

## Board Correspondence

December 2020

Date	From	Subject
October 29, 2020	Public Health Grey Bruce Health Unit	Motion 2020-65: Municipal Drug Strategy Coordinators Network of Ontario, Safe Supply.  Motion 2020-66: COVID-19 and Long-Term Care Reform.
October 29, 2020	Township of Eanturel	Ltr to Premier Doug Ford – Response to Second Wave – COVID-19 – to consider a targeted approach regarding specific sectors that are seeing increased infection rates.
November 20, 2020	Thunder Bay District Health Unit	Ltr to Prime Minister of Canada and the Deputy Prime Minister and Minister of Finance – Basic Income for Income Security during COVI-19 Pandemic and Beyond.

October 29, 2020



The Honourable Patty Hajdu  
Federal Minister of Health  
House of Commons  
Ottawa ON K1A 0A6  
Via e-mail [patty.hajdu@parl.gc.ca](mailto:patty.hajdu@parl.gc.ca)

The Honourable Christine Elliott  
Provincial Minister of Health  
5<sup>th</sup> Floor  
777 Bay Street  
Toronto ON M7A 2J3  
Via e-mail [christine.elliott@pc.ola.org](mailto:christine.elliott@pc.ola.org)

Dear Ministers Hajdu and Elliott:

**Re: Municipal Drug Strategy Coordinators Network of Ontario, Safe Supply**

On September 25, 2020 at a regular meeting of the Board of Health for the Grey Bruce Health Unit, the Board considered the attached letters from the Municipal Drug Strategy Coordinators Network of Ontario regarding safer supply initiatives. The following motion was passed:

GBHU BOH Motion 2020-65

Moved by: Anne Eadie

Seconded by: Brian O'Leary

"THAT, the Board of Health endorse the Municipal Drug Strategy Coordinators Network of Ontario call on the provincial government to fund implementation of safer supply initiatives in a coordinated approach with the federal government; and support the implementation of safer supply initiatives by adding the required formulations to the Ontario Drug Benefit Formulary to enable injectable safer supply initiatives to operate."

Carried

Sincerely,

A handwritten signature in blue ink, appearing to read "Mitch Twolan".

Mitch Twolan  
Chair, Board of Health  
Grey Bruce Health Unit

Encl.

Cc: Municipal Drug Strategy Coordinators Network of Ontario, Adrienne Crowder, Alex Ruff, MP Bruce-Grey-Owen Sound, Terry Dowdall, MP Simcoe-Grey, Ben Lobb, MP Huron-Bruce Association of Local Public Health Agencies, Ontario Health Units

*Working together for a healthier future for all.*

101 17<sup>th</sup> Street East, Owen Sound, Ontario N4K 0A5 [www.publichealthgreybruce.on.ca](http://www.publichealthgreybruce.on.ca)

Municipal Drug Strategy Coordinators Network of Ontario  
c/o Adrienne Crowder  
Manager, Wellington Guelph Drug Strategy  
176 Wyndham St. N.  
Guelph ON, N1H 898

August 21, 2020

Honourable Patty Hajdu  
Minister of Health  
Government of Canada  
House of Commons  
Ottawa ON, K1A 0A6

Dear Honourable Minister of Health Hajdu,

We would like to commend your government for addressing the drug poisoning crisis by funding and facilitating access to safer supply initiatives, and other health interventions. As you know, safer supply initiatives provide pharmaceutical-grade drugs, such as hydromorphone or diacetylmorphine, to people who use substances within a health care context. However, additional safer supply initiatives are needed in Ontario and across Canada. Therefore, on behalf of the Municipal Drug Strategy Coordinators Network of Ontario (MDSCNO), we urge the Government of Canada to immediately increase funding to safer supply initiatives to save lives, and improve the health, safety and well-being of people who use drugs in our province.

