

**Board of Health for
Peterborough Public Health
AGENDA
Board of Health Meeting
Wednesday, November 10, 2021 – 5:30 p.m.
Multipurpose Rooms, 2nd Floor
185 King Street, Peterborough**

1. Call to Order

Mayor Andy Mitchell, Chair

1.1. Opening Statement

Land Acknowledgement

We respectfully acknowledge that Peterborough Public Health is gathering in Hiawatha First Nation, in 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 f g 10.4.1

5. Delegations and Presentations

6. Board Chair Report

7. Confirmation of the Minutes of the Previous Meeting

- Cover Report
- a. October 13, 2021

8. Business Arising From the Minutes

9. Staff Reports

9.1. Presentation: COVID-19 Update

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

9.2. 2022 Cost-Shared and Ontario Seniors Dental Program Budget Approvals

- Staff Report
- a. Draft Cost-Shared Budget
- b. Draft COVID Budget
- c. Local Partner Share
- d. Draft OSDP Budget

10. Consent Items

10.1. Correspondence for Direction

10.2. Correspondence for Information

- Cover Report
- a. alPHa e-newsletter
- b. Minister Elliott – One-Time Funding
- c. Minister Elliott – Local boards of health
- d. Grey Bruce – Local boards of health
- e. North Bay Parry Sound – Funding
- f. Simcoe Muskoka – Funding
- g. Windsor Essex – Funding

10.3. Staff Reports

10.4. Committee Reports

10.4.1. Stewardship

- Cover Report
- a. Minutes, October 21, 2020

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;
(e), Litigation or potential litigation, including matters before administrative tribunals
affecting the Board.

13. Motions for Open Session

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

Wednesday, December 8, 2021 – 5:30 p.m.
Multipurpose Rooms, 2nd Floor, Peterborough Public Health (185 King St.)

15. Adjournment

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Approval of Minutes
DATE:	November 10, 2021
PREPARED BY:	Natalie Garnett, Board Secretary
APPROVED BY:	Larry Stinson, Acting Chief Executive Officer

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health approve the minutes of the meeting held on October 13, 2021.

ATTACHMENTS

- a. [Minutes, October 13, 2021](#)

**Board of Health for
Peterborough Public Health
DRAFT MINUTES
Board of Health Meeting
Wednesday, October 13, 2021 – 5:30 p.m.
185 King Street, Peterborough**

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

Regrets: Councillor Kathryn Wilson

Staff: Ms. Brittany Cadence, Manager of Communications and IT
Ms. Donna Churipuy, Acting Incident Commander
Ms. Natalie Garnett, Recorder
Dr. Ian Gemmill, Acting Medical Officer of Health (electronic)
Ms. Alida Gorizzan, Executive Assistant
Mr. Larry Stinson, Acting Chief Executive Officer

1. Call to Order

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

1.2 Introduction – Dr. Ian Gemmill, Acting Medical Officer of Health

Dr. Ian Gemmill, Acting Medical Officer of Health, was introduced to the members of the Peterborough Public Health Board.

2. Confirmation of the Agenda

MOTION:

That the Board of Health for Peterborough Public Health confirm the agenda as circulated.

Moved: Councillor Clarke

Seconded: Deputy Mayor Clark

Motion carried. (M-2021-100)

3. Declaration of Pecuniary Interest

4. Consent Items to be Considered Separately

MOTION:

That the following item be passed as part of the Consent Agenda: 10.2.b-f.

Moved: Deputy Mayor Graham

Seconded: Councillor Baldwin

Motion carried. (M-2021-101)

MOTION (10.2.b-f):

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

- b. Letter dated September 16, 2021 from the Minister of Labour, Training and Skills Development, in response to the Board Chair's initial letter dated February 16, 2021, regarding paid sick leave.*
- c. Letter dated September 21, 2021 from the Township of Selwyn, in support of the Board's advocacy for wastewater surveillance.*
- d. Letter dated October 1, 2021 from the Board Chair to the Minister of Health regarding the appointment of Dr. Thomas Piggott, incoming Medical Officer of Health and Chief Executive Officer.*
- e. Letter dated October 1, 2021 from the Board Chair to MP-elect Michelle Ferreri, regarding her recent election as the federal representative for Peterborough-Kawartha.*
NOTE: Similar letters were also sent to MPPs Lawrence and Schmale who were re-elected.

Correspondence from other local public health agencies:

- f. Haliburton, Kawartha, Pine Ridge-Funding.*

Moved: Deputy Mayor Graham

Seconded: Councillor Baldwin

Motion carried. (M-2021-101)

5. Declarations and Presentations

6. Board Chair Report

The Chair provided a brief overview of activities undertaken since the September meeting.

7. 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 September 8, 2021, be approved as presented.

Moved: Councillor Baldwin

Seconded: Deputy Mayor Graham

Motion carried. (M-2021-102)

8. Business Arising From the Minutes

9. Staff Reports

9.1 Presentation: COVID-19 Update

MOTION:

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

Moved: Deputy Mayor Graham

Seconded: Councillor Vassiliadis

Motion carried. (M-2021-103)

9.2 Q2 2021 Ministry Financial Report

MOTION:

That the Board of Health for Peterborough Public Health receive the staff report, Q2 2021 Financial Report, for information.

Moved: Deputy Mayor Graham

Seconded: Deputy Mayor Clark

Motion carried. (M-2021-104)

10. Consent Items

10.1. Correspondence for Direction

MOTION:

That the Board of Health for Peterborough Public Health:

- *receive the letter dated September 15, 2021, from the Hamilton Board of Health regarding support for local boards of health;*
- *endorse the letter and communicate this support by sending a letter to Minister Elliott, with copies to:*
 - *Local MPPs*

- *Council of Ontario Medical Officers of Health*
- *Association of Local Public Health Agencies*
- *Ontario Boards of Health*
- *Enclose a copy of the Executive Summary from the report prepared by Peterborough Public Health.*

Moved: Deputy Mayor Clark
 Seconded: Councillor Baldwin
 Motion carried. (M-2021-105)

10.2. **Correspondence for Information**

MOTION:

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

a. Letter dated September 15, 2021 from the Board Chair to the Minister of Environment, Conservation and Parks regarding wastewater surveillance.

