

AGENDA
MIDDLESEX-LONDON BOARD OF HEALTH
Finance & Facilities Committee

Microsoft Teams
Thursday, June 2, 2022 at 9:00 a.m.

- 1. DISCLOSURE OF CONFLICTS OF INTEREST**
- 2. APPROVAL OF AGENDA – June 2, 2022**
- 3. APPROVAL OF MINUTES – April 7, 2022**
- 4. CONFIDENTIAL**

The Middlesex-London Board of Health (Finance and Facilities Committee) will move into a confidential session 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.

5. NEW BUSINESS

- 5.1 Information Technology Services - Asset Management Update
(Report No. 11-22FFC)
- 5.2 2022 Q1 Financial Update and Factual Certificate (Report No. 12-22FFC)

6. OTHER BUSINESS

- 6.1 Next meeting: Thursday, July 7, 2022 at 9:00 a.m.

7. ADJOURNMENT



**PUBLIC MINUTES
FINANCE & FACILITIES COMMITTEE**

Microsoft Teams
Thursday, April 7, 2022 9:00 a.m.

MEMBERS PRESENT: Mr. Mike Steele (Chair)
Mr. Matt Reid
Ms. Maureen Cassidy
Mr. Selomon Menghsha

REGRETS: Ms. Kelly Elliott

OTHERS PRESENT: Ms. Stephanie Egelton, Senior Executive Assistant to the Medical Officer of Health (Recorder)
Dr. Alexander Summers, Medical Officer of Health
Ms. Emily Williams, Chief Executive Officer
Mr. David Jansseune, Assistant Director, Finance
Mr. Pat Harford, Manager, Information Technology
Ms. Carolynne Gabriel, Communications Coordinator and Executive Assistant to the Board of Health
Mr. Brian Glasspoole, Consultant, Finance
Ms. Mary Lou Albanese, Director, Environmental Health and Infectious Diseases
Ms. Mariam Hamou, Board Member

At **9:03 a.m.**, Chair Mike Steele called the meeting to order.

DISCLOSURES OF CONFLICT OF INTEREST

Chair Steele inquired if there were any disclosures of conflict of interest. None were declared.

APPROVAL OF AGENDA

It was moved by **Ms. Maureen Cassidy**, seconded by **Mr. Matt Reid**, that the **AGENDA** for the April 7, 2022 Finance & Facilities Committee meeting be approved.

Carried

APPROVAL OF MINUTES

It was moved by **Ms. Cassidy**, seconded by **Mr. Selomon Menghsha**, that the **MINUTES** of the March 3, 2022 Finance & Facilities Committee meeting be approved.

Carried

NEW BUSINESS

Cyber Security Training (Report No. 06-22FFC)

Ms. Emily Williams, Chief Executive Officer introduced Mr. Pat Harford, Manager, Information Technology to present the Cyber Security Training report.

Ms. Williams noted that the Health Unit has successfully secured cyber security insurance, as a result of the training program that has been implemented.

Highlights of this report include:

- Training sessions involve short videos on different cyber security topics, with a quiz at the end to test knowledge.
- The first sessions were to educate all staff and test knowledge on “phishing” and “CEO scams.”
- The current completion rate is 32% on the first training and 22% on the second.
- There were two rounds of testing for staff, pre and post training in early 2022.
- The first testing resulted with 24% (258) of staff clicking on the link and 17% (189) providing their credentials to a fake site, created by the IT team.
- Repeat testing showed improved results with 12% (131) following the link and 2% (25) providing credentials.

Ms. Williams noted that Senior Leadership has made this training mandatory for all staff.

It was also suggested that staff receive recognition for completing cyber security training and passing the required quizzes, along with adding cyber security training to the Board of Health member orientation session on April 28.

It was moved by **Ms. Cassidy, seconded by Mr. Reid**, *that the Finance & Facilities Committee make a recommendation to the Board of Health to receive Report No. 06-22FFC, re: Cyber Security Training for information.*

Carried

Financial Borrowing Update (Report No. 07-22FFC)

Ms. Williams introduced Mr. David Jansseune, Assistant Director, Finance to present the Financial Borrowing Update report.

Key highlights of this report included:

- There is a \$10.5 million positive bank balance, as of December 2021.
- The COVID-19 extraordinary funding is \$24,884,000 during 2021 with an additional \$2,226,900 flowing in 2022 to fully offset the remaining 2021 expenses incurred by the health unit.
- Currently, we have not drawn funds from our line of credit.
- The bank loan that the Health Unit has is for \$4.2 million, with an outstanding balance of approximately \$4,016,119.
- Loan payments are made on a monthly basis, paying down interest and principal
- Loan rates are negotiated for 5-year, renewable terms. The Health Unit has three more years left in the term. Further, if the Board of Health wishes to increase loan payments, this can be disclosed during the budget process and request that payments be increased on the variable portion of the loan.
- Inflation has been addressed in budgeting, with items such as cyber security insurance and liability insurance being budgeted with inflationary increases.

Ms. Williams noted that the goal for 2023 is to work towards paying down further debt, which will be assisted by improved financial reporting and understanding the variance in a timely fashion. Further, it is anticipated that due to significant gapping, the Health Unit will have a surplus.

It was moved by **Mr. Reid, seconded by Ms. Cassidy**, *that the Finance & Facilities Committee make a recommendation to the Board of Health to receive Report No. 07-22FFC, re: Financial Borrowing Update for information.*

Carried

2021 Vendor and Visa Payments (Report No. 08-22FFC)

Mr. Jansseune noted that the report on 2021 Vendor and Visa payments included vendors with payments of over \$100,000 and a summary of purchases paid with Health Unit corporate credit cards.

Staff will follow up with the Finance and Facilities Committee members on how many Health Unit credit cards are active and being used by staff.

It was moved by **Mr. Reid, seconded by Mr. Menghsha**, *that the Finance & Facilities Committee make a recommendation to the Board of Health to receive Report No. 08-22FFC, re: 2021 Vendor and VISA Payments for information.*

Carried

2021 Board of Health Remuneration (Report No. 09-22FFC)

Mr. Jansseune provided a report on Board of Health Remuneration. It was noted that 2021 remuneration for Board members was \$38,126, with the budget being \$39,000.

It was moved by **Mr. Menghsha, seconded by Ms. Cassidy**, *that the Finance & Facilities Committee make a recommendation to the Board of Health to receive Report No. 09-22FFC, re: 2021 Board of Health Remuneration for information.*

Carried

Q4 Financial Update and Factual Certificate (Report No. 10-22FFC)

Mr. Jansseune provided a financial update on Q4 and the most current factual certificate.

Key highlights of this report included:

- The Ministry of Health has confirmed funding to cover all MLHU COVID-19 extraordinary expenses in 2021.
- 2021 was a balanced budget for the Health Unit.
- County of Middlesex and City of London funding contributions were held at 2019 levels, which resulted in a savings/refund to both parties (County of Middlesex received back \$122,000 and the City of London received back \$640,000).
- Mandatory programs supported COVID-19 response with \$5,228,094.

