

Subject: Public Health 2023 Annual Service Plan and Budget Submission

Report to: Public Health and Social Services Committee

Report date: Tuesday, April 4, 2023

#### Recommendations

1. That the Board of Health (BOH) **APPROVE** the Public Health 2023 Annual Service Plan and Budget Submission (ASP) to the Ministry of Health for a Total Gross budget of \$54,193,894, inclusive of eight, one-time funding requests totaling \$14,892,698.

## **Key Facts**

- The purpose of this report is to seek the BOHs approval for the Public Health 2023
   ASP and Budget Submission to the Ministry of Health.
- BOH/Regional Council is responsible for implementing the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability (June 2021).
   The Standards communicate the Ministry's requirements for local public health and establish an accountability relationship between BOH and the Ministry.
- The 2023 ASP articulates Public Health's plans to meet the Ministry's requirements under the *Standards*, and the ASP must be submitted to the Ministry on or before April 3, 2023. Due to timelines, the Ministry has allowed a BOH unapproved version to be submitted in the interim. If the deadline is not met, the Ministry may not approve Niagara Region's funding request.
- The draft submission incorporates the Council-approved 2023 budget for Public Health within the 2023 Levy Operating budget.
- The Ministry of Health is allowing boards of health to apply for eight additional onetime funding grants. These requests, if approved, would enable enhanced services and action on public health priorities and recovery efforts. This report seeks Council's approval for three additional requests for provincial funding in addition to what was already approved in the Levy Operating Budget.

### **Financial Considerations**

The Ministry of Health provides cost shared funding to BOHs and has instituted the ASP process as a major accountability mechanism towards provisioning of funding for mandatory and related public health programs and services. The budget figures

\_\_\_\_\_

included in the ASP is the formal request by the Board of Health (Regional Council) to the Ministry for provincial funding accounted for within The Regional Municipality of Niagara 2023 Levy Operating budget that was approved on February 23, 2023.

The Public Health budget is largely cost shared between the Ministry (up to 70%) and The Regional Municipality of Niagara (30% or the amount not funded by the province), with the Ontario Seniors Dental Care Program being the only 100% provincially-funded program with base funding. One-time funding requests, including COVID-19 General (i.e. pandemic response) and COVID-19 Vaccine Programs, are also 100% provincially-funded. As per the Ministry funding agreement, the cost shared program-based funding must be fully spent before the Region is eligible for the 100% COVID-19-related funding. Each board of health has the opportunity to submit up to six additional one-time funding requests separate from COVID-19, for a total of eight, one-time funding requests. The six remaining requests must fit into one of the following categories: Capital (minor/urgent), Extraordinary costs (non-COVID-19), Needle Syringe Program, and Public Health Inspector Practicum Program.

Budgets related to COVID-19 General, COVID-19 Vaccine Program and Extraordinary costs (non-COVID-19) ("COVID-19 Recovery"), were approved by Council in the 2023 Levy Operating Budget. A transfer from the Taxpayer Relief Reserve was budgeted to fund all expenses within these areas that did not yet have confirmed external funding (\$13,132,076). The ASP is the formal mechanism for Council to request 100% reimbursement of these expenses, and so these expenses are incorporated into the proposed ASP. If the reimbursement is approved by the Ministry (thus far they have approved almost 100% of requested reimbursements, and have indicated that they will do so again for 2023), the budgeted Taxpayer Relief Funds will be returned to the reserve.

Three additional one-time funding requests are proposed in the ASP that were not included in the 2023 Levy Operating Budget as it is unknown which if any might be granted by the Province. Expenditures will not take place on these items until and unless approved by the Ministry.

The 2023 Public Health request to the Ministry is \$43,388,438, and is based on gross budget expenditures of \$54,193,894 as summarized in Table 1 below:

Table 1: Summary of 2023 ASP and Budget Submission

Description	Gross Budget Expenditure	ASP Funding Requests	Levy Funding
Total 2023 ASP Mandatory (70% Provincial funded)	36,018,187	25,212,731	10,805,456
Total 2023 ASP Seniors Dental (100% Provincial funded)	3,283,009	3,283,009	-
Total 2023 ASP One-time Requests (100% Provincial funded)	14,892,698	14,892,698	-
Overall ASP Total	\$54,193,894	\$43,388,438	\$10,805,456

Table 2: Cost Shared Program-Based Funding (70% Ministry/30% Levy)

Description	Gross Budget Expenditure	ASP Funding Requests	Levy Expense
2023 Base Funding	36,018,187	23,812,000	12,206,187
Request to align funding to 70%/30%		1,400,731	(1,400,731)
Total 2023 ASP Mandatory at 70%	\$36,018,187	\$25,212,731	\$10,805,456

Regional Council has previously approved \$12,206,187 in levy funding for Public Health mandatory programs, which exceeds the Region's 30% cost-share portion of \$10,805,456. The ASP request of \$1,400,731 is to increase the Provincial share of funding to 70% for a total 2023 Mandatory Funding request of \$25,212,731.

