

**Board of Health for
Peterborough Public Health
AGENDA
Board of Health Meeting
Wednesday, May 11, 2022 – 5:30 p.m.
Virtual Meeting**

1. Call to Order

Mayor Andy Mitchell, Chair

1.1. 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 10.3.1 10.4.1 a b c d e f 10.4.2 a b c 10.4.3 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. April 13, 2022

8. Business Arising From the Minutes

9. Staff Reports

9.1. Presentation: Opioid Drug Poisoning Harms Update - Harm Reduction

- Cover Report
- a. Presentation

9.2. Presentation: COVID-19 Update

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

9.3. Staff Report: Ministry of Health 2022 Cost-Shared and One-Time Budget Approval

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

10. Consent Items

10.1. Correspondence for Direction

10.2. Correspondence for Information

- Cover Report
- a. alPHa – E-newsletter
- b. Minister Elliott – Provincial Opioid Crisis Response
- c. Minister Elliott – Work Deployment Measures for BOHs
- d. Minister Elliott – PPH Budget Letter

10.3. Staff Reports

10.3.1. Q1 2022 Status Report (Jan. 1 – Mar. 31 2022)

- Staff Report

10.4. Committee Reports

10.4.1. Governance

- Cover Report
- a. Minutes, May 26, 2020
- b. 2-140, By-Law Number 5 - Powers, Duties and Term of Office of the Chairperson and Vice Chairperson ([web hyperlink](#))
- c. 2-152, Board Leadership Cttee Membership Selection ([web hyperlink](#))
- d. 2-200, Effective Governance by Effective Members ([web hyperlink](#))
- e. 2-348, Terms of Reference ([web hyperlink](#))
- f. Committee Appointment

10.4.2. Indigenous Health Advisory Circle

- Cover Report
- a. Minutes, October 27, 2020
- b. 2-352, Terms of Reference ([web hyperlink](#))
- c. Committee Appointments

10.4.3. Stewardship

- Cover Report
- a. Minutes, October 27, 2021
- b. Q1 2022 Financial Report
- c. 2-60, Accommodation ([web hyperlink](#))
- d. 2-130, By-Law #4 - Appointment of an Auditor ([web hyperlink](#))
- e. 2-354, Terms of Reference ([web hyperlink](#))

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, June 8, 2022 – 5:00 p.m., Peterborough Public Health or virtual.

15. Adjournment

ACCESSIBILITY INFORMATION: Peterborough Public Health is committed to providing information in a format that meets your needs. To request this document in an alternate format, please call us at 705-743-1000.

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Approval of Meeting Minutes
DATE:	May 11, 2022
PREPARED BY:	Alida Gorizzan, Executive Assistant
APPROVED BY:	Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health approve the minutes of the meeting held on April 13, 2022.

ATTACHMENTS

- a. [Board of Health Minutes, April 13, 2022](#)

**Board of Health for
Peterborough Public Health
DRAFT MINUTES
Board of Health Meeting
Wednesday, April 13, 2022 – 5:00 p.m.
Virtual Meeting**

In Attendance:

Board Members:

**Councillor Gary Baldwin
Deputy Mayor Bonnie Clark
Councillor Henry Clarke (*joined at 5:18 p.m.*)
Deputy Mayor Matthew Graham
Councillor Nodin Knott
Mayor Andy Mitchell, Chair
Mr. Dan Moloney
Dr. Hans Stelzer
Councillor Don Vassiliadis
Councillor Kathryn Wilson**

Staff:

**Ms. Hallie Atter, Acting Director, Health Promotion
Ms. Brittany Cadence, Manager, Communications and IT
Ms. Donna Churipuy, Director, Health Protection & Chief Nursing Officer
Ms. Dale Bolton, Manager, Finance & Property
Ms. Alida Gorizzan, Executive Assistant (Recorder)
Dr. Thomas Piggott, Medical Officer of Health & CEO
Mr. Larry Stinson, Director of Operations
Ms. Claire Townshend, Acting Manager, Family & Community Health
Ms. Krista Ward, Manager, Child Health Services**

Guests:

Ms. Jessica Penner, Peterborough Drug Strategy

1. Call to Order

Mayor Mitchell called the meeting to order at 5:01 p.m.

1.1. Welcome: Dan Moloney, Provincial Appointee

The Chair welcomed Mr. Moloney, recently appointed by the Province for a two-year term to the Board of Health.

1.2. Welcome: New PPH Managers

Ms. Atter introduced new PPH Managers Ms. Claire Townshend, Acting Manager, Family & Community Health and Ms. Krista Ward, Manager, Child Health Services

2. Confirmation of the Agenda

The agenda was adopted as circulated.

3. Declaration of Pecuniary Interest

4. Consent Items to be Considered Separately

MOTION:

That the following items be passed as part of the Consent Agenda: 10.1b, 10.2b,c, 10.3.4

Moved: Councillor Baldwin

Seconded: Mr. Moloney

Motion carried. (M-2022-032)

MOTION (10.1b):

That the Board of Health for Peterborough Public Health:

- receive the letter dated March 16, 2022 from Windsor-Essex County Health Unit (WECHU) for information;
- endorse the position from WECHU, and the originating request from the Association of Ontario Public Health Business Administrators dated February 9, 2022 regarding extending Ontario Regulation 116/20 Work Deployment Measures for Boards of Health for the duration of public health units' response to the COVID-19 pandemic; and,
- communicate this support to Minister Elliott, with copies to the Premier of Ontario, the Ontario Chief Medical of Health, local MPPs, the Association of Local Public Health Agencies, and Ontario Boards of Health.

Moved: Councillor Baldwin

Seconded: Mr. Moloney

Motion carried. (M-2022-032)

MOTION (10.2b,c)

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

- Letter dated March 22, 2022 from Minister Elliott to the Board Chair regarding the appointment of Dr. Piggott.
- Letter dated April 8, 2022 to Minister Elliott from the Board Chair regarding the health and racial equity, denouncing acts and symbols of hate.

Moved: Councillor Baldwin

Seconded: Mr. Moloney

Motion carried. (M-2022-032)

MOTION (10.3.4):

That the Board of Health for Peterborough Public Health:

- receive the letter dated April 1, 2022 from the Association of Local Public Health Agencies (alPHA) regarding 2022-23 membership; and,
- approve the 2022-23 membership fee in the amount of \$ \$10,871.29.

Moved: Councillor Baldwin

Seconded: Mr. Moloney

Motion carried. (M-2022-032)

5. Delegations and Presentations

6. Board Chair Report

7. Confirmation of the Minutes of the Previous Meeting

That the minutes for the meeting of the Board of Health for Peterborough Public Health on March 9, 2022, be approved.

Moved by: Deputy Mayor Clark

Seconded by: Councillor Wilson

Motion carried. (M-2022-033)

8. Business Arising From the Minutes

9. Staff Reports

9.1. Presentation: Opioid Drug Poisoning Harms Update

Ms. Atter was joined by Ms. Penner who presented on behalf of the Peterborough Drug Strategy.

MOTION:

That the Board of Health for Peterborough Public Health receive the presentation, Update on Opioid-Related Harms, for information.

Moved: Councillor Baldwin

Seconded: Councillor Clark

Motion carried. (M-2022-034)

9.2. Presentation: COVID-19 Update

MOTION:

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

Moved: Councillor Baldwin
Seconded: Deputy Mayor Graham
Motion carried. (M-2022-035)

9.3. Presentation: Road to Recovery - Overview of PPH Plan

MOTION:

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

Moved: Councilor Clarke

Seconded: Dr. Stelzer

Motion carried. (M-2022-036)

10. Consent Items

MOTION (10.1a):

That the Board of Health for Peterborough Public Health:

- receive the letter dated March 16, 2022 from Simcoe Muskoka District Health Unit (SMDHU) for information;
- endorse the following actions recommended by SMDHU:
 1. Create a multi-sectoral task force to guide the development of a robust provincial opioid response plan that will ensure necessary resourcing, policy change, and health and social system coordination.
 2. Expand access to evidence informed harm reduction programs and practices including lifting the provincial cap of 21 Consumption and Treatment Service (CTS) Sites, funding Urgent Public Health Needs Sites (UPHNS) and scaling up safer opioid supply options.
 3. Explore revisions to the current CTS model to address the growing trends of opioid poisoning amongst those who are using inhalation methods.
 4. Expand access to opioid agonist therapy for opioid use disorder through a range of settings (e.g. mobile outreach, primary care, emergency departments), and a variety of medication options.
 5. Provide a long-term financial commitment to create more affordable and supportive housing for people in need, including people with substance use disorders.
 6. Address the structural stigma and harms that discriminate against people who use drugs, through provincial support and advocacy to the Federal government to decriminalize personal use and possession of substances and ensure increased investments in health and social services at all levels.
 7. Increase investments in evidence-informed substance use prevention and mental health promotion initiatives that provide foundational support for the health, safety and well-being of individuals, families, and neighbourhoods, beginning from early childhood.

- communicate this support by writing to Minister Elliott, with copies to the following: Associate Minister of Mental Health and Addictions, Attorney General of Ontario, Chief Medical Officer of Health, Local MPs and MPPs, Local Councils, Ontario Health, Association of Local Public Health Agencies, and Ontario Boards of Health.

Moved by: Mr. Moloney

Seconded by: Deputy Mayor Graham

Motion carried. (M-2022-037)

MOTION (10.2a):

That the Board of Health for Peterborough Public Health receive the Association of Local Public Health Agencies (alPHA) e-newsletter dated March 11, 2022, for information.

Moved by: Mr. Moloney

Seconded by: Deputy Mayor Graham

Motion carried. (M-2022-037)

MOTION (10.3.1):

That the Board of Health for Peterborough Public Health:

- receive the staff report, 2022-23 Budget Approval - Healthy Babies, Healthy Children Program, for information; and,
- recommend approval of the 2022-23 budget for the Healthy Babies, Healthy Children (HBHC) program in the total amount of \$928,413.

