



June 26, 2024

BOARD OF HEALTH MEETING

Algoma Community Room / Videoconference

www.algomapublichealth.com

Meeting Book - June 26, 2024, Board of Health Meeting

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- a. Next Meeting Dates
-

15. Adjournment

Board of Health Meeting

AGENDA

Wednesday June 26, 2024 - 5:00 pm
SSM Algoma Community Room | Videoconference

BOARD MEMBERS

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

APH MEMBERS

Dr. John Tuinema - Acting Medical Officer of Health & CEO
Rick Webb - Director of Corporate Services
Kristy Harper - Director of Health Promotion & Chief Nursing Officer
Leo Vecchio - Manager of Communications
Leslie Dunseath - Manager of Accounting Services
Tania Caputo - Board Secretary

GUESTS: Nicole Lindahl - Manager of Emergency Preparedness and Response
Joesph Clark – Blackstone Energy and Trevor Rising – APH Engineer Consultant (in-camera presentation)

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- | | | |
|------|---|---------------|
| 1.0 | Meeting Called to Order
a. Land Acknowledgment
b. Roll Call
c. Declaration of Conflict of Interest | S. Hagman |
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 | | |
| 2.0 | Adoption of Agenda
<div style="background-color: #cccccc; padding: 2px; margin: 5px 0;">RESOLUTION</div> THAT the Board of Health agenda dated June 26, 2024 be approved as presented. | S. Hagman |
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 | | |
| 3.0 | Delegations / Presentations
a. Public Health Emergency Management | N. Lindahl |
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 | | |
| 4.0 | Adoption of Minutes of Previous Meeting
<div style="background-color: #cccccc; padding: 2px; margin: 5px 0;">RESOLUTION</div> THAT the Board of Health meeting minutes dated May 22, 2024, be approved as presented. | S. Hagman |
|
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| 7.0 | Business Arising from Minutes | |
|
 | | |
| 8.0 | Reports to the Board
a. Medical Officer of Health and Chief Executive Officer Reports <ul style="list-style-type: none"> i. MOH Report - June 2024 <ul style="list-style-type: none"> • APH Annual Report <div style="background-color: #cccccc; padding: 2px; margin: 10px 0;">RESOLUTION</div> THAT the report of the Medical Officer of Health and CEO for June 2024 be accepted as presented. | J. Tuinema |
|
 | | |
| | b. Finance and Audit <ul style="list-style-type: none"> i. Finance and Audit Committee Chair Report <div style="background-color: #cccccc; padding: 2px; margin: 10px 0;">RESOLUTION</div> THAT the Board of Health accepts the Finance and Audit Committee Chair Report as presented. | L. Morrisette |

ii. **Unaudited Financial Statements ending April 30, 2024**

RESOLUTION

THAT the Board of Health approves the Unaudited Financial Statements for the period ending April 30, 2024, as presented. *L. Morrisette*

9.0 New Business/General Business *S. Hagman*

10.0 Correspondence - requiring action *S. Hagman*

11.0 Correspondence - for information

- a. alPHa Information Break - June 2024 *S. Hagman*
- b. alPHa Conference Report - June *D. McConnell*

12.0 Addendum *S. Hagman*

13.0 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.

14.0 Open Meeting *S. Hagman*

Resolutions resulting from in-camera meeting.

15.0 Announcements / Next Committee Meetings: *S. Hagman*

Governance Committee Meeting

Wednesday, September 11, 2024 @ 5:00 pm
SSM Algoma Community Room | Video Conference

Board of Health

Wednesday, September 25, 2024 @ 5:00 pm
SSM Algoma Community Room | Video Conference

16.0 Evaluation - Annual *S. Hagman*

17.0 Adjournment *S. Hagman*

RESOLUTION

THAT the Board of Health meeting adjourns.

Public Health Emergency Management

Presenter: Nicole Lindahl

Date: June 26, 2024

Overview

- Emergency Management
- Components of Emergency Management Programs
- Public Health and Emergency Management

Strategic Directions



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



Improve the impact and effectiveness of Algoma Public Health programs.



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

PUBLIC HEALTH

Ontario Public Health Standards

Emergency Management

Emergencies can occur anywhere and at any time. Boards of health regularly experience new and emerging events ranging from infectious diseases such as SARS, the H1N1 influenza pandemic, and Ebola virus disease to extreme weather events and environmental hazards such as flooding and forest fires.

Effective emergency management ensures that boards of health are ready to cope with and recover from threats to public health or disruptions to public health programs and services. This is done through a range of activities carried out in coordination with other community partners.

This planning, and its associated activities, is a critical role in strengthening the overall resilience of boards of health and the broader health system. Ministry policy and expectations to support a ready and resilient health system will be outlined separately.

Goal

To enable consistent and effective management of emergency situations.

Program Outcome

- The board of health is ready to respond to and recover from new and emerging events and/or emergencies with public health impacts.

Requirement


1. The board of health shall effectively prepare for emergencies to ensure 24/7 timely, integrated, safe, and effective response to, and recovery from emergencies with public health impacts, in accordance with ministry policy and guidelines.⁵

Emergency Management Guideline, 2024

Ministry of Health
Effective: February, 2024

ISBN 978-1-4868-7720-1(PDF)
© King's Printer for Ontario, 2024.

Citation: Ontario. Ministry of Health. Emergency Management Guideline, 2024. Toronto, ON: King's Printer for Ontario, 2024.

Ontario 

Emergency Management

- The ultimate purpose of emergency management is to **save lives**, **preserve the environment** and **protect property** and the **economy**.
- The protection of life is of paramount importance.



Emergency Management in Ontario

In Ontario, municipal and ministry Emergency Management Programs are legislated by the Emergency Management and Civil Protection Act (EMCPA)¹.

Emergency Management Ontario (EMO) coordinates emergency management programs in the province and ensures the implementation in all municipalities and provincial ministries².

1. Emergency Management and Civil Protection Act, R.S.O. 1990, c. E.9 (2023).

2. Emergency Management Ontario. 2024. Emergency management in Ontario. <https://www.ontario.ca/page/emergency-management-ontario>

Emergency Management Programs

Public Health

Public health emergency management programs must be built to:

- respond to disruptions and emergencies that may affect the health of the public, and/or
- respond to disruptions and emergencies that may affect day-to-day operations of the public health unit, and
- align with municipal, provincial, and health sector partner programs.

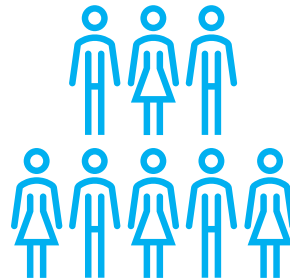
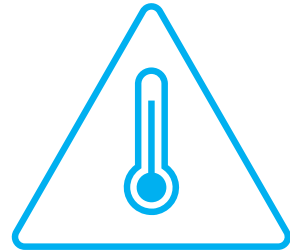
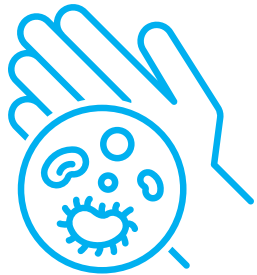
Emergency Management Programs

Algoma Public Health

- The Emergency Management Program is part of **Foundations and Strategic Support Team (FASST)**.
- As a foundational standard, emergency management should be incorporated into every aspect of public health policy and programming.
- Algoma Public Health's emergency management program spans the entire emergency management cycle (**prevention**, **mitigation**, **preparedness**, **response**, and **recovery**).

Emergency Management Programs

Algoma Public Health - Preparedness



- Planning
 - Hazard Identification Risk Assessment (HIRA)
 - Emergency Response Plan (ERP)
 - Continuity of operation and surge planning
- Training
 - Capacity building

Emergency Management Programs

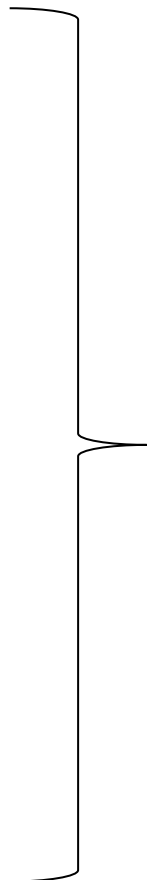
Algoma Public Health - Preparedness



- Exercises
 - Internal
 - Municipal & Partner
 - Provincial
- Collaboration

Emergency Management Programs

Preparedness & Response - Community Engagement & Collaboration



Health sector	Long term care homes	Retirement homes	First responder agencies
Enforcement agencies	Municipalities	First Nation, Métis, and Inuit partners	Childcare settings
Primary, secondary, and post-secondary schools	Workplaces	Community organizations	Congregate living settings
Priority populations	Social services	Air and land border agencies	Correctional facilities
	Emergency management organizations	Provincial organizations or agencies	

Emergency Management Programs

Algoma Public Health - Response



- Incident Response
 - Incidents with public health impacts
 - Incidents impacting operation of APH

Emergency Management Programs

Algoma Public Health - Response

- Emergency Operations Centre
- 24/7 on call program
- Evaluation
 - Debrief/After-Action Review



Next Steps

- Recommendation implementation
- Implementing the new Emergency Management Guideline
- Building and maintaining partnerships in the community
- Continuing to prepare for and respond to incidents with public health impacts





Questions?

Chi-Miigwech. Merci. Thank You.

PUBLIC HEALTH



Algoma
PUBLIC HEALTH
Santé publique Algoma

June 26, 2024

Report of the

Medical Officer of Health / CEO

Prepared by:
Dr. John Tuinema and the
Leadership Team

Presented to:
Algoma Public Health Board of Health

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APH AT-A-GLANCE

Annual Report

We are very pleased to provide both the Board of Health and the public with our annual report for 2023. This report highlights work that we have done in 2023 throughout our communities. Although it is not inclusive of everything we do, we hope that these highlights demonstrate the breadth and depth of the activities we engage in to protect and promote the health of everyone in Algoma. This year's theme is 'Back to Basics'. The global pandemic put a pause on much of public health's important work, which has been an unfortunate setback. 2023 was a year of recovery and reinvigoration as we returned to much of the core work of public health that could not be addressed due to the COVID-19 response. The program data in this report is from 2023, so they do not represent the full scope of our recovery as we enter the second half of 2024, but the early progress is evident and will continue to improve dramatically throughout 2024 and beyond.

Community Health Profile

APH is also getting closer to finalizing the much-awaited Community Health Profile (CHP). This profile will highlight the significant health trends and data for Algoma to help inform planning and action both within APH and for community partners. It is expected to be completed this summer, and we are currently organizing a launch event to kick off the knowledge dissemination phase of the CHP project.

OPHS Review

One pillar of Ontario's plan to strengthen public health is a review of the Ontario Public Health Standards (OPHS). This review is underway, and local public health agencies are being consulted for feedback on one draft OPHS document and 14 draft protocols. After significant review, we submitted our feedback to the ministry and will continue to participate in the ongoing evolution of the OPHS.

Back to Basics

Public Health at Work in Algoma
2023 Report to the Community

A Message from the Board of Health Chair

In 2023, we transitioned from our emergency response to the COVID-19 global pandemic and refocused on restoring our core public health work. This includes population health assessment, health surveillance, health protection, disease and injury prevention, health promotion, as well as emergency preparedness and response.

This report to the community incorporates a public health balanced scorecard approach to capture the work of our programs as we prioritize the health needs of our community. A balanced scorecard approach helps us monitor our programs in four key areas: health status, community engagement, resources and services, and system integration and responsiveness. By using this structured approach, we can effectively measure our progress, identify areas for prioritization, development and improvement, and make informed decisions to grow our workforce, advance partnerships and ultimately enhance health outcomes for everyone in our community.

One highlight from 2023 was our collaboration with Indigenous partners to create a more welcoming, safer, and more culturally humble environment. We included Anishinaabemowin and Illilimowin on our external signage to show respect for the original languages of this land, helping Indigenous clients feel more comfortable accessing public health services. This effort is part of APH's broader Indigenous engagement strategy, focusing on Respect, Commitment, Trust, and Self-Determination, all aimed at the shared goal of Truth and Reconciliation.

This report showcases the breadth of the work we do across the Algoma region to promote and protect community health. As we get back to basics, we remain steadfast in our vision: health for all, together.

Sally Hagman

Chair, Board of Health

Dr. Jennifer Loo

Medical Officer of Health/CEO

2023 Board of Health

Member	Approved By
Sally Hagman (Chair)	Township of Blind River, Township of Spanish, Township of North Shore
Luc Morrisette (1st Vice-Chair / Chair of the Finance and Audit Committee)	City of Elliot Lake
Deborah Graystone	Province of Ontario
Julila Hemphill	The Municipality of Wawa, Township of White River, Township of Dubreuville
Don McConnell, (2nd Vice-Chair /Chair of the Governance Committee)	Province of Ontario
Loretta O'Neill	City of Sault Ste. Marie
Matthew Shoemaker	City of Sault Ste. Marie
Sonia Tassone	City of Sault Ste. Marie
Suzanne Trivers	Town of Thessalon, Municipality of Huron Shores
Jody Wildman	Town of Bruce Mines, Village of Hilton Beach & Townships of Hilton, Jocelyn, Johnson, Laird, Macdonald, Meredith & Aberdeen Additional, Plummer Additional, Prince, St. Joseph, Tarbutt Township



Healthy Growth and Development

GOAL: To achieve optimal preconception, pregnancy, newborn, child, youth, parental, and family health.

