

Board Correspondence

September 2021

Date	From	Subject
June 17, 2021	Windsor-Essex County Health Unit	Ltr to Premier Ford and Minister of Health – Appeal to the Province of Ontario re: Public Health Funding.
June 21, 2021	Sudbury & Districts Public Health	Ltr to Minister of Health – COVID-19 Recovery and 2022 Budgets.
June 21, 2021	Simcoe Muskoka District Health Unit	Ltr to Minister of Health – urging the government to commit to the Mitigation Funding in 2022.
June 23, 2021	Peterborough Public Health	Ltr to Minister of Health – continuation of the mitigation fund for the 2022 fiscal year, one-time funding for COVID expenses, increase in base funding levels to accommodate increased operational costs since 2019, funding support to support need for re-starting programs.
June 23, 2021	Town of Englehart	Support of Resolution from the city of St. Catharines– expand testing to all strains of Lyme Disease and improve the level of treatment and care.
June 24, 2021	North Bay Parry Sound District Health Unit	Ltr to Minister of Health – Public Health Funding for 2022.
July 20, 2021	Southwestern Public Health	Ltr to Minister of Health - continuation of the mitigation fund for the 2022 fiscal year, one-time funding for COVID extraordinary expenses, increase in base funding levels to accommodate increased operational costs since 2019, funding support to support need for re-starting programs.
August 5, 2021	Township of Matachewan	Resolution 2021-80 – to support the KL Opioid Poisoning Prevention Task Force in its effort to convert the former Pinegar Detention Center into an Addiction Residential Community.
August 6, 2021	Peterborough Public Health	Ltr to Minister of Health – to consider the increase to the cost-shared base budget to update the Environmental Health database for the implementation of the Menu Labelling, Child Vision Health and Vision Screening and Consumption and Treatment Services Compliance and Enforcement.
August 11, 2021	Minister of Agriculture and Agri-Food	Ltr to Chair Kidd – in response to letter regarding the endorsement of the Ont. Dietitians in Public Health 2020 Position Statement and Recommendations on Responses to Food Insecurity.
August 15, 2021	City of Toronto	Council’s response to COVID-19 – June 21 Update.
August 27, 2021	Northwestern Health Unit	Ltr to Minister of Health – support to establish the Infection Prevention and Control (IPAC) Hub Model as an ongoing program. Ltr to Minister of Health – request for the province to reconsider its approach to the funding of public health. Public health has been instrumental in the response to the COVID-19 pandemic.

June 17, 2021

The Hon. Christine Elliott
Minister 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/Premier Elect Doug Ford:

Appeal to the Province of Ontario – Public Health Funding

The Board of Health for the Windsor-Essex County Health Unit operates as an autonomous Board of Health. The Windsor-Essex County Health Unit (WECHU) services the geographic area of Windsor and Essex County, having a population of 398,953 based on the 2016 census.

In April 2019, with the proclamation of the 2019 Ontario Budget, Protecting what Matters Most, the Province of Ontario made changes to the funding model for public health units as well as introduced modernization plans having an impact on the structure and delivery of public health in Ontario. More specifically, regionalization to achieve economies of scale, streamlined back-office functions and better-coordinated action by public health units. Funding changes, which included:

- Mandatory programs funded at 75% by the Province of Ontario and 25% by the Obligated Municipalities would change to a model of 70% and 30% respectively;
- Related programs funded at a rate of 100% by the Province of Ontario, would change to being funded at a rate of 70% by the Province of Ontario and 30% by the Obligated Municipalities

These funding changes represented a substantial shift in the burden of public health funding to the obligated municipalities in a relatively short timeframe. After consultations with the Association of Municipalities of Ontario as well as other stakeholders, the Province of Ontario approved mitigation funding equivalent to the change in the percentage of the funding allotment. The mitigation funding was for a two-year period expiring December 31, 2021.

On March 20, 2020, the WECHU reported its first case of COVID-19 in Windsor and Essex County (WEC). WEC is home to one of the busiest border crossings in North America. Approximately six thousand (6,000) residents in WEC work in the state of Michigan and, in particular, seventeen hundred (1,700) in the health care industry. In addition, WEC is home to eight thousand (8,000) to ten thousand (10,000) temporary foreign workers, one hundred seventy-six (176) farms and over seven hundred (700) seasonal accommodations. WEC also has forty-four (44) long-term care and retirement homes. These characteristics have made it challenging, from a public health perspective, to

manage the response to the COVID-19 pandemic. To date, WEC has had 16,753 cases of COVID-19 of which, 1,920 represent Variants of Concern. Our community has lost 433 of our residents to COVID-19.

On January 1, 2021, the WECHU started COVID-19 vaccination efforts in the community beginning with the vaccination of staff and residents of long-term care and retirement homes followed by other priority groups as mandated by the Ministry of Health. Our approach was and continues to be a coordinated effort with various stakeholders in the community, all with a common goal, to return our hard-hit community to some semblance of normalcy. To date, we have successfully immunized 72.9% of our adult population with one dose of a COVID-19 vaccine. In addition, 27.4% of our adult residents are now fully vaccinated with the completion of a two-dose series. It is anticipated that vaccination efforts will continue throughout the summer months.

In the months and year ahead, the WECHU will focus on planning and administering programs that are centred on the recovery needs of our community. Additional human resource capacity previously hired to support case and contact management, as well as vaccination administration, will be deployed to support recovery efforts. The loss of mitigation funding effective January 1, 2022, impacts those efforts. The WECHU will be required to reduce human resource capacity to meet operating budgets at the expense of meeting the public health needs of our community.

The WECHU endeavours to carry out its fiduciary responsibilities while balancing the needs of the residents of WEC. We respectfully request that the Province of Ontario reconsider its approach to funding public health. Public health has been instrumental in the response to the COVID-19 pandemic, and it is crucial that the focus of Public Health in Ontario continues to meet the needs of the communities it serves.

Sincerely,



Gary McNamara
Board of Health Chair



Theresa Marentette, RN, MSc
CEO, Chief Nursing Officer

c: Dr. David Williams, Chief Medical Officer of Health, Ontario
 Lisa Gretzky, MPP Windsor-West
 Percy Hatfield, MPP Windsor-Tecumseh
 Taras Natyshak, MPP Essex
 Rick Nicholls, MPP Chatham-Kent-Leamington

 Association of Municipalities of Ontario (AMO)
 Brian Masse, MP Windsor-West
 Irek Kusmierczyk, MP Windsor-Tecumseh
 Chris Lewis, MP Essex
 Dave Epp, MP Chatham-Kent-Leamington



Public Health
Santé publique
SUDBURY & DISTRICTS

June 21, 2021

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

Dear Minister Elliott:

RE: COVID-19 Recovery and 2022 Budgets

I am writing on behalf of the Board of Health for Public Health Sudbury & Districts as we begin our planning for COVID-19 recovery and our January 1, 2022 annual budget.

On behalf of the Board, I also want to extend my sincere appreciation for your and your team's leadership throughout the pandemic. Our local public health agency has benefitted greatly from the talents, responsiveness, and commitment of your Ministry team. We are also grateful for the financial support provided through several initiatives, including importantly, the COVID-19 fund for extraordinary expenses.

Although we remain at over-capacity as we roll out the important COVID-19 vaccination program, we are beginning to turn our minds to COVID-19 recovery and restoration of core and essential public health programs and services. To this end, I am writing with inquiries about both core public health funding and about continued access to COVID-19 funds for extraordinary expenses related to our ongoing COVID-19 response.

As you are aware, your Ministry granted an extension to the "one-time" mitigation grant to local boards of health for 2021. This was to offset the provincial funding shortfall that would have otherwise resulted from the funding policy change announced in 2019 (i.e. to reduce the provincial grant to up to 70% of board-approved budgets and to apply this formula to most previously 100%-funded programs). We are seeking to obtain information on what we might expect for 2022 and to share that we anticipate a need for enhanced and stable funding as we recover and restore from the COVID-19 pandemic.

