



October 25, 2023

## BOARD OF HEALTH MEETING

Algoma Community Room / Videoconference

[www.algomapublichealth.com](http://www.algomapublichealth.com)

# Meeting Book - October 25, 2023, Board of Health Meeting

## Table of Contents

---

<b>1. Call to Order</b>	
a. Declaration of Conflict of Interest	
<hr/>	
<b>2. Adoption of Agenda</b>	
a. October 25, 2023, Board of Health Meeting Agenda	4
<hr/>	
<b>3. Adoption of Minutes</b>	
a. September 27, 2023, Board of Health Meeting Minutes	7
<hr/>	
<b>4. Delegation/Presentations</b>	
a. Environmental Health Program Overview	11
<hr/>	
<b>5. Business Arising</b>	
a. Support of Bill 103 – Smoke-Free Ontario Amendment Act (Vaping is not for Kids)	27
b. Resolution - Bill 103	32
<hr/>	
<b>6. Reports to Board</b>	
a. Medical Officer of Health and Chief Executive Officer Report	
i. Report of MOH CEO - October 2023	34
b. Finance and Audit	
i. Oct 18, 2023, Finance and Audit Committee Chair Report	41
ii. APH Unaudited Financial Statements ending August 31, 2023	42
iii. Briefing Note - Server Upgrades	50
iv. By-Law 06-01 - Sewage Systems Part 8 of the Ontario Building Code Act	52
c. Governance	
<hr/>	
<b>7. New Business</b>	
<hr/>	
<b>8. Correspondence</b>	

a. Letter to Algoma Ontario Health Team partner Board of Directors from Algoma Ontario Health Team (AOHT), regarding an Information session and discussion on November 9, 2023.	55
b. Letter to the Minister of Environment, Conservation and Parks from Sudbury & Districts Public Health regarding calls for expansion of outdoor air quality monitoring stations and the Air Quality Health Index across Northern Ontario.	56
c. Letter to Deputy Minister of Health and CMOH regarding voluntary mergers of boards of health dated October 13, 2023.	59

---

## 9. Items for Information

a. alPHa October 2023 InfoBreak	61
b. 2022 Annual Report for Renfrew County and District Health Unit	79

---

## 10. Addendum

---

## 11. In-Camera

---

## 12. Open Meeting

---

## 13. Resolutions Resulting From In-Camera

---

## 14. Announcements

- |                       |  |
|-----------------------|--|
| a. Next Meeting Dates |  |
|-----------------------|--|

---

## 15. Adjournment

## Board of Health Meeting

### AGENDA

October 25, 2023 at 5:00 pm

SSM Algoma Community Room | Video/Teleconference

#### **BOARD MEMBERS**

Sally Hagman - Chair  
Luc Morrisette - 1st Vice-Chair  
Deborah Graystone - 2nd Vice-Chair  
Julila Hemphill  
Donald McConnell  
Loretta O'Neill  
Sonia Tassone  
Suzanne Trivers  
Matthew Shoemaker  
Jody Wildman

#### **APH MEMBERS**

Dr. Jennifer Loo - Medical Officer of Health & CEO  
Dr. John Tuinema - Associate Medical Officer of Health & Director of Health Protection  
Rick Webb - Director of Corporate Services  
Kristy Harper - Director of Health Promotion & Chief  
Leo Vecchio - Manager of Communications  
Leslie Dunseath - Manager of Accounting Services  
Liliana Bressan - Manager of Effective Health Practice  
Tania Caputo - Board Secretary  
Trina Mount - Executive Assistant

#### **GUESTS**

Virginia Huber - Manager of Environmental Health

- |   |                         |
|---|-------------------------|
| <p><b>1.0 Meeting Called to Order</b></p> <ul style="list-style-type: none"> <li>a. Land Acknowledgment</li> <li>b. Declaration of Conflict of Interest</li> <li>c. Roll Call</li> </ul>  | <p><i>S. Hagman</i></p> |
| <p><b>2.0 Adoption of Agenda</b></p> <p style="background-color: #d3d3d3; padding: 2px;"><b>RESOLUTION</b></p> <p>THAT the Board of Health meeting agenda dated September 27, 2023 be approved as presented.</p>  | <p><i>S. Hagman</i></p> |
| <p><b>3.0 Delegations / Presentations</b></p> <ul style="list-style-type: none"> <li>a. Environmental Health - Program Overview</li> </ul>  | <p><i>V. Huber</i></p>  |
| <p><b>4.0 Adoption of Minutes of Previous Meeting</b></p> <p style="background-color: #d3d3d3; padding: 2px;"><b>RESOLUTION</b></p> <p>THAT the Board of Health meeting minutes dated September 27, 2023, be approved as presented.</p>   | <p><i>S. Hagman</i></p> |
| <p><b>5.0 Business Arising from Minutes</b></p> <ul style="list-style-type: none"> <li>a. Support of Bill 103 – Smoke-Free Ontario Amendment Act (Vaping is not for Kids)</li> </ul> <p style="background-color: #d3d3d3; padding: 2px;"><b>RESOLUTION</b></p>  | <p><i>S. Hagman</i></p> |
| <p><b>6.0 Reports to the Board</b></p> <ul style="list-style-type: none"> <li>a. <b>Medical Officer of Health and Chief Executive Officer Reports</b> <ul style="list-style-type: none"> <li>i. <b>MOH Report - October 25, 2023</b> <ul style="list-style-type: none"> <li>• Program Highlight – School Health &amp; ISPA Update</li> </ul> </li> </ul> </li> </ul> <p style="background-color: #d3d3d3; padding: 2px;"><b>RESOLUTION</b></p> <p>THAT the report of the Medical Officer of Health and CEO for October 25, 2023 be accepted as presented.</p> | <p><i>J. Loo</i></p>    |

6.0	<div>a. Finance and Audit</div> <div>i. Finance Committee Chair Report</div> <div>RESOLUTION</div> <div>THAT the Finance Committee Chair Report for October 18, 2023, be accepted as presented.</div>	L. Morrisette
	<div>ii. Unaudited Financial Statements ending August 31, 2023</div> <div>RESOLUTION</div> <div>THAT the Board of Health approves the Unaudited Financial Statements for the period ending August 31, 2023, as presented.</div>	L. Morrisette
	<div>iii. Briefing Note - Server Upgrades</div> <div>RESOLUTION</div> <div>THAT the Board of Health approve agency reserve funds be used to upgrade APH server infrastructure.</div>	L. Morrisette
	<div>iv. By-Law 06-01 Sewage Systems Part 8 of the Ontario Building Code Act</div> <div>RESOLUTION</div> <div>THAT the Board of Health approve <b>By-Law 06-01 Sewage Systems Part 8 of the Ontario Building Code Act</b>, as presented.</div>	L. Morrisette
7.0	New Business/General Business	S. Hagman
8.0	Correspondence	S. Hagman
	<div>a. Letter to Algoma Ontario Health Team partner Board of Directors from Algoma Ontario Health Team (AOHT), regarding an Information session and discussion on November 9, 2023.</div> <div>b. Letter to the Minister of Environment, Conservation and Parks from Sudbury &amp; Districts Public Health regarding calls for expansion of outdoor air quality monitoring stations and the Air Quality Health Index across Northern Ontario.</div> <div>c. Letter to Deputy Minister of Health and Chief Medical Officer of Health and Assistant Deputy Minister from Bords of Health and Medical Officers of Health for Algoma Public Health, North Bay Parry Sound District Health Unit, and Public Health Sudbury &amp; Districts regarding voluntary mergers of boards of health within Ontario's public health system dated October 13, 2023.</div>	
9.0	Items for Information	S. Hagman
	<div>a. alPHa Information Break - October 2023</div> <div>b. 2022 Annual Report for Renfrew County and District Health Unit</div>	
10.0	Addendum	S. Hagman

**11.0 In-Camera**

*S. Hagman*

For discussion of labour relations and employee negotiations, **matters about identifiable individuals, adoption of in-camera minutes**, security of the property of the board, litigation or potential litigation.

**RESOLUTION**

THAT the Board of Health go in-camera.

**12.0 Open Meeting**

*S. Hagman*

Resolutions resulting from in-camera meeting.

**13.0 Announcements / Next Committee Meetings:**

*S. Hagman*

**Finance and Audit Committee Meeting**

Wednesday November 15, 2023 - 5:00 pm

SSM Algoma Community Room | Video Conference

**Board of Health**

Wednesday, November 22, 2023 - 5:00 pm

SSM Algoma Community Room | Video Conference

**14.0 Evaluation**

*S. Hagman*

**15.0 Adjournment**

*S. Hagman*

**RESOLUTION**

THAT the Board of Health meeting adjourns.

# Environmental Health Program Overview

Virginia Huber, Manager of Environmental Health  
October 25, 2023



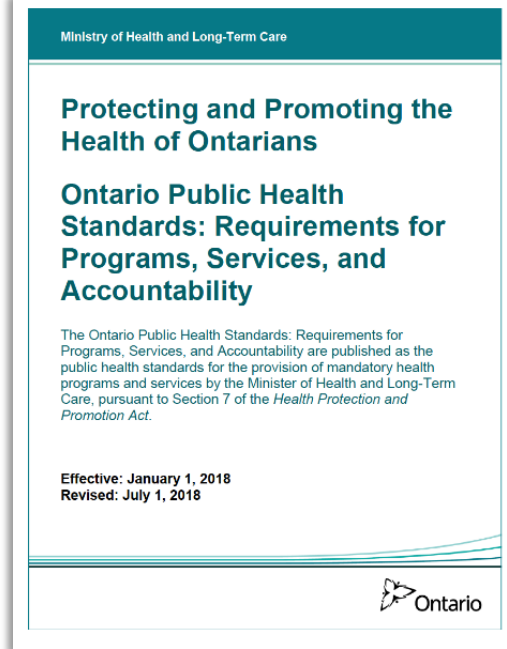
# Overview

- Ontario Public Health Standards & APH's Strategic Directions
- Program Overview
- COVID-19 Response
- Staffing Constraints
- Current Priorities & Future Directions
- Return on Investment





# Ontario Public Health Standards (OPHS)



## Food Safety

### Goal

To prevent or reduce the burden of food-borne illnesses.

## Safe Water

### Goals

- To prevent or reduce the burden of water-borne illnesses related to drinking water.
- To prevent or reduce the burden of water-borne illnesses and injuries related to recreational water use.

## Healthy Environments

### Goal

To reduce exposure to health hazards<sup>9</sup> and promote the development of healthy built and natural environments that support health and mitigate existing and emerging risks, including the impacts of a changing climate.

## Infectious and Communicable Diseases Prevention and Control

### Goal

To reduce the burden of communicable diseases and other infectious diseases of public health significance.<sup>12,13</sup>

# What guides the Environmental Health program?

- 14 protocols and 8 guidelines from the OPHS
- Health Promotion and Protection Act
- Smoke-Free Ontario Act
- Skin Cancer Prevention Act
- Healthy Menu Choices Act



Photo taken by PHI during inspection- Fly-in fishing lodges North Algoma

# APH Strategic Directions



Advance the priority public health needs of Algoma's diverse communities.



Improve the impact and effectiveness of APH programs.



Grow and celebrate an organizational culture of learning, innovation, and continuous improvement.

# Our Team

The Environmental Health program consists of:

- Public Health Inspectors (PHI)
- Environmental Assistants (EA)
- Practicum Students
- Environmental Health Students
- Clerical
- Health Promotion Specialist
- Environmental Health Manager



Photo taken by PHI during inspection. ACR North Algoma.

# Environmental Health Core Programs



## Health Promotion

<p>Food Safety Promotion</p> 	<p>Safe Food Handler Courses</p> 	<p>Community Awareness &amp; Education</p> 
<p>Disclosure of Inspection Results</p> 	<p>Drinking Water Sample Consults</p> 	<p>Owner/Operator Education and Training</p> 
<p>Setting Specific Training &amp; Education</p> 	<p>Engaging Municipalities in Healthy Environment Strategies</p> 	<p>Population Health Assessments</p> 

## Disease Prevention & Surveillance

<p>Tick Dragging, Submission &amp; Identification</p> 	<p>24/7 On-Call &amp; Response</p> 	<p>Supporting Food Recalls</p> 
<p>West Nile Testing</p> 	<p>Inspection, Investigation, Compliance &amp; Enforcement</p> 	<p>Risk Assessment, Data Collection &amp; Reporting</p> 
<p>Outbreak Management and Preparation</p> 	<p>Detection, Investigation, and Identification</p> 	<p>Management/Assessment of Potential Rabies Exposure</p> 



# Where have we been?

## Snapshot of Environmental Health work during COVID-19

- Redeployment during COVID-19 included:
  - Case and contact management
  - Complaint follow-up and investigation
  - Management of workplace outbreaks
  - Enforcing the Reopening Ontario Act (ROA)
- Current COVID-19 response:
  - Case and contact management in high-risk and congregate living centers



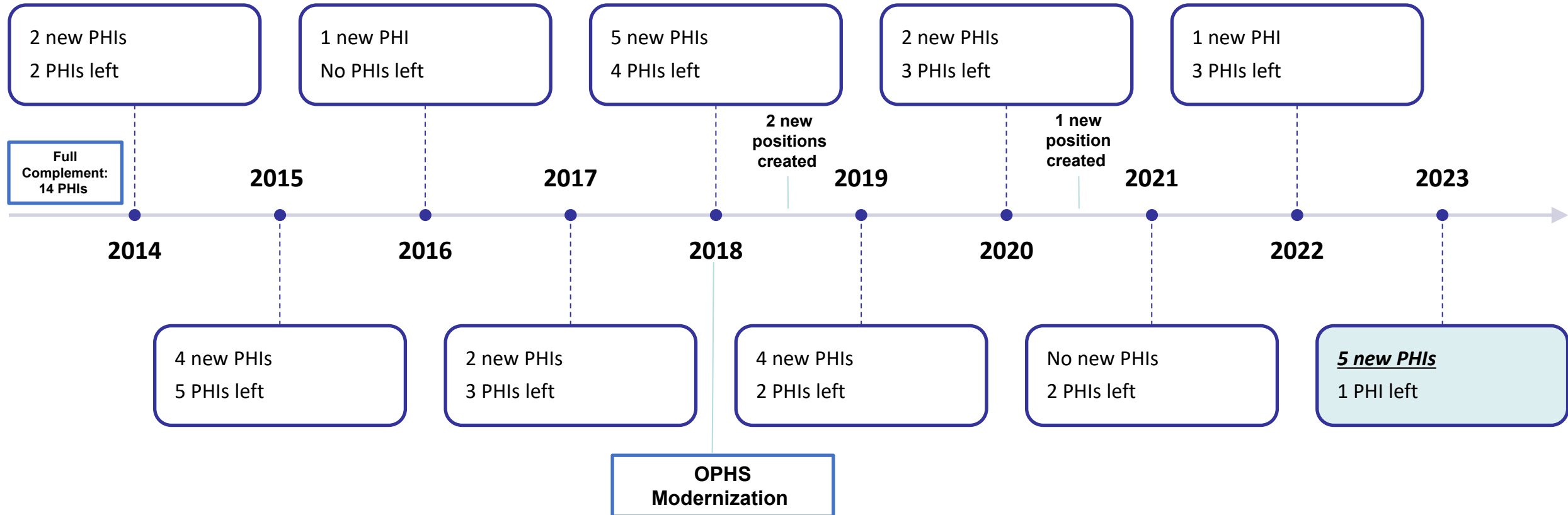
# PHI Workforce

- Province-wide shortage of PHIs has been identified
- Covid-19 pandemic heightened this shortage
- Additional staffing constraints unique to the north:
  - Proximity to family
  - Only two CIPHI-accredited universities in Southern Ontario
  - Household members unable to secure employment
  - Career change





# Recruitment and Retention of PHIs



Longest vacancy: 1075 days  
Turnover rate: 19.4%

# Environmental Health At Work



# What's happening in Algoma?

Environmental Health has successfully recruited permanent full-time PHI positions in all district offices.



