

The Corporation of the County of Northumberland  
Community Health Committee  
Agenda

Monday, October 30, 2023, 1:00 p.m.

Council Chambers

555 Courthouse Road, Cobourg, ON K9A 5J6

Hybrid Meeting (In-Person and Virtual)

Join Zoom Meeting

<https://us06web.zoom.us/j/89298722720?pwd=UXEzcitTR0xUWEwxUVdMZUoxVUJpdz09>

Meeting ID: 892 9872 2720

Passcode: 294094

Phone: 855 703 8985 Canada Toll-free

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Pages

1. Notices

1.a Accessible Format

If you require this information in an alternate format, please contact the Accessibility Coordinator at [accessibility@northumberland.ca](mailto:accessibility@northumberland.ca) or 1-800-354-7050 ext. 2327.

1.b Meeting Format

This Committee meeting will be held using a hybrid meeting model. The public is invited to attend in-person in Council Chambers. Alternatively, the public may view the Committee meeting via live stream, join online, or join by phone using Zoom Conference technology. If you have any questions, please email [matherm@northumberland.ca](mailto:matherm@northumberland.ca).

- Attend in-person in Council Chambers, located at 555 Courthouse Road, Cobourg
- Watch a livestream by visiting [Northumberland.ca/Council](http://Northumberland.ca/Council)
- Join online using Zoom
- Join by phone using Zoom

2. Call to Order

## 2.a Territorial Land Acknowledgement

### 3. Approval of the Agenda

Recommended Motion:

"**That** the agenda for the October 30, 2023 Community Health Committee be approved."

### 4. Disclosures of Interest

### 5. Delegations

### 6. Business Arising from Last Meeting

### 7. Communications

#### 7.a Correspondence, 'Chronic Pain Treatments'

5 - 13

- City of Quinte West
- National Chronic Pain Society
- Township of Carlow / Mayo

Recommended Motion:

"**That** the Community Health Committee receive the correspondence from the City of Quinte West, National Chronic Pain Society and Township of Carlow/Mayo regarding 'Chronic Pain Treatment' for information, noting that County Council previously considered correspondence regarding this subject matter at the August 16, 2023 Council meeting and subsequently received it for information; and

**Further That** the Committee recommend that County Council receive this correspondence for information."

### 8. Staff Reports

#### 8.a Northumberland Paramedics - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update

14 - 16

Susan Brown, Chief of Northumberland Paramedics  
Kimberley O'Leary, Financial Planning Manager

Recommended Motion:

**"That** the Community Health Committee receive the 'Northumberland Paramedics - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update' for information; and

**Further That** the Committee recommend that County Council receive the 'Northumberland Paramedics - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update' for information."

**8.b Golden Plough Lodge - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update** 17 - 18

Glenn Dees, Director of Special Projects

Recommended Motion:

**"That** the Community Health Committee receive the 'Golden Plough Lodge - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update' for information; and

**Further That** the Committee recommend that County Council receive the 'Golden Plough Lodge - 2024 to 2026 Draft Capital and Operating Budget and Issue Papers Update' for information."

**8.c Report 2023-120 Northumberland Paramedics 'Purchase of a 2023 SUV with full Conversion to an Emergency Response Vehicle (ERV)'** 19 - 25

Susan Brown, Chief of Northumberland Paramedics

Recommended Motion:

**"That** the Community Health Committee receive Report 2023-120 'Purchase of a 2023 SUV with full Conversion to an Emergency Response Vehicle (ERV)' for information, noting that County Council previously considered and approved Report 2023-113 'Pre-Budget Approval to Purchase one (1) SUV with Emergency Response Vehicle Conversion' for the 2024 budget at the September 20, 2023 County Council meeting, and given the immediate need for a replacement, an Emergency Response Vehicle (ERV) was purchased in 2023 ahead of schedule; and

**Further That** the Community Health Committee recommend that County Council receive this report for information."

**8.d Report 2023-121 Northumberland Paramedics 'Response Time Performance Plan'** 26 - 29

Susan Brown, Chief of Northumberland Paramedics

Recommended Motion:

"**That** the Community Health Committee, having considered Report 2023-121 'Response Time Performance Plan', recommend that County Council approve the Response Time Performance Plan."

**9. Other Matters Considered by Committee**

**9.a Golden Plough Lodge, COVID-19 Outbreak - Verbal Update**

Glenn Dees, Director of Special Projects

Recommended Motion:

"**That** the Community Health Committee receive the verbal update regarding 'Golden Plough Lodge, COVID-19 Outbreak' for information.

**9.b Pilot of Treatment Options - Verbal Update**

Councillor Olena Hankivsky

Recommended Motion:

"**That** the Community Health Committee receive the verbal update regarding 'Pilot of Treatment Options' for information."

**9.c Haliburton, Kawartha, Pine Ridge (HKPR) District Health Unit - Board of Directors' Minutes and Summary Reports**

30 - 50

Recommended Motion:

"**That** the Community Health Committee receive the minutes from the June 15, 2023 and September 21, 2023 HKPR District Health Unit Board of Health Meeting, and September 21, 2023 and October 19, 2023 Summary Reports, for information; and

**Further That** the Committee recommend that County Council receive the Minutes and Summary Reports for information."

**10. Media Questions**

**11. Closed Session**

N/A

**12. Motion to Rise and Results from Closed Session**

N/A

**13. Next Meeting - Monday, November 27, 2023 at 1:00 p.m.**

**14. Adjournment**

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Trenton, Ontario K8V 5R6  
www.quintewest.ca



A Natural Attraction

Tel: 613-392-2841  
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josh.machesney@quintewest.ca

Josh Machesney, City Clerk

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September 25, 2023

The Honourable Doug Ford  
Premier of Ontario  
Premier's Office, Room 281  
Legislative Building  
Queen's Park, Toronto, ON M7A 1A1

**RE: Support for Municipality of Wawa Resolution re: Chronic Pain Treatments**

Dear Premier Ford:

This letter will serve to advise that at a meeting of City of Quinte West Council held on September 20, 2023 Council supported the attached resolution from the Municipality of Wawa regarding maintaining OHIP coverage for chronic pain treatments by passing the following resolution:

“And further that Staff be directed to prepare a letter of support for Item 12.1 (e) Resolution from the Municipality of Shuniah in relation to Support for the Municipality of Wawa regarding Chronic Pain Treatments.” **Carried**

We trust that you will give favourable consideration to this request.

Yours Truly,

CITY OF QUINTE WEST

Josh Machesney,  
City Clerk

CC: Municipalities of Ontario  
Ryan Williams, MP, Bay of Quinte  
Hon. Todd Smith, MPP, Bay of Quinte  
Hon. Sylvia Jones, Minister of Health  
Hon. Michael A. Tibollo, Associate Minister of Mental Health and Addictions  
Association of Municipalities Ontario (AMO)





The Corporation of the Municipality of Wawa

REGULAR COUNCIL MEETING

RESOLUTION

Tuesday, June 20, 2023

Moved by: 	Seconded by: 
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**WHEREAS** the Ontario College of Physicians and Surgeons has made a decision that will lead more people who suffer from chronic pain to turn to opioids to alleviate their pain and;

**WHEREAS** the College is targeting community pain clinics by requiring the use of ultrasound technology in the administration of nerve block injections by licensed physicians. This requirement will increase the time it takes to administer the nerve block and, therefore, reduce the number of patients a physician can see in a day and;

**WHEREAS** the Ontario Health Insurance Plan (OHIP) is proposing to reduce coverage for several vital healthcare services, including a drastic reduction in the number and frequency of nerve block injections a patient can receive and;

**WHEREAS** these changes have been proposed without any consultation with pain management medical professionals or with their patients and;

**WHEREAS** this cut will force chronic pain clinics to shut down, putting a greater strain on family physicians and emergency rooms and;

**WHEREAS** with the reduction in the number of nerve blocks being administered, many patients, looking for pain relief, will turn to overcrowded emergency rooms, opioid prescriptions from doctors or opioid street drugs;

**NOW THEREFORE BE IT RESOVLED THAT** the Council of the Corporation of the Municipality of Wawa is requesting that the Government of Ontario maintain OHIP coverage for chronic pain treatments and continue to provide much-needed care for the people of Ontario;

*p.2....*



The Corporation of the Municipality of Wawa

REGULAR COUNCIL MEETING

RESOLUTION

AND FURTHERMORE THAT a copy of the resolution be forwarded to all Municipalities of Ontario, local MPs and MPPs, Premier Doug Ford, the Minister of Health, Associate Minister of Mental Health and Addictions and the Association of Municipalities of Ontario.

RESOLUTION RESULT	RECORDED VOTE	
	MAYOR AND COUNCIL	YES NO
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

Disclosure of Pecuniary Interest and the general nature thereof.

Disclosed the pecuniary interest and general name thereof and abstained from the discussion, vote and influence.

Clerk: \_\_\_\_\_

MAYOR - MELANIE PILON	CLERK - MAURY O'NEILL
[REDACTED]	

This document is available in alternate formats.

**From:** [REDACTED]

**Sent:** Wednesday, September 13, 2023 11:27 AM

**To:** Moore, Jennifer <moorej@northumberland.ca>

**Cc:** [REDACTED] [REDACTED]  
[REDACTED]

**Subject:** RE: Opioid Crisis in our Communities and Municipalities - Northumberland County

You don't often get email from [REDACTED]. [Learn why this is important](#)

**CAUTION:** External E-Mail

Your Worship and Municipality CAO

Good morning / afternoon,

We are following up on the previous emails we sent in the spring to see if your municipality is planning to bring a motion forward to council requesting the government of Ontario not to cut Chronic Pain treatment services.

**If your Council has already dealt with this request we thank you.**

This is an important item and if non-addictive Government funded treatment options are cut, the negative ramifications to the individuals health and well being, the strain on our healthcare system, and negative effects to our economy are well documented.

