

### Board of Health Meeting # 05-22

#### Public Health Sudbury & Districts

Thursday, October 20, 2022 1:30 p.m.

Virtual Meeting



The October 20, 2022, Board of Health meeting has been changed to a virtual meeting given the current high-risk assessment for COVID-19

# AGENDA — FIFTH MEETING BOARD OF HEALTH PUBLIC HEALTH SUDBURY & DISTRICTS VIRTUAL MEETING, MS TEAMS THURSDAY, OCTOBER 20, 2022 — 1:30 p.m.

- 1. CALL TO ORDER AND TERRITORIAL ACKNOWLEDGMENT
- 2. ROLL CALL
- 3. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST
- 4. DELEGATION/PRESENTATION
  - i) Getting Children Back on Track: School Health Promotion Team
    - Nicole Gauthier, Program Manager, Health Promotion Division
    - Nathalie Thistle, Public Health Nurse Lead, Health Promotion Division

#### 5. CONSENT AGENDA

- i) Minutes of Previous Meeting
  - a. Fourth Meeting September 15, 2022
- ii) Business Arising From Minutes
- iii) Report of Standing Committees
- iv) Report of the Medical Officer of Health and Chief Executive Officer
  - a. MOH/CEO Report, October 2022
- v) Correspondence
  - a. Healthy Babies Healthy Children (HBHC) Funding
    Board of Health for Public Health Sudbury & Districts Motion 19-22
  - Letter from the Board of Health Chair, Timiskaming Health Unit, to the Minister of Children, Community and Social Services, dated October 7, 2022
  - Letter from the Board of Health Chair, Haliburton, Kawartha, Pine Ridge District Health Unit, to the Minister of Children, Community and Social Services, dated September 15, 2022
  - b. Employer-paid Sick Days
  - Letter from the Board of Health Chair, Peterborough Public Health, to Minister of Health, Minister of Labour, Immigration, Training and Skills Development and the Minister of Economic Development, Job Creation and Trade, dated October 4, 2022

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- c. Association of Municipalities of Ontario (AMO) Submission Strengthening Public Health in Ontario: Now and for the Future
- Letter from the Board of Health Chair, Peterborough Public Health, to the Minister of Health, dated October 4, 2022

#### vi) Items of Information

a. alPHa Info Break Newsletter

September 16, 2022

#### **APPROVAL OF CONSENT AGENDA**

#### **MOTION:**

THAT the Board of Health approve the consent agenda as distributed.

#### 6. **NEW BUSINESS**

- i) Physical Literacy for Healthy Active Children
  - Briefing Note from Dr. Sutcliffe, Medical Officer of Health and Chief Executive
     Officer dated October 13, 2022

#### PHYSICAL LITERACY FOR HEALTHY ACTIVE CHILDREN

#### **MOTION:**

WHEREAS being physically active every day helps children and youth perform better in school, learn new skills, build strong muscles, improve blood pressure and aerobic fitness, strengthen bones and reduce the risk of depression<sup>i</sup>; and

WHEREAS the implementation of stay-at-home orders, closures of schools, and indoor and outdoor spaces to mitigate the spread of COVID-19 is the reduction of physical activity levels in all age groups; the percentage of youth meeting the Canadian physical activity recommendations for children and youth fell from 50.8% in 2018 to 37.2% in 2020. and;

WHEREAS the Government of Canada's national policy document Common Vision for Increasing Physical Activity and Reducing Sedentary Living in Canada: Let's Get Moving identifies physical literacy as the foundation for an active lifestyle<sup>iv</sup>. Studies show that children who have high physical literacy scores are more likely to meet national physical activity or sedentary behaviour guidelines v; and

WHEREAS physically literate individuals have been shown to have the motivation, confidence, physical competence, knowledge and understanding to value and take responsibility for engaging in physical

activities for life<sup>vi</sup> and these skills help them make healthy, active choices that are both beneficial to and respectful of their whole self, others, and their environment vii; and

WHEREAS the school community offers one of the best opportunities to improve the quality of sport and physical activity participation for children and youth; and

WHEREAS the Ontario Public Health Standards require that: "community partners have the knowledge of and increased capacity to act on the factors associated with the prevention of chronic diseases and promotion of wellbeing, including healthy living behaviours, healthy public policy, and creating supportive environments." viii This includes knowledge of the importance and impact of physical literacy on increasing physical activity participation thereby reducing the risk of chronic disease;

THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts encourage all area school boards, sport and recreation organizations, and early learning centres to work to improve physical activity levels among children and youth across Sudbury and districts, including through collaboration with Sport for Life Society, Active Sudbury and Public Health Sudbury & Districts, agencies that provide comprehensive physical literacy training to teachers, coaches, recreation providers and early childhood educators; and

FURTHER THAT a copy of this motion be shared with the Sport for Life Society, Active Sudbury, local members of Provincial Parliament, all Ontario Boards of Health, and area school boards, early learning centres and sport and recreation organizations.

- ii) Public Health Sudbury & Districts' 2021 Annual Report
  - Link forthcoming

#### 7. ADDENDUM

#### **ADDENDUM**

#### **MOTION:**

THAT this Board of Health deals with the items on the Addendum.

#### 8. ANNOUNCEMENTS

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#### 9. ADJOURNMENT

ADJOURNMENT	
MOTION:	
THAT we do now adjourn. Time:	

<sup>&</sup>lt;sup>1</sup> Centre for Disease Control and Prevention. Healthy Benefits of Physical Activity for Children (2021). Taken from: <a href="https://www.cdc.gov/physicalactivity/basics/adults/health-benefits-of-physical-activity-for-children.html">https://www.cdc.gov/physicalactivity/basics/adults/health-benefits-of-physical-activity-for-children.html</a>

ii Science Table. The Impact of Physical Activity on mental Health Outcomes during the COVID-19 Pandemic. (2022) taken from: The Impact of Physical Activity on Mental Health Outcomes during the COVID-19 Pandemic - Ontario COVID-19 Science Advisory Table (covid19-sciencetable.ca)

iii Statistics Canada. The unequal impact of the CVID-19 pandemic on the physical activity habits of Canadians. (2022) Taken from: <a href="https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm">https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm</a>

<sup>&</sup>lt;sup>iv</sup> Government of Canada. A common Vision for increasing physical activity and reducing sedentary living in Canada: Let's Get Moving. (2018) Taken from: <a href="https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html">https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html</a>

<sup>&</sup>lt;sup>v</sup> Tremblay MS, Longmuir PE, Barnes JD, Belanger K, Anderson KD, Bruner B, Copeland JL, Delisle Nyström C, Gregg MJ, Hall N, Kolen AM, Lane KN, Law B, MacDonald DJ, Martin LJ, Saunders TJ, Sheehan D, Stone MR, Woodruff SJ. Physical literacy levels of Canadian children aged 8-12 years: Descriptive and normative results from the RBC Learn to Play-CAPL project. BMC Public Health. 2018;18(Suppl 2):1036.

vi The International Physical Literacy Association, May 2014. Taken from : <a href="https://physicalliteracy.ca/physical-literacy/">https://physicalliteracy.ca/physical-literacy/</a>

vii Government of Ontario HEALTH AND PHYSICAL EDUCATION, 2019 | The Ontario Curriculum, Grades 1–8. 2019 taken from: <a href="https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849ffb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-pysical-education-elem-PUBLIC.pdf">https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849ffb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-pysical-education-elem-PUBLIC.pdf</a>

viii Government of Ontario. (June, 2021) Ontario Public Health Standards: requirements for Programs, Services and Accountability. Taken from: https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\_standards/



## MINUTES — FOURTH MEETING BOARD OF HEALTH FOR PUBLIC HEALTH SUDBURY & DISTRICTS VIRTUAL MEETING

THURSDAY, SEPTEMBER 15, 2022 – 1:30 P.M.

#### **BOARD MEMBERS PRESENT**

Claire Gignac Paul Myre Carolyn Thain
Robert Kirwan Ken Noland Dean Wenborne

René Lapierre Natalie Tessier

**BOARD MEMBERS REGRET** 

Jeffery Huska

Bill Leduc

Mark Signoretti

**STAFF MEMBERS PRESENT** 

Stacey Gilbeau Stacey Laforest Dr. Penny Sutcliffe

Dr. Imran Khan Rachel Quesnel Sandra Laclé France Quirion

**MEDIA PRESENT** 

Media

**R. LAPIERRE PRESIDING** 

#### 1. CALL TO ORDER AND TERRITORIAL ACKNOWLEDGMENT

The meeting was called to order at 1:30 p.m.

#### 2. ROLL CALL

#### 3. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST

There were no declarations of conflict of interest.

Today's tour of 1300 Paris Street for the Board of Health members has been postponed and the BOH Secretary will advise once a new date has been booked.

#### 4. DELEGATION/PRESENTATION

- i) Getting Children Back on Track: Vaccine Preventable Diseases Program Recovery
  - Sandra Laclé, Director, School Health, Vaccine Prevention Diseases and COVID Prevention Division
  - Renée St Onge, Director, Knowledge and Strategic Services Division

Co-presenters, S. Laclé and R. St Onge, were invited to provide an update on Public Health Sudbury & Districts recovery efforts in vaccine preventable diseases programming. The importance of *getting children back on track*, was outlined and noted as one of the four recovery program priorities from the Public Health Sudbury & Districts Recovery Plan released in February 2022.

The objectives of the immunization program, per the Ontario Public Health Standards, are to prevent, control, eliminate, or eradicate vaccine-preventable diseases by directly protecting vaccine recipients and indirectly protecting those who are vulnerable. Being one of the most important accomplishments in public health, immunization is also one of the most beneficial and cost-effective public health interventions. In addition to the COVID-19 vaccine, there are a number of vaccines for children and youth funded by the Province of Ontario.

The local response to COVID-19 pandemic has had an impact in many ways on Public Health Sudbury & Districts' ability to focus on regular public health programs and services and resulted in significant backlogs, including aspects of childhood immunization programming such as data entry and various vaccinations. A number of strategies employed by Public Health to address the growing backlog for these areas within the vaccine preventable disease (VPD) programming:

- Vaccination record data entry
- Grade 7 and 8 school immunization program
- Vaccines for designated diseases

Engagement with and participation of partners, such as school boards and health care providers, is a key factor to increasing overall vaccine uptake and reducing the vaccine backlog. Building capacity is also being focused on to ensure sufficient resources, including cross-training of Public Health nurses to support all types of clinics.

Future considerations include integrating COVID-19 vaccines into VPD programming and clinic operations and extension of clinic availability at our office locations, including the new clinic space at 1300 Paris Street.

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Comments and questions were entertained. Dr. Sutcliffe highlighted that that there have been substantial barriers to accessing routine vaccinations throughout the COVID-19 pandemic and PHSD will resume issuing school suspension notices under the *Immunization of School Pupils Act* following the assessment and provision of opportunities for children to get caught up through catch-up clinics and school-based clinics.

It was concluded that this is but one area of our post-pandemic priorities and clearly highlights the deficits and gaps resulting from the COVID-19 response. Further to an inquiry regarding the continued support from partners for immunization, it was noted that PHSD is still very busy with the COVID-19 vaccination program and exploring all options, including partnerships and casual staff.

The co-presenters were thanked.

#### 5. CONSENT AGENDA

- i) Minutes of Previous Meeting
  - a. Third Meeting June 16, 2022
- ii) Business Arising From Minutes
- iii) Report of Standing Committees
  - a. Board of Health Executive Committee, unapproved minutes dates July 13, 2022

#### iv) Report of the Medical Officer of Health / Chief Executive Officer

a. MOH/CEO Report, September 2022

#### v) Correspondence

- a. Public Health Funding
- Letter and report from the Board of Health Chair, Niagara Region, to the Minister of dated July 29, 2022
- Ministry of Health New Release dated August 17, 2022
- b. Healthy Babies Healthy Children Funding
- Letter from the Board of Health Chair, Middlesex-London Health Unit, to Dr.
   Sutcliffe, dated July 27, 2022
- Letter from the Director, Ministry of Children, Community and Social Services, to Dr. Sutcliffe, dated July 26, 2022
- Letter from the Board of Health Chair, Grey Bruce Health Unit, to the Minister of Children, Community and Social Services, dated July 20, 2022
- Letter from Dr. Sutcliffe, to the Minister of Children, Community and Social Services, dated June 21, 2022

- c. Opioid Crisis
- Letter from the Board of Health Chair, Niagara Region, to the Deputy Premier and Minister of Health, dated July 22, 2022
- Letter from the Board of Health Chair, Timiskaming Health Unit, to the Deputy
   Premier and Minister of Health, dated July 15, 2022
- d. Employer-paid Sick Days
- Letter from the Board of Health Chair, Niagara Region, to the Deputy Premier and Minister of Health and the Minister of Labour, Immigration, Training and Skills Development, dated July 19, 2022
- e. Decriminalization of Personal Possession of Illicit Drugs
- Letter from the Board of Health Chair, Timiskaming Health Unit, to the Federal Minister of Health, dated July 15, 2022
- f. alPHa Board of Directors and alPHa Executive
- Email from the Boards of Health Section Chair, alPHa, to all Board of Health members, dated July 6, 2022
- g. Indoor Air Quality Improvement COVID
- Letter from the Board of Health Chair, Niagara Region, to the Federal Minister of Intergovernmental Affairs, Infrastructure and Communities, dated July 5, 2022
- h. Tobacco and Vaping Products Act
- Letter from Board of Health Chair, Grey Bruce Health Unit, to the Health Canada Office of Policy and Strategic Planning, Tobacco Control Directorate, Controlled Substances, dated June 15, 2022
- i. Public Health Structure in Ontario
- Association of Municipalities of Ontario (AMO) submission to the Ministry of Health titled "Strengthening Public Health in Ontario: Now and for the Future", August 26, 2022
- Letter from the Association of Local Public Health Agencies (alPHa) President to the Deputy Premier and Minister of Health, dated July 18, 2022

#### vi) Items of Information

a. alPHa Info Break Newsletter

June 2022 July 2022

August 2022

#### 21-22 APPROVAL OF CONSENT AGENDA

MOVED BY WENBORNE – THAIN: THAT the Board of Health approve the consent agenda as distributed.

