



# CORPORATE POLICY AND PROCEDURE

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Reviewed:	
Program	July 2010
MCC	N/A
SMT	N/A

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<b>SECTION:</b>	BOARD OF HEALTH	<b>POLICY NO.:</b>	BH-02-03
<b>SUBJECT:</b>	<b>Continuing Education for Board Members</b>		
<b>APPROVED BY:</b>	Board of Health	<b>DATE:</b>	September 21, 2010
<b>SUPERSEDES:</b>	September, 27, 2005, April 21, 2004		

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## 1. PURPOSE

- 1.1 The Board of Health recognizes that continuing education for the Members of the Board of Health is an important factor in its ability to ensure that the Thunder Bay District Health Unit is well governed and operating in the best interests of the community. It is the goal of the Board of Health to ensure that all members maintain or improve upon their level of knowledge in the field of public health and good governance.
- 1.2 The purpose of this policy is to provide administrative guidelines to facilitate Board members in their continuing education as part of their role with the Board of Health for the Thunder Bay District Health Unit in a supportive, fair and equitable manner.

## 2. POLICY

- 2.1 All members of the Board of Health are responsible for self-education and development.
- 2.2 The Chief Executive Officer will obtain input at the beginning of each year from the Chair and from the Board of Health concerning orientation/educational needs and the preferred format.
- 2.3 The Board of Health supports continuing education on public health and related community matters and governance.

Continuing education may take place as part of a regular Board meeting, special Board meeting or retreat, or in a separate educational session.

Additional opportunities may include attendance with external organizations at meetings, workshops and conferences such as:

- ♦ Ontario Public Health Association (OPHA)
- ♦ Association of Local Public Health Agencies (aLPHa)
- ♦ Canadian Public Health Association (CPHA)

- 2.4 Attendance at a conference involving an external organization will be limited to four (4) Board members, at one time, or more with prior approval of the Board. Each Board member is encouraged to attend conferences, workshops and courses for continuing education purposes.

- 2.5 Board of Health members, who are funded by the Thunder Bay District Health Unit to attend a conference, seminar, training session or similar event, shall participate as a representative of the Board of Health for the Thunder Bay District Health Unit, not as an individual or a member of another organization.
- 2.6 Quarterly reports regarding the Board budget will be presented by the Business Administrative Officer to monitor the Board's Travel and Training budget.

### **3. PROCEDURE**

#### *Notification of Events*

- 3.1 The Executive Assistant will provide notification of upcoming conferences/ workshops that relate to professional development for the information of the Board as they arise, throughout the year.

Notification may be electronic or in writing, as appropriate.

#### *Request to Attend*

- 3.2 Board members will be required to complete a Board Member Conference/Workshop Request form (Attachment 8.1) to attend the conference/workshop, and submit to the Board Chair through the Executive Assistant. This should be done in sufficient time to allow Board members to take advantage of early bird registration and travel seat sales.
- 3.3 If more than four (4) members of the Board wish to participate in the same event, selection will be determined by:
- Date of the application
  - Previous number of conferences attended
  - Tenure
- 3.4 Requests to travel outside of the Province of Ontario must be approved by resolution of the Board.

#### *Registration*

- 3.5 Registration for conferences and workshops should be coordinated through the Executive Assistant so that they can be billed to and paid directly by the Thunder Bay District Health Unit.

#### *Accommodations*

- 3.6 Accommodations can be coordinated through the Executive Assistant. Hotel reservations made by the Executive Assistant will be confirmed with a Thunder Bay District Health Unit corporate credit card.

If a Board of Health member is unable to attend the hotel, notification should be provided to the Executive Assistant at their earliest convenience, so that the room can be cancelled and charges will not be incurred.

Board of Health Members are required to pay for their hotel accommodations, at the time of their stay, and submit their receipts for reimbursement with their expense claim form.

*Travel*

- 3.7 Air travel can be coordinated through the Executive Assistant.

If a Board member coordinates their own air travel, arrangements should be made through the Health Unit's contracted travel agent, identifying themselves as a Board member, in order that the appropriate billing code (8250) is charged.

Invoices will be submitted directly to the Thunder Bay District Health Unit for payment.

- 3.8 A Board member will be reimbursed for travel at the actual cost or most economical rate of travel, whichever is lower, i.e. air travel vs. ground.

