fees Incurred From April 1, 2024

Legal Fees	Governance	Policies	Risk Management
Expenses	\$ 159	\$ 277	\$ 277

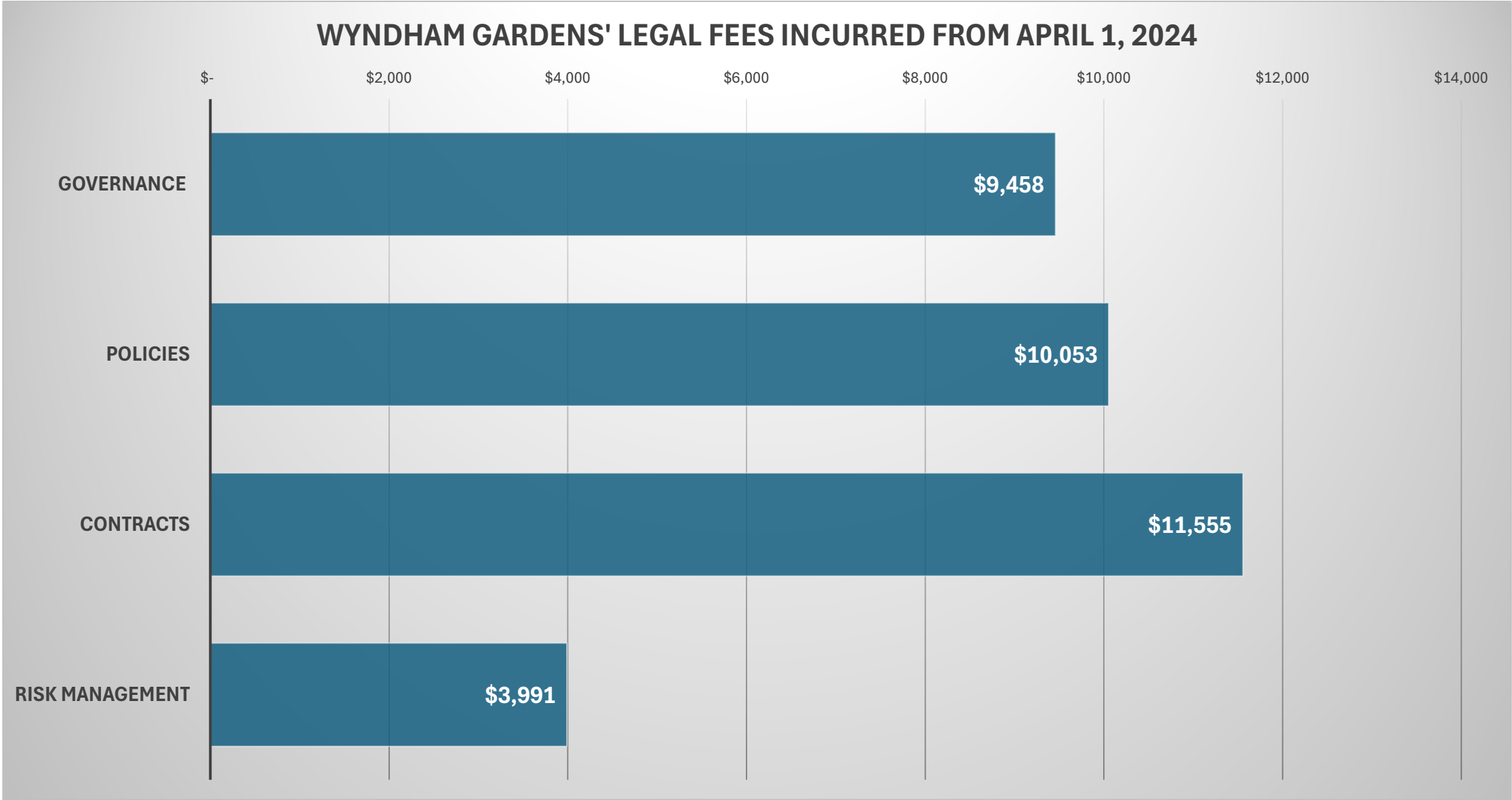


Company name: Unionville Home Society Foundation
Report name: General Ledger report
Reporting Book: ACCRUAL
Start Date: 4/1/2024
End Date: 12/31/2024
Location: 2--Unionville Home Society Foundation