While this may appear to be a premature request in the current context, our budgeting process begins now, and we would anticipate significant human resources implications depending on the outcome. For such planning, we require sufficient lead time to manage implications. To be clear, our Board of Health is grateful for the mitigation grants to date, however, we remain very concerned about public health funding and the growing

Sudbury

1300 rue Paris Street
Sudbury ON P3E 3A3
t: 705.522.9200
f: 705.522.5182

Elm Place

10 rue Elm Street
Unit / Unité 130
Sudbury ON P3C 5N3
t: 705.522.9200
f: 705.677.9611

Sudbury East / Sudbury-Est

1 rue King Street
Box / Boîte 58
St.-Charles ON P0M 2W0
t: 705.222.9201
f: 705.867.0474

Espanola

800 rue Centre Street
Unit / Unité 100 C
Espanola ON P5E 1J3
t: 705.222.9202
f: 705.869.5583

Île Manitoulin Island

6163 Highway / Route 542
Box / Boîte 87
Mindemoya ON P0P 1S0
t: 705.370.9200
f: 705.377.5580

Chapleau

34 rue Birch Street
Box / Boîte 485
Chapleau ON P0M 1K0
t: 705.860.9200
f: 705.864.0820

toll-free / sans frais

1.866.522.9200

phsd.ca



Letter

RE: COVID-19 Recovery and 2022 Budgets

Page 2

financial burden on local municipalities to ensure effective and sustainable local public health programs and services. Thank you for any information that you can share and anticipated timing of your response.

Our Finance Standing Committee has identified that provincial budget principles and parameters on both the future of mitigation grants and of COVID-19 extraordinary funds is critical to inform our recovery and related budgeting processes for 2022.

Sincerely,



René Lapierre, Chair
Board of Health, Public Health Sudbury & Districts

cc: Dr. David Williams, Chief Medical Officer of Health
The Honourable Peter Bethlenfalvy, Minister of Finance
Dr. Charles Gardner, Chair, Council of Ontario Medical Officers of Health
Loretta Ryan, Executive Director, Association of Local Public Health Agencies
Dr. Penny Sutcliffe, Medical Officer of Health and Chief Executive Officer

also need to commence these staffing reductions in the present year while we are still responding to the pandemic.

For these reasons the Board of Health urges the provincial government to commit to the Mitigation Funding in 2022 at a level in keeping with that in 2021. The communication of this commitment soon would help to avoid the potential for boards of health to otherwise commence this kind of anticipatory action.

Thank you for considering this important matter.

Sincerely,

ORIGINAL Signed By:

Anita Dubeau
Chair, Board of Health

AD:CG:cm

cc: Ontario Boards of Health
MPPs of Simcoe Muskoka
Mayor Jeff Lehman, City of Barrie
Mayor Steve Clarke, City of Orillia
District Chair John Klinck, District of Muskoka
Warden George Cornell, County of Simcoe
Dr. Kieran Moore, Chief Medical Officer of Health
Loretta Ryan, Association of Local Public Health Agencies.

June 21, 2021

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

Dear Minister Elliott:

On behalf of the Board of Health for the Simcoe Muskoka District Health Unit, I commend the strong progress being made in bringing COVID-19 under control through the public health measures and the vaccination campaign directed by the provincial government of Ontario. Much work remains as we collectively work to complete the vaccination of the population and to work through the provincial Roadmap very carefully, all the while maintaining close surveillance on the trajectory of transmission. However, our strong progress enables us to begin planning for and working towards recovery, including the recovery of the public health system across the province.

One essential enabler of recovery is financial stability. At this point in time, boards of health are in active communication with Ministry of Health staff on the finances required to continue managing the pandemic in our communities. However, it would also be timely to consider for boards of health to soon receive communication from the province on the financial support from the province for our operational budgets in 2022. The Mitigation Funding received in recent years has been essential in maintaining public health programming by boards of health and easing the related financial impacts on our obligated municipalities, particularly during our response to the pandemic in 2020 and 2021. For this reason, on June 15, the Board of Health approved a motion recommending that boards of health receive the Mitigation Funding from the Ministry of Health in 2022 that they received in 2021.

Boards of health have had to greatly augment their staffing through the course of the pandemic to enable our overall response, including the immunization of the population that has proved to be so essential. As we recover, boards of health will need to reduce staffing provided that the pandemic continues to come under control and remain under control; however, boards of health will also need to maintain staff levels sufficient for the resumption of our standard public health programming, and for any outstanding needs related to the ongoing control of the pandemic (such as remaining case and contact management, the potential for booster vaccinations at some point in the future, and ongoing work to ensure the safety of the school environment).

Without a continuation of Mitigation Funding in 2022 the maintenance of these activities would be greatly challenged. Boards of health would need to engage with their funding municipalities regarding the potential for substantial levy increases. Resulting staffing reductions below the levels that had been in place before the pandemic, would both impact program delivery and require sufficient advance notice to be managed. To be in place in time for the commencement of the 2022 year, boards of health would

Barrie:
15 Sperling Drive
Barrie, ON
L4M 6K9
705-721-7520
FAX: 705-721-1495

Collingwood:
280 Pretty River Pkwy.
Collingwood, ON
L9Y 4J5
705-445-0804
FAX: 705-445-6498

Cookstown:
2-25 King Street S.
Cookstown, ON
L0L 1L0
705-458-1103
FAX: 705-458-0105

Gravenhurst:
2-5 Pineridge Gate
Gravenhurst, ON
P1P 1Z3
705-684-9090
FAX: 705-684-9887

Huntsville:
34 Chaffey St.
Huntsville, ON
P1H 1K1
705-789-8813
FAX: 705-789-7245

Midland:
A-925 Hugel Ave.
Midland, ON
L4R 1X8
705-526-9324
FAX: 705-526-1513

Orillia:
120-169 Front St. S.
Orillia, ON
L3V 4S8
705-325-9565
FAX: 705-325-2091

June 23, 2021

The Honourable Christine Elliott
Deputy Premier and Minister of Health
christine.elliott@pc.ola.org

Dear Minister Elliott,

I want to begin by thanking you and your government for your financial support during the pandemic. Local boards of health have appreciated the province's commitment to funding, at 100%, the costs related to the COVID response and the mandate to implement the largest mass immunization campaign in Ontario's history. Your approach has facilitated our ability to serve our local population.

As we move towards summer, we are encouraged by the increase in vaccine coverage, decreased cases and opening of businesses and facilities. However, there is still a lot of work ahead and, if we've learned anything from this experience, the end point is never truly predictable.

The impact of your assistance was noted by our Board when we recently approved the audited financial statements for Peterborough Public Health's 2020 fiscal year. At the same time, we continue to await approval of our 2021 Annual Service Plan - including the provincial cost-shared grant and extraordinary one-time funding for COVID Response and COVID Vaccination. Your anticipated assistance in mitigating costs in 2021 will be critical in allowing us to complete the job of controlling the pandemic.

During the COVID emergency, we have had to make difficult decisions about which program activities to stop, which to continue at reduced capacity, and which to continue without disruption. Post-COVID we will need to rebuild programs, catch up on wait lists and delayed activities, meet new community needs and continue to address the fallout from an intense 21 months of COVID work.

Facing these challenges, I ask that you ensure public health is adequately funded to meet the evolving public health needs of our communities and further ask that you and your officials provide timely clarity regarding what support local public health agencies can anticipate in 2022. Early advice on key funding commitments for 2022 will allow my Board to more effectively manage our 2022 fiscal requirements.

More specifically, our Board would ask that your government consider a commitment to:

1. Continuation of mitigation funding for the 2022 fiscal year;
2. Continuation of the availability of one-time funding for COVID expenses;
3. An increase in the base funding levels to accommodate increased operating costs since 2019; and,
4. Funding to support the enhanced need for "re-starting" or returning programs to OPHS requirement levels.