**Table 3: Seniors Dental Program Funding (100% Ministry funded)** 

Description	Gross Budget Expenditure
2023 Base Funding Approved by Council	2,515,900
Request for increase	767,109
Total 2023 ASP Seniors Dental	\$3,283,009

The 2023 approved allocation for Seniors Dental Program is \$2,515,900. The Ministry has directed boards of health to include all increases to the Senior's Dental program in the request for funding to the Ministry, and therefore it is recommended that Council submit a request for an increase for 2023 in the amount of \$767,109. This increase relates to an additional 1.15 FTE Dentist and a 0.5 FTE Certified Dental Assistant at two community partner sites and a 1.0 FTE Supervisor for a total cost of \$440,437. Dentures and specialty services of \$215,312 across all community partner sites to reduce wait times and \$111,360 additional expenses related to supplies and other equipment. The additional expenses will be contingent on Ministry approval of funding.

Table 4: One-Time Funding Requests (100% Ministry funded)

Title of Funding Request	Description	One-Time Funding Request Amount	Already Approved within Levy Operating Budget*
COVID-19 General Program	Continue responding to COVID-19 and its variants with case and contact management and outbreak management for specific settings. Sustained levels of outbreaks within our high risk settings require intense support and management in order to stop the spread of infection amongst our most vulnerable populations. To a lesser degree, telephone line support will	6,514,751	Yes

	continue to respond to community inquiries.		
COVID-19 Vaccine Program	Immunization efforts against COVID-19 infection will continue with community based clinics as well as at public health offices across the region. Ongoing delivery of COVID-19 vaccinations and booster doses is an integral part of managing the pandemic.	3,072,470	Yes
Capital: Dental Mobile Clinic and Operatories	Dental specific equipment to outfit replacement of an aging mobile unit. Also, two new operatories to be built to support Ontario Seniors Dental Care Program at partnering community agencies in an effort to reduce long wait times for service.	590,000	No
Needle Syringe Program	Increased demand for needles as a harm reduction strategy and support the alarming increase in substance related deaths locally. The request covers the cost of needles, disposal, 20 wall mounted containers and 10 outdoor sharps kiosks.	283,117	No
Public Health Inspector (PHI) Practicum Program	PHI practica build increased workload capacity during the summer surge and supports the response to The <i>Standards</i> and recent legislated amendments. With the increased workload related to COVID-19 enforcement and infection, prevention, and control compliance inspections, the practica also balances workload	58,600	No

\_\_\_\_\_\_

	and supports recruitment and retention efforts.		
Extraordinary Costs: Childhood Vaccination Catch- up and Supporting School-Aged Children/Youth in Schools**	Over 30,000 children aged seven to seventeen are overdue for immunization and over 7000 students require immunization for Hepatitis B, Human Papilloma Virus, and Meningococcal. Thirtyone FTE and non-labour costs (administration, supplies) are required.  Seventeen school-focused nurses	3,496,985	Yes
	engage in an intentional and collaborative process to determine public health-related needs, strengths, priorities, and capacity within a school or a sub-population of the community. Assessments may be related to COVID-19 or non-COVID-19-related health issues for school-aged children and youth. Funding is requested from July to December		
Extraordinary Costs: Tackling Rising Rates of Substance Misuse and Sexually Transmitted Infections	A substance use strategy coordinator is required to lead the execution of a substance use prevention strategy and work with community partners to make an impact on the significant rise in opioid deaths. In addition, rising sexually transmitted infections require health promotion resources to focus on prevention. Program planning and evaluation resources are required to support both	200,076	Yes

	programs as well as other key strategic projects.		
Extraordinary Costs: Addressing Food Insecurity and Supporting Vulnerable Families	COVID-19 economic impacts has worsened food insecurity, and highlighted family inequities, poverty, and increased stressors. Operational funds will support access to fresh produce at pop-up markets, and seven FTE will temporarily expand existing services to support vulnerable families.	676,699	Yes
Total		\$14,892,698	

<sup>\*</sup> Yes means it is currently funded by Taxpayer Relief Reserve until provincial funding is confirmed.