## Elliot Lake

Provided safe food handler training to the public.



## Blind River

Provided safe food handler training to the Northshore Health Network.



## Sault Ste Marie

Showcased the PHI profession to local highschools.



## Wawa

Completed fly-in, boat-in, and drive-in lodge inspections within the past year.



# Current Priorities and Future Directions

- Recruiting and retaining PHIs despite the changing workforce
- Prioritizing the backlog of work  
High Risk → Low Risk
- Return to education and health promotion work within the OPHS



# Return on Investment:

## Environmental Health Supports Overall Health

- Environmental health ensures community members in Algoma have access to safe food, safe water, lowered risk of infections, and access to safe environments.
- Environmental health is involved in everyday life for all, including but not limited to:



The ability to eat in an inspected premise without fear of food-borne illnesses.



The ability to swim at a local pool without fear of getting sick.



The ability to get your hair cut without fear of infection.



The ability to send children to pre-school without fear of injury.





Photo taken by PHI during an inspection. Aubrey Falls Hwy 129.

# Questions?

Chi-Miigwech. Merci. Thank you.

# Briefing Note

**To:** The Board of Health for the District of Algoma Health Unit  
**From:** Hilary Cutler, Manager of Community Wellness  
**Date:** 10/25/2023  
**Re:** Support of Bill 103 – Smoke-Free Ontario Amendment Act (Vaping is not for Kids)

---

☒ For Information

☐ For Discussion

☒ For a Decision

---

**PURPOSE:**

Support of Bill 103 – Smoke-free Ontario Amendment Act (Vaping is not for Kids) which aligns with Algoma Public Health's (APH) role in addressing the Ontario Public Health Standards (OPHS)<sup>(1)</sup>.

**KEY MESSAGES:**

**Key Messages**

*Ontario Bill 103 - Smoke-Free Ontario Amendment Act (Vaping is not for Kids), 2023<sup>(2)</sup>*, aims to prevent vaping initiation and decrease vaping use by

- Prohibiting the promotion of vaping products
- Raising the minimum age for purchase to 21 years
- Prohibiting the sale of flavoured vaping products
- Limiting sales to specialty stores or approved locations
- Directing tax revenue to public education about the health risks of vaping
- Requiring an annual report on these activities

**Ontario Public Health Standards<sup>(1)</sup> addressed in this report:**

- Substance Use and Injury Prevention
- Chronic Disease Prevention and Well-Being
- School Health

**APH Strategic Directions<sup>(3)</sup> addressed in this report:**

Strategic Direction #2: Improve the impact and effectiveness of APH programs.

- a. Align programs to population health priorities and to the unique role of public health.
- b. Support agency-wide, integrated strategies for health.

**Background on Vaping Among Youth in Canada**

Canada currently has the highest youth vaping rates in the world<sup>(4)</sup>, with almost half of young adults (ages 20-24) and 29% of youth (ages 15 -19) having tried vaping with rates continuing to increase<sup>(4)</sup>. Recent results from the *Canadian Tobacco Alcohol and Drugs Survey* and *Canadian Tobacco and Nicotine Survey* reported that "past 30-day vaping" rates doubled among youth aged 15-19 years between 2017 (6%) and 2020 (14%)<sup>(5)</sup>. Rates of youth who vape have grown to 30.6% of grade 7-12 students in Northern Ontario (2018-19) having used electronic cigarettes at least once in the previous year, compared with 22.7% for the province<sup>(6)</sup>.

“Because vaping products are relatively new, their long-term health effects are still largely unknown. However, the literature increasingly suggests several short- and medium-term health risks, including vaping-related lung injuries, burns, and nicotine and cannabis use disorders”<sup>(7)</sup>. Nicotine alters adolescent brain development and can affect memory and concentration<sup>(8)</sup>, and has been linked to poor mental health outcomes, including worsening symptoms of depression and anxiety, as well as higher odds of depression<sup>(9)</sup>.

The impact of vaping also shapes the future habits of young users. Emerging evidence indicates that there is potential for vaping to be a gateway to tobacco and cannabis use<sup>(10-13)</sup>. Vaping products containing nicotine are used 84.4% of the time by young people<sup>(14)</sup>. In students in grades 9-12, the most common way of using cannabis (17%) is in an e-cigarette/vape<sup>(14)</sup>. Heart and Stroke Canada notes that “e-cigarette use can lead to continued nicotine dependence and perpetuate the dual use of both cigarettes and e-cigarettes”<sup>(15)</sup>.

Vaping is attractive to youth. A 2020-21 study found that the average age of initiation in Ontario was 15.78 years old<sup>(16)</sup>. The low cost of these products, as little as \$5, makes them particularly attractive to young people<sup>(17)</sup>. Evidence from tobacco policy indicates that youth are particularly sensitive to price,<sup>(18)</sup> and new research around vape taxation reports similar findings which indicates that price mechanisms have an important role in discouraging the use of vaping products by young people<sup>(17)</sup>.

There are more than 30 countries that have banned the sale of all e-cigarettes, and more who have banned all flavoured vaping products. Five Canadian provinces have already banned flavoured vaping products – the Northwest Territories, New Brunswick, Prince Edward Island, Nunavut, and Nova Scotia – with Quebec legislation to take effect on October 31, 2023<sup>(19)</sup>. **Overview of Bill 103, An Act to Amend the Smoke-Free Ontario Act, 2017**

*Bill 103, An Act to amend the Smoke-Free Ontario Act, 2017 with respect to activities related to vapour products (Vaping is not for Kids)* was introduced by MPP Frances Gelinas and carried at first reading on April 25, 2023<sup>(2)</sup>. The elements of the amendments in Bill 103 particularly address the impact of vaping on youth.

### ***Prohibit the promotion of vapour products***

In Canada, 74% of young people reported some vaping product ad exposure in the past 30 days.<sup>(20)</sup> Among those exposed to the ads, more than one-third found them appealing,<sup>(20)</sup> and more than one-third of youth recognized that vaping product ads target non-smokers (47%).<sup>(20)</sup>

Stores that sell cigarettes were the most common venue for vaping ad exposure in Canada, at 46%<sup>(20)</sup>.

### ***Raise the minimum age for purchase to 21***

There is substantial public support across Canada to increase the minimum age to purchase vapour products to 21<sup>(21)</sup>. Though we do not have data on minimum ages relating specifically to vaping, tobacco cigarette and alcohol research show that increasing the minimum age of purchase delays the onset of initiation and reduces underage consumption<sup>(21)</sup>.

In March 2020, Prince Edward Island became the first Canadian province or territory to implement a minimum age of 21 for the purchase of tobacco and vaping products<sup>(21)</sup>. They join the United States which has increased the minimum age to purchase tobacco or vaping products to 21 across the country<sup>(21)</sup>, and other countries intending to pass legislation or who already have legislation including Honduras, Philippines, and Palau<sup>(21)</sup>.



***Prohibit flavoured vaping products***

“Flavours that are attractive in name, description, advertising and actual sensory experience may appeal particularly to young people who may be susceptible to persuasive descriptions and flavouring names, and may also prefer sweet flavours due to more sensitive taste buds. Flavours have been central to youth use of e-cigarettes in the United States, often cited as a key motivational factor for use”<sup>(22)</sup>. A survey conducted by Smoke Free Nova Scotia, found that 95% of young people in Nova Scotia who vape said they prefer flavoured juices, and more than 48% said they would quit if flavours were banned<sup>(23)</sup>.

The 2020-2021 *Youth and Young Adults Vaping Project* reported that 92% of young people used a flavoured vaping product at initiation and 90% continued to vape flavoured products.<sup>(17)</sup> Furthermore, adolescents who use non-traditional flavors are more likely to continue vaping and taking more puffs per vaping occasion,<sup>(24)</sup> and so have increased health impacts and likelihood of nicotine addiction.

***Limit sales to specialty stores or approved locations***

As of 2021, grade 7-12 students found it easier to get e-cigarettes/vapes than tobacco cigarettes. They reported that it was “fairly easy” or “very easy” to get e-cigarettes/vapes (55.8%)<sup>(6)</sup>.

Limiting the number of locations to buy vaping products means that enforcement can concentrate on these locations. According to Public Health Ontario, 44% of adults support further restrictions on tobacco retail locations: 17% reported tobacco products should not be sold at all, and 27% reported tobacco should be sold in government-owned stores<sup>(25)</sup>.

***Direct tax revenue to public education about health risks of vaping***

“CATCH (Coordinated Approach to Child Health) My Breath Youth E-cigarette Prevention Program, which targeted youth 11-18, found that 86% of students were less likely to use e-cigarettes, 86% knew more about e-cigarettes, and 82% of students reported that they will look at e-cigarette ads differently because of the education they received”<sup>(26)</sup>. Education strategies of healthcare providers and community members on the harms of vaping is also well supported by the Canadian Pediatric Society<sup>(26)</sup>.

**Next Steps**

That the Board of Health for Algoma Public Health endorse proposed *Bill 103 - Smoke-Free Ontario Amendment Act (Vaping is not for Kids)*, 2023, which aims to prevent vaping initiation and decrease vaping use by banning flavoured vaping products, raising the minimum age for purchasing vaping products from 19 to 21 years, and prohibiting the promotion of vapor products. Further that this endorsement be shared with relevant stakeholders.

## References

1. Ontario Public Health Standards: Requirements for Programs, Services and Accountability. Ontario Ministry of Health, 2021. [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/protocols\\_guidelines/Ontario\\_Public\\_Health\\_Standards\\_2021.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Ontario_Public_Health_Standards_2021.pdf)
2. An Act to amend the Smoke Free Ontario Act, 2017 with respect to activities related to vapour products, (2023).
3. Strategic plan. Algoma Public Health, 2022. <https://www.algomapublichealth.com/about-us/strategic-plan/>
4. Canadian Tobacco and Nicotine Survey (CTNS): Summary of results for 2021. Statistics Canada, 2023. <https://www.canada.ca/en/health-canada/services/canadian-tobacco-nicotine-survey/2021-summary.html>
5. Canadian Tobacco and Nicotine Survey, 2022. Statistics Canada, 2022. <https://www150.statcan.gc.ca/n1/daily-quotidien/230911/dq230911a-eng.htm>
6. Boak A, Elton-marshall, T., & H.A. The well-being of Ontario students: Findings from the 2021 Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health, 2022
7. Chadi N, Vyver E, Belanger RE. Protecting children and adolescents against the risks of vaping. Paediatrics & Child Health. 2021;26(6):358-65.
8. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General Atlanta, GA: U.S. Department of Health and Human Services, 2016. <https://www.cdc.gov/tobacco/sgr/e-cigarettes/index.htm>
9. Becker TD, Arnold MK, Ro V, Martin L, Rice TR. Systematic review of electronic cigarette use (vaping) and mental health comorbidity among adolescents and young adults. Nicotine and Tobacco Research. 2021;23(3):415-25.
10. Hammond D, Reid JL, Cole AG, Leatherdale ST. Electronic cigarette use and smoking initiation among youth: a longitudinal cohort study. CMAJ. 2017;189(43):E1328-E36.
11. Soneji S, Barrington-Trimis JL, Wills TA, Leventhal AM, Unger JB, Gibson LA, et al. Association between initial use of e-cigarettes and subsequent cigarette smoking among adolescents and young adults: a systematic review and meta-analysis. JAMA pediatrics. 2017;171(8):788-97.
12. Chadi N, Schroeder R, Jensen JW, Levy S. Association between electronic cigarette use and marijuana use among adolescents and young adults: a systematic review and meta-analysis. JAMA pediatrics. 2019;173(10):e192574-e.
13. Sanchez S, Kaufman P, Pelletier H, Baskerville B, Feng P, O'Connor S, et al. Is vaping cessation like smoking cessation? A qualitative study exploring the responses of youth and young adults who vape e-cigarettes. Addictive Behaviors. 2021;113:106687.
14. Boak A, Elton-Marshall T. The well-being of Ontario students: Findings from the 2021 Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health, 2022. <https://www.camh.ca/-/media/files/pdf---osduhs/2021-osduhs-report-pdf.pdf>
15. Position Statement: Protecting youth from the vaping crisis. Heart and Stroke Canada, 2023. <https://www.heartandstroke.ca/-/media/pdf-files/canada/2022-policy-statements/vaping-crisis-position-statement-2022.pdf?rev=ff18662847d2415e9aa39e3f13859fd7>
16. Summary of results for the Canadian Student Tobacco, Alcohol and Drugs Survey 2018-19: Health Canada; 2020. <https://www.canada.ca/en/health-canada/services/canadian-student-tobacco-alcohol-drugs-survey/2018-2019-summary.html>.
17. Al-Hamdani M, Hopkins D, Davidson M. The 2020-2021 Youth and Young Adult Vaping Project. 2021. [www.heartandstroke.ca/-/media/pdf-files/getinvolved/yyavfull-report-final-eng-24-3-2021.ashx](http://www.heartandstroke.ca/-/media/pdf-files/getinvolved/yyavfull-report-final-eng-24-3-2021.ashx)