Location	Department	Posted dt.	Doc dt.	Doc	Memo/Description	Item No	GL Acct name	Txn No	JNL	Debit	Credit	Balance												
165040 - Professional Fees - Legal (Balance forward As of 04/01/2024)																								
Unionville Home Society Foundation												0.00												
	Foundation Administration											0.00												
		12/31/2024	12/31/2024	Interco PPP	Borden Ladner Gervais, LLP			543	GENJ3	713.50		713.50	Governance	158.55	Policy	277.48	Risk Management	277.48						
	Totals for Foundation Administration									713.50	0.00	713.50												
	Net Change for Foundation Administration											713.50												
	Totals for Unionville Home Society Foundation									713.50	0.00	713.50												
	Net change for - Unionville Home Society Foundation											713.50												
	Totals for 165040 - Professional Fees - Legal									713.50	0.00	713.50												
	Net change for - Professional Fees - Legal											713.50												
Grand total										713.50	0.00	713.50												

Summary of Wyndham Gardens Legal Fees Incurred From April 1, 2024

Legal Fees	Governance	Policies	Contracts	Risk Management
Expenses	\$ 9,458	\$ 10,053	\$ 11,555	\$ 3,991



	Governance
Inv no.	
698373444	\$ 2,860
698374906	\$ 1,135
698386385	\$ 192
698387508	\$ 676
698400060	\$ 972
698400057	\$ 2,017
698441671	\$ 322
698432020	\$ 1,190
698408617	\$ 93
Total	\$ 9,458

	Policies
Inv no.	
698373444	\$ 2,860
698374906	\$ 3,406
698386385	\$ 192
698441671	\$ 322
698444199	\$ 1,040
698455178	\$ 1,002
698466393	\$ 293
698466388	\$ 939
Total	\$ 10,053

	Contracts
Inv no.	
698381625	\$ 4,254
698386213	\$ 1,145
698400060	\$ 972
698404789	\$ 368
698400303	\$ 391
698420798	\$ 4,102
698441671	\$ 322
	\$ 11,555

	Risk Management
Inv no.	
698373444	\$ 2,860
698386385	\$ 192
698466388	\$ 939
	\$ 3,991

Policies
•Resident Handbook
•Investment Policy
•Waiver of Probate Estate Policy
•Rental Policy

Contracts
•Occupancy Agreement
•Life Lease Agreement
•Parking Agreement

Company name: Wyndham Gardens Apartments of Unionville
Report name: General Ledger report
Reporting Book: ACCRUAL
Start Date: 4/1/2024
End Date: 12/31/2024
Location: 3--Wyndham Gardens Apartments of Unionville

