

**BRANT COUNTY BOARD OF HEALTH
REGULAR AGENDA
Wednesday, September 9, 2020, 9:00 a.m, Classroom 420/421**

1. CALL TO ORDER

Chair John Bell

2. CONFLICT OF INTEREST

3. ADDITIONS TO AGENDA / APPROVAL OF AGENDA

4. APPROVAL OF MINUTES

4.1 Brant County Board of Health Minutes of July 15, 2020 *

All

5. FINANCIAL REPORT

5.1 Ministry of Health 2020 Public Health Funding Report *

Ms. Lisa DiDonato

5.2 Financial Report ending July 31, 2020 *

Ms. Lisa DiDonato

5.3 COVID-19 Financial Projections Update *

Ms. Lisa DiDonato

6. BUSINESS ARISING FROM PREVIOUS MINUTES

6.1 Report from the Chair

Chair John Bell

6.2 Report from the Medical Officer of Health *

Dr. Elizabeth Urbantke

6.2.1 Medical Officer of Health Short- and Long-Term Plan *

Dr. Elizabeth Urbantke

6.3 Report from the Chief Executive Officer *

Dr. Jo Ann Tober

6.4 Food Safety Disclosure Report

No report

Motion to accept reports as presented.

7. NEW BUSINESS

7.1 COVID-19 Report *

Dr. Jo Ann Tober/Dr. Elizabeth Urbantke

7.2 Brantford Brant Ontario Health Team Application *

Dr. Jo Ann Tober

7.3 Appointment of Medical Officer of Health *

Dr. Jo Ann Tober

Motion to accept reports as presented.

8. CORRESPONDENCE (*Board members may request a copy of items that are not attached from Board of Health Secretary*)

8.1 Correspondence from Renfrew County and District Health Unit, dated July 16, 2020, re basic income.

8.2 Correspondence from Renfrew County and District Health Unit, dated July 16, 2020, re endorsement of alpha's response to the Public Health Modernization discussion paper.

8.3 Correspondence from Renfrew County and District Health Unit, dated July 16, 2020, re 2020 municipal cost-share of public health funding, COVID, and Public Health Modernization.

8.4 Correspondence from Chatham-Kent Public Health, dated July 27, 2020, re basic income.

8.5 Correspondence from Simcoe Muskoka District Health Unit, dated August 19, 2020 re COVID/public health funding.

8.6 Correspondence from Ministry of Health, dated August 21, 2020, re approval of one-time funding for 2020-21 and 2021-22 to support public health programs and services.

9. INCAMERA

10. QUESTIONS / ANNOUNCEMENTS

11. FUTURE AGENDA ITEMS

12. NEXT MEETING DATE

Wednesday, October 21, 2020, at 9:30 a.m.

13. ADJOURNMENT

Chair

** Attachments
⊕ to be distributed at the meeting*

***Attachments for Board of Health members only*

BRANT COUNTY BOARD OF HEALTH
REPORT #: 5.1

DATE: September 9, 2020

FROM: Lisa DiDonato, Acting Manager, Finance

RE: 2020 Ministry of Health Public Health Funding Report

The purpose of this report is to provide an update on the Provincial Ministry of Health Public Health Annual Service Plan Budget/Funding Approval and Accountability Agreement with the Board of Health for the Brant County Health Unit.

As per the