Local public health agencies, along with their partners, are determined to rebuild community health. This effort cannot be put on the shoulders of local funders alone and we look to a continuing partnership with the government.

Our Board looks forward to working with you and your Ministry as we plan for and implement post-pandemic public health initiatives.

Yours truly,

Original signed by

Mayor Andy Mitchell
Chair, Board of Health

cc: Hon. Doug Ford, Premier of Ontario
Dr. Kieran Moore, Incoming Ontario Chief Medical Officer of Health
Dave Smith, MPP Peterborough-Kawartha
David Piccini, MPP Northumberland-Peterborough South
Laurie Scott, MPP Haliburton-Kawartha Lakes-Brock
Association of Local Public Health Agencies
Ontario Boards of Health

TOWN OF ENGLEHART
61 Fifth Avenue , Englehart , Ontario , P0J 1H0
Tel: 1-705-544-2244
<https://www.Englehart.ca/>

June 23, 2021

RESOLUTION

Resolution # COU2-21-06-05

Agenda Item # 6.2 City of St. Catharines-Lyme Disease Awareness Month

Moved By : Jerry Mikovitch

Seconded By : Jason deLeeuw

Be it resolved that the Council of the Corporation of the Town of Englehart support the attached resolution from the City of St. Catharines requesting the Ontario government expand testing to all strains of Lyme Disease and improve the level of treatment and care for those diagnosed with this crippling disease; and

Be it further resolved a copy of this resolution be forwarded to the Premier of Ontario, Ontario Minister of Health, local MPPs, Timiskaming Health Unit, the Association of Municipalities of Ontario and all Ontario municipalities.

Carried



Mayor
Town of Englehart



June 11, 2021

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

Sent via email: premier@ontario.ca

**Re: Lyme Disease Awareness Month
Our Files: 35.31.99/35.23.12**

Dear Premier Ford,

At its meeting held on May 31, 2021, St. Catharines City Council approved the following motion:

"WHEREAS May is Lyme Disease National Awareness Month; and

WHEREAS the City of St. Catharines Strategic Plan includes improving livability for all; and

WHEREAS Niagara Region is a high-risk area for ticks and Lyme Disease, and cases continue to increase; and

WHEREAS Ontario health does not cover treatment and testing for all strains of Lyme Disease; and

WHEREAS Lyme Disease is a crippling disease if not diagnosed and treated appropriately;

THEREFORE BE IT RESOLVED the City of St. Catharines call on the Ontario government to expand testing to all strains of Lyme Disease and improve the level of treatment and care for those diagnosed with this crippling disease; and

BE IT FURTHER RESOLVED the Premier of Ontario, Ontario Minister of Health, local MPPs, Niagara Health, Niagara Region Public Health, all Ontario municipalities, and the Association of Municipalities of Ontario be sent correspondence of Council's decision; and

BE IT FURTHER RESOLVED the Mayor bring this matter to the attention of the Niagara Region and request that the Region build an awareness campaign with on-line resources for families with Lyme Disease."



If you have any questions, please contact the Office of the City Clerk at extension 1524.

A handwritten signature in cursive script, appearing to read 'Bonnie Nistico-Dunk'.

Bonnie Nistico-Dunk, City Clerk
Legal and Clerks Services, Office of the City Clerk
:mb

cc: Ontario Minister of Health
Niagara Area MPPs
Niagara Health
Niagara Region Public Health
Niagara Region
Ontario Municipalities
Association of Municipalities of Ontario, amo@amo.on.ca
Melissa Wenzler, Government Relations Advisor

June 24, 2021

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

Dear Minister Elliott:

RE: Public Health Funding for 2022

At the recent meeting of the Board of Health for the North Bay Parry Sound District Health Unit (Health Unit), public health funding for 2022 was discussed. In follow up to direction provided by the Board of Health, this correspondence is being forwarded to bring attention to some urgent issues related to 2022 public health funding. The Board of Health resolution from the June 23 meeting is attached. (Appendix A).

The background behind this discussion began in April 2019 with the introduction of the provincial Public Health Modernization initiative, along with a change to the funding formula to 30% municipal / 70% provincial cost-sharing for almost all public health programming. At that time, it was communicated that there was to be a phased in approach to the funding formula while the Modernization process took place.

With the need for the Public Health Modernization process to be put on hold to address and respond to the COVID-19 pandemic, the Province announced in August 2020 that mitigation funding would be provided for 2020 and 2021 to help relieve over-burdened municipalities. Without continuation of this mitigation funding, the Health Unit's 31 member municipalities will suffer an increase in their 2022 municipal levies of 50.5%.

The Board of Health has been informed by our municipalities, many of whom have a small population base, that levy increases are not manageable, particularly at this significant of an increase.

The cost-sharing formula is only one piece of the public health funding issue for 2022. Health units have had only one base funding increase in the past five years; however, wage and benefit

increases and general increases to operating costs due to inflation continue.

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

Additionally, there are new pressures on public health as a result of the COVID-19 pandemic that will require funding if public health is to participate fully in the health recovery of the citizens of Ontario.

Some examples of health recovery that will be required post-pandemic include, but are not limited to the following:

1. **Mental wellness:** Families and youth have undergone a considerable level of stress in the past two years. Public health needs to be at the table to assist with bringing together health, education and other partners to reach a consolidated plan forward to improve family resiliency and outlook.
2. **Harm Reduction – Youth and Opioid:** There are many community drug strategies. Public health can provide more capacity to these important and much needed community strategies by assisting partners with leadership, evaluation support, population health data, research, and best practice to ensure that initiatives have the best possible outcomes.
3. **Backlogged Services:** Backlogs within the Health Unit's critical clinics and community programming has occurred due staff redeployment to COVID-19 immunization clinics, call centres, and case and contact management. Staff deployment to the COVID-19 pandemic response has meant:
 - i. Increased wait lists for oral health services, especially preventative care and school-based programs
 - ii. Sexual health clinic clients are presenting with more complex issues due to COVID-19 lockdowns/stay-at-home orders, fear of attending clinic appointments during the pandemic, and extended wait times for appointments
 - iii. School-based vaccine programs have not operated since the fall of 2019, leaving many age cohorts under vaccinated
 - iv. Smoking cessation clinics have longer than usual wait lists because clinics were suspended during lockdowns, and because staff were deployed to address prioritized COVID-19 activities

Of other consideration are the ongoing costs directly related to COVID-19. We know that COVID-19 will be managed by public health moving forward, but how that will look is still being formulated

and negotiated at the provincial level. However, some things we know will continue into 2022 are as follows:

- Case and contact management and outbreak management for COVID-19;
- Infection prevention and control (IPAC) guidance and support in long-term care homes, retirement homes, and other congregate settings;
- Provision of accurate information for the public, businesses, and municipalities as rules, regulations, and guidelines change to address situations until such time that things normalize;
- There will be added costs for doing regular business, such as:
 - Personal protective equipment (PPE)
 - Additional cleaning and disinfecting between clients, impacting the number of clients that can be seen per day, and increase use of cleaning supplies;
- It is a requirement that there be 24-hour per day / 7 days per week medical officer of health coverage; the pandemic has made it abundantly clear that an Associate Medical Officer of Health is necessary to sustain this required coverage, particularly during a long crisis period, such as the COVID-19 pandemic, or for any other major public health emergency; and
- There will likely be outstanding COVID-19-related court/enforcement issues continuing into 2022.

Both 2020 and 2021 have been extremely difficult on staff. The burden of continued wait lists can be an added stressor on staff diligently working to get through these wait lists to address the needs of our vulnerable populations who are often in crisis situations. Recruitment of qualified professionals, whether staff or management, has been affected by the Public Health Modernization, and this continues to be a challenge.

