

**Board Members:**

Phil Squire- Chair

Mayor Grantham-  
Vice Chair

Gary Bezaire

Shawn Lewis

Hadleigh McAlister

Cara Awcock

Kathleen Savoy

Gregory Thompson

**LMCH Leadership**

Paul Chisholm, CEO

Sara De Candido, COO

John Krill,  
Director, Asset  
Renewal

Dirk Volschenk,  
Manager of Human  
Resources

**PUBLIC AGENDA**

**LONDON & MIDDLESEX COMMUNITY HOUSING  
(LMCH)**

**Board of Directors Meeting**

**Meeting Room  
1299 Oxford St. E  
London, Ontario, N6E 0C1**

**Thursday, April 16, 2026**

**5:30 PM – 8:00 PM**

Item	Lead	Time
1. Call to Order	P. Squire	5:30
2. Recognition of Indigenous Peoples and Lands Statement	P. Squire	
3. Completion and Acceptance of Agenda	P. Squire	
4. Disclosure of Interest	P. Squire	
5. Approval of Minutes of Previous Meetings a. February 19, 2026	P. Squire	
6. Communications:		
7. Delegations           None		
8. Consent Agenda Items: None		
9. Reports and Business  a) Staff Report 2026-09 LMCH Purchase Authorization Limits  b) Staff Report 2026-10 Multi-site Electrical Construction Contract Award  c) Staff Report 2026-11 Project 2025-CMHC-02 Budget  d) <u>FAR Reports for Information</u>  I. 2025 Q4 2025 Draft Unaudited Financial Results   e) Staff Report 2026- 12 Health and Safety and WHVSH Policies f) Staff Report 2026- 13 Smoke Free Workplace Policy g) Staff Report 2026-14 LMCH Accessibility Report h) <u>PSH Committee Reports for Information</u>  I. PSH- 2026-10 COO Update II. PSH- 2026- 12 Senior Manager of Property Services	P. Chisholm  J. Krill   J. Krill   G. Thompson    D. Volschenk D. Volschenk  S. De Candido  Mayor Grantham	

<p>III. PSH -2026-13 2025 Annual Inspection Report and Review</p> <p>IV. PSH-2026-14 2026 IPM mid-year Report</p> <p>V. PSH-2026-15 2025/26 Custodian Program Report</p> <p>VI. PSH-2026- 16 2026 Landscaping update</p> <p>VII. PSH-2026-17 Q1 Communications Update</p> <p>VIII. PSH -2026- 18 Senior Manager Tenant Experience</p> <p>IX. PSH-2026-19 Rent Forgiveness Update</p> <p>X. PSH-2026-20 Senior Manager of Community Safety and Wellbeing Report</p> <p>XI. PSH -2026- 21 Q1 2026 AODA Progress/Implementation Update</p> <p>XII. PSH- 2026-22 2025 Community Safety Report</p> <p>XIII. PSH-2026-23 Q1 2026 HR Update</p> <p>i) Staff Report 2026-15 Director Reappointments</p>	<p>P. Chisholm</p>	
<p>10) Presentations: Board Workshop</p>		
<p>11) In-Camera: To provide an opportunity for the board to discuss particularly sensitive matters within the jurisdiction of the board (such as litigation, labour relations, or management performance)</p>	<p>P. Chisholm</p>	
<p>12) New Business/ Enquiries: None</p>	<p>P. Squire</p>	
<p>13) Meeting Adjournment</p>	<p>P. Squire</p>	<p>8:00pm</p>

## Recognition of Indigenous Peoples and Lands Statement

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London & Middlesex Community Housing provides housing on the traditional lands of the Anishinaabek (AUh-nish-in-ah-bek), Haudenosaunee (Ho-den-no-show-nee), Lūnaapéewak (Len-ah-pay-wuk) and Attawandaron (Adda-won-da-run).

We acknowledge the local First Nations communities in this area, the territory of the Chippewa (CHIP-I-WAA) of the Thames, the Oneida (OH-NY-DUH) of the Thames, and the Muncey (m-UH-n-s-ee) Delaware Nation.

We honour and respect the history, languages and culture of the diverse Indigenous people who call this territory home. Today, the City of London & Middlesex County is home to many First Nations, Métis and Inuit people. We are grateful to have the opportunity to work and live in this territory.



## BOARD OF DIRECTORS PUBLIC MEETING MINUTES

February 19, 2026, at 5:30 p.m.  
London & Middlesex Community Housing  
Boardroom, 955 Southdale Rd. W, London, Ontario, Canada

### Board Members in Attendance:

Phil Squire, Board Chair

Hadleigh McAlister

Shawn Lewis

Mayor Grantham, Vice Chair

Kathleen Savoy

Gregory Thompson

Cara Awcock

Gary Bezaire

*\* Virtual Attendance via Zoom*

### Senior Leadership in Attendance:

Paul Chisholm, CEO

Sara De Candid, COO

John Krill, Director of Asset Renewal

Olysea Gryn, Senior Manager of Tenant Experience

Dirk Volschenk, Manager Human Resources

1. Call to Order	Board Chair called the meeting to order at 5:30 p.m.
2. Recognition of Indigenous Peoples and Lands	Board Chair provided the recognition address at 5:31 p.m.  <i>We would like to begin by acknowledging the treaty territory of the Anishnaabeg, which is defined within the pre-confederation treaty known as the London Township Treaty of 1796. Throughout time, this region has also become the current home to the Haudenosaunee and Lenni-Lenape Nations.</i>
3. Completion and Acceptance of the Agenda	<b>MOTION to RECEIVE the Agenda, MOVED by G. Bezaire, seconded by G. Thompson,</b>  <b>ALL in Favour PASSED at 5:31 PM</b>
4. Disclosures of Interest	The Board Chair called for conflict-of-interest declarations with respect to the agenda. 5:31 p.m.

<p><b>5. Approval of Board Meeting Minutes</b></p>	<p>Regarding the Board Meeting Minutes of November 20, 2025 <b>MOVED</b> by C. Awcock, seconded by G. Beziare, that the Minutes <b>BE ACCEPTED</b> and <b>APPROVED</b>, item <b>CARRIED</b> at 5:32 pm</p>
<p><b>6. Communications</b></p>	<p>None</p>
<p><b>7. Delegations</b></p>	<p>None</p>
<p><b>8. Consent Items</b></p>	<p>None</p>
<p><b>9. Reports and Business</b></p> <p>a) Staff Report 2026-02 CEO Update</p> <p>b) Staff Report 2026-03 2026 Insurance Program Renewals with the City of London</p>	<p><b>Report overview given by P. Chisholm</b></p> <ul style="list-style-type: none"> <li>• Asset renewal completed 142 units, full unit upgrade and accessible units in 2025</li> <li>• 800 hot water tanks were replaced at the town house communities.</li> <li>• Currently evaluating Electrical RFP, this work is between 2-3 million dollar of work over 2026</li> <li>• MRP is being presented for Board Approval.</li> <li>• Expression of interest for IFH will be released for redevelopment</li> <li>• AODA Policy approved and this will help to manage to accommodation request process</li> <li>• CEO Workplan- reviewed</li> </ul> <p><b>MOTION to RECIEVE</b> the report, <b>MOVED</b> by C. Awcock, seconded by G. Thompson, <b>PASSED 5:37pm.</b></p> <p><b>Report overview given by P. Chisholm</b></p> <ul style="list-style-type: none"> <li>• Review of premium, and approval to participate in covering cost.</li> </ul> <p><b>MOTION to APPROVED</b>, the report and recommendation, <b>MOVED</b> by C. Awcock, seconded by H. McAlister, <b>PASSED 5:39 pm</b></p>



<p>c) Staff Report 2026- 04 Director of Asset Renewal Q4 update</p>	<p>Report overview given by J. Krill</p> <p><b>MOTION to RECEIVE and APPROVE</b> the Report and Recommendations, <b>MOVED</b> by G.Thompson, seconded by Mayor Grantham. <b>PASSED</b> 5:46pm</p> <ul style="list-style-type: none"><li>• Review of the fee and design changes in the future.</li><li>• Expression of interest for IFH development and regeneration, the goal is to unlock ideas from the development community on regeneration.</li></ul> <p>Discussion around Building Condition Assessments, the goal is to do 1/3 of the portfolio each year.</p> <ul style="list-style-type: none"><li>- Working with the City of London on future BCA, to the end of June, and will be included in the newer AMP with the City of London</li><li>- Capturing all investments over the last 3 years will increase the score.</li><li>- Range of renewal dates, for assets, there will be a realistic date calculated into the BSA score.</li><li>- This information will inform the City on the MYB to better articulate LMCH needs</li></ul>
<p>d) Staff Report 2026- 05 CMHC Q4 Update</p>	<p>Report overview given by J. Krill</p> <ul style="list-style-type: none"><li>• By the end of 2025, the CMHC program spending was to be reconciled, budget was to be reset</li><li>• Contingency y buffer reviewed 3.3 million</li></ul> <p><b>MOTION to APPROVE</b> the Report and Recommendations, <b>MOVED</b> by K. Savoy, seconded by G. Bezaire, <b>PASSED</b> 6:00 pm.</p> <p>Discussion: City of London’s commitment and CMHC loan commitment.</p>
<p>e) Staff Report 2026-06 Capital Projects Q4 Update</p>	<p>Report overview given by J. Krill</p> <ul style="list-style-type: none"><li>• Review of Reallocation Recommendation</li><li>• Project cancellations and transfer of dollars to be moved into contingency</li><li>• Review of BCA budgeted dollars, being moved to one project number in order to simply invoicing</li></ul>



<p>f) Staff Report 2026-07 Master Regeneration Plan</p>	<p><b>MOTION to APPROVE</b> the Report and Recommendations <b>MOVED</b> by G. Bezaire, seconded by K. Savoy, <b>PASSED</b> 5:51 pm.</p> <p>Report overview given by J. Krill</p> <ul style="list-style-type: none"><li>• Delivered below target on the first regeneration project.</li><li>• Sustainability of LMCH long term aligns with continued redevelopment</li><li>• Regeneration and development put tenants at the front of our decision-making</li></ul> <p><b>MOTION to APPROVE, MOVED</b> by G Thompson, seconded by G. Bezaire, <b>PASSED</b> 6:07 pm</p> <p><i>S. Lewis left the meeting at 6:08 PM.</i></p>
<p>g) FAR Reports for Information</p>	<p>Reports overview given by G. Thompson</p> <p><b>MOTION to RECEIVE</b> reports 1,3, 4,5,6 for Information, <b>MOVED</b> by G. Thompson, H. Mc. Alister, <b>PASSED</b>, 6:16 pm</p> <ul style="list-style-type: none"><li>• Review of the Auditors' plan,</li><li>• Q4 KPI Report , vacancy and work order completion rates have increased. The number of households in good standing decreased.</li><li>• Pest control infestation level dropped to 14%</li><li>• Reimagine South Full permit still pending,</li></ul> <p>Discussion on the regeneration dollar allocated by the City of London and what that can be used for, other Regeneration Projects.</p>
<p>FAR- 02- 2026 REVISED Operating Budget</p>	<p><b>MOTION to APPROVE</b> the report, <b>MOVED</b> by G. Thompson, Seconded by H. Mc. Alister, <b>PASSED</b>, 6:16 pm</p> <ul style="list-style-type: none"><li>• The 2026 Budget was reviewed and revised. Operating costs and surpluses were highlighted.</li></ul>



<p>h) Staff Report 2026-08 Internal Transfer Policy</p> <p>i) PSH Reports for Information</p>	<p><b>MOTION to APPROVE</b> the policy, <b>MOVED</b> by C. Awcock, seconded by K. Savoy, <b>PASSED</b> 6:17 pm.</p> <p>Communications Update: There have been zero negative media interactions in Q4 Comms update and K. Savoy interview received well.</p> <p><b>MOTION to RECEIVE</b> for Information, <b>MOVED</b> by Mayor Grantham, seconded by G. Bezaire, <b>PASSED</b> 6:18 pm</p>
<p>11. IN CAMERA</p>	<p><b>MOTION to MOVE</b> In Camera, <b>MOVED</b> by, H. McAlister, seconded by K. Savoy, <b>PASSED</b> 6:19pm</p> <p><b>MOTION to MOVE</b> back Into Public Session, <b>MOVED</b> by G. Bezaire, seconded by G. Thompson, <b>PASSED</b> 6:23pm</p>
<p>12. New Business</p>	<p>None</p>
<p>13. MEETING ADJOURNMENT</p>	<p><b>MOTION to ADJOURN</b>, ALL in Favour <b>PASSED</b> at 6:24 pm</p>

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Phil Squire, Chair

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Paul Chisholm, CEO

**Purchase Authorization Limits  
STAFF REPORT -2026-09**

**TO:** LMCH Board of Directors  
**FROM:** Paul Chisholm, Chief Executive Officer  
**SUBJECT:** Purchase Authorization Limits  
**DATE:** April 9, 2026

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**PURPOSE:**

The purpose of the report is Board Approval to update LMCH management purchasing authorities.

**RECOMMENDATION:**

That the LMCH Board of Directors:

1. **RECEIVE** this report for Information.
2. **APPROVE** the updates to purchase limits as set out in this report.
3. **AUTHORIZE** LMCH staff to take the steps required to give effect to the above recommendations.

**BACKGROUND:**

The current LMCH Purchasing Policies and Guidelines were reviewed and approved by the Board in May 2023. A comprehensive review of the policies and guidelines are underway, with recommendations expected to come before the Board no later than Q3 2026. With recent organizational changes, the purchase authorization limits need to be updated.

**REASONS FOR RECOMMENDATION**

It is best practice to review policies and internal approval processes on a regular basis. The attached Purchase Authority Limits set out recommended changes to the financial authority of LMCH Management to support the introduction of the roles of Chief Operating Officer, Director of Asset Renewal and Senior Manager Roles. These changes will support appropriate and efficient approvals of expenditures.

The changes in Purchase Authorization Limits include:

LMCH Management Category	Key Changes
Chief Executive Officer	<ul style="list-style-type: none"> <li>• Increase Requisition Authority from \$75,000 to \$150,000</li> <li>• Increase Commitment Authority (budgeted) from \$150,000 to \$250,000</li> <li>• Increase Commitment Authority (not budgeted) from \$75,000 to \$150,000</li> <li>• Include specific reference to commitments on Capital Projects up to the limits of Board-approved project funding</li> </ul>
COO and Director of Asset Renewal	<ul style="list-style-type: none"> <li>• New approval level for both positions</li> <li>• Requisition Authority up to \$75,000</li> <li>• Commitment Authority (budgeted) up to \$150,000</li> <li>• Commitment Authority (not budgeted) up to \$75,000</li> </ul>
Director of Finance and Corporate Services and Senior Managers	<ul style="list-style-type: none"> <li>• No Changes</li> <li>• Requisition Authority up to \$25,000</li> <li>• Commitment Authority (budgeted) up to \$50,000</li> <li>• Commitment Authority (not budgeted) up to \$25,000</li> </ul>
Managers	<ul style="list-style-type: none"> <li>• No Changes</li> <li>• Requisition Authority up to \$10,000</li> <li>• Commitment Authority (budgeted) up to \$20,000</li> <li>• Commitment Authority (not budgeted) up to \$10,000</li> </ul>

## CONCLUSION

These recommended changes will support Senior Leaders in effectively managing expenses and their budgets. These Purchase Authority Limits will be reviewed based on the recommendations coming out of the review of the Purchasing Policies and Guidelines set for later in 2026.

**ATTACHMENTS:** APPENDIX 1: Purchase Authorization Limits

<b>PREPARED BY:</b>
<b>PAUL CHISHOLM, CHIEF EXECUTIVE OFFICER</b>

## LONDON &amp; MIDDLESEX COMMUNITY HOUSING INC.

## PURCHASE AUTHORIZATION LIMITS

Authorized Staff	Requisition Authority Purchase Requisition <b>BUDGETED</b>	Commitment Authority P.O./ blanket PO / Contract Awards / other form of Commitment -- <b>BUDGETED</b>	Commitment Authority P.O./ blanket PO / Contract Awards / other form of Commitment -- <b>NOT BUDGETED</b>	Changes to P.O./ blanket PO / Contract amendment	Approval of Employee Expense Accts, Operating Expenses, Invoices & Payments	Execution of Documents, (see Notes on Execution of Documents for signing of leases)
CEO	\$150,000	Operating Expenses \$250,000  Capital Projects Budget as approved by Board of Directors	\$150,000	Up to 20% of PO amount	<ul style="list-style-type: none"> <li>Up to approved PO / contract or otherwise approved amount.</li> <li>Up to approved Project Funding in Capital Budget as approved by the Board of Directors</li> <li>If blanket PO up to Commitment authority.</li> <li>Board Chair/Member must approve the CEO expense reports.</li> </ul>	All documents  Capital Project awards
COO and Director of Asset Renewal	\$75,000	\$150,000	\$75,000	Up to 20% of PO amount	<ul style="list-style-type: none"> <li>Up to approved PO / contract or otherwise approved amount.</li> <li>If blanket PO up to Commitment authority.</li> <li>CEO must approve COO and Directors' expense reports.</li> </ul>	All documents
Director of Finance and Corporate Services / Senior Managers	\$25,000	\$50,000	\$25,000	The lower of \$10,000 or 20% of PO in original contracted amount	<ul style="list-style-type: none"> <li>Up to approved PO / contract or otherwise approved amount.</li> <li>If blanket PO up to Commitment authority.</li> <li>CEO must approve Directors' expense reports.</li> <li>COO must approve Senior Managers' expense reports.</li> </ul>	Agreements / contract / letter of engagements with value up to commitment authority.
Managers	\$10,000	\$20,000	\$10,000	The lower of \$1,000 or 20% of PO in original contracted amount	<ul style="list-style-type: none"> <li>Up to approved PO / contract or otherwise approved amount.</li> <li>Rent Supplement payments per city issued guidelines.</li> <li>Director or Senior Manager must approve Functional Managers expense reports.</li> </ul>	Agreements / contract / letter of engagements with value up to commitment authority.

**Notes:**  
These authorities delegate levels of spending to staff. Purchasing by-laws, policies and procedures must be followed to purchase goods and services.

In cases of emergency, and with the approval of the Board Chair, or their designate, the CEO, or their designate, has the authority to commit the Corporation contractually in excess of the amounts stipulated.

**LONDON & MIDDLESEX COMMUNITY HOUSING INC.****PURCHASE AUTHORIZATION LIMITS****Requisition Authority**

- Authority to obtain quotes for goods and service.
- Quotes can be specific goods and services for one or more locations (req. to replace a roof) or portfolio wide on an as required basis (req. to paint apartments, replace appliances, etc); the latter usually lead to the issue of blanket POs.
- Depending on the level of the expenditure and the Purchasing Policy, different purchasing processes can be used to obtain quotes.

**Commitment Authority**

- Authority to commit the company to enter into contractual arrangement for the purchase of goods and services. Usually means “going ahead to ship goods or to provide the services”.
- Commitment can be created by:
  - Awarding a PO
  - Signing of contracts and agreements (without a PO)
  - Advise supplier to proceed with work where supplier has a blanket PO to provide the services (e.g. painting of apartment where a contractor has a blanket PO for painting all the apartments in LMCH).
  - Purchase on credit card

**Changes to contracts/awarded PO amendments**

- Approve an increase in a PO that has been tendered.