Moved: Deputy Mayor Graham
 Seconded: Councillor Baldwin
 Motion carried. (M-2021-106)

10.3. **Staff Reports**

10.3.1 **Staff Report: Food for Kids Student Nutrition Programs Annual Report 2020/2021**

MOTION:

That the Board of Health for Peterborough Public Health receive the report, Food for Kids Peterborough and County Student Nutrition Programs Annual Report 2020-21, for information.

Moved: Deputy Mayor Graham
 Seconded: Councillor Baldwin
 Motion carried. (M-2021-106)

10.3.2 **Staff Report: Health Care Worker Influenza Immunization: 2020/2021**

MOTION:

That the Board of Health for Peterborough Public Health receive the staff report, Health Care Worker Influenza Immunization: 2020-2021, for information.

Moved: Deputy Mayor Graham
 Seconded: Councillor Baldwin
 Motion carried. (M-2021-106)

11. New Business

12. In Camera to Discuss Confidential Matters

13. Motions for Open Session

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

The next Board of Health for Peterborough Public Health meeting will be held on November 10, 2021, at 5:30 p.m. in the Multipurpose Room, 185 King Street.

15. Adjournment

MOTION:

That the meeting be adjourned.

Moved by: Deputy Mayor Clark

Seconded by: Deputy Mayor Graham

Motion carried. (M-2021-107)

The meeting was adjourned at 6:57 p.m.

Chairperson

Medical Officer of Health

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Presentation: COVID-19 Update
DATE:	November 10, 2021
PREPARED BY:	Donna Churipuy, Acting Incident Commander

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:	2022 Cost-Shared and Ontario Seniors Dental Program Budget Approvals
DATE:	November 10, 2021
PREPARED BY:	Dale Bolton, Manager Finance and Property
APPROVED BY:	Larry Stinson, Acting CEO

PROPOSED RECOMMENDATIONS

That the Board of Health for Peterborough Public Health, as recommended by the Stewardship Committee:

- receive the staff report, *2022 Cost-Shared and Ontario Seniors Dental Program Budget Approvals*, for information
- approve the 2022 Cost-Shared budget for public health cost-shared programs and services in the amount of \$10,856,829; and
- approve 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.

FINANCIAL IMPLICATIONS AND IMPACT

The budget includes all Ministry of Health cost-shared programs. The Ontario Seniors Dental Program (OSDP) and Medical Officer of Health Compensation Fund are not included, as they continue to be funded 100% by the Province.

Many assumptions are factored into the formulation of the budget for the purposes of determining costs including increases for salary and benefits due to contractual agreements and allowance for the impact of inflation rate on ongoing operating expenditures. The most significant variable in the calculation of the cost-shared budget is the cost of wages and benefits. Budgeted wages reflect the current collective agreements and a projection of settlement for each bargaining unit based on different expiry dates.

The proposed budget is based on 2022 Budget Planning Assumptions as shared by the Ministry of Health staff in October 2021. This includes:

- A 0% increase from the Ministry over the 2021 budget approval.
- A 70% provincial and 30% local funding allocation.
- Provision of one-time mitigation funding for 2022, at the same level as 2021, to retain a 0% increase for municipal funder contributions.
- COVID related activities are funded through underspending of the cost-shared budget and excess at 100% by the Ministry.

In 2022, further costs associated with COVID-19 are anticipated to support case and contact, enforcement, and immunization clinics. Based on preliminary communication from the Ministry, the reimbursement process for COVID-19 extraordinary and vaccination costs will be the same as 2021. Eligible COVID expenditures must be covered through the cost-shared budget underspending with the balance reimbursed at 100% through one-time funding. An estimate is provided in Attachment B of projected COVID-19 expenditures for the period of January 1 through June 30, 2022 to support the response and vaccination clinics. The expenditures reflect costs associated with redeployment of staff, hiring of additional staffing, and other delivery costs. The projections are based on the assumption that activity for both programs will remain at the existing level from January through April, then reduce by 50% through to the end of June. As mandatory programs will operate at a reduced level through the first six months of 2022, this will result in underspending of core cost-shared programs of approximately \$1,479,000 (Attachment B & C). This underspending will offset the majority of COVID expenditures incurred through this period with the excess being funded through one-time extraordinary funding of approximately \$1,700,000 (which includes the projected deficit reported in the cost-shared budget of \$499,810). Although the Ministry has indicated that COVID expenditures will be covered 100%, local partners are responsible for their share of the COVID costs covered by underspent cost-shared funding. As reported in Attachment C, of the \$1,479,000 allocated to COVID from the cost-shared budget, the local partner contribution is \$443,609. Based on preliminary Ministry communication, Peterborough Public Health (PPH) has been assured that all eligible costs related to COVID-19 will be covered by the Province thus minimizing financial risk for the organization.

The OSDP is funded 100% by the Ministry of Health. The program provides comprehensive dental and preventative care to eligible low-income seniors to improve the quality of life for these seniors. In the fall of 2019, PPH began delivering the dental program. The recent dental clinic expansion ensures the program has the necessary space and resources to meet the increased demand for essential dental care for eligible seniors in our community. The 2022 budget has been completed based on the 2021 provincial funding allocation of \$700,100. The program staff will include 1.4 full-time equivalent (FTE) Certified Dental Assistants, .40 FTE Dental Hygienist, .40 Administrative Assistant and share of the Program Manager and Director of Programs. Other program expenditures include Professional and Purchased Services for dental treatment and services provided through our contract dentists and specialists such as periodontists. The proposed budget for 2022 is balanced within the funding allocation and projected fees collected, per Attachment C.

