

Board Correspondence

January 2022

Date	From	Subject
December 17, 2021	Grey Bruce Health Unit	Motion to endorse – Correspondence from Windsor-Essex County Health Unit re: funding to support recovery and catch up over a multi-year period.
January 14, 2022	Ministry of Finance	Ontario Launches Virtual 2022 Budget Consultations . Closing date: Feb 11, 2022.
January 19, 2022	Association of Local Public Health Agencies (alPHA)	alPHA Speaking Notes - Pre Budget, Jan 19, 2022 and alPHA Letter - 2022 Pre-Budget Submission
January 20, 2022	Haliburton, Kawartha, Pine Ridge District Health Unit	Ltr to Ministry of Health – support for local Boards of Health vs Regional.

December 17, 2021



The Honourable Christine Elliott
Ministry of Health, Deputy Premier
College Park 5th Floor
777 Bay Street
Toronto, ON M7A 2J3
Christine.Elliott@pc.ola.org

Dear Minister Elliott:

Re: Support for a Local Board of Health

On November 26, 2021 at a regular meeting of the Board for the Grey Bruce Health Unit, the Board considered the attached letter from the Windsor-Essex County Health Unit regarding funding to support recovery and catch up over a multi-year period. The following motion was passed:

Motion No: 2021-95

Moved by: Alan Barfoot

Seconded by: Selwyn Hicks

"THAT, the Board of Health endorse the correspondence from Windsor-Essex County Health Unit about funding to support recovery and catch up over a multi-year period."

Carried.

Sincerely,

A handwritten signature in cursive script that reads "Sue Paterson".

Sue Paterson
Chair, Board of Health
Grey Bruce Health Unit

cc: Honourable Bill Walker MPP for Bruce-Grey-Owen Sound
Honourable Lisa Thompson MPP for Huron-Bruce
Honourable Jim Wilson MPP for Simcoe-Grey
Warden for Bruce, Warden Janice Jackson
Warden for Grey, Warden Selwyn Hicks
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

A healthier future for all.

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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)



January 20, 2022

The Honourable Christine Elliott, Deputy Premier
Deputy Premier and Minister of Health, Ontario
Hepburn Block 10th Floor 80 Grosvenor Street
Toronto, ON M7A 1E9

Sent via email: christine.elliott@pc.ola.org

Dear Minister Elliott

RE: Support for Local Boards of Health versus Regional

At its meeting held on January 20, 2022, the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit (HKPRDHU) passed a motion to support correspondence from the Boards of Health for the City of Hamilton and Peterborough Public Health regarding the importance and preference for a local versus regional governance model for public health in Ontario.

We concur with our public health unit colleagues that local responsiveness, knowledge, and partnerships have been integral to our pandemic response and that this should be considered as part of a comprehensive post-pandemic review before considering any changes to, or reductions in, public health units in Ontario (regionalization). Also, that the Province and the Ministry consult the various partners that health units work with during pandemic and non-pandemic times to assess how they would be impacted by a regional versus a local public health unit approach.

Local public health units have always been important; the pandemic has highlighted the importance for us, the public, and our partners.

.../2

PROTECTION · PROMOTION · PREVENTION

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108 Angeline Street South
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Phone · 1-866-888-4577
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Minister Elliott
January 20, 2022
Page 2

Our Board looks forward to working with you to ensure that a meaningful review of local public health governance and effectiveness is conducted with a focus on the needs of the residents and all the partners we work with through the programs and services that are offered by health units during pandemic and non-pandemic times.

Respectfully

BOARD OF HEALTH FOR THE HALIBURTON, KAWARTHA,
PINE RIDGE DISTRICT HEALTH UNIT

Original signed by Mr. Elmslie

Doug Elmslie, Chair, Board of Health

DE/nb

Encls. 2

Cc (via email): The Hon. Doug Ford, Premier
The Hon. Laurie Scott, MPP Haliburton-Kawartha Lakes-Brock
David Piccini, MPP Northumberland-Peterborough South
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
Jennifer Moore, CAO, Northumberland County
Mike Rutter, CAO, Haliburton County
Ron Taylor, CAO, City of Kawartha Lakes
Susan Walsh, CEO, Northumberland Hills Hospital
Carolyn Plummer, CEO, Haliburton Highlands Health Services
Eric Hanna, Interim CEO, Campbellford Memorial Hospital
Kelly Isfan, CEO, Ross Memorial Hospital



OFFICE OF THE MAYOR
CITY OF HAMILTON

September 15, 2021

Honourable Christine Elliott
Minister of Health and Long-Term Care
10th Floor, 80 Grosvenor Street,
Toronto, ON M7A 2C4
Christine.Elliott@pc.ola.org