- Mental health concerns during and post-pregnancy have been increasing in Algoma.
- Alcohol and tobacco use during pregnancy has declined, but gestational cannabis and drug use has risen in the last two years.
- APH works to provide parenting supports and promote resilience and optimal early childhood growth and development.
- Across the program area, there are public health nurses, a registered practical nurse, family support workers, a health promotion specialist and clerical support.



824

live births across
Algoma



47.7

pregnancies per 1,000
females aged 15-49



6.7

deaths per 1,000 live
births



592

calls to consenting new
moms within 48 hours
of new baby being born
across Algoma



198

home visits across
Algoma



89

Healthy Babies Healthy
Children families
who receive ongoing
support



17

community partners that APH
collaborates with to deliver the
Community Action Program
for Children and the Canadian
Prenatal Nutrition Program to
improve the health of pregnant
individuals and support
equitable health outcomes



109

community members
enrolled in the Canada
Prenatal Nutrition
Program

17

Canada Action Program
for Children delivered



13

health equity
focused community
partnerships/outreach
to decrease health
inequities in priority
populations



17

parenting classes
delivered



56

visits with EarlyON
Centres to support
programs



3

community partnership
agreements



6

needs assessments
to engage the public
and partners on future
supports for parents/
caregivers

Healthy Growth and Development

Re-engagement of the Sault Ste Marie and Algoma Child and Family Network Planning Action Table

APH serves as one of the chairs of the Planning Action Table, that brings together **20** community agencies across Algoma that work with children and families to:

1. serve as the reference group for children's issues
2. create an integrated system of support services informed by community and parent engagement
3. enhance existing services and innovative approaches to support healthy child development, early learning and care.

Childcare

- All Star Children's Services
- Elliot Lake Child and Family Centre EarlyON (All Star)
- Blind River EarlyON Child and Family Centre (All Star)
- EarlyON Prince Centre
- Superior Children's Centre/ EarlyON (Wawa)
- Child Care Algoma/EarlyON

Education

- Algoma District School Board (ADSB)
- Conseil Scolaire Public du Grand Nord de l'Ontario
- Conseil Scolaire Catholique Nouvelon
- Huron Superior Catholic District School Board (HSCDSB)

Indigenous

- Nogdawindamin
- Metis Nation of Ontario
- Sault Ste. Marie Indigenous Friendship Centre/EarlyON (SSM IFC)

Municipal

- District of Sault Ste. Marie Social Services Administrative Board
- Sault Ste. Marie Public Library
- Sault Ste. Marie Innovation Centre
- Algoma District Services Administrative Board

Community Services

- Algoma Family Services
- Community Living Algoma (CLA)
- THRIVE

Health

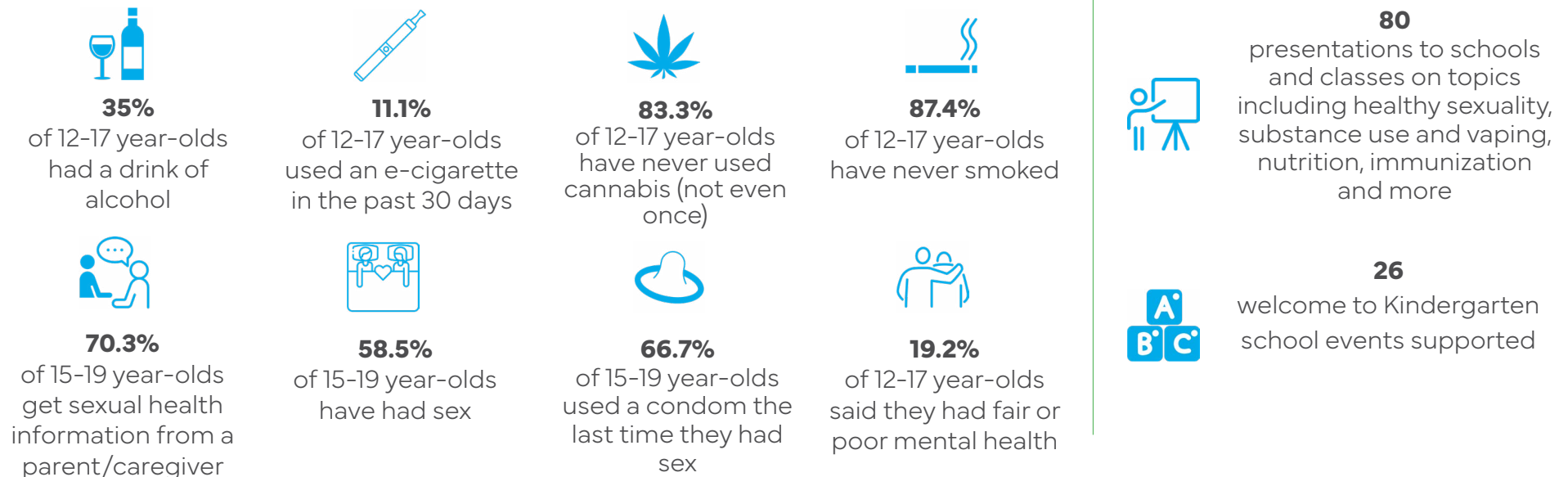
- Algoma Public Health

School Health

GOAL: To achieve optimal health of school-aged children and youth through partnership and collaboration with school boards and schools.

- APH works to support school communities including parents, schools, school boards, students, and educators in achieving comprehensive school health with a focus on food and nutrition, healthy sexuality, substance use, mental health and resiliency and vaccine confidence
- Across the program area, there are public health nurses, a registered dietitian, a health promotion specialist and clerical support.

Child and youth self reported health behaviours in Algoma



Algoma Youth Wellness Hub (AYWH)



Algoma Public Health has been participating in Algoma Youth Wellness Hub partnership meetings since August 2022. In December 2023, the hub opened its Dennis Street site to youth aged 12 to 25. Staff from School Health and Community Wellness sit on the AYWH Action Team where we are working together to determine how to best support the youth in our community through this initiative.

Health Promotion

School Health

2023

Coverage rates for school immunizations (2022-2023 school year). Catch-up clinics continue into 2024.

12-year olds

 **59.6%** Hepatitis B

 **56.6%** HPV

 **78.1%** Meningococcal

 Immunized  Not immunized

17-year olds

 **48.7%** Tetanus

 **48.7%** Diptheria

 **48.5%** Pertussis



101

immunization clinics offered in
schools across Algoma



6,115

vaccines given in school
immunization clinics

Coordination of the Northern Fruit and Vegetable Program



The Northern Fruit and Vegetable Program is a collaborative effort across Northern Ontario. The program provides a minimum of two servings of Ontario grown vegetable and fruits per week from January to June to all elementary students.



Elementary schools participating: **52**

Number of students receiving fruits and vegetables in school two times a week across Algoma: **10,951**

Number of weeks offered in schools: **20**

Relationship with schools

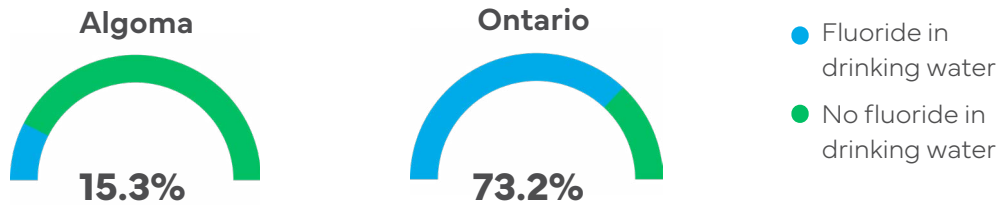
Our relationship with the school communities is a vital characteristic of the School Health program. Public Health Nurses have alignments with each school board and school across the district. We collaborate with these partners to reach the shared goal of improving the health of children and youth through the school setting.

Oral Health

GOAL: To achieve optimal oral health in school-aged children and seniors and reduce the burden of chronic disease.

- Two in every 5 students entering school in Algoma, has current or a history of tooth decay.
- Only 3 in 10 senior residents in Algoma reported having dental insurance coverage.
- APH works to ensure school-aged children and older adults across Algoma have good oral health.
- Across the program area there are registered dental hygienists, dental health educators and clerical support.

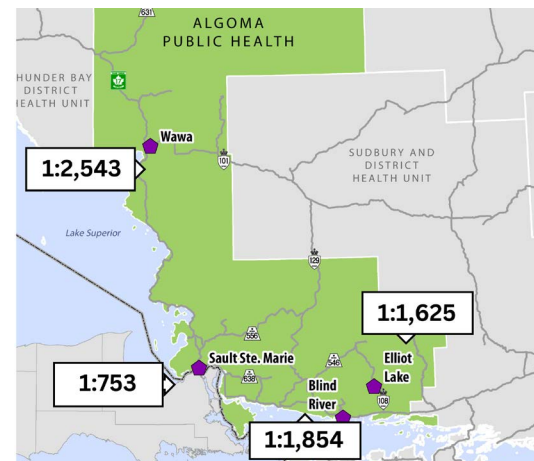
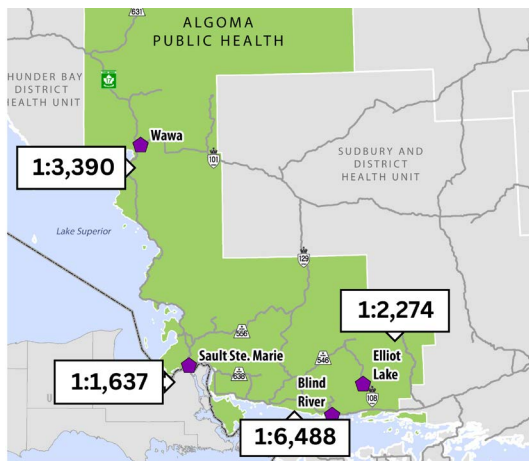
Community Water Fluoridation



In Algoma, Blind River, Elliot Lake and Wawa have access to community water fluoridation (**15.3%** of the population) compared to **73.2%** of Ontarians who benefit from fluoridated water.

In Algoma, on average, there is one dentist for **1,961.4 people**, compared to Ontario where there is one dentist for every **1,230 people**.

In Algoma, on average, there is one registered dental hygienist for every **930 people** compared to Ontario where there is one dental hygienist for every **1,028 people**.



Oral Health



52

elementary schools across the district partner with APH, leading to the successful dental screening of 100% of elementary schools in Algoma



4,312

children had dental screening in a school setting.

Central and East Algoma: 254
Elliot Lake: 192
Sault Ste. Marie: 3,200
North Algoma: 283



165

children enrolled in the Healthy Smiles Ontario (HSO) through school screenings. HSO provides oral health coverage for eligible children



1,038

community members supported with oral health information and system navigation

Ontario Seniors Dental Care Program (OSDCP)



654

seniors accessed care through the Ontario Seniors Dental Care Program



197

community members received dentures.

Elliot Lake: 90
Sault Ste. Marie: 104
Wawa: 3



Photo: l - r, Dennis Delguidice, APH dental hygienist

//

Being on this program has motivated me with my oral health.

//

- Dennis Delguidice
(OSDCP client)

Partnership: Garden River Wellness Centre



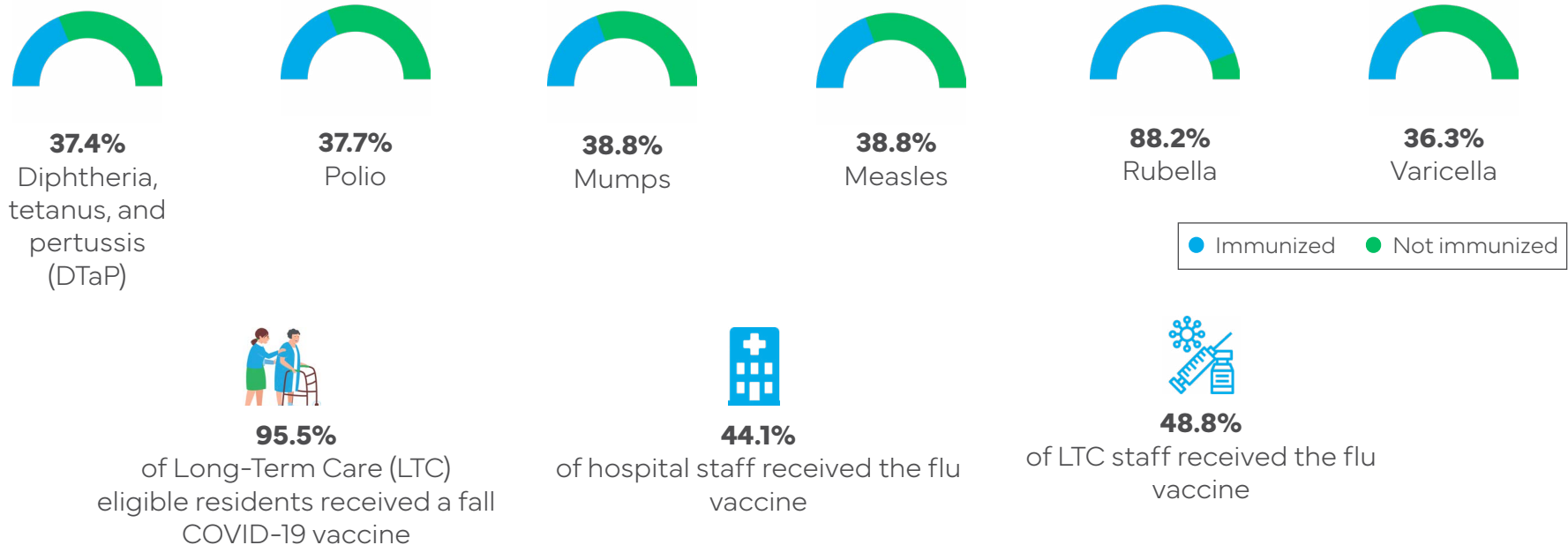
Algoma Public Health partners with Garden River Wellness Centre to offer the Children's Oral Health Initiative (COHI). This program offers free, preventative, oral health services and education to children up to 8 years of age; their caregivers; and pregnant people in the community. Services provided by COHI help parents and children learn healthy oral health habits and reduce tooth decay.