BACKGROUND

In August 2021, the Province approved the 2021 cost-shared budget, as submitted including mandatory program funding of \$7,059,900 and mitigation funding of \$1,015,000 to maintain partner contributions at 2019 funding levels.

The proposed budget is based on the assumption that the 2022 Ministry funding will remain the same as 2021. Earlier communication from the Ministry indicated there will be no increase in

funding from the Province, however an equal amount of mitigation funding is promised. Additionally, costs associated with COVID expenditures will be reimbursed through cost-shared budget underspending and one-time funding, based on the Ministry quarterly reporting process. Given these assumptions, we begin the 2022 budget process assuming the same level of revenue for 2022 as the previous year.

For the 2022 budget the following additional assumptions have been made:

- 1) Minimal adjustments to total FTE staffing;
- 2) Salaries are based on existing union settlements and projection of settlements;
- 3) There will be no new Pay Equity adjustments;
- 4) Anticipate general inflation of at least 2.0% however budget reflects 0% except where costs are outside of our control (e.g., mileage);
- 5) There will be no significant change in Influenza, HPV or Meningitis C immunization rates;
- 6) OMERS pension rates are known and all other benefit costs are based on in-year estimates including a projected increase for extended health benefits;
- 7) Allocation of local contributions between the City and County are based on published 2016 population census data and First Nation contributions are an estimate of per capita cost based on population data provided by the First Nations; and
- 8) Portion of COVID extraordinary and vaccination clinic expenditures are funded through the cost-shared budget.

DECISION HISTORY

The Health Protection and Promotion Act section 72(1) states that the budget for public health programs and services is the responsibility of the obligated municipalities. In August 2020, at the Association of Municipalities of Ontario (AMO), it was announced that public health funding would change to 70% provincial and 30% local for all Ministry of Health cost-shared and 100% funded programs for the 2020 fiscal year. To assist municipalities with this transition, mitigation funding would be provided to ensure local partner contributions would remain the same as 2019, for 2020 and 2021. Based on preliminary communication from the Ministry in October 2021, mitigation funding is expected for the 2022 fiscal year to cap municipal increases at 2019 contributions.

RATIONALE

Under the *Ontario Public Health Standards*, the Board is required to approve an annual budget that does not forecast an unfunded deficit.

The 2022 Ministry of Health cost-shared budget presented reports a deficit from operations of \$499,810, based on expected partner contributions. An increase of \$360,427 from the prior year. The projected deficit would be much higher at approximately, \$1.5 million, if mitigation funding was not received from the province. The loss of mitigation funding would result in a significant increase to the local partner contribution to balance the budget and maintain

program operations and services at minimum level for Standards. For 2022, the budget will be balanced and not result in a deficit, as one-time funding is anticipated to offset the ongoing costs related to the COVID response above the cost-shared budget approval. The following highlights explain the increases over the prior year:

- 1) Staffing costs are higher (4.33%) than the previous year due to minimal adjustments in the staffing complement based on identified staffing needs, anticipated contract settlements and staffing increments.
- 2) Budget lines held at 0% increase except where outside of our control, including travel and benefits.

It should be acknowledged that although the proposed budget is a balanced budget, there is no room for unanticipated expenses, with the exception of eligible COVID expenditures. Any additional budget pressures or funding shortfall will require use of additional reserves to balance the budget.

Throughout 2022, mandatory programs that ceased or continued delivery at reduced service levels are expected to restore at varied increments. As a result, many programs will require a catch-up period to address the backlog of activity. Hiring of additional temporary staff to support program recovery may be necessary in 2022. The 2022 budget does not include an allowance for additional recovery costs. Preliminary communication from the Ministry indicated that one-time recovery funding may be provided to health units, however this has not been confirmed. At this time, the current cost-shared budget will be used to support program recovery efforts, until further communication is received from the Province.

For 2023, it is important to acknowledge that COVID funding should not be anticipated. Contribution increases by both the province and local partners will be required to maintain existing program operations and services at minimum level for Standards, or the Board will need to draw upon reserves to balance the budget.

STRATEGIC DIRECTION

The 2022 approved budget allows the Board to address all its strategic priorities.

ATTACHMENTS

Attachment A – Draft 2022 Cost-Shared Budget
Attachment B – Estimate of Projected COVID Expenditures
Attachment C – Local Partner Share of COVID Expenditures
Attachment D – Draft 2022 Ontario Seniors Dental Program Budget

PETERBOROUGH PUBLIC HEALTH
DRAFT 2022 - Combined Ministry of Health Programs

	2022 Combined Total	2021 Combined Total	Change	% Change	Comments
EXPENDITURES					
1 Salaries and wages	7,381,035	7,074,534	306,501	4.33%	Increase for contract settlements and staff complement net of staffing mix changes
2 Employee benefits	2,094,727	2,026,784	67,943	3.35%	Increase relates to changes in health benefit rates &
3 % benefits of salary and wages	28.38%	28.65%			
4 Staff Training	45,539	45,539	-	0.00%	
5 Board Expenses	48,598	48,598	-	0.00%	
6 Travel	65,627	64,144	1,483	2.80%	Mileage allowance based on anticipated rates
7 Building Occupancy	718,671	718,671	-	0.00%	
8 Office Expenses, Printing, Postage	36,534	36,534	-	0.00%	
9 Materials and Supplies	434,714	444,714	(10,000)	-1.92%	Projected savings based on review of spending trend
10 Office Equipment	12,840	12,840	-	0.00%	
11 Professional and Purchased Services	544,050	544,050	-	0.00%	
12 Communication costs	85,111	85,111	-	0.00%	
13 Information and Information Technology Equipment	61,189	61,189	-	0.00%	
EXPENDITURES	11,528,635	11,162,708	365,927	3.28%	
FEES & OTHER REVENUES					
14 Expenditure Recoveries - Immunization Programs	31,300	23,800	7,500	31.51%	Based on 2019 activity levels and anticipated catch-up due to delays related to COVID
15 Expenditure Recoveries & Offset Revenues	640,506	642,506	(2,000)	-0.31%	Anticipate reduced fee for service revenue due to
FEES & OTHER REVENUES	671,806	666,306	5,500	5.96%	
NET EXPENDITURES - Cost Shared Budget	10,856,829	10,496,402	360,427	3.43%	
PARTNER CONTRIBUTIONS – 2022					
16 Ministry of Health					
- Cost Shared	7,059,700	7,059,700	-	0.00%	Assumes 0% increase from Ministry
- One-Time Mitigation	1,015,000	1,015,000	-	0.00%	Assumes no change in funding from prior year
- Indigenous Communities	10,000	10,000	-	0.00%	Assumes no change in funding from prior year
17 County of Peterborough	928,080	928,080	-	0.00%	Funding based on 2019 Approval
18 City of Peterborough	1,330,450	1,330,450	-	0.00%	Funding based on 2019 Approval
19 Curve Lake First Nation	10,412	10,412	-	0.00%	Funding based on 2019 Approval
20 Hiawatha First Nation	3,377	3,377	-	0.00%	Funding based on 2019 Approval
FUNDING PARTNER CONTRIBUTIONS	10,357,019	10,357,019	-		
Projected (Deficit)	(499,810)	(139,383)	(360,427)		

