



Our Vision:  
*Healthy People in Vibrant Communities*

**BOARD OF HEALTH MEETING**

Woodstock Location: 410 Buller Street, Woodstock, ON  
 Buller Basement Large Conference Room  
 Virtual Participation: Zoom  
 Tuesday, May 30, 2023, at 1:00 p.m.

**AGENDA**

ITEM	AGENDA ITEM	LEAD	EXPECTED OUTCOME
<b>1.0 CONVENING THE MEETING</b>			
1.1	Call to Order, Recognition of Quorum <ul style="list-style-type: none"> <li>Introduction of Guests, Board of Health Members and Staff</li> </ul>	Bernia Wheaton	
1.2	Approval of Agenda	Bernia Wheaton	Decision
1.3	Reminder to disclose Pecuniary Interest and the General Nature Thereof when Item Arises including any related to a previous meeting that the member was not in attendance for.	Bernia Wheaton	
1.4	Reminder that Meetings are recorded for minute-taking purposes	Bernia Wheaton	
<b>2.0 APPROVAL OF MINUTES</b>			
2.1	Approval of Minutes: April 27, 2023	Bernia Wheaton	Decision
<b>3.0 APPROVAL OF CONSENT AGENDA ITEMS</b>			
<b>4.0 CORRESPONDENCE RECEIVED REQUIRING ACTION</b>			
4.1	<b>2023 PHS Annual Service Plan &amp; Budget Submission Support for Sufficient, Stable, and Sustained Funding for Local Public Health Agencies</b> April 17, 2023: Hamilton Public Health Services <i>Summary: The letter urges the Ministry of Health to fully fund at least 70% of the mandatory public health programs and services under the Ontario Public Health Standards (OPHS). They also request the continuation of current mitigation funding until the cost-shared arrangement is restored to 75%/25% for all programs, with the Province assuming 100% funding for identified programs as well as incorporate ongoing Covid-19 response in the OPHS and provide permanent funding for these requirements.</i>	Bernia Wheaton	Decision
<b>5.0 AGENDA ITEMS FOR INFORMATION.DISCUSSION.ACCEPTANCE.DECISION</b>			
5.1	Chief Executive Officer's Report for May 30, 2023	Cynthia St. John	Acceptance
<b>6.0 NEW BUSINESS/OTHER</b>			
<b>7.0 CLOSED SESSION</b>			
<b>8.0 RISING AND REPORTING OF THE CLOSED SESSION</b>			
<b>9.0 FUTURE MEETINGS &amp; EVENTS</b>			
9.1	Thursday, June 22, 2023, at 1:00 pm Location: St. Thomas Site, Talbot Boardroom Virtual Participation: MS Teams	Bernia Wheaton	Decision
<b>10.0 ADJOURNMENT</b>			



The meeting of the Board of Health for Oxford Elgin St. Thomas Health Unit was held on Thursday, April 27, 2023, in-person at 1230 Talbot Street, ON, with virtual participation commencing at 1:02 p.m.

**PRESENT:**

Mr. J. Couckuyt	Board Member
Mr. J. Herbert	Board Member
Mr. G. Jones	Board Member
Mr. M. Peterson	Board Member
Mr. J. Preston	Board Member (Chair)
Mr. L. Rowden	Board Member
Mr. M. Ryan	Board Member
Mr. D. Warden	Board Member
Ms. B. Wheaton	Board Member (Vice Chair)
Ms. C. St. John	Chief Executive Officer
Dr. N. Tran	Medical Officer of Health
Ms. W. Lee	Executive Assistant

**GUESTS:**

Mr. P. Heywood	Program Director*
Mr. D. McDonald	Director, Corporate Services and Human Resources*
Mr. D. Smith	Program Director*
Ms. M. Cornwell	Manager, Communications*
Ms. C. Richards	Program Manager*
Mr. I. Santos	Manager, Information Technology
Ms. M. Nusink	Director, Finance
Mr. R. Perry	The Aylmer Express*
Mr. I. McCallum	My FM 94.1*
Ms. J. Buchanan	Graham Scott Ens (Partner)
Mr. S. Westelaken	Graham Scott Ens (Manager)

*\*represents virtual participation*

**REGRETS:**

Mr. D. Mayberry	Board Member
Ms. S. Isaac	Program Director

## **1.1 CALL TO ORDER, RECOGNITION OF QUORUM**

J. Preston welcomed G. Jones to the Board of Health.

## **1.2 AGENDA**

### **Resolution # (2023-BOH-0427-1.2)**

Moved by J. Herbert

Seconded by M. Peterson

That the agenda for the Southwestern Public Health Board of Health meeting for April 27, 2023 be approved.

Carried.

**1.3** Reminder to disclose Pecuniary Interest and the General Nature Thereof when Item Arises.

**1.4** Reminder that Meetings are Recorded for minute-taking purposes.

## **2.0 APPROVAL OF MINUTES**

### **Resolution # (2023-BOH-0427-2.1)**

Moved by M. Peterson

Seconded by J. Herbert

That the minutes for the Southwestern Public Health Board of Health meeting for March 20, 2023 be approved.

Carried.

## **3.0 CONSENT AGENDA**

### **Resolution # (2023-BOH-0427-3.0)**

Moved by D. Warden

Seconded by G. Jones

That the Board of Health for Southwestern Public Health receive and file consent agenda items 3.1 – 3.2.

Carried.

