



# Board of Health Meeting # 02-23

Public Health Sudbury & Districts

Thursday, April 20, 2023

1:30 p.m.

Boardroom

1300 Paris Street

**LACLOCHE FOOTHILLS MUNICIPAL ASSOCIATION**

c/o Township of Sables-Spanish Rivers  
11 Birch Lake Road, Massey, ON P0P 1P0  
Tel. 705-865-2181 ext. 226

March 30, 2023

Rachel Quesnel, Executive Assistant to  
Medical Officer of Health and  
Secretary to the Board of Health  
PUBLIC HEALTH SUDBURY & DISTRICTS  
1300 Paris Street  
Sudbury, ON  
P3E 3A3

Dear Ms. Quesnel,

Re: Board of Health for Public Health Sudbury & Districts

I am pleased to advise that on behalf of the Township of Baldwin, Town of Espanola, Township of Nairn-Hyman and the Township of Sables-Spanish Rivers that Guy Despatie is being appointed to the Board to represent our Association members. His contact information will be provided by Belinda Ketchabaw, Clerk of Nairn & Hyman.

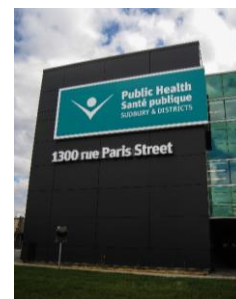
This appointment took place at our March 27, 2023 meeting. The motion was moved by V. Gorham and seconded by D. Gervais; all members were in favour and the motion passed.

If you require any further information at this time please feel free to contact me.

Yours truly,

Anne Whalen  
Association Secretary  
Clerk-Administrator-Sables-Spanish Rivers

**AGENDA – SECOND MEETING**  
**BOARD OF HEALTH**  
**PUBLIC HEALTH SUDBURY & DISTRICTS**  
**BOARDROOM, LEVEL 3**  
**THURSDAY, APRIL 20, 2023 – 1:30 P.M.**



at 12 pm

- 1. CALL TO ORDER AND TERRITORIAL ACKNOWLEDGMENT**
  - Letter from LaCloche Foothills Municipal Association dated March 30, 2023, re: appointment of Guy Despatie to the Board of Health
- 2. ROLL CALL**
- 3. REVIEW OF AGENDA/DECLARATIONS OF CONFLICTS OF INTEREST**
- 4. DELEGATION/PRESENTATION**
  - i) Being Ready: Ensuring Public Health Preparedness for Infectious Outbreaks and Pandemics**

*[Link](#) to the Chief Medical Officer of Health 2022 Annual Report*

    - Nastassia McNair, Manager, Research, Evaluation and Knowledge Exchange, Knowledge and Strategic Services Division
- 5. CONSENT AGENDA**
  - i) Minutes of Previous Meeting**
    - a. First Meeting – February 16, 2023
  - ii) Business Arising From Minutes**
  - iii) Report of Standing Committees**
    - a. Board of Health Executive, unapproved minutes dated April 6, 2023
  - iv) Report of the Medical Officer of Health / Chief Executive Officer**
    - a. MOH/CEO Report, April 2023
  - v) Correspondence**
    - a. Minimum Wage Increase
      - Letter from the Board of Health Chair, Public Health Sudbury & Districts, to the Premier of Ontario, dated April 11, 2023
    - b. Provincial Funding for Consumption and Treatment Services

- Letter from the Board of Health Chair, Medical Officer of Health and Secretary and Treasurer, Middlesex-London Health Unit, to Dr. Sutcliffe, dated March 28, 2023
- c. aPHa Pre-Budget Submission
  - Letter from the Board of Health Chair, Southwestern Public Health, to the Minister of Finance, dated March 24, 2023
- d. Food Insecurity on Ontario
  - Letter from the Board of Health Chair, North Bay Parry Sound District Health Unit, to Premier of Ontario, Minister of Health and Deputy Premier, and Minister of Children, Community and Social Services, dated March 3, 2023
- e. Physical Literacy for Healthy Active Children
  - Letter from the Board of Health Chair, Windsor-Essex County Health Unit, to the Minister of Health and Deputy Premier, dated February 28, 2023
- vi) **Items of Information**
  - a. 2023 aPHa Workplace Health & Wellness Month

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

##### **MOTION:**

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

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

- i) **Support for Improved Indoor Air Quality in Public Settings**
  - Letter from the Board of Health Chair, Peterborough Public Health, to the Minister of Health, Canada and the Minister of Intergovernmental Affairs, Infrastructure and Communities, Canada, dated March 3, 2023
  - Letter from the Board of Health Chair, Peterborough Public Health, to the Minister of Health, Ontario and the Minister of Municipal Affairs and Housing, dated March 3, 2023

#### **IMPROVED INDOOR AIR QUALITY IN PUBLIC SETTINGS**

##### **MOTION:**

**WHEREAS the virus that causes COVID-19 (SARS-CoV2), as well as other respiratory viruses, are spread principally through respiratory droplets and aerosols; and**

**WHEREAS ventilation can affect how well respiratory droplets and aerosols are removed from an area. As noted by the [Ontario Science Table](#), “aerosols play a role in the transmission of SARS-CoV-2, especially in poorly ventilated indoor areas”; and**

**WHEREAS** Canada’s [Chief Science Advisor](#) recommends that owners and operators of indoor public facilities “scale-up and monitor effective prevention interventions, such as improving ventilation in schools, workplaces and public places as part of a first line of prevention of SARS-CoV2 infection and other respiratory/airborne pathogens”;

**THEREFORE BE IT RESOLVED THAT** the Board of Health for Public Health Sudbury & Districts endorse the letters dated March 3, 2023, from Peterborough Public Health to federal and provincial ministers calling for investments and policy levers to improve indoor air quality in public settings such that health is further protected for all; and

**FURTHER THAT** this resolution be shared with relevant federal and provincial government ministers, area members of parliament and provincial parliament, the Chief Medical Officer of Health, and Ontario boards of health.

**ii) Alcohol Health Warning Labels**

- Letter from the Executive Director, Ontario Public Health Association, to the Senator Brazeau, dated March 20, 2023
- Letter from the Board of Health Chair, Simcoe Muskoka District Health Unit, to the Minister of Health, Canada, dated March 15, 2023
- Letter from the Board of Health Chair, Northwestern Health Unit, to the Prime Minister of Canada, dated March 3, 2023

**SUPPORT FOR BILL S-254 – AN ACT TO AMEND THE FOOD AND DRUGS ACT (WARNING LABEL ON ALCOHOLIC BEVERAGES)**

**MOTION:**

**WHEREAS** alcohol is a well-established risk factor for premature death and injury due to unintentional injuries, violence, cancer, liver disease, heart disease, and high blood pressure; and

**WHEREAS** the Canadian Center on Substance Use and Addiction released new [guidelines](#) and information in January 2023 about alcohol consumption and health; and

**WHEREAS** within the Public Health Sudbury & District’s catchment area, only 37% of adults report that they are aware that consumption of alcohol every day may increase their risk of cancer; and

**WHEREAS Public Health Sudbury & Districts has elevated and increasing rates of heavy drinking (27.9% PHSD in 2019/2020, compared with 15.6% for the province); and**

**WHEREAS the Ontario Public Health Association and multiple Ontario boards of health in Ontario are writing in support of Senator Brazeau’s Bill S-254 – An Act to amend the Food and Drugs Act (warning label on alcoholic beverages), which, if passed, would require the industry to include informative labels on alcoholic bottles discussing health risks and standard drink size;**

**THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts similarly convey its support for federally mandated health risk labels on all alcohol containers sold in Canada and urge members of parliament and senators to support Bill S-254.**

**iii) Chief Medical Officer of Health 2022 Annual Report ([Link](#))**

- Letter from the Board of Health Chair, Public Health Sudbury & Districts, to the Chief Medical Officer of Health, dated March 9, 2023
- Letter from the alPHa President, to the Minister of Health, dated March 9, 2023

**BEING READY: SUPPORT FOR THE 2022 ANNUAL REPORT OF THE CHIEF MEDICAL OFFICER OF HEALTH FOR ONTARIO**

**MOTION:**

**WHEREAS on March 7, 2023, Ontario’s Chief Medical Officer of Health released his 2022 Annual Report titled, Being Ready: Ensuring Public Health Preparedness for Infectious Outbreaks and Pandemic; and**

**WHEREAS the 2022 Annual Report identified six next steps, including to (1) invest in preparedness, (2) strengthen accountabilities, (3) assess progress, (4) improve the health of Indigenous peoples, (5) improve the health of Black and other racialized populations, and (6) sustain relationships; and**

**WHEREAS the Board of Health for Public Health Sudbury & Districts is committed to taking local action in support of these next steps and to do so requires sustained provincial investment in public health preparedness over time;**

**THEREFORE, BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts call on the Government of Ontario and the Ministry**

of Health to fully support and implement the recommendations outlined in the Chief Medical Officer of Health 2022 Annual Report;

**AND FURTHER THAT** the Board request the Chief Medical Officer of Health to ensure proactive engagement with local public health agencies as work is undertaken to review and strengthen the relevant Ontario Public Health Standards, including the Emergency Management Guidelines; and

**AND FURTHER THAT** the Board share this motion with relevant stakeholders, including area mayors and reeves, local community partners, Ontario boards of health, and provincial partners and agencies.

**iv) Strategic Plan Engagement Plan**

- Briefing Note from Dr. Sutcliffe, Medical Officer of Health dated April 13, 2023

**STRATEGIC PLAN ENGAGEMENT PLAN**

**MOTION:**

**WHEREAS** the Executive Committee of the Board of Health functions as an advisory committee of the Board to develop, review, and oversee the Strategic Plan development process; and

**WHEREAS** the Board of Health Executive Committee is recommending a Strategic Plan Engagement Plan to the Board of Health;

**THEREFORE BE IT RESOLVED THAT** the Board of Health approve the Strategic Plan Engagement Plan and associated timelines, with the process beginning immediately, working towards the completion of the new Strategic Plan by the end of 2023.

**v) Board of Health Education and Training Sessions**

**BOARD OF HEALTH EDUCATION AND TRAINING SESSIONS**

**MOTION:**

**WHEREAS** per Board of Health Manual procedure F-III-10 and in accordance with the *Municipal Act* s.239(3.1), the Board of Health may hold education and training sessions that are closed to the public if the Board states by resolution the fact of the holding of the meeting and the general nature of its subject matter;

**THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts hold education and training sessions on May 17-18, 2023, and June 15, 2023, on the subject matters of Indigenous Engagement and Reconciliation and Strategic Planning, respectively.**

- vi) Association of Local Public Health Agencies (alPHa)**
  - a. alPHa Board of Directors North East Representative
    - Call for Nominations

**NOMINATION TO THE ALPHA BOARD OF DIRECTORS FOR THE NORTH EAST REGION**

**MOTION:**

**WHEREAS alPHa is accepting nominations for a North East representative on the alPHa Board of Directors for a two-year term from June 2023 to June 2025; and**

**WHEREAS René Lapierre has represented the North East on the alPHa Board of Directors and the Boards of Health Section Executive Committee from 2019 to 2023;**

**THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts supports the nomination of René Lapierre, Board Chair, as a North East candidate for election to the alPHa Board of Directors and to the Boards of Health Section Executive Committee for the June 2023 to June 2025 term.**

- b. alPHa’s 2023 Conference and Annual General Meeting (AGM), June 12-14, 2023
  - Draft Program for AGM and Conference - June 12-14, 2023

**7. ADDENDUM**

**ADDENDUM**

**MOTION:**

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

**8. IN CAMERA**

**IN CAMERA**

**MOTION:**



**THAT this Board of Health goes in camera to deal with labour relations or employee negotiations. Time: \_\_\_\_\_**

## **9. RISE AND REPORT**

### **RISE AND REPORT**

#### **MOTION:**

**THAT this Board of Health rises and reports. Time: \_\_\_\_\_**

## **10. ANNOUNCEMENTS**

- Please complete the April Board of Health meeting evaluation in BoardEffect following the Board meeting.
- Reminder to complete the Code of Conduct and Conflict of Interest declaration forms in BoardEffect if not already done so.

## **11. ADJOURNMENT**

### **ADJOURNMENT**

#### **MOTION:**

**THAT we do now adjourn. Time: \_\_\_\_\_**

**MINUTES – FIRST MEETING**  
**BOARD OF HEALTH FOR PUBLIC HEALTH SUDBURY & DISTRICTS**  
**MICROSOFT TEAMS**  
**THURSDAY, FEBRUARY 16, 2023 – 1:30 P.M.**

**BOARD MEMBERS PRESENT**

Renée Carrier  
Claire Gignac  
René Lapierre

Abdullah Masood  
Ken Noland  
Michel Parent

Mark Signoretti  
Al Sizer  
Natalie Tessier

**BOARD MEMBERS REGRET**

Bill Leduc

**STAFF MEMBERS PRESENT**

Dr. Imran Khan  
Stacey Gilbeau  
Stacey Laforest

Hélène Leroux  
France Quirion  
Renée St Onge

Dr. Penny Sutcliffe

**DR. SUTCLIFFE PRESIDING**

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

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

New Board members, Renée Carrier, Abdullah Masood, Mike Parent, and Al sizer and returning Board members, Claire Gignac, René Lapierre, Bill Leduc, Ken Noland, Mark Signoretti, and Natalie Tessier were welcomed to the meeting.

On behalf of the Board, letters of appreciation were sent to outgoing Board members Jeff Huska, Robert Kirwan, Paul Myre, Carolyn Thain, and Dean Wenborne, thanking them for their valued contributions to Public Health Sudbury & Districts.

**2. ROLL CALL**

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

There were no declarations of conflict of interest.

#### **4. ELECTION OF OFFICERS**

Following a call for nominations for the position of Chair of the Board of Health, René Lapierre was nominated. There being no further nominations, the nomination for the Board of Health Chair for Public Health Sudbury & Districts for 2023 was closed. R. Lapierre accepted his nomination.

##### **01-23 APPOINTMENT OF CHAIR OF THE BOARD**

***MOVED BY SIGNORETTI - NOLAND: THAT the Board of Health appoints René Lapierre as Chair for the year 2023.***

**CARRIED**

#### **R. LAPIERRE PRESIDING**

Following a call for nominations for the position of Vice-Chair of the Board of Health, Mark Signoretti was nominated. There being no further nominations, the nomination for Vice-Chair for the Board of Health for 2023 was closed. M. Signoretti accepted his nomination.

##### **02-23 APPOINTMENT OF VICE-CHAIR OF THE BOARD**

***MOVED BY PARENT - TESSIER: THAT the Board of Health appoints Mark Signoretti as Vice-Chair for the year 2023.***

**CARRIED**

Following a call for nominations for three positions of Board Member at Large to the Board Executive Committee, Michel Parent, Claire Gignac, Natalie Tessier, Abdullah Masood, and Ken Noland were nominated.

There being no further nominations, the nominations for the Board Executive Committee for the year 2023 was closed. Michel Parent respectfully declined his nomination. The four other nominees accepted their nominations and a ballot vote was conducted electronically. The Acting Board Secretary announced:

##### **03-23 APPOINTMENT TO BOARD EXECUTIVE COMMITTEE**

***MOVED BY LAPIERRE - SIZER: THAT the Board of Health appoints the following individuals to the Board Executive Committee for the year 2023:***

- 1. Claire Gignac***
- 2. Natalie Tessier***
- 3. Ken Noland***
- 4. René Lapierre, Chair***
- 5. Mark Signoretti, Vice-chair***
- 6. Medical Officer of Health/Chief Executive Officer***
- 7. Director, Corporate Services***
- 8. Secretary Board of Health***

**CARRIED**

Following a call for nominations for three positions of Board Member at Large to the Finance Standing Committee of the Board, Abdullah Masood, Michel Parent, Mark Signoretti, and Ken Noland were nominated.

There being no further nominations, the nominations for the Finance Standing Committee of the Board of Health for the year 2023 was closed. Abdullah Masood respectfully declined his nomination.

#### **04-23 APPOINTMENT TO FINANCE STANDING COMMITTEE OF THE BOARD**

***MOVED BY TESSIER - GIGNAC: THAT the Board of Health appoints the following individuals to the Finance Standing Committee of the Board of Health for the year 2023:***

- 1. Michel Parent***
- 2. Mark Signoretti***
- 3. Ken Noland***
- 4. René Lapierre, Chair***
- 5. Medical Officer of Health/Chief Executive Officer***
- 6. Director, Corporate Services***
- 7. Secretary Board of Health***

**CARRIED**

#### **5. DELEGATION/PRESENTATION**

##### **i) COVID-19 by the Numbers and Recovery Progress Report**

- Renée St Onge, Director, Knowledge and Strategic Services (KSS) Division and Dr. Imran Khan, Director, Sexual Health, Vaccine Preventable Diseases and COVID-19 Vaccination (SVC) Division and Public Health Physician

Co-presenters, R. St Onge and Dr. Khan, were invited to share achievements of our ongoing COVID-19 response and accomplishments from our 2022 recovery efforts.

The 2022 COVID-19 Response by the Numbers and Recovery Progress Report provides a numerical overview of COVID-19 response activities and a summary of progress on our recovery priorities, identified for action earlier last year.

Public Health Sudbury & Districts' overall program supports; case contact, and outbreak management activities; vaccine program; health and human resource capacity and the financial impact related to our COVID-19 response efforts, were highlighted.

The pandemic was a priority for local public health overshadowing almost everything else during this global public health emergency. The pandemic work left a huge imbalance and resulted in our inability to do much of our regular programming to promote and protect health in our communities, creating a backlog of public health program and increased need. In February 2022, Public Health launched its Recovery Plan to address this backlog and to move from risk to recovery to resilience.

Recovery work from September to December 2022 for the four community-focused priorities: Getting Children Back on Track; Fostering Mental Health Gains; Levelling Up Opportunities for Health; Supporting Safe Spaces and one operational priority; people and processes, were highlighted.

As we continue to balance the ongoing needs of COVID-19 planning and delivery, we will carry on making significant strides in our recovery priorities and resumption of public health programs and services.

Questions and comments were entertained, and R. St Onge and Dr. Khan were thanked for their presentation.

## **6. CONSENT AGENDA**

- i) Minutes of Previous Meeting**
  - a. Board of Health Meeting – November 10, 2022
- ii) Business Arising from Minutes**
- iii) Report of Standing Committees**
- iv) Report of the Medical Officer of Health / Chief Executive Officer**
  - a. MOH/CEO Report, February 2023
- v) Correspondence**
  - a. Alcohol Health Warning Labels
    - Letter from the Board of Health Chair, Timiskaming Health Unit, to the Prime Minister, dated February 8, 2023
  - b. Public Health Matters - Public Health Fall Vaccine Success
    - Letter and infographic from the President, Association of Local Public Health Agencies (ALPHA) to Ontario local Public Health agencies, dated January 12, 2023
  - c. Canadian Public Health Association’s Campaign to Strengthen Public Health Systems in Canada
    - Letter from Dr. Sutcliffe, Public Health Sudbury & Districts, to the Minister of Health, Health Canada, dated January 9, 2023
  - d. Healthy Babies Healthy Children (HBHC) and Infant Toddler Development Program (ITDP) Funding
    - Letter from the Board of Health Chair, Peterborough Public Health, to the Minister of Children, Community and Social Services, dated November 24, 2022
- vi) Items of Information**
  - a. Annual Survey Results from 2022 Regular Board of Health Meeting Evaluations
  - b. Annual Meeting Attendance Summary Board of Health for Public Health Sudbury & Districts 2022

- |    |  |                                       |
|----|--|---------------------------------------|
| c. | alPHa Information Break  | December 16, 2022<br>January 18, 2023 |
| d. | <a href="#">alPHa's Virtual 2023 Winter Symposium and Section Meetings</a>   | February 24, 2023                     |
| e. | Council of Canadian Academies Fault Lines main findings (one pager) The Expert Panel on the Socioeconomic Impacts of Science and Health Misinformation | January 2023                          |
| f. | Memo from the Ministry of Health re Executive Lead, Public Health & Pandemic Response and Recovery Wind-down   | November 30, 2022                     |

No discussion.