PETERBOROUGH PUBLIC HEALTH**DRAFT 2022 - Projected COVID Extraordinary and Vaccination Programs**

For the period ending June 30, 2022

EXPENDITURES	COVID-19 Response	COVID-19 Vaccination
Salaries and wages	964,248	1,156,034
Benefits	225,057	190,931
Purchased services	9,800	98,200
Communications	2,000	4,000
Materials and supply	5,500	29,000
Travel	1,500	5,500
Total Expenditures	1,208,105	1,483,665

Projected expenditures for both COVID-19 response and vaccination clinic are based on the assumption that current program staffing and activity will remain at existing levels through to the end of April 2022. For the months of May and June, assume that program activity will reduce by 50% due to the number of vaccinated or remaining eligible individuals in our community.

Of the projected \$1,208,105 for COVID-19 response, approximately \$925,000 relates to the redeployment of staff from mandatory programs. Similarly, of the projected \$1,483,665 for vaccination clinics, approximately \$554,066 relates to staff redeployment. COVID expenditures in excess of underspending in the cost-shared budget will be reimbursed through approval of one-time funding. The estimated total underspending due to redeployment is \$1,479,000.

PETERBOROUGH PUBLIC HEALTH**Local Portion of Projected COVID Extraordinary and Vaccination Programs****Total Projected COVID Expenditures**

COVID Response	1,208,105
COVID Vaccination	<u>1,483,665</u>
Projected Total	<u>2,691,770</u>

**Estimated Portion of Expenditures Covered
Through Cost-Shared Program**

COVID Response	924,632
COVID Vaccination	<u>554,066</u>
Projected Total	<u>1,478,698</u>

Local Portion of COVID Expenditures (30%)	<u><u>443,609</u></u>
--	------------------------------

Allocation of Local Partners

County of Peterborough	181,183
City of Peterborough	259,735
Curve Lake First Nation	2,033
Hiawatha First Nation	<u>659</u>
	<u><u>443,609</u></u>

PETERBOROUGH PUBLIC HEALTH
DRAFT 2022 - Ontario Seniors Dental Program

100% Funded - Ministry of Health

	2022 Projected Budget	2021 Projected Budget	Change	% Change	Comments
EXPENDITURES					
1 Salaries and wages	198,174	197,995	179	0.09%	Increase for contract settlements net of staffing mix changes
2 Employee benefits	52,676	54,355	(1,679)	-3.09%	Decrease due to staffing mix change net of benefit rate increases
% benefits of salary and wages	26.58%	27.45%			
3 Staff Training	1,000	1,000	-	0.00%	
4 Building Occupancy and Maintenance	13,500	12,000	1,500	0.00%	Increase based on actual costs for cleaning/mtce
5 Materials and Supplies	28,750	28,750	-	0.00%	
6 Professional and Purchased Services	353,000	353,000	-	0.00%	
7 Allocated Administration & Occupancy	60,000	60,000	-	0.00%	
EXPENDITURES	707,100	707,100	-	0.00%	
FEES & OTHER REVENUES					
8 Fee for Service - Co-Payment	7,000	7,000	-	0.00%	
FEES & OTHER REVENUES	7,000	7,000	-	0.00%	
NET EXPENDITURES - Program	700,100	700,100			
Ministry of Health - 100% Funded	700,100	700,100			

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Correspondence for Information
DATE:	November 10, 2021
PREPARED BY:	Alida Gorizzan, Executive Assistant
APPROVED BY:	Larry Stinson, Acting Chief Executive Officer

PROPOSED RECOMMENDATIONS

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

- a. E-newsletter dated October 21, 2021 from the Association of Local Public Health Agencies (aPHa). *(Note: Board Chair, Dr. Gemmill, Dr. Piggott and Larry Stinson will be attending the Nov. 17 aPHa virtual conference)*
- b. Letter dated November 2, 2021 from Minister Elliott to the Board Chair regarding one-time funding for 2021-22.
- c. Letter dated November 5, 2021 from the Board Chair to Minister Elliott regarding support for local boards of health.*

Correspondence from other local public health agencies:

- d. Grey Bruce – Local boards of health*
- e. North Bay Parry Sound – Funding
- f. Simcoe Muskoka – Funding
- g. Windsor Essex – Funding

**Enclosures available upon request.*

From: allhealthunits **On Behalf Of** Loretta Ryan

Sent: Thursday, October 21, 2021 9:32 AM

To: All Health Units

Subject: [allhealthunits] alPha Information Break - October 2021 - Featuring alPha Fall Symposium & Section Meetings



October 21, 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.

Fall Symposium and Section Meetings

Ontario's Public Health System: Response & Recovery - Friday, November 19th, 2021 Registration & Draft Program

alPha is pleased to announce that registration is now open for the alPha 2021 Fall Symposium: **Ontario's Public Health System: Response & Recovery** and the Section Meetings that are taking place on Friday, November 19th, 2021!