Safer supply initiatives significantly improve individual health by transitioning people from the toxic, unregulated market to pharmaceutical-grade substances within a health care context. Substance use is addressed as a health issue rather than a criminal justice issue. Safer supply initiatives can also offer participants case management and other supports to address a spectrum of health and social concerns. These health initiatives have demonstrated exceptionally high client retention rates and significant reductions in overdose fatalities while simultaneously creating a pathway to health care services for their clients.<sup>1</sup> Beyond the health sector, safer supply initiatives provide significant benefits, including improved community safety and well-being, and reduced

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<sup>1</sup> Canadian Centre on Substance Use and Addiction. "Exploring Expanded Response Options to Opioid Harms: Case Studies from Four Canadian Clinics", June 2020. Available at: <https://www.ccsa.ca/sites/default/files/2020-06/CCSA-Expanded-Response-Options-Opioid-Harms-Case-Studies-2020-en.pdf>.

enforcement- and criminal justice-related costs.<sup>2</sup> For these reasons, they have strong support in many Ontario communities.

In 2019, Ontario recorded the highest number of opioid-related overdose deaths in Canada, with 1,535 people dying from opioid-related poisoning, surpassing the province of British Columbia for the first time.<sup>3,4</sup> Since the year 2000, when 111 opioid-related fatalities were recorded, the number of preventable deaths has increased every year, resulting in declining life expectancy in Ontario.<sup>5</sup> While several factors contribute to the drug poisoning crisis, exposure to toxic drugs from an unregulated market is the primary driver of deaths in Ontario and the rest of Canada.

The drug poisoning crisis has been intensified by the COVID-19 pandemic, resulting in two concurrent public health crises. Services have temporarily closed or reduced their hours and capacity. In addition, the unregulated drug market has become increasingly toxic. Stress, isolation, and other pandemic-related factors have increased the risks associated with substance use. Preliminary data from the Office of the Chief Coroner for Ontario shows a 35% increase in suspected drug-related deaths in Ontario in March, April and May 2020 compared to the monthly average in 2019, with approximately 60 suspected-drug related deaths occurring each week.<sup>6</sup> It is now more evident than ever that urgent action is needed to address the opioid poisoning crisis that is co-occurring with the COVID-19 pandemic.

In late 2019 and early 2020, most community proposals submitted to the Substance Use and Addictions Program (SUAP) for safer supply initiatives were denied simply because of inadequate funding. The MDSCNO calls on the federal government to urgently increase SUAP funding available for existing proposals, and to issue a second call for new SUAP safer supply proposals to support a full spectrum of safer supply initiatives across Canada.

The MDSCNO's members are among Ontario's leading experts in drug policy and program development. We represent comprehensive drug strategies in many municipalities throughout Ontario who share a collective interest in making our province safer and healthier for present and future generations.

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<sup>2</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario), Leece P, Tenenbaum M. *Evidence Brief: Effectiveness of supervised injectable opioid agonist treatment (siOAT) for opioid use disorder*. Toronto, ON; 2017.

<sup>3</sup> Public Health Ontario. Personal Communication, May 2020.

<sup>4</sup> Preliminary data from the Office of the Chief Coroner for Ontario shows that there were 1,535 probable and confirmed opioid overdose deaths in Ontario in 2019. This number may increase as coroner's complete investigations.

<sup>5</sup> Statistics Canada. (2020). *The Daily: Life Tables*. Retrieved from <https://www150.statcan.gc.ca/n1/daily-quotidien/200128/dq200128a-eng.htm>

<sup>6</sup> Office of the Chief Coroner for Ontario. Personal Communication, August 2020

Sincerely,



Adrienne Crowder  
Manager, Guelph Wellington Drug Strategy  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario



Susan Shepherd  
Manager, Toronto Drug Strategy Secretariat  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario

CC:

Prime Minister Trudeau  
Alliance for Healthier Communities  
Association of Municipalities of Ontario  
Canadian Alliance to End Homelessness  
Canadian Drug Policy Coalition  
Canadian Mental Health Association  
Canadian Nurses Association  
Canadian Public Health Association  
Chiefs of Ontario  
College of Nurses of Ontario  
College of Physicians and Surgeons of Ontario  
Council of Medical Officers of Health  
Federation of Canadian Municipalities  
Ontario Association of Chiefs of Police  
Ontario College of Pharmacists  
Ontario Pharmacists Association  
Ontario Public Health Association  
Public Health Ontario

**About the Municipal Drug Strategy Coordinators Network of Ontario**

Our 65+ members work in diverse health settings across the province, including public health units, community health centres and not-for-profit organizations. Members coordinate multi-sectoral initiatives that aim to prevent and/or reduce the harms of substance use through regionally tailored strategies incorporating prevention, harm reduction, treatment and enforcement-justice initiatives. Learn more at: [www.drugstrategy.ca](http://www.drugstrategy.ca).