#### 05-23 APPROVAL OF CONSENT AGENDA

##### MOTION:

***MOVED BY MASOOD - SIGNORETTI: THAT the Board of Health approve the consent agenda as distributed.***

**CARRIED**

#### 7. NEW BUSINESS

- i) **Public Health Sudbury & Districts 2022 COVID-19 Response by the Numbers and Recovery Progress Report**
  - Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023.
  - Public Health Sudbury & Districts 2022 COVID-19 Response by the Numbers and Recovery Progress Report

Today's presentation to the Board of Health was based on the appended Public Health Sudbury & Districts 2022 COVID-19 Response by the Numbers and Recovery Progress report. The report highlights additional information summarizing the volume of work achieved of our ongoing COVID-19 response as well as our accomplishments from our continued 2022 recovery efforts.

Boards of health are responsible for the assessment, planning, delivery, management, and evaluation of a range of public health programs and services that address multiple health needs and respond to the contexts in which these needs occur (Ontario Public Health Standards, 2021). Boards of health are also responsible for demonstrating accountability to the Ministry of Health and community members. This is achieved by monitoring and reporting on a variety of indicators spanning the scope of public health programs and services.

Dissemination and next steps were discussed. The report will be shared with staff, members of the public, and local and municipal partners and stakeholders. As we progress through our recovery efforts, Public Health Sudbury & Districts looks forward to re-establishing routine monitoring and reporting.

It is recommended that the Board of Health for Public Health Sudbury & Districts receive the *2022 COVID-19 Response by the Numbers and Recovery Progress Report* and support its broad dissemination to the public and to local and provincial partners.

**06-23 COVID-19 RESPONSE – REPORTING AND ACCOUNTABILITY MONITORING**

***MOVED BY CARRIER - GIGNAC : WHEREAS Public Health Sudbury & Districts builds and maintains trust, and demonstrates accountability to all stakeholders through its ongoing monitoring and reporting of its COVID-19 response and recovery priorities; and***

***WHEREAS Public Health Sudbury & Districts continues to balance the COVID-19 response activities with the need to respond to intensified and emerging public health needs;***

***THEREFORE BE IT RESOLVED that the Board of Health for Public Health Sudbury & Districts receive the report entitled Public Health Sudbury & Districts COVID-19 Response by the Numbers and Recovery Progress Report and support its broad dissemination to the public and to local and provincial partners.***

**CARRIED**

**ii) 2022 District Area Snapshots Reports**

- Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023
- 2022 District Area Snapshot Reports

The 2022 District Area Snapshot of Public Health reports are an update to the 2015 reports highlighting public health activities in the Chapleau, Manitoulin Island, LaCloche Foothills, and Sudbury East areas. The reports also include a brief overview of Ontario’s public health system, Public Health Sudbury & Districts as well as some demographic information.

The reports are a key resource that will be used to reinvigorate existing municipal partnerships and establish new ones with the 18 rural municipalities outside of the City of Greater Sudbury and the two unorganized townships in the district areas.

It is recommended that the Board of Health for Public Health Sudbury & Districts receive the 2022 District Area Snapshots of Public Health reports for Chapleau, Manitoulin Island, LaCloche Foothills, and Sudbury East areas and that the Board of Health support the broad public and stakeholder dissemination of these reports including the role of the members of the Board in promoting the reports with their respective district area municipalities and community partners.

**07-23 SUPPORT AND DISSEMINATION OF THE 2022 DISTRICT AREA SNAPSHOTS OF PUBLIC HEALTH FOR THE CHAPLEAU, MANITOULIN ISLAND, LACLOCHE FOOTHILLS, AND SUDBURY EAST AREAS**

***MOVED BY TESSIER - NOLAND: WHEREAS public health programs and services are a joint effort, in collaboration with the public, community agencies, and municipalities, and local municipalities have a keen interest and play a pivotal role in the health and well-being of the residents and communities they serve; and***

***WHEREAS Public Health Sudbury & Districts (Public Health) has a long history of collaborating with municipalities and community partners to prevent disease and protect and promote health and well-being for the residents and communities we collectively serve; and***

***WHEREAS Public Health has identified re-engaging with municipalities as a priority in its pandemic Recovery Plan, and as a first step has produced the 2022 District Area Snapshots of Public Health for the Chapleau, Manitoulin Island, LaCloche Foothills, and Sudbury East areas highlighting recovery activities undertaken in 2022; and***

***WHEREAS Public Health intends to use these snapshot reports to re-invigorate collaborations with municipal partners and associations in areas of shared public health issues to promote health for all;***

***THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts receive the 2022 District Area Snapshots of Public Health for the Chapleau, Manitoulin Island, LaCloche Foothills, and Sudbury East areas; and***

***FURTHER THAT the Board support the broad public and stakeholder dissemination of these reports, including the role of members of the Board in promoting the reports with their respective district area municipalities and community partners.***

**CARRIED**

**iii) Community Engagement to Address Food Insecurity**

- Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023

Dr. Sutcliffe highlighted that Ontario boards of health have been mandated to monitor food affordability using the National Nutritious Food Basket as per the Population Health Assessment and Surveillance Protocol with further guidance provided in the Monitoring Food Affordability Reference document.

Public Health Sudbury & Districts completes a survey on an annual basis that calculates local food affordability. The valuable data can be used to inform health and social policy; advocate for greater income supports (e.g. living wage, basic income, adequate social assistance rates); and engage in public education about the relationship between income and food insecurity.



The briefing note provides information about the data and food insecurity in Sudbury & Districts and Ontario, including a two-page report summarizing scenarios of food affordability in Sudbury & districts.

A motion is on the Board agenda for the Board's consideration as it relates to community engagement to address food insecurity.

Questions and comments were entertained. It was noted that Public Health Sudbury & Districts collaborates with local and provincial partners to ensure a variety of nutritious foods are accessible to participating schools in our area. Also public health dietitians work with educators and school staff and have discussions about food insecurity, its root causes and share evidence informed solutions.

#### **08-23 COMMUNITY ENGAGEMENT TO ADDRESS FOOD INSECURITY**

***MOVED BY SIZER - PARENT: BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts, in recognition of the root causes of food insecurity, call on the provincial government to incorporate local food affordability findings in determining adequacy of social assistance levels; and***

***THAT the Board of Health reaffirm its support for the Association of Local Public Health Agencies (ALPHA) resolutions [A18-02 \(Minimum Wage that is a Living Wage\)](#) and [A15-04 \(Basic Income Guarantee\)](#); and***

***THAT the Board of Health intensify its work with relevant area agencies and community groups, and municipalities to shift the focus of food insecurity initiatives from food charity to income-based solutions, including but not limited to the sharing of data and evidence-based income solutions; and***

***FURTHER THAT the Board of Health for Public Health Sudbury & Districts Board share this motion with area partners, Ontario boards of health, and the relevant provincial government ministers.***

**CARRIED**

#### **iv) Organizational Risk Management Plan 2023-2025**

- Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023
- Organizational Risk Management Plan: 2020-2022
- Annual Organizational Risk Assessment Progress Report, 2022

Risk Management is an organizational requirement under the Good Governance and Management Practices Domain in the Ontario Public Health Standards. It is a responsibility of boards of health to provide governance direction and oversight to risk management.

In 2019, the Board of Health approved a 2020-2022 risk management plan with the direction to conduct a comprehensive review every three years to inform the development of the next three-year plan.

It is recommended that the Board of Health receive the 2022 Annual Organizational Risk Management report and approve the proposed engagement timelines for the development of the agency's 2023-2025 Risk Management Plan.

**09-23 PUBLIC HEALTH SUDBURY & DISTRICTS RISK MANAGEMENT PLAN – APPROVAL OF ENGAGEMENT TIMELINES**

***MOVED BY NOLAND - CARRIER: BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts approve the Risk Management Engagement Timelines which outline the next steps for engagement, development, approval, and launch of the 2023-2025 risk management plan.***

**CARRIED**

**v) Strategic Plan**

- Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023

Planning for the development of the next iteration of Public Health's Strategic Plan will need to begin as soon as possible to ensure time for appropriate engagement to develop a plan that reflects the current needs and perspective of our community, key stakeholders, and the organization.

Support is being sought for the Board Executive Committee for the oversight of the Strategic Plan development process for the planning cycle beginning in 2023.

**10-23 STRATEGIC PLAN**

***MOVED BY SIGNORETTI - GIGNAC: WHEREAS the [Executive Committee of the Board of Health](#) functions as an advisory committee of the Board to develop, review, and oversee Board policies and procedures; and***

***WHEREAS the Board of Health may assign specific responsibilities to the Board of Health Executive Committee by majority vote of the Board;***

***THEREFORE, be it resolved that the Board of Health assign responsibility to the Board Executive Committee for the oversight of the Strategic Plan development process for the planning cycle beginning in 2023.***

**CARRIED**

**vi) Support for Consumption and Treatment Services**

- Briefing note from the Medical Officer of Health and Chief Executive Officer to the Board of Health Chair dated February 9, 2023

The Supervised Consumption Services (SCS) Site in Sudbury is operated by Réseau Access Network (RAN) since September 2022. Pending provincial funding approval, the City of Greater Sudbury is providing operational funding for the SCS while the application is still pending review since August 2021.

The briefing note highlights background and statistical information relating to the first four months of operation of the SCS site. Also noted on the briefing note is that in 2022, Public Health Sudbury & Districts had the second highest rate for suspected drug related deaths in the province among all 34 health units. Last year, 131 individuals died of a suspected drug poisoning, representing a mortality rate of 63.8 deaths per 100,000 (Ontario rate: 22.4 per 100,000).

Questions and comments were entertained.

**11-23 SUPPORT FOR CONSUMPTION AND TREATMENT SERVICES APPROVAL AND FUNDING**

***MOVED BY LAPIERRE - MASOOD: WHEREAS as recognized by motion [14-21](#) Sudbury and districts continue to experience an opioid crisis with the second highest opioid-related death rate in Ontario; and***

***WHEREAS the Ontario Public Health Standards require boards of health to collaborate with health and social service partners to develop programs and services to reduce the burdens associated with substance use; and***

***WHEREAS evidence shows that supervised consumption sites, as a harm reduction strategy, reduce overdose deaths, increase access to treatment and other health and social services, reduce transmission of infectious diseases, including HIV and Hepatitis C, reduce public injection of drugs, and reduce publicly discarded hazardous syringes; and***

***WHEREAS the provincial application for approval and funding for Sudbury's Consumption and Treatment Services was submitted in August 2021 and the application remains under review; and***

***WHEREAS Réseau Access Network received the required federal exemption and has been operating Sudbury's supervised consumption services site since September 2022 with temporary operating funds provided by the City of Greater Sudbury; and***

***WHEREAS there is uncertainty about the future of supervised consumption services in Sudbury given the temporary nature of current municipal funding and the outstanding provincial application;***

***THEREFORE BE IT RESOLVED THAT the Board of Health reaffirm motion [14-21](#), sounding the alarm on the local and regional opioid crisis – a crisis that has continued to intensify since 2021; and***

***THAT the Board of Health urge the provincial government to immediately approve funding for the Sudbury supervised consumption services site, operating as a Consumption and Treatment Services site under the Ontario model; and***

***FURTHER THAT this resolution be shared with relevant federal and provincial government ministers, area members of parliament and provincial parliament, local municipal leadership, the Chief Medical Officer of Health, and boards of health.***

**CARRIED**

## **8. IN CAMERA**

### **12-23 IN CAMERA**

***MOVED BY NOLAND - PARENT: THAT this Board of Health goes in camera to deal with labour relations or employee negotiations. Time: 2:41 p.m.***

**CARRIED**

## **9. RISE AND REPORT**

### **13-23 RISE AND REPORT**

***MOVED BY TESSIER - SIZER: THAT this Board of Health rises and reports. Time: 3:14 p.m.***

**CARRIED**

It was reported that one agenda item relating to labour relations or employee negotiations was discussed for which the following motion emanated.

### **14-23 APPROVAL OF BOH INCAMERA MEETING NOTES**

***MOVED BY GIGNAC - NOLAND: THAT this Board of Health approve the meeting notes of the November 10, 2022, Board in-camera meeting and that these remain confidential and restricted from public disclosure in accordance with exemptions provided in the Municipal Freedom of Information and Protection of Privacy Act.***

**CARRIED**

## **10. ADDENDUM**

No addendum

## **11. ANNOUNCEMENTS**

- Board of Health members are asked to complete:
  - o February Board of Health meeting evaluation following today's meeting

- Code of Conduct and Conflict of Interest Declaration forms in BoardEffect (under the Board of Health workroom - Collaborate - Surveys). Declaration forms will also be emailed to Board members along with the minutes of the meeting.
- There is no regular Board of Health meeting in March. Next regular meeting is Thursday, April 20, 2023, at 1:30 p.m.

**12. ADJOURNMENT**

**15-23 ADJOURNMENT**

***MOVED BY SIGNORETTI - CARRIER: THAT we do now adjourn. Time: 3:20 p.m.***

**CARRIED**

\_\_\_\_\_  
(Chair)

\_\_\_\_\_  
(Secretary)

**UNAPPROVED MINUTES  
BOARD OF HEALTH EXECUTIVE COMMITTEE  
THURSDAY, APRIL 6, 2023 – 9:30 A.M.  
VIRTUAL MEETING**

**BOARD MEMBERS PRESENT**

Claire Gignac	René Lapierre	Ken Noland
Mark Signoretti	Natalie Tessier	

**STAFF MEMBERS PRESENT**

Hélène Leroux	France Quirion	Dr. Penny Sutcliffe
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**GUESTS PRESENT**

Krista Galic	David Groulx	Renée St Onge
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**DR. SUTCLIFFE PRESIDING**

**1. CALL TO ORDER**

The meeting was called to order at 9:30 a.m.

**2. ROLL CALL**

**3. ELECTION OF BOARD EXECUTIVE COMMITTEE CHAIR FOR 2023**

Nominations were held for the position of Board Executive Committee Chair. Mark Signoretti was nominated and nominations were closed. Mark Signoretti accepted the nomination and the following was announced: ***THAT the Board of Health Executive Committee appointing Mark Signoretti as the Board Executive Committee Chair for 2023.***

***M. SIGNORETTI PRESIDING***

**4. REVIEW OF AGENDA / DECLARATION OF CONFLICT OF INTEREST**

The agenda was reviewed and approved as circulated. There were no declarations of conflict of interest.

**5. APPROVAL OF BOARD EXECUTIVE COMMITTEE MEETING NOTES**

5.1 Board Executive Committee Meeting Notes dated October 20, 2022

**01-23 APPROVAL OF BOARD OF HEALTH EXECUTIVE COMMITTEE MEETING NOTES**

***MOVED BY R. Lapierre – K. Noland: THAT the meeting notes of the Board of Health Executive Committee meeting of October 20, 2022, be approved as distributed.***

**CARRIED**

## 6. NEW BUSINESS

### 6.1 Strategic Planning

The purpose and overall goal of today's meeting were outlined as follows:

- Overview of :
  - Role of Board of Health in strategic planning
  - History of Public Health's Strategic Plan
  - Current Strategic Plan
  - Previous Strategic Plan engagement plan
  - Environmental scan
- Discussion and brainstorming
  - SWPT analysis
  - Reflection and discussion of engagement perspectives and processes
- Process review of engagement and next steps
  - Overall engagement with Board of Health

#### 6.1.1 Background:

- alPHa Governance Toolkit excerpt: Role of Board of Health in Strategic Planning
- History of Public Health Sudbury & Districts Strategic Plan
- Public Health Sudbury & Districts 2018-2022 Strategic Plan
- Previous Strategic Plan Engagement Plan
- Environmental Scan

Through a presentation, Dr. Sutcliffe, R. St Onge and D. Groulx facilitated the strategic plan engagement session.

Per the Ontario Public Health Standards (2021), Board of Health shall have a Strategic Plan that sets out the local vision, priorities, and strategic directions for the agency.

An overview of the different roles and responsibilities in the strategic planning process for Board of Health and the MOH/CEO were summarized.

The 2018-2022 Strategic Plan vision and mission, values (humility, trust, respect) and the four strategic priorities as well as a snapshot of the 2017 Strategic Plan engagement plan were reviewed. Even through the pandemic response, these priorities have been guiding our work. The strategic priorities are:

- Equitable opportunities
- Meaningful relationships

- Practice excellence
- Organizational commitment

As part of our strategic planning preparation, staff conducted an environmental scan and reviewed strategic plans from 33 local public health units in Ontario, three government agencies and one hospital. The most common themes that occurred from the environmental scan and 61 priorities that were identified were outlined. Strategic plans from various public health and non-public health organizations were highlighted to describe key features for the members' information.

It was noted that much of these strategic plans were developed prior to the pandemic.

- 6.1.2 Informing the engagement approach for the next Strategic Plan
- SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis
  - Reflection and Discussion
  - Mapping the Engagement Approach

The Board of Health Executive also discussed strengths, weaknesses, opportunities, and threats in our current environment to inform how we should engage for the strategic planning process.

The following SWOT questions were discussed:

1. What opportunities currently exist that would inform/impact our strategic direction over the next 3-5 years?
2. What threats has the organization had to deal with in recent years? What threats exist currently?
3. What strengths does the organization have to deal with threats or opportunities?
4. What weaknesses does the organization have to deal with threats and opportunities?

The following questions and prompts to inform the engagement plan were also discussed:

1. What kind of information do we need to inform the drafting of our Strategic Plan?

The Board of Health Executive members indicated that a complete overhaul of the Strategic Plan is not needed and that only some tweeking is required.



The benefit of reporting on our progress was discussed and should be a key consideration for accountability and transparency.

2. What perspective do we need?

It was suggested that in addition to the perspectives already noted, we should seek input from additional groups including for example, international students, individuals new to Canada, those who may comment on public health from an environmental lens.

3. Who should we engage with?

It was proposed that we engage with our PHSD Senior Management Executive (SM-EC); Public Health staff; Board of Health; community partners including: municipalities, Indigenous community partners, hospital and health care partners, immigrant population, school boards, post secondary institutions, environmental sector stakeholders and stakeholders who engaged with PHSD during the pandemic response; and the community at large via a survey on our website and social media channels.

6.1.3 Next steps

The following timelines were reviewed.

- April 20: Board of Health approval of engagement plan
- June: Board of Health engagement
- September: Board of Health Executive workshop
- October: Board of Health approval

Dr. Sutcliffe and team were thanked for providing the framework. The Board of Health Executive Committee members were also thanked for their engagement at today's meeting.