## **4.0 CORRESPONDENCE RECEIVED REQUIRING ACTION**

### **Resolution # (2023-BOH-0427-4.0)**

Moved by D. Warden

Seconded by M. Peterson

That the Board of Health for Southwestern Public Health support 4.1 Simcoe Muskoka District Health Unit, March 15, 2023 correspondence endorsing Bill S-254, which calls for implementing health warning labels on alcoholic beverages.

Carried.

## **5.0 AGENDA ITEMS FOR INFORMATION.DISCUSSION.DECISION**

### **5.1 Graham Scott Ens Presentation**

Ms. J. Buchanan, partner at Graham Scott Ens, reviewed Southwestern Public Health's Audited Financial Statements ending December 31, 2022.

J. Buchanan noted the independent auditor's report provides a clean audited opinion with no qualifications.

J. Buchanan noted the report is in accordance with PSAS: Public Sector Accounting Standards statements, and are slightly different from reports that are prepared for the ministry and internal budgets (for instance, capital assets are capitalized and amortized into income).

J. Buchanan noted the total revenue ending December 31, 2022 was \$25,937,000.

J. Buchanan completed her review of the statements, confirming there were no issues as noted in the auditor's Findings letter.

C. St. John clarified to the Board that SWPH is obligated to return monies at the end of the calendar year to the Ministry of Health. She noted that, with respect to municipalities, it is the board's decision regarding surplus monies, although it has been the practice of the board since 2019 to return unspent monies to the municipalities.

C. St. John noted the excellence and support provided by Graham Scott Ens.

M. Peterson left the meeting at 1:31 p.m.

### **5.2 Chief Executive Officers Report**

C. St. John reviewed her report.

C. St. John highlighted programs and services from her report, calling attention to the recent partnership declaration with SWPH, Middlesex London Health Unit and the Thames Valley District Schoolboard.

C. St. John called attention to the video done by the Communications team titled "Who is Southwestern Public Health." She encouraged board members to share on their social media accounts.

C. St. John noted that D. Warden and L. Rowden have confirmed their interest in serving another term as Order in Council Board appointees and staff will begin the application process.

C. St. John noted the upcoming Association of Local Public Health Agencies (ALPHA) annual conference the week of June 12<sup>th</sup> and encouraged Board members to participate. J. Preston indicated his interest in attending.

D. Warden asked if the School Nutrition Program has been cancelled. C. St. John clarified that SWPH is no longer the administrator of the program in Oxford County. In Elgin County, the former Elgin St. Thomas health unit divested from that work. The Victorian Order of Nurses (VON) now runs the program in the region; SWPH remains an active supporter of the program.

B. Wheaton noted that she joined C. St. John and M. Nusink at the Oxford County and Elgin County council meetings as a delegation to present the approved budget. B. Wheaton noted that the presentations have been exceptional and well-received and useful in building relationships as well as informing the community.

L. Rowden sought clarification regarding multiple booster shot promotions.

Dr. N. Tran replied with an overview of Covid vaccinations and its appropriate application. Dr. Tran noted that after the primary series of two shots, the third dose (the first recommended booster) was widely recommended. Dr. Tran noted that immunity does wane over time, while additional boosters address the virus's mutations in order to be more effective. Dr. Tran noted that the population targeted for Fall and Spring boosters has become more nuanced, but that science continues to identify the elderly and immuno-compromised as populations that would benefit from additional boosters to prevent serious illness, hospitalization, and death. Dr. Tran noted that Covid vaccination recommendations have evolved from the initial premise that the primary series would be sufficient.

#### **Resolution # (2023-BOH-0427-5.2A)**

Moved by D. Warden  
Seconded by M. Peterson

That the Board of Health for Southwestern Public Health approve the audited financial statements for the period ending December 31, 2022.

Carried.

#### **Resolution # (2023-BOH-0427-5.2B)**

Moved by G. Jones  
Seconded by L. Rowden

That the Board of Health for Southwestern Public Health appoint Graham Scott Enns as the auditing firm for the year ending December 31, 2023.

Carried.

#### **Resolution # (2023-BOH-0427-5.2C)**

Moved by D. Warden

Seconded by M. Peterson

That the Board of Health for Southwestern Public Health ratify the signing of the Annual Service Plan for 2023.

Carried.

### **Resolution # (2023-BOH-0427-5.2)**

Moved by D. Warden

Seconded by M. Ryan

That Board of Health for Southwestern Public Health accept the Chief Executive Officer's report for April 27, 2023.

Carried.

### **5.3 Medical Officer of Health Report for April 27, 2023**

Dr. N. Tran reviewed his report and that of the Chief Medical Officer of Health's 2022 Annual Report.

Dr. Tran highlighted the need for continued sustained investment and outbreak preparedness and the need for community and system readiness.

Dr. Tran noted the likelihood of another emergency or pandemic based on what we have learned from the past, acknowledging the significant costs to economies and all levels of society, emphasizing that populations that already face health inequities are further and disproportionately impacted by such events.

M. Ryan asked if there would be opportunities for SWPH to give input to future reports about pandemic response and population readiness and preparedness. Dr. Tran replied in the affirmative, noting there would be more opportunities to provide input.

L. Rowden noted he hopes that the lessons learned from Covid carry more weight in our future responses.

Dr. Tran reviewed the second part of his report involving other diseases of public health significance: pertussis, avian influenza, and multi-drug resistant gonorrhea.

### **Resolution # (2023-BOH-0427-5.3)**

Moved by M. Ryan

Seconded by B. Wheaton

That Board of Health for Southwestern Public Health accept the Medical Officer of Health's report for April 27, 2023.