Moved by: Mr. Moloney

Seconded by: Deputy Mayor Graham

Motion carried. (M-2022-037)

MOTION (10.3.2):

That the Board of Health for Peterborough Public Health:

- receive the staff report, 2022-23 Budget Approval - Infant and Toddler Development Program (ITDP), for information; and
- recommend the approval of the 2022-23 budget for the Infant and Toddler Development Program in the total amount of \$242,423.

Moved by: Mr. Moloney

Seconded by: Deputy Mayor Graham

Motion carried. (M-2022-037)

MOTION (10.3.4):

That the Board of Health for Peterborough Public Health receive the staff report, 100-Day Progress Report, for information.

Moved by: Mr. Moloney

Seconded by: Deputy Mayor Graham

Motion carried. (M-2022-037)

MOTION

That the Board of Health for Peterborough Public Health approve the submission of a resolution to alPHA for consideration at the June 2022 Annual General Meeting requesting advocacy to the Provincial Government on several points:

- that the current mitigation funding be continued until such time as the cost-shared arrangement is reset to 75/25 for all cost-shared programs and that the Province once again assumes 100% funding for those programs identified as such in the public health budget for 2018-19.
- that COVID recovery be supported by 100% one-time funding from the Province to assist LPHAs in addressing non-COVID program deficits.
- that any amalgamation of existing public health units group units together that have similar communities of interest.
- that any reform of public health includes a local governance model.
- that the unique challenges of rural and urban communities be distinctly incorporated in any re-organization or modernization initiatives; and,
- that any re-organization, modernization or recovery initiatives be implemented with the meaningful participation of First Nations and Indigenous peoples.

Moved by: Councillor Clarke

Seconded by: Councillor Baldwin

Motion carried. (M-2022-038)

11. New Business

12. In Camera to Discuss Confidential Matters

MOTION:

That the Board of Health for Peterborough Public Health move In Camera at 7:05 p.m. to discuss two items under Section 239(2)(d), Labour relations or employee negotiations.

Moved: Mr. Moloney

Seconded: Deputy Mayor Clark

Motion carried. (M-2022-039)

MOTION:

That the Board of Health for Peterborough Public Health rise from In Camera at 7:10 p.m.

Moved: Councillor Clarke

Seconded: Dr. Stelzer

Motion carried. (M-2021-040)

13. Motions for Open Session

MOTION:

That the Board of Health for Peterborough Public Health ratify the agreement with the Ontario Public Service Employees Union (OPSEU).

Moved: Deputy Mayor Clark
Seconded: Mr. Moloney
Motion carried. (M-2021-041)

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

Wednesday, May 11, 2022 – 5:30 p.m., at Peterborough Public Health or virtual.

15. Adjournment

MOTION:

That the meeting be adjourned.

Moved: Deputy Mayor Graham

Seconded: Deputy Mayor Clark

Motion carried. (M-2022-042)

The meeting was adjourned at 7:11 p.m.

Chairperson

Medical Officer of Health

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Opioid Drug Poisoning Harms Update – Harm Reduction
DATE:	May 11, 2022
PREPARED BY:	Carolyn Doris, Manager, Family & Community Health
APPROVED BY:	Hallie Atter, Acting Director, Health Promotion Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health receive the presentation, *Opioid Drug Poisoning Harms Update – Harm Reduction*, for information.

ATTACHMENTS:

- a. [Presentation](#)

Opioid Drug Poisoning Update

Harm Reduction

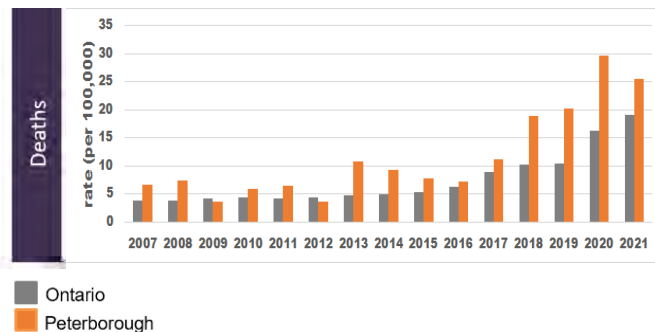
May 11, 2022

Carolyn Doris, Manager, Family & Community Health

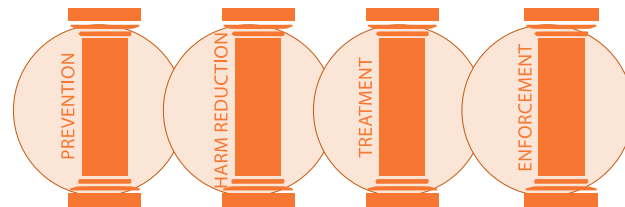


Early Warning & Surveillance System

April 2022



A Four Pillar Approach



Harm reduction

noun

A term used to describe public health approaches that are designed to minimize negative consequences related to misusing substances, including alcohol and drugs.

Why Harm Reduction?

- Drug consumption practices to reduce or eliminate risk of transmission of Blood Borne Illnesses (i.e., HIV, Hepatitis B, Hepatitis C)
- Reduce/prevent drug overdoses
- Address stigma - harm reduction and people who use drugs
- Embrace health equity for all including reorientation of health services

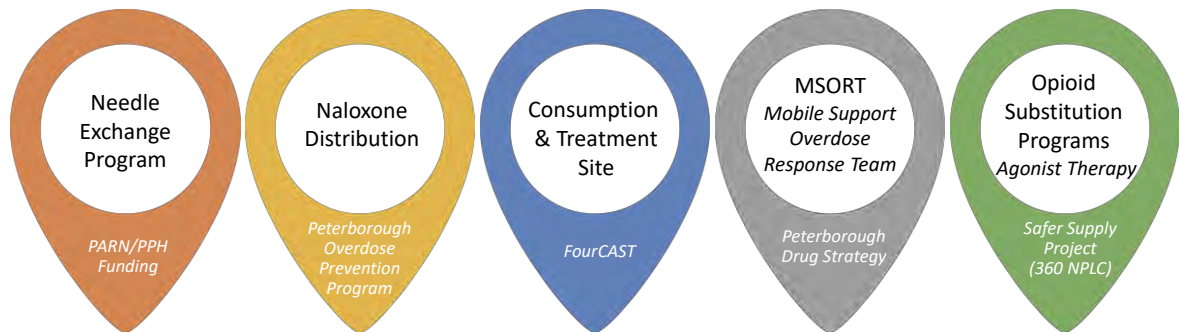


Harm Reduction in the Health System

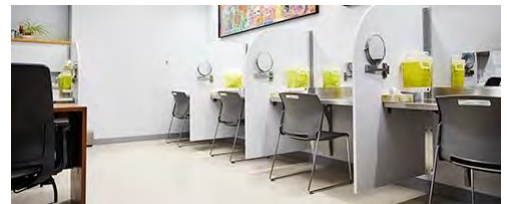
- Harm reduction is embraced throughout the health system
- Examples:
 - People diagnosed with chronic diseases (i.e., heart disease, cancer) are encouraged to make small changes (i.e., diet, physical activity) or consider other medical interventions
 - Smoking cessation goal may not be to quit smoking completely but rather reducing/making multiple quit attempts/nicotine replacement therapy
- Stigma around drug use and its health effects is an issue



Local Harm Reduction Examples



Harm Reduction **Works** Supervised Consumption Site *Evidence*



- Over 100 Supervised Consumption Sites (SCS) internationally including 38 in Canada (21 in Ontario)
- 40+ peer reviewed studies on *InSite* (Canada's first legal SCS) demonstrates **success** in public health objectives and no association between operations and increased crime or initiation of injection drug use
- International systematic review (studies from Europe, Australia, Canada) found SCS:
 - do not contribute to increased rates of drug injecting, drug trafficking or crime
 - associated with reduced levels of public drug injections and dropped syringes
- People who use drugs have identified SCS challenges when limited access to services are available
- To be successful as a harm reduction strategy, SCS design must optimize access & mitigate need for people who use drugs to use in alternate settings



Photo: Health Canada

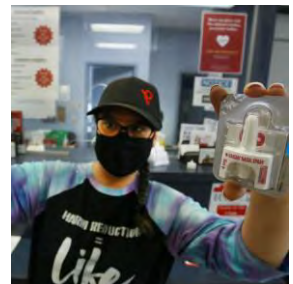
Lived Expertise of People Who Use Drugs

- FourCAST (with PPH support) has launched the CTS Community Liaison Committee Table (CTS CLC)
 - Balance perspectives of multiple stakeholders and create an opportunity for ongoing engagement with CTS
 - Nearby businesses and residents, local service providers, people who use drugs, and service users are invited to apply (up to 17 reps)
 - Goal is to work collaboratively to keep community informed and engaged in efforts that result in a safe and inclusive place for all
- Peterborough Drug Strategy Panel also engages people with lived expertise
- **Effective harm reduction models must be informed and driven by people who use drugs**



PPH and Harm Reduction

- Ministry funding to PPH for 2 program areas
 - Distribution of Harm Reduction Supplies
 - Needle/Syringe Exchange Program delivered by PARN
 - Found Needle Protocol & Working Group
 - Ontario Harm Reduction Program Enhancement
 - Local opioid response initiatives
 - Implementation of opioid overdose early warning systems – PPH's Early Warning & Surveillance System
 - Naloxone Distribution



Photos: Peterborough Examiner



**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Presentation: COVID-19 Update
DATE:	May 11 2022
PREPARED BY:	Donna Churipuy, Director, Health Protection Division

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 – STAFF REPORT

TITLE:	Ministry of Health 2022 Cost-Shared and One-Time Budget Approval
DATE:	May 11, 2022
PREPARED BY:	Dale Bolton, Manager of Finance and Property
APPROVED BY:	Larry Stinson, Director of Operations Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health receive the staff report, *Ministry of Health 2022 Cost-Shared and One-Time Budget Approval*, for information.

