





## THE TOWNSHIP OF ST. JOSEPH REPORT TO COUNCIL

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**From:** Carol Trainor, Clerk Administrator

**Date:** September 16, 2020

**Subject:** Landfill Committee Update

### RECOMMENDATION:

BE IT RESOLVED THAT the recommendations of the Landfill Committee meeting dated September 14, 2020 be received; and

That Council approve the recommendations noted in the report.

### Background

The Landfill Committee met at the landfill site on September 14, 2020 to discuss logistics for the new tipping face, and the proposed gate arm. Some preliminary work has occurred to prepare the location of the new tipping face. The Committee discussed various types of barriers that would work best to direct the flow of traffic, their size, and how many might be required. There was agreement that the existing 2x6 barriers would be sufficient, at least initially, and could be revisited if necessary. The Committee agreed that the relocation of the face should not occur until the existing location has reached its full capacity.

The Committee discussed various options for the gate arm based on the drawing submitted by a potential vendor, and ways to avoid creating an obstruction for snow removal. It was suggested that the resting post not be fixed, but a removeable bollard which could be withdrawn by the attendant at the end of their shift would allow the plough operator to access the site without obstruction.

- Enlarge and relocate the sign that says "Be Prepared to Stop"
- Continue to use the existing tipping face until it is completely full before switching to the new face.
- A resting tripod or bollard would sit at the opposite (west) end of the arm, to be removed by the attendant at the end of each shift for snow removal.
- If a removeable bollard is not an option, the Equipment Operator could work around a permanent fixture.

Operational matters which should be attended to include brushing the trees and shrubs back from the entrance road and straightening the signs posted along the entrance.

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Other items discussed were the collection of tires and scrap metal. Staff will follow up with the tire collector to have them removed as soon as possible. The placement of a small container for scrap metal items such as nails, to prevent having small matter scattered around the ground and which cannot be collected by the equipment for placement in the bin.

### **Financial Implications**

The cost of relocating the tipping face has been included in the 2020 budget, as has the purchase of the gate arm. The vendor that provided the quote and drawing being considered is local and is within budget.

### **Summary / Options**

The Committee agreed that user education remains an important part of the process to ensure that only acceptable recycling materials are put in the bins, that all materials in the bins are properly placed, that users entering the site must have stickers and check in with the attendant, to ensure acceptable materials are being brought in, and the importance and cost of the waste management process.

Council may accept the recommendations of the Committee as written, make amendments, or consider other options.



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Carol O. Trainor, A.M.C.T., Clerk Administrator

Issue Reporting/Complaints Process Guidelines

September 2, 2020

Introduction:

It is understood that Staff of the Township of St. Joseph may feel obligated to report issues and potential contraventions of legislation and policy on private property. While this is an expectation if a Staff member becomes aware of a potential contravention in the course of their regular work duties, staff should not be put in a position outside of their regular work hours to be noting, advising or enforcing legislation and policy. That is not to say that any Staff person cannot report an issue that they become aware outside of work hours, or that they cannot make a complaint as a resident of the Township, but that the choice to do so will be theirs to make.

Our goal is to formalize the issue reporting/complaints process, for staff, council members and members of the public. Without this formalization, we are open to the perception of bias and/or that where a person lives will determine whether they are subject to bylaw enforcement. We also are missing an opportunity to learn from viewing complaints in aggregate for how we can better develop, modify or target policies and by-laws.

It is with this in mind that we are recommending a formal Issue Reporting/Complaints process that will include:

1. Which Township of St. Joseph staff are formally responsible for noting and reporting issues that they become aware of through either regular patrols or work-related duties that take them around the Township in the course of their working hours.
2. A formal Issue Reporting/Complaints Form that will be used for all issues reported by the public, staff and council members.
3. Protocol to be followed when a report is received.
4. General form letters that may be used in response to issues noted in an Issue Reporting/Complaints Form.
5. Regular reporting to Council on the types of complaints, and relevant details.