Location	Department	Posted dt.	Doc dt.	Doc	Memo/Description	Item No_GL Acct name	Txn No	JNL	Debit	Balance						
165040 - Professional Fees - Legal (Balance forward As of 04/01/2024)										0.00						
Wyndham Gardens Apartments of Unionville								B/F		0.00						
	Housing							B/F		0.00						
		4/11/2024	4/9/2024	Resident Issues - 2024	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	4089	APJ	7,593.50	-986.50	698373444	Governance	2860.22	Policy	2860.22	Risk Management 2860.22
		4/11/2024	4/9/2024	Resident Issues - 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4089	APJ	987.16	0.66						
		4/30/2024	4/30/2024	Interco PPP	Bill - Borden Ladner Gervais, LLP		286	GENJ3	4,540.91	4,541.57	698374906	Governance	1135.23	Policy	3405.68	
		5/6/2024	5/6/2024	Occupant Agreement	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	4289	APJ	3,764.50	8,306.07	698381625	Contract	4,253.89			
		5/6/2024	5/6/2024	Occupant Agreement	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4289	APJ	489.39	8,795.46						
		5/9/2024	5/9/2024	Joint Property with Client-2024	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	4333	APJ	1,013.50	9,808.96	698386213	Contract	1,145.26			
		5/9/2024	5/9/2024	Joint Property with Client-2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4333	APJ	131.76	9,940.72						
		5/10/2024	5/10/2024	Human Rights Consideration-2024	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	4334	APJ	510.00	10,450.72	698386385	Governance	192.1	Policy	192.1	Risk Management 192.1
		5/10/2024	5/10/2024	Human Rights Consideration-2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4334	APJ	66.30	10,517.02						
		5/13/2024	5/13/2024	General-May 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4456	APJ	77.81	10,594.83						
		5/13/2024	5/13/2024	General-May 2024	Bill - Borden Ladner Gervais, LLP: WG-Vice Chair Memo	Legal Fees - Governance	4456	APJ	598.50	11,193.33	698387508	Governance	676.31			
		6/18/2024	6/18/2024	Budd-2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4720	APJ	223.73	11,417.06						
		6/18/2024	6/18/2024	Budd-2024	Bill - Borden Ladner Gervais, LLP: Budd	Legal Fees - Policies, Contracts, Risk Mgmt	4720	APJ	1,721.00	13,138.06	698400060	Governance	972.37	Contract	972.36	
		6/18/2024	6/18/2024	MOU with Residents Association 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4721	APJ	232.05	13,370.11						
		6/18/2024	6/18/2024	MOU with Residents Association 2024	Bill - Borden Ladner Gervais, LLP: Update to MOU	Legal Fees - Governance	4721	APJ	1,785.00	15,155.11	698400057	Governance	2,017.05			
		6/28/2024	6/28/2024	WG Life Leases-May 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		4961	APJ	42.38	15,197.49						
		6/28/2024	6/28/2024	WG Life Leases-May 2024	Bill - Borden Ladner Gervais, LLP: WG-Life Lease Meeting	Legal Fees - Policies, Contracts, Risk Mgmt	4961	APJ	326.00	15,523.49	698404789	Contract	368.38			
		6/30/2024	6/30/2024	Interco PPP	Bill - Borden Ladner Gervais, LLP: Call with Client-WG		336	GENJ3	390.98	15,914.47	698400303	Contract	390.98			
		8/13/2024	8/13/2024	WG Life Leases-August 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		5510	APJ	471.90	16,386.37						
		8/13/2024	8/13/2024	WG Life Leases-August 2024	Bill - Borden Ladner Gervais, LLP: Life Lease Memo	Legal Fees - Policies, Contracts, Risk Mgmt	5510	APJ	3,630.00	20,016.37	698420798	Contract	4,101.90			
		8/26/2024	8/26/2024	General-August 2024	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		5535	APJ	111.15	20,127.52						
		8/26/2024	8/26/2024	General-August 2024	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	5535	APJ	855.00	20,982.52	698441671	Governance	322.05	Policy	322.05	Contract 322.05
		10/9/2024	10/9/2024	Invoice #698441671	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		6168	APJ	111.15	21,093.67						
		10/9/2024	10/9/2024	Invoice #698441671	Bill - Borden Ladner Gervais, LLP: Professional Services rendered Sept. 30, 2024	Legal Fees - Policies, Contracts, Risk Mgmt	6168	APJ	855.00	21,948.67						
		10/15/2024	10/15/2024	698444199	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		6103	APJ	119.60	22,068.27	698441671					
		10/15/2024	10/15/2024	698444199	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	6103	APJ	920.00	22,988.27	698444199	Policy	1,039.60			
		11/13/2024	11/13/2024	BLG invoice, Professional Services rendered Oct.	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		6472	APJ	115.25	23,103.52						
		11/13/2024	11/13/2024	BLG invoice, Professional Services rendered Oct.	Bill - Borden Ladner Gervais, LLP	Legal Fees - Policies, Contracts, Risk Mgmt	6472	APJ	886.50	23,990.02	698455178	Policy	1001.75			
		12/1/2024	12/9/2024	BLG invoice, Professional Services rendered Nov	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		6697	APJ	33.74	24,023.76						
		12/1/2024	12/9/2024	BLG invoice, Professional Services rendered Nov	Bill - Borden Ladner Gervais, LLP: BLG invoice, Professional Services rendered Nov. 30, 2024	Legal Fees - Policies, Contracts, Risk Mgmt	6697	APJ	259.50	24,283.26						
		12/1/2024	9/20/2024	PROFESSIONAL SERVICES rendered to August 3	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		7015	APJ	136.89	24,420.15	698466393	Policy	293.24			
		12/1/2024	9/20/2024	PROFESSIONAL SERVICES rendered to August 3	Bill - Borden Ladner Gervais, LLP: PROFESSIONAL SERVICES rendered to August 31, 2024	Legal Fees - Policies, Contracts, Risk Mgmt	7015	APJ	1,053.00	25,473.15						
		12/1/2024	7/10/2024	PROFESSIONAL SERVICES rendered to June 30,	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA		7016	APJ	10.66	25,483.81	698432020	Governance	1189.89			