Over the next few years, we believe we will continue to see retention and recruitment challenges along with burnout and stress effects throughout the Health Unit. People cannot work at current pressure levels on a continual basis without ramifications. A **healthy workplace** will require additional personnel in order to get caught up on work that has been paused.

Without additional support from the province, program prioritization will need to take place. In these times, deciding which programs/services not to return to will be difficult as the need for public health assistance is all around us.

As a final point, we would like to emphasize the urgency of establishing funding expectations for 2022. This is not a good time for public health to reduce its participation in recovery plans due to lack of capacity. We need to plan now for 2022, and while we understand and appreciate the burden on the Province and the Ministry of Health in responding to the COVID-19 pandemic, we are respectfully requesting assistance by setting public health funding expectations as soon as possible.

We look forward to discussing with you the ways Public Health Units can work with the Province to bring better health and well-being to all of the citizens of Ontario.

Sincerely yours,



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



Nancy Jazko
Chairperson, Board of Health

/sb

Enclosure (1)

Copy to: Premier Doug Ford

Hon. Helen Angus, Deputy Minister of Health

Chief Medical Officer of Health

Elizabeth Walker, Director, Public Health Accountability and Liaison Branch

Collen Kiel, Director, Public Health Strategy and Planning Branch

Vic Fedeli, MPP, Nipissing

Norm Miller, MPP, Parry Sound-Muskoka

John Vanthof, MPP, Timiskaming-Cochrane

Ontario Boards of Health

Member Municipalities (31)

Association of Municipalities Ontario (AMO)

Hon. Steve Clark, Minister of Municipal Affairs and Housing



**NORTH BAY PARRY SOUND DISTRICT HEALTH UNIT
BOARD OF HEALTH**

RESOLUTION

DATE: June 23, 2021

MOVED BY: Jamie McGarvey

RESOLUTION: #BOH/2021/06/04

SECONDED BY: Gary Guenther

Whereas, the Government of Ontario in its budget of April 11, 2019, initiated a Public Health Modernization process which included a change in municipal cost-sharing from 25% of mandatory public health programs covered by municipalities to 30% of almost all public health programs based on 2018 third quarter spending levels; and

Whereas, on August 21, 2020, the Ministry of Health (Ministry) announced that provincial mitigation funding would be provided to offset the increase to municipal cost-sharing for 2020 and 2021; and

Whereas, the COVID-19 pandemic, which started in early 2020, has further affected municipalities' ability to pay levy increases, it has stalled modernization processes, increased the cost-of-living, and affected the health and well-being of the public, and more specifically, public health clients and staff.

Therefore Be It Resolved, that the Board of Health for the North Bay Parry Sound District Health Unit supports returning to the 2018 cost-sharing formulas at 25%/75%, with 100% provincially funded programs; and

Furthermore Be It Resolved, that the Board of Health supports mitigation funding continue for 2022 to eliminate the additional financial burden of a 42-50% levy increase to the Health Unit's 31 member municipalities if it is not possible to return to the 2018 cost-sharing formula with 100% provincially funded programs; and

Furthermore Be It Resolved, that the Board of Health requests the 2022 public health funding include increases to reflect, cost-of-living increases, public health program changes related to ongoing COVID-19 response, and funding to assist with program and community recovery efforts; and

Furthermore Be It Resolved, that the Board of Health requests a base funding increase to fund an Associate Medical Officer of Health to support the Medical Officer of Health with the continual demands of 24/7 on call coverage that have been highlighted throughout the COVID-19 pandemic; and

Furthermore Be It Resolved, that the Board of Health instructs the Medical Officer of Health and Senior Management to write a letter to the Minister of Health detailing the financial and organizational pressures on public health, including outlining the urgency for establishing the funding levels for 2022 to assist public health and community budget planning.

CARRIED: **AMENDED:** **DEFEATED:** **CHAIRPERSON:** McGarvey

Page 1 of 2



CONFLICT OF INTEREST DECLARED AND SEAT(S) VACATED:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

RECORDED VOTE FOR CIRCULATION: Yes / No (Please circle one)

Name:	For:	Against:	Abstain:	Name:	For:	Against:	Abstain:
Dean Backer	✓			Jamie McGarvey	✓		
Dave Butti	✓			Scott Robertson	✓		
Blair Flowers	✓			Dan Roveda	✓		
Gary Guenther	✓			Marianne Stickland	✓		
Nancy Jacko	✓			Tanya Vrebosch	absent		
Stuart Kidd	✓						



St. Thomas Site
Administrative Office
1230 Talbot Street
St. Thomas, ON
N5P 1G9

Woodstock Site
410 Buller Street
Woodstock, ON
N4S 4N2

July 20, 2021

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

delivered via email
christine.elliott@ontario.ca

Dear Minister Elliott,

On behalf of the Board of Health for Southwestern Public Health (SWPH), we wish to applaud the continuing commitment shown by you and your government for the financial support of local public health units in their ongoing COVID-19 pandemic response. The collective effort of all levels and branches of government in their prioritization of the health and well-being of Ontarians has been truly exceptional and heartening.

Much progress has been made in increasing vaccine rates, decreasing cases, alleviating pressures on our healthcare system, containing transmission, and implementing public health measures against COVID-19 whereby we have now progressed to Step 3 in the Roadmap to Reopen Ontario. Indeed, the improvements we have seen in recent weeks is cause for a thoughtful and thorough consideration of our larger recovery plans as the pandemic has significantly impacted our many and diverse communities.

As other health units have experienced, the extensive resources required to support our COVID response resulted in the necessary reduction or cessation of many programs and services. As we look towards the latter part of the fiscal year and into 2022, we note that much work remains as SWPH engages in rebuilding programs and services, addressing community needs, reviving regional connections and supports, and assessing the aftereffect of public health's focused pandemic work on local populations.

In essence, the recovery of post-pandemic public health programs and services cannot rest upon the support of local funders alone. Without a continuation of mitigation funding, our board will need to reduce staffing numbers that would be needed to resume standard public health services as well as address ongoing COVID-19 work, such as vaccine outreach and immunization, possible booster vaccinations, and case and contact management in schools and workplaces.

Given the leadership role public health units will play in their continued COVID-19 response, the extensive resources required to ensure Ministry targets and requirements are met and maintained, and public health's commitment to the mandates identified in the Ontario Public Health Standards (OPHS), we request that the Ministry commit to the following:

- Extension of mitigation funding for the 2022 fiscal year;
- Extension of the availability of one-time funding for COVID-19 extraordinary expenses;
- An increase in base funding levels to accommodate increasing operating costs since 2019; and,
- Multi-year funding dedicated to COVID recovery to restore and return programs to OPHS requirement levels.

Sufficient and sustained financial support from you and your government is a key component of public health recovery planning. At this time, we await approval of SWPH's 2021 Annual Service Plan and COVID-19 extraordinary expense one-time funding submission – plans and scope which have considerably exceeded our initial estimation given the priority mandate to vaccinate local populations posthaste. I would emphasize once more that our local plans to meet the needs of our communities hinge upon a timely indication of vital funding commitments for 2022 as well as this current year.

Our Board extends its sincere thanks for considering this critical request.

Yours truly,

A handwritten signature in cursive script that reads "Larry Martin".

Larry Martin
Chair, Board of Health

c: Cynthia St. John, CEO, Southwestern Public Health
The Honourable Doug Ford, Premier of Ontario
Ernie Hardeman, MPP Oxford County
Jeff Yurek, MPP Elgin Middlesex London
Dr. Kieran Moore, Chief Medical Officer of Health
Loretta Ryan, Association of Local Public Health Agencies
Ontario Boards of Health



**THE CORPORATION OF THE
TOWNSHIP OF MATACHEWAN**

August 5, 2021

K.L. Opioid Poisoning Prevention Task Force
28 O'Meara Blvd.
Kirkland Lake, ON
P2N 2T6

Dear Ms. Fagan:

At the meeting held on May 25, 2021, the Council of the Corporation of the Township of Matachewan passed Resolution 2021-80, in principle, to support the K.L. Opioid Poisoning Prevention Task Force in its efforts to convert the former Pinegar Detention Center into an Addiction Residential Community.