Who Can/Should Report Issues or Complaints?:

The Township By-Law Enforcement Officer (BLEO) visits properties and does regular tours of the Township, the Works Crew visit properties and do regular ~~tours~~ patrols of Township roads, and the Chief Building Official (CBO) visits properties to undertake inspections across the Township. These three already either investigate issues they notice, or report any issues and possible contraventions of legislation to the Administration Office.

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Issues or complaints can be reported by members of the public. This can be done either by themselves with a form picked up at the office or downloaded from the website, or

recorded during an in-person, telephone or electronic communication by a staff member or Council member. The complainant's name and contact information will be required, but they will be advised that this information will be kept confidential from the subject of the complaint and general public.

In addition, any Staff or Council member can fill out an Issue Report/Complaint form, whether in their official capacity, or as a member of the public however, it is not expected that they will be "looking for" contraventions of legislation or policy. Outside of their regular work hours, it will be a Staff member's own personal decision as to what they feel their role is in noting potential contraventions. For Council members, they will also need to determine what role that wish to play in the reporting of potential contraventions of any legislation (municipal or otherwise) or policy.

#### What is the Process that will be Followed?:

Once an Issue Report/Complaint form has been received, Administration Staff will consult with the relevant Department Head (BLEO, CBO or Works Superintendent), and/or Clerk Administrator (depending on the issue) to determine whether the issue needs to be brought before Council or whether to proceed with the following action:

Step 1: Send a Contravention letter or Building Permit letter, or visit from BLEO, CBO or Works Superintendent.

Step 2: Administration Staff, BLEO, CBO or Works Superintendent contact the property owner directly.

Step 3: Follow further enforcement procedures depending on the department [?? not sure what you mean by department different departments do not have enforcement procedures. There are our Municipal By-laws, and Ontario Regulations.](#)

If, following an initial visit from/verbal discussion with staff, it is determined that the property owner would benefit from a more detailed explanation of the issue in writing, the Explanation letter (follow up quoting specific section of whichever legislation, regulation or policy, and the main issues/concerns that following the process should address) will be sent. [Why would we not include the explanation in the first letter? This seems to add unnecessary steps and time to a situation.](#)

Once an issue moves to Step 3, Council will be made aware of the issue and individuals involved and enforcement steps to be taken.

Council will receive reports at the final Council meeting in March, June, July, August, September and December on how many Issue Report/Complaint Forms are received, broken down as the type of issue and any specific trends (such as geographic area, or specific type of construction or issue).

#### How will Reports be Used?:

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In addition, any Staff or Council member can fill out an Issue Report/Complaint form, whether in their official capacity, or as a member of the public however, it is not expected that they will be "looking for" contraventions of legislation or policy. Outside of their regular work hours, it will be a Staff member's own personal decision as to what they feel their role is in noting potential contraventions. For Council members, they will also need to determine what role that wish to play in the reporting of potential contraventions of any legislation (municipal or otherwise) or policy.

#### What is the Process that will be Followed?:

Once an Issue Report/Complaint form has been received, Administration Staff will consult with the relevant Department Head (BEO, CBO or Works Superintendent), and/or Clerk Administrator (depending on the issue) to determine whether the issue needs to be brought before Council or whether to proceed with the following action (does this not still leave an element of bias?):

Step 1: Send a Contravention letter or Building Permit letter, or visit from BEO, CBO or Works Superintendent.

Step 2: Administration Staff, BEO, CBO or Works Superintendent contact the property owner directly.

Step 3: Follow further enforcement procedures depending on the department

If, following an initial visit from/verbal discussion with staff, it is determined that the property owner would benefit from a more detailed explanation of the issue in writing, the Explanation letter (follow up quoting specific section of whichever legislation, regulation or policy, and the main issues/concerns that following the process should address) will be sent.

