

**Board of Health for
Peterborough Public Health
AGENDA
Board of Health Meeting
Wednesday, August 11, 2021 – 5:00 p.m.**

1. Call to Order

Mayor Andy Mitchell, Chair

1.1. Welcome and Opening Statement

Land Acknowledgement

We respectfully acknowledge that Peterborough Public Health is located on the Treaty 20 Michi Saagiig territory and in the traditional territory of the Michi Saagiig and Chippewa Nations, collectively known as the Williams Treaties First Nations, which include: Curve Lake, Hiawatha, Alderville, Scugog Island, Rama, Beausoleil, and Georgina Island First Nations.

Peterborough Public Health respectfully acknowledges that the Williams Treaties First Nations are the stewards and caretakers of these lands and waters in perpetuity, and that they continue to maintain this responsibility to ensure their health and integrity for generations to come. We are all treaty people.

Recognition of Indigenous Cultures

We recognize also the unique history, culture and traditions of the many Indigenous Peoples with whom we share this time and space. We give thanks to the Métis, the Inuit, and the many other First Nations people for their contributions as we strengthen ties, serve their communities and responsibly honour all our relations.

2. Confirmation of the Agenda

3. Declaration of Pecuniary Interest

4. Consent Items to be Considered Separately

Board Members: *Please identify which items you wish to consider separately from section 10 and advise the Chair when requested. For your convenience, circle the item(s) using the following list: 10.2 a b c d e*

5. Delegations and Presentations

6. Board Chair Report

7. Confirmation of the Minutes of the Previous Meeting

- [Cover Report](#)
 - a. [July 21, 2021](#)

8. Business Arising From the Minutes

8.1. Video: Legal Matters - Update for the Board of Health Section Meeting at the alPHA 2021 Conference and AGM

- [Web Hyperlink](#)

9. Staff Reports

9.1. Presentation: COVID-19 Update

- [Cover Report](#)
 - a. Presentation (*to be circulated*)

9.2. Presentation: 2021-22 Budget Approval

- Cover Report (*to be circulated*)
 - a. Presentation (*to be circulated*)

10. Consent Items

10.1. Correspondence for Direction

10.2. Correspondence for Information

- [Cover Report](#)
 - a. [alPHA – July E-newsletter](#)
 - b. [alPHA – Ontario Reopening Plan](#)
 - c. [Ministry of Health – 2021-22 & 2022-23 One-Time Funding](#)
 - d. [Minister Elliott – PPH Unfunded Programs](#)
 - e. [Southwestern – Recovery and Post-Pandemic Funding](#)

10.3. Staff Reports

10.3.1. Staff Report: 2020-21 Internal Statement and Settlement Form - Healthy Babies Healthy Children Program

- Staff Report
- a. Statements *(to be circulated)*
- b. Settlement Forms *(to be circulated)*

10.3.2. 2020-21 Internal Statement and Transfer Payment Annual Reconciliation - Infant and Toddler Development Program

- Staff Report
- a. Statements *(to be circulated)*
- b. Reconciliation *(to be circulated)*

10.4. Committee Reports (nil)

11. New Business

12. In Camera to Discuss Confidential Matters

*In accordance with the Municipal Act, 2001,
Section 239(2)(d), Labour relations or employee negotiations*

13. Motions for Open Session

14. Date, Time, and Place of the Next Meeting

Wednesday, September 8, 2021, 6:15 p.m.
Lower Level, Administration Building, 123 Paudash Street, Hiawatha First Nation

15. Adjournment

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Approval of Minutes
DATE:	August 11, 2021
PREPARED BY:	Natalie Garnett, Board Secretary
APPROVED BY:	Dr. Rosana Salvaterra, Medical Officer of Health

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health approve the minutes of the meeting held on July 21, 2021.

ATTACHMENTS

- a. [Minutes, July 21, 2021](#)

**Board of Health for
Peterborough Public Health
DRAFT MINUTES
Board of Health Meeting
Wednesday, July 21, 2021 – 5:30 p.m.
Multipurpose Room, Jackson Square, 185 King Street**

In Attendance:

Board Members:

**Councillor Gary Baldwin
Deputy Mayor Bonnie Clark
Councillor Henry Clarke
Deputy Mayor Matthew Graham
Councillor Nodin Knott
Mayor Andy Mitchell, Chair
Dr. Hans Stelzer
Councillor Don Vassiliadis
Councillor Kathryn Wilson**

Staff:

**Ms. Brittany Cadence, Manager of Communications and IT
Ms. Donna Churipuy, Director of Public Health Programs
Ms. Natalie Garnett, Recorder
Ms. Alida Gorizzan, Executive Assistant
Dr. Rosana Salvaterra, Medical Officer of Health
Mr. Larry Stinson, Director of Operations**

1. Call to Order

The Chair, called the meeting to order at 5:30 p.m.

2. In Camera to Discuss Confidential Matters

MOTION:

That the Board of Health for Peterborough Public Health moved In Camera at 5:31 p.m. to discuss one item under Section 239(2)(d), Labour relations or employee negotiations.

Moved: Councillor Baldwin
Seconded: Deputy Mayor Clark
Motion carried. (M-2021-065)

MOTION:

That the Board of Health for Peterborough Public Health rise from In Camera at 5:58 p.m.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-066)

The meeting resumed in Open Session at 6:04 p.m.

3. Motions for Open Session

4. Confirmation of the Agenda

MOTION:

That the Board of Health for Peterborough Public Health confirm the agenda as amended (addition of item 12.2k).