FINANCIAL IMPLICATIONS AND IMPACT

On May 3rd, Peterborough Public Health (PPH) received the 2022 Cost-Shared and One-Time Budget approvals from the Ministry of Health (MOH).

Programs Funded Jan. 1 to Dec. 31, 2022	2022 Provincial Share of Budget Request	2022 Provincial Share of Approved Budget	Comments
Cost-Shared Budget* – Provincial Share	\$7,130,500	\$7,130,500	Approved as submitted based on 1% increase over 2021 allocation.

**The Cost-Shared Budget above includes Mandatory Public Health Programs*

The cost-shared includes all programs funded by the MOH as well as Curve Lake and Hiawatha First Nations, and the County and City of Peterborough, but does not include other PPH programs and services that are funded 100% by the MOH, or by other Ministries of the Province.

Early communication from the MOH indicated that the Board could request up to a 1% funding increase over the 2021 provincial allocation of \$7,059,900. This increase was not known at the time of the Board budget approval in November 2021, however was requested as part of the Annual Service Plan (ASP) submission. An increase of \$70,600 from the province was approved by the province increasing the provincial portion of the cost-shared budget to \$7,130,500. This amount will be pro-rated for the period of April 1 through December 31, 2022 therefore the 2022 annual allocation will be \$7,112,850. The local portion of the 1% budget increase is

\$30,257, based on a 70/30 MOH/Municipal Partner allocation, which will be funded through the Contingency Reserve.

In 2022, no increases were provided by the Province for 100% funded base programs with the exception of the Ontario Seniors Dental Program. Please refer to Table 1 for an overview of these programs, budget comparisons and comments.

Table 1: 100% Funded Base Programs – 2021 and 2022 Approval Comparison

Programs Funded January 1 to December 31, 2022	2022 Budget Approval	2021 Budget Approval	Comments
Ontario Seniors Dental Program	\$898,100	\$700,100	28.3% increase. Budget request approved as submitted.
Indigenous Public Health Programs	\$10,000	\$10,000	No change.
Medical Officer of Health/ AMOH Compensation Initiative	\$73,700	\$73,700	No change. Allocation will be based on submission of MOH Compensation application.

The Ontario Seniors Dental Program launched in October 2018. Since inception, the program has experienced an increase in clients due to the higher population of eligible seniors in our area seeking access to dental treatment. The budget increase of \$198,000 will provide necessary funds to hire additional clinical staff to reduce potential delay in accessing services and provide the best service and care to our clients.

As part of the ASP, the Province provided an opportunity to submit up to eight one-time projects including COVID-19 Response and COVID-19 Vaccination. Similar to prior years, the Province did not approve all one-time requests as submitted. Table 2 below reports the approvals received.

Table 2: 100% One-Time Funded Programs

Programs Funded January 1, 2022 to December 31, 2022	2022 Budget Approval	2022 Budget Submission	Comments
COVID-19 Response	\$975,000	\$2,565,659	Received 38% of the budget request. Anticipate in-year adjustments based on actuals.
COVID-19 Vaccination	\$2,095,300	\$2,855,507	Received 73% of the budget request. Anticipate in-year adjustments based on actuals.
Cost-Sharing Mitigation	\$1,015,000	\$1,015,000	No change. Funds to offset local partner contribution increase to 30% from 25%.

Programs Funded April 1, 2022 to March 31, 2023	2022 Budget Approval	2022 Budget Submission	Comments
Needle Exchange Program	\$19,000	\$ -	Not requested in budget.
PHI Practicum Student	\$20,000	\$20,000	Funding approved for 2 PHI Students for 12 weeks.
SFO Enforcement Tablet Upgrades	\$4,400	\$32,625	Funding for purchase of 2 tablets and equipment for Tobacco Enforcement Program staff.
School-Focused Nurses Initiative (to December 2022)	\$448,000	\$448,000	Funding for 6 Public Health Nurses to support school boards, schools, and other child care settings.
Temporary Retention Incentive Pay for Nurses	\$147,500	\$ -	Not requested with budget submission. New Provincial initiative to stabilize nursing workforce.
Electronic Community Record	\$0	\$287,000	Not approved.
I.T. Equipment and Security Enhancement	\$0	\$94,300	Not approved.
Nurse-Family Partnership	\$0	\$82,750	Not approved.
Recovery and Restoration of Programs	\$0	\$1,719,890	Not approved.

The Province approved a reduced amount for COVID-19 Response and COVID-19 Vaccination. In total, \$3,070,300 was approved compared to \$5,421,166 in the submission, or 57%. Although a reduced amount, the MOH has committed to funding eligible COVID-related expenditures for local public health agencies (LPHAs).

The Needle Exchange program is administered on behalf of the Board by Peterborough AIDS Resource Network (PARN). One-time funding of \$19,000 will be used for extraordinary costs associated with delivering this program including the purchase of needles and syringes, associated disposal costs, and other eligible operating costs.

The Ministry approved one-time funding of \$4,400 for the purchase of tablets and peripheral devices to support the Smoke-Free Ontario tobacco inspection program. The approval will help increase performance and efficiency for the two tobacco enforcement staff working out in the community. The submission included a request for an additional thirteen replacement tablets for Public Health Inspectors supporting the Healthy Environment Program.

The Province approved funding of \$147,500 as part of the Temporary Retention Incentive for Nurses program to support nursing retention and stabilize the current nursing workforce. Eligible full-time nurses are entitled to receive up to \$5,000 and part-time and casual nurses a prorated payment. The eligibility period is based on work performed during the period of February 13 through April 22, 2022 and payments being made in two installments including the spring and fall.

As noted above each LPHA was permitted to submit up to eight one-time funding requests as part of the ASP. PPH submitted eight requests, four of which were not approved for funding, including a one-time request of \$1,719,890 for the recovery and restoration of core programs. The Executive and Management Teams will consider which of these initiatives are critical for implementation in 2022 and pursue alternate funding strategies and/or delivery mechanisms.

DECISION HISTORY

The Board of Health approved the cost-shared budget for PPH in November 2021. The Board also approved the submission for the budget to the MOH for 2022, which included the request for COVID-19 one-time funding, in February 2022. Similar to the prior year, the Ministry has assured through communications to LPHAs that funding will be provided for all eligible COVID expenditures and that approvals and payments will be adjusted through the quarterly reports.

STRATEGIC DIRECTION

The Provincial approval will allow Management to plan for delivery of programs within approved funding limits.

ATTACHMENTS

- a. Presentation *(to be circulated)*

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Correspondence for Information
DATE:	April 13, 2022
PREPARED BY:	Alida Gorizzan, Executive Assistant
APPROVED BY:	Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

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

- a. [alPHa e-newsletter dated April 8, 2022.](#)
- b. [Letter dated May 2, 2022 from the Board Chair to Minister Elliott regarding the provincial opioid crisis response.*](#)
- c. [Letter dated May 2, 2022 from the Board Chair to Minister Elliott regarding Ontario Regulation 116/20, Work Deployment Measures for Boards of Health.*](#)
- d. [Letter dated May 2, 2022 from Minister Elliott to the Board Chair regarding funding for the 2021-22 and 2022-23 fiscal periods.](#)

**Enclosures previously circulated, available upon request.*

Sent: April 8, 2022 4:21 PM
To: All Health Units
Subject: [allhealthunits] alPHa Information Break - April 2022

PLEASE ROUTE TO:

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



April 8th, 2022

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 Elections Primer

Last month, we released the [alPHa 2022 Elections Primer](#) with great success. The document is meant to encourage provincial election candidates to acknowledge the role public health plays in protecting Ontarians, particularly in response to COVID-19. All 34 local public health units have played a vital role

on the frontlines and remain essential to the **province's health and economic recovery**. The elections primer was based on **alPHA's** *Public Health Resilience in Ontario Clearing the Backlog, Resuming Routine Programs, and Maintaining an Effective Covid-19 Response*. Read the [report](#) and [executive summary](#) along with **alPHA's** updated ["What is Public Health?" brochure](#).

We would like to acknowledge and thank Dr. Charles Gardner and the staff at Simcoe Muskoka District Health Unit for their work on the Elections Primer.

alPHA Conference and Annual General Meeting

June 14, 2021 - 8:00 AM-4:00 PM (ET)

alPHA's 2022 Annual Conference is taking place on June 14th and will continue the conversation on the **critical role of local public health in the province's Public Health System**. Highlights include **alPHA's** Annual General Meeting, consideration of Resolutions, Plenary Sessions with guest speakers, Section Meetings, and the presentation of the 2022 Distinguished Service Awards. The event is co-hosted by **alPHA** and the Eastern Ontario Health Unit, with generous support from the **University of Toronto's** Dalla Lana School of Public Health.

We have an exciting line-up of conference speakers including Matt Anderson (President & CEO, Ontario Health), Dr. Kieran Moore (Chief Medical Officer of Health), Dr. Ross Upshur (Professor, DLSPH), and speakers from Public Health Ontario. **alPHA's President, Dr. Paul Roumeliotis, is the Conference Chair.**

Our thanks to the Eastern Ontario Health Unit for co-hosting the event and to the University of **Toronto's Dalla Lana School of Public Health** for their generous support.

Please click here for the [June 2022 alPHA AGM Notice and Package](#) or click on the links below for the individual documents.