**Approval of employee expenses, invoices & payments**

- Approve payment for previously approved Commitment.
- Management staff has authority to approve employee expenses – payroll, mileage, etc up to the approved amount.

**Credit-Card Purchases**

- Management staff and certain exempted personnel have authority to purchase good and services on behalf of LMCH.
- Physical cards are issued to management staff to make ad-hoc business purchases that are in full compliance with our corporate procurement policy.

**Execution of Documents**

- Authority to sign documents to bind the corporation.
- For agreements/contracts/letters of engagements, signing authority is up to manager’s commitment authority.
- CEO will specify positions authorized to sign specific type of documents such as residential leases, commercial leases, operation contracts, delivery service agreements with community agencies, rent supplement agreements, housing allowance agreements, etc.
- Excludes deeds, transfers, assignment and any other property transactions, mortgages, loans and any other indebtedness.

**Construction Contract Award – Multi-site Electrical Upgrades  
STAFF REPORT -2026-10**

**TO:** LMCH Board of Directors

**FROM:** John Krill, Director of Asset Renewal

**SUBJECT:** Construction Contract Award – Multi-site Electrical Upgrades

**DATE :** April 9, 2026

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**PURPOSE:**

The purpose of this report is to provide a progress update on 15 electrical upgrade projects occurring across 8 LMCH sites, and request approval to enter into a construction contract with one electrical general contractor to complete all 15 electrical projects.

**RECOMMENDATION:**

That the LMCH Board of Directors **APPROVE** the following recommendations to be presented to the Board of Directors:

1. **RECEIVE** this report for information.
2. **APPROVE** the net reallocation of \$210,000 from General Contingency 2025-0036 to cover a net aggregate budget shortfall across all the projects as outlined in the projects' budget table in Appendix A.
3. **APPROVE** the request to enter into a construction contract with Dielco Electric for electrical upgrades at LMCH sites: McNay, Berkshire, Baseline, Simcoe, Oxford, 345 Wharncliffe, 349 Wharncliffe, and Hale, for a total contract award of \$4,538,000 (excluding taxes).
4. **AUTHORIZE** LMCH staff to take the necessary steps to give effect to the above recommendations.

**BACKGROUND:**

In 2019, EXP Engineering completed a comprehensive review of the electrical condition of all high-rise buildings. Since that time, LMCH has been strategically investing in electrical system upgrades. The 2023 and 2024 capital budgets utilized the previously completed EXP Engineering assessments to select eight sites, which were due for the next phase of investment to improve electrical infrastructure, however these sites were placed on hold to allow additional assessment.

Subsequently, LMCH's capital team engaged TDW Technologies Ltd to assist with further electrical infrastructure assessments and to act as the electrical design consultant for the eight selected sites. Thorough site reviews and comprehensive designs were completed in the Fall of 2025. LMCH project managers had significant input to these designs to ensure that the scopes took existing operational issues into account and were consistent with recent projects at other sites. For example, the projects put forward in this FAR report will address electrical room ventilation issues at Berkshire and Simcoe. Also, similar to the recent upgrades at Kent, Walnut, and Baseline, all new generators will be provided by Kohler, which will allow for easier training of LMCH maintenance staff and should also be an attractive incentive for better preventive maintenance pricing by future service providers.

Having thus engaged TDW for electrical infrastructure assessment and design for the replacement of critical electrical components across the eight identified LMCH sites, bid documents were completed in late 2025 and posted to Bids and Tenders in December 2025. Mandatory site visits occurred the same month to ensure that all bidders thoroughly understood the requested scope of work. All bidders were instructed to treat each site as an independent project and were also notified that LMCH reserved the right to award the work on a site-by-site basis, or to one successful proponent as seen fit. After a lengthy tender period to allow bidders to thoroughly review the complex bid documents, the tender closed on February 5, 2026.

## TENDER EVALUATION

Bids were received from five proponents, with three submissions judged to be complete and valid, while two submissions did not warrant further evaluation as they failed to complete mandatory bid requirements (e.g., acknowledging review of all amendments). In Camera Appendix B summarizes the scoring evaluation of all bidders.

The bids were evaluated based on a four-step process:

- 1) Were all mandatory submissions received and compliant (a pass/fail evaluation),
- 2) A qualitative evaluation, including experience of each firm and its staff as well as comparable projects completed in the past (worth 20% of the total score),
- 3) An interview with all compliant bidders (worth 20% of the total score), and
- 4) A financial evaluation of the submitted bids (worth 60% of the total score).

Bid evaluations were completed independently by both LMCH Project Managers and TWD Technologies. Evaluations of the pricing components were completed on both a site-by-site basis as well as in aggregate to allow for consideration of award on a site-by-site basis and to assess the total qualitative value of awarding to one bidder. As detailed in Appendix B, Dielco Electric is the highest score based on technical submission, including comparable projects, company overview and team resumes.

Sites Bid	EEL Line Corporation	Dielco Electric	SGS Electrical
McNay	\$ 699,000.00	\$ 778,950.00	\$ 728,950.00
Berkshire	\$ 435,000.00	\$ 554,350.00	\$ 609,850.00
Baseline	\$ 280,999.00	\$ 310,950.00	\$ 300,450.00
Simcoe	\$ 657,000.00	\$ 762,950.00	\$ 800,750.00
345 Wharncliffe	\$ 497,000.00	\$ 488,950.00	\$ 354,180.00
349 Wharncliffe	\$ 747,000.00	\$ 778,950.00	\$ 678,600.00
Hale	\$ 479,000.00	\$ 481,950.00	\$ 470,080.00
Oxford	\$ 338,000.00	\$ 380,950.00	\$ 313,320.00
<b>COMBINED COST (EXCL HST)</b>	<b>\$ 4,132,999.00</b>	<b>\$ 4,538,000.00</b>	<b>\$ 4,256,180.00</b>

Pricing of each site varied by vendor, with significant variances of up to 40% between the pricing for each site by different vendors. With only 3 of 8 sites having consistent bidding from all three vendors (variance of 11% or lower). This variability raised the risk of change orders and project overages in at least 5 of the projects if awarded to the lowest bidder.

Based on this assessment, LMCH strongly recommends awarding the work to Dielco Electric to manage the project risk. Dielco Electric is familiar with LMCH sites, having worked on LMCH electrical infrastructure previously as well as having completed electrical line drawings for LMCH at some of the sites previously. Dielco has greater scale in resources than both EEL and SGS, and therefore, the risk of project delays is lower with Dielco Electric than with EEL and SGS. It is anticipated that there will be efficiencies in contract administration and on-site project audit and oversight by awarding to one proponent.

#### **FINANCIAL IMPACT:**

This recommendation encompasses project budget reallocations across all 8 sites – as detailed in Appendix A – which, when combined to support the construction costs at all 8 sites, requires a net reallocation of \$205,954 (rounded to \$210,000) from general contingency. It should also be noted that the pricing for each site contains a healthy contract contingency allowance. If these project allowances are not consumed by costs related to unknown conditions, then the unused amounts will be returned back to the general contingency following the completion of work.

**CONCLUSION**

Based on the bids received and comprehensive evaluation, it is recommended that LMCH award the construction contract to upgrade the electrical infrastructure at all eight sites to Dielco Electric.

**ATTACHMENTS:**

**Appendix A** – Multi-site Electrical Upgrades Projects’ Budget Table

**Appendix B** – Multi-site Electrical Upgrades Bid Scoring Sheet

<b>SUBMITTED BY:</b>	<b>STAFF CONTACTS:</b>
John Krill DIRECTOR, ASSET RENEWAL	Trevor Whittingham CONSTRUCTION PROJECT MANAGER
	Bill Leslie CONSTRUCTION PROJECT MANAGER

## Appendix A – Multi-site Electrical Upgrades Projects’ Budget Table

Project Number(s)	Building Address	Job Title	LMCH Project Lead	Approved Project Budget	Existing Commitments	Construction Cost (including eff tax)	Remaining Budget
2023-0002	241 Simcoe St.	Heating Panel Replacements,	Trevor Whittingham	\$ 840,000	\$ 82,036	\$ 776,378	\$ (18,414)
2024-0004		Generator Replacement					
2023-0003	345 Wharnccliffe St.	Main Electrical Room Equipment,	Bill Leslie	\$ 265,000	\$ 25,670	\$ 497,556	\$ (258,226)
2023-0004		Distribution Panel Replacement					
2023-0005	349 Wharnccliffe St.	Main Electrical Room Equipment Replacement	Bill Leslie	\$ 815,000	\$ 30,970	\$ 792,660	\$ (32,927)
2023-0006		Distribution Panel Replacement					
2023-0007		Generator Replacement					
2023-0008	632 Hale St.	Distribution Panel Replacements	Bill Leslie	\$ 70,000	\$ 39,829	\$ 490,432	\$ (460,261)
2023-0009	202 McNay St.	Main Electrical Room Equipment Replacements,	Bill Leslie	\$ 575,000	\$ 26,204	\$ 792,660	\$ (243,864)
2023-0010		Distribution Panel Replacement					
2023-0011	304 Oxford St	Distribution Panel Replacements	Bill Leslie	\$1,050,000	\$ 26,438	\$ 387,655	\$ 635,907
2026-0002		Full Electrical Room Replacements					
2024-0002	200 Berkshire Dr.	Generator Replacement,	Trevor Whittingham	\$ 800,000	\$ 28,606	\$ 564,107	\$ 207,287
2024-0003		Distribution Panel Replacement					
2024-0005	30 Baseline Rd.	Main Electrical Room Equipment, Distribution Panel Replacement	Trevor Whittingham	\$ 300,000	\$ 19,035	\$ 316,423	\$ (35,458)
<b>Total</b>				\$4,715,000	\$ 278,788	\$ 4,617,869	\$ (205,954)

*Budget shortfall of \$205,954 rounded up to \$210,000.*

**Board Report – Project 2025-CMHC-02 Budget  
STAFF REPORT 2026-11**

**TO:** LMCH Board of Directors

**FROM:** John Krill, Director Asset Renewal

**SUBJECT:** CMHC Projects 2025-CMHC-02 (A to H)

**DATE:** April 15, 2026

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**PURPOSE:**

This report is to request approval from the LMCH Board for an increase to the aggregate project budget for Air Source Heat Pump (ASHP) installations at eight (8) LMCH sites.

**RECOMMENDATION:**

That the LMCH Board APPROVE the following recommendations:

1. **RECEIVE** this report for information.
2. **APPROVE** an aggregate increase of \$100,000 to the budget for project(s) 2025-CMHC-02 (A to H).
3. **AUTHORIZE** LMCH staff to take the necessary steps to give effect to the above recommendations.

**BACKGROUND:**

LMCH is currently reviewing RFP bid submissions for ASHP installations at eight (8) LMCH sites within the CMHC program. The Pratus Group assessed LMCH's progress towards the CMHC requirement of 25% reduction in energy use and carbon emissions in 2025. The recommendation to add Air Source Heat Pumps to the CMHC project to improve building comfort and meet CMHC targets was included in the updated CMHC budget approved by the Board of Directors in February 2026.

The approved budget for this project is \$1.45m. The bids submitted are over the budgeted amount. Lead times for equipment orders and delivery range from 16 to 28 weeks. Increasing the project budget to \$1.55m allows LMCH to make a contract award expeditiously, since, based on the *LMCH Purchasing Policies and Guidelines*, as long as the proposed cost remains within the Board-approved project budget allocation, the Chief Executive Officer has the authority to enter into construction contracts without seeking further approval from the Board of Directors.



PREPARED and SUBMITTED BY:	STAFF CONTACT:
John Krill Director, Asset Renewal	Wendy Groves Construction and Project Manager (CMHC Program)

Draft Unaudited Financial Results – Q4 2025  
FAR- 2026-12

TO: LMCH Finance, Audit and Risk Management Committee

FROM: Paul Chisholm, Chief Executive Officer

SUBJECT: Draft Unaudited Financial Results – Q4 2025

DATE: March 11, 2026

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**PURPOSE:**

The purpose of this report is to share LMCH's Q4 2025 draft unaudited financial results for the fiscal year ending December 31, 2025.

**RECOMMENDATION:**

That Draft Unaudited Financial Results – Q4 2025 be RECEIVED for information.

**REASONS FOR RECOMMENDATIONS:**

The following report contains the draft unaudited financial results for LMCH as of December 31, 2025. This is the same report being provided to our auditors, KPMG to complete our 2025 year-end audit.

The full-year financial operations resulted in a very small operating surplus of \$8,250.

This near-balanced budget was achieved through work to continue to strengthen subsidy administration and rental arrears, resulting in an improvement in rental revenues. Cost pressures in property tax, insurance, maintenance, and other areas were offset by the improved rental revenue and delaying the insourcing of the cleaning services by six months.

**REVENUE**

Total revenue for the full fiscal year shows a favourable variance of approximately \$1.3 million (4%) compared to the budget.

**Rent Revenue:** Rent revenues are higher than the original 2025 budget by approximately \$744k to date, and are mainly due to a significant reduction in Rent Forgiveness (included in the Rent Revenue line) of approximately \$617k. This is a result of improved management of the annual subsidy renewal process by staff.

**Bad Debt Write-Offs:** There has been a significant reduction in write-offs in 2025 compared to prior years. This favourable variance of \$457k is due mainly to improved timelines at the Landlord and Tenant Board and more successful collection efforts for tenant arrears management.

**Interest Revenue:** While interest rates were much lower when the budget was set in late 2023, higher interest rates in the past year have resulted in a \$124k favourable variance.

## EXPENDITURES

Total expenditures for the full fiscal year of 2025 show a variance of -\$787k (2.4%) compared to the original budget.

**Salaries, Wages and Benefits:** Results show a favourable balance of approximately \$625k, mainly due to vacancies in various positions for the first nine months of 2025. This includes the delayed implementation of the project to bring custodial services in-house to assess the impact of property tax increases on operating budgets.

### **Maintenance, Materials, and Services:**

Total expenditures in this area were \$1.1 million over budget. This increase in expenditures is due to several factors.

- a delay in the implementation of the internal staffing of custodial services that was originally planned for June 1<sup>st</sup>. Implementation of this project (including the costs for upfront purchase of supplies and equipment and the cancellation of third-party contracts) will be incurred in the last four months of the year, resulting in higher costs in this period than originally planned under the cleaning budget line.
- Pest Control expenses remain higher than budgeted with the addition of a second service provider in 2025 and reconciling outstanding invoices at the end of the contract.
- Snow removal expenses remain above budget due to increased winter services in 2025. Under the current per-push service model.
- Additional costs to achieve mandatory compliance with recent fire code are changes included in the Life Safety Systems budget line, resulting in a \$120k deficit in this area.
- LMCH continues to experience above-budgeted expenses in external vendors in electrical, plumbing, HVAC, etc. RFP's are being drafted to standardize costs across these core service areas.

**Utilities:** Electrical costs are above budget. Further analysis is underway to reassess the budget based on the November 1, 2025, rate increases and historical usage patterns across sites.

**Administration:** Administrative expenses are over budget in a number of areas, including telecom, travel expenses, and similar. Office construction and set-up costs, as well as IT hardware refresh, are driving larger budget overages.

## CONCLUSION

LMCH is continuing a comprehensive budget re-forecast for 2026 and 2027 based on results over the past 2 years, and this will be reflected in the revised 2026 operating budget after Q2 2026.

## Appendix A – Draft Unaudited Financial Results – Q4 2025

### SIGNATURE:

PREPARED and SUBMITTED BY:
PAUL CHISHOLM CHIEF EXECUTIVE OFFICER

**London-Middlesex Community Housing 2025 Operational Financials - Draft Unaudited Q4 2025**

	For the Twelve Months Ended DEC 31, 2025			Audited Actuals 2024	2024 Actuals vs. 2025 Unaudited
	Actuals	Budget	Variance		
<b>REVENUE</b>					
RENT REVENUES	15,006,416	14,262,402	744,014	14,235,512	770,903
TENANT RECOVERIES	73,090	141,624	(68,534)	100,410	(27,320)
NET BAD DEBT WRITE OFF	(383,979)	(841,368)	457,389	(563,648)	179,669
ANTENNA LICENSES	170,045	173,190	(3,145)	169,233	812
INTEREST	154,804	30,000	124,804	202,545	(47,741)
SUNDRY & OTHER REVENUE	267,927	218,675	49,252	300,217	(32,290)
MUNICIPAL BASE FUNDING	18,857,064	18,857,064	0	16,781,288	2,075,776
<b>TOTAL REVENUE</b>	<b>34,145,367</b>	<b>32,841,587</b>	<b>1,303,780</b>	<b>31,225,558</b>	<b>2,919,809</b>
<b>OPERATING EXPENDITURES</b>					
<b>SALARIES, WAGES &amp; BENEFITS</b>	<b>10,015,218</b>	<b>10,640,324</b>	<b>625,106</b>	8,614,607	1,400,611
<b>TENANT SERVICES</b>	<b>860,272</b>	<b>971,311</b>	<b>111,039</b>	886,400	(26,128)
<b>MAINTENANCE, MATERIALS &amp; SERVICES</b>					
ROOFING	31,011	46,715	15,704	37,551	(6,540)
BUILDING GENERAL	1,387,456	1,425,704	38,248	1,284,843	102,614
CLEANING	903,220	625,550	(277,670)	1,001,921	(98,702)
PEST CONTROL	1,140,709	773,066	(367,643)	1,037,348	103,361
ELEVATORS	130,102	128,547	(1,555)	230,694	(100,592)
ELECTRICAL	263,178	160,684	(102,494)	210,083	53,095
EQUIPMENT	61,465	42,849	(18,616)	23,835	37,630
LANDSCAPING & PARKING LOT MTCE.	344,859	237,166	(107,693)	290,035	54,824
MOLD	1,029	66,279	65,250	28,537	(27,508)
SNOW REMOVAL	1,199,997	868,000	(331,997)	715,921	484,076
LIFE SAFETY SYSTEMS	441,888	321,368	(120,520)	317,460	124,428
HEATING & VENTILATION	287,127	221,371	(65,756)	271,046	16,080
PLUMBING	563,966	580,596	16,630	639,393	(75,427)
PAINTING	361,118	400,654	39,536	503,699	(142,581)
VANDALISM	27,624	74,731	47,107	39,916	(12,292)
WASTE REMOVAL	417,997	428,490	10,493	396,955	21,042
SUNDRY MATERIALS & SERVICES	2,497	16,068	13,571	5,930	(3,433)
	<b>7,565,243</b>	<b>6,417,838</b>	<b>(1,147,405)</b>	<b>7,035,169</b>	<b>530,074</b>
<b>UTILITIES</b>					
ELECTRICITY	2,032,282	1,730,939	(301,343)	1,838,361	193,921
WATER HEATER RENTAL	217,438	260,270	42,832	185,770	31,668
WATER	1,724,675	1,735,182	10,507	1,682,376	42,299
NATURAL GAS	1,261,685	1,380,000	118,315	1,262,861	(1,176)
	<b>5,236,080</b>	<b>5,106,391</b>	<b>(129,689)</b>	<b>4,969,368</b>	<b>266,712</b>
<b>PROPERTY</b>					
INSURANCE	1,299,885	1,300,000	115	1,314,852	(14,967)
MUNICIPAL TAXES	6,189,255	6,269,382	80,127	5,842,854	346,401
	<b>7,489,140</b>	<b>7,569,382</b>	<b>80,242</b>	<b>7,157,706</b>	<b>331,434</b>
<b>ADMINISTRATION</b>					
<b>CORPORATE</b>					
FINANCE	126,514	99,800	(26,714)	118,777	7,738
HR	220,818	243,315	22,497	181,449	39,369
LEGAL & CONSULTING	484,377	470,000	(14,377)	367,652	116,725
OFFICE	622,533	516,292	(106,241)	485,937	136,596
OTHER	84,366	74,000	(10,366)	67,009	17,357
	<b>1,538,609</b>	<b>1,403,407</b>	<b>(135,202)</b>	<b>1,220,825</b>	<b>317,785</b>
<b>TRANSPORTATION &amp; COMMUNICATION</b>					
TELECOM	256,572	243,500	(13,072)	358,560	(101,988)
TRAVEL & TRANSPORTATION	136,379	119,278	(17,101)	150,736	(14,357)
OTHER	22,313	8,000	(14,313)	8,285	14,028
	<b>415,264</b>	<b>370,778</b>	<b>(44,486)</b>	<b>517,580</b>	<b>(102,316)</b>
<b>SUPPLIES &amp; EQUIPMENT</b>					
EQUIPMENT	70,676	46,303	(24,373)	28,787	41,889
OTHER	673,837	551,318	(122,519)	570,741	103,096
	<b>744,513</b>	<b>597,621</b>	<b>(146,892)</b>	<b>599,529</b>	<b>144,985</b>
<b>TOTAL ADMINISTRATION</b>	<b>2,698,386</b>	<b>2,371,806</b>	<b>(326,580)</b>	<b>2,337,933</b>	<b>360,453</b>
<b>TOTAL OPERATING EXPENDITURES</b>	<b>33,864,339</b>	<b>33,077,052</b>	<b>(787,287)</b>	<b>31,001,183</b>	<b>2,863,156</b>
EXTRAORDINARY LOSS	272,779	100,000	(172,778)	198,224	74,555
<b>NET SURPLUS (DEFICIT)</b>	<b>8,250</b>	<b>(335,465)</b>	<b>343,714</b>	<b>26,156</b>	<b>(17,906)</b>