**CARRIED** 

#### 6. **NEW BUSINESS**

#### i) Public Health Sudbury & Districts 2018 – 2022 Strategic Plan

 Briefing Note from the Medical Officer of Health and Chief Executive Officer dated September 8, 2022

Dr. Sutcliffe noted that the current Public Health Sudbury & Districts Strategic Plan, 2018 – 2022, expires on December 31, 2022, and, considering the COVID-19 pandemic response, an extension is being requested into 2023, but not beyond December 31, 2023. An extension would allow for a robust engagement, post 2022 municipal election, with Board of Health members, staff, clients, and community partners to inform the next iteration of the Strategic Plan.

Questions were entertained and it was clarified that there is no financial impact of this recommendation. It was noted that engaging newly appointed Board of Health members 2023 in the development of the strategic plan will be a beneficial exercise. The following motion was entertained in light of the Board of Health's responsibility under the Ontario Public Health Standards to develop a 3-to-5-year strategic plan.

#### 22-22 PHSD STRATEGIC PLAN EXTENSION

MOVED BY NOLAND – MYRE: THAT the Board of Health for Public Health Sudbury & Districts approve the extension of the 2018 – 2022 Strategic Plan into 2023, but not beyond December 31, 2023, to permit the engagement and leadership of the Board of Health following the 2022 municipal election.

**CARRIED** 

#### ii) Board of Health Manual Review

 Briefing Note from the Medical Officer of Health and Chief Executive Officer dated September 8, 2022

A review of the Board of Health manual is conducted every two years with any pressing or important matters being addressed in between. The briefing note outlines the proposed changes attached in today's package with tracked changes. A careful review of the Board of Health orientation program and conflict of interest will be carefully reviewed during the next review cycle.

#### 23-22 BOARD OF HEALTH MANUAL

MOVED BY GIGNAC – WENBORNE: THAT the Board of Health, having reviewed the proposed revisions within the Board of Health Manual, approve the Manual as presented on this date.

**CARRIED** 

#### iii) Board of Health Meeting Date

Per changes to the *Municipal Elections Act*, the term of municipal elected officials ends November 14, 2022. It is proposed that the November 17, 2022, Board of Health meeting be moved up by one week to ensure quorum at the November meeting.

An updated meeting request will be sent to secure the date and ensure quorum.

#### 24-22 BOARD OF HEALTH MEETING DATE

MOVED BY KIRWAN – TESSIER: WHEREAS the Board of Health regularly meets on the third Thursday of the month; and

WHEREAS By-Law 04-88 in the Board of Health Manual stipulates that the Board may, by resolution, alter the time, day or place of any meeting;

THEREFORE BE IT RESOLVED THAT this Board of Health agrees that the regular Board of Health meeting scheduled for 1:30 p.m. Thursday, November 17, 2022, be moved to 1:30 pm on Thursday, November 10, 2022.

**CARRIED** 

#### iv) Saving Lives through Lifejacket and Personal Flotation Device Legislation

 Briefing Note from the Medical Officer of Health and Chief Executive Officer dated September 8, 2022

The Board of Health Chair indicated that this is an important life-saving topic and that, similar to the introduction of mandatory seatbelt law, may be met with resistance but can prevent deaths. Rates of deaths and emergency visits resulting from a drowning or submersion injury related to watercraft in Sudbury & districts were outlined.

While current federal legislation exists requiring that lifejackets or Personal Flotation Devices (PFDs) be on board vessels, there are no legislative requirements for the wearing of a lifejacket or PFD while on a pleasure boat

It was noted that any death that is preventable is important. Bill 76, *Lifejackets for Life Act*, 2022 passed second reading on February 22, 2022, however, did not proceed before the calling of the 2022 provincial election. Today's motion includes similar wording and related advocacy.

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Comments and questions were entertained. A Board member shared observations that many boating accidents and deaths are alcohol related. He also noted potential challenges with enforcement of such legislation. It was remarked that wearing a PFD is a personal choice and adherence may be low.

It was acknowledged that, the MOH has identified a health and safety issue that adversely affects the population, and the Board of Health has an opportunity to advocate and lobby for change and influence measures that would prevent catastrophic deaths.

It was noted that the Board of Health has a duty to assess health risks and advocating on such public health matters is within the Board of Health mandate, including for example, previous advocacy for smoke-free spaces. Board of Health letters of advocacy on various topics have been sent to various levels of government in the past, including on the legislation of cannabis. These advocacy measures contribute to important conversations and provide public health perspectives.

## 25-22 SAVING LIVES THROUGH LIFEJACKET AND PERSONAL FLOTATION DEVICE LEGISLATION

MOVED BY LAPIERRE – MYRE: WHEREAS over the 10-year period 2012 – 2021, 2147 Ontarians had emergency visits that resulted from a drowning or submersion injury related to watercraft and 208 Ontarians died because of a drowning or submersion injury related to watercraft over the last 10 years of complete data (2006-2015); locally during the same periods 65 Sudbury & districts residents had emergency visits that resulted from a drowning or submersion injury related to watercraft and 8 died because of a drowning or submersion injury related to watercraft; and

WHEREAS the Ontario Public Health Standards require boards of health to be aware of and use data to influence and inform the development of local healthy public policy for preventing injuries; and

WHEREAS although there is federal legislation requiring that lifejackets or personal flotation devices (PFD) be on board vessels, there is no legislation requiring that individuals wear a lifejacket or PFD while on a pleasure boat; and

WHEREAS legislation requiring the wearing of lifejackets and PFDs has been demonstrated in other jurisdictions to save lives;

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THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts strongly advocate for legislation requiring all individuals to wear a personal flotation device (PFD) or lifejacket while on a pleasure boat that is underway, or while being towed behind a pleasure boat using recreational water equipment;

AND FURTHER THAT a copy of this motion be submitted to the Premier of Ontario, the Minister of Health, Minister of Transportation, local members of Provincial Parliament, the Chief Medical Officer of Health, the Association of Local Public Health Agencies (alPHa), and all Ontario Boards of Health.

YEAS: (6) Gignac, Kirwan, Myre, Noland, Tessier, Lapierre NAYS: (2) Thain, Wenborne

CARRIED (6 TO 2)

## v) Public Health Sudbury & Districts Recovery Plan Progress Update: From Risk to Recovery

- Briefing Note from the Medical Officer of Health and Chief Executive Officer dated September 8, 2022
- Public Health Sudbury & Districts Recovery Plan Progress Report:
   March August 2022

The briefing note and accompanying report provide the Board of Health with an update on the progress to date on the four community-focused recovery priorities identified in the Recovery Plan and approved by the Board of Health: getting children back on track, levelling up opportunities for health, fostering mental health gains, and supporting safe spaces. The Board was also informed on the progress made to the internal people and processes recovery priority to support the agency in transitioning from risk to recovery and resilience

As highlighted in the progress report, progress has been made on advancing the key initiatives within all four recovery priorities, however, as evidenced through today's delegation on vaccine preventable disease – but one priority initiative – more needs to be done. Public Health remains dedicated to the ongoing work to advance the recovery priorities and to meeting the needs in the communities. Concurrently, Public Health remains steadfast in continuing to support the necessary COVID-19 response activities.

Dr. Sutcliffe noted that the PHSD team has undertaken a careful risk approach on how to allocate resources appropriately and will continue to assess the risks and stretch resources to prioritize health risks in its communities. It is recommended that the Board of Health reaffirm its commitment to addressing these priorities while proportionately investing in the agency's COVID-19 response.

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26-22 PROPORTIONATE RISK-BASED APPROACH TO BALANCING RECOVERY PRIORITIES AND ONGOING COVID-19 RESPONSE ACTIVITIES

MOVED BY KIRWAN – NOLAND: WHEREAS the initial response in the first two years of the COVID-19 pandemic required Public Health Sudbury & Districts (Public Health) to stop or radically reduce many of its public health programs and services, resulting in a growing backlog of public health programs and services and unmet needs in the communities served by the Board; and

WHEREAS in February 2022, the Board of Health approved Public Health's plan to get back on track by addressing the recovery priorities outlined in its Recovery Plan, Public Health Sudbury & Districts and the COVID-19 pandemic: From risk to recovery and resilience; and

WHEREAS as demonstrated through Public Health's Recovery Plan Progress Report: March to August 2022, progress to advance our identified recovery priorities through key initiatives has been made, however, additional backlogs and unmet community needs remain; and

WHEREAS the Board of Health faces the challenge of appropriately (re)allocating finite human and financial resources to balance the health risks associated with the ongoing pandemic with the health risks associated with the growing backlog of public health programs and services and unmet community needs; and

WHEREAS the COVID-19 vaccine surge scenarios provided by the provincial government for fall planning purposes will require significant increases to local vaccination capacity; and

WHEREAS without substantial increases in local vaccination capacity of other providers (e.g., pharmacy, primary care, acute care), Public Health staff will again need to be redeployed in large numbers to meet the fall vaccine surge scenario, stalling our work on the community-focused recovery priorities and our ability to mitigate non-COVID-19 health risks;

THEREFORE BE IT RESOLVED that the Board of Health for Public Health Sudbury & Districts reaffirm its commitment to using a risk-based approach to ensure a proportionate response to COVID-19 while balancing its response to the recovery priorities outlined in its Recovery Plan.

**CARRIED** 

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#### 7. ADDENDUM

No addendum.

#### 8. ANNOUNCEMENTS

- As part of the various activities leading up to National Truth and Reconciliation Day, Public Health Sudbury & Districts will be hosting a Truth and Reconciliation virtual event, on September 20, 2022, from 6 to 8 p.m. with keynote speaker, Dr. Marcia Anderson, Vice-Dean Indigenous Health, Social Justice, and Anti-Racism from the University of Manitoba and Medical Officer of Health with Indigenous Services Canada-Manitoba Region. Board of Health members are invited to attend. Registration information can be found in the poster attached to today's meeting event in BoardEffect.
- Board of Health members are asked to complete:
  - annual 2022 Board of Health self-evaluation questionnaire in BoardEffect (under the Board of Health workroom – Collaborate – Surveys) by Friday, October 21, 2022
  - Board of Health members will be alerted once the MOH/CEO performance appraisal survey is available for completion in BoardEffect
  - annual emergency preparedness training by October 31, 2022, and are asked to email Rachel once the Power Point training has been reviewed
  - o September Board of Health meeting evaluation following today's meeting
- Next regular meeting is Thursday, October 20, 2022, at 1:30 p.m.

#### 9. ADJOURNMENT

27-22 ADJOURNMENT	
MOVED BY WENBORNE – GIGNAC: THAT we d	lo now adjourn. Time: 2:30 p.m.
	CARRIED
(Chair)	(Secretary)



## Medical Officer of Health/Chief Executive Officer Board of Health Report, October 2022



Source: Reconciliation and Public Health Power Point Presentation

Date: September 20, 2022

We were honoured to recognize National Day for Truth and Reconciliation this year with two presentations by Dr. Marcia Anderson, Executive Director, Indigenous Academic Affairs, Ongomiizwin Indigenous Institute of Health and Healing, Vice-Dean, Indigenous Health, University of Manitoba. Daytime and evening sessions provided opportunities for staff, partner agencies, and the public to hear Dr. Anderson reflect on reconciliation and public health. Our Board Chair introduced the evening session. We also commemorated September 30 with our first agency-wide statutory holiday and built up to this day with staff activities and resources to promote reflection, including workshops on territorial acknowledgements. I look forward to working with the Board during future opportunities to consider actions in support of reconciliation within local public health.

#### **General Report**

#### 1. Board of Health

#### Annual Board of Health Self-Evaluation

Reminder that each Board of Health member is asked to complete the annual 2022 self-evaluation questionnaire in BoardEffect (under the Board of Health workroom—Collaborate—Surveys) by Friday, October 21, 2022. Results of the annual Board of Health member self-evaluation of performance evaluation will be presented at the November 10, 2022, Board of Health meeting.

#### Mandatory training for Board of Health members

Board of Health members are required to review the emergency preparedness PowerPoint attached to the October Board of Health meeting event in BoardEffect. The presentation can also be accessed in BoardEffect under Libraries—Board of Health—Annual Mandatory Training: Emergency Preparedness Training for Board Members. Please email quesnelr@phsd.ca by October 31, 2022, to confirm completion of the annual mandatory training.