An agreement between the Board member and the Chief Executive Officer on the reimbursement rate shall be determined prior to travel.

*Payment of Expenses*

- 3.9 All Board members will be entitled to reimbursement when attending a conference, convention, or workshop on behalf of the Board upon submission of an expense claim (Expense Reimbursement – General and Travel – ONA & Non-Union FIN-18), for expenses including, but not limited to, registration, accommodation, travel and meals. The applicable allowances will be at the single rate.
- 3.10 All expense claims are to be submitted to the Executive Assistant for verification and they will then be forwarded to the Chief Executive Officer for approval.
- 3.11 Members who receive reimbursement for travel and professional development expenses from any other source for attendance at the same event shall not be eligible to receive reimbursement from the Thunder Bay District Health Unit.
- 3.12 Expense claims will be paid in accordance with the regular accounts payable processing cycle.

*Evaluation of Workshop*

- 3.13 A written evaluation of the conference/workshop (Attachment 8.2) is required to be submitted to the Board Chair upon completion of the event.

*Report to the Board*

- 3.14 The Board member may be asked to provide a verbal update during the following scheduled meeting of the Board.

**4. SCOPE**

- 4.1 This policy and procedure applies to all Members of the Board of Health.

**5. RESPONSIBILITY**

- 5.1 The **Chair of the Board of Health** is responsible for deciding which members of the Board attend a conference in the event that there is more than the allowable number of participants.
- 5.2 A **Member of the Board of Health** is responsible for:
- The completion of the Board of Health Conference/Workshop Request form for approval from the Chair
  - Booking personal travel in compliance with the Thunder Bay District Health Unit corporate process
  - The completion of the Board of Health Conference/Workshop Evaluation form upon return from the conference/workshop
  - Attending the conference program sessions
  - Providing a verbal report at a Board of Health meeting
- 5.3 The **Chief Executive Officer** is responsible for:
- ensuring orientation or educational requirements by Board of Health members is scheduled on the first Board of Health meeting of each year;
  - for approving the finalized expense forms and submitting them for payment and presenting quarterly reports on the Board's Travel and Training Budget.
- 5.4 The **Executive Assistant** is responsible for:
- Providing notification to Board of Health members, either in writing or electronically, of upcoming conferences and workshops
  - Arranging for registration and accommodations for the Members of the Board of Health
  - Reviewing submitted Board of Health Expense forms for accuracy and submitting them to the Business Administrator for approval
  - Ensuring the upcoming conference is listed under the General Correspondence Section of the Board of Health agenda for information of the Board
  - Ensuring the past conference is listed on the Board of Health agenda for a report from participant

**6. DEFINITIONS**

- 6.1 **Single Rate** means that the Thunder Bay District Health Unit will only pay for the Board of Health Member's expenses and not a companion, i.e. additional costs for double occupancy in a hotel room.

**7. REFERENCES and RELATED STATEMENTS of POLICY and PROCEDURE**

- 7.1 Policy Number: BH-02-04 Board Members Reimbursement
- 7.2 Board of Health Amalgamated By-law

**8. ATTACHMENTS**

- 8.1 Board of Health Conference/Workshop Request form
- 8.2 Board of Health Conference/Workshop Evaluation form
- 8.3 FIN-18 - Expense Reimbursement – General and Travel – ONA & Non-Union
- 8.4 Expense Reimbursement – General & Travel Checklist

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**ATTACHMENT 8.1**

**BOARD OF HEALTH  
CONFERENCE/WORKSHOP REQUEST**



**Board of Health**

**Conference/Workshop Request**

Complete and submit to Board Chair prior to date of conference/workshop to allow for sufficient time for Board of Health members to take advantage of early bird registration and travel sales.

**DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**NUMBER OF CONFERENCES  
ATTENDED THIS YEAR:** \_\_\_\_\_

**NAME OF CONFERENCE/WORKSHOP:** \_\_\_\_\_

**DATE OF CONFERENCE:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

**PURPOSE FOR ATTENDING:** (Explain) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPROVED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
Board of Health Chair

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**ATTACHMENT 8.2**

**BOARD OF HEALTH  
CONFERENCE/WORKSHOP EVALUATION**



**Board of Health  
Conference/Workshop Evaluation**

Please complete form and submit to Chair of the Board of Health following attendance at an event.