**Notes:**

- 1 Rent Revenues:** Improved collection results in current year (re: rent forgiveness), continuing a trend started in 2024.
- 2 Bad Debt Write-Off:** Improved collection results in last couple of years, and will be similar balance to 2024.
- 3 Interest:** Current interest rates are higher than originally projected.
- 4 Salaries, wages and benefits:** Savings as a result of temporarily vacant positions during the year, and a delay in implementation of Custodial staffing.
- 5 Cleaning:** Overbudget due to delayed implementation of contracting in cleaners.
- 6 Pest control:** Overbudget due to payment disputes resolution from prior years and increased costs to support improved service outcomes in 2025.
- 7 Snow Removal:** Overbudget due to higher number of snow/salting events in back to back years.
- 8 Life Safety Systems:** Fire Code updated requiring additional devices across the LMCH portfolio.
- 9 Electricity:** Overbudget due to increased rates over the past 2 years, since the expense was originally projected in 2023.
- 10 Office:** Includes renovation and office set up costs to improve community offices.
- 11 Supplies and Equipment Other:** Hardware refresh project
- 12 Extraordinary loss:** This represents portion of damage claims (e.g. fire, flood) under \$5,000. Costs over and above that are reimbursed.

**Annual OSH& WVHSHP Report  
STAFF REPORT 2026-12**

**TO:** LMCH Board of Directors

**FROM:** Dirk Volschenk, Manager of Human Resources

**SUBJECT:** Annual Review of Occupational Health and Safety – and Workplace Violence, Harassment, and Sexual Harassment Policy

**DAT:** April 9, 2026

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**PURPOSE:**

To receive and approve the *Health and Safety Policy* and *Workplace Violence, Harassment, and Sexual Harassment Policy* for Employees, which has been reviewed and updated to ensure compliance with our obligations for annual review under the *Occupational Health and Safety Act*.

**RECOMMENDATION:**

That the LMCH Board of Directors **APPROVE** the recommended changes or updates to the attached policies.

**BACKGROUND:**

The Occupational Health and Safety Act requires all Employers in Ontario to prepare and maintain a written policy in respect of workplace violence and harassment, and review at least annually. The included was last reviewed on April 17<sup>th</sup>, 2025. As part of the 2026 Annual Review, the Committee reviewed recent legislative updates in the Working for Workers Seven Act and none of the recent updates to the Occupational Health and Safety Act warranted updates to the current policies.

As part of the ongoing commitment to supporting mental health and psychological safety, the Health and Safety Policy has been updated to reflect this commitment in Section 1.0 Purpose. This is the only update made to the Policy, and no other updates were identified.

**APPENDICES:**

- a. 2026 Draft Policy - Health and Safety
- b. 2026 Draft Policy – Workplace Violence, Harassment, and Sexual Harassment.

PREPARED and SUBMITTED BY:	REVIEWED and CONCURRED BY:
Dirk Volschenk Manager, Human Resources	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER



RELATED DOCUMENTATION

Legislation	<ul style="list-style-type: none"> <li>Occupational Health and Safety Act, 1990, including Bills 168 &amp; 132 <a href="http://www.labour.gov.on.ca/english/hs/laws/regulations.php">www.labour.gov.on.ca/english/hs/laws/regulations.php</a></li> <li>Human Rights Code <a href="http://www.ohrc.on.ca">www.ohrc.on.ca</a></li> </ul>
Collective Agreement	Articles 3, 4
Forms	<ul style="list-style-type: none"> <li>Appendix A: Workplace Violence and Harassment Incident Reporting Form</li> <li>Appendix B: Workplace Violence and Harassment Incident Form – Manager Report</li> <li>Staff Occurrence Reporting Program - <a href="https://forms.monday.com/forms/147d4f2aa201763204af479501a49b6e">https://forms.monday.com/forms/147d4f2aa201763204af479501a49b6e</a></li> </ul>
Policies	<ul style="list-style-type: none"> <li>Code of Conduct Policy</li> <li>Health and Safety Policy</li> </ul>
Other Resources	<ul style="list-style-type: none"> <li>Tenant Code of Conduct</li> <li>Employee Assistance Program (EAP)</li> <li>London Abused Women Centre <a href="https://www.lawc.on.ca/">https://www.lawc.on.ca/</a></li> <li>Sexual Assault Centre of London/Anova <a href="http://www.anovafuture.org/">http://www.anovafuture.org/</a></li> <li>Victim Services, London Police Services <a href="https://www.londonpolice.ca/Modules/contact/search.aspx?s=jFuV9WkBBXGefKkbDlsz3geQuAleQuAl">https://www.londonpolice.ca/Modules/contact/search.aspx?s=jFuV9WkBBXGefKkbDlsz3geQuAleQuAl</a></li> <li>Canadian Mental Health Association (CMHA) <a href="https://cmha.ca/">https://cmha.ca/</a></li> </ul>

**1.0 PURPOSE**

London & Middlesex Community Housing (LMCH) is committed to building and maintaining a safe, productive, and healthy working environment for its employees, free from violence and harassment. LMCH will take all reasonable measures to ensure



job candidates, employees, and managers are not subject to any form of violence or harassment, sexual harassment, bullying, discrimination, or any other unwelcomed behaviour. This commitment applies to all areas of business, including training, performance, assessment, promotions, transfers, layoffs, remuneration, and all other employment practices and working conditions.

## SCOPE

This policy applies to everyone providing service at LMCH including:

- Board Members
- Management
- Bargaining-Excluded Staff
- Unionized Employees
- Temporary Staff
- Volunteers including Students
- Contractors

Acts of violence or harassment against or by any employee will not be condoned or tolerated by LMCH. This policy outlines LMCH's violence and harassment program, including how incidents of violence and harassment will be handled and investigated.

## 2.0 DEFINITIONS

In accordance with the *Occupational Health and Safety Act* and the *Ontario Human Rights Code*, the following definitions apply to our Workplace Harassment and Violence Program.

Complainant: A person who has made a complaint about another individual who they believe committed an act of violence or harassment against them.

Respondent: A person whom another individual has accused of committing an act of violence or harassment.

Workplace harassment: engaging in a course of vexatious comment or conduct against a worker in a workplace, including virtually through the use of information and communications technology, that is known or ought reasonably to be known to be unwelcome.



Workplace sexual harassment: (a) engaging in a course of vexatious comment or conduct against a worker in a workplace, including virtually through the use of information and communications technology, because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or

(b) making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the worker and the person knows or ought reasonably to know that the solicitation or advance is unwelcome;

Workplace violence: The exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker; an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker; or a statement or behaviour that is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

Bullying: Engaging in actual or perceived acts or verbal comments that could mentally hurt or isolate a person in the workplace.

- Bullying can involve negative physical contact.
- Bullying usually involves repeated incidents or a pattern of behaviour that is intended to intimidate, offend, degrade or humiliate a particular person or group of people.
- It has also been described as the assertion of power through aggression.
- Bullying can be face-to-face or cyber-bullying.

Discrimination: Engaging in differential treatment of an individual or group of individuals which is based, in whole or in part, on one or more than one of the prohibited grounds of discrimination and which has an adverse impact on the individual or group of individuals. Discrimination may be direct (from an individual or group of individuals) or systemic (through systems and attitudes perpetuated within organizations).

Domestic Violence: Domestic violence refers to violent or abusive acts committed by one family or household member against another, such as child, elder, or spousal abuse. Domestic violence can refer to physical harm, or behavior that is controlling, coercive, or threatening. It can occur in any kind of intimate relationship -- married or unmarried,



living together, or simply dating. Signs of Domestic Violence in the workplace may include, but are not limited to:

- Repeated phone calls, emails and/or social media messages to the employee at work
- Stalking
- Unexpected person showing up at the workplace and asking personal questions about the employee to other co-workers
- Verbal Abuse
- Employee exhibiting different behaviors than usual, including being more withdrawn, isolated, appearing uncomfortable while on the phone etc.

Workplace:

- At the workplace, including all LMCH facilities, work sites, and vehicles;
- Any land, premises, locations or things at, upon, in or near where the business of LMCH is being conducted;
- At employment-related social functions;
- In the course of work assignments outside the workplace;
- During work-related travel;
- Over the telephone, if the conversation is work-related; or
- LMCH-related activities, including Corporation-sanctioned social functions, or business performed at any other location away from LMCH, during or outside of normal working hours.
- Elsewhere, if the person is there as a result of work-related responsibilities or a work-related relationship.

Bullying and harassing behaviour does not include:

- Expressing differences of opinion.
- Offering constructive feedback, guidance, or advice about work-related behaviour.
- Reasonable action taken by an employer or supervisor relating to the leadership and direction of employees or the place of employment (e.g., managing a worker's performance, taking reasonable disciplinary actions, assigning work).



### 3.0 PROCESS

This policy has been developed in consultation with the LMCH Joint Health & Safety Committee (JHSC). It will be reviewed annually, or more frequently if necessary to ensure that it accurately represents the LMCH prevention program.

LMCH will provide all employees with appropriate training and information regarding LMCH's violence and harassment prevention practices and procedures. Employees are responsible for adhering to this policy, and should report every incident of violence and/or harassment immediately to management. This includes any incidents that have been witnessed, experienced by, or reported to an employee.

For the purposes of this policy, workplace harassment or violence can occur:

- At the workplace, including all LMCH facilities, work sites, and vehicles;
- Any land, premises, locations or things at, upon, in or near where the business of LMCH is being conducted;
- At employment-related social functions;
- In the course of work assignments outside the workplace;
- During work-related travel;
- Over the telephone, email or social media, if the communication is work-related;
- or
- LMCH-related activities, including Corporation-sanctioned social functions, or business performed at any other location away from LMCH, during or outside of normal working hours.
- Elsewhere, if the person is there as a result of work-related responsibilities or a work-related relationship.

Reasonable action taken by an employer or supervisor relating to the management and direction of employees or the workplace that helps manage, guide, or direct employees or the workplace and appropriate employee performance reviews, counselling, or discipline by a manager does not constitute harassment.

Reasonable management actions would be part of a manager's or supervisor's normal work function, and could include changes in work assignments, scheduling, job assessment and evaluation, workplace inspections, implementation of health and safety measures, and disciplinary action.



#### **4.0 PREVENTION**

Preventing violence, harassment, bullying, and sexual harassment is everyone's responsibility. All employees or person's acting on behalf of LMCH is expected to:

- Set a good example.
- Act against workplace violence/harassment.
- Refrain from comments and/or behaviour that is considered violent/harassment in nature.
- Express their disapproval if they encounter or witness violent or harassing behaviour in the workplace.

#### **5.0 RESPONSIBILITIES**

LMCH will not tolerate any level of workplace violence or harassment directed at employees, between employees, by tenants or members of the public towards employees, or by an employee towards a member of the public or a tenant. We take every reasonable precaution to prevent or minimize violence and harassment in the workplace. Any employee, whether knowingly or not, who fails to follow any rule outlined, will be subjected to the disciplinary process, up to and including termination of their employment and subject to the provisions of the Collective Agreement (if applicable) or any other relevant policy or legislation.

##### **LMCH shall:**

- Provide information, instruction, and supervision to employees to protect their health and safety as it relates to workplace violence and harassment;
- Take every reasonable precaution to protect employees from workplace violence and harassment;
- Review and update this policy at least annually, and develop and maintain a workplace violence and harassment program to eliminate identified hazards from the workplace;
- Post a copy of this policy in a conspicuous location in the workplace;
- Ensure supervisors/managers are competent in dealing with workplace violence and harassment matters;
- Investigate all incidents and complaints for workplace violence and harassment; and
- Assist the joint health and safety committee, in carrying out functions related to workplace violence and harassment, and provide them with copies of any reports,



investigations, or documents related to workplace violence and harassment.

**Employees shall:**

- Not engage in any level of workplace violence or harassment.
- Work in compliance with all applicable legislation and all policies and procedures related to workplace violence and harassment prevention;
- Report all instances of workplace violence and harassment they become aware of to their supervisor or management;

**Supervisors/Managers shall:**

- Ensuring their behaviour always reflects this policy.
- Advise employees of all potential or real hazards and dangers they are aware of involving workplace violence and harassment;
- Provide employees with written instruction when necessary to prevent workplace violence and harassment; and
- Take every reasonable precaution to protect employees from workplace violence and harassment.

## **6.0 Violence Risk Assessment**

LMCH will conduct a risk assessment of the work environment to identify potential risks that could affect the organization and the health and safety of employees and will institute measures to eliminate or control any identified risks to employee safety.

The following factors will be considered during the assessment:

- Past incidents of violence;
- Violence that is known to occur in similar workplaces;
- The circumstances in which work takes place, including the type of work and conditions of work;
- The interactions that occur in the course of performing work; and
- The physical location and layout of the workplace.

The risk assessment may include reviews of records, security reports, employee incident reports, staff perception surveys, health and safety inspection reports, first aid records, or other related records. Areas that will be considered and may contribute to risk of violence include but are not limited to contact with the public, exchange of money, and working alone or at night.



LMCH will provide the JHSC with a written copy of the assessment and advise of the results. The JHSC has various powers, including monitoring health and safety in the workplace, identifying hazards in the workplace, and recommending health and safety improvements where and when required.

LMCH will disclose information to employees who are likely to encounter a known person with a history of violence in the performance of their job duties, or if there is a potential risk of workplace violence as a result of interactions with the person with a history of violence. However, LMCH will only disclose personal information that is deemed reasonably necessary to protect the worker from harm.

## **7.0 Workplace Violence and Harassment Program**

### Control Measures and Procedures

The following measures have been implemented to eliminate or reduce the identified risks of workplace violence:

- Access control measures at buildings and offices
- Emergency buttons at front counter
- Trespassing procedure
- Master Trespass List
- Non-Tenant Safety Alerts
- Unit Safety Alerts
- Staff Occurrence Reporting Procedure
- Tenant Code of Conduct
- Safety Line Lone Worker application
- Email alerts – active emergency situations
- Third party Security Guards
- Community Safety Unit presence and interventions
- Non violent crisis intervention training
- Body-Worn Cameras
- CCTV system

### Reporting Incidents of Workplace Violence and Harassment

An employee who believes they have been subject to violence or harassment should submit a complaint to their immediate Manager/designate and report the incident



through the Staff Occurrence Reporting program. The complaint should be made as soon as possible following the incident and must include the following information (See Appendix A and Appendix B):

- The date and time of the incident;
- The name of any persons involved in the incident;
- The name of any persons who witnessed the incident; and
- A thorough description of what occurred.

An employee who believes they have been subject to harassment may also choose to confront the harasser without filing a formal complaint. They can confront the harasser directly or through writing, detailing the unwelcome behaviour and requesting it to stop.

If the alleged harasser is the employee's manager, or in a position of power, the complainant is welcome to file a complaint with Human Resources. If the alleged harasser is the employee's manager and working in Human Resources, the complainant is welcome to file a complaint with a Director.

#### Immediate Assistance Procedures

The following measures and procedures should be followed when an incident of violence has occurred or is likely to occur and immediate assistance is required:

- Get yourself to a safe space if possible
- Immediately call emergency services by dialing 911
- Inform immediate supervisor
- Use other resources available (example: emergency phone line, Safety Line app, panic button, contact Community Safety Unit)

#### Investigation Procedures

Once a complaint has been received, LMCH will complete a thorough investigation as soon as possible. The organization will ensure that, where practicable, the investigation is completed within 90 days of the complaint being filed.

The investigation will include:

- Informing the respondent of the complaint and inviting them to reply in writing;
- Interviewing the complainant and any persons involved in the incident;



- Identifying and interviewing any witnesses; and,
- Obtaining statements from all parties involved.

All of the above information will be documented and used to determine whether an incident of violence or harassment occurred. If necessary, LMCH may employ outside assistance or request the use of legal counsel.

A copy of the complaint, detailing the complainant's allegations will be provided to the respondent, who will be invited to reply in writing to the complainant's allegations. The reply will be made known to the complainant before the case proceeds.

LMCH will take all measures to prevent any disclosure of the incident and the identities of the parties involved, unless the disclosure is necessary for the investigation, for taking corrective action, or required by law.

#### Results of Investigation

Upon completion of an investigation, LMCH will provide both the complainant and respondent a written summary of the findings of the investigation and may include any information regarding corrective action that has been or will be taken as a result of the investigation. This written notification will be provided within ten working days of the investigation being completed, and will not include the investigation report unless required by law.

#### Control Measures

Where LMCH determines that violence or harassment has occurred, control measures will be implemented to eliminate or control the risk of violence or harassment to a worker as a result of the investigation. These control measures will be determined on a case-by-case basis, depending on the situation investigated. Any control measure enacted will be communicated to the complainant and respondent, as well as any other employees the measure affects.