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#### How will Reports be Used?:

# East Algoma Ontario Health Team Leadership Council

## Communique

Date: September 2020

Topic	Details
<b>Background</b>	<p><b>Ontario Health Teams:</b> The Ontario government is building a connected health care system centered around patients, families, and caregivers. Ontario Health Teams (OHTs) are being introduced to provide a new way of organizing and delivering care that is more connected to patients in their local communities. Under OHTs, health care providers across the continuum of care will work as one coordinated team- no matter where they provide care. There are 5 phases to become 'designated' as an OHT, they include: 1) Self-Assessment; 2) Validating Provider Readiness- once assessed by the Ministry of Health (MOH), OHTs are placed into the following categories: 'Full Application'; 'In-Development'; or 'In-Discovery'; 3) In-Person Community Visits; 4) OHT Candidates; 5) Designed OHTs (Ministry of Health Ontario Health Team Website , 2019). Click <a href="#">here</a> for additional information.</p> <p><b>East Algoma Ontario Health Team:</b> The East Algoma Ontario Health Team (EAOHT) represents the patients, families, community members and providers of 20 municipalities along the highway 17 East corridor between Echo Bay and Spanish, including Elliot Lake and St. Joseph Island, with a total population of approximately 36,000 people. Building on 3 years of cross-sector collaborative work to address health care issues in East Algoma, our team submitted a Self-Assessment to the MOH on May 15, 2019. Our Self-Assessment outlined creative solutions to address the unique challenges of delivering health care services over a wide geographic area. On July 18, 2019, the EAOHT received a letter from the MOH stating that they had been given a classification of 'In-Development'. Areas of strength within the application included: 1) Demonstrating a strong history of trusting relationships among partners, and commitment towards integration and shared financial management; and 2) Committing to improve patient experience to reduce hallway medicine. To facilitate the 'in-development' and 'full-application' phases of the OHT process, the EAOHT formed a Leadership Council (see Appendix A for Terms of Reference). In November 2019, the MOH outlined that the next step for the EAOHT was to submit a Progress Report on January 20, 2020, a copy of this submission can be found in Appendix B. In March 2020, the COVID-19 pandemic temporally paused the work of OHTs across the province. In July 2020, the EAOHT was informed by the MOH that the team at not been selected to move forward to the full application phase at this time. The EAOHT has a meeting scheduled with the MOH on September 17<sup>th</sup>, 2020 to determine next steps.</p>
<b>Key Messages</b>	<ul style="list-style-type: none"> <li>• There are currently 4 applications for Ontario Health Teams within the Algoma District including: the East Algoma OHT (in-development), the Algoma OHT (Sault Ste. Marie and Area) (approved), the North Algoma OHT (in-development), and the Maamwesying OHT (in-discovery).</li> <li>• The East Algoma Ontario Health Team is comprised of health service providers across the continuum of care, patients/families, and community members that are working to deliver care that is more coordinated and connected to patients in our local communities.</li> <li>• The East Algoma Ontario Health Team has submitted a 'Self-Assessment' to the MOH and has been classified as 'In-Development'.</li> </ul>
<b>Progress to Date/Next Steps</b>	<ul style="list-style-type: none"> <li>• May 15, 2019: Self Assessment Submission</li> <li>• July 18, 2019: 'In-Development' Classification</li> <li>• January 20, 2020: Progress Report Submitted to Ministry of Health</li> <li>• July 2020: Notification from the MOH that the EAOHT has not been requested to move to full application at this time.</li> <li>• September 17, 2020: EAOHT meeting with the MOH to determine next steps.</li> </ul>
<b>Education Resources</b>	<ul style="list-style-type: none"> <li>• MOH Website: <a href="#">Click Here</a></li> <li>• RISE Webinars: <a href="#">Link to Website</a></li> </ul>