We have an exciting line-up of speakers including the **Hon. Christine Elliott** (Deputy Premier and Minister of Health), **Graydon Smith** (President, AMO), **Allan O'Dette** (CEO, OMA), **Steini Brown** (Dean, DLSPH), **Dr. Kieran Moore** (Chief Medical Officer of Health), **Colleen Geiger** (President and CEO (acting), Public Health Ontario), **Dr. Jessica Hopkins** (Chief Health Protection and Emergency Preparedness Officer, Public Health Ontario), **Dr. Samir Patel** (Chief, Microbiology and Laboratory Science (acting), Public Health Ontario), **Dr. Brian Schwartz** (Vice President, Public Health Ontario), **Matthew Anderson** (President and CEO, Ontario Health), **Dr. Christopher Simpson** (Executive Vice-President, Medical, Ontario Health), **Dr. Kwame McKenzie** (Chief Executive Officer, Wellesley Institute), and the **Hon. Steven Lecce** (Minister of Education).

The draft program can be accessed by clicking on the [Symposium Banner](#) on the homepage or directly via this [webpage](#) on the alPha website. Members of the Boards of Health Section can find the draft program for their meeting [here](#). (Members of COMOH will receive their meeting package at a later date.)

Registration is \$149 plus HST and information on how to register can be found [here](#). The closing date to register is Wednesday, November 17th. Please note that you must be an alPHA member to participate in the Symposium or Section meetings.

alPHA would like to thank the University of Toronto's Dalla Lana School of Public Health for their generous support and the People Corporation for their sponsorship.

We hope to see you online on Friday, November 19th!

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 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:

COMOH Response - Input on Mandatory HCW Vaccines	2021-10-19
Premier Request - Input on Mandatory HCW Vaccines	2021-10-19
MLTSD Response - Paid Sick Leave	2021-09-22

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 Boards of Health](#)
- [Review of Board of Health Liability, 2018](#)
- [Legal Matters: Updates for Boards of Health](#)
- [Ontario Boards of Health by Region](#)
- [Governance Toolkit](#)

- [Risk Management for Health Units](#)
 - [Healthy Rural Communities Toolkit](#)
 - [The Ontario Public Health Standards](#)
 - [Public Appointee Role and Governance Overview](#)
 - [List of Health Units sorted by Municipality](#)
 - [List of Municipalities sorted by Health Unit](#)
 - [Map: Boards of Health Types](#)
 - [NCCHPP Report: Profile of Ontario's Public Health System \(2021\)](#) **New!**
-

RRFSS Update

There has never been a greater need for Health Units to collect RRFSS data in 2022!

- ✓ **RRFSS provides local COVID-19 data** – RRFSS has over 100 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](#).
- ✓ **RRFSS provides timely data** – data is available to HUs approximately 8 weeks after data collection – giving current local data which is essential for HUs particularly given the delay of the CCHS data. Letters of Intent to join RRFSS in 2022 are due in November and cost options are now available. So now is the perfect time to plan on joining RRFSS.
- ✓ **RRFSS provides data for post pandemic planning** - HUs will be undertaking pandemic recovery planning and will need to have data for this purpose including data on the success of the vaccination roll-out, concerns about the vaccine and improving uptake. In addition, data will be necessary on other health conditions that were de-prioritised during the pandemic as the direct and indirect effects of COVID-19 on the population's longer-term health become apparent.

So don't delay and contact the RRFSS Coordinator, [Lynne Russell](#) to find out how your Health Unit can collect local data by joining RRFSS.

PHO Resources

PHO has released [At a Glance: Summary of Infection Prevention and Control Key Principles and Best Practices for Clinical Office Practice](#). This document provides important infection prevention and control (IPAC) best practices and resources for clinical office settings as they increase/resume in-person care, which may include vaccination as well as assessments and testing for acute respiratory illnesses such as influenza and COVID-19.

The information in this document is complementary to:

- Provincial Infectious Diseases Advisory Committee's [Infection Prevention and Control for Clinical Office Practice](#)
- [IPAC Checklist for Clinical Office Practice Core Elements](#)
- [Checklist for Infection Prevention and Control Assessment for Primary Care, Specialty and Walk-in Clinics during COVID-19](#)
-

Directives and relevant guidance from the Government of Ontario for providers in primary care and other community settings should continue to be followed. For more information visit Ministry of

Health's website: [COVID-19: Guidance for the Health Sector](#).

For more information, contact your [Regional IPAC Support Team](#) or email ipac@oahpp.ca.

Upcoming PHO Events

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

- [Webinar: Path to Success: Becoming an Infection Prevention and Control Rock Star with Your Program Review](#) 22 Oct 2021Webinar
 - [PHO Rounds: Novel Disease Surveillance Tools for the Next Pandemic](#)
 - 26 Oct 2021Webinar
 - [Learning Exchange: Supports for workers responding to overdoses in Ontario](#)
 - 29 Oct 2021Webinar
-

Upcoming DLSPH Events, Courses and Webinars

The Dalla Lana School of Public Health hosts many public-health related events, from regular seminar series, featured guest speakers, and professional development opportunities. View all events by day, month, or type of event [here](#). You can explore all past webinars [here](#).

Upcoming events include:

- [Virtual Hereditary Cancer Series](#) (Jan. 15 - Nov. 19)
 - [CSPHP Rounds | Dr. Steini Brown: Science Advice During a Time of Crisis](#) (Oct. 22)
 - [Introduction to GitHub \(Health Data Working Group @ DLSPH\)](#) (Oct. 25)
 - [Department of Family and Community Medicine: Graduate Studies Admissions Open House](#) (Oct. 26)
 - [One Health, One World: From Antibiotics to Zoonoses](#) (Oct. 27)
 - [3rd CQ Critical Pedagogies Symposium on Teaching & Learning Critical Qualitative Health Methods](#) (Nov. 5)
-

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



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-72-2021-312

November 2, 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 \$2,492,100 in additional one-time funding for the 2021-22 funding year to support 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 Vaccine Program at the local level. In recognition of these unique circumstances, public health units will have continued opportunities to request reimbursement of COVID-19 extraordinary costs, including vaccine related expenses, for the 2021 and 2022 funding years.