Dr. Alexander Summers, Medical Officer of Health noted that the organization has been reviewing risks and the current structures of programs and leadership. At this time, the Infectious Disease Control (IDC) and Vaccine Preventable Disease (VPD) programs (which are supporting the COVID-19 response) leadership structures have been stabilized. The current concern is stabilizing the staffing within these programs and ensuring there are enough resources to respond to an expected rapid rise in cases throughout April and beyond. In addition, the traditional community case management aspect of COVID-19 programming is no longer required which relieves some demands upon the COVID-19 response. There will be a surge response shift if there is an arrival of a new variant and redistribution of vaccine.

Ms. Williams added that the Health Unit has budgeted for full mandatory/regular programming and full COVID-19 programming. It was noted that the Human Resources Team is hiring specific COVID-19 staff to have a distinct team to respond to the pandemic. The COVID-19 program is budgeted at 100%, in accordance with the Board-approved PBMA proposal. The COVID-19 Vaccine program is budgeted at 75% of actual spend from last year (for COVID-19 vaccine).

Dr. Summers noted that while COVID-19 is still occurring, ensuring that staff and leaders have opportunities for engagement and debriefing the past two years is important. Senior Leadership is holding sessions for leaders on the Joy in Work framework, which will assist in creating tangible strategies to implement over one to three months for the organization. At this time, it is noted that leadership overtime hours have decreased since last year.

It was moved by **Mr. Reid, seconded by Ms. Cassidy**, *that the Finance & Facilities Committee make a recommendation to the Board of Health to receive Report No. 10-22FFC, re: Q4 Financial Update and Factual Certificate for information.*

Carried

OTHER BUSINESS

The next meeting of the Finance and Facilities Committee will be held on Thursday, May 5, 2022 at 9 a.m.

ADJOURNMENT

At **9:46 a.m.**, it was moved by **Mr. Menghsha, seconded by Ms. Cassidy**, *that the meeting be adjourned.*

Carried

MICHAEL STEELE
Chair

EMILY WILLIAMS
Secretary



TO: Chair and Members of the Finance and Facilities Committee

FROM: Emily Williams, Chief Executive Officer

DATE: 2 June 2022

INFORMATION TECHNOLOGY SERVICES - ASSET MANAGEMENT

Recommendation

It is recommended that the Finance & Facilities Committee recommend to the Board of Health to receive Report No. 11-22FFC, re: Information Technology Services - Asset Management for information.

Key Points

- MLHU implemented a new Asset Management System to track all Information Technology Services (ITS) Assets including but not limited to monitors, laptops, cellular devices and tablets.
- Employee acknowledgment forms have been incorporated into the Asset Management System to resolve a gap noted in MLHU policy surrounding asset deployment.
- During the initial move to remote work due to COVID-19, hardware was rapidly deployed by departments to support remote work, and ITS staff have now performed a virtual “wall to wall” audit to track/verify ITS assets that reside both onsite and offsite.
- ITS created a process that would reach out to all MLHU users by e-mail, Microsoft Teams, phone or in person to verify and document the assets being utilized. This process also includes the required sign-off of the “Acknowledgement of Receipt of MLHU Property” form.

Background

This report provides an update on the status of the Middlesex-London Health Unit (MLHU)’s Information Technology (IT) Asset Management Database (DB) and employee acknowledgment sign off for MLHU IT assets.

In 2020/2021, a new Asset Management System was implemented to accommodate the tracking of IT equipment. Shortly after this period, MLHU experienced issues recovering assets from past MLHU staff and a gap was noted related to the asset management policy. Policy 3-040 Building Security and Protection of Assets was amended and a process was created to have all MLHU staff sign off on the “Acknowledgement of Receipt of MLHU Property” form, providing a path for MLHU to recover the costs of missing assets if required. This form was incorporated into the Asset Management System and added as part of the MLHU “wall to wall” asset audit for existing staff, along with the ITS onboarding process for new hires.

Current Status

Currently 96 percent (470) of required staff have completed the acknowledgement form and submitted asset information. ITS is working with department managers to finalize the outstanding staff members (20) and various methods, including utilization scripts, will be used to look for discrepancies in the data provided to obtain a complete inventory.

Next Steps

MLHU ITS will continue to track and verify assets using the Asset Management System and will have ongoing reviews of processes to ensure its Asset Management DB is up to date. Options will also be considered to expand the use of the Asset Management System for other equipment at MLHU.

This report was prepared by the Information Technology Team, Healthy Organization Division.

A handwritten signature in black ink that reads "E. Williams". The signature is written in a cursive style and is centered within a light gray rectangular box.

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



TO: Chair and Members of the Finance and Facilities Committee

FROM: Emily Williams, Chief Executive Officer

DATE: 2022 June 2

2022 Q1 FINANCIAL UPDATE AND FACTUAL CERTIFICATE

Recommendation

It is recommended that the Finance and Facilities Committee recommend to the Board of Health to receive Report No. 12-22FFC re: “2022 Q1 Financial Update and Factual Certificate” for information.

Key Points

- The attached report represents a new reporting format and covers key financial elements to assist with strategic decision making.
- The report includes an Executive Summary and commentary on:
 - Announcement – Ministry Funding
 - Q1 Variance Analysis
 - Forecast
 - Cashflow Projections
- The following schedules are also provided:
 - Ministry Amending Agreement
 - Consolidated Results
 - Expense Schedule
 - Cashflow Schedule
 - Factual Certificate

Background

A new reporting format was developed to deliver information across multiple financial elements. This information is intended to assist with strategic decision making.

Financial Highlights

Please see [Appendix A](#) for full financial details.

This report was prepared by the Finance Team, Healthy Organization Division.

A handwritten signature in black ink that reads 'EWilliams'.