#### Disciplinary Measures

Any disciplinary action will be determined by the appropriate manager, in coordination with Human Resources, and will be proportional to the seriousness of the behaviour or action involved in the incident.



If LMCH determines that an employee has been involved in an incident of violence or harassment towards another employee, immediate disciplinary action will be taken, up to and including immediate dismissal.

#### Domestic Violence

If LMCH becomes aware that an employee is likely to be exposed to Domestic Violence in the workplace, LMCH will take every precaution reasonable in the circumstances for the protection of the worker, which may include the development of a Personal Safety Plan

#### Recommendations to Employees

LMCH will provide appropriate assistance to any employee who has experienced violence or harassment. LMCH recommends that a worker who has been harmed as a result of an incident of violence at the workplace consult their health care provider for treatment or referral for post-incident counselling.

LMCH provides an EAP to all staff. Information is posted in the offices and is available through Managers and Human Resources.

#### The Right to Refuse Unsafe Work

As per the Occupational Health & Safety Act, employees have the right to refuse work that they believe is unsafe to themselves or another worker. A worker who believes that they are endangered by workplace violence may also refuse work. Upon refusing to work, the employee must report the circumstance of the refusal to their manager. An investigation will follow in the presence of a JHSC representative.

#### Fraudulent, Malicious, or Vexatious Complaints

It is a violation of this policy for anyone to knowingly make a fraudulent, malicious, or vexatious complaint, or to provide false information about a complaint. Unfounded or frivolous allegations may cause both the respondent and LMCH significant damage. Any employee who knowingly makes a false allegation related to violence or harassment will be subject to immediate disciplinary action, up to and including termination of employment.



### Recordkeeping

LMCH will ensure that appropriate records of complaints and investigations relating to incidents of violence and workplace harassment are kept, including:

- A copy of the complaint or details about the incident;
- Any records related to the investigation, including notes;
- A copy of the investigation report (if applicable);
- A summary of the investigation results, including the reports provided to the complainant and respondent; and
- A copy of any corrective action taken to address the complaint or incident.

### Confidentiality

LMCH will not disclose the name of a complainant or a respondent or the circumstances related to the complaint to any person except where disclosure is necessary to investigate the complaint or take corrective action with respect to the complaint, or required by law. LMCH will only disclose the minimum amount of personal information or details necessary for these purposes.

All records of harassment, and subsequent investigations, are considered confidential and will not be disclosed to anyone except to the extent required by law. LMCH will do everything reasonably possible to protect the privacy of any individuals involved and to ensure that complainants and respondents are treated fairly and respectfully.

### Policy Review

In accordance with the *Occupational Health and Safety Act*, this policy will be posted in a conspicuous place in the workplace and reviewed annually.

## 7.0 DOCUMENT CONTROL

Date Drafted	<ul style="list-style-type: none"> <li>• January 2017</li> </ul>
Date Approved	<ul style="list-style-type: none"> <li>• Update approved by Board of Directors March 16, 2023</li> <li>• Update approved by Board of Directors March 21, 2024</li> <li>• Updated approved by Board of Directors April 17<sup>th</sup>, 2025</li> </ul>



Date Revised	<ul style="list-style-type: none"><li>• March 19<sup>th</sup>, 2026</li></ul>
To be reviewed	<ul style="list-style-type: none"><li>• Review and update every twelve months (in consultation with the JHSC)</li><li>• General review by all employees every twelve months</li></ul>
Inquiries to Policy Owner	<ul style="list-style-type: none"><li>• Human Resources</li></ul>



**Appendix A: Workplace Violence and Harassment Incident Reporting Form**

Complete this form if you are the Complainant of OR witness to an alleged incident of workplace violence, workplace harassment, or workplace domestic violence incident. Print or photocopy additional copies as needed. Sign and forward this report to your supervisor and/or HR.

Name:	Date and time of Incident:	Date Incident Reported:
<input type="checkbox"/> Complainant <input type="checkbox"/> Witness	Address/location of incident:	
Name of alleged Respondent:		Your Relationship to the Respondent:
Respondent's Description		
Height:		
Weight:		
Hair Colour:		
Eye Colour:		
Race:		
Distinguishing Features:		
Check the box describing the incident:		
<input type="checkbox"/> Threatened by email or other written communication	<input type="checkbox"/> Assault <input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Robbery <input type="checkbox"/> Stalked
<input type="checkbox"/> Threatened Verbally	<input type="checkbox"/> Assaulted with Weapon	<input type="checkbox"/> Bomb Threat
<input type="checkbox"/> Threatened with a Weapon	<input type="checkbox"/> Arson	<input type="checkbox"/> Mischief to Property
<input type="checkbox"/> Workplace Harassment	<input type="checkbox"/> Workplace Bullying	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Other (please specify):		



Describe the incident in detail. Include what happened, where, who was involved, other witnesses, what you heard, saw, etc.

Please provide the names and contact information, if known, of any additional witnesses; the name of any persons involved in the incident:

Signature:

Date:

Person Receiving this Report:

Date:



### Appendix B: Workplace Violence and Harassment Incident form – Manager Report

As soon as is reasonably possible, Managers of employees or an area impacted by workplace violence should document incidents by completing and filing this report form to the Human Resources Manager. Not all questions may be applicable to each particular circumstance reported.

SECTION 1	
Date of Incident:	Date of Report:
Location of Incident, be specific (include map or sketch if necessary):	

SECTION 2	
Complainant's Information	Complainant's Contact Information
First Name:	Contact Phone Number(s):
Last Name:	
Home Address:	Email Address(es):
City:	
Postal Code:	
Job Title:	
Manager's Name:	
Time Manager notified:	Date Manager Notified:



SECTION 3				
Respondent's Information		Respondent's Contact Information		Respondent's Description
First Name:		Work Telephone Number:	Home Telephone Number:	
Last Name:				
Home Address:		Cell Telephone #	Email Address:	
City:	Postal Code	Respondent's Gender:		
Work Location:				
Relationship of Respondent to Complainant ( <i>if any</i> ):		Use of Weapons ( <i>if any</i> ):		
<input type="checkbox"/> Co-worker <input type="checkbox"/> Family <input type="checkbox"/> Supervisor <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Tenant <input type="checkbox"/> Other ( <i>please describe</i> )		Did the Respondent use a weapon? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		If yes, describe:		
		Describe how it was used:		

SECTION 4		
<input type="checkbox"/> Threatened by email or other written communication	<input type="checkbox"/> Assault	<input type="checkbox"/> Robbery
<input type="checkbox"/> Threatened Verbally	<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Stalked
<input type="checkbox"/> Threatened with a Weapon	<input type="checkbox"/> Assaulted with Weapon	<input type="checkbox"/> Bomb Threat
<input type="checkbox"/> Workplace Harassment	<input type="checkbox"/> Arson	<input type="checkbox"/> Mischief to Property
<input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Workplace Bullying	<input type="checkbox"/> Domestic Violence





**SECTION 8**

Measures taken to prevent recurrence:

**SECTION 9**

Is the Complainant presenting any concerns that have not been addressed?

**SECTION 10**

Current status of Respondent, if known (arrested, discipline, transferred, etc.):



SECTION 11	
Manager's Information	Contact Information
First Name:	Contact Phone Number(s):
Last Name:	
Home Address:	Email Address(es):
Time Manager notified:	
Date notified:	
Relationship to Complainant or Respondent, if any:	
_____	_____
Name of person completing this report	Date report completed
_____	
Signature	



## RELATED DOCUMENTATION

Legislation	<ul style="list-style-type: none"><li>Occupational Health and Safety Act, 1990 <a href="http://www.labour.gov.on.ca/english/hs/laws/regulations.php">www.labour.gov.on.ca/english/hs/laws/regulations.php</a></li><li>Human Rights Code <a href="http://www.ohrc.on.ca">www.ohrc.on.ca</a></li></ul>
Collective Agreement	Article 31.04
Forms	<ul style="list-style-type: none"><li>N/A</li></ul>
Policies	<ul style="list-style-type: none"><li>Code of Conduct Policy</li><li>Workplace Violence, Harassment, and Sexual Harassment Policy</li><li>Health &amp; Safety Orientation Manual</li></ul>
Other Resources	<ul style="list-style-type: none"><li>Employee Assistance Program (EAP)</li></ul>

### 1.0 PURPOSE

London & Middlesex Community Housing (LMCH) acknowledges it has a statutory duty to take all reasonable precautions to protect employees, contractors, volunteers, visitors, and all other individuals onsite. Protecting employees from injury or occupational disease from accidents or incidents is a continuing objective. We will make every effort to provide a safe and healthy work environment for all staff. We believe all accidents are preventable and active participation at all levels will help ensure accidents are avoided. Supervisors and workers must refrain from any actions or activities that could jeopardize the health and safety of others and must work to reduce the risk of injury.

At LMCH, we are committed to fostering a safe, healthy, and supportive workplace for all employees, contractors, volunteers, and visitors. We will continue to, implement, and enforce comprehensive policies and procedures that promote and maintain a safe, respectful, and health-conscious work environment.

We recognize that a safe workplace includes not only physical safety but also the mental and psychological well-being of our workforce. LMCH will promote a positive working environment where management and employees work collaboratively to achieve organizational goals while supporting the physical and mental health of all individuals.



LMCH is committed to fostering psychological well-being through proactive measures that prevent harm to worker mental health. This includes the implementation of appropriate policies, programs, and services that promote mental health and resilience in the workplace.

We understand that safety is essential to both the well-being and productivity of our employees. LMCH will act in full compliance with all applicable workplace health and safety legislation and continuously strive to identify, assess, and reduce risks associated with injury, illness, and psychological harm.

This policy outlines the responsibilities of all parties, management, staff, contractors, and visitors—in upholding a workplace culture of health, safety, and respect.

This policy applies to everyone providing service at LMCH including:

- Board Members
- Management
- Bargaining-Excluded Staff
- Unionized Employees
- Temporary Staff
- Volunteers including Students
- Contractors

## 2.0 SCOPE

### Guidelines

#### Communication

LMCH encourages open communication on health and safety issues. Open communication is essential to providing an accident-free and productive work environment.

- Employees who voice or identify a health and safety concern will not be subject to reprisal or retaliation.
- Health and safety concerns will be reviewed by Human Resources. The Joint Health & Safety Committee (JHSC) or designate will initiate an investigation on each reported or potential hazard.



- Employees should inform their supervisor of any matter they perceive to be an actual or potential workplace hazard.
- Communication can be written or verbal.

### 3.0 RESPONSIBILITIES

#### Employer and HR will:

- Instruct, inform, and supervise workers to protect their health and safety.
- Assist in a medical emergency by providing any information, including confidential business information, to a qualified medical practitioner and other prescribed persons for the purpose of diagnosis or treatment.
- Appoint competent persons as supervisors. "Competent person" is a defined term under the OHSA as a person who:
  - is qualified because of knowledge, training, and experience to organize the work and its performance,
  - is familiar with the Act and the regulations that apply to the work, and
  - has knowledge of any potential or actual danger to health or safety in the workplace.
- Inform a worker, or a person in authority over a worker, about any hazard in the work and train that worker in the handling, storage, use, disposal, and transport of any equipment, substances, tools, material, etc.
- Help the JHSC and health and safety representatives to carry out their functions.
- Not employ or permit persons under the prescribed age for the employer's workplace, to be in or near the workplace.
- Take every precaution reasonable in the circumstances for the protection of a worker.
- Post the following documents in the workplace (either in a physical location or virtually):
  - A copy of the OHSA
  - Health and Safety at Work – Prevention Starts Here MLITSD poster.
  - Workplace health and safety policy
  - Workplace violence and harassment policy
  - Names and work locations of joint health and safety (JHSC) members
  - Orders from an MLITSD inspector and notice of compliance to an MLITSD order (if applicable)



- Results of monitoring of airborne concentrations of a designated substance and worker exposure to airborne concentrations of a designated substance (if applicable)
- Provide the JHSC or the health and safety representative with the results of any occupational health and safety report that the employer has. If the report is in writing, the employer must also provide a copy of the parts of the report that relate to occupational health and safety.
- Advise workers of the results of such a report. If the report is in writing, the employer must, on request, make available to workers copies of those portions that concern occupational health and safety.
- Notify a Director of the MLTSD if the JHSC (or a health and safety representative) has identified potential structural inadequacies of a building, structure, or any part thereof, or any other part of a workplace, whether temporary or permanent, as a source of danger or hazard to workers.
- Supply an effective strategy to manage the occupational health and safety concerns of the company.
- Allocate and govern resources properly to achieve the health and safety requirements of employees, and ensure that policies comply with the company's legal obligations.
- Foster a workplace culture of safety with appropriate leadership.
- Review relevant policies annually for compliance and efficiency, and revise where necessary.
- Provide all relevant parties with a copy of all orders or reports issued to the employer by a Ministry of Labour inspector and inform the JHSC of any work-related incidents involving injury, death, or occupational illness.
- Liaise with government agencies to ensure workplace health and safety compliance.
- Advise on safety and health policy issues.
- Coordinate health and safety inspections, and follow up to ensure the completion of necessary corrective actions.
- Develop best practices that support a strong health and safety program.
- Design and develop accident and incident reports and investigation procedures.
- Maintain an up-to-date knowledge of applicable health and safety regulations as mandated locally, provincially, or federally.
- Design and develop company policies and procedures related to workplace safety and health issues.
- Review injury and illness trends, and identify problem areas and solutions.



**Managers and supervisors will:**

- Help develop, implement, and enforce company policies and procedures.
- Continually promote health and safety awareness with instruction, information, training, and supervision to ensure the safe performance of employees.
- Use the process of hazard identification, risk management, and incident investigation.
- Perform occupational health and safety inspections of the workplace to identify and control any and all hazards to employees as needed.
- Ensure that a worker works in the manner and with the protective devices, measures and procedures required by the OHSA and the regulations.
- Ensure that any equipment, protective device or clothing required by the employer is used or worn by the worker.
- Advise a worker of any potential or actual health or safety dangers known by the supervisor.
- If prescribed, provide a worker with written instructions about the measures and procedures to be taken for the worker's protection.
- Take every precaution reasonable in the circumstances for the protection of workers.
- Ensure that machinery and equipment are safe and that employees work in compliance with established safe work practices and procedures.
- Ensure that employees receive adequate training in their specific work tasks to protect their health and safety.

**Employees will:**

- Work in compliance with the Act and regulations.
- Use or wear any equipment, protective devices or clothing required by the employer.
- Report to the employer or supervisor any known missing or defective equipment or protective device that may endanger the worker or another worker.
- Report any hazard or contravention of the Act or regulations to the employer or supervisor.
- Not remove or make ineffective any protective device required by the employer or by the regulations other than in circumstances specified below. The only circumstance in which a worker may remove a protective device is where an adequate temporary protective device is provided in its place. Once there is no



longer a need to remove the required protective device or to make it ineffective, it must be replaced immediately.

- Not use or operate any equipment or work in a way that may endanger any worker.
- Not engage in any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct. Racing powered hand trucks in a warehouse or seeing who can pick up the most boxes are examples of unlawful conduct.
- Comply with occupational health and safety policies and procedures.
- Notify managers of any health and safety concerns, so they may be dealt with promptly.
- Protect their own health and safety by working in compliance with the law, safe work practices, and procedures established by the company.
- Use appropriate personal protective equipment as required.
- Report unsafe or potentially hazardous conditions, without fear of reprisal, to their manager or Human Resources.

**All staff will:**

- Complete required occupational health and safety training.
- Perform duties in a manner conducive to a safe workplace, following all safety practices and procedures.
- Report any incident, injury, or hazard to their manager or supervisor.
- Report any acts of violence or harassment in the workplace.
- Promote a hazard-free workplace.
- Learn the posted emergency plan detailing the corporation's procedures pertaining to fire, weather, or medical emergency.

**Joint health and safety committee members will:**

- Commit to improving health and safety conditions in the workplace.
- Stimulate and raise awareness of health and safety issues in the workplace.
- Recognize and identify workplace risks and hazards.
- Develop recommendations to address risks and hazards.
- Conduct regular workplace inspections and make written recommendations.
- Recommend accident prevention and health and safety programs.
- Listen to employee complaints, concerns, and suggestions.
- Participate in health and safety inquiries and investigations.
- Advise on health and safety matters, such as personal protective equipment.
- Maintain accurate and detailed records of near misses, accidents, and injuries.



- Promote and monitor compliance with health and safety regulations.
- Monitor the effectiveness of existing health and safety programs and policies, and assist with the implementation of improvements.
- Attend regular committee meetings, which may be held virtually or in person.

### Reporting Structures

Any concerns or near misses should be reported to the appropriate manager and/or JHSC. Employees who voice or identify a health and safety concern will not be subject to reprisal or retaliation.

If an emergency occurs, employees must immediately report the incident to their Manager/designate. Appropriate responses will be dictated by the severity of the event and its effect on the health and safety of employees, visitors, and property.

An emergency is any number of unsafe conditions that pose a threat to people or property. This includes but not limited to fire or smoke; natural disaster or severe weather; chemical, biological, or radiological incidents; and structural failures.

### 4.0 DOCUMENT CONTROL

Date Drafted	<ul style="list-style-type: none"><li>• January 2017</li></ul>
Date Approved	<ul style="list-style-type: none"><li>• February 23, 2017</li><li>• Update approved by Board of Directors March 16, 2023</li><li>• Update approved by Board of Directors April 17<sup>th</sup>, 2025.</li></ul>
Date Revised	<ul style="list-style-type: none"><li>• March 19<sup>th</sup>, 2026</li></ul>
To be reviewed	<ul style="list-style-type: none"><li>• Review and update every twelve months.</li><li>• General review by all employees every twelve months.</li></ul>
Inquiries to Policy Owner	<ul style="list-style-type: none"><li>• Human Resources</li></ul>

**Bi-Annual Review of Smoke-Free Workplace Policy  
STAFF REPORT- 2026-13**

**TO:** LMCH Board of Directors

**FROM:** Dirk Volschenk, Manager of Human Resources

**SUBJECT:** Bi-Annual Review of Smoke-Free Workplace Policy

**DATE:** April 9, 2026

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**PURPOSE:**

To receive and approve the *Smoke-Free Workplace Policy* for Employees, which has been reviewed to ensure ongoing compliance with organizational and legislative requirements.

**RECOMMENDATION:**

That the LMCH Board of Directors **APPROVE** the attached Policy.

**BACKGROUND:**

The organization’s Smoke-Free Workplace Policy was reviewed and updated in 2023 to address the smoking of electronic cigarettes and cannabis and include these types of smoking under the scope of the Policy.

Since 2023 there haven’t been any legislative updates to the *Smoke-Free Ontario Act* that is applicable on the workplace of LMCH. Similarly, the *Occupational Health and Safety Act* has not had any updates that would be relevant to the scope and purpose of this Policy.

Therefore, the policy is being brought forward with no recommended changes or updates.