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

Mayor Andy Mitchell

- c: Dr. Ian Gemmill, Medical Officer of Health (A), Peterborough County-City Health Unit
- Dr. Kieran Moore, Chief Medical Officer of Health
- Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery

November 5, 2021

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

Dear Minister Elliott:

Re: Support for Local Boards of Health

At its meeting held on October 13, 2021, the Board of Health (BOH) passed a resolution that Peterborough Public Health support the position articulated in the City of Hamilton's Board of Health's correspondence, dated September 15, 2021 regarding the importance and preference of a local versus regional governance model for public health in Ontario.

Our BOH has historically supported this view, both in its [response to the Report of the Minister's Expert Panel on Public Health \(2017\)](#), as well as in its [Position Paper on the Modernization of Public Health in Ontario \(2020\)](#). An Executive Summary of the latter has been appended, for your reference.

Local responsiveness, knowledge and partnerships have been critical throughout the COVID-19 pandemic. These should be explored further and assessed as part of a comprehensive post-pandemic review. As recently recommended by the Ontario Medical Association, the Province should proceed with "carrying out an independent and unbiased review of Ontario's response to the pandemic including the public health system, its strengths and weaknesses during pandemic and non-pandemic times, along with its roles and responsibilities, before considering any changes."¹

Our Board looks forward to working with you and your Ministry to explore ways in which local governance can continue to contribute to and strengthen the delivery of public health services in Ontario.

Sincerely,

Original signed by

Mayor Andy Mitchell,
Chair, Board of Health

/ag
Encl.

cc: Local MPPs
Council of Medical Officers of Health
Association of Local Public Health Agencies
Ontario Boards of Health

¹ Ontario Medical Association (2021). *Prescription for Ontario: Doctors' 5-Point Plan for Better Health Care*.
<https://www.oma.org/uploadedfiles/oma/media/public/prescription-for-ontario-doctors-5-point-plan-for-better-health-care.pdf>

October 13, 2021

The Honourable Christine Elliott , Deputy Premier
Ministry of Health and Long-Term Care
10th Floor, 80 Grosvenor St
Toronto, ON M7A 2C4
Christine.Elliott@pc.ola.org

Dear Minister Elliott:

Re: Support for a Local Board of Health

On September 24, 2021 at a regular meeting of the Board for the Grey Bruce Health Unit, the Board considered the attached letter from the Haliburton, Kawartha, Pine Ridge District Health Unit regarding support for a local Board of Health. The following motion was passed:

Motion No: 2021-80

Moved by: Mitch Twolan

Seconded by: Brian Milne

“That the Board of Health endorse the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit Re: requesting ongoing provincial government financial support for local public health.”

Carried.

Sincerely,



Sue Paterson
Chair, Board of Health
Grey Bruce Health Unit

cc: Dr. Kieran Moore, Ontario Chief Medical Officer of Health
Dr. Charles Gardner, Chair, Council of Medical Officers of Health
Association of Municipalities of Ontario
Ontario Boards of Health
Loretta Ryan, Association of Local Public Health Agencies

Encl.
/mh

November 1, 2021

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

Dear Minister Elliott:

RE: Public Health Funding for 2022

The Board of Health for the North Bay Parry Sound District Health Unit (Board) commends the government's financial commitment to public health throughout the pandemic. This trust has enabled public health programs and services, critical to the pandemic response, to continue. There is still much to be accomplished as the pandemic evolves. Vital to achieving future successes is the ability to strategically plan for 2022.

Pursuant to the Health Unit's correspondence of June 24, 2021, the Board is again respectfully requesting the Ministry to urgently establish funding expectations for 2022. This is critical for planning purposes for both the Health Unit and the municipalities we serve.

The Board is urging the Ministry of Health to commit in writing to:

1. Extend COVID-19 funding in 2022 for:
 - a. COVID-19 Extraordinary Costs; and
 - b. COVID-19 Vaccination Extraordinary Costs
2. Establish funding in 2022 for public health recovery efforts
3. Increase provincial funding for public health base budgets with the proportional municipal levy increase needed in 2022 to maintain public health unit capacity

Health units have had only one base funding increase in the past five years; however, wage and benefit increases and general increases to operating costs due to inflation continue. In addition, two public health union contracts are to be negotiated in 2022 with workforces experiencing recruitment and retention issues. A zero percent increase in base funding for 2022 is untenable if health units are to fulfill the requirements for programs, services, and accountability as delineated in the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability (Standards).

As per the Standards:

“Boards of health are responsible for programs and services in all core function areas, demonstrating accountability to the ministry, and monitoring and measuring the effectiveness, impact and success of their programs and services.”

Requisite to realizing Ministry expectations to deliver mandated public health programs is a highly skilled and experienced workforce. They are essential to ensuring the future success of entrusted programs such as healthy growth and development, school health, chronic disease prevention and well-being, substance misuse and injury prevention, healthy environments, food safety, infectious and communicable diseases prevention and control, and immunization.

The COVID-19 pandemic has taught us that an able-bodied, prepared public health system is more important than ever. Without a base funding increase, public health’s capacity will be diminished, with even harder choices having to be made regarding where we can assist in pandemic recovery and building healthier and sustainable communities. A base funding increase for 2022 is necessary to maintain public health services at status quo.

Your assistance and attention to this pressing matter is greatly appreciated.

Sincerely yours,

Original Signed by Dr. Jim Chirico

James Chirico, H.BSc., M.D., F.R.C.P. (C), MPH
Medical Officer of Health/Executive Officer

Original Signed by Nancy Jacko

Nancy Jacko
Chairperson, Board of Health

/sb

Copy to: Premier Doug Ford
Hon. Helen Angus, Deputy Minister of Health
Chief Medical Officer of Health
Elizabeth Walker, Director, Public Health Accountability and Liaison Branch
Collen Kiel, Director, Public Health Strategy and Planning Branch
Vic Fedeli, MPP, Nipissing
Norm Miller, MPP, Parry Sound-Muskoka
John Vanthof, MPP, Timiskaming-Cochrane
Ontario Boards of Health
Member Municipalities (31)
Association of Municipalities Ontario (AMO)
Association of Local Public Health Agencies (alPHa)
Council of Medical Officers of Health (COMOH)
Andrea Horwath, New Democratic Party of Ontario, Leader, Official Opposition
Steven Del Duca, Ontario Liberal Party
Mike Schreiner, Green Party of Ontario
Jim Karahalios, New Blue Party of Ontario

October 21, 2021

Honourable Christine Elliott
Ministry of Health
777 Bay Street, 5th Floor
Toronto, ON M7A 2J3

Dear Minister Elliott:

On behalf of the Board of Health for the Simcoe Muskoka District Health Unit (SMDHU), I commend the strong progress being made in bringing COVID-19 under control through the public health measures and the vaccination campaign directed by the provincial government of Ontario. We continue to work collectively to complete the “final mile” of vaccination of the population while simultaneously continuing all activities of COVID-19 surveillance and case management/contact tracing.

The COVID-19 work has required an unprecedented quantity of resources, particularly human resources. Accordingly, boards of health have had to significantly augment their staffing specifically for the Mass Immunization Clinics. Salaries and related expenses of this greatly enhanced workforce (including transportation, supplies and equipment) have only been partially managed by the funding received from the province on July 22, 2021. SMDHU only received 42% of its COVID-19 funding request and costs to date have far exceeded that funding. To add to 2021 cash flow pressures, SMDHU would require the hiring of nursing and administrative staff to implement the provincially mandated vaccine clinics for 5–11-year-olds in Simcoe County and the District of Muskoka as well as implement the “booster” clinics for specific populations. With no immediate COVID-19 funding, these pressures for the end of 2021 compound finance issues for SMDHU and will potentially impede our ability to finance the human resources required.

The SMDHU Board of Health via management staff have been in active communication with Ministry of Health staff specifically related to the one-time funding COVID-19 requests. Unfortunately, the Board of Health experienced cash flow issues in July due to the lack of COVID-19 funding from the Ministry of Health to the point, that the Board was forced to seek approval from its four obligated municipalities to borrow from a bank up to \$5M to cover salaries and expenses for COVID-19 activities. SMDHU also sought and received from the Ministry of Health an advance in funding for the Ministry portion of the cost-shared budget to ensure that payroll commitments and the payment of vaccination expenses could be met. On October 20, 2021, the Board of Health approved a motion requesting that boards of health immediately receive the *COVID-19 Extraordinary Costs* and COVID-19 Vaccine Extraordinary Costs funding as articulated in SMDHU’s Q2 financial statement and that the Ministry of Health commit in writing to:

- (1) extend COVID-19 funding in 2022;
- (2) establish funding in 2022 for public health recovery activities; and,

- (3) increase provincial funding for public health base budgets proportional to the municipal levy increase needed in 2022 to maintain capacity for public health program delivery.

The financial pressure from not having access to the required amount of COVID-19 funding from the province, with the simultaneous requirement to respond to the pandemic through surveillance, case and contact management, outbreak response, education and enforcement of the changing requirements of the *Reopening Ontario (A Flexible Response to COVID-19) Act*, and the vaccination of the population has placed the Board in a precarious financial situation. If there is not sufficient funding from the province, there is also a sizeable risk that SMDHU will have a large year-end deficit moving into 2022 based on 2021 COVID-19 expenses that may require a large municipal levy increase to eliminate the deficit and to address the response needs in 2022.

For these reasons the SMDHU Board of Health urges the provincial government to approve and immediately flow the amount required by each health unit of one-time *COVID-19 Extraordinary Costs* and *COVID-19 Vaccine Program Extraordinary Costs*.

Thank you for considering this urgent matter.

Sincerely,

ORIGINAL Signed By:

Anita Dubeau
Chair, Board of Health

AD:CG:cm

cc: Ontario Boards of Health
MPPs of Simcoe Muskoka
City of Barrie Mayor and Council
City of Orillia Mayor and Council
The District Municipality of Muskoka District Chair and Council
County of Simcoe Warden and Council
Dr. Kieran Moore, Ontario Chief Medical Officer of Health
Loretta Ryan, Executive Director, Association of Local Public Health Agencies
Graydon Smith, President, Association of Municipalities of Ontario

November 4, 2021

The Hon. Christine Elliott
Ministry of Health, Deputy Premier
Ministry of Health
College Park 5th Floor
777 Bay St. Toronto, ON M7A 2J3

The Hon. Doug Ford
Premier of Ontario
Legislative Building
Queen's Park
Toronto, ON M7A 1A1

Dear Minister Elliott,

The Board of Health for the Windsor-Essex County Health Unit (WECHU) would like to express its gratitude for the funding received over the course of the COVID-19 pandemic. Additionally, the WECHU would like to take this opportunity to acknowledge the recent approval of mitigation funding for 2022. The extension of the mitigation funding is a recognition of the impact of the COVID-19 pandemic in our community.

Windsor and Essex County (WEC) has been disproportionately impacted by the COVID-19 pandemic. To date, total confirmed cases of COVID-19 were 20,350, and 462 residents of Windsor-Essex have died. While the WECHU continues to be heavily focused on the COVID-19 response in the community of WEC, preliminary work has commenced on recovery and catch-up efforts including:

- Planning of a community needs assessment and review of surveillance data to identify priorities in our community, informing priorities for program restart and program development.
- Continued focus on such initiatives as the establishment of a consumption and treatment site in the community of WEC. Throughout the COVID-19 pandemic, there has been an escalation in opioid related incidents.
- On-going COVID-19 response efforts including case and contact management, vaccinations and enforcement of regulations.
- Conducting an internal review of human and other resources to inform internal capacity during recovery. This includes an assessment of the internal readiness for a shift from COVID-19 pandemic-related activities to COVID-19 endemic-related activities.