**7. ADJOURNMENT**

**02-23 ADJOURNMENT**

***MOVED BY N. Tessier – C. Gignac THAT we do now adjourn. Time: 11:23 a.m.***

**CARRIED**

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(Chair)

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(Secretary)

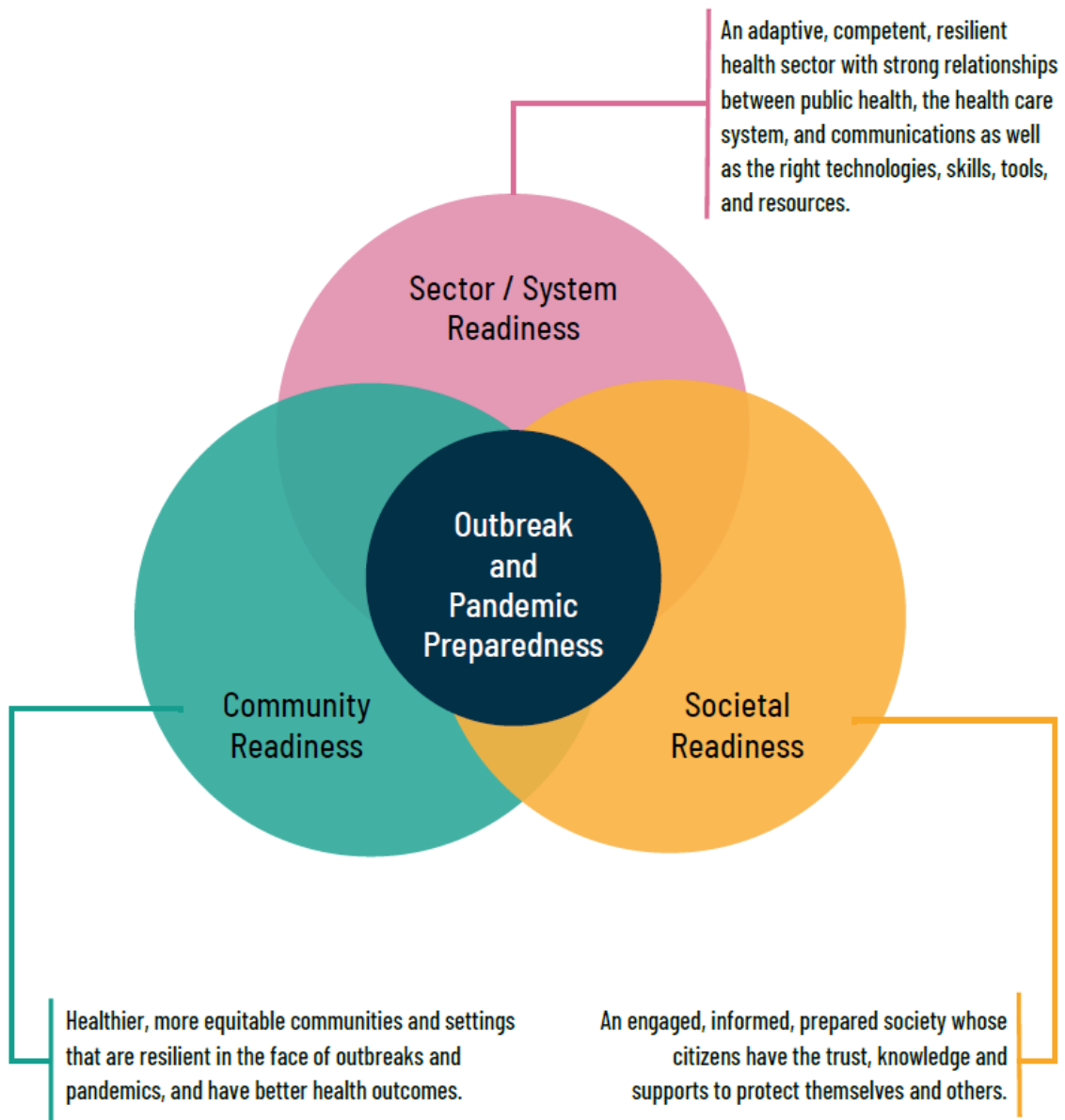


# Medical Officer of Health/Chief Executive Officer Board of Health Report, April 2023

## Words for thought

### *Chief Medical Officer of Health 2022 Annual Report*

Figure 1: A big picture of readiness



To be ready for the next outbreak, Ontario’s public health sector must take a collective, forward-thinking approach to pandemic planning. It must make sustained investments in strengthening sector and system, community, and societal readiness. (p. 3)

Recent pandemics including SARS, H1N1, and COVID-19 have taught important lessons about preparedness. In particular, the duration and severity of COVID-19 drove home the challenges of containing a fastspreading virus and making ethical decisions in a world competing for scarce resources. *It also highlighted the critical importance of local public health agencies knowing their communities, and advocating for and delivering services to meet their needs. It is only through **collective action** – individuals, families, communities, schools, workplaces, the health care system, other sectors, and governments working together – that we can slow or stop outbreaks and pandemics.* (p. 17)

Source: [Chief Medical Officer of Health 2022 Annual Report | ontario.ca](https://www.ontario.ca/health/2022/04/2022-annual-report)

## General Report

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Happy spring and welcome to our first hybrid Board of Health meeting for some time! There is a sense of optimism in the air at Public Health Sudbury & Districts (PHSD) which is not *only* related to the snow melting and the days lengthening. With each day, we reinvigorate more and more of our core public health programming and we respond more effectively to pandemic-intensified needs within our communities.

I am pleased that today’s meeting begins with a delegation on the 2022 Chief Medical Officer of Health Annual Report in which Dr. Moore stresses the importance of public health emergency preparedness and for that, the criticality of sustained and strengthened investment in Ontario’s public health sector. On the heels of the Board’s risk management training session, it is important to note from the Annual Report: “Maintaining and strengthening public health’s capacity to plan for outbreaks and pandemics is good risk management.”

Thank you for your ongoing commitment to this work!

Countries maintain an intelligence and defense system in case of attack or war. Provinces maintain capacities to respond to wildfires and storms. Municipalities support a network of fire stations and equipment. Individuals install smoke and carbon monoxide detectors in their homes. These investments are a form of insurance and readiness for uncommon events so that we can respond quickly in the event of an emergency. Societies must make the same kind of ongoing investment in the competencies and capacity required to respond to outbreaks and pandemics. (p. 14)

## 1. Board of Health Updates

### ***Membership***

I am very pleased to welcome Guy Despatie, recently appointed by the LaCloche FootHills Municipal Association.

### ***Continuing education opportunity for Board of Health members***

#### *alPHa Annual General Meeting and Conference*

The Association of Local Public Health Agencies (alPHa) will be holding its in-person 2023 Annual General Meeting (AGM), Conference and Section Meetings on June 12-14. A motion is included in the meeting agenda relating to upcoming alPHa Board elections. Any Board of Health member considering attending this Toronto in-person meeting is requested to communicate with the Board of Health Secretary.

#### *alPHa Workplace Health & Wellness Month*

As part of the annual alPHa Workplace Health and Wellness initiative, everyone is encouraged to engage in physical activity (e.g., walking, hiking, swimming, cycling, and paddling) or activities that promote mental health (e.g. meditation, yoga and relaxation exercises) for 30 minutes per day during the month of May. Participate on your own or as part of a group and share pictures on Twitter tagging [@PHAgencies](#) with #PublicHealthLeaders, #alPHa2023. Photos will be profiled during the June 13 alPHa Conference. The alPHa flyer can be found [here](#). Activities are to be completed at any time during the month of May. Any physical or mental health activities of a 30-minute duration are encouraged. Post your healthy recipes too. Be creative and have fun!

### ***Board of Health Code of Conduct***

*Friendly reminder* - Please complete the declaration form if not already done so.

Board of Health members are responsible for conducting themselves in compliance with the Code of Conduct Policy C-I-15 (Code); in a manner that is professional, and with the highest regard for the rights of the public in accordance with the principles outlined in the Human Rights Code and the Charter of Rights and Freedoms. The standard obligations, values, and expected behaviours outlined in the Code serve to enhance public confidence that members operate from a foundation of trust, humility, and respect.

All members are required to sign an annual declaration attesting to their understanding and acknowledgement of this Code. The Code of Conduct Policy is included in the February 16, 2023, Board of Health *Event* in BoardEffect. The declaration form, which must be signed and submitted annually, can be completed electronically in BoardEffect under Board of Health – Collaborate – Surveys. Deadline to submit is Friday, March 3, 2023.

## ***Board of Health Conflict of Interest***

*Friendly reminder* - Please complete the declaration form if not already done so.

As stipulated in the Board of Health Manual Conflict of Interest Policy and Procedure C-I-16, members bring a perspective based on their skills and experiences in order to act in the best interest of Public Health Sudbury & Districts and in compliance with their duties and obligations under the *Health Protection and Promotion Act*. Members cannot act in their own personal interest or as a representative of any professional, political, socio-economic, cultural, geographic, or other organization or group.

Each individual member of the Board of Health ensures that they are in compliance at all times with the *Municipal Conflict of Interest Act* and follows the Conflict of Interest Policy C-I-16.

At the beginning of each calendar year, Board of Health members are required to complete the Declaration of Conflict of Interest form. The Conflict of Interest Policy and Procedure is included in the February 16, 2023, Board of Health *Event* in BoardEffect. The Conflict of Interest declaration form, which must be signed and submitted annually, can be completed electronically in BoardEffect under Board of Health – Collaborate – Surveys. Deadline to submit is Friday, March 3, 2023.

## **2. Local and Provincial Meetings**

I continue to attend Northern Medical Officer of Health teleconferences, Council of Ontario Medical Officers of Health (COMOH) meetings. Following many years of service, I have stepped down as the northern medical officer of health representative on the ALPHa Board and the COMOH Executive. Dr. Lianne Catton, MOH, Porcupine Health Unit is now very ably representing northern medical officers of health on these committees.

The Honourable Bill Blair, Minister of Public Safety and Emergency Preparedness and Minister of Border Security and Organized Crime Reduction was in Sudbury on Tuesday, April 11 to speak about Budget 2023 and how it relates to healthcare (and sexual health). Public Health was pleased to provide Minister Blair and his team as well as MP's Lapointe and Serre a tour of our sexual health and dental clinic at our Elm Place location.

## **3. Human Resources**

The Board of Health will be aware of the departure of Dr. Imran Adrian Khan, Public Health Physician, on March 31, 2023. Dr. Khan is pursuing his clinical interests at this time and will be missed from our agency. We have established an interim structure to ensure continuity in programming and supports and are exploring next steps to ensure leadership capacity. In addition to this gap, an area of identified need is in our capacity to further our commitment to

Indigenous reconciliation. This is being closely examined as we are committed to taking steps to further action our Indigenous Engagement Strategy.

## 4. Quarterly Compliance Report

The agency is compliant with the terms and conditions of our provincial Public Health Funding and Accountability Agreement. Procedures are in place to uphold the Ontario Public Health Accountability Framework and Organizational Requirements, to provide for the effective management of our funding and to enable the timely identification and management of risks.

Public Health Sudbury & Districts has disbursed with all payable remittances for employee income tax deductions and Canada Pension Plan and Employment Insurance premiums, as required by law to March 17, 2023, on March 20, 2023. The Employer Health Tax has been paid, as required by law, to February 28, 2023, with an online payment date of March 14, 2023. Workplace Safety and Insurance Board premiums have also been paid, as required by law, to February 28, 2023, with an online payment date of March 27, 2023. There are no outstanding issues regarding compliance with the Occupational Health & Safety Act, or Employment Standards Act.

## 5. Infrastructure Modernization

### ***1300 Paris Street***

Projects at our 1300 Paris Street site are progressing well. Contractors are on-site and working through the Infrastructure Modernization deficiency list. We are hopeful we will see much of this work completed throughout the month of April. The Elevator Modernization project is progressing well and is very close to completion with just a few more items to be addressed prior to TSSA re-inspection. We anticipate we will see the elevator re-commissioned this month. The tender phase for the Patio Refurbishment is now complete, and project has been awarded to CK Construction (2021) Inc. Construction on this critical infrastructure project is scheduled to start this spring and estimated to take 20 weeks.

### ***Elm Place***

Contractors continue to work through the list of deficiencies. The list is diminishing, and we are hopeful we will see the last of the deficiencies finalized this month.

### ***Information Technology***

There are several on-going projects in relation to our Information Technology infrastructure modernization:

- New server hardware has been installed at 1300 Paris Street to replace end of life units. The new servers provide the functionality to deploy services on premise or in the cloud, allowing PHSD to make incremental decisions based on efficiency and costs.

- Work has now commenced on the migration to exchange online, and work is underway to convert the Corporate Services staff to the new online platform. Once this is complete, the rest of the organization will be moved to the online platform.
- SharePoint on premise is being eliminated, requiring PHSD to move to SharePoint online. A consulting company has been retained to assist PHSD in transitioning to the new platform. This will also see a move from Collabware to CollabSpace which is our records management system.
- In the interest of security, local Administration rights have been removed from all computers, Exchange Online Protection is now enabled, and Malware and Trend have been replaced with Microsoft's Endpoint Manager/Defender for Cloud and Office 365.
- We have also successfully installed a Uniflow system on all printers/photocopiers at the 1300 Paris office to help increase confidentiality. This Uniflow system holds print jobs until the user taps their building access card and releases their print jobs.
- A new asset management system has been deployed.

## 6. Risk Management

Risk Management is an organizational requirement under the [Good Governance and Management Practices Domain in the Ontario Public Health Standards](#). The Board of Health is required to provide governance direction and oversight of risk management, delegating to senior staff the responsibility to monitor and respond to emerging issues and potential threats to the organization.

As per policy, organizational risks are reviewed by senior management and presented to the Board for approval every three years. To inform the development of the next iteration of the risk management plan, the board passed a motion at the February 23 meeting that approved the risk management engagement timelines which outline the next steps for engagement, development, approval, and launch of the 2023-2025 risk management plan. On February 28, the Senior Management Executive committee held a workshop to identify new and emerging risks. A risk management training and education session is scheduled with the Board of Health the morning of the April 2023 board meeting.

## 7. Annual Service Plan and Budget Submission

The Ministry of Health's Annual Service Plan and Budget Submission was completed. The report includes a summary of population health needs identified from available data and detailed descriptions of programs and services prioritized for delivery in 2023. Program plans from each division were used to populate this document. This is in addition to detailed budget information, including the estimated expenses to be funded through the Ministry of Health's COVID-19 extraordinary fund.

Following are the divisional program highlights.

## Health Promotion

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

#### ***Built environment***

In March, staff hosted the Asset-Based Community Development (ABCD) 101 Weaving our Community Fabric virtual workshop in collaboration with Tamarack Institute. Approximately 50 internal staff and various community partners from across Sudbury & Districts participated in this one-day interactive workshop. The ABCD model is a novel strength-based approach to sustainable community-driven development where communities assets are identified to drive change in a community. This workshop provided staff with an opportunity to explore ABCD as an engagement model and how it might apply to programming. Engagement is one of the guiding principles identified in the Ontario Public Health Standards (OPHS) framework, meaningful engagement with the communities we serve is a key component of our work as Public Health. Community engagement can inform local priorities thereby driving local programming and services. Further work will be done to identify possible avenues of implementing the ABCD model to strengthen our partnerships and ensure our work is driven by community needs and interests.

### 2. Healthy Growth and Development

#### ***Breastfeeding***

During the months of February and March, staff provided 251 in-person and virtual breastfeeding clinic appointments to clients at the main office and in Val Caron. Six appointments were provided on Manitoulin Island.

#### ***Growth and development***

To support family literacy day, staff created a social media post encouraging caregivers to read to their babies and children to set them up for success later in life. It highlighted that when children have positive early experiences with books and reading, it can enhance their readiness to learn at school. The post also included information for adults that would like to strengthen their own reading skills. Increasing adult literacy is one strategy that has been shown to help alleviate health disparities and our local school boards offer programs to interested individuals.

Two virtual and in-person presentations were provided to clients at Our Children Our Future. Topics related to growth and development, the importance of the 18-Month Well Baby Visit and injury prevention. Twenty participants were in attendance.



One-hundred and eleven (111) reminder postcards were sent to families encouraging them to make appointments for their child's 18-month screening. The goal of this reminder is to have more infants screened for milestones with their health care providers.

In partnership with Team Safer Seats, staff from the Healthy Families team promoted car seat clinics by creating a social media post as well as developing and distributing posters and business cards at partnering sites across the community. Resources were also given to midwives, health care providers and family health clinics to raise awareness about the importance of having a car seat inspected and who to contact to book an appointment.

### ***Health Information Line***

For the months of February and March, the Health Information Line received 223 calls. Most inquiries were related to information on breastfeeding, lack of primary health care provider as well as some requests for counselling services and general resources regarding healthy growth and development.

### ***Healthy Babies Healthy Children***

During the months of February and March, the team continued to provide support to approximately 205 active client families in the Greater Sudbury, Espanola and Manitoulin areas. One thousand six hundred and twenty-eight (1,628) interactions (in-home/virtual visits as well as phone calls) were completed and 22 new families accepted the program. Public health dietitians continue to provide nutrition support to clients who are identified as high nutritional risk.

### ***Healthy pregnancies***

Between the months of February and March, 92 people registered for Public Health Sudbury & Districts' 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.

In partnership with Better Beginnings Better Futures, the Healthy Families team facilitated the Creating Healthy Babies program to expectant parents. This program provides parents the opportunity to receive emotional, educational and nutritional support to assist them in developing a healthy baby during their pregnancy.

### ***Mental health promotion***

In partnership with Our Children Our Future, a presentation regarding Post Partum Mood Disorder (PPMD) was provided to expectant parents. This presentation outlined how to identify the signs and symptoms or PPMD, how family members can provide support as well as sharing a list of services that are available if a parent decides to seek help. Four participants were present.

### ***Positive parenting***

In partnership with the Parenting Service Advisory Committee (PSAC), Public Health provided 1,825 rack cards that promote the [www.parenting4me.com](http://www.parenting4me.com) website at the request of the Rainbow District School Board, Conseil scolaire public du Grand Nord de l'Ontario, and Conseil scolaire catholique Nouvelon. The cards were used as a promotional tool for positive parenting services available across the districts and distributed to parents and caregivers during the Welcome to Kindergarten open houses.

Between the months of February and March, seven parents registered for the online Triple P positive parenting program.

## **3. School Health**

### ***Mental health promotion***

The School Health Promotion team continued to support schools with mental health promotion requests via sharing and distribution of resources.

School Health Promotion Team also delivered presentations to 100 post-secondary School of Education and 35 School of Nursing students to highlight the importance of building classroom environments that promote student flourishing and resiliency, building positive relationships with students, and providing opportunities for students to thrive.

The School Health Promotion Team is delivering a 10-week Mindfulness program to students in one Conseil scolaire public du Grand Nord de l'Ontario (CSPGNO) school. Well-developed mindfulness interventions have been shown to improve both mental and physical health outcomes, both directly and by bolstering protective factors and reducing risk factors associated with poor health outcomes.

As a comprehensive approach, the Mindfulness program includes both a student program and a staff/educator program, run in tandem, to foster a culture of mindfulness in the school community among staff, students, and their families. Additionally, in partnership with the Consortium pour les élèves du nord de l'Ontario (CÉNO) and the school social worker/mental health team, resources and mental health programming will also be provided to the students in the school across all grades.

### ***Oral Health***

Staff continued to deliver school-based dental screening and assessment and conduct case management follow-ups for all children identified with urgent and/or unmet dental needs. The school screening program for the 2022-2023 school year is nearly complete, with only a few remaining schools to be screened in the spring. Staff also continued to provide preventive dental care at the Paris Street office for children enrolled in the Healthy Smiles Ontario (HSO) Program and enrollment support to families interested in applying for HSO.

Staff hosted a drop-in dental screening clinic for children and youth at the Paris Street office on the school professional development day on February 3. All thirteen children and youth screened at the drop-in clinic were enrolled in HSO for preventive services, and three were referred for urgent follow-up with a dentist and enrolled in HSO for emergency dental care. Two additional drop-in screening clinics have been planned for the school professional development days in April and June.

### ***Substance use and harm reduction***

Using an innovative and interactive game-based platform (Kahoot), the School Health Promotion team continues to deliver presentations to secondary school students (five classrooms with over 150 students), as part of a comprehensive strategy to address risky behaviours, relating to sexual health, substance use, road safety and injury prevention. The strategy also includes professional development opportunities and ongoing curriculum support for educators.

### ***Vision***

On March 1, staff initiated the Senior Kindergarten Vision Screening Program for the 2022-2023 school year. This program had been paused since March of 2020 due to the COVID-19 pandemic response and staff redeployments. All schools in the catchment area that have any students enrolled in Senior Kindergarten have been invited to participate and receive vision screening prior to the end of the school year. Parents/guardians of any students identified with a vision concern during screening will be informed and advised to have their child receive a comprehensive eye exam with an optometrist.

## **4. Substance Use and Injury Prevention**

### ***Alcohol and cannabis***

The Mental Health & Substance Use team participated in a media interview with CBC radio in Sudbury regarding the [Burden of Health Conditions Attributable to Smoking and Alcohol by Public Health Unit in Ontario](#) report released by Public Health Ontario in February. The report identified provincial and health unit deaths, hospitalizations, and emergency room visit for smoking and alcohol. It is important that we continue to promote the newly released [Canada's Guidance on Alcohol and Health](#) as the guidelines for safe consumption of alcohol have decreased dramatically from two drinks a day for men and one for women to two drinks a week for all.

Three staff attended the North-East Alcohol and Cannabis Team (NE-ACT) informal working group meeting on February 16, 2023. This working group is comprised of representatives from Public Health Sudbury & Districts, Porcupine Health Unit, Parry Sound North Bay District Health Unit, Timiskaming Health Unit, and Algoma Public Health to knowledge share, collaborate, advocate, and achieve a unified Northern approach for alcohol and cannabis messaging. This group had been on hold since 2020 due to staff redeployment and programming priorities

related to COVID-19. Each health unit was in the process of re-establishing alcohol and cannabis programming. The NE-ACT group has scheduled the next meeting to occur in May.

### ***Comprehensive tobacco control***

The Sudbury Tobacco Information Line (TIL) received 19 calls and one walk-in request for information on smoking cessation in February. As of the 28<sup>th</sup>, there were 11 calls for March.

There were eight Stop on the Net advertisements (four English and four French) running online for the month of February with the Bell Media campaign. The target population was adults (18 years and older) within the Public Health Sudbury & Districts catchment area. Additionally, three social media posts (i.e., Facebook and Twitter) were released by Public Health Sudbury & Districts in February and March to promote the Stop on the Net program.