Carried.

## 7.0 TO CLOSED SESSION

### Resolution # (2023-BOH-0427-C7)

Moved by M. Ryan  
Seconded by G. Jones

That the Board of Health moves to closed session in order to consider one or more the following as outlined in the Ontario Municipal Act:

- (a) the security of the property of the municipality or local board;
- (b) personal matters about an identifiable individual, including municipal or local board employees;
- (c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- (d) labour relations or employee negotiations;
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- (g) a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- (h) information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them;
- (i) a trade secret or scientific, technical, commercial, financial or labour relations information, supplied in confidence to the municipality or local board, which, if disclosed, could reasonably be expected to prejudice significantly the competitive position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization;
- (j) a trade secret or scientific, technical, commercial or financial information that belongs to the municipality or local board and has monetary value or potential monetary value; or
- (k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board. 2001, c. 25, s. 239 (2); 2017, c. 10, Sched. 1, s. 26.

Other Criteria:

- (a) a request under the *Municipal Freedom of Information and Protection of Privacy Act*, if the council, board, commission or other body is the head of an institution for the purposes of that Act; or
- (b) an ongoing investigation respecting the municipality, a local board or a municipally-controlled corporation by the Ombudsman appointed under the *Ombudsman Act*, an Ombudsman referred to in subsection 223.13 (1) of this Act, or the investigator referred to in subsection 239.2 (1). 2014, c. 13, Sched. 9, s. 22.

Carried.

## 8.0 RISING AND REPORTING OF CLOSED SESSION

### Resolution # (2023-BOH-0427-C8)

Moved by M. Ryan  
Seconded by D. Warden

That the Board of Health rise with a report.

Carried.

### Resolution # (2023-BOH-0427-C3.1)

Moved by L. Rowden  
Seconded by B. Wheaton

That the Board of Health for Southwestern Public Health approve the Chief Executive Officer's Report for April 27, 2023.

Carried.

**Resolution # (2023-BOH-0427-C3.1B)**

Moved by D. Warden  
Seconded by J. Herbert

That the Board of Health for Southwestern Public Health accept the Special Ad Hoc Building Committee Report for April 27, 2023.

Carried.

**10.0 ADJOURNMENT**

**Resolution # (2023-BOH-0427-10)**

Moved by J. Couckuyt  
Seconded by J. Herbert

That the meeting adjourned at 2:38 p.m.

Carried.

Confirmed: \_\_\_\_\_

DRAFT





OFFICE OF THE MAYOR  
CITY OF HAMILTON

April 3, 2023

**VIA:** Mail and Email

ATTN: Hon. Sylvia Jones  
Minister of Health  
Ministry of Health  
5<sup>th</sup> Floor  
777 Bay Street  
Toronto, ON M7A 2J3  
[Sylvia.Jones@pc.ola.org](mailto:Sylvia.Jones@pc.ola.org)

**RE: 2023 PHS Annual Service Plan & Budget Submission; Support for Sufficient, Stable and Sustained Funding for Local Public Health Agencies**

Dear Hon. Sylvia Jones,

The Board of Health (BOH) for the City of Hamilton Public Health Services is committed to achieving our mandate of keeping Hamiltonians healthy, preventing disease, and reducing health inequities as articulated in the Ontario Public Health Standards (OPHS). However, we have concerns about our ability to meet the growing needs of our community with current provincial funding. At its meeting on March 20, 2023, the BOH endorsed the following recommendations included in Board of Health Report BOH23011:

- That the Board of Health reiterate their call to the Ministry of Health to fully fund the provincial portion, at least 70%, of the total costs of the mandatory public health programs and services provided under the Ontario Public Health Standards;

- That the Board of Health reiterate their call to the Ministry of Health to continue the current mitigation funding until such time as the cost-shared arrangement is restored 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 2018-2019; and,
- That the Board of Health call on the Ministry of Health to include expectations for on-going COVID-19 response in the Ontario Public Health Standards and provide permanent funding to sustain these requirements.

As with other health units across the province, the deployment of significant Hamilton Public Health Services (HPHS) staff to the COVID-19 emergency response for over 2.5 years meant less ability to focus on other important public health issues. This impacted service delivery in many program areas and resulted in service backlogs and deficits of care in our community. Now that we have emerged from the crisis phase of the COVID-19 response, HPHS has been working to resume OPHS-mandated programs and services and address the deficits of care, while also continuing to respond to COVID-19. In addition, many long-standing health issues have been worsened by the COVID-19 pandemic and require focus and attention in planning and resourcing in order to achieve significant gains. HPHS has identified priority action areas to address Hamilton's priority population health needs of child and youth healthy growth and development, climate change, health equity, and mental health and substance use.

In October 2021, Hamilton's previous BOH wrote to the previous Health Minister endorsing letters from Peterborough Public Health and the Haliburton, Kawartha, Pine Ridge District Health Unit identifying the need for additional ongoing support as Ontario's public health units continued to respond to the COVID-19 pandemic. Specifically, support was requested to relieve the following financial pressures:

- Increased wage, benefit and operational costs due to inflation;
- New and expanded programs that were added to the OPHS;
- Resources required to address deficits of care;
- Increased demand for public health services to support community pandemic recovery; and,
- Continued support for COVID-19 response.