- [Notice for the 2022 alPHA Annual General Meeting](#)
- [Call for 2022 alPHA Resolutions](#)
- [Call for 2022 alPHA Distinguished Service Awards](#)
- [Call for Board of Health Nominations](#)

Pre-Conference Workshop with Tim Arnold

June 13, 2021 – 1 PM-4:00 PM (ET)

alPHA is pleased to announce that a pre-conference workshop is being held on June 13th from 1 p.m. to 4 p.m. at no additional cost to Conference participants. For those of you who attended the Winter Symposium, where Tim Arnold was a speaker, you will know that his talk at lunchtime briefly addressed how to be more resilient, embrace change and manage expectations. This is an opportunity for alPHA members to take a deeper dive into these subjects. The workshop has three main components: The Secret to Sustainability - *Care for Others AND Care for Yourself*, Outsmarting Change - *Embrace Change AND Preserve Stability*, and The High-Performance Paradox - *Have Expectations AND Extend Grace*. Please note you must be a conference registrant to participate in the workshop.

The [Preliminary Program](#), [Pre-Conference Workshop poster](#), [Conference poster](#), [Conference Sponsorship package](#), and [alPHA Fitness Challenge](#) are now available. Registration is coming soon. Stay tuned!

Request for Photos

Do you have a photo showing alPHA members in action that we can share with attendees at the Annual Conference and Annual General Meeting? We want to profile the key role public health is playing in keeping Ontarians healthy and safe. Please send your images to: info@alphaweb.org

alPHA Fitness Challenge

The alPHA Fitness Challenge is back, and it is coming up fast! And it is as easy as one, two, three!

All members are encouraged to engage in fitness activities that are at least 30 minutes in length during the month of May. You can participate and share pictures on Twitter by tagging [@PHAgencies](https://twitter.com/PHAgencies) #PublicHealthLeaders. Photos will be profiled during the June 14th Conference.

The Fitness Challenge flyer can be found [here](#).

Canadian Public Health Association's 2022 Canadian Public Health Week Webinars

CPHA's 2022 Canadian Public Health Week webinars can now be accessed on CPHA's YouTube Channel. You can view these whether you attended the webinars or not. The video descriptions below include links to the presentations. alPHA would like to thank Dr. Charles Gardner for speaking on behalf of the association at the April 6th webinar.

A Vision to Transform Canada's Public Health System

Due to extenuating circumstances, Dr. Tam was unavailable for this presentation. CPHA will make every effort to reschedule the webinar soon and all registrants will be notified.

Our Planet, Our Health, Our Public Health Responsibility April 5th

Hosted by the Public Health Association of British Columbia

The impact of COVID-19 on public health: Comparing experiences & sharing recommendations for the future April 6th

Co-hosted by the Ontario Public Health Association and the Association of Local Public Health Agencies.

Advocacy for income as a social determinant of health: Lessons learned from the Basic Income and Decent Work movements April 7th

Hosted by the Manitoba Public Health Association

Thank you to alPHA members who participated the inaugural Canadian Public Health Week activities. alPHA looks forward to participating in future years. We will continue to share information about these and other events via email, the alPHA newsletter and on alPHA's **Twitter account** [@PHAgencies](https://twitter.com/PHAgencies).

Ontario COVID-19 Science Advisory Table transitioning to Public Health Ontario

Earlier this month, the Ontario COVID-19 Science Advisory Table moved from the University of Toronto's Dalla Lana School of Public Health [to Public Health Ontario on a permanent basis](#). The move will continue to ensure the Table's effectiveness while also providing credible and independent scientific and technical advice for the government and the general public.

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:

[alPHA Letter - 2022 Pre-Budget Submission, January 19, 2022](#)

[alPHA Speaking Notes - Pre Budget, Jan 19, 2022](#)

[AOPHBA Letter - Bill 116 Redeployment](#)

The 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 you would like to make available, please send a file or a link with a brief description to gordon@alphaweb.org 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 Courses

PHO offers online educational courses in a variety of topics – from health promotion to infection prevention and control. **They're** convenient, too – you can [access](#) these courses anytime, anywhere. Visit the course catalogue, where you will find enrolment information and a list of courses along with their descriptions and system requirements, as well as information for downloading courses.

Upcoming PHO Events

Using the Canadian Institute for Health Information's Measuring Health Inequalities Toolkit to Advance Health Equity
Measuring What Counts in the Midst of the COVID-19 Pandemic: A tool for Equity

alPHA continues to be an active partner in the Ontario Public Health Convention (TOPHC) and we are pleased to tell you that virtual spring workshops are happening this spring! Access engaging speakers

through these interactive events including networking and rich, relevant content that will energize our post-pandemic delivery of public health services.

Using the Canadian Institute for Health Information's Measuring Health Inequalities Toolkit to Advance Health Equity Date: April 13, 2022

Time: 10:00 a.m. – 12:00 p.m. ET,

Optional Continued Conversation session 12 – 12:30 p.m. ET

Cost: General ticket: \$50 + fees & taxes

To register, click [here](#).

Measuring What Counts in the Midst of the COVID-19 Pandemic: A tool for Equity

Date: May 4, 2022

Time: 10:00 a.m. – 12:00 p.m. ET,

Optional Continued Conversation session 12 – 12:30 p.m. ET

Cost: General ticket: \$50 + fees & taxes

Location: Zoom – a link will be emailed to you after registration

To register, click [here](#).

Space is limited. Don't miss out on this exciting learning and engagement opportunity!

PHO has more exciting TOPHC events planned. Stay tuned for more information about additional TOPHC Workshops and TOPHC 2023 by checking the [TOPHC website](#) or following PHO on Twitter [@TOPHCtweets](#).

Upcoming DLSPH Events and Webinars

- April 12, 2022 [Webinar: The employment quality of persons with disabilities: Findings from a national survey](#)
 - April 19, 2022 [Health Inc.: Corporations, capitalism, and commercial determinants of health](#)
 - April 20, 2022 [Conversations in Data Science: Framework for Responsible Machine Learning](#)
 - April 21, 2022 [Jim Ruderman Lecture on Leadership and Innovation](#)
 - April 29, 2022 [Virtual Hereditary Cancer Series](#)
 - May 2, 2022 [CVPD Seminar – Dr. Segun Ogundele](#)
 - May 4, 2022 [Data Science Interdisciplinary Research Cluster Symposium – 2022](#)
 - May 16, 2022 [CVPD Seminar – Dr. Anushka Ataullahjan](#)
-

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



May 2, 2022

The Honourable Christine Elliott
Deputy Premier and Minister of Health
christine.elliott@ontario.ca

Re: Provincial Opioid Crisis Response

Dear Minister Elliott:

At its meeting on April 13, 2022, the Board of Health for Peterborough Public Health (PPH) considered correspondence from the Simcoe Muskoka District Health Unit and passed the following motion:

That the Board of Health for Peterborough Public Health:

- *receive the letter dated March 16, 2022 from Simcoe Muskoka District Health Unit (SMDHU) for information;*
- *endorse the following actions recommended by SMDHU:*
 1. *Create a multi-sectoral task force to guide the development of a robust provincial opioid response plan that will ensure necessary resourcing, policy change, and health and social system coordination.*
 2. *Expand access to evidence informed harm reduction programs and practices including lifting the provincial cap of 21 Consumption and Treatment Service (CTS) Sites, funding Urgent Public Health Needs Sites (UPHNS) and scaling up safer opioid supply options.*
 3. *Explore revisions to the current CTS model to address the growing trends of opioid poisoning amongst those who are using inhalation methods.*
 4. *Expand access to opioid agonist therapy for opioid use disorder through a range of settings (e.g. mobile outreach, primary care, emergency departments), and a variety of medication options.*
 5. *Provide a long-term financial commitment to create more affordable and supportive housing for people in need, including people with substance use disorders.*
 6. *Address the structural stigma and harms that discriminate against people who use drugs, through provincial support and advocacy to the Federal government to decriminalize personal use and possession of substances and ensure increased investments in health and social services at all levels.*
 7. *Increase investments in evidence-informed substance use prevention and mental health promotion initiatives that provide foundational support for the health, safety and well-being of individuals, families, and neighbourhoods, beginning from early childhood.*
- *communicate this support by writing to Minister Elliott, with copies to the following: Associate Minister of Mental Health and Addictions, Attorney General of Ontario, Chief Medical Officer of Health, Local MPs and MPPs, Local Councils, Ontario Health, Association of Local Public Health Agencies, and Ontario Boards of Health.*

The harms related to opioid use have increased at an unprecedented and alarming rate in Peterborough County and City, currently double the provincial average and since the onset of the COVID-19 pandemic. To address this opioid crisis, a provincially supported and coordinated, multi-sectoral approach is needed.

The approach should address the social determinants of health and include early prevention and harm reduction strategies alongside substance use disorder treatment strategies. The public health response should also include policy to address the structural stigma and harms that discriminate those who use drugs.

The PPH Board of Health fully supports the above-noted recommendation, and thanks you for your consideration.

Respectfully,

Original signed by

Mayor Andy Mitchell
Chair, Board of Health

/ag
Encl.

cc: Associate Minister of Mental Health and Addictions
Attorney General of Ontario
Chief Medical Officer of Health
Local MPs and MPPs
Local Councils
Ontario Health
Association of Local Public Health Agencies
Ontario Boards of Health

May 2, 2022

The Honourable Christine Elliott
Deputy Premier and Minister of Health
christine.elliott@ontario.ca

Re: Extension of Ontario Regulation 116/20, Work Deployment Measures for Boards of Health

Dear Minister Elliott:

At its meeting on April 13, 2022, the Board of Health for Peterborough Public Health (PPH) considered correspondence from the Windsor-Essex County Health Unit and passed the following motion:

That the Board of Health for Peterborough Public Health:

- *receive the letter dated March 16, 2022 from Windsor-Essex County Health Unit (WECHU) for information;*
- *endorse the position from WECHU, and the originating request from the Association of Ontario Public Health Business Administrators dated February 9, 2022 regarding extending Ontario Regulation 116/20 Work Deployment Measures for Boards of Health for the duration of public health units' response to the COVID-19 pandemic; and,*
- *communicate this support to Minister Elliott, with copies to the Premier of Ontario, the Ontario Chief Medical of Health, local MPPs, the Association of Local Public Health Agencies, and Ontario Boards of Health.*

The PPH Board of Health fully supports the above recommendation, and thanks you for your consideration.