### ***Falls***

Physical activity is a protective factor that can reduce the risk of falls in older adults. STAND UP! is a validated program that increase the physical activity level and overall balance of the older adult. Since the pandemic, STAND UP! classes have been on hold. To get the program back up and running, facilitators needed to be recruited and trained. In February, staff hosted a virtual training session for STAND UP! facilitators in collaboration with the North East Specialized Geriatric Centre. Thirteen new facilitators are now able to provide the program to older adults across our service area and other regions in the northeast, to help older adults be more active.

### ***Mental health promotion***

Progress on the Youth Wellness Hub has been made during the month of March. In partnership with Compass, Public Health Sudbury & Districts' Knowledge and Strategic Services Division and the Health Equity team, the Mental Health and Substance Use team has identified priority populations and service pathways for The Youth Wellness Hub. Additionally, the Youth Advisory Council has also been consulted to obtain the youth perspective during the development of the Youth Wellness Hub. The Youth Wellness Hub is expected to have a soft opening in June of 2023.

### ***Needle and Syringe Program/Naloxone***

The Needle and Syringe harm reduction expansion initiative wrapped up on March 31, 2023. This initiative was started with one-time grant funding to increase reach, access to harm reduction supplies, and disposal in more rural and remote areas within our districts. This initiative resulted in purchasing 16 sharps disposal kiosks, which were transferred to interested partners, who will service the kiosks, and five new partners for the distribution of harm reduction supplies.

Naloxone distribution amongst Public Health Sudbury & Districts and community partners in our region distributed a total of 686 naloxone doses. In February, preliminary numbers show

that 671 doses of naloxone were distributed. In both months there were 65 individuals trained. Agencies continue to adopt naloxone and be onboarded to the program.

### ***Road safety***

As part of a road safety campaign, 200 vulnerable road user signs were provided to all the library branches in Greater Sudbury and are now available to all residents at no cost. These signs remind drivers to slow down and watch for pedestrians, cyclists, and other road users. Visual reminders can cue drivers to be more mindful when driving in residential areas and allow vulnerable road users to enjoy the roads as well.

### ***Substance Use***

In February, Public Health Sudbury & Districts received confirmation from the Chief Coroner of Ontario/SOLGEN that there had been xylazine detected in drug poisoning deaths in our catchment area. We released a [drug alert](#), harm reduction [poster](#), as well as a professional [brief/advisory](#). The brief/advisory was specifically released to our healthcare/pharmacy partners within our catchment.

On March 22, the Northern Public Health Unit Opioid Community of Practice held its inaugural meeting. Members consisted of public health units, community drug strategies and community members from all seven northern Ontario regions. With opioid overdose deaths three times the provincial average throughout the north, it is important for health units to join forces to share experiences and seek common solutions.

Two social media posts were shared online through Twitter and Facebook to provide education on proper disposal of syringes and safety advice on what to do should one come across a discarded syringe in the community.

Lastly, staff have finalized new onboarding training for harm reduction partners which includes a focus on program operations, infection control practices and training, anti-stigma and harm reduction through an Indigenous lens. This training material will be used when onboarding new community partners to the needle and syringe program for the distribution of harm reduction supplies. The training program offers foundational knowledge on program logistics as well as providing harm reduction philosophy, information on building relationships, and how to provide safe and effective services to clients.

### ***Smoke Free Ontario Strategy***

The North East Tobacco Control Area Network (NE TCAN) continues to collaborate with the health units in the north east, the six other TCANs, and our partners including Public Health Ontario.

# School Health, Vaccine Preventable Diseases and COVID Prevention Division

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## 1. Vaccine Preventable Diseases and COVID Case and Contact Management

Though the months of February and March, the Vaccine Preventable Diseases team has continued to predominantly work on programming outlined by the Immunization of School Pupil's Act (ISPA). Immunization records for all secondary students have been reviewed and all 4,168 affected students have been issued first notification letters. Second notification letters have been issued to students at 16 of 23 schools, amounting to a total 2,001 letters. Six of 23 schools have entered their suspension period and three of these schools have completed their 2023 ISPA programming.

With the support from the School Focused Public Health Nurses, the Vaccine Preventable Diseases team facilitated 1,714 phone calls related to vaccine inquiries over the months of February and March. Of these calls, 66% were related to ISPA, 16% were general immunization inquiries, 4% were related to accessing an immunization record, another 4% were related to immunizations for travel purposes, 2% were related to international immunization record submission, 1% were related to COVID-19 immunization, and less than 1% were about cold chain maintenance. The nature of approximately 8% of calls was classified as other.

In February, and March the Vaccine Preventable Diseases team, with support from the School Focused Public Health Nurses, offered weekly evening immunization clinics to members of the community. During this time, two full-day Saturday clinics were also offered. All these opportunities offered ISPA and other publicly funded vaccines and were booked to capacity. A mini-mass immunization clinic for ISPA antigens was offered by the Vaccine Preventable Diseases team in the Ramsey Room on two occasions over the March Break. Again, these clinics were fully booked, and positive feedback was received from clients and staff alike.

## 2. COVID and Schools

The School Focused Nurses' team provided communication and ongoing support to all schools and Licenced Child Care Centres located in our catchment area in February and March. The increased illness activity in our community has unfortunately resulted in an increase of illness related absenteeism rates in schools and Licenced Child Care Centres.

School Focused Nurses continue to monitor monthly COVID, gastrointestinal, and respiratory illness reporting in schools and Licenced Child Care Centres, and follow up accordingly. School Focused Nurses responded to 21 reports of illness related to absenteeism in the Licenced Child Care Centres and schools in February.

The School Focused Nurses' continued focus remains supporting the school health program of immunization, as per the *Immunization for Children in Schools and Licensed Child Care Settings Protocol*. They review and update immunization records, as well as contact individuals who are due/overdue for routine immunizations and offer clinic appointments. School Focused Nurses have been administering routine immunizations within the catchment area. In February, 257 ISPA-related immunization appointments were supported by the School Focused Nurses Public Health Nurses.

School Focused Nurses continue to collaborate internally with public health inspectors, and externally with Licenced Child Care Centre representatives and school boards across the region to provide support to the Licenced Child Care Centres and schools in our districts. The School Focused Nurses team supported schools and Licenced Child Care Centres with requests related to, and illness tracking and reporting. They continue to raise awareness about Public Health Sudbury & Districts' COVID-19 index and respiratory activity in our service area to support the decisions and behaviours of members within the school community.

### **3. COVID-19 Vaccination**

Public Health Sudbury & Districts continues to offer many COVID-19 vaccination opportunities across its entire service area. Opportunities for COVID-19 vaccinations continued for Indigenous communities in partnership with First Nation communities or Indigenous service providers. In addition to clinics being offered in the Espanola, Manitoulin and Chapleau district offices, clinics were also held in Gogama and Killarney in February and in Noëlville in March. A Novavax specific vaccination clinic was also held in February 2023, for those clients not willing or unable to receive an mRNA vaccine. For our priority populations, the vaccine-to-vehicle and homebound vaccination programs continues to take place for clients who were unable to attend regular clinics.

The team completed and submitted the Spring Implementation Planning Template to the Ministry in preparation for the Spring Booster Campaign, which began on April 3. Staff continue to monitor local eligibility and demand and ensure sufficient opportunities are available for community members across the catchment area.

As of March 29, a total of 87.6% of residents ages five and up received their first dose of the COVID-19 vaccine, while 84.4% received their second dose. First booster doses have been administered to 57.4% of residents aged 12 and older while second booster doses have been administered to 30.4% of residents aged 18 and older. Since the bivalent boosters have been available, over 42,962 doses have been administered to those who are eligible. Additionally, since the launch of the under five COVID-19 vaccination program at the end of July 2022, a total of 8.1% of local children in this age group have received their first dose, and 6.0% of children under 5 have received their second dose.

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

### ***Sexual health promotion***

In February and March, several sexual health promotion outreach initiatives were undertaken. These included:

- Presentations related to sexual health education at École secondaire de la Rivière des Français, and a presentation on the risk of body modifications to the City of Greater Sudbury operated youth centres.
- Information booths at community events including the St. Charles International Women's Day Fair and Science North Night Life on the Rocks.

Staff also performed sexual health testing in the community in collaboration with community partners Northern Initiative for Social Action (NISA), Laurentian University, and Ontario Aboriginal HIV/AIDS Strategy (OAHAS). This resulted in 37 tests completed.

### ***Sexual health clinic***

In February and March, there were 201 drop-in visits to the Elm Place site related to sexually transmitted infections, blood-borne infections and/or pregnancy counselling.

The Elm Place site completed a total of 697 telephone assessments related to sexually transmitted infections, blood-borne infections, and/or pregnancy counselling in February and March, resulting in 599 onsite visits.

### ***Growing Family Health Clinic***

In February and March, the Growing Family Health Clinic saw a total of 1031 patients and had 220 new referrals.



# Health Protection

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## 1. Control of Infectious Diseases (CID)

In February and March, staff followed-up with 706 new local cases of COVID-19, and investigated 42 sporadic reports of other communicable diseases. Further, 27 respiratory outbreaks were declared. The causative organisms for these outbreaks were identified to be COVID-19 (22), parainfluenza virus and RSV (1), parainfluenza virus and influenza A and B (1), RSV (1), metapneumovirus (1) and influenza A and B (1). Further, five enteric outbreaks were declared in institutions. The causative organism for two of these outbreaks was confirmed to be rotavirus (1) and norovirus (1). The causative organism for the remaining three outbreaks could not be identified. Staff continue to monitor all reports of enteric and respiratory illness in institutions, as well as sporadic communicable diseases.

During the months of February and March, two infection control complaints were received and investigated. Thirteen requests for service were addressed.

On February 23, 2023, Shear Magic hair salon was found guilty in Provincial Offences Court of failing to obey written orders issued by Public Health Sudbury & Districts on April 8<sup>th</sup> and June 29, 2021, to close the premises as required at the time under provincial Grey Lockdown COVID-19 restrictions.

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

In congregate living settings in February and March, the IPAC Hub Practitioners completed two proactive IPAC assessments, four education sessions, and five facility policy reviews. In response to symptomatic residents and acute respiratory infections (ARI), COVID-19, and enteric activity, Practitioners provided two reactive services to reduce risk and prevent potential outbreaks. Practitioners carried out 89 services and supports in response to outbreaks.

## 2. Food Safety

In February and March, two food product recalls prompted public health inspectors to conduct checks of 87 local premises. All affected establishments had been notified, and subsequently had removed the recalled products from sale. The recalled food products included: Nestle Good Start Infant Formula due to possible contamination with *Cronobacter sakazakii* and Canadian Cheddar Cheese due to Listeria contamination.

Staff issued 33 special event food service permits to various organizations.

Through Food Handler Training and Certification Program sessions offered in February and March, 114 individuals were certified as food handlers.

### **3. Health Hazard**

In February and March, 54 health hazard complaints were received and investigated. Two of these complaints involved marginalized populations.

In March, one health hazard order was rescinded.

### **4. Ontario Building Code**

In February and March, 12 sewage system permits, 28 renovation applications, and nine consent applications were received.

### **5. Rabies Prevention and Control**

Forty-six rabies-related investigations were carried out during the months of February and March. Five specimens were submitted to the Canadian Food Inspection Agency Rabies Laboratory for analysis and were subsequently reported as negative. These animals included three cats, one dog and a short-tailed weasel.

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

### **6. Safe Water**

During February and March, 40 residents were contacted regarding adverse private drinking water samples. Public health inspectors investigated five regulated adverse water sample results, as well as drinking water lead exceedance at one local school.

One boil water order was issued. Furthermore, one drinking water advisory was issued for the town of Foleyet.

### **7. Smoke Free Ontario Act, 2017 Enforcement**

In February and March, *Smoke Free Ontario Act* Inspectors charged one individual for smoking in a workplace vehicle and issued two by-law charges for smoking within 9 metres of an entrance or exit of a public building. Nine retail employees were charged for selling tobacco or e-cigarettes to a person who is less than 19 years of age. Four individuals were charged for use of an electronic

cigarette in a prohibited place relating to school property and 22 individuals received warning letters.

## **Knowledge and Strategic Services**

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### **1. Health Equity**

Internal and external materials were prepared to support learning, listening, and reflecting on the histories of Black communities in Canada in order to acknowledge Black History Month in February. Additionally, team members have joined a newly formed Racial Equity Community of Practice for local public health units in Northern Ontario and Ontario Health North that began in March.

Team members from the Health Equity and Family Health teams participated in the Immigration Summit on March 13 organized by the Sudbury Local Immigration Partnership. The summit provided a forum for local partners, post-secondary institutions, and government representatives to share information on current challenges and opportunities, programs, funding opportunities, and strategies employed to support newcomer families and students in the region.

Efforts continue in support of the organization's commitment in providing high-quality inclusive, affirming, and welcoming safe spaces for 2SLGBTQ+ community. This includes ongoing staff development opportunities, including training provided by Rainbow Health Ontario, Removing the Barriers: Making your Organization 2SLGBTQ friendly. The training focuses on how to create a positive and welcoming work environment for 2SLGBTQ staff, clients, and volunteers. This training is complemented by Reflective Circle sessions for staff to allow space for the sharing of impressions and learnings from the Rainbow Health Ontario trainings. Feedback gathered at these sessions will provide insights into how to continue to improve our public health practice to support 2SLGBTQ+ inclusivity.

Staff members from Health Equity and Health Protection have been participating in the Manitoulin-Sudbury Change Team led by the Manitoulin-Sudbury District Services Board (MSDSB). The Change Team is part of a larger initiative led by MSDSB to address homelessness. These efforts are aligned with the process mapped out by the organization Build For Zero Canada. Current efforts of the Change Team include the development and maintenance of a process to provide real-time information about individuals currently experiencing homelessness and to implement a more robust support network of services across communities.

## **2. Indigenous Engagement**

Indigenous Engagement staff attended the Stronger Together Host Community operating plan session for Greater Sudbury on March 30. The session was designed to help Greater Sudbury establish and enhance partnerships to build a local emergency evacuation hosting operational plan to help First Nations communities.

## **3. Research and Evaluation**

The program planning process for 2023 was completed in March. Plans include details outlining programs, services, interventions, and activities for delivery within our service area. Consideration was given to health equity, mental health, and priority populations as part of the process. Discussions on the 2023 process and next steps for 2024 planning are underway.

## **4. Staff Development**

In February, an internal media skills Community of Practice was launched to support staff with building skills for media interviews and key message development.

## **5. Presentations**

In February, a member of the Population Health Assessment and Surveillance Team provided a presentation at the Greater Sudbury Food Policy Council entitled Thinking Outside the Garden Plot. The presentation provided an overview of the importance of interdisciplinary, systems-level thinking for food policy development, including examples of how spatial analysis and maps can be used to reduce food insecurity and improve food access in areas that are also experiencing other health inequities.

On March 20 a staff member participated as a panel presenter as part of the Registered Nurses Association of Ontario (RNAO) Leadership and Management for Nurses Program. The virtual program is open to all Registered Nurses, Nurse Practitioners, and Registered Practical Nurses in managerial roles in Ontario. This session was designed for community nurses (including Public Health) to enhance key knowledge and skills of managers and leaders to achieve goals, support shared decision-making, and create healthy work environments and team functioning.

The Director, Knowledge and Strategic Services provided a comprehensive presentation on the Profile of the Francophone Population in the Region, to the staff at the Centre de santé communautaire du Grand Sudbury (CSCGS) in March. The presentation covered many socio-demographic, health equity and health behaviour indicators which was then used to help the Centre de santé communautaire du Grand Sudbury inform their operational planning and visioning.

## 6. Strategic Engagement Unit and Communications

Supporting Public Health’s programs and services with accessible, timely, and relevant communications strategies and resources is the Communications Team’s goal. With programming efforts refocusing on broader public health programs and services, recent communication efforts have focused on, for example, school readiness, smoking cessation, food recalls, drug warnings, drinking water safety, immunization and the *Immunization of School Pupils Act*, safe sleeping in babies and infants, as well as inclusivity and ongoing calls to end racism. COVID-19 remains a priority to ensure information is publicly available to help people make informed decisions to continue protecting themselves.

Respectfully submitted,

*Original signed by*

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



**Public Health**  
**Santé publique**  
SUDBURY & DISTRICTS

April 11, 2023

VIA EMAIL

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

Dear Premier Ford:

### **Re: Minimum Wage Increase**

Public Health Sudbury & Districts (Public Health) would like to extend its sincere congratulations to the Ontario government for the increase of the minimum to \$16.55 an hour in the fall. Public Health supports the government's efforts to help individuals and families combat the cost of living. The announced 6.8 per cent pay raise is a positive step to assist workers who are still struggling post-pandemic with rising costs of housing, food, and transportation.

Our support for an increase in minimum wage comes from overwhelming evidence confirming the link between income and health, whereby health improves every step of the income ladder. Adequate income not only removes the barriers, stressors, and challenges to achieving health but also decreases the risk of premature morbidity and mortality and increases physical and mental health across the life course. In relation to health and income, the Board of Health passed a Motion (#53-19), Opportunities for All – Poverty Reduction on November 21, 2019:

WHEREAS income is one of the strongest predictors of health and local data show that low income is associated with an increased risk of poor physical and mental health in Sudbury and districts; and

WHEREAS Public Health Sudbury & Districts annual Nutritious Food Basket reports demonstrate that individuals and families reliant on the current provincial social assistance rates or that earn a minimum wage will experience challenges in supporting their health including meeting their nutrition requirements; and

#### **Sudbury**

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

#### **Elm Place**

10 rue Elm Street  
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Sudbury ON P3C 5N3  
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f: 705.677.9611

#### **Sudbury East / Sudbury-Est**

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

#### **Espanola**

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

#### **Île Manitoulin Island**

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

#### **Chapleau**

34 rue Birch Street  
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Chapleau ON P0M 1K0  
t: 705.860.9200  
f: 705.864.0820

#### **toll-free / sans frais**

1.866.522.9200

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



WHEREAS income solutions incorporate the health enhancing influence of work while addressing food security and the health damaging impacts of insufficient income; and

WHEREAS the Sudbury Workers Education and Advocacy Centre calculated a living wage for Sudbury of \$16.98 (current provincial minimum is \$14.00), and the City of Greater Sudbury proclaimed November 3 – 9, 2019 as Living Wage Week; and

THEREFORE BE IT RESOLVED that the Board of Health for Public Health Sudbury & Districts formally endorse the principle of living wage employment and direct the Medical Officer of Health to pursue certification; and

FURTHER that the Board encourages all employers across our service area to recognize the serious health and societal costs of inadequate income.

While we welcome this increase, we think it is important to underscore that minimum wage is the lowest wage rate an employer can pay an employee, which is different from a living wage. A living wage is an income sufficient for families to pay for the basic necessities of life so they can live with dignity and participate as active citizens in our society. The current living wage calculation for Sudbury and districts is \$19.70 per hour compared to the newly announced minimum wage for the province in the fall of \$16.55.

Our agency is dedicated to building a resilient and healthy workplace and to encouraging this approach across employers in the communities that we serve. In support of this, Public Health is certified as a Living Wage Employer. All staff members qualify for a living wage, which reflects the income workers must bring home to meet their basic living needs and participate more fully in life, work, and community.

Public Health Sudbury & Districts is a progressive public health agency committed to improving health and reducing social inequities in health. The minimum wage, even with the upcoming increase, will fall short of the income needed for individuals to pay for basic needs. As your government considers future adjustments to the minimum wage, we urge you to consider the living wage rate calculations for Ontarians, with the understanding that an adequate income aligned with a living wage can contribute to increased physical and mental health outcomes of Ontarians and reduce costs associated with premature morbidity and mortality.