**APPENDICES:**

A. 2026 Draft Policy – Smoke-Free Workplace Policy

PREPARED and SUBMITTED BY:	REVIEWED and CONCURRED BY:
Dirk Volschenk Manager, Human Resources	PAUL CHISHOLM CHIEF EXECUTIVE OFFICER



**RELATED DOCUMENTATION**

<b>Legislation</b>	<ul style="list-style-type: none"> <li>• Smoke-Free Ontario Act, 2017</li> <li>• Occupational Health and Safety Act, 1990, relevant regulations</li> <li>• Municipal bylaws, Smoke Free Public Places PH-10 enacted February 17, 2003 and Smoke Free Workplaces PH-11 consolidated April 22, 2003</li> <li>• Residential Tenancies Act 2006</li> </ul>
<b>Collective Agreement</b>	N/A
<b>Forms</b>	N/A
<b>Policies</b>	
<b>Other Resources</b>	

**1.0 PURPOSE**

London & Middlesex Community Housing Inc. maintains a commitment to the health and safety of all its employees. Smoking has been scientifically proven to be harmful to the health of both smokers and non-smokers who come into contact with second-hand smoke. In the interest of promoting a safe and healthy work environment, London & Middlesex Community Housing Inc. has adopted a smoke-free workplace policy in accordance with the *Smoke-Free Ontario Act, 2017*. Signs will be posted at each entrance and exit of the workplace to ensure employees and guests are aware that smoking is prohibited.

**2.0 SCOPE**

This Policy applies to everyone providing service at LMCH including:

- Board Members
- Management
- Bargaining Excluded Staff, Unionized Employees and Temporary Staff
- Volunteers including Students

**3.0 DEFINITIONS**

Smoking: The act of lighting, inhaling, or carrying of a lighted or smouldering cigar, cigarette, joint, or pipe of any kind.

Electronic cigarette: Under the Smoke-Free Ontario Act, 2017, a vaporizer or inhalant-type device, whether called an electronic cigarette or any other name, that contains a power source and heating element designed to heat a substance and produce a vapour intended to be inhaled by the user of the device directly through the mouth, whether or not the vapour contains nicotine.



Enclosed workplace: Under the Smoke-Free Ontario Act, 2017:

The inside of any place, building, structure, or vehicle or conveyance or a part of any of them:

- That is covered by a roof;
- That employees work in or frequent during the course of their employment whether or not they are acting in the course of their employment at the time; and
- That is not primarily a private dwelling; or
- A prescribed place

## **4.0 POLICY STATEMENT**

This Smoke-Free Workplace Policy ensures a smoke-free workplace for its employees. Additionally, this policy will ensure that the common areas in our apartment building are also smoke free for tenants and visitors.

Smoking is prohibited within all LMCH offices and workshops as well as any common areas at our rental properties and includes tenant units, whether occupied or unoccupied. This includes smoking or holding lighted tobacco or cannabis, an electronic cigarette or vapour product, or consuming a prescribed substance. These common areas include all community centers, lounges, laundry rooms, elevators and stairwells and common kitchens. Tenants and their visitors are allowed to smoke in their own apartment or townhouse. Employees are prohibited from smoking in Tenant Units, even when invited by the Tenant, while they are on duty. Smoking in any LMCH vehicle or personal vehicle used during regular scheduled hours is prohibited. Smoking will be allowed in designated smoking areas outside buildings.

All materials used for smoking, including cigarette butts and matches, must be extinguished and disposed of in appropriate containers as provided.

LMCH will not discharge employees, or refuse to hire applicants on the grounds that they are smokers. LMCH has no intentions towards influencing the actions of employees' smoking habits outside of the workplace, and will not pursue disciplinary action for those that smoke off of LMCH premises. LMCH will assist employees who wish to quit smoking by facilitating access to recommended smoking cessation programs and materials as available through our current group insurance policy.

### **SIGNAGE**

The company will post all necessary signs at entrances, exits, and washrooms to comply with the Smoke-Free Ontario Act, 2017.

### **RESPONSIBILITY**

The CEO, Directors and Managers must ensure that this policy is adhered to by employees, contractors, tenants and visitors in the buildings and areas under their responsibility.

### **DISCIPLINARY MEASURES**

LMCH employees who violate this policy are subject to disciplinary action.



**ACCOMMODATIONS**

Accommodations for employees relating to medical cannabis will be made on a case-by-case basis. Any employees who have an accommodation requirement are expected to inform Human Resources prior to consuming their substance in the workplace.

Non-LMCH employees who violate this policy may be requested to leave LMCH premises, or LMCH may take whatever measures it deems appropriate to ensure this policy is complied with by contacting such persons, including, but not limited to, municipal inspectors under the City of London by-laws on smoking in the workplace or in public places, or to inspectors appointed by the Minister of Health under the Tobacco Control Act.

Note, employees who witness violations are required to report the infraction to their Manager, Director or Human Resources.

**5.0 DOCUMENT CONTROL**

Date Drafted	<ul style="list-style-type: none"> <li>November 25, 2010</li> </ul>
Date Approved	<ul style="list-style-type: none"> <li>November 25, 2010</li> <li>March 16, 2023</li> </ul>
Date Revised	<ul style="list-style-type: none"> <li>April 2<sup>nd</sup>, 2026</li> </ul>
To be reviewed	<ul style="list-style-type: none"> <li>Biennially</li> </ul>
Inquiries to Policy Owner	<ul style="list-style-type: none"> <li>Human Resources</li> </ul>

AODA REPORT  
STAFF REPORT 2026-14

TO: LMCH Board of Directors

FROM: Sara De Candido, COO

SUBJECT: Accessibility Plan Review and Approval

DATE: April 8, 2026

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**PURPOSE:**

The purpose of this report is to update the LMCH Board of Directors on progress regarding the development of LMCH's 5 Year Accessibility Plan. The plan was approved by the PSH Committee and requires approval from the Board of Directors prior to making the documents publicly available.

**RECOMMENDATION:**

That the LMCH Board of Directors **APPROVE** the **LMCH 2026–2030 Multi-Year Accessibility Plan**, and that staff be authorized to post the approved plan on LMCH's public website in accordance with legislative requirements.

**BACKGROUND:**

LMCH is required to develop, maintain, and publicly post a multi-year accessibility plan in compliance with the **Accessibility for Ontarians with Disabilities Act, 2005 (AODA)** and Ontario Regulation 191/11 (Integrated Accessibility Standards Regulation). Approval of the updated 2026–2030 plan is required to ensure compliance and transparency.

Under the AODA, designated public sector organizations must:

- Establish, implement, and maintain a multi-year accessibility plan
- Review and update the plan at least once every five years
- Post the plan on their website and make it available in accessible formats upon request

LMCH's updated plan builds on previous accessibility efforts and reflects the organization's ongoing commitment to removing barriers and improving access to housing, services, and employment.

## KEY HIGHLIGHTS:

The 2026–2030 Multi-Year Accessibility Plan outlines a structured, phased approach to advancing accessibility across LMCH operations:

- **Year 1–2:** Policy development, compliance, accessibility audits, staff training, and improved communication practices
- **Year 3:** Capital upgrades to physical environments (e.g., entrances, wayfinding, lighting) **Year 4:** Strengthening accessible employment practices and organizational capacity
- **Year 5:** Evaluation, stakeholder engagement, and development of the next plan

The plan addresses barriers across:

- Built environment and infrastructure
- Communication and digital access (including WCAG compliance)
- Policies, procedures, and service delivery
- Employment practices

## STRATEGIC ALIGNMENT:

The Multi-Year Accessibility Plan directly supports LMCH’s strategic priorities by:

- Advancing equitable access to housing and services
- Enhancing tenant experience and service delivery
- Integrating accessibility into asset management, capital planning, and procurement practices
- Strengthening organizational capacity through training, policy development, and inclusive practices

This plan reinforces LMCH’s commitment to providing safe, inclusive, and sustainable housing while ensuring compliance with provincial legislation and alignment with broader public sector accountability expectations.

## FINANCIAL/RISK IMPLICATIONS:

- Accessibility improvements will be incorporated into existing operating and capital planning processes
- Approval and publication of the plan mitigates compliance risk under the AODA



- Supports LMCH’s commitment to equity, inclusion, and public sector accountability

## CONCLUSION

The 2026–2030 Multi-Year Accessibility Plan positions LMCH to meet legislative requirements while advancing a proactive, organization-wide approach to accessibility. Board approval is required to formalize the plan and enable public posting.

Upon Approval:

- The plan will be posted on the LMCH website
- It will be made available in accessible formats upon request
- Staff and stakeholders will be informed of key commitments and expectations

**Attachments: LMCH (DRAFT) Accessibility Plan**

<b>PREPARED BY:</b>	<b>REVIEWED BY:</b>
Sara De Candido COO	Paul Chisholm CEO

# London and Middlesex Community Housing Multi-Year Accessibility Plan (2026–2030)

Prepared in accordance with the Accessibility for Ontarians  
with Disabilities Act, 2005 (AODA)

March 31, 2026



LONDON &  
MIDDLESEX  
COMMUNITY HOUSING

# Message from CEO

*At LMCH, our commitment to providing safe, inclusive, and accessible housing is foundational to who we are as an organization. Under Ontario Regulation 191/11 – the Integrated Accessibility Standards Regulation (IASR) of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA), organizations such as ours are required to develop a multi-year accessibility plan, update it at least once every five years, and make it publicly available.*

*This plan outlines the steps we will take to identify, prevent, and remove barriers to accessibility, along with clear implementation timelines. While the legislation provides flexibility in how organizations structure their plans, our approach is guided by our mission and values. Accessibility is not simply a compliance requirement — it is a commitment to equity, dignity, independence, and inclusion for our tenants, staff, and community partners.*

*Our Multi-Year Accessibility Plan reflects:*

*Our ongoing efforts to remove physical, communication, technological, and systemic barriers*

*Our commitment to continuous improvement in service delivery*

*Our responsibility is to ensure policies, practices, and facilities align with accessibility standards*

*Clear actions and timelines that support measurable progress*

*This document is provided as a general framework to support compliance with the Regulation. As always, LMCH remains responsible for understanding and meeting its legal obligations under the AODA and ensuring that our policies and practices reflect our specific operational context. We will continue to review and refine our accessibility initiatives as standards evolve and as we receive feedback from the communities we serve. Accessibility is a shared responsibility. Together, we will continue building a more inclusive and barrier-free environment for everyone.*

*Sincerely,*

*Paul Chisholm*

*Chief Executive Officer*

*London and Middlesex Community Housing*



# Statement of Commitment

London and Middlesex Community Housing (LMCH) is committed to providing safe, inclusive, and accessible housing and services for all tenants, staff, and community members.

LMCH will meet the requirements of the Accessibility for Ontarians with Disabilities Act (AODA) and its regulations, including the Integrated Accessibility Standards Regulation (IASR), and will work proactively to identify, remove, and prevent barriers to accessibility.

# Purpose of the Plan

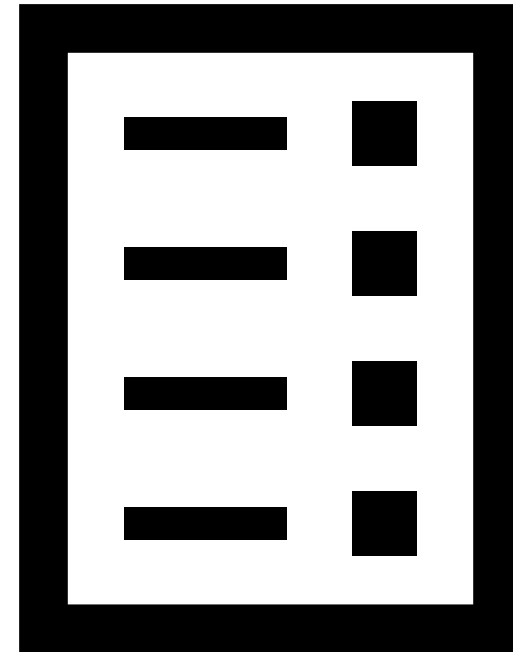
Multi-Year Accessibility Plan outlines LMCH's strategy to:

- Identify, remove, and prevent barriers
- Meet current and future AODA requirements
- Improve accessibility across housing, services, and workplaces
- Promote dignity, independence, integration, and equal opportunity

# Scope

This plan applies to:

- All LMCH housing units and common areas
- Tenant services and programs
- Procurement practices
- Staff and workplace environments
- Communications and digital content



# Guiding Principles and Legislative Framework

## LMCH will ensure accessibility by:

- Treating people with dignity and respect
- Supporting independence
- Integrating services wherever possible
- Responding to individual accommodation needs

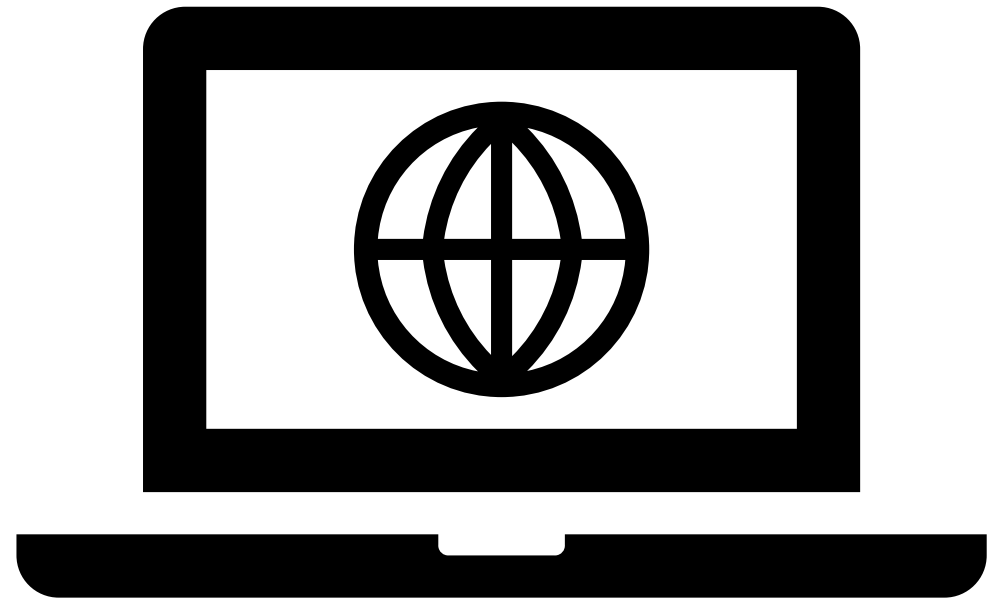
## This plan aligns with:

- AODA (2005)
- IASR Standards:
  - ✓ Customer Service
  - ✓ Information & Communications
  - ✓ Employment
  - ✓ Transportation (limited applicability)
  - ✓ Design of Public Spaces

# Barrier Identification

LMCH recognizes potential barriers in:

- Physical environments (older buildings, entrances, elevators)
- Communication ( plain language, alternative formats)
- Digital access (website accessibility)
- Attitudinal barriers
- Policies and procedures



# 5-Year Action Plan (2026 – 2030)

<b>Year 1 (2026): Foundation &amp; Compliance</b>	<ul style="list-style-type: none"> <li>• Develop and approve accessibility policies and procedures</li> <li>• Establish an Accessibility Advisory approach (internal or tenant-informed)</li> <li>• Conduct a building accessibility audit of buildings and services (Yr1 &amp; Yr2)</li> <li>• Ensure website meets WCAG 2.0 Level AA standards</li> <li>• Implement accessible feedback processes</li> <li>• Train all staff on AODA and Human Rights Code requirements</li> </ul>
<b>Year 2 (2027): Service &amp; Communication Improvements</b>	<ul style="list-style-type: none"> <li>• Introducing standardized accessible communication practices (plain language, alternate formats upon request)</li> <li>• Improve tenant-facing materials (leases, notices, policies)</li> <li>• Begin upgrades to key service counters and offices</li> <li>• Integrate accessibility requirements into procurement processes</li> <li>• Establish a tracking system for accommodation requests</li> </ul>
<b>Year 3 (2028): Build Environment Enhancements</b>	<ul style="list-style-type: none"> <li>• Prioritize and begin capital upgrades based on the audit:             <ul style="list-style-type: none"> <li>Entrances and ramps</li> <li>Automatic door openers</li> <li>Wayfinding signage</li> <li>Lighting improvements</li> </ul> </li> <li>• Integrate accessibility into all capital planning and asset management</li> <li>• Ensure new developments meet or exceed accessibility standards</li> </ul>
<b>Year 4 (2029): Employment &amp; Organizational Capacity</b>	<ul style="list-style-type: none"> <li>• Strengthen accessible employment practices:             <ul style="list-style-type: none"> <li>Recruitment and onboarding accommodation</li> <li>Return-to-work and accommodation plans</li> </ul> </li> <li>• Provide advanced staff training (trauma-informed, disability awareness)</li> <li>• Evaluate emergency procedures for accessibility (tenant safety plans)</li> </ul>
<b>Year 5 (2030): Evaluation &amp; Continuous Improvement</b>	<ul style="list-style-type: none"> <li>• Conduct a full review of the accessibility plan progress</li> <li>• Update accessibility audit</li> <li>• Engage tenants and stakeholders for feedback</li> <li>• Publish updated 5-year plan</li> <li>• Identify emerging needs and best practices</li> </ul>

# Training

LMCH will provide ongoing training to:

- ✓ All staff and leadership
- ✓ New employees during onboarding

Training will include:

- AODA requirements
- Ontario Human Rights Code
- Accessible customer service
- Interacting with people with disabilities



# Design of Public Spaces

LMCH will ensure that new builds and major redevelopments comply with AODA Design of Public Spaces Standards, including:

- Accessible paths of travel
- Parking
- Outdoor spaces (where applicable)



# Monitoring, Reporting & Communications

## LMCH Will:

- Review this plan annually
- Post updates on its website
- Provide the plan in accessible formats upon request
- File required AODA compliance reports with the Province of Ontario

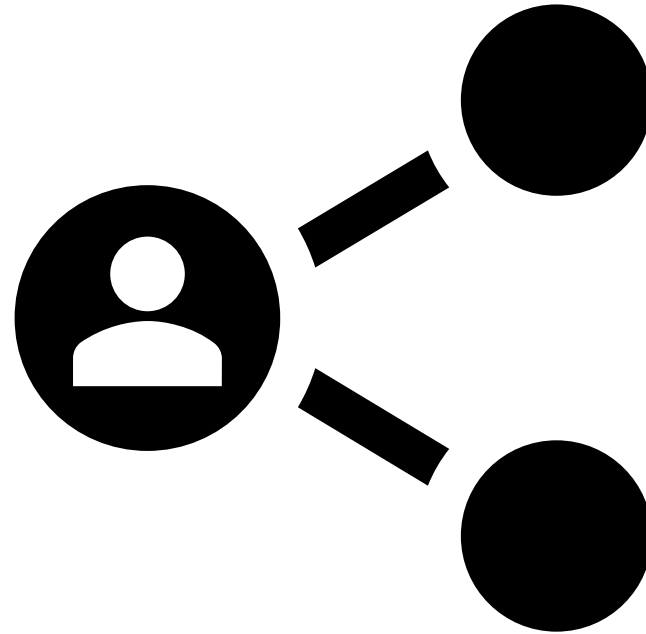
## Communication of the Plan will be:

- Posted on LMCH's website
- Available in accessible formats upon request
- Shared internally with staff and leadership

# Feedback Process

## LMCH Will:

- Maintain accessible channels for tenants and public feedback (phone, email, in-person, written)
- Provide accessible formats upon request
- Respond to feedback in a timely manner
- Track and incorporate feedback into planning



# Contact Information

For questions or feedback regarding accessibility at LMCH:

London and Middlesex Community Housing  
[accessibility@lmch.ca](mailto:accessibility@lmch.ca)

## COO Report PSH- 2026-10

TO: LMCH People, Service, and Housing Committee

FROM: Sara De Candido, Chief Operating Officer

SUBJECT: COO Update

DATE: April 8, 2026

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### PURPOSE

To provide the People, Services, and Housing Committee with updates on key strategic initiatives and to seek direction on matters requiring Board/Committee consideration.