18. Bader P, Boisclair D, Ferrence R. Effects of tobacco taxation and pricing on smoking behavior in high risk populations: a knowledge synthesis. *International journal of environmental research and public health*. 2011;8(11):4118-39.
19. Health Canada's vaping flavour ban is still missing in action.: Physicians for a Smoke-free Canada; 2023. <https://smoke-free.ca/health-canadas-vaping-flavour-ban-is-still-missing-in-action/>.
20. Cho YJ, Thrasher JF, Reid JL, Hitchman S, Hammond D. Youth self-reported exposure to and perceptions of vaping advertisements: Findings from the 2017 International Tobacco Control Youth Tobacco and Vaping Survey. *Preventive medicine*. 2019;126:105775.
21. Taylor E, O'Connor S, Schwartz R. E-Cigarette Minimum Age: Theory Evidence and Regulatory Policy. Ontario Tobacco Research Network. <https://www.otru.org/wp-content/uploads/2021/09/minimum-age-april-2021-FINAL.pdf>
22. Notley C, Gentry S, Cox S, Dockrell M, Havill M, Attwood AS, et al. Youth use of e-liquid flavours—a systematic review exploring patterns of use of e-liquid flavours and associations with continued vaping, tobacco smoking uptake or cessation. *Addiction (Abingdon, England)*. 2022;117(5):1258-72.
23. Province Bans Sales of Flavoured E-Cigarettes, Commits to Legislation [Internet]. Nova Scotia Health and Wellness; 2019. <https://novascotia.ca/news/release/?id=20191205001>
24. Leventhal AM, Goldenson NI, Cho J, Kirkpatrick MG, McConnell RS, Stone MD, et al. Flavored e-cigarette use and progression of vaping in adolescents. *Pediatrics*. 2019;144(5).
25. Ontario Tobacco Monitoring Report 2018: Surveillance Report & Environmental Scan. Public Health Ontario, 2019. <https://www.publichealthontario.ca/-/media/documents/t/2019/tobacco-report-2018.pdf>
26. O'Connor S, Pelletier H, Bayoumy D, Schwartz R. Interventions to Prevent Harms from Vaping: Report for the Central East TCAN. Ontario Tobacco Research Unit, 2019. [https://www.otru.org/wp-content/uploads/2019/05/special\\_vape\\_interventions.pdf](https://www.otru.org/wp-content/uploads/2019/05/special_vape_interventions.pdf)

**CONTACT:**

Hilary Cutler, Manager of Community Wellness

<b>Date: October 25, 2023</b>	<b>Resolution No: 2023-</b>
<b>Moved:</b>	<b>Seconded:</b>
<b>Subject:</b> Support for Bill 103 to amend the <i>Smoke-Free Ontario Amendment Act (Vaping is not for Kids), 2023</i>	
<p><b>Whereas</b> Canada currently has the highest youth vaping rates in the world<sup>(1)</sup>, with almost half of young adults (ages 20-24) and 29% of youth (ages 15 -19) having tried vaping.<sup>(1)</sup> Rates of youth who vape have grown to 30.6% of grade 7-12 students in Northern Ontario (2018-19), who reporting having used electronic cigarettes at least once in the previous year, compared with 22.7% for the province;<sup>(2)</sup> and,</p> <p><b>Whereas</b>, there are more than 30 countries that have banned the sale of all e-cigarettes, and more who have banned all flavoured vaping products (recently Australia). Five Canadian provinces have already banned flavoured vaping products -- the Northwest Territories, New Brunswick, Prince Edward Island, Nunavut, and Nova Scotia – with Quebec legislation to take effect on October 31, 2023.<sup>(3)</sup>; and</p> <p><b>Whereas</b> vaping is increasingly linked to health harms including nicotine addiction, lung injury, burns, cognitive problems, poor mental health and even suicide<sup>(4-6)</sup>; and</p> <p><b>Whereas</b> vaping (e-cigarettes) is targeted to youth in advertising and with the addition of novel and pleasurable flavours. More than 90% of young people used a flavoured vaping product at initiation and continued to vape flavoured products.<sup>(7)</sup> These adolescents are more likely to continue vaping and taking more puffs per vaping occasion.<sup>(8)</sup> More than 48 per cent said they would quit if flavours were banned<sup>(9)</sup>; and</p> <p><b>Whereas</b>, there is substantial public support across Canada to increase the minimum age of purchasing vapour products to 21<sup>(10)</sup>. Tobacco cigarette and alcohol research show that increasing the minimum age of purchase delays the onset of initiation and reduces underage consumption<sup>(10)</sup>; and</p> <p><b>Whereas</b>, education strategies of healthcare providers and community members on the harms of vaping are supported by the Canadian Paediatric Society.<sup>(11)</sup> The “CATCH My Breath Youth E-cigarette Prevention Program” found that 82% of students reported that they will look at e-cigarette ads differently because of the education they received<sup>(12)</sup>; and</p> <p><b>Whereas</b>, to support Bill 103 will align Algoma Public Health with the Canadian Public Health Agency’s tobacco control recommendations<sup>(13)</sup>, the Canadian Paediatric Society<sup>(4)</sup>, the Canadian Lung Association<sup>(14)</sup>, Heart and Stroke Canada<sup>(15)</sup> and more; and</p> <p><b>Whereas</b> the Ontario Public Health Standards for Substance Use and Injury Prevention and School Health are supported by the amendments in <i>Bill 103 to the Smoke Free Ontario Act</i>; and</p> <p><b>Therefore</b>, let it be resolved that the Board of Health endorse proposed <i>Bill 103 - Smoke-Free Ontario Amendment Act (Vaping is not for Kids), 2023</i>, which aims to prevent vaping initiation and decrease vaping use by banning flavoured vaping products, raising the minimum age for purchasing vaping products from 19 to 21 years, and prohibiting the promotion of vapor products.</p> <p><b>Be it further resolved</b> that Further that this endorsement be shared with relevant stakeholders.</p>	

1. Canadian Tobacco and Nicotine Survey (CTNS): Summary of results for 2021. Statistics Canada, 2023.
2. Boak A, Elton-marshall, T., & H.A. The well-being of Ontario students: Findings from the 2021 Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health, 2022.
3. Health Canada's vaping flavour ban is still missing in action.: Physicians for a Smoke-free Canada; 2023. Available from: <https://smoke-free.ca/health-canadas-vaping-flavour-ban-is-still-missing-in-action/>.
4. Chadi N, Vyver E, Belanger RE. Protecting children and adolescents against the risks of vaping. Paediatrics & Child Health. 2021;26(6):358-65.
5. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General Atlanta, GA: U.S. Department of Health and Human Services, 2016.
6. Becker TD, Arnold MK, Ro V, Martin L, Rice TR. Systematic review of electronic cigarette use (vaping) and mental health comorbidity among adolescents and young adults. Nicotine and Tobacco Research. 2021;23(3):415-25.
7. Al-Hamdani M, Hopkins D, Davidson M. The 2020-2021 Youth and Young Adult Vaping Project. 2021.
8. Leventhal AM, Goldenson NI, Cho J, Kirkpatrick MG, McConnell RS, Stone MD, et al. Flavored e-cigarette use and progression of vaping in adolescents. Pediatrics. 2019;144(5).
9. Province Bans Sales of Flavoured E-Cigarettes, Commits to Legislation [Internet]. Nova Scotia Health and Wellness; 2019. Available from: <https://novascotia.ca/news/release/?id=20191205001>
10. Taylor E, O'Connor S, Schwartz R. E-Cigarette Minimum Age: Theory Evidence and Regulatory Policy. Ontario Tobacco Research Network.
11. Chadi N, Schroeder R, Jensen JW, Levy S. Association between electronic cigarette use and marijuana use among adolescents and young adults: a systematic review and meta-analysis. JAMA pediatrics. 2019;173(10):e192574-e.
12. O'Connor S, Pelletier H, Bayoumy D, Schwartz R. Interventions to Prevent Harms from Vaping: Report for the Central East TCAN. Ontario Tobacco Research Unit, 2019.
13. Tobacco and vaping use in Canada: moving forward. Canadian Public Health Association 2021.
14. Position statement on vaping: Canadian Lung Association; n.d. Available from: <https://www.lung.ca/position-statement-vaping>.
15. Position Statement: Protecting youth from the vaping crisis. Heart and Stroke Canada, 2023.

**CARRIED: Chair's Signature** \_\_\_\_\_

<input type="checkbox"/> Sally Hagman	<input type="checkbox"/> Julila Hemphill	<input type="checkbox"/> Matthew Shoemaker	<input type="checkbox"/> Suzanne Trivers
<input type="checkbox"/> Luc Morrisette	<input type="checkbox"/> Loretta O'Neill	<input type="checkbox"/> Sonia Tassone	<input type="checkbox"/> Jody Wildman
<input type="checkbox"/> Deborah Graystone	<input type="checkbox"/> Don McConnell		



*Algoma*  
**PUBLIC HEALTH**  
Santé publique Algoma

October 25, 2023

Report of the

# Medical Officer of Health / CEO

Prepared by:  
Dr. Jennifer Loo and the  
Leadership Team

Presented to:  
Algoma Public Health Board of Health

## TABLE OF CONTENTS

**APH At-a-Glance and Our Partnerships**

Page 2

**Program Highlight – School Health**

Pages 3-6

## APH AT-A-GLANCE

The weeks leading into October have been full of respiratory season preparedness and response activities. As cases and outbreaks of COVID-19 and other respiratory viruses begin to rise once again in our communities and health facilities, APH teams have ramped up outbreak management supports for our long term care facilities and retirement homes, and begun district-wide distribution of influenza and COVID-19 vaccines to our primary care, hospital and other health facility partners, as well as direct administration of vaccines at APH immunization clinics. As highlighted in [APH's recent news release](#), vaccines are now available for high risk groups, and will be made available to the general public later this month. High risk groups include people aged 65 years and older, residents of congregate living settings for seniors, pregnant people, children 6 months to 4 years, people who identify as First Nation, Inuit or Metis and their household members, people over 6 months of age with underlying health conditions, members of racialized and other equity deserving communities, health care workers, and first responders. All APH offices also have COVID-19 rapid antigen test kits available to the general public, while provincial supplies last.

This fall, the province continues to advance previously announced changes to the local public health sector. The Ministry of Health has established a Voluntary Merger Key Informant Group, to provide advice on the development of the voluntary merger process. Membership comprises public health sector leaders from a cross-section of local public health agencies and associations, including Board of Health members, CEOs, Medical Officers of Health, municipal representatives, the Association of Local Public Health Agencies (aLPHa) and the Association of Municipalities of Ontario (AMO). Representatives from northern Ontario are included. At the time of writing, it is anticipated that the Ministry will provide further details on the voluntary merger process at the end of October. In the meantime, as per the direction in the resolutions of our respective BOHs, the medical officers of health and board chairs of Algoma Public Health, Public Health Sudbury & Districts, and North Bay Parry Sound District Health Unit have had an initial meeting to engage in exploratory dialogue regarding this issue, and have extended an invitation to Chief Medical Officer of Health, Dr. Kieran Moore, and Deputy Ministry, Dr. Catherine Zahn, to an in-person meeting in the north east to discuss the subject of voluntary mergers of boards of health within Ontario's public health system.



## PROGRAM HIGHLIGHT – SCHOOL HEALTH

**From:** Kristy Harper, Director of Health Promotion and Chief Nursing Officer

### **Ontario Public Health Standard (OPHS) <sup>(1)</sup> requirements addressed in this report include**

- **Goal of School Health:** Achieve optimal health of school-aged children and youth through partnership and collaboration with school boards and schools.
  - **Requirement 1:** The board of health shall collect and analyze relevant data to monitor trends over time, emerging trends, priorities, and health inequities related to the health of school-aged children and youth and report and disseminate the data and information in accordance with the Population Health Assessment and Surveillance Protocol, 2018 (or as current).
  - **Requirement 3:** The board of health shall develop and implement a program of public health interventions using a comprehensive health promotion approach to improve the health of school-aged children and youth.
  - **Requirement 4:** The board of health shall offer support to school boards and schools, in accordance with the School Health Guideline, 2018<sup>(2)</sup> (or as current), to assist with the implementation of health-related curricula and health needs in schools, based on need and considering, but not limited to the 14 topic areas provided.
  - **Requirement 9:** The board of health shall work with school boards and schools to identify opportunities to improve public knowledge and confidence in immunization for school-aged children.
  - **Requirement 10:** The board of health shall promote and provide provincially funded immunization programs to eligible students in the health unit through school-based clinics.

### **2021-2025 Strategic Priorities addressed in this report<sup>(3)</sup>**

- [x] Advance the priority public health needs of Algoma's diverse communities.
- [x] Improve the impact and effectiveness of Algoma Public Health programs.
- [ ] Grow and celebrate an organizational culture of learning, innovation, and continuous improvement.

### **Key Messages**

- A focus of the School Health program in 2022/23 was immunization catch-up for vaccines missed during the COVID-19 pandemic. Almost 5,900 vaccines were given at 110 school-based clinics throughout the 2022/23 school year.
- The School Health program continues to provide support to school community partners to achieve comprehensive school health. School settings are ideal locations for effective health promotion among school-aged children and youth, including mental health promotion and the prevention of substance-related harms.

### **Overview of the School Health Program**

Creating healthy settings, including schools, is central to the effectiveness of health promotion<sup>(4)</sup>. This work is framed by the Foundations for a Healthy School<sup>(5)</sup> which includes: 1) curriculum, teaching & learning; 2) school & classroom leadership; 3) student engagement; 4) social & physical environments; and 5) home, school & community partnerships. Additionally, we offer vaccines through the grade 7 and high school immunization programs. School Health program staff consist of public health nurses, a registered practical nurse, a registered dietitian, clerical, and a health promotion specialist. We

collaborate with other APH programs such as Immunization, Oral Health, Environmental Health, Community Wellness, Infectious Diseases, and Healthy Growth and Development.

### **School Health Focus for 2022/23 – Immunization in Schools Across the Algoma District**

During the COVID-19 pandemic, school-based immunization clinics were not held due to health protection measures in place and prioritization of the COVID-19 response. This created a backlog of students who did not receive vaccines typically administered in the school setting.

COVID-19 School Focused Nursing funding from the Ministry of Health continued through the 2022/23 school year which helped to provide additional support for routine and catch-up immunization clinics for children and youth who missed out on clinics during the pandemic. Between September 2022 and June 2023, the School Health Program, in partnership with the Immunization program, provided:

- **97** grade 7 clinics (including catch-up for grades 8 and 9), administering:
  - Men-C-ACYW-135: **1,199** doses (1-dose to protect against Meningococcal disease).
  - Hep B: **2,061** doses (2-dose series to protect against Hepatitis B).
  - HPV-9: **2,243** doses (2-dose series to protect against 9 strains of Human Papillomavirus).
- **13** high school clinics, administering:
  - Tdap: **369** doses (a booster dose to protect against Tetanus, Diphtheria, and Pertussis).

Implementing a school-based immunization clinic involves many steps, including preparing consents, letters, schedules, and clinic logistics; carefully assessing vaccine records and answering questions prior to clinics; and completing quality assessment and data collection after clinics.