A copy of Resolution 2021-80 is attached.

Sincerely,

Barbara Knauth
Deputy Clerk Treasurer

cc: OPP Kirkland Lake Detachment
OPP Temiskaming Shores Detachment
Temiskaming Health Unit
Temiskaming Municipal Association
Honourable John Vanthof, MPP Timiskaming-Cochrane



THE CORPORATION OF THE TOWNSHIP OF MATACHEWAN

P.O. Box 177, Matachewan, Ontario P0K 1M0

DATE: May 25, 2021

RESOLUTION #: 2021-80

Moved by: [Signature]

Seconded by: [Signature]

WHEREAS substance abuse/addiction has become an ever-growing concern in the District of Timiskaming (the District) affecting individuals and their families; and

WHEREAS there are no facilities in the District to assist individuals from the area requiring assistance to recover from substance abuse/addiction;

NOW THEREFORE BE IT HERBY RESOLVED THAT we, the Council of the Corporation of the Township of Matachewan, in principle, to support the K.L. Opioid Poisoning Prevention Task Force in its efforts to convert the former Pinegar Detention Center into an Addiction Residential Community which would contain nonmedical withdrawal management beds; recovery residential housing and a recovery and community reintegration program to address the needs of individuals recovering from substance abuse/addiction; and

FURTHER that the resolution of support be forwarded to OPP Detachments - Kirkland Lake and Temiskaming Shores; Timiskaming Health Unit; Temiskaming Municipal Association; the Hon. John Vanthof- MPP Timiskaming-Cochrane and the K.L. Opioid Poisoning Prevention Task Force.

	COUNCILLOR	YEA	NAY	PID
CARRIED ✓	Ms. A. Commando-Dubé Mayor			
AMENDED	Mr. N. Costello Deputy Mayor			
DEFEATED	Mr. G. Dubé Councillor			
TABLED	Ms. S. Ruck Councillor			
	Mr. A. Durand Councillor			

[Signature]

Anne Commando-Dubé
Mayor

[Signature]

Janet Gore
Clerk Treasurer

Certified to be a true copy of the original.
[Signature]

August 6, 2021

The Honourable Christine Elliott
Deputy Premier and Minister of Health
christine.elliott@pc.ola.org

Dear Minister Elliott,

As per its recommendation on July 21st, 2021, I am writing on behalf of the Board of Health for Peterborough Public Health (PPH) requesting the Ministry of Health (MOH) consider funding an increase to our cost-shared base budget to accommodate the addition of 2.8 full-time equivalent (FTE) staff positions and monies to update the Environmental Health database used by PPH, for the implementation of the *Menu Labelling*, *Child Visual Health and Vision Screening*, and *Consumption and Treatment Services Compliance and Enforcement* protocols under the Ontario Public Health Standards (OPHS).

In 2018, the *Menu Labelling* and the *Child Visual Health and Vision Screening* protocols were added to the *OPHS and Protocols*. The BOH appreciated receiving one-time funding for the implementation of the *Menu Labelling* protocol, however we are concerned that no additional base funding is being provided to support the sustained implementation of the *Menu Labelling* protocol.

In addition on June 10, 2021, PPH received a memo from the Chief Medical Officer of Health indicating an amendment of the OPHS which included the addition of a requirement to deliver the Ontario Seniors Dental Care Program (OSDCP) in accordance with the revised *Oral Health Protocol, 2021* and amendments to the Effective Public Health Practice; Healthy Environments; and Substance Use and Injury Prevention Program Standards to require routine and complaint-based inspections of Consumption and Treatment Services and reference to the new *Consumption and Treatment Services Compliance and Enforcement Protocol, 2021 (CTSCEP)*. Although the OSDCP is 100% funded by the Ministry of Health, no additional funding was announced to support the implementation of the CTSCEP.

This is a particular concern in Peterborough as community partners have made application to the provincial government for a Consumption and Treatment Site (CTS) for 220 Simcoe Street, Peterborough. A Health Canada Exemption to allow for illicit drug use on site has been approved. A separate application for CTS funding was submitted to the MOH for operations funding for staffing/facility and awaits approval.

Although the 2021 amended standards and associated protocols are welcomed, local public health agencies (LPHAs) like PPH have very limited capacity to implement them without a supporting budget. As noted above, LPHAs are already carrying a load of previously mandated protocols that have never been funded, including the vision screening and menu labelling protocols. In addition, due to the COVID-19 pandemic, LPHAs are behind in implementing many requirements of these programs and need all allocated FTE for programs and services that have fallen behind. We are concerned that these FTE cannot be stretched even further to fulfill the requirements of these unfunded programs.

With the anticipated return to regular programs and services in the upcoming fall and winter and the ongoing demands of COVID-19 response, it will be critical that programs that have not been operating for the past 16 months respond to the gaps and inequities created or exacerbated during the pandemic. We fear that the addition of new mandates may jeopardize the prioritization of programs and services that are intended to reduce health inequities and are evidence based.

More specifically we note:

Rationale for CTS-Related Funding

The addition of the new CTS protocol will add more pressure to divert finite resources from other programs and services to complete these new requirements. It is anticipated that additional Health Promoter time, up to 1.0 FTE in the first year, and funding to support reporting would be required to fulfill the requirements of the new protocol including routine inspections, responding to complaints, creating an inspection and reporting module, additional licenses for the inspection and reporting software, and collaborating with stakeholders.

Rationale for Increased Public Health Inspector Resources

Prior to the pandemic, PPH dedicated Public Health Inspector (PHI) resources to focus on menu review and inspections of existing regulated food service premises that fall under the *Healthy Menu Choices Act, 2015* (HMCA), and inspections of each new food service premise within their first year of operation. Compliance to date with this protocol is estimated at 60% and was identified as an Environmental Health priority in 2020. Additional PHI time, up to 0.5 FTE, is needed in 2022 to complete HMCA inspections (not routine inspections).

Rationale for Vision Screening Staffing Request

Prior to the emergency response to COVID-19, at PPH, the Vision Screening program was subsidized by staffing from the Oral Health and Ministry of Children, Community and Social Services (MCCSS)-funded programs, including a Certified Dental Assistant and an Administrative Assistant, amounting to a total of 1.3 FTE. Moving into the post-pandemic era this support will not be possible since many of the Oral Health screening program recipients will be priority for services. All of the staffing allocated to these programs will be needed to make up for lost time and ensure the oral health of school children is assessed and appropriate treatment offered.

Our Board of Health, looks forward to working with the Ministry to ensure that all mandated programs are adequately resourced and that health of the community continues to be protected.

Yours truly,

Original signed by

Mayor Andy Mitchell
Chair, Board of Health

cc: Hon. Doug Ford, Premier of Ontario
Dr. Kieran Moore, Incoming Ontario Chief Medical Officer of Health
Dave Smith, MPP Peterborough-Kawartha
David Piccini, MPP Northumberland-Peterborough South
Laurie Scott, MPP Haliburton-Kawartha Lakes-Brock
Association of Local Public Health Agencies
Ontario Boards of Health

Minister
of Agriculture and
Agri-Food



Ministre
de l'Agriculture et de
l'Agroalimentaire

Ottawa, Canada K1A 0C5

August 11, 2021

Quote: 264735

Mr. Carman Kidd
Chair, Board of Health
Timiskaming Health Unit
43-247 Whitewood Avenue
PO Box 1090
New Liskeard ON P0J 1P0

Dear Mr. Kidd:

I am writing in response to your letter addressed to the Right Honourable Justin Trudeau and Ontario Premier Doug Ford, regarding the Timiskaming Board of Health's endorsement of the Ontario Dieticians in Public Health 2020 Position Statement and Recommendations on Responses to Food Insecurity (Position Statement and Recommendations). As you know, the Prime Minister's Office forwarded your letter to me for consideration. I sincerely regret the delay in this response.