# **Analysis**

The Ministry of Health's <u>Ontario Public Health Standards: Requirements for Programs,</u> <u>Services, and Accountability (June 2021)</u>

(https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\_standards/docs/protoc ols\_guidelines/Ontario\_Public\_Health\_Standards\_2021.pdf) is created under section 7 of the *Health Protection and Promotion Act* to specify mandatory public health programs and services provided by the BOH. The *Public Health Accountability Framework* articulates the requirements of the BOH to be accountable and transparent for the implementation of the *Standards*. The accountability framework is supported by three areas of documentation:

- Accountability documents set out organizational requirements across four domains and the Ministry-Board of Health accountability agreement that establishes the key operational and funding requirements;
- 2. Planning documents which outline what the BOH will deliver under the *Standards* in the format of the BOH strategic plan and the ASP submission; and
- 3. Reporting documents that demonstrate performance against the *Standards* and the ASP. This includes quarterly reporting and an annual report and attestation.

The ASP describes the programs and services being delivered by the BOH, demonstrates alignment with the priorities in Niagara, and demonstrates accountability for planning and use of funding to meet the *Standards*. The ASP template includes the following:

- Community assessment high level description of the health and risks of communities within the public health unit area to inform program and service delivery decisions;
- Program plans description of the programs and services that will be delivered under each of the nine program standards, including interventions and key partners for the delivery of each program; for 2023, the Ministry has standardized the program names for five program standards although additional program standards can be included;
- Budget submission for each program;
- One-time funding requests; and
- BOH membership, apportionment of costs, and certification of the ASP.

A comprehensive process was used to reassess 2023 priorities and serves as the foundation to the ASP submission. Key surveillance data, program indicators, and Public Survey results were assessed. Literature on recovery planning was reviewed and feedback from staff was obtained to inform recovery efforts. The Interim Strategic Plan for Public Health & Emergency Services (2022-2023) covering four key areas of work sets the priorities across the Department:

- Stabilize, restore, or transform Public Health programs and services;
- Respond to the shifting needs of the pandemic;
- Foster a positive workplace culture and support staff engagement; and
- Continue to focus on key strategic projects, including Health Promotion Project and Health Equity Strategic Plan.

The ASP has not been included as an appendix with this report as it is a very lengthy document with large Excel spreadsheets that are not accessibility-compliant. Regional councillors may review the document in full by contacting the Office of the Medical Officer of Health to make an appointment.

\_\_\_\_\_\_

#### **Alternatives Reviewed**

Submitting the ASP is a requirement to receive Ministry of Health funding as outlined in the *Standards*. The alternative to not submitting the ASP would be loss of provincial funding which would impose an untenable burden onto the Regional levy.

The Regional Municipality of Niagara is not required to submit additional one-time funding request. A total of eight, one-time funding requests totalling \$14,892,698, have been included in consultation with our corporate partners that would be most beneficial to Niagara residents and improve their health. These requests are not mandatory, nor guaranteed, however Niagara Region aims to maximize revenue in order to bring greater benefit to Niagara residents and to stabilize levy costs.

## **Relationship to Council Strategic Priorities**

The ASP is based on Niagara Region Public Health's operational planning that aligns with Council's 2019-2022 strategic priority #2 Healthy and Vibrant Community, which aims to foster a high quality of life through safe, inclusive neighbourhoods and delivery of quality, affordable, and accessible human services.

# **Other Pertinent Reports**

- PHD 6-2022 Public Health 2022 Annual Service Plan and Budget Submission
- PHD 6-2021 Public Health 2021 Annual Service Plan and Budget Submission
- BRC-C 7-2021 Levy Workshop Discussion Items from December 9, 2021
- BRC-C 4-2021 Levy Workshop Discussion Items from January 7, 2021
- PHD 02-2020 Public Health 2020 Annual Service Plan and Budget Submission, Feb. 11, 2020
- PHD 05-2019 Public Health Annual Service Plan and Budget Submission, Feb. 19, 2019
- MOH 02-2018 Public Health Annual Service Plan & Budget Submission, Feb. 20, 2018
- MOH 01-2018 Strategic Plan, Jan. 30, 2018
- MOH 03-2017 Program Budgeting and Marginal Analysis in Public Health, Oct. 17, 2017
- PHD 01-2017 Key Health Issues in Niagara, Jan. 31, 2017
- PHD 06-2016 MOH 2016 Program Based Grants Budget Submission, Feb. 16, 2016
- PHD 04-2015 Levy Operating Budget, Jan. 29, 2015

## Prepared by:

Diane Vanecko, RN, BScN, MBA Director, Organizational and Foundational Standards Public Health and Emergency Services

## Recommended by:

M. Mustafa Hirji, MD, MPH, FRCPH Medical Officer of Health & Commissioner (Acting) Public Health and Emergency Services

\_\_\_\_\_

### Submitted by:

Ron Tripp, P.Eng. Chief Administrative Officer

This report was prepared in consultation with Donovan D'Amboise, Associate Director, Reporting and Analysis, and Amanda Fyfe, Manager, Program Financial Support.

# **Appendices**

N/A