- Catching up on the back log of services including but not limited to:
 - School-based catch-up clinics, 5,863 doses of Men C, 8,127 HPV, 8,287 HB are outstanding. With regards to new grade 7 cohorts, 4,329 doses of Men C, 4,437 HPV, 3,909 HB are outstanding.
 - More than 15,000 students have not received oral health screening.
 - Approximately 4,000 students in senior kindergarten have not received vision screening.

Public health has been instrumental in the response to the COVID-19 pandemic. The WECHU like other public health units have redeployed staff, hired additional staff and have stopped important programming to the communities' health in response to pandemic pressures. To facilitate recovery efforts in a comprehensive and sustainable manner the WECHU Board of Health asks the Government of Ontario to provide an increase in base funding for mandatory programs specifically to support:

- Ongoing COVID-19 related expenses and sustainability
- Increases in wages, benefits and operational costs
- Recovery efforts and increased demand and need for programming including but not limited to substance use, mental health, healthy growth and development.

Additionally, the WECHU implores the Government of Ontario to provide one-time funding to support recovery and catch-up efforts over a multi-year period (2022 to 2024), recognizing that certain communities were more negatively impacted by the COVID-19 pandemic than others.

Sincerely,



Gary McNamara
Board of Health

c: Premier Doug Ford
Association of Local Public Health Agencies (ALPHA)

**PETERBOROUGH PUBLIC HEALTH
BOARD OF HEALTH**

TITLE:	Stewardship Committee Report
DATE:	November 10, 2021
PREPARED BY:	Alida Gorizzan, Executive Assistant, on behalf of Dr. Hans Stelzer, Committee Chair
APPROVED BY:	Larry Stinson, Acting Chief Executive Officer

PROPOSED RECOMMENDATIONS

- a. That the Board of Health for Peterborough Public Health receive meeting minutes of the Stewardship Committee from October 21, 2020.

BACKGROUND

The Governance Committee met last on October 27, 2021. At that meeting, the Committee requested that this item come forward to the Board at its next meeting for information.

ATTACHMENTS

- a. [Governance Minutes, October 21, 2020](#)

**Board of Health for
Peterborough Public Health
MINUTES
Stewardship Committee Meeting
Wednesday, October 21, 2020 – 5:00 – 6:30 p.m.
Multipurpose Rooms, 2nd Floor,
185 King Street, Peterborough Public Health**

Present: Councillor Henry Clarke, Chair
Ms. Kerri Davies
Deputy Mayor Matthew Graham
Mayor Andy Mitchell
Councillor Kathryn Wilson (electronic participation)

Staff: Ms. Dale Bolton, Manager, Finance and Property
Alida Gorizzan, Executive Assistant (Recorder)
Dr. Rosana Salvaterra, Medical Officer of Health

1. Call to Order and Opening Statement

The Chair called the Stewardship Committee meeting to order at 5:00 p.m.

2. Confirmation of the Agenda

MOTION:

That the agenda be approved as circulated.

Moved: Ms. Kerri Davies

Seconded: Deputy Mayor Graham

Motion carried. (M-2020-029-SC)

3. Declaration of Pecuniary Interest

4. Consent Items to be Considered Separately (nil)

5. Delegations and Presentations (nil)

6. Confirmation of the Minutes of the Previous Meeting

MOTION:

That the minutes of the Meeting of August 12, 2020 be approved as circulated and provided to the Board of Health at its next meeting for information.

Moved: Ms. Davies

Seconded: Deputy Mayor Graham

Motion carried. (M-2020-030-SC)

7. Business Arising From the Minutes

8. Staff Reports

8.1. By-Laws and Policies for Review

MOTION:

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

- *By-Law Number 2, Banking and Finance (reviewed, no changes)*
- *By-Law Number 9, Procurement of Goods and Services (reviewed, no changes)*

Moved: Deputy Mayor Graham

Seconded: Ms. Davies

Motion carried. (M-2020-031-SC)

8.2. Asset Management Update

MOTION:

That the Stewardship Committee receive the oral report, Asset Management Update, for information.

Moved: Deputy Mayor Graham

Seconded: Ms. Davies

Motion carried. (M-2020-032-SC)

8.3. Q3 2020 Financial Report

MOTION:

That the Stewardship Committee:

- *receive the Q3 2020 Finance Report for information; and,*
- *provide it to the Board of Health at its next meeting for information.*

Moved: Deputy Mayor Graham

Seconded: Ms. Davies

Motion carried. (M-2020-033-SC)

8.4. 2021 Cost-Shared and Ontario Seniors Dental Program Budget Approvals

That the Stewardship Committee:

- *receive the staff report, 2021 Cost-Shared and Ontario Seniors Dental Program Budget Approvals, for information*
- *recommend Board approval of the 2021 Cost-Shared budget for public health programs and services in the amount of \$10,496,402; and*
- *recommend Board approval of the 2021 Ontario Seniors Dental Program budget in the amount of \$700,100.*

Moved: Ms. Davies
Seconded: Deputy Mayor Graham
Motion carried. (M-2020-034-SC)

9. **Consent Items** (*nil*)
10. **New Business** (*nil*)
11. **In Camera to Discuss Confidential Matters** (*nil*)
12. **Motions for Open Session** (*nil*)
13. **Date, Time, and Place of the Next Meeting**

Dates to be confirmed in January 2021.
Or, at the call of the Chair.

14. **Adjournment**

MOTION:

That the meeting be adjourned.

Moved: Deputy Mayor Graham
Seconded: Ms. Davies
Motion carried. (M-2020-035-SC)

The meeting was adjourned at 5:39 p.m.

Chairperson

Medical Officer of Health