Immunization

GOAL: To reduce or eliminate the burden of vaccine preventable diseases through immunization.

- COVID affected coverage rates for childhood immunizations due to interruption of health services and APH continues to support catch up of these vaccines.
- The immunization program at APH works to ensure vaccines in Algoma are safe and effective, that there is high uptake of vaccines in Algoma residents, including priority populations particularly impacted by vaccine preventable disease
- Across the program area, there are public health nurses and clerical support.

Coverage rates for childhood immunizations (7 year olds, 2022-2023 school year) and priority populations



85

fridge inspections for partners in Algoma ensure that vaccines for the community are kept at the right temperatures



32

pharmacies that participate in Universal Influenza Immunization Program coordinated by APH



18,000

doses of flu vaccine distributed
1,126
doses of respiratory syncytial virus (RSV) distributed

Health Protection

Immunization

2023

78 doses of rabies vaccine released



As situations arise, APH works with health partners to protect community members from rabies by releasing vaccine when needed. In the past year, the majority of rabies vaccine was released to be administered to community members following animal bites. The immunization program collaborated closely with public health inspectors to manage these cases effectively. Additionally, some individuals received vaccinations due to occupational requirements or as a precaution for travel, work, or volunteer activities.

10 clinics held in community settings or communities with no APH office

- White River
- Dubreuilville
- Spanish
- St. Joseph Island
- Desbarats
- Thessalon
- Iron Bridge
- Mennonite community (3x)

Partners we work with

- Physicians
- Public Hospitals
- Long-Term Care Facilities
- Retirement Homes
- Health Care Agencies
- Workplaces (Occupational Health)
- First Nations Partners
- Mennonite & Amish Partners
- Correctional Facilities
- Youth Justice Facilities
- Pharmacies
- Municipalities

Immunization School Pupils Act



For the first time in many years, the immunization program has issued notices regarding Immunization of School Pupils Act (ISPA).

This process was impacted by the COVID-19 pandemic. Initially over 5000 students records were not reported or up-to-date with ISPA requirements.

During the 2022-2023 school year, efforts to obtain records and provide catch up vaccination appointments to thousands of students in Algoma were instated to help make the school environment safer, protecting children from outbreaks due to vaccine preventable diseases. Catch-up clinics continue into 2024.

Adverse Events Following Immunization

To ensure the safety of vaccines, we continually monitor and review any reported adverse events. These reports are reviewed by Public Health Nurses, Medical Officer of Health, Associate Medical Officer of Health and then forwarded to Public Health Ontario.

Based on the review, we provide personalized recommendations to clients on how to proceed with their immunizations.

Chronic Disease Prevention and Well-being

GOAL: To reduce the burden of chronic diseases of public health importance and improve well-being.

- Vegetable and fruit consumption is declining, with only **21.7%** of people in Algoma 12 years old and over consuming vegetables and fruit 5 times a day.
- In Algoma, **52%** of adults 18 and older meet the Canadian Physical Activity Guideline.
- APH works to promote environments that support active living and opportunities for an active life style; and ensure access to safe, affordable and nutritious food across, supporting healthy relationships with food across the lifespan.
- Across this program there are public health nurses , a registered dietitian, a health promotion specialist and clerical support.



7.5%

of 3-17 year olds use active transportation

42.4%

of 18-65 year olds use active transportation



19.4%

of Algoma residents are food insecure

(do not have access to food due to financial constraints)

Measuring Food Affordability in Algoma

Each year, Algoma Public Health conducts the Ontario Nutritious Food Basket (NFB) survey to determine the cost of healthy eating for families and individuals in Algoma.

The 2023 NFB data indicates that the estimated monthly cost of eating for a single individual is **\$423.32** and the estimated monthly cost to feed a sample family of four is **\$1,180.92.**



1

Board of Health resolution issued to support income-based policies to reduce household food insecurity



2

public reports released: Community Partner Interview Report and Food Insecurity Infographic



10

municipalities across Algoma were consulted regarding updates and revisions of their municipal official plans to include "healthy built environment friendly" approaches



12

local, provincial and regional committees to promote community well-being

Chronic Disease Prevention and Well-being

The Community Project Interview

33 community partners from across Algoma to identify current barriers and facilitators (factors that make change easier) that community members face to improve healthy eating and active living (HEAL) behaviours.

Results from this Community Partner Interview Project reinforced the need for public health to work collaboratively with multiple sectors and groups to address the social determinants of health and create supportive environments that make the healthy choice the easy choice.

3 barriers to improving HEAL behaviours identified



Lack of access to transportation



Inadequate income



Food insecurity

3 facilitators for improving HEAL behaviours identified



Organizational resources



Community and social services



Built environment and urban design



Bike to work

The City of Sault Ste. Marie, the Sault Cycling Club and Algoma Public Health partnered to promote this week-long event that encouraged alternative modes of transportation which would be considered “greener” choices and helping to reduce our collective carbon footprint.

While promoting climate change friendly choices, this initiative also promotes increased physical activity, and progressive approaches in municipal planning related to healthy built environments.

Substance Use & Injury Prevention

GOAL: APH works to reduce the harms associated with substance use and injury prevention.

- Algoma experiences higher rates of substance use overall.
- Rate of hospitalization in Algoma due to falls is increasing since 2019.
- Algoma Public Health works closely with a variety of partners, to support the health, wellness, and safety of people who use substances.
- Across the program, there are public health nurses, a registered practical nurse, a health promotion specialist and clerical support.



21.1%

of residents 12 years and older report heavy drinking



407

Emergency Medical Service calls for suspected opioid poisoning



50

opioid related deaths. Opioid related mortality was **3 times higher** in Algoma than Ontario



16.2%

of those aged 20 years and older report smoking daily



The Northeastern Alcohol and Cannabis Team (NEACT)* collaborated to increase the reach of a mocktail campaign supporting Canada's Guidance on Alcohol and Health. Each public health unit contributed in various ways to the campaign, including message development, translation services, recipe sharing and video creation.

*NEACT is comprised of 5 Northern PHUs: Algoma Public Health, Porcupine Health Unit, Public Health Sudbury and Districts, North Bay Parry Sound Health Unit, Timiskaming Health Unit.



121,122 views on 13 mocktails videos promoting alcohol-free alternatives

Falls Prevention

Stay on Your Feet is a regional strategy aimed at improving the quality of life for older adults across northeastern Ontario. APH chairs the local Stay On Your Feet Coalition. Much of the focus was planning and promoting the STAND UP exercise classes for seniors.

The Seniors' Health Advisory Committee is hosted by APH.

Substance Use & Injury Prevention



Publishing peer-reviewed research on Northern Ontario's opioid-related deaths during the COVID-19 pandemic

APH submitted a research manuscript to a peer reviewed journal highlighting Northern Ontario disparities in opioid related deaths. Contributing to the evidence and demonstrating the unique needs of the North can help support advocacy efforts for enhanced programs, services and funding.

We are pleased to announce that the manuscript has been accepted for publication. It will also be featured in a "Special Section on the Public Health Response to the Overdose Crisis in Canada" in an upcoming issue of the Canadian Journal of Public Health.



15

community partner agreements to distribute harm reduction supplies



332,085

harm reduction supplies distributed



15,640

interactions at Needle Exchange Programs across all partner locations in Algoma



42

community partners with naloxone distribution service agreements



12,371

naloxone doses distributed



Toxic Drug Situational Assessment Interviews

The community wellness team has been engaging with community members and partners to better understand the toxic drug situation locally and how to move forward together to protect the wellbeing of people who use drugs and prevent harms related to substance use.

In December 2023, a workshop was organized with community partners to review findings from situational assessment interviews and analyze current strengths, weakness, opportunities, and threats. While the workshop provided valuable insight into the local context, the most invaluable aspect was connecting with partners in-person to listen to each other and ask questions about services and programs.

Health Protection

Infectious Diseases

2023

GOAL: To reduce the burden of communicable diseases and other infectious diseases of public health significance.

- The number of cases of invasive group A streptococcal disease (iGAS) and infectious syphilis are increasing while the rate of chlamydia and gonorrhea infections were lower in 2023 than previous years.
- APH works to support infection prevention and control (IPAC) in our community through monitoring/ surveillance of rates of reportable diseases to inform public health action, case and contact management of reportable diseases, access to testing and treatment for priority populations, inspection of facilities to protect community members and offering support to facilities/partners throughout Algoma in creating environments that prevent infection and outbreaks.
- Across the program, there are public health nurses, public health inspectors, a nurse practitioner, a registered practical nurse, a health promotion specialist, a environmental assistant and program clerical.



44

cases of iGas
(Group A streptococcal disease)



62

new cases of latent
Tuberculosis (TB)



52

cases of Hepatitis C



1

community outbreak of
pertussis (e.g., whooping
cough)
(17 cases from this outbreak)



252

cases of Chlamydia



56

cases of Gonorrhea



44

cases of Syphilis



1,706

low cost/no cost birth control
provided



1,536

Nurse Practitioner services
provided



20,941

condoms distributed

605 diseases of public health significance were managed in 2023. This includes iGAS (Invasive group A streptococcal disease), pertussis, varicella (e.g., chicken pox) and TB. Some diseases, like latent TB infections require follow up by APH for 3 months up to a year or more.

To support improved access for priority populations, APH's nurse practitioner collaborated with multiple community partners to offer a community clinic to do PAP smear for unattached patients. A Pap smear, also called a Pap test, is a procedure to test for cervical cancer in women.

Health Protection

Infectious Diseases

2023



50

licensed daycares
inspected



204

personal service
settings inspected



66

congregate living
settings inspected

HIV point of care testing offered

HIV testing is offered through a rapid point of care test and can be done anonymously. This approach to testing helps to identify undiagnosed individuals as early as possible to link them to care with hopes for the opportunity to live long, healthy lives and to prevent ongoing infections in our communities through contact management. We offer support, education, and access to medical care for treatment of this infection.

APH Infection Prevention and Control (IPAC) Hub

- There are **61** agencies/organizations connected to the IPAC hub.
- APH provided **123** services to individual hub agencies/organizations.
- We engaged in a needs assessment for the IPAC hub to determine community partners needs. **25** agencies/organizations responded and this information was used to guide the IPAC hub community of practice sessions and information sharing in 2023.
- APH held **4** IPAC hub community of practice sessions attended by the following sectors: acute care, long term care, retirement homes, Public Health Ontario, group homes, shelters, corrections, recovery homes).

Outbreak management in facilities

As part of the outbreak management team, we help declare outbreaks in places like long-term care homes, retirement homes, correctional facilities, and treatment centers. We also provide education, supporting these facilities in managing outbreaks effectively



293

cases of human exposure to
animals that were followed up on.
This includes assessment of the
situation and release of rabies
exposure treatment if needed.



72

mosquito traps from 17 sites
across Algoma are processed to
monitor for West Nile Virus (WNV).

There have been **0** cases of WNV
over the last 10 years.



345

ticks processed to monitor for
Lyme disease.

There have been **9** cases of Lyme
disease from 2014-2023.

Health Protection

Food Safety

2023

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

- From 2019 to 2022, the average rate of food-borne illnesses in Algoma was 32 cases per 100,000 people.
- APH works to support community partners and the public in handling food safely, and respond effectively to mitigate local and emerging risks of food borne illness
- Across the program are there are public health inspectors, a health promotion specialist and clerical support.



58

cases of
foodborne illness
(Salmonella,
Campylobacter, E. Coli)



7

food handler courses
offered



422

food handlers certified



217

special event permits
issued



1,034

inspections for food
premises



2,982

entries in food safety campaign



9,392

views on food safety webpage



Public Health Inspectors (PHI) work diligently to respond to food safety related complaints within a 24-hour time frame.

Following a complaint, PHIs will complete a risk assessment to determine appropriate next steps.

105 food safety complaints responded to.



Home canning, mushroom foraging, fermented foods, backyard chicken coops, home based kitchens, and ghost kitchens have become increasingly popular within the Algoma district, requiring training for both Public Health Inspectors (PHI) and operators to ensure these emerging practices are conducted safely.

4 PHIs were trained to respond to specialty food products and preparation processes.

Safe Water

GOAL: 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.

- From 2019 to 2022, the average rate of water-borne illnesses in Algoma was 13.8 cases per 100,000 people.
- APH works to reduce the incidence of waterborne-illness and protect the public through a multi-barrier approach that includes surveillance/ monitoring of water quality to inform public health action, supporting operators of drinking water systems, and promoting public water safety
- Across the program area there public health inspectors, a health promotion specialist, environmental assistant, clerical support and learners.