## Appendix A

### East Algoma Ontario Health Team Leadership Council

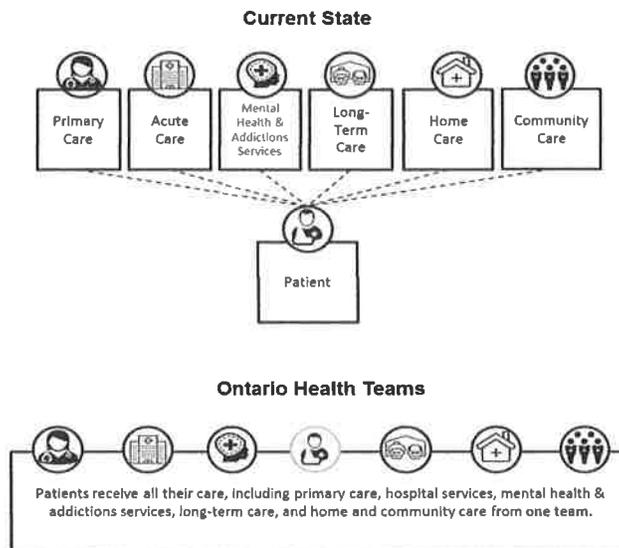
#### Terms of Reference

Approved November 15 2019

#### BACKGROUND OF ONTARIO HEALTH TEAMS

The Ontario government is building a connected health care system centered around patients, families and caregivers. These changes will strengthen local services, making it easier for patients to navigate the system and transition between providers.

Ontario Health Teams are being introduced to provide a new way of organizing and delivering care that is more connected to patients in their local communities. Under Ontario Health Teams, health care providers (including primary care, secondary care, home care, community support services, mental health and addictions, health promotion and disease prevention, rehabilitation and complex care, palliative care, residential care and short-term transitional care, long term care homes, emergency health services, laboratory and diagnostic services, midwifery services, other social and community services as needed by the population, etc.) will work as one coordinated team - no matter where they provide care.



(MOHLTC Website, 2019)

To form an Ontario Health Team, the Ministry of Health (MOH) has outlined the following process:

1. **Self-assessment:** Interested groups of providers and organizations assess their readiness and begin working to meet key readiness criteria for implementation, by completing and submitting a self-assessment form.

2. **Validating Provider Readiness:** Teams who submit self-assessment forms are classified, based on level of readiness, into one of the following categories:
  - **Proceed to Full Application** – These teams have partners across the continuum of care. They are highly aligned with the model, have a high level of readiness and are well-positioned to complete the full application.
  - **In Development** – These teams have partners who represent a continuum of care, are committed to the model, and with a bit more work will be well positioned to complete the full application.
  - **In Discovery** – These health care providers support the model. They are encouraged to expand their partnerships and work with other local providers in alignment with the criteria outlined in the guidance document.
3. **In-person Community Visits:** Teams that will be selected for an in-person visit after a successful self-assessment and full application.
4. **Ontario Health Team Candidates:** Teams of providers that are ready to implement the Ontario Health Team model after a successful self-assessment, full application and in-person visit.
5. **Designated Ontario Health Teams:** Ontario Health Team Candidates that are ready to receive an integrated funding envelope and enter into an Ontario Health Team accountability agreement with the funder can be designated as an Ontario Health Team.

(Ministry of Health-Become an Ontario Health Team Website, 2019).

## **BACKGROUND OF THE EAST ALGOMA ONTARIO HEALTH TEAM**

The East Algoma Ontario Health Team (EAOHT) represents the patients, families, community members, and providers of 20 municipalities along the highway 17 east corridor between Echo Bay and Spanish, including Elliot Lake and St. Joseph Island, with a total population of approximately 30,000 people. The EAOHT submitted a Self-Assessment (see Appendix A) to the MOHLTC on May 15, 2019. On July 18, 2019 the EAOHT received a letter from the MOHLTC stating that they have been given a classification of ‘In-Development’. Within this letter, the following strengths of the EAOHT Self-Assessment were identified:

- 1) Demonstrating a strong history of trusting relationships among partners, and commitment towards integration and shared financial management.
- 2) Committing to improve patient experience to reduce hallway medicine.