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

Middlesex London Health Unit

Financial Update for Q1, 2022

Ending March 31, 2022

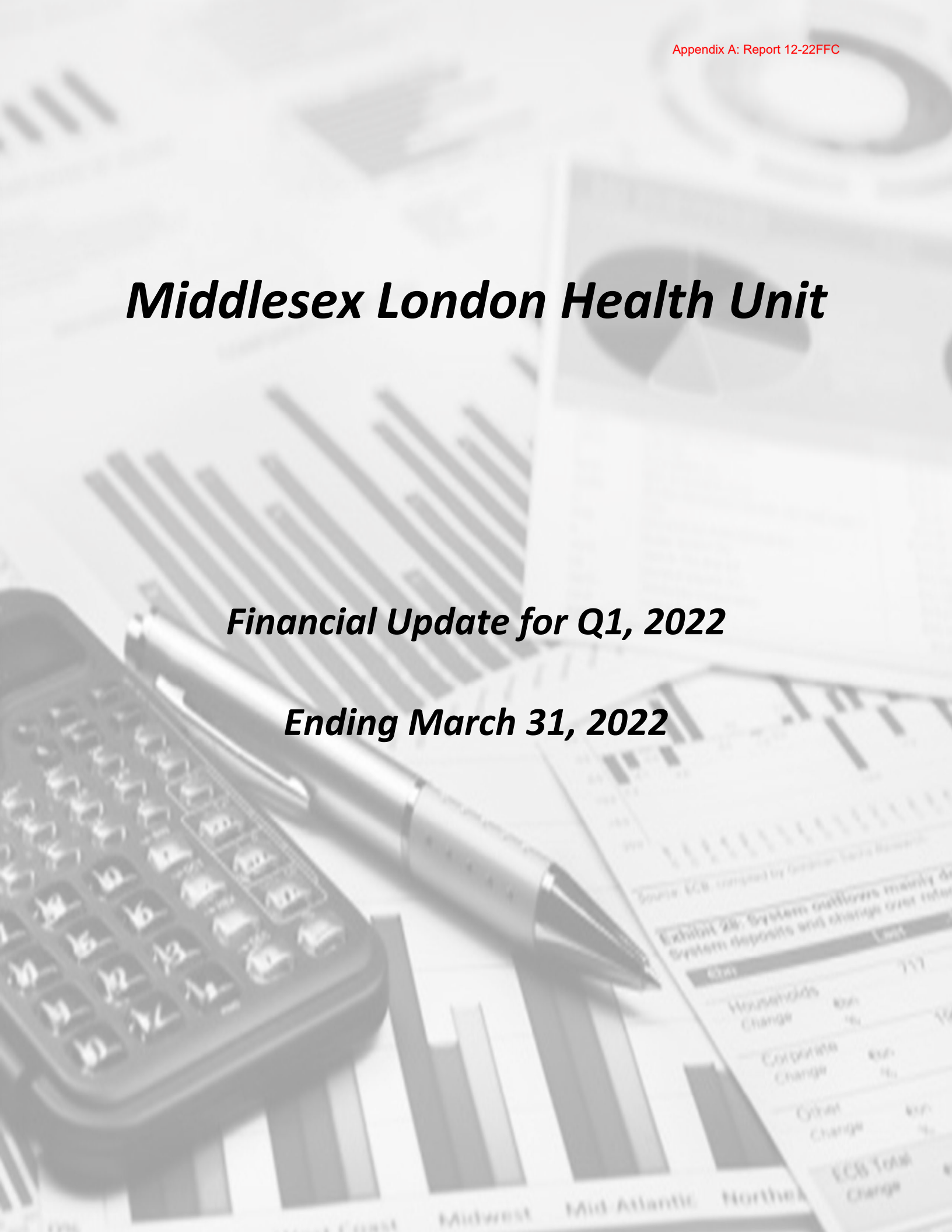


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Executive Summary

Hello everyone. It has been a pleasure preparing this quarterly financial update for you. This comprehensive deck includes key financial elements and is intended to provide you with information to assist with strategic decision making.

Aspects of this deck will continue to be enhanced as the year progresses. We want to further improve variance analysis which will lend to better forecasting – a critical tool to understanding risks and opportunities. As well to deliver this deck in a timelier fashion.

Ministry Funding: Base funding remained at budget while funding increased for Ontario Seniors Dental Care, School Focused Nurses Initiative, Nurses Retention Incentive and capital for the Strathroy Dental project. We received approximately half of our COVID-19 funding with a Ministry commitment to further review funding requirements based on in-year forecast. Unfortunately, recovery and special project funding were not approved.

Q1 Variances: The lack of COVID-19 funding has negatively impacted revenue and serves as a timing difference. Expenses were favorable to budget by \$2.1 million (will more than cover our budgeted gap of \$1.6 million). Overtime continued to be unfavorable as a result of COVID-19 while general expenses posted \$409k favorable to budget.

Forecast: With the May 2nd funding announcement, the forecast has been updated to enhance Ontario Seniors Dental Care and School Focused Nurses Initiative. The COVID-19 Recovery Initiatives and Special Projects have been removed from forecast due to the lack of funding. These changes impact the program level only (increased funding is offset with increased forecasted expenditures to net zero). The only impact to the financial bottom line of the Health Unit is from the approval of funding for Mandatory Programs that exceeded our budget by \$35 due to Ministry rounding.

Cashflow: A lot of effort has gone into this section to ensure we understand Ministry receivable and payable amounts, from 2020 to current. This year started with over \$10 million cash but was depleted during Q1 with higher payroll and vaccine clinic operations and no COVID-19 funding (similar situation as 2021). Cashflow has been estimated based on current forecast, and as of current, there is no need to adjust our line of credit with the bank.

If you have any questions regarding this information, or suggestions on content, please let us know. Thank you.

On behalf of the Healthy Organization Division,

Dave Jansseune, CPA, CMA
Assistant Director, Finance

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

Announcement – Ministry Funding

We received our 2022 Ministry funding approval on Monday, May 2nd and participated in a province-wide meeting with the Ministry on Thursday, May 5th to hear additional information. Please note the following information excludes funding from both the City of London and County of Middlesex, which is unaffected and remains as budgeted (City \$7,345k & County \$1,405k).

From May 2nd Correspondence

Highlights – Good News:

- We did receive the 1% increase in base funding as budgeted, which was \$198k.
- Ontario Seniors Dental Care Program funding \$2,191,500 vs budget of \$1,861,400.
- School Focused Nurses Initiative funding \$1,642,700 vs budget of \$726,000 (*the budget of \$726k represented from April 1st to July 31st only – it was extended to December 31, 2022*).
- Nurses Retention Incentive available funding \$793,400 (*two payments to qualifying nurses split between spring & fall amounting to a maximum of \$5k*).
- Strathroy Dental Capital incremental funding for \$350,100 (\$318k in 2022 and \$32k in 2023). Total available now is \$1,050,100 with the \$700k already provided. Please note this is capital funding and not operating.

Highlights – Bad News:

- COVID-19 draft funding was about half of our ask. Approved \$13,579,800 vs budget of \$26,498,855. The Ministry will reassess throughout the year, a similar process to 2021.
- COVID-19 recovery funding was not provided. Received <nil> vs budget of \$1,570,039. The Ministry is committed to review these initiatives later in the year and we have an option to use surplus from Mandatory Programs, after meeting gap, to support recovery efforts.
- Special Projects (*electronic medical records*) funding was not provided. Received <nil> vs budget of \$200,000. We again have an option to use surplus from Mandatory Programs to provide funding.

Additional Information from the Province-Wide Meeting from May 5th

- COVID-19 funding is the initial funding amounts and subject to change depending on financial projections within the Ministry quarterly reporting.
- Health Units are asked to re-evaluate funding requirements for COVID-19, recovery initiatives and special projects to critical expenses. The definition of critical expenses is to be defined by the Board of Health and Health Unit.
- The Ministry is committed to review additional costs (recovery & special projects) later in the year – but this will likely be based on financial projections within the Ministry quarterly reporting.
- Health Units are asked to keep the Ministry informed of cashflow pressures.
- We can direct surplus from Mandatory Programs, after meeting gap, to Recovery Initiatives & Special Projects before directing to cover Covid-19 expenses. This is an important strategic consideration.

Q1 Variance Analysis

Consolidated

We haven't received any COVID-19 funding for the current year which has caused a large unfavorable variance on revenue. This is timing and will correct itself as the year progresses.

Expenses overall are favorable by \$2.1 million which is a good start to the year as this favorability can offset the Gap. It would be helpful to think of the year so far as being favorable by \$499k (expense favorability \$2,093k less the annual gap of \$1,594k).