Sincerely,



René Lapierre  
Chair, Board of Health

Letter to the Premier of Ontario

Re: Minimum Wage Increase

April 11, 2023

Page 3 of 3

cc: All Ontario Boards of Health  
Association of Local Public Health Agencies  
Honourable Sylvia Jones, Deputy Premier and Minister of Health  
Honourable Monte McNaughton, Minister of Labour, Immigration, Training and Skills Development  
Jamie West, Member of Provincial Parliament, Sudbury  
France Gélinas, Member of Provincial Parliament, Nickel Belt  
Michael Mantha, Member of Provincial Parliament, Algoma-Manitoulin-Kapuskasing



March 28, 2023

Dr. Penny Sutcliffe, Medical Officer of Health/Chief Executive Officer  
Public Health Sudbury & Districts  
1300 Paris Street  
Sudbury, Ontario  
P3E 3A3

**Re: Provincial Funding for Consumption and Treatment Services**

Dear Dr. Sutcliffe,

At the March 16, 2023 meeting, under Correspondence item [i](#), the Middlesex-London Board of Health moved to endorse the following item:

**Date:** February 24, 2023

**Topic:** Provincial Funding for Consumption and Treatment Services

**From:** Dr. Penny Sutcliffe, Medical Officer of Health/Chief Executive Officer, Public Health Sudbury & Districts

**To:** Honourable Doug Ford, Premier of Ontario

The Board of Health acknowledges the importance of supervised consumption and treatment services for members of the community, and the growing number of opioid-related injuries and death. On February 28, 2023, the [Regional HIV/AIDS Connection \(RHAC\)](#), along with partners [London Intercommunity Health Centre \(LIHC\)](#) and the Middlesex London Health Unit (MLHU), opened the permanent site of the Carepoint Consumption and Treatment Centre at 446 York Street in London. The Carepoint program provides clients with support and services from 9-9 each day, including statutory holidays – with a large demand for its services continuing throughout the pandemic.

The program is a vital service and support for many of London’s citizens and remains a critical part of care in our community. The Middlesex-London Board of Health supports services such as Carepoint in Middlesex County and London and supports Public Health Sudbury & Districts in advocating for these services in their region.

Sincerely,



Matt Reid  
Board Chair  
Middlesex-London Health Unit



Dr. Alexander Summers MD, MPH, CCFP, FRCPC  
Medical Officer of Health  
Middlesex-London Health Unit



Emily Williams  
Secretary and Treasurer  
Middlesex-London Health Unit

CC: Honourable Doug Ford, Premier of Ontario  
Dr. Kieran Moore, Chief Medical Officer of Health of Ontario  
Honourable Sylvia Jones, Minister of Health of Ontario  
Honourable Michael Tibollo, Associate Minister, Mental Health and Addictions of Ontario  
Honourable Jean-Yves Duclos, Minister of Health of Canada  
Honourable Carolyn Bennett, Minister of Mental Health and Addictions of Canada



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

**Woodstock Site**  
410 Buller Street  
Woodstock, ON  
N4S 4N2

March 24, 2023

The Honourable Peter Bethlenfalvy  
Minister of Finance  
Frost Building North, 7<sup>th</sup> Floor  
7 Queen's Park Cres.  
Toronto, ON M7A 1Y7

Delivered via email  
[peter.bethlenfalvy@pc.ola.org](mailto:peter.bethlenfalvy@pc.ola.org)

Dear Minister Bethlenfalvy,

On behalf of the Board of Health for Southwestern Public Health (SWPH), we are writing to express our strong support for the Association of Local Public Health Agencies' (ALPHA) 2023 Pre-Budget Submission. We believe that ALPHA's pre-budget submission outlines what is needed with respect to public health investments that are crucial for the health and well-being of communities across Ontario.

The COVID-19 pandemic has highlighted the importance of investing in public health infrastructure, and ALPHA's recommendations within its *Public Health Resilience in Ontario* report, are a critical step in ensuring that Ontario is prepared for future public health emergencies. The *Report* well articulates the need for investments in public health that are required for ongoing pandemic response, tackling public health's extensive backlog not unlike the health care system's 'surgical backlog', and restarting extensive programs and services provincially mandated under the Ontario Public Health Standards.

The Ontario Government invested in public health during the most extraordinary emergency response of our lifetime by ensuring we were well-resourced to keep Ontarians safe. For that, we are most appreciative. Our work before the pandemic and after involves the very same principles applied during the pandemic. Protection, promotion, and prevention are the pillars of public health work to ensure every Ontarian has the best opportunity for a healthy life. The return on your government's public health investment lessens the burden on the health care system tomorrow, next month, next year, and for years to come. Local public health agencies working in collaboration with dozens of partners, are keen to tackle what needs to be done especially after this unprecedented pandemic and the lingering unintended consequences we are left with. To do our best work, we need adequate and sustaining funding to ensure our communities are healthy and economically vibrant.

In conclusion, we strongly support ALPHA's 2023 Pre-Budget Submission. Please give this pre-budget submission serious consideration.

Sincerely,

A handwritten signature in blue ink that reads 'Joe Preston'.

Joe Preston  
Chair, Board of Health  
Southwestern Public Health

A handwritten signature in black ink that reads 'Cynthia St. John'.

Cynthia St. John  
Chief Executive Officer  
Southwestern Public Health

c: The Honourable Doug Ford, Premier of Ontario  
The Honourable Sylvia Jones, Deputy Premier of Ontario and Minister of Health  
Ernie Hardeman, MPP Oxford County  
Rob Flack, MPP Elgin Middlesex London  
Dr. Kieran Moore, Chief Medical Officer of Health  
Loretta Ryan, Association of Local Public Health Agencies  
Ontario Boards of Health  
Sandra Datars-Bere, CAO, City of St. Thomas  
Ben Addley, CAO, Oxford County  
Julie Gonyou, CAO, County of Elgin

March 3, 2023

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building, Room 281  
Queens Park  
Toronto, ON M7A 1A1

The Honourable Sylvia Jones  
Minister of Health / Deputy Premier  
777 Bay Street, College Park, 5<sup>th</sup> Floor  
Toronto, ON M7A 2J3

The Honourable Merrilee Fullerton  
438 University Avenue, 7<sup>th</sup> Floor  
Toronto, ON M5G 2K8

Dear Premier Ford, Minister Jones, and Minister Fullerton:

**RE: Food Insecurity in Ontario**

On behalf of the Board of Health (Board) and staff of the North Bay Parry Sound District Health Unit (Health Unit), we are expressing our concerns about the high rates of food insecurity in Ontario. Most recent estimates show that one in six households experience food insecurity, and one in five children live in a food insecure household. This is not acceptable. The magnitude of the problem, paired with the severe health consequences associated with experiencing food insecurity, make this an important and pressing public health issue that requires attention from all levels of government.

Food insecurity means a household has inadequate or insecure access to food due to financial constraints. Not being able to afford food has profound adverse effects on people's [physical and mental health](#), and their ability to lead productive lives. The health consequences of food insecurity are also a large burden on our healthcare system.

As per the Ontario Public Health Standards, health units are required to monitor food affordability. We recently released our local [2022 Cost of Eating Well report](#), which draws attention to the inadequacy of current social assistance rates. It highlights that households with social assistance as their main income do not have enough money for the costs of living, including food. An excerpt from the [report](#) is included as **Appendix A**. It is important to note the scenarios presented include very modest estimates of both food costs and rent. Local data from the Canadian Mortgage and Housing Corporation is used for rent estimates which may or may not include utilities. Food costs are based on the [Nutritious Food Basket](#) (NFB). Grocery stores are surveyed locally to determine the cost of the NFB, which provides an estimate of the cost of following Canada's Food Guide. Examining food costs and rent rates alongside household income scenarios determines if food is affordable. For those receiving social assistance, it is clear they do not have enough money for the costs of living.

.../2

As record high food inflation rates persist, there is no doubt the financial situation is increasingly dire for these households. While the Ontario Disability Support Program (ODSP) was increased by 5% in 2022 and will be indexed to inflation going forward, the current rates are not based on the costs of living. Further, Ontario Works (OW) has not been increased since 2018 and is not indexed to inflation.

Last week, our Board passed a series of motions demonstrating collective support from Health Unit staff, leadership, and Board members, to call on the province for income-based policy action to reduce food insecurity. The complete list of resolutions and motions are attached as **Appendix B**. To summarize, our Board is urging the Province of Ontario to:

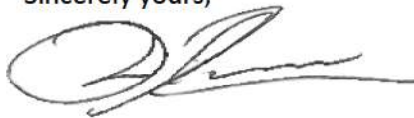
- Legislate targets for the reduction of food insecurity as part of the Ontario Poverty Reduction Strategy.
- Increase social assistance rates to reflect the costs of living, and to index Ontario Works rates to inflation going forward.
- Resume investigating the feasibility of creating a guaranteed living wage (basic income) in the Province of Ontario.

Income is an important social determinant of health (SDOH) that greatly impacts other SDOHs, including food security. Income support programs are recognized globally as important and effective population health interventions, meaning they can impact the health of the whole population. Ensuring low-income households have enough money to meet their basic needs is essential for health.

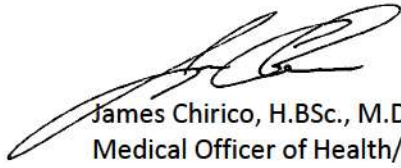
Food insecurity in Canada is a persistent and highly prevalent problem that has not improved since systematic monitoring began in 2005. Our Health Unit has been vocal in the past about the importance of adequate income to reduce food insecurity. Most recently, we called on the federal government to consider the importance of a [basic income program for all](#) in light of COVID-19 pandemic response benefits, and we called on the province to establish a [Social Assistance Research Commission](#) to advise on strengthening social assistance in Ontario. We will continue to monitor food affordability and follow the evidence on this issue, as health units are required to ‘assess and report on the health of local populations describing the existence and impact of health inequities and identifying effective strategies that decrease health inequities.’

The Province of Ontario holds the power to reduce food insecurity and extreme poverty among households receiving social assistance. From a public health perspective, our Board urges you to take action. Please consider the motions our Board passed on this important issue and thank you for reviewing this information.

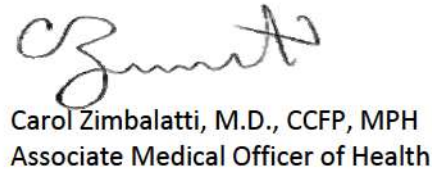
Sincerely yours,



Rick Champagne  
Chairperson, Board of Health



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



Carol Zimbalatti, M.D., CCFP, MPH  
Associate Medical Officer of Health

/sb

Enclosures (2) – Appendix A and B

Copy to:

Vic Fedeli, MPP, Nipissing  
Graydon Smith, MPP, Parry Sound-Muskoka  
John Vanthof, MPP, Timiskaming-Cochrane  
Hon. Anthony Rota, MP, Nipissing-Timiskaming  
Hon. Scott Aitchison, MP, Parry Sound-Muskoka  
Hon. Marc Serre, MP, Nickel Belt  
Ontario Boards of Health  
Association of Local Public Health Agencies (alPHA)  
Association of Municipalities of Ontario (AMO)  
Federation of Canadian Municipalities (FCM)  
Health Unit Member Municipalities

References:

Tarasuk V, Li T, Fafard St-Germain AA. *Household food insecurity in Canada, 2021*. Toronto: Research to identify policy options to reduce food insecurity (PROOF). 2022. Retrieved from: <https://proof.utoronto.ca/>

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Ministry of Health. *Ontario Public Health Standards: Requirements for programs, services and accountability*. 2021. Retrieved from: [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/protocols\\_guidelines/Ontario\\_Public\\_Health\\_Standards\\_2021.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Ontario_Public_Health_Standards_2021.pdf)

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**Single man receiving Ontario Works**

This person does not have enough money to cover rent and food in a month, or their other costs of living. Current social assistance rates in Ontario are not based on the real costs of living. There are few income supports in place for working aged adults without children, leaving them in extreme poverty should they be unemployed.

*\*Income is based on OW basic allowance and maximum shelter allowance, GST/HST credit, Ontario Trillium Benefit, and the Ontario Climate Action Incentive Payment.*

=====  
 Monthly income:\* \$876  
 Rent (bachelor apartment): \$650  
 Food: \$404  
 =====

**-\$178**



**Single woman with 2 kids receiving Ontario Works**

It is highly unlikely that the \$688 remaining after paying for rent and food will be enough to cover this family's monthly expenses. Parents in Canada are eligible for the Canada/Ontario Child Benefit (CCB), which provides a seemingly significant amount of money monthly for low-income households. Yet, 1 in 5 children in Ontario live in a food insecure household, suggesting the CCB does not provide enough money to protect against food insecurity.

*\*Income is based on Ontario Works basic allowance for one recipient and two dependents and maximum shelter allowance for a family size of three, Canada and Ontario Child Benefit, GST/HST credit, Ontario Trillium Benefit, and the Climate Action Incentive Payment.*

=====  
 Monthly income:\* \$2548  
 Rent (2 bedroom apartment): \$1032  
 Food: \$828  
 =====

**\$688**

## Appendix B

Board of Health Motion: #BOH/2023/02/04 – February 22, 2023

Moved by: Marianne Stickland

Seconded by: Jamie McGarvey

*Whereas, the Ontario Public Health Standards require public health units to monitor food affordability, as well as assess and report on the health of local populations, describing the existence and impact of health inequities;*

*Whereas, it is well documented that food insecurity has a detrimental impact on physical and mental health;*

*Whereas, adequate income is an important social determinant of health that greatly impacts food security;*

*Whereas, 67% of households in Ontario with social assistance as their main source of income experience food insecurity;*

*Whereas, the 2022 Nutritious Food Basket Survey results show that households reliant on social assistance do not have enough money for the costs of living, including food;*

*Therefore Be It Resolved, That the Board of Health for the North Bay Parry Sound District Health Unit continue to support the efforts of staff and community stakeholders to raise awareness about, and work to reduce, health inequities, including food insecurity; and*

*Furthermore Be It Resolved, That the Board of Health call on the Province of Ontario to legislate targets for the reduction of food insecurity as part of the Ontario Poverty Reduction Strategy; and*

*Furthermore Be It Resolved, That the Board of Health call on the Province of Ontario to increase social assistance rates to reflect the costs of living, and to index Ontario Works rates to inflation going forward; and*

*Furthermore Be It Resolved, That the Board of Health urge the province to resume investigating the feasibility of creating a guaranteed living wage (basic income) in the Province of Ontario; and*

*Furthermore Be It Resolved, That the Board of Health provide correspondence of these resolutions to district municipalities, Ontario Boards of Health, Victor Fedeli, MPP (Nipissing), Graydon Smith, MPP (Parry Sound-Muskoka), John Vanthof, MPP (Timiskaming-Cochrane), the Honourable Doug Ford (Premier), the Honourable Merrilee Fullerton (Minister of Children, Community and Social Services), the Honourable Sylvia Jones (Minister of Health) and the Association of Local Public Health Agencies (alPHA), MP Anthony Rota, MP Scott Aitchison, MP Marc Serre, the Association of Municipalities of Ontario (AMO), and the Federation of Canadian Municipalities (FCM).*



February 28, 2023

[sylvia.jones@ontario.ca](mailto:sylvia.jones@ontario.ca)

The Honourable Sylvia Jones  
Minister of Health and Deputy Premier  
Ministry of Health  
College Park 5th Floor, 777 Bay St  
Toronto, ON M7A 2J3

Dear Minister Jones:

**Letter of Support – Physical Literacy for Healthy Active Children**

On February 16, 2023 at a regular meeting of the Windsor-Essex County Board of Health, the Board considered a letter from Sudbury & Districts Public Health to Directors of Education, Local School Boards, Sports and Recreation Organizations and Early Learning Centres, encouraging them to work to improve physical activity levels among children and youth, including agencies that provide comprehensive physical literacy training to teachers, coaches, recreation providers and early childhood educators.

The following motion was passed:

**Motion: That the WECHU Board of Health support the letter from Sudbury & Districts Public Health to Directors of Education, Local School Boards, Sports and Recreation Organizations and Early Learning Centres, encouraging them to work to improve physical activity levels among children and youth.**

The Windsor-Essex County Health Unit fully supports the above recommendation, and thanks you for your consideration.

Sincerely,



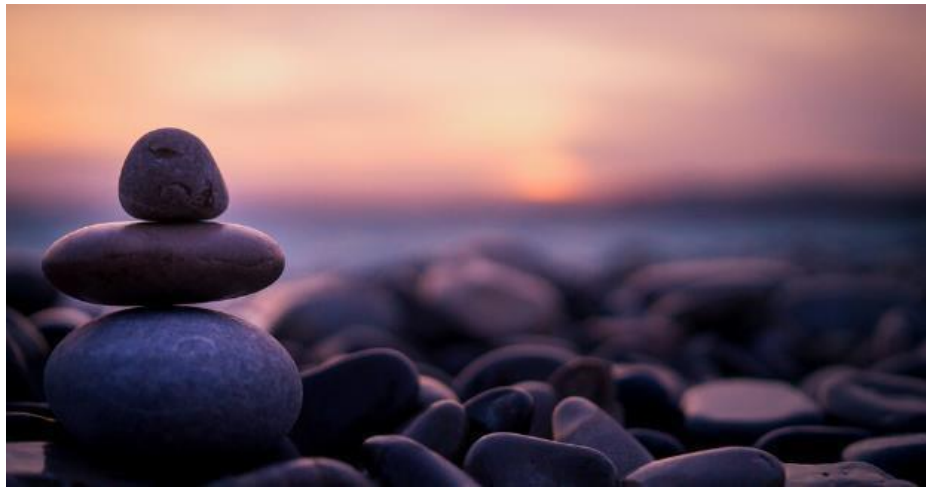
Fabio Costante, Chair  
Windsor-Essex County Board of Health

c: Kenneth Blanchette, CEO, WECHU  
Windsor-Essex County Directors of Education  
Loretta Ryan, Executive Director, alPHa  
Ontario Boards of Health  
Lisa Gretzky, MPP Windsor-West  
Andrew Dowie, MPP Windsor-Tecumseh  
Anthony Leardi, MPP Essex  
Trevor Jones, MPP Chatham-Kent

# 2023 alPHa Workplace Health & Wellness Month

alPHa

Association of Local  
**PUBLIC HEALTH**  
Agencies



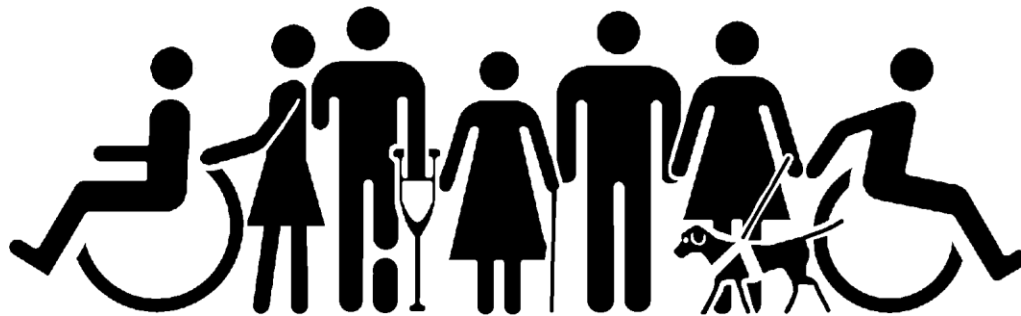
alPHa members are encouraged to engage in physical activity (e.g. walking, hiking, swimming, cycling, and paddling) or activities that promote mental health (e.g. meditation, yoga and relaxation exercises) for 30 minutes per day during the month of May.

Good health involves good eating habits.

Do you have a recipe that contributes to health and wellness?

We'd love to hear about these too!

Participate and share on Twitter. Don't forget to include in your tweet: a picture, **@PHAgencies** and the hashtags **#PublicHealthLeaders, #alPHa2023**. We'll profile your activities at the alPHa Conference taking place on June 13, 2023.



## HERE'S HOW TO PARTICIPATE

Activities are to be completed at any time during the month of May. Any physical or mental health activities of a 30-minute duration are encouraged.

Post your healthy recipes too.  
Be creative and have fun!

Post your tweets with pictures and include  
**@PHAgencies, #PublicHealthLeaders**  
**#aPHa2023**

### Easy Activity Tips!

**At Home** - Work in the garden or mow the grass. Using a riding mower doesn't count! Rake leaves, prune, and dig. Go out for a short walk before breakfast, after dinner or both! Why not start the day off with meditation? Start with 5-10 minutes and work up to 30 minutes.

**At Work** - Many of us have sedentary jobs. If you can, use active transportation to get to and from your workplace. Go for a walk at lunchtime. Incorporate these activities into your work day. Start with short walks and work up to longer trips. Practice mindfulness. Engage in fun team building exercises.

**At Play** - Play and recreation are important for good health. Look for opportunities to be active and have fun at the same time: Plan activities that include physical activity (hiking, backpacking, swimming, etc.). Do your favourite physical activities and regularly go walking, jogging, or cycling. Start with achievable goals and work your way up to regular exercise routines.

