

June 24, 2021

The Honourable Christine Elliott
Minister of Health
Ministry of Health
777 Bay Street
College Park 5th Floor
Toronto, ON M7A 2J3

Dear Minister Elliott:

RE: Public Health Funding for 2022

At the recent meeting of the Board of Health for the North Bay Parry Sound District Health Unit (Health Unit), public health funding for 2022 was discussed. In follow up to direction provided by the Board of Health, this correspondence is being forwarded to bring attention to some urgent issues related to 2022 public health funding. The Board of Health resolution from the June 23 meeting is attached. (Appendix A).

The background behind this discussion began in April 2019 with the introduction of the provincial Public Health Modernization initiative, along with a change to the funding formula to 30% municipal / 70% provincial cost-sharing for almost all public health programming. At that time, it was communicated that there was to be a phased in approach to the funding formula while the Modernization process took place.

With the need for the Public Health Modernization process to be put on hold to address and respond to the COVID-19 pandemic, the Province announced in August 2020 that mitigation funding would be provided for 2020 and 2021 to help relieve over-burdened municipalities. Without continuation of this mitigation funding, the Health Unit's 31 member municipalities will suffer an increase in their 2022 municipal levies of 50.5%.

The Board of Health has been informed by our municipalities, many of whom have a small population base, that levy increases are not manageable, particularly at this significant of an increase.

The cost-sharing formula is only one piece of the public health funding issue for 2022. Health units have had only one base funding increase in the past five years; however, wage and benefit

increases and general increases to operating costs due to inflation continue.

The COVID-19 pandemic has taught us that a robust, prepared public health system is more important than ever. Without a base funding increase, public health's capacity will be diminished, with even harder choices having to be made regarding where we can assist in building healthier and sustainable communities. A base funding increase for 2022 is necessary in order to maintain public health at status quo.

Additionally, there are new pressures on public health as a result of the COVID-19 pandemic that will require funding if public health is to participate fully in the health recovery of the citizens of Ontario.

Some examples of health recovery that will be required post-pandemic include, but are not limited to the following:

1. **Mental wellness:** Families and youth have undergone a considerable level of stress in the past two years. Public health needs to be at the table to assist with bringing together health, education and other partners to reach a consolidated plan forward to improve family resiliency and outlook.
2. **Harm Reduction – Youth and Opioid:** There are many community drug strategies. Public health can provide more capacity to these important and much needed community strategies by assisting partners with leadership, evaluation support, population health data, research, and best practice to ensure that initiatives have the best possible outcomes.
3. **Backlogged Services:** Backlogs within the Health Unit's critical clinics and community programming has occurred due staff redeployment to COVID-19 immunization clinics, call centres, and case and contact management. Staff deployment to the COVID-19 pandemic response has meant:
 - i. Increased wait lists for oral health services, especially preventative care and school-based programs
 - ii. Sexual health clinic clients are presenting with more complex issues due to COVID-19 lockdowns/stay-at-home orders, fear of attending clinic appointments during the pandemic, and extended wait times for appointments
 - iii. School-based vaccine programs have not operated since the fall of 2019, leaving many age cohorts under vaccinated
 - iv. Smoking cessation clinics have longer than usual wait lists because clinics were suspended during lockdowns, and because staff were deployed to address prioritized COVID-19 activities

Of other consideration are the ongoing costs directly related to COVID-19. We know that COVID-19 will be managed by public health moving forward, but how that will look is still being formulated

and negotiated at the provincial level. However, some things we know will continue into 2022 are as follows:

- Case and contact management and outbreak management for COVID-19;
- Infection prevention and control (IPAC) guidance and support in long-term care homes, retirement homes, and other congregate settings;
- Provision of accurate information for the public, businesses, and municipalities as rules, regulations, and guidelines change to address situations until such time that things normalize;
- There will be added costs for doing regular business, such as:
 - Personal protective equipment (PPE)
 - Additional cleaning and disinfecting between clients, impacting the number of clients that can be seen per day, and increase use of cleaning supplies;
- It is a requirement that there be 24-hour per day / 7 days per week medical officer of health coverage; the pandemic has made it abundantly clear that an Associate Medical Officer of Health is necessary to sustain this required coverage, particularly during a long crisis period, such as the COVID-19 pandemic, or for any other major public health emergency; and
- There will likely be outstanding COVID-19-related court/enforcement issues continuing into 2022.

Both 2020 and 2021 have been extremely difficult on staff. The burden of continued wait lists can be an added stressor on staff diligently working to get through these wait lists to address the needs of our vulnerable populations who are often in crisis situations. Recruitment of qualified professionals, whether staff or management, has been affected by the Public Health Modernization, and this continues to be a challenge.