Respectfully,

Original signed by

Mayor Andy Mitchell
Chair, Board of Health

/ag
Encl.

cc: Premier of Ontario
Ontario Chief Medical Officer of Health
Local MPPs
Association of Local Public Health Agencies
Ontario Boards of Health

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



May 2, 2022

eApprove-72-2022-381

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 \$268,600 in additional base funding for the 2022-23 funding year, up to \$147,500 in one-time funding for the 2021-22 funding year, and up to \$3,511,200 in one-time funding for the 2022-23 funding year, to support the provision of public health programs and services in your community.

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.

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. Thomas Piggott, 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, MOH

PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH

TITLE:	Q1 2022 Status Report (January 1 – March 31, 2022)
DATE:	May 11, 2022
PREPARED BY:	Donna Churipuy, Director, Health Protection Division Hallie Atter, Acting Director, Health Promotion Division Larry Stinson, Director of Operations Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health receive the report, *Q1 2022 Status Report (Jan. 1 – Mar. 31 2022)*, for information.

SUMMARY

Summary of Key Issues from the Medical Officer of Health

Accomplishments:

- Stabilization in COVID-19 response, including case & contact management, immunization, and enforcement.
- Recovery plan developed and in early implementation phase.
- Strategic plan process developed and initial consultations have begun.

Challenges:

- HR challenge for the recruitment and on-boarding of a large number of additional staff to support on-going COVID-19 response and recovery work. There are key positions (e.g., Public Health Inspectors) where there are few qualified applicants for positions posted.
- No progress made with public health program catch-up activities as a result of 5th & 6th wave response.
- Staff wellbeing continues to challenge our organization due to continued impacts of the pandemic response and staff fatigue/burn-out.

RECOVERY TRACKER

Summary of Pandemic Recovery Activities

Objective	Status	Comments
Recovery Area: Human Resources		
Build the COVID Response Teams	IN-PROGRESS	Approximately 30% of positions filled. Recruitment underway for balance.
Management capacity met	COMPLETE	
Programs fully staffed	IN-PROGRESS	Dependent on recruitment for COVID.
Recovery Area: Organizational Changes & Policies		
Open phone lines and in-person visiting	DELAYED DUE TO COVID RISK	Health and Safety policy requires work from home until the risk is reduced.
Plan for use of office space (safety & efficiency)	IN-PROGRESS	Completion expected in Q3.

Objective	Status	Comments
Post-COVID Policies	IN-PROGRESS	Collection of best practice and examples is underway.
Restart of organizational committees	IN-PROGRESS	Nursing Practice Council, Infection Prevention and Control (IPAC) Committee, and Professional Practice & Documentation Committee re-established.
Recovery Area: Planning		
Learnings from COVID	ONGOING	Information gathering is ongoing. Staffing to complete this work is pending approval.
Plans for programs to resume and catch up	DELAYED DUE TO FUNDING	Recovery funding not yet approved.
Recovery Plan approved	COMPLETE	
Strategic Planning	IN-PROGRESS	Consultation sessions scheduled.
Recovery Area: Employee Wellbeing & Support		
Management training	IN-PROGRESS	Coaching sessions scheduled May – July.
Promote existing and enhance mental health supports	IN-PROGRESS	Information and links on HUB (intranet).
Transition planning and supports	IN-PROGRESS	Sessions scheduled in May.

PROGRAM TRACKER

Status of Mandated Programs and Requirements

Ontario Public Health Standard Mandated Programs	# Requirements Restarted or Continued	# Requirements Compliant
Program Standards		
Chronic Disease Prevention and Well-Being	3/5	2/5
Food Safety	1/5	1/5
Healthy Environments	4/10	1/10
Healthy Growth and Development	1/3	0/3
Immunization	2/10	2/10
Infectious and Communicable Diseases Prevention and Control	20/21	20/21
Safe Water	5/8	5/8
School Health	2/10	0/10
Substance Use and Injury Prevention	4/4	1/4
Foundational Standards		
Population Health Assessment	7/7	0/7
Health Equity	4/4	0/4
Effective Public Health Practice	9/9	0/9
Emergency Management	1/1	0/1
Non-OPHS Mandated Programs		
Infant and Toddler Development	ME	ME
Safe Sewage Disposal	ME	ME

ME: Meeting Expectations PME: Partially Meeting Expectations

Link to [Ontario Public Health Standards](#)

PROGRAM SUMMARIES

Chronic Disease Prevention and Well-Being

Program Compliance:

Requirement #1, 2: Prioritization focuses on Adverse Childhood Experiences (ACEs) and Food Skills/Access to Food. Increased compliance with this requirement is dependent upon filling vacancies.

Requirement #4: The Environmental Health team will incorporate compliance checks for the Healthy Menu Choices Act for new premises that open. However, initial inspections and re-inspections are incomplete at this time due to lack of capacity.

Food Safety

Program Compliance:

Requirement #1 - 4: Food safety handler courses have partially resumed however full implementation of surveillance activities, inspections and food safety education is hampered by lack of capacity. Full compliance with standards is not expected this year as catch-up activities are planned to begin in Q2. Recruitment efforts are underway.

Healthy Environments

Program Compliance:

Requirement #1, 3, 8, 9, 11: Response to Health Hazards complaints have fully resumed however engagement on other community environmental health issues has not yet fully resumed or is on hold. Inspections of facilities with elevated risk have partially resumed. Climate change adaptation activities and planning are on hold due to staffing constraints. A preliminary inspection of the Consumption and Treatment site has been made, however, additional activities are pending.

Requirement #2, 4, 5, 6, 7: Compliance of these requirements is not expected this year due to staffing constraints.

Healthy Growth and Development

Program Compliance

Requirements #1, 2: Full compliance of these requirements is not expected until staffing is increased.

Requirement #3: Calls/visits for Healthy Babies Health Children program have resumed for high-risk clients only. Other activities like staff training and case conferences have not started. Full compliance with this requirement is not expected until later in the year as vacancies are filled and catch-up activities are completed.

Infectious and Communicable Diseases Prevention and Control

Program Compliance:

Requirement #7: Sexual Health promotion activities have not started due to staffing capacity.

Requirement #14 - 16: The receipt and investigations of potential exposure to rabies remained a priority since the pandemic was declared. However, other rabies prevention programming has not yet resumed and is pending recruitment. PPH receives and responds to reports of other zoonotic illnesses but development of comprehensive response protocols is pending sufficient capacity. Planning for Vector-Borne Disease prevention is underway. Outreach activities will be modified to the context of the pandemic.

Immunization

Program Compliance

Requirement #1-3, 5, 7, 8: The following objectives are on hold due to staff redeployment: assessment, maintenance or records and reports on the immunization status of children in child care and schools; analysis of surveillance data for vaccine preventable diseases, vaccine coverage and Adverse Events Following Immunizations (AEFIs); promotion of immunization programs and work with community partners to improve public knowledge and confidence in immunization programs; and completion of provincially-funded vaccine inventory management. These activities are anticipated to resume in the second quarter as additional staff are recruited and redeployed staff return to their home program.

Safe Water

Program Compliance

Requirement # 1, 3, 4: Full implementation of surveillance of public beaches and water-borne illness associated with recreational water is pending successful recruitment of seasonal staff. Staff are exploring training options for recreational water facility operators. Due to the pandemic, in-house Small Drinking Water System operator training has been postponed several times. It is to be rescheduled for this fall.

School Health

Program Compliance

Requirements #1 - 3: Not started yet. Compliance with this requirement is dependent upon filling vacancies.

Requirement #5, 6: Not started yet as staff are transitioning back to home program and schools do not have capacity to support oral screening. Resumption of in-school screening expected in September 2022.

Requirement #7: Not started yet. Compliance with this requirement is dependent upon filling vacancies.

Requirement #8: PPH has not participated in ISPA enforcement activities since the 2019-20 school year and is in the process of planning to offer catch-up clinics in advance of completing these activities.

Substance Use and Injury Prevention

Program Compliance

Requirement #1, 2: Priority has been on activities related to the opioid crisis, including the establishment of Consumption and Treatment Services Site, Early Warning and Surveillance System, Naloxone distribution and Needle Exchange. Work on other substances and injury prevention has been on hold. Compliance with this requirement is dependent upon filling vacancies.

Requirement #3, 4: Enforcement of the Smoke-Free Ontario Act has partially resumed. Full compliance with this requirement is dependent upon filling vacancies. Routine inspections, complaint-based investigations, enforcement and public reporting for CTS have been initiated but Ministry of Health direction and training, detailed procedures and development of a HealthSpace inspections module are pending.

Foundational Standards

Program Compliance

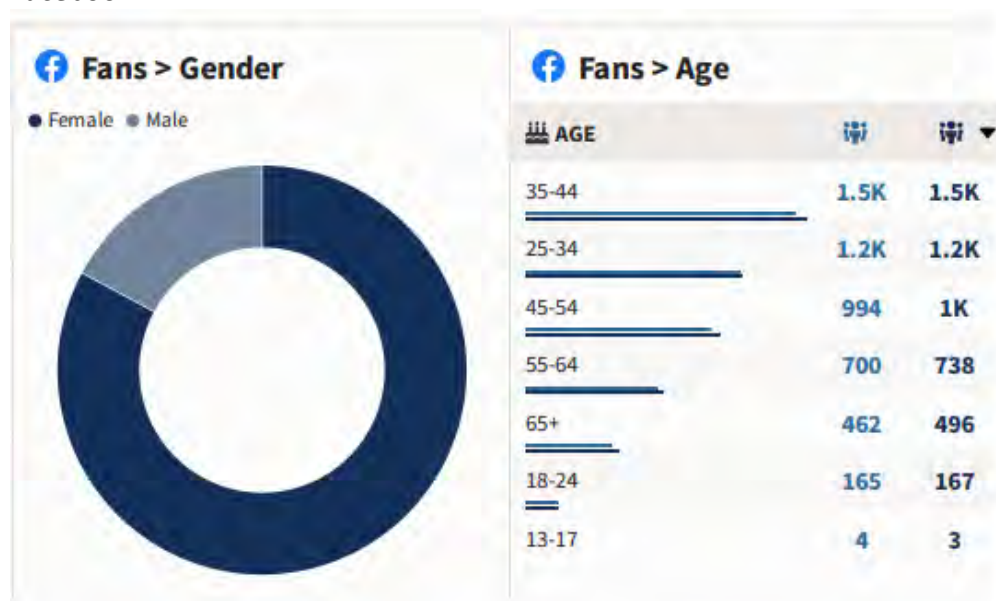
Lack of full compliance is reflective of implementation status of programs across the organization and FS staffing vacancies.