**NAME:** \_\_\_\_\_ **DATE OF EVALUATION:** \_\_\_\_\_

**CONFERENCE/WORKSHOP:** \_\_\_\_\_ **DATE OF EVENT:** \_\_\_\_\_

**HOW DID YOU FIND THE QUALITY OF THE CONFERENCE/WORKSHOP?**

**POOR** ☐ **FAIR** ☐ **AVERAGE** ☐ **GOOD** ☐ **OUTSTANDING** ☐

**WOULD YOU RECOMMEND THIS CONFERENCE TO YOUR PEERS?**

**YES** ☐ **NO** ☐ **UNDECIDED** ☐

**RATE THE CONFERENCE ACCORDING TO THE FOLLOWING QUALITIES:**

	POOR			OUTSTANDING	
<b>PRACTICAL VALUE</b>	1	2	3	4	5
<b>THOROUGHNESS</b>	1	2	3	4	5
<b>NEW IDEAS GAINED</b>	1	2	3	4	5
<b>HELPFUL TO SELF-DEVELOPMENT</b>	1	2	3	4	5
<b>RELEVANCE TO YOUR POSITION ON THE BOARD</b>	1	2	3	4	5

**ADDITIONAL COMMENTS:**

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**SIGNATURE**

**DATE**

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**FIN-18 - EXPENSE REIMBURSEMENT  
GENERAL AND TRAVEL – ONA & NON-UNION**

[illegible]



## ATTACHMENT 8.4

EXPENSE REIMBURSEMENT  
GENERAL AND TRAVEL CHECKLIST

## Expense Reimbursement - General &amp; Travel Checklist

\*Claims will not be processed until all of the following requirements are met.

Reimbursements will be processed in accordance with approved policies and procedures

## Receipts:

- ☐ Obtain all necessary receipts. Original itemized receipts (credit card or debit card slips are not acceptable) are required for all items except meals\* and parking meters. \*Please Note: If the claim is being reimbursed by an outside source, they may require meal receipts.
- ☐ Use a separate line for each transaction/receipt and list them in chronological order. Also, list the total meals for each day on it's own line.
- ☐ Number all your receipts and indicate the receipt number on the corresponding claim line.
- ☐ If an expense is paid directly by the Health Unit to the service provider (e.g. airfare, registration fees), or via procurement card, do not list it on this form. Only list what you are claiming for reimbursement.
- ☐ An Account # and Program # must be entered for each line; and a Project # (if applicable).  
(see the box below for frequently used account numbers)

## Foreign Currency Expenses:

- ☐ Expenses incurred in anything other than Canadian currency should be reported in the foreign currency amount to match submitted receipts. Payroll will convert the expense to CDN currency.

## Reimbursement from an outside source:

- ☐ If all or part of the claim is being reimbursed by an outside source (e.g. Ministry of Health & Long-Term Care) please attach the completed reimbursement form required by the reimbursing organization.
- ☐ Ensure that the appropriate address where the reimbursement form is to be sent is indicated on the form.
- ☐ Program & Project numbers are not needed for items being reimbursed by an outside source.
- ☐ The Account number for Ministry of Health & Long-Term Care reimbursement is #121 and for any other source is #123.

- ☐ Please create 2 packages:

## 1. Submission for Reimbursement

- Copy of completed & approved TBDHU expense form.
- Original receipts.
- Completed expense form for the reimbursing organization.
- Address of the reimbursing organization.

## 2. TBDHU Copy - copies of ALL documents including:

- Original completed & approved TBDHU expense form.
- Copies of all receipts.
- Copy of expense form from the reimbursing organization.
- ☐ Send both packages together to payroll for processing.

## Board Member Account Numbers

Travel & Transportation	8300
Meals	8305
Registration & Materials	8310
Accommodations	8315
Recognition & Other expenses	8320
Honorariums	8325

## Frequently Used Account Numbers

	District Travel	
	Meals	7010
* For a complete list of account numbers please see the account code listing posted on DocuShare.	Accommodations	7015
	Gasoline	7004
	Vehicle Rental/Lease	7005
Staff Training & Recognition		
	Meals	8005
	Accommodations	8015
	Travel & Transportation	8000
	Registration & Materials	8010
Other		
General Program Supplies		21005
General Office Supplies		22020
Catering Meetings		21011