4

waterborne illnesses



2

recreational water
advisories issued



49

adverse water quality
incidents responded to



15

drinking water
advisories issued



14

consultations provided
regarding private water
sampling results



38

public spas and pools
inspected



35

public beaches
inspected



1,512

views on interactive
beach map



Drinking Water Advisories

When adverse water quality results are received, public health inspectors collaborate with operators to review the findings, provide education and mitigation strategies, and issue advisories as needed. APH maintains an on-call system to ensure timely responses to water quality concerns and issues.

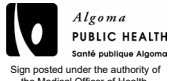
Safe Water



NOTICE

**THESE WATERS MAY CONTAIN
HIGH LEVELS OF BACTERIA
FOR UP TO 48 HOURS FOLLOWING
HEAVY RAINFALL, HIGH WINDS OR
INCREASED NUMBER OF WATERFOWL.**

**Prevent Swimmer's Itch:
Vigorously towel dry
after swimming.**



For further beach information visit: algomapublichealth.com

Our recreational water safety team sampled beaches throughout the Algoma district, covering more areas than in past years to help keep residents safe during the summer.

Permanent signs are posted at beaches across the district to inform users about current bacteria levels. These signs warn about possible high bacteria counts, caution about current high bacteria counts, and alert users to ongoing issues with water clarity and bacteria levels.

Partners we work with



- Ministry of Environment, Conservation and Parks
- Indigenous Services Canada
- Health Canada
- Public Health Ontario
- Public Health Labs
- Private Labs
- Municipalities
- Lake Associations
- Small Drinking Water System Operations
- Local Aviation companies
- Public Utility companies
- Local Water Treatment companies



Ongoing Collaboration with Public Health Ontario Lab for Accessible Water Sampling

Algoma Public Health has extended a user agreement with Public Health Ontario Lab to support small business operators with accessible water sampling. This partnership supports small business operators by ensuring they have access to a reliable water sampling and shipment program, facilitating ongoing public health and safety.

Health Protection

Healthy Environments

2023

GOAL: To reduce exposure to health hazards 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.

- The number of extremely hot days is going up every year and is expected to keep rising by 2030.
- In Algoma, from 2019 to 2023, there were 23.2 emergency department visits for cold-related illnesses per 100,000 people, which is more than the visits for heat-related issues.
- Algoma Public Health (APH) is working to address health risks, monitor climate change data to guide public health actions, and reduce exposure to health hazards through health education.
- Across the program, there are public health inspectors, a health promotion specialist and clerical support.



4

extreme heat events:
3 - Sault Ste. Marie
1 - Wawa



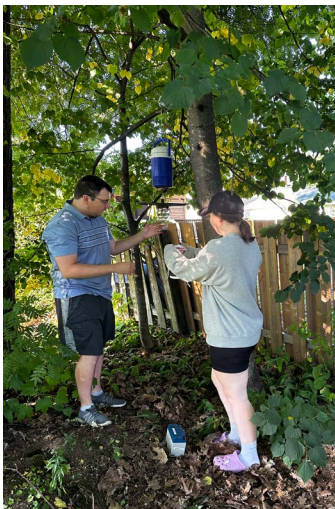
10

air quality advisories issued



188

health hazard complaints responded to (e.g., sewage, pests, indoor/outdoor air quality)



Collaboration with Health Canada and Environment and Climate Change Canada to install **Purple Air sensors** in select district locations that do not have access to air quality monitoring. Increased surveillance allows for improved health messaging and informed decision making. Several communities within the Algoma district do not have access to air quality monitoring. Proper air quality monitoring allows for the public to be informed and make appropriate decisions related to their health and the environment.

Through collaboration, three Purple Air sensors were sent to select district locations. Ongoing efforts are in place to explore the potential of additional air quality sensors.



We worked with the University of Toronto on a **research paper** that looked into how people get health information when the air quality is bad. Our contribution focused on the difficulties people in northern regions face when it comes to receiving this kind of information.

2023 Funding of Local Public Health

Municipal Levies <i>District of Algoma</i>	\$ 4,189,216
Public Health Funding <i>Ministry of Health</i>	\$ 14,288,528
Community Health Funding <i>Ministry of Children & Social Services, Ontario Health North East, Algoma Family Services</i>	\$ 1,468,596
Fees, Other Grants & Recoveries	\$ 593,000
Total for 2023	\$ 20,539,341



Financial fact! Did you know...

Local public health is funded by provincial and municipal taxpayer dollars. These dollars come from the same taxpayers.

In 2023, public health programs and services cost Algoma residents **\$182/ person** for the year, or **50 cents/person/day**, based on a 2021 census population estimate of 112,764 for the District of Algoma Health Unit.

Connect with Public Health

Join the Conversation

@algomahealth



Phone

Blind River: 705-356-2551 or 888-356-2551

Elliot Lake: 705-848-2314 or 877-748-2314

Sault Ste. Marie: 705-942-4646 or 866-892-0172

Wawa: 705-856-7208 or 888-211-8074

Email

contact@algomapublichealth.com

Website

algomapublichealth.com



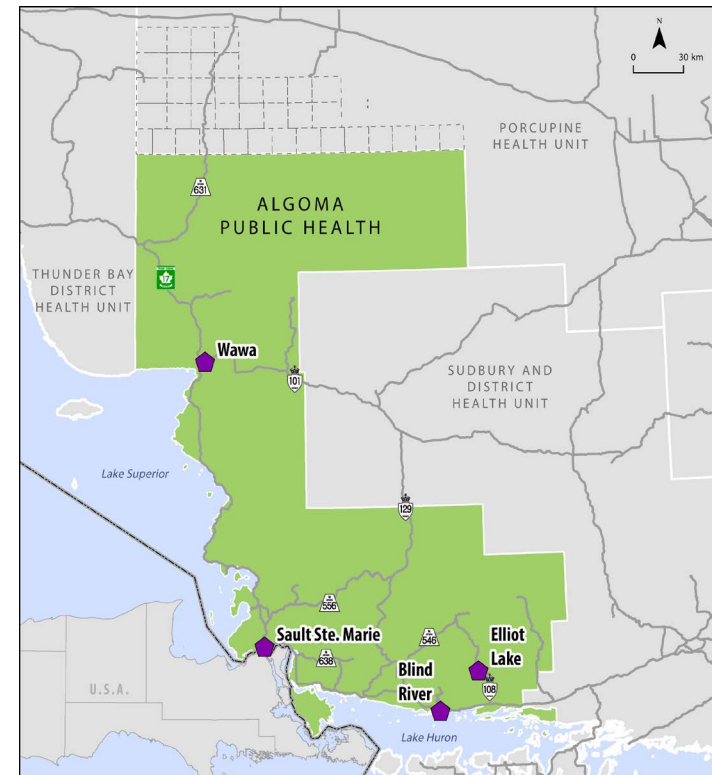
Algoma
PUBLIC HEALTH
Santé publique Algoma

THANK YOU

Algoma Public Health serves a vast area of over 41,000 square kilometers.

We are grateful for the strong partnerships we have with 21 municipalities, First Nations, Métis, Urban and Rural Indigenous communities, Amish and Mennonite communities, as well as various agencies and organizations across the region.

These collaborations are vital to our mission of promoting and protecting the health of our community and advancing health equity in Algoma.



References

Population health data for Healthy Growth and Development is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: reproductive health snapshot: 2020 – 2021. 2023. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Reproductive-and-ChildHealth/Reproductive-Health>
- BORN data, 2013–2023, BORN Ontario, BIS, Date extracted: 2024 Apr 03 [Data caveat: Data from First Nations communities are not included in this information, so this is under-reported.]
- IntelliHEALTH ONTARIO, Ontario Ministry of Health and Long-Term Care. Ontario Mortality Data, 2013 – 2021. Date Extracted: Sep 2023
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: maternal health snapshot 2021. 2023 [Cited 2024 Apr 03]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Reproductive-and-Child-Health/MaternalHealth>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: risk factors for healthy child development snapshot 2018 – 2021. 2023 [Cited 2024 Apr 03]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Reproductive-and-ChildHealth/Healthy-Child-Development>

Population health data for School Health is from the following sources:

- Statistics Canada. Canadian Health Survey on Children and Youth (CHSCY). 2019 [Cited 2024 Mar 21]. Available from: <https://www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&Id=1215270>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: smoking snapshot: 2019-2020. 2023 [Cited 2024 Apr 11]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Substance-Use/Smoking-Status>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Surveillance Report: Immunization coverage report for school pupils in Ontario: 2019-20 to 2022-23 School Years. 2024. Available from: https://www.publichealthontario.ca/-/media/Documents/I/24/immunization-coverage-2019-2023.pdf?rev=0f62fc40b08842a9a8b566bf3e6a17f7&sc_lang=en
- Public Health Ontario. Immunization Coverage Report for School Pupils in Ontario: 2019-20 to 2022-23 School Years. 2024. Available from: https://www.publichealthontario.ca/-/media/Documents/I/24/immunization-coverage-2019-2023.pdf?rev=ca05fc8fc60549bca7ce2294e93994aa&sc_lang=en

Population health data for Oral Health is from the following sources:

- Algoma Public Health. 2023. Oral Health Information Support System [2018-2019].
- Statistics Canada. Canadian Community Health Survey [2017-2018], Share File, Ontario MOHLTC.
- Office of the Chief Dental Officer of Canada, Public Health Agency of Canada. 2022. The State of Community Water Fluoridation across Canada. Available from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/community-water-fluoridation-across-canada.html#t1>
- Royal College of Dental Surgeons of Ontario. Dental Registry 2024. [APH email communication]
- IntelliHEALTH Ontario, Ontario Ministry of Health and Long-Term Care. Population Estimates [2017 – 2022]: 2024.
- College of Dental Hygienists of Ontario. Special data request: 2024. [APH email communication]

Population health data for Immunization is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Immunization coverage report for school pupils in Ontario: 2019-20 to 2022-23 school years. 2024. Available from: <https://www.publichealthontario.ca/en/Health-Topics/Immunization/Vaccine-Coverage>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Median influenza immunization coverage estimates among hospital and long-term care staff, 2022-23 influenza season, Ontario. 2023. Available from: <https://www.publichealthontario.ca/-/media/Documents/F/2023/>

factsheet-influenza-immunization-rates-hcw-2022-23.pdf?rev=1d078e54721e4a638d455e96afb993f5&sc_lang=en#:~:text=The%20number%20of%20LTCH%20and,%2058.1%25%2C%20respectively).

- Capacity Planning and Analytics Division (CPAD). SAS Visual Analytics Hub. COVID-19 Vaccine resources. [Secure database]. Extracted April 11th, 2024.

Population health data for Chronic Disease Prevention & Well-being is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Technical notes: household food insecurity snapshot 2023 [Cited 2024 Apr 05]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Health-Equity/Household-Food-Insecurity>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: nutrition and healthy weights snapshot 2020. 2023 [Cited 2023 May 13]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/HealthBehaviours/Nutrition-and-Healthy-Weights>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: physical activity snapshot: 2017-2018. 2023 [Cited 2023 May 13]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Health-Behaviours/Physical-Activity>
- Statistics Canada. Canadian Health Survey on Children and Youth (CHSCY). Ottawa, ON: Statistics Canada; 2019. Available from: <https://www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&Id=1215270>

Population health data for Substance Use & Injury Prevention is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: cannabis harms snapshot: age-standardized (both sexes) 2022. 2024 [Cited 2024 Apr 11]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Substance-Use/Cannabis-Harms>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: alcohol use snapshot: age standardized (both sexes) 2019-2020. 2023 [Cited 2024 Apr 11]. Available from: <https://www.publichealthontario.ca/en/Dataand-Analysis/Substance-Use/Alcohol-Use> Available from: <https://www.publichealthontario.ca/en/data-and-analysis/substanceuse/cannabis-harms>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Interactive opioid tool. 8th revision. 2024. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Commonly-Used-Products/Interactive-Opioid-Tool>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: smoking snapshot: self-reported adult daily smoking, age-standardized (both sexes), 2015-2016. 2023 [Cited 2024 Apr 11]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Substance-Use/Smoking-Status>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Snapshots: hospitalization for injuries snapshot: 2022. 2024. [Cited 2024 Apr 11]. Available from: <https://www.publichealthontario.ca/en/Data-and-Analysis/Injuries-Data/InjuryHospitalization>

Population health data for Infectious Disease is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infectious diseases query: Case counts and crude rates of reportable diseases by year. 2023. [Date extracted: April 3rd, 2024]. Available from: <https://www.publichealthontario.ca/data-and-analysis/infectious-disease/id-query>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infectious diseases query: Case counts and crude rates of reportable diseases by year. 2023. [Date extracted: April 3rd, 2024] Available from: <https://www.publichealthontario.ca/data-and-analysis/infectious-disease/id-query>

Population health data for Food Safety is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infectious diseases query: Case counts and crude rates of reportable diseases by year. 2023. [Date extracted: April 3rd, 2024] Available from: <https://www.publichealthontario.ca/data-and-analysis/infectious-disease/id-query>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infectious diseases query: Case counts and crude rates of reportable diseases by year. 2023. [Date extracted: April 3rd, 2024] Available from: <https://www.publichealthontario.ca/data-and-analysis/infectious-disease/id-query>

query

Population health data for Safe Water is from the following sources:

- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infectious diseases query: Case counts and crude rates of reportable diseases by year. 2023. [Date extracted: April 3rd, 2024] Available from: <https://www.publichealthontario.ca/data-and-analysis/infectious-disease/id-query>

Population health data for Healthy Environments is from the following sources:

- Environment Canada. Criteria for public weather alerts. 2024. Available from: <https://www.canada.ca/en/environment-climate-change/services/types-weather-forecasts-use/public/criteria-alerts.html#n-Ontario>
- Environment Canada. Daily data report for 2023. 2024. Available from: https://climate.weather.gc.ca/climate_data/daily_data_e.html?timeframe=2&hly-Range=2012-03-20%7C2024-04-03&dlyRange=2012-03-20%7C2024-04-03&mlyRange=%7C&StationID=50092&Prov=ON&urlExtension=_e.
- Ministry of the Environment, Conservation and Parks. Air Quality Ontario. [Air quality alert notifications]. 2024. Available from: <https://www.airqualityontario.com/>

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**Algoma Public Health
(Unaudited) Financial Statements**

April 30, 2024

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Algoma Public Health
Statement of Operations
April 2024
(Unaudited)

	Actual YTD 2024	Budget YTD 2024	Variance Act. to Bgt. 2024	Annual Budget 2024	Variance % Act. to Bgt. 2024	YTD Actual/ YTD Budget 2024
Public Health Programs (Calendar)						
Revenue						
Municipal Levy - Public Health	\$ 2,220,284	\$ 2,220,285	\$ (1)	\$ 4,440,569	0%	100%
Provincial Grants - Cost Shared Funding	2,961,063	3,340,070	(379,007)	10,020,210	-11%	89%
Provincial Grants - Public Health 100% Prov. Funded	785,423	762,267	23,156	2,286,800	3%	103%
Provincial Grants - Mitigation Funding	0	0	-	0	-	-
Fees, other grants and recovery of expenditures	141,973	101,867	40,106	494,600	39%	139%
Total Public Health Revenue	\$ 6,108,743	\$ 6,424,488	\$ (315,745)	\$ 17,242,179	-5%	95%
Expenditures						
Public Health Cost Shared	\$ 5,089,782	\$ 5,019,805	\$ (69,977)	\$ 14,913,154	1%	101%
Public Health 100% Prov. Funded Programs	837,663	789,612	(48,051)	2,329,026	6%	106%
Total Public Health Programs Expenditures	\$ 5,927,445	\$ 5,809,417	\$ (118,028)	\$ 17,242,180	2%	102%
Total Rev. over Exp. Public Health	\$ 181,297	\$ 615,070	\$ (433,773)	\$ 0		

Healthy Babies Healthy Children (Fiscal)

Provincial Grants and Recoveries	\$ 89,011	89,001	10	1,068,011	0%	100%
Expenditures	90,378	89,991	(387)	1,068,011	0%	100%
Excess of Rev. over Exp.	(1,367)	(990)	(377)	0		

Public Health Programs (Fiscal)

Provincial Grants and Recoveries	\$ -	0	-	-	#DIV/0!	#DIV/0!
Expenditures	40,200	-	(40,200)	-	#DIV/0!	#DIV/0!
Excess of Rev. over Fiscal Funded	(40,200)	-	(40,200)	-		

Fiscal Programs

Revenue						
Provincial Grants - Community Health	\$ 13,513	\$ 13,513	\$ 0	\$ 262,153	0%	100%
Municipal, Federal, and Other Funding	56,722	56,722	-	114,447	0%	100%
Other Bill for Service Programs	0	0	-	-	#DIV/0!	#DIV/0!
Total Community Health Revenue	\$ 70,235	\$ 70,235	\$ 0	\$ 376,600	0%	100%
Expenditures						
Brighter Futures for Children	11,047	9,650	(1,397)	114,447	14%	114%
Nurse Practitioner	14,264	13,625	(639)	162,153	5%	105%
Stay on Your Feet	8,644	8,460	(184)	100,000	2%	102%
Total Fiscal Community Health Programs	\$ 33,955	\$ 31,736	\$ (2,219)	\$ 376,600	7%	107%
Total Rev. over Exp. Fiscal Community Health	\$ 36,280	\$ 38,499	\$ (2,219)	\$ (0)		

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 Four Months Ending April 30, 2024

(Unaudited)

	Actual YTD 2024	Budget YTD 2024	Variance Bgt. to Act. 2024	Annual Budget 2024	Variance % Act. to Bgt. 2024	YTD Actual/ Annual Budget 2024	Comparison Prior Year:		
							YTD Actual 2023	YTD BGT 2023	Variance 2023
Levies Sault Ste Marie	1,544,238	1,544,238	0	3,088,475	0%	50%	1,456,828	1,456,828	(0)
Levies District	676,047	676,047	(1)	1,352,094	0%	50%	637,781	637,780	1
Total Levies	2,220,284	2,220,285	(1)	4,440,569	0%	50%	2,094,609	2,094,608	0
MOH Public Health Funding	2,961,063	3,340,070	(379,007)	10,020,210	-11%	30%	2,931,737	2,931,733	4
Total Public Health Cost Shared Funding	2,961,063	3,340,070	(379,007)	10,020,210	-11%	30%	2,931,737	2,931,733	4
MOH Funding - MOH / AMOH Top Up	50,916	52,767	(1,851)	158,300	-4%	32%	60,840	63,100	(2,260)
MOH Funding Northern Ontario Fruits & Veg.	39,134	39,133	1	117,400	0%	33%	39,134	39,133	1
MOH Funding Unorganized	176,800	176,800	0	530,400	0%	33%	176,800	176,800	0
MOH Senior Dental	460,907	460,900	7	1,382,700	0%	33%	417,633	417,633	(0)
MOH Funding Indigenous Communities	32,666	32,667	(1)	98,000	0%	33%	32,666	32,667	(1)
OTF COVID-19 Extraordinary Costs	25,000	0	25,000	0	#DIV/0!	100%	(6,954)	0	(6,954)
Total Public Health 100% Prov. Funded	785,423	762,267	23,156	2,286,800	3%	34%	720,119	729,333	(9,214)
Total Public Health Mitigation Funding	0	0	0	0	#DIV/0!	0%	0	345,933	(345,933)
Recoveries from Programs	16,044	10,000	6,044	29,600	60%	54%	3,592	3,333	259
Program Fees	15,925	14,867	1,058	45,000	7%	35%	13,167	19,867	(6,700)
Land Control Fees	31,630	27,000	4,630	225,000	17%	14%	22,275	45,000	(22,725)
Program Fees Immunization	29,975	15,000	14,975	45,000	100%	67%	7,122	30,000	(22,878)
HPV Vaccine Program	0	0	0	20,000	#DIV/0!	0%	0	0	0
Influenza Program	0	0	0	16,000	#DIV/0!	0%	0	0	0
Meningococcal C Program	0	0	0	9,000	#DIV/0!	0%	0	0	0
Interest Revenue	47,899	35,000	12,899	105,000	37%	46%	67,250	10,928	56,322
Other Revenues	500	0	500	0	#DIV/0!	100%	0	5,000	(5,000)
Total Fees and Recoveries	141,973	101,867	40,106	494,600	39%	29%	113,406	114,128	(722)
Total Public Health Revenue Annual	6,108,743	6,424,488	(315,745)	17,242,179	-5%	35%	5,859,870	6,215,736	(355,865)
Public Health Fiscal April 2024 - March 2025									
Infection Prevention and Control Hub	0	0	0	0	#DIV/0!	0%			
Total Provincial Grants Fiscal	0	0	0	0	#DIV/0!	0%	0	0	0

Algoma Public Health
Expense Statement- Public Health
 For Four Months Ending April 30, 2024
(Unaudited)

	Actual YTD 2024	Budget YTD 2024	Variance Act. to Bgt. 2024	Annual Budget 2024	Variance % Act. to Bgt. 2024	YTD Actual/ Budget 2024	Comparison Prior Year:		
							YTD Actual 2023	YTD BGT 2023	Variance 2023
Salaries & Wages	3,342,575	3,382,403	39,828	10,236,247	-1%	33%	\$ 3,350,204	\$ 3,566,365	\$ 216,161
Benefits	934,737	944,437	9,700	2,665,034	-1%	35%	930,550	837,333	(93,217)
Travel	34,521	58,175	23,654	174,526	-41%	20%	41,132	52,933	11,801
Program	454,391	350,232	(104,159)	1,012,197	30%	45%	524,798	421,343	(103,455)
Office	25,064	20,133	(4,931)	60,400	24%	41%	22,347	27,467	5,120
Computer Services	442,343	308,666	(133,677)	926,000	43%	48%	334,126	298,631	(35,495)
Telecommunications	94,575	81,334	(13,241)	244,000	16%	39%	98,664	88,333	(10,331)
Program Promotion	9,388	6,500	(2,888)	19,500	44%	48%	14,256	15,000	744
Professional Development	12,737	17,035	4,298	51,105	-25%	25%	18,836	26,808	7,972
Facilities Expenses	282,344	325,666	43,322	977,000	-13%	29%	375,800	305,998	(69,802)
Fees & Insurance	142,296	162,361	20,065	418,750	-12%	34%	315,005	268,167	(46,838)
Debt Management	152,474	152,474	0	457,421	0%	33%	152,474	152,474	0
	\$ 5,927,445	\$ 5,809,416	\$ (118,029)	\$ 17,242,180	2%	34%	\$ 6,178,192	\$ 6,060,852	\$ (117,340)

Notes to Financial Statements – April 2024

Reporting Period

The April 2024 financial reports include four months of financial results for Public Health programming. All other non-funded public health programs are reporting one month of results from the operating year ending March 31, 2025.

Statement of Operations (see page 1)

Summary – Public Health and Non Public Health Programs

APH has not yet received the 2024 Amending Agreement from the Province identifying the approved funding allocations for public health programs. The annual budget for public health programs has been updated to reflect the Board approved budget as presented at the November 2023 Board of Health Meeting.

As of April 30, 2024, Public Health calendar programs are reporting a \$434K negative variance – which is driven by a \$118K negative variance in expenditures and a \$316K negative variance in revenue.

Public Health Revenue (see page 2)

Our Public Health calendar revenues are 5% negative variance to budget for 2024.

For the 2024 calendar year, the Province instructed public health units to plan for provincial base funding to be restored to the level provided under the 2020 cost-share formula, as well as base funding growth of 1%. These anticipated changes are reflected within the Board of Health approved 2024 budget, however cash flow payments from the Ministry have yet to be updated to reflect the same, as of the end of April. A catch up payment related to these funds was made on May 15, 2024.

In early January 2024 the Ministry requested public health units to forecast anticipated extraordinary spend on COVID immunization programming for the months of January through March 2024 only. Based on the forecast provided, APH was approved for \$25,000 in one time funding to help address base funding pressures for the first three months of the calendar year. Based on communications to date, there will be no further availability of COVID-19 extraordinary funds or mitigation funding in 2024. One time funding requests to address financial pressures above and beyond what can be supported by the cost shared budget were also not made available via the 2024 Annual Service Plan (which was due to the Ministry on April 2, 2024). As communicated by the Province, opportunities may become available in year based on ongoing assessments. Public health fiscal one time grant budgets have been updated to reflect this for the 2024/25 fiscal year.

In March 2024, the Ministry confirmed that IPAC Hub funding will continue in the 2024-25 fiscal year and in the years following, with formal planning and funding meetings with individual hubs to be forthcoming in the new fiscal year. This funding has been provided to hubs across the Province in order to enhance IPAC practices in identified congregate care settings. As continued funding has been confirmed, albeit allocations remain pending, APH continues to track activities related to this initiative as a separately 100% funded program outside of base provincial funding.

Public Health Expenses (see page 3)

Travel Expenses

There is a \$24K positive variance associated with travel expenses. This variance is likely timing driven and would expect the trend to vary throughout the year depending on professional development and district travel initiatives planned by public health staff.

Program Expenses

There is a \$104K negative variance associated with programs. This is largely driven by pressures identified within demand for our Ontario Senior Dental program (externally sourced professional services for maintenance, preventative and denture services). We note that APH has requested an increase to base funding totaling \$641K for the 100% funded Ontario Senior Dental program alongside the 2024 Annual Service Plan to fund these identified pressures. We await response to this request, however continue to service our communities based on demand considering conversations with the Ministry where APH has been instructed to continue programming as planned, with funding opportunities to continually be made available to address ongoing pressures.

Computer Services

There is a \$134K negative variance associated with computer services based on the purchase of necessary network server equipment as approved by the Board in February 2024.