Communications

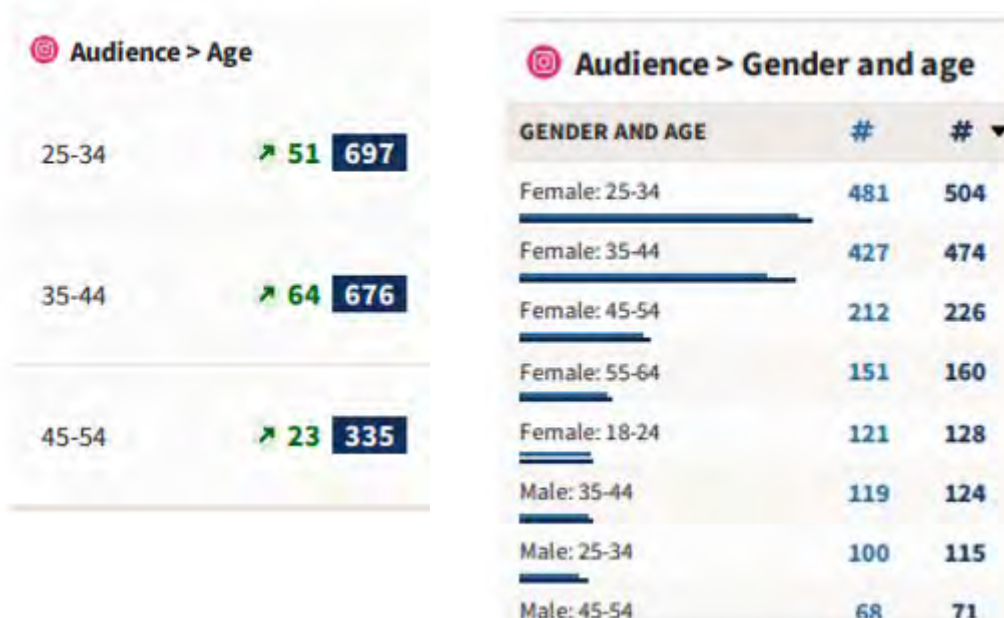
Social Media

Platform	Total Followers	Q1 Followers Gained	Q1 Followers Lost	Q1 Net Change
Facebook	5,102	222	31	+190
Twitter	6,224	601	89	+512
Instagram	3,168	265	0	+265

Facebook



Instagram



Website

Total page views in Q1 – 2022: 458,916

Total page views in Q4 – 2021: 831,749

Net change: -44%

Select Webpages	Q1 2022 page views	Q4 2021 page views	Net change
Homepage	95,809	159,914	-40%
Local COVID Status	147,581	254,883	-42%
COVID Vaccine Clinic	28,368	86,147	-67%
COVID Testing	24,400	92,289	-71%
COVID Case and Contact Guidance	18,833	10,178	+85%
COVID 19 Main	5,268	6,386	+24%
COVID Risk Index:	5,086 (launched Mar. 30/22)	0 (new page)	n/a
COVID Vaccine Info:	4,563	20,680	-77%

Media Relations

Activity	Q1 2022	Q4 2021
News releases issued	33	35
Media interviews/statements provided	109	61

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Governance Committee Report
DATE:	May 11, 2022
PREPARED BY:	Alida Gorizzan, Executive Assistant, on behalf of Deputy Mayor Bonnie Clark, Committee Chair
APPROVED BY:	Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health:

- a. receive meeting minutes of the Governance Committee from May 26, 2020 for information;
- b. approve policy 2-140, By-Law Number 5 - Powers, Duties and Term of Office of the Chairperson and Vice Chairperson of the Board of Health (*no changes*);
- c. approve policy 2-152, Board Leadership and Committee Membership Selection (*no changes*);
- d. approve policy 2-200, Effective Governance by Effective Board Members (*no changes*);
- e. approve policy 2-348, Governance Committee Terms of Reference (*no changes*); and,
- f. appoint Mr. Dan Moloney to the Governance Committee for 2022.

BACKGROUND

The Committee met last on April 19, 2022. At that meeting, members requested that these items come forward to the Board at its next meeting.

ATTACHMENTS

- a. Governance Minutes, May 26, 2020
- b. 2-140, By-Law Number 5 - Powers, Duties and Term of Office of the Chairperson and Vice Chairperson of the Board of Health ([*web hyperlink*](#))
- c. 2-152, Board Leadership and Committee Membership Selection ([*web hyperlink*](#))
- d. 2-200, Effective Governance by Effective Board Members ([*web hyperlink*](#))
- e. 2-348, Governance Committee Terms of Reference ([*web hyperlink*](#))

**Board of Health for
Peterborough Public Health
MINUTES
Governance Committee Meeting
Tuesday, May 26, 2020 – 5:00 p.m.
Electronic Meeting**

Present: Deputy Mayor Bonnie Clark
Mr. Greg Connolley, Chair
Mayor Andy Mitchell
Mr. Andy Sharpe
Councillor Don Vassiliadis

Staff: Ms. Natalie Garnett, Recorder
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 5:00 p.m.

2. Confirmation of the Agenda

MOTION:

That the Agenda be accepted as circulated.

Moved: Deputy Mayor Clark

Seconded: Councillor Vassiliadis

Motion carried. (M-2020-014-GV)

3. Declaration of Pecuniary Interest

4. Consent Items to be Considered Separately

5. Delegations and Presentations

6. Confirmation of the Minutes of the Previous Meeting

MOTION:

That the minutes of the Governance Meeting of February 27, 2020 be approved as circulated and provided to the Board of Health at its next meeting for information.

Moved: Councillor Vassiliadis
Seconded: Deputy Mayor Clark
Motion carried. (M-2020-015-GV)

7. Business Arising from the Minutes

7.1 New Draft Policy – 2-400, Exit Interviews for Vacating Board Members

MOTION:

That the Governance Committee recommend that the Board of Health for Peterborough Public Health approve the following: 2-400 Exit Interviews for Vacating Board Members (new).

Moved: Councillor Vassiliadis
Seconded: Deputy Mayor Clark
Motion carried. (M-2020-016-GV)

8. Staff Reports

8.1 Provincial Appointments and Committee Membership

It was noted that there are two additional Provincial Appointments expiring in 2020: Kerri Davies (October 21/20) and Greg Connolley (November 18/20).

MOTION:

That the Governance Committee recommend to the Board of Health for Peterborough Public Health at the November meeting: to appoint Kerri Davies, to the Stewardship Committee, and Greg Connolley, to the Governance Committee, as community appointees until year end.

Moved: Councillor Vassiliadis
Seconded: Deputy Mayor Clark
Motion carried. (M-2020-017-GV)

8.2 Closed Session and Electronic Meetings

MOTION:

That the Governance Committee recommend that the Board of Health for Peterborough Public Health approve the following: By-Law 10, Conduct of Open and In-Camera Meetings (revised).

Moved: Deputy Mayor Clark
Seconded: Mr. Sharpe
Motion carried. (M-2020-018-GV)

8.3 By-laws and Policies for Review

MOTION:

That the Governance Committee recommend that the Board of Health for Peterborough Public Health approve the following:

- 2-40 Vision, Mission and Values (reviewed, no changes)
- 2-80 Accessibility (reviewed, no changes)
- 2-342 Medical Officer of Health Selection (revised)

Moved: Councillor Vassiliadis

Seconded: Mr. Sharpe

Motion carried. (M-2020-019-GV)

8.4 Work Plan Review

MOTION:

*That the Governance Committee approve the Committee Work Plan; and,
That future Committee agendas include "Modernization", as a topic for discussion.*

Moved: Deputy Mayor Clark

Seconded: Councillor Vassiliadis

Motion carried. (M-2020-020-GV)

9. Consent Items

10. New Business

11. In Camera to Discuss Confidential Matters

12. Motions from In Camera for Open Session

13. Date, Time and Place of Next Meeting

The next Governance Committee meeting will be held on August 18, 2020, or at the call of the Chair.

14. Adjournment

MOTION:

That the Governance Committee meeting be adjourned.

Moved: Mr. Sharpe

Seconded: Councillor Vassiliadis

Motion carried. (M-2020-021-GV)

The meeting was adjourned at 5:49 p.m.

Chairperson

Medical Officer of Health

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Indigenous Health Advisory Circle Report
DATE:	May 11, 2022
PREPARED BY:	Alida Gorizzan, Executive Assistant, on behalf of Councillor Kathryn Wilson, Circle Chair
APPROVED BY:	Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health:

- a. receive meeting minutes of the Indigenous Health Advisory Circle from October 27, 2020 for information;
- b. approve policy 2-352, Indigenous Health Advisory Circle Terms of Reference (*no changes*); and,
- c. approve the following community volunteer appointments to the Circle for 2022:
 - Ms. Barbara Card, Métis Nation of Ontario, Peterborough & District Wapiti Métis Council
 - Professor David Newhouse, Trent University
 - Executive Director (or designate), Nijkiwendidaa Anishnaabekwewag Services Circle
 - Executive Director (or designate), Nogojiwanong Friendship Centre
 - Ms. Liz Stone, Fleming College
 - Ms. Rebecca Watts, Lovesick Lake Native Women's Association

BACKGROUND

The Circle met last on April 20, 2022. At that meeting, members requested that these items come forward to the Board at its next meeting.