In addition to the school-based clinics, APH's immunization team has been busy administering catch-up vaccines to school-aged children at APH clinics, and following up with families district wide to ensure updated immunization records are submitted to APH. APH continues to promote the importance of catching up with immunizations through messaging on APH website, social media, and letters to students and families.

### **2022/23 Health Promotion Activities**

The School Health program was also able to support school communities with comprehensive school health where possible, including:

- Continued relationship building with school communities (e.g., meeting with school boards, regular communication with and visits to schools, engaging with parents and students at school events).
- Maintenance of an APH resource library and external support toolkit for educators.
- Delivery of the Northern Fruit and Vegetable Program, which provides students at all elementary schools with weekly servings of a variety of fruits and vegetables from November-June.
- Curriculum support and public health nurse chats for priority topics such as vaping and healthy sexuality.
- Resource guides to support student leaders in school-wide health promotion initiatives.
- Presenting at and attending school events such as the Algoma District School Board Student Senate event, Professional Development days, and Parent Involvement Committee events.
- Attending Welcome to Kindergarten events to provide information about immunizations, nutrition, and other topics.

## **The State of Youth Mental Health, Wellness, and Substance Use in Algoma and Ontario**

The health promotion work of the School Health program is guided by relevant data on the health of school-aged children and youth. This context has led to the prioritization of mental health and wellness, substance use prevention, healthy relationships, and the related risk and protective factors.

- 19.2% of Algoma youth aged 12-17 years old rated their state of mental health as 'fair or poor', compared to 13.1% of Ontario youth<sup>(6)</sup>.
- Algoma has a higher burden of illness from intentional self-harm compared to Northeast region and Ontario. Youth and young adults are more likely to be hospitalized for intentional self-harm<sup>(7)</sup>.
- Ontario students in Grade 11 & 12 had higher prevalence of e-cigarettes/vape use (27.7%), compared to 12.6% of students in Grade 9 & 10<sup>(8)</sup>.
- 27.2% of Ontario students grade 9 to 12 believed it was safer to drive under the influence of cannabis than alcohol and 23.7% were unsure which was safer<sup>(8)</sup>. Since commercialization, cannabis-involved traffic injury emergency department visits, for all ages, increased by 245%<sup>(9)</sup>.

## **A Return to a Comprehensive School Health Approach for 2023/24**

This school year we are continuing the health promotion activities listed above, as well as:

- Working together with schools to determine shared goals by using data, consultation, and collaboration.
- Updating and sharing the School Health Resource guide, with curriculum support resources on priority health topics such as substance use prevention and healthy sexuality.
- Providing immunization information to grade 7 students and their families to support vaccine confidence.
- Implementing a new nutrition initiative called "Rainbow Plate" as part of the Northern Fruit and Vegetable Program.
- Exploring evidence informed mental health and wellbeing, healthy relationships, and substance use prevention initiatives and opportunities for local implementation.
- Sharing harm reduction and substance use prevention resources and supporting initiatives such as Safe Grad and Get Home Safe, which are education-based initiatives that help foster informed decision making related to substance use and associated risks (e.g., impaired driving).
- Collaborating with other APH programs on shared priorities including mental health and wellbeing and healthy sexuality.
- Supporting the Immunization program in the initiatives related to the Immunization of School Pupil's Act, as well as in the planning and delivery of school-based immunization clinics.

The work of the School Health program aligns with the vision, mission, values, and strategic directions of APH and is vital to the health and well-being of Algoma's school-aged children and youth.

## **References**

1. Ontario Public Health Standards: Requirements for Programs, Services and Accountability. Ontario Ministry of Health, 2021. [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/protocols\\_guide\\_lines/Ontario\\_Public\\_Health\\_Standards\\_2021.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guide_lines/Ontario_Public_Health_Standards_2021.pdf)
2. School Health Guideline, 2018. Ontario Ministry of Health and Long-term Care, 2018. [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/protocols\\_guide\\_lines/School\\_Health\\_Guideline\\_2018.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guide_lines/School_Health_Guideline_2018.pdf)
3. Strategic plan. Algoma Public Health, 2022. <https://www.algomapublichealth.com/about-us/strategic-plan/>

4. Focus on: Foundations of Health Promotion. Public Health Ontario, 2023. <https://www.publichealthontario.ca/-/media/Documents/F/2023/focus-on-foundations-health-promotion.pdf>
5. Foundations for a healthy school: a companion resource to the K-12 school effectiveness framework. Ontario Ministry of Education, 2022. <https://www.ontario.ca/page/foundations-healthy-school-companion-resource-k-12-school-effectiveness-framework>
6. Canadian Health Survey on Children and Youth. SAS Visual Analytics Hub. [Share file]. In press 2019.
7. Emergency department visits for intentional self-harm age-standardized rate (both sexes 2021) Public Health Ontario; 2021. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Injuries-Data/Injury-ER-Visits>.
8. Boak A, Elton-Marshall T. The well-being of Ontario students: Findings from the 2021 Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health, 2022. <https://www.camh.ca/-/media/files/pdf---osduhs/2021-osduhs-report-pdf.pdf>
9. Myran DT, Gaudreault A, Pugliese M, Manuel DG, Tanuseputro P. Cannabis-involved traffic injury emergency department visits after cannabis legalization and commercialization. JAMA network open. 2023;6(9):e2331551-e.

## Chair Report

### Finance and Audit Committee meeting - October 18, 2023

The Finance and Audit Committee continues to support and provide direction to management in developing the 2024 budget. While a status quo scenario would lead to a project \$1.6 million deficit, a number of options were reviewed, and it is the intent and direction of the committee that APH management present a balanced budget for board approval in November. Also, as detailed in the respective briefing note and by-law revision provided in today's Board of Health agenda package, the Finance and Audit Committee is recommending board approval of the use of APH reserve funds to upgrade APH server infrastructure, as well as the approval of increases to sewage system permit application fees.

Luc Morrisette

Finance and Audit Committee Chair

**Algoma Public Health  
(Unaudited) Financial Statements      August 31, 2023**

<b><u>Index</u></b>	<b><u>Page</u></b>
Statement of Operations	1
Statement of Revenues - Public Health	2
Statement of Expenses - Public Health	3
Notes to the Financial Statements	4-6
Statement of Financial Position	7

**Algoma Public Health**  
**Statement of Operations**  
**August 2023**  
(Unaudited)

	Actual YTD 2023	Budget YTD 2023	Variance Act. to Bgt. 2023	Annual Budget 2023	Variance % Act. to Bgt. 2023	YTD Actual/ YTD Budget 2023
<b>Public Health Programs (Calendar)</b>						
<b>Revenue</b>						
Municipal Levy - Public Health	\$ 3,141,913	\$ 3,141,912	\$ 1	\$ 4,189,216	0%	100%
Provincial Grants - Cost Shared Funding	5,863,473	5,863,467	6	8,861,200	0%	100%
Provincial Grants - Public Health 100% Prov. Funded	1,447,191	1,458,667	(11,475)	3,363,439	-1%	99%
Provincial Grants - Mitigation Funding	691,870	691,867	3	1,037,800	0%	100%
Fees, other grants and recovery of expenditures	321,150	323,256	(2,106)	452,384	-1%	99%
<b>Total Public Health Revenue</b>	<b>\$ 11,465,597</b>	<b>\$ 11,479,168</b>	<b>\$ (13,571)</b>	<b>\$ 17,904,039</b>	<b>0%</b>	<b>100%</b>
<b>Expenditures</b>						
Public Health Cost Shared	\$ 10,754,693	\$ 10,484,127	\$ (270,566)	\$ 15,618,691	3%	103%
Public Health 100% Prov. Funded Programs	1,622,534	1,523,566	(98,968)	2,285,349	6%	106%
<b>Total Public Health Programs Expenditures</b>	<b>\$ 12,377,226</b>	<b>\$ 12,007,693</b>	<b>\$ (369,534)</b>	<b>\$ 17,904,040</b>	<b>3%</b>	<b>103%</b>
<b>Total Rev. over Exp. Public Health</b>	<b>\$ (911,629)</b>	<b>\$ (528,525)</b>	<b>\$ (383,105)</b>	<b>\$ 0</b>		

**Healthy Babies Healthy Children (Fiscal)**

Provincial Grants and Recoveries	\$ 445,011	445,005	6	1,068,011	0%	100%
Expenditures	445,852	446,466	614	1,068,011	0%	100%
<b>Excess of Rev. over Exp.</b>	<b>(841)</b>	<b>(1,461)</b>	<b>620</b>	<b>(0)</b>		

**Public Health Programs (Fiscal)**

Provincial Grants and Recoveries	\$ 236,085	236,100	(15)	389,100	0%	100%
Expenditures	392,921	200,000	(192,921)	389,100	96%	196%
<b>Excess of Rev. over Fiscal Funded</b>	<b>(156,836)</b>	<b>36,100</b>	<b>(192,936)</b>	<b>-</b>		

**Fiscal Programs**

<b>Revenue</b>						
Provincial Grants - Community Health	\$ 92,565	\$ 92,564	\$ 1	\$ 262,153	0%	100%
Municipal, Federal, and Other Funding	57,222	57,224	(2)	114,447	0%	100%
<b>Total Community Health Revenue</b>	<b>\$ 149,787</b>	<b>\$ 149,787</b>	<b>\$ (0)</b>	<b>\$ 376,600</b>	<b>0%</b>	<b>100%</b>
<b>Expenditures</b>						
Brighter Futures for Children	31,835	47,686	15,851	114,447	-33%	67%
Nurse Practitioner	68,863	67,564	(1,299)	162,153	2%	102%
Stay on Your Feet	40,184	41,667	1,483	100,000	-4%	96%
<b>Total Fiscal Community Health Programs</b>	<b>\$ 140,882</b>	<b>\$ 156,917</b>	<b>\$ 16,034</b>	<b>\$ 376,600</b>	<b>-10%</b>	<b>90%</b>
<b>Total Rev. over Exp. Fiscal Community Health</b>	<b>\$ 8,905</b>	<b>\$ (7,129)</b>	<b>\$ 16,034</b>	<b>\$ (0)</b>		

Explanations will be provided for variances of 15% and \$15,000 occurring in the first 6 months  
and variances of 10% and \$10,000 occurring in the final 6 months

**Algoma Public Health  
Revenue Statement**

For Eight Months Ending August 31, 2023

(Unaudited)

	Actual YTD 2023	Budget YTD 2023	Variance Bgt. to Act. 2023	Annual Budget 2023	Variance % Act. to Bgt. 2023	YTD Actual/ Annual Budget 2023	Comparison Prior Year:		
							YTD Actual 2022	YTD BGT 2022	Variance 2022
Levies Sault Ste Marie	2,185,241	2,185,241	0	2,913,655	0%	75%	2,213,793	2,213,793	0
Levies District	956,672	956,671	1	1,275,561	0%	75%	928,119	928,119	0
<b>Total Levies</b>	<b>3,141,913</b>	<b>3,141,912</b>	<b>1</b>	<b>4,189,216</b>	<b>0%</b>	<b>75%</b>	<b>3,141,912</b>	<b>3,141,912</b>	<b>0</b>
MOH Public Health Funding	5,863,473	5,863,467	6	8,861,200	0%	66%	5,841,695	5,841,692	3
<b>Total Public Health Cost Shared Funding</b>	<b>5,863,473</b>	<b>5,863,467</b>	<b>6</b>	<b>8,861,200</b>	<b>0%</b>	<b>66%</b>	<b>5,841,695</b>	<b>5,841,692</b>	<b>3</b>
MOH Funding - MOH / AMOH Top Up	121,680	126,200	(4,520)	189,300	-4%	64%	121,055	126,200	(5,145)
MOH Funding Northern Ontario Fruits & Veg.	78,270	78,267	3	117,400	0%	67%	78,270	78,267	3
MOH Funding Unorganized	353,600	353,600	0	530,400	0%	67%	353,600	353,600	0
MOH Senior Dental	835,265	835,267	(2)	1,350,250	0%	62%	696,515	727,628	(31,113)
MOH Funding Indigenous Communities	65,330	65,333	(3)	98,000	0%	67%	65,330	65,333	(3)
One Time Funding (Pandemic Pay)	0	0	0	0	#DIV/0!	0%	0	0	0
OTF COVID-19 Extraordinary Costs	(6,954)	0	(6,954)	1,078,089	#DIV/0!	-1%	1,466,646	1,473,600	(6,954)
<b>Total Public Health 100% Prov. Funded</b>	<b>1,447,191</b>	<b>1,458,667</b>	<b>(11,475)</b>	<b>3,363,439</b>	<b>-1%</b>	<b>43%</b>	<b>2,781,416</b>	<b>2,824,628</b>	<b>(43,212)</b>
<b>Total Public Health Mitigation Funding</b>	<b>691,870</b>	<b>691,867</b>	<b>3</b>	<b>1,037,800</b>	<b>0%</b>	<b>67%</b>	<b>674,571</b>	<b>691,864</b>	<b>(17,293)</b>
Recoveries from Programs	8,111	26,667	(18,556)	10,000	-70%	81%	(27,803)	24,117	(51,920)
Program Fees	26,634	39,733	(13,099)	79,600	-33%	33%	40,049	34,419	5,630
Land Control Fees	150,000	165,000	(15,000)	225,000	-9%	67%	182,195	130,000	52,195
Program Fees Immunization	2,777	60,000	(57,223)	50,000	-95%	6%	13,337	33,328	(19,991)
HPV Vaccine Program	9,996	0	9,996	9,500	#DIV/0!	105%	0	0	0
Influenza Program	730	0	730	23,500	#DIV/0!	3%	0	0	0
Meningococcal C Program	1,479	0	1,479	7,000	#DIV/0!	21%	0	0	0
Interest Revenue	121,425	21,856	99,569	32,784	456%	370%	28,539	13,336	15,203
Other Revenues	0	10,000	(10,000)	15,000	-100%	0%	12,000	4,667	7,333
<b>Total Fees and Recoveries</b>	<b>321,152</b>	<b>323,256</b>	<b>(2,104)</b>	<b>452,384</b>	<b>-1%</b>	<b>71%</b>	<b>248,317</b>	<b>239,866</b>	<b>8,451</b>
<b>Total Public Health Revenue Annual</b>	<b>11,465,600</b>	<b>11,479,168</b>	<b>(13,568)</b>	<b>17,904,039</b>	<b>0%</b>	<b>64%</b>	<b>12,687,911</b>	<b>12,739,962</b>	<b>(52,051)</b>
<b>Public Health Fiscal April 2023 - March 2024</b>									
Infection Prevention and Control Hub	0	0	0	0	#DIV/0!	0%			
School Nurses Initiative	175,000	175,000	0	175,000	0%	100%			
Needle Syringe Program	0	0	0	20,300	#DIV/0!	0%			
New Purpose-Built Vaccine Fridge	0	0	0	11,100	#DIV/0!	0%			
PHI Practicum Program	0	0	0	30,000	#DIV/0!	0%			
Security System Upgrades	0	0	0	91,600	#DIV/0!	0%			
Upgrade Network Switches	61,085	61,100	(15)	61,100	0%	100%			
<b>Total Provincial Grants Fiscal</b>	<b>236,085</b>	<b>236,100</b>	<b>(15)</b>	<b>389,100</b>	<b>0%</b>	<b>61%</b>	<b>0</b>	<b>0</b>	<b>0</b>