### RECOMMENDATION

That the COO Update Report be received for information.

### KEY HIGHLIGHTS:

- **Tenant-Centered Service:** Opening LMCH's first community office and expanding local service delivery.
- **Regen Progress:** Strong Southdale lease-up and advancement to Phase II.
- **Operational Excellence:** Advancing AODA compliance and improving service consistency.
- **Housing Availability:** Focused action on vacancy turns while sustaining IPM success.

### GRAND OPENING – LMCH's First Community Office

As part of Business Case 22, LMCH is in the final stages of preparing to open its first community office at 349 Wharncliffe Rd. N. This milestone represents a significant shift toward community-based service delivery and improved tenant access. The office will be staffed by seven full-time employees and will offer in-person support, including Community Relations services and rent payment options. Staff is expected to transition from the head office by the end of April, with a Grand Opening expected in May 2026.

***Strategic Alignment:*** *Enhances tenant experience and service accessibility, while advancing an equity-informed, community-centered service model.*

### BUILDING ON MOMENTUM – Reimagine Southdale Phase II

LMCH has successfully achieved over 90% occupancy in Phase I of Reimagine Southdale. Planning is now underway for Phase II, anticipated to open in 2027. This

*LMCH PSH Committee Meeting  
April 14, 2026*

includes proactive tenant placement strategies, informed by lessons learned during initial lease-up. Phase II will also include a second community office, further embedding services within the community and strengthening local engagement.

**Strategic Alignment:** *Supports long-term asset revitalization, community development, and integrated service delivery.*

### Strengthening Accessibility and Inclusive Service Delivery (AODA)

LMCH continues to advance organizational compliance with the Accessibility for Ontarians with Disabilities Act (AODA). This includes enhancements to internal processes, data management practices, and service delivery standards to better respond to accommodation requests. These improvements are strengthening consistency, accountability, and responsiveness across the organization.

**Strategic Alignment:** *Advances equity, inclusion, and accessibility, while reinforcing service excellence and compliance.*

### OPERATIONAL EXCELLENCE – Integrated Pest Management & Inspections

The Integrated Pest Management (IPM) program continues to demonstrate strong results, with infestation rates reduced to approximately 11% across LMCH’s portfolio. The 2026 Annual Unit Inspection program launched in February, incorporating efficiencies and lessons learned from 2025. The first three site inspections have resulted in over 60 new work orders and the identification of more than 50 units requiring pest control intervention. These efforts support proactive maintenance while strengthening tenant engagement.

**Strategic Alignment:** *Strengthens asset stewardship, preventative maintenance, and healthy living environments for tenants.*

### Addressing Vacancy Turn Performance

Over the past quarter, LMCH has experienced challenges in vacant unit turnover timelines due to staffing pressures, process delays, and increased diligence in procurement and repair oversight. While recent improvements have been observed, this remains a key operational priority. Focus will be placed on improving turnaround times, enhancing process efficiency, and maintaining strong value-for-money practices to ensure units are returned to service quickly and safely.

**Strategic Alignment:** *Supports operational efficiency, financial stewardship, and timely access to housing.*

### LOOKING AHEAD

- Launch of the LMCH Maintenance Request App
- Launch of the Tenant Advisory Table, with a focus on AODA policy feedback
- Advancement of the LMCH Parking Program across all sites

PREPARED BY:
Sara De Candido, COO

**Senior Manager, Property Services Update  
PSH- 2026-12**

**TO:** LMCH People, Service, and Housing Committee  
**FROM:** Christine Poirier, Senior Manager, Property Services  
**SUBJECT:** Update from Senior Manager, Property Services  
**DATE:** April 8, 2026

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**PURPOSE:**

The purpose of the report is to provide updates to the People Service and Housing Committee on the status of key initiatives previously approved, introduce items that may come before the Committee in future meetings, and provide updates on meetings, events, or activities that may be of interest to the Committee.

**RECOMMENDATIONS:**

That the Update from the Senior Manager, Property Services report **BE RECEIVED** for information.

**Vacancy Update**

The total units in active restoration in Q1 2026 was 3.5%. This is due to the continued influx of CMHC units and internal challenges. Consequently, the average number of days to turn a unit increased in Q1 to 99 days from 88 days in Q4. The property services team is working on redeploying the maintenance team and vendors to process the increased volume in Q1 2026.

LMCH is working on RFP scopes for a vendor refresh for suppliers, general contractors, as well as rotational contractors. More details will be presented in the coming reports.

**Maintenance Request Update**

In Q1 2026, LMCH completed 97% of the emergent work orders, 89% of the urgent work orders, and 81% of the nonemergent work orders. These work orders percentages are inclusive of new work orders entered at the end of the quarter. With the improved service standard timeline, priority is given to the emergency and urgent work orders. 26% of the total number of work orders were from the after-hours call Centre.



For the performance metric, the property service maintenance team has successfully completed 99% of the routine work orders within the set service standard timeline in Q1.

PREPARED and SUBMITTED BY:	REVIEWED and CONCURRED BY:
CHRISTINE POIRIER SENIOR MANAGER, PROPERTY SERVICES	SARA DE CANDIDO CHIEF OPERATIONS OFFICER

2025 Annual Unit Inspections Update  
PSH-2026- 13

TO: LMCH People, Service, and Housing Committee  
FROM: Christine Poirier, Senior Manager, Property Services  
SUBJECT: 2025 Annual Unit Inspections Update  
DATE: April 8, 2026

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**PURPOSE:**

The purpose of the report is to provide updates to the People Service and Housing Committee on the status of key initiatives previously approved, introduce items that may come before the Committee in future meetings, and provide updates on meetings, events, or activities that may be of interest to the Committee.

**RECOMMENDATIONS:**

That the Update from the Senior Manager, Property Services report **BE RECEIVED** for information.

**PARTICIPANTS:**

Annual unit inspections were conducted across all LMCH properties from **April 3 to November 27, 2025**. These Inspections focused on unit condition, safety, habitability, and compliance with lease and regulatory standards.

**Scope of Work**

The inspections included the LMCH operations team as well as regulatory partners:

- **Property Services:** Assessed physical condition, identifying repair needs (plumbing, electrical, HVAC, drywall) and pest control issues.
- **Tenant Services:** Evaluated lease compliance, tenant behavior, cleanliness, and social concerns (e.g., hoarding).
- **Fire & Life Safety:** Audited fire systems, alarms, extinguishers, and egress compliance.
- **Electrical Safety Authority (ESA):** Reviewed electrical systems through sampled inspections.
- **London Fire Department:** Supported fire code compliance and tenant safety responsibilities.
- **Pinchin:** Evaluated materials, including asbestos management considerations.

## KEY RESULTS AND METRICS

- 3426 Units entered and inspected
- 257 Work orders created
- 162 Pest control infestations identified and scheduled for treatment
- \$121,682 in quotes for routine Annual repair to Fire alarm systems
- 675 Deficiencies identified through the Electrical Safety Authority.
- 49% decrease year over year in time to complete defects (2024-2025)

## STAFFING

A multidisciplinary team approach is utilized to conduct annual inspections. Routine meetings are held to review processes, expectations, and individual responsibilities of participating staff, particularly at the start and midpoint of the inspection season.

## PROPERTY CONDITION UPDATE

Year-over-year improvement has been observed in the condition of both the buildings and individual units. This progress is primarily attributed to ongoing maintenance, capital improvements, and upgrades, as well as day-to-day tenant follow-up to ensure compliance.

Overall, units were found to be in acceptable condition. Common issues identified included minor maintenance deficiencies, housekeeping concerns, and normal wear and tear. Follow-up actions were initiated where required.

## NEXT STEPS

As we move into 2026, efforts are focused on continuous improvement. We are working to reduce the lead time required to complete work orders generated through the inspection process so that we can deliver the LMCH service standards.

<b>PREPARED and SUBMITTED BY:</b>	<b>REVIEWED and CONCURRED BY:</b>
<b>KACPER OBRZAZGIEWICZ PROPERTY MANAGER</b>	<b>CHRISTINE POIRIER SENIOR MANAGER, PROPERTY SERVICES</b>

## Integrated Pest Management Program Report PSH-2026-14

**TO:** LMCH People, Service, and Housing Committee  
**FROM:** Christine Poirier, Senior Manager, Property Services  
**SUBJECT:** Integrated Pest Management Program Report  
**DATE:** April 8, 2026

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### PURPOSE:

The purpose of the report is to provide updates to the People Service and Housing Committee on the performance, challenges, and strategic direction of the Integrated Pest Management (IPM) program across LMCH through to the end of Q1 2026. The report outlines infestation trends, operational effectiveness, contractor performance, tenant compliance, and mitigation strategies, while identifying risks and forward actions required to sustain and improve outcomes.

### RECOMMENDATIONS:

That the Integrated Pest Management Program Update report **BE RECEIVED** for information.

### SUMMARY

The current overall infestation rate is 11% across all sites. Infestation levels have stabilized, with targeted reductions in several high-risk buildings. A temporary increase is expected during annual unit inspections and discoveries, and with seasonal transition (winter → spring). Mitigation strategies are in place to manage this increase proactively through a large-scale rodent prevention program with 300+ exterior bait stations being installed across all sites, and an increased focus on tenant compliance and contractor accountability.

### PROGRAM OVERVIEW

The IPM program continues to operate under a cycle-based treatment model, supported by scheduled inspections and follow-ups, coordinated contractor deployment, tenant education and preparation enforcement, data tracking through Yardi and internal reporting tools, and cross-departmental coordination (Client Services, Property Services, Contractors). The program prioritizes prevention, early detection, and sustained treatment cycles rather than reactive responses.

## INFESTATION TRENDS & PERFORMANCE

Overall Portfolio Performance has improved with infestation levels stabilizing at 11%, reduction in repeat infestations in treated units, and improved clearance rates where full treatment cycles were completed.

Key Observations are buildings with consistent treatment cycles and tenant compliance show the greatest improvement, units with access issues or poor preparation continue to drive recurring infestations, and seasonal factors are beginning to impact activity levels, particularly for rodents

## OPERATIONAL PERFORMANCE

### 1. Treatment Coordination

- Improved scheduling and tracking of treatment cycles
- Increased follow-up verification to ensure treatment completion
- Enhanced coordination between Client Services and Vendors

### 2. Contractor Performance

- Vendors continue to meet baseline service expectations
- However, gaps were identified in:
  - On-site verification
  - Consistency in treatment quality across sites
- Increased need for site-level oversight and performance monitoring

### 3. Tenant Compliance

- One of the largest barriers to program success
- Common issues:
  - Units not prepared for treatment
  - Refusal of entry
  - Inconsistent follow-through after treatment

Actions taken include strengthened communication protocols, reinforced preparation requirements, and increased documentation for potential chargebacks

## OFFICE & NON-RESIDENTIAL PEST CONTROL

Office pest concerns (cockroaches and mice) have been identified across multiple sites. A targeted office treatment program has been initiated that focuses on staff awareness and preparation, regular monitoring, and preventive treatments.



## RODENT CONTROL PROGRAM (KEY INITIATIVE)

A proactive seasonal rodent prevention strategy is currently being implemented with the installation of approximately 300+ exterior bait stations across all LMCH sites. The focus is on perimeter control, entry point prevention, and seasonal migration patterns. This initiative is expected to reduce interior rodent concerns, improve long-term prevention outcomes, and stabilize infestation spikes during seasonal transitions.

## KEY CHALLENGES

### Seasonal Pressures

- Increased pest activity due to weather changes
- Higher service demand during inspection cycles

### Tenant Behaviour - Non-compliance continues to impact

- Treatment effectiveness
- Recurrence rates
- Operational efficiency

### Access Issues

- Missed treatments due to non-entry
- Delays in completing treatment cycles

### Contractor Oversight

- Limited on-site verification of completed work
- Need for stronger accountability measures

## RISK ASSESSMENT

Risk Area	Impact	Mitigation
Seasonal infestation spike	Low – Medium	Pre-planned treatment cycles and rodent program
Tenant non-compliance	High	Education, enforcement, chargebacks
Contractor inconsistency	Medium	Increased monitoring and escalation
Repeat infestations	Medium	Targeted building strategy
Service delays	Medium	Improved scheduling and dispatch coordination

## STRATEGIC ACTIONS

Strategic actions included strengthened IPM coordination and tracking, introduction of a proactive office treatment program, the launch of a large-scale rodent prevention initiative, improved communication with tenants and staff, enhanced KPI monitoring and reporting, and improved LMCH team and vendor collaboration.

## NEXT STEPS / FORWARD STRATEGY

### Short-Term (Q2 2026)

- Continued rollout of office treatments across all sites
- Monitor seasonal infestation trends closely
- Increase site inspections for high-risk buildings
- Strengthen enforcement of tenant preparation requirements
- Continue tenant education sessions across sites.

### Mid-Term

- Implement more structured building risk categorization
- Enhance contractor performance tracking framework

### Long-Term

- Reduce and maintain the infestation rate below **10% threshold**
- Establish a preventive maintenance model for pest control
- Standardized IPM reporting for leadership and Board visibility

## CONCLUSION

The IPM program remains stable and continues to demonstrate measurable progress in controlling infestation levels across LMCH properties.

While seasonal and operational pressures are expected to impact short-term trends, **proactive mitigation strategies are in place**, and the program is well-positioned to maintain control and drive further improvements.

PREPARED and SUBMITTED BY:	REVIEWED and CONCURRED BY:
BABS OLATAWURA CLIENT SERVICES MANAGER	CHRISTINE POIRIER SENIOR MANAGER, PROPERTY SERVICES

## Custodian Program Update PSH-2026-15

**TO:** LMCH People, Services & Housing Committee  
**FROM:** Christine Poirier, Senior Manager, Property Services  
**SUBJECT:** Custodian Program Update  
**DATE:** April 8, 2026

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### **PURPOSE:**

The purpose of the report is to provide updates to the People Service and Housing Committee on the progress, challenges, and strategic direction of the Custodian Program across LMCH.

### **RECOMMENDATIONS:**

That the Custodian Program Update report **BE RECEIVED** for information.

### **STAFFING AND RECRUITMENT**

A comprehensive job description was developed for the new custodian position, ensuring full alignment with LMCH's strategic goals of clean, safe, and well-maintained properties. With recruitment completed, there are currently fifteen (15) custodians that form part of the team to make this program a success, thirteen (13) LIUNA members, and two (2) CUPE members.

Additional training courses will be provided in 2026 to the custodian team to include CPI (Crisis Prevention Institute) and bio-cleaning.

### **PROGRAM IMPLEMENTATION**

The custodian team has finalized the core cleaning plan and established daily checklists to ensure service standards are met, along with site accountability. Site-specific schedules for cleaning each area are currently being developed around the identified property needs. While progress in this area is steady, the process is impacted by a high volume of garbage and debris currently present within the buildings, which impacts the accuracy of standardized cleaning timelines.



As part of the ongoing team collaboration, the Custodian Manager, along with the Property Managers, are conducting monthly audits and cleanliness inspections to support the program. This collaborative approach will allow for consistent improvement throughout the first year.

### **EQUIPMENT AQUISITION**

Essential equipment, such as floor scrubbers and cordless vacuums, form part of the plan to improve the service delivery. Due to the extraordinary cost of the floor scrubbing equipment, an RFP process will be followed in line with the LMCH procurement policy. A separate report will be presented in the coming committee meetings for review and approval.

### **RECORDS AND REPORTING**

Throughout the first year of the Custodian Program, KPIs will be built in part by using innovative tools and techniques. LMCH will be purchasing an ATP (Adenosine Triphosphate) tester, which is a rapid hygiene monitoring method that detects the presence of organic residue and microorganisms. ATP is the universal energy molecule found in all living cells. Using this technique will provide real-time cleanliness verification through swab testing and will help the team take immediate corrective action to maintain sanitation standards within the buildings.

### **NEXT STEPS**

The floor scrubbing equipment will be introduced within the sites upon successful completion of the RFP process. Site assessments are being completed to determine the appropriate hours and shifts needed to accomplish the appropriate service levels, including common area maintenance tasks. Further staff training and KPI build will create a successful custodian team and program.

<b>PREPARED and SUBMITTED BY:</b>	<b>REVIEWED and CONCURRED BY:</b>
<b>CHRISTINE POIRIER SENIOR MANAGER, PROPERTY SERVICES</b>	<b>SARA DE CANDIDO CHIEF OPERATIONS OFFICER</b>

2026 Landscaping Services Update  
PSH-2026-16

TO: LMCH People, Services & Housing Committee

FROM: Christine Poirier, Senior Manager, Property Services

SUBJECT: Landscaping Services Update

DATE: April 8, 2026

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**PURPOSE:**

The purpose of the report is to provide updates to the People Service and Housing Committee on the performance, challenges, and strategic direction of the Landscaping Services. The report outlines operational effectiveness, contractor performance, tenant compliance, and mitigation strategies, while identifying risks and forward actions required to sustain and improve outcomes.

**RECOMMENDATIONS:**

That the Landscaping Services Update report **BE RECEIVED** for information.

**BACKGROUND:**

LMCH requires a vendor to provide grass cutting services, including litter pickup, across all LMCH-owned sites. This is not a service that can be provided using internal staff, under the existing funding model.

A Request for Proposal (RFP) was posted on Bid & Tenders on February 14, 2025, with a closing date of March 7, 2025. Fourteen (14) companies registered, with two (2) bid submissions received. Following a detailed review, using an evaluation team comprised of cross-functional staff, the current company was selected as the successful vendor based on providing the best value for service. Overall, the bid submission by this company satisfied all mandatory requirements of the RFP.

**SCOPE OF WORK:**

- Contract duration is April 15, 2025 – November 15, 2027
- Trimming of grass adjacent to the fences, flower beds, benches, buildings, light standards, hydrants, playground equipment, and other immovable structures etc., will be performed prior to the mowing operation.

- All picnic tables, benches, garbage cans, and other movable objects etc. will be moved out of the way to cut the grass. All items shall be placed back in their original location following cutting.
- The period between mowing and trimming will not be less than seven (7) calendar days during the heavy growing season and not less than ten (10) calendar days during the hot and dry season.
- Mulching mowers are recommended to reduce the cost of clipping cleanup.
- All parking lots, driveways, curbs, pathways, sidewalks, interlocking stone patios, or concrete paver patios to have mud, dirt, grass clumps, and grass clippings picked up and removed, and not blown onto the street or into catch basins or storm sewers.
- Included in the work are the municipal grassed areas along the public roadways abutting each LMCH property, including pathways, walkways, and sidewalks.
- This contract will include a fall clean-up at each site to sweep all hard surfaces, remove all litter and debris, and leaf clean-up to prepare for winter.