Municipal Drug Strategy Coordinators Network of Ontario  
c/o Adrienne Crowder  
Manager, Wellington Guelph Drug Strategy  
176 Wyndham St. N.  
Guelph ON, N1H 898

August 21, 2020

Honourable Christine Elliott  
Minister of Health  
Government of Ontario  
777 Bay Street, 5<sup>th</sup> Floor  
Toronto, ON M7A 2J3

Dear Minister Elliott,

On behalf of the Municipal Drug Strategy Coordinators Network of Ontario (MDSCNO), we urge the Province of Ontario to immediately fund and scale up implementation of safer supply initiatives to save lives, and improve the health, safety and well-being of people who use drugs in our province.

Safer supply initiatives significantly improve individual health by transitioning people from the toxic, unregulated market to pharmaceutical-grade substances within a health care context. Substance use is addressed as a health issue rather than a criminal justice issue. Safer supply initiatives can also offer participants case management and other supports to address a spectrum of health and social concerns. These health initiatives have demonstrated exceptionally high client retention rates, and significant reductions in overdose fatalities while simultaneously creating a pathway to health care services for their clients.<sup>1</sup>

In 2019, Ontario recorded the highest number of opioid-related overdose deaths in Canada, with 1,535 people dying from opioid-related poisoning, surpassing the province of British Columbia for the first time.<sup>2,3</sup> Since the year 2000, when 111 opioid-related fatalities were recorded, the number of preventable deaths has increased every year,

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<sup>1</sup> Canadian Centre on Substance Use and Addiction. "Exploring Expanded Response Options to Opioid Harms: Case Studies from Four Canadian Clinics", June 2020. Available at: <https://www.ccsa.ca/sites/default/files/2020-06/CCSA-Expanded-Response-Options-Opioid-Harms-Case-Studies-2020-en.pdf>.

<sup>2</sup> Public Health Ontario. Personal Communication, May 2020.

<sup>3</sup> Preliminary data from the Office of the Chief Coroner for Ontario shows that there were 1,535 probable and confirmed opioid overdose deaths in Ontario in 2019. This number may increase as coroner's complete investigations.

resulting in declining life expectancy in Ontario.<sup>4</sup> While several factors are contributing to the opioid poisoning crisis, exposure to increasingly toxic drugs from an unregulated market is the primary driver of deaths in Ontario and the rest of Canada.

The drug poisoning crisis has been intensified by the COVID-19 pandemic, resulting in two concurrent public health crises. Services have temporarily closed or reduced their hours and capacity. In addition, the unregulated drug market has become increasingly toxic. Stress, isolation, and other pandemic-related factors have increased the risks associated with substance use. Preliminary data from the Office of the Chief Coroner for Ontario shows a 35% increase in suspected drug-related deaths in Ontario in March, April and May 2020 compared to the monthly average in 2019, with approximately 60 suspected-drug related deaths occurring each week.<sup>5</sup> It is now more evident than ever that urgent action is needed to address the opioid poisoning crisis that is co-occurring with the COVID-19 pandemic.

The patient- and system-level benefits of safer supply initiatives directly support the government's commitment to end hallway health care, reduce wait times, and improve patient interactions within the health care system. Beyond the health sector, safer supply initiatives provide significant benefits, including improved community safety and well-being, and reduced enforcement- and criminal justice-related costs.<sup>6</sup> For these reasons, they have strong support in many Ontario communities.

Therefore, the MDSCNO calls on the provincial government to:

- fund implementation of safer supply initiatives in a coordinated approach with the federal government; and
- support the implementation of safer supply initiatives by adding the required formulations, such as hydromorphone (i.e., 50 milligrams/millilitres and 100 milligrams/millilitres hydromorphone) and diacetylmorphine, to the Ontario Drug Benefit Formulary to enable injectable safer supply initiatives to operate.