	12/1/2024	7/10/2024	PROFESSIONAL SERVICES rendered to June 30,	Bill - Borden Ladner Gervais, LLP: PROFESSIONAL SERVICES rendered to June 30, 2024	Legal Fees - Policies, Contracts, Risk Mgmt	7016	APJ	82.00	25,565.81					
	12/31/2024	12/31/2024	Interco PPP	Borden Ladner Gervais, LLP		542	GENJ3	1,877.00	27,442.81	698408617	Governance	92.66		
Totals for Housing								36,022.81	27,442.81	698466388	Policy	938.5	Risk Management	938.5
Net Change for Housing														
Totals for Wyndham Gardens Apartments of Unionville								36,022.81	27,442.81					
Net change for - Wyndham Gardens Apartments of Unionville														
Totals for 165040 - Professional Fees - Legal								36,022.81	27,442.81					
Net change for - Professional Fees - Legal														
Grand total								36,022.81	27,442.81					

Summary of UHS Legal Fees incurred from April 1, 2024

Legal Fees	Governance	Policies	Contracts	Risk Management	HR-Employment	HR-Termination	HR-Investigation
Expenses	\$ 4,738	\$ 7,790	\$ 3,884	\$ 1,487	\$ 5,017	\$ 879	\$ 2,321





	Governance		Policies		Contracts		Risk Management		HR-Employment		HR-Termination		HR-Investigation
Inv no.		Inv no.		Inv no.		Inv no.		Inv no.		Inv no.		Inv no.	
22407248	318	698381198	240	22407248	477	22409435	1182	698413229	561	698458075	879	698381198	2,321
22421843	212	698413229	982	22409435	212	22412119	305	698479288	366				
698381198	560	698383336	536	22407248	81			698422303	220				
698374906	1066	698374906	3309	49042-20240612	1581			698436594	3,870				
22412119	712	698466388	2723	698400303Rev	1534								
698425622	1156												
698466388	714												
Total	\$ 4,738		\$ 7,790		\$ 3,884		\$ 1,487		\$ 5,017		\$ 879		\$ 2,321

Company name: Unionville Home Society
Report name: General Ledger Details - Legal Fees
Report title 2: Year to Date
Reporting Book: ACCRUAL
Created on: 1/24/2025
Location: 1--Unionville Home Society

Location	Department	Posted dt.	Doc dt.	Doc	Memo/Description	Location	Item No_GL	Acct name	Txn No	JNL	Debit	Credit	Balance			
165040 - Professional Fees - Legal (Balance forward As of 04/01/2024)																
Unionville Home Society																
Unionville Home Society : Union Villa LTCH																
LTCH_All Departments : Other Accommodation : OA Administration																
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	UV			4444	APJ	12.06		12.06			
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP	UV	Legal Fees - LTC/Resident Care		4444	APJ	306.00		318.06	Governance	318.0564	
		6/27/2024	6/27/2024	698400303	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	UV			4806	APJ	58.14		376.20			
		6/27/2024	6/27/2024	698400303	Bill - Borden Ladner Gervais, LLP: Voyce Agreement	UV	Legal Fees - LTC/Resident Care		4806	APJ	1,475.50		1,851.70			
		7/1/2024	6/18/2024	698400303CR	Bill - Borden Ladner Gervais, LLP: Voyce Agreement	UV	Legal Fees - LTC/Resident Care		5129	APJ		1,475.50	376.20			
		7/1/2024	6/18/2024	698400303CR	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	UV			5129	APJ		58.14	318.06			
		12/1/2024	12/11/2024	22421843	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	UV			6669	APJ	8.04		326.10			
		12/1/2024	12/11/2024	22421843	Bill - Fogler, Rubinoff LLP: Services Rendered re: November 25, 2024	UV	Legal Fees - LTC/Resident Care		6669	APJ	204.00		530.10	Governance	212.0376	
		Totals for LTCH_All Departments : Other Accommodation : OA Administration										2,063.74	1,533.64	530.10		
LTCH_All Departments : Other Accommodation : OA Finance																
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	UV			4444	APJ	18.09		18.09			
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP: Resident bad Debt	UV	Legal Fees - LTC/Resident Care		4444	APJ	459.00		477.09	Contract	477.0846	
		6/18/2024	6/18/2024	22409435	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	UV			4851	APJ	8.04		485.13			
		6/18/2024	6/18/2024	22409435	Bill - Fogler, Rubinoff LLP: Resident Debt	UV	Legal Fees - LTC/Resident Care		4851	APJ	204.00		689.13	Contract	212.0376	
		Totals for LTCH_All Departments : Other Accommodation : OA Finance										689.13	0.00	689.13		
		Totals for LTCH_All Departments : Other Accommodation										2,752.87	1,533.64	1,219.23		
		Totals for LTCH_All Departments										2,752.87	1,533.64	1,219.23		
		Totals for Unionville Home Society : Union Villa LTCH										2,752.87	1,533.64	1,219.23		
Unionville Home Society : Administrative Services																
Administrative Services																
Administrative Services : Admin Serv Finance																
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	ADMIN			4444	APJ	3.07		3.07			
		5/1/2024	5/1/2024	22407248	Bill - Fogler, Rubinoff LLP: Fraud	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt		4444	APJ	78.00		81.07	Contract	81.0732	
		6/12/2024	6/12/2024	49042-20240612	Bill - Cattanach Hindson Sutton VanVeldhuizen LLP: ON HST Standard Rate Services Purchase - CA	ADMIN			4677	APJ	59.92		140.99			
		6/12/2024	6/12/2024	49042-20240612	Bill - Cattanach Hindson Sutton VanVeldhuizen LLP	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt		4677	APJ	1,520.75		1,661.74	Contract	1580.66755	
		6/18/2024	6/18/2024	22409435	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	ADMIN			4851	APJ	44.80		1,706.54			
		6/18/2024	6/18/2024	22409435	Bill - Fogler, Rubinoff LLP: Fraud Matter	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt		4851	APJ	1,137.00		2,843.54	Risk Management	1181.7978	
		Totals for Administrative Services : Admin Serv Finance										2,843.54		2,843.54		
Administrative Services : Admin Serv Human Resources																
		5/1/2024	5/1/2024	698381198	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN			4248	APJ	109.23		109.23			
		5/1/2024	5/1/2024	698381198	Bill - Borden Ladner Gervais, LLP	ADMIN	Legal Fees - HR		4248	APJ	2,772.00		2,881.23	Governance	0	
		7/19/2024	7/19/2024	698413229	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN			5089	APJ	37.24		2,918.47	HR-Investigation	2,881.23	

