



Addendum: Board of Health Meeting

Meeting # 03-21

Thursday, June 17, 2021

1:30 p.m.

Teams



ADDENDUM – THIRD MEETING
BOARD OF HEALTH
JUNE 17, 2021

7.0 ADDENDUM

DECLARATIONS OF CONFLICT OF INTEREST

i) Report of Standing Committees

- Unapproved minutes of the Board of Health Finance Standing Committee, June 7, 2021
- Unapproved minutes of the Board of Health Finance Standing Committee, June 10, 2021

ii) COVID-19: Respond, Recover, Restore

- Infographic



UNAPPROVED MINUTES
BOARD OF HEALTH FINANCE STANDING COMMITTEE
MONDAY, JUNE 7, 2021 – 1:30 P.M.
VIRTUAL MEETING – TEAMS

BOARD MEMBERS PRESENT

Carolyn Thain
Mark Signoretti

Randy Hazlett

René Lapierre

STAFF MEMBERS PRESENT

France Quirion
Rachel Quesnel, Recorder

Colette Barrette

Dr. Penny Sutcliffe

GUEST

Derek Dangelo, KPMG

C. THAIN PRESIDING

1. CALL TO ORDER

The meeting was called to order at 1:40 p.m.

2. ROLL CALL

3. ELECTION OF BOARD OF HEALTH FINANCE STANDING COMMITTEE CHAIR FOR 2021

01-21 APPOINTMENT OF BOARD OF HEALTH FINANCE STANDING COMMITTEE CHAIR

MOVED BY HAZLETT – LAPIERRE: THAT the Board of Health Finance Standing Committee appoint Carolyn Thain as the Board of Health Finance Standing Committee Chair for 2021.

4. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST

Dr. Sutcliffe advised that she would like to raise the issue of long term budget planning under agenda item 6.2.

There were no declarations of conflict of interest.

5. APPROVAL OF BOARD OF HEALTH FINANCE STANDING COMMITTEE MINUTES

5.1 Board of Health Finance Standing Committee Notes dated November 2, 2020

02-21 APPROVAL OF MEETING NOTES

MOVED BY SIGNORETTI – LAPIERRE: THAT the meeting notes of the Board of Health Finance Standing Committee meeting of November 2, 2020, be approved as distributed.

CARRIED

6. NEW BUSINESS

6.1 2020 AUDITED FINANCIAL STATEMENTS

a) Briefing Note from the Medical Officer of Health and Chief Executive Officer
Dr. Sutcliffe shared that KPMG has completed Public Health Sudbury & Districts' audit of the 2020 Financial Statements. The draft audited financial statements have been circulated to the Board of Health Finance Standing Committee to recommend approval at the June 17 Board of Health meeting. This is KPMG's second and final year of the two-year extension to the three-year service agreement. The three-year service agreement provided an option to extend audit services for an additional two years.

b) Review of the 2020 Audit Findings Report and Audited Financial Statements
F. Quirion acknowledged the KPMG Audit team team, including Derek D'Angelo, Wenting Zhou, and Bianca Xu as well as the PHSD team members who support the audit.

D. D'Angelo was invited to provide a brief overview of the Audit Findings Report for the year ended December 31, 2020, and review results of the audit of the financial statements prepared in compliance with the Generally Accepted Accounting Principles.

There have been significant changes in the year ending December 31, 2020, which impacted financial reporting, PHSD internal control over financial reporting and the audit including:

- COVID-19 pandemic
- New CAS auditing standards

It was noted that the financial statements present fairly, in all material respects, the financial position of Public Health Sudbury & Districts as at December 31, 2020. There were no significant discrepancies found nor recommendations received as a result of the 2020 annual audit completed by KPMG.

Questions and comments were entertained and related to indicator of management bias, roles of the Board of Health Finance Committee members, and system controls for remote working during COVID-19.

D. D'angelo was thanked for presenting.

It was remarked that the magnitude of changes that have occurred in 2020 have impacted and shaped our year end financial position. The implementation of a new funding formula (70:30) was introduced in 2020 impacting all mandatory programs and most programs that were previously funded at 100%. In addition, COVID-19 pandemic was declared which resulted in the shifting and aligning of significant resources in support of the pandemic response. Several provincial financial announcements were made to assist Public Health Units with COVID-19 extraordinary expenses.

PHSD staff were recognized for managing through these complex times and changing priorities to ensure the best financial position.

C. Barrette reviewed the 2020 Audited Financial Statements and notes. Variances resulting in increases or decreases compared to 2019 were highlighted. It was noted that PHSD's focus for the greater part of 2020 was on the pandemic response contributing to the 2020 variances.