**Algoma Public Health**  
**Expense Statement- Public Health**  
For Eight Months Ending August 31, 2023  
(Unaudited)

	Actual YTD 2023	Budget YTD 2023	Variance Act. to Bgt. 2023	Annual Budget 2023	Variance % Act. to Bgt. 2023	YTD Actual/ Budget 2023	Comparison Prior Year:		
							YTD Actual 2022	YTD BGT 2022	Variance 2022
Salaries & Wages	7,074,290	7,222,042	147,752	10,833,060	-2%	65%	\$ 6,891,052	\$ 7,474,356	\$ 583,304
Benefits	1,880,522	1,694,253	(186,269)	2,541,380	11%	74%	1,674,465	1,746,380	71,915
Travel	123,921	105,867	(18,054)	158,800	17%	78%	84,324	125,803	41,479
Program	1,063,914	824,775	(239,139)	1,237,163	29%	86%	687,891	865,488	177,597
Office	40,636	54,933	14,297	82,400	-26%	49%	32,717	44,933	12,216
Computer Services	621,112	597,261	(23,851)	895,892	4%	69%	572,022	568,276	(3,746)
Telecommunications	198,343	176,665	(21,678)	265,000	12%	75%	228,131	218,352	(9,779)
Program Promotion	27,813	30,000	2,187	45,000	-7%	62%	30,455	56,621	26,166
Professional Development	39,357	53,616	14,259	80,424	-27%	49%	21,453	57,428	35,974
Facilities Expenses	658,384	616,000	(42,384)	924,000	7%	71%	864,253	737,594	(126,659)
Fees & Insurance	343,987	327,333	(16,654)	383,500	5%	90%	314,505	284,200	(30,305)
Debt Management	304,947	304,947	0	457,421	0%	67%	304,947	304,947	0
Recoveries	0	0	0	0	#DIV/0!	0%	(6,750)	(18,000)	(11,250)
	<b>\$ 12,377,226</b>	<b>\$ 12,007,692</b>	<b>\$ ( 369,534 )</b>	<b>\$ 17,904,040</b>	<b>3%</b>	<b>69%</b>	<b>\$ 11,699,465</b>	<b>\$ 12,466,378</b>	<b>\$ 766,913</b>

## **Notes to Financial Statements – August 2023**

### **Reporting Period**

The August 2023 financial reports include eight months of financial results for Public Health. All other non-funded public health programs are reporting five months of results from the operating year ending March 31, 2024.

### **Statement of Operations (see page 1)**

#### **Summary – Public Health and Non Public Health Programs**

In August 2023, APH received the 2023 Amending Agreement from the province identifying the approved funding allocations for APH's cost-shared and 100% funded programming. The annual budgets for public health programs have been updated to reflect these allocations. The following allocations/changes from the previous year are of significant note:

- A 1% or \$88,000 increase to base funding for cost-shared mandatory programs (pro-rated for the months of April through December)
- A \$129,800 annualized increase in base funding for the Ontario Senior Dental Care Program (pro-rated for the months of April through December).
- One time fiscal funding totaling \$328,000 for special initiatives (including COVID school focused nurses which were funded from April through June of 2023)

As of August 31, 2023, Public Health calendar programs are reporting a \$383K negative variance – the majority of which is driven by a \$370K negative variance in expenditures.

### **Public Health Revenue (see page 2)**

Our Public Health calendar revenues are within 1% of budget for 2023.

Although the province has confirmed that one-time extraordinary cost reimbursement for the COVID 19 programs will continue through 2023 (with approval and on-going funding to be based off of our Annual Service Plan and quarterly submissions to the province), no allocations have been provided to date. Our Annual Service Plan was submitted to the Ministry on April 3, 2023 and our Q2 Standards Activity report was submitted to the Ministry on July 31, 2023 forecasting the need for \$488K in COVID 19 one-time funds for the 2023 calendar year.

For the fiscal year ending March 2024, funding has been approved totaling \$389K which includes continuation of the COVID School Focused Nurse initiative (which expired in June 2023) and \$61K of one time funding related to upgrading of essential IT network switches has been carried over from fiscal 2022-23 as approved by the Ministry in March 2023. Other initiatives for which one time fiscal funding has been provided for include the needle syringe program, new purpose-built vaccine fridge, PHI practicum and capital security system upgrades.

Although it has been confirmed that temporary IPAC Hub funding will continue into the 2023-24 fiscal year, APH has not yet received confirmed funding allocations. APH has recently shared with the

Ministry, our input towards a 2023-24 budget for this program and we expect to receive feedback shortly.

No funding has been approved to date for COVID Recovery initiatives (\$650K was requested in 2022).

### **Public Health Expenses (see page 3)**

#### ***Salaries & Benefits***

There is a \$38K negative variance associated with salaries and benefits. This is driven by the increased cost of non-statutory benefits caused by significantly increased usage year over year.

#### ***Travel***

There is a \$18K negative variance associated with travel expenses. This is a result of management and front line staff increasing travel related to district recovery work and also increased travel related to professional development opportunities.

#### ***Programs***

There is a \$239K negative variance associated with programs. This is driven by ongoing COVID recovery initiatives (leadership and workforce development programs), physician coverage as well as increasing program demand for our Ontario Senior Dental program. We note that APH has requested an increase to base funding for the 100% funded Ontario Senior Dental program with the 2023 Annual Service Plan to fund these identified pressures. Although only a portion of our request has been approved to date, conversations with the Ministry related to required funding to maintain this program are ongoing and APH has been instructed to continue programming as planned, with in year funding opportunities to come to address ongoing pressures.

#### ***Telecommunications***

There is a \$22K negative variance associated with telecommunications driven by ongoing needs associated with implementation of retro-fitting our office telecommunication systems for current needs based on full staff return to the office (which will result in cost savings of at least \$3K per month moving forward).

### **COVID-19 Expenses**

#### ***COVID-19 Response***

This program includes case and contact management as well as supporting the information phone lines. August year to date expenses were \$147K (versus \$1,818K this time last year).

#### ***COVID-19 Mass Immunization***

This program includes the planning, support, documentation, and actual needles in arms of the various COVID-19 vaccines. August year to date expenses were \$152K (versus \$879K this time last year).

The majority of these costs consist of salaries and benefits costs of APH staff associated with the hours committed year to date to COVID response activities (versus work completed under normal 'home' program delivery).

### **Financial Position - Balance Sheet (see page 7)**

APH's liquidity position continues to be stable and the bank has been reconciled as of August 31, 2023. Cash includes \$2.0M in short-term investments.

Long-term debt of \$4.1 million is held by TD Bank @ 1.80% for a 60-month term (amortization period of 120 months) and matures on September 1, 2026. \$239k of the loan relates to the financing of the Elliot Lake office renovations, which occurred in 2015 with the balance, related to the financing of the 294 Willow Avenue facility located in Sault Ste. Marie. There are no material accounts receivable collection concerns.

**Algoma Public Health**  
**Statement of Financial Position**  
(Unaudited)

	August 2023	December 2022
<b>Date: As of August 2023</b>		
<b>Assets</b>		
<b>Current</b>		
Cash & Investments	\$ 4,955,098	\$ 6,759,408
Accounts Receivable	635,645	1,550,507
Receivable from Municipalities	27,478	6,482
Receivable from Province of Ontario		
<i>Subtotal Current Assets</i>	5,618,221	8,316,397
<b>Financial Liabilities:</b>		
Accounts Payable & Accrued Liabilities	1,187,430	1,319,570
Payable to Gov't of Ont/Municipalities	2,274,387	4,628,303
Deferred Revenue	271,319	317,901
Employee Future Benefit Obligations	2,849,656	2,849,656
Term Loan	3,702,106	3,702,106
<i>Subtotal Current Liabilities</i>	10,284,898	12,817,535
<b>Net Debt</b>	(4,666,677)	(4,501,139)
<b>Non-Financial Assets:</b>		
Building	23,012,269	23,012,269
Furniture & Fixtures	2,113,823	2,113,823
Leasehold Improvements	1,583,166	1,583,166
IT	3,284,893	3,284,893
Automobile	40,113	40,113
Accumulated Depreciation	-12,619,708	-12,619,708
<i>Subtotal Non-Financial Assets</i>	17,414,556	17,414,556
<b>Accumulated Surplus</b>	12,747,879	12,913,417

# Briefing Note

**To:** The Board of Health  
**From:** Richard Webb, Director of Corporate Services  
**Date:** 10/18/2023  
**Re:** APH Server Upgrade

---

☐ For Information

☐ For Discussion

☒ For a Decision

---

**ISSUE:**

APH is currently running all production servers on hardware that is 7 years old. This hardware, although running redundant systems, is currently out of warranty. APH servers are running one generation behind on the virtualization hypervisor which runs all the agency's processes and stores all agency data.

All APH programs/departments rely on stable core servers for all computer, data, and printing service functionality.

We have had multiple hardware failures in March of 2023 and again on September 17, 2023. Due to aging server infrastructure the ability to acquire parts for repairs is limited and may take longer to receive as suppliers don't stock out of warranty parts.

The cost of the upgrade would be approximately **\$235,000** which our operating budget will not support.

**RECOMMENDED ACTION:**

That the Finance and Audit Committee of the Board recommends to the Board of Health that money from the agency reserve fund be used to upgrade APH server infrastructure.

**BACKGROUND:**

A one-time funding request was submitted to the ministry for 2023 to upgrade current server infrastructure but was not approved.

We experienced server hard drive failures on three servers earlier this year in March that put our systems at considerable risk of collapse.

We recently had another failure on one of the core critical servers over the weekend of September 16, 2023, while we waited for a new battery to come in.

**ASSESSMENT OF RISK AND MITIGATION:**

We currently do not have the ability to run the latest virtualization hypervisor due to hardware limitations. The version we run is ending support in 2023; after that point, our servers will not be eligible for software updates, including security, bug fixes, and technical support. After that point, any I.T. audit will likely do

poorly or fail due to this critical issue. This puts APH at a high-risk level for potential vulnerabilities that can be exploited.

Due to the hardware age, there is a higher risk of failure. Server equipment runs 24 x7 365; over time, they start to fail just from wear.

The vendor no longer supports the equipment for warranty, and parts are becoming harder to source. Recent part sourcing has relied on after-market sources, i.e., eBay/Amazon.

**FINANCIAL IMPLICATIONS:**

\$235,000. Staff will seek three quotes as per procurement policy.

**CONTACT:**

Rick Webb, Director of Corporate Services

## Algoma Public Health – Policy and Procedure Manual – Board Policies and Bylaws

<b>APPROVED BY:</b>	Board of Health	<b>BY-LAW #:</b>	06-01
<b>DATE:</b>	Original: Apr 19, 2006 Revised: Feb 18, 2015 Revised: Jun 28, 2017 Reviewed: Nov 20, 2019 Reviewed: Sep 22, 2021 Revised: Oct 25, 2023	<b>SECTION:</b>	Bylaws
		<b>SUBJECT:</b>	Sewage Systems Part 8 of the Ontario Building Code Act

---

A By-law respecting construction, demolition and all components of the Ontario Building Code Part 8, including inspections and fees related to sewage systems for all private sewage systems, less than 10,000 litres per day.

**WHEREAS** the Board of Health of Algoma Public Health is responsible for the enforcement of the Building Code Act and Regulations related to sewage systems, as defined in section 3.1 of the Act, for the area of jurisdiction defined in Table 1.7.1.1, section 1.7.1.1 of Division C, Part 1 of the Ontario Building Code.

**AND WHEREAS** the Board of Health of Algoma Public Health is empowered pursuant to Section 7 of the Building Code Act, C23, as amended, Statutes of Ontario, 1992, to make By-laws respecting sewage systems;

**NOW THEREFORE THE BOARD OF HEALTH OF ALGOMA PUBLIC HEALTH HEREBY ENACTS AS FOLLOWS:**

### **PERMITS AND FEES**

The Chief Building Official (CBO), as appointed, will create application forms and templates for the public to use and complete to apply for inspection and approvals related to sewage systems.

Fees for a required permit are due and payable upon submission of an application.

Classes of permits required for sewage systems, including construction, demolition, and permit fees for other services related to sewage systems, are set forth in Schedule "A" attached hereto and formed part of this By-law.

### **DATE OF EFFECT**

That this By-law shall come into force and take effect on the ~~28<sup>th</sup> day of June 2017~~ **25<sup>th</sup> day of October 2023**.

**READ AND PASSED IN OPEN MEETING THIS ~~28<sup>th</sup> DAY OF JUNE, 2017~~ **25<sup>th</sup> day of October 2023**.**

\_\_\_\_\_  
**L. Mason Sally Hagman, Chair**

\_\_\_\_\_  
**I. Frazier Deborah Graystone, 1<sup>st</sup> Vice-Chair**



## SCHEDULE "A" TO BY-LAW 06-01

As amended on ~~June 24, 2017~~ **October 25, 2023****SEWAGE SYSTEM PERMIT APPLICATION FEES**

PROPOSED FEE CHANGES	2016 Volumes	2017 Rate	2018 Rate (Proposed )	2019 Rate (Proposed )	2020 Rate (Proposed )
<del>Class 2 – Greywater system (leaching pit)</del>	6	\$250	\$250	\$275	\$300
<del>Class 3 – Cesspool System</del>	0	\$250	\$250	\$275	\$300
<del>Class 4 – Leaching bed system (septic tank and leaching bed)</del>	129	\$750	\$850	\$900	\$950
<del>Class 4 – Tank replacement</del>	7	\$300	\$325	\$350	\$375
<del>Class 4 – Leaching bed replacement/alteration</del>	12	\$500	\$550	\$600	\$650
<del>Class 5 – Holding tank system</del>	2	\$500	\$800	\$850	\$900
<del>Sewage system demolition/decommissioning</del>	N/A	\$100	\$125	\$150	\$150
<del>Transfer of Permit</del>	N/A	\$50	\$75	\$100	\$100
<del>Revision of Permit (no inspection required)</del>	N/A	\$100	\$100	\$125	\$150
<del>Revision of Permit (inspection required)</del>	N/A	\$250	\$300	\$325	\$350
<del>File Request (copy of permit on file)</del>					
* <del>Greater than 5 days' notice</del>	82	\$75	\$100	\$125	\$125
* <del>Less than 5 days' notice</del>	13	\$150	\$175	\$200	\$200

PROPOSED FEE CHANGES	2022 Volumes	2023 Rate	2024 Rate (Proposed)	2025 Rate (Proposed)	2026 Rate (Proposed)
Class 2 - Greywater system (leaching pit)	15	\$300	\$360	\$365	\$375
Class 3 - Cesspool System	0	\$300	\$360	\$365	\$375
Class 4 - Leaching bed system (septic tank and leaching bed)	203	\$950	\$1140	\$1160	\$1190
Class 4 - Tank replacement	4	\$375	\$450	\$460	\$470
Class 4 - Leaching bed replacement/alteration	10	\$650	\$780	\$800	\$815
Class 5 - Holding tank system	2	\$900	\$1080	\$1100	\$1125
Sewage system demolition/decommissioning	n/a	\$150	\$180	\$185	\$190
Transfer of Permit	n/a	\$100	\$120	\$125	\$125
Revision of Permit (no inspection required)	n/a	\$150	\$180	\$185	\$190
Revision of Permit (inspection required)	n/a	\$350	\$420	\$430	\$440
File Request (copy of permit on file) – By Owner	18	n/a	\$40	\$40	\$40
File Request (copy of permit on file) - Other					
▪ Greater than 5 days' notice	43	\$125	\$150	\$155	\$160
▪ Less than 5 days' notice	5	\$200	\$240	\$245	\$250

### Exemptions for Severance Applications:

Unless exempted below, each application for consent, severance, minor variance, zoning amendment, will require as listed in the above fee schedule.