Expense Schedule *(shows total expenses per division, per department – excludes revenue/funding)*

Office of the Medical Officer of Health \$195k fav

Office of the Associate MOH: \$10k unf overtime related to COVID-19 activities.

Office of the MOH: flat to budget with some small favorability on wages.

PHAS: \$32k fav wages & benefits offset with \$8k unf overtime.

Program Planning & Evaluation: \$163k fav wages & benefits with no charges for Emergency Planning, PA's and Librarian. \$8k fav in general expenses with no charges for Q1.

Office of the Chief Nursing Officer Division \$123k fav

Chief Nursing Officer: \$77k fav wages & benefits with no charges for CNO & Administration Health Equity. \$8k fav in general expenses with no charges for Q1.

Health Equity: \$30k fav wages & benefits. \$5k fav on professional services with the remaining general accounts seeing no charges for Q1.

Environmental Health & Infectious Diseases \$559k fav

Community Outreach & Clinical Support Services: \$98k unf wages across Administration and Outreach Worker. \$30k unf wages with non-budgeted Clinical Team Assistant. \$75k fav wages with no charges for PHN and Dental Assistant. Unfavorable wages have also caused benefits to be \$12k unf.

Food Safety & Healthy Environments: \$64k fav wages for the Public Health Inspectors. \$9k fav benefits.

Infectious Diseases: \$35k fav wages for PHN and \$75k fav wages for PHI- Public Health Inspectors. \$28k fav benefits. Both Administration and Overtime were overspent totaling \$9k unf.

Office of the Director: flat to budget with no spending in general expenses.

Safe Water & Vector-Borne Diseases: \$40k fav wages & benefits with no charges against budgeted PHI and Students. \$52k fav across general expenses with little to no spending. Public Education Materials were overspent to budget by \$4k.

Sexual Health: \$92k fav wages & benefits. \$15k fav Clinic Physician Fee. \$48k fav Oral Contraceptives.

Vaccine Preventable Disease: \$107k fav wages & benefits. \$13k fav on vaccines.

COVID-19 \$311k fav

Covid-19 Case & Contact Mgmt: \$1,401k fav wages & benefits including \$2,089k fav for the development of the Infectious Disease Control & Sustained Covid Response team offset with \$480k unf overtime. No charges against many of the general expenses amounting to \$62k fav offset with non-budgeted charges to Computer Software and Equipment for \$59k unf.

Covid-19 Vaccine: \$1008k unf wages & benefits including \$173k unf Management, \$270k unf Admin, \$272k unf Immunizer and \$224k unf overtime. Highlights from general expenses include \$139k unf Security, \$32k unf Computer Software, \$73k unf Rental, \$168k fav Professional Services, \$25k fav Travel.

Healthy Living \$723k fav

Child Health Team: \$30k unf wages & benefits including \$35k unf for non-budgeted Casual PHN's. There were very few charges through general expenses and amounted to \$17k fav variance.

Chronic Disease & Tobacco Control: \$116k fav wages & benefits. Most wages are favorable except for non-budgeted Casual PHN \$13k unf and non-budgeted Admin-OTS \$5k unf. General expenses have minimal charges except for Printing which was \$21k unf.

Harvest Bucks: \$10k unf as we issued more "bucks" than budgeted. This department is a flow-thru and will net to zero.

Healthy Communities & Injury Prevention: \$201k fav wages & benefits for PHN's. Minimal spending across general expenses contributing \$13k fav.

Office of the Director: \$13k fav wages & benefits including \$14k fav for Admin as no charges were booked offset with \$7k unf overtime. There were no charges to general expenses amounting to \$5k fav.

Oral Health Programs: \$107k fav wages & benefits. \$148k fav senior dental care Outside Dentists. \$44k fav equipment & special projects.

SFO-South West TCAN: \$37k fav wages & benefits including \$28k fav for Management and Admin where no charges were booked. Six projects included here with no spending against budget \$37k fav.

Young Adult Team: \$12k unf wages & benefits including \$15k unf for PHN's, \$13k unf overtime, \$18k fav as no Dietician wages were charged. \$11k fav across general expenses

Healthy Start \$396k fav

Early Years Community Health: \$45k fav wages & benefits including \$20k fav for Admin-EYCHP where no charges were booked. Program Resources were overspent by \$6k unf but offset with \$7k fav from little spending on general expenses.

Healthy Beginnings Visiting & Group Programs: \$229k fav wages & benefits with PHN's contributing \$129k fav. General expenses have minimal spending and resulted in \$15k fav.

Healthy Families Home Visiting: \$79k fav wages & benefits of which included no spending against Management \$81k fav and overspending for PHN's \$30k unf. Minimal spending in general expenses \$20k fav.

Office of the Director: Flat to budget for the most part with no charges to general expenses.

Healthy Organization \$214k unf

Communications: \$13k unf wages & benefits of which includes \$5k unf overtime and \$4k unf benefits. Expenses related to travel, meetings, and education were all <nil>.

Finance: \$30k unf wages & benefits of which includes \$18k unf overtime and additional staffing \$13k. General expenses were <nil> except for small spending in Supplies.

General – Main MLHU: A non-budgeted labour relations cost required \$160k unf spending. Legal fees were also overspent at \$59k unf. Unfavorable variances were partially offset with favorability from Security \$25k fav and reduced interest charges \$20k fav.

Human Resources: \$56k unf wages & benefits of which includes \$23k unf overtime.

Information Technology: \$43k fav wages & benefits including a \$46k fav management budget with no charges. General expenses were overspent by \$48k unf including IT Consulting \$33k unf, Equipment \$23k unf and offset with Computer Software Support Agreements \$16k fav.

Office of the Director: \$18k unf wages & benefits as budget didn't represent the new CEO. General expenses \$31k fav with Staff Education \$18k fav and Professional Services \$6k fav.

Procurement & Operations: \$13k unf wages & benefits to represent additional head count over budget.

Strategy, Risk & Privacy: \$54k fav wages & benefits due to vacancies.

Forecast

Forecasting is a critical process to understanding risk and opportunities from an annual perspective. The focus here is on Annual Forecast vs the 2022 Budget and what changes, or events, have taken place to warrant a change from the Board approved budget.

Changes or events that impact the Health Unit's financial bottom line:

+ \$35 - Mandatory Program funding approved \$20,004,600 vs budget \$20,004,565 (Ministry rounding).

Changes or events that impact programs only:

1. Ontario Seniors Dental Care Program funding \$2,191,500 vs budget \$1,861,400. Increased funding was offset with increased Professional Services (outside dental services).
2. School Focused Nurses Initiative funding \$1,642,700 vs budget \$726,000. Increased funding was offset with increased wages and benefits for PHN's.
3. COVID-19 Recovery funding was not approved. Decreased funding was offset with decreased wages, benefits and travel costs.
4. Special Projects (EMR) funding was not approved. Decreased funding was offset with decreased wages (both funding and expense was budgeted under Information Technology).