Moved: Deputy Mayor Graham

Seconded: Councillor Baldwin

Motion carried. (M-2021-067)

5. Declaration of Pecuniary Interest

6. Consent Items to be Considered Separately

MOTION:

That the following items be passed as part of the Consent Agenda: 12.2 a-b and d-k.

Moved: Councillor Wilson

Seconded: Councillor Clarke

Motion carried. (M-2021-068)

MOTION (12.2 a-b, d-k):

That the Board of Health for Peterborough Public Health receive the following for information:

- a. Letter dated June 18, 2021 from the Board Chair to PRHC regarding support for their new Master Plan.*
- b. Email dated June 21, 2021, alPHa e-newsletter.*
- d. Letter dated June 23, 2021 from the Board Chair to Minster Elliott regarding post-pandemic funding and recovery.*
- e. Letter dated June 30, 2021, from alPHa to the Office of the Ombudsman regarding their Annual Report and public health oversight.*
- f. Letter dated July 5, 2021, from the Officer of the Ombudsman to alPHa, in response to their June 30th letter.*
- g. North Bay Parry Sound – Public Health Funding*
- h. Simcoe Muskoka – Public Health Funding*

- i. *Sudbury and Districts – Public Health Funding*
 - j. *Windsor Essex – Public Health Funding*
 - k. *Correspondence, BOH Chair Opinion Editorial (July 15/21)*
- Moved: Councillor Wilson
Seconded: Councillor Clarke
Motion carried. (M-2021-068)

7. Declarations and Presentations

8. Board Chair Report

MOTION:

That the Board of Health for Peterborough Public Health receive the report, Medical Officer of Health Farewell Activities, for information.

- Moved: Deputy Mayor Clark
Seconded: Councillor Clarke
Motion carried. (M-2021-069)

9. Confirmation of the Minutes of the Previous Meeting

MOTION:

That the minutes for the meeting of the Board of Health for Peterborough Public Health on June 9, 2021 be approved as presented.

- Moved: Deputy Mayor Graham
Seconded: Councillor Vassiliadis
Motion carried. (M-2021-070)

10. Business Arising From the Minutes

11. Staff Reports

11.1 Presentation: COVID-19 Update

MOTION:

That the Board of Health for Peterborough Public Health receive the presentation, COVID-19 Update, for information.

- Moved: Councillor Clarke
Seconded: Councillor Vassiliadis
Motion carried. (M-2021-071)

11.2 Presentation: PPH Recovery Plan

MOTION:

That the Board of Health for Peterborough Public Health receive the presentation, PPH Recovery Plan, for information.

Moved: Deputy Mayor Clark

Seconded: Dr. Stelzer

Motion carried. (M-2021-072)

11.3 Staff Report: Unfunded Public Health Programs

MOTION:

That the Board of Health for Peterborough Public Health:

- *receive the staff report, Unfunded Public Health Programs, for information; and*
- *correspond to the Minister of Health, with copies to the Premier of Ontario, Ontario Chief Medical Officer of Health, local MPPs, the Association of Local Public Health Agencies (alPHA) and Ontario Boards of Health.*

Moved: Deputy Mayor Clark

Seconded: Deputy Mayor Graham

Motion carried. (M-2021-073)

12. Consent Items

MOTION (12.2.c):

That the Board of Health for Peterborough Public Health receive the following for information:

- *Email dated June 21, 2021, alPHA Disposition of Resolutions from the 2021 Annual General Meeting*

Meeting.

Moved: Dr. Stelzer

Seconded: Deputy Mayor Graham

Motion carried. (M-2021-074)

13. New Business

13.1 Medical Officer of Health Transition Discussion

MOTION:

That the Board of Health for Peterborough Public Health receive the report, Medical Officer of Health Transition, for information.

Moved: Councillor Vassiliadis

Seconded: Councillor Baldwin

Motion carried. (M-2021-075)

13.2 Community Pandemic Celebration Event

MOTION:

That the Board of Health for Peterborough Public Health receive the oral presentation, on the Community Pandemic Celebration Event, for information.

Moved: Councillor Wilson

Seconded: Deputy Mayor Graham

Motion carried. (M-2021-076)

14. Date, Time, and Place of the Next Meeting

The next Board of Health for Peterborough Public Health meeting will be held on August 11, 2021 at 5:30 p.m. in the Multipurpose Room, Peterborough Public Health (185 King Street).

15. Adjournment

MOTION:

That the meeting be adjourned.

Moved by: Deputy Mayor Graham

Seconded by: Deputy Mayor Clark

Motion carried. (M-2021-077)

The meeting was adjourned at 6:52 p.m.

Chairperson

Medical Officer of Health

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Presentation: COVID-19 Update
DATE:	August 11, 2021
PREPARED BY:	Donna Churipuy, Director of Public Health Programs

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health receive the presentation, *COVID-19 Update*, for information.

ATTACHMENTS

- a. Presentation (to be circulated)*

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Correspondence for Information
DATE:	August 11, 2021
PREPARED BY:	Alida Gorizzan, Executive Assistant
APPROVED BY:	Dr. Rosana Salvaterra, Medical Officer of Health

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health receive the following for information:

- a. Email dated July 20, 2021, Association of Local Public Health Agencies (alPHA) e-newsletter.
- b. Letter dated July 22, 2021 from alPHA to Dr. Kieran Moore regarding Reopening of Ontario.
- c. Letter dated July 27, 2021 from Minister Elliott to the Board Chair regarding one-time funding for 2021-22 and 2022-23.
- d. Letter dated August 6, 2021 from the Board Chair to Minister Elliott regarding unfunded programs.