Lot fees are exempt under the following conditions:

1. The property is served by a sewage works designed for a daily sewage flow in excess of 10,000 litres per day, which has been or requires approval by the Ministry of Environment under the Ontario Water Resources Act.
2. Any lot municipally serviced (sewer and water), with a letter stating services are available from the municipality.
3. Any parcel which comprises, or will comprise part of a public highway.
4. Any lot or property transfer, which is for the purposes of an easement, unless the easement is for the purpose of permitting the installation of a sewage system, <10,000 litres per day.
5. An application for a re-zoning or minor variance on a parcel for which a consent to sever fee had been collected during the same construction year.

Enacted and passed by the Algoma Health Unit Board on this 16<sup>th</sup> day of April 2006

Original signed by  
G. Caputo, Chair  
A. Northan, MOH

Revised and passed by the Algoma Public Health Board on this 17<sup>th</sup> day of March 2010

Revised and passed by the Algoma Public Health Board on this 18<sup>th</sup> day of February 2015

Revised and passed by the Algoma Public Health Board on this 28<sup>th</sup> day of June 2017

Revised and passed by the Algoma Public Health Board on this 25<sup>th</sup> day of October 2023

YOU'RE INVITED:

## AOHT Member Board of Directors Information Session and Discussion

November 9, 2023 | 6:00 pm – 7:30 pm

Zoom: <https://zoom.us/j/6184592354>

(if joining by phone: +1 647 558 0588 / Meeting ID: 618 459 2354)

Dear Algoma Ontario Health Team partner Board of Directors,

On behalf of the Algoma Ontario Health Team (AOHT) Leadership Council, we are pleased to invite **two representatives** from your respective Board of Directors to participate in an AOHT Member Board information session and discussion. As we prepare to embark on our fourth full fiscal year as an approved Ontario Health Team (OHT), all member organizations have a joint commitment to continue working together to create a network where the residents of Algoma will have access to the right care, right team, and right care setting when they need it.

Since we last came together in 2021, we have made great strides and have built trusting relationships as a network that works together to advance integrated care in Algoma. Part of this advancement includes direction from the Ministry of Health and Ontario Health on the path forward for OHTs. Given these recent announcements, it is important to meet and explore the acceleration towards integrated care in Ontario, and what that means for all of our member organizations and their boards. Specifically, for boards of directors, this means reaffirming our commitment to the integrated care model in Algoma.

As part of this information session, we hope to:

- Provide an update on the AOHT's progress in advancing integrated health and social care
- Learn about regional and provincial perspectives on the vision for integrated health and social care via OHTs
- Reaffirm our commitment to advancing quality health and social care at the population-level

Sincerely and on behalf of the AOHT Leadership Council,



**Dr. Alan McLean**  
Family Physician  
Sault Family Health Organization  
AOHT Tri-Chair



**Stephanie Parniak**  
Patient Partner  
AOHT Tri-Chair



**Ila Watson**  
President & CEO  
Sault Area Hospital  
AOHT Tri-Chair

October 16, 2023

*VIA EMAIL*

The Honourable Minister David Piccini  
Minister of Environment, Conservation and Parks  
Ministry of Environment, Conservation and Parks  
5th Floor, 777 Bay Street  
Toronto, Ontario M7A 2J3

Dear Minister Piccini:

**Re: Calls for expansion of outdoor air quality monitoring stations and the Air Quality Health Index across Northern Ontario**

Expanding air quality monitoring stations across Northern Ontario, to provide comprehensive data to inform the Air Quality Health Index (AQHI), is needed now more than ever.

With climate change, wildfire is an increasing risk, particularly in Northern Ontario. Exposure to wildfire smoke can cause health impacts including headaches, cough, dizziness, chest pains, shortness of breath, asthma attacks and irregular heart beat<sup>1</sup>. Some people are at higher risk of health problems when exposed to wildfire smoke, including older adults, pregnant people, people who smoke, infants and young children, people working or exercising outdoors and people with existing illnesses or chronic health conditions<sup>2</sup>.

The AQHI is a tool for Ontarians to be informed of the health risks from local air pollution and take recommended actions to protect their health<sup>3</sup>. However, many northern Ontario communities do not have local outdoor air monitoring stations and therefore do not benefit from the AQHI.

**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](http://phsd.ca)



At its meeting on September 21, 2023, the Board of Health carried the following resolution #50-23:

*WHEREAS according to recent research, climate change in Ontario is expected to increase the number of wildfires caused by human activity and by lightening by 20% and 62%, respectively, between the periods of 1975-1990 and 2020-2040, and it is expected that the increases will be even greater in parts of Northern Ontario; and*

*WHEREAS wildfire smoke can impact air quality and cause health effects hundreds of kilometers from the fire zone; and*

*WHEREAS many northern Ontario communities do not have local outdoor air monitoring stations and therefore do not benefit from the Air Quality Health Index (AQHI), a tool for Ontarians to be informed of the health risks from local air pollution and take recommended actions to protect their health; and*

*WHEREAS there is only one air quality monitoring station within Sudbury and districts that provides data for the AQHI, being one of only five stations across Northern Ontario; and*

*WHEREAS expanding air quality monitoring stations and the reach of the AQHI to more communities in the North would benefit communities' health, and would provide a more robust surveillance system on wildfire smoke impacts;*

*THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts endorse the letters dated July 5, 2023 from the Porcupine Health Unit and August 1, 2023, from the Timiskaming Health Unit to the Honourable Minister, David Piccini, calling for the installation of Air Quality Monitoring Stations in their respective service areas; and*

*FURTHER THAT air quality monitoring stations and the AQHI be expanded across Northern Ontario to improve opportunities for health for all.*

The AQHI can increase awareness of impacts of air pollutants, including those created by wildfire smoke, and reduce or eliminate serious health impacts through adherence to health protective advice. Access to the AQHI, informed by local data, could benefit everyone. At the community level, it can have a significant positive impact when used to inform health protective policies, for example for outdoor recreational programs, daycares, and long-term care homes.

Letter to the Honourable Minister David Piccini

Re: Calls for expansion of outdoor air quality monitoring stations and the Air Quality Health Index across Northern Ontario

October 16, 2023

Page 3 of 3

With this in mind, we support the Timiskaming Health Unit and Porcupine Health Unit calling for installation of air quality monitoring stations in their respective service areas, and further call for expansion of air quality monitoring stations and the AQHI across Northern Ontario.

Sincerely,



René Lapierre  
Chair, Board of Health

cc: The Honourable Doug Ford, Premier of Ontario  
The Honourable Sylvia Jones, Deputy Premier of Ontario, Minister of Health  
The Honourable Steven Guilbeault, Member of Parliament, Minister of Environment and Climate Change  
The Honourable Mark Holland, Member of Parliament, Minister of Health  
Carol Hughes, Member of Parliament, Algoma-Manitoulin-Kapuskasing  
Marc Serré, Member of Parliament, Nickel Belt  
Viviane Lapointe, Member of Parliament, Sudbury  
Michael Mantha, Member of Provincial Parliament, Algoma-Manitoulin-Kapuskasing  
France Gélinas, Member of Provincial Parliament, Nickel Belt  
Jamie West, Member of Provincial Parliament, Sudbury  
Dr. Kieran Moore, Chief Medical Officer of Health  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
All Ontario Boards of Health

---

<sup>1</sup> Government of Canada. *Wildfire smoke 101: Wildfire smoke and your health*.

<https://www.canada.ca/en/health-canada/services/publications/healthy-living/wildfire-smoke-health.html>. Accessed 2023/10/04.

<sup>2</sup> Government of Canada. *Wildfire smoke 101: Wildfire smoke and your health*.

<https://www.canada.ca/en/health-canada/services/publications/healthy-living/wildfire-smoke-health.html>. Accessed 2023/10/04.

<sup>3</sup> Government of Canada. About the Air Quality Health Index. <https://www.canada.ca/en/environment-climate-change/services/air-quality-health-index/about.html>. Accessed 2023/10/04

October 13, 2023

*VIA EMAIL*

Dr. Catherine Zahn  
Deputy Minister  
Ministry of Health  
[Catherine.zahn@ontario.ca](mailto:Catherine.zahn@ontario.ca)

Dr. Kieran Moore  
Chief Medical Officer of Health and Assistant Deputy Minister  
Office of Chief Medical Officer of Health, Public Health Division  
Ministry of Health  
[Kieran.moore1@ontario.ca](mailto:Kieran.moore1@ontario.ca)

Dear Dr. Zahn and Dr. Moore:

We are writing on behalf of the Boards of Health and Medical Officers of Health for Algoma Public Health, North Bay Parry Sound District Health Unit, and Public Health Sudbury & Districts.

We are respectfully seeking an in-person meeting with you in the North East at your earliest convenience and ideally prior to mid-November, on the subject of voluntary mergers of boards of health within Ontario's public health system.

Our Boards have respectively supported resolutions directing us to engage in exploratory discussions with our North East and neighbouring counterparts on this topic.

To this end, we met on October 6, 2023, and reviewed our respective Board of Health deliberations on restructuring to date, including submissions made collectively and individually in response to prior government initiatives on the structure of the public health system. We recognized that we have an excellent track record of working together at all levels of our organizations and that these relationships were further strengthened during our local response to the COVID-19 pandemic.

Through these strong relationships and our collective work on prior public health restructuring, we believe that we have a strong foundation upon which to explore voluntary mergers as one approach to public health strengthening in the North East.

Our further deliberations and ultimate direction will be informed by consultation with you. We understand that voluntary merger parameters are expected to be shared before the end of this month.

We are seeking an opportunity to discuss with you how such parameters might map to our Northeastern public health environment and best serve the public health needs of the people we serve. Of note, this meeting request is separate to the request from northern Medical Officers of Health for the CMOH to join a regional northern MOH meeting.

Thank you very much for considering this request and we look forward to hearing from you at your earliest convenience. *Please contact Rachel Quesnel, Secretary to the Board for PHSD who can assist with scheduling ([quesnelr@phsd.ca](mailto:quesnelr@phsd.ca); 705.522.9200 Ext. 291).*

Sincerely,

*Electronically supported by*

Luc Morrisette, Board Vice-Chair  
Algoma Public Health

Dr. Jennifer Loo, Medical Officer of Health/CEO  
Algoma Public Health

Rick Champagne, Board Chair  
North Bay Parry Sound District Health Unit

Dr. Carol Zimbalatti, Acting Medical Officer of  
Health/CEO  
North Bay Parry Sound District Health Unit

René Lapierre, Board Chair  
Public Health Sudbury & Districts

Dr. Penny Sutcliffe, Medical Officer of Health/CEO  
Public Health Sudbury & Districts



[View this email in your browser](#)

**PLEASE ROUTE TO:**

**All Board of Health Members**

**All Members of Regional Health & Social Service Committees**

**All Senior Public Health Managers**

---

**October 18, 2023**

---



---

## October 2023 InfoBreak

*This update is a tool to keep alPHA's members apprised of the latest news in public health including provincial announcements, legislation, alPHA activities, correspondence, and events. Visit us at [alphaweb.org](http://alphaweb.org).*

---

### **Leader to Leader - A Message from the alPHA Executive Committee - October 2023**



As we move further into fall, we know many of you are working hard on keeping our populations healthy during our annual, predictable respiratory disease cycle occurring in Ontario. We're encouraged for a better fall season as diligent work has been undertaken to improve upon last year.

Work continues on the Strengthening Public Health change initiative, collaborating with the Office of the Chief Medical Officer of Health. The Ministry of Health has

with the alPHA Executive Committee taking the lead, continues to work diligently on your behalf. We're taking every opportunity to bring the perspectives of local public health — both staff and governance — to our colleagues at the OCMOH and the Ministry. Ongoing collaborations continue with key stakeholders who are similarly impacted.

alPHA celebrates its strong reciprocal relationships and two-way communications with key government officials and important stakeholders. Recently, alPHA representatives have met with Dr. Kieran Moore, Chief Medical Officer of Health & ADM, Ministry of Health and his staff at several stakeholder meetings.

Thank you to Dr. Kieran Moore and Michael Sherar for their attendance at the alPHA Board Meeting on September 21, 2023. And an additional thank you to Michael Sherar for also attending the alPHA Executive Committee meeting on September 15, 2023.

alPHA's Fall Symposium and Workshops, taking place November 22-24, 2023, will have key events with a dynamic agenda, line-up, and meetings. This highly anticipated symposium will amplify the critical role, value, and benefit of Ontario's local public health system. Thank you to the University of Toronto's Dalla Lana School of Public Health and the Eastern Ontario Health Unit for their generous support of these events.

With one unified voice, the alPHA Board and its communications continue to represent the best interests of Ontario's public health system.

Sincerely,

alPHA Executive Committee

---

## **Update from the Ministry of Health: Strengthening Public Health**



The Ministry of Health has established a Voluntary Merger Key Informant Group, comprising public health sector leaders from a cross-section of Local Public Health Agencies (LPHAs) and associations, including Board of Health members, CEOs, MOHs, municipal representatives, alPHA and AMO. alPHA representatives include Wess Garrod, Trudy Sachowski, Carmen McGregor, Dr. Hsiu-Li Wang, Dr. Lianne Catton, Dr. Piotr Oglaza, Cynthia St. John, Marilyn Herbacz, and Loretta Ryan.

met twice so far to review draft outcomes, objectives, considerations and to provide advice on the merger proposal processes.