Items Excluded:

- Nurses Retention Incentive. Funding approved for \$793,400. This is a flow-through and will be offset equally with payments to qualifying nurses and/or a repayment to the Ministry. Funding will be recognized at the time we incur the expense.
- COVID-19 C&CM and Vaccine. Although we were only approved for about half of our COVID-19 budget, the forecast has been kept equal to budget. This has been done because the Ministry has demonstrated that they will top up funding if COVID-19 expenses exceed COVID-19 funding plus surplus from mandatory programs (same as 2021).
- All capital related transactions are excluded as this focus is on operating only.

Cashflow Projections

Bank balances: March 31st was \$136,000 negative. As at May 18th it was \$666,501 negative.

Total available line of credit: \$8 million with no draw.

Outstanding bank loan: Fixed \$3,050,000 owing \$2,902,319. Variable \$1,150,000 owing \$1,078,125.

Employment Cost Reserve: \$176,077. A declared reserve on our financial statements. This is not the same as money in the bank, but there should be cash available to fund the reserve if called upon.

The First Quarter: Cash was depleted in the first quarter with increased payroll and no COVID-19 funding. Payroll averaged \$1.8 million per payment against an average of \$1.4 million and there were three pays withdrawn from the account in March (actual 3 pays will occur in April, but the bank withdraws in advance of payment). Payroll was more than average due to increased overtime and vaccine clinic operations.

The Second Quarter: Payroll has returned to slightly higher than average at \$1.489 million per payment and we did receive \$1,776,900 COVID-19 payment on April 26th – this payment related to 2021. To date, we have not received any 2022 COVID-19 funds.

Ministry Clawbacks / Prior Year Adjustments / Capital (as per Schedule D – Cashflow Schedule)

*February: **\$1,054,677 paid.** 2021 School Focused Nurses Initiative.* We had received \$2.2 million with forecasted usage of \$924,470. The Ministry clawed back \$1,054,677. We now owe the Ministry \$220,853 depending on actual expenses in January to March 2022 – still to be determined.

*March: **\$81,244 Received.*** Vaccine reimbursement of \$87,366 offset with a claw back of \$6,122 for compensation initiative.

*April: **\$1,776,900 Received.*** 2021 COVID-19 funds received. Required \$1,082,558 to balance. Now owe the Ministry \$694,342.

*December's forecast includes the following adjustments to total **\$2,011,414 owing:***

\$1,419,130 owing. 2020 COVID-19. COVID-19 costs were estimated at \$5,996,023 during the 2020Q4 SAR submission – this is the amount that was paid to the Health Unit in 2021. Final COVID-19 costs were determined to be \$4,576,893 and reported as such in the audited ARR (annual reconciliation report).

\$235,388 owing. 2020 Senior Dental Care Program. We had received \$1,861,400 and used \$824,233. The Ministry claw backed \$801,779 with the balance still owing.

\$210,001 owing. 2021 Senior Dental Care Program. We had received \$1,861,400 and used \$1,651,399. We now owe the Ministry \$210,001.

\$220,853 owing. 2021 School Focused Nurses Initiative. Represents the estimated remaining amount that wasn't clawed back in February as noted above (2,200,000 funding - 924,470 usage - 1,054,677 clawback).

\$318,300 Receivable. Capital for Strathroy Dental: We have received \$700,000 to date and were approved for an additional \$350,100 (\$318,300 in 2022 & \$31,800 in 2023) to bring the total to \$1,050,100.

\$450,000 Receivable. 2021 Year-End & COVID-19. Ministry approved an additional \$2,226,900 on March 31st to further support 2021 operations of which we received \$1,776,900 on April 26th. The remaining \$450,00 is outstanding.

\$694,342 owing. 2021 Year-End & COVID-19. Required \$1,082,558 to balance – the 2021Q4 presentation showed a draft, non-audited, requirement of \$1,451,665. This amount was reduced through the year end closing process. On April 26th, we received \$1,776,900. We now owe the Ministry \$694,342.

Net 2021 Year-End & COVID-19. We owe the Ministry \$244,342 (694,342 owing - 450,000 receivable).

Forecast Assumptions

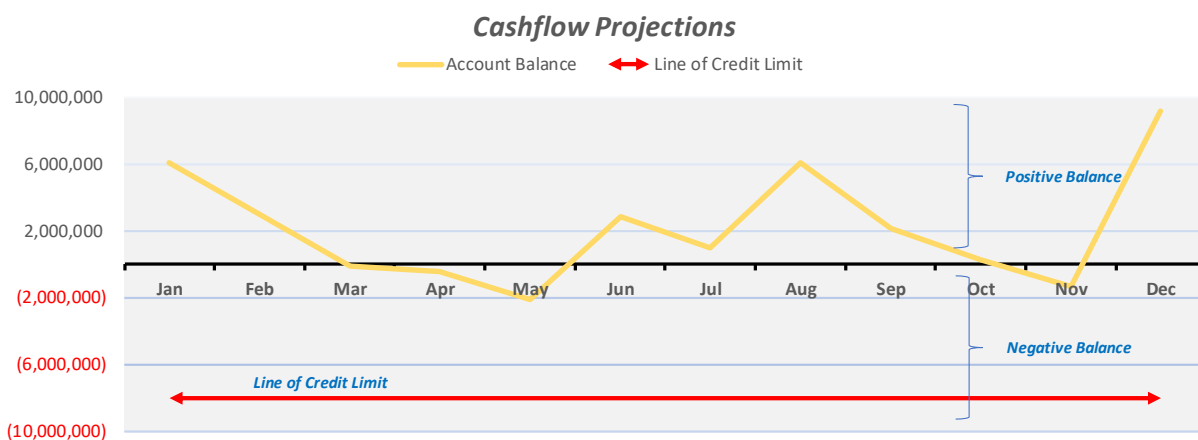
June Forecast: \$396,700 Received. Retention Incentive for Nurses. Included in MOH Other Funding- Approved for \$793,400 with a Ministry commitment to fund more if required. The timing of funding has been estimated to June and October. The funding will be paid to eligible nurses, split equally in the spring and the fall. Each nurse will be eligible for a \$5k maximum incentive.

October Forecast: \$396,700 Received. Retention Incentive for Nurses. Included in MOH Other Funding- The remaining 50% from the approved \$793,400 – comment above for June.

Following the funding announcement from May 2nd, the Ministry held a meeting on May 5th to further discuss funding. Although no clear date was provided for COVID-19 funding, we have forecasted to receive **half of the approved \$13.6 million end of June and the other half end of August.** This is an estimate and we are hopeful that funds will flow more quickly.

Included in December is an estimate of the amount of COVID-19 funding that will be required to balance the Health Unit. Assuming COVID-19 & programs spend to forecast for the balance of the year, we will require \$12,145,000 to balance.

Below is an estimate of cashflow projections based on the above commentary.