Correspondence from other local public health agencies:

- e. Southwestern – Public Health Funding

From: allhealthunits <allhealthunits-bounces@lists.alphaweb.org> **On Behalf Of** Loretta Ryan
Sent: Tuesday, July 20, 2021 5:56 PM
To: All Health Units <AllHealthUnits@lists.alphaweb.org>
Cc: board@lists.alphaweb.org; alPHa communications <communications@alphaweb.org>
Subject: [allhealthunits] July 2021 Issue of alPHa's Information Break

PLEASE ROUTE TO:

All Board of Health Members
All Members of Regional Health & Social Service Committees
All Senior Public Health Managers



July 20th, 2021

This update is a tool to keep alPHa's members apprised of the latest news in public health including provincial announcements, legislation, alPHa activities, correspondence, and events. Visit us at alphaweb.org.

COVID-19 Update

As part of the response to COVID-19, alPHa continues to represent the public health system and work with key stakeholders. To keep members up-to-date, alPHa shares Ministry of Health Situation Reports and COVID-19-related news. If you are not receiving these, please get in touch with the contact person at your health unit who distributes information on behalf of alPHa.

[Visit the Ministry of Health's page on guidance for the health sector](#)

[View the Ministry's website on the status of COVID-19 cases](#)

[Go to Public Health Ontario's COVID-19 website](#)

[Visit the Public Health Agency of Canada's COVID-19 website](#)

[alPHa's recent COVID-19 related submissions can be found here](#)

alPHa Meets with the new Chief Medical Officer of Health

Over the past few weeks, alPHa and COMO H representatives have met with the new Chief Medical Officer of Health, Dr. Kieran Moore. We look forward to working with Dr. Moore on the response to and recovery from COVID-19, as well as ensuring a robust, responsive, and sustainable public health system that will serve the health protection and promotion needs of all Ontarians.

Meeting with the Association of Municipalities of Ontario (AMO)

alPHA's new Executive Committee met with the President from the Association of Municipalities of Ontario, Gradyon Smith, and his staff. AMO is an important partner and key stakeholder for local public health. alPHA representatives appreciated the opportunity to discuss strategic priorities, areas of mutual interest and to further explore opportunities to continue to work together.

Conference and Annual General Meeting Wrap Up

This year's Conference and AGM ***Ontario's Public Health System: Challenges – Changes – Champions held on June 8th, 2021*** celebrated the Northwest and focused on the critical role of Ontario's public health system.

A big thank you again to everyone who attended and helped make alPHA's first ever online conference and AGM a huge success! **Proceedings from this year's conference have been [uploaded](#). These and other materials can be found on our [website](#).** Please note that for the proceedings, sign-in is required to download. The proceedings can also be provided upon request.

Congratulations to the winner of our prize for filling out the conference survey, Sally Hagman, from the Algoma Public Health Unit!

alPHA Correspondence

Through policy analysis, collaboration, and advocacy, alPHA's members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention, and surveillance services in all of Ontario's communities. Correspondence since the last Newsletter include:

- June 30th, 2021 - [alPHA Letter - Ombudsman Annual Report](#)
- June 29th, 2021 - [alPHA Letter - Outgoing CMOH](#)
- June 28th, 2021 - [alPHA Letter - Welcome CMOH Dr. Moore](#)
- June 23rd, 2021 - [CMHO Communiqué de Presse - Vaccins COVID-19](#)
- June 23rd, 2021 - [COMOH Press Release - COVID Vaccines](#)
- June 14th, 2021 - [COMOH Letter - School Reporting Recommendations](#)

A complete online library is available [here](#).

Boards of Health: Shared Resources

A resource [page](#) is available on alPHA's website for Board of Health members to facilitate the sharing of and access to orientation materials, best practices, by-laws, resolutions, and other resources. If you have a best practice, by-law or any other resource that you would like to make available, please send a file or a link with a brief description to gordon@alphaweb.org and for posting in the appropriate library.

Resources available on the alPHA website include:

- [Orientation Manual for Board of Health](#)
 - [Review of Board of Health Liability \(PowerPoint presentation\)](#)
 - [Governance Toolkit](#)
 - [Risk Management for Health Units](#)
 - [Healthy Rural Communities Toolkit](#)
 - [The Ontario Public Health Standards](#)
 - [Public Appointee Role and Governance Overview](#)
 - [Ontario Boards of Health by Region](#)
 - [List of Units sorted by Municipality](#)
 - [List of Municipalities sorted by Health Unit](#)
-

PHO Resources

Vaccine Resources

PHO is actively monitoring, reviewing and assessing relevant research related to COVID-19 vaccines. Check out new vaccine resources or visit PHO's [COVID-19 Vaccines](#) page for more information.

- [Fundamentals: Immunization Technique for Intramuscular \(IM\) Injections – Deltoid Muscle](#)
 - [Myocarditis and Pericarditis Following COVID-19 mRNA Vaccines](#)
 - [Evidence Brief: Risk of COVID-19 Transmission from Vaccinated Cases](#)
 - [COVID-19 Vaccination for Post-Exposure Prophylaxis \(PEP\) or Ring Vaccination – What We Know So Far](#)
 - Recorded event presentations:
 - [COVID-19 vaccine program surveillance - Part One: Vaccine safety surveillance](#)
 - [COVID-19 vaccine program surveillance - Part Two: Monitoring vaccine impact and surveillance for special populations](#)
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Upcoming PHO Events

- [July 20: PHO Rounds: COVID-19 and HVAC: A Practical Perspective](#)

Interested in our upcoming events? Check out our [Events](#) page to stay up-to-date with all PHO events. Missed an event? Check out our [Presentations](#) page for full recordings our events.

Travax Renewal Time!