Over the next few years, we believe we will continue to see retention and recruitment challenges along with burnout and stress effects throughout the Health Unit. People cannot work at current pressure levels on a continual basis without ramifications. A **healthy workplace** will require additional personnel in order to get caught up on work that has been paused.

Without additional support from the province, program prioritization will need to take place. In these times, deciding which programs/services not to return to will be difficult as the need for public health assistance is all around us.

As a final point, we would like to emphasize the urgency of establishing funding expectations for 2022. This is not a good time for public health to reduce its participation in recovery plans due to lack of capacity. We need to plan now for 2022, and while we understand and appreciate the burden on the Province and the Ministry of Health in responding to the COVID-19 pandemic, we are respectfully requesting assistance by setting public health funding expectations as soon as possible.

We look forward to discussing with you the ways Public Health Units can work with the Province to bring better health and well-being to all of the citizens of Ontario.

Sincerely yours,



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



Nancy Jacko
Chairperson, Board of Health

/sb

Enclosure (1)

Copy to: Premier Doug Ford

Hon. Helen Angus, Deputy Minister of Health
Chief Medical Officer of Health

Elizabeth Walker, Director, Public Health Accountability and Liaison Branch

Collen Kiel, Director, Public Health Strategy and Planning Branch

Vic Fedeli, MPP, Nipissing

Norm Miller, MPP, Parry Sound-Muskoka

John Vanthof, MPP, Timiskaming-Cochrane

Ontario Boards of Health

Member Municipalities (31)

Association of Municipalities Ontario (AMO)

Hon. Steve Clark, Minister of Municipal Affairs and Housing



NORTH BAY PARRY SOUND DISTRICT HEALTH UNIT BOARD OF HEALTH

RESOLUTION

DATE: June 23, 2021

MOVED BY: Jamie McGarvey

RESOLUTION: #BOH/2021/06/04

SECONDED BY: Gary Guenther

Whereas, the Government of Ontario in its budget of April 11, 2019, initiated a Public Health Modernization process which included a change in municipal cost-sharing from 25% of mandatory public health programs covered by municipalities to 30% of almost all public health programs based on 2018 third quarter spending levels; and

Whereas, on August 21, 2020, the Ministry of Health (Ministry) announced that provincial mitigation funding would be provided to offset the increase to municipal cost-sharing for 2020 and 2021; and

Whereas, the COVID-19 pandemic, which started in early 2020, has further affected municipalities' ability to pay levy increases, it has stalled modernization processes, increased the cost-of-living, and affected the health and well-being of the public, and more specifically, public health clients and staff.

Therefore Be It Resolved, that the Board of Health for the North Bay Parry Sound District Health Unit supports returning to the 2018 cost-sharing formulas at 25%/75%, with 100% provincially funded programs; and

Furthermore Be It Resolved, that the Board of Health supports mitigation funding continue for 2022 to eliminate the additional financial burden of a 42-50% levy increase to the Health Unit's 31 member municipalities if it is not possible to return to the 2018 cost-sharing formula with 100% provincially funded programs; and

Furthermore Be It Resolved, that the Board of Health requests the 2022 public health funding include increases to reflect, cost-of-living increases, public health program changes related to ongoing COVID-19 response, and funding to assist with program and community recovery efforts; and

Furthermore Be It Resolved, that the Board of Health requests a base funding increase to fund an Associate Medical Officer of Health to support the Medical Officer of Health with the continual demands of 24/7 on call coverage that have been highlighted throughout the COVID-19 pandemic; and

Furthermore Be It Resolved, that the Board of Health instructs the Medical Officer of Health and Senior Management to write a letter to the Minister of Health detailing the financial and organizational pressures on public health, including outlining the urgency for establishing the funding levels for 2022 to assist public health and community budget planning.

CARRIED: ☒ **AMENDED:** ☐ **DEFEATED:** ☐ **CHAIRPERSON:** McGarvey



CONFLICT OF INTEREST DECLARED AND SEAT(S) VACATED:

1.	4.
2.	5.
3.	6.

RECORDED VOTE FOR CIRCULATION: Yes / No (Please circle one)

Name:	For:	Against:	Abstain:	Name:	For:	Against:	Abstain:
Dean Backer	✓			Jamie McGarvey	✓		
Dave Butti	✓			Scott Robertson	✓		
Blair Flowers	✓			Dan Roveda	✓		
Gary Guenther	✓			Marianne Stickland	✓		
Nancy Jacko	✓			Tanya Vrebosch	absent		
Stuart Kidd	✓						