Schedule A – Ministry Amending Agreement

DETAILED BUDGET - MAXIMUM BASE FUNDS (FOR THE PERIOD OF JANUARY 1ST TO DECEMBER 31ST, UNLESS OTHERWISE NOTED)	
Programs/Sources of Funding	Approved Allocation (\$)
Mandatory Programs (70%) ⁽¹⁾	20,004,600
MOH / AMOH Compensation Initiative (100%) ⁽²⁾	85,800
Ontario Seniors Dental Care Program (100%) ⁽³⁾	2,181,500
Total Maximum Base Funds⁽⁴⁾	22,281,900

DETAILED BUDGET - MAXIMUM ONE-TIME FUNDS (FOR THE PERIOD OF APRIL 1, 2022 TO MARCH 31, 2023, UNLESS OTHERWISE NOTED)	
Projects / Initiatives	2022-23 Approved Allocation (\$)
Cost-Sharing Mitigation (100%) ⁽⁵⁾	1,361,300
Mandatory Programs: Needle Exchange Program (100%)	19,000
Mandatory Programs: Public Health Inspector Practicum Program (100%)	30,000
COVID-19: General Program (100%) ⁽⁵⁾	5,313,000
COVID-19: Vaccine Program (100%) ⁽⁵⁾	8,286,800
Ontario Seniors Dental Care Program Capital: New Dental Operators - Strathroy (100%)	318,300
School-Focused Nurses Initiative (100%) ⁽⁶⁾	# of FTEs 22 1,642,700
Temporary Retention Incentive for Nurses (100%)	793,400
Total Maximum One-Time Funds⁽⁴⁾	17,744,500

MAXIMUM TOTAL FUNDS	2022-23 Approved Allocation (\$)
Base and One-Time Funding	40,026,400

DETAILED BUDGET - MAXIMUM ONE-TIME FUNDS (FOR THE PERIOD OF APRIL 1, 2023 to MARCH 31, 2024, UNLESS OTHERWISE NOTED)	
Projects / Initiatives	2023-24 Approved Allocation (\$)
Ontario Seniors Dental Care Program Capital: New Dental Operators - Strathroy (100%)	31,800
Total Maximum One-Time Funds⁽⁴⁾	31,800

DETAILED BUDGET - MAXIMUM ONE-TIME FUNDS (FOR THE PERIOD OF APRIL 1, 2021 to MARCH 31, 2022, UNLESS OTHERWISE NOTED)	
Projects / Initiatives	2021-22 Approved Allocation (\$)
Temporary Retention Incentive for Nurses (100%)	793,400
Total Maximum One-Time Funds⁽⁴⁾	793,400

2021-22 CARRY OVER ONE-TIME FUNDS ⁽⁷⁾ (CARRY OVER FOR THE PERIOD OF APRIL 1, 2022 to MARCH 31, 2023)		
Projects / Initiatives	2021-22 Approved Allocation (\$)	2022-23 Carry Over Amount (\$)
Ontario Seniors Dental Care Program Capital: New Dental Operators - Strathroy (100%)	600,000	600,000
Total Maximum One-Time Funds	600,000	600,000

NOTES:

- (1) Base funding increase for Mandatory Programs is pro-rated at \$148,575 for the period of April 1, 2022 to December 31, 2022; therefore, maximum base funding flowed for the period of January 1, 2022 to December 31, 2022 will be \$19,955,075.
- (2) Cash flow will be adjusted to reflect the actual status of current Medical Officer of Health and Associate Medical Officer of Health positions.
- (3) Base funding increase for the Ontario Seniors Dental Care Program is pro-rated at \$247,575 for the period of April 1, 2022 to December 31, 2022; therefore, maximum base funding flowed for the period of January 1, 2022 to December 31, 2022 will be \$2,108,975.
- (4) Maximum base and one-time funding is flowed on a mid and end of month basis, unless otherwise noted by the Province. Cash flow will be adjusted when the Province provides a new Schedule "A".
- (5) Approved one-time funding is for the period of January 1, 2022 to December 31, 2022.
- (6) Approved one-time funding is for the period of April 1, 2022 to December 31, 2022.
- (7) Carry over of one-time funding is approved according to the criteria outlined in the provincial correspondence dated March 14, 2022.

Schedule B – Consolidated Results

Q1 Financials, ending March 31, 2022

	Current Period			Ytd	Annual Forecast		2022 Budget
	Actual	Budget	fav/(unf)		Forecast	FTG	
Revenue							
Grant Revenue	(7,665,708)	(15,292,826)	(7,627,117)	(7,665,708)	(60,848,098)	(53,182,390)	(61,171,302)
Other Revenue	(284,970)	(221,525)	63,446	(284,970)	(686,098)	(401,128)	(886,098)
User Fees	(33,311)	(85,735)	(52,424)	(33,311)	(342,940)	(309,629)	(342,940)
Revenue Total	(7,983,990)	(15,600,085)	(7,616,095)	(7,983,990)	(61,877,136)	(53,893,146)	(62,400,340)
Expense							
Salary and Wages	7,210,893	9,369,442	2,158,549	7,210,893	39,689,681	32,478,788	40,600,914
Salary and Wages - OT	1,298,016	447,783	(850,233)	1,298,016	1,940,393	642,377	1,940,393
Salary and Wages - Gap	0	0	0	0	(1,593,768)	(1,593,768)	(1,593,768)
Benefits	1,704,150	2,078,960	374,810	1,704,150	8,893,895	7,189,745	8,834,001
Staff Development	5,376	43,071	37,695	5,376	172,284	166,909	172,284
Travel	16,879	100,774	83,895	16,879	401,097	384,218	403,097
Program Supplies	429,640	550,663	121,023	429,640	2,202,653	1,773,013	2,202,653
Other (Program) Costs	42,867	81,381	38,514	42,867	325,525	282,657	325,525
Cost of Goods Sold	0	13,075	13,075	0	52,300	52,300	52,300
Furniture & Equipment	737,333	605,141	(132,192)	737,333	2,420,565	1,683,232	2,420,565
Occupancy Costs	788,553	713,673	(74,881)	788,553	2,854,690	2,066,137	2,854,690
Professional Services	662,043	967,344	305,301	662,043	4,199,477	3,537,434	3,869,377
Interest Expense	48,091	69,827	21,736	48,091	279,308	231,217	279,308
Board Expenses	14,168	9,750	(4,418)	14,168	39,000	24,832	39,000
Expense Total	12,958,010	15,050,885	2,092,874	12,958,010	61,877,101	48,919,091	62,400,340
Grand Total	4,974,020	(549,201)	(5,523,221)	4,974,020	(35)	(4,974,055)	0

Notes:

- These results are for MLHU only and exclude MLHU2. The intent is to include both companies in the future (MLHU2 has annual income of approximately \$3 million).
- Current Period: is measured against the budget as there wasn't a forecast in place.
- Annual Forecast: has been adjusted for items previously identified under Forecast, page 6.
FTG: "forecast to go" and provides an estimate as to how much is remaining till the end of the year.
- 2022 Budget: Board approved and is for information. Also serves as a good comparative to the Forecast column to see what has changed from budget.