#### Flu vaccination

If the COVID-19 Risk Index level permits in-person attendance, Board of Health members can receive their influenza immunization on Thursday, November 10, 2022, at the 1300 Paris Street site, before the Board of Health meeting between 1 and 1:30 p.m. or following the Board of Health meeting between 3 and 4 p.m. Please announce your arrival at the main reception. Alternatively, Board of Health members can book an appointment for their flu vaccination by calling 705.522.9200, and speaking to a receptionist.

#### 2. Local and provincial meetings

I participated in the Council of Ontario Medical Officers of Health (COMOH) Executive meeting on September 20, COMOH section meeting on September 21, the COMOH Drug/Opioid Poisoning meeting on October 3, as well as the COMOH Forum on October 5.

NOSM University held its Public Health Prevention accreditation/orientation meeting on October 3 and I also attended the PHPM RPC meeting on October 4.

The ministry continues to host weekly COVID-19 public health coordination meetings as well as regular COVID-19 Vaccination Operational and Planning meetings.

I and Dr. Khan participated in the Northern Medical Officer of Health meetings along with northern MOH/AMOH colleagues and recent meetings were held September 21 and October 5. I, along with the Board Chair, R. Lapierre, attended the alPHa Board of Directors meeting on September 29.

Medical Officer of Health/Chief Executive Officer Board Report – October 2022 Page 3 of 17

I was invited as a key partner to present at the Health Sciences North's Board Meeting on September 27, 2022, regarding *Public Health Sudbury & Districts: Who we are and what we do* and provided an opportunity reflect on the COVID-19 local public health response.

#### 3. Financial Report

The financial statements ending August 2022 show a positive variance of \$1,405,736 in the cost-shared programs before considering COVID-19 extraordinary expenses. The statements account for \$5,261,587 in COVID-19 extraordinary expenses incurred to the end of August. Cost-shared funding must be fully utilized prior to utilizing COVID extraordinary funding, therefore the actual variance in cost shared programs at August 31 is \$0 with \$3,855,850 in COVID-19 extraordinary expenses. The Ministry has approved funding for COVID-19 extraordinary programming in the amount of up to \$8,344,000 for 2022, of which we have received \$5,562,672 up to August 31.

#### 4. Quarterly Compliance Report

The agency is compliant with the terms and conditions of our Public Health Funding and Accountability Agreement.

Public Health Sudbury & Districts has paid all payable remittances for employee income tax deductions and Canada Pension Plan and Employment Insurance premiums, as required by law to September 29, 2022, on October 3, 2022. The Employer Health Tax has been paid, as required by law, to September 30, 2022, with an online payment date of October 14, 2022. Workplace Safety and Insurance Board premiums have also been paid, as required by law, to September 30, 2022, with a cheque dated October 31, 2022. There are no outstanding issues regarding compliance with the Occupational Health & Safety Act, Ontario Human Rights Code, or Employment Standards Act.

#### 5. 2024 Cost-Shared Operating Budget

The 2023 budget planning process started in the middle of August and the Senior Executive Committee continues to meet to review and prepare the 2023 operating budget. The Finance Standing Committee of the Board is scheduled to meet on October 31, 2022, to review a draft budget with the recommended budget being presented at the November 10, 2022, meeting of the Board of Health.

#### 6. Board of Health Manual

Board of Health Manual revisions approved at the September 15, 2022, Board of Health meeting are being updated on the website and in BoardEffect.

## 7. Employer Monitoring of Employee Behaviour through Electronic Devices

On April 11, 2022, the Ontario government passed Bill 88, which subsequently amended the *Employment Standards Act*, 2000 ("ESA") to require employers with 25 or more employees to create a written policy containing information on whether, how, and in what circumstances the employer monitors employee behaviour through electronic devices. The new policy requirement is only meant to provide transparency to employees regarding the use of their electronic data by employers for monitoring purposes.

Public Health Sudbury & Districts' General Administrative Manual (GAM) Electronic Monitoring Policy came into effect October 11, 2022, and has been developed using the Ministry Guide. The purpose of this Policy is to provide transparency to workers of Public Health regarding the use of electronic data by the agency for monitoring purposes.

#### Namely, it describes:

- 1. how the agency may electronically monitor workers,
- 2. the circumstances in which the agency may electronically monitor workers, and
- 3. the purposes for which information obtained through electronic monitoring may be used by the agency.

This policy must be shared with all staff and provided to new staff upon hire.

Following are the divisional program highlights.

#### **Health Promotion**

#### 1. Chronic Disease Prevention and Well-Being

#### Seniors Dental Care

Since the start of the Ontario Seniors Dental Care Program (OSDCP), we have enrolled over 700 clients. As PHSD worked on the capital project at Elm Place, we have collaborated with community dentists to provide dental treatment as listed in the program schedule of benefits. The demand for services has exceeded the capacity of these community dentists, who are on contract with PHSD, resulting in a delay of patients receiving care with appointment availability recaching into spring of 2023. This backlog was further compounded by the unsuccessful recruitment of a full-time dentist for the Elm Place clinic. As of September, there were 53 patients waiting for treatment. In September, a locum dentist was hired on a part-time basis for September-November to address this wait list. We anticipate that 16-20 patients, who have multiple appointments will be treated with the support of the locum dentist. Currently, even with this support, there continues to be a wait list of 32 patients.

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In 2022, 133 clients have received or are receiving denture related services, and 48 patients are waiting for denture service upon completion of their dental treatment which consists of extractions and fillings.

#### 2. Healthy Growth and Development

#### **Breastfeeding**

Throughout the month of September, Public Health Sudbury & Districts' breastfeeding clinic provided 113 in-person and virtual breastfeeding clinic appointments to clients. Appointments were offered at the main site, Val Caron, Espanola, and Mindemoya offices.

#### Growth and development

Working in ongoing partnership with Health Sciences North Birthing Centre, the Healthy Families Team provided resources on the Period of Purple Crying to be distributed to new parents. The goal of this program is to help explain that some babies will cry even though there is nothing wrong. This is also a tool that encourages parents to seek support when needed, practise self-care, and help prevent shaken baby syndrome.

The Healthy Families Team also provided enhanced 18-month resources to the Shkagamik-Kwe Health Centre. These resources will be shared with the families that participate in their programming.

In response to the infant formula shortage, a media interview was provided to CBC to discuss the situation and options for parents. This is in follow-up to an Advisory Alert article that was published on phsd.ca.

During the month of September, 66 reminder postcards were sent to families encouraging them to make appointments for their child's 18-month screening with their health care providers. The goal of this reminder is to have more infants screened for milestones that are indicators of healthy growth and development.

#### **Health Information Line**

During the month of September, the Health Information Line received 105 calls requesting information on the following topics: family dynamics and difficulties with partners/spouses, pregnancy, breastfeeding, formula feeding, vaccination and immunization of children, lack of a primary health care provider, as well as some requests for mental health services.

#### Healthy Babies Healthy Children

Throughout the month of September, the Healthy Babies Healthy Children program continued to provide support to 188 client families. A total of 819 interactions (in-home or virtual visits, as

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well as phone calls) were completed. Public Health dietitians continue to provide nutrition support to clients who are identified as high nutritional risk by public health nurses.

#### Healthy pregnancies

During the month of September, the Healthy Families Team partnered with Our Children Our Future to deliver a presentation on Creating Healthy Babies. This program offers expectant mothers the opportunity to receive emotional, educational and nutritional support to assist them in developing a healthy baby during their pregnancy.

During the month of September, 100 people registered for the Healthy Families Team's online prenatal course. This course provides information on life with a new baby, infant feeding, as well as the importance of self-care and the changes a new baby can bring to relationships.

#### 3. School Health

School Health Team efforts have been concentrated on planning and providing resources for all recovery programming to school communities as we embark on a new school year. Meetings took place with school boards to revisit identified needs, priority schools and available comprehensive school health programing and resources. Notable resource requests from schools included nutrition kits, dental presentations, mental health and substance use, specifically vaping, opioids and naloxone.

#### **Mental Health Promotion**

Public Health Sudbury & Districts delivered a workshop on "Character Strengths" to Sudbury Catholic District School Board's mental health team members. In total, there were sixteen participants in attendance.

Public Health Sudbury & Districts continues to co-lead with Compass the development of a Youth Wellness Hub for the City of Greater Sudbury youth aged 12 to 25 years old. Public Health participated in site visits of three established Hub locations including Midland, North York, and Welland. Lessons learned from these visits will help inform decisions for Sudbury Youth Wellness Hub site selection, service delivery model, staffing, youth engagement, promotion and communications, partnerships, and governance.

#### **Oral Health**

Staff commenced delivery of the annual school dental screening program at the end of September. Due to the COVID-19 pandemic, this program had been restricted to higher-risk schools during the previous school year (i.e., schools with historically higher rates of tooth decay and urgent dental referrals). Delivery will return to full capacity for the 2022-2023 school year, with screening to occur in all elementary schools in the catchment area. Staff also continued to provide preventive dental care at the Paris Street office and district offices to children enrolled in the Healthy Smiles Ontario Program.

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Through routine monitoring, Public Health Sudbury & Districts determined that the fluoride concentrations in the water supply from the Vermillion Water Treatment Plant operated by the City of Greater Sudbury and Vale are below therapeutic levels for optimal oral health. The low fluoride concentration is understood to be the result of equipment failure at the plant.

In accordance with the requirements of the Ontario Public Health Standards, Public Health Sudbury & Districts reviews drinking water quality reports for all municipal drinking water supplies in which fluoride is added and is required to inform affected residents when fluoride concentrations in their water supply fall below therapeutic levels (0.6ppm) for more than 90 consecutive days. This notification requirement has been actioned.

There are no immediate health risks to the public. Optimal levels of fluoride are added to drinking water systems as a safe and effective way to prevent tooth decay. The reduced fluoride levels means that residents who receive their water supply from the Vermillion Water Treatment Plant are not receiving optimal amounts of fluoride through their drinking water. This includes residents of Atikameksheng Anishnawbek, Copper Cliff, Creighton, Little Creighton, Lively, Mikkola, Naughton, and Whitefish.

#### Road and off-road safety

Social media posts were developed and published on Facebook and Twitter as part of back-to-school messaging. The focus is on pedestrian safety and active transportation. All back to school social media posts were shared with the school boards for further engagement and to expand the reach of our messaging.

#### Substance use and harm reduction

Along with community partners, Public Health Sudbury & Districts participated in the Mustang Expo at Manitoulin Secondary School on September 28, providing resources on substance use including naloxone, opioids, and vaping to students at all grade levels. This event included the participation of students, school groups, and staff, with approximately 400 in attendance.

#### 4. Substance Use and Injury Prevention

#### Alcohol and Cannabis

On September 22, 2022, the Mental Health and Substance Use Team provided 54 lock boxes to the Children's Aid Society. These lock boxes are to ensure cannabis is stored away out of reach of children, youth and pets. In each lock box, there was a thank you card, as well as a lower-risk cannabis use guideline pamphlet in both English and French.

#### Comprehensive tobacco control

From September 12 to 18,2022, Public Health Sudbury & Districts ran a radio ad (both in French and English) throughout Sudbury, Espanola, Manitoulin, and Chapleau. This ad promoted the Centre for Addition and Mental Health's Stop on the Net, an online program for smoking

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cessation. In addition, throughout the month of September, 60 public transportation buses in Sudbury have displayed interior bus ads in both French and English to promote Stop on the Net.

#### Life promotion, suicide risk and prevention

In honour of World Suicide Prevention Day, the Suicide Safer Network held an event at Bell Park on September 10 to raise awareness and reduce stigma. The event held activities such as rock painting, yoga and a resource fair. They also had a series of speakers with lived experience to foster hope and provide a voice to decrease suffering in silence.

#### Mental health promotion

The first Canadian Mental Health Association Mental Health Promotion in Public Health Community of Practice meeting was hosted since a Public Health Sudbury & Districts Nurse became the new co-chair. Meeting topics included training opportunities for trauma-informed practice, strategies to encourage early identification of mental health concerns at the primary care level, and public health units experiences with staff returning to work after extended leave.

#### Substance Use

In September, the Community Drug Strategy for the City of Greater Sudbury Executive Committee and the Community Drug Strategy Steering Committee met. These meetings updated members on initiatives that are happening in the community, increased awareness of current trends surrounding drug use, and discussed the need to update the Community Drug Strategy priorities and workplan.

In August, the Mental Health and Substance Use Team received four media requests. The first request was from Manitoulin Expositor to discuss International Overdose Awareness Day, naloxone distribution, and the supervised consumption site. The second <u>media request</u> was through CBC Morning North, which took place with Dr. Sutcliffe speaking to the data released by Ontario's Chief Coroner on opioid-related deaths. The other two <u>media requests</u> were with the Sudbury Star and CTV which were also regarding the data released by the coroner.

In September, the Mental Health and Substance Use Team provided key messages for Dr. Sutcliffe's <u>interview</u> with TVO. Dr. Sutcliffe, along with other leaders in the north, had the opportunity to discuss the opioid crisis, particularly the impact it has on northern communities, and how public health and respective communities are dealing with this issue.

The supervised consumption site located at 24 Energy Court opened on Wednesday, September 28. The Mental Health and Substance Team developed a press release and social media that was widely shared.

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#### Harm reduction - Naloxone

In July, Public Health Sudbury & Districts and community partners in our region distributed a total of 1298 naloxone doses. For the month of August, there were 732 doses distributed.