	7/19/2024	7/19/2024	698413229	Bill - Borden Ladner Gervais, LLP: Policies	ADMIN	Legal Fees - HR	5089	APJ	945.00	3,863.47									
	11/20/2024	11/20/2024	698458075	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		6345	APJ	33.33	3,896.80	Policies	982.24							
	11/20/2024	11/20/2024	698458075	Bill - Borden Ladner Gervais, LLP: BLG - Consulting Services	ADMIN	Legal Fees - HR (Employment)	6345	APJ	846.00	4,742.80	HR-Termination	879.33							
	12/31/2024	12/31/2024	698479288	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		6919	APJ	13.89	4,756.69									
	12/31/2024	12/31/2024	698479288	Bill - Borden Ladner Gervais, LLP: BLG - Grievance Prep	ADMIN	Legal Fees - HR (Employment)	6919	APJ	352.50	5,109.19	HR-Employment	366.39							
Totals for Administrative Services : Admin Serv Human Resources									5,109.19	5,109.19									
Administrative Services : Admin Serv Executive																			
	4/25/2024	4/11/2024	698374906	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		4184	APJ	12.83	12.83									
	4/25/2024	4/11/2024	698374906	Bill - Borden Ladner Gervais, LLP: COI	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	4184	APJ	325.50	338.33	Total \$4344(WG)	policies(WG)	3438.8549	governance	1065.9047				
	5/1/2024	5/1/2024	698381198	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		4248	APJ	9.10	347.43									
	5/1/2024	5/1/2024	698381198	Bill - Borden Ladner Gervais, LLP: In-Camera Meeting Protocols	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	4248	APJ	231.00	578.43	Policies	240.10							
	5/3/2024	5/3/2024	698383336	Bill - Borden Ladner Gervais, LLP: Investment Policy	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	4288	APJ	516.00	1,094.43	Policies	536.33							
	5/3/2024	5/3/2024	698383336	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		4288	APJ	20.33	1,114.76									
	7/1/2024	6/18/2024	698400303Rev	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		5130	APJ	58.14	1,172.90									
	7/1/2024	6/18/2024	698400303Rev	Bill - Borden Ladner Gervais, LLP: Voyce Agreement	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	5130	APJ	1,475.50	2,648.40	Contract	1533.6347							
	7/15/2024	7/15/2024	22412119	Bill - Fogler, Rubinoff LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		5057	APJ	38.54	2,686.94									
	7/15/2024	7/15/2024	22412119	Bill - Fogler, Rubinoff LLP: Fraud	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	5057	APJ	978.00	3,664.94	Governance 70%	711.57324	Risk 30%	304.97					
	7/19/2024	7/19/2024	698413229	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		5089	APJ	21.28	3,686.22									
	7/19/2024	7/19/2024	698413229	Bill - Borden Ladner Gervais, LLP	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	5089	APJ	540.00	4,226.22	HR-Employment	561.28							
	8/15/2024	8/15/2024	698422303	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		5383	APJ	8.34	4,234.56									
	8/15/2024	8/15/2024	698422303	Bill - Borden Ladner Gervais, LLP	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	5383	APJ	211.50	4,446.06	HR-Employment	219.84							
	8/23/2024	8/23/2024	698425622	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		5512	APJ	43.84	4,489.90									
	8/23/2024	8/23/2024	698425622	Bill - Borden Ladner Gervais, LLP: Investment Manager	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	5512	APJ	1,112.50	5,602.40	Governance	1156.3325							
	10/15/2024	10/15/2024	698443970	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		6121	APJ	19.45	5,621.85									
	10/15/2024	10/15/2024	698443970	Bill - Borden Ladner Gervais, LLP	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	6121	APJ	493.50	6,115.35	Governance	512.95							
	12/1/2024	12/17/2024	698471448	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		6647	APJ	27.78	6,143.13									
	12/1/2024	12/17/2024	698471448	Bill - Borden Ladner Gervais, LLP: BLG invoice, Professional Services rendered Nov. 30, 2024	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	6647	APJ	705.00	6,848.13									
	12/1/2024	12/16/2024	698436594	Bill - Borden Ladner Gervais, LLP: BLG Statement of Account re: Labour and Employment Matters Dec. 16, 2024	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	6648	APJ	3,869.86	10,717.99	Policies	183.19425	HR-Employment	549.59					
	12/1/2024	9/11/2024	698431995	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		7004	APJ	183.80	10,901.79	HR-Employment	3869.86							
	12/1/2024	9/11/2024	698431995	Bill - Borden Ladner Gervais, LLP: PROFESSIONAL SERVICES rendered to August 31, 2024	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	7004	APJ	4,664.50	15,566.29	Policies	247.3772	Contract	4,600.92					
	12/30/2024	12/30/2024	698466388	Bill - Borden Ladner Gervais, LLP: ON HST Standard Rate Services Purchase - CA	ADMIN		6768	APJ	37.79	15,604.08									
	12/30/2024	12/30/2024	698466388	Bill - Borden Ladner Gervais, LLP	ADMIN	Legal Fees - Policies, Contracts, Risk Mgmt	6768	APJ	958.99	16,563.07	Total \$3306.51 (WG&FDN)	Governance	714.0678	Policies	2722.718694				
Totals for Administrative Services : Admin Serv Executive									16,563.07	0.00	16,563.07								
Totals for Administrative Services									24,515.80	0.00	24,515.80								
Totals for Unionville Home Society : Administrative Services									24,515.80	0.00	24,515.80								