The MDSCNO's members are among Ontario's leading experts in drug policy and program development. We represent comprehensive drug strategies in many municipalities throughout Ontario who share a collective interest in making our province safer and healthier for present and future generations.

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<sup>4</sup> Statistics Canada. (2020). *The Daily: Life Tables*. Retrieved from <https://www150.statcan.gc.ca/n1/daily-quotidien/200128/dq200128a-eng.htm>

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<sup>6</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario), Leece P, Tenenbaum M. *Evidence Brief: Effectiveness of supervised injectable opioid agonist treatment (sIOAT) for opioid use disorder*. Toronto, ON; 2017.

Sincerely,

*Adrienne Crowder*

Adrienne Crowder  
Manager, Guelph Wellington Drug Strategy  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario



Susan Shepherd  
Manager, Toronto Drug Strategy Secretariat  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario

CC:

Premier Doug Ford  
Michael A. Tibollo, Associate Minister of Mental Health and Addictions  
Alliance for Healthier Communities  
Association of Municipalities of Ontario  
Canadian Alliance to End Homelessness  
Canadian Drug Policy Coalition  
Canadian Mental Health Association  
Canadian Nurses Association  
Canadian Public Health Association  
Chiefs of Ontario  
College of Nurses of Ontario  
College of Physicians and Surgeons of Ontario  
Council of Medical Officers of Health  
Federation of Canadian Municipalities  
Ontario Association of Chiefs of Police  
Ontario College of Pharmacists  
Ontario Pharmacists Association  
Ontario Public Health Association  
Public Health Ontario

**About the Municipal Drug Strategy Coordinators Network of Ontario**

Our 65+ members work in diverse health settings across the province, including public health units, community health centres and not-for-profit organizations. Members coordinate multi-sectoral initiatives that aim to prevent and/or reduce the harms of substance use through regionally tailored strategies incorporating prevention, harm reduction, treatment and enforcement-justice initiatives. Learn more at: [www.drugstrategy.ca](http://www.drugstrategy.ca).



October 30, 2020

The Honourable Patty Hajdu  
Federal Minister of Health  
House of Commons  
Ottawa ON K1A 0A6  
Via e-mail [patty.hajdu@parl.gc.ca](mailto:patty.hajdu@parl.gc.ca)



The Honourable Marilee Fullerton  
Minister of Long-Term Care  
400 University Ave., 6th Floor  
Toronto ON M7A 1T7  
Via email: [merrilee.fullerton@pc.ola.org](mailto:merrilee.fullerton@pc.ola.org)

Ontario's Long-Term Care COVID-19 Commission  
700 Bay Street, 24th Floor  
Toronto ON M5G 1Z6  
Via email: [Info@LTCcommission-CommissionSLD.ca](mailto:Info@LTCcommission-CommissionSLD.ca)

Dear Ministers:

**Re: COVID-19 and Long-Term Care Reform**

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On September 25, 2020 at a regular meeting of the Board of Health for the Grey Bruce Health Unit, the Board considered the attached letter from Simcoe Muskoka District Health Unit regarding the Long-Term Care system in Canada and the need for reform and redesign. The following motion was passed:

GBHU BOH Motion 2020-66

Moved by: Brian O'Leary

Seconded by: Sue Paterson

"THAT, the Board of Health support the recommendations from the Royal Society of Canada Working Group on Long-Term Care regarding critical issues that must be addressed moving forward with Long-Term Care reform and redesign."

Carried

Sincerely,

A handwritten signature in blue ink, appearing to read "Mitch Twolan".

Mitch Twolan  
Chair, Board of Health for the Grey Bruce Health Unit

Encl.