In August, the Mental Health and Substance Use Team received a <u>media request</u> through Manitoulin Expositor to discuss naloxone distribution in Sudbury and districts. The team also provided naloxone training to Laurentian University and provided a presentation to AOK First Nation attendees for International Overdose Awareness Day.

In September, the Mental Health and Substance Use Team provided two presentations to the Manitoulin COVID-19 Leadership Committee and to the Sudbury East Community Planning Committee to provide information on the harm reduction expansion initiative and naloxone distribution. Staff also provided internal knowledge exchange to the Public Health Sudbury & Districts' School Health Team. One naloxone training session took place with staff from Kina Gbezhgomi Child & Family Services.

Public Health Sudbury & Districts worked with Health Sciences North on a pilot project to have naloxone available for distribution on all units, including inpatient settings. There has been notable success and positive feedback. The Mentoring, Education, and Clinical Tools for Addiction: Partners in Health Integration (META:PHI) Newsletter (<a href="http://www.metaphi.ca/news/newsletter/">http://www.metaphi.ca/news/newsletter/</a>) mentions that people reacted positively as the floors began handing out kits, which not only encouraged the spread of the program but also helped to reduce stigma within the hospital environment. This was the first pilot project of its kind in Ontario.

#### Smoke Free Ontario Strategy

The North East continues to collaborate with the Tobacco Control Area Networks (TCANs) across the province to support each other and our Health Units moving through 2022 and into 2023. Two situational assessments are near completion and will be shared shortly. The North East TCAN through the support of CTV/Bell Media currently has messaging in market for Smoke-Free Campuses and Stop On the Net smoking cessation support.

## School Health, Vaccine Preventable Diseases and COVID Prevention Division

#### 1. Vaccine Preventable Diseases

Universal Influenza Immunization Program (UIIP): Planning is underway for this year's
fall/winter Universal Influenza Immunization Program (UIIP). It includes offering flu
vaccination at select COVID-19 co-administration clinics to allow for evening and weekend

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appointment availability, as well as flu clinics at 1300 Paris Steet and our district offices throughout the months of October and November.

- School Clinics (Grade 7 Vaccines): Letters were sent to all school principals, as well as parents/guardians of students, advising that Public Health Sudbury & Districts will be offering no-cost vaccinations to Grade 7 students at their schools this fall and spring. The information package to parents and school administrators included information on vaccines and products administered (Hepatitis B, Meningococcal, Human Papilloma virus), consents, as well as space and clinic allocation requirements to ensure ongoing precautions to safeguard the health of students and staff within schools.
- Vaccine Preventable Diseases Team staff, with the ongoing assistance of the School Focussed Nurses Team, continue to input immunization record submissions into PANORAMA to address/tackle our backlog of data. Excellent progress is being made in addressing the backlog prior to the initiation of *Immunization of School Pupils Act* (ISPA) enforcement.
- COVID-19 vaccine clinics at 1300 Paris Street are available for the under five years of age population.

#### 2. COVID and Schools

School focussed nurses (SFN) have continued to support members of the school and licensed child care centre (LCCC) communities regarding illness prevention. This support includes, but is not limited to, a dedicated phone line, monitoring reports of illness activity, developing messaging related to illness prevention, and responding to media requests specific to illness prevention in schools and LCCCs. In preparation for 'return to school', SFN staff have been in contact with over 90 schools to support messaging specific to preventing illness in school-aged children.

SFN staff have been involved in planning, promoting, and organizing COVID-19 vaccinations for children aged six months to five years. Staff have been reviewing and updating immunization records, as well as contacting individuals who are due/overdue for routine immunizations and offering clinic appointments. Over 500 eligible students who are due/overdue for routine immunizations have been contacted and staff have been assisting with community catch up clinics for routine immunizations in our districts.

Staff have contributed to web updates for school-related requirements and FAQ/social media campaigns related to vaccination campaigns. Staff have also completed over 103 cold chain inspections in our districts for physician offices, pharmacies, hospitals, jails, etc., during the month of August.

Staff continue to respond to school/LCCC and summer camp staff, parents/guardians and families in our school/LCCC COVID-19 specific call-in line. Staff continue to support our Vaccine

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Preventable Diseases Team with cold chain inspections, community awareness campaigns, community vaccination clinics, school-based vaccination clinics, and COVID-19 vaccinations for the pediatric population.

#### 3. COVID-19 Vaccination Opportunities

Throughout September and early fall, Public Health Sudbury & Districts continued to offer many COVID-19 vaccination opportunities across Sudbury & Districts. Opportunities for COVID-19 vaccinations continued for Indigenous communities and other priority populations, such as a visit to the Elgin Street Mission with the mobile vaccination bus. The vaccine-to-vehicle and homebound vaccination programs also continue for clients who were unable to attend regular clinics. Pop-up clinics were also scheduled in outlying areas such as Gogama and Killarney to ensure opportunities in communities not regularly visited. Together, all clinic offerings ensured that a sufficient number of appointments were available for the administration of the newly available Moderna Bivalent vaccine (effective September 12 for select high risk populations, and September 26 for everyone 18 years and over) as well as other vaccine products for the eligible groups.

#### 4. COVID-19 Vaccine Planning

As of September 27, a total of 89.2% of residents ages five and up received their first dose of the COVID-19 vaccine, while 85.8% received their second dose. First booster doses have been administered to 57.7% of residents aged 12 and older, while second booster doses have been administered to 20.9% of residents aged 18 and older. From September 12 to 27, over 3100 bivalent boosters were administered. Additionally, since the launch of the under five COVID-19 vaccination program at the end of July, a total of 5.8% of local children in this age group have received their first dose. Children under five who received their first dose at the end of July will be eligible to receive their second doses in the coming weeks.

In order to improve and encourage ongoing vaccine uptake, communications materials such as weekly public service announcements, a social media series called "protect your family", and vaccination clinic posters continue to be developed and distributed throughout Sudbury & districts. Additional efforts are underway to increase uptake among children six months to five years of age. Information sheets have been created for to share details about pediatric COVID-19 vaccines for dissemination through licensed child care facilities, school boards, community partners, and printed for clients in public health clinics.

#### **Health Protection**

Environmental Public Health Week was celebrated September 26, to October 2, 2022. A media release was issued for the occasion. This year's theme was *Strength through collaboration* which recognized that public health inspectors work collaboratively with partners to control

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disease, hazards, and injury and help Canadians stay out of hospitals, prevent illness, and premature death by reducing environmental-related health risks to members of our communities. The media release outlined the role of public health inspectors and highlighted that our inspectors continued with their important work throughout the COVID-19 pandemic all the while supporting the pandemic response.

#### 1. Control of Infectious Diseases (CID)

In September, staff followed-up with 925 new local cases of COVID-19.

Thirteen respiratory outbreaks were declared in the month of September. The causative organism for all 13 outbreaks was identified as COVID-19. Staff continue to monitor all reports of enteric and respiratory illness in institutions, as well as sporadic communicable diseases.

During the month of September, two infection control complaints were received and investigated in addition to three requests for service.

During the October 11, 2022, Public Health Coordination call, an update on the Ebola outbreak in Uganda was shared along with provincial preparedness measures. Provincial guidance documents on Ebola and viral haemorrhagic fever are currently being updated. Public Health Ontario further shared ther most recent Canadian Government alert issued for Ebola.

#### Infection Prevention and Control (IPAC) Hub

In September, 15 IPAC follow-up calls were completed as well as 26 IPAC assessments and audits at congregate living settings (CLS). IPAC Practitioners also participated in 64 outbreak management team (OMT) meetings and delivered four education sessions in CLS.

## 2. Sexual Health/Sexually Transmitted Infections (STI) including HIV and other Blood Borne Infections

#### Sexual health promotion

Sexual health promotion services were placed on hold for the duration of the COVID-19 pandemic. This important work resumed during the summer of 2022. Social media messaging was posted on Facebook and Twitter for syphilis awareness and to promote testing.

#### Sexual health clinic

In September, there were 15 drop-in visits to the Elm Place site related to sexually transmitted infections (STI), blood-borne infections and/or pregnancy counselling.

The Elm Place site completed a total of 126 telephone assessments related to STIs, blood-borne infections, and/or pregnancy counselling in September, resulting in 218 on-site visits.

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#### Needle exchange program

In August, harm reduction supplies were distributed, and services received through 3506 client visits across the Public Health Sudbury & Districts' region.

#### 3. Food Safety

In September, one food product recall prompted a public health inspector to conduct checks of two local premises. The recalled food product, Mr. Right brand Keampferia Galanga Powder, which was recalled due to possible contamination with aconitine, was not distributed to local premises. In addition, one food product recall prompted an email notification from Public Health to supermarkets, fish shops/seafood counters and butcher shops informing them of the recall and advising to remove the recalled product from sale. The recalled food products included: Various brands of oysters by Oyster Kings Inc. due to possible contamination with Salmonella.

Staff issued 42 special event food service permits and two farmer's market permits to various organizations/vendors.

#### 4. Health Hazard

In September, 23 health hazard complaints were received and investigated. One of these complaints involved marginalized populations.

#### Radon Awareness, presentation in Massey, Ontario.

On September 26, 2022, staff presented at a radon information session hosted by the Township of Sables-Spanish. General information regarding radon and the importance of testing was provided.

#### 5. Ontario Building Code

In September, 32 sewage system permits, seven renovation applications, and two consent applications were received. One order to comply was issued due to discharge of black water into a grey water pit.

#### 6. Rabies Prevention and Control

Twenty-one rabies-related investigations were carried out during the month of September. One dog was submitted to the Canadian Food Inspection Agency Rabies Laboratory for analysis and was subsequently reported as negative.

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Two individuals received rabies post-exposure prophylaxis following an exposure to wild or stray animals.

#### 7. Safe Water

In September, one beach was sampled with a total of 40 samples collected during two visits. Re-sampling was conducted in response to one sampling result that exceeded the recreational water quality standard of 100 *E. coli* per 100 mL of water. In September, one beach was posted as unsafe for swimming due to elevated levels of *E.coli*. All beach sample results have since returned to levels that are deemed to be acceptable for the public to swim in.

During September, 46 residents were contacted regarding adverse private drinking water samples. Public health inspectors investigated eight regulated adverse water sample results, as well as drinking water lead exceedances at one local school.

Four boil water orders were issued. Furthermore one boil water orders was rescinded.

#### 8. Smoke Free Ontario Act, 2017 Enforcement

In September, *Smoke Free Ontario Act* Inspectors charged seven retail employees for selling tobacco or e-cigarettes to a person who is less than 19 years of age. One retail owner was charged for selling vapour product in a prohibited place.

#### 9. Vector Borne Diseases

In September, a total of 91 mosquitoes were trapped and sent for analysis. During this time, a total of 16 mosquito pools were tested. All pools tested negative for West Nile virus and Eastern Equine Encephalitis.

On September 8, 2022, a media release was issued in response to an american crow in Greater Sudbury that had tested positive for West Nile virus. The media release provided information on the transmission and symptoms of the virus and reminded the public to take appropriate precautions to protect themselves from mosquito bites.

#### 10. Climate Change

Work to address climate change continues to be a recovery priority as we move out of the acute phase of the COVID-19 pandemic. We are on track to release a comprehensive resource to support communities to assess climate change health risks and develop adaptations. This

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resource includes information for communities to understand hazards that are anticipated to increase due to climate change, factors influencing vulnerability, health outcomes of concern, and health-protective adaptations. To compliment this resource, a climate modelling study has been prepared for five regions in our service area (Greater Sudbury, Sudbury East, Manitoulin, Espanola, and Chapleau). The climate modelling studies outline specific temperature and precipitation predictions for the short, medium, and long-term, as well as a collection of population demographic data to further inform their local adaptation efforts. These resources are in final stages of development and are intended to be distributed by the end of 2022. Engagement will begin in 2023 and will include informational webinars and opportunities for area municipalities and interested parties to share initiatives, concerns, and opportunities. This work has been informed by the Northern Ontario Climate Change and Health Collaborative, in which all seven northern Ontario health units actively participated. In addition, Public Health has participated as a key stakeholder and contributor in the development of the City of Greater Sudbury's Community Adaptation Plan, and staff participate on the City of Greater Sudbury's Community Energy Emission Plan Communications Working Group.

#### **Knowledge and Strategic Services**

#### 1. Health Equity and Indigenous Engagement

An agency-wide Racial Equity Survey, which aims to understand staff knowledge, comfort level, experiences, and perceptions related to racial equity, was launched in September. Results from the survey will be used to inform future staff development needs and contribute to the agency's racial equity priorities. Staff also collaborated with the Centre de Santé Communautaire du Grand Sudbury and the Contact Interculturel Francophone de Sudbury in September to provide a public allyship training session in French.

Knowledge exchange activities were prepared leading up to the National Day for Truth and Reconciliation to build capacity and ensure an understanding of the day's significance for all Public Health staff. Three Territorial Acknowledgement workshops were delivered to 60 public health staff in September. In addition, Public Health organized two virtual Truth and Reconciliation Keynote Addresses by Dr. Marcia Anderson who discussed the "importance of truth and reconciliation as a community." These events were presented to staff, partners, and the public. Orange shirts were also installed in the public facing windows of 1300 Paris Street as a guesture of our support of Residential School Survivors, their families and communities.

Indigenous Engagement staff continue to support COVID-19 planning for First Nations and Urban Indigenous communities.