In 2022, the Association of Local Public Health Agencies (ALPHA) submitted a report to the provincial government to further demonstrate the need for additional investments in public health required to clear the service backlog, resume routine programs and services, and maintain an effective pandemic response. Recently, as part of their 2023 pre-budget submission, ALPHA re-iterated their call to the Province to immediately revert to the 75%/25% provincial-municipal public health cost-sharing formula, along with a pledge to continue 100% funding for programs that have been traditionally underwritten by the Province. Furthermore, in his 2022 Annual Report entitled "Being Ready, Ensuring Public Health Preparedness for Infectious Outbreaks and Pandemics" the Chief Medical Officer of Health calls for sustained investments in strengthening the

public health sector to ensure preparedness. Hamilton's BOH endorses these calls for sufficient and sustained funding for public health and agrees that it is more efficient and effective to invest in preparedness than to pay the much higher and heavier costs of being unprepared.

Through HPHS' 2023 ASPB submission it has been assessed that even with the provincial mitigation funding, the anticipated provincial subsidy will only be approximately 70% of the total costs of mandatory programs in 2023, a shortfall of \$2.3M. With the mitigation funding expected to end in 2023, HPHS will have substantial cost pressures in 2024 and beyond. For HPHS to fully address Hamilton's priority population health needs, restoration of the mixed 75%/25% Provincial/Municipal and 100% Provincial funding model is required.

Additionally, COVID-19 requires dedicated resources to sustain the on-going response, including case and contact management, outbreak management, infection prevention and control, immunization, surveillance, communication, pandemic preparedness and enforcement activities. The Hamilton BOH agrees with aPHa that language in the public health mandate (i.e., OPHS) and permanent funding is required to sustain these efforts.

Realizing these substantial cost pressures in 2023 and beyond, the Hamilton BOH urges the provincial government to:

- Fully fund the provincial portion, at least 70%, of the total costs of the mandatory public health programs and services provided under the OPHS;
- Continue the current mitigation funding until such time as the cost-shared arrangement is restored to the mixed 100% and 75%/25% model as it was in the public health budget for 2018-2019; and,
- Include expectations for on-going COVID-19 response in the OPHS and provide permanent funding to sustain these requirements.

The work of public health, done in collaboration with local partners and within the broader public health system, results in a healthier population that contributes to a stronger economy while preserving costly and scarce health care resources. For the health of our population, it is critical that public health be adequately resourced. A clear commitment by the Province to developing a process that ensures timely, predictable and sufficient funding is needed. While mitigation funding from the Province has been helpful, clearer and more timely assurances of funding for both routine and extraordinary public health activities will be required to inform budgets over multiple years.

Our Medical Officer of Health, Dr. Elizabeth Richardson, would be happy to meet with your staff to discuss this further as well.

Sincerely,

A handwritten signature in blue ink, appearing to read "Andrea Horwath".

Andrea Horwath

Mayor

City of Hamilton

**CC:**

Hon. Neil Lumsden, MPP, Hamilton East – Stoney Creek

Monique Taylor, MPP, Hamilton Mountain

Sarah Jama, MPP, Hamilton Centre

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



# CEO REPORT

Open Session

**MEETING DATE:** May 30, 2023

**SUBMITTED BY:** Cynthia St. John, Chief Executive Officer (written as of May 23, 2023)

**SUBMITTED TO:** Board of Health

**PURPOSE:**

- Decision
- Discussion
- Receive and File

**AGENDA ITEM #** 5.1

**RESOLUTION #** 2023-BOH-0530-5.1

## **1.0 SWPH PROGRAM UPDATES (Receive and File):**

### **1.1 Vaccine Preventable Diseases**

Spring has sprung with the completion of Round 2 of school-based immunizations for Grade 7 students (and catch-up for Grade 8 students). Onsite vaccination clinics were delivered by nurses from the immunization teams and school teams over the course of several weeks in April and May. These well-attended clinics represent a service delivery model that brings thousands of health-protecting vaccines directly to the school setting to mitigate transportation and other access barriers. This work represents a collaboration between SWPH and the school boards to ensure a safe and supportive environment is created for students to receive vaccinations that protect against Hepatitis B, Human Papillomavirus and Meningococcal disease.

### **1.2 Environmental Health**

In accordance with the [Ontario Public Health Standards \(OPHS\)](#) (see pp. 34-36) of evidence-based decision-making, interdisciplinary collaboration, and proactive risk management in addressing climate change's impact on public health, the Environmental Health (EH) Team is actively engaged in a number of initiatives. With the support of a graduate student from the University of Waterloo's Climate Change program, the team is currently developing a Climate Change Science Report. Additionally, the EH Team is leading a multidisciplinary working group comprised of various SWPH team representatives (Foundational Standards, Infectious Diseases, and Chronic Disease and Injury Prevention) to identify and address the challenges posed by Climate Change. At the provincial level, the EH Team is supporting

Public Health Ontario in assessing the ramifications of heat events linked to climate change, supporting its integration into emergency preparedness initiatives.

Other program aspects to note include upcoming changes on July 1<sup>st</sup>, 2023, to the Rabies Control regulations 557 and 567 which now provide options for the Medical Officer of Health (MOH) to order the testing of animals that have passed in confinement, and the allowance of rabies vaccinations from all of Canada and the US to be considered. These changes are part of the “red tape initiative” aimed at eliminating unnecessary administrative burdens, enhancing efficiency, and facilitating the effective management of rabies cases while ensuring public safety.