Questions and comments were entertained. COVID-19 extraordinary expenses are high and the Ministry has asked public healths to submit projections to year-end. Staff have accumulated vacation that they have not been able to take due to our COVID-19 response. Strategies are being explored to support managers and staff to take vacation. Insurance is also being looked at carefully given expected increases in rates.

Contribution factors toward the 2020 annual surplus were outlined. The importance of a reserve for future was recognized. It was also pointed out that recruitment is ongoing for the current vacant Associate Medical Officer of Health position.

03-21 2020 AUDITED FINANCIAL STATEMENTS

MOVED BY SIGNORETTI – LAPIERRE: THAT the Board of Health Finance Standing Committee recommend to the Board of Health for the Sudbury and District Health Unit the adoption of the 2020 audited financial statements.

CARRIED

Post-script note: see June 10, 2021, Board of Health Finance Standing Committee minutes and motion 05-21.

6.2 YEAR TO DATE FINANCIAL STATEMENTS

a) April 2021 Financial Statements

The April 2021 year-to-date financial statements with positive variance totalling \$948,351 outline significant additional COVID-19 expenses totaling \$2,986,567.

Variances within year to date financial statements ending April 30, 2021, were reviewed. The two primary reasons for the variances to date include calendarization of expenses within the year to date budget as well as staffing alignments. There have been significant alignment in resources to support the COVID-19 response for the case and contact management and vaccine roll-out.

In response to an inquiry regarding the infrastructure modernization project, F. Quirion responded that both the Elm Street and 1300 Paris Street projects are progressing well, per the project timelines and on budget.

Dr. Sutcliffe highlighted that as budget planning begins for 2022, there are many unknowns and concerns relating to several important system-wide public health issues such as COVID-19 expenses, post-COVID-19 recovery, provincial public health system, and anticipated program expenses such as opioid.

The Board of Health Finance Standing Committee supported that a letter of inquiry/exploration be sent to the provincial government to seek clarity and share concerns as we start our budget planning for 2022. We will inquire whether there is any information or assistance that could be shared with us to help with our planning and budgeting for next year, importantly include any information on ongoing mitigation funds to offset provincial policy change on funding formula for local public health and any information on ongoing access to COVID-19 extraordinary funds.

Before adjournment, Board of Health Finance Standing Committee members congratulated C. Barrette on her upcoming retirement and recognized her contributions to PHSD.

7. ADJOURNMENT

04-21 ADJOURNMENT

MOVED BY LAPIERRE – SIGNORETTI: THAT we do now adjourn. Time: 3:01 p.m.

CARRIED

(Chair)

(Secretary)



UNAPPROVED MINUTES
BOARD OF HEALTH FINANCE STANDING COMMITTEE
THURSDAY, JUNE 10, 2021 – 2:30 P.M.
VIRTUAL MEETING – TEAMS

BOARD MEMBERS PRESENT

Carolyn Thain
Mark Signoretti

Randy Hazlett

René Lapierre

STAFF MEMBERS PRESENT

France Quirion

Rachel Quesnel, Recorder

Dr. Penny Sutcliffe

C. THAIN PRESIDING

1. CALL TO ORDER

The meeting was called to order at 2:30 p.m.

2. ROLL CALL

3. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST

There were no declarations of conflict of interest.

4. APPROVAL OF BOARD OF HEALTH FINANCE STANDING COMMITTEE MINUTES

4.1 Board of Health Finance Standing Committee Notes dated June 7, 2021

– Deferred.

5. NEW BUSINESS

5.1 2020 AUDITED FINANCIAL STATEMENTS

- a) Review of the 2020 Audit Findings Report and Audited Financial Statements – updated June 9, 2021

Dr. Sutcliffe shared that, per her June 9, 2021 email, the purpose of today's meeting is to review an adjustment required to the draft 2020 audited financial statements.

This required adjustment came to our attention due to our misunderstanding of Ministry of Health instructions on how to expense one-time COVID-19 extraordinary expenses. We understood from a recent email from the Ministry that we were to fully

expense COVID-19 costs to our approved COVID-19 extraordinary allocation with residual expenses being charged to base funding. We now confirmation instead, that we need to exhaust our base funding for COVID-19 costs prior to being eligible to be applied against our COVID-19 extraordinary allocation. This is consistent with prior public communication for 2020 and for 2021. As such the draft 2020 Financial Statements have been revised. The net impact is a reduction of the year end surplus from \$822,228 to \$697,918.

F. Quirion reviewed the revisions to the 2020 draft Financial Statements that were highlighted for ease of reference.

In the process of updating the statements, the Auditors identified and corrected two transcription errors. The first is in Note 2 Employee Benefit Obligation and the second is in Note 9 Revenues and expenses by funding sources.

The Committee members appreciated the opportunity to review the updated statements, that the statements were revised quickly by the auditors and in time to include in the agenda package for the June 17 Board of Health meeting.

Questions and comments were entertained, and Dr. Sutcliffe responded that this is what we were originally expecting for extraordinary COVID-19 expenses.

05-21 2020 AUDITED FINANCIAL STATEMENTS

MOVED BY HAZLETT – SIGNORETTI: THAT the Board of Health Finance Standing Committee recommend to the Board of Health for the Sudbury and District Health Unit the adoption of the 2020 audited financial statements, as reviewed by the Finance Standing Committee at its meeting of June 10, 2021.

CARRIED

6. ADJOURNMENT

06-21 ADJOURNMENT

MOVED BY HAZLETT – LAPIERRE: THAT we do now adjourn. Time: 2:47 p.m.

CARRIED

(Chair)

(Secretary)

Web Link to the COVID-19: Respond, Recover and Restore Infographic

<https://www.phsd.ca/health-topics-programs/diseases-infections/coronavirus/covid-19-respond-recover-restore-infographic/>

COVID-19: Respond, Recover, Restore

June 17, 2021

Since March 2020, Public Health Sudbury & Districts has been sharply focused on **responding** to the COVID-19 pandemic. As immunization rates rise, we are turning the corner to assess the impact of the COVID-19 pandemic and what it means for our collective **recovery**. Public Health is part of this recovery journey as we work toward **restoring** our full system capacity to create equal opportunities for health for all.

COVID-19 Pandemic Response Activities

What we have been doing since the beginning of the pandemic

22 815

calls to the call centre

411

vaccination events

2 113


total cases contacted

11 502

contacts identified and followed

278

news releases and public service announcements

144 234  total doses administered

People fully vaccinated

31 200

People received their first dose

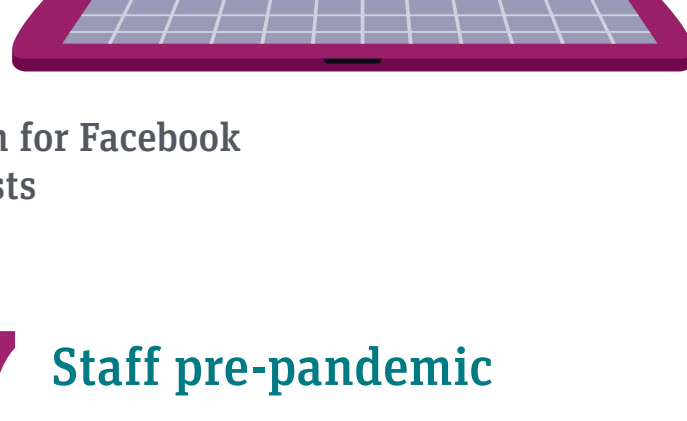
113 034



758 media requests responded to

3 890 social media posts

16 016 062 combined reach for Facebook and Twitter posts



Resource/financial costs



257 Staff pre-pandemic

339 Additional staff onboarded

232% Current working capacity

139

volunteers

101

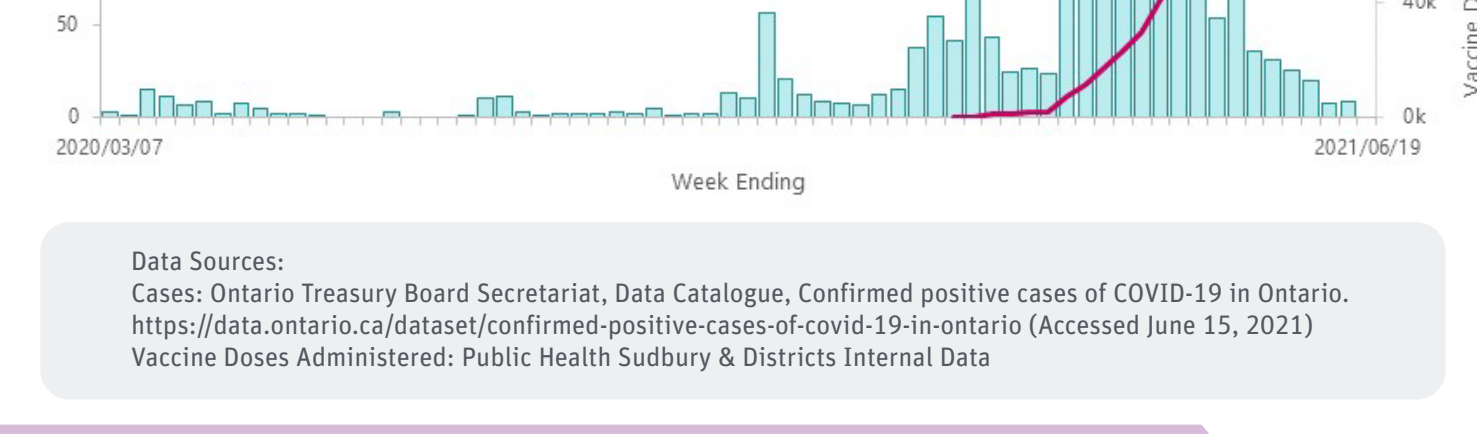
primary care providers supporting

Financial implications:

- The current financial impact of our COVID-19 response to April 30th is **\$22,345,504**
- **> 85%** of our operating expenses have been dedicated to COVID-19 throughout the pandemic

How did we respond to COVID-19

PHSD Case Counts and Vaccine Doses Administered

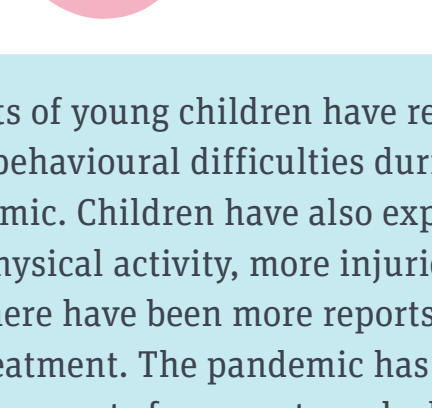
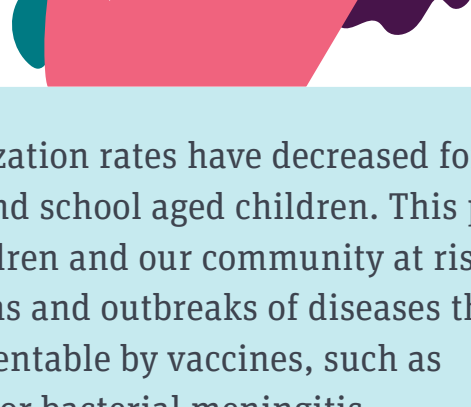


Data Sources:
Cases: Ontario Treasury Board Secretariat, Data Catalogue, Confirmed positive cases of COVID-19 in Ontario. <https://data.ontario.ca/dataset/confirmed-positive-cases-of-covid-19-in-ontario> (Accessed June 15, 2021)
Vaccine Doses Administered: Public Health Sudbury & Districts Internal Data

A need to recover from the impacts of COVID-19

The pandemic itself and pandemic control measures have impacted the health of our community and we need to recover. The pandemic also has meant changes to Public Health Sudbury & Districts' services, including decreases in referrals from social services and health providers—themselves impacted by the pandemic, severe service reductions or suspensions, and services delivered virtually. There are direct and indirect consequences for health. These are felt immediately but shockwaves will likely extend far into the future. Below are just a few examples of impacts that point to post-pandemic recovery priorities for Public Health.

Public Health prenatal classes during the pandemic have been online, making it more challenging to build strong relationships with new parents. There have been fewer referrals of at-risk mothers to programs, resulting in fewer check-ins with mothers who may be struggling.



Immunization rates have decreased for young and school aged children. This puts our children and our community at risk of infections and outbreaks of diseases that are preventable by vaccines, such as measles or bacterial meningitis.

Parents of young children have reported more behavioural difficulties during the pandemic. Children have also experienced less physical activity, more injuries at home, and there have been more reports of child maltreatment. The pandemic has meant fewer supports for parents and when services are available, they are virtual. Parents using online parenting programs are having difficulty completing these programs. There have been fewer referrals from social services and health care providers to family programming. The backlog and waitlist for services for parents and children is big and growing.