In addition to the above strengths, the following four areas of improvement were identified:

- 1) Increasing understanding of the Quadruple Aim and key performance measures of the OHT model (e.g. ALC, readmission rates, avoidable ED visits), and collectively developing a plan to achieve them;
- 2) Exploring the existing digital health landscape or a commitment to enhance digital health, which will be required to meet year 1 expectations;
- 3) Collaborating to outline how your team will address the needs of the Francophone population within your region;
- 4) Collaborating to outline how your team will engage with and seek endorsement from Indigenous communities.

The EAOHT is currently awaiting further direction from the MOHLTC outlining the steps that are required to proceed to Full Application.

## **PURPOSE OF THE EAST ALGOMA ONTARIO HEALTH TEAM LEADERSHIP COUNCIL**

The EAOHT Leadership Council (the “Leadership Council”) is critical to the overall success of EAOHT. The purpose of the Leadership Council is to:

- Be accountable to board of each signatory organization via the organization’s representative;
- Set and guide overall strategy for the EAOHT to move through the ‘in-development’ phase, and submission of the ‘full application’;
- Approves the EAOHT’s vision and guiding principles;
- Acts as the decision making body for the overall project;
- Responsible to determine how the project will be resourced and funded;
- Responsible for overseeing the completion of the full application which includes making recommendations on the following: EAOHT population; team composition; model of care; governance structure; quality improvement approach; implementation/change management approach; barriers to model implementation; redesign of home and community care; digital health approach.

## **PRINCIPLES- HOW WE WORK TOGETHER**

- **Principle of Trust as a Wise Practice:** Recognize and acknowledge each partner’s mandate, impact and purpose and we will continue to use an appropriate communication approach in working together.
- **Principle of Honour as a Wise Practice:** We have ability and right to make good decisions for our communities within the entirety of our region. We are most successful when we have opportunities to build capacity and base our approaches on each other’s strengths.
- **Principle of Commitment as a Wise Practice:** Commitment requires mutual sharing, ongoing personal and agency reflection, community presence, progressive leadership and our community members’ validation.
- **Principle of Collaboration as a Wise Practice:** We will be active members of the EAOHT who will work together, as a system, to achieve our common goal of continuously improving care for patients and families.

## **MEMBERSHIP**

The Leadership Council membership will be comprised of the senior executive of each of the signed partner organizations, patient/family advisors, Indigenous and Francophone representation, as well as representation from other Ontario Health Teams as identified. The members of the Leadership Council can be found in Appendix B.

- **Member Responsibility:** Members are expected to participate in a way that achieves quality, inclusive work within required timelines. Members are asked to read material, actively participate in discussions, and respond to requests for participation and information in a timely manner. Members will be expected to seek input from, and relay information to, their respective constituencies/governing body. To facilitate consistent communication, members will be provided with an agreed upon key messages document at the end of each Leadership Council meeting (see Appendix C).

- **Member Alternate:** Members may choose to identify a specific alternate to attend meetings when the primary member is unavailable. The alternate member may vote on behalf of the primary member. It is the responsibility of the primary member to ensure that the alternate is fully prepared for a meeting that they are required to attend.
- **Member Term:** Members will be appointed for the length of the 'in-development' and 'full application' process.
- **Co-Chairs:** Co-chairs to be selected by consensus by the Leadership Council. Their role will be to:
  - Act as a spokesperson for the initiative;
  - Ensure business is conducted efficiently and effectively;
  - Facilitate discussions to ensure adequate input from all members and preferably arrive at consensus decisions;
  - Ensure appropriate record-keeping of decisions and other key items.