### 1.3 COVID Response and Immunizations

Case managers continue to support Covid-19/respiratory outbreaks in congregate living settings, working with the Infectious Diseases (ID) team to support outbreaks in other settings such as LTCH/RH, and continuing to collect mandatory data on those clients who are hospitalized with Covid-19. Proactive outreach has been completed with most congregate settings within the region and, in conjunction with the Infection Prevention and Control (IPAC) Hub, staff will be reaching out to local farms that house seasonal agricultural workers to offer education regarding general IPAC measures, outbreak prevention, and management.

On April 6, 2023, the Ministry of Health, based on guidance from the National Advisory Committee on Immunization (NACI), announced a recommendation that certain high-risk individuals should receive a Covid-19 vaccine booster dose this Spring if it has been at least six months (minimum 168 days) since their last dose or confirmed infection. SWPH is currently hosting three weekly vaccination clinics (Mondays and Fridays at the St. Thomas office; Wednesdays at the Woodstock office) throughout the month of May. June will be focused on supporting congregate settings that may need assistance in vaccinating eligible residents. Clinics have been well-attended and meeting demands to date and we continue to remind the public that vaccinations are also available free of charge at local pharmacies.

### 1.4 Human Resources: Employee Wellness Strategy Update

Over the past three years, SWPH staff have actively reflected on and applied the lessons learned from the challenges posed by Covid-19. Significant time and effort have been dedicated to integrating the health and wellbeing of public health professionals into our daily work and workplace culture. Establishing a wellness strategy has been a top priority for our agency in order to foster an engaged workforce that effectively responds to the public health needs of our communities while also supporting one another as colleagues and individuals.

Collaboration, humility, and gratitude have been the driving forces behind our agency's efforts as we work towards creating a workplace culture that celebrates achievements and prioritizes wellness. Our ultimate goal is to promote resilience, mental health, hope, and social connections among staff members.

During the Covid-19 pandemic, our public health staff exhibited visible signs of fatigue, stress, and anxiety. As a response, SWPH utilized its employee and family assistance program, as well as psychological group benefits, to address these challenges. Notably, we observed a significant increase in claims for psychologist-related services, such as anxiety management, grief counseling, depression support, bereavement assistance, marital and relationship counseling, and stress management.

In addition to the increase in psychological support services, SWPH also experienced a rise in short-term disability claims across the organization. During this period, we actively maintained communication channels with bargaining unit representatives to address issues and trends affecting employee groups.

The journey to establish a culture of wellness at SWPH has not been without obstacles. However, our efforts have been driven by a commitment to supporting one another and delivering exceptional programs and services. To achieve the goals set by SWPH leadership, staff collaborated with external experts to develop programs aimed at promoting mental wellness and resilience. These initiatives aimed to share knowledge, build skills, and provide reflective exercises to support continuous learning in daily operations. They emphasized the importance of incorporating healthy practices into day-to-day activities and embracing adaptability in the ever-changing field of public health.

Recently, our focus has been on organizing webinars that promote gratitude, finding joy in challenging situations, building mental strength, and harnessing the power of positive thinking. Led by our SWPH Wellness Committee, comprised of frontline staff, we have also implemented team challenges centered around self-care, campaigns focusing on financial wellness, and emotional wellbeing. The feedback received thus far has been overwhelmingly positive:

***"I really like this recent focus on Building Mental Health. Keep up the great work Committee. I am loving this current challenge. What a fun and rewarding way to get to connect with colleagues that I don't connect with often. Loving it!"***

***"Thank you for organizing and facilitating this very important mental health initiative."***

***"[We] have been doing the 3 things you are grateful for [from the team challenge], every evening when we get home from work. We sit down together and discuss what made us happy that day, it makes both of us feel good!"***

Last month, the Wellness Committee introduced a new and engaging wellness challenge. A simple competition for all staff to build teamwork, promote self-care, and create new relationships among colleagues. The intended outcomes of this challenge were to help staff take care of themselves, recharge, and interact with staff across the organization. The feedback the committee received was very supportive and positive with dozens of staff members participating:

***"I just wanted to say "Kudos" to the wellness team for organizing this wellness challenge! It was a great challenge not only for making me accountable for my own wellbeing (via thoughtful holistic (mind and body) tasks) but also the opportunity to be on a team with others who I was able to get to know! Great job!"***

Next month, SWPH's wellness committee will host another workshop focusing on the power of positive thinking. These workshops, organized by the wellness committee in collaboration with staff and partnering agencies, serve to reinforce our guiding principle that SWPH as an organization and its employees are partners in promoting and cultivating a wellness-oriented workplace.

SWPH strives to be an employer of choice, where evidence-based and best-practice wellness initiatives contribute to a more engaging work environment. Our efforts are dedicated to instilling wellness as an inherent aspect of our organizational culture, extending beyond mere tasks. Achieving this goal requires ongoing commitment throughout the organization, aligning with the priorities and values of SWPH, and embodying the leadership philosophy that integrates wellness into our daily actions.

We acknowledge that establishing a culture of wellness will require time and the collective commitment of SWPH staff. Such a culture can be immensely positive and rewarding, enhancing staff engagement and creating opportunities for innovation, creativity, and collaboration throughout our organization. In essence, there is more to do and we must also be mindful that we are striving for the long-run, not just quick wins, so to speak.

### 1.5 2022 Creating Healthy Workplaces Award, Elgin Business Resource Centre

At the end of April, I was notified that SWPH will be honoured with the 2022 Creating Healthy Workplaces Award, a yearly recognition sponsored by the Elgin Business Resource Centre (EBRC). This Elgin region award, previously presented in partnership between EBRC and the former Elgin St. Thomas Public Health Unit, recognizes local businesses' commitment to making employee health an integral part of their organizational culture. A comprehensive healthy workplace encompasses four key areas: Health and Safety, Healthy Lifestyles, Workplace Culture, and Being Green & Involved.

Given SWPH's pivotal role in navigating the pandemic and safeguarding employee well-being, this acknowledgement and recognition holds special significance. The Creating Healthy Workplaces Award is one of seven awards presented at the EBRC's annual general meeting, and the selection process involves nominations and criteria fulfillment assessments conducted by EBRC staff. Previous recipients include organizations such as St. Thomas Elgin General Hospital, West Elgin Community Health Centre, and Steelway Building Systems. SWPH will be represented at the AGM by a delegation of Human Resources staff, Board representatives, and senior and executive leaders. We are honoured that SWPH's dedication to employee well-being and contributions to fostering a healthy work environment are being recognized with this meaningful award.

## **2.0 ASSOCIATION OF LOCAL PUBLIC HEALTH AGENCIES (ALPHA) ANNUAL MEETING (Decision):**

In June, Ninh and I will be attending the alpha 2023 Annual General meeting held in Toronto this year. As members of this Association, SWPH carries five (5) votes in total that may be cast for annual meeting business. As part of the agenda, [alpha's Resolutions for Consideration 2023 \(click to view the pdf document\)](#) will be presented for attention and approval by the attendees. Ninh and I have reviewed the resolutions and we are supportive of all of them and we are recommending that we vote in support of them. To ensure that we vote in accordance with the Board of Health's wishes, we would appreciate knowing whether the Board is supportive of this recommendation which includes these resolutions as presented:

- ***Resolution #A23-01: Constitutional Amendment on Voting Delegates Allocation***  
The alpha Board of Directors has sponsored a Constitutional Amendment on Voting Delegates Allocation, addressing the need for an update in the representation of public health units in Ontario. The current allocation of voting delegates based on population served was established in 1998 and has become outdated due to amalgamations, mergers, and population growth. With the reduction of public health units from 44 to 34 and an increase in the total population served, the resolution modifies the allocation categories. The proposed amendment introduces a new category, "Population More Than 1,000,000," and assigns eight voting delegates to each public health unit in this category. This amendment aims to ensure fair representation and account for the changes in population distribution since the last update. SWPH's current voting allocation would remain unchanged.



- Resolution #A23-02: Toward a Renewed Smoking and Nicotine Strategy in Ontario*  
 The Simcoe Muskoka District Health Unit (SMDHU) has sponsored a resolution acknowledging that tobacco use remains a significant cause of death and disease in Ontario and Canada, with substantial financial costs. It also highlights the increasing complexity of the commercial tobacco control landscape due to the rise of youth vaping, waterpipe smoking, and cannabis smoking. The resolution emphasizes the need for a comprehensive smoking and nicotine strategy, supported by a multidisciplinary panel of experts, to address these challenges and ensure the continuation of progress made in tobacco control. The resolution further recommends that the strategy's target be examined for sufficiency and inclusiveness, considering all nicotine delivery products, and that health equity be a fundamental principle in its development.
- Resolution #A23-03: Improving Indoor Air Quality to Prevent Infections and Promote Respiratory Health*  
 Niagara Region Public Health and Peterborough Public Health have jointly sponsored a resolution addressing the need to update building codes and standards in order to protect respiratory health, particularly in the context of the Covid-19 pandemic. It highlights the growing scientific understanding of airborne transmission and the role of indoor environments in disease spread. The resolution emphasizes the high risk posed by indoor public settings and the potential for improved air quality to prevent not only Covid-19 but also other respiratory infections, lung diseases, asthma attacks, and cancers.
- Resolution #A23-04: Ending Underhousing and Homelessness in Ontario*  
 The alPHa Boards of Health Section has sponsored a resolution recognizing housing as a human right and emphasizing how housing is a key determinant of health (with inadequate housing leading to numerous negative health impacts). Ending underhousing and homelessness requires a comprehensive approach involving various stakeholders, including housing, social service, and health solutions. The resolution calls for urgent action from the provincial government to develop and implement a comprehensive plan to address underhousing and homelessness in Ontario. This resolution highlights the importance of recognizing the link between housing and health and the need for urgent, collaborative efforts to address this critical issue in Ontario.
- Resolution #A23-05: Monitoring Food Affordability in Ontario and Inadequacy of Social Assistance Rates*  
 The resolution sponsored by the Ontario Dietitians in Public Health (ODPH) calls on the Province of Ontario to address the issue of food affordability and its impact on health inequities. They urge the province to utilize food affordability monitoring data to determine adequate social assistance rates that reflect the current cost of living and to index Ontario Works rates to inflation going forward. Additionally, ODPH calls for the acknowledgment of rising food costs, particularly for individuals on social assistance incomes, and the establishment of targets to reduce food insecurity as part of Ontario's poverty reduction plan.

### **3.0 FINANCIAL MATTERS**

#### **3.1 First Quarter Financial Statements (Decision):**

At the end of quarter one, March 31, 2023, Southwestern Public Health is currently underspent by approximately \$1,885,000 or 8% of the general program budget. The majority of the variances are due

to the timing of program plans, as many program plans are not implemented until after the first quarter. All program expenses and variances are reviewed monthly. At the end of March, it is anticipated that all budgeted funds will be spent by year end.

**MOTION: (2023-BOH-0530-5.1A)**

That the Board of Health to approve the first quarter financial statements for Southwestern Public Health.