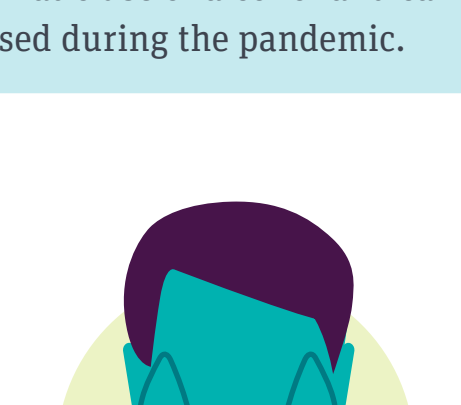
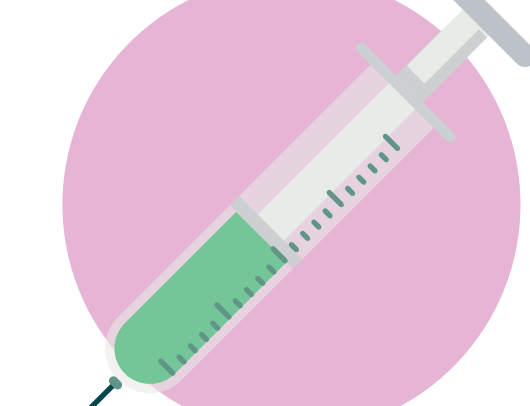
Dental screenings of children have been sporadic during the pandemic and not all children have been reassessed to ensure that their treatment has been completed. Spending more sedentary time at home and combined with no dental screening, is raising concerns about the risk of decay in primary teeth going undiagnosed.

Access to healthy foods is at risk. The Good Food Markets and Good Food Boxes have received less support from Public Health since the pandemic. Many students have not benefitted from the Northern Fruit and Vegetable Program and the Food Literacy Program, two school-based Public Health nutrition and education programs.



Safe food handling is less assured. Inspections of food premises such as restaurants and grocery stores to ensure safe food handling practices were conducted less frequently during the pandemic. This resulted in a lower number of inspections being posted to the "Check Before You Go!" website.

Substance use and opioid poisonings are growing concerns. In the first five months of 2021, the Greater Sudbury Paramedic Services responded to 338 suspected opioid-related incidents as compared to 228 in the same period in 2020. Opioid deaths increased from 56 in 2019 to 105 in 2020. It was hoped that Supervised Consumption would be closer to a reality, but the project has stalled, in part, due to the pandemic. In addition, problematic use of alcohol and cannabis increased during the pandemic.



Almost half of Ontarians report that their mental health has deteriorated since restrictions encouraging self-isolation and physical distancing were put in place. Social isolation, strained finances, and caring for children (especially for women) have been major stressors during the pandemic. A lack or a reduction of services has exacerbated these concerns, forcing people experiencing the trauma of the pandemic to bear the brunt of their struggles alone.



Restoring Public Health programs and services – post pandemic priorities

The pandemic has meant readjustments and impacts for all of us, and we need to find ways to restore our balance and find our new path forward. For Public Health, just as managing COVID-19 cases, investigating contacts, and mounting mass immunization campaigns have been monumental tasks, so too will be our restoration path forward.

First, we need to remember those we have lost, offer our profound thanks to all essential workers who continued to serve at the frontline throughout the pandemic, and take time to restore ourselves and consider the lessons learned and how we would now like our lives to unfold—individually and collectively.

We are rebuilding after a widespread disruption to our social support networks, income, education, and health systems. We can build back better, where restoration means reflecting on and learning from the lessons of the pandemic.

The collective effort required to get through the pandemic together has strengthened our kindness muscles—our ability to feel empathy for others, to be patient and to understand that we are not all healthy and safe until we all have opportunities to be healthy and safe. For Public Health Sudbury & Districts this will mean community engagement to support opportunities for health for all in area communities. Among other things, the pandemic has reinforced our need to:

Build health equity into everything we do, as the pandemic has laid bare the fact that opportunities for health are not the same for everyone—being sick with COVID-19 is a different story if you have no paid sick leave; being homeless and required to isolate is an obvious contradiction; staying at home is a frightening prospect if home is an unsafe place.

Ensure that children, youth, and families are prioritized as their immediate needs have gone unmet and disruptions in schooling have had profound impacts, especially on our kids who were already struggling academically. As we work in partnership to restore our communities, investing in our young people is critical to building a better future.

Put a greater focus on mental health, addictions, and social cohesion, recognizing that the pandemic affects everyone differently. We must meet people where they are at and be prepared to support people how and where they need it the most.

We have proven time after time that we are resilient. As a community, with hope, belonging, meaning, and purpose we can be proud of how we have responded, be dedicated to recovery, and be committed to restoring a bright future for ourselves, our families and our communities.

The pandemic has presented challenges for us all. The response has been an unprecedented whole-of-society undertaking. The leadership and contributions of Public Health Sudbury & Districts has been possible through partnership with many others. It is through the strong fabric of our communities, woven together by our relationships with and supports for one another, that we are getting through to the other side. It is through these attributes that we will recover from the pandemic and restore a brighter future for everyone.