It is renewal time for Travax (Travel Health Information Website) subscription licenses for alPHA members who have existing subscriptions, and it is also an opportunity for Public Health Units to sign up. For more information, members can visit www.shoreland.com. To obtain the alPHA member discount, please contact Maggie Liefert, Shoreland, Inc. at 703-399-5424.

RRFSS Update

Attention Health Units: It's time to start planning your fall RRFSS data collection!

The RRFSS survey is up and running again and Health Units can still join RRFSS in 2021 for the fall data collection cycle: September–December. RRFSS has a very large selection of health-related topics and questions available to survey your local community as well as many COVID-19 related questions such as *Precautions (Distancing and Face coverings)*, *Employment*, *Financial Impacts*, *Food Security* and *Vaccine Readiness*. Read an example of how one Health Unit has been able to utilize COVID-19 RRFSS data [here](#).

Visit the RRFSS website for more information (including a current list of all topics and questions): www.rfss.ca or contact the RRFSS Coordinator, [Lynne Russell](#) to find out how your health unit can collect local data by joining RRFSS.

News Releases

The most up to date news releases from the Government of Ontario can be accessed [here](#).

Association of Local Public Health Agencies

480 University Avenue, Suite 300 | Toronto ON | M5G 1V2
416-595-0006 | www.alphaweb.org | info@alphaweb.org



alPHa Sections:

Boards of Health
 Section

Council of Ontario
 Medical Officers of
 Health (COMOH)

**Affiliate
 Organizations:**

Association of Ontario
 Public Health Business
 Administrators

Association of
 Public Health
 Epidemiologists
 in Ontario

Association of
 Supervisors of Public
 Health Inspectors of
 Ontario

Health Promotion
 Ontario

Ontario Association of
 Public Health Dentistry

Ontario Association of
 Public Health Nursing
 Leaders

Ontario Dietitians in
 Public Health

July 27, 2021

Dr. Kieran Moore,
 Chief Medical Officer of Health
 21st Floor, 393 University Ave,
 Toronto, ON M5G 2M2

Dear Dr. Moore

Re: A Cautious and Measured Reopening

On behalf of the Association of Local Public Health Agencies (alPHa) and its member Medical Officers of Health, Boards of Health and Affiliate organizations, we are writing today to urge a cautious and measured approach to reopening the province as we strive to vaccinate as many Ontarians as possible.

As the leaders of Ontario's local public health system, we extend our thanks to you and the Government of Ontario for leadership that has enabled us all to reduce the impacts of COVID-19. It has been a long road but together we have brought Ontario's daily cases down dramatically since the peak of the third wave and have fully vaccinated nearly 70% of our eligible population. It hasn't been easy, and challenges remain, but we can all be proud of the work Ontarians have done to get to this point.

Continued management of the pandemic and capable leadership will be crucial to enabling a strong and sustainable recovery of society and the economy. As we look to other jurisdictions such as the United Kingdom, Israel, and the Netherlands - countries that are experiencing a surge of cases despite relatively high vaccination rates – it is clear that Ontario remains vulnerable to the more infectious and severe variants that are emerging, especially within our unvaccinated population.

A cautious and measured approach to reopening will still be required as we make every effort to maximize vaccine coverage of the eligible population. With 80% of eligible Ontarians having received at least one dose, we can be confident that this will be the minimum number of fully vaccinated individuals in the very near future. We must remember however that 20% of the Ontario population is still nearly 3 million and includes every individual under the age of 12. We must also acknowledge that even this is very likely well below the threshold for herd immunity for this particular virus, which has been estimated to be as high as 90%.

As we look to the next phase of the response, we strongly recommend that the following approaches be taken to carefully manage the ongoing threat of COVID-19 while regaining the many benefits of an open economy.

1. Maintain Infection Prevention Measures in Public Places and Workplaces

As the province of Ontario moves to open more fully it is important that we maintain certain measures to control transmission, given that we are unlikely to achieve herd immunity in the foreseeable future. We fully recognize and support the importance of a more open economy, noting its measurable influence on many of the determinants of health. However, the experience of other countries has shown that the need for ongoing infection prevention measures will remain at least until we are able to make an evidence-based decision that they are no longer necessary.

- Wearing masks in public indoor and enclosed spaces regardless of vaccination status
- Screening all employees every workday/shift for symptoms of COVID-19
- Maximizing ventilation including by moving operations outdoors where possible
- Retaining capacity limits and other measures that allow for physical distancing within the available space of the business where practicable
- Maintaining a workplace safety plan
- Maintaining paid sick leave to reduce workplace attendance for COVID cases

These measures will allow businesses to resume full operations, while keeping the population safe, and employees healthy enough to work.

2. Continue an All-of-Society Vaccination Effort

Ontario's success vaccinating nearly 70% of its eligible population with two doses in a little more the last 100 days is thanks to a multi-provider effort: public health, hospitals, pharmacies, primary care, and emergency medical services all playing a part.

The province's vaccination taskforce has hinted at potentially narrowing COVID-19 vaccination efforts to just primary care and pharmacies. While this may be reasonable farther into the future, we believe that Ontario and its economy will be best protected if opportunities to get vaccinations are maximized.

As we move to the next phase of the vaccine roll-out, engaging and convincing complacent and hesitant Ontarians to get their shot will succeed only with ongoing efforts from all of these providers. Each has regular contact and trust with different segments of the population. Public health (like many of its community partners such as social service agencies) serves many populations who do not have links to other health care; primary care providers have relationships with families that can be leveraged to convince whole households to get immunized; pharmacies provide many local access points to vaccination in the community; hospitals can immunize any unvaccinated patients who fall into their care. Workplaces, post-secondary learning institutions and community associations can also be leveraged to assist in a variety of ways.