**3.2 Facilities Updates (Receive and File):**

**St. Thomas Site: 1230 Talbot Street, St. Thomas ON**

Phase monitoring devices installed in 2022 have not shown any activity that would help to diagnose the ongoing issues with compressor failures. Since their replacement in 2020, four compressors have failed and a fifth compressor in HVAC 3 is scheduled for replacement later this month. Largo Facilities Management have been fully informed of the historical issues with the compressors and are now working closely with HTS to further investigate/troubleshoot the root cause. Largo Facilities is familiar with HTS and is also very confident in their expertise and knowledge.

The new onsite maintenance contractor, afforded to SWPH through our contract with Largo, is working out well and assigned personnel have been onsite at both locations completing some outstanding tasks and becoming familiarized with the idiosyncrasies of the buildings. Some of the work temporarily assigned to our third-party contractors has been given to Largo to complete (i.e., weekly generator testing) which has assisted in lowering some contracted service costs.

**MOTION: 2023-BOH-0530-5.1**

That the Board of Health for Southwestern Public Health approve the Chief Executive Officer's Report for May 30, 2023.

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AN INVITATION TO OUR 2023

# ANNUAL GENERAL MEETING

*& Breakfast*



**ELGIN**

BUSINESS RESOURCE CENTRE

A Community Futures Development Corporation

**TUESDAY JUNE 27, 2023**

**8:30am BREAKFAST**

**9:00am AGM**

**9:30AM BUSINESS AWARDS**

**Elgin Business Resource Centre  
300 S Edgeware Rd. ICE Atrium**

Please RSVP to Sarah Foshay by Thursday, June 22  
[sfoshay@elgincfdc.ca](mailto:sfoshay@elgincfdc.ca) | 519-633-7597 ext. 328

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# SOUTHWESTERN PUBLIC HEALTH

For the Three Months Ending Friday, March 31, 2023

STANDARD/ PROGRAM	YEAR TO DATE			FULL YEAR BUDGET	VAR	% VAR
	ACTUAL	BUDGET	VAR			
<b>Direct Program Costs</b>						
<b>Foundational Standards</b>						
Emergency Management	\$13,705	\$17,662	\$3,957	\$70,648	\$56,943	19.%
Effective Public Health Practise	77,445	84,460	7,015	337,839	260,394	23.%
Health Equity & CNO Nurses	54,604	81,298	26,694	325,190	270,586	17.%
Health Equity Program	918	1,898	980	7,590	6,672	12.%
Population Health Assessment	83,941	96,869	12,928	387,478	303,537	22.%
<b>Foundational Standards Total</b>	<b>230,613</b>	<b>282,187</b>	<b>51,573</b>	<b>1,128,745</b>	<b>898,132</b>	<b>20.%</b>
<b>Chronic Disease Prevention &amp; Well-Being</b>						
Built Environment	47,670	64,413	16,742	257,651	209,980	19.%
Healthy Eating Behaviours	22,992	29,700	6,708	118,799	95,807	19.%
Physical Activity and Sedentary Behaviour	21,339	26,867	5,528	107,468	86,129	20.%
Suicide Risk & Mental Health Promotion	33,774	23,782	-9,993	95,126	61,352	36.%
<b>Chronic Disease Prevention &amp; Well-Being Total</b>	<b>125,775</b>	<b>144,762</b>	<b>18,985</b>	<b>579,044</b>	<b>453,268</b>	<b>22.%</b>
<b>Food Safety</b>						
Food Safety (Education, Promotion & Inspection)	110,606	122,356	11,750	489,426	378,820	23.%
<b>Food Safety Total</b>	<b>110,606</b>	<b>122,356</b>	<b>11,750</b>	<b>489,426</b>	<b>378,820</b>	<b>23.%</b>
<b>Healthy Environments</b>						
Climate Change	29,476	30,540	1,064	122,160	92,684	24.%
Health Hazard Investigation and Response	75,806	101,951	26,146	407,806	332,000	19.%
<b>Healthy Environments Total</b>	<b>105,282</b>	<b>132,491</b>	<b>27,210</b>	<b>529,966</b>	<b>424,684</b>	<b>20.%</b>
<b>Healthy Growth &amp; Development</b>						
Breastfeeding	47,917	94,796	46,879	379,182	331,265	13.%
Parenting	59,618	125,100	65,482	500,400	440,782	12.%
Reproductive Health/Healthy Pregnancies	37,608	91,142	53,534	364,567	326,959	10.%
<b>Healthy Growth &amp; Development Total</b>	<b>145,143</b>	<b>311,038</b>	<b>165,894</b>	<b>1,244,149</b>	<b>1,099,006</b>	<b>12.%</b>
<b>Immunization</b>						
Vaccine Administration	31,561	37,109	5,548	148,437	116,876	21.%
Vaccine Management	25,219	49,924	24,705	199,695	174,476	13.%
Immunization Monitoring and Surveillance	22,438	36,326	13,889	145,305	122,867	15.%
<b>Immunization Total</b>	<b>79,218</b>	<b>123,359</b>	<b>44,142</b>	<b>493,437</b>	<b>414,219</b>	<b>16.%</b>
<b>Infectious &amp; Communicable Diseases</b>						
Infection Prevention & Control	321,139	444,699	123,560	1,778,797	1,457,658	18.%
Needle Exchange	0	17,725	17,725	70,900	70,900	0.%
Rabies Prevention and Control and Zoonotics	48,992	55,648	6,656	222,592	173,601	22.%
Sexual Health	235,694	258,582	22,888	1,034,329	798,635	23.%
Tuberculosis Prevention and Control	4,235	6,965	2,730	27,860	23,625	15.%
Vector-Borne Diseases	30,924	54,173	23,249	216,694	185,770	14.%
COVID-19 Pandemic	280,541	704,248	423,707	2,816,990	2,536,449	10.%
COVID-19 Mass Immunization	235,485	742,382	506,897	2,969,529	2,734,044	8.%
<b>Infectious &amp; Communicable Diseases Total</b>	<b>1,157,010</b>	<b>2,284,422</b>	<b>1,127,413</b>	<b>9,137,691</b>	<b>7,980,681</b>	<b>13.%</b>
<b>Safe Water</b>						
Water	37,109	41,037	3,928	164,147	127,038	23.%
<b>Safe Water Total</b>	<b>37,109</b>	<b>41,037</b>	<b>3,928</b>	<b>164,147</b>	<b>127,038</b>	<b>23.%</b>
<b>School Health - Oral Health</b>						
Healthy Smiles Ontario	173,538	213,936	40,398	855,744	682,206	20.%
School Screening and Surveillance	72,851	86,090	13,238	344,358	271,507	21.%
<b>School Health - Oral Health Total</b>	<b>246,389</b>	<b>300,026</b>	<b>53,637</b>	<b>1,200,102</b>	<b>953,713</b>	<b>21.%</b>
<b>School Health - Immunization</b>						
School Immunization	208,268	244,292	36,024	977,166	768,898	21.%
<b>School Health - Other</b>						
Comprehensive School Health	112,831	278,502	165,672	1,114,009	1,001,178	10.%
<b>Substance Use &amp; Injury Prevention</b>						
Harm Reduction Enhancement	42,037	52,060	10,024	208,242	166,205	20.%
Injury Prevention	44,236	45,088	851	180,350	136,114	25.%
Smoke Free Ontario Strategy: Prosecution	32,983	53,311	20,328	213,245	180,262	15.%
Substance Misuse Prevention	70,687	117,200	46,512	468,798	398,111	15.%
<b>Substance Use &amp; Injury Prevention Total</b>	<b>189,943</b>	<b>267,659</b>	<b>77,716</b>	<b>1,070,635</b>	<b>880,692</b>	<b>18.%</b>
<b>TOTAL DIRECT PROGRAM COSTS</b>	<b>2,748,187</b>	<b>4,532,131</b>	<b>1,783,944</b>	<b>18,128,517</b>	<b>15,380,331</b>	<b>15.%</b>