**At any time** - Prepare a healthy snack or meal, take a picture, and share it with the recipe.

**Ready! Set! GO!**

**APPROVAL OF CONSENT AGENDA**

**MOTION: THAT the Board of Health approve the consent agenda as distributed.**

March 3, 2023

## **Peterborough Public Health Urges Government of Canada to Explore Improvements to Funding Streams to Supporting Small Businesses and Other Organizations to Improve Indoor Air Quality**

The Honourable Jean-Yves Duclos, MP  
Minister of Health, Canada  
[jean-yves.duclos@parl.gc.ca](mailto:jean-yves.duclos@parl.gc.ca)

The Honourable Dominic LeBlanc, MP  
Minister of Intergovernmental Affairs, Infrastructure  
and Communities, Canada  
[dominic.leblanc@parl.gc.ca](mailto:dominic.leblanc@parl.gc.ca)

Dear Honourable Ministers:

Re: Improved Indoor Air Quality in Public Settings

We've learned a great deal about COVID-19 since the pandemic began, most notably, is that **COVID-19 is an airborne virus**,<sup>[1]</sup> and does not spread as easily as we once thought by touching contaminated surfaces.<sup>[2]</sup> The Canadian Centre for Occupational Health and Safety states that "the virus that causes COVID-19 spreads from a person that is infected through the air, by respiratory droplets and aerosols."<sup>[3]</sup> Additionally, the Ontario Science Table noted that "aerosols play a role in the transmission of SARS-CoV-2, especially in poorly ventilated indoor areas."<sup>[4]</sup>

While provincially legislated 'lockdowns', mask mandates, and gathering limits may be behind us, the COVID-19 pandemic is not over. With all that we have learned, **improvements to indoor air quality of the spaces we occupy are necessary and life-saving** to truly control how the SARS-CoV2 virus and other respiratory/airborne pathogens spread. One important strategy to support this change would be through tax credits, grants, or other incentives to support small businesses in improving the indoor air quality of their spaces.

Canada's Chief Science Advisor recommends that owners and operators of indoor public facilities "scale-up and monitor effective prevention interventions, such as improving ventilation in schools, workplaces and public places as part of a first line of prevention of SARS-CoV2 infection and other respiratory/airborne pathogens."<sup>[5]</sup> These sentiments are echoed by the Ontario Society of Professional Engineers (OSPE) Indoor Air Quality group who have created many tools and resources to help Ontarians. [Recommendations](#) OSPE have developed, include:

- increasing the minimum number of air exchanges to at least 6 per hour in any indoor occupied space;
- improving ventilation requirements to follow the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) and the Canadian Standards Association;
- ensuring that HVAC systems and portable units use at least MERV 13 rated filters, and that portable filters with HEPA filters are in occupied spaces where air quality is a concern;

- having certified technicians install upper room ultraviolet germicidal systems; and
- committing to public transparency about the air quality of a space.<sup>[6]</sup>

To this end, there are many examples of improved indoor air quality being prioritized around the world. Last year for example, Belgium legislated an indoor air quality framework<sup>[7]</sup>, as did France<sup>[8]</sup>, while Australia earmarked over \$270 million AUD for classroom upgrades alone to further “provide their students with improved learning facilities in a COVID-19 safe environment”.<sup>[9]</sup>

In an effort to make public indoor spaces safer, and recognizing that COVID-19 is airborne, Peterborough Public Health (PPH) is urging the Government of Canada and its provincial and territorial partners to consider similar initiatives as these other global leaders, and explore a variety of options that support businesses and organizations in protecting their staff and patrons – most notably through improvements to their HVAC and ventilation systems, as detailed above.

PPH recently identified that because of local and provincial protections, 265-291 lives were saved in the area served by our Health Unit<sup>[10]</sup>, while the CD HOWE Institute found that vaccines alone contributed to a “cost/benefit of -\$0.4 billion to \$2.1 billion without considering mortality.”<sup>[11]</sup> Including the value of reduced mortality, this figure balloons to “\$27.6 billion, dwarfing the costs of the vaccines and savings associated with averting more minor cases.”<sup>[12]</sup> Given that a multilayer approach – including improved ventilation - is needed when preventing the transmission of COVID-19, **it is clear that the costs of inaction with the toll of COVID-19 transmission and other respiratory viruses is significant.**

As the Chair of our Board of Health I am writing to you today, to urge that the Federal government, in partnership with all provincial and territorial governments, identify, fund, and implement strategies such as through grants, tax breaks, and other incentives, to improve indoor air quality in public settings.

The staff at PPH and I are ready to support your teams in moving this forward; please don’t hesitate to reach out if we can be of assistance.

Respectfully,

***Original signed by***

Councillor Kathryn Wilson  
Chair, Board of Health

/ag

cc: Local MPs  
Local MPPs  
Curve Lake First Nation  
Hiawatha First Nation  
Association of Local Public Health Agencies  
Ontario Boards of Health

- <sup>[1]</sup> Public Health Agency of Canada. (2022). COVID-19: Main modes of transmission. Retrieved October 18, 2022 from: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/main-modes-transmission.html>
- <sup>[2]</sup> Chen T. (2021) Fomites and the COVID-19 pandemic: An evidence review on its role in viral transmission. Vancouver, BC: National Collaborating Centre for Environmental Health. Retrieved October 12, 2022 from <https://ncceh.ca/documents/evidence-review/fomites-and-covid-19-pandemic-evidence-review-its-role-viral-transmission>
- <sup>[3]</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2022). COVID-19 transmission through short and long-range respiratory particles. Toronto, ON: Queen’s Printer for Ontario. Retrieved October 11, 2022 from [https://www.publichealthontario.ca/-/media/Documents/nCoV/phm/2022/01/covid-19-respiratory-transmission-range.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/Documents/nCoV/phm/2022/01/covid-19-respiratory-transmission-range.pdf?sc_lang=en)
- <sup>[4]</sup> Science M, Thampi N, Bitnun A, et al. (2022). Infection prevention and control considerations for schools during the 2022- 2023 academic year. Science Briefs of the Ontario COVID-19 Science Advisory Table. Retrieved October 11, 2022 from [https://covid19-sciencetable.ca/wp-content/uploads/2022/08/Infection-Prevention-and-Control-Considerations-for-Schools-During-the-2022-2023-Academic-Year\\_20220825\\_published.pdf](https://covid19-sciencetable.ca/wp-content/uploads/2022/08/Infection-Prevention-and-Control-Considerations-for-Schools-During-the-2022-2023-Academic-Year_20220825_published.pdf)
- <sup>[5]</sup> Chief Science Advisor of Canada. (2022). Post-COVID-19 Condition in Canada: What We Know, What We Don’t Know and a Framework for Action. Retrieved December 15, 2022 from, [https://ised-isde.canada.ca/site/science/sites/default/files/attachments/2022/Pre-Report\\_PCC\\_Dec2022.pdf](https://ised-isde.canada.ca/site/science/sites/default/files/attachments/2022/Pre-Report_PCC_Dec2022.pdf)
- <sup>[6]</sup> Ontario Society of Professional Engineers. (2022). Indoor Air Quality Reports. Retrieved December 8, 2022 from <https://ospe.on.ca/indoor-air-quality/>.
- <sup>[7]</sup> Vandenbroucke, F. Deputy Prime Minister and Minister of Social Affairs and Health. Chancellery of the Prime Minister. (2022). Indoor air quality: future policy and legislative framework. Retrieved February 13, 2023 from <https://vandenbroucke.belgium.be/nl/binnenluchtkwaliteit-beleid-van-de-toekomst-en-wetgevend-kader>
- <sup>[8]</sup> Sub-section 3: Indoor air quality monitoring in certain establishments open to the public (Articles R221-30 to D221-38). Retrieved February 13, 2023 from [https://www.legifrance.gouv.fr/codes/section\\_lc/LEGITEXT000006074220/LEGISCTA000024912670/](https://www.legifrance.gouv.fr/codes/section_lc/LEGITEXT000006074220/LEGISCTA000024912670/)
- <sup>[9]</sup> Australian Government. (2022). Schools Upgrade Fund. Retrieved, February 13, 2023 from <https://www.education.gov.au/schools-upgrade-fund>
- <sup>[10]</sup> Peterborough Public Health. (2022). Peterborough Public Health Thanks Community for Efforts in Response to the COVID-19 Pandemic to Date. Retrieved March 2, 2023 from <https://www.peterboroughpublichealth.ca/peterborough-public-health-thanks-community-for-efforts-in-response-to-the-covid-19-pandemic-to-date/>
- <sup>[11]</sup> Wyonch, Rosalie, and Tingting Zhang. 2022. Damage Averted: Estimating the Effects of COVID-19 Vaccines on Hospitalizations, Mortality and Costs in Canada. Commentary 634. Toronto: C.D. Howe Institute. Retrieved March 3, 2023 from [https://www.cdhowe.org/sites/default/files/2023-01/Commentary\\_634.pdf](https://www.cdhowe.org/sites/default/files/2023-01/Commentary_634.pdf)
- <sup>[12]</sup> Ibid.

March 3, 2023

## **Medical Officer of Health Urges Province to Explore Improvements to Ontario Building Code to Improve Indoor Air Quality**

The Honourable Sylvia Jones, MPP  
Minister of Health, Ontario  
[sylvia.jones@ontario.ca](mailto:sylvia.jones@ontario.ca)

The Honourable Steve Clark, MPP  
Minister of Municipal Affairs and Housing, Ontario  
[minister.mah@ontario.ca](mailto:minister.mah@ontario.ca)

Dear Honourable Ministers:

Re: Improved Indoor Air Quality in Public Settings

We've learned a great deal about COVID-19 since the pandemic began, most notably, is that **COVID-19 is an airborne virus**,<sup>1</sup> and does not spread as easily as we once thought by touching contaminated surfaces.<sup>2</sup> The Canadian Centre for Occupational Health and Safety states that "the virus that causes COVID-19 spreads from a person that is infected through the air, by respiratory droplets and aerosols."<sup>3</sup> Additionally, the Ontario Science Table noted that "aerosols play a role in the transmission of SARS-CoV-2, especially in poorly ventilated indoor areas."<sup>4</sup>

While provincially legislated 'lockdowns', mask mandates, and gathering limits may be behind us, the COVID-19 pandemic is not over. With all that we have learned, **improvements to indoor air quality of the spaces we occupy are necessary and life-saving** to truly control how the SARS-CoV2 virus and other respiratory/airborne pathogens spread. One important strategy to support this change would be through consideration of simple amendments to the Ontario Building Code (OBC).

Canada's Chief Science Advisor recommends that owners and operators of indoor public facilities "scale-up and monitor effective prevention interventions, such as improving ventilation in schools, workplaces and public places as part of a first line of prevention of SARS-CoV2 infection and other respiratory/airborne pathogens."<sup>5</sup> These sentiments are echoed by the Ontario Society of Professional Engineers (OSPE) Indoor Air Quality group who have created many tools and resources to help Ontarians. [Recommendations](#) OSPE have developed, include:

- increasing the minimum number of air exchanges to at least 6 per hour in any indoor occupied space;
- improving ventilation requirements to follow the American Society of Heating, Refrigerating and Air Conditioning Engineers (ASHRAE) and the Canadian Standards Association;
- ensuring that HVAC systems and portable units use at least MERV 13 rated filters, and that portable filters with HEPA filters are in occupied spaces where air quality is a concern;
- having certified technicians install upper room ultraviolet germicidal systems; and
- committing to public transparency about the air quality of a space.<sup>6</sup>



Plainly, we need to action these evidence-based approaches and apply science to the laws that protect the residents of Ontario. O. Reg. 332/12: Building Code, Part 9 (Housing and Small Buildings), subsection 9.32.1.3 (3) speaks to the ventilation of rooms and spaces, however, falls short of OSPE recommendations of at least 6 air exchanges per hour and the use of HEPA filters or filters with a MERV 13 rating in HVAC systems.<sup>7</sup>

**Amending the OBC to include these requirements would bolster the defined purpose of the Building Code, which includes standards for public health and safety.**

We must start including the quality of the air we breathe when we think of and refer to the safety of indoor settings. The OBC, like other building and construction codes in Canada, emphasizes air tightness and energy efficiency to cope with winter cold and summer heat, and while these too are important objectives, this may unintentionally result in poorly or under-ventilated public and private settings, creating additional threats to public health and safety.<sup>8</sup>

While we recognize the cost-implications of these changes, they could be operationalized in a way to minimally impact builders. Building housing supply is also a critical priority and so, economic considerations should factor in to changes to OBC. However, low to no cost solutions exist to improve indoor air quality.

Peterborough Public Health (PPH) recently identified that because of local and provincial protections, 265-291 lives were saved in the area served by our Health Unit<sup>9</sup>, while the CD HOWE Institute found that vaccines alone contributed to a “cost/benefit of -\$0.4 billion to \$2.1 billion without considering mortality.”<sup>10</sup> Including the value of reduced mortality, this figure balloons to “\$27.6 billion, dwarfing the costs of the vaccines and savings associated with averting more minor cases.”<sup>11</sup> Given that a multilayer approach – including improved ventilation - is needed when preventing the transmission of COVID-19, **it is clear that the costs of inaction with the toll of COVID-19 transmission and other respiratory viruses is significant.**

As the Chair of our Board of Health, I am writing to you today, imploring you to thoroughly examine the OBC, and to identify opportunities to make changes to the Code that can be implemented to improve indoor air quality and provide increased protection for residents of Ontario.

The staff at PPH and I are ready to support your teams in moving this forward; please don't hesitate to reach out if we can be of assistance.

Respectfully,

***Original signed by***

Councillor Kathryn Wilson  
Chair, Board of Health

/ag

cc: Local MPPs  
Curve Lake First Nation  
Hiawatha First Nation  
Association of Local Public Health Agencies  
Ontario Boards of Health

- 
- <sup>1</sup> Public Health Agency of Canada. (2022). COVID-19: Main modes of transmission. Retrieved October 18, 2022 from: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/main-modes-transmission.html>
- <sup>2</sup> Chen T. (2021) Fomites and the COVID-19 pandemic: An evidence review on its role in viral transmission. Vancouver, BC: National Collaborating Centre for Environmental Health. Retrieved October 12, 2022 from <https://ncceh.ca/documents/evidence-review/fomites-and-covid-19-pandemic-evidence-review-its-role-viral-transmission>
- <sup>3</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2022). COVID-19 transmission through short and long-range respiratory particles. Toronto, ON: Queen’s Printer for Ontario. Retrieved October 11, 2022 from [https://www.publichealthontario.ca/-/media/Documents/nCoV/phm/2022/01/covid-19-respiratory-transmission-range.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/Documents/nCoV/phm/2022/01/covid-19-respiratory-transmission-range.pdf?sc_lang=en)
- <sup>4</sup> Science M, Thampi N, Bitnun A, et al. (2022). Infection prevention and control considerations for schools during the 2022- 2023 academic year. Science Briefs of the Ontario COVID-19 Science Advisory Table. Retrieved October 11, 2022 from [https://covid19-sciencetable.ca/wp-content/uploads/2022/08/Infection-Prevention-and-Control-Considerations-for-Schools-During-the-2022-2023-Academic-Year\\_20220825\\_published.pdf](https://covid19-sciencetable.ca/wp-content/uploads/2022/08/Infection-Prevention-and-Control-Considerations-for-Schools-During-the-2022-2023-Academic-Year_20220825_published.pdf)
- <sup>5</sup> Chief Science Advisor of Canada. (2022). Post-COVID-19 Condition in Canada: What We Know, What We Don’t Know and a Framework for Action. Retrieved December 15, 2022 from, [https://ised-isde.canada.ca/site/science/sites/default/files/attachments/2022/Pre-Report\\_PCC\\_Dec2022.pdf](https://ised-isde.canada.ca/site/science/sites/default/files/attachments/2022/Pre-Report_PCC_Dec2022.pdf)
- <sup>6</sup> Ontario Society of Professional Engineers. (2022). Indoor Air Quality Reports. Retrieved December 8, 2022 from <https://ospe.on.ca/indoor-air-quality/>.
- <sup>7</sup> Ibid.
- <sup>8</sup> Eykelbosh A. Public health and public libraries in partnership to promote healthy indoor air quality [blog]. Vancouver, BC: National Collaborating Centre for Environmental Health; 2022 Sep 14. Retrieved October 18, 2022 from: <https://ncceh.ca/content/blog/public-health-and-public-libraries-partnership-promote-healthy-indoor-air-quality>
- <sup>9</sup> Peterborough Public Health. (2022). Peterborough Public Health Thanks Community for Efforts in Response to the COVID-19 Pandemic to Date. Retrieved March 2, 2023 from <https://www.peterboroughpublichealth.ca/peterborough-public-health-thanks-community-for-efforts-in-response-to-the-covid-19-pandemic-to-date/>
- <sup>10</sup> Wyonch, Rosalie, and Tingting Zhang. 2022. Damage Averted: Estimating the Effects of COVID-19 Vaccines on Hospitalizations, Mortality and Costs in Canada. Commentary 634. Toronto: C.D. Howe Institute. Retrieved March 3, 2023 from [https://www.cdhowe.org/sites/default/files/2023-01/Commentary\\_634.pdf](https://www.cdhowe.org/sites/default/files/2023-01/Commentary_634.pdf)
- <sup>11</sup> Ibid.

## **IMPROVED INDOOR AIR QUALITY IN PUBLIC SETTINGS**

### **MOTION:**

**WHEREAS** the virus that causes COVID-19 (SARS-CoV2), as well as other respiratory viruses, are spread principally through respiratory droplets and aerosols; and

**WHEREAS** ventilation can affect how well respiratory droplets and aerosols are removed from an area. As noted by the [Ontario Science Table](#), “aerosols play a role in the transmission of SARS-CoV-2, especially in poorly ventilated indoor areas”; and

**WHEREAS** Canada’s [Chief Science Advisor](#) recommends that owners and operators of indoor public facilities “scale-up and monitor effective prevention interventions, such as improving ventilation in schools, workplaces and public places as part of a first line of prevention of SARS-CoV2 infection and other respiratory/airborne pathogens”;

**THEREFORE BE IT RESOLVED THAT** the Board of Health for Public Health Sudbury & Districts endorse the letters dated March 3, 2023, from Peterborough Public Health to federal and provincial ministers calling for investments and policy levers to improve indoor air quality in public settings such that health is further protected for all; and

**FURTHER THAT** this resolution be shared with relevant federal and provincial government ministers, area members of parliament and provincial parliament, the Chief Medical Officer of Health, and Ontario boards of health.



The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

**Ontario Public Health Association**  
l'Association pour la santé publique de l'Ontario  
Established/Établi 1949

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L8S 4G2

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**President**  
Kevin Churchill  
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**Executive Director**  
John Atkinson  
E-mail: [jatkinson@opha.on.ca](mailto:jatkinson@opha.on.ca)

- Constituent Societies**
- Alliance for Healthier Communities (AHC)
  - Association of Public Health Epidemiologists in Ontario (APHEO)
  - Association of Supervisors of Public Health Inspectors of Ontario (ASPHIO)
  - Canadian Institute of Public Health Inspectors - Ontario Branch (CIPHI-O)
  - Community Health Nurses' Initiatives Group (RNAO)
  - Health Promotion Ontario (HPO)
  - Ontario Association of Public Health Dentistry (OAPHD)
  - Ontario Association of Public Health Nursing Leaders (OAPHNL)
  - Ontario Dietitians in Public Health (ODPH)
  - Ontario Public Health Libraries Association (OPHLA)

**Charitable Registration**  
Number 11924 8771 RR0001

March 20, 2023

Senator Patrick Brazeau  
The Senate of Canada  
Ottawa, Ontario  
Canada  
K1A 0A4

Sent by email to: [Patrick.Brazeau@sen.parl.gc.ca](mailto:Patrick.Brazeau@sen.parl.gc.ca)

**Re: Support for S-254, An Act to amend the Food and Drugs Act (warning label on alcoholic beverages)**

The Ontario Public Health Association (OPHA) is writing to express support for S-254, An Act to amend the Food and Drugs Act (warning label on alcoholic beverages) that mandates labelling showing standard drink information, health advice and the link between alcohol and cancer on beverages that contain 1.1% or more of alcohol by volume. OPHA's recent letter to Ministers Duclos and Bennett dated September 22, 2022 outlined our support for mandatory labelling of all alcoholic beverages and presented evidence-informed recommendations for labelling alcohol products.