Totals for Unionville Home Society

27,268.67 1,533.64 25,735.03

Totals for I65040 - Professional Fees - Legal

27,268.67 1,533.64 25,735.03

Grand total

27,268.67 1,533.64 25,735.03

Corporate Incident Response and Escalation

Policy

Policy Statement

Unionville Home Society is committed to protecting the organization from any operational, reputational or legal risks associated with incidents of a corporate or business operations nature. UHS is committed to fulfilling the obligation that all incidents, are appropriately reported, investigated and resolved.

Scope

This policy applies to employees, contractors, and third-party vendors as well as to all incidents that meet the established criteria set out in this policy.

Definitions

Corporate/Operational risk incident: an event which has, has had or could have had (“near miss”), a negative financial, business or reputational impact on the UHS; or an event that causes disruption to or a reduction in the quality of an operational service.

Escalation: The process of raising the priority of an incident to ensure appropriate attention and resources are allocated for resolution.

The post-incident review (often called incident postmortem) is performed after the incident to determine the root cause and assign actions to prevent repeat incidents.

Policy

The purpose of this document is to outline the procedures for escalating incidents of a corporate or business operations nature within the organization to ensure timely resolution and minimal disruption to business operations.

Critical Incident criteria

The following are the criteria to be used to determine the critical nature of a corporate incident:

Impact on financial assets

Financial loss, the additional costs of redoing activities or correcting damages, any additional costs of redoing activities or correcting damages; legal costs.