Financial Position - Balance Sheet (see page 6)

APH's liquidity position continues to be stable and the bank has been reconciled as of April 30, 2024. Cash includes \$2.1M 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)

Date: As of April 2024	April 2024	December 2023
------------------------	---------------	------------------

Assets

Current

Cash & Investments	\$ 4,807,477	\$ 4,663,966
Accounts Receivable	1,820,766	2,089,635
Receivable from Municipalities	66,646	6,482
Prepaid Expenses	315,751	128,517

<i>Subtotal Current Assets</i>	7,010,640	6,888,600
--------------------------------	-----------	-----------

Financial Liabilities:

Accounts Payable & Accrued Liabilities	1,256,625	1,402,404
Payable to Gov't of Ont/Municipalities	3,320,636	3,426,716
Deferred Revenue	280,411	280,411
Employee Future Benefit Obligations	2,835,275	2,835,275
Term Loan	3,308,095	3,308,095

<i>Subtotal Current Liabilities</i>	11,001,042	11,252,901
-------------------------------------	------------	------------

Net Debt	(3,990,402)	(4,364,301)
-----------------	-------------	-------------

Non-Financial Assets:

Building	23,072,474	23,072,474
Furniture & Fixtures	2,145,864	2,145,864
Leasehold Improvements	1,583,164	1,583,164
IT	3,372,128	3,372,128
Automobile	40,113	40,113
Accumulated Depreciation	-13,300,309	-13,300,309

<i>Subtotal Non-Financial Assets</i>	16,913,434	16,913,434
--------------------------------------	------------	------------

Accumulated Surplus	12,923,032	12,549,133
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[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

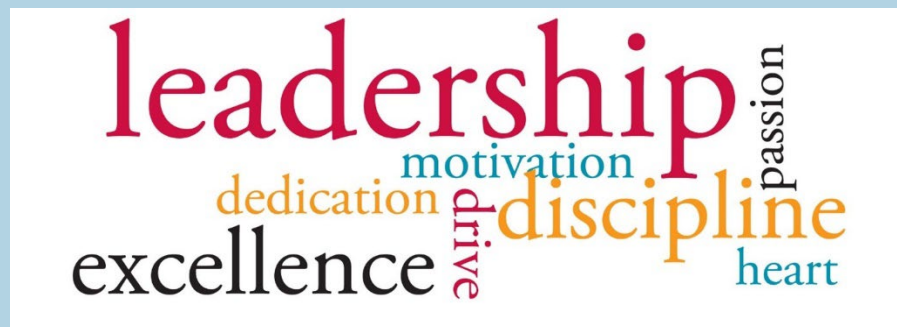
June 18, 2024



June 2024 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.

Leader to Leader - A Message from alPHA's President (2023-2024) and Executive Director - June 2024



Throughout the past year, alPHA continued to offer active and outstanding support to its members by providing Ontario's Boards of Health, Medical Officers of Health, and Affiliate organizations with a strong and unified voice on issues that affect local public health.

alPHA's [Board of Directors](#), Boards of Health (BOH) Section, Council of Ontario Medical Officers of Health (COMOH) Section, and Affiliate organizations actively represent members at a variety of tables and are heard by numerous stakeholders, including government ministries, the Office of the Chief Medical Officer of Health, Public Health Ontario, and Ontario Health. alPHA continues to forge strong alliances with these and other organizations that support the aims of public health.

After more than a year of consultation, and considerable work by staff and volunteers, alPHA's 2024-2027 [Strategic Plan](#) was approved by the Board of Directors on December 12th. Thank you to the membership for your participation in its creation, including at the Fall Symposium on November 24th. The Plan was officially launched at the Winter Symposium on February 16th, representing the culmination of this important work to strengthen local public health. Under the banner of alPHA's Mission: Serving Ontario's local public health agencies for a strong public health system, this new plan aims to convene the leadership of local public health agencies to operate on four core tenants:

- Be the unified voice and a trusted advisor on public health.
- Advance the work of local public health through strategic partnerships and collaborations.
- Support the sustainability of Ontario's local public health system.
- Deliver member services to local public health leaders.

alPHA will continue to ensure members are supported in their role as public health leaders through the Strategic Plan and that members are actively engaged in the association.

Over the past year, alPHA has profiled the importance of public health's upstream focus on prevention, communicated the key role local public health plays in communities, and reinforced the extraordinary value of the work carried out by Ontario's public health

professionals every day. alPHA has been very active in [corresponding](#) with decision-makers on a variety of public health programs, governance and resource matters; developing [public policy submissions, reports and other communications tools](#) meant to reinforce the value of public health, infographics, and videos; and taking positions on topics identified as priorities by its members via alPHA [Resolutions](#). The common theme of public health's return on investment was strong throughout, highlighting the need for the full resourcing of public health programs and services, both routine and emerging. alPHA continues to use these materials as a foundation for advocacy on behalf of its members for a stable, sustainable, , and locally based public health system in Ontario.

In addition, alPHA continues to provide relevant and timely information to members as well as facilitating ongoing discussion among them regarding developments in public health policy. Our e-mail lists, website and [newsletter](#) keep information and discussions going in between regular meetings (over 50 per year) of alPHA's Board and its subcommittees (i.e. alPHA, COMOH Section, BOH Section, Affiliates, and Executive Committees). Communicating with a unified voice for local public health with these and other methods will be especially important in the coming year, as the Province continues with its Strengthening Public Health initiative that includes voluntary mergers, a review of the Ontario Public Health Standards, and a review of the overall funding model for local public health agencies.

Our Annual Conference and Fall & Winter Symposiums are also important opportunities for the true "collective voice" to assemble. alPHA continues to attract high profile speakers to these events, which this year included the 2023 Fall Symposium, the 2024 Winter Symposium, and workshops on human rights in the workplace, risk communication, climate change, and personal resilience. In addition, a workshop was offered in February 2024 to the EAs and AAs who support our members. alPHA continued rebranding of our "Fitness Challenge" to "Workplace Health and Wellness Month" continues to be a success with [additional resources](#) now being made available throughout the year. The response from the membership has been overwhelmingly positive.

alPHA is pleased that each of Ontario's 34 boards of health is a current member in good standing, and this is essential for continued strength and unity. We are all made stronger through the work we do together, and we thank the members for their ongoing commitment to local public health.

Sincerely,

Dr. Charles Gardner
alPHA President (2023-2024)

Loretta Ryan
Executive Director

Please note that this is an excerpt from the 2024 Annual Report.

2024 alPHA AGM, Conference, and Section Meetings



This year's Annual General Meeting and Conference, which took place June 5-7, continued the important conversation on the critical role of local public health in the

province's Public Health System. We want to thank everyone who attended and participated as this event would not have been a success without you!

Updates have been made to the [Resolutions Home Page](#), including the [2024 file collection](#), where you can find the [Disposition of Resolutions document](#). Individual Resolutions can also be found here: [Permitting Applications for Automatic Prohibition Orders under the *Smoke Free Ontario Act, 2017* for Vapour Product Sales Offences \(A24-01\)](#); [Artificial Intelligence for Enhanced Public Health Outcomes \(A24-02\)](#); [A Proposal for a Comprehensive Provincial Alcohol Strategy: Enhancing Public Health through Prevention, Education, Regulation and Treatment \(A24-03\)](#); [Reviewing Provincial Regulatory Needs for Supportive Living Facilities Serving Vulnerable Individuals \(A24-04\)](#); [Early Childhood Food Insecurity: An Emerging Public Health Problem Requiring Urgent Action \(A24-05\)](#); [Compliance with Ontario Not-for-Profit Corporations Act \(ONCA\): Proposed 2024 alPHA General Operating By-Law to replace The Constitution of the Association of Local Public Health Agencies \(Ontario\) \(A24-06\)](#); and [Creating a Provincial Strategy for Indigenous Opioid Epidemic Supports & Funding \(A24-07\)](#).

The [Annual General Meeting Report](#), [Annual Report](#), [speakers' biographies](#), and other conference-related materials can be found through individual links and [on the website](#). The [Conference slides](#), [BOH Section Meeting slides](#), and [AMO Update](#) (from the BOH Section Meeting) are also available on the [members' side of the website](#). You will need to log in to view the presentations. Please note, we can only post presentations we receive from the speakers.

Thank you to all the speakers, moderators, and participants. All of you worked extremely hard to make each day a success. Please know the time you took to help plan, speak, moderate, or attend is appreciated.

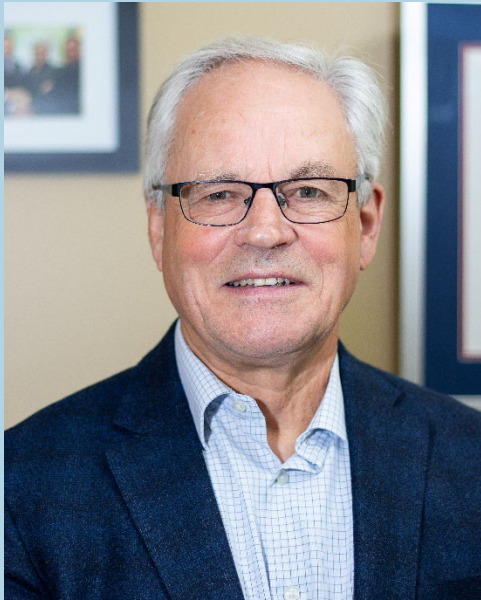
Additionally, do not forget to fill out the [Conference and AGM survey](#) (attendees only) by Wednesday, June 26, 2024. If you do, you will be entered into a draw for a gift card. Good luck!

A special shoutout goes to Dr. Charles Gardner for chairing the event. Much thanks to the alPHa staff who put in many hours into making these events a success: Loretta Ryan, Gordon Fleming, Melanie Dziengo, and Lynne Russell.

We would also like to take a moment to thank Toronto Public Health for co-hosting the AGM and Conference, and acknowledge the generous support from Mosey & Mosey and BrokerLink. We are also thankful to the Pantages Hotel for providing us with an excellent venue.



Congratulations to the 2024 Distinguished Service Award recipients!



alPHa would like to honour this year's Distinguished Service Award (DSA) recipients: Doug Lawrance, Dr. Brent Moloughney, Steven Rebellato, and Dr. Robert Hawkins. The Distinguished Service Award reflects the commitment of the Association of Local Public Health Agencies to recognize the significant contributions made to public health in

Ontario by board of health members, health unit staff, and public health professionals. The Award is given to individuals who have demonstrated exceptional qualities of leadership in their own milieu, achieved tangible results through long service or distinctive acts, and shown exemplary devotion to public health at local and provincial levels. Congratulations to our 2024 DSA recipients! Read more about these outstanding individuals [here](#).

2023-2024 alPHA Board of Directors

Thank you to all of the members of the 2023-2024 alPHA Board of Directors. You all worked extremely hard this year, and it did not go unnoticed. You have all continued to position alPHA to be the collective voice of the public health system in Ontario.



The Board oversaw alPHA's activities, which included the following:

- Creation of public policy [submissions](#) and advancement of alPHA [Resolutions](#) on key public health issues. These were supported by the development of additional communication tools including [Public Health Matters infographics and videos](#). Widely shared, these demonstrate the value and return on investment that local public health provides. These resources are useful for our members and in meetings with local councillors, MPPs, and other important stakeholders.
- Successfully launched the [BOH Governance Training Courses](#). These are added to the ever-growing [BOH Shared Resources](#) webpage and support the Board of Health members. The resources can also be used by all of alPHA's members.
- Developed the *Association of Local Public Health Agencies (Ontario) General Operating By-Law No.2* to replace the Constitution to allow alPHA's unique organizational structure to remain legislatively compliant by following the ONCA rules, supporting alPHA's letters patent, and requirements to the Ontario Business Registry.
- Launched alPHA's [2024-2027 Strategic Plan](#). This comes after a year of fulsome engagement of alPHA members in its development.
- Continuing to provide relevant and timely member-focused information to local public health agencies through e-mail, website, social media, and newsletters. *Information Break*, in particular, is a sharable resource that functions as a monthly portal to public health news, Association activities, and events.
- Effectively positioned alPHA to be the voice of Ontario's public health system by holding more than 50 meetings of alPHA's Board of Directors, BOH Section, COMO Section, Affiliates, and their respective Executive Committees.

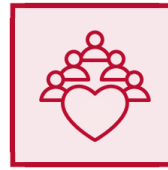
Convening the leadership of local public health agencies to:



Be the unified voice
and a trusted
advisor on public
health



Advance the work of
local public health
through strategic
partnerships and
collaborations



Support the
sustainability of
Ontario's local public
health system



Deliver member
services to local
public health
leaders



alPHa's Mission: Serving Ontario's local public health agencies for a strong public health system

Guided by its [Strategic Plan](#), alPHa will continue to work tirelessly leading with one, unified voice representing the public health system across its member constituents in its commitment to influence Ontario's decision-makers to ensure a robust local public health system with ample resources to protect the entire population's health.

Over the past year, we were fortunate to have a Board of Directors who were passionate about public health and were a uniquely qualified and unified voice for public health in Ontario. Thank you to this year's Board of Directors for its excellent leadership!

2024-2025 alPHa Board of Directors



The 2024-2025 alpha Board of Directors was elected on June 7, 2024. The Board of Directors is composed of seven members from the Boards of Health (BOH) Section and seven members from the Council of Ontario Medical Officers of Health (COMOH) Section. The balance of the alpha Board of Directors is composed of one representative from each of the seven Affiliate organizations. The Board of Directors meets regularly throughout the year to consider matters of policy, priorities, and governance.

The members of the alpha Executive Committee are:

- Chair/BOH Section Representative, Northwest Region - Trudy Sachowski
- Vice Chair/COMOH Section Representative, Central West Region - Dr. Hsiu-Li Wang
- Past Chair/COMOH Section Representative, Dr. Charles Gardner
- COMOH Section Chair/COMOH Section Representative, North Region - Dr. Lianne Catton
- BOH Section Chair/BOH Section Representative, North East Region - René Lapierre
- Treasurer/BOH Section Representative, Toronto - Abinaya Chandrabalan
- Affiliate Executive Representative/AOPHBA - Cynthia St. John

To learn more about all of the members of the 2024-2025 alPHa Board of Directors, please [click here](#).

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



On June 6, at the 2024 AGM, alPHa members unanimously adopted and approved the formal filing of the Association of Local Public Health Agencies (Ontario) General Operating By-Law No.2, relating generally to the conduct of affairs of the Association. This is a pivotal step forward to enhance alPHa governance, due diligence, and accountability to ensure compliance with the Ontario Not-For-Profit Corporations Act (ONCA). By-Law No.2 allows the unique alPHa organizational structure to remain legislatively compliant following the ONCA rules, supporting alPHa letters patent, and the annual updates required to the Ontario Business Registry. This achievement is a significant step forward towards the work ahead to align alPHa policies and procedures, ensuring complete legislative compliance. Sincere thanks to the tireless efforts over the better part of two years to alPHa volunteers, alPHa Chief Executive Officer, Loretta Ryan, alPHa staff, and legal counsel.

Save the date for the alPHa 2024 Fall Symposium, Section Meetings, and Workshops!

**Association of
Local Public
Health Agencies**

**2024 Fall Symposium,
Section Meetings
and Workshops**

Nov. 6-8, 2024



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 8th, participate in online plenary sessions with public health leaders in the morning, followed by BOH Section and COMOH Section meetings in the afternoon.

Attendees will also be invited, at no additional cost, to participate in pre-symposium workshops on November 6th & 7th including an all-day workshop on Artificial Intelligence and Local Public Health Agencies.

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.

*All events are online.
Registration opens in September (date TBD)
and will cost \$399+HST.*

Save the date for November 6-8, 2024 as we prepare to continue the important conversations on the critical role, value, and benefit of Ontario's local public health system.

On November 8, 2024, we will gather together for plenary sessions with public health leaders in the morning. The BOH Section Meetings and COMOH Section meetings will be held in the afternoon.

This is a unique opportunity to connect with public health leaders from across Ontario. 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. Registration is \$399+HST and the page will open in September.

Ontario Public Health Directory updated again



IMPORTANT: Thank you to all of the members who sent in additional updates. The latest version of the [Ontario Public Health Directory](#) has been updated again and is now available on the alPHa website. Please ensure you have the latest version, which has been dated as of **May 24, 2024**. You will have to log into the alPHa website to view the file.

Boards of Health: Shared Resources



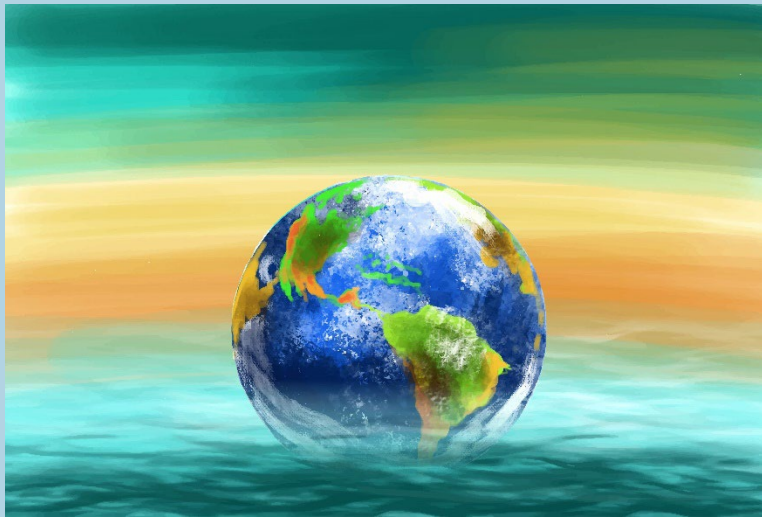
A resource [page](#) is available on alpha's website for Board of Health members to facilitate the sharing of and access to information, orientation materials, best practices, case studies, by-laws, Resolutions, and other resources. **In particular, alpha is seeking resources to share regarding the province's Strengthening Public Health Initiative, including but not limited to, voluntary mergers and the need for long-term funding for local public health.** If you have a best practice, by-law or any other resource that you would like to make available via the newsletter and/or the website, please send a file or a link with a brief description to gordon@alphaweb.org and for posting in the appropriate library.

Resources available on the alpha website include:

- [Orientation Manual for Boards of Health](#) (Revised Jan. 2024)
- [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](#)
- [List of Municipalities sorted by Health Unit](#)

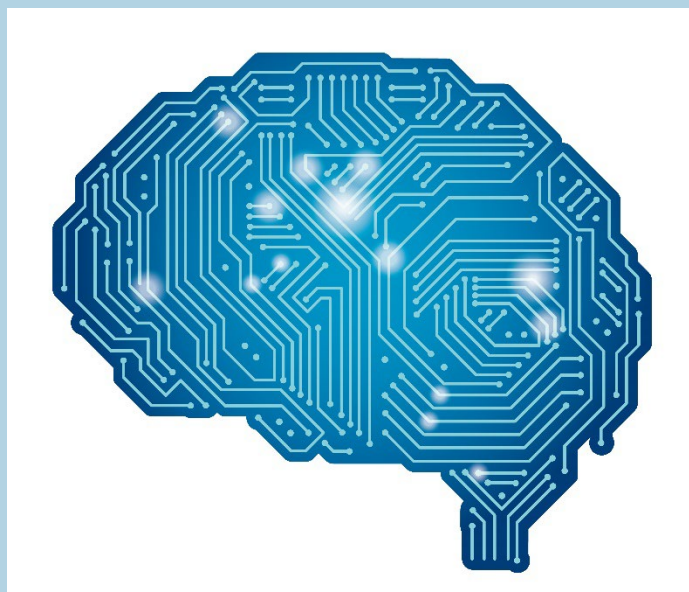
- Obligations of a Board of Health under the Municipal Act, 2001 (Revised 2021)
- Governance Toolkit (Revised 2022)
- Risk Management for Health Units
- Healthy Rural Communities Toolkit
- Map: Boards of Health Types
- NCCHPP Report: Profile of Ontario's Public Health System (2021)
- The Municipal Role of Public Health(2022 U of T Report)
- Boards of Health and Ontario Not-for-Profit Corporations Act

alPHA Climate Change Liaison Report



Climate Change and Health Vulnerability and Adaptation Assessments (CCHVAA) ensure that LPHAs have current, relevant information to address climate health risks in the communities they serve. Updating CCHVAAs account for changing hazards (e.g., wildfire smoke), emerging evidence, evolving data, promising practices, and changes in local community characteristics that influence exposure, sensitivity, and adaptive capacity to climate health hazards. Accordingly, in keeping with the draft OPHS and growing evidence of climate change impact in Ontario, there is a need to ensure that LPHAs develop capacity and resource sharing to assist in conducting and updating CCHVAAs to ensure that adaptations activities are sufficient. To read the report, [click here](#).

alPHa Artificial Intelligence Liaison Report



The integration of Artificial Intelligence (AI) into LPHAs has been progressively advancing, with established applications (e.g., chatbots, e-scribe) and dedicated efforts associated with foundational infrastructure (e.g., data governance plans) in place to maximize available technology. This report highlights recent developments and upcoming plans related to AI applications in public health. It focuses on the efforts by alPHa to maximize intelligence and information sharing to increase collective understanding and potential efficiency through AI-development in LPHAs. To read the report, [click here](#).

Artificial Intelligence report available



Statistics Canada's report, *Laying the groundwork for artificial intelligence to advance public health data in Canada*, is now available on their website. Visit: <https://ai4ph-http.ca/report-launch/> and select the "Read the Full Report Here" button to view the report.

A recap of alPHa's Workplace Health and Wellness Month!



alPHa Workplace Health & Wellness



Thank you to everyone who participated in May's [Workplace Health and Wellness Month](#) and for making it a great success! We hope you had an opportunity to start improving your physical and mental well-being.

A huge shoutout goes to Renfrew County and District Health Unit for sharing their Workplace Health and Wellness Month photos on X! Thank you as well to our alPHa Board Members and staff for their strong support of this initiative.

As a reminder, our webpage is full of easy to use tips to help you live better including nutrition, physical health, and mental health articles from various health units. Our infographics, which cover topics such as [caring for your skin in the summer](#) and [healthy eating](#), are also a wonderful way to get the information you need to improve your health and wellness.

Association of Local Public Health Agencies
2024 Workplace Health & Wellness Month

WEEK 1: MOVEMENT



www.rcdhu.com

RENFREW COUNTY AND
DISTRICT HEALTH UNIT



Association of Local Public Health Agencies
2024 Workplace Health & Wellness Month

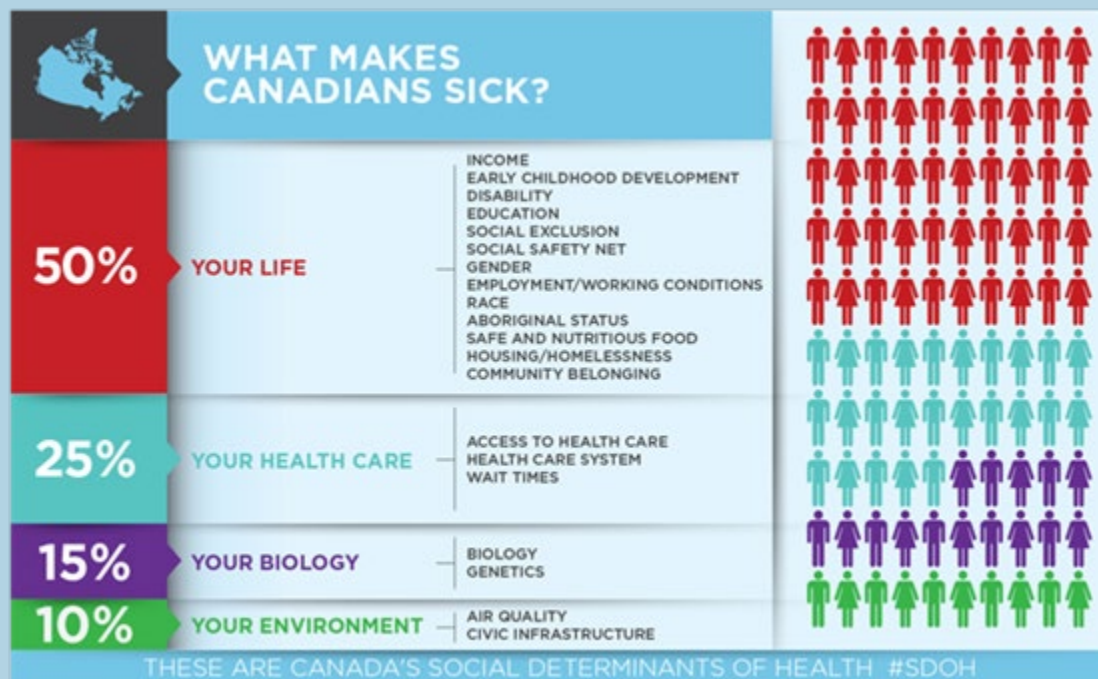


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RENFREW COUNTY AND
DISTRICT HEALTH UNIT



Challenges of determining the relative contribution of determinants of health on population health: a Canada perspective



Drs. Mehdi Aloosh and Jessica Hopkins co-authored an article, which was recently released. They investigated the source of a widely cited estimate on the determinants of health and found it lacked supporting evidence. In this article, they called for an end to its use, and urged the adoption of an evidence-based estimate. You can find this article [here](#).

Affiliates update

The logo for Affiliates, featuring the word "Affiliates" in a large, bold, red serif font.

Association of Local Public
Health Agencies



Association of Public Health Epidemiologists in Ontario

Highlighting the value of opioid monitoring in supporting partnerships

Across Ontario, local public health agencies are trusted partners to prevent opioid-related harms.

Twenty-three public health units participated in a [recent scan of opioid-related information systems](#) conducted by Thunder Bay District Health Unit. The majority (96 per cent) include targeted alerts to service providers, showcasing the value of public health in coordinated action with both health system and community partners.

Innovative approaches include paramedics data access partnerships, integrated tools for reporting unexpected adverse reactions/events, and aberration detection methods to understand the data peaks and valleys in context of ongoing trends.

Checkout the [gallery highlights](#) shared by APHEO members.

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 about public health legislation, funding, accountability, roles, structures, and much more. Gain insights into leadership and services that drive excellence in your unit.

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.

BrokerLink Insurance



alPHa members qualify for exclusive insurance discounts with [BrokerLink](https://BrokerLink.ca). Get a quote on car or home insurance, and you could win 1 of 4 cash prizes of \$5,000. Don't miss your chance to save on insurance and win some cash in BrokerLink's Grand Group Giveaway! Visit BrokerLink.ca/alPHa to learn more.

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. A complete online library of submissions is available [here](#). These documents are publicly available and can be shared widely.

Public Health Ontario



New: Highly Pathogenic Avian Influenza A(H5N1) Resources

Public Health Ontario (PHO) has released two new resources in response to the evolving influenza A(H5N1) situation:

- [Rapid Review: Thermal Inactivation of Influenza A\(H5N1\) in Meat](#)
- This rapid review investigates thermal inactivation of influenza A(H5N1) in meat from poultry and beef. This comes in response to increasing concerns about the presence of the virus in U.S. dairy cattle.
- [Rapid Review: Survivability of Influenza A\(H5N1\) in Milk](#)

- This rapid review aimed to assess the survivability of influenza A(H5N1) in milk from dairy cattle that may be infected with the virus.

For more information, visit [PHO's Avian Influenza webpage](#).