**INDIRECT COSTS**

Indirect Administration	817,309	691,691	-125,618	2,766,764	1,949,455	30.%
Corporate	-47,784	65,446	113,231	261,786	309,570	(18.%)
Board	4,143	8,300	4,157	33,200	29,057	12.%
HR - Administration	168,821	221,082	52,260	884,326	715,505	19.%
Premises	382,209	440,086	57,877	1,760,343	1,378,134	22.%
<b>TOTAL INDIRECT COSTS</b>	<b>1,324,698</b>	<b>1,426,605</b>	<b>101,906</b>	<b>5,706,419</b>	<b>4,381,721</b>	<b>23.%</b>

<b>TOTAL GENERAL SURPLUS/DEFICIT</b>	<b>4,072,885</b>	<b>5,958,736</b>	<b>1,885,850</b>	<b>23,834,936</b>	<b>19,762,052</b>	<b>17.%</b>
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**100% MINISTRY FUNDED PROGRAMS**

MOH Funding	17,289	39,011	21,722	156,043	138,754	11.%
Senior Oral Care	302,194	265,275	-36,919	1,061,100	758,906	28.%
<b>TOTAL 100% MINISTRY FUNDED</b>	<b>319,483</b>	<b>304,286</b>	<b>-15,198</b>	<b>1,217,143</b>	<b>897,660</b>	<b>26.%</b>

**One-Time Funding - April 1, 2022 to March 31, 2023**

OTF NEP	25,099	0	-25,099	0	-25,099	0.0%
OTF Public Health Inspector Practicum	393	5,000	4,607	20,000	19,607	2.0%
OTF Mobile Dental Clinic	453,910	0	-453,910	0	-453,910	0.0%
OTF IPAC HUB	0	0	0	0	0	0.0%
OTF Retention Incentive	0	0	0	0	0	0.0%
OTF School Nurses	225,000	0	-225,000	0	-225,000	0.0%
OTF Oxford Fixed Dental Suite	0	0	0	0	0	0.0%
<b>Total OTF</b>	<b>704,402</b>	<b>5,000</b>	<b>-699,401</b>	<b>20,000</b>	<b>-684,401</b>	<b>3522.0%</b>

**Programs Funded by Other Ministries, Agencies**

Healthy Babies Healthy Children	470,790	413,385	-57,406	1,653,539	1,182,749	28.0%
Pre and Post Natal Nurse Practitioner	34,744	34,750	6	139,000	104,256	25.0%
School Nutrition Program	0	0	0	0	0	0.0%
Public Health Agency of Canada	0	0	0	0	0	0.0%
Low German Speaking Partnership Study	0	0	0	0	0	0.0%
<b>Total Programs Funded by Other Ministries, Agencies</b>	<b>505,534</b>	<b>448,135</b>	<b>-57,400</b>	<b>1,792,539</b>	<b>1,287,005</b>	<b>28.0%</b>