RE: Support for a Local Board of Health

Dear Minister Elliott,

As the province of Ontario and Public Health Unit's across the province continue to respond to the COVID-19 pandemic, the City of Hamilton's Board of Health has been reflecting on our local pandemic response. COVID-19 has highlighted the importance of public health local responsiveness, particularly when dealing with local outbreaks. During the past eighteen months we have seen how local knowledge and partnerships has strengthened the pandemic response by better understanding the needs in the community and leveraging trusted relationships. The strength, timeliness, and flexibility of local collaboration can be seen through the implementation of various strategies, including increased public health measures, equitable access to COVID-19 testing, and an extremely complex and targeted vaccination strategy.

We are writing this letter to reiterate our position that a local, rather than regional governance is preferred to inform planning on how to strengthen and modernize the public health system. One of the current strengths of the governance system in Hamilton is the ties to the municipal sector which has a direct influence on opportunities for health where people live. As a governing body, the Hamilton Board of Health / Council can remain flexible and make decisions to increase, decrease or change service delivery based on local need. This has been particularly important throughout the pandemic as regular public health programs had to be flexible with the level of their operations to allow for resources to be shifted to essential services and the COVID-19 response. Maintaining the local voice supports ongoing advocacy of local need to ensure that priorities in the community are met, for example, the collection of local Social Determinants of Health Data which has allowed public health efforts to more effectively reach those who are disproportionately affected by the pandemic.

September 15, 2021

It is believed that if there is a shift to a regional board of health model, there will be a reduced local leadership voice in decision making. Due to this, it is important that public health governance remains local while ensuring accountability to municipalities, the province and the local population. Leveraging local responsiveness during the pandemic has reinforced our position that a local rather than regional governance remains the preferred model.

Sincerely,

A handwritten signature in black ink, appearing to read 'Fred Eisenberger', with a long horizontal stroke extending to the right.

Fred Eisenberger
Mayor

CC:

Andrea Horwath, MPP, Hamilton Centre
Paul Miller, MPP, Hamilton East – Stoney Creek
Monique Taylor, MPP, Hamilton Mountain
Sandy Shaw, MPP, Hamilton West – Ancaster – Dundas
Donna Skelly, MPP, Flamborough – Glanbrook
Council of Ontario Medical Officers of Health
Association of Local Public Health Agencies (ALPHA)
Ontario Boards of Health

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>



OFFICE OF THE MAYOR
CITY OF HAMILTON

September 15, 2021

Honourable Christine Elliott
Minister of Health and Long-Term Care
10th Floor, 80 Grosvenor Street,
Toronto, ON M7A 2C4
Christine.Elliott@pc.ola.org

RE: Support for a Local Board of Health

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It is believed that if there is a shift to a regional board of health model, there will be a reduced local leadership voice in decision making. Due to this, it is important that public health governance remains local while ensuring accountability to municipalities, the province and the local population. Leveraging local responsiveness during the pandemic has reinforced our position that a local rather than regional governance remains the preferred model.

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Council of Ontario Medical Officers of Health
Association of Local Public Health Agencies (ALPHA)
Ontario Boards of Health



Peterborough
Public Health

The Modernization of Public Health in Ontario

A Position Paper:
Recommendations from the Board of Health
for Peterborough Public Health

Serving the residents of **Curve Lake** and **Hiawatha First Nations**,
and the **County** and **City of Peterborough**

January 8, 2020

Executive Summary

Ontario's public health system delivers value for money, and helps to ensure Ontarians are fully able to contribute to a prosperous, sustainable and healthy future. Investments in public health are vital to maximizing prevention efforts in order to protect the Province and reduce demands for downstream health care services. Public health recognizes that it plays an important role in reducing hallway health care.

Peterborough Public Health (PPH) does not support the changes to the Ontario public health system put forward by the Provincial Government as part of its April 2019 budget. Although modifications to the system designed to make it more effective should be considered, the proposals of the Provincial Government were overly broad and did not target key areas for reform. If adopted, their impact would have significantly and irrevocably damaged the governance and delivery of public health services in the province. They were akin to using a sledgehammer to crack open a peanut. Public health in Peterborough is not broken – with the exception of issues related to capacity and funding, our communities benefit from services that are responsive, timely and effective.

PPH has worked hard to inform the Province and other stakeholders about its concerns including:

- Responding to local media in order to inform the public and local stakeholders on the potential negative impacts
- Making written submissions to the Minister and Ministry
- Engaging local government MPPs in discussion with the board and local political leaders
- Developing and presenting an emergency resolution to the Annual General Meeting of the Association of Local Public Health Agencies (alPHa)
- Engaging in discussions with neighbouring boards of health
- Engaging in the Eastern Ontario Wardens Caucus resolution
- Engaging in the formal Provincial consultation
- Completing the Ministry survey on public health modernization
- Engaging decision makers at both the Association of Municipalities of Ontario (AMO) and Rural Ontario Municipal Association (ROMA) conferences

We applaud the Provincial Government for seeking public input before proceeding with any structural changes however PPH continues to express concern that the Government is continuing with its plan to transfer \$180 million of public health costs unto the local tax base, although at a slower pace than originally announced.

Principles of Reform

PPH believes that public health in Ontario must be shaped and delivered at the local level and that any proposed changes to public health governance and delivery need to be consistent with the following principles:

1. The enhancement of health promotion and disease prevention must be the primary priority of any changes undertaken;
2. Investments in public health must be recognized as a critical strategy in reducing the need for hallway health care;

3. Any consolidation of public health units should reflect a community of interests which include distinguishing between rural and urban challenges and facilitates the meaningful participation of First Nations;
4. Adequate provincial funding is necessary to ensure effective health promotion and prevention activities in Ontario. Funding should be predictable and consider factors such as equity, population demographics and density, rural/urban mix and increase to meet new demands;
5. Local funding needs to consider a municipality's ability to pay in the context of the broad range of changes in funding arrangements between the Province and municipalities;
6. As public health is a joint municipal-provincial venture, its governance structure must provide accountability to the local councils that are required to fund local public health agencies;
7. Changes undertaken need to be evidenced based and not ideologically driven; and,
8. Change must be driven from the bottom up, in a process that respects both Provincial and local interests and facilitates genuine collaboration. Change management impact must be acknowledged in this process.

Recommendations

In addressing the reform of public Health in Ontario, PPH has developed a series of recommendations in **three** broad thematic areas consistent with the principles noted above:

1. Structure and Governance

- 1.1. Negotiate boundaries for a local public health agency (LPHA) with an optimal size of 300,000 to 500,000¹ that reflects a community of interests and recognizes the rights and interests of First Nations.
- 1.2. Structure negotiations in a manner that respects local concerns and is responsive to local priorities.
- 1.3. Mandate municipal board representation and accountability that reflects municipal fiscal contributions.
- 1.4. Consider the establishment of regional structures to assist local boards in the delivery of programming and cost containment (i.e., back office integration, mutual aid agreements, issue-specific expertise).
- 1.5. Enhance Public Health Ontario's (PHO) coordination role as it relates to knowledge and technical support; central analytics; evidence generation; and, performance measurement.



¹ Mays et al. Institutional and Economic Determinants of Public Health System Performance. Amer J Pub Health 2006;96;3:523-531.

2. Program Delivery

- 2.1. Ensure health promotion and prevention programming is designed to reduce future health care use and costs.
- 2.2. Ensure stable and predictable provincial funding is provided that reflects demographic, equity and other local conditions, responsive to increased or emerging demands.
- 2.3. Ensure local financial contributions are reflective of municipalities' abilities to pay.
- 2.4. The Province should provide LPHAs with training and human resource support to ensure frontline staff have core competencies consistent with provincial standards.
- 2.5. The local delivery of public health programming should include:
 - Community engagement in design and delivery;
 - Nurturing of local relationships with delivery partners;
 - Supporting local decision makers with healthy public policy;
 - Program delivery which encompasses consistent local staffing;
 - Promotion of provincial policy development based on local needs and issues;
 - Delivery of health promotion campaigns that reflect local conditions and are built on local strategies;
 - Ensuring the social determinants of health are a lens through which local policies are developed; and,
 - Undertaking local applied research that is disseminated at a provincial level for the benefit of all LPHAs.

3. Implementation

- 3.1. Provide sufficient time to implement any proposed changes.
- 3.2. Build on best practices learned from past amalgamations.
- 3.3. Ensure sufficient provincial financial support is available to meet one-time implementation costs.
- 3.4. Implement changes using an integrated and comprehensive approach.

Ontario experienced a prolonged drought for public health that was brought to light with the tragedies of both SARS and Walkerton. We hope that important lessons have been learned and that the neglect that occurred in the past will not be repeated. In order to do that, boards of health need to know that the Province is committed to investing in public health in order to protect its citizens and keep our communities open for business.



Peterborough Public Health provides catch up vaccinations for new Canadians, including this boy originally from Syria.