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A report on the 2SLGBTQ+ community health study, *Invisible No More: Voices of the Queer Community*, has been completed and will be launched in the coming weeks on a section of our website dedicated to the study and showcasing videos of the digital stories. Its launch is timed with 2SLGBTQ+ History Month in October. A <u>community launch event</u> is also planned on October 19 at the Sudbury Indie Cinema. This project is aligned with the agency's recovery priority of Levelling Up Opportunities for Health by amplifying the voices of those with lived and living experiences from the 2SLGBTQ+ community.

A <u>municipal election primer</u> (PDF) was developed for the upcoming municipal election on October 24 and was been distributed to all municipal election candidates across the service area. The primer includes nine key public health priorities and related actions for consideration by candidates during the election and beyond.

#### 2. Population Health Assessment and Surveillance

The team continues to provide ongoing support with internal, external (public, media, ministry), and operational planning data requests essential for the management and decision support of COVID-19 and public health priorities. Efforts include maintenance of our COVID-19 reporting systems including vaccine, case, and outbreak reporting (tri-weekly web reports, the COVID-19 Risk Index, and a detailed weekly epidemiologic summary that includes vaccination data).

Essential work continues in non-COVID related analyses, including bi-weekly Acute Care Enhanced Surveillance (ACES) System reports, daily monitoring of data related to suspected opioid overdoses, and the monthly updating of the Community Drug Strategy's opioid dashboard. The team is working to expand routine reporting of respiratory disease indicators, beyond COVID-19, this season. The team also continues to collaborate and develop internal reports for staff to use in a self-serve capacity to answer program-related questions.

#### 3. Program Planning

Program planning is a routine function of public health that helps identify and plan for evidence-informed programs and services mandated through the Ontario Public Health Standards. As more teams resume Ontario Public Health Standard programming with a specific focus on the agency's recovery priorities, more proactive planning is once again underway. In order to support an agency-wide systematic approach, Knowledge and Strategic Services is working with teams across the agency to support overarching planning and priority setting.

#### 4. Staff Development

Staff Development is supporting the work related to the people and process recovery priority and is currently offering a suite of staff and management workshops and reflective circles. The focus of the offerings is on self-care and building resilience during difficult and unpredictable

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times. Sessions are being offered throughout October, November, and December. In addition, a ten-week Mindfulness program is being offered to staff. A total of 73 staff members have registered.

#### 5. Student Placement Program

For the fall of 2022, the Student Placement Program is hosting four fourth-year nursing students, one Northern Ontario Dietetic Internship Program dietetic student, one nurse practitioner student, and one NOSM University medical resident.

#### 6. Presentations

On September 23, a member of the Population Health Assessment and Surveillance team was invited to guest lecture on *When all is not what it seems: Bias in research and how to be data literate* to fourth-year nursing students at Cambrian College.

On October 6, a member of the Effective Public Health Practice team facilitated the delivery of a second-year undergraduate class *Principles of Public and Population Health* at the University of Waterloo. Using Public Health Sudbury & Districts' Recovery Plan as an exemplar, students learned about: (1) Public Health Sudbury & Districts as a public health agency in Ontario, (2) the public health system in Ontario and the impact of the global COVID-19 pandemic on the delivery of public health programs and services, and (3) Public Health Sudbury & Districts' Recovery Plan and our recovery priorities including the planning and monitoring processes undertaken.

#### 7. Strategic Engagement Unit and Communications

Throughout the agency's COVID-19 pandemic response, communicating relevant and timely information has been a high priority and the result of much focused effort. Efforts continue to support the delivery of ongoing credible and reliable information to the community to help promote COVID-19 immunization and safe behaviours. As our efforts shift into recovery, this same commitment will apply to the agency's priorities of getting children back on track, levelling up opportunities for health, fostering mental health gains, and supporting safe services and environments. Communications has also been working to maintain positive media relations and supporting staff with media training due to ongoing volume of media requests for the agency.

Respectfully submitted,

Penny Sutcliffe, MD, MHSc, FRCPC Medical Officer of Health and Chief Executive Officer

#### **Public Health Sudbury & Districts**

STATEMENT OF REVENUE & EXPENDITURES

For The 8 Periods Ending August 31, 2022

#### **Cost Shared Programs**

	Annual Budget	Budget YTD	Current Expenditures YTD	Variance YTD (over)/under	Balance Available
Revenue:					
MOH - General Program	16,836,800	11,224,533	11,334,280	(109,747)	5,502,520
MOH - One Time Mitigation Grant	1,179,500	761,759	766,673	(4,914)	412,827
MOH - Unorganized Territory	826,000	550,667	550,670	(3)	275,330
Municipal Levies Interest Earned	9,078,082 100,000	6,052,055 63,029	6,052,067 86,218	(13) (23,190)	3,026,015 13,782
Total Revenues:	\$28,020,382	\$18,652,043	\$18,789,909	\$(137,866)	\$9,230,473
Expenditures:					
Corporate Services:					
Corporate Services	4,844,013	3,253,921	3,451,692	(197,771)	1,392,320
Office Admin.	115,350	38,083	39,439	(1,356)	75,911
Espanola	117,766	76,465	74,026	2,439	43,740
Manitoulin	131,604	85,080	79,156	5,924	52,448
Chapleau Sudbury East	126,876 18,104	83,611 12,069	77,571 12,552	6,041 (483)	49,305 5,552
Intake	344,251	222,087	220,435	1,652	123,816
Facilities Management	602,893	304,575	300,910	3,665	301,983
Volunteer Resources	3,850	0	0	0	3,850
Total Corporate Services:	\$6,304,706	\$4,075,891	\$4,255,781	\$(179,890)	\$2,048,925
Health Protection:					
Environmental Health - General	1,408,067	879,637	833,772	45,865	574,295
Enviromental	2,611,582	1,583,687	1,287,922	295,765	1,323,660
Vector Borne Disease (VBD)	88,828	40,609	39,649	960	49,179
Small Drinking Water Systems CID	177,834 748,538	116,276 569,307	103,088 413,039	13,188 156,268	74,746 335,500
Districts - Clinical	231,803	149,702	155,649	(5,947)	76,155
Risk Reduction	273,042	24,425	24,425	(3,517)	248,617
Sexual Health	1,335,482	874,704	924,954	(50,251)	410,527
MOHLTC - Influenza	0	0	1	(1)	(1)
MOHLTC - Meningittis	0	0	(731)	731	731
MOHLTC - HPV	257,000	147.697	(1,130)	1,130	1,130
SFO: E-Cigarettes, Protection and Enforcement  Total Health Protection:	257,999 \$7,133,176	147,687 \$4,386,032	133,923 \$3,914,560	13,764 \$471,472	\$3,218,616
Health Promotion:	ψ7,133,170	ψ1,500,052	ψ5,511,500	Ψ1/1,1/2	ψ3,210,010
Health Promotion - General	1,148,657	701,713	677,947	23,766	470,710
School Health and Behavior Change	1,527,418	989,645	634,403	355,242	893,015
Districts - Espanola / Manitoulin	453,997	293,627	220,226	73,401	233,771
Nutrition & Physical Activity	1,829,249	1,135,439	817,768	317,671	1,011,481
Districts - Chapleau / Sudbury East	409,065	263,898	179,957	83,942	229,109
Tobacco, Vaping, Cannabis & Alcohol	686,203	419,216	202,331	216,885	483,872
Family Health	1,272,873	807,842	786,419	21,423	486,454
Mental Health and Addictions Dental	933,756 469,446	594,951 295,949	629,299 245,670	(34,348) 50,279	304,457 223,776
Healthy Smiles Ontario	629,020	398,663	391,702	6,961	237,318
Vision Health	39,511	0	0	0,501	39,511
SFO: TCAN Coordination and Prevention	544,806	299,525	189,128	110,397	355,678
Harm Reduction Program Enhancement	159,201	102,371	49,840	52,531	109,361
Total Health Promotion:	\$10,103,203	\$6,302,838	\$5,024,689	\$1,278,149	\$5,078,514
Vaccine Preventable Diseases and COVID Prevention	-0-10-				
VPD and COVID CCM - General VPD and COVID CCM	285,405 906,843	186,815 592,936	134,100 1,042,008	52,716 (449,072)	151,305 (135,165)
Total SVC:	\$1,192,248	\$779,751	\$1,176,108	\$(396,356)	\$16,140
Knowledge and Strategic Services:	,,10	,.	. ,	. ( = ,= = = )	, - 10
Knowledge and Strategic Services	2,761,602	1,766,623	1,670,192	96,431	1,091,410
Workplace Capacity Development	23,507	11,300	13,687	(2,386)	9,820
Health Equity Office	14,440	2,250	2,220	30	12,220
Nursing Initiatives: CNO, ICPHN, SDoH PHN	477,269	311,595	311,203	392	166,066
Strategic Engagement  Total Knowledge and Strategic Services:	\$3,287,050	2,287 \$2,094,056	2,258 \$1,999,560	\$94,496	7,974 \$1,287,490
Total Expenditures:	\$3,287,030	\$2,094,056	\$1,999,560	\$1,267,870	\$1,287,490
	+30,020,002	, ,	, - / 0,000	+-,,·,·,·	, ,
Net Surplus/(Deficit)	\$0	\$1,013,475	\$2,419,211	\$1,405,736	•

#### **Public Health Sudbury & Districts**

Cost Shared Programs STATEMENT OF REVENUE & EXPENDITURES Summary By Expenditure Category For The 8 Periods Ending August 31, 2022

		BOH Annual Budget Budget YTD		Current	COVID-19	Total Expenditures YTD	Cost Shared Variance YTD (over) /under	Total Variance YTD (over)/under
				Expenditures YTD	Expenditures YTD			
Revenues & Expenditure Recoveries:								
	MOH Funding	28,020,382	18,652,043	18,801,180		18,801,180	(149,137)	(149,137)
	Other Revenue/Transfers	722,717	381,555	488,192		488,192	(106,637)	(106,637)
	Total Revenues & Expenditure Recoveries:	28,743,099	19,033,598	19,289,372	0	19,289,372	(255,774)	(255,774)
Expenditures:								
<u> </u>	Salaries	18,578,665	12,159,054	10,900,949	3,888,875	14,789,824	1,258,105	(2,630,770)
	Benefits	5,820,779	3,793,193	3,415,925	438,033	3,853,957	377,268	(60,765)
	Travel	297,058	102,733	113,261	110,426	223,687	(10,528)	(120,954)
	Program Expenses	1,089,217	205,432	208,529	64,181	272,709	(3,097)	(67,277)
	Office Supplies	85,584	25,663	25,420	5,146	30,567	243	(4,904)
	Postage & Courier Services	64,972	32,055	31,724	51	31,775	331	280
	Photocopy Expenses	33,228	13,673	16,683	3,452	20,136	(3,010)	(6,463)
	Telephone Expenses	65,266	43,010	43,985	83,164	127,149	(974)	(84,139)
	Building Maintenance	349,650	205,377	227,988	51,799	279,788	(22,612)	(74,411)
	Utilities	236,567	120,358	107,955		107,955	12,403	12,403
	Rent	312,365	208,243	307,533	65,494	373,027	(99,290)	(164,784)
	Insurance	145,514	140,514	162,253		162,253	(21,739)	(21,739)
	Employee Assistance Program ( EAP)	35,000	23,333	27,888		27,888	(4,555)	(4,555)
	Memberships	29,889	22,673	28,857		28,857	(6,184)	(6,184)
	Staff Development	126,205	52,013	44,373		44,373	7,640	7,640
	Books & Subscriptions	9,345	2,163	2,026		2,026	137	137
	Media & Advertising	130,365	44,223	44,554	30,265	74,819	(331)	(30,596)
	Professional Fees	491,765	233,993	331,616	410,199	741,815	(97,623)	(507,822)
	Translation	48,890	19,670	24,950	43,409	68,359	(5,280)	(48,689)
	Furniture & Equipment	18,020	6,653	11,702		11,702	(5,049)	(5,049)
	Information Technology	774,755	566,096	791,989	67,092	859,081	(225,893)	(292,985)
	Total Expenditures	28,743,099	18,020,123	16,870,161	5,261,587	22,131,748	1,149,962	(4,111,625)
	Net Surplus ( Deficit )	0	1,013,475	2,419,211			1,405,736	(3,855,850)

## **Sudbury & District Health Unit o/a Public Health Sudbury & Districts** SUMMARY OF REVENUE & EXPENDITURES For the Period Ended August 31, 2022

Program	F	TE Annual Budget	Current YTD	Balance Available	% YTD	Program Year End	Expected % YTD
100% Funded Programs							
COVID and Schools	355	896,000	272,018	623,982	30.4%	Mar 31/2022	41.7%
Indigenous Communities	703	90,400	63,711	26,689	70.5%	Dec 31	66.7%
Pre/Postnatal Nurse Practitioner	704	139,000	60,159	78,841	43.3%	Mar 31/2022	41.7%
LHIN - Falls Prevention Project & LHIN Screen	736	100,000	5,453	94,547	5.5%	Mar 31/2022	41.7%
Northern Fruit and Vegetable Program	743	176,100	125,699	50,401	71.4%	Dec 31	66.7%
Triple P Co-Ordination	766	64,014	29,739	34,275	46.5%	Dec 31	66.7%
Supervised Consumption Site	767	1,094,021	509,994	584,027	46.6%	Dec 31	66.7%
Healthy Babies Healthy Children	778	1,476,897	596,047	880,850	40.4%	Mar 31/2022	41.7%
IPAC Congregate CCM	780	1,680,000	258,039	1,421,961	15.4%	Mar 31/2022	41.7%
Ontario Senior Dental Care Program	786	1,012,400	482,491	529,909	47.7%	Dec 31	66.7%
Anonymous Testing	788	61,193	25,547	35,646	41.7%	Mar 31/2022	41.7%
One-Time Nursing Initiative	794	492,248	298,347	193,901	60.6%	Mar 31/2022	41.7%
Total		7,282,273	2,727,244	4,555,029			



October 7, 2022

Hon. Merrilee Fullerton Ministry of Children, Community and Social Services 56 Wellesley Street W, 14<sup>th</sup> Floor Toronto, ON M74 1E9 MinisterMCCSS@ontario.ca

Dear Hon. Minister Fullerton:

#### Head Office:

247 Whitewood Avenue, Unit 43 PO Box 1090 New Liskeard, ON POJ 1P0

Tel.: 705-647-4305 Fax: 705-647-5779

#### Branch Offices:

Englehart Tel.: 705-544-2221 Fax: 705-544-8698 Kirkland Lake Tel.: 705-567-9355 Fax: 705-567-5476

www.timiskaminghu.com

#### Re: Funding for the Healthy Babies, Health Children (HBHC) Program

At its meeting on September 7, 2022, the Board of Health for Timiskaming Health Unit considered correspondence from Public Health Sudbury and Districts (PHSD) regarding the above noted matter. We are in full support of PHDS's call to action and share their concern and the concern of other local public health agencies regarding the HBHC program funding.