**Policy measures in Ontario**

In Ontario, alcohol warning labels can be one tool to help decrease population-level drinking. In our province, policy measures that control alcohol products are going in the wrong direction. Alcohol availability in the province increased by 22% between 2007 and 2017. Changes to rules that made it easier to buy alcohol during the COVID-19 pandemic have become permanent, including allowing licensed restaurants and bars to sell alcohol with takeout and delivery food and allowing alcohol to be delivered in food boxes and meal kits, among others. During the pandemic, there was a measurable uptick in substance use (e.g., alcohol and opioids), mental health issues, and factors that contribute to chronic diseases.<sup>i</sup>

**Anticipated benefits of alcohol warning labels**

Effective, federal policy and regulation of alcohol are welcome to reduce mortality, morbidity and pressure on our hospitals and healthcare system. Labelling can be an important intervention in a more comprehensive alcohol strategy that includes controlling pricing, availability and marketing.

Warning or not warning people about alcohol harms should not be in the hands of an industry, who are motivated to increase sales and profits. Under product liability law, alcohol manufacturers and distributors have a duty to warn consumers of risks - a duty they are not meeting. Alcohol warning labels would hold alcohol companies to the same standard as other regulated drugs. Tobacco and cannabis already have existing labelling requirements under the Tobacco and Vaping Products and Cannabis Acts. In the same way that plain packaging and health warnings on tobacco products were used as part of a broader public health approach to reducing consumption, appropriate and proportionate health messages on alcohol should be viewed as a cost-effective, easy-to-implement strategy that could raise awareness of alcohol-related harms.<sup>ii</sup>

Finally, alcohol labels would provide consumers with easy-to-use information on alcohol containers to accurately track and monitor their alcohol use in terms of standard drinks. This information is essential if individuals are to effectively reduce their alcohol consumption as recommended in [Canada's new Guidance on Alcohol and Health](#). Without understanding standard drinks and knowing the reasons why they should modify their consumption, people are unlikely to follow the guidance.

OPHA supports bill S-254. Canadians should be supported in making healthy and safe choices. We can improve health and well-being outcomes for Canadians now and for future generations.

Thank you for your courageous leadership and sharing your lived experience to make positive change, improving the lives of all Canadians.

Sincerely



John Atkinson  
Executive Director

cc. Senator Donald Plett, Senator Raymonde Saint-Germain, Senator Scott Tannas, Senator Jane Cordy, Senator Marc Gold

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<sup>i</sup> Association of Local Public Health Agencies. [Public Health Matters](#) (Spring 2022)

<sup>ii</sup> The Conversation (Canada). [Why alcohol health warning labels are a good idea: findings from the latest Global Drug Survey](#)

#### **More about the Ontario Public Health Association**

OPHA has established a strong record of success as the voice of public health in Ontario. We are a member-based, not-for-profit association that has been advancing the public health agenda since 1949. OPHA provides leadership on issues affecting the public's health and strengthens the impact of those who are active in public and community health throughout Ontario. OPHA does this through a variety of means including advocacy, capacity building, research and knowledge exchange. Our membership represents many disciplines from across multiple sectors.

[www.opha.on.ca](http://www.opha.on.ca) | 416-367-3313 | [admin@opha.on.ca](mailto:admin@opha.on.ca)

March 15, 2023

Honourable Jean-Yves Duclos  
Minister of Health, Canada  
House of Commons  
Ottawa, ON K1A 0A6  
[jean-yves.duclos@parl.gc.ca](mailto:jean-yves.duclos@parl.gc.ca)

Dear Honourable Minister Duclos:

**Re: Support for 'BILL S-254 An Act to amend the Food and Drugs Act (warning label on alcoholic beverages)'**

On March 15, 2023, the Board of Health for the Simcoe Muskoka District Health Unit (SMDHU) received information on the 2023 [Canada's Guidance on Alcohol & Health](#) and passed a motion to endorse Bill S-254 – An Act to Amend the Food and Drug Act (Warning Label on Alcoholic Beverages), calling on the federal government of Canada to implement health warning labels on alcohol.

According to the Canadian Community Health Survey (CCHS) in 2019/20, 20% of adults in Simcoe Muskoka ages 19 years and older reported drinking at a high-risk level (7+ drinks) in the past week. This was significantly higher than the comparable provincial average of 15%. SMDHU's Board of Health is committed to our mandate under the Ontario Public Health Standards to influence the development and implementation of healthy policies and programs related to alcohol and other drugs to reduce harms associated with substance use.

As such, we ask for your support of Bill S-254 and the implementation of federally mandated labels on all alcohol containers sold in Canada, to better inform Canadians about the health risks of alcohol. This is especially important given that the majority of Canadians are unaware that alcohol is classified by the [World Health Organization \(WHO\) as a Class 1 carcinogen](#) and is a cause of 7 different types of cancer, including breast and colon.

Bill S-254 aligns with the recent call in Canada's Guidance on Alcohol and Health for mandatory labelling of all alcoholic beverages with the number of standard drinks in a container, risk levels from Canada's Guidance on Alcohol and Health, and health warnings. This recommendation by the Canadian Centre on Substance Use and Addiction is based on their [2022 systematic review of enhanced alcohol container labels](#), and is supported by other scientific experts in the field, including [Evidence-based Recommendations for Labelling Alcohol Products in Canada](#) developed by [Canadian Alcohol Policy Evaluation \(CAPE\) Project](#) researchers. A recent study in Yukon has contributed to the growing evidence base regarding the [impact of warning labels](#); briefly introduced labels on alcohol products in government-owned liquor stores saw sales of labelled alcohol products decrease by 6.6%, while sales of unlabeled alcohol products increased by 6.9%<sup>1</sup>. The extensive evidence regarding warning labels applied to tobacco products is also informative, having been shown to lead to increased health knowledge and decreased tobacco use (WHO, 2022).

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705-721-7520  
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280 Pretty River Pkwy.  
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☐ **Cookstown:**  
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☐ **Midland:**  
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☐ **Orillia:**  
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Orillia, ON  
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705-325-9565  
FAX: 705-325-2091

In Canada, similar to [tobacco](#) and [cannabis](#) products, it is time for the Government of Canada to require warning labels on alcohol. According to a 2020 report on [Canadian Substance Use Costs and Harms](#), alcohol is a drug that cost Canada \$16.6 billion and was responsible for more than 18,000 deaths in 2017 alone.

The Senate plays a key role in introducing legislation to serve the best interests of Canadians and we urge you to join Senator Brazeau in supporting Bill S-254.

Sincerely,

**ORIGINAL Signed By:**

Ann-Marie Kungl, Board of Health Chair  
Simcoe Muskoka District Health Unit

AMK:CG:LS:sh

cc:

Members of Parliament for Simcoe and Muskoka  
Ontario Boards of Health  
Dr. Kieran Moore, Chief Medical Officer of Ontario  
Senator Patrick Brazeau  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies, alpha  
Dr. Theresa Tam, Chief Public Health Officer of Canada

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<sup>1</sup> Weerasinghe, A., Schoueri-Mychasiw, N., Vallance, K., Stockwell, T., Hammond, D., McGavock, J., Greenfield, T.K., Paradis, C., Hobins, E. Improving Knowledge that Alcohol Can Cause Cancer is Associated with Consumer Support for Alcohol Policies: Findings from a Real-World Alcohol Labelling Study. *Int. J. Environ. Res. Public Health* 2020, 17, 398. Retrieved from: <https://doi.org/10.3390/ijerph17020398>

210 First Street North  
Kenora, ON P9N 2K4



The Right Honourable Justin Trudeau, P.C., MP  
Prime Minister of Canada  
Office of the Prime Minister  
80 Wellington Street  
Ottawa, ON K1A 0A2

Dear Prime Minister Trudeau:

via email: [justin.trudeau@parl.gc.ca](mailto:justin.trudeau@parl.gc.ca)

**Re: Alcohol Health Warning Labels**

On March 3, 2023, at a regular meeting of the Board of Health for the Northwestern Health Unit, the Board received a report titled *Update to Canada's Guidance on Alcohol and Health*.

The report outlined the following:

- Northwestern Health Unit (NWHU) catchment area has the highest rates in the province for ER visits and hospitalizations attributable to alcohol:
  - ER visits due to alcohol: NWHU rate of 7,486.6 per 100,000 in 2021, **13 times as high as the provincial rate** of 543.3 per 100,000<sup>8</sup>
  - Hospitalization due to alcohol: 1,498.9 per 100,000, **7 times as high as the provincial rate** of 210.9 per 100,000<sup>9</sup>
- NWHU Self-report data from 2019/20 also reveals higher heavy drinking rates than the province:<sup>10</sup>
  - Proportion of people reporting heavy drinking in the NWHU is 20.2%, statistically higher than the province (15.6%). This rate has decreased from the 25.5% reported in 2015/16.

Considering the health harms associated with alcohol and the benefits of alcohol health warning labels, the Board of Health passed the following resolution:

BE IT RESOLVED THAT the Northwestern Health Unit (NWHU) Board of Health call on the Government of Canada to amend the Food and Drug Act to make mandatory that all alcohol beverage containers have enhanced alcohol labels affixed:

1. Indicating what constitutes a standard drink;
2. Illustrating the number of standard drinks in the beverage container; and
3. Displaying health messages regarding adverse health outcomes, including the cancer risks associated with the consumption of alcohol.

AND FURTHER THAT the Northwestern Health Unit Board of Health endorse, in principle, [Bill S254](#) – An Act to Amend the Food and Drug Act (Warning Labels on



Alcoholic Beverages) and [Motion M-61](#) A National Warning Label Strategy for Alcoholic Products.

The Northwestern Health Unit fully supports the above recommendation, and thanks you for your consideration.

Sincerely,



Douglas Lawrance

Chair, Board of Health, Northwestern Health Unit

Copy to:

- Hon. Eric Melillo, Member of Parliament, Kenora
- Hon. Marcus Powlowski, Member of Parliament, Thunder Bay - Rainy River
- Hon. Jean-Yves Duclos, Minister of Health
- Dr. Theresa Tam, Chief Public Health Officer of Canada
- Hon. Greg Rickford, Member of Provincial Parliament, Kenora - Rainy River
- Hon. Sol Mamakwa, Member of Provincial Parliament, Kiiwetinoong
- Hon. Kevin Holland, Member of Provincial Parliament, Thunder Bay - Atikokan
- Dr. Kieran Moore, CMOH
- Chair of the *Council of Chief Medical Officers of Health*
- Loretta Ryan, Executive Director, Association of Local Public Health Agencies
- Ontario Boards of Health
- Canadian Public Health Association
- Rainy River District Ontario Health Team
- All Nations Health Partners Ontario Health Team
- Kiiwetinoong Healing Waters Ontario Health Team

**SUPPORT FOR BILL S-254 – AN ACT TO AMEND THE FOOD AND DRUGS ACT (WARNING LABEL ON ALCOHOLIC BEVERAGES)**

**MOTION:**

**WHEREAS alcohol is a well-established risk factor for premature death and injury due to unintentional injuries, violence, cancer, liver disease, heart disease, and high blood pressure; and**

**WHEREAS the Canadian Center on Substance Use and Addiction released new [guidelines](#) and information in January 2023 about alcohol consumption and health; and**

**WHEREAS within the Public Health Sudbury & District's catchment area, only 37% of adults report that they are aware that consumption of alcohol every day may increase their risk of cancer; and**

**WHEREAS Public Health Sudbury & Districts has elevated and increasing rates of heavy drinking (27.9% PHSD in 2019/2020, compared with 15.6% for the province); and**

**WHEREAS the Ontario Public Health Association and multiple Ontario boards of health in Ontario are writing in support of Senator Brazeau's Bill S-254 – An Act to amend the Food and Drugs Act (warning label on alcoholic beverages), which, if passed, would require the industry to include informative labels on alcoholic bottles discussing health risks and standard drink size;**

**THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts similarly convey its support for federally mandated health risk labels on all alcohol containers sold in Canada and urge members of parliament and senators to support Bill S-254.**



**Public Health**  
**Santé publique**  
SUDBURY & DISTRICTS

March 9, 2023

VIA EMAIL

Dr. Kieran Moore  
Chief Medical Officer of Health  
Ministry of Health  
393 University Avenue, 21<sup>st</sup> Floor  
Toronto, ON M5G 2M2

Dear Dr. Moore:

**Re: CMOH Annual Report 2022**

On behalf of the Public Health Sudbury & Districts (Public Health), I am writing to congratulate you on the release of your 2022 annual report: *Being ready: Ensuring public health preparedness for infectious outbreaks and pandemics*. This report highlights many important aspects of public health preparedness including applying learnings from COVID-19 response efforts; ensuring readiness for future infectious disease emergencies; ending the “boom and bust” funding approach; and maintaining gains regarding workforce capacity, expertise, and collaborations.

Public Health echoes your comments on the importance of building and maintaining community and societal preparedness for future emergencies through regular and transparent communication and by strengthening and building relationships with community and its partners—actions that will build trust and hold us accountable. Public Health is committed to upholding these important functions as demonstrated through routine monitoring and reporting of local risk via our [COVID-19 Risk Index & Respiratory Activity Report](#) and our recently released [2022 COVID-19 Response by the Numbers and Recovery Progress Report](#). We are also in agreement with your call for a funding model that ensures the public health sector receives sufficient and sustained funding to operationalize its mandate fully and effectively.

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



Dr. Kieran Moore

March 9, 2023

Page 2

Public Health remains steadfast in ensuring its workforce and local communities are prepared for future public health emergencies. We have undertaken activities with staff and partners to identify lessons learned from local response efforts to inform ongoing emergency preparedness, and we recognize the pivotal roles community partners play in responding to local emergencies. Throughout our COVID-19 response, we have leveraged and strengthened partnerships and continue to build relationships as we implement our [COVID-19 Recovery Plan](#).

Public Health Sudbury & Districts is committed to working with our local and provincial partners to build healthier and more equitable communities that are resilient to future public health threats. Collectively, with our partners, Public Health aims to stay ready, and prepared to promote and protect health and to prevent disease for everyone.

Sincerely,



René Lapierre, Chair

Board of Health

Cc: Honourable Sylvia Jones, Minister of Health  
Jamie West, Member of Provincial Parliament, Sudbury  
France Gélinas, Member of Provincial Parliament, Nickel Belt  
Michael Mantha, Member of Provincial Parliament, Algoma-Manitoulin

alPHa's members are  
the public health units  
in Ontario.

**alPHa Sections:**

Boards of Health  
Section

Council of Ontario  
Medical Officers of  
Health (COMOH)

**Affiliate  
Organizations:**

Association of Ontario  
Public Health Business  
Administrators

Association of  
Public Health  
Epidemiologists  
in Ontario

Association of  
Supervisors of Public  
Health Inspectors of  
Ontario

Health Promotion  
Ontario

Ontario Association of  
Public Health Dentistry

Ontario Association of  
Public Health Nursing  
Leaders

Ontario Dietitians in  
Public Health

March 9, 2023

Hon. Sylvia Jones  
Minister of Health  
College Park 5th Flr, 777 Bay St  
Toronto, ON M7A 2J3

Dear Minister Jones,

**Re: CMOH Annual Report 2022**

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On behalf of the Association of Local Public Health Agencies (alPHa) and its Council of Ontario Medical Officers of Health, Boards of Health Section and Affiliate Organizations, we are writing to congratulate the Chief Medical Officer of Health (CMOH) for the release of his 2022 Annual Report to the Legislative Assembly of Ontario, *Being Ready, Ensuring Public Health Preparedness for Infectious Outbreaks and Pandemics* and to reinforce the calls for investments in public health therein.

We could not agree more with the central theme of learning from the experiences of the past three years to put an end to the “boom and bust” cycle of funding and ensure sustained investment in preparedness. While the CMOH Report frames preparedness squarely in the context of future pandemics and outbreaks, we would observe that “preparedness” includes all aspects of the population-wide, upstream, prevention-focused approach to protecting and promoting health.

As you are aware, Ontario’s locally-based public health agencies are subject to a detailed mandate under the Health Protection and Promotion Act (HPPA) and the Ontario Public Health Standards (OPHS) to support and protect the physical and mental health and well-being, resiliency and social connectedness of the population, through the core public health functions of assessment and surveillance; health promotion and policy development; health protection & disease prevention; and emergency management.

It is indeed illustrative that when the coronavirus began to sweep through Ontario in early 2020, our local public health agencies were able to pivot so quickly and completely to the last of these functions, doing exactly what they were designed and mandated to do in a public health emergency. Through case/contact management; data analysis; implementation and enforcement of public health measures; provision of advice to the public, community partners and decision makers; and leadership of outbreak control and vaccination campaigns; local public health agencies were the true “front line” of the pandemic response. As such, we are uniquely positioned to articulate lessons learned and provide specific advice on where investments in preparedness should be directed.

In this report, the CMOH identifies three interrelated domains for sustained investment, namely, “Sector and System Readiness”, “Community Readiness”, and “Societal Readiness”. Local public health has foundational roles in each, and several priorities directly related to its activities are identified, including:

- Leadership in Infection prevention and control (IPAC) strategies and response.
- Leadership in vaccination promotion and delivery strategies.
- Forging collaborative partnerships with communities that face health inequities.
- Collecting sociodemographic data to address health inequities.
- Building social trust and engage society in conversations.
- Increasing health literacy through communication of credible, trusted, and transparent information, while countering misinformation.

None of these priorities is unique to pandemic preparedness, but rather foundational to many, if not all, of the health promotion and protection endeavours undertaken by Ontario's unique network of locally based public health agencies. Investing in this system is therefore by definition investing in preparedness.

Now that the acute phase of the response is in the past, our members are pivoting back to the routine OPHS-mandated programs and services that promote and protect health in every community every day. This work is often done in collaboration with local partners as well as the broader health sector, and results in a healthier population that in turn is the foundation of a stronger economy and key to the preservation of scarce health care resources.

As the CMOH critically observes, "It is more efficient and more effective to invest in preparedness than to pay the much higher and heavier costs of being unprepared: more illness and death, mental health problems, social disruption, and economic losses". This observation is as true for each of the population health-based activities our members are responsible for as it is for pandemic preparedness alone.

We hope you will take our perspectives on the CMOH Annual Report into careful consideration, and we look forward to collaborating to create a stronger, healthier, and more prepared Ontario.

We look forward to working with you and would like to request an opportunity to meet with you and your staff. To schedule a meeting, please have your staff contact Loretta Ryan, Executive Director, alPHa, at [loretta@alphaweb.org](mailto:loretta@alphaweb.org) or 647-325-9594.

Sincerely,

A handwritten signature in blue ink, appearing to read "Trudy Sachowski". The signature is fluid and cursive, with a large loop at the beginning.

Trudy Sachowski,  
President

**Copy:** Dr. Kieran Moore, Chief Medical Officer of Health, Ontario  
Elizabeth Walker, Executive Lead, Office of Chief Medical Officer of Health, Public Health

The Association of Local Public Health Agencies (ALPHA) is a not-for-profit organization that provides leadership to Ontario's boards of health. ALPHA represents all of Ontario's 34 boards of health, medical officers and associate medical officers of health, and senior public health managers in each of the public health disciplines – nursing, inspections, nutrition, dentistry, health promotion, epidemiology, and business administration. As public health leaders, ALPHA advises and lends expertise to members on the governance, administration, and management of health units. The Association also collaborates with governments and other health organizations, advocating for a strong, effective, and efficient public health system in the province. Through policy analysis, discussion, 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.

**BEING READY: SUPPORT FOR THE 2022 ANNUAL REPORT OF THE CHIEF MEDICAL OFFICER OF HEALTH FOR ONTARIO**

**MOTION:**

**WHEREAS on March 7, 2023, Ontario's Chief Medical Officer of Health released his 2022 Annual Report titled, Being Ready: Ensuring Public Health Preparedness for Infectious Outbreaks and Pandemic; and**

**WHEREAS the 2022 Annual Report identified six next steps, including to (1) invest in preparedness, (2) strengthen accountabilities, (3) assess progress, (4) improve the health of Indigenous peoples, (5) improve the health of Black and other racialized populations, and (6) sustain relationships; and**

**WHEREAS the Board of Health for Public Health Sudbury & Districts is committed to taking local action in support of these next steps and to do so requires sustained provincial investment in public health preparedness over time;**

**THEREFORE, BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts call on the Government of Ontario and the Ministry of Health to fully support and implement the recommendations outlined in the Chief Medical Officer of Health 2022 Annual Report;**

**AND FURTHER THAT the Board request the Chief Medical Officer of Health to ensure proactive engagement with local public health agencies as work is undertaken to review and strengthen the relevant Ontario Public Health Standards, including the Emergency Management Guidelines; and**

**AND FURTHER THAT the Board share this motion with relevant stakeholders, including area mayors and reeves, local community partners, Ontario boards of health, and provincial partners and agencies.**



**To:** Board of Health Chair, Public Health Sudbury & Districts  
**From:** Dr. Penny Sutcliffe, Medical Officer of Health, Chief Executive Officer  
**Date:** April 20, 2023  
**Re:** Strategic Planning – Engagement Plan

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For Information

For Discussion

For a Decision

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## Issue:

Per the Ontario Public Health Standards (2021), Boards of Health shall have a Strategic Plan that sets out the local vision, priorities, and strategic directions for the agency. In September 2022, the Board of Health for Public Health Sudbury & Districts (Public Health) approved through motion 22-04, the extension of the current [2018-2022 Strategic Plan](#) into 2023 (but not beyond December 31, 2023). In February 2023, the Board of Health also approved through motion 10-23 that the Executive Committee of the Board of Health be assigned responsibility for the oversight of the Strategic Plan development process for the planning cycle beginning in 2023.