Cc: Local MP's and MPP's, RSC Working Group on LTC, Ontario Health Units, alpha

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*Working together for a healthier future for all..*

101 17<sup>th</sup> Street East, Owen Sound, Ontario N4K 0A5 [www.publichealthgreybruce.on.ca](http://www.publichealthgreybruce.on.ca)

September 18, 2020

The Honourable Patty Hajdu  
Minister of Health  
House of Commons  
Ottawa, Ontario, K1A 0A6  
Email: [Patty.Hajdu@parl.gc.ca](mailto:Patty.Hajdu@parl.gc.ca)

The Honourable Marilee Fullerton  
Minister of Long-Term Care  
Ministry of Health and Long-Term Care  
400 University Ave., 6<sup>th</sup> Floor  
Toronto, ON M7A 1T7  
Email: [merrilee.fullerton@pc.ola.org](mailto:merrilee.fullerton@pc.ola.org)

Ontario's Long-Term Care COVID-19 Commission  
700 Bay Street, 24<sup>th</sup> Floor  
Toronto, ON M5G 1Z6  
Email: [Info@LTCcommission-CommissionSLD.ca](mailto:Info@LTCcommission-CommissionSLD.ca)

Dear Ministers:

**RE: COVID-19 and Long-Term Care Reform**

COVID-19 has shone a glaring light on what many knew to be a crisis with the Long-Term Care (LTC) system in Canada in need of reform and redesign, with 81% of COVID-19 related deaths in Canada occurring in LTC Homes (LTCHs) which is far higher than other comparable countries.<sup>i</sup> Urgent reform and redesign of Canada's LTC system is critical in order to address infection prevention and control (IPAC) issues (including COVID-19) and to improve all standards, quality of care and quality of life. Those who require services within a LTCH setting deserve those assurances.

A report released following deployment of the Canadian Armed Forces (CAF) to five LTCHs in Quebec and Ontario struggling in their response to COVID-19 indicates highly concerning living conditions and serious lapses in standards and quality of medical and personal care. The list of deficiencies identified by the CAF as requiring immediate attention is lengthy and includes inadequate infection and control practices, inadequate supplies and lack of training, knowledge, oversight and accountability of LTCH staff and management.<sup>ii</sup>

The Royal Society of Canada (RSC) Working Group on LTC has since released a policy briefing highlighting the pre-pandemic issues with LTCHs that contributed to the heightened crisis in the face of COVID-19, a global pandemic. Namely, addressing the changing demographics and complexities of older adults entering homes, the inadequate workforce and staffing mix to meet their needs, and the inadequate physical environments to accommodate the complex needs of residents, are critical issues that must be addressed moving forward with LTC reform and redesign.

<p>☐ <b>Barrie:</b> 15 Sperting Drive Barrie, ON L4M 6K9 705-721-7520 FAX: 705-721-1495</p>	<p>☐ <b>Collingwood:</b> 280 Pretty River Pkwy. Collingwood, ON L9Y 4J5 705-445-0804 FAX: 705-445-8498</p>	<p>☐ <b>Cookstown:</b> 2-25 King Street S. Cookstown, ON L0L 1L0 705-458-1103 FAX: 705-458-0105</p>	<p>☐ <b>Gravenhurst:</b> 2-5 Pineridge Gate Gravenhurst, ON P1P 1Z3 705-684-9090 FAX: 705-684-9887</p>	<p>☐ <b>Huntsville:</b> 34 Chaffey St. Huntsville, ON P1H 1K1 705-789-8813 FAX: 705-789-7245</p>	<p>☐ <b>Midland:</b> A-925 Hugel Ave. Midland, ON L4R 1X8 705-526-9324 FAX: 705-526-1513</p>	<p>☐ <b>Orillia:</b> 120-169 Front St. S. Orillia, ON L3V 4S8 705-325-9565 FAX: 705-325-2091</p>
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The Working Group policy briefing outlines nine steps requiring strong federal/provincial/territorial and municipal leadership to address necessary improvements in IPAC and provision of quality care for LTC residents with increasingly complex needs:

1. Implement best practice national standards for the necessary staffing and staffing mix to deliver quality care in LTCHs and attach federal funding to the standards;
2. Implement national standards for training and resources for infectious disease control and for outbreak management;
3. Provide appropriate pay and benefits including sick leave for the large unregulated segment of the LTC workforce (i.e. care aides and personal support workers);
4. Provide full time employment and benefits for regulated and unregulated nursing staff and assess impact of “one workplace” policies implemented during COVID-19;
5. Establish minimum education standards for unregulated direct care staff, ongoing education for both regulated and unregulated direct care staff, and proper training and orientation for all external agency staff assigned to a LTCH;
6. Support educational reforms for specialization in LTC for all providers of direct care (i.e. care aides, health and social service providers, managers and directors);
7. Provide mental health supports for LTCH staff;
8. Implement reporting requirements and data collection needed to effectively manage and ensure resident quality of care and quality of life, resident and family experiences and quality of work life for staff; and
9. Take an evidence based approach to mandatory accreditation as well as to regulation and inspection of Long-Term Care Facilities (LTCFs).<sup>iii</sup>

The Simcoe Muskoka District Health Unit's (SMDHU) Board of Health at its September 16, 2020 meeting endorsed these recommendations and is writing to advocate for their adoption through your collective efforts to create necessary system reform and redesign for Ontarians living in LTCHs.

As of September 8, 2020, of the 21 outbreaks within institutional, workplace and congregate settings in Simcoe Muskoka, LTCHs and Retirement Homes accounted for 76% (16) of the outbreaks. As of August 25, 2020, there have been 24 resident deaths attributed to these LTC and Retirement outbreaks and an additional 2 Simcoe Muskoka resident deaths in facilities outside of the region for a total of 26. The median age of all cases who have recovered is 46 years compared to the median age of 85 years among all deceased cases.<sup>iv</sup>

SMDHU's mandate under the Ontario Public Health Standards (OPHS, 2018)<sup>v</sup> regarding LTC and Retirement Homes is substantial. As a vulnerable population, SMDHU supports these facilities with food safety, and infectious and communicable disease prevention and control (including outbreak management). There are currently 29 LTC and 53 Retirement Homes within SMDHU. Since March 1, 2020, the Infectious Disease team has supported over 1700 IPAC consults or COVID-19 questions for LTC and Retirement Homes.

In addition to the mandate in LTCF's, SMDHU is required to develop and implement a program of public health interventions using a comprehensive health promotion approach that addresses risk and protective factors to reduce the burden of preventable injuries and

substance use in the health unit population. <sup>iv</sup> SMDHU supports community dwelling seniors and promotes healthy aging at home for those that are able, and for as long as they are able. The SMDHU supports these seniors through;

- active participation on the Ontario Fall Prevention Collaborative, the Simcoe County and other community based Age-Friendly Community Coalitions, The Muskoka Seniors Planning Table, Age-Friendly and the Central LHIN Fall Strategy;
- best practice healthy aging policy advocacy; and
- a wide variety of community awareness and engagement strategies to promote healthy aging key messages.

SMDHU remains committed to supporting local LTC and Retirement Homes to improve IPAC practices and to advocate for improvement to standards and quality of care and quality of life for residents, their families and staff, and implore municipal, provincial and federal leaders to make the necessary investments to create safe supportive care to ensure the health and safety for residents of LTCHs.

Sincerely,

**ORIGINAL Signed By:**

Anita Dubeau, Chair  
Simcoe Muskoka District Health Unit Board of Health

AD:JC:cm

cc: Ontario Boards of Health  
Matthew Anderson, President and CEO, Ontario Health  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Mayor and Council of Simcoe and Muskoka  
Members of Provincial Parliament for Simcoe and Muskoka

**References:**

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<sup>i</sup> Canadian Institute for Health Information. "New analysis paints international picture of COVID-19's long-term care impacts": CIHI; June 25, 2020. Available from: <https://www.cihi.ca/en/new-analysis-paints-international-picture-of-covid-19s-long-term-care-impacts>

<sup>ii</sup> Headquarters 4<sup>th</sup> Canadian Division Joint Task Force (Central). (2020). OP LASER - JTFC Observations in Long Term Care Facilities in Ontario