Motion No: 2022-33R

Moved by: Nina Wallace Seconded by: Jesse Foley

"THAT the Timiskaming Board of Health endorse the letter from Public Health Sudbury & District (PHSD) regarding Healthy Babies Healthy Children Funding, respectfully requesting the Minister's commitment to carefully review base-funding needs for the HBHC program to ensure this essential program is sufficiently resourced to meet the current and growing needs of children and a healthy start in life, and that this be communicated in writing to the Ontario Minister of Children, Community and Social Services with copies to Chief Medical Officer of Health, Ministry of Health, Local MPPs, Executive Director, Association of Local Public Health Agencies, Chair, Governing Council of Provincial Council for Maternal and Child Health, Executive Director of Provincial Council for Maternal and Child Health.

Sincerely.

Carman Kidd

Board of Health Chair

field

**Enclosure** 

cc: Dr. Kieran Moore, Ontario Chief Medical Officer of Health

Honourable, John Vanthof MPP for Timiskaming-Cochrane

Sanober Diaz, Executive Director of Provincial Council for Maternal and Child Health

Dr. Jackie Schleifer Taylor, Chair, Governing Council of Provinc. Council for Maternal and Child Health

Loretta Ryan, Executive Director Association of Local Public Health Agencies



September 15, 2022

Hon. Merrilee Fullerton Ministry of Children, Community and Social Services 438 University Avenue, 7<sup>th</sup> Floor Toronto, ON M5G 2K8

Sent via email to MinisterMCCSS @ontario.ca

Dear Honourable Minister Fullerton:

# Re: Healthy Babies Healthy Children (HBHC) Funding

The HBHC program is a required and vital public health program supporting high risk families. The Haliburton, Kawartha, Pine Ridge District Health Unit remains committed to operationalizing the HBHC program as best possible; however, we are seeking a review of base-funding from the Ministry of Children, Community and Social Services (MCCSS) to ensure the program meets the current complex health needs of families and supports expenditures of the program.

At its meeting held on September 15, 2022, the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit (HKPRDHU) carried the following motion:

"THAT the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit endorse the resolution passed by the Board of Health for Public Health Sudbury & Districts requesting that the Ministry of Children, Community and Social Services review base-funding needs for the Healthy Babies Healthy Children Program to ensure this essential program is sufficiently resourced to meet the current and growing needs of children and a healthy start in life.

AND THAT the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit write directly to the Minister of Children, Community and Social Services requesting a review of funding needs for the Healthy Babies Health Children Program."

The Haliburton, Kawartha, Pine Ridge District Health Unit is concerned that the current base-funding allocated to fully implement the HBHC program is insufficient to meet the expenditures of the program.

.../2

# Protection · Promotion · Prevention

HEAD OFFICE 200 Rose Glen Road Port Hope, Ontario L1A 3V6 Phone · 1-866-888-4577 Fax · 905-885-9551 HALIBURTON OFFICE

Box 570

191 Highland Street, Unit 301

Haliburton, Ontario KOM 1S0

Phone · 1-866-888-4577

Fax · 705-457-1336

LINDSAY OFFICE 108 Angeline Street South Lindsay, Ontario K9V 3L5 Phone · 1-866-888-4577 Fax · 705-324-0455 Hon. Merrilee Fullerton September 15, 2022

Page 2

The complex needs of families as we move to the next phase of the COVID-19 pandemic articulates a strong need for the HBHC program, particularly for families living in rural and isolated communities found in the HKPRDHU's area. The HBHC program has demonstrated positive impacts on family health to increase parenting confidence, knowledge and skills.

In 2000/2001, the province committed to 50 million dollars of HBHC program funding enhancements aimed to improve health outcomes of infants, children, and families. As a result of funding enhancement, the HBHC program at HKPRDHU saw an increase in funds for the program; however, funding has remained stagnant since. Each year the HBHC program at HKPRDHU has extended expenditures beyond base-funding provided by the MCCSS.

To fully implement the HBHC program, the HKPRDHU relies on funding mitigation strategies. With additional pressures associated with renewed collective agreement contracts, travel to rural communities, the education needs of staff to meet the growing complex needs of clients, the need to integrate technology into care, and other operational or administrative needs, the current base funding provided through MCCSS is insufficient to sustain the provision of HBHC programming.

On behalf of the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit, I am respectfully requesting your commitment to carefully review base-funding needs for the HBHC program.

Sincerely,

Doug Elmslie

Board of Health Chair

Haliburton, Kawartha, Pine Ridge District Health Unit

Cc: Dr. Kieran Moore, Chief Medical Officer of Health

Dr. Jackie Schleifer Taylor, Chair, Governing Council of Provincial Council for Maternal and

Child Health

Sanober Diaz, Executive Director of Provincial Council for Maternal and Child Health

Loretta Ryan, Executive Director, Association of Local Public Health Agencies

Ontario Boards of Health

D. J. F. Elmslie

Attachment



June 21, 2022

VIA ELECTRONIC MAIL

Ministry of Children, Community and Social Services Government of Ontario 438 University Avenue, 7th Floor Toronto, ON M5G 2K8

Dear Honourable Minister:

Re: Healthy Babies Healthy Children Funding

The Board of Health for Public Health Sudbury & Districts remains wholly committed to the critical Healthy Babies Healthy Children program, however, has longstanding and increasing concerns about the Board's ability to meet clients' growing needs with current program funding. Please be advised that at it's meeting on June 16, 2022, the Board of Health for Public Health Sudbury & Districts carried the following resolution #19-22:

THAT the Board of Health for Public Health Sudbury & Districts request the Ministry of Children, Community and Social Services (MCCSS) to review base-funding needs for the Healthy Babies Healthy Children Program to ensure this essential program is sufficiently resourced to meet the current and growing needs of children and a healthy start in life.

The Board of Health recognizes that the Healthy Babies Healthy Children (HBHC) program provides a critical prevention/early intervention program and is designed to ensure that all Ontario families with children (prenatal to age six) who are at risk of physical, cognitive, communicative, and/or psychosocial problems have access to effective, consistent, early intervention services. Since 1997 the province has committed to resourcing the Healthy Babies Healthy Children program at 100%. Unfortunately, the HBHC budget has not been increased since 2015, resulting in significant erosion in capacity due to fixed cost increases such as collective agreement commitments and steps on salary grids, travel and accommodation costs, and operational and administrative costs.

Healthler coestimatives for \$15. Data communication plant salves plant book.

#### Sudbury

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

#### Ilm Place

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

#### Sudbury East / Sudbury-Est

1 rue King Street Box / Bolte SB SL-Charles ON POM 2WO t: 705,222,9201 t: 705,867,0474

#### Espanola

800 rue Cestre Street Unit / Unité 100 C Espanola ON PSE 1/3 t: 705.222.9202 f: 705.869.5583

# De Manitustin Island

6163 Highway / Route 542 Box / Bolte 87 Mindemoya ON POP 150 t; 705.370,9200 f; 705.377,5580

#### Chapleon

34 rue Birch Street Box / Belte 485 Chapleau ON POM 1K0 ti 705,860,9200 fi 705,864,0820

#### tell-free / sans frais

1.866.522.9200

phsd.ca



Letter Re: Healthy Babies Healthy Children Funding June 21, 2022 Page 2

This has been further compounded by the increased intensity of need in our communities pre-dating but further exacerbated by the COVID-19 pandemic.

The HBHC program has made every effort to mitigate the effects of the funding shortfalls over the years and to protect programming. The program, however, is not sustainable and significant service reductions will be required without increased to base funding.

It remains our priority to ensure that the HBHC program can effectively identify and support children and families most in need throughout the Sudbury/Manitoulin District. To this effect, we are submitting a revised 2022/23 HBHC program budget based on current needs and requesting consideration by the Ministry staff.

The Board of Health for Public Health Sudbury & Districts is respectfully requesting the Minister's commitment to carefully review base-funding needs for the HBHC program to ensure this essential program is sufficiently resourced to meet the current and growing needs of children and a healthy start in life.

Thank you for your attention to this important public health issue.

Sincerely,

AU-

Penny Sutcliffe, MD, MHSc, FRCPC Medical Officer of Health and Chief Executive Officer

cc: Dr. Kieran Moore, Chief Medical Officer of Health, Ministry of Health Loretta Ryan, Executive Director, Association of Local Public Health Agencies Ontario Boards of Health

Dr. Jackie Schleifer Taylor, Chair, Governing Council of Provincial Council for Maternal and Child Health

Sanober Diaz, Executive Director of Provincial Council for Maternal and Child Health



Jackson Square, **185 King Street**, Peterborough, ON K9J 2R8 P: **705-743-1000** or 1-877-743-0101 F: 705-743-2897

peterboroughpublichealth.ca

October 4, 2022

Hon. Sylvia Jones Minister of Health Government of Ontario sylvia.jones@ontario.ca

Hon. Monte McNaughton
Minister of Labour, Immigration, Training and Skills Development
Government of Ontario
Minister.MLTSD@ontario.ca

Hon. Victor Fedeli Minister of Economic Development, Job Creation and Trade MEDJCT.Minister@ontario.ca

**Dear Honourable Ministers:** 

# Re: Niagara Region Public Health - Paid Sick Leave

At its meeting on September 14, 2022, the Board of Health for Peterborough Public Health (PPH) considered correspondence from Niagara Region Public Health and passed the following motion:

That the Board of Health for Peterborough Public Health:

- receive the letter dated July 19, 2022 from Niagara Region Public Health (NRPH) for information;
- endorse the position from NRPH, and the supporting report "A Renewed Call for Paid Sick Leave in Ontario" from NRPH dated June 14, 2022, less the request to extend the provincial three paid sick days benefit (as that was recently extended by the province), given that PPH identifies that providing employees with paid sick days is one strategy to reduce the transmission of COVID-19 in our community;
- commits to working internally on an on-going basis to actively promote the health and economic benefits of paid sick day benefits to employers; and,
- communicate this support by writing to the Minister of Health and Minister of Labour, Immigration, Training and Skills Development and Ministry of Economic Development, Job Creation and Trade, the Association of Local Public Health Agencies, with copies to the Association of Municipalities Ontario, the Ontario Public Health Association, local MPs and MPPs, and Ontario Boards of Health.

PPH has a long supported healthy workplaces with advocacy focusing on, amongst other issues, paid sick days for all working Ontarians. In February 2021, the Board of Health wrote to the Ministers of Health and Labour, Training and Skills Development to advocate for paid sick leave in the context of the COVID-19 pandemic and on a sustained basis for public health protection.

Providing paid sick days for employees reduces the transmission of COVID-19 as noted in Ontario Science Table research that stated "enabling employers to provide paid sick leave to employees during the pandemic ensures workplace safety, and protection of the public." University of Toronto research also identified that "there is evidence that paid sick leave protects workers from infectious risk exposures in workplaces, enables workers who currently cannot comply with quarantine and isolation measures, and mitigates the disproportionate effect of such measures on workers who cannot work from home." <sup>2</sup>

The Board of Health supports the need to provide paid sick leave, a measure that will significantly assist in our health promotion and prevention mandate. We urge the Provincial government to examine models to introduce and fund this important initiative.

Respectfully,

# Original signed by

Mayor Andy Mitchell Chair, Board of Health

/ag Encl.

cc: Association of Municipalities of Ontario
Association of Local Public Health Agencies
Ontario Public Health Association
Local MPs and MPPs
Ontario Boards of Health

<sup>&</sup>lt;sup>1</sup> Thompson, Alison, Stall NM, Born KB, et al. Benefits of paid sick leave during the COVID-19 pandemic. Science Briefs of the Ontario COVID-19 Science Advisory Table. 2021;2(25).