ATTACHMENTS

- a. IHAC Minutes, October 27, 2020
- b. 2-352 Terms of Reference ([*web hyperlink*](#))

**Board of Health for the
Peterborough County-City Health Unit
MINUTES
Indigenous Health Advisory Circle Meeting
Tuesday, October 27, 2020 – 5:00 p.m.
Anstruther and Buckhorn Lake Rooms, 185 King Street, Peterborough**

Present: Councillor Nodin Knott
Ms. Kari Lepine (electronically)
Councillor Kathryn Wilson, Chair
Councillor Kim Zippel

Regrets: Ms. Lori Flynn
Ms. Delores Lalonde

Staff: Dr. Rosana Salvaterra, Medical Officer of Health
Ms. Natalie Garnett, Recorder
Donna Churipuy, Director of Public Health Programs, Chief Nursing
Officer & Privacy Officer

1. Call to Order

Councillor Wilson, Chair, called the Indigenous Health Advisory Circle meeting to order at 5:06 p.m.

2. Confirmation of the Agenda

The agenda was confirmed by the members.

3. Declaration of Pecuniary Interest

4. Delegations and Presentations

5. Confirmation of the Minutes of the Previous Meetings

6.1 July 28, 2020

The members agreed that the minutes of the July 28, 2020 were correct.

6. Business Arising from the Minutes

6.1 Allyship Training for PPH Staff

Donna Churipuy, Director of Public Health Programs, Chief Nursing Officer & Privacy Officer, provided an update.

6.2 IHAC Membership for 2020

Dr. Salvaterra provided an update and asked members to think about individuals who could be considered for possible committee membership.

6.3 University of Toronto Cultural Safety Training

Ms. Churipuy provided an update on the project.

6.4 Ontario Indigenous Women's Advisory Council

Ms. Flynn was going to follow up on this item. It was therefore deferred to an upcoming meeting.

7. New Business

7.1 Nourish Presentation to the Board of Health – Indigenous Food Sovereignty

It was noted that a presentation will be provided to the Board of Health in the new year.

7.2 COVID-19 Impact/Experience for Local Indigenous Populations - Discussion

Discussion was held regarding local experiences during the COVID-19 pandemic.

7.3 Opioid Poisonings Impact/Experience for Local Indigenous Populations - Discussion

Dr. Salvaterra provided an update on the former Greyhound Bus property, and work on the application for a safe consumption site. Local Indigenous experiences were also discussed.

7.4 Anti-Indigenous Racism and Local Health Care System, Issue Identification/Approach – Discussion

Discussion was held regarding experiences with racism in the local health care system. It was noted that a survey on feedback from Indigenous health care users might be useful. This idea will be discussed further at the next meeting of the Indigenous Health Advisory Circle.

7.5 Update on Water at Hiawatha First Nation

Councillor Wilson provided an update on the plans for a decentralized water pod system at Hiawatha First Nation.

8. Date, Time and Place of Next Meeting

The next meeting will be scheduled for 2021 or at the call of the Chair.

9. Adjournment

The meeting ended at 6:10 p.m.

Chairperson

Medical Officer of Health

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Stewardship Committee Report
DATE:	May 11, 2022
PREPARED BY:	Alida Gorizzan, Executive Assistant, on behalf of Dr. Hans Stelzer, Committee Chair
APPROVED BY:	Dr. Thomas Piggott, Medical Officer of Health & CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health:

- a. receive meeting minutes of the Stewardship Committee from October 27, 2021 for information;
- b. receive the staff report, Q1 2022 Financial Report, for information;
- c. approve policy 2-60, Accommodation (*no changes*);
- d. approve policy 2-130, By-Law #4 - Appointment of an Auditor (*no changes*); and,
- e. approve policy 2-354, Stewardship Committee Terms of Reference (*no changes*).

BACKGROUND

The Committee met last on April 28, 2022. At that meeting, members requested that these items come forward to the Board at its next meeting.

ATTACHMENTS

- a. [Stewardship Minutes, October 27, 2021](#)
- b. [Q1 2022 Financial Report](#)
- c. [2-60, Accommodation \(*web hyperlink*\)](#)
- d. [2-130, By-Law #4 - Appointment of an Auditor \(*web hyperlink*\)](#)
- e. [2-354, Stewardship Committee Terms of Reference \(*web hyperlink*\)](#)

**Board of Health for
Peterborough Public Health
MINUTES
Stewardship Committee Meeting
Wednesday, October 27, 2021 – 3:30 – 5:00 p.m.
Dr. J.K. Edwards Board Room, 3rd Floor
185 King Street, Peterborough Public Health**

Present: Councillor Henry Clarke
Dr. Hans Stelzer (Chair)
Deputy Mayor Matthew Graham
Mayor Andy Mitchell
Councillor Nodin Knott (electronic participation)

Staff: Ms. Dale Bolton, Manager, Finance and Property
Alida Gorizzan, Executive Assistant (Recorder)
Larry Stinson, Acting Chief Executive Officer

1. Call to Order and Opening Statement

Mr. Stinson called the Stewardship Committee meeting to order at 3:34 p.m.

2. Appointment of Committee Chair

MOTION:

That Dr. Hans Stelzer serve as Stewardship Committee Chair for 2022.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-001-SC)

3. Confirmation of the Agenda

MOTION:

That the agenda be approved as circulated.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-002-SC)

4. Declaration of Pecuniary Interest

5. Consent Items to be Considered Separately

6. Delegations and Presentations

7. Confirmation of the Minutes of the Previous Meeting

MOTION:

That the minutes of the meeting of October 21, 2020 be approved as circulated and provided to the Board of Health at its next meeting for information.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-003-SC)

8. Business Arising From the Minutes

9. Staff Reports

9.1. 2022 Cost-Shared and Ontario Seniors Dental Program Budget Approvals

MOTION:

That the Stewardship Committee for the Board of Health for Peterborough Public Health:

- receive the staff report, *2022 Cost-Shared and Ontario Seniors Dental Program Budget Approvals*, for information
- recommend Board approval of the 2022 Cost-Shared budget for public health programs and services in the amount of \$10,856,829; and
- recommend Board approval of the 2022 Ontario Seniors Dental Program budget in the amount of \$700,100.
- note that the Stewardship Committee draws the attention of the Board to the redeployment of municipal funding to cover provincial COVID expenses in the amount of \$443,609.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-004-SC)

10. Consent Items

11. New Business

12. In Camera to Discuss Confidential Matters

MOTION:

That the Stewardship Committee move into In Camera at 4:15 p.m. to discuss one item under Section 239(2)(d), Labour relations or employee negotiations.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-005-SC)

MOTION:

That the Stewardship Committee rise from In Camera at 4:35 p.m.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-006-SC)

13. Motions for Open Session

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

Dates to be confirmed in January 2022.

Or, at the call of the Chair.

15. Adjournment

MOTION:

That the meeting be adjourned.

Moved: Deputy Mayor Graham

Seconded: Councillor Clarke

Motion carried. (M-2021-007-SC)

The meeting was adjourned at 4:36 p.m.

Chairperson

Medical Officer of Health

PETERBOROUGH PUBLIC HEALTH

STEWARDSHIP COMMITTEE – STAFF REPORT

TITLE:	Q1 2022 Financial Report
DATE:	April 28, 2022
PREPARED BY:	Dale Bolton, Manager of Finance and Property
APPROVED BY:	Larry Stinson, Director of Operations

PROPOSED RECOMMENDATIONS

That the Stewardship Committee for the Board of Health for Peterborough Public Health:

- receive the staff report, *2022 Q1 Financial Report*, for information; and,
- recommend Board of Health receipt of the 2022 Q1 Financial Report.

Financial Implications and Impact

The Ministry of Health requires submission of quarterly financial statements that reflect actual expenditures to-date and projected expenditures for the balance of the fiscal year. During the COVID-19 pandemic, particularly for the 2022 year, reporting on COVID-19 response and COVID-19 vaccination expenses will inform adjustments to approved one-time funding for extraordinary expenses that can not be managed within base funding. Staying within budgeted expenditures for core programs and reporting accurately on COVID-19 expenses will ensure full funding is available for program activities.

Decision History

The Board of Health approved the cost-shared budget for Peterborough Public Health (PPH) in November 2021. The Board also approved the submission for the budget to the Ministry of Health for 2022, which included the request for COVID-19 one-time funding, in February 2022. The cost-shared budget submission has not been approved by the Ministry to date. Similar to the prior year, the Ministry has assured through communications to local public health agencies that funding will be provided for all eligible COVID expenditures and that approvals and payments will be adjusted through the quarterly reports.

Background

The first quarter report covers the period from January to March for the fiscal year. The quarterly report would normally be prepared and submitted to the Ministry within 30 days of the end of the quarter, or April 30th and presented to the Board at the next meeting. At this time the Q1 In-Year-Financial Report template has not been released by the Ministry and the anticipated due date has not been communicated.

This report highlights the status of expenditures for each budgeted program as of March 31, 2022 (Schedule A). As this is not a typical year there are some variances from the expected 25%

of expenses realized by this date, due to underspending in core programs. As previously reported, COVID expenses are to be covered to the extent possible through underspending of cost-shared funds and expenditures in excess will be covered through one-time funding.