3. Policy Measures to Increase Vaccine Uptake

Public policy plays an essential role in maximizing vaccine coverage, ensuring that the reopening of our society and our economy can get to a sustainable footing sooner. We believe that policy measures that incentivize vaccination should be considered to give complacent or hesitant Ontarians a nudge to seek their vaccine. The approach taken with long term care facilities serves as an excellent example of what can be pursued in other venues such as acute care facilities, home care, primary and secondary schools, colleges, and universities.

Similarly, workplaces should be encouraged to have in place policies that encourage and support the vaccination of their employees. We note that both the OMA and RAO have called for mandatory vaccination of health care workers as a duty of care to their patients. The province has struck an excellent balance with long term care, requiring these facilities to have policies that document the vaccination of staff and encourages them through education to be vaccinated. Such an approach would be helpful to augment vaccination in these other venues, achieving enhanced safety from COVID-19 in other public service and workplace settings.

The development of a vaccination certificate has been proposed by the Ontario COVID-19 Science Table on this topic¹ as an incentive for Ontario's eligible population to become fully vaccinated, and to allow for businesses and services to continue to open more safely during periods of increased transmission. While their report notes a lack of evidence on the impact of such on vaccination coverage or on COVID transmission, the report does cite vaccination certificates as a possible means of enabling businesses, services, and public venues to remain open for in person attendance for those who are vaccinated during higher levels of COVID transmission. It also notes concerns that have been raised regarding equity of access both to vaccinations and for such services with this approach (such as for persons of lower income, members of racial minorities, blue collar shift workers). However, it is likely that the call for this approach will increase with the increase in transmission that is being predicted in the weeks and months to come. As such it would be prudent for the province to consider and further investigate the potential for this approach.

4. Develop policy to ensure the opening and continued operations of in-person schooling

The pandemic has greatly impacted children and youth, with Ontario schools being shut down longer than other jurisdictions in Canada. Policy is critical to ensuring the opening and continued operations of in-person schooling. Schools are not only important for the education and health of students but enable parents and guardians to participate in the workforce. It is beyond the scope here to comment on the comprehensive report by the Ontario COVID-19 Science Advisory Table, we would stress that the early months of school re-opening will be a critical time period to maintain preventive measures within schools and the broader community.

As children under 12 cannot yet be vaccinated, schools will be uniquely vulnerable to COVID-19 outbreaks this fall. While illness in children tends to be milder on average, children can transmit to others particularly within households.² We strongly support and thank the government for extending school-focused public health nurses for the coming school year. These dedicated resources to prevent and contain outbreaks are key to ensuring schools continue to operate. They will also play important roles in contributing to the catch-up of vaccinations in Grade 7/8 students, future childhood COVID-19 vaccinations, and supporting school mental health initiatives.

We look forward to reviewing and commenting on the Province's comprehensive plan to get students back to school, learning in person full time when it is released.

5. Maintain Local Resources for Pandemic Control

Local efforts in this pandemic around contact tracing, managing outbreaks, and testing have slowed the spread of COVID-19. As we reopen and rely less on restrictions in society to control COVID-19, we increasingly rely on local contact tracing and outbreak management, as well as immunizations.

As the winter approaches and COVID-19 can spread more easily, we may again see outbreaks in long-term care, congregate settings, and workplaces. Case, contact and outbreak management will be critical to reducing the risk of continued spread. Local resources need to be preserved and possibly augmented for these purposes.

¹ <https://covid19-sciencetable.ca/sciencebrief/covid-19-vaccine-certificates-key-considerations-for-the-ontario-context/>

² <https://www.nejm.org/doi/full/10.1056/NEJMc2031915>

In the last 16 months, public health, even more so than the hospital sector, has had to cancel most routine services, diverting over 80% of our resources to the pandemic response. Like hospitals, which will need years to catch-up on their surgical backlog, public Health will need years to make up lost ground in virtually every program area outlined in the Ontario Public Health Standards. Significant lost opportunities for health, including chronic disease prevention, addictions and mental health, healthy child growth and development, and childhood immunizations, must be recovered.

There is a great need for a commencement of the recovery of local public health programs to address these needs, and to identify priority areas early in the recovery process. Sufficient and stable funding invested in local public health capacity will be essential to keep infections low while we work to vaccinate as many people as possible, continue to contain infectious through the winter season, and allow public health to catch-up on critical services that have been interrupted by the pandemic.

The coming months will present important opportunities for our province, but the risks cannot be ignored. If we succeed in keeping cases low and vaccination rates high, Ontario has the potential to see a sustained return to more normal economic and social life. But the potential for resurgence remains and decisions made in the coming weeks will determine which scenario Ontario experiences. As the front-line of Ontario's public health response to this pandemic, we believe the recommendations in this letter will give us the best chance to seize the opportunities while minimizing the risk.

Our members, as Ontario's front-line and pre-eminent public health experts, are more than willing to provide further advice and input to ensure the success of Ontario's COVID-19 response and recovery and we look forward to an invitation to discuss this with you further. To schedule a meeting, please have your staff contact Loretta Ryan, Executive Director, alPHa, at loretta@alphaweb.org or 416-595-0006 x 222.

Sincerely,



Dr. Paul Roumeliotis,
alPHa President



Dr. Charles Gardner,
Chair, Council of Ontario Medical
Officers of Health (COMOH)



Wess Garrod,
Chair, Boards of Health Section

COPY: Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery

The Association of Local Public Health Agencies (alPHa) is a not-for-profit organization that provides leadership to the boards of health and public health units in Ontario. alPHa advises and lends expertise to members on the governance, administration and management of health units. The Association also collaborates with governments and other health organizations, advocating for a strong, effective and efficient public health system in the province. Through policy analysis, discussion, collaboration, and advocacy, alPHa's members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention and surveillance services in all of Ontario's communities.