<sup>&</sup>lt;sup>2</sup> Joint Centre for Bioethics, University of Toronto. (2021). Ethics of Paid Sick Leave for the COVID-19 Pandemic. Retrieved August 18, 2022 from https://jcb.utoronto.ca/ethics-of-paid-sick-leave-for-the-covid-19-pandemic/.



Jackson Square, **185 King Street**, Peterborough, ON K9J 2R8 P: **705-743-1000** or 1-877-743-0101 F: 705-743-2897

peterboroughpublichealth.ca

October 4, 2022

Hon. Sylvia Jones Minister of Health Government of Ontario sylvia.jones@ontario.ca

Dear Minister Jones,

# Re: AMO Submission - Strengthening Public Health In Ontario: Now and For the Future

At its meeting on September 14, 2022, the Board of Health for Peterborough Public Health (PPH) received and endorsed the submission from the Association of Municipalities to the Ministry of Health, dated August 26, 2022, entitled <u>Strengthening Public Health In Ontario: Now and For the Future</u>.

Peterborough Public Health supports the recommendations outlined in the submission which include:

- The government must not make significant structural changes to public health during the COVID-19 pandemic, but rather promote stability in the system.
- The government must establish an independent inquiry as soon as possible to determine the lessons learned from COVID-19, at the local and provincial levels, and resume consultations, once the pandemic waves subside, about how to appropriately modernize and strengthen public health in Ontario.
- The government must immediately act to address the full scope of health human resource challenges with a strategy for the public health and the health care systems.
- The government must provide mitigation funding in 2022 to offset the financial impact to municipal
  governments from the cost-sharing changes in 2019 for 2020 and reverse the decision to restore the
  cost-share arrangement that existed prior to 2020. Further, the Health Protection and Promotion Act
  must be amended to enshrine the appropriate cost-sharing arrangement in legislation, rather than as a
  matter of provincial policy.
- The government must continue funding COVID-19 costs, including vaccine roll-out, and incorporate as
  a distinct line item in ongoing base budgets for as long as there is a pandemic and epidemic situation
  that requires prevention and containment activities.
- The government must provide new funding, starting in 2022, as required to address the backlog of non-pandemic related public health services.

These recommendations complement those <u>recently supported</u> by the Association of Local Public Health Agencies (alPHa) which call for a continuation of the consultation process on the future of the public health system, as well as outline principles alPHa sees as critical to proceeding with changes to the public health system.

Local public health collaboration with the Province, municipalities, First Nations, and other partners has been the backbone of Ontario's successful response to the pandemic. Continuing this collaboration, while stabilizing and strengthening the public health system and structures, is essential to the health and economic recovery of the Province, our communities and residents.

Respectfully,

# Original signed by

Mayor Andy Mitchell Chair, Board of Health

/ag

cc: Association of Municipalities of Ontario
Association of Local Public Health Agencies
Local MPPs
Local Councils
Ontario Boards of Health

# **September 16, 2022**



# September 2022 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 the alPHa President - September 2022** 



"We cannot be mere consumers of good governance, we must be participants, we must be co-creators." – Rohini Nilekani

This speaks true for alPHa members. That is why I am pleased to tell you that the alPHa Board ensures a focus on good governance and the goals as set out by alPHa's Strategic Plan, its principles, and policies and procedures.

Good governance is the hallmark of integrity and with that in mind, and at the risk of being repetitious, I feel it is important to reiterate some key points from the August 2022 issue of *Information Break*. Recently, at the Association of Municipalities of Ontario Conference, I had the opportunity to speak to attendees, many of them board of health members from across Ontario, who want to ensure good governance, due diligence and that the important work of public health carries on during and post-election. Establishing provisions and ensuring these are in place until new board of health members are appointed is key to achieving this. Given that Ontario's boards of health can be autonomous, semi-autonomous or regional, and that each board has their own by-laws and policies, there are variations on how boards will make this happen.

Some boards will put in place an 'acting' chair if the current chair or vice-chair are elected municipal councillors since their current term is expiring. This would be a short-term position during the transition period. It would be a board member whose term continues throughout this time. For example, they may have been appointed provincially, under an Order in Council, or as a local representative by their board of health. Some boards will give limited delegation powers to their MOH/CEO to manage any emergencies before the first meeting of the appointed municipal members to the board of health. This second scenario is what municipal councils do to get through the same time-period for other municipal related boards. A resolution delegating these powers can be clear on matters that cannot be dealt with during the interim period without the board in place such as spending limits and budgetary matters etc.

Here is a call to action to share your best practices in this regard so alPHa can share with others. Your contributions will be attributed to your health unit and board of health. alPHa's goal is to support its membership and is interested in collecting best practices, protocols, and policies on such procedures deployed during the municipal election process and leading up to and until the new municipal board of health members are in place. Send your submissions to Loretta Ryan, alPHa's Executive Director loretta@alphaweb.org.

Risk management, ethics, compliance, administrative policies, and procedures are all aspects of good governance and its accountable mechanisms encompass the entire

organization. As such, alPHa's 2023 Winter Symposium will be offering orientation and governance training to its membership. So, stay tuned for details!

Trudy Sachowski President

"The quality of a leader is reflected in the standards they set for themselves."

# AMO - Strengthening Public Health in Ontario: Now and for the Future



The Association of Municipalities of Ontario (AMO) has submitted to the government, "<u>Strengthening Public Health in Ontario: Now and for the Future</u>." The submission notes that Ontario's municipal governments have a vested interest in strengthening the public health system for the residents they serve given their role as governors, co-funders, and employers. AMO states their goal is to work with the Province of Ontario to strengthen public health, help end hallway health care, and reduce overall health care costs while strengthening the public health system in Ontario now and in the future.

The municipal elections are fast approaching!



Many alPHa members are using the following resources to help prepare their key messages on local public health:

- 1. The Future of Public Health in Ontario alPHa Letter PH Restructuring 180722.pdf (ymaws.com) (Includes alPHa Resolution: Public Health Restructuring/Modernization & COVID-19: A22-2 PH Restructuring.pdf (ymaws.com)
- 2. alPHa's *Public Health Resilience in Ontario Clearing the Backlog, Resuming Routine Programs, and Maintaining an Effective Covid-19 Response.* report and executive summary
- 3. Pre-Budget Consultations
- 4. alPHa 2022 Elections Primer
- 5. alPHa's <u>submissions on PH Modernization</u>, including the <u>Statement of Principles</u>
- 6. "What is Public Health?"
- 7. alPHa Resource Page on Public Health Modernization
- 8. Public Health Matters video

# **Thank you to PHUs**

Public Health Sudbury & Districts Northwestern Health Unit Halton Region Health Department Eastern Ontario Health Unit

# Public Health

Toronto Public Health Haliburton Kawartha Pine Ridge District Health Unit Simcoe Muskoka District Health Unit

As we head into the fall season, I would like to give a shout out to alPHa's many volunteers, particularly our Board members and those who participate on our many committees and working groups. If you have not yet had a chance to see who is on the 2022-2023 alPHa Board, you can view a list with their bios on the alPHa website. Thank you to all of these public health leaders who are taking time out of their busy schedules to represent the public health system and to contribute to the work of the association.

On behalf of alPHa, I would also like to thank the Public Health Units who have directly partnered with us to support alPHa during the pandemic response. We quite literally could not have done what we did over the past two and a half years without the dedicated efforts of staff from the PHUs who assisted with public policy reports, communication products, alPHa educational events, and other association activities. In particular, I would like to thank the following:

- Eastern Ontario Health Unit
- Halton Region Health Department
- Haliburton, Kawartha, Pine Ridge District Health Unit
- Northwestern Health Unit
- Public Health Sudbury & Districts
- Simcoe Muskoka District Health Unit
- Toronto Public Health

Thank you again to all of alPHa's volunteers! #PublicHealthLeaders

Loretta Executive Director Ryan

# alPHa Correspondence



Through policy analysis, collaboration, and advocacy, alPHa's members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention, and surveillance services in all of Ontario's communities. Below are submissions that have been sent in since the last newsletter. A complete online library is available <a href="here">here</a>.

# MMAH Response - Resolution A22-3 - Cooling Towers

August 24, 2022 letter from the Minister of Municipal Affairs and Housing to the President of the Association of Local Public Health Agencies.

# alPHa Letter - Chief of Nursing/ADM

September 6, 2022 letter from the Association of Local Public Health Agencies congratulating the new Chief of Nursing & Professional Practice & Assistant Deputy Minister of Health.

# alPHa Letter - President & CEO, PHO

July 18, 2022 letter from the alPHa ED welcoming Dr. Michael Sherar as the new President and CEO of Public Health Ontario.

# alPHa Letter - Resolution A22-5 - Harm Reduction

July 18, 2022 letter to the Minister of Health that introduces alPHa Resolution A22-5, Indigenous Harm Reduction - A Wellness Journey.

# alPHa Letter - Resolution A22-4 - Opioids

July 18, 2022 alPHa letter to the Minister of Health that introduces Resolution A22-4, Priorities for Provincial Action on the Drug/Opioid Poisoning Crisis in Ontario.

# alPHa Letter - Resolution A22-3 - Cooling Towers

July 18, 2022 alPHa letter to the Minister of Municipal Affairs and Housing that introduces Resolution A22-3, which calls for a provincial cooling tower registry for the public health management of legionella outbreaks.

## alPHa Letter - Resolution A22-1 - Racism & Health

July 18, 2022 letter to the Minister of Health that introduces Resolution A22-1, Race-Based Inequities in Health.

# alPHa Letter - The Future of Public Health

July 18, 2022 letter to the Minister of Health that provides several documents (Including Resolution A22-2, Public Health Restructuring/Modernization & COVID-19) that give an overview of alPHa's positions and principles that we hope will be carefully considered as Ontario's public health system is reviewed and strengthened in the wake of the emergency phase of the COVID-19 response. Note: This is a follow up to the welcome letter sent to the new Minister on June 27, 2022.

# alPHa Letter - 2022 Resolutions

July 18, 2022 letter from the President of the Association of Local Public Health Agencies that introduces five resolutions that were passed by our members at the 2022 Annual General Meeting.

# **Boards of Health: Shared Resources**



A resource <u>page</u> is available on alPHa's website for Board of Health members to facilitate the sharing of and access to orientation materials, best practices, by-laws, resolutions, and other resources. If you have a best practice, by-law or any other resource that you would like to make available, please send a file or a link with a brief description to <u>gordon@alphaweb.org</u> and for posting in the appropriate library.

Resources available on the alPHa website include:

- Orientation Manual for Board of Health
- Review of Board of Health Liability (PowerPoint presentation
- Governance Toolkit
- Risk Management for Health Units
- Healthy Rural Communities Toolkit
- The Ontario Public Health Standards
- <u>Public Appointee Role and</u> Governance Overview
- Ontario Boards of Health by Region
- List of Units sorted by Municipality
- <u>List of Municipalities sorted by</u> <u>Health Unit</u>

# **Public Health Ontario**



PHO offers online educational courses in a variety of topics – from health promotion to infection prevention and control. They're convenient, too - you can <u>access</u> these courses anytime, anywhere. Visit the course catalogue, where you'll find enrolment information and a list of courses along with their descriptions and system requirements, as well as information for downloading courses.

- Variants of Concern COVID-19 in Ontario: Focus on August 28, 2022 to September 3, 2022
- Estimates of Omicron BA.2 Lineage Severity in an Ontario-based Matched Cohort Study of Cases: March 1-April 30, 2022

Check out PHO's Variants of Concern web page for the most up-to-date resources.

#### **Immunizations**

• Management of Anaphylaxis Following Immunization in the Community

#### **Infection Prevention and Control**

 Heating, Ventilation and Air Conditioning (HVAC) Systems in Buildings and COVID-19

Check out PHO's <u>COVID-19</u> webpage for a comprehensive list of all COVID-19 resources.

# **Additional Resources - New**

- Monkeypox Resources
- Public Health Actions from Wastewater Surveillance on Poliovirus
- Hepatitis B Vaccines and Schedules
- Activities to Support Infection Prevention and Control Practices in Congregate Living Settings

# **Open Call for Members | Ontario Public Health Emergencies Science Advisory Committee**

The Ontario Public Health Emergencies Science Advisory Committee (OPHESAC) is currently recruiting members. Check out the <u>full call for members</u> for more details and requirements. Interested candidates should send their expression of interest, with a curriculum vitae and complete contact details to <u>secretariat@oahpp.ca</u> by **Friday**, **September 23**, **2022 at 11:59 p.m. ET**.

## **PHO Events**

In case you missed these sessions last month, here are the Presentations PHO posted on their website:

- PHO Rounds: Opioid Toxicity Among Ontarians Who Worked in the Construction Industry
- PHO Rounds: Building Climate Resilient Health Systems: Lessons from Health of Canadians in a Changing Climate Science Assessment 2022

# **Upcoming DLSPH Events and Webinars**



- CVPD Fall Symposium: Healthy Aging and Immunization (Sept. 16)
- One on One with Steini Brown: Towards a Sustainable Recovery (Sept. 21)
- Indigenizing Health Symposium: Rethinking with Spirit (Sept. 28-29)

# **COVID-19 Update**

The digital team at the Ministry of Health has launched a new landing page and new streamlined content pages for COVID-19 content.