#### FINANCIAL IMPACT:

The tender documents asked for an estimate to provide landscaping services for all LMCH-owned properties over a period of three (3) years from 2025 – 2027 (between April 15<sup>th</sup> – November 15<sup>th</sup> of the calendar year) with a maximum of a 2% increase allowed each year. Therefore, the budget for the service includes a 2% annual inflationary increase built in over the full term of the contract.

Three (3) Year Annual Costs				
Fiscal Year	2025	2026	2027	TOTAL
Cost per Occurrence (incl. HST)	\$12,938	\$13,197	\$13,329	
Occurrences per year	21	21	21	
<b>Total Annual Cost (incl. HST)</b>	<b>\$271,707</b>	<b>\$277,141</b>	<b>\$279,912</b>	<b>\$828,760</b>
Less: HST refunded	26,882	27,420	27,694	81,996
<b>Net Contract Cost</b>	<b>244,825</b>	<b>249,721</b>	<b>252,218</b>	<b>746,764</b>
Annual LMCH Budget	272,884	278,342	283,909	835,135
<b>Under budget</b>	<b>\$28,059</b>	<b>\$28,621</b>	<b>\$31,691</b>	<b>\$88,371</b>

#### TENANT IMPACT:

This partnership was expected to positively impact the tenant experience by providing professional and quality workmanship throughout the LMCH-managed and owned properties. However, there were service challenges within the sites that were identified and discussed with the vendor throughout the season. Awarding the landscaping contract to the new vendor is expected to provide a higher quality of services at all sites, leading to improved curb appeal and tenants' appreciation of the new property standard.

**NEXT STEPS:**

A 2026 season kick-off meeting is scheduled in early April to discuss the LMCH standard and expectations. The goal is to start the season off positively and to plan intermittent service check-ins at the sites throughout the season to ensure any challenges are addressed within an acceptable time frame and collaboratively.

PREPARED and SUBMITTED BY:	STAFF CONTACT:
Christine Poirier Senior Manager, Property Services	Sara Candido Chief Operating Officer

## Q1 Communications Update PSH-2026-17

**TO:** LMCH People, Service, and Housing Committee  
**FROM:** Matt Senechal, Communications Manager  
**SUBJECT:** Communications Update  
**DATE:** April 8, 2026

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### **PURPOSE:**

The purpose of this report is to inform the LMCH People, Services, and Housing Committee on communications updates.

### **RECOMMENDATION:**

That the People, Services, and Housing Committee receive this report for information and forward to the Board of Directors as an information item.

### **BACKGROUND:**

In Q1 2026, Communications activity reflected a period of operational stability across the organization and a transition within the Communications team. With fewer issues escalating externally, media activity remained low, allowing for a shift in focus toward planning, alignment with organizational priorities, and preparing for a more proactive communications approach in the months ahead.

At the same time, the Communications function underwent a staffing transition, creating an opportunity to refine roles and strengthen the team's structure to better support both operational delivery and strategic priorities.

### **Q1 Review:**

#### **Communications Team Update**

At the end of Q4 2025, LMCH experienced a vacancy in the Communications Specialist role. The position remained vacant for approximately four months while the role was reviewed and refined to better align with current organizational needs.

During this period, Communications capacity was prioritized toward critical and time-sensitive functions. As a result, lower-priority activities, including social media and internal communications, were temporarily scaled back.

Following a focused recruitment process, a new Communications Specialist has been hired and will begin on April 20, 2026.

The role has been repositioned with a stronger emphasis on operational execution, including content development, digital communications, and internal coordination. This adjustment supports a more structured approach to communications delivery and enables Communications leadership to focus on strategic priorities such as executive support, media relations, and government relations.

This transition is expected to strengthen the overall effectiveness of the Communications function moving forward.

## Communications Planning and Alignment

Q1 2026 included a focused effort to plan and align communications activities with LMCH's Strategic Plan and organizational priorities.

Key areas of focus for 2026 include:

- Development and implementation of a proactive media strategy
- Website content updates, including improved accessibility and usability
- Development of a Capital Tracker to support transparency around asset investments
- Launch of a tenant portal to improve access to services and information

In addition, work is underway to strengthen how Communications operates within the organization. This includes clarifying roles and responsibilities, reinforcing content ownership across departments, and improving coordination to ensure communications are timely, accurate, and aligned with business objectives.

## Media Relations

Media activity in Q1 2026 was limited, with one neutral media mention recorded in late March. The coverage did not focus directly on LMCH but referenced the organization in a broader discussion of body-worn cameras.

This represents a notable shift from Q1 2025, which saw higher media activity and a greater proportion of negative coverage:

- Total Mentions: 12
- Positive: 2 (17%)
- Neutral: 4 (33%)
- Negative: 6 (50%)

The reduction in media coverage in Q1 2026 reflects a lower volume of issues escalating to external channels. Areas that have historically drawn negative media attention, including maintenance and pest control, have improved, contributing to a more stable external environment.

Media engagement during the quarter was primarily reactive. However, the current environment presents an opportunity to shift toward a more proactive approach. With reduced reputational pressure and improved operational performance, LMCH is well-positioned to advance positive, story-driven media coverage in the upcoming quarters.

*(See attached Q1 Media Coverage Summary for detailed breakdown.)*

### Looking Ahead

Several significant communications opportunities are anticipated in the coming quarters, including:

- Master Regeneration Plan (MRP) announcement
- Asset Management Plan (AMP) update
- Reimagine Southdale construction milestone (topping-off)
- Potential funding announcement

These initiatives will support a transition to more proactive communication and help strengthen LMCH’s public profile, stakeholder confidence, and transparency.

### ATTACHMENT A: Q1 Media Coverage Summary

PREPARED and SUBMITTED BY:
Matt Senechal, Communications Manager



## Tenant Experience Update PSH-2026-18

**TO:** LMCH People, Services, and Housing Committee  
**FROM:** Olesya Gryn, Senior Manager Tenant Experience  
**SUBJECT:** Tenant Experience Update  
**DATE:** April 8, 2026

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### **PURPOSE:**

The purpose of this report is to update the People, Services, and Housing Committee on the status of key initiatives in Tenant Experience and provide information about meetings, events, or operational activities that may be of interest to the Committee.

### **RECOMMENDATION:**

That the Tenant Experience Report **BE RECEIVED** for information and forwarded to the Board of Directors as an information item.

### **UPDATES:**

#### **SHOAC Meeting**

The most recent committee meeting took place on February 19, 2026. A presentation on the Affordable and Community Housing Update was shared with attendees, including updates on the Ontario Renovates repair program for low-income households, the Homeownership program supporting transitions from rental to homeownership, etc.

The committee also discussed challenges related to overhoused households and delays in transferring them to appropriately sized units. Members requested a review of the relevant Housing Division Notice. It was confirmed that this work had previously been initiated at the Housing Access Centre and will continue to be advanced.

#### **LMCH/ Middlesex County Meeting**

LMCH staff from Tenant Experience met with representatives from Human Services for Middlesex County on March 12, 2026, to discuss opportunities to better support our mutual clients and strengthen collaboration. The group also explored ways to work more effectively together to achieve improved outcomes. During the meeting, LMCH staff were introduced to the work of Community Navigators in the county and discussed how this

partnership could be leveraged to identify and address potential tenancy risks and support long-term housing stability.

### **Housing Emergency Benefit**

Ontario Works has launched a new Housing Emergency Benefit designed to provide short-term financial assistance to residents at risk of housing loss or those attempting to secure new housing. Applications for the current intake opened on March 1, 2026. The benefit provides financial assistance for rental arrears, last month's rent to secure housing, or utility arrears. The program presents an opportunity to stabilize tenancies and reduce arrears-related evictions. LMCH will promote awareness of the Housing Emergency Benefit among tenants in arrears and encourage staff to refer eligible tenants early in the arrears cycle.

### **Tenant Support Fair by LIFE\*SPIN**

LMCH once again participated in the annual Tenant Support Fair, held on March 27<sup>th</sup> at City Hall. The event brought together many community organizations, including VHA Home Healthcare, the London Fire Department, and London Hydro, etc. The fair promotes resources and services available to London renters seeking support and information related to their housing. Key themes emerging from conversations and inquiries included interest in affordable housing and ongoing concerns about safety and security.

### **Reimagine Phase 1 – Tenant Placement**

The majority of units in the Reimagine Phase 1 building have now been leased or have been future leased, with only a few accessible units remaining available. To support the final phase of leasing, an additional advertisement was posted on Rentals.ca clarifying that only accessible units are currently available. This targeted communication is intended to better inform prospective applicants and align inquiries with the remaining unit types.

### **New Housing Division Notice**

Under the Housing Services Act, 2011 and Ontario Regulation 370/11, Service Managers have the discretion to implement local eligibility rules that set maximum household income limits for rent-gear-to-income (RGI) assistance. Housing Division Notice (HDN) 2026-277 replaces HDN 2025-272 effective January 1, 2026, introducing updated income thresholds aligned with provincial limits.

LMCH will implement these changes by applying the new income limits when assessing RGI eligibility for both applicants and current tenants, ensuring compliance with legislated service level targets, and using the updated thresholds when completing Page C1 (Statistical Information) of the Annual Information Return.

**Attachments:** HDN #2026 – 277.

<b>PREPARED BY:</b>	<b>REVIEWED BY:</b>
Olesya Gryn Senior Manager Tenant Experience	Sara De Candido, COO Chief Operating Officer



## Housing Division Notice

**Date: January 16, 2026**

**HDN: 2026-277**

This applicable legislation/policy is to be implemented by the housing provider(s) under the following programs:

Please note if your program is not checked, this change is not applicable to your project.

√	Federal Non-Profit Housing Program (Rent Supplement Units Only)
√	Private Non-Profit Housing Program
√	Co-operative Non-Profit Housing Program
√	Municipal Non-Profit Housing Program (Pre-1986)
√	Local Housing Corporation

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**Subject: LOCAL RULE – MAXIMUM HOUSEHOLD INCOME (Replaces HDN 2025-272)**

**1. PURPOSE:**

To inform all housing stakeholders of the local rule, background and compliance standard under the new *Housing Services Act, 2011 (HSA)* and associated regulations related to the maximum household income under the selection system for rent-gear-to-income assistance.

**2. BACKGROUND AND COMPLIANCE STANDARD:**

The *Housing Services Act, 2011* O.Reg. 370/11, gives service managers the flexibility to decide whether to establish a local eligibility rule that sets a maximum income limit amount that a household can have and be eligible for a rent-gear-to-income unit in the service area. There is no requirement that these limits be established.

If income limits are set for the service area, the following provisions must be made

- income of the household is the total income of the members of the household for a
- 12-month period specified by the service manager and the income of the members of the household is the sum of all payments made to, on behalf of, or for the benefit of, the members other than payments that are excluded under the local eligibility rule.
- The local eligibility rule may provide for different maximum incomes for units of different types and sizes and for units in different parts of the service manager's service area.
- The maximum income for a unit specified in the local eligibility rule must be at least the household income limit prescribed, under Ontario Regulation 370/11 (High Needs Households and Household Income Limits – Subsection 40 (4) of the Act) made under the Act, for such a unit.

### 3. LOCAL RULE:

That the following High Needs Household Income Limits as per O. Reg. 370/11, Schedule 1, Section 1, be applied as of January 1, 2026.

<https://www.ontario.ca/laws/regulation/r25261>

<i>Area</i>	<i>Bachelor unit</i>	<i>1-bedroom unit</i>	<i>2-bedroom unit</i>	<i>3-bedroom unit</i>	<i>4-bedroom unit +</i>
Municipality of Middlesex Centre, City of London, Municipality of Thames Centre	\$24,900	\$33,600	\$39,300	\$42,600	\$50,100
Rest of the service area	\$19,200	\$27,600	\$31,500	\$33,600	\$39,000

That the following Household Income Limits as per O. Reg. 370/11, Schedule 2, Section 2, be applied as of January 1, 2026.

<i>Area</i>	<i>Bachelor unit</i>	<i>1-bedroom unit</i>	<i>2-bedroom unit</i>	<i>3-bedroom unit</i>	<i>4-bedroom unit +</i>
Municipality of Middlesex Centre, City of London, Municipality of Thames Centre	\$41,500	\$56,000	\$65,500	\$71,000	\$83,500
Rest of the service area	\$32,000	\$46,000	\$52,500	\$56,000	\$65,000

Income of the household is the total income of the members of the household for a 12 Month period prior to a household's applied date (for applicants) or the lease signing date and annually thereafter (for current tenants/members), whichever is applicable.

Income of the members of the household is the sum of all payments of any nature (including income derived from a household's assets) made to, on behalf of, or for the benefit of, the members other than payments excluded under the *Housing Services Act, 2011* and associate regulations as amended or successive legislation for the purposing of calculating rent-geared-to-income rent.

**4. ACTION:**

That Housing Providers implement the new Household Income Limits in accordance with their legislated service target level. The local Household Income Limits are to be used in completing Page C1 - Statistical Information of a Housing Providers Annual Information Return for fiscal years beginning in 2014.

**AUTHORIZATION:**

Original signed by  
Matt Feldberg,  
Director, Municipal Housing and Industrial Development

## Rent Forgiveness Update PSH-2026- 19

**TO:** LMCH People, Services, and Housing Committee  
**FROM:** Olesya Gryn, Senior Manager Tenant Experience  
**SUBJECT:** Rent Forgiveness Update  
**DATE:** April 8, 2026

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### **PURPOSE:**

To provide the People, Services, and Housing Committee with an overview of rent forgiveness results for the first quarter of 2026.

### **RECOMMENDATION:**

That the People, Services, and Housing Committee receives this report for information.

### **BACKGROUND:**

Rent forgiveness is a key housing support measure used to prevent evictions and promote housing stability, applied when a tenant's RGI subsidy is reinstated after a period of ineligibility. It covers arrears that accrue due to the temporary loss of subsidy (i.e., the difference between market rent and RGI rent), while tenants remain responsible for any amounts owing at their approved subsidized rate.

In 2025, management implemented enhanced monitoring and more clearly defined procedures to improve oversight of rent forgiveness. These measures included more consistent reporting, strengthened review processes, and clearer approval thresholds. The objective was to ensure rent forgiveness remained targeted to cases of legitimate need while aligning practices with long-term portfolio expectations. As a result, rent forgiveness levels decreased in 2025, and a more structured, consistent framework for evaluating requests was established.

### **Q1 2026 RESULTS:**

During Q1 2026, rent forgiveness levels remained stable and aligned closely with the prior year's results. The volume and value of approved rent forgiveness requests were largely comparable to Q1 2025, reflecting consistent application of the organization's rent relief policies. Current forgiveness levels appear to represent a more typical

baseline consistent with stabilized tenant operations. The sustained reduction in rent forgiveness has had a positive impact on revenue stability and forecasting accuracy.

2020 Q1	2021 Q1	2022 Q1	2023 Q1	2024 Q1	2025 Q1	2026 Q1
(\$104,833.00)	(\$32,889.48)	(\$146,476.10)	(\$264,791.55)	(\$166,666.74)	(\$91,176.19)	(\$94,884.94)

The consistency between Q1 2025 and Q1 2026 indicates that the portfolio has largely transitioned away from the unusually high levels of relief previously required. Key results for Q1 2026 are:

- Number of tenants who had their subsidy reinstated: 45.
- Average number of months to complete forgiveness: 3.7 months.
- Average amount forgiven per tenant per quarter: \$2,108.55.

There were no material deviations from established review processes during the quarter. The average resolution timeframe of under four months suggests the program is operating efficiently in supporting tenants to address arrears. However, two cases exceeded the usual approval thresholds for rent forgiveness due to special circumstances. The average forgiveness amount remains moderate, reflecting a balance between providing meaningful relief to tenants while maintaining financial accountability.

Based on current trends, management anticipates that rent forgiveness levels will remain in line with the lower levels observed over the past year, assuming no significant legislative or economic changes. Ongoing monitoring of rent forgiveness trends will remain a priority to ensure timely responses should conditions change.

**CONCLUSION:**

Overall results for the first quarter of 2026 are consistent with those observed in the first quarter of 2025 and continue to reinforce the trend toward lower levels of rent forgiveness compared with the elevated levels experienced during the preceding three years. Management will continue to monitor trends and report to the Board on any material changes throughout the year.

PREPARED BY:	REVIEWED BY:
Olesya Gryn Senior Manager Tenant Experience	Sara De Candido Chief Operating Officer

## Q4 Community Safety and Wellbeing Report PSH-2026-20

**TO:** LMCH People Services and Housing Committee

**FROM:** Margaret Forbes, Senior Manager of Community Safety and Wellbeing

**SUBJECT:** Q4 Community Safety and Wellbeing Report

**DATE:** April 8, 2026

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### PURPOSE:

To provide the People Services and Housing Committee with an overview of key Community Safety and Wellbeing initiatives, activities, and trends from Q1 2026.

### RECOMMENDATION:

That the People Services and Housing Committee RECEIVE this report for information and forward to the Board of Directors as an information item.

### BACKGROUND:

#### Community Engagement and Development

LMCH was unsuccessful in a joint grant application with the City of London to the Community Foundation of London to enhance tenant education and engagement. Given the importance of this work, the Community Engagement and Development team has reallocated existing budget resources to train 20 tenant-facing staff across operational functions to facilitate **Rent Smart** training.

Delivered by the Centre of Housing Innovation, Rent Smart is an evidence-based program that educates tenants on their rights and responsibilities and supports positive landlord-tenant relationships. Embedding this curriculum within tenant-facing roles is expected to support tenancy success while helping to reduce recurring issues such as pest management, maintenance pressures, and rent arrears.

Staff training will occur in May 2026 and will be required for new LMCH tenants. It will also be offered to tenants and will be offered to all tenants, as well as those who we have filed against at the LTB as part of a mediation plan. Rent Smart materials will also be used as needed to address specific tenant issues as they arise. Program impacts will be evaluated in May 2027 to inform future training plans.

In addition to the Community Engagement team's ongoing coordination of community partner programming that supports families, seniors, and adults (including health supports, child and youth activities, and food security initiatives), the team is strengthening accessibility practices. Tenants who received accessibility accommodations within the past two years are being engaged to share feedback to inform improvements to LMCH's accessibility systems.

### Community Safety Unit

The Community Safety Unit continues to respond to a high volume of service requests, with notable shifts in activity compared to Q1 2025. A comparison chart of the activity from this past quarter and Q1 is provided in the Appendix for reference.

Access control and trespassing-related activity increased significantly, while proactive patrol activity declined as resources were redirected to higher-priority calls. The team has also been operating without a full staff complement for several months. Total service demand continues to rise year over year.

LMCH's Parking Program launched in February 2026 as a pilot program at the Southdale site. Coordination between the City of London and HONK Parking has proved to be an efficient solution for LMCH. Parking revenue commenced in February 2026 at Southdale, and the visitor parking portion of the program will be implemented in the next month.