Schedule C – Expense Schedule

Q1 Financials, ending March 31, 2022

	Current Period			Annual Forecast			2022 Budget
	Actual	Budget	fav/(unf)	Ytd	Forecast	FTG	
Office of the Medical Officer of Health							
Office of the Associate MOH	95,160	84,651	(10,509)	95,160	366,570	271,410	366,570
Office of the MOH	111,153	119,876	8,723	111,153	518,173	407,021	518,173
Population Health Assess & Surv	116,680	142,478	25,798	116,680	616,675	499,995	616,675
Program Planning & Evaluation	44,313	215,389	171,076	44,313	930,337	886,024	930,337
Office of the Medical Officer of Health Total	367,306	562,393	195,088	367,306	2,431,756	2,064,450	2,431,756
Office of the Chief Nursing Officer Division							
Chief Nursing Officer	35,122	120,682	85,560	35,122	521,371	486,249	521,371
Health Equity	67,482	105,414	37,931	67,482	453,100	385,618	453,100
Office of the Chief Nursing Officer Division Total	102,604	226,096	123,491	102,604	974,472	871,867	974,472
Environmental Health & Infectious Diseases							
Community Outreach & Clinical Support Services	282,448	216,720	(65,728)	282,448	933,393	650,945	933,393
Food Safety & Healthy Environments	338,870	422,499	83,629	338,870	1,828,009	1,489,139	1,828,009
Infectious Diseases	228,718	386,822	158,104	228,718	1,674,197	1,445,479	1,674,197
Office of the Director	53,390	60,421	7,031	53,390	261,715	208,325	261,715
Safe Water & Vector-Borne Diseases	226,343	318,982	92,639	226,343	1,362,036	1,135,693	1,362,036
Sexual Health	505,311	666,235	160,924	505,311	2,793,289	2,287,978	2,793,289
Vaccine Preventable Disease	256,353	378,801	122,447	256,353	1,635,262	1,378,909	1,635,262
Environmental Health & Infectious Diseases Total	1,891,433	2,450,481	559,048	1,891,433	10,487,902	8,596,469	10,487,902
Covid-19							
Covid-19 Case & Contact Mgmt	2,223,137	3,646,648	1,423,511	2,223,137	15,624,046	13,400,909	15,759,543
Covid-19 Vaccine	4,191,763	3,078,957	(1,112,806)	4,191,763	12,517,509	8,325,746	13,035,351
Covid-19 Total	6,414,900	6,725,605	310,705	6,414,900	28,141,555	21,726,655	28,794,894
Healthy Living							
Child Health Team	410,135	396,807	(13,329)	410,135	1,713,587	1,303,451	1,713,587
Chronic Disease & Tobacco Control	290,188	411,146	120,958	290,188	1,762,405	1,472,216	1,762,405
Harvest Bucks (Bankers Only)	43,546	36,750	(6,796)	43,546	147,000	103,454	147,000
Healthy Communities & Injury Prevention	69,944	294,625	224,681	69,944	1,272,365	1,202,420	1,272,365
Office of the Director	45,107	63,280	18,173	45,107	272,516	227,409	272,516
Oral Health Programs	391,022	692,616	301,595	391,022	3,223,917	2,832,896	2,893,817
SFO-South West TCAN	27,097	107,266	80,169	27,097	447,858	420,761	447,858
Young Adult Team	268,062	265,883	(2,180)	268,062	1,148,143	880,080	1,148,143
Healthy Living Total	1,545,103	2,268,373	723,271	1,545,103	9,987,790	8,442,688	9,657,690
Healthy Start							
Early Years Community Health Promotion	221,788	267,565	45,777	221,788	1,155,265	933,477	1,155,265
Healthy Beginnings Visiting & Grp Programs	146,031	390,888	244,857	146,031	1,687,613	1,541,582	1,687,613
Healthy Families Home Visiting	105,869	205,639	99,770	105,869	883,893	778,024	883,893
Office of the Director	45,375	50,624	5,249	45,375	218,155	172,780	218,155
Healthy Start Total	519,063	914,717	395,653	519,063	3,944,927	3,425,863	3,944,927
Healthy Organization							
Communications	150,818	140,160	(10,658)	150,818	605,384	454,567	605,384
Finance	119,479	89,408	(30,071)	119,479	387,174	267,695	387,174
General - Main MLHU	982,446	814,325	(168,121)	982,446	1,513,534	531,088	1,513,534
Human Resources	253,116	199,570	(53,546)	253,116	863,841	610,724	863,841
Information Technology	427,625	421,950	(5,675)	427,625	1,522,128	1,094,502	1,722,128
Office of the Director	75,437	87,939	12,503	75,437	368,222	292,785	368,222
Procurement & Operations	58,462	45,815	(12,647)	58,462	198,508	140,046	198,508
Strategy, Risk & Privacy	50,217	104,051	53,834	50,217	449,909	399,691	449,909
Healthy Organization Total	2,117,601	1,903,220	(214,381)	2,117,601	5,908,700	3,791,099	6,108,700
Grand Total - MLHU	12,958,010	15,050,885	2,092,874	12,958,010	61,877,101	48,919,091	62,400,340

Notes:

- These results are for MLHU only and exclude MLHU2.
- Notes from previous page apply to this section as well.