At a meeting on April 6, 2023, the Board of Health Executive Committee provided input to inform the engagement approach for the next iteration of Public Health's Strategic Plan. The resulting Strategic Plan Engagement Plan is now being recommended for Board of Health approval.

## Recommended Action:

**Whereas the Executive Committee of the Board of Health functions as an advisory committee of the Board to develop, review, and oversee the Strategic Plan development process; and**

**Whereas the Board of Health Executive Committee is recommending a Strategic Plan Engagement Plan to the Board of Health;**

**Therefore, be it resolved that the Board of Health approve the Strategic Plan Engagement Plan and associated timelines, with the process beginning immediately, working towards the completion of the new Strategic Plan by the end of 2023.**

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2018–2022 Strategic Priorities:

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

O: October 19, 2001  
R: January 2018

**Background:**

The [Ontario Public Health Standards](#) (OPHS) mandate Boards of Health to have a Strategic Plan that that establishes strategic priorities over 3 to 5 years, includes input from staff, clients, and community partners, and is reviewed at least every other year.

Since March 2020, Public Health has been leading the response to the COVID-19 pandemic across all sectors in the communities we serve. As a result of this focused response, the current iteration of Public Health’s Strategic Plan (2018-2022) has been extended until Fall 2023 (motion 22-04).

The [Board of Health Governance Toolkit for Ontario Boards of Health](#)\* distinguishes the roles and responsibilities of the Board of Health and MOH/CEO during the strategic planning process (see table below). The Board of Health is responsible for ensuring a strategic planning process is carried out, and that the planning process and resulting Plan are reviewed and approved. The MOH/CEO is responsible for carrying out the strategic planning work, including ensuring appropriate engagement and data collection, and, subsequently, for implementation of the Plan.

This table shows the different roles played by the BOH and MOH/CEO in the strategic planning process:

The Strategic Planning Process	
Board of Health Role & Responsibilities	MOH/CEO Role & Responsibilities
<ul style="list-style-type: none"> <li>Ensures strategic planning process is conducted.</li> </ul>	<ul style="list-style-type: none"> <li>Conducts strategic planning process</li> </ul>
<ul style="list-style-type: none"> <li>Approves strategic planning process</li> </ul>	<ul style="list-style-type: none"> <li>Conducts research, develops policies, writes strategic plan.</li> </ul>
<ul style="list-style-type: none"> <li>Reviews and approves strategic plan.</li> </ul>	<ul style="list-style-type: none"> <li>Implements strategic plan</li> </ul>
<ul style="list-style-type: none"> <li>Monitor plan’s implementation, annually review plan &amp; recommend adjustments.</li> </ul>	<ul style="list-style-type: none"> <li>Executes board of health’s recommended actions following review of plan.</li> </ul>

\*From BOH Governance Toolkit for Ontario Boards of Health (November 28, 2022) Association of Local Public Health Agencies (ALPHA) retrieved from: [https://cdn.ymaws.com/www.alphaweb.org/resource/collection/E75B6EEF-60B9-482F-83D6-69AEDE790192/BOH\\_GOVERNANCE\\_TOOLKIT\\_2022.pdf](https://cdn.ymaws.com/www.alphaweb.org/resource/collection/E75B6EEF-60B9-482F-83D6-69AEDE790192/BOH_GOVERNANCE_TOOLKIT_2022.pdf)

**April 6 Board of Health Executive Committee meeting**

The Board of Health Executive Committee met to discuss planning for the development of the engagement approach for the Strategic Plan. As part of this discussion, the Executive Committee reviewed the history of Public Health Sudbury & Districts’ Strategic Plan, as well as the results of an environmental scan. The Executive Committee also discussed strengths, weaknesses, opportunities, and

- 2018–2022 Strategic Priorities:
1. Equitable Opportunities
  2. Meaningful Relationships
  3. Practice Excellence
  4. Organizational Commitment

O: October 19, 2001  
R: January 2018

threats in our current environment to inform how we should engage for the strategic planning process. From this discussion, there are recommendations for the Strategic Plan engagement plan being brought forward for Board of Health approval.

**2023 Public Health Strategic Plan Engagement Plan**

<b>Audience</b>	<b>Method/Approach</b>	<b>Timeline</b>
<b><i>Engagement Plan Development</i></b>		
Board of Health Executive Committee	Discussion/gathering of input	April 6, 2023
Board of Health	Approval of plan	April 20, 2023
<b><i>Engagement</i></b>		
Public Health Senior Management Executive (SM-EC) Committee	Preliminary consultation at SM-EC meeting	May 2023
Public Health staff	Engagement sessions with all staff	May-June 2023
Board of Health	Engagement at a half-day workshop	June 2023
Community partners, including: <ul style="list-style-type: none"> <li>• Municipalities</li> <li>• Hospitals and health care partners</li> <li>• Education sector (post-secondary institutions and school boards)</li> <li>• Indigenous community partners</li> <li>• Agencies who work with newcomers and racialized groups</li> <li>• Environmental sector stakeholders</li> <li>• Stakeholders who engaged with Public Health during pandemic response</li> </ul>	In-person and virtual engagement sessions with partners across the districts	May-June 2023
Community at large	Survey linked via website and social media channels	July 2023
<b><i>Strategic Plan Development</i></b>		
Senior Management Executive Committee	Check-in meeting to share findings from engagement, gather feedback to inform the development of draft Strategic Plan	September 2023
Board of Health Executive Committee	Meeting to share findings from engagement, gather feedback to	September 2023

2018–2022 Strategic Priorities:

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

O: October 19, 2001  
R: January 2018

Audience	Method/Approach	Timeline
	inform the development of draft Strategic Plan, and make final recommendations regarding the Strategic Plan	
<b><i>Approval</i></b>		
Board of Health	Review and approval of proposed new Strategic Plan	October 2023
<b><i>Launch</i></b>		
All stakeholders	Launch of Strategic Plan	January 2024

**Financial Implications:**

Within the current Strategic Plan budget.

**Strategic Priority:**

All

**Contact:**

Renee St Onge, Director, Knowledge and Strategic Services

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

## **STRATEGIC PLAN ENGAGEMENT PLAN**

### **MOTION:**

**WHEREAS** the Executive Committee of the Board of Health functions as an advisory committee of the Board to develop, review, and oversee the Strategic Plan development process; and

**WHEREAS** the Board of Health Executive Committee is recommending a Strategic Plan Engagement Plan to the Board of Health;

**THEREFORE BE IT RESOLVED THAT** the Board of Health approve the Strategic Plan Engagement Plan and associated timelines, with the process beginning immediately, working towards the completion of the new Strategic Plan by the end of 2023.

## **BOARD OF HEALTH EDUCATION AND TRAINING SESSIONS**

### **MOTION:**

**WHEREAS** per Board of Health Manual procedure F-III-10 and in accordance with the *Municipal Act s.239(3.1)*, the Board of Health may hold education and training sessions that are closed to the public if the Board states by resolution the fact of the holding of the meeting and the general nature of its subject matter;

**THEREFORE BE IT RESOLVED THAT** the Board of Health for Public Health Sudbury & Districts hold education and training sessions on May 17-18, 2023 and June 15, 2023, on the subject matters of Indigenous Engagement and Reconciliation and Strategic Planning, respectively.

**CALL FOR BOARD OF HEALTH NOMINATIONS**  
**2023-2025**  
**aPHa BOARD OF DIRECTORS**



alPHa is accepting nominations for **three** Board of Health representatives to fill positions on its Board of Directors from the following regions and for the following terms:

<ol style="list-style-type: none"> <li>1. <b>North East</b></li> <li>2. <b>Central East</b></li> <li>3. <b>North West</b></li> </ol>	<span style="font-size: 2em;">}</span> <b>2-year term each</b> (June 2023 to June 2025)
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See the attached appendix for boards of health in each of these regions.

Each position will fill a seat on the Boards of Health Section Executive Committee and a seat on the alPHa Board of Directors. If you are an active member of a Board of Health/Regional Health Committee who is interested in running for a seat, please consider standing for nomination.

**Qualifications:**

- Active member of an Ontario Board of Health (or regional public health committee) that is a member organization of alPHa.
- Knowledge and skills in the areas of not-for-profit governance: policy, finance, programs and human resources.
- Previous volunteer leadership experience in a not-for-profit is an asset but not a requirement.
- Strong commitment to public health and the work of the organization.

***An election to determine the representatives will be held at the Boards of Health Section Meeting on Wednesday, June 14, 2023. All nominees must be present.***

***Nominations close on **Wednesday, June 7, 2023, at 4:30 pm. Candidates are encouraged to submit well in advance of the deadline in order to ensure they have a complete application package.*****

Serving on the alPHa Board is an important opportunity for you to:

- Play a part in making alPHa a stronger leadership organization for public health agencies in Ontario.
- Represent your colleagues at the provincial level.
- Participate in discussion reflecting common concerns of public health agency management across the province.
- Expand your contacts and strengthen relationships with Medical Officers of Health, Public Health Unit senior staff and board of health members and lend your expertise to the development of alPHa position papers and official responses to issues affecting all public health agencies.
- Participate on provincial ad hoc or advisory committees.

*Continued*

#### Duties of a Director:

- Make decisions in the best interest of the Association's long and short-term goals, objectives, priorities, and initiatives using a thorough understanding of alPHA's Constitution, Strategic Plan, and policies and procedures, including the Code of Conduct.
- Prepare for, attend and actively participate in Board meetings and the Annual General Meeting.
- Approve Strategic Plan, Annual Budget, and Annual Report.
- Review and approve major contracts and grants.
- Complete tasks as assigned by the President and the Executive Committee.
- Provide written and verbal reports, as appropriate.
- Participate on ad hoc committees and sub-committees, as appropriate.
- Provide input and consultation to the alPHA President and Executive Director, as needed.
- Hire and evaluate the Association's Executive Director.
- Serve as a public figure and spokesperson for the Association, as appropriate.

#### How is the alPHA Board structured?

- There are 22 directors on the alPHA Board.
  - 7 from the Boards of Health Section.
  - 7 from the Council of Ontario Medical Officers of Health (COMOH).
  - 1 from each of the 7 Affiliate Organizations of alPHA.
  - 1 from the Ontario Public Health Association Board of Directors (non-voting Associate)
- There are three (3) committees of the alPHA Board: Executive Committee, Boards of Health Section Executive, and COMOH Executive.

#### What is the Boards of Health Section Executive Committee of alPHA?

- This is a committee of the alPHA Board of Directors comprising seven (7) *Board of Health representatives*.
- It includes a Chair and Vice-Chair who are chosen by the Section Executive members; and
- Members of the Section Executive attend all alPHA Board meetings and participate in teleconferences throughout the year.

#### How long is the term on the Boards of Health Section Executive/alPHA Board of Directors?

- A full term is two (2) years with no limit to the number of consecutive terms.
- Mid-term appointments will be for less than two years.

#### What is the time commitment for a Section Executive member/Director of alPHA?

- alPHA Board meetings are held four (4) times a year; a fifth and final meeting is held at the June *Annual Conference*.
- Boards of Health Section Executive Committee teleconferences are held five (5) times throughout the year.
- The Chair of the Boards of Health Section Executive participates on alPHA Executive Committee teleconferences that are held five (5) to ten (10) times a year. Other ad hoc meetings may be held.

#### Are my expenses as a Director of the alPHA Board covered?

- Any travel expenses incurred by an alPHA Director during Association meetings are *not* covered by the Association but are the responsibility of the Director's sponsoring health unit.



How do I stand for consideration for appointment to the alPHa Board of Directors?

- Submit a completed Form of Nomination and Consent along with a biography of your suitability for candidacy (maximum 200 words) and a copy of the motion from your Board of Health supporting your nomination to alPHa by **Wednesday, June 7, 2023 at 4:30 pm. Candidates are encouraged to submit their documents well in advance of the deadline in order to ensure they have a complete application package. Only complete package can be considered for appointment.**
- **All nominees are required to attend and participate in the alPHa Boards of Health Section Executive Elections on June 14, 2023.**

Who should I contact if I have questions on any of the above?

- Loretta Ryan, Executive Director, alPHa, 416-595-0006 ex. 222, email: [loretta@alphaweb.org](mailto:loretta@alphaweb.org).

**Appendix to Nomination and Consent Form – aPHa Board of Directors 2023-2025**

<p><b>North West Region</b> Boards of health in this region include:</p> <p>Northwestern Thunder Bay</p>	<p><b>North East Region</b> Boards of health in this region include:</p> <p>Algoma North Bay Parry Sound Porcupine Sudbury Timiskaming</p>
<p><b>Central East Region</b> Boards of health in this region include:</p> <p>Durham HKPR Peel Peterborough Simcoe Muskoka York Region</p>	

\_\_\_\_\_, a Member of the Board of Health of  
 (Please print nominee’s name)

\_\_\_\_\_, is HEREBY NOMINATED  
 (Please print health unit name)

as a candidate for election to the alPHa Board of Directors for the following Boards of Health Section Executive seat from (*choose one using the list of Board of Health Vacancies on previous pages*):

- North East (2- year term)
- Central East (2-year term)
- North West Region (2-year term)

**SPONSORED BY:**

1) \_\_\_\_\_  
 (Signature of a Member of the Board of Health)

2) \_\_\_\_\_  
 (Signature of a Member of the Board of Health)

Date: \_\_\_\_\_

I, \_\_\_\_\_, HEREBY CONSENT to my nomination  
 (Signature of nominee)

and agree to serve as a **Director of the alPHa Board** if appointed.

Date: \_\_\_\_\_

**IMPORTANT:**

1. Nominations close on **Wednesday, June 7, 2023 at 4:30 pm**, and must be submitted to alPHa by this deadline.. **Candidates are encouraged to submit well in advance of the deadline in order to ensure they have a complete application package.**
2. A **biography** of the nominee outlining their suitability for candidacy, as well as a **motion passed by the sponsoring Board of Health** (i.e. record of a motion from the Clerk/Secretary of the Board of Health) must also be submitted along with this nomination form on separate pages by the deadline. **There is a 200-word limit for the biography.** **Links may be included in the biography but not attachments.** **Candidates are encouraged to include a photo.**
3. Email the completed form, biography and copy of Board motion, to Loretta Ryan at [loretta@alphaweb.org](mailto:loretta@alphaweb.org).

**NOMINATION TO THE ALPHA BOARD OF DIRECTORS FOR THE NORTH EAST REGION**

**MOTION:**

**WHEREAS** alpha is accepting nominations for a North East representative on the alpha Board of Directors for a two-year term from June 2023 to June 2025; and

**WHEREAS** René Lapierre has represented the North East on the alpha Board of Directors and the Boards of Health Section Executive Committee from 2019 to 2023;

**THEREFORE BE IT RESOLVED THAT** the Board of Health for Public Health Sudbury & Districts supports the nomination of René Lapierre, Board Chair, as a North East candidate for election to the alpha Board of Directors and to the Boards of Health Section Executive Committee for the June 2023 to June 2025 term.



**Annual General Meeting, Conference and Section Meetings  
June 12, 13 & 14, 2023**

**Preliminary Program - Draft as of April 6, 2023**

Dalla Lana School of Public Health, University of Toronto

6<sup>th</sup> Floor Auditorium, 155 College St Room 500, Toronto, ON M5T 3M7

*All times are Eastern Daylight Time (EDT)*

<b>June 12<sup>th</sup></b>	
<p><b>Walking Tour – Kensington Market</b>            Located in the heart of Toronto, Kensington Market is one of Toronto's most vibrant and diverse neighbourhoods. Come and join colleagues on this walking tour as we explore this fascinating part of the city.</p> <p>Tour Leaders: Dr. Charles Gardner, Vice-President, alPHa, Loretta Ryan, Executive Director, alPHa, and Dan Nicholson, Manager, Community Planning, City of Toronto</p>	2:00 pm to 4:00 pm
<p><b>Opening Reception</b>            Reception (5:00 pm to 6:00 pm) and Speaker (6:00 pm to 7:00 pm)</p>	5:00 pm to 7:00 pm
<b>June 13<sup>th</sup></b>	
<p><b>Call to Order, Opening Remarks, and Land Acknowledgement</b>            Conference Chair: Trudy Sachowski, President, alPHa            Welcoming Remarks: Premier Doug Ford (invited)</p>	8:30 am - 8:45 am
<p><b>Rest Refocus Recharge: <i>Apply the cutting-edge science of brain states to perform at the highest level.</i></b>            Speaker: Dr. Greg Wells            Moderator: Dr. Eileen de Villa, Chair, COMOHO Section</p> <p>Dr. Wells will share his insights on how to unlock the power of alternating peak performance with deep rest in this informative and practical keynote. He will explain how our brains and bodies are designed to operate in cycles of work and rest, and how we can harness the power of both to improve our health, well-being, and performance. Drawing on research in neuroscience and physiology, Dr. Wells will provide a step-by-step guide to optimizing your mental and physical health and how to improve your focus, creativity, and problem-solving abilities.</p>	8:45 am - 9:45 am

<p><b>Public Health Workforce Burnout</b>  Speaker: TBD  Moderator: Carmen McGregor, Chair, BOH Section</p>	<p>9:45 am – 10:15 am</p>
<p><b>Morning Break</b></p>	<p>10:15 am - 10:45 am</p>
<p><b>Combined alPHa Business Meeting and Resolutions Session</b>  Conference Chair: Trudy Sachowski, President, alPHa  Resolutions Chair and Parliamentarian: Dr. Robert Kyle, MOH, Durham Region Health Department</p>	<p>10:45 am – 12:30 pm</p>
<p><b>Distinguished Service Awards</b>  Conference Chair: Trudy Sachowski, President, alPHa</p> <p>The Distinguished Service Award (DSA) is given by alPHa to individuals in recognition of their outstanding contributions by board of health members, health unit staff, and public health professionals to public health in Ontario. The Award is given to those individuals who have demonstrated exceptional qualities of leadership in their own milieu, achieved tangible results through long service or distinctive acts, and shown exemplary devotion to public health at local and provincial levels.</p>	<p>12:30 pm to 1:00 pm</p>
<p><b>Lunch Break</b></p>	<p>1:00 pm to 2:00 pm</p>
<p><b>alPHa Strategic Plan Session</b>  Speaker: Maria Sánchez-Keane, Principal, Centre for Organizational Effectiveness</p> <p>Strategic planning is a process in which an organization defines their vision for the future and identifies the organization's goals and objectives. alPHa's current plan has served the association well, but it sunsets at the end of 2023. Join public health colleagues as members participate in a discussion on the 2024 to 2026 Strategic Plan.</p>	<p>2:00 pm to 3:00 pm</p>
<p><b>Break</b></p>	<p>3:00 pm to 3:30 pm</p>
<p><b>Emerging Successfully from the Pandemic – What's Next?!</b>  Speakers: TBD</p>	<p>3:30 pm to 4:45 pm</p>
<p><b>Wrap Up</b>  Conference Chair: Trudy Sachowski, President, alPHa</p>	<p>4:45 pm to 5:00 pm</p>

**June 14<sup>th</sup>**

**Section Meetings:** *Members of the BOH Section and COMOH meet separately in the morning. There are separate agendas for these meetings.*

9:00 am to noon

*Co-hosted by alPHa and Toronto Public Health, with generous support from the University of Toronto's Dalla Lana School of Public Health and the Temerty Faculty of Medicine.*



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

**ADDENDUM**

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



**IN CAMERA**

**MOTION:**

**THAT this Board of Health goes in camera to deal with labour relations or employee negotiations. Time: \_\_\_\_\_**

**RISE AND REPORT**

**MOTION: THAT this Board of Health rises and reports. Time: \_\_\_\_\_**

**ADJOURNMENT**

**MOTION: THAT we do now adjourn. Time: \_\_\_\_\_**