Lessons learned from the pilot will inform program refinement and expansion to additional LMCH sites later in 2026. A more detailed review of the Community Safety Units' activities and accomplishments can be found in the 2025 Community Safety Unit Report.

### Tenancy Management

The Housing Stability Case Coordination (HSCC) program is a core component of LMCH's eviction prevention. A standardized referral process has been created for this program, and the team is currently working on internal procedures to standardize processes as part of the reorganization from the portfolio model to functional teams. Part of this process will include revising data collection and reporting methods to ensure alignment with key performance indicators and to strengthen reporting and accountability.

LMCH's Legal team remains highly active this quarter, supporting ongoing Landlord and Tenant Board matters. Our priority this quarter focused on aligning data entry and collection practices. We are in the process of developing data entry training tools for current staff and to help with future onboarding. This data alignment is a priority for other reorganizations from the portfolio model to functional teams. We can also maximize the full capabilities of our tenant management system with team training.

A cross-functional AODA Committee has been established to manage accommodation requests and to drive consistent, organization-wide compliance and accessibility awareness. This will be reported on in the Accessibility Review Committee (AODA) Update.

<b>PREPARED BY:</b>
<b>Margaret Forbes, Senior Manager Community Safety and Wellbeing</b>
<b>REVIEWED BY:</b>
<b>Sara De Candido, COO</b>

### Appendix A

<b>Activity Category</b>	<b>Q1 2026</b>	<b>Q1 2025</b>
#1 - Community Safety, Behaviour & Tenant Support	406 (7.73%)	482 (12.07%)
#2 – Access Control and Trespassing	2,237 (42.57%)	1,272 (33.54%)
#3 - Property Standards, Asset Protection & Life-Safety	810 (15.41%)	459 (12.27%)
#4 - Physical Security & Site Integrity	156 (2.97%)	95 (2.43%)
#5 - Staff Support, Workplace Safety & Internal Operations	379 (7.21%)	194 (5.54%)
#6 - Emergency Responder and External Agency Support	330 (6.28%)	222 (6.86%)
<b>Totals</b>	<b>4318</b>	<b>2724</b>
#7 – Proactive Patrols	937 (17.83%)	1,257 (27.15%)

## Q4 Community Safety and Wellbeing Report PSH-2026-21

**TO:** LMCH People Services and Housing Committee

**FROM:** Margaret Forbes, Senior Manager of Community Safety and Wellbeing

**SUBJECT:** Accessibility Review Committee (AODA) Update

**DATE:** April 8, 2026

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### **PURPOSE:**

The purpose of this report is to provide an overview and update on the work of the LMCH Accessibility Review Committee, including its mandate, composition, and early initiatives to support tenant accessibility accommodations and strengthen organizational compliance with the Accessibility for Ontarians with Disabilities Act (AODA).

### **RECOMMENDATION:**

That the People Services and Housing Committee RECEIVE this report for information and forward it to the Board of Directors as an information item.

### **BACKGROUND:**

In November 2025, the LMCH Board of Directors approved London Middlesex Community Housing's Accessibility Policy, reaffirming the organization's commitment to inclusivity and alignment with the Accessibility for Ontarians with Disabilities Act (AODA).

To support implementation of this policy, LMCH established the Accessibility Review **Committee**, a cross-functional committee comprised of eight operational management and frontline staff with representation from:

- Property Services
- Capital Programs
- Tenant Experience
- Legal Services
- Housing Stability and Case Coordination

The Committee was created to ensure a coordinated, transparent, and consistent approach to reviewing and responding to tenant requests for accessibility accommodations, while also strengthening overall organizational AODA compliance.

The Accessibility Review Committee is responsible for:

- Reviewing and responding to tenant requests for accessibility accommodations
- Developing standardized and transparent processes related to accommodation requests, reviews, appeals, and complaints
- Strengthening LMCH's compliance with AODA requirements, including:
  - Provision of goods and services to persons with disabilities
  - Use of assistive devices, service animals, and support persons
  - Accessible communication and information delivery
  - Notification of service disruptions

The Committee meets monthly. A designated portion of each meeting is dedicated to reviewing tenant accommodation requests, with the remaining time focused on developing policies, procedures, and tools to support long-term implementation and compliance. Subject-matter experts are engaged as required, particularly during the Committee's first 12–18 months of operation.

Where appropriate, the Committee will pursue consultation to inform decision-making and process development. This consultation may include:

- Tenants with lived experience of disability
- Tenant Councils and tenant advisory committees
- Accessibility-focused organizations and subject-matter experts
- LMCH staff and management

As an early initiative, the Committee has partnered with LMCH's Community Engagement team to survey approximately 250 tenants who previously participated in engagement activities. The survey is intended to gather feedback on tenant experiences with accessibility supports and accommodation processes. Tenants who participate will be invited to contribute to future accessibility initiatives through an ongoing advisory role.

To date, the Accessibility Review Committee has:

- Established its governance structure and terms of reference
- Approved a standardized tenant engagement process
- Reviewed current data collection methods related to identifying tenant accessibility needs

- Made recommendations to improve how accessible communication needs are captured and addressed, including:
  - Service disruption notifications
  - Emergency evacuation planning for tenants requiring accommodations

The Committee is currently developing and supporting the implementation of a process to ensure tenants who require accommodations receive timely and accessible notifications of service interruptions.

**Next steps include:**

- Finalizing and implementing procedures for accessible information delivery and emergency evacuation accommodations
- Developing an operational implementation plan to support staff and ensure consistency across the organization

The Committee is also working in collaboration with LMCH’s Communications team to:

- Develop a standardized process to receive, respond to, and track tenant accommodation requests, appeals, and complaints
- Create clear, transparent communication materials outlining the accessibility accommodation review process for tenants and staff
- Develop standardized communication templates and a formalized complaints and appeals process

The Accessibility Review Committee will report annually to the Senior Leadership Team and the People Services and Housing Committee. Reporting will include:

- Quantitative summaries of requests reviewed and outcomes achieved
- Feedback received from tenants and how it was addressed
- Processes established, along with outstanding gaps
- An updated annual workplan, including priorities for 2027

<b>PREPARED BY:</b>	<b>REVIEWED BY:</b>
Margaret Forbes, Senior Manager, Community Safety and Wellbeing	Sara De Candido, COO Chief Operating Officer

## 2025 Community Safety Report PSH- 2026-22

**TO:** LMCH People Services and Housing Committee

**FROM:** Margaret Forbes, Senior Manager of Community Safety and Wellbeing

**SUBJECT:** 2025 Community Safety Report

**DATE:** April 8, 2026

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### **PURPOSE:**

This report provides the People Services and Housing Committee with an overview of Community Safety for 2025, with a focus on the transition to a revised incident reporting framework, the rationale for this change, and the key findings generated through the new approach. The intent is to support effective governance, risk oversight, and strategic decision-making.

### **RECOMMENDATION:**

That the People Services and Housing Committee RECEIVE this report for information and forward to the Board of Directors as an information item.

### **BACKGROUND:**

In 2025, the Community Safety Unit (CSU) completed a full review of how incidents are reported and analyzed across the LMCH housing portfolio. This work was informed by sector best practices, operational experience, and the growing complexity of community safety demands.

Historically, incident reporting emphasized discrete, reactive events, limiting visibility into prevention, proactive engagement, environmental risk mitigation, and staff support activities. As community safety operations evolved, this approach no longer accurately reflected workload, risk drivers, or the full scope of services delivered by LMCH's Community Safety Unit.

To address this gap, CSU implemented a seven-category incident framework designed to present a more complete and balanced view of tenant, staff, and building safety and well-being activity.

Incident reporting transitioned from a primarily reactive, enforcement-focused count to a comprehensive, activity-based framework that captures prevention, engagement, support, operational demand, and infrastructure integrity.

Key elements of the change include:

- Introduction of a seven-category incident framework
- Clear differentiation between reactive demand (e.g., access control, emergencies) and proactive/preventative activity (e.g., patrols, CPTED-informed engagement, staff accompaniment to isolated work safety situations)
- Enhanced ability to analyze seasonal patterns, location-based concentration, and operational drivers
- Alignment of reporting with risk reduction, tenant wellbeing, and asset protection objectives

This shift represents a move away from viewing incident volume alone as a performance indicator, and toward understanding why incidents occur, where they concentrate, and how prevention strategies reduce risk over time and will inform future operational KPI's

The seven-category framework was adopted to reflect the full operational reality of Community Safety, encompassing:

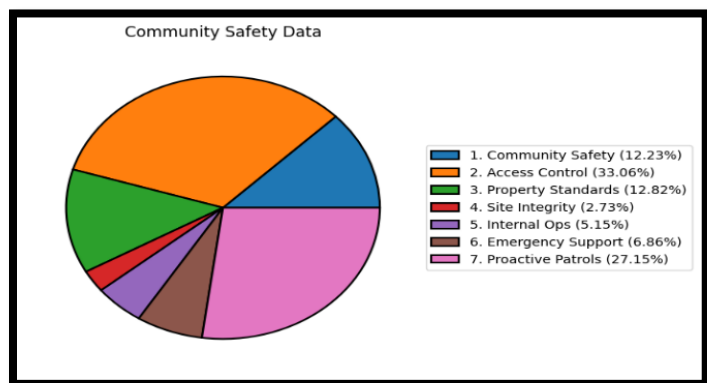
1. Tenant behaviour and support
2. Access control and trespassing
3. Property standards and life-safety issues
4. Physical security systems
5. Staff safety and internal support
6. Emergency and external agency response
7. Proactive security and visibility initiatives

This structure enables leadership and the Board to see how resources are allocated across demand, prevention, and support. It allows LMCH to identify high-pressure activity types and sites, and helps understand the relationship between environmental design, access control, and incident demand. It allows for better assessment of whether investments in prevention (e.g., CPTED, infrastructure, additional proactive patrols) align with data and inform a framework for analysis of investments.

The framework also strengthens accountability by ensuring reporting reflects **both** service delivery and risk management, rather than narrowly defined enforcement activity.

## 2025 CSU Activity Overview

Using the revised framework, 15,767 activities were recorded across the housing portfolio in 2025, as summarized in the graph below.



Activity was distributed across all seven categories, providing a comprehensive picture of Community Safety operations. Two categories — Access Control & Trespassing and Proactive Security Engagement — together accounted for more than 60% of all activity, confirming them as core operational and prevention priorities.

The framework demonstrates that Community Safety work is not limited to responding to incidents, but includes sustained effort in deterrence, visibility, tenant reassurance, and environmental risk reduction for staff and tenants.

### Key Highlights

- Activity is Highly Concentrated.** Approximately 64% of all incidents occurred at six of the adult sites. This finding supports a targeted deployment model, rather than uniform staffing or investment across the entire portfolio.
- Access Control Remains the Primary Driver.** Access Control & Trespassing (33.06%) is the largest category of activity and the most consistent driver of demand, particularly at high-activity locations.
- Proactive Activity Increased Significantly** Proactive Security Engagement (27.15%) increased notably in colder months, reflecting a strategic shift toward prevention, visibility, and deterrence rather than reactive response alone.
- Clear Seasonal Patterns Are Evident.** Warmer months showed higher levels of behavioural incidents and emergency responses. Colder months showed

concentrated demand around access control and proactive patrols. This pattern underscores the importance of flexible staffing and seasonal deployment planning.

5. **Crime Prevention through Environmental Design (CPTED) Interventions Align with Data** , Four (4) CPTED assessments were completed across key LMCH sites: Boullee Recreation Unit, Wharncliffe Site Office, 872 William Patio, and 580 Dundas (North End). CPTED assessments and recommendations directly address the same sites and activity types driving the highest incident volume, validating environmental design as a data-driven prevention strategy rather than an aesthetic enhancement.

In summary, the transition to a structured, seven-category incident reporting framework marks a significant improvement in how Community Safety performance and risk are understood.

The 2025 data confirm that demand is concentrated, predictable, and tied to identifiable drivers. The framework ensures that both operational pressure and preventative effort are visible, allowing leadership and the Board to focus on strategic, long-term safety outcomes rather than short-term incident counts.

PREPARED and SUBMITTED BY:	REVIEWED by:
Margaret Forbes Senior Manager of Community Safety and Wellbeing	Sara De Candido, COO

## Q1 Human Resources Manager Update PSH-2026-23

**TO:** LMCH People Services and Housing Committee

**FROM:** Dirk Volschenk, Manager of Human Resources

**SUBJECT:** Human Resources Manager Update – Q1 2026

**DATE:** April 8, 2026

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### **PURPOSE:**

To provide the People, Service and Housing Committee with an overview of the key activities in Human Resources for Q1 of 2026 and to provide information for the matters identified as priorities for Human Resources in 2026.

### **RECOMMENDATION:**

That the People, Service and Housing Committee receives this report for information and be provided an opportunity to provide feedback on the work being performed in the Human Resources department and provide input on strategies and initiatives for 2026

### **BACKGROUND:**

LMCH is committed to providing quality, accessible, affordable, and sustainable housing to those in need in our community. LMCH has also committed itself to fostering a healthy organization, and the work of our Human Resources Team is critical to supporting the organization in meeting this strategic objective as well as providing every employee with an opportunity to be healthy and happy working at LMCH.

### **Employee Engagement**

LMCH was proud to host its annual Years of Service Recognition event on February 5<sup>th</sup>, 2026, which was well attended by staff and the Board. Special recognition is given to an employee who has achieved their 25<sup>th</sup> year of service with LMCH, and holding these events is crucial to provide recognition to our employees and create opportunities to celebrate and spend time with one another, outside of the context of daily work.

We are striving to create a greater awareness of LMCH as an Employer in the London and Middlesex region by attending and being visible at Job Fairs. On January 27<sup>th</sup>, 2026, LMCH participated in the CMO Job Fair hosted by the Deshkan Ziibiing – Chippewas of

the Thames First Nation Employment and Training, and we will be participating in the London Economic Development Corporation Job Fair on April 21<sup>st</sup>, 2026.

LMCH also believes that to more effectively engage and retain our employees, we need to involve them directly in the conversation, and therefore, we are targeting completion by Q3 of 2026 to develop and introduce an all-staff engagement survey. It is our belief that engaging employees' level of engagement and their sentiment on the initiatives that are currently happening at LMCH is critical to ensure operational success and alignment.

## **Organizational Health and Safety**

During Q1 of 2026, LMCH continued to expand its occupational health and safety program by supporting leadership and employees through consultation, the addition of services, and the creation of position-specific safe work practices. LMCH has made N95 fit testing available to employees, completed occupational air quality testing, safe work practices for equipment to move dumpsters, and safe discarding of batteries, developed an electronic SDS repository, and provided PPE and procedures for entering units with high pest infestation present.

LMCH has also started with monthly safety and wellness communications to reinforce procedures, availability of support, and to continue advocating for a safe and healthy workplace culture.

These tasks and role-specific procedures and initiatives are crucial to ensure that the Health and Safety Program of LMCH moves beyond broad policy commitments and generalized training and starts providing information and direction on specific occupational risks to ensure they are effectively managed.

## **Employee Attendance and Absences**

Employee Attendance numbers have improved in Q1, driven by an increase in overall staffing numbers, which has brought our organizational average below our targeted goal. This is a positive improvement, as operationally having more staff present at work contributes to organizational effectiveness and health.

Despite this improvement, we continue our focus on individual cases of high absenteeism to bring awareness of actual attendance and offer support to those employees. In Q1 we held two Management workshops on Attendance Management on February 24<sup>th</sup> and 26<sup>th</sup>, and scheduled four (4) attendance management meetings. The program will continue into Q2.

LMCH is also adopting a more strategic and holistic approach to looking at employee attendance as an indicator of employee health and wellness. We are currently reviewing

our sources of information regarding long-term absences, WSIB lost time, and return to work numbers to ensure we are reporting and tracking more accurately. This information, along with additional considerations for KPI's, will be presented for input during the Q2 report.

### Staff Training and Development

LMCH continues with its initiative to train all employees in *Non-Violent Crisis Intervention* and trained 10 employees during Q1, with a dedicated focus on our new Custodian Employee group. At present, 90% of LMCH employees have completed the training, and we will continue into Q2.

During Q1, we have connected with our operational leaders to identify training priorities for 2026 and have received proposals for functional training in RentSmart, RGI administration, and Property Management certification.

We are also adopting a broader approach to providing information and education to our employee group through small, informal learning sessions referred to as "lunch and learns," where we hope to have all Management and staff contribute to information sharing and education in areas relevant to others.

We are also developing a formal staff professional development policy and program to provide support to our employee group for ongoing professional development and growth. We believe that by investing in our employees through professional development, it will lead to direct service improvements for our Tenants, but also serve as a retention tool for our employees.

### Performance Management Program

Through work and collaboration with the Executive Committee, we have developed and will be implementing a formal performance management program for the CEO position, and will further be rolled out to all Senior Leaders through the course of 2026.

<b>PREPARED and RECOMMENDED BY:</b>
Dirk Volschenk <b>MANAGER OF HUMAN RESOURCES</b>

## Re-Appointment of Directors STAFF REPORT 2026 -15

**TO:** LMCH Board of Directors

**FROM:** Paul Chisholm, Chief Executive Officer

**SUBJECT:** Re-appointment of Directors

**DATE:** April 9, 2026

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### **PURPOSE:**

To receive Board Approval for the reappointment of Gary Bezaire and Cara Awcock to the LMCH Board of Directors.

### **RECOMMENDATION:**

That the Board of Directors:

1. Approve the recommendation to reappoint Director Gary Bezaire to the LMCH Board of Directors at the LMCH AGM scheduled for June 2026.
2. Approve the recommendation to reappoint Director Cara Awcock to the LMCH Board of Directors at the LMCH AGM scheduled for June 2026.
3. Request that the appointment term be for a period of 4 years ending at the close of the AGM held in 2031 for the fiscal year ending December 31, 2030.
4. Authorize LMCH staff to take the necessary actions to give effect to the above recommendations.

### **BACKGROUND:**

Through a governance review completed in 2021, the LMCH Board of Directors has nine (9) Directors. Specifically, the recommendations included the appointment of two (2) tenants of LMCH to the Board of Directors, four (4) community members, two (2) elected officials from the City of London, and one (1) elected official from Middlesex County.

Gary Bezaire was appointed to the LMCH Board of Directors in June 2021. He was appointed to the LMCH Board of Directors through the Shareholder after a public recruitment and selection process. Gary is the longest-serving LMCH Board Member. Gary would be a community representative on the Board of Directors.

*LMCH Board of Directors Meeting  
April 16, 2026*

Cara Awcock was appointed to the LMCH Board of Directors in March 2023. She was appointed to the LMCH Board of Directors by the Shareholders after a public recruitment and selection process. C. Awcock would be a tenant representative on the Board of Directors.

The Board Chair has spoken to both Directors, and they are pleased to be reappointed to the Board for an additional term.

## CONCLUSION

The intent of the shareholder was to support staggered terms for the Board of Directors to support continuity for the Board. The reappointment of these two Directors to the Board supports this outcome.

Directors are eligible for reappointment two (2) times and serve up to 9 years.

## FINANCIAL IMPACT:

There are no additional financial impacts identified through this report.

<b>PREPARED BY:</b>
<b>PAUL CHISHOLM, CHIEF EXECUTIVE OFFICER</b>