The statement and recommendations raise a number of important issues related to food insecurity, including income and a measurement and reporting framework. I appreciate the Timiskaming Health Unit's engagement on these issues.

With respect to the work Agriculture and Agri-Food Canada is undertaking, as noted in the Position Statement and Recommendations, in June 2019, the Government of Canada launched the Food Policy for Canada with the vision that all Canadians be able to access a sufficient amount of safe, nutritious, and culturally diverse food and that Canada's food system be resilient and innovative, sustain our environment, and support our economy. I agree that it is important to have a comprehensive measurement framework in place, to monitor progress towards achieving this vision.

Agriculture and Agri-Food Canada is working with other departments and agencies, including Statistics Canada, which leads the collection of data on food insecurity through the Canadian Community Health Survey, to develop a cross-government reporting framework to ensure transparent reporting to Canadians and support decision-making on effective approaches to tackling food system issues.

.../2

Canada

Several new programs were announced as part of the Food Policy for Canada, including the Local Food Infrastructure Fund, with the objective of strengthening food systems and facilitating access to safe and nutritious food for at-risk populations, as well as the Harvesters Support Grant and the Northern Isolated Community Initiatives Fund, which support food security in Northern and Indigenous communities.

In February 2021, I announced membership of the Canadian Food Policy Advisory Council, a multi-disciplinary group of experts with a mandate to advise on current and emerging food system issues, including topics such as data and measurement, which are identified in the Position Statement and Recommendations. The Council is currently in the process of finalizing its Terms of Reference and work planning for the months ahead.

I am committed to continuing the effort to improve food security for Canadians and achieve the Food Policy for Canada's vision. This is an ongoing challenge, and it will be important to have a comprehensive framework for monitoring and reporting on progress. I will continue to work directly with Indigenous partners, and with colleagues and counterparts across government to ensure a coordinated approach in this endeavor.

I hope this information will be of assistance to you. Thank you for writing on this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Bibeau', with a horizontal line extending to the right.

The Honourable Marie-Claude Bibeau, PC, MP

August 15, 2021

SENT VIA E-MAIL

To: Toronto Members of Parliament and Members of Provincial Parliament and Boards of Health in Ontario

Subject: Response to COVID-19 - June 2021 Update (Item HL29.1) (see Part 1.e. of Toronto City Council's decision on page 1 which is addressed to Toronto Members of Parliament and Members of Provincial Parliament, the Prime Minister of Canada, the Premier of Ontario, the Federal and Provincial Ministers of Health and all Boards of Health in Ontario)

Toronto City Council, during its meeting on July 14, 15 and 16, 2021, considered Item HL29.1 and adopted the following:

1. City Council acknowledge and thank the Black Scientists' Task Force on Vaccine Equity for their work and report and:
 - a. fully support the recommendations in the report from the Black Scientists' Task Force on Vaccine Equity;
 - b. request the City Manager, in consultation with the Medical Officer of Health, to advance the recommendations in the report from the Black Scientists' Task Force on Vaccine Equity;
 - c. request the City Manager, in consultation with the Medical Officer of Health, to report to the Board of Health in the fourth quarter of 2021 on the status of each recommendation in the report from the Black Scientists' Task Force on Vaccine Equity, including actions by the Federal, Provincial and Municipal Governments;
 - d. request the Executive Director, Social Development, Finance and Administration, in consultation with the Medical Officer of Health, to use the report from the Black Scientists' Task Force on Vaccine Equity to inform the ongoing development of the Toronto Black Health Plan; and
 - e. direct that the report (May 31, 2021) from the Medical Officer of Health, including the report from the Black Scientists' Task Force on Vaccine Equity, be forwarded to Toronto Members of Parliament and Members of Provincial Parliament, the Prime Minister of Canada, the Premier of Ontario, the Federal and Provincial Ministers of Health and all Boards of Health in Ontario.

2. City Council repeal Section 545-8.4.1. (COVID-19 measures) in City of Toronto Municipal Code Chapter 545, Licensing.
3. City Council repeal City of Toronto By-laws 322-2020 and 323-2020 related to physical distancing in parks and public squares.
4. City Council authorize the Medical Officer to Health to extend the funding agreement with the Public Health Agency of Canada for the receipt and expenditure of funding for the Toronto Voluntary Isolation Centre and to undertake appropriate measures to ensure the full and effective use of federal funds, on such terms and conditions that are satisfactory to the Medical Officer of Health and in a form approved by the City Solicitor.
5. City Council approve the receipt of the funds from the Public Health Agency of Canada for the continued operation of the Toronto Voluntary Isolation Centre in accordance with the terms and conditions of the funding agreement until March 2022.
6. City Council authorize the Medical Officer to Health to increase the Toronto Public Health 2021 Operating Budget by \$3.329 million gross and \$0 net and to include \$2.466 million and \$0 net in the 2022 Operating Budget Request for the continued operation of the Toronto Voluntary Isolation Centre.
7. City Council authorize the Medical Officer of Health to enter into new or extend existing agreements or other suitable arrangements with City divisions, Federal or Provincial agencies, community agencies, private entities and/or individuals to expend the funds from the Public Health Agency of Canada for the operation of the Toronto Voluntary Isolation Centre, in accordance with the terms and conditions of the funding agreement and on such other terms and conditions that are acceptable to the Medical Officer of Health.

The Toronto Board of Health, during its meeting on June 14, 2021, also:

1. Requested the Governments of Canada and Ontario to establish data systems that allow for the regular reporting of COVID-19 epidemiology to include cases of Post COVID-19 Condition (or "Long COVID") and to work with local Public Health Units, as appropriate.
2. Called on the Government of Ontario to work with arts industry stakeholders and local Public Health Units to address the concerns raised by the Campaign for Fairness for Ontario Arts and to work collaboratively in support of a safe resumption of performance rehearsals, livestreamings, recordings and planning for the eventual return of live audiences.
3. Requested the Ontario Ministry of Health and Public Health Ontario to consider adopting and using laboratory methods that provide rapid results on the presence of variants of concern to facilitate the detection of areas with high transmission (e.g., hot spots) and where there may be lagging vaccine coverage, in order to address increased concern around the spread of the Delta variant.

4. Requested the Ontario Ministry of Health, as it implements the COVID-19 Roadmap to Reopen, to continue working closely with local Public Health Units and to proceed with caution given the learnings that other jurisdictions have had with reopening and emerging evidence on variants of concern.
5. Requested the Ontario Ministry of Health to provide additional vaccine supplies that would enable the City of Toronto to continue accelerating full vaccination rates through a hot spot campaign, while ensuring high vaccine coverage for older age groups who are most at risk for severe outcomes of COVID-19 infection.
6. Requested the Ontario Ministry of Health to accelerate its commitment to provide a data linkage between COVaxON, the Provincial vaccine system, and the Provincial Case and Contact Management (CCM) system, in order for Toronto Public Health to have access to more comprehensive vaccine efficacy data, including specific details on potential infection breakthroughs after vaccination and their association with variants of concern.
7. Requested the Ontario Ministry of Health to take action to mandate and facilitate the collection of socio-demographic data by all vaccination providers, to mandate that the Ontario Health Data Platform support the use of this equity data and to make this data routinely available to local Public Health Units for assessment and planning.
8. Requested the Ontario Ministry of Health to expedite the assembly of curated lists of enrolled patients that have been vaccinated and to make them available to physicians for the purpose of engaging these clients and promoting the opportunity for vaccinations.
9. Acknowledged and thanked the Black Scientists' Task Force on Vaccine Equity for their work and report and:
 - a. fully supported the recommendations in the report from the Black Scientists' Task Force on Vaccine Equity;
 - b. requested the Medical Officer of Health, in consultation with the City Manager, to advance the recommendations in the report from the Black Scientists' Task Force on Vaccine Equity; and
 - c. requested the Medical Officer of Health, in consultation with the Executive Director, Social Development, Finance and Administration, to use the report from the Black Scientists' Task Force on Vaccine Equity to inform the ongoing development of the Toronto Black Health Plan.
10. Requested the Medical Officer of Health to provide an update at the September 20, 2021 meeting of the Board of Health on the impacts of the COVID-19 pandemic on children and youth and measures to enhance the safety of schools.
11. Requested the Medical Officer of Health to clarify with the Government of Ontario when strip clubs, swinger clubs and bathhouses will be permitted to reopen under the COVID-19 Roadmap to Reopen and to urgently consult and work with industry

stakeholders and community organizations that carry out public health promotion in these facilities to develop detailed guidelines for their safe reopening.

12. Requested the Medical Officer of Health to provide an update on the Provincial public health modernization that considers lessons from COVID-19, including the current and future role of public health partnerships with community agencies, recommended performance indicators related to health equity and community inclusion and recommended governance structures that maximize health equity and systems resilience.

To view this item and background information online, please visit:

- <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.HL29.1>.

Yours sincerely,

Julie Lavertu

Julie Lavertu
Board Secretary
Toronto Board of Health

Sent (via e-mail) to the following elected officials and Boards of Health in Ontario:

- Gary Anandasangaree, M.P. (Scarborough—Rouge Park), Parliamentary Secretary to the Minister of Crown-Indigenous Relations
- Yvan Baker, M.P. (Etobicoke Centre)
- The Honourable Carolyn Bennett, P.C., M.P. (Toronto—St. Paul's), Minister of Crown-Indigenous Relations
- The Honourable Bill Blair, P.C., M.P. (Scarborough Southwest), Minister of Public Safety and Emergency Preparedness
- Shaun Chen, M.P. (Scarborough North)
- Julie Dabrusin, M.P. (Toronto—Danforth), Parliamentary Secretary to the Minister of Canadian Heritage
- Han Dong, M.P. (Don Valley North)
- The Honourable Kirsty Duncan, P.C., M.P. (Etobicoke North), Deputy House Leader of the Government
- Julie Dzerowicz, M.P. (Davenport)
- Ali Ehsassi, M.P. (Willowdale), Parliamentary Secretary to the Minister of Innovation, Science and Industry (Innovation and Industry)
- Nathaniel Erskine-Smith, M.P. (Beaches—East York)
- The Honourable Chrystia Freeland, P.C., M.P. (University—Rosedale), Deputy Prime Minister and Minister of Finance
- The Honourable Ahmed Hussen, P.C., M.P. (York South—Weston), Minister of Families, Children and Social Development
- Marci Ien, M.P. (Toronto Centre)
- James Maloney, M.P. (Etobicoke—Lakeshore)
- The Honourable John McKay, P.C., M.P. (Scarborough—Guildwood)
- The Honourable Marco E. L. Mendicino, P.C., M.P. (Eglinton—Lawrence), Minister of Immigration, Refugees and Citizenship

- Robert Oliphant, M.P. (Don Valley West), Parliamentary Secretary to the Minister of Foreign Affairs
- Yasmin Ratansi, M.P. (Don Valley East)
- Ya'ara Saks, M.P. (York Centre)
- The Honourable Judy A. Sgro, P.C., M.P. (Humber River—Black Creek)
- Adam Vaughan, M.P. (Spadina—Fort York), Parliamentary Secretary to the Minister of Families, Children and Social Development (Housing)
- Arif Virani, M.P. (Parkdale—High Park), Parliamentary Secretary to the Minister of Justice and Attorney General of Canada
- Jean Yip, M.P. (Scarborough—Agincourt)
- Salma Zahid, M.P. (Scarborough Centre)
- Jill Andrew, M.P.P. (Toronto—St. Paul's)
- Roman Baber, M.P.P. (York Centre)
- Aris Babikian, M.P.P. (Scarborough—Agincourt)
- Doly Begum, M.P.P. (Scarborough Southwest)
- Jessica Bell, M.P.P. (University—Rosedale)
- Rima Berns-McGown, M.P.P. (Beaches—East York)
- The Honourable Raymond Sung Joon Cho, M.P.P. (Scarborough North), Minister for Seniors and Accessibility
- The Honourable Stan Cho, M.P.P. (Willowdale), Associate Minister of Transportation (Transit-Oriented Communities)
- Michael Coteau, M.P.P. (Don Valley East)
- Chris Glover, M.P.P. (Spadina—Fort York)
- Faisal Hassan, M.P.P. (York South—Weston)
- Christine Hogarth, M.P.P. (Etobicoke—Lakeshore), Parliamentary Assistant to the Solicitor General
- Mitzie Hunter, M.P.P. (Scarborough—Guildwood)
- Bhutila Karpoche, M.P.P. (Parkdale—High Park)
- Vincent Ke, M.P.P. (Don Valley North), Parliamentary Assistant to the Minister of Heritage, Sport, Tourism and Culture Industries (Culture and Sport)
- Robin Martin, M.P.P. (Eglinton—Lawrence), Parliamentary Assistant to the Minister of Health
- Christina Maria Mitas, M.P.P. (Scarborough Centre)
- Suze Morrison, M.P.P. (Toronto Centre)
- Tom Rakocevic, M.P.P. (Humber River—Black Creek)
- Marit Stiles, M.P.P. (Davenport)
- The Honourable Kinga Surma, M.P.P. (Etobicoke Centre), Minister of Infrastructure
- Peter Tabuns, M.P.P. (Toronto—Danforth)
- Vijay Thanigasalam, M.P.P. (Scarborough—Rouge Park), Parliamentary Assistant to the Minister of Transportation
- Kathleen O. Wynne, M.P.P. (Don Valley West)
- Algoma Public Health Board of Health, c/o Mayor Sally Hagman, Chair
- Brant County Board of Health, c/o Councillor John Bell, Chair
- Chatham-Kent Board of Health, c/o Councillor Joe Faas, Chair
- City of Hamilton Board of Health, c/o Mayor Fred Eisenberger, Chair
- Durham Region Board of Health (Health and Social Services Committee), c/o John Henry, Durham Regional Chair

- Eastern Ontario Health Unit Board of Health, c/o Councillor Syd Gardiner, Chair
- Grey Bruce Health Unit Board of Health, c/o Mayor Sue Paterson, Chair
- Haldimand-Norfolk Health Unit Board of Health, c/o Mayor Kristal Chopp, Chair
- Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health, c/o Councillor Doug Elmslie, Chair
- Halton Region Board of Health (Regional Council), c/o Gary Carr, Halton Regional Chair
- Hastings Prince Edward Public Health Board of Health, c/o Mayor Jo-Anne Albert, Chair
- Huron Perth Public Health Board of Health, c/o Councillor Kathy Vassilakos, Chair
- Kingston, Frontenac, Lennox & Addington Public Health Board of Health, c/o Deputy Warden and Mayor, Denis Doyle, Chair
- Lambton County Board of Health (County Council), c/o County Warden and Mayor, Kevin Marriott, Chair
- Leeds, Grenville & Lanark District Health Unit Board of Health, c/o Mayor Doug Malanka, Chair
- Middlesex-London Health Unit Board of Health, c/o Councillor Maureen Cassidy, Chair
- Niagara Region Board of Health (Regional Council), c/o Jim Bradley, Regional Chair
- North Bay Parry Sound District Health Unit Board of Health, c/o Nancy Jacko, Chair
- Northwestern Health Unit Board of Health, c/o Mayor Doug Lawrance, Chair
- Ottawa Board of Health, c/o Councillor Keith Egli, Chair
- Peterborough Public Health Board of Health, c/o Deputy Warden and Mayor Andy Mitchell, Chair
- Porcupine Health Unit Board of Health, c/o Mayor Sue Perras, Chair
- Public Health Sudbury & Districts Board of Health, c/o Councillor René Lapierre, Chair
- Region of Peel Board of Health (Regional Council), c/o Nando Iannicca, Regional Chair and Chief Executive Officer
- Region of Waterloo Board of Health (Region of Waterloo Council), c/o Karen Redman, Regional Chair
- Renfrew County and District Health Unit Board of Health, c/o Ann Aikens, Chair
- Simcoe Muskoka District Health Unit Board of Health, c/o Deputy Mayor and Councillor Anita Dubeau, Chair
- Southwestern Public Health Board of Health (Oxford, Elgin and St. Thomas), c/o Warden Larry Martin, Chair
- Thunder Bay District Health Unit Board of Health, c/o Councillor James McPherson, Chair
- Timiskaming Health Unit Board of Health, c/o Mayor Carman Kidd, Chair
- Wellington-Dufferin-Guelph Public Health Board of Health, c/o Mayor and Councillor George Bridge, Chair
- Windsor-Essex County Health Unit Board of Health, c/o Warden and Mayor Gary McNamara, Chair
- York Region Board of Health (York Regional Council), c/o Wayne Emmerson, York Region Chairman and Chief Executive Officer

Sent (via e-mail) to the following elected officials (under separate cover):

- The Right Honourable Justin Trudeau, P.C., M.P. (Papineau), Prime Minister of Canada
- The Honourable Doug Ford, M.P.P. (Etobicoke North), Premier of Ontario and Minister of Intergovernmental Affairs
- The Honourable Patty Hajdu, P.C., M.P. (Thunder Bay—Superior North), Minister of Health
- The Honourable Christine Elliott, M.P.P. (Newmarket—Aurora), Deputy Premier and Minister of Health

cc (via e-mail):

- Dr. Eileen de Villa, Medical Officer of Health, Toronto Public Health



Northwestern
Health Unit

www.nwhu.on.ca

210 First Street North
Kenora, ON P9N 2K4

August 27, 2021

VIA ELECTRONIC MAIL

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

Dear Minister Elliott:

Re: Support to Establish the Infection Prevention and Control (IPAC) Hub Model as an Ongoing Program

At its August 27, 2021 meeting, the Board of Health for the Northwestern Health Unit recognized the continued importance of supporting long-term care homes and other community congregate living settings through provincially funded infection protection and control (IPAC) measures. Northern health units are uniquely positioned, and the temporary funding for each board of health to be the "Hub" in the IPAC "Hub and Spoke" model has been particularly effective and continues to be critical to ensure vulnerable residents are protected and outbreaks of infections such as SARS-CoV-2 are prevented.

Infection Prevention and Control programming is a requirement of Boards of Health under the *Ontario Public Health Standards*. In December 2020, Northern public health units received temporary funding to establish local networks to enhance IPAC practices in community-based congregate living settings, which resulted in enhanced partnerships between Social Services Boards, Associations for Community Living, and increased staff and management capacity for this important work which is carried out across the Northwestern Health Unit catchment area and throughout Northern Ontario.

The establishment of IPAC Hubs is a strong first step in addressing the need for supports related to IPAC within congregate living facilities, as identified in *Ontario's Long-Term Care COVID-19 Commission April 2021 Final Report*, and while we would welcome the news of funding for this programming for the 2021/2022 period, **we would request that stable, annualized funding for this program be established in recognition of the criticality of the interventions.** Temporary or one-time funding does not allow us to successfully recruit trained professionals for the required positions, given the chronic recruitment challenges that have only been worsened by the pandemic.

With this in mind, the Board of Health carried the following resolution #79-2021:

THAT the Board of Health for the Northwestern Health Unit make a request to the Provincial Government to make the IPAC Hub model an ongoing program with stable annual funding to provide for the protection from infectious diseases in community congregate living settings and long-term care homes.

AND FURTHER that this resolution be shared with Ministers of Health and Long-Term Care, area partners, Northern Boards of Health, Ontario Health, aPHa, and the Chief Medical Officer of Health.

Northwestern Health Unit is grateful to have been able to work with health units in the north to come together in support of protecting vulnerable residents from infectious diseases in long-term care and other congregate living settings; We thank you for the opportunity to do so.

Sincerely,



Kit Young Hoon, MBBS, MSc., MPH, FRCPC
Medical Officer of Health

cc: Honourable R. Phillips, Minister of Long-Term Care
Dr. K. Moore, Chief Medical Officer of Health, Ministry of Health
All Northern Ontario Boards of Health
C. Geiger, President and CEO, Public Health Ontario
M. Anderson, President and CEO, Ontario Health
B. Kytör, Transitional Regional Lead (Northern Ontario)

August 27, 2021

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

VIA EMAIL: Christine.elliott@pc.ola.org

Dear Minister Elliott,

On behalf of the Board of Health for the Northwestern Health Unit (NWHU), we wish to express our appreciation for the guidance and leadership shown by the Government of Ontario through the COVID-19 Pandemic Response and Vaccine Rollout. As we progress further along the Roadmap to reopening and begin our own recovery discussions, the topic of modernization and a shift in the cost-sharing model are front and centre.

At the forefront of recovery for public health units and the municipalities we serve, and who contribute to public health funding, is financial stability. NWHU serves 19 municipalities in the province's Northwest; each of which generates much of its revenue through tourism and other economic development initiatives which have been significantly impacted by the pandemic. Mitigation funding received in recent years has been critical to the maintenance of public health programming by boards of health and in easing related financial impacts on our obligated municipalities, especially during the pandemic response, which has required NWHU to augment its staffing and redeploy existing staff to the response.

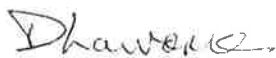
As the pandemic continues to come under control, NWHU will shift into recovery mode, which will include several months' and even years' work to catch up on programming such as school immunizations, and will require us to maintain staffing levels sufficient for the resumption of our standard public health programming, and outstanding efforts related to pandemic control such as remaining case and contact management, child and youth vaccinations and the potential for booster vaccinations at some point in the future.

Mitigation funding will be crucial to ensure the success of public health programming; without it, public health activities including ensuring the safety of the school environment will be significantly challenged. Our obligated municipalities are not in a position to shift to substantially increased levies to support this work, and public health is not in a position to reduce its staffing to below pre-pandemic numbers and

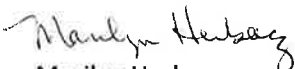
still keep our communities safe through our programming which is a substantial risk if mitigation funding and/or an increase to our base budget in 2022 is not received.

The Board of Health for the Northwestern Health Unit endeavours to carry out its fiduciary responsibilities while balancing the needs of the population in our broad catchment area. We respectfully request that the Province of Ontario reconsider its approach to the funding of public health. Public health has been instrumental in the response to the COVID-19 pandemic, and will continue to play a large and important role in the recovery process, especially given the long list of inequities that the pandemic has uncovered in our population's access to health supports.

Sincerely,



Doug Lawrance
Board of Health Chair



Marilyn Herbacz
Chief Executive Officer



Dr. Kit Young Hoon
Medical Officer of Health

CC: Premier Doug Ford
Dr. Kieran Moore, Chief Medical Officer of Health
Greg Rickford, MPP Kenora-Rainy River
Sol Mamakwa, MPP Kiiwetinoong
Judith Monteith-Farrell, MPP Thunder Bay - Atikokan
Ontario Boards of Health
Member Municipalities (19)
Association of Local Public Health Agencies (ALPHA)
Association of Municipalities of Ontario (AMO)