Figure 1: Budgeted vs Actual Total COVID Expenditures – March 31/22

Category	COVID-19 Response Budget	COVID-19 Response Actual	COVID-19 Vaccination Budget	COVID-19 Vaccination Actual	Total COVID
Salaries and wages	2,928,389	654,048	2,671,492	853,161	1,507,209
Benefits	470,669	122,052	375,506	131,814	253,866
Purchased services	9,800	2,165	237,400	148,529	150,694
Communications	3,400	3,095	-		3,095
Materials and supply	7,000	9,489	30,000	13,203	22,692
Travel	5,000	1,646	5,500	3,435	5,081
Total	3,424,258	792,495	3,319,898	1,150,142	1,942,637

Of the total expenditures of \$1,942,637 for COVID programs, noted above, \$485,660 is currently expensed in the cost-shared programs. The balance of \$1,456,977 are projected to be funded through one-time Ministry funding.

As expected cost-shared expenses are less than what would be anticipated for the end of Q1 because of redeployment and reduced service levels. The allocation across the mandate programs is reflected below. Immunization and Infectious Disease Programs show significant variance as they include the COVID expenses that are able to be managed within the approved cost-shared budget.

Figure 2: Budgeted vs Actual Cost-Shared Program and Total COVID Expenditures

	Budget	YTD	Difference	YTD %
Foundational Standards	796,202	16,594	779,608	2.1%
CDP and Wellbeing	721,804	134,851	586,953	18.7%
Food Safety	402,673	55,852	346,821	13.9%
Environmental Health	296,371	46,385	249,986	15.7%
Immunization	893,284	1,182,034	(288,750)	(132.3)%
Infectious Disease	2,447,204	1,061,070	1,3386,134	43.4%
Safe Water	476,129	62,809	413,320	13.2%
School - Oral Health	859,053	136,918	722,135	15.9%
School - Vision	20,469	-0	20,469	0%
School - Immunization	102,348	-0	102,348	0%
School- Other	347,706	61,144	286,562	17.6%
Substance Misuse Prev.	1,008,061	97,685	910,376	9.7%
Healthy Growth & Dev.	493,146	15,144	478,002	3.1%
Total	8,864,450	2,870,486	5,993,964	

STRATEGIC DIRECTION

Compliance with reporting requirements provide accountability to the Board of Health and Ministry and ensure mid-year planning adjustments can be made to reduce risk and manage finances effectively.

ATTACHMENTS

Attachment A – Financial Update Q1 2022

Financial Update Q1 2022 (Finance: Dale Bolton)

Programs Funded January 1 to December 31, 2022

	Funding Type	2022 Submission	Approved by Board	Approved by Province	YTD Budget \$ Based on 2022 Submission (100%)	Year To Date Expenditures to Mar 31	Year to Date % of Budget Submission	Year to Date Variance Under/(Over)	Comments
Mandatory Public Health Programs - all combined cost-shared	MOHLTC Cost Shared (CS)	8,863,437	10-Nov-21	Awaiting approval. Submitted Mar 1/22	2,215,859	1,543,585	17.4%	672,274	Year-to-date underspending due to redeployment of staff to COVID response from January through March. Anticipate an increase in expenditures beginning in April through end of year as temporary employees are being hired to allow to our core program staff to return to regular programs. Expenditures related to the pandemic response have been reported separately below. Total funding includes MOH (Base, Mitigation and Indigenous Communities) and local partners.
COVID Response	MOHLTC Cost Shared (CS)	858,599	10-Nov-21	Awaiting approval. Submitted Mar 1/22	214,650	198,124	23.1%	16,526	Covid response for the 1st quarter for case and contact tracing and enforcement activity. The Annual Service Plan included the budget allocation of \$858,599 from the cost-shared budget. Similar to the prior year, eligible expenditures in excess of the cost-shared underspending will be covered through the province at 100% based the Ministry approval through the quarterly report. Total COVID extraordinary expenses at March 31 are \$792,495. Year-to-date expenditures of \$198,124, represents 25% of budgeted costs that will be covered through the cost-shared budget. The excess cost of \$594,371 will be funded through one-time funding - see below.

	Funding Type	2022 Submission	Approved by Board	Approved by Province	Based on 2022 Submission (100%)	Year To Date Expenditures to Mar 31	Year to Date % of Budget Submission	Year to Date Variance Under/(Over)	Comments
COVID Vaccination	MOHLTC Cost Shared (CS)	464,391	10-Nov-21		116,098	287,536	61.9%	(171,438)	Covid vaccination for the 1st quarter for case and contact tracing and enforcement activity. The Annual Service Plan included the budget allocation of \$464,391 from the cost-shared budget. Similar to the prior year, eligible expenditures in excess of the cost-shared underspending will be covered through the province at 100% based the Ministry approval through the quarterly report. Total COVID extraordinary expenses at March 31 are \$1,150,142. Year-to-date expenditures of \$287,536, represents 25% of budgeted costs that will be covered through the cost-shared budget. The excess cost of \$862,606 will be funded through one-time funding - see below.
Combined Cost-Shared		10,186,427			2,546,607	2,029,245	19.92%	517,361	See notes above.
	Funding Type	2022 Submission	Approved by Board	Approved by Province	YTD Budget \$ Based on 2022 Submission (100%)	Year To Date Expenditures to Mar 31	Year to Date % of Budget Submission	Year to Date Variance Under/(Over)	Comments
Ontario Seniors Dental	100%	898,100	10-Nov-21	Awaiting approval. Submitted Mar 1/22	224,525	164,538	18.3%	59,987	Budget submission increased from prior year approval of \$700,100 to address program demand. Awaiting approval from Ministry. Dental treatment provided through clinical staff and contract services, including dentists and specialists. YTD savings due to redeployment of staff to COVID response at the beginning of the year and program not operating at full dentist complement. Anticipate budget will be spent in full by end of year.
Total - Ministry Funded - 2022		11,084,527			2,771,132	2,193,783	38.2%	577,348	

	Funding Type	2022 Submission	Approved by Board	Approved by Province	YTD Budget \$ Based on 2022 Submission (100%)	Year To Date Expenditures to Mar 31	Year to Date % of Budget Submission	Year to Date Variance Under/(Over)	Comments
One-Time Funding funded January 1, 2021 to December 31, 2022									
COVID Response	100% MOH	2,565,659	10-Nov-21	Awaiting approval. Submitted Mar 1/22	641,415	594,371	23.2%	47,044	Excess year-to-date COVID extraordinary expenditures, per notes above, not covered through underspending in cost-shared programs. The Annual Service Plan included the one-time request in the amount of \$2,565,659 for case and contact and enforcement. Awaiting approval by the Ministry. The total expenditures of \$594,371 is just below the YTD budget submission. The Ministry has communicated that COVID costs will be covered. Adjustments to approved funding or additional funding will be granted for eligible expenditures through submission of quarterly Ministry reports.
COVID Vaccination	100% MOH	2,855,507	10-Nov-21	Awaiting approval. Submitted Mar 1/22	713,877	862,606	30.2%	(148,729)	Excess year-to-date COVID Vaccination expenditures, per notes above, not covered through underspending in cost-shared programs. The Annual Service Plan included the one-time request in the amount of \$2,855,507 for case and contact and enforcement. Awaiting approval by the Ministry. The total expenditures of \$862,606 is above the YTD budget submission due to the need to increase vaccine clinic activity in the first quarter for booster doses. The Ministry has communicated that COVID costs will be covered. Adjustments to approved funding or additional funding will be granted for eligible expenditures through submission of quarterly Ministry reports.

One-Time Funding funded April 1, 2021 to March 31, 2022

	Funding Type	2021 - 2022	Approved by Board	Approved by Province/Other	YTD Budget \$ (100%)	Year To Date Expenditures to Mar 31	% of Budget	Year to Date Variance Under/(Over)	Comments
PHI Practicum Student	100% MOH	20,000	Aug 11/21	Approved July 22/21	20,000	20,000	100.0%		- Funding for 2 PHI Practicum Students hired in the fall of 2021 for 12 week period. Program budget spent in full.
Covid - School-Focused Nurses Initiative	100% MOH	600,000		Approved July 22/21	600,000	600,000	100.0%		- PHN's hired to provide rapid-response support to school boards and schools to facilitate public health and preventative measures relating to pandemic. Program budget spent in full.

Programs funded April 1, 2021 to March 31, 2022

	Funding Type	2021 - 2022	Approved by Board	Approved by Province	YTD Budget \$ (100%)	Year To Date Expenditures to Mar 31	% of Budget	Year to Date Variance Under/(Over)	Comments
Infant Toddler and Development Program	100% MCCSS	242,423	Mar. 10/21	Approved Jan 11/22	242,423	219,903	90.7%	22,520	Program underspent for the fiscal year due to gapping of Infant Educator position in the 4th quarter. Surplus funds will be returned to the Ministry with the year end settlement. Final audit to be completed.
Healthy Babies, Healthy Children	100% MCCSS	928,413	Mar. 10/21	Approved Jan 11/22	928,413	598,220	64.4%	330,193	Program operated well below budget as three nursing staff continue to be redeployed to the COVID response and reduced allocation of program manager throughout the year due to gapping and clinic response. Surplus funds will be returned to the province with the year end settlement.

Funded Entirely by User Fees January 1 to December 31, 2022

	Funding Type	2022	Approved By Board	2022 Budget	YTD Revenue \$ (100%)	Year To Date Expenditures to Mar 31	% of Budget	Year to Date Variance Under/(Over)	Comments
Safe Sewage Program	Fee for Service	402,775	NA	402,775	20,875	82,865	20.6%	(61,990)	Program funded entirely by user fees. Expenditures are below budget and user fees below, resulting in a deficit of \$(61,990). Program activity expected to increase through the next quarter and through the end of the year with the building season which is expected to offset the current deficit.
Mandatory and Non-Mandatory Re-inspection Program	Fee for Service	97,500	NA	97,500	-	0	0.0%	-	Program funded entirely by fees. Program activity will commence May through October.
Total - All Programs		18,796,804			5,938,134	5,171,748	27.5%	766,386	