<sup>iii</sup> Estabrooks CA, Straus S, Flood, CM, Keefe J, Armstrong P, Donner G, Boscart V, Ducharme F, Silvius J, Wolfson M. *Restoring trust: COVID-19 and the future of long-term care*. Royal Society of Canada. 2020 retrieved on Aug. 28 at [https://rsc-src.ca/sites/default/files/LTC%20PB%20%2B%20ES\\_EN.pdf](https://rsc-src.ca/sites/default/files/LTC%20PB%20%2B%20ES_EN.pdf)

<sup>iv</sup> Retrieved on Aug. 25, 2020 <https://www.simcoemuskokahealthstats.org/topics/infectious-diseases/a-h/covid-19>

<sup>v</sup> Ministry of Health and Long-Term Care. (2018). OPHS

October 29, 2020

Premier Doug Ford  
Premier's Office  
Room 281 Legislative Building, Queen's Park  
Toronto, ON  
M7A 1A1

Hon. Christine Elliott,  
Minister of Health  
5th Floor 777 Bay St.  
Toronto, ON  
M7A 2J3

Dear Honourable Sir and Honourable Minister,

**Re: Response to Second Wave – COVID-19**

I am writing to you to request that you consider a targeted approach regarding specific sectors that are seeing increased infection rates; instead of ordering the full closure of an entire municipality or region. The public and business will accept your decision(s) if you provide conclusive data for the targeted approach; rather than a blanket approach that unfairly punishes small businesses.

Medical Officers of Health across Ontario already have the authority to respond to increased infection rates by making specific recommendations and public health restrictions, similar to the restrictions currently in place in Toronto, York Region, Peel Region and Ottawa. For example, municipalities in our area, which are under the jurisdiction of the Timiskaming Health Unit (THU) have proactively addressed the suppression of increased infections by following the directions of the Acting Medical Officer of Health Dr. Glenn Corneil.

Businesses and sectors, throughout the jurisdiction of the THU, that have been following public health guidelines throughout the pandemic have seen no outbreaks and minimal or even no infections; they should not be punished under a blanket shutdown order. Restaurant and small business owners across Ontario have been some of the hardest hit during this pandemic and those that have survived need our support more than ever before.

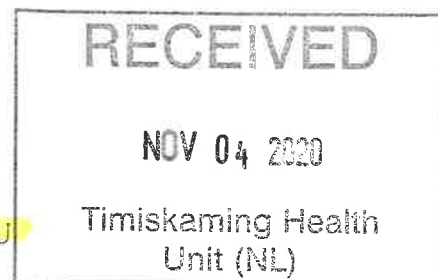
Thank you for your attention to this matter.

Yours truly,



Derek Mundle  
Reeve  
THE CORPORATION OF THE  
TOWNSHIP OF EVANTUREL

c.c. Dr. Glenn Corneil – Acting Medical Officer of Health - THU





**Resolution of Council**

October 28, 2020

Session No. 8  
2020

Moved by Councillor Fricker

Seconded by Councillor Beasley

**THAT** the Council of the Corporation of the Township of Evanturel support the request from the Mayor of the Town of Oakville to lobby the Premier of Ontario and the Minister of Health to have the Province make decisions regarding the COVID-19 Pandemic based on conclusive data that targets the sources of community spread.

Carried [Signature]

DIVISION VOTE		
YEAS	NAME OF MEMBER OF COUNCIL	NAYS
	BARBARA BEACHEY, COUNCILLOR	
	MIKE FRICKER, COUNCILLOR	
	HENRI GRAVEL, COUNCILLOR	
	ROBBIE MACPHERSON, COUNCILLOR	
	DEREK MUNDLE, REEVE	
	TOTALS	

Declaration of Pecuniary Interest – Report to Council TWP2019-05 – Form A – Reeve Mundle \_\_\_; Councillor \_\_\_

Certified to be a true copy of Resolution No. 8 of the Corporation of the Township of Evanturel passed in open Council on the 28th day of October, 2020.