## **DECISION-MAKING**

Leadership Council decisions will be reached through consensus. The consensus approach will require:

- a) An open discussion and exploration of options;
- b) That everyone can live with the decision; and,
- c) That everyone can commit to supporting the decision.

Consensus decision-making requires:

- a) Full participation: members must be prepared to contribute courageously.
- b) Mutual understanding: members must seek clarification and appreciate the point of view of others.
- c) Inclusive solutions: members must be flexible and allow new ideas to emerge.
- d) Shared responsibility: members will engage in arriving at decisions that all can accept and implement.

Where a vote is required, each signatory organization will have one vote. A quorum of 50% of members plus one is required for decision making. If there is a need to hear from all members of the Leadership Council on a specific item, a vote via email may occur. If the group is unable to reach consensus, efforts to resolve the issue will be made that are in the patient's best interests and aligned with the vision and principles of the EAOHT.

Certain items that are brought to the Leadership Council will require approval from the Boards of participating signatory organizations. These items may include the following: funding; governance structure; others as identified. Members will be given all necessary material to inform their Board of the decision request. Members will be asked to communicate the result of their Board's decisions to the Leadership Council.

## **CONFLICT OF INTEREST**

Members are required to declare any real or perceived conflict of interest at the outset of each meeting, after reviewing the agenda. The Chair will then determine if the member should remove themselves from the discussion.

**MEETING FREQUENCY**

The Leadership Council will meet as required. Additional meetings, at the call of the Co-Chairs, can be scheduled on an as-needed basis. A meeting schedule will be provided to all members.

**MEETING LOGISTICS**

Meeting arrangements, agenda preparation will be completed by the Co-Chairs with administrative support from the Project Coordinator. Meeting discussions will be documented in minutes and approved by the Leadership Council.

**COMMUNICATION**

A communication plan will be outlined by the Leadership Council to ensure that there is sufficient communication about the activities of the EAHOT to all stakeholders (See Appendix C for a copy of the proposed Communication Plan).

Terms of reference will be reviewed upon request.

# East Algoma Ontario Health Team Leadership Council Communique

## Terms of Reference Appendix C

### East Algoma Ontario Health Team Leadership Council

#### Communication Plan

Audience	Communication Method	Tools	Frequency
EAOHT Leadership Council	<ul style="list-style-type: none"> <li>• EAOHT Leadership Council membership will receive communication from the EAOHT Co-Chairs.</li> </ul>	<b>EAOHT eCollab Site:</b> <ul style="list-style-type: none"> <li>• All EAOHT material to be stored on one eCollab site that is accessible to all EAOHT Leadership Council membership</li> <li>• Links to all Education resources to be posted on eCollab site</li> </ul>	<ul style="list-style-type: none"> <li>• Updated after each EAOHT Leadership Council Meeting</li> <li>• Updated as education resources become available</li> </ul>
		<b>EAOHT Leadership Council Meetings:</b> <ul style="list-style-type: none"> <li>• Meeting packages</li> <li>• Meeting discussion</li> <li>• Available in person, via teleconference and OTN</li> </ul>	<ul style="list-style-type: none"> <li>• As per EAOHT Leadership Council meeting schedule</li> </ul>
		<b>OHT Education Resources:</b> <ul style="list-style-type: none"> <li>• OHT Webinars:                             <ul style="list-style-type: none"> <li>○ RISE: <a href="#">Link to Website</a></li> <li>○ Other: <a href="#">Tectonic</a></li> </ul> </li> <li>• MOHLTC OHT Information:                             <ul style="list-style-type: none"> <li>○ Website: <a href="#">Link to Website</a></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Links to all education resources will be posted on eCollab site</li> </ul>
Governance	<ul style="list-style-type: none"> <li>• EA OHT Leadership Council membership to use 'Communique' provided at the end of each meeting to relay key messages to their respective Governance bodies.</li> </ul>	<b>EAOHT Leadership Council Communique:</b> <ul style="list-style-type: none"> <li>• A one page summary of EA OHT Leadership Council meetings that outlines background, key messages, progress to date, decision requests, and available OHT education sessions (attached).</li> </ul>	<ul style="list-style-type: none"> <li>• Communique will be updated after each EA OHT Leadership Council Meeting</li> </ul>

