MIDDLESEX-LONDON HEALTH UNIT

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REPORT NO. 038-17

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health and CEO

DATE: 2017 July 20

JULY PROGRAM FUNDING UPDATE

Recommendation

It is recommended that:

- 1) The Board of Health authorize the Chair to sign the amending agreement associated with the new \$250,000 opioid response funding, pending staff review of the terms of this agreement; and
- 2) That Report No: 038-17 re: July Program Funding Update be received for information.

Key Points

- On June 20, 2017, the Board received notification from Dr. Eric Hoskins, Minister of Health and Long-Term Care, that the Middlesex-London Health Unit has been approved for base funding of \$250,000.
- The additional base funding has been provided to support local opioid response initiatives.
- The terms and conditions governing the funding are not known as of the writing of this report.
- Roselle Martino, Assistant Deputy Minister, reemphasized the Ministry's earlier guidance to expect no growth funding for Mandatory Programs in 2017.
- A request has been submitted to the Minister for an additional \$1,573,019 in funding over a three-year period to address the current HIV epidemic through community-based primary care.

Opioid Response Initiatives

The Board of Health has received many reports in recent months regarding drug use in Middlesex-London. The issue of injection drug use in London is a growing concern, with more than 2.5 clean needles distributed to drug users each year.

On June 20, 2017, the Board of Health received a communication (see Appendix A) from Dr. Eric Hoskins, Minister of Health and Long-Term Care, in regard to additional base funding to support local opioid response initiatives. The Health Unit will receive up to \$250,000 in funding as part of the Province's \$15-million investment to address the current opioid crisis. The funding is intended to increase the Health Unit's staffing capacity to address the crisis, to enhance its Naloxone Program and to work on early warning and monitoring in regard to opioid overdoses. Further information from the Assistant Deputy Minister is expected regarding the terms and conditions governing the funding. As of the writing of this report, this further information has not yet been received.

2017 Growth Funding for Mandatory Programs

The Province has not yet provided funding approvals for the 2017 program-based budget grants. Responding to a follow-up question regarding base funding for opioid response, Assistant Deputy Minister Roselle Martino stated that all health units should plan for status quo, or no change in program funding from 2016. The Board-approved 2017 budget, however, plans for a 1.5% increase (\$241,968) in Mandatory Program Funding, and 0% in other program funding. Depending on the terms and conditions of the amending agreement, this may or may not create a deficit for the current fiscal year. The second quarter financial update expected at the next Finance & Facilities Committee meeting will address this question.

HIV Epidemic - Provision of Community-Based Primary Care - Funding Request

At the April 2017 Board of Health meeting, Health Unit staff presented a report outlining rising rates of HIV, hepatitis C and other diseases among people who inject drugs, and considered the development and implementation of strategies to address the growing crisis. One such strategy is to approach Deb Matthews, Deputy Premier and MPP (London North Centre), to discuss local issues surrounding the HIV epidemic and request additional funding for community-based primary care. The full proposal, including the three-year budget request, is attached as Appendix B. The request totals \$1,573,019 over the next three years and asks for four Outreach Nurses and one Harm Reduction Outreach Coordinator, along with other program costs. The request also provides details on funding already secured to help control the HIV epidemic. This amount totals \$1,813,744 over the next three years, and consists of funds reallocated in the MLHU base budget; a five-year Public Health Agency of Canada (PHAC) grant via its HIV and Hepatitis C Community Action Fund; and one-time PHAC funding for I-Track 4 surveillance. The funding request has been forwarded to Dr. Eric Hoskins, Minister of Health and Long-Term Care, for consideration.

Christopher Mackie, MD, MHSc, CCFP, FRCPC

Medical Officer of Health

Whh.