The Government of Ontario is specifically reviewing funding for Chronic Pain treatments this fall and your support by voicing your municipality's concerns would be greatly appreciated. We have also attached the original letter from Leeann Corbeil, Executive Director of the National Chronic Pain Society as a reminder to the issue faced.

If you require any additional information please do not hesitate to contact us.

Thank you,

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Amira Chen on behalf of Hon. Jim Karygiannis

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

gta strategies **GTA Strategies**



**From:** Hon. Jim Karygiannis sent by Amira Chen [REDACTED]  
**Sent:** May 30, 2023 4:44 PM  
**To:** [moorej@northumberlandcounty.ca](mailto:moorej@northumberlandcounty.ca)  
**Cc:** [REDACTED]  
**Subject:** Opioid Crisis in our Communities and Municipalities - Northumberland County

Mayor Mandy Martin  
Northumberland County

Your Worship,

We are facing an opioid crisis in many of our communities and municipalities which requires our immediate action.

I am writing to you on behalf of the National Chronic Pain Society, an organization which is seeking to prevent OHIP and the College of Physicians and Surgeons of Ontario from making dangerous changes to the coverage of pain management services – changes that will worsen the opioid crisis plaguing our communities.

Chronic pain affects 1 in 5 Ontarians and makes up nearly 40% of repeat visits to emergency rooms. It is also a frequent cause of social isolation and addiction issues, with many sufferers reporting depression and suicidal thoughts. Thousands of Ontarians rely on the services of pain management clinics to function in their daily lives, and these reductions would put their health and safety at risk, as more and more of them will turn to opioids to cope with the pain. This flies in the face of everything the Provincial government is doing to combat the ongoing opioid crisis in our communities.

**Attached is a letter from Leann Corbeil, Executive Director of NCPS, explaining the situation, and requesting your council's assistance in convincing the Ontario government to stop these changes from putting thousands of people at risk.**

Please advise if there is any further information we can provide – together, we can help Ontarians receive the care they need.

Sincerely,

Hon. Jim Karygiannis  
GTA Strategies





May 2023

Your Worship,

Whether you live in a large, cosmopolitan city or a small hamlet, you have been faced with the opioid crisis facing Canadians.

The National Chronic Pain Society is asking for your assistance to help patients suffering from chronic pain from becoming addicted to opioids.

Recently, the Ontario College of Physicians and Surgeons has made a decision that will lead more people who suffer from chronic pain to turn to opioids to alleviate their pain. The College is targeting community pain clinics by requiring the use of ultrasound technology in the administration of nerve block injections by licensed physicians. They are not mandating this requirement for physicians in any other capacity, such as epidurals in hospitals. This requirement will increase the time it takes to administer the nerve block and, therefore, reduce the number of patients a physician can see in a day.

Also, the Ontario Health Insurance Plan (OHIP) is proposing to reduce coverage for several vital healthcare services, including a drastic reduction in the number and frequency of nerve block injections a patient can receive. These changes have been proposed without any consultation with pain management medical professionals or with their patients. This cut will force chronic pain clinics to shut down, putting a greater strain on family physicians and emergency rooms.

With the reduction in the number of nerve blocks being administered, many patients, looking for pain relief, will turn to overcrowded emergency rooms, opioid prescriptions from doctors or opioid street drugs.

We are asking that your Council pass a motion requesting that the Government of Ontario maintain OHIP coverage for chronic pain treatments and continue to provide much-needed care for the people of Ontario.

Further if you can please communicate that motion to the Premier, Minister of Health, Associate Minister of Mental Health and Addictions and your local MPP(s),

Thank you for your kind consideration of this matter. If you have any question, please do not hesitate to contact me at [REDACTED], or by email at [REDACTED].

You may also contact me through Elias Diamantopoulos of GTA Strategies at [REDACTED] or at [REDACTED]

Sincerely,

A handwritten signature in black ink, appearing to read "Leeann Corbeil".

Leeann Corbeil, Executive Director  
National Chronic Pain Society

**From:**  
**To:**

[Jenny Snider](#)  
All Ontario Municipalities

RE: Supporting Resolution  
Wednesday, September 13, 2023 2:43:01 PM  
[Northern Institute of Chronic Pain - Wawa.pdf](#)

**Subject:**  
**Date:**  
**Attachments:**

You don't often get email from clerk@carlowmayo.ca. [Learn why this is important](#)

**CAUTION:** External E-Mail

Good afternoon,

The Township of Carlow/Mayo passed the following resolution during their August 8, 2023 regular Council meeting supporting the attached resolution from Wawa for chronic pain.

Moved By: Elson Ruddy

Seconded By: Pam Stewart

That the Council of the Township of Carlow/Mayo agrees to support the Municipality of Wawa's resolution requesting that the Government of Ontario maintain OHIP coverage for chronic pain treatments and continue to provide much-needed care for the people of Ontario.

-Carried-

Thank you,  
Jenny Snider  
CAO/Clerk  
Township of Carlow/Mayo  
Office 613-332-1760  
Cell 613-334-1374





The Corporation of the Municipality of Wawa

REGULAR COUNCIL MEETING

RESOLUTION

Tuesday, June 20, 2023

Moved by: 	Seconded by: 
--	--

**WHEREAS** the Ontario College of Physicians and Surgeons has made a decision that will lead more people who suffer from chronic pain to turn to opioids to alleviate their pain and;

**WHEREAS** the College is targeting community pain clinics by requiring the use of ultrasound technology in the administration of nerve block injections by licensed physicians. This requirement will increase the time it takes to administer the nerve block and, therefore, reduce the number of patients a physician can see in a day and;

**WHEREAS** the Ontario Health Insurance Plan (OHIP) is proposing to reduce coverage for several vital healthcare services, including a drastic reduction in the number and frequency of nerve block injections a patient can receive and;

**WHEREAS** these changes have been proposed without any consultation with pain management medical professionals or with their patients and;

**WHEREAS** this cut will force chronic pain clinics to shut down, putting a greater strain on family physicians and emergency rooms and;

**WHEREAS** with the reduction in the number of nerve blocks being administered, many patients, looking for pain relief, will turn to overcrowded emergency rooms, opioid prescriptions from doctors or opioid street drugs;

**NOW THEREFORE BE IT RESOVLED THAT** the Council of the Corporation of the Municipality of Wawa is requesting that the Government of Ontario maintain OHIP coverage for chronic pain treatments and continue to provide much-needed care for the people of Ontario;

*p.2....*



The Corporation of the Municipality of Wawa

REGULAR COUNCIL MEETING

RESOLUTION

AND FURTHERMORE THAT a copy of the resolution be forwarded to all Municipalities of Ontario, local MPs and MPPs, Premier Doug Ford, the Minister of Health, Associate Minister of Mental Health and Addictions and the Association of Municipalities of Ontario.

RESOLUTION RESULT	RECORDED VOTE	
	MAYOR AND COUNCIL	YES NO
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

Disclosure of Pecuniary Interest and the general nature thereof.

Disclosed the pecuniary interest and general name thereof and abstained from the discussion, vote and influence.

Clerk: \_\_\_\_\_

MAYOR - MELANIE PILON	CLERK - MAURY O'NEILL
[REDACTED]	

This document is available in alternate formats.

Northumberland Paramedics														
Description	2021 Budget	2021 Actual	2022 Budget	2022 Actual	2023 Budget	2024 Proposed	\$ Increase (Decrease) Over 2023 Budget	% Increase (Decrease) Over 2023 Budget	2025 Proposed	\$ Increase (Decrease) Over 2024 Budget	% Increase (Decrease) Over 2024 Budget	2026 Proposed	\$ Increase (Decrease) Over 2025 Budget	% Increase (Decrease) Over 2025 Budget
<b>Revenue</b>														
Taxation	7,442,043.90	7,442,043.96	8,120,170.60	8,125,570.56	8,869,512.79	9,328,868.13	459,355.35	5.2%	9,727,026.51	398,158.38	4.3%	10,528,329.60	801,303.08	8.2%
Other Taxation Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Internal Chargebacks	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Subsidies	6,976,960.86	7,877,366.98	10,375,643.00	10,016,015.00	10,413,993.80	11,317,757.76	903,763.95	8.7%	11,826,278.10	508,520.34	4.5%	10,032,890.93	(1,793,387.16)	-15.2%
Permits & Fees	-	-	-	39,179.75	-	260,000.00	260,000.00	-	-	-	-	155,000.00	155,000.00	-
Licenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Interest Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Resident Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Social Housing Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-
County Revenue	-	-	-	-	25,200.00	25,200.00	-	-	25,200.00	-	0.0%	25,200.00	-	0.0%
Other Revenue	100,000.00	406,785.40	100,000.00	130,069.62	100,000.00	100,000.00	-	-	100,000.00	-	0.0%	100,000.00	-	0.0%
Proceeds From Disposition	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Revenue</b>	<b>14,519,004.76</b>	<b>15,726,196.34</b>	<b>18,595,813.60</b>	<b>18,310,834.93</b>	<b>19,408,706.59</b>	<b>21,031,825.89</b>	<b>1,623,119.30</b>	<b>8.4%</b>	<b>21,678,504.61</b>	<b>906,678.72</b>	<b>3.1%</b>	<b>20,841,420.53</b>	<b>(837,084.08)</b>	<b>-3.9%</b>
<b>Expenditures</b>														
Salaries and Wages	8,666,591.00	9,319,580.72	10,581,829.00	10,107,643.13	11,594,042.00	12,339,050.79	745,008.79	6.4%	13,070,942.48	731,891.69	5.9%	12,329,371.48	(741,571.00)	-5.7%
Benefits	2,521,908.00	2,353,219.66	3,174,840.00	2,619,401.85	3,551,224.00	3,655,590.19	104,366.19	2.9%	3,790,337.00	134,746.81	3.7%	3,488,747.00	(301,590.00)	-8.0%
Travel and Training	142,825.00	12,827.21	142,825.00	103,822.35	144,969.00	131,042.00	(13,927.00)	-9.6%	135,283.00	4,241.00	3.2%	120,942.00	(14,341.00)	-10.6%
Materials and Supplies	93,523.00	189,772.83	93,523.00	127,001.51	95,225.00	120,590.77	25,365.77	26.6%	122,130.00	1,539.23	1.3%	116,423.00	(5,707.00)	-4.7%
Health Care Supplies	307,180.00	344,280.68	807,180.00	477,977.66	551,578.00	340,316.00	(211,262.00)	-38.3%	326,165.00	(14,151.00)	-4.2%	338,739.00	12,574.00	3.9%
Raw Food	-	-	-	-	-	-	-	-	-	-	-	-	-	-
LTC Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transportation Supplies	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Insurance	36,421.00	41,963.51	41,884.00	43,361.42	43,141.00	44,867.00	1,726.00	4.0%	46,662.00	1,795.00	4.0%	48,528.00	1,866.00	4.0%
Licenses	7,065.00	771.00	7,065.00	6,707.58	7,171.00	7,458.00	287.00	4.0%	7,757.00	299.00	4.0%	8,067.00	310.00	4.0%
Information Technology	53,945.00	153,444.85	53,945.00	167,065.09	56,505.00	60,499.00	3,994.00	7.1%	62,927.00	2,428.00	4.0%	61,497.00	(1,430.00)	-2.3%
External Services	47,224.00	64,919.53	47,224.00	92,932.06	73,133.00	214,650.00	141,517.00	193.5%	246,644.00	31,994.00	14.9%	176,318.00	(70,326.00)	-28.5%
Utilities & Fuel	220,000.00	277,251.48	230,000.00	374,369.96	324,000.00	426,711.00	102,711.00	31.7%	424,437.00	(2,274.00)	-0.5%	423,708.00	(729.00)	-0.2%
Rent and Property Tax	23,130.00	18,439.69	23,130.00	22,323.58	23,477.00	32,043.00	8,566.00	36.5%	32,797.00	754.00	2.4%	23,681.00	(9,116.00)	-27.8%
Repairs and Maintenance	155,052.00	205,168.22	149,652.00	225,640.22	154,899.00	182,887.00	27,988.00	18.1%	190,651.00	7,764.00	4.2%	199,879.00	9,228.00	4.8%
TCA's under Threshold	130,220.00	117,502.26	120,220.00	189,620.13	122,024.00	207,305.00	85,281.00	69.9%	158,199.00	(49,106.00)	-23.7%	225,114.84	66,915.84	42.3%
Waste Expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Internal Chargebacks	1,358,920.76	1,136,892.83	1,505,496.60	1,494,743.58	1,627,318.59	1,658,816.14	31,497.55	1.9%	1,693,573.13	34,756.99	2.1%	1,775,405.21	81,832.08	4.8%
External Transfers	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Financial Services	140,943.76	141,055.74	141,055.74	180,235.49	141,055.64	-	(141,055.64)	-	-	-	-	-	-	-
SS Program Expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Expenditures</b>	<b>13,904,948.52</b>	<b>14,377,090.21</b>	<b>17,119,869.34</b>	<b>16,232,845.61</b>	<b>18,509,762.23</b>	<b>19,421,825.89</b>	<b>912,063.66</b>	<b>4.9%</b>	<b>20,308,504.61</b>	<b>886,678.72</b>	<b>4.6%</b>	<b>19,336,420.53</b>	<b>(972,084.08)</b>	<b>-4.8%</b>
<b>Investments</b>														
Investments	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TCA's over Threshold	505,000.00	581,360.17	1,357,000.00	1,107,995.40	750,000.00	1,240,000.00	490,000.00	65.3%	1,752,000.00	512,000.00	41.3%	1,230,000.00	(522,000.00)	-29.8%
Transfers to Reserves	795,000.00	825,000.00	917,000.00	917,000.00	1,040,000.00	1,290,000.00	250,000.00	24.0%	1,290,000.00	-	0.0%	1,300,000.00	10,000.00	0.8%
<b>Total Investments</b>	<b>1,300,000.00</b>	<b>1,406,360.17</b>	<b>2,274,000.00</b>	<b>2,024,995.40</b>	<b>1,790,000.00</b>	<b>2,530,000.00</b>	<b>740,000.00</b>	<b>41.3%</b>	<b>3,042,000.00</b>	<b>512,000.00</b>	<b>20.2%</b>	<b>2,530,000.00</b>	<b>(512,000.00)</b>	<b>-16.8%</b>
<b>Financing</b>														
Short Term Debt	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long Term Debt	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transfer From Reserves	(685,943.76)	(685,943.76)	(798,055.74)	(798,055.74)	(891,055.64)	(920,000.00)	(28,944.36)	-	(1,672,000.00)	(752,000.00)	-	(1,025,000.00)	647,000.00	-
<b>Total Financing</b>	<b>(685,943.76)</b>	<b>(685,943.76)</b>	<b>(798,055.74)</b>	<b>(798,055.74)</b>	<b>(891,055.64)</b>	<b>(920,000.00)</b>	<b>(28,944.36)</b>	<b>-</b>	<b>(1,672,000.00)</b>	<b>(752,000.00)</b>	<b>-</b>	<b>(1,025,000.00)</b>	<b>647,000.00</b>	<b>-</b>
<b>Surplus / (Deficit)</b>	<b>-</b>	<b>628,689.72</b>	<b>0.00</b>	<b>851,049.66</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

# Paramedic Dept Issue Papers - Summary

	Issue Paper	Amount			Funding
		2024	2025	2026	
#1	Additional 12 Hour Crew – Q3 2024	\$270,000	\$540,000	\$540,000	Levy 50% Province 50%
#2	Additional Ambulance to Fleet	\$260,000 Vehicle			Development Charges
		\$114,951 one-time equipment cost			50/50 Funding
		\$33,500 Fuel and maintenance	\$33,500	\$33,500	50/50 Funding
#3	Peer Support Team	\$10,000	\$25,000	\$25,000	50/50 Funding

# Paramedic Dept Issue Papers - Summary

	Issue Paper	Amount			Funding
		2024	2025	2026	
#4	Students (2) Operations and Admin	\$28,000	\$28,000	\$28,000	50/50 Funding
#5	Upstaffing Requirements	\$25,218	\$25,218	\$25,218	50/50 Funding
#6	ERV Addition	N/A	N/A	\$130,000 Vehicle  \$50,000 One-time equipment cost  \$25,000 Fuel and maintenance	Development Charges  50/50 Funding  50/50 Funding
#7	ERV Medic addition	N/A	N/A	\$270,000	50/50 Funding



Golden Plough Lodge

Description	2021 Budget	2021 Actual	2022 Budget	2022 Actual	2023 Budget	2024 Proposed	\$ Increase (Decrease) Over 2023 Budget	% Increase (Decrease) Over 2023 Budget	2025 Proposed	\$ Increase (Decrease) Over 2024 Budget	% Increase (Decrease) Over 2024 Budget	2026 Proposed	\$ Increase (Decrease) Over 2025 Budget	% Increase (Decrease) Over 2025 Budget
<b>Revenue</b>														
Taxation	5,326,712.86	5,326,712.88	5,611,682.81	5,611,682.76	6,010,676.60	6,695,886.15	685,209.55	11.4%	9,586,790.16	2,890,904.01	43.2%	12,624,304.16	3,037,514.00	31.7%
Other Taxation Revenue							-							
Internal Chargebacks							-							
Grants							-							
Subsidies	7,639,887.80	11,758,844.33	7,765,556.80	9,025,674.50	11,868,887.43	13,312,827.34	1,443,939.91	12.2%	17,139,151.75	3,826,324.41	28.7%	18,850,497.80	1,711,346.05	10.0%
Permits and Fees							-							
Licenses							-							
Interest Revenue							-							
Resident Revenue	3,394,227.48	3,064,448.56	3,331,947.64	3,065,449.47	3,442,998.31	3,529,312.93	86,314.62	2.5%	4,199,200.00	669,887.07	19.0%	4,550,400.00	351,200.00	8.4%
Social Housing Revenue							-							
County Revenue							-							
Other Revenue	105,200.00	148,500.22	107,100.00	104,738.21	95,300.00	196,088.00	100,788.00	105.8%	213,224.00	17,136.00	8.7%	222,092.00	8,868.00	4.2%
Proceeds From Disposition							-							
<b>Total Revenue</b>	<b>16,466,028.14</b>	<b>20,298,505.99</b>	<b>16,816,287.25</b>	<b>17,807,544.94</b>	<b>21,417,862.35</b>	<b>23,734,114.43</b>	<b>2,316,252.08</b>	<b>10.8%</b>	<b>31,138,365.91</b>	<b>7,404,251.49</b>	<b>31.2%</b>	<b>36,247,293.96</b>	<b>5,108,928.05</b>	<b>16.4%</b>
<b>Expenditures</b>														
Salaries and Wages	9,551,973.10	10,311,724.31	9,677,598.00	11,252,323.95	11,793,348.27	13,445,950.19	1,652,601.92	14.0%	15,743,247.85	2,297,297.66	17.1%	16,832,287.96	1,089,040.11	6.9%
Benefits	3,039,154.00	2,867,092.11	3,160,850.00	3,249,130.33	3,839,978.46	4,150,128.05	310,149.59	8.1%	4,752,076.21	601,948.16	14.5%	5,056,908.49	304,832.28	6.4%
Travel and Training	49,000.00	40,787.53	49,800.00	43,933.82	53,200.00	83,790.00	30,590.00	57.5%	90,400.00	6,610.00	7.9%	94,800.00	4,400.00	4.9%
Materials and Supplies	64,850.00	197,022.36	120,505.00	229,039.46	145,150.00	46,200.00	(98,950.00)	-68.2%	48,500.00	2,300.00	5.0%	50,100.00	1,600.00	3.3%
EMS Supplies							-							
Raw Food	531,308.60	531,683.41	536,820.10	586,674.82	624,264.20	649,200.00	24,935.80	4.0%	772,400.00	123,200.00	19.0%	837,000.00	64,600.00	8.4%
LTC Supplies	436,800.00	1,220,229.63	441,200.00	2,247,919.19	1,497,500.00	1,594,500.00	97,000.00	6.5%	1,926,100.00	331,600.00	20.8%	2,075,800.00	149,700.00	7.8%
Transportation Supplies							-							
Insurance	110,000.00	122,437.86	130,295.00	140,888.69	145,700.00	160,270.00	14,570.00	10.0%	240,405.00	80,135.00	50.0%	250,000.00	9,595.00	4.0%
Licences							-							
Information Technology	27,200.00	27,375.33	28,100.00	26,013.47	29,800.00	31,200.00	1,400.00	4.7%	32,900.00	1,700.00	5.4%	34,200.00	1,300.00	4.0%
External Services	340,350.00	605,785.61	333,300.00	728,289.10	635,400.00	884,698.00	249,298.00	39.2%	1,039,899.00	155,201.00	17.5%	1,121,500.00	81,601.00	7.8%
Utilities	316,100.00	270,491.44	331,900.00	320,305.56	339,800.00	339,800.00	-	0.0%	488,200.00	148,400.00	43.7%	507,700.00	19,500.00	4.0%
Rent and Property Tax							-							
Repairs and Maintenance	415,600.00	623,553.40	483,500.00	631,792.40	364,000.00	378,600.00	14,600.00	4.0%	524,400.00	145,800.00	38.5%	548,400.00	24,000.00	4.6%
TcAs under Threshold	53,100.00	76,933.69	65,300.00	84,610.08	54,500.00	112,500.00	58,000.00	106.4%	52,000.00	(60,500.00)	-53.8%	43,000.00	(9,000.00)	-17.3%
Waste Expenses							-							
Internal Chargebacks	1,317,614.25	1,190,701.16	1,342,140.96	1,357,319.25	1,575,843.23	1,638,900.00	63,056.77	4.0%	1,704,300.00	65,400.00	4.0%	1,772,500.00	68,200.00	4.0%
External Transfers							-							
Financial Services	73,978.19	68,978.19	73,978.19	85,158.81	73,978.19	73,978.19	-	0.0%	3,373,537.85	3,299,559.66	4460.2%	6,673,097.52	3,299,559.67	97.8%
SS Program Expenses							-							
<b>Total Expenditures</b>	<b>16,327,028.14</b>	<b>18,154,796.03</b>	<b>16,775,287.25</b>	<b>20,983,398.93</b>	<b>21,172,462.35</b>	<b>23,589,714.43</b>	<b>2,417,252.08</b>	<b>11.4%</b>	<b>30,788,365.91</b>	<b>7,198,651.49</b>	<b>30.5%</b>	<b>35,897,293.96</b>	<b>5,108,928.05</b>	<b>16.6%</b>
<b>Investments</b>														
Investments							-							
TcAs over Threshold	184,000.00	-	41,000.00	6,650.64	245,400.00	122,400.00	(123,000.00)	-50.1%	100,500.00	(21,900.00)	-17.9%	235,100.00	134,600.00	133.9%
Transfers to Reserves	-	8,080.00	-	9,757.41	-	50,000.00	50,000.00		350,000.00	300,000.00	600.0%	350,000.00	-	0.0%
<b>Total Investments</b>	<b>184,000.00</b>	<b>8,080.00</b>	<b>41,000.00</b>	<b>16,408.05</b>	<b>245,400.00</b>	<b>172,400.00</b>	<b>(73,000.00)</b>	<b>-29.7%</b>	<b>450,500.00</b>	<b>278,100.00</b>	<b>161.3%</b>	<b>585,100.00</b>	<b>134,600.00</b>	<b>29.9%</b>
<b>Financing</b>														
Short Term Debt							-							
Long Terms Debt							-							
Transfers From Reserves	(45,000.00)	(65,388.34)	-	(4,090.51)	-	(28,000.00)	(28,000.00)		(100,500.00)	(72,500.00)	258.9%	(235,100.00)	(134,600.00)	133.9%
<b>Total Financing</b>	<b>(45,000.00)</b>	<b>(65,388.34)</b>	<b>-</b>	<b>(4,090.51)</b>	<b>-</b>	<b>(28,000.00)</b>	<b>(28,000.00)</b>		<b>(100,500.00)</b>	<b>(72,500.00)</b>	<b>258.9%</b>	<b>(235,100.00)</b>	<b>(134,600.00)</b>	<b>133.9%</b>
<b>Surplus / (Deficit)</b>	<b>-</b>	<b>2,201,018.30</b>	<b>-</b>	<b>(3,188,171.53)</b>	<b>-</b>	<b>-</b>	<b>-</b>		<b>-</b>	<b>-</b>		<b>-</b>	<b>-</b>	

# Golden Plough Lodge Issue Papers - Summary

	Issue Paper	Amount			Funding
		2024	2025	2026	
#1	Direct Care Staffing	(86,706)	(89,327)	(87,283)	Levy (net of funding & resident revenues)
#2	Life Enrichment Staffing		53,940	66,331	Levy (net of funding & resident revenues)
#3	Environmental Services Staffing	97,328	188,041	179,069	Levy (net of funding & resident revenues)
#4	Logistics Coordinator	101,870	70,543	71,954	Levy
#5	Environmental Services Reserve Strategy		300,000	300,000	Levy
#6	Dietary Services Reserve Strategy	50,000	50,000	50,000	Levy

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## Report 2023-120

**Report Title:** Purchase of a 2023 SUV with full Conversion to an Emergency Response Vehicle (ERV)

**Committee Name:** Community Health

**Committee Meeting Date:** October 30, 2023

**Prepared by:** Keith Barrett,  
Deputy Chief of Operations  
Northumberland Paramedics

**Reviewed by:** Susan Brown  
Chief, Northumberland Paramedics,  
Northumberland Paramedics

**Approved by:** Jennifer Moore, CAO

**Council Meeting Date:** Select Council Meeting Date

**Strategic Plan Priorities:**  Innovate for Service Excellence  
 Ignite Economic Opportunity  
 Foster a Thriving Community  
 Proper Sustainable Growth  
 Champion a Vibrant Future

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### Information Report

**That** the Community Health Committee receive Report 2023-120 'Purchase of a 2023 SUV with full Conversion to an Emergency Response Vehicle (ERV)' for information, noting that County Council previously considered and approved Report 2023-113 'Pre-Budget Approval to Purchase one (1) SUV with Emergency Response Vehicle Conversion' for the 2024 Budget at the September 20, 2023 County Council meeting, and given the immediate need for a replacement, an Emergency Response Vehicle (ERV) was purchased in 2023 ahead of schedule; and

**Further That** the Community Health Committee recommend that County Council receive this report for information."

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## **Purpose**

Northumberland Paramedics presented report 2023-113 to council and received pre-approval to purchase a new 2024 Ford Interceptor(explorer) Hybrid within the 2024 budget for \$114,429.12 to replace 1 (one) of our current Emergency Response Vehicle (4319). Due to unforeseen expenses caused by breakdowns of two (2) of our ERVs and the ability of purchasing a 2023 Ford Explorer SUV and receiving it this year, we would like to take this opportunity to move our purchase of the 2024 ERV from the 2024 budget and order a 2023 ERV at this time to save on cost of purchasing a 2024 Ford explorer hybrid and the cost of fixing 4319.

## **Background**

Since this approval was received, we have had 2 of our ERVs (4319, 4390) have major issues with the engines and the quote to have them repaired is approximately \$7000 - \$10,000 for each. Knowing 4319 is up for replacement in 2024, we reached out to Rowlands Emergency Vehicle Products, our supplier of ERVs to obtain a date in which our new ERV may be available. Rowlands then contacted Northumberland Paramedics to inform us that it would be mid to late 2024 at the earliest before we would be able to receive our new Hybrid ERV. Rowlands also informed us they have two (2) 2023 Ford Explorer Hybrids currently in stock however the 2023 chassis has seen an increase in price of approximately \$2000.00. The fully converted SUV is at the current price of \$117,838.08.

## **Consultations**

Rowlands Emergency Vehicle Products

## **Legislative Authority / Risk Considerations**

The supply chain of the SUV vehicles is still fragile and unreliable. At the time of this report, the delivery date of a potential vehicle was estimated as later than July 2024, and had increased in price from the original quote in the amount of \$7000.00 to \$9000.00. There was significant concern of availability of the replacement SUV in the first three (3) Quarters of 2024.

## **Discussion / Options**

Received approval for 2024 Ford Explorer Hybrid within the 2024 budget for \$114,429.12. Due to unforeseen repair expenses of the transmission of the ERV - 4319, and the availability of a 2023 Ford Explorer Interceptor Hybrid the purchase was expediated in the amount of \$117,838.08 for the purchase of the SUV and full conversion to an ERV.

## **Financial Impact**

The 2023 budget purchase of a 2023 Ford Explorer Hybrid in the amount of \$117,838.08

## **Member Municipality Impacts**

N/A

## **Conclusion / Outcomes**

The emergent purchase of the 2023 Ford Interceptor SUV with full ERV conversion in the 2023 Budget, saves the immediate repair costs of \$8000.00 for a 2018 vehicle that was approved to be replaced in 2024, allow us to receive this vehicle within the next 6 weeks, and mitigate the concern of unknow delivery dates of the 2024 vehicles with a confirmed increased price of \$7000.00 to \$9000.00 for the SUV.

## **Attachments**

1. Report 2023-113, Paramedics 'Pre-Budget Approval to Purchase one (1) SUV with Emergency Response Vehicle Conversion'

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## Report 2023-113

**Report Title:** Pre-Budget Approval to Purchase one (1) SUV with Emergency Response Vehicle Conversion

**Committee Name:** Community Health

**Committee Meeting Date:** September 7, 2023

**Prepared by:** Keith Barrett  
Deputy Chief of Operations  
Northumberland Paramedics

Susan Brown  
Chief – Northumberland Paramedics  
Northumberland Paramedics

**Approved by:** Jennifer Moore, CAO

**Council Meeting Date:** September 20, 2023

**Strategic Plan Priorities:**

- Economic Prosperity and Innovation
- Sustainable Growth
- Thriving and Inclusive Communities
- Leadership in Change

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### Recommendation

“**That** the Community Health Committee, having considered Report 2023-113 'Pre-Budget Approval to Purchase one (1) SUV with Emergency Response Vehicle Conversion', recommend that County Council grant pre-approve to purchase one (1) SUV that will be converted to a full Emergency Response Vehicle (ERV) for the 2024 budget.”

## **Purpose**

The purpose of this report is to request the pre-approval to order one (1) SUV complete with ERV conversion from Rowlands Emergency. We continue to experience challenges with the supply and delivery of these vehicles. The current lead time to secure an SUV is 6 to 8 months with an additional 3 months to complete the conversion to an ERV.

## **Background**

Northumberland Paramedics provide Land Ambulance Service in the primary geographic area of the County of Northumberland from six (6) Ambulance Stations located strategically around the County's 1,901 square km area. From These six (6) stations, the service operates twenty - four (24) hours per day, seven (7) days per week, three-hundred and sixty-five (365) days a year.

Emergency Response Units are used by the Senior Management as well as Superintendents to complete their daily tasks, as well as respond to emergency calls, and other incidents. These units are also deployed as first response vehicles to help enhance emergency coverage throughout Northumberland County.

The replacement cycle for the Emergency Response Vehicle that Northumberland County has adopted and currently follows is per the Land Ambulance Certification Standard Version 1.4.0 dated August 2, 2022. This standard recognizes that the appropriate life span of an ERV, as 5 years or 250,000 km whichever comes first.

The current operational use and needs of the ERV were reviewed to determine the best vehicle for our needs. Historically our fleet was comprised of the Chevy Tahoe as that best met our needs at that time. We have explored various options as follows: Chevy Tahoe, Ford Explorer, and a Ford Explorer -Hybrid.

## **Consultations**

Rowland Emergency Vehicle Products Inc.  
Land Ambulance Certification Standard Version 1.4.0, August 2, 2022

## **Legislative Authority/Risk Considerations**

The Ministry of Health & Long-Term Care requires that all Ambulances and ERV's be compliant and certified under the Land Ambulance Certification Standard Version 1.4.0 dated August 2, 2022. This standard recognizes that the appropriate life span of an Ambulance is five (5) years or 250,000 km whichever comes first. Northumberland Paramedics have adopted this life span and as such replaces vehicles on this schedule.

The ERV that is scheduled to be replaced in 2024 is 4319 which has already surpassed our recommended replacement cycle of 5 years or 250,000 kms. ERV 4319 is a 2018 vehicle presently with 274,074 Kms on it.

ERV's are subject to early wear and tear due to extreme operating conditions including exposure to all types of environmental conditions during emergency call responses. The replacement of these

vehicles as per the adopted schedule enhances paramedic and patient health and safety by reducing the risk of failure when performing critical emergency work.

## **Discussion/Options**

There are 3 vehicles we are proposing to replace the current 4319 (Chevy Tahoe) with, they are:

### 2024 Chevy Tahoe

The Tahoe is the current status quo option of our fleet.

### 2024 Ford Explorer

The Ford Explorer is a smaller more agile vehicle with better fuel mileage than the Chevy Tahoe. The Ford Explorer fuel mileage is 20 miles to the gallon both in the city and highway compared to the Chevy Tahoe which is 14 miles in the city and 20 on the Highway. As well the safety rating for the Explorer is 5\* in all 9 safety categories compared to the Tahoe which has 5\* in only 6 categories. This option has more efficient fuel mileage as well safer.

### 2024 Ford Explorer – Hybrid

The Hybrid vehicle provides an option with a green environmentally friendly lens. Our ERV's usually travel between 50,000 to 75,000 kms a year. We have researched that every gallon of gasoline contains 20 pounds (9 kilograms) of carbon dioxide, then a hybrid vehicle will emit 51.6 pounds (23.1 kilograms) of carbon dioxide every 100 miles (161 kilometers), while a conventional vehicle will emit 74.9 pounds (34 kilograms).

Although the use of Hybrid vehicles in emergency services are still relatively small this application as a hybrid model that still provides the contingency /option of fuel is a first step towards a greener fleet however the back up of a reliable emergency vehicle.

## **Financial Impact**

All options outlined below will have 50% of the expenditure recovered from the Ministry of Health and Long-Term Care through depreciation of the assets over their life span of 5 years.



Vehicle - Option	Price	Comments
Chevy Tahoe	\$121,715.14	Current Fleet
Ford Explorer	\$110,358.72	Smaller, safer, better fuel mileage
Ford Explorer - Hybrid	\$114,429.12	As Explorer * environmentally friendly

### **Member Municipality Impacts**

The impact to Member Municipalities would be to ensure safe and reliable ERVs are available to the county as fiscally responsible as possible.

### **Conclusion/Outcomes**

Senior Management Team requests that Council authorize the pre- approval to purchase one replacement ERV in the 2024 Budget. It is further recommended by staff that the Ford Explorer – Hybrid be the selected option for the ERV at the cost of \$ 114,429.12.

### **Attachments**

N/A

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## Report 2023-121

**Report Title:** Response Time Performance Plan

**Committee Name:** Community Health Committee

**Committee Meeting Date:** October 30, 2023

**Prepared by:** Susan Brown  
Chief  
Northumberland Paramedics

**Approved by:** Jennifer Moore, CAO

**Council Meeting Date:** November 15, 2023

**Strategic Plan Priorities:**  Economic Prosperity and Innovation  
 Sustainable Growth  
 Thriving and Inclusive Communities  
 Leadership in Change

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### Recommendation

“That the Community Health Committee, having considered Report 2023-121 ‘Response Time Performance Plan’, recommend that County Council approve the Response Time Performance Plan.”

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### Purpose

To bring forward Northumberland Paramedic’s current response time performance plan and make a recommendation to Council to maintain the current Northumberland Paramedic response time targets for 2024.

### Background

The Ministry of Health (MOH) under Regulation 257/00 Part VIII of the Ambulance Act sets out key performance indicators (KPI’s) that all Paramedic services must set, monitor, evaluate and report to the MOH and the public for transparency. One of the KPI’s is the response time performance plan.

The Response time performance plan measures the ability (time) for a service to respond to the patients categorized as CTAS 1 to 5, and Sudden Cardiac Arrests (SCA). CTAS is the Canadian Triage Acuity Scale which measures the acuity of the patient. The CTAS levels and their corresponding acuity is outlined in the chart below:

CTAS Level	Acuity Level
SCA	Sudden Cardiac Arrest
CTAS 1	Resuscitation
CTAS 2	Emergent
CTAS 3	Urgent
CTAS 4	Less Urgent
CTAS 5	Non-Urgent

The concept of the CTAS system is prioritizing response, assessment, and treatment to the sickest person the fastest. The paramedics' report the CTAS level of a patient three times during a call. CTAS is assigned upon arrival of the patient, departure of scene, and lastly upon arrival at the hospital. Hospitals also utilize the CTAS system and will assign to patient upon arrival at hospital to determine their room location and the "time to see a physician" and the percentage of time that will occur.

Annually in October, each ambulance service must set its response time targets and report them to the Ministry of Health Emergency Health Services Branch (MOH ESHB) for the following year. The new response targets require ambulance services to report on the six different priority levels as outlined in the chart above. The Ministry sets the time standards for SCA and CTAS 1, and the services must set the percentage of the time that they will meet the two high priority patient response times (SCA, and CTAS 1) as well as setting the percentage of time and the time interval that they will meet in lower priority patient categories (CTAS 2, 3, 4, and 5).

Northumberland County Paramedics Current Response Time Performance Plan is outlined below:

CTAS Level	Northumberland
SCA	6 min 45%
CTAS 1	8 min 55%
CTAS 2	10 min 65%
CTAS 3	10 min 65%
CTAS 4	15 min 65%
CTAS 5	20 min 65%

Northumberland County's population is 90,039 with a corresponding land area of 1,905 sq km. It's comprised of a blend of rural and urban areas which causes some challenges in setting response time standards. It is common to see urban centers meet response times whereas rural areas present challenges due to the distances of travel involved in the responses.

In 2022, we adjusted the response time targets for 2023 by increasing the timelines for response to CTAS 4 from 10 minutes to 15 minutes and CTAS 5 from 10 minutes to 20 minutes. At present time we have approximately 8 months of data, and many other variables that have been introduced such as off load nursing funding, and minimizing our mobile standbys for neighboring services, thereby maintain our immediate County coverage, and a current budgetary recommendation for and additional 12 -hour crew Q3 and Q4 of 2024.

### Consultations

Ambulance Act; Regulations 257/00, Part VIII

Interdev Analytics dashboard

Ministry of Health – Response Time Performance Plans - Ontario

### Legislative Authority / Risk Considerations

Mandated to follow the Ambulance Act and the regulations, and standards contained within. Response Time Performance Plans are one of the key performance indicators that we must set/establish every October and report on the actuals of the year prior to March annually.

The ability of the service to meet their response time performance plan is reviewed once again every 3 years during their Ministry Review certification and licensing. The County/Paramedic service must outline their plan, provide the analytics to support meeting the targets, and/or a plan to meet the targets if not obtaining them currently.

The most significant consideration in terms of risk is ensuring the County continues to meet or exceed established response time requirements. This includes meeting the public's expectations with respect to level of service.

## **Discussion / Options**

The paramedic department works diligently to meet or exceed the County approved response time standard as well as legislation as it relates to our response time plan.

## **Financial Impact**

N/A

## **Member Municipality Impacts**

The response time performance plan is one of the key performance indicators measured, monitored, and mandated by the MOHLTC Emergency Services Branch. It is a publicly reportable performance indicator/benchmark to ensure accountability, transparency, and excellence with regards to service delivery. Reduced response times ultimately results in reduced time to definitive medical care, which has the potential to decrease morbidity and mortality.

All municipalities of the County benefit from a service delivery that meets the targeted evidence-based response time performance plan. This response time performance plan is focused on the health and safety of the Community. Prioritizing response times to the sickest, most acute patients first, efficiently, and effectively.

## **Conclusion / Outcomes**

Staff recommend that Council maintain the current Northumberland Paramedic response time performance targets for 2024.

## **Attachments**

N/A

**HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT  
BOARD OF HEALTH MEETING**

**June 15, 2023**

**MINUTES**

The meeting was convened by Mr. Marshall at 9:30 am at the Health Unit's Port Hope office.

Those in attendance were Messrs. Marshall, Logel, Ryall, Crate and Perry, Dr. Hankivsky, Mrs. Richardson, Dr. Bocking, Mr. Vrooman, Ms. Beaulac, and Mrs. Dickson (Recorder).

**1. LAND ACKNOWLEDGEMENT**

The Haliburton, Kawartha, Pine Ridge District Health Unit is situated on the traditional territories of the Michi Saagiig and Chippewa Nations. This includes the territories of Treaty 20 and Williams Treaties. We respectfully acknowledge that these Nations are the stewards and caretakers of these lands and waters for all time and that they continue to maintain this responsibility to ensure their health and integrity for generations to come.

The Haliburton, Kawartha, Pine Ridge District Health Unit recognizes the many harms done to Indigenous peoples and our collective responsibility to right those wrongs. As an organization that is rooted in a colonial system, we are committed to change, to building meaningful relationships with Indigenous communities and in improving our understanding of local Indigenous peoples as we celebrate their cultures and traditions, serve their communities, and responsibly honour all our relations.

**2. ADOPTION OF AGENDA**

Moved by Mr. Logel

Seconded by Mr. Crate

THAT the agenda be adopted as presented, with the exception of item 8.1, Draft Consolidated Financial Statements being discussed first.

2023-83

carried

**3. DECLARATION OF CONFLICT OF INTEREST**

None

**4. ADOPTION OF MINUTES**

Moved by Mr. Ryall

Seconded by Mr. Crate

THAT the minutes from the May 18, 2023 meeting be approved.

2023-84  
carried

## **5. BUSINESS ARISING**

None

## **6. MEDICAL OFFICER OF HEALTH UPDATES**

Dr. Bocking provided the Board with the following brief updates:

Wildfire Smoke Air Quality Event – The recent event was the first of its magnitude to impact the HKPR area and an opportunity to review the role of public health and communication regarding the air quality health index. The Health Unit is debriefing with municipalities as wildfires are likely to become a more frequent event. Communicating information to high-risk populations when these events occur, in addition to strategies to mitigate and adapt are topics of discussion.

Beach water testing has launched for the summer. Results are posted on the Health Unit’s website.

Substance Use Prevention and Harm Reduction – Dr. Bocking will be participating on a panel presentation for the Haliburton, Kawartha Lakes, Northumberland (HKLN) Drug Strategy, hosted by the Municipality of Port Hope, on June 21<sup>st</sup>. The objective of the session is to bring together individuals involved in different aspects of the response and people with lived experience; hopefully the first of ongoing conversations.

Moved by Dr. Hankivsky

Seconded by Mr. Ryall

THAT the Medical Officer of Health updates be received for information.

2023-85  
carried

## **7. REPORTS**

7.1 Marianne Rock, Manager, Communicable Disease Prevention and Control, presented to the Board about the Vaccine Preventable Diseases Program

The Health Unit is mandated through the Ontario Public Health Standards to promote and provide publicly funded immunizations through school clinics; assess, maintain, and report on immunization

records of children in licensed daycares and schools; and enforce the *Immunization of School Pupils Act* (ISPA) and the *Child Care and Early Years Act* (CCEYA).

Provincially, the COVID-19 pandemic decreased or eliminated access to routine childhood immunizations through health care providers and public health unit school clinic programs. Access to immunizations is provided through health care providers and public health units.

The Health Unit administered approximately 2000 doses each of Hepatitis B, HPV, and Meningitis vaccine to Grade 7 and 8 students over the course of 80 clinics during Fall 2022 and Spring 2023 and mailed 3,643 first notices, and 1,774 second notices, but did not enforce suspensions.

There are currently 6,332 students who require immunizations, or whose records need to be updated (JK through Grade 11).

Pre-pandemic, on average, 500 letters would be sent to parents of children in daycare whose immunization records were out of date; however, there has been no enforcement of the CCEYA since 2020.

The Health Unit needs to increase our cohorts for enforcement of the ISPA (all grades, all vaccines), increase vaccine coverage rates through the School Based Immunization Program, and re-establish the CCEYA program within daycares. We will be offering in-house clinics throughout the summer of 2023, engaging health care providers, and informing parents of upcoming ISPA enforcement in 2024. We will also be offering presentations to students and parents about the importance of vaccines.

Catch-up of this work requires a vast amount of resources; Board members were asked for their support in advocating for sustainable funding to meet the resource demands for vaccine preventable diseases programs.

Moved by Mrs. Richardson

Seconded by Dr. Hankivsky

THAT the Board of Health receive the presentation on the Vaccine Preventable Diseases Program for information.

2023-86  
carried

7.2 Lindsay Greening, Karen Baker, Kristina Nairn, and Katelynn Lubbock, School Health Nurses, presented to the Board about the School Health Program

The Health Unit's School Health Nurses actively and collaboratively engage with our schools, community and health partners using the foundations of a healthy school approach to build healthy and equitable school communities.

While the primary focus of the School Health Nurses Initiative was on the COVID-19 response, with an emphasis on case, contact and outbreak management, the provincial government indicated that the additional nurses may also support the fulfilment of board of health requirements to improve the health



of school-aged children and youth, as per the School Health program standard and related guidelines and protocols under the Ontario Public Health Standards (OPHS).

The whole-school model builds capacity to incorporate well-being as an essential aspect of student achievement. As outlined in the OPHS, approaches must be informed by an assessment of the local population. Assessments involve a call or visit with each school principal to touch-base and discuss their initial thoughts on health topic priorities for their school. The prioritization of schools is based on data gathered from the Education Opportunities index and Oral Health Screening Data as well as the scale of readiness to engage. School Health Nurses then utilize a School Health Assessment Action Plan to determine activities that address the needs identified.

During the 2022/2023 school year, the Health Unit completed 53 brief assessments and 25 in-depth assessments. The most significant health concerns identified for areas of focus by school administration were mental health, vaping/substance use, interpersonal relationships, sexual health, social determinants of health barriers, concussions/injury prevention, and physical activity.

The School Health Nurses have delivered “Brain Day” workshops to each of the five high schools in Northumberland this year and additionally there were class sessions in high schools and elementary schools addressing conflict resolution, bullying, self-regulation, healthy coping, empathy/kindness, and body image. Other topics that the nurses have supported in schools include healthy sexuality, healthy relationships, healthy eating, and oral health.

The School Health Nurses have also facilitated the PALS program in four schools, provided 18 classroom sessions on vaping, two school events on mental health and emotional regulation and 17 classrooms sessions, and attended and supported a number of school open houses and engagement events.

We routinely provide consultations and support to school communities on a variety of health topics such as health teaching on non-reportable infectious diseases and providing information on community supports and work closely with internal and external partners as needed.

Moved by Mr. Logel

Seconded by Mr. Ryall

THAT the Board of Health receive the presentation on the School Health Program for information.

2023-87  
carried

## **8. NEW BUSINESS**

8.1 Richard Steiginga, representing Baker Tilly, reviewed the Draft Consolidated Financial Statements for 2022 with the Board of Health.

Mr. Steinginga communicated in his review that there were no weaknesses, deficiencies, or illegal or improper acts that needed to be noted for the Board's attention; and that there were no related party transactions that needed to be disclosed.

Moved by Mrs. Richardson

Seconded by Mr. Ryall

THAT the 2022 Draft Consolidated Financial Statements be approved, and that all associated documentation be signed.

2022-88  
carried

### 8.2 Unaudited Operating Statements

In summary, there is a cumulative deficit for the first five months of the fiscal year 2023, totaling (\$420,978). The province has not released one-time funding yet this year in the areas of COVID-19 Extraordinary Costs (\$466,894), and COVID-19 Vaccine Program (\$497,844). As such, 38.51% of our budgeted income has now been received during the first five months of the fiscal year. The current deficit will continue to correct itself throughout the year as we continue to receive our budgeted income.

Moved by Mr. Logel

Seconded by Dr. Hankivsky

THAT the draft unaudited operating statements for the five-month period ending May 31, 2023 in the amount of \$9,146,271 be received for information.

2023-89  
carried

### 8.3 Initial Projections for 2024 Budget

Dr. Bocking advised the Board that the Health Unit is anticipating approval of its 2023 budget in August or September and that the Ministry of Health has signalled the end of a number of one-time funding pathways for the year 2024. The Health Unit is projecting significant shortfalls for 2024.

Moved by Mr. Logel

Seconded by Dr. Hankivsky

THAT the Board of Health receive this briefing note for information and THAT the Board of Health write to the Minister of Health to endorse letters provided by other health units and outline the anticipated financial constraints facing HKPR District Health Unit for the 2024 budget.

2023-90

carried

### 8.3 Policy Revision – Accessible Customer Service

Moved by Mr. Perry

Seconded by Mr. Ryall

THAT the Accessible Customer Service policy be approved.

2023-91

carried

## 9. BUSINESS FROM BOARD MEMBERS

Dr. Hankivsky shared with the Board that a walk-in clinic in Port Hope is hoping to run part-time by the summer and asked members to advise her of any physicians that may be interested in working at the clinic.

## 10. CORRESPONDENCE

Moved by Mrs. Richardson

Seconded by Dr. Hankivsky

THAT the following correspondence be received and filed:

- Support for Sufficient, Stable and Sustained Funding for Public Health Units
- Association of Local Public Health Agencies May Information Break
- Prevention is key to reducing health care system strain
- Member Newsletter from the Ontario Public Health Association

2023-92

carried

## 11. IN-CAMERA SESSION

Moved by Mr. Logel

Seconded by Mr. Perry

THAT the Board of Health move in-camera to review the closed session minutes from the May 18, 2023 meeting and property items.

2023-93

carried

Moved by Mrs. Richardson

Seconded by Mr. Perry

THAT the in-camera be dissolved, and the membership return to the Board of Health open session.

2023-94

carried

Moved by Mr. Logel

Seconded by Mr. Crate

THAT the Board of Health approve the in-camera minutes from May 18, 2023.

2023-95

carried

Moved by Mr. Logel

Seconded by Mr. Ryall

THAT the Board of Health direct Health Unit management to negotiate more favourable lease terms with the current landlord for the Haliburton office.

2023-96

carried

Moved by Mr. Perry

Seconded by Mr. Crate

THAT the Board of Health direct Health Unit Management to examine opportunities to minimize occupancy costs for both the Lindsay and Port Hope offices and return to the Board of Health with a proposal in September 2023.

2023-97

carried

## **12. DATE OF NEXT MEETING**

The next meeting of the Board of Health will be held at the Port Hope office on September 21, 2023, from 9:30 am – 11:30 am.

## **13. ADJOURNMENT**

Moved by Dr. Hankivsky

Seconded by Mr. Ryall

THAT the meeting be adjourned. The meeting adjourned at 11:33 am.

2023-98  
carried

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Board of Health Chair  
Approved September 21, 2023

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Recorder

**HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT  
BOARD OF HEALTH MEETING**

**September 21, 2023**

**MINUTES**

The meeting was convened by Mr. Marshall at 9:28 am at the Health Unit's Port Hope office.

Those in attendance were Messrs. Marshall, Logel, Ryall (via Teams), Crate and Perry, Dr. Hankivsky, Mrs. Richardson, Dr. Bocking, Mr. Vrooman, and Mrs. Dickson (Recorder).

**1. LAND ACKNOWLEDGEMENT**

The Haliburton, Kawartha, Pine Ridge District Health Unit is situated on the traditional territories of the Michi Saagiig and Chippewa Nations. This includes the territories of Treaty 20 and Williams Treaties. We respectfully acknowledge that these Nations are the stewards and caretakers of these lands and waters for all time and that they continue to maintain this responsibility to ensure their health and integrity for generations to come.

The Haliburton, Kawartha, Pine Ridge District Health Unit recognizes the many harms done to Indigenous peoples and our collective responsibility to right those wrongs. As an organization that is rooted in a colonial system, we are committed to change, to building meaningful relationships with Indigenous communities and in improving our understanding of local Indigenous peoples as we celebrate their cultures and traditions, serve their communities, and responsibly honour all our relations.

**2. ADOPTION OF AGENDA**

Moved by Mr. Logel

Seconded by Mrs. Richardson

THAT the agenda be adopted as presented.

2023-99

carried

**3. DECLARATION OF CONFLICT OF INTEREST**

None

**4. ADOPTION OF MINUTES**

Moved by Dr. Hankivsky

Seconded by Mr. Perry

THAT the minutes from the June 15, 2023 meeting be approved.

2023-100  
carried

## **5. BUSINESS ARISING**

Mr. Logel asked for an update regarding school-based immunizations. Dr. Bocking shared that 6,000 catch-up letters were sent over the summer. Approximately 1,700 students subsequently provided updated records to the Health Unit and 4,300 students remain that require further follow-up. The summer catch-up clinics hosted by the Health Unit were not well attended; therefore, there is a fair amount of work that needs to be done during the fall in conjunction with health care providers to catch-up students.

## **6. MEDICAL OFFICER OF HEALTH UPDATES**

Dr. Bocking provided updates on Fall 2023 Respiratory Season Preparedness and the launch of the Health Unit's new website.

### Fall 2023 Respiratory Season Readiness:

Similar to last fall, the 2023 respiratory season is predicted to be "atypical" compared to pre-pandemic respiratory seasons with a mix of COVID-19, influenza, RSV, and other viruses circulating. Residents are encouraged to stay up to date on what viruses are circulating by visiting the [Health Unit's Respiratory Infections Dashboard](#).

Vaccine for influenza, COVID-19, and RSV will be available this fall (RSV vaccine is new for those who are 60+ residing in long-term care homes, Elder care lodges and in some retirement homes). Influenza and COVID-19 vaccine will initially be available for hospitals and long-term care home residents, staff and caregivers. As more vaccine becomes available, eligibility will expand to include individuals at high-risk for flu/COVID-19 complications or hospitalization and health care workers/first responders. According to current provincial timelines, the general population will become eligible for influenza and COVID-19 vaccine on October 30<sup>th</sup>.

The Health Unit has hosted respiratory season preparedness tabletop exercises with health sector partners in the City of Kawartha Lakes, and Haliburton and Northumberland counties and sector specific preparedness with long-term care homes, primary care, and other congregate settings.

Rapid antigen tests for COVID-19 are available for the public at Health Unit offices as well as some pharmacies and primary care provider offices. Individuals that are at high risk of severe illness from either influenza or COVID-19 are encouraged to speak with their primary care provider to discuss the need for a prescription for antiviral medication.

### Launch of the Health Unit's new website:

The Health Unit recently launched a new website to promote its role within the community and improve navigation and functionality. The site includes public health topics, data reports and dashboards, and calendars with clinics and classes and more. The website can be viewed [here](#).

Moved by Mr. Logel

Seconded by Mr. Crate

THAT the Medical Officer of Health updates be received for information.

2023-101

carried

## **7. REPORTS**

No reports for this meeting.

## **8. NEW BUSINESS**

### 8.1 Haliburton, Kawartha, Pine Ridge District Health Unit's 2022 Annual Report

Moved by Dr. Hankivsky

Seconded by Mrs. Richardson

THAT the 2022 Annual Report be received for information.

2022-102

carried

### 8.2 Q2-2023 Board of Health Quarterly Report Summary

Moved by Mr. Crate

Seconded by Mr. Logel

THAT the Q2-2023 Board of Health Quarterly Report Summary be received for information.

2023-103

carried

### 8.3 Finance Updates

Moved by Mr. Perry

Seconded by Mr. Ryall

THAT the Board of Health receive the following for information:



- 2023 funding letters and amendment to the Public Health Funding & Accountability Agreement

And further THAT, the Board of Health endorse the Board Chair's prior signing of the following documents:

- 2020-2022 Annual Reconciliation Reports
- 2022 Annual Report and Attestation
- Q2-2023 Standards Activity Report

2023-104  
carried

#### 8.4 Unaudited Operating Statements

There is a cumulative deficit for the first eight months of the fiscal 2023, totaling (\$1,081,835).

The August result shows that our expenditures for the first eight months of the fiscal year was approximately \$392,811 under budget. The Health Unit is exercising fiscal constraint, primarily because of the uncertainty around COVID expenditures. All of our divisions are at or below their budgeted allocations with the exception of Health Promotion and Health Protection, which are showing deficits of \$79,000 and \$18,000 respectively.

#### Variance Analysis

- The province has not released one-time funding this year for COVID-19 extraordinary costs (\$747,030), and COVID-19 Vaccine Program (\$796,551). Overall, the Health Unit has received 60.25% of its budgeted income over the first eight months of the fiscal year. The current deficit will continue to correct itself throughout the year as we continue to receive our budgeted income.
- Salary and benefits are showing significant budgetary deficit this month however, we expect to see corrections, especially in the benefit category, as contribution levels reach their maximum.
- Total expenditures year to date is currently sitting at 64.77% of the budgeted amounts for the first eight months of the fiscal year.

Moved by Mr. Perry

Seconded by Mr. Crate

THAT the draft unaudited operating statement for the eight-month period ending August 31, 2023 in the amount \$15,493,358 be received for information.

2023-105  
carried

8.5 Policy Revision -Mass Immunization Emergency Preparedness Requirements

Moved by Mr. Logel

Seconded by Mrs. Richardson

THAT the Mass Immunization Emergency Preparedness policy be approved.

2023-106

carried

**9. BUSINESS FROM BOARD MEMBERS**

None

**10. CORRESPONDENCE**

Moved by Mr. Crate

Seconded by Dr. Hankivsky

THAT the following correspondence be received and filed:

- Strengthening Public Health Slide Deck from the Ministry of Health & the Office of the Chief Medical Officer of Health
- Public Health Matters – A Business Case for Local Public Health

2023-107

carried

**11. IN-CAMERA SESSION**

Moved by Dr. Hankivsky

Seconded by Mr. Logel

THAT the Board of Health move in-camera to review the closed session minutes from the June 15, 2023 in-camera session, property, legal, and personnel.

2023-108

Moved by Mr. Perry

Seconded by Mr. Crate

THAT the in-camera be dissolved, and the membership return to the Board of Health open session.

2023-109

carried

Moved by Dr. Hankivsky

Seconded by Mrs. Richardson

THAT the Board of Health approve the in-camera minutes from June 15, 2023.

2023-110

carried

Moved by Mr. Logel

Seconded by Mr. Crate

THAT the Board of Health receive the information provided under property item 11.2.

2023-111

carried

Moved by Mr. Logel

Seconded by Mrs. Richardson

THAT the professional development request made under item 11.3 be approved.

2023-112

carried

Moved by Mr. Crate

Seconded by Dr. Hankivsky

THAT the recommendations made under legal item 11.4 be approved.

2023-113

Moved by Mrs. Richardson

Seconded by Dr. Hankivsky

THAT the information provided under personnel item 11.5 be received.

2023-114

carried

## **12. DATE OF NEXT MEETING**

The next meeting of the Board of Health will be held at the Haliburton office on October 19, 2023, from 10:00 am – 12:00 pm.

**13. ADJOURNMENT**

Moved by Dr. Hankivsky

Seconded by Mr. Perry

THAT the meeting be adjourned. The meeting adjourned at 11:07 am.

2023-115  
carried

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Board of Health Chair  
Approved October 19, 2023

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Recorder

**Date: September 21, 2023 | Time: 9:30-11:30 a.m. | Location: Port Hope office**

### **6. Medical Officer of Health Update**

Presenter: Dr. Natalie Bocking, Medical Officer of Health and Chief Executive Officer

Dr. Bocking provided updates on the Fall 2023 Respiratory Season Preparedness and the launch of the Health Unit's new website.

#### Fall 2023 Respiratory Season Readiness:

Similar to last fall, the 2023 respiratory season is predicted to be "atypical" compared to pre-pandemic respiratory seasons with a mix of COVID-19, influenza, RSV, and other viruses circulating. Residents are encouraged to stay up to date on what viruses are circulating by visiting the [Health Unit's Respiratory Infections Dashboard](#).

Vaccine for influenza, COVID-19, and RSV will be available this fall (RSV vaccine is new for those who are 60+ residing in long-term care homes, Elder care lodges and in some retirement homes). Influenza and COVID-19 vaccine will initially be available for hospitals and long-term care home residents, staff and caregivers. As more vaccine becomes available, eligibility will expand to include individuals at high-risk for flu/COVID-19 complications or hospitalization and health care workers/first responders. According to current provincial timelines, the general population will become eligible for influenza and COVID-19 vaccine on October 30<sup>th</sup>.

The Health Unit has hosted respiratory season preparedness tabletop exercises with health sector partners in the City of Kawartha Lakes, and Haliburton and Northumberland counties and sector specific preparedness with long-term care homes, primary care, and other congregate settings.

Rapid antigen tests for COVID-19 are available for the public at Health Unit offices as well as some pharmacies and primary care provider offices. Individuals that are at high risk of severe illness from either influenza or COVID-19 are encouraged to speak with their primary care provider to discuss the need for a prescription for antiviral medication.

#### Launch of the Health Unit's new website:

The Health Unit recently launched a new website to promote its role within the community and improve navigation and functionality. The site includes public health topics, data reports and dashboards, and calendars with clinics and classes and more. The website can be viewed [here](#).

### 8. New Business

#### 8.1 Haliburton, Kawartha, Pine Ridge District Health Unit's 2022 Annual Report

Presenter: Dr. Natalie Bocking, Medical Officer of Health, and Chief Executive Officer

The year of 2022 was one of restoration as the Health unit continued to respond to COVID-19, but also began to restore other priority public health programs and services.

The Health Unit developed a three-pronged approach to enable pivoting between pandemic response and restoring programs and services that had been "offline" for two years; all the while incorporating lessons learned from the response and building on partnerships that had been strengthened throughout the pandemic.

The full Annual Report can be viewed [here](#).

#### 8.2 Q2-2023 Board of Health Quarterly Report Summary

Presenter: Dr. Natalie Bocking, Medical Officer of Health, and Chief Executive Officer

The Board of Health Quarterly Report informs the Board about activities of the organization and allows them to monitor progress and ensure program requirements under the Ontario Public Health Standards are met.

Of the 154 mandatory requirements, for the second quarter of 2023:

- 132 were met
- 18 were partly met
- 1 was not met
- 3 were not applicable

For a full summary of achievements, the complete report can be viewed [here](#).

#### 8.3 Finance Updates

Presenter: Matthew Vrooman, Director of Corporate Services

#### 2023 Ministry of Health Funding Approval

The Health Unit has received its 2023 funding letters and amendments to the Public Health Funding and Accountability Agreement from the Ministry of Health. The Health Unit's budget has been updated to reflect the following changes received in the funding package:

- Increase to provincial contribution to cost-shared budget of \$89,550.
- One time funding approval for New Purpose-Built Vaccine Refrigerators of \$71,200.

- One Time Funding approval for Additional inspection support for assessment of small drinking water systems of \$50,000.
- Reduction in Public Health Practicum funding of \$10,000.

The full financial update summary can be viewed [here](#).

### **8.4 Unaudited Operating Statements**

Presenter: Matthew Vrooman, Director of Corporate Services

The Board of Health received the draft unaudited operating statement for the eight-month period ending August 31, 2023 in the amount \$15,493,358 for information.

Statements by division and expense can be viewed [here](#).

*For the complete meeting details, please see the [agenda package](#) or view our video recording [online](#).*

### **Date of Next Meeting**

Thursday, October 19, 2023, 10:00am – 12:00pm, HKPR District Health Unit, Haliburton office, 191 Highland Street, Unit #301, Haliburton

**Date: October 19, 2023 | Time: 10:00 a.m. – 12:00 p.m. | Location: Haliburton office**

### **6. Medical Officer of Health Update**

Presenter: Dr. Natalie Bocking, Medical Officer of Health and Chief Executive Officer

#### Fall Respiratory Season:

An increase in local COVID-19 activity has resulted in outbreaks in long-term care homes and hospitals. However, it has not been a dramatic increase, and a significant surge, as was seen in previous waves, is not anticipated.

The region has received its first reported cases of influenza.

Residents are encouraged to:

- 1) Stay up to date with immunizations (COVID-19 and flu, and, for people over 60 who live in long-term care homes, RSV as well). Individuals who fall into a high-risk category are currently eligible for COVID-19 and flu vaccines; as of the end of October, the general population becomes eligible.
- 2) Know whether you are eligible for treatment (COVID-19 and influenza).
- 3) Stay home if you are sick.
- 4) Wear a mask if you are at risk of developing severe illness or if you are recovering from a respiratory infection (up to 10 days after the start of symptoms).

#### Ongoing Drug Poisoning Crisis and Role of the Health Unit:

During the COVID-19 pandemic the number of deaths due to opioid overdose increased dramatically. While the number of deaths has decreased slightly, they still remain high. Across Haliburton, Kawartha, Pine Ridge District area, there were 35 reported deaths in 2022 and there have been 13 deaths from January to May in 2023. Our region sits midway on the spectrum of health units in terms of pressure on hospitals related to overdose cases presenting to the emergency room.

The Health Unit's role in the drug poisoning crisis is in the areas of health promotion for substance use prevention, supporting harm reduction services through partners, and data and surveillance. The Health Unit issues alerts to the community when an increase in overdoses is observed and is collaborating with partners to coordinate an emergency response plan.

The Health Unit also provides support to, and participates on, the Haliburton, Kawartha Lakes, Northumberland Drug Strategy (HKLNDS). The HKLNDS is a coalition of community-based organizations that have an overlapping mandate to facilitate a collaborative, evidence-based



approach to minimize the risks and harms associated with substance use. The Health Unit provides support in the areas of coordination and facilitation, data needs, and communications. A community needs assessment will be rolled out in the fall based on initial data from a survey of people who are using substances.

### Nurse Family Partnership Program:

The Health Unit has launched the Nurse Family Partnership Program, an evidenced-based, high intensity home visiting program for young first-time mothers. Connections are made with mothers early in their pregnancy and the relationship continues until their children are two years of age. The program has been heavily evaluated in other areas with good outcomes demonstrated in child and maternal mental health and child development. The Health Unit has already received a few referrals and is looking forward to implementation.

### Program Planning for 2024:

Program planning is vital in ensuring the Health Unit is providing quality, evidence-based services. Given the financial and budget challenges anticipated for 2024, the Health Unit performed a Program Budgeting and Marginal Analysis (PBMA) process by which program areas reviewed and prioritized their suite of services in order to utilize resources effectively. The prioritization process, in addition to what data shows is needed in our communities, and best practices guide program planning.

## **7. Report – Oral Health Program Update**

Employees from the Health Unit's Oral Health Department provided an update to the Board on the program.

Oral health screening was paused during the pandemic due to resources being allocated to the response and the closure of schools. Results from school-based oral health screening conducted during the 2022/2023 school year compared to the 2018/2019 school year show an increase in child urgent care needs, pit and fissure sealants required, and additional scaling, most likely the result of children not being able to access dental care during the pandemic.

The Oral Health Department has noted an increased number of children requiring dental screening and preventative services, a high need for education on our programs and dental health basics, and that dental needs are high in our region.

The Health Unit began offering fluoride varnish applications to children in daycare centres and those in JK/SK in 2014. Participation is voluntary and Health Unit dental assistants provide this service in the fall and spring of each year.

A recent evaluation of the fluoride varnish program demonstrated a positive impact on oral health. Children who received fluoride varnish applications were less likely to have decayed, missing, or filled teeth. Specifically, receiving four applications of fluoride varnish was associated with a 12% reduction in the risk of dental decay among grade two students compared to students who did not receive fluoride varnish.

### **8. New Business**

#### **8.1 Unaudited Operating Statements**

Presenter: Matthew Vrooman, Director of Corporate Services

That the draft unaudited operating statement for the nine-month period ending September 30, 2023 in the amount of \$17,153,252 be received for information.

Statements by division and expense can be viewed [here](#).

*For the complete meeting details, please see the [agenda package](#) or view our video recording [online](#).*

#### **Date of Next Meeting**

Thursday, November 16, 2023, 9:30am – 11:30am, HKPR District Health Unit, 108 Angeline Street South, Lindsay