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## East Algoma Ontario Health Team Leadership Council Communique

Media	<ul style="list-style-type: none"> <li>• EAOHT Co-Chairs will respond to media requests using the EAOHT Leadership Council Communique.</li> </ul>	<p><b>EAOHT Leadership Council Communique:</b></p> <ul style="list-style-type: none"> <li>• A one page summary of EA OHT Leadership Council meetings that outlines background, key messages, progress to date.</li> <li>• Example of Communique embedded above.</li> </ul>	<ul style="list-style-type: none"> <li>• Communique will be updated after each EA OHT Leadership Council Meeting</li> </ul>
Social Media	<ul style="list-style-type: none"> <li>• EAOHT Leadership Council Members via Social Media Sites using the standard messaging in the EAOHT Leadership Council Communique.</li> </ul>	<p><b>EAOHT Leadership Council Communique:</b></p> <ul style="list-style-type: none"> <li>• A one page summary of EA OHT Leadership Council meetings that outlines background, key messages, progress to date.</li> <li>• Example of Communique embedded above.</li> </ul>	<ul style="list-style-type: none"> <li>• Communique will be updated after each EA OHT Leadership Council Meeting</li> </ul>



September 15, 2020

Hon. Caroline Mulroney  
5<sup>th</sup> Floor, 777 Bay St.  
Toronto ON, M7A 1Z8

Dear Hon. Caroline Mulroney,

Please be advised that at the Regular Meeting of Council on August 24, 2020, the Council of Loyalist Township passed the following resolution:

**Resolution No. 2020.33.11**

**Moved by: Councillor Porter**

**Seconded by: Councillor Townend**

Whereas the Ontario government, in partnership with the federal government, is delivering on its commitment to provide up to \$4 billion in urgently needed one-time assistance to Ontario's 444 municipalities;

And Whereas in addition to the support for municipalities, the government is providing over \$660 million in the first phase of transit funding to the 110 municipalities with transit systems to provide immediate relief from transit pressures, such as lower ridership, as well as for new costs due to COVID-19, such as enhanced cleaning and masks for staff;

And Whereas in the second phase, additional allocations will be provided based on expenses incurred to ensure the funding meets the needs of municipalities;

And Whereas as part of the Safe Restart Agreement with the federal government, up to \$2 billion is being provided to support public transit in Ontario;

And Whereas Ontario Regulation 191/11 being the Integrated Accessibility Standards, which applies to every designated public sector organization including municipalities, establishes accessibility standards, including transportation and as such, recognizes ferries as a form of public transportation;

And Whereas many municipalities located along large bodies of water such as Lake Ontario, including the Township of Frontenac Islands and Loyalist Township, are only accessible by public ferries which are connecting links to mainland highways and roads and form part of Ontario's road systems, making them critical public services;

And Whereas due to the COVID-19 Pandemic and restrictions placed on ferry services by Transport Canada as well as public health guide lines, ferry transit, similar to conventional transit, has experienced reduced ridership, additional costs to cover increased sanitization and requirement for masks for ferry operators, and reduced revenue due to the inability to collect cash fares;

Therefore, Be It Resolved that Loyalist Township requests that the Ministry of Transportation support the Canadian Ferry Association's request that ferries be considered part of the local transit system and that lost revenue be eligible for reimbursement;

And Further That a portion of the (pandemic) Federal funds be allocated towards municipal transportation ferry revenue loss and ferry expenditures resulting from the pandemic;

And that this resolution be circulated to all Ontario municipalities.

Regards,



Brandi Teeple  
Deputy Clerk  
Loyalist Township

cc. All Ontario Municipalities