Impact on business objectives

Failure or inadequacy of output of UHS tasks, business process(es) or project(s) which affects its ability to achieve its key objectives.

Impact on reputation

The risk of deterioration of the reputation, credibility or public image of UHS towards different external stakeholders (e.g. Government, LTC sector, general public etc.).

Reporting concerns

This section sets out the requirements for reporting an incident. The purpose of these requirements is to ensure that all critical corporate incidents are reported and investigated in a consistent and timely manner. This enables the organization to respond effectively to related threats to its personnel, assets and reputation in a uniform manner with the appropriate degree of urgency.

When should a critical corporate incident be reported?

- Did/ could the incident have a negative financial, business or reputational impact on the UHS?
- Did/ could the incident affect business operations or deliverables (e.g. delay, outage, reduced quality)?
- Did/ could the incident gain visibility externally in terms of media/public coverage?
- Did/ could an incident occur as a result of the failure of a control measure?

Internal reporting lines

All employees, consultants, and third-party vendors are encouraged to speak up and to raise concerns regarding corporate incidents through normal internal reporting lines, usually their line manager. However, some Incidents may also be of such a serious nature that they require immediate referral to senior levels of management and/or other responsible subject matter experts.

Accountabilities

Employees are strongly encouraged, and senior leaders and managers are **required**, to report critical corporate incidents in accordance with this policy and to cooperate with any investigation carried out under this policy.

Senior Leadership and at all levels of management are responsible for monitoring, identifying, immediately communicating and resolving any operational, reputational or legal risks which may result in a critical corporate incident.

The President and CEO (CEO) is responsible for the overall management and reporting of critical corporate incidents to the Board(s) and will ensure that all identified incidents from any department are recorded accurately and completely, in addition:

- To provide advice and guidance on potential impacts and associated risks and their resolution and control;
- To initiate any investigation and subsequently triggering the creation of an investigation team if necessary;
- To notify all necessary internal and external partners (Board, Privacy officer, counsel, ministry, etc.) .

In addition, the CEO or their designate is responsible for:

- providing oversight for the administration of this policy and associated procedures;
- ensuring that training and awareness activities are put in place to promote understanding and compliance with this policy and associated procedures.

The Board is responsible for ensuring management has the appropriate systems, advice and guidance in place to deter, prevent, and detect potential corporate incidents; and to create an ethical atmosphere across the organization.

The CAO will assume responsibility for the direct oversight of any investigation should the CEO or other Senior Leadership member be the subject(s) of an investigation under this policy, in addition to providing advice and guidance on privacy related issues stemming from a corporate incident.

The Chief Financial Officer (CFO) is responsible for monitoring the financial, and other internal controls put in place and to provide timely, cost-effective recommendations for improvements to these controls. In addition, the CFO will be responsible for immediate reporting to the CEO and for the recovery of lost funds and assets, where possible stemming from the impact of a critical corporate incident.

The Investigation Team has the primary responsibility for leading investigations into reports of critical corporate incidents. The investigation team is a cross-functional group with relevant skills to support an investigation. This Investigation Team may be comprised of the organizations Counsel, Chief Administrative Officer, Chief Financial Officer, or others as deemed appropriate (relying on advice from the CEO, and legal counsel).

Escalation Process for a critical corporate incident

Where it determined, based on the above noted criteria that an incident is critical/serious in nature, the following communication and escalation process is mandated:

- Suspected and known incidents as defined in this policy must be reported to the CEO or their designate **immediately** using all available channels (in person, telephone, email etc.). At no time is an employee to withhold the notification of a critical incident, nor attempt to rectify it in the absence of the CEO's advice and guidance.
 - The employee will notify the CEO with all pertinent information such as:

- type or nature of the suspected improper activity involving Organization Assets
- name of the person(s)/corporation/entity believed to have triggered this incident (if known)
- location/ unit impacted
- dates of the incidents, if known
- description of how the concerns came to light
- any documentation that may support the occurrence
- policies, laws, or regulations alleged to be breached

The CEO will then trigger the following notifications where deemed necessary:

- Upon receiving a notification that a critical corporate incident has occurred, the CEO or their designate will immediately notify the organization's Board Chair, counsel and if deemed necessary will strike the Investigation Team. This Investigation Team may be comprised of the CEO or their designate, organization's Counsel, Chief Administrative Officer, Chief Financial Officer, or others as deemed appropriate
- Investigation Team will conduct a preliminary review to determine whether to proceed with an investigation. The preliminary review will be conducted in a timely and confidential manner. During the preliminary review and any subsequent investigation, the Reporter may be contacted for additional information. When the preliminary review is complete, the CEO or their designate, will recommend, in writing, to the Investigation Team and Senior Leaders of next steps for resolution.
- Simultaneously, the CEO or their designate may convene a cross-functional group with relevant skills to support the resolution of the incident.
- If specialist skills are required, external specialists will be consulted/acquired to augment the group (banking representatives, auditors, vendors etc.).
- During an investigation, the Investigation Team may contact and interview any individual as deemed necessary to the investigation.
- Investigations shall be conducted responsibly and adhere to the principles of procedural fairness, in a manner that is respectful of individuals and that ensures appropriate and acceptable evidence is obtained. Collection of evidence, including organization information and assets, may be required in some situations. Under the direction and guidance of the CEO or their designate, the Investigation Team will have the authority to examine, copy, and/or secure the contents of files, desks, cabinets, and other storage facilities across the UHS campus, including electronic files and devices, with the exception of personal property.
- During an investigation, interim measures such as placing an employee on administrative leave or modification of employment duties may occur. The appropriate interim measures may be implemented - in consultation with the organizations' Counsel and the Chief Administrative Officer

All reports of critical corporate incidents will be investigated in an open-minded, independent and professional manner. The investigation procedure will vary depending on the nature of the suspected incident, or its impact.

UHS has established the processes and procedures outlined in this policy to ensure that the appropriate level of accountability within the organization reviews and resolves all corporate incidents in the appropriate manner proportionate to their impacts.

Confidentiality and non-retaliation

All participants in an internal investigation stemming from a critical corporate incident shall keep the details and results of any investigation confidential. The details and results of investigations are not to be disclosed or discussed with anyone other than those personnel associated with the organization who have a legitimate need to know such results in order to perform their duties and responsibilities. Particulars of the investigation with potential witnesses may be disclosed only if such disclosure would further the investigation, and only after consultation with legal counsel and Human Resources (as applicable). Throughout the investigation, Senior Leadership members who have a legitimate need to know will be informed of pertinent investigative findings as well as authorized representatives of law enforcement and other agencies where appropriate. To the extent possible by law, the identity of individuals involved in an investigation will be protected.

Protection from reprisal

Engaging in an act of Reprisal constitutes a breach of this policy. The organization fosters a work environment free from reprisals and takes swift and appropriate action in cases in which retaliation occurred.

Whistleblower Protection

No person covered by this policy shall:

- dismiss or threaten to dismiss an employee;
- discipline or suspend or threaten to discipline or suspend an employee;
- discriminate or harass an employee;
- impose any penalty or reprisal upon an employee; and
- intimidate or coerce an employee because the employee has acted in accordance with the requirements of the policy.

Whistleblowers who believe they have been retaliated against may file a written complaint with the President & CEO. Anyone found guilty of retaliation against a whistleblower is subject to disciplinary action up to and including dismissal. An employee affected by the retaliation may seek redress, if appropriate. Please see the UHS Whistleblower policy.

Post incident Review/Investigation reporting

- At the conclusion of an investigation, the CEO or their designate will issue a report to the organizations' Counsel, the Chair of the Board, and the Investigative Team.

- The individual who reported the incident will be contacted (if the report was not made anonymously) by the CEO or their designate, and informed that the investigation has been completed.
- The Chief Financial Officer will be responsible for the recovery of lost funds and assets, where reasonably possible, resulting from a critical corporate incident.
- The CEO in consultation with the organizations Counsel will determine if and when to contact appropriate law enforcement and/or regulatory agencies.

Retention of Evidence / Record Keeping

- The CEO's office shall become the custodian of all original files and documents pertaining to critical corporate incidents and any subsequent investigation in order to identify and preserve potential evidence. Any documents generated by the members of the Investigation Teams during the investigation shall forward these documents to the CEO's office for safekeeping. As may be required by law, the organization may relinquish these original documents (after obtaining a photocopy) to authorized representatives of law enforcement and/or regulatory agencies where appropriate. The retention and disposals of these documents will be made in accordance with the UHS Record Retention Policy.
- In all cases, records will be maintained as required by the nature of the investigation undertaken and any action to be taken in compliance with provisions of any relevant collective or employee agreement, or organization policy.