Virginia Montminy – Clerk  
Township of Evanturel



Thunder Bay District  
Health Unit

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999 Balmoral Street  
Thunder Bay, ON  
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Superior Greenstone District  
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TERRACE BAY  
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Fax: (807) 825-7774

TBDHU.COM

November 20, 2020

The Right Honourable Justin Trudeau, P.C., MP  
Prime Minister of Canada  
Office of the Prime Minister  
80 Wellington Street  
Ottawa, ON K1A 0A2  
Sent via email: [justin.trudeau@parl.gc.ca](mailto:justin.trudeau@parl.gc.ca)

The Honourable Chrystia Freeland, P.C., M.P.  
Deputy Prime Minister and Minister of Finance  
Privy Council Office  
Room 1000  
80 Sparks Street  
Ottawa, ON K1A 0A3  
Sent via email: [chrystia.freeland@parl.gc.ca](mailto:chrystia.freeland@parl.gc.ca)

Dear Prime Minister Trudeau and Deputy Prime Minister Freeland:

**Re: Basic Income for Income Security during Covid-19 Pandemic and Beyond**

At its regular meeting held on November 18, 2020, the Thunder Bay District Health Unit (TBDHU) Board of Health resolved to express support for efforts to provide income solutions to reduce Household Food Insecurity (HFI) to Federal leaders.

Prior to COVID-19, many Canadians were already experiencing HFI, which is the inadequate and insecure access to food due to financial constraints. Statistics Canada estimated that in 2017/2018, 10.5% or 1 in 10 households experienced HFI<sup>i</sup>. In Thunder Bay, this value is 14.3% or 1 in 7 households<sup>ii</sup>. Abundant research has shown that higher HFI rates are associated with increased risk for poor and inadequate diets that are directly linked to higher chronic disease rates, poorer health outcomes and increased health inequities<sup>iii</sup>. Since COVID-19, this pre-existing issue has become more apparent and worrisome with Statistics Canada reporting an increase to 14.6%, or 1 in 7 households, experiencing food insecurity. Applying that similar increase locally to the District of Thunder Bay would mean an HFI rate of 18.4% or 1 in 5 household. This increase was anticipated due to many individuals facing precarious employment, reduced hours of work, or loss of job altogether, coupled with the less predictable food supply and fluctuating food prices.

As short-term temporary solutions, many have relied on emergency and charitable food programs and services, such as food banks. The commitment of the Federal government to allocate \$200 million for these

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programs has undoubtedly bolstered the initial access to food for many experiencing HFI. In addition, the enactment of Canadian Emergency Response Benefit (CERB), amongst others, has demonstrated that income solutions can be effective. The issue however, is that both of these solutions are intended for emergency and temporary coverage, which may not provide longer coverage with the anticipated prolonged existence of COVID-19. It also does not address the root cause of food insecurity, which is inadequate income, and may not fully provide relief for other needs for daily living (such as rent and household expenses) experienced by those in poverty. This has set the precedent for the call to action in this letter of support, which is the consideration for adequate income solutions that provide long-term income support, have a permanence structure, are not only available during emergencies or pandemics, and are equitable in that they provide support to the most at-risk and in need.

An adequate and secure level of household income is strongly linked to lower food insecurity rates, and income solutions have been recommended as the primary strategy to address this issue. The TBDHU will continue to support the government in their priority actions to reduce poverty and improve household food insecurity, and we appreciate your time, commitment and consideration for this crucial endeavor.

Sincerely,



Mr. James McPherson  
Chair, Thunder Bay District Board of Health

cc. Honourable Doug Ford, Premier of Ontario  
Dr. David Williams, Chief Medical Officer of Health  
Thunder Bay MPs and MPPs  
Ontario Public Health Association  
Ontario Boards of Health

References:

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<sup>i</sup> Statistics Canada. (2020). Food Insecurity during the COVID-19 pandemic, May 2020. Retrieved from: <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00039-eng.htm>

<sup>ii</sup> CCHS. (2017). Hungry for Change – 2019. Retrieved from: <https://www.tbdhu.com/resource/cost-of-eating-well-district-of-thunder-bay>

<sup>iii</sup> PROOF – Food Insecurity Policy Research. (2020). Household Food Insecurity in Canada (2017-2018). Retrieved from: <https://proof.utoronto.ca/wp-content/uploads/2020/03/Household-Food-Insecurity-in-Canada-2017-2018-Full-Reportpdf.pdf>