Ministry of Health

Office of the Deputy Premier
and Minister of Health

777 Bay Street, 5th Floor
Toronto ON M7A 1N3
Telephone: 416 327-4300
Facsimile: 416 326-1571
www.ontario.ca/health

Ministère de la Santé

Bureau du vice-premier ministre
et du ministre de la Santé

777, rue Bay, 5^e étage
Toronto ON M7A 1N3
Téléphone: 416 327-4300
Télécopieur: 416 326-1571
www.ontario.ca/sante



eApprove-72-2021-262

July 22, 2021

Mayor Andy Mitchell
Chair, Board of Health
Peterborough County-City Health Unit
185 King Street
Peterborough ON K9J 2R8

Dear Mayor Mitchell:

I am pleased to advise you that the Ministry of Health will provide the Board of Health for the Peterborough County-City Health Unit up to \$1,829,800 in one-time funding for the 2021-22 funding year and up to \$198,000 in one-time funding for the 2022-23 funding year, to support the provision of public health programs and services in your community, including extraordinary costs associated with preventing, monitoring, detecting, and containing COVID-19 in the province.

Ontario recognizes the considerable time and resources necessary for public health units to continue to effectively respond to COVID-19, including leading the roll-out of the COVID-19 vaccination program at the local level.

The Ministry of Health has approved one-time funding to support approximately 50% of estimated eligible COVID-19 extraordinary costs at this time, and will work with you to monitor and track more detailed and accurate requirements and spending for COVID-19 through in-year financial reports and make any adjustments to funding, as required, throughout the 2021 funding year.

Dr. Kieran Moore, Chief Medical Officer of Health, will write to the Peterborough County-City Health Unit shortly concerning the terms and conditions governing the funding.

.../2

Mayor Andy Mitchell

Thank you for the important service that your public health unit provides to Ontarians, and your ongoing dedication and commitment to addressing the public health needs of Ontarians.

Sincerely,

A handwritten signature in cursive script that reads "Christine Elliott".

Christine Elliott
Deputy Premier and Minister of Health

c: Dr. Rosana Salvaterra, Medical Officer of Health, Peterborough County-City Health Unit
Dr. Kieran Moore, Chief Medical Officer of Health
Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery

August 6, 2021

The Honourable Christine Elliott
Deputy Premier and Minister of Health
christine.elliott@pc.ola.org

Dear Minister Elliott,

As per its recommendation on July 21st, 2021, I am writing on behalf of the Board of Health for Peterborough Public Health (PPH) requesting the Ministry of Health (MOH) consider funding an increase to our cost-shared base budget to accommodate the addition of 2.8 full-time equivalent (FTE) staff positions and monies to update the Environmental Health database used by PPH, for the implementation of the *Menu Labelling*, *Child Visual Health and Vision Screening*, and *Consumption and Treatment Services Compliance and Enforcement* protocols under the Ontario Public Health Standards (OPHS).

In 2018, the *Menu Labelling* and the *Child Visual Health and Vision Screening* protocols were added to the *OPHS and Protocols*. The BOH appreciated receiving one-time funding for the implementation of the *Menu Labelling* protocol, however we are concerned that no additional base funding is being provided to support the sustained implementation of the *Menu Labelling* protocol.

In addition on June 10, 2021, PPH received a memo from the Chief Medical Officer of Health indicating an amendment of the OPHS which included the addition of a requirement to deliver the Ontario Seniors Dental Care Program (OSDCP) in accordance with the revised *Oral Health Protocol, 2021* and amendments to the Effective Public Health Practice; Healthy Environments; and Substance Use and Injury Prevention Program Standards to require routine and complaint-based inspections of Consumption and Treatment Services and reference to the new *Consumption and Treatment Services Compliance and Enforcement Protocol, 2021 (CTSCEP)*. Although the OSDCP is 100% funded by the Ministry of Health, no additional funding was announced to support the implementation of the CTSCEP.

This is a particular concern in Peterborough as community partners have made application to the provincial government for a Consumption and Treatment Site (CTS) for 220 Simcoe Street, Peterborough. A Health Canada Exemption to allow for illicit drug use on site has been approved. A separate application for CTS funding was submitted to the MOH for operations funding for staffing/facility and awaits approval.

Although the 2021 amended standards and associated protocols are welcomed, local public health agencies (LPHAs) like PPH have very limited capacity to implement them without a supporting budget. As noted above, LPHAs are already carrying a load of previously mandated protocols that have never been funded, including the vision screening and menu labelling protocols. In addition, due to the COVID-19 pandemic, LPHAs are behind in implementing many requirements of these programs and need all allocated FTE for programs and services that have fallen behind. We are concerned that these FTE cannot be stretched even further to fulfill the requirements of these unfunded programs.

With the anticipated return to regular programs and services in the upcoming fall and winter and the ongoing demands of COVID-19 response, it will be critical that programs that have not been operating for the past 16 months respond to the gaps and inequities created or exacerbated during the pandemic. We fear that the addition of new mandates may jeopardize the prioritization of programs and services that are intended to reduce health inequities and are evidence based.

More specifically we note:

Rationale for CTS-Related Funding

The addition of the new CTS protocol will add more pressure to divert finite resources from other programs and services to complete these new requirements. It is anticipated that additional Health Promoter time, up to 1.0 FTE in the first year, and funding to support reporting would be required to fulfill the requirements of the new protocol including routine inspections, responding to complaints, creating an inspection and reporting module, additional licenses for the inspection and reporting software, and collaborating with stakeholders.

Rationale for Increased Public Health Inspector Resources

Prior to the pandemic, PPH dedicated Public Health Inspector (PHI) resources to focus on menu review and inspections of existing regulated food service premises that fall under the *Healthy Menu Choices Act, 2015* (HMCA), and inspections of each new food service premise within their first year of operation. Compliance to date with this protocol is estimated at 60% and was identified as an Environmental Health priority in 2020. Additional PHI time, up to 0.5 FTE, is needed in 2022 to complete HMCA inspections (not routine inspections).

Rationale for Vision Screening Staffing Request

Prior to the emergency response to COVID-19, at PPH, the Vision Screening program was subsidized by staffing from the Oral Health and Ministry of Children, Community and Social Services (MCCSS)-funded programs, including a Certified Dental Assistant and an Administrative Assistant, amounting to a total of 1.3 FTE. Moving into the post-pandemic era this support will not be possible since many of the Oral Health screening program recipients will be priority for services. All of the staffing allocated to these programs will be needed to make up for lost time and ensure the oral health of school children is assessed and appropriate treatment offered.

Our Board of Health, looks forward to working with the Ministry to ensure that all mandated programs are adequately resourced and that health of the community continues to be protected.

Yours truly,

Original signed by

Mayor Andy Mitchell
Chair, Board of Health

cc: Hon. Doug Ford, Premier of Ontario
Dr. Kieran Moore, Incoming Ontario Chief Medical Officer of Health
Dave Smith, MPP Peterborough-Kawartha
David Piccini, MPP Northumberland-Peterborough South
Laurie Scott, MPP Haliburton-Kawartha Lakes-Brock
Association of Local Public Health Agencies
Ontario Boards of Health

July 20, 2021

The Honourable Christine Elliott
Deputy Premier and Minister of Health
Ministry of Health
777 Bay Street, 5th Floor
Toronto, ON M7A 2J3

delivered via email
christine.elliott@ontario.ca

Dear Minister Elliott,

On behalf of the Board of Health for Southwestern Public Health (SWPH), we wish to applaud the continuing commitment shown by you and your government for the financial support of local public health units in their ongoing COVID-19 pandemic response. The collective effort of all levels and branches of government in their prioritization of the health and well-being of Ontarians has been truly exceptional and heartening.

Much progress has been made in increasing vaccine rates, decreasing cases, alleviating pressures on our healthcare system, containing transmission, and implementing public health measures against COVID-19 whereby we have now progressed to Step 3 in the Roadmap to Reopen Ontario. Indeed, the improvements we have seen in recent weeks is cause for a thoughtful and thorough consideration of our larger recovery plans as the pandemic has significantly impacted our many and diverse communities.

As other health units have experienced, the extensive resources required to support our COVID response resulted in the necessary reduction or cessation of many programs and services. As we look towards the latter part of the fiscal year and into 2022, we note that much work remains as SWPH engages in rebuilding programs and services, addressing community needs, reviving regional connections and supports, and assessing the aftereffect of public health's focused pandemic work on local populations.

In essence, the recovery of post-pandemic public health programs and services cannot rest upon the support of local funders alone. Without a continuation of mitigation funding, our board will need to reduce staffing numbers that would be needed to resume standard public health services as well as address ongoing COVID-19 work, such as vaccine outreach and immunization, possible booster vaccinations, and case and contact management in schools and workplaces.

Given the leadership role public health units will play in their continued COVID-19 response, the extensive resources required to ensure Ministry targets and requirements are met and maintained, and public health's commitment to the mandates identified in the Ontario Public Health Standards (OPHS), we request that the Ministry commit to the following:

- Extension of mitigation funding for the 2022 fiscal year;
- Extension of the availability of one-time funding for COVID-19 extraordinary expenses;
- An increase in base funding levels to accommodate increasing operating costs since 2019; and,
- Multi-year funding dedicated to COVID recovery to restore and return programs to OPHS requirement levels.

Sufficient and sustained financial support from you and your government is a key component of public health recovery planning. At this time, we await approval of SWPH's 2021 Annual Service Plan and COVID-19 extraordinary expense one-time funding submission – plans and scope which have considerably exceeded our initial estimation given the priority mandate to vaccinate local populations posthaste. I would emphasize once more that our local plans to meet the needs of our communities hinge upon a timely indication of vital funding commitments for 2022 as well as this current year.

Our Board extends its sincere thanks for considering this critical request.

Yours truly,



Larry Martin
Chair, Board of Health

c: Cynthia St. John, CEO, Southwestern Public Health
The Honourable Doug Ford, Premier of Ontario
Ernie Hardeman, MPP Oxford County
Jeff Yurek, MPP Elgin Middlesex London
Dr. Kieran Moore, Chief Medical Officer of Health
Loretta Ryan, Association of Local Public Health Agencies
Ontario Boards of Health

PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH – STAFF REPORT

TITLE:	2020-2021 Internal Statement and Settlement Form - Healthy Babies Healthy Children Program
DATE:	August 11, 2021
PREPARED BY:	Dale Bolton, Manager, Finance and Property
APPROVED BY:	Larry Stinson, Director of Operations Rosana Salvaterra, Medical Officer of Health

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health:

- receive the staff report, 2020-2021 Internal Statement and Settlement Form - Healthy Babies Healthy Children Program
- approve the 2020/2021 Audited Statements and Settlement Form for the Healthy Babies Healthy Children Program.

FINANCIAL IMPLICATIONS AND IMPACT

The Board of Health is required by contract with the Ministry of Children, Community and Social Services (MCCSS) to provide to the Ministry the 2020/2021 Healthy Babies Healthy Children (HBHC) Program Audited Financial Statements.

The Province also requires that the Settlement Form be Certified by the Medical Officer of Health, that the Settlement Form is true, correct and agrees with the books and records of the organization. The Chairperson of the Board must Certify that the Settlement Form and Certification by the Medical Officer of Health was received by the Board of Health.

BACKGROUND

The Board of Health approved the 2020/2021 budget request of \$928,413 on March 11, 2020 for period of April 1 2020 through March 31/2021.

The HBHC program is funded 100% by the MCCSS. HBHC is a prevention and early intervention home visiting program providing services during the prenatal period and to families with children from birth up to their transition to school. The program's intent is to optimize newborn and child healthy growth and development and reduce health inequities for families receiving service.

DECISION HISTORY

The Board of Health has hosted and supported the HBHC program since its inception in 1998. The HBHC program is part of the Ontario Public Health Standards and assists Peterborough Public Health in continuing to meet its mandate through coordinated efforts with the Infant Toddler Development Program and the Healthy Growth & Development Standard. It also assists in building on our leadership role by developing important linkages in our community and providing a valued service to help maintain the Community-Centred Focus.

The Audited expenditures for the year totalled \$724,913. This is well below the approved budget due to savings in salary, benefits, and travel resulting from the redeployment of staff to support COVID-19 throughout the fiscal period and conducting client contact primarily through virtual means as opposed to through home visits. Further savings resulted from some staff gapping and the lack of requirement for health benefits for temporary staff in the program. Historically, the program spends in its entirety the provincial allocation and no funds are returned to the Ministry at the end of the year. As reported on the audited financial statements, \$203,500 is due back to the Province. Although underspent for this reporting period, at this time it is not anticipated that the budget approval for 2021/2022 will be impacted.

The Audited Financial Statements are drafted in accordance with Generally Accepted Accounting Principles.

STRATEGIC DIRECTION

The submission of the on the Annual Settlement Forms along with the Audited Financial Statements will allow the Board to fulfil financial contractual obligations with the MCCSS.

ATTACHMENTS

Attachment A – Draft Internal Financial Statement, Healthy Babies Healthy Children Program
Attachment B – Draft Settlement Forms, Healthy Babies Healthy Children Program

PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH – STAFF REPORT

TITLE:	2020-2021 Internal Statement and Transfer Payment Annual Reconciliation - Infant and Toddler Development Program
DATE:	August 11, 2021
PREPARED BY:	Dale Bolton, Manager, Finance and Property
APPROVED BY:	Larry Stinson, Director of Operations Dr. Rosana Salvaterra, Medical Officer of Health

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health:

- receive the staff report, 2020/2021 Infant and Toddler Development Program Internal Statement and Transfer Payment Annual Reconciliation, for information; and
- approve the 2020/2021 Audited Statements and Annual Reconciliation for the Infant and Toddler Development Program.

FINANCIAL IMPLICATIONS AND IMPACT

The Board of Health is required by contract with the Ministry of Children, Community and Social Services (MCCSS) to provide to the Ministry the 2020/2021 Infant and Toddler Development Audited Financial Statements.

The Province also requires that the Annual Program Expenditure Reconciliation be Certified by the Medical Officer of Health, that the Annual Expenditure Reconciliation is true, correct and agrees with the books and records of the organization. The Chairperson of the Board must Certify that the Annual Program Expenditure Reconciliation and Certification by the Medical Officer of Health was received by the Board of Health.

BACKGROUND

The Board of Health approved the 2020/2021 budget request of \$262,074 including funding from the province of \$242,423 on March 11, 2020.

The ITDP is funded 100% by the MCCSS. The ITDP is for families with infants and young children who may become delayed in their development because of prematurity, social, or economic concerns; are diagnosed with special needs, such as Down syndrome, cerebral palsy, or spina bifida; or are found to be delayed in development through screening. An approved budget is required to continue to operate this program and offer these important supports to families in the community.

DECISION HISTORY

Although not part of the Ontario Public Health Standards, the ITDP assists Peterborough Public Health in continuing to meet its mandate through coordinated efforts with the Healthy Babies Healthy Children program and the Healthy Growth & Development Standard. It also assists in building on our leadership role by developing important linkages in our community and providing a valued service to help maintain the Community-Centred Focus.

The expenditures for the year totalled \$229,957. This is below the approved budget due to savings in salary and benefits for staffing redeployment to support COVID-19 throughout the fiscal period. The budget approval included use of deferred funding in the amount of \$19,651. As reported in the financial statements, the use of additional funds was not required to balance operations due to the savings in salary, benefits, and travel reported. The excess deferred funds can be used in 2021/2022 to offset program costs.

Historically, the program spends in entirety the provincial allocation and no funds are returned to the Ministry at the end of the year. As reported on the audited financial statements, \$12,466 is due back to the Province. Although underspent for this reporting period, at this time it is not anticipated that the budget approval for 2021/2022 will be impacted.

The Audited Financial Statements are drafted in accordance with Generally Accepted Accounting Principles.

STRATEGIC DIRECTION

The submission of the on the Annual Reconciliation Report along with the Audited Financial Statements will allow the Board to fulfil financial contractual obligations with the MCCSS.

ATTACHMENTS

Attachment A – Draft Internal Report and Financial Statements, Infant and Toddler Development Program

Attachment B – Draft Annual Program Expenditure Reconciliation, Infant and Toddler Development Program