The new landing page, which replaces covid-19.ontario.ca, can now be found at: <a href="https://www.ontario.ca/page/covid-19-coronavirus">https://www.ontario.ca/page/covid-19-coronavirus</a> (English)
<a href="https://www.ontario.ca/fr/page/covid-19-le-coronavirus">https://www.ontario.ca/fr/page/covid-19-le-coronavirus</a> (French)

As well, the ministry has overhauled the previous versions of the public health measures pages, six vaccine pages, and testing and treatment pages, which can now be found at:

https://www.ontario.ca/page/public-health-measures-and-advice

https://www.ontario.ca/page/covid-19-vaccines

https://www.ontario.ca/page/covid-19-testing-and-treatment

As part of the response to COVID-19, alPHa continues to represent the public health system and work with key stakeholders. "**NOTE:** In alignment with the wind-down of provincial emergency response measures and the shift to managing COVID-19 through routine operations, the ministry's daily COVID-19 Situation Report will no longer be distributed after June 10 2022. COVID-19 data will continue to be reported on <a href="mailto:thealth-website">the Ministry of Health website</a> and through the <a href="Public Health Ontario's COVID-19">Public Health Ontario's COVID-19 data tool."</a>

Visit the Ministry of Health's page on guidance for the health sector the Ministry's website the status of COVID-19 View on cases COVID-19 Go to Public Health Ontario's website Health COVID-19 the Public Agency of Canada's website alPHa's recent COVID-19 related submissions can be found here

**Hold the date for the Winter Symposium and Annual Conference & AGM** 



alPHa's Winter Symposium is being held on February 24, 2023.

The Annual Conference and AGM is being held from June 11-13, 2023. Please stay tuned for further information.

# **News Releases**

The most up to date news releases from the Government of Ontario can be accessed <a href="here">here</a>.





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# **APPROVAL OF CONSENT AGENDA**

MOTION: THAT the Board of Health approve the consent agenda as

distributed.



# **Briefing Note**

To: René Lapierre, Chair, Board of Health

From: Dr. Penny Sutcliffe, MOH/CEO

Date: October 13, 2022

Re: Physical Literacy for Healthy Active Children

☐ For Information ☐ For Discussion ☐ For a Decision

## **Issue:**

An unintended consequence of the stay-at-home orders, closures of schools, and indoor and outdoor spaces to mitigate the spread of COVID-19 is the reduction of physical activity levels in all age groups. The percentage of children and youth meeting the Canadian physical activity recommendations for their respective age groups fell from 50.8% in 2018 to 37.2% in 2020.

Although the development of physical literacy in children and youth was a growing concern prior to the COVID-19 pandemic, the issue has become more pressing given the long-term health implications of physical inactivity and sedentary behaviours.

## **Recommended Action:**

That the Board of Health for Public Health Sudbury & Districts encourage all area school boards, sport and recreation organizations, and early learning centres to work to improve physical activity levels among children and youth across Sudbury and districts, including through collaboration with Sport for Life Society, Active Sudbury and Public Health Sudbury & Districts, agencies that provide comprehensive physical literacy training to teachers, coaches, recreation providers and early childhood educators.

## **Background:**

The Government of Canada's national policy document *Common Vision for increasing physical activity* and reducing sedentary living in Canada: Let's Get Moving identified physical literacy as the foundation for an active lifestyle at various stages of life<sup>3</sup>. Physically literate individuals have been shown to have the motivation, confidence, physical competence, knowledge and understanding to value and take responsibility for engaging in physical activities for life.<sup>4</sup> These skills help them make healthy, active choices that are both beneficial to and respectful of their whole self, others, and their environment.

Physical literacy is a multifaceted concept comprised of affective (motivation and confidence), physical (physical competence), cognitive (knowledge and understanding), and behavioural (engagement in

2018-2022 Strategic Priorities:

- 1. Equitable Opportunities
- 2. Meaningful Relationships
- 3. Practice Excellence
- 4. Organizational Commitment

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physical activities for life) domains.<sup>5</sup> These four domains together embody a holistic approach to physical activity that considers the social processes associated with lifelong learning and participation in physical activity.<sup>6,7</sup>

According to ParticipACTION's Report Card on Physical Activity for children and youth (2021), only 36% of children aged 8-12 years met or exceeded the minimum level recommended for physical literacy. Children who have high physical literacy scores are more likely to meet Canada's physical activity or sedentary behaviour recommendations as set out in the 24-hour movement guidelines for their age groups. When it comes to the domains that comprise physical literacy the following was noted in the report:

- 37% meet or exceed the minimum level recommended for the physical competence domain of physical literacy.
- 29% meet or exceed the minimum level recommended for the daily behaviour domain of physical literacy.
- 34% meet or exceed the minimum level recommended for the motivation and confidence domain of physical literacy.
- 39% meet or exceed the minimum level recommended for the knowledge and understanding domain of physical literacy

Active Sudbury is a community group made up of individuals who work for health and education-focused institutions within the City of Greater Sudbury, including the municipal government, local sports and recreation organizations, public health, and post-secondary institutions. They include representation from Laurentian University's Faculty of Education and Health, Cambrian College of Applied Arts and Technology, SportLink the Greater Sudbury Sport Council, The City of Greater Sudbury, and Public Health Sudbury & Districts. Active Sudbury's mission is to foster physical literacy among the residents of Greater Sudbury, providing them with the gateway to engage in physical activity throughout their lives.

Public Health Sudbury & Districts is a founding partner of Active Sudbury. Through our continued collaboration with Active Sudbury, Public Health staff work closely with local organization leaders (e.g. sports organizations, schools and early learning centres) that want to improve the physical literacy of children and youth. Public Health staff along with other Active Sudbury members are certified through Sport for Life Society (a leading agency in physical literacy) as learning facilitators and physical literacy assessors. Public Health Sudbury & Districts' partnership with Active Sudbury is an integral part of providing best practices, tools, and support that will foster physical literacy in the communities that we serve.

## **Financial Implications:**

Within budget.

# **Ontario Public Health Standard:**

Chronic Disease Prevention & Well-being

2018–2022 Strategic Priorities:

- 1. Equitable Opportunities
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# **Strategic Priority:**

Equitable opportunities
Meaningful relationships
Practice excellence
Organizational commitment

#### **Contact:**

Natalie Philippe and Rebecca Sabourin, Public Health Nurses, Health Promotion Laura Cousineau, Health Promoter, Health Promotion Tracey Weatherbe, Manager, Health Promotion Stacey Gilbeau, Director, Health Promotion

2018–2022 Strategic Priorities:

<sup>&</sup>lt;sup>1</sup> Science Table.(2022). The Impact of Physical Activity on mental Health Outcomes during the COVID-19 Pandemic. Taken from: <u>The Impact of Physical Activity on Mental Health Outcomes during the COVID-19 Pandemic - Ontario COVID-19</u> Science Advisory Table (covid19-sciencetable.ca)

<sup>&</sup>lt;sup>2</sup> Statistics Canada. (2022) The unequal impact of the CVID-19 pandemic on the physical activity habits of Canadians. Taken from: https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm

<sup>&</sup>lt;sup>3</sup> Government of Canada. A common Vision for increasing physical activity and reducing sedentary living in Canada: Let's Get Moving. (2018) Taken from: <a href="https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html">https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html</a>

<sup>&</sup>lt;sup>4</sup> The International Physical Literacy Association, (2015). Taken from: <a href="https://physicalliteracy.ca/physical-literacy/">https://physicalliteracy.ca/physical-literacy/</a>

<sup>&</sup>lt;sup>5</sup> Sport for Life. Canada's physical literacy consensus statement. Taken from: <a href="http://physicalliteracy.ca/physical-literacy/consensus-statement/">http://physicalliteracy.ca/physical-literacy/consensus-statement/</a>.

<sup>&</sup>lt;sup>6</sup> Dudley D, Cairney J, Wainwright N, Kriellaars D, Mitchell D. (2017) Critical considerations for physical literacy policy in public health, recreation, sport, and education agencies. Quest. 2017;69(4):436–52.

<sup>&</sup>lt;sup>7</sup> Young L, O'Connor J, Alfrey L. (2020) Physical literacy: a concept analysis. Sport Educ Soc. 2020;25(8):946–59.

<sup>&</sup>lt;sup>8</sup> Tremblay MS, Longmuir PE, Barnes JD, Belanger K, Anderson KD, Bruner B, Copeland JL, Delisle Nyström C, Gregg MJ, Hall N, Kolen AM, Lane KN, Law B, MacDonald DJ, Martin LJ, Saunders TJ, Sheehan D, Stone MR, Woodruff SJ. (2018) Physical literacy levels of Canadian children aged 8-12 years: Descriptive and normative results from the RBC Learn to Play-CAPL project. BMC Public Health. 2018;18(Suppl 2):1036.

<sup>1.</sup> Equitable Opportunities

<sup>2.</sup> Meaningful Relationships

<sup>3.</sup> Practice Excellence

<sup>4.</sup> Organizational Commitment

# PHYSICAL LITERACY FOR HEALTHY ACTIVE CHILDREN MOTION:

WHEREAS being physically active every day helps children and youth perform better in school, learn new skills, build strong muscles, improve blood pressure and aerobic fitness, strengthen bones and reduce the risk of depression<sup>i</sup>; and

WHEREAS the implementation of stay-at-home orders, closures of schools, and indoor and outdoor spaces to mitigate the spread of COVID-19 is the reduction of physical activity levels in all age groups; the percentage of youth meeting the Canadian physical activity recommendations for children and youth fell from 50.8% in 2018 to 37.2% in 2020. and;

WHEREAS the Government of Canada's national policy document Common Vision for Increasing Physical Activity and Reducing Sedentary Living in Canada: Let's Get Moving identifies physical literacy as the foundation for an active lifestyle<sup>iv</sup>. Studies show that children who have high physical literacy scores are more likely to meet national physical activity or sedentary behaviour guidelines v; and

WHEREAS physically literate individuals have been shown to have the motivation, confidence, physical competence, knowledge and understanding to value and take responsibility for engaging in physical activities for life<sup>vi</sup> and these skills help them make healthy, active choices that are both beneficial to and respectful of their whole self, others, and their environment vii; and

WHEREAS the school community offers one of the best opportunities to improve the quality of sport and physical activity participation for children and youth; and

WHEREAS the Ontario Public Health Standards require that: "community partners have the knowledge of and increased capacity to act on the factors associated with the prevention of chronic diseases and promotion of wellbeing, including healthy living behaviours, healthy public policy, and creating supportive environments." viii This includes knowledge of the importance and impact of physical literacy on increasing physical activity participation thereby reducing the risk of chronic disease;

THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts encourage all area school boards, sport and recreation organizations, and early learning centres to work to improve physical activity levels among children and youth across Sudbury and districts, including through collaboration with Sport for Life Society, Active Sudbury and Public Health Sudbury & Districts, agencies that provide comprehensive physical literacy training to teachers, coaches, recreation providers and early childhood educators; and

FURTHER THAT a copy of this motion be shared with the Sport for Life Society, Active Sudbury, local members of Provincial Parliament, all Ontario Boards of Health, and area school boards, early learning centres and sport and recreation organizations.

<sup>&</sup>lt;sup>i</sup> Centre for Disease Control and Prevention. Healthy Benefits of Physical Activity for Children (2021). Taken from: <a href="https://www.cdc.gov/physicalactivity/basics/adults/health-benefits-of-physical-activity-for-children.html">https://www.cdc.gov/physicalactivity/basics/adults/health-benefits-of-physical-activity-for-children.html</a>

Science Table. The Impact of Physical Activity on mental Health Outcomes during the COVID-19 Pandemic. (2022) taken from: The Impact of Physical Activity on Mental Health Outcomes during the COVID-19 Pandemic - Ontario COVID-19 Science Advisory Table (covid19-sciencetable.ca)

iii Statistics Canada. The unequal impact of the CVID-19 pandemic on the physical activity habits of Canadians. (2022) Taken from: <a href="https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm">https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm</a>

iv Government of Canada. A common Vision for increasing physical activity and reducing sedentary living in Canada: Let's Get Moving. (2018) Taken from: <a href="https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html">https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html</a>

<sup>&</sup>lt;sup>v</sup> Tremblay MS, Longmuir PE, Barnes JD, Belanger K, Anderson KD, Bruner B, Copeland JL, Delisle Nyström C, Gregg MJ, Hall N, Kolen AM, Lane KN, Law B, MacDonald DJ, Martin LJ, Saunders TJ, Sheehan D, Stone MR, Woodruff SJ. Physical literacy levels of Canadian children aged 8-12 years: Descriptive and normative results from the RBC Learn to Play-CAPL project. BMC Public Health. 2018;18(Suppl 2):1036.

vi The International Physical Literacy Association, May 2014. Taken from : <a href="https://physicalliteracy.ca/physical-literacy/">https://physicalliteracy.ca/physical-literacy/</a>

vii Government of Ontario HEALTH AND PHYSICAL EDUCATION, 2019 | The Ontario Curriculum, Grades 1–8. 2019 taken from: <a href="https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849ffb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-pysical-education-elem-PUBLIC.pdf">https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849ffb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-pysical-education-elem-PUBLIC.pdf</a>

viii Government of Ontario. (June, 2021) Ontario Public Health Standards: requirements for Programs, Services and Accountability. Taken from: https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\_standards/

# **ADDENDUM**

MOTION: THAT this Board of Health deals with the items on the Addendum.

ADJOURNMENT
MOTION: THAT we do now adjourn. Time: