

**AGENDA  
MIDDLESEX-LONDON BOARD OF HEALTH**

Thursday, April 20, 2023 at 7 p.m.  
MLHU Board Room – CitiPlaza  
355 Wellington Street, London ON

**MISSION - MIDDLESEX-LONDON HEALTH UNIT**

The mission of the Middlesex-London Health Unit is to promote and protect the health of our community.

**MEMBERS OF THE BOARD OF HEALTH**

Matthew Newton-Reid (Chair)

Michael Steele (Vice-Chair)

Peter Cuddy

Aina DeViet

Skylar Franke

Tino Kasi

Michael McGuire

Selomon Menghsha

Michelle Smibert

Dr. Alexander Summers (Medical Officer of Health, ex-officio member)

Emily Williams (Chief Executive Officer, ex-officio member)

**SECRETARY**

Emily Williams

**TREASURER**

Emily Williams

**DISCLOSURE OF CONFLICTS OF INTEREST**

**APPROVAL OF AGENDA**

**MINUTES**

Approve: March 16, 2023 – Board of Health meeting

Receive: March 16, 2023 – Performance Appraisal Committee meeting

Item #	Delegation	Recommendatio	Information	Report Name and Number	Link to Additional Information	Overview and Lead
<b>Reports and Agenda Items</b>						
1	X	X	X	Governance Committee Meeting Summary (Verbal Update)	<a href="#">April 20, 2023 Agenda</a>	To provide an update from the April 20, 2023 Governance Committee meeting.  Lead: Chair to be determined
2		X	X	2023 Annual Service Plan and Budget Submission (Report No. 24-23)	<a href="#">Appendix A</a> <a href="#">Appendix B</a> <a href="#">Appendix C</a>	To request endorsement from the Board of Health for the 2023 Middlesex-London Health Unit Annual Service Plan and Budget Submission.  Leads: Dr. Alexander Summers, Medical Officer of Health, Emily Williams, Chief Executive Officer, Sarah Maaten, Acting Director, Public Health Foundations and David Jansseune, Assistant Director, Finance
3		X	X	Monitoring Food Affordability and Implications for Public Policy and Action (Report No. 25-23)	<a href="#">Appendix A</a> <a href="#">Appendix B</a>	To provide an update on the 2022 Nutritious Food Basket survey results and the current food affordability status in Middlesex-London.  Leads: Maureen MacCormick, Director, Healthy Living and Julie Goverde, Acting Manager, Community Health Promotion
4			X	Middlesex-London Food Policy Council Appointment Update (Verbal Update)	<a href="#">Report No. 12-23</a> <a href="#">February 16, 2023 Board of Health Minutes</a>	To provide an update on the Board of Health appointment to the Middlesex-London Food Policy Council from the February 16, 2023 Board of Health meeting.  Lead: Dr. Alexander Summers, Medical Officer of Health

5			X	Current Public Health Issues (Verbal Update)		To provide an update on current public health issues in the Middlesex-London region.  Lead: Dr. Alexander Summers, Medical Officer of Health
6			X	Medical Officer of Health Activity Report for March (Report No. 26-23)		To provide an update on external and internal meetings attended by the Medical Officer of Health since the last Board of Health meeting.  Lead: Dr. Alexander Summers, Medical Officer of Health
7			X	Chief Executive Officer Activity Report for March (Report No. 27-23)		To provide an update on external and internal meetings attended by the Chief Executive Officer since the last Board of Health meeting.  Lead: Emily Williams, Chief Executive Officer
<b>Correspondence</b>						
8			X	April Correspondence		To endorse the following item: a) Simcoe Muskoka District Health Unit re: <i>Support for 'Bill S-254 An Act to amend the Food and Drugs Act (warning label on alcoholic beverages)'</i>  To receive the following item for information: b) April 2023 Middlesex-London Board of Health External Landscape c) Public Health Sudbury & Districts re: <i>Minimum Wage Increase</i>

## OTHER BUSINESS

The next meeting of the Middlesex-London Board of Health is on Thursday, May 18, 2023 at 7 p.m.

## **CONFIDENTIAL**

The Middlesex-London Board of Health will move into a confidential session to approve previous confidential Board of Health minutes and to discuss matters which pertain to one or more of the following, as per section 239(2) of the *Municipal Act, 2001, S.O. 2001, c. 25*:

- (a) the security of the property of the municipality or local board;
- (b) personal matters about an identifiable individual, including municipal or local board employees;
- (c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- (d) labour relations or employee negotiations;
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- (g) a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- (h) information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them;
- (i) a trade secret or scientific, technical, commercial, financial or labour relations information, supplied in confidence to the municipality or local board, which, if disclosed, could reasonably be expected to prejudice significantly the competitive position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization;
- (j) a trade secret or scientific, technical, commercial or financial information that belongs to the municipality or local board and has monetary value or potential monetary value; or
- (k) a position, plan, procedure, criteria or instruction to be applied to any negotiations carried on or to be carried on by or on behalf of the municipality or local board.

## **ADJOURNMENT**



**PUBLIC SESSION – MINUTES**  
**MIDDLESEX-LONDON BOARD OF HEALTH**

Thursday, March 16, 2023 at 7 p.m.  
Microsoft Teams

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- MEMBERS PRESENT:** Matthew Reid (Chair)  
Michael Steele (Vice-Chair)  
Selomon Menghsha  
Skylar Franke (arrived at 7:10)  
Michelle Smibert  
Michael McGuire  
Aina DeViet  
Emily Williams, Chief Executive Officer (ex-officio)  
Dr. Alexander Summers, Medical Officer of Health (ex-officio)
- REGRETS:** Peter Cuddy  
Tino Kasi
- OTHERS PRESENT:** Stephanie Egelton, Executive Assistant to the Board of Health (recorder)  
Sarah Maaten, Acting Director, Office of the Medical Officer of Health  
Mary Lou Albanese, Director, Environmental Health and Infectious Disease  
Dr. Joanne Kearon, Public Health Medical Resident  
Jennifer Proulx, Acting Director, Healthy Start  
Linda Stobo, Manager, Substance Use Program Team  
Jordan Banninga, Manager, Infectious Disease Control  
David Jansseune, Assistant Director, Finance  
Dan Flaherty, Manager, Communications  
Jason Micallef, Marketing Coordinator, Communications  
Parthiv Panchal, End User Support Analyst, Information Technology

Chair Matt Reid called the meeting to order at **7 p.m.**

**DISCLOSURES OF CONFLICT OF INTEREST**

Chair Reid inquired if there were any disclosures of conflicts of interest. None were declared.

**APPROVAL OF AGENDA**

It was moved by **A. DeViet**, seconded by **M. Smibert**, *that the March 16, 2023 Board of Health meeting agenda be approved.*

Carried

**APPROVAL OF MINUTES**

It was moved by **M. Steele**, seconded by **S. Menghsha**, *that the MINUTES of the February 16, 2023 Board of Health meeting be approved.*

Carried

It was moved by **M. Steele, seconded by S. Menghsha**, that the *MINUTES of the March 9, 2023 Finance and Facilities meeting be received.*

Carried

## **NEW BUSINESS**

### **Performance Appraisal Committee Meeting Summary (Verbal)**

Chair of the Performance Appraisal Committee, Michele Smibert provided a verbal update from the March 16, 2023 meeting.

There was no discussion on this report.

It was moved by **M. Smibert, seconded by M. Steele**, that the Board of Health:

- 1) Receive Report No. 01-23PA, re: 2023 Medical Officer of Health and Chief Executive Officer Performance Appraisals Procedures for information;
- 2) Amend the Appendices to Policy G-050 MOH and CEO Performance Appraisals Procedure to conduct a 360 external partner Performance Appraisal process on a bi-annual basis;
- 3) Amend the Appendices to Policy G-050 MOH and CEO Performance Appraisals Procedure to conduct an internal Performance Appraisal process on an annual basis; and
- 4) Approve the performance appraisal process, supporting documents, and timelines as amended (Appendix A).

Carried

### **City of London Funding to Support Cannabis Programming (Report No. 17-23)**

Dr. Alexander Summers, Medical Officer of Health (on behalf of Maureen MacCormick, Director, Healthy Living) introduced Linda Stobo, Manager, Substance Use Program Team to discuss City of London funding to support the Health Unit's work in cannabis programming.

The Health Unit has an excellent relationship with municipal and cannabis enforcement partners through a partnership established prior to legalization in 2018. The goal of this collaboration was to anticipate needs for the community once cannabis was legalized. The provincial government, in anticipation of these needs, have provided municipalities (since 2018) funding through the Cannabis Legalization Initiative Fund (CLIF) to offset costs. Funds were used to increase health promotion capacity related to cannabis and public health enforcement officers. In 2022, the Health Unit's awareness campaigns have focused on preventing unintentional poisonings and misinformation regarding impacts of cannabis on mental health. For 2023, the focus will be on planning targeted messaging to the young adult population on impaired driving, mental health and brain development. Next week is Poison Prevention Week, which the Health Unit will be providing messaging on preventing cannabis edible overdose. At the end of 2023, the CLIF funding will expire for the Health Unit.

Board Member Aina DeViet inquired why cannabis poisoning rates in Middlesex-London are more than twice as high as compared to the provincial rate. L. Stobo noted that available data predates when cannabis was legalized in 2018, and post legalization data is not available. L. Stobo noted that generally, the increase in serious cannabis poisonings to hospitals in Ontario is with non-legal products obtained online or sold in unauthorized establishments.

Board Member A. DeViet inquired if there are long-term impacts on those who experience a serious cannabis poisoning incident. L. Stobo noted that young children who experience a cannabis poisoning can become seriously ill enough to be admitted to hospital, which at times can cause damage to the memory/impulse control part of the brain. Dr. Summers highlighted that there are acute poisoning effects in

children (consuming a cannabis edible disguised as a treat) which may result in sedation, seizures, or other neurological impairment. Dr. Summers noted that there is emerging data on the negative long-term impacts of youth who start using cannabis at an age where the brain still developing, and its impacts on mental illness or increased anxiety. Dr. Summers further noted that the Health Unit will need to continue monitoring data and investigate impacts after CLIF expires at the end of 2023.

It was moved by **M. McGuire, seconded by M. Smibert**, that the Board of Health receive Report No. 17-23, re: "City of London Funding to Support Cannabis Programming" for information.

Carried

### **Burden of Health Attributable to Smoking and Alcohol Consumption in Middlesex-London (Report No. 18-23)**

Sarah Maaten, Acting Director, Office of the Medical Officer of Health introduced this report, and noted the collaboration on this report between the Substance Use Program and Population Health Assessment and Surveillance teams.

L. Stobo provided an overview of the report. On February 6, 2023, Ontario Health and Public Health Ontario released a report on the burden of health conditions attributable to smoking and alcohol by public health unit in Ontario. This report estimates the prevalence of smoking and alcohol consumption, and highlights burden of disease linked to smoking and alcohol consumption across Ontario. The data includes estimates of the number of deaths, hospitalizations and emergency department visits associated with smoking and alcohol consumption for Ontario and by public health unit.

Highlights of this report included the following:

- Between 2015 and 2017, 18.1% of Middlesex-London population 20 years of age and older reported smoking on a daily or occasional basis.
- Between 2015 and 2017, 36.5% of the Middlesex-London population 19 years of age and older reported that they had more than two drinks per week.
- Attributable harm outcomes related to smoking in the Middlesex-London population 35 years of age and older resulted in 597 deaths, 2,082 hospitalizations and 3,917 emergency department visits. These local outcomes (related to smoking) resulted in 16.3% of all deaths, 7.9% of all hospitalizations and 3.2% of emergency department visits.
- Attributable harm outcomes related to alcohol consumption in the Middlesex-London population 15 years of age and older resulted in 154 deaths, 842 hospitalizations and 6,968 emergency department visits. These local outcomes (related to alcohol consumption) resulted in 4.1% of all deaths, 2.4% of all hospitalizations, and 3.8% of all emergency department visits.
- The data notes that while progress has been made in decreasing the proportion of people who regularly smoke, there remains a substantial population health burden.

L. Stobo provided an overview of current initiatives within the Substance Use Program Team, which include work with the Southwest Tobacco Control Area Network, social marketing campaigns (Dog and Tom), protection and enforcement, and cessation work. The Substance Use Program Team is actively working on a strategy for the alcohol program which includes promotion of new safe consumption of alcohol guidelines on the health unit website, staff engagement (using internal meetings), work with the Polysubstance Public Health Working Group, (RethinkYourDrinking.com) and work with the Ontario Public Health Association's Alcohol Policy Group.

Board Member A. DeViet inquired if a report on harms attributable to smoking and alcohol consumption in Middlesex-London can be created, showing an urban and rural data split. S. Maaten noted that the Population Health Assessment and Surveillance team could create an urban and rural split of data when there are enough years of data to see.

It was moved by **M. Smibert, second by M. Steele**, *that the Board of Health receive Report No. 18-23, re: "Burden of Health Attributable to Smoking and Alcohol Consumption in Middlesex-London" for information.*

Carried

## **2022 Mpox Outbreak Summary (Report No. 19-23)**

Mary Lou Albanese, Director, Environmental Health and Infectious Disease provided a brief overview of Mpox activity provincially.

Highlights included the following:

- Since May 1, 2022, 703 (an additional 12 confirmed since data was released) confirmed cases of Mpox have been reported in Ontario.
- Over 99% of cases identify as male and the most common risk factor has been sexual or intimate contact with a new partner and or having more than one sexual partner.
- Changes in sexual practices among the impacted population, timely case and contact management, and the Mpox vaccine (Imvamune) helped to control the spread of Mpox in Ontario.
- The data shows that the largest amount of confirmed cases was in July 2022.
- As of December 7, 2022, 687 individuals confirmed to have contracted Mpox had the following vaccination status:
  - o 79.2% had not received Imvamune prior to symptom onset.
  - o 20.8% had received at least one dose prior to symptom onset.

M. Albanese introduced Jordan Banninga, Manager, Infectious Disease Control to provide a brief overview of the 2022 Mpox Outbreak in Middlesex-London.

Highlights included the following:

- It was noted that Mpox is similar to smallpox and transmissibility between close contacts is high. The experience with the COVID-19 pandemic response assisted in identifying contacts, conducting case and contact management, and working with community partners.
- There were health promotion materials on Mpox created by the Communications and Sexual Health teams, which were distributed to community partners.
- It was noted that the rise of Mpox was occurring around the same time as Pride events, which was an opportunity for engagement on prevention and vaccination with community partners.
- The Health Unit's Sexual Health clinic saw many initially identified cases locally and advised the Infectious Disease Control team for case and contact management purposes.
- Middlesex-London reported the first confirmed case of Mpox on June 13, 2022 and saw a cluster of confirmed cases between July 7-19, 2022.

J. Banninga noted that the Health Unit's response to Mpox was a collaborative effort between the Sexual Health, Infectious Disease Control, and Vaccine Preventable Disease teams.

It was moved by **A. DeViet, seconded by S. Franke**, *that the Board of Health receive Report No. 19-23 re: "2022 Mpox Outbreak Summary" for information.*

Carried

### **Current Public Health Issues (Verbal)**

Dr. Alexander Summers, Medical Officer of Health provided a verbal update on current public health issues within the region.

#### Health and Homelessness

- Health and Homelessness work has been shared via media partners and been endorsed by City of London Council.
- There is a proposed development of 24/7 integrated hubs, as part of the continuum of housing and health care. These hubs would be supported by the collective work of several agencies.
- MLHU leadership continues to support conversations around governance.

#### Immunization of School Pupils Act work

- The third of six suspension date for students not in compliance with the *Immunization of School Pupils Act* was earlier in March.
- Implementation of the ISPA continues to go well, and will strengthen vaccination coverage in Middlesex-London.

#### Respiratory Season

- There will be a spring booster campaign for high-risk individuals for whom it has been more than 6 months since their last COVID-19 vaccine.
- High-risk individuals likely include:
  - o Adults over the age of 65;
  - o Adults 18-64 with a moderate or severe immunocompromising condition; and
  - o Residents of long-term care homes and other congregate living settings for seniors or those with complex medical care needs.
- There will not be a spring booster campaign for the general population but there are plans for a fall booster campaign.
- There was an Influenza A spike from October through to December. There are early signs of an increase in Influenza B infections, making this a bimodal season.
- No significant impacts anticipated on healthcare system capacity.

It was moved by **S. Franke, seconded by M. Smibert**, that the Board of Health receive the verbal report re: "Current Public Health Issues" for information.

Carried

### **Medical Officer of Health Activity Report for February (Report No. 20-23)**

Dr. Alexander Summers, Medical Officer of Health, presented the Medical Officer of Health activity report for February.

There was no discussion on this report.

It was moved by **S. Franke, seconded by M. McGuire**, that the Board of Health receive Report No. 20-23 re: "Medical Officer of Health Activity Report for February" for information.

Carried

### **Chief Executive Officer Activity Report for February (Report No. 21-23)**

Emily Williams, Chief Executive Officer, presented the Chief Executive Officer activity report for February.

There was no discussion on this report.

It was moved by **S. Franke, seconded by M. McGuire**, that the Board of Health receive Report No. 21-23 re: "*Chief Executive Officer Activity Report for February*" for information.

Carried

## Correspondence

Chair Reid requested that Dr. Summers highlight specific correspondence items to the Board.

Dr. Summers highlighted correspondence g) re: *Chief Medical Officer of Health – 2022 Annual Report*. This annual report from the Chief Medical Officer of Health (Dr. Kieran Moore) highlights pandemic preparedness and the health system overall. The CMOH intends to report annually to the provincial legislature on the readiness of public health system to respond to a pandemic. Themes include sector/system readiness, community readiness, and societal readiness. This report highlights to the public the importance of sustained investment in public health and emergency preparedness.

In correspondence h) re: *Association of Local Public Health Agencies re: in response to the Chief Medical Officer of Health's 2022 Annual Report*, the Association of Local Public Health Agencies (alPHA) provides context on the report.

Dr. Summers noted that the Board has three (3) items for endorsement.

For correspondence i) re: *Public Health Sudbury & Districts re: Provincial Funding for Consumption and Treatment Services*, Dr. Summers noted that Middlesex-London has permanent and stable funding for the Carepoint consumption and treatment site, but many other communities (such as Sudbury & Districts) do not.

Dr. Summers highlighted that for correspondence j) re: *Association of Local Public Health Agencies re: Boards of Health – Order in Council Appointments*, it is important to have a full complement on the Board of Health to make governance decisions. Further, Dr. Summers noted that for correspondence k re: *Association of Local Public Health Agencies re: Pre-Budget Submission*, alPHA highlights the needs of public health for sustained budgeting and addressing inflationary pressures.

It was moved by **S. Franke, seconded by A. DeViet**, that the Board of Health receive the following items for information:

- a. *Public Health Sudbury & Districts re: 2022 COVID-19 Response by the Numbers and Recovery Progress Report*
- b. *Public Health Sudbury & Districts re: Community Engagement to Address Food Insecurity*
- c. *Health Canada re: response to August 2, 2022 consultation letter on the Tobacco and Vaping Products Act*
- d. *March 2023 Middlesex-London Board of Health External Landscape*
- e. *Windsor-Essex County Health Unit re: Letter of Support – Physical Literacy for Healthy Active Children*
- f. *North Bay Parry Sound District Health Unit re: Food Insecurity in Ontario*
- g. *Chief Medical Officer of Health – 2022 Annual Report*
- h. *Association of Local Public Health Agencies re: in response to the Chief Medical Officer of Health's 2022 Annual Report*

Carried

It was moved by **M. Smibert, seconded by M. Steele**, that the Board of Health endorse the following items:

- i. *Public Health Sudbury & Districts re: Provincial Funding for Consumption and Treatment Services*
- j. *Association of Local Public Health Agencies re: Boards of Health – Order in Council Appointments*
- k. *Association of Local Public Health Agencies re: Pre-Budget Submission*

Carried

### **Finance and Facilities Committee Meeting Summary (Report No. 22-23)**

Mike Steele, Chair of the Finance and Facilities Committee provided an update on reports heard at the March 9, 2023 Finance and Facilities Committee meeting.

Emily Williams, Chief Executive Officer provided a presentation of the 2023 budget process that was heard by the Committee:

#### Funding assumptions

- Flat provincial funding to 2022, with the Health Unit covering all inflationary pressures
- Mitigation funding continuing for 2023
- COVID-19 extraordinary funding will have the same process as 2022
- Inflationary pressures
  - Salary and benefits at \$597,000
  - Corporate expenses at \$300,000
- Additional pressures included a plan to bring gapping to 2021 levels (\$330,000 pressure) and a plan to budget for an accelerated payment plan on the variable bank loan (\$200,000).
- The total target was \$1.2 million.

#### Current State and Changes to Funding

E. Williams explained the current state of funding. Funding from the provincial government remains unknown, with the budget anticipated on March 23, 2023. Currently, most public health units in Ontario are budgeting 1-2% increases - municipalities will bear these costs if provincial funding does not come through.

#### Budget Overview

Dave Jansseune, Assistant Director, Finance provided a budget overview.

Financial changes to the target include:

- Staffing inflation (initial estimate was \$597,000 and revised to \$478,470)
- Corporate inflation (initial estimate was \$300,000 and revised to \$306,184)
- OMERS pension increase for non-full-time staff (initial was unknown and revised to \$199,452)
- Decrease to the gapping budget (initial was \$300,000 and revised to \$54,453)

The total target of savings is now \$515,118. Salaries and benefit costs for 2023 is at \$25,917,470, compared to \$25,767,797 from 2022.

#### Disinvestments

Disinvestments have been discussed by the Senior Leadership Team in accordance with the public health pyramid and critical business infrastructure frameworks.

Pre-approved disinvestments by the Board of Health at the November 10, 2022 meeting include:

- General Expense reduction
- Cell phone reduction
- Student reductions

100% Funded – COVID-19, Seniors Dental and MLHU 2

COVID-19 funding supports the vaccine and case and contact management programs. For 2023, the total budget from the Ministry of Health is \$10,655,019, which is a \$17,413,875 decrease from 2022.

The Seniors' Dental program supports operating costs for the program only. For 2023, the total budget is \$3,693,148. The budget request has increased to include staffing increases to support the expansion of the program, including the opening of the Strathroy operatories.

MLHU 2 includes Best Beginnings (\$2,483,000), FoodNet (\$116,000), Smart Start for Babies (\$152,000) and Shared Library Services (\$108,000).

There was no discussion on Report No. 05-23FFC – 2022 Vendor and Visa Payments.

It was moved by **M. Steele, seconded by A. DeViet**, *that the Board of Health:*

- 1) *Receive Report No. 04-23FFC re: "Proposed Revised 2023 Budget" for information; and*
- 2) *Receive Report No. 05-23FFC re: "2022 Vendor and VISA Payments" for information.*

Carried

**OTHER BUSINESS**

The next meeting of the Middlesex-London Board of Health is on Thursday, April 20, 2023, at 7 p.m.

**CONFIDENTIAL**

At **8:26 p.m.**, it was moved by **S. Franke, seconded by M. McGuire**, *that the Board of Health will move in-camera to consider matters regarding labour relations or employee negotiations, personal matters about an identifiable individual, including Board employees, advice that is subject to solicitor-client privilege, including communications necessary for that purpose, litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board and to approve previous confidential Board of Health minutes.*

Carried

At **9:23 p.m.**, it was moved by **M. Steele, seconded by M. McGuire**, *that the Board of Health return to public session from closed session.*

Carried

**ADJOURNMENT**

At **9:23 p.m.**, it was moved by **M. Steele, seconded by M. Smibert**, *that the meeting be adjourned.*

Carried

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**MATTHEW REID**  
Chair

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**EMILY WILLIAMS**  
Secretary

DRAFT



**PUBLIC SESSION – MINUTES**  
**MIDDLESEX-LONDON BOARD OF HEALTH**  
**PERFORMANCE APPRAISAL COMMITTEE**

Thursday, March 16, 2023 at 6 p.m.  
Microsoft Teams

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**MEMBERS PRESENT:** Michelle Smibert (Chair)  
Matthew Reid  
Michael Steele  
Aina DeViet  
Emily Williams, Chief Executive Officer (ex-officio, exited at 6:01)

**OTHERS PRESENT:** Stephanie Egelton, Executive Assistant to the Board of Health (recorder)

**REGRETS:** Dr. Alexander Summers, Medical Officer of Health (ex-officio)  
Tino Kasi

At **5:58 p.m.**, Secretary and Treasurer Emily Williams called the meeting to order.

**MEETING PROCEDURES**

**Election of 2023 Performance Appraisal Committee Chair**

Secretary and Treasurer Emily Williams opened the floor to nominations for Chair of the Performance Appraisal Committee for 2023.

It was moved by **M. Reid, seconded by A. DeViet**, *that Michelle Smibert be nominated for Chair of the Performance Appraisal Committee for 2023.*

Carried

Michelle Smibert accepted the nomination.

E. Williams called three times for further nominations. None were forthcoming.

It was moved by **M. Reid, seconded by A. DeViet**, *that Michelle Smibert be acclaimed as Chair of the Performance Appraisal Committee for 2023.*

Carried

**DISCLOSURES OF CONFLICT OF INTEREST**

Chair Smibert inquired if there were any disclosures of conflicts of interest. E. Williams declared a conflict of interest, as she is an ex-officio member of the Board of Health while holding the role of Chief Executive Officer.

E. Williams exited the meeting at 6:01 p.m.

**APPROVAL OF AGENDA**

It was moved by **M. Steele, seconded by M. Reid**, *that the AGENDA for the March 16, 2023 Performance Appraisal Committee meeting be approved.*

Carried

### **APPROVAL OF MINUTES**

It was moved by **A. DeViet**, seconded by **M. Reid**, that the *MINUTES* of the September 28, 2022 Performance Appraisal Committee meeting be approved.

Carried

### **NEW BUSINESS**

#### **2023 Medical Officer of Health and Chief Executive Officer Performance Appraisal Procedures (Report No. 01-23PA)**

This report was introduced by Board Chair, Matt Reid.

M. Reid provided a background on the Committee and the process for the Medical Officer of Health and Chief Executive Officer Performance Appraisals.

M. Reid noted that the recommendation to the Committee (to recommend to the Board) is to adjust the timelines on having both an internal and external 360 review each year. The stakeholders apart of the external 360 review are busy individuals and the review (a survey) may not get high uptake annually as opposed to bi-annually. It was noted that there would still be a performance appraisal conducted each year, and it would alternate with being just an internal performance review and a full 360 internal and external review every other year.

The internal review would include direct reports of the Medical Officer of Health and Chief Executive Officer and members of the Board of Health. Introduced in 2022, the Chair of the Board would also meet with direct reports for approximately 30-45 minutes each to discuss any compliments, concerns or answer questions in a confidential setting. The feedback from the meetings with direct reports may be brought into the formal performance appraisal and may support validation of potential development, new processes and goals.

M. Reid noted that it is anticipated pending the Board's approval that meetings between the Chair and direct reports would occur in August, ahead of next meeting in October.

It was moved by **M. Steele**, seconded by **A. DeViet**, that the Performance Appraisal Committee recommend to the Board of Health to:

- 1) Receive Report No. 01-23PA, re: 2023 Medical Officer of Health and Chief Executive Officer Performance Appraisals Procedures for information;
- 2) Amend the Appendices to Policy G-050 MOH and CEO Performance Appraisals Procedure to conduct a 360 external partner Performance Appraisal process on a bi-annual basis;
- 3) Amend the Appendices to Policy G-050 MOH and CEO Performance Appraisals Procedure to conduct an internal Performance Appraisal process on an annual basis; and
- 4) Approve the performance appraisal process, supporting documents, and timelines as amended ([Appendix A](#)).

Carried

### **OTHER BUSINESS**

The next meeting of the Performance Appraisal Committee is on Thursday, May 18 at 6 p.m.

### **ADJOURNMENT**

At 6:11 p.m., it was moved by **M. Reid**, seconded by **M. Steele**, that the meeting be adjourned.

Carried

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**MICHELLE SMIBERT**  
Committee Chair

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**MATTHEW REID**  
Board Chair

DRAFT



TO: Chair and Members of the Board of Health

FROM: Dr. Alexander Summers, Medical Officer of Health  
Emily Williams, Chief Executive Officer

DATE: 2023 April 20

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## 2023 ANNUAL SERVICE PLAN AND BUDGET SUBMISSION

### Recommendation

*It is recommended that the Board of Health:*

- 1) *Receive Report No. 24-23, re: “2023 Annual Service Plan and Budget Submission” for information; and*
- 2) *Approve the 2023 Middlesex-London Health Unit’s Annual Service Plan and Budget Submission to the Ministry of Health.*

### Key Points

- The Annual Service Plan and Budget Submission (ASP) includes program details and a budget submission for shared funded programs and Seniors Dental only (excludes all other 100% funded programs).
- The budget submission is identical to the Board approved budget, but the format has been changed from Division & Department to Health Standard & Program.
- [Appendix A](#) is a summary of the Board Approved budget totaling \$49,650,807.
- [Appendix B](#) is a summary of the ASP budget totaling \$33,808,705. It also includes a reconciliation that ties back to the \$49,650,807.
- [Appendix C](#) includes the Annual Service Plan and Budget Submission submitted to the Ministry of Health on the deadline of April 3, 2023.

### Background

Each year the Ministry of Health requires local public health units to communicate their program plans and budgeted expenditures through the Annual Service Plan and Budget Submission (referred to as the “Annual Service Plan” (ASP). The ASP includes a narrative component to describe the programs planned to be delivered in accordance with the Ontario Public Health Standards (OPHS) and budget information on Ministry of Health funded public health programs, including the Foundational Standards and Program Standards. The Ministry of Health has provided each health unit with a template for the ASP. This plan is the start of the ministry reporting cycle that includes quarterly Standard Activity Reports (SAR) and the Annual Report and Attestation.

Over the last few years, an abridged version of the ASP focusing only on the financial component was requested due to the COVID-19 pandemic response, therefore the last full ASP was completed in 2020.

### 2023 Annual Service Plan

This year each team across MLHU was required to describe their programs and interventions for the ASP. Some teams also needed to adjust their documentation to align with several new Ministry standardized program names, which are designed to ensure additional consistency across all the health units. The ASP also includes a community assessment section that provides a high-level description of the local community’s population health needs and priorities. The program plans and budget information are organized by the Ontario Public Health Standards.

[Appendix A](#) is a summary of the Board approved budget totaling \$49,650,807.

[Appendix B](#) is a summary of the ASP budget totaling \$33,808,705. It also includes a reconciliation that ties back to the \$49,650,807.

The 2023 ASP was submitted to the Ministry on the deadline of April 3, 2023, with a note saying that our board has not yet had an opportunity to endorse it. The ASP, with associated program and budget information, is found in [Appendix C](#).

### **Next Steps**

Endorsement from the Board is required to be sent to the Ministry to complete the submission process.

This report was prepared by the Manager, Strategy, Planning and Performance and the Assistant Director, Finance.



Alexander Summers, MD, MPH, CCFP, FRCPC  
Medical Officer of Health



Emily Williams, BScN, RN, MBA, CNE  
Chief Executive Officer

MIDDLESEX-LONDON HEALTH UNIT  
2023 Board of Health Budget Summary

Division / Department	B U D G E T S		Incr / (Decr) over 2022		F T E		Incr / (Decr)
	2022	2023	\$'s	%	2022	2023	Over 2022
<b>Healthy Organization</b>							
Office of the Director	\$ 368,221	\$ 485,532	\$ 117,311	31.9%	1.50	2.00	0.50
Communications (Communications & Healthcare Provider Outreach)	605,385	637,176	\$ 31,791	5.3%	5.70	6.50	0.80
Finance	387,174	510,947	\$ 123,773	32.0%	4.00	5.00	1.00
Human Resources	863,841	1,018,212	\$ 154,371	17.9%	8.50	9.50	1.00
Information Technology (IT)	1,522,128	1,568,230	\$ 46,102	3.0%	3.00	4.00	1.00
Procurement & Operations	198,508	298,309	\$ 99,801	50.3%	2.00	3.00	1.00
Strategy, Risk & Privacy (name changed to Strategic Projects)	449,909	251,165	\$ (198,744)	-44.2%	4.00	2.50	(1.50)
IT - Special Projects - Emergency Medical Records (EMR)	200,000	-	\$ (200,000)	-100.0%	2.00	0.00	(2.00)
<b>Total Healthy Organization</b>	<b>\$ 4,595,166</b>	<b>\$ 4,769,571</b>	<b>\$ 174,405</b>	<b>3.8%</b>	<b>30.70</b>	<b>32.50</b>	<b>1.80</b>
<b>Healthy Living Division</b>							
Office of the Director	\$ 272,514	\$ 237,649	\$ (34,865)	-12.8%	2.00	1.50	(0.50)
Elementary School Team	-	1,601,436	\$ 1,601,436	100.0%	-	14.00	14.00
Substance Use Team	-	1,296,609	\$ 1,296,609	100.0%	-	12.90	12.90
City of London Funding for Cannabis Legalization (flow-through with offset funding)	-	188,894	\$ 188,894	100.0%	-	2.00	2.00
Community Health Promotion	-	1,591,954	\$ 1,591,954	100.0%	-	14.50	14.50
Oral Health	1,032,418	827,958	\$ (204,460)	-19.8%	12.00	8.90	(3.10)
Senior Dental Health (flow-through with offset funding)	1,861,400	3,693,148	\$ 1,831,748	98.4%	7.50	19.10	11.60
Southwest Tobacco Control Area Network	447,858	167,853	\$ (280,005)	-62.5%	2.40	0.60	(1.80)
Secondary School Team	-	1,046,882	\$ 1,046,882	100.0%	-	9.00	9.00
School Focused Nurses Initiative (COVID-19 Recovery Efforts)	-	1,415,572	\$ 1,415,572	100.0%	-	14.08	14.08
Harvest Bucks (flow-through with offset funding)	147,000	-	\$ (147,000)	-100.0%	-	-	0.00
Child Health - obsolete	1,713,587	-	\$ (1,713,587)	-100.0%	15.00	-	(15.00)
Chronic Disease and Tobacco Control - obsolete	1,762,405	-	\$ (1,762,405)	-100.0%	15.40	-	(15.40)
Healthy Communities and Injury Prevention - obsolete	1,272,365	-	\$ (1,272,365)	-100.0%	11.20	-	(11.20)
Young Adult Health - obsolete	1,148,143	-	\$ (1,148,143)	-100.0%	10.00	-	(10.00)
<b>Total Healthy Living Division</b>	<b>\$ 9,657,690</b>	<b>\$ 12,067,955</b>	<b>\$ 2,410,265</b>	<b>25.0%</b>	<b>75.50</b>	<b>96.58</b>	<b>21.08</b>
<b>Officer of the Medical Officer of Health</b>							
Office of the Medical Officer of Health	\$ 518,174	\$ 626,643	\$ 108,469	20.9%	2.30	3.00	0.70
Associate Medical Officer of Health	366,570	288,204	\$ (78,366)	-21.4%	1.50	1.00	(0.50)
Clinical Support Team	933,393	-	\$ (933,393)	-100.0%	11.25	-	-
Population Health Assessment & Surveillance	616,675	603,768	\$ (12,907)	-2.1%	5.50	5.00	(0.50)
Program Planning & Evaluation	899,643	1,137,402	\$ 237,759	26.4%	9.00	11.00	2.00
Health Equity/SDOH and Nursing Practice Lead	-	934,488	\$ 934,488	100.0%	-	7.80	(0.50)
<b>Total Officer of the Medical Officer of Health</b>	<b>\$ 3,334,455</b>	<b>\$ 3,590,505</b>	<b>\$ 256,050</b>	<b>7.7%</b>	<b>29.55</b>	<b>27.80</b>	<b>0.20</b>
<b>Environmental Health &amp; Infectious Disease Division</b>							
Office of the Director	\$ 261,714	\$ 238,024	\$ (23,690)	-9.1%	2.00	1.50	(0.50)
Community Outreach & Clinical Support Team	-	1,088,012	\$ 1,088,012	100.0%	-	11.60	0.35
Emergency Management	134,918	-	\$ (134,918)	-100.0%	1.00	-	-
Food Safety & Healthy Environments	1,828,009	1,657,793	\$ (170,216)	-9.3%	14.00	16.00	2.00
Infectious Disease Control (includes FoodNet from MLHU2)	1,812,994	1,755,777	\$ (57,217)	-3.2%	16.00	16.00	(0.90)
Safe Water, Rabies & Vector-Borne Disease	1,362,036	1,437,086	\$ 75,050	5.5%	16.02	13.10	(2.92)
Sexual Health	2,844,192	2,486,903	\$ (357,289)	-12.6%	16.87	14.87	(2.00)
Vaccine Preventable Disease	1,635,263	1,676,417	\$ 41,154	2.5%	16.54	17.54	1.00
COVID-19 (2021 Budget & FTE Adjusted)	27,224,855	10,655,019	\$ (16,569,836)	-60.9%	219.60	78.59	(159.26)
COVID-19 Recovery Efforts	1,570,039	-	\$ (1,570,039)	-100.0%	18.25	-	-
<b>Total Environmental Health &amp; Infectious Disease Division</b>	<b>\$ 38,674,020</b>	<b>\$ 20,995,032</b>	<b>\$ (17,678,988)</b>	<b>-45.7%</b>	<b>321.18</b>	<b>169.20</b>	<b>(162.23)</b>
<b>Healthy Start Division</b>							
Office of the Director	\$ 218,155	\$ 213,375	\$ (4,780)	-2.2%	1.70	1.70	0.00
Best Beginnings (restructured to form Team 1 and Team 2)(includes MLHU2)	3,333,914	2,448,366	\$ (885,548)	-26.6%	31.80	-	(31.80)
Early Years Community Health Promotion	-	1,194,754	\$ 1,194,754	100.0%	-	10.40	10.40
Healthy Beginnings Visiting & Group Programs	-	1,788,610	\$ 1,788,610	100.0%	-	16.30	16.30
Healthy Families Home Visiting	-	563,260	\$ 563,260	100.0%	-	27.50	27.50
Smart Start for Babies (from MLHU2)	-	150,749	\$ 150,749	100.0%	-	0.80	0.80
Early Years Health (restructured to form Team 2 and Team 3)	1,599,221	-	\$ (1,599,221)	-100.0%	14.00	-	(14.00)
Reproductive Health (restructured to form Team 1 and Team 3)	1,217,834	-	\$ (1,217,834)	-100.0%	12.00	-	(12.00)
Screening Assessment and Intervention	-	-	\$ -	100.0%	-	-	0.00
Teams 1, 2, 3 - General Expenses	211,546	-	\$ (211,546)	-100.0%	1.50	-	(1.50)
<b>Total Healthy Start Division</b>	<b>\$ 6,580,670</b>	<b>\$ 6,359,113</b>	<b>\$ (221,557)</b>	<b>-3.4%</b>	<b>61.00</b>	<b>56.70</b>	<b>(4.30)</b>
<b>Office of the Chief Nursing Officer</b>	<b>\$ 974,472</b>	<b>\$ -</b>	<b>\$ (974,472)</b>	<b>-100.0%</b>	<b>8.30</b>	<b>-</b>	<b>-</b>
<b>General Expenses &amp; Revenues</b>	<b>\$ 3,107,301</b>	<b>\$ 3,407,946</b>	<b>\$ 300,645</b>	<b>9.7%</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Expected Agency Gapping Budget</b>	<b>\$ (1,613,768)</b>	<b>\$ (1,539,315)</b>	<b>\$ 74,453</b>	<b>-4.6%</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>TOTAL MIDDLESEX-LONDON HEALTH UNIT EXPENDITURES</b>	<b>\$ 65,310,006</b>	<b>\$ 49,650,807</b>	<b>\$ (15,659,199)</b>	<b>-24.0%</b>	<b>526.23</b>	<b>382.78</b>	<b>50.25</b>
<b>Funding Sources</b>							
Ministry of Health & Long-Term Care (Cost-Shared)	\$ 20,004,565	\$ 20,004,600	\$ 35	0.0%	-	-	-
MOH / AMOH Compensation Initiative	85,800	85,800	\$ -	0.0%	-	-	-
The City of London	7,344,798	7,344,798	\$ -	0.0%	-	-	-
The County of Middlesex	1,404,859	1,404,859	\$ -	0.0%	-	-	-
Ministry of Health & Long-Term Care (100%)	-	-	\$ -	100.0%	-	-	-
Ministry of Health & Long-Term Care - mitigation funding	1,361,300	1,361,300	\$ -	0.0%	-	-	-
Ministry of Health & Long-Term Care (100%) - COVID-19	28,794,894	10,655,019	\$ (18,139,875)	-63.0%	-	-	-
Ministry of Health & Long-Term Care (100%) - School Focused Nurses Initiative	-	1,415,572	\$ 1,415,572	100.0%	-	-	-
Ministry of Health & Long-Term Care (100%) - Projects (EMR)	200,000	-	\$ (200,000)	-100.0%	-	-	-
Ministry of Health & Long-Term Care (100% - Senior Dental )	1,861,400	3,693,148	\$ 1,831,748	98.4%	-	-	-
Ministry of Children, Community & Social Services (100%)	2,483,313	2,448,366	\$ (34,947)	-1.4%	-	-	-
City of London - CLIF Tobacco Enforcement	415,798	188,894	\$ (226,904)	-54.6%	-	-	-
Public Health Agency of Canada	322,130	269,728	\$ (52,402)	-16.3%	-	-	-
Public Health - Ontario	104,223	105,015	\$ 792	0.8%	-	-	-
Other Revenue	779,926	673,708	\$ (106,218)	-13.6%	-	-	-
Harvest Bucks (flow-through with offset expenses)	147,000	-	\$ (147,000)	-100.0%	-	-	-
<b>TOTAL MIDDLESEX-LONDON HEALTH UNIT EXPENDITURES</b>	<b>\$ 65,310,006</b>	<b>\$ 49,650,807</b>	<b>\$ (15,659,199)</b>	<b>-24.0%</b>	<b>-</b>	<b>-</b>	<b>-</b>

## MIDDLESEX-LONDON HEALTH UNIT - 2023 ASP Budget Summary

Health Standard / Program	Budget	FTE
<b>Foundational Standards</b>		
Effective Public Health Practice	\$ 2,241,360	22.03
Population Health Assessment and Surveillance	507,803	4.26
Health Equity	394,163	3.62
Emergency Management	22,565	0.10
<b>Total Foundational Standards</b>	<b>\$ 3,165,891</b>	<b>30.01</b>
<b>Chronic Disease Prevention Well-Being</b>		
Menu Labelling	\$ 81,920	0.85
Non-Mandatory Oral Health	597,775	6.77
Ontario Seniors Dental Care	3,693,148	19.10
Tanning Beds	16,919	0.17
Food Systems	404,913	3.88
Active Transport and the Built Environment	370,918	3.60
Mental Health and Wellness	385,706	3.74
<b>Total Chronic Disease Prevention Well-Being</b>	<b>\$ 5,551,299</b>	<b>38.11</b>
<b>Food Safety</b>		
Food Safety	\$ 1,309,152	13.23
<b>Total Food Safety</b>	<b>\$ 1,309,152</b>	<b>13.23</b>
<b>Healthy Environments</b>		
Health Hazard Response	\$ 360,354	3.67
Healthy Environment and Climate Change	108,136	1.02
<b>Total Healthy Environments</b>	<b>\$ 468,490</b>	<b>4.69</b>
<b>Healthy Growth and Development</b>		
Breastfeeding and Infant Feeding	\$ 638,245	6.18
Growth and Development	1,105,796	10.44
Healthy Pregnancies	801,354	7.79
Healthy Sexuality	108,765	0.87
Mental Health Promotion	454,679	4.34
Preconception Health	45,511	0.43
<b>Total Healthy Growth and Development</b>	<b>\$ 3,154,350</b>	<b>30.05</b>
<b>Immunization</b>		
Community Based Immunization Outreach	\$ 6,889	0.05
Immunization Monitoring and Surveillance	111,892	1.30
Vaccine Administration	545,914	6.32
Vaccine Management	199,454	2.34
<b>Total Immunization</b>	<b>\$ 864,149</b>	<b>10.01</b>
<b>Infectious and Communicable Disease Prevention and Control</b>		
Vector-Borne Diseases	\$ 771,996	7.32
Infectious Disease Control	1,202,085	13.86
Rabies and Zoonotic Disease	269,627	2.67
Sexually Transmitted and Blood-Borne Disease	2,463,447	20.89
<b>Total ICDPC</b>	<b>\$ 4,707,155</b>	<b>44.74</b>
<b>Safe Water</b>		
Drinking Water	\$ 166,514	1.51
Recreational Water	241,035	2.38
<b>Total Safe Water</b>	<b>\$ 407,549</b>	<b>3.89</b>
<b>School Health</b>		
Healthy Smiles Ontario	\$ 144,283	1.55
Oral Health Assessment and Surveillance	195,656	2.19
Child Visual Health and Vision Screening	13,540	0.13
Immunization for Children in Schools and Licensed Care Settings	786,904	8.88
Comprehensive School Health	2,608,579	24.42
<b>Total School Health</b>	<b>\$ 3,748,962</b>	<b>37.17</b>
<b>Substance Use and Injury Prevention</b>		
Alcohol	\$ 158,356	1.63
Cannabis	196,369	2.02
Other Drugs	94,338	0.89
Harm Reduction Program Enhancement	235,219	1.85
Needle Syringe	279,036	1.97
Smoke-Free Ontario	643,561	6.80
Injury Prevention	199,737	1.88
Southwest Tobacco Control Area Network	375,757	2.80
Violence Prevention	458,816	4.43
<b>Total Substance Use and Injury Prevention</b>	<b>\$ 2,641,189</b>	<b>24.27</b>
<b>ASP Program Costs</b>	<b>\$ 26,018,186</b>	<b>236.17</b>
<b>Indirect Costs</b>		
Corporate Admin	\$ 3,370,807	
Office of the Medical Officer of Health	582,261	3.00
Finance	510,946	5.00
Human Resources	1,018,213	9.50
Information Technology	1,510,204	3.85
Strategy, Risk, and Privacy	135,630	1.35
Office of the Director	364,149	1.50
Procurement & Operations	298,309	3.00
<b>Total Required Support</b>	<b>\$ 7,790,519</b>	<b>27.20</b>
<b>Total ASP Budget</b>	<b>\$ 33,808,705</b>	<b>263.37</b>

Salaries & Wages	20,814,342
Benefits	5,324,591
Travel	212,723
Building Occupancy	2,413,926
Professional Services	3,326,728
Recoveries	(703,708)
Other Program Expenditures	2,420,103
<b>Expenses by Grouping</b>	<b>33,808,705</b>

MOHLTC (Cost Shared)	20,004,600
Cost-Sharing Mitigation	1,361,300
City of London	7,344,798
County of Middlesex	1,404,859
Seniors Dental	3,693,148
<b>Revenue by Funder</b>	<b>33,808,705</b>

<b>Reconcile to BOH Budget</b>	
Reported ASP Budget	33,808,705
+ COVID-19	10,655,019
+ School Focused Nurses Initiative	1,415,572
+ MLHU2	2,823,109
+ CLIF	188,894
+ Add Back Misc Revenue	703,708
+ Adjust MOH/AMOH Salary Comp	85,800
+ IT Recovery MLHU & MLHU2	(30,000)
<b>Total</b>	<b>49,650,807</b>



TO: Chair and Members of the Board of Health

FROM: Dr. Alexander Summers, Medical Officer of Health  
Emily Williams, Chief Executive Officer

DATE: 2023 April 20

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## MONITORING FOOD AFFORDABILITY AND IMPLICATIONS FOR PUBLIC POLICY AND ACTION

### **Recommendation**

*It is recommended that the Board of Health:*

- 1) *Receive Report No. 25-23, re: “Monitoring Food Affordability and Implications for Public Policy and Action” for information; and*
- 2) *Forward Report No. 25-23 re: “Monitoring Food Affordability and Implications for Public Policy and Action” to Ontario boards of health, the City of London, Middlesex County, and appropriate community agencies.*

### **Key Points**

- Local food affordability monitoring is a requirement of the [Ontario Public Health Standards](#).
- The 2022 Nutritious Food Basket survey results demonstrate that incomes, particularly when dependent on social assistance, are not adequate for many Middlesex-London residents to afford basic needs.
- Food insecurity has a pervasive impact on health; and there is a need for income-based solutions.

### **Background and 2022 Nutritious Food Basket Survey Results**

Food insecurity, defined as inadequate or insecure access to food due to financial constraints, is a key social determinant of health<sup>1</sup>. In 2020, approximately one in five households in Middlesex-London were food insecure<sup>2</sup>. Food insecurity is associated with an increased risk of a wide range of challenges to physical and mental health, including chronic conditions, non-communicable diseases, infections, depression, anxiety, and stress<sup>3-10</sup> ([Appendix A](#)).

Routine monitoring of food affordability helps generate evidence-based recommendations for collective public health action to address food insecurity and income inadequacy. The [Ontario Public Health Standards](#) require monitoring local food affordability as mandated in the [Population Health Assessment and Surveillance Protocol, 2018](#). The Nutritious Food Basket (NFB) is a survey tool that measures the cost of eating as represented by current national nutrition recommendations and average food purchasing patterns.

Local food affordability monitoring was paused in 2020 and 2021 due to the COVID-19 pandemic. In 2022, MLHU staff participated in the provincial pilot testing of the Ontario Dietitians in Public Health’s (ODPH) new costing tool using a hybrid model of in-store and online data collection.

In May 2022, using the ODPH tools, the estimated local monthly cost to feed a family of four was \$1,084 ([Appendix B](#)). In Ontario, according to the Consumer Price Index, the price of food purchased from stores in January 2023 was 10.1% higher than in January 2022, rising at an annual rate not seen since the early 1980s<sup>11</sup>.

Local monthly food and average rental costs are compared to a variety of household and income scenarios, including households receiving social assistance, minimum wage earners, and median incomes (see Appendix B). The scenarios include food and rent only and are not inclusive of other needs (i.e., utilities, Internet, phone, transportation, household operations and supplies, personal care items, clothing etc.). Households with low incomes spend up to 45% of their after-tax income on food, whereas, Middlesex-London residents who have adequate incomes (family of 4) need to spend approximately 12% of their after-tax income. The scenarios highlight that Middlesex-London residents with low incomes cannot afford to eat after meeting other essential needs for basic living. Unfortunately, this demonstrates that incomes and social assistances rates have not kept pace with the increased cost of living.

## Opportunities

Upstream-level approaches that address the systems that create and maintain food insecurity, including income inadequacy and poverty, are the most effective in reducing food insecurity<sup>1</sup>.

In October 2022, the ODPH urged the Ontario government to adopt income-based policy solutions that effectively reduce food insecurity. These solutions may include higher minimum wage rates, increasing social assistance rates, and reducing income tax rates for the lowest income households. Additionally, ODPH submitted a resolution to advocate for increased social assistance rates to address food insecurity for consideration at alpha's Annual Conference in June 2023. MLHU registered dietitians continue to work locally, regionally and provincially with public health counterparts and community partners and will explore potential healthy public policy priorities in this area over the upcoming year.

Healthy Living Division staff will complete and submit the results of 2023 local food affordability monitoring to the Board of Health in Q4 2023.

This report was submitted by the Healthy Living Division.



Alexander Summers, MD, MPH, CCFP, FRCPC  
Medical Officer of Health



Emily Williams, BScN, RN, MBA, CNE  
Chief Executive Officer

## References

- <sup>1</sup> Tarasuk V, Li T, Fafard St-Germain AA. (2022). Household food insecurity in Canada, 2021. Toronto: Research to identify policy options to reduce food insecurity (PROOF). Retrieved from <https://proof.utoronto.ca/>.
- <sup>2</sup> Public Health Ontario. (2023). Response to scientific/technical request: Household food insecurity estimates from the Canadian Income Survey: Ontario 2018-2020.
- <sup>3</sup> Jessiman-Perreault G, McIntyre L. (2017). The household food insecurity gradient and potential reductions in adverse population mental health outcomes in Canadian adults. *SSM - Population Health*, 3:464-472.
- <sup>4</sup> Vozoris, NT, Tarasuk VS. Household food insufficiency is associated with poorer health. (2003). *The Journal of Nutrition*, 133(1):120-126.
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- <sup>8</sup> Kirkpatrick, SI, McIntyre, L, & Potestio, ML. (2010). Child hunger and long-term adverse consequences for health. *Archives of Pediatrics and Adolescent Medicine*, 164(8):754-762.
- <sup>9</sup> Melchior, M, Chastang, J F, Falissard, B, et al. (2012). Food insecurity and children's mental health: A prospective birth cohort study. *PLoS ONE*, 2012;7(12):e52615.
- <sup>10</sup> Ontario Dietitians in Public Health. (2020). Position statement and recommendations on responses to food insecurity. Retrieved from <https://www.odph.ca/odph-position-statement-on-responses-to-food-insecurity-1>.
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### Middlesex-London Income and Cost of Living Scenarios for 2022

	Income <sup>1</sup>	Rent <sup>2</sup>	Food <sup>3</sup>	What's Left?*	% Income for Rent	% Income for Food
Single Man Ontario Works	\$863	\$860	\$392	-\$389	100%	45%
Single Man Ontario Disability Support Program	\$1,309	\$1,124	\$392	-\$207	86%	30%
Single Woman Old Age Security/Guaranteed Income Security	\$1,885	\$1,124	\$279	\$482	60%	15%
Single Parent with 2 Children Ontario Works	\$2,528	\$1,393	\$795	\$340	55%	31%
Family of 4 Ontario Works	\$2,760	\$1,607	\$1,084	\$69	58%	39%
Family of 4 Minimum Wage Earner	\$3,973	\$1,607	\$1,084	\$1,282	40%	27%
Family of 4 Median Income (after tax)	\$9,323	\$1,607	\$1,084	\$6,632	17%	12%

**\* People still need funds for utilities, Internet, phone, transportation, household operations and supplies, personal care items, clothing, school supplies, gifts, recreation and leisure, out of pocket medical and dental costs, education, savings and other costs.**

#### Data Sources

<sup>1</sup> Income Scenario Spreadsheet prepared by Ontario Dietitians in Public Health (2022)

Includes all eligible benefits and credits. Individual incomes may vary, as individuals may not receive all eligible benefits and credits.

<sup>2</sup> Canadian Mortgage and Housing Corporation (January 2023). [Rental Market Survey](#): London, 2022, Table 1.1.2 Private Apartment Average Rents (\$), by Zone and Bedroom Type - London CMA. Accessed February 27, 2023.

Utility costs may or may not be included in the rental estimates.

This reference provides an average of current rental costs paid by tenants. The rental cost for a new tenant would likely be higher, as current tenants are protected from large annual rent increases due to Ontario's Ministry of Municipal Affairs and Housing rent increase guideline.

<sup>3</sup> Nutritious Food Basket Survey Results for Middlesex-London Health Unit (2022)



TO: Chair and Members of the Board of Health

FROM: Dr. Alexander Summers, Medical Officer of Health

DATE: 2023 April 20

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## MEDICAL OFFICER OF HEALTH ACTIVITY REPORT FOR MARCH

### **Recommendation**

*It is recommended that the Board of Health receive Report No. 26-23, re: Medical Officer of Health Activity Report for March for information.*

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The following report highlights activities of the Medical Officer of Health for the period of February 28, 2023 – March 31, 2023.

The Medical Officer of Health provides oversight of all public health programs at the Middlesex-London Health Unit, and co-chairs the Senior Leadership Team. The Medical Officer of Health participates in a wide range of external and internal meetings, along with liaising with community partners and municipal and provincial stakeholders.

The Medical Officer of Health, along with other team members, continues to host a weekly Middlesex-London Health Unit (MLHU) Staff Town Hall.

The Medical Officer of Health also participated in the following meetings:

**Client and Community Impact** – *These meeting(s) reflect the MOH's representation of the Health Unit in the community:*

- February 28** Hosted operational leaders from the Middlesex London Ontario Health Team to discuss ongoing collaboration between them and the MLHU regarding population health.
- March 1** Met with Lynne Livingstone, Manager, City of London.
- March 2** Participated in a call with Dr. Young Hoon, Medical Officer of Health, Northwestern Health Unit.
- March 6** Attended a report briefing meeting hosted by the Chief Medical Officer of Health.
- Interview with Dr. Mario Elia, Rogers TV.
- March 7** Attended a meeting with First Nations Community partners and Indigenous Services Canada.
- Attended the bi-weekly Ministry of Health Provincial Public Health Coordination Call,
- March 8** Attended the bi-weekly meeting with London Middlesex Primary Care Alliance and Middlesex-London Ontario Health Team regarding vaccinations.

- March 9** Along with the CEO, met with leadership from the Middlesex London Ontario Health Team regarding the MLHU's engagement with the OHT.
- March 10** Interview with Devon Peacock, Global News 980 CFPL regarding the three-year anniversary of the COVID-19 pandemic.
- Attended the monthly COMOHE Executive meeting.
- Interview with Jane Sims, London Free Press, regarding the three-year anniversary of the COVID-19 pandemic.
- Interview with Brian Bicknell, CTV London, regarding the three-year anniversary of the COVID-19 pandemic.
- March 13** Met with Brian Lester, Regional HIV/AIDS Connection and Rhonda Brittan, Manager, Healthy Communities and Injury Prevention to discuss the Community Drug and Alcohol Strategy.
- March 14** Met with Dr. Chris Watling, Schulich School of Medicine, University of Western Ontario regarding Schulich's strategic planning and incorporating identifying priority health needs.
- Interview with Kate Dubinski, CBC London regarding the Board of Health report about cannabis trends.
- Interview with Jen Bieman, London Free Press, regarding the Board of Health report about the burden of health attributable to smoking and alcohol consumption.
- Participated in a call with Dr. Karalyn Dueck, Medical Officer of Health, Lambton Public Health.
- March 15** Interview with Sean Irvine, CTV London, regarding the Board of Health report about CLIF funding for cannabis programming.
- March 16** Interview with Devon Peacock, Global News 980 CFPL regarding the Board of Health report about the burden of health attributable to smoking and alcohol consumption.
- Participated in a roundtable regarding health and homelessness hosted by Arielle Kayabaga, Member of Parliament.
- March 20** Participated in a meeting with CUPE regarding MLHU's 2023 budget.
- Chaired the monthly meeting of the South West Medical Officer of Health/Associate Medical Officer of Health Committee.
- March 21** Presented the Healthcare Provider Outreach webinar.
- Interview with Heather Rivers, London Free Press, regarding suspensions per the *Immunization of School Pupils Act*.
- Interview with Marshall Healey, Global News, regarding suspensions per the *Immunization of School Pupils Act*.

- Attended the bi-weekly Ministry of Health Provincial Public Health Coordination Call,
- March 22** Interview with Sean Irvine, CTV London, regarding suspensions per *Immunization of School Pupils Act*.
- Interview with Angela McInnes, CBC London, regarding suspensions per *Immunization of School Pupils Act*.
- March 23** Attended a table meeting regarding the Health and Homelessness Summit, held by the City of London.
- Attended the Middlesex London Ontario Health Team Coordinating Council meeting.
- March 24** Participated in a call with Dr. Natalie Bocking, Medical Officer of Health, Haliburton, Kawartha, Pine Ridge District Health Unit.
- Attended a meeting regarding an IPAC lapse.
- Met with Martin McIntosh, Executive Director of Regional HIV/AIDS Connection.
- March 27** Attended the Health and Homelessness Organizational Leaders meeting, organized by the City of London.
- March 28** Participated in a call with Dr. Natalie Bocking, Medical Officer of Health, Haliburton, Kawartha, Pine Ridge District Health Unit.
- Met with the Chair, Middlesex-London Food Policy Council.

**Employee Engagement and Learning** – *These meeting(s) reflect on how the MOH influences the Health Unit's organizational capacity, climate and culture and the contributions made to enable engaged and empowered staff; thoughtful and responsive leadership and organizational structures that support decision-making, innovation and learning:*

- March 1** Attended a meeting to discuss a strategy to address local STI rates.
- March 2** Attended an internal meeting to discuss the 2023 budget.
- Attended a SDOH Project Sponsor meeting.
- March 9** Attended the monthly Population Health Assessment and Surveillance Team and Medical Officer of Health meeting.
- March 15** Met with Lilka Young, Health and Safety Advisor, regarding occupational health and safety COVID-19 safety measures.
- March 16** Participated in interviews for the Associate Medical Officer of Health position.
- Attended a Provisional Planning Sponsor check-in meeting.
- March 21** Attended a social for MLHU's Management Leadership Team.
- March 22** Attended a Provisional Planning Sponsor check-in meeting.

Attended the Office of the Medical Officer of Health Management meeting.

Attended the Office of the Medical Officer of Health Division meeting.

**March 24** Attended the monthly surveillance meeting.

**Personal Development** – *These meeting(s) reflect on how the MOH develops their leadership, skills and growth to define their vision and goals for the Health Unit.*

**March 1** Participated in the first LEADS training session.

**March 3** Attended a lecture at Western University regarding Climate Change and Health.

**March 15** Participated in the second LEADS training session.

**March 20** Attended the Ontario Medical Association, Section of Public Health Physicians virtual annual general meeting.

**March 27** Attended the Ontario Public Health Conference (TOPHC) virtually.

**Governance** – *This meeting(s) reflect on how the MOH influences the alignment of management methods and systems to ensure appropriate structures and resources are in place to achieve the HU's mission and vision. This also reflects on the MOH's responsibility for actions, decision and policies that impact the HUs ability to achieve the requirements as set out under the strategic plan, the Ontario Public Health Organizational Standards (OPHOS), other funder requirements and direction provided by the Board of Health:*

**March 2** Attended a touch-base meeting with the Board chair.

**March 8** Attended the monthly Board of Health agenda review and executive meetings.

**March 9** Attended the March Finance and Facilities Committee meeting.

**March 16** Attended the March Board of Health meeting.

**March 20** Attended the monthly touch-base meeting with the Board chair.

**March 23** With the CEO, met with the Executive Assistant to the Board of Health regarding the board report policy.

This report was prepared by the Medical Officer of Health.



Alexander Summers, MD, MPH, CCFP, FRCPC  
Medical Officer of Health



TO: Chair and Members of the Board of Health

FROM: Emily Williams, Chief Executive Officer

DATE: 2023 April 20

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## CHIEF EXECUTIVE OFFICER ACTIVITY REPORT FOR MARCH

### Recommendation

*It is recommended that the Board of Health receive Report No. 27-23, re: Chief Executive Officer Activity Report for March for information.*

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The following report highlights activities of the Chief Executive Officer for the period of March 2, 2023 – April 1, 2023.

Standing meetings include weekly Healthy Organization leadership team meetings, SLT (Senior Leadership Team) meetings, MLT (MLHU Leadership Team) meetings, Virtual Staff Town Hall meetings, bi-weekly R3 meetings, and weekly check ins with the Healthy Organization managers and the MOH.

As part of the MLHU on-call leadership system, the CEO provided on-call coverage from March 27 to April 2, 2023.

The CEO also attended the following meetings:

**Client and Community Impact** – *These meeting(s) reflect the CEO's representation of the Health Unit in the community:*

- March 7** The CEO, along with the Medical Officer of Health, Manager, Sexual Health Team, Manager, Infectious Diseases Team, attended a follow-up meeting with First Nations Communities regarding collaboration.
- March 8** The CEO, along with the Medical Officer of Health met to discuss data sharing with First Nations Community Health Centres.
- March 9** The CEO attended a meeting to discuss the evolution of the Ontario Health Team (OHT) and MLHU's role in supporting the OHT's success.
- March 14** The CEO, along with the Assistant Director of Finance attended the Middlesex County Council Meeting to deliver the proposed MLHU 2023 Budget.

**Employee Engagement and Learning** – *These meeting(s) reflect on how the CEO influences the Health Unit’s organizational capacity, climate and culture and the contributions made to enable engaged and empowered staff; thoughtful and responsive leadership and organizational structures that support decision-making, innovation and learning:*

- March 6** The CEO attended a meeting with the LHSC Organizational Development Specialist regarding the upcoming LEADS training, to adapt it to suit the needs of MLHU.
- March 9** The CEO attended a meeting regarding confidential legal matters.
- March 16** The CEO participated in interviews for the Associate Medical Officer of Health position.  
The CEO attended the ONA Union Management meeting to support the discussion about the revised Registered Nurse (RN) job description.
- March 20** The CEO participated in interviews for the Privacy, Risk and Client Relations Manager position.  
The CEO attended the Employment Systems Review Steering Committee meeting.  
The CEO provided an overview of the 2023 proposed budget during meetings with both CUPE and ONA unions.
- March 22** The CEO participated in a request for proposal (RFP) meeting regarding Information Technology development.
- March 24** The CEO met with the Manager, Community Outreach and Clinical Support Services to discuss team strategies.

**Personal Development** – *These meeting(s) reflect on how the CEO develops their leadership, skills and growth to define their vision and goals for the Health Unit.*

- March 15** The CEO Participated in Leads 2: Engage Others for Directors/Executives training.
- March 30** As part of the CEO’s McCormick Care Board membership, the CEO attended the McCormick Board of Directors meeting.

**Governance** – *This meeting(s) reflect on how the CEO influences the alignment of management methods and systems to ensure appropriate structures and resources are in place to achieve the HU’s mission and vision. This also reflects on the CEO’s responsibility for actions, decision and policies that impact the HUs ability to achieve the requirements as set out under the strategic plan, the Ontario Public Health Organizational Standards (OPHOS), other funder requirements and direction provided by the Board of Health:*

- March 2** The CEO met with the Board Chair for a monthly touch-base meeting.  
The CEO attended the monthly provincial call regarding funding updates.

- March 9** The CEO attended the March meeting of the Finance and Facilities Committee.
- March 16** The CEO attended a meeting with members of the Healthy Organization leadership team to discuss the introduction of an asset management strategy .
- The CEO attended the Provisional Planning Project Sponsor meeting.
- The CEO attended the Strathroy Dental Project Steering Committee meeting.
- March 22** The CEO met with the Board Chair for a monthly touch-base meeting.
- The CEO attended the Provisional Planning Project Sponsor meeting.
- March 23 The CEO attended a layout walk-through of the new Strathroy Dental Clinic.
- The CEO met with the Medical Officer of Health to review Management Operating System documents.
- March 24 The CEO reviewed the Annual Service Plan (ASP).
- April 1 The CEO reviewed the ASP.

This report was prepared by the Chief Executive Officer.



Emily Williams, BScN, RN, MBA, CHE  
Chief Executive Officer

March 15, 2023

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

Dear Honourable Minister Duclos:

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

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

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

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

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

☐ **Barrie:**  
15 Sperling Drive  
Barrie, ON  
L4M 6K9  
705-721-7520  
FAX: 705-721-1495

☐ **Collingwood:**  
280 Pretty River Pkwy.  
Collingwood, ON  
L9Y 4J5  
705-445-0804  
FAX: 705-445-6498

☐ **Cookstown:**  
2-25 King Street S.  
Cookstown, ON  
L0L 1L0  
705-458-1103  
FAX: 705-458-0105

☐ **Gravenhurst:**  
2-5 Pineridge Gate  
Gravenhurst, ON  
P1P 1Z3  
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FAX: 705-684-9887

☐ **Huntsville:**  
34 Chaffey St.  
Huntsville, ON  
P1H 1K1  
705-789-8813  
FAX: 705-789-7245

☐ **Midland:**  
A-925 Hugel Ave.  
Midland, ON  
L4R 1X8  
705-526-9324  
FAX: 705-526-1513

☐ **Orillia:**  
120-169 Front St. S.  
Orillia, ON  
L3V 4S8  
705-325-9565  
FAX: 705-325-2091

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

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

Sincerely,

**ORIGINAL Signed By:**

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

AMK:CG:LS:sh

cc:

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

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

## Middlesex-London Board of Health External Landscape Review – April 2023

The purpose of this briefing note is to inform MLHU Board of Health members about what is happening in the world of public health and impacts to the work of the MLHU and Board. This includes governance and legislative changes, news from other local public units, external reports on important public health matters, learning opportunities and MLHU events. **Please note that items listed on this correspondence are to inform Board members and are not necessarily an endorsement.**

### Local Public Health News

#### **Mpox in Ontario: May 1, 2022 to March 28, 2023**



Public Health Ontario and Ontario Health have released a new epidemiological summary on Mpox in Ontario, which is divided by public health unit.

To view the full report, [please visit Public Health Ontario's website](#).

#### **Impact to MLHU Board of Health**

The Board of Health was provided an update on the 2022 Mpox Outbreak in Middlesex-London from the Infectious Disease Control team. This report from Public Health Ontario provides further information regarding confirmed cases in each public health unit.

### National, Provincial and Local Public Health Advocacy

#### **2023 Ontario Budget**



On March 23, 2023, the Province of Ontario released the 2023 Ontario Budget. Highlights of the budget related to community and social services include:

- Investing an additional \$33 million over three years to add 100 undergraduate medical student seats beginning in 2023, as well as 154 postgraduate medical training seats to prioritize Ontario residents trained at home and abroad beginning in 2024 and going forward.
- Starting in fall 2023, expanding the program to allow pharmacists to prescribe over-the-counter medication for more common ailments, including mild to moderate acne, canker sores, diaper dermatitis, yeast infection, pinworms and threadworms, and nausea and vomiting in pregnancy.
- Investing \$1 billion over three years to get more people connected to home care.
- Investing \$22 million to hire up to 200 hospital preceptors to provide mentorship, supervision and training to newly graduated nurses, \$15 million to keep 100 mid-to-late career nurses in the workforce and \$4.3 million to help at least 50 internationally trained physicians get licensed in Ontario.
- Providing an additional \$425 million over three years to support mental health and addictions services, including a five per cent increase in the base funding of community-based mental health and addictions services providers funded by the Ministry of Health.
- Investing \$170 million over three years to support the Ready, Set, Go program to help youth achieve financial independence through life skills development, supports to pursue postsecondary education, training and pathways to employment.

To view the full 2023 Ontario Budget, [please visit the Ontario Budget website](#).

#### **Impact to the MLHU Board of Health**

The Board of Health (along with Boards of Health for other public health units) are actively advocating for increased financial support to provide crucial public health programming for the communities they serve. Without adequate funding received, work outlined in the *Ontario Public Health Standards* will not be reached to its full potential. Public health is different than health care, and the Board has advocated to the Province for more public health service funds previously.

## 2023 Canada Budget

On March 28, 2023, the Government of Canada released the 2023 Canada Budget. Highlights of the budget related to public health, community and social services include:



- Investing \$198.3 billion to reduce backlogs, expand access to family health services and ensure provinces and territories can provide the high quality and timely health care.
- Investing \$46.2 billion in new funding to provinces and territories through new Canada Health Transfer measures, as well as tailored bilateral agreements to meet the needs of each province and territory, personal support worker wage support, and a Territorial Health Investment Fund.
- This funding is to be used to improve and enhance the health care Canadians receive, and is not to be used by provinces and territories in place of their planned health care spending.
- The federal government will also work with Indigenous partners to provide additional support for Indigenous health priorities by providing \$2 billion over ten years, which will be distributed on a distinction basis through the Indigenous Health Equity Fund.
- Invest \$13 billion over five years, starting in 2023-24, and \$4.4 billion ongoing, to Health Canada to implement the new Canadian Dental Care Plan. The plan will provide dental coverage for uninsured Canadians with annual family income of less than \$90,000, with no co-pays for those with family incomes under \$70,000. The plan would begin providing coverage by the end of 2023 and will be administered by Health Canada, with support from a third-party benefits administrator.
- Invest \$250 million over three years, starting in 2025-26, and \$75 million ongoing, to Health Canada to establish an Oral Health Access Fund. The fund will complement the Canadian Dental Care Plan by investing in targeted measures to address oral health gaps among vulnerable populations and reduce barriers to accessing care, including in rural and remote communities.
- Invest \$36 million over three years, starting in 2024-25, to Health Canada to renew the Sexual and Reproductive Health Fund. This fund supports community-based organizations that help make access to abortion, as well as other sexual and reproductive health care information and services, more accessible.
- Invest \$359.2 million over five years, starting in 2023-24, with \$5.7 million ongoing and \$1.3 million in remaining amortization, to support a renewed Canadian Drugs and Substances Strategy, which would guide the government's work to save lives and protect the health and safety of Canadians. This includes funding for community supports, prevention programs, supervised consumption sites, and action to tackle drug trafficking.
- Invest \$158.4 million over three years, starting in 2023-24, to the Public Health Agency of Canada to support the implementation and operation of 988. As of November 30, 2023, Canadians will be able to call or text 988 at any time to access quality, effective, and immediate suicide prevention and mental health crisis support.

[To view the full 2023 Canada Budget, please visit the Canada Budget website.](#)

### Impact to the MLHU Board of Health

The Board of Health has supported initiatives related to health equity, oral health, sexual health, mental health resources and work involving the opioid crisis in Middlesex-London. With funding at a scarcity for these services, it is vital that the Government of Canada is looking to invest in areas where funding has fallen short for local public health units.

## MLHU Events



### Canadian Public Health Week at MLHU

On April 6, 2023, MLHU celebrated Canadian Public Health Week! For the second year in a row, the Canadian Public Health Association (CPHA) is highlighting the many contributions of public health professionals and agencies in our country, highlighting the many ways public health plays a key role in promoting and protecting the health of Canadians coast-to-coast. Canadian Public Health Week ran from April 3-7, 2023.

As part of Canadian Public Health Week this year, the CPHA has launched a "Did you know..." campaign on social media. The effort aimed at increasing the public's awareness and knowledge of public health services in our communities. As part of this effort, MLHU has posted key facts about public health in London and Middlesex County, as well as photos of our staff members in action in our community on social media.

For more information about Canadian Public Health Week, [please visit the Canadian Public Health Week website.](#)

**Impact to MLHU Board of Health**

Canadian Public Health Week highlights the work of public health across Canada and celebrates the work that MLHU staff do to support the Middlesex-London community. The Board of Health recognizes, acknowledges and supports MLHU staff in their work!



April 11, 2023

VIA EMAIL

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

Dear Premier Ford:

### Re: Minimum Wage Increase

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

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

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

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

#### Sudbury

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Sudbury ON P3E 3A3  
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#### Elm Place

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Sudbury ON P3C 5N3  
t: 705.522.9200  
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#### Sudbury East / Sudbury-Est

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

800 rue Centre Street  
Unit / Unité 100 C  
Espanola ON P5E 1J3  
t: 705.222.9202  
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#### Île Manitoulin Island

6163 Highway / Route 542  
Box / Boîte 87  
Mindemoya ON P0P 1S0  
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#### Chapleau

34 rue Birch Street  
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Chapleau ON P0M 1K0  
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1.866.522.9200

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



Letter to the Premier of Ontario  
Re: Minimum Wage Increase  
April 11, 2023  
Page 2 of 3

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

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

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

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

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

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

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

Sincerely,



René Lapierre  
Chair, Board of Health

Letter to the Premier of Ontario  
Re: Minimum Wage Increase  
April 11, 2023  
Page 3 of 3

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