Schedule D – Cashflow Schedule

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Budget
Opening Cash Balance	10,505,109	6,087,405	2,957,693	(135,998)	(464,604)	(2,115,001)	2,856,634	956,237	6,095,740	2,101,830	283,565	(1,366,832)	10,505,109	
Cash Receipts	2,944,209	3,142,787	3,484,629	3,050,117	3,190,661	10,377,261	3,190,661	9,980,561	3,190,661	3,587,361	3,190,661	15,379,992	64,709,561	
Cash Disbursements	(7,750,197)	(6,272,500)	(6,578,320)	(3,378,723)	(4,841,058)	(5,405,626)	(5,091,058)	(4,841,058)	(7,184,571)	(5,405,626)	(4,841,058)	(4,879,383)	(66,469,177)	
Ending Cash Balance	6,087,405	2,957,693	(135,998)	(464,604)	(2,115,001)	2,856,634	956,237	6,095,740	2,101,830	283,565	(1,366,832)	9,133,777	8,745,494	
Receipts:														
MOH Mandatory Programs	1,651,958	1,651,958	1,651,965	1,650,542	1,667,047	1,667,047	1,667,047	1,667,047	1,667,047	1,667,047	1,667,047	1,667,048	19,942,800	20,004,565
MOH Mitigation Funding	0	226,884	113,441	85,082	113,442	113,442	113,442	113,442	113,442	113,442	113,442	113,438	1,332,939	1,361,300
MOH Other Funding	6,686	6,686	6,689	6,040	16,025	412,725	16,025	16,025	16,025	412,725	16,025	16,021	947,699	392,300
Grant Income IPAC	0	0	292,986	0	24,416	24,416	24,416	24,416	24,416	24,416	24,416	24,410	488,308	292,986
City of London	558,714	665,414	612,067	612,067	612,067	612,067	612,067	612,067	612,067	612,067	612,067	612,061	7,344,792	7,344,798
County of Middlesex	108,942	0	108,942	228,723	117,072	117,072	117,072	117,072	117,072	117,072	117,072	117,067	1,383,178	1,404,859
100% Covid / Recovery						6,789,900		6,789,900				12,145,000	25,724,800	28,068,894
100% SFNI	184,250	184,250	184,250	60,500	136,892	136,892	136,892	136,892	136,892	136,892	136,892	71,209	1,642,700	726,000
100% Senior Dental Care Pgrm	155,116	155,116	155,118	155,116	182,625	182,625	182,625	182,625	182,625	182,625	182,625	292,659	2,191,500	1,861,400
Other Revenue (from Operations)	71,601	11,282	121,580	45,096	31,703	31,703	31,703	31,703	31,703	31,703	31,703	31,707	503,187	380,440
Discreet Programs (flow-thru)				0	46,900	46,900	46,900	46,900	46,900	46,900	46,900	46,898	375,198	562,798
MOH Other Funding														
Sub-Total - MLHU	2,737,266	2,901,590	3,247,037	2,843,166	2,948,189	10,134,789	2,948,189	9,738,089	2,948,189	3,344,889	2,948,189	15,137,518	61,877,101	62,400,340
100% - Public Health of Canada		34,254	30,649		26,844	26,844	26,844	26,844	26,844	26,844	26,844	26,846	279,657	322,130
100% - Public Health of Ontario		0	0		8,685	8,685	8,685	8,685	8,685	8,685	8,685	8,688	69,483	104,223
100% - MCCSS	206,943	206,943	206,943	206,951	206,943	206,943	206,943	206,943	206,943	206,943	206,943	206,940	2,483,321	2,483,313
Sub-Total - MLHU2	206,943	241,197	237,592	206,951	242,472	242,472	242,472	242,472	242,472	242,472	242,472	242,474	2,832,461	2,909,666
Total Cash Receipts	2,944,209	3,142,787	3,484,629	3,050,117	3,190,661	10,377,261	3,190,661	9,980,561	3,190,661	3,587,361	3,190,661	15,379,992	64,709,561	65,310,006
Budgeted Cash Receipts	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,503	5,442,473	65,310,006	65,310,006
Cash Disbursements:														
Salaries and Wages	2,564,116	1,214,457	2,502,303	1,315,156	1,510,006	1,824,574	1,510,006	1,510,006	2,265,009	1,824,574	1,510,006	1,610,004	21,160,216	21,360,216
Benefits	633,943	388,995	575,210	379,734	422,925	422,925	422,925	422,925	622,175	422,925	422,925	275,336	5,412,943	5,412,943
General Expenses	1,440,796	1,058,790	610,393	1,777,180	483,624	483,624	483,624	483,624	483,624	483,624	483,624	483,628	8,756,155	8,426,055
Covid / SFNI / Recovery	1,751,871	2,612,317	2,209,353	1,476,603	2,448,353	2,448,353	2,448,353	2,448,353	3,481,742	2,448,353	2,448,353	1,919,551	28,141,555	28,794,894
GAP	0	0	0	0	0	0	0	0	0	0	0	(1,593,768)	(1,593,768)	(1,593,768)
Sub-Total - MLHU	6,390,726	5,274,559	5,897,259	4,948,672	4,864,908	5,179,476	4,864,908	4,864,908	6,852,550	5,179,476	4,864,908	2,694,751	61,877,101	62,400,340
Sub-Total - MLHU2	206,943	241,197	237,592	206,951	226,150	226,150	226,150	226,150	332,021	226,150	226,150	173,218	2,754,822	2,909,666
Ministry Clawbacks/Prior Yr/Capital		1,054,677	(81,244)	(1,776,900)								2,011,414	1,207,947	
HST Paid/(Received)		(282,722)			(250,000)			(250,000)			(250,000)		(1,032,722)	
Changes in Working Capital	1,152,528	(15,211)	524,713										1,662,030	
Total Cash Disbursements	7,750,197	6,272,500	6,578,320	3,378,723	4,841,058	5,405,626	5,091,058	4,841,058	7,184,571	5,405,626	4,841,058	4,879,383	66,469,177	65,310,006
Budgeted Cash Disbursements	5,122,649	5,122,649	5,122,649	7,186,453	5,110,297	5,110,297	5,110,297	5,110,297	7,186,453	5,110,297	5,110,297	4,907,371	65,310,006	65,310,006

Schedule E – Factual Certificate

To: Members of the Board of Health, Middlesex-London Health Unit

The undersigned hereby certify that, to the best of their knowledge, information and belief after due inquiry, as at March 31, 2022:

1. The Middlesex-London Health Unit is compliant, as required by law, with all statutes and regulations relating to the withholding and/or payment of governmental remittances, including, without limiting the generality of the foregoing, the following:
 - All payroll deductions at source, including Employment Insurance, Canada Pension Plan and Income Tax;
 - Ontario Employer Health Tax; and
 - Federal Harmonized Sales Tax (HST).
 Further, staff believe that all necessary policies and procedures are in place to ensure that all future payments of such amounts will be made in a timely manner.
2. The Middlesex-London Health Unit has remitted to the Ontario Municipal Employees Retirement System (OMERS) all funds deducted from employees along with all employer contributions for these purposes.
3. The Middlesex-London Health Unit is compliant with all applicable Health and Safety legislation.
4. The Middlesex-London Health Unit is compliant with applicable Pay Equity legislation.
5. The Middlesex-London Health Unit has not substantially changed any of its accounting policies or principles since December 8, 2016.
6. The Middlesex-London Health Unit reconciles its bank accounts regularly and no unexpected activity has been found.
7. The Middlesex-London Health Unit has filed all information requests within appropriate deadlines.
8. The Middlesex-London Health Unit is compliant with the requirements of the Charities Act, and the return for 2020 has been filed.
9. The Middlesex-London Health Unit has been named in a complaint to the Human Rights Tribunal of Ontario by a former student. The hearing has been completed and a decision to dismiss has been rendered that found no violation of human rights. The individual filed an Application to Divisional Court for a Judicial Review which was dismissed. The individual was seeking motion for leave to appeal, which was also dismissed. This matter is now closed. MLHU has also been named in a second complaint to the Human Rights Tribunal of Ontario by the same individual. This application is in respect to the recruitment of three management positions from 2017 and 2018 for which he was not selected for an interview. This matter is outstanding and there has been no follow up from HRTO.

10. The Middlesex-London Health Unit has been named in a legal action with respect to 'Cali Nails' or 'the numbered company that operated Cali Nails' for damages arising from the Order to close for Infection Prevention and Control (IPAC) infractions, and the publication of the associated Closure Order. The claim alleges that, as the Order to close and the associated public notice that the IPAC infractions could lead to blood borne infections, this directly led to the drop in its business and the closure of the salon. Ultimately damages are being sought as a result. Legal proceedings are ongoing.

11. The Middlesex-London Health Unit is fulfilling its obligations by providing services in accordance with our funding agreements, the Health Protection & Promotion Act, the Ontario Public Health Standards, and as reported to the Board of Health through reports including but not limited to:
 - Quarterly Financial Updates;
 - Annual Audited Financial Statements;
 - Annual Reporting on the Accountability Indicators;
 - Annual Service Plans; and
 - Information and Information Summary Reports.

Dated at London, Ontario this 31st day of March, 2022.

Dr. Alex Summers
Medical Officer of Health

Ms. Emily Williams
CEO