Additional Resources

- [Review of "Factors Influencing the Mental Health Consequences of Climate Change in Canada"](#)
- [Mental health indicators using the Canadian Health Survey on Children and Youth](#)
- [Health Behaviours of Ontario Secondary School Students during the COVID-19 Pandemic](#)
- [Synopsis: Review of "Effect of Risk Mitigation Guidance for opioid and stimulant dispensations on mortality and acute care visits during dual public health emergencies: retrospective cohort study"](#)
- Surveillance Reports:
 - [Mpox in Ontario](#)
 - [Measles in Ontario](#)
 - [COVID-19 Wastewater Surveillance in Ontario](#)
 - [SARS-CoV-2 Genomic Surveillance in Ontario](#)
 - [Ontario Respiratory Virus Tool](#)
 - [Respiratory Syncytial Virus Genomic Surveillance in Ontario](#)

Upcoming DLSPH Events and Webinars

Dalla Lana

School of Public Health

- [Embracing Trust, Interdisciplinarity and Alternative Data to Address Global Public Health Challenges](#) (June 26)
- [How will climate change impact apartment building residents?](#) (July 17)

TRAVAX renewal is here again!



Travax (www.travax.com) is a travel health information publication for medical practitioners that we at Shoreland have been publishing for over 35 years. Our staff monitor CDC, WHO, and over 100 other sources, plus consult our network of trusted collaborators, enabling us to publish alerts and regulatory changes sooner than many organizations. Travax includes the most detailed, independently researched malaria prevention maps available. Malaria maps are fully searchable, as are our yellow fever and elevation maps. Travax also includes an automated Report Builder that quickly generates reports for multi-country itineraries. For a demo, please visit www.shoreland.com. To join alPha's group order for Travax subscriptions at a quantity discount price, contact Melanie Dziengo (communications@alphaweb.org).

alPha's mailing address



Please note our mailing address is:

**PO Box 73510, RPO Wychwood
Toronto, ON M6C 4A7**

Please update your records accordingly for correspondence, payments, and other remittances. Our telephone number and e-mail addresses remain the same.

Additionally, if your health unit has not yet moved to credit card or electronic fund transfers (EFTs) for payment, alpha requests that you do so.

For further information, please contact info@alphaweb.org.

News Releases

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



Our mailing address is:
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aPHa

2024 AGM & Conference

Summary Notes

June 5 – 7, 2024

Toronto, Ontario

Thursday, June 6, 2024

Medicine Bag Workshop – Marc Forgette

Marc explained the significance of the four colours of the medicine wheel teachings, which include the different stages of a person's life and the use of various herbs, including sweetgrass, sage, cedar and tobacco.

He spoke about the difference between cultural appropriation and cultural appreciation. Marc urged people to attend a pow-wow to learn about their local indigenous community and to support small indigenous businesses.

Terminology is important when understanding indigenous peoples. The term indigenous includes First Nations, Inuit and Métis. First Nations are comprised of various tribes or tribal nations across the country. He said that the recent population census notes that Indigenous persons are the fastest-growing component of the population. He believes that this is a result of more Indigenous people feeling comfortable about their ancestry but notes that numerous people are claiming Indigenous status without any proof.

Marc stated that only 13 of the 94 calls to action in the Truth and Reconciliation Report have been completed. Fifteen have yet to begin, 46 are underway, and 20 are completely stalled. He said that recommendation number 80, designating September 30 as National Truth and Reconciliation Day, is now a holiday in the federal civil service. He suggested that Remembrance Day would be a better analogy for people to consider on September 30.

Welcoming Remarks – The Honourable Doug Ford, Premier of Ontario

After welcoming those in attendance and thanking everyone working in health services, the Premier acknowledged that over 2 million Ontario residents are without a family doctor.

While this is not acceptable, he noted that last year Ontario received 1.2 million immigrants which is greater than immigration to both Florida and Texas combined. He also believes that a number of immigrants to other Canadian provinces eventually end up moving to Ontario because of better economic opportunities. This immigration creates enormous healthcare needs and costs.

The Premier suggested that we need to change what and/or how we are doing things. He noted that 80,000 new nurses were added during his term in office, with another 30,000 currently in colleges and

universities. The Premier stated that the healthcare system in Ontario does not have enough funding. He recognized that nine public health boards have voted to merge and restated that no front-line jobs will be lost.

In conclusion, he noted that the public health sector has no bigger fan than he and that we will always have a public health care system in Ontario paid by OHIP, not your credit card.

Update on Public Health Priorities and Initiatives – Dr. Kieran Moore, Chief Medical Officer of Health

Dr. Kieran Moore said that we need to create key performance indicators to help us explain to the public what we do and the importance of our work.

He stated that our immunization programs with our pharmacy partners are going well. He reported that they are working to create a vaccine registry with national and indigenous partners but gave no timeframe as to when this might be in effect. He also said that they are working on a public health digital data platform and encouraging the use of artificial intelligence where appropriate.

Dr. Moore reported that the Ontario Public Health Standards review is underway, a survey has recently been issued, and consultation meetings are being planned. He noted that we need to update our funding formulas to recognize the immigration numbers discussed previously by the Premier.

Combined alPHA Business Meeting and Resolutions Session

The consent agenda including previous AGM minutes, President and Executive Director's report, Boards of Health, Council of Ontario Medical Officers of Health and Affiliates reports was approved with little comment.

The 2023 – 2024 audited financial statements were approved, and Chaplin and Company were appointed as alPHA's auditors for the 2024 – 2025 fiscal year.

The following six resolutions (in summary) were presented and approved:

- That the Government of Ontario include automatic prohibition order applications by Public Health Boards for convictions related to vapour product retail sales similar to commercial tobacco sales.
- That the Association of Local Public Health Agencies write to the Ontario Minister of Health to provide background information on the transformational possibilities of artificial intelligence in the future delivery of public health programs and services and call for increased academic investment in data stewardship, AI research, training and development focused on public health applications.
- That alPHA write to the Government of Ontario recommending that a comprehensive alcohol strategy be developed, which includes the following actions: promote comprehensive public education campaigns, strengthen regulations on advertising, increase alcohol taxes, adopt a prevention model and improve access to addiction treatment and support services. It was noted that given the current focus on "Buck a Beer" and alcohol availability in corner stores, a comprehensive alcohol strategy is critical.
- That alPHA urges the Government of Ontario to review the need to regulate unregulated and quasi-regulated residential facilities on a provincial basis. It was also noted that additional funding will be required should public health agencies be given this responsibility.

- That alPHa call on the Provincial Government to optimize early growth and development among families most impacted by food insecurity and health inequities by increasing the Pregnancy and Breastfeeding Nutrition Allowance and the Special Diet Allowance for persons on Ontario Works or the Ontario Disability Support Program and that the Ontario Drug Benefit be expanded to include specialized infant formulas.
- That the Association of Local Public Health Agencies formally adopt a new General Operating By-law consistent with the Ontario Not-for-Profit Corporations Act to replace the current Constitution of the Association of Local Public Health Agencies effective October 18, 2024.

The following resolution on the Indigenous opioid crisis was approved by the assembly following comments from a First Nations spokesman who stated that while all sectors of the population are suffering from an opioid crisis, his community of 750 people has seen 45 opiate deaths in the last five years which is similar to other First Nations in the area.

- Resolved that alPHa call on the Provincial Government to create a provincial strategy to provide supports for the indigenous opioid epidemic.

Proposed Voluntary Public Health Unit Mergers

Dr. Lianne Catton, MOH & CEO, Porcupine Health Unit

Dr. Catton said that this merger has a long history dating back to the 1990s. Essentially, they were looking to strengthen their capacity and retain expertise.

Wess Garrod, Chair, Kingston, Frontenac, Lennox & Addington Public Health

Mr. Garrod said that the proposed three-way merger came about as a result of the MOH funding support. The three Boards involved wished to maintain local control and have focused on increasing capacity. He suggested that other boards considering a merger need to focus on organizational culture and trust.

Bonnie Clark, Board Member, Peterborough Public Health

Ms. Clark used the analogy that it is “better to choose your own dance partner.” She said both Boards were looking to increase capacity and depth.

All three speakers stressed that the mergers would only go ahead if adequately funded. Although they have voted to approve the mergers, their applications are currently under review by the Province. They also noted that the funding model after the initial three years of support is currently unknown at this time.

Update on Strengthening Public Health (SPH)

Colleen Kiel, Director, Public Health Strategic Policy, Planning and Communications Branch

Brent Feeney, Director, Accountability and Liaison Branch

They started by saying that the efforts to strengthen public health are focused on three parts: roles and responsibilities, funding, and mergers. They stressed that no additional funding burden will be placed on municipalities and that they will work with their sector partners to identify other merger candidates.

The provincial base funding provided under the 2020 cost share formula has been restored, effective January 1, 2024. This base funding will increase by 1% for each of the next three years. In addition, there is a three-year merger support fund to support change. The Ministry is committed to undertaking a review of the public health funding methodology to ensure a more equitable, sustainable and predictable funding approach that will not put any additional financial burden on municipalities effective January 1, 2026. Focused engagement with key stakeholders will take place throughout June.

Nine LPHA Boards have expressed interest in merging. The Ministry will reengage with these LPHAs and work with sector partners to identify other merger candidates. They will leverage sector relationships (eg. alPHA, AMO) to co-develop a voluntary merger approach including objectives, parameters and accountability mechanisms with time-limited funding supports to facilitate the merger process. Mergers will take effect beginning January 1, 2025.

The Ministry wishes to clarify and strengthen the role of LPHAs by refining, refocusing and re-leveling roles and responsibilities. They will conduct a sector-driven review of the Ontario Public Health Standards against a decision framework. The Ministry will work with partners to identify roles and responsibilities that can be refined or stopped and/or “re-levelled” to a regional or provincial level. The planned release date of the revised OPHS is difficult to confirm at this time, but it will likely be early in the new year. They acknowledge that this makes it difficult for local public health authorities to plan and budget for next year.

The number of Foundational Standards in the draft OPHs will be reduced from 7 to 4. The number of Program standards will be reduced from 9 to 8. The current 43 protocols and guidelines will be reduced to 32 protocols with all guidelines being removed.

The four proposed foundational standards are:

- Population Health Assessment
- Health Equity
- Program Planning, Evaluation and Quality
- Partnership, Collaboration, Coordination and Knowledge Exchange

The eight proposed program standards are:

- Comprehensive Health Promotion
- Emergency Management
- Food Safety
- Health Hazard Management
- Immunization
- Infectious and Communicable Diseases Prevention & Control
- Safe Water
- Substance Use Prevention & Harm Reduction

Two Years In and Two Years Out – What’s in Store at Queen’s Park

Sabine Matheson and John Perenack, Principals, StrategyCorp

They stated that while Premier Ford strongly supports health services in general, his support for local public health agencies is somewhat reserved, given that our annual budget increase for the next three years is only 1% annually. This is consistent with the overall 17% increase since he took office compared to an 18% increase in inflation.

They suggested that Premier Ford’s attention is focused on housing, and he needs to find money to meet housing targets. They believe his approach to LPHAs is that bigger is better and that we should focus on being leaner and support doing things differently.

Generally, they suggested that LPHAs should:

- Talk about what we can achieve, not what we can’t.
- Be more innovative and proactive.
- Not assume that people are going to trust us.
- Sell ourselves on things that people can fact-check.
- Consider doing a community well-being and safety plan as a comprehensive approach to public health.
- With respect to “buck a beer” look for areas where we can make positive change such as developing training for retailers.
- Encourage housing for addicts as a cost-effective treatment.
- Use data to tell the story.

Boards of Health Section Meeting

Friday, June 7, 2024

alPHA Update/Section Business

Carmen McGregor, Chair, BOH section provided an update on the past year’s activities and the minutes of the previous BOH section meeting were approved.

On the Front Lines

Representatives from the Association of Public Health Epidemiologists, the Association of Supervisors of Public Health Inspectors, Health Promotion Ontario and the Ontario Association of Public Health Dentistry provided the following comments:

- We should look at the top 10 achievements of the Center for Disease Control over the past 100 years as ours are similar. We need to promote this.
- LPHA’s got tobacco on the public agenda, now we need to get alcohol on the public agenda. Alcohol is a false economy because although it provides considerable revenues for the government, treatment costs are far greater. We should tell stories that resonate with the community if we want an effective public education program.
- We need to consider how we should adapt to climate change issues.

- We will have access to universal dental care, but we need to focus on prevention as much as treatment.

Hamilton's Proposed Board of Health Structure - Maureen Wilson and Jennifer Vickers-Manzin, City of Hamilton

Their current Board of Health is Hamilton City Council. Earlier this year, City Council approved a series of recommendations to apply to the Province to become a semi-autonomous Board of Health, similar to Toronto and Ottawa. The model being pursued would change the Board composition with the aim of making it more inclusive and representative of the community.

Hamilton Public Health's consultation included a public survey, key informant interviews and meetings, and a community-led public meeting. They considered simply adding an advisory committee to the present Board, changing the membership to include community representatives on the existing Board, or changing the structure and membership of the Board so that it is somewhat separate from the City Council with community representatives.

The third option was chosen, and the Board now has six City Councilors, six public members with a focus on health or lived expertise, and one education representative.

Board Of Health Governance – Monika Turner, Principal Roving Capacity

Monika provided the following comments:

In her opinion, she suggested that the Ministry ignores Boards of Health but is afraid of them.

She is concerned about the move from guidelines to protocols.

She noted that there may be more responsibilities assigned to local Boards with the new Ontario Public Health Standards but without any additional funding. She reminded us that Section 72 of the Ontario Health Protection and Promotion Act makes municipalities responsible for all Board of Health costs.