Information on the voluntary mergers process will be provided by the Ministry as soon as possible, likely the last week of October. It is recognized, however, by the Ministry that LPHAs may want to proceed with planning in the meantime and the Ministry encourages LPHAs to begin considering options and engaging in discussion with surrounding LPHAs in relation to possible future mergers, provided LPHAs maintain the flexibility to consider merger objectives and parameters when these are released.

LPHAs will be invited by the Ministry to submit proposals through the ASP process. The Ministry anticipates the proposal template will be released in December 2023 and due back to the Ministry in March 2024.

---

## Register for the alPHa 2023 Fall Symposium, Section Meetings, and Workshops



Registration for the alPHa 2023 Fall Symposium, Section Meetings, and Workshops is now open! This event will amplify the critical role, value, and benefit of Ontario's local public health system. Registration is \$399 plus HST and you can register [here](#).

Join us for online plenary sessions with public health leaders in the morning followed by the BOH Section and COMOH Section meetings in the afternoon.

Attendees are invited, at no additional cost, to participate in workshops called: *How to Use a Human Rights Based Framework in the Workplace* from 1-4 p.m. on November 22 and the *Importance of Risk Communication in a Changing World* from 1-4 p.m. on November 23. Please note, the previously scheduled *Climate Change and Public Health* workshop will now be held during the 2024 Winter Symposium.

This gathering provides a unique opportunity to connect with public health leaders from all corners of the province. Together, we will delve into shared obstacles and strengthen the future of public health. Expect to gain access to invaluable tools and resources that will empower local public health and their communities.

alPHA; Ian Cummins, Director, Ontario Health Teams (OHTs), Strategy, Ontario Health; Lindsay Jones, Director of Public Policy, AMO, Michael Jacek, Senior Advisor, AMO, and Daniela Spagnuolo, Policy Advisor, AMO. **NEW:** Sabine Matheson, Principal, StrategyCorp has joined the speaking lineup.

For further details, [check out our flyer](#), [Symposium program](#) (last updated on October 17), and [BOH Section Meeting agenda](#) (last updated on October 16). Additionally, the website has been updated with the latest content. Be sure to take a look at it regularly for updates!



## Local Public Health Agencies

**2023 Fall Symposium,  
Section Meetings  
and Workshops**

**Hold the Date!**

# alPHA

Association of Local  
**PUBLIC HEALTH**  
Agencies

alPHA's Fall Symposium, Section Meetings, and workshops will continue the important conversations on the critical role, value, and benefit of Ontario's local public health system.

On November 24<sup>th</sup>, participate in online plenary sessions with public health leaders in the morning, followed by BOH and COMOH Section meetings in the afternoon.

Attendees will also be invited, at no additional cost, to participate in pre-symposium workshops on November 22<sup>nd</sup> & 23<sup>rd</sup>:

- How to Use a Human Rights Based Framework in the Workplace
- Importance of Risk Communication in a Changing World

Registration will open in September (date TBD) and will cost \$399 plus HST.

**Dalla Lana**  
School of Public Health



*Hosted by alPHA with generous support from the University of Toronto's Dalla Lana School of Public Health and Eastern Ontario Health Unit.*

*Please note that you must be an alPHA member to participate in the Pre-Symposium Workshops, Symposium or Section meetings.*



## alPHA Fall Symposium & Section Meetings November 24, 2023

Draft as of October 17, 2023 Note: Meeting is hosted via Zoom Webinar  
8:30 am to 4:30 pm - All times are Eastern Time (ET)

<b>Public Health Matters Infographics and Videos</b> <i>We have a full program for the day and will be getting things underway right at 8:30 am! Attendees are encouraged to get started a few minutes early to check their internet connection, log into the Zoom webinar, test audio settings etc. alPHA's Public Health Matters infographics and videos will play at this time and again during the morning break.</i>	8:15 am - 8:30 am
<b>Call to Order, Greetings and Land Acknowledgement</b> Speaker: Dr. Charles Gardner, President, alPHA  <b>Welcoming Remarks</b> Hon. Doug Ford, Premier of Ontario and Minister of Intergovernmental Affairs <i>Invited</i> Hon. Sylvia Jones, Deputy Premier and Minister of Health <i>Invited</i> Dr. Theresa Tam, Chief Public Health Officer <i>Invited</i> Colin Best, President, Association of Municipalities of Ontario <i>Invited</i> Professor France Gagnon, Acting Dean, Dalla Lana School of Public Health <i>Invited</i>	8:30 am - 8:45 am
<b>Update from the Chief Medical Officer of Health</b> Speaker: Dr. Kieran Moore, Chief Medical Officer of Health Moderator: Dr. Charles Gardner, President, alPHA	8:45 am - 9:45 am
<b>Reflections from Southwestern Public Health's Merger</b> Speaker: Cynthia St. John, Chief Executive Officer, Southwestern Public Health Moderator: Emma Tucker, Affiliate Representative, alPHA Board  After five years as a newly merged public health unit and adding in the largest pandemic response in a generation, Cynthia will share her reflections on the successes and on the challenges associated with developing a newly merged public health unit. She will cover the early days of how the Boards of Health connected to present day and learnings along the way.	9:45 am - 10:15 am
<b>Break</b>	10:15 am - 10:45 am
<b>alPHA Strategic Plan Session</b> Speaker: Maria Sánchez-Keane, Principal, Centre for Organizational Effectiveness  Strategic planning is a process in which an organization defines their vision for the future and identifies the organization's goals and objectives. Join public health colleagues to learn more about alPHA's 2024 to 2026 Strategic Plan.	10:45 am - 11:45 am

<b>Not-for-Profit Corporations Act, 2010 (ONCA) Update (30 minutes)</b> Speakers: John Allen, Partner, Allen & Malek LLP, and Dr. Robert Kyle, Chair, alPHA-ONCA Compliance Working Group and Steven Rebellato, member, alPHA-ONCA Compliance Working Group Moderator: Trudy Sachowski, Past President, alPHA  alPHA representatives and legal counsel will provide an update on the changes to the current Constitution, as required, to transition to a by-law to come into compliance with the Not-for-Profit Corporations Act, 2010.	11:45 am - 12:15 pm
<b>Lunch Break</b> Take a break, grab a sandwich, and come back for an important update from PHO.	12:15 pm - 1:00 pm
<b>Public Health Ontario Update</b> Michael Sherar, President and Chief Executive Officer Colleen Geiger, Chief, Strategy and Stakeholder Relations, Research, Information and Knowledge Dr. Jessica Hopkins, Chief Health Protection and Emergency Preparedness Officer Dr. Samir Patel, Chief Laboratory Science and Operations Officer Dr. Tamara Wallington, Chief Health Promotion and Environmental Health Officer  Moderator: Dr. Hsiu-Li Wang, Chair, COMOH Section  The development of Public Health Ontario (PHO)'s next Strategic Plan (2024-29) is well underway. Join Michael Sherar for an update on PHO's strategic planning process. This will be followed by a panel of PHO executives describing the services that PHO provides to local public health units.	1:00 pm - 1:30 pm
<b>Section Meetings</b> <i>Members of the BOH Section and COMOH Section meet separately in the afternoon. Boards of Health members are asked to stay with the Zoom webinar platform. COMOH members will join a separate meeting. Agendas for these meetings are provided separately.</i>	1:30 pm - 4:30 pm

This event is hosted by alPHA with generous support from:

**Dalla Lana**  
School of Public Health

**EOHU**  **BSEO**  
Eastern Ontario Health Unit Bureau de santé de l'est de l'Ontario

480 University Avenue, Suite 300, Toronto, Ontario M5G 1V2  
(416) 595-0006 | [info@alphaweb.org](mailto:info@alphaweb.org) | [www.alphaweb.org](http://www.alphaweb.org)  
Follow us on Twitter @PHAgenies



# RISK

## COMMUNICATION

in a changing world



Presented by



**RONALD W. BRECHER, Ph.D., DABT, CChem**  
Toxicology & Risk Assessment Specialist  
[rbrecher@rogers.com](mailto:rbrecher@rogers.com)  
[riskpartners.ca](http://riskpartners.ca)

**November 23, 2023**  
**Virtual Workshop 1:00-4:00 pm**

Part of the alPHA Fall Symposium

Stay tuned for more information  
[alphaweb.org](http://alphaweb.org)

Presented by



**TREVOR SMITH DIGGINS**  
Risk Communication Specialist  
[trevor@smithdiggins.com](mailto:trevor@smithdiggins.com)  
[riskpartners.ca](http://riskpartners.ca)

Half-day online workshop  
for scientists and public  
health professionals

Apply real-world  
principles when you  
talk about public health  
and environmental risks

*How to Use a Human Rights Based Framework in the Workplace*





## Lights, camera, action!



As part of the alPHa Fall 2023 Symposium taking place on November 22-24, there is an opportunity to showcase recent videos from public health units from across the province.

Has your PHU posted a short public health video on your website or YouTube you'd like to share with Symposium attendees? The Symposium is an excellent opportunity to showcase and share your communications work on key public health issues!

Here's how to submit:

- Send the title and link to your PHU's video(s) to [info@alphaweb.org](mailto:info@alphaweb.org)
- Send only the URL(s) and do not send any video files.
- YouTube videos are preferred.
- Clips can be live-action or animated.
- Video(s) should be short and can be no longer than five minutes in length.
- Clips should be recently recorded (2023)/stand the test of time from when the videos were recorded.
- Variety is welcomed as we'd like to cover a broad range of public health topics.
- Videos must be from your PHU and not from another organization.

The deadline to submit information on your video clip is 4 p.m. on Friday, November 10th. We look forward to receiving your submissions!

Thank you to the public health agencies who have already responded. We appreciate your submissions and participation!

---

## **Ontario's Not-for-Profit Corporations Act (ONCA)**



Ontario's [Not-for-Profit Corporations Act \(ONCA\)](#) is a significant legislative update that replaced Ontario's Corporations Act on October 19, 2021 regarding not-for-profit corporations including alPHA. The ONCA was introduced with the aim of enhancing the legal framework governing not-for-profit organizations in the province. It provides a comprehensive set of regulations, tailored to meet the unique needs of non-profit corporations, while promoting transparency, accountability, and effective governance. alPHA has until October 18, 2024, to review, update and file governing documents with the Government of Ontario. In April 2023, alPHA formed an ONCA Compliance Working Group comprised of members of the [alPHA Executive Committee](#) along with Dr. Robert Kyle as the Chair and Loretta Ryan as staff. The purpose of the working group is to review alPHA's current Constitution and, in consultation with legal counsel, make recommendations to the alPHA Board of Directors regarding changes to the current Constitution, as required, as it transitions to a by-law to come into compliance with the Act. The goal is to obtain approval of the By-law by the membership at the alPHA Conference and AGM in June 2024. Members of the ONCA Compliance Working Group will provide updates at the Fall and Winter Symposiums, and you can read more in the [Executive Summary](#).

---

***Public Health Matters: A Business Case for Local Public Health now available in French***



# UNE QUESTION DE SANTÉ PUBLIQUE

alPHA  
Association of Local  
PUBLIC HEALTH  
Agencies  
www.alphontario.org

## UNE ANALYSE DE LA RENTABILITÉ DE LA SANTÉ PUBLIQUE

La santé publique soutient la santé pour tous. Les agences de santé publique locales offrent des programmes et des services qui favorisent le bien-être, la prévention des maladies et des blessures et qui protègent la santé de la population. Notre travail, souvent en collaboration avec des partenaires locaux au sein du système de santé élargi, permet d'avoir une population en meilleure santé sans devoir puiser parmi des ressources en santé souvent dispendieuses et limitées.

### NOUS DEMANDONS

Que les décideurs appuient les buts et les objectifs de la santé publique à l'aide de ressources soutenues et suffisantes pour assurer la stabilité du réseau d'agences de santé publique locales. La santé publique locale demeure essentielle à la fois pour la santé de la population ontarienne ainsi que pour la prospérité économique qui y est associée.

La santé publique locale soutient le gouvernement de l'Ontario dont les objectifs sont l'efficacité, l'efficience et le rapport qualité-prix.

### INVESTISSEMENT DANS LA SANTÉ PUBLIQUE LOCALE

L'investissement dans la santé publique locale implique le rendement suivant :

#### RÉDUCTION DES HOSPITALISATIONS ET DES DÉCÈS

Les mesures de santé publique telles que la vaccination, la gestion de cas et des contacts, l'intervention en cas d'épidémie, le contrôle des infections dans la communauté ont permis de diminuer 13 fois plus d'hospitalisations durant la pandémie de COVID-19. La santé publique locale est également essentielle pour répondre aux nouveaux risques de maladies infectieuses telles que la mpx, à la réémergence d'agents pathogènes comme la poliomélie et la tuberculose, et au retour d'épidémies saisonnières annuelles telles que la grippe et le virus respiratoire syncytial (VRS).

#### DES COMMUNAUTÉS SÛRES

La santé publique locale protège nos communautés en travaillant avec les municipalités pour fournir de l'eau potable, des aliments sains, ainsi que des mesures de préparation et d'intervention en cas d'urgence.

#### DES ENFANTS EN SANTÉ

La santé publique locale protège les enfants en favorisant une croissance et un développement sains, la vaccination, le dépistage dentaire et la santé scolaire.



# UNE QUESTION DE SANTÉ PUBLIQUE

alPHA  
Association of Local  
PUBLIC HEALTH  
Agencies

### FINANCEMENT

La santé publique locale nécessite un financement de base suffisant et durable du gouvernement provincial. L'interruption du financement de redressement (46,8 M\$) de la province équivaudrait à l'augmentation des prélèvements municipaux de 14,78 % (316,7 M\$), ou à une diminution de 3,78 % (1,24 milliard de dollars) du financement global des programmes de santé publique locale.

Un retour à l'ancienne formule de partage des coûts entre la province et les municipalités pour tous les programmes et services aiderait à compenser cette perte.

### SE RÉTABLIR DE LA COVID-19

À la suite de la pandémie de COVID-19, les agences de santé publique locales se sont efforcées de remettre sur pied l'ensemble de leurs programmes, des progrès étant réalisés face aux priorités de rétablissement (Public Health, Resilience in Ontario - disponible en anglais) et à la réponse aux virus respiratoires saisonniers.

### LA SANTÉ PUBLIQUE PERMET DES ÉCONOMIES DE SOINS DE SANTÉ

La promotion de la santé et la prévention des maladies sont des rôles obligatoires pour les agences locales de santé publique. Ceci faisant, ces agences travaillent également avec le ministère de la Santé et certains intervenants clés de la lutte contre les maladies chroniques telles que le diabète, les maladies cardiaques et le cancer.

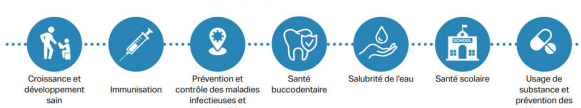
LES INÉQUITÉS EN SANTÉ DUES À LA POSITION SOCIOÉCONOMIQUE ONT CONTRIBUÉ À 15 % DE TOUTS LES COÛTS DES SOINS DE SANTÉ, SOIT 60,7 MILLIARDS DE DOLLARS

L'amélioration du tabagisme, de l'alcool, de l'alimentation et de l'activité physique pourrait éviter 89 milliards de dollars en coûts de soins de santé, soit 22 % de tous les coûts des soins de santé sur 10 ans.

La consommation d'alcool est un autre contributeur majeur aux coûts des soins de santé et soins sociétaux. On estime que la consommation d'alcool coûte à l'économie ontarienne 5,3 milliards de dollars en soins de santé, en application de la loi, en services correctionnels, en prévention, en perte de productivité et en mortalité prématurée.

Une estimation fixe les coûts du diabète au Canada à 15,36 milliards de dollars pour le système de la santé sur une période de 10 ans, touchant près de 10 % de la population.

La promotion de l'abandon du tabac et de la lutte antitabac a réduit globalement les coûts des soins de santé de 1,7 %, soit 4,2 milliards de dollars économisés sur 10 ans.



The latest infographic, which covers a business case for public health, is now available in French. It covers topics such as reduced hospitalizations, safe communities, and healthy children. To read more, click [here](#).

alPHA would also like to thank Eastern Ontario Health Unit for translating the infographic.

**Calling all Ontario Boards of Health: Level up your expertise with our NEW training courses designed just for you!**



Don't miss this unique opportunity to enhance your knowledge and strengthen local public health leadership in Ontario.

### BOH Governance training course

Master public health governance and Ontario's Public Health Standards. You'll learn all

## Social Determinants of Health training course

Explore the impact of Social Determinants of Health on public health and municipal governments. Understand the context, explore Maslow's Hierarchy of Needs, and examine various SDOH diagrams to better serve your communities.

Speakers are Monika Turner and Loretta Ryan.

Reserve your spot for in-person or virtual training now! Visit [our website](#) to learn more about the costs for Public Health Units (PHUs). Let's shape a healthier future together.

Additionally, thank you to all the public health agencies who have shown interest in our BOH courses. alPHa staff are currently coordinating the bookings and are pleased to see the uptake.

## Improve your mental health with these tips



World Mental Health Day occurred on October 10 and alPHa marked the day by launching a new Workplace Health and Wellness infographic with mental health resources. alPHa's former Workplace Health and Wellness program placement student, Franger Jimenez, continues to be engaged with alPHa and created the infographic to

use are available [here](#).

---

## Alcohol labelling meeting with Health Canada



The alPHa Executive Committee met with Health Canada on Friday, October 6, 2023. They discussed alPHa's support of [Bill S-254](#), as noted in our [recent Correspondence](#), which calls for warning labels on alcoholic beverages.

---

## Affiliates update

# Affiliates

Association of Local Public  
Health Agencies

---



## Ontario Association of Public Health Nursing Leaders (OPHNL)

OPHNL is currently working with the Center for Organizational Effectiveness to develop a 5-year strategic plan. Our aim is to refresh our [current strategic plan](#) to meet the needs of public health nursing leaders across Ontario and create strategic alignment with the priorities of our interdisciplinary public health colleagues. The finalized plan will be presented to OPHNL members at our fall AGM on November 23, 2023.

---

HEALTH  
PROMOTION  
ONTARIO



PROMOTION  
DE LA SANTÉ  
ONTARIO

## Health Promotion Ontario

Health Promotion Ontario has released a [White Paper on the Value of Local Health Promotion in Ontario](#) and an accompanying [infographic](#). This paper outlines the critical role that health promotion plays in keeping people healthy and demonstrates the effectiveness of health promotion efforts from public health units across Ontario.

---



Ontario Dietitians in Public Health  
Diététistes en santé publique de l'Ontario

## Ontario Dietitians in Public Health

ODPH, in consultation with Indigenous Knowledge Keepers, has called on Health Canada to [recognize the historical truth of Canada's Food Guide](#). ODPH acknowledges that food has been used as a weapon against Indigenous peoples to disconnect them from their land, culture, language, identity and well-being. ODPH made a [submission to the Ministry of Municipal Affairs and Housing](#) focusing on sustainable food systems, climate change adaptation and mitigation, and the future health of Ontarians.

---



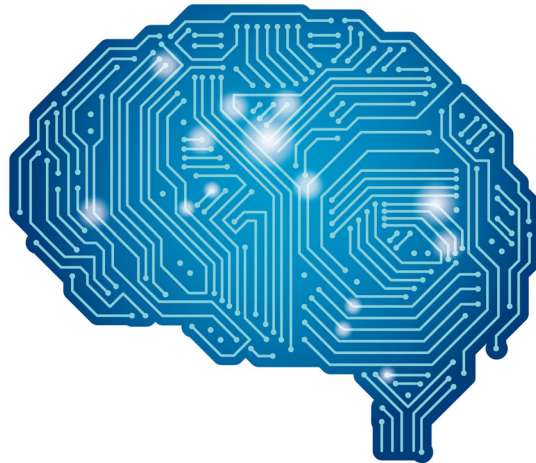
## The Association of Supervisors of Public Health Inspectors of Ontario

ASPHIO has released the *ASPHIO White Paper: Highlighting the Vital Role of Public Health Inspectors within a Responsive and Effective Public Health Workforce* (link to be provided when available). The report highlights the crucial contributions made by public health inspectors during the pandemic, their importance in supporting the delivery of public health programs and services and the vital role of public health inspectors within a responsive and effective public health workforce. The

versatility demonstrated by public health inspectors during the pandemic.

---

## Public Health and AI update



Innovations in artificial intelligence (AI) through the use of large language models (LLMs), machine-learning and natural language processing continue to be seen in public health. Given the mainstream use of applications like Chat GPT (Microsoft), PHUs should consider organizational policy to manage use of AI applications given the risks associated with privacy, reliability, confidentiality and plagiarism. While a collaborative approach in sharing policy framework on AI innovation and staff use should be employed by PHUs given similar risks and activities conducted under the Ontario Public Health Standards, health units should also review the federal government's [Artificial Intelligence and Data Act \(AIDA\)](#) to protect Canadians and guide organizational use of AI.

---

## BrokerLink Insurance



In partnership with alPha, [BrokerLink](#) is proud to offer exclusive discounts on personal home and auto insurance to members. When you're shopping for insurance, you'll



---

## Call for abstracts for TOPHC 2024



Do you want to help shape the conversation for TOPHC 2024? You can do so by submitting an abstract. **The deadline is October 20, 2023.** For more information on how to submit, click [here](#).

---

## Boards of Health: Shared Resources



A resource [page](#) is available on aPHa's website for Board of Health members to facilitate the sharing of and access to orientation materials, best practices, by-laws, resolutions, and other resources. If you have a best practice, by-law or any other resource that you would like to make available, please send a file or a link with a brief description to [gordon@alphaweb.org](mailto:gordon@alphaweb.org) and for posting in the appropriate library. Resources available on the aPHa website include:

- [Orientation Manual for Boards of Health](#) (Revised Feb. 2023)
- [Review of Board of Health Liability, 2018, \(PowerPoint presentation, Feb. 24, 2023\)](#)
- [Legal Matters: Updates for Boards of Health](#) (Video, June 8, 2021)
- [The Ontario Public Health Standards](#)
- [Public Appointee Role and Governance Overview](#) (for Provincial Appointees to BOH)
- [Ontario Boards of Health by Region](#)
- [List of Units sorted by Municipality](#)

- (Revised 2021)
- [Governance Toolkit \(Revised 2022\)](#)
- [Risk Management for Health Units](#)
- [Healthy Rural Communities Toolkit](#)
- [Map: Boards of Health Types](#)
- [NCCHPP Report: Profile of Ontario's Public Health System \(2021\)](#)
- [The Municipal Role of Public Health\(2022 U of T Report\)](#)
- [Boards of Health and Ontario Not-for-Profit Corporations Act](#)

## alPHA Correspondence



Through policy analysis, collaboration, and advocacy, alPHA's members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention, and surveillance services in all of Ontario's communities. Below is a submission that has been sent in since the last newsletter. A complete online library is available [here](#). This document is publicly available and can be shared widely.

- [alPHA Letter - Strengthening Public Health](#) (to Dr. Kieran Moore)

## Public Health Ontario



## COVID-19, Influenza, RSV and Other Respiratory Virus Reports

- [COVID-19 Wastewater Surveillance in Ontario](#)
- [SARS-CoV-2 Genomic Surveillance in Ontario](#)
- [Ontario Respiratory Virus Tool](#)

## Infection Prevention and Control Resources

- [IPAC Self-Assessment Audit for Long-Term Care and Retirement Homes](#)
- [Infection Prevention and Control \(IPAC\) Checklist for Long-Term Care and Retirement Homes](#)
- [Infection Prevention and Control Practices for Immunization Clinics](#)
- [How to Protect Yourself and Others from Respiratory Viruses](#)

## Additional Resources – New

- [Fermented food safety guidelines](#)
- [Reducing Health Risks Associated with Backyard Chickens](#)

## Upcoming PHO Events

- Thursday, October 19 – [PHO Rounds: Prioritizing Pathogens for Genomics](#) – 12:00 p.m. to 1:00 p.m.

Interested in PHO's upcoming events? Checkout their [Events](#) page to stay up-to-date with all PHO events.

Missed an event? Check out their [Presentations](#) page for full recordings of their events.

---

## Upcoming DLSPH Events and Webinars

# Dalla Lana

## School of Public Health

- [Empowering Breast Health: Personalized Approaches to Canadian Breast Cancer Screening](#) (Oct. 19)
- [Driving Innovation with Real-World Evidence from Patient Generated Content](#) (Oct. 20)
- [Statistical Sciences Applied Research and Education Seminar \(ARES\): Robert Gould](#) (Oct. 23)
- [Tick Net Canada - Scientific Symposium](#) (Oct. 24-25)
- [Indigenizing Health Symposium: Nations Gathering on the Land](#) (Oct. 25-26)
- [Statistical Sciences Applied Research and Education Seminar \(ARES\): Martha White](#) (Oct. 30)
- [Biostatistics Seminar Series with Dr. Luis Enrique Nieto-Barajas on Survival Analysis via Bayesian Nonparametrics](#) (Nov. 9)



## After a three-year hiatus, Blue Cities is returning to Toronto!

Canadian Water Network  
**BLUE CITIES**

October 24-25, 2023  
Toronto, Ontario

### Attention senior decision-makers!

Join your peers and industry experts from across Canada to explore shared strategic goals and pathways to achieve them.

[Register now](#)

### Stay ahead of emerging trends

Using wastewater-based surveillance to help protect public health.

Integrating wastewater-based surveillance into public health systems.

Future of wastewater-based surveillance in Canada.

Blue Cities, hosted by Canadian Water Network, is happening this October 24-25 in downtown Toronto. This year's conference includes a focus on water and public health protection. A national dialogue plenary featuring Dr. Bonnie Henry, B.C.'s provincial officer of health, will explore the future of wastewater-based surveillance in Canada. Other topics to be covered during the conference include ethics and equity related to wastewater-based surveillance, new developments in water monitoring for public health decision-making, and public health threats from water impacted by forest fires. Program and registration details can be found at [bluecities.ca](https://bluecities.ca). More information about Blue Cities is also available [here](#).

## Now is the perfect time to join and make RRFSS your source for local health data in 2024!



There are many reasons to choose RRFSS for your Health Unit Survey. 2024 data can be collected in one, two or all three cycles in the year. Sample size is also flexible and data can be collected by landline and cell phone (up to a 50 per cent/50 per cent mix). RRFSS has hundreds of pretested survey questions available on most health-related topics including the recent Climate Change questions, newly developed Sociodemographic questions on Gender, Sexual Orientation and Race, Use of and Barriers to Recreational, Social and Spiritual Supports for Older Adults module, Smoking, Vaping and Waterpipe by-laws Awareness.



In addition, RRFSS, in partnership with ISR, is offering three online Analysis Training Sessions in November (one per week). These are open to all Ontario health units and will provide attendees with the knowledge and skills required for analyzing RRFSS data and calculating weights. For further information about joining RRFSS or the Analysis Training Sessions, contact Lynne Russell, RRFSS Coordinator at: [lynnerussell@rrfss.ca](mailto:lynnerussell@rrfss.ca) or visit the RRFSS website: [www.rrfss.ca](http://www.rrfss.ca)

---

## News Releases

The most up to date news releases from the Government of Ontario can be accessed [here](#).

---



Our mailing address is:

\*|480 University Ave. Suite 300 Toronto, Ont. M5G 1V2|\*

Want to change how you receive these emails?  
You can [update your preferences](#) or [unsubscribe](#)

**From:** [allhealthunits](#) on behalf of [Heather Daly](#)  
**To:** [allhealthunits@lists.alphaweb.org](mailto:allhealthunits@lists.alphaweb.org)  
**Subject:** [allhealthunits] 2022 Annual Report for Renfrew County and District Health Unit  
**Date:** Wednesday, October 4, 2023 4:30:52 PM  
**Attachments:** [image002.png](#)  
[image003.png](#)  
**Importance:** High

---

You don't often get email from [hdaly@rcdhu.com](mailto:hdaly@rcdhu.com). [Learn why this is important](#)

---

**This email originated outside of Algoma Public Health. Do not open attachments or click links unless you recognize the sender and know the content is safe.**

---

We are pleased to share with you our 2022 Annual Report: [Annual Report 2022](#) showcasing the services and accomplishments of the dedicated RCDHU team in 2022.

Enjoy!

Heather

---



Heather G Daly CPA, CMA  
Chief Executive Officer (CEO)  
Renfrew County and District Health Unit  
141 Lake Street  
Pembroke, ON K8A 5L8  
Office : 613-732-3629 ext. 706  
Cell: 613-639-3032  
Fax : 613-735-3067  
[www.rcdhu.com](http://www.rcdhu.com)

*"Optimal Health for All in Renfrew County and District"*



The information in this e-mail is intended solely for the addressee(s) named, and is confidential. Any other distribution, disclosure or copying is strictly prohibited. If you have received this communication in error, please reply by e-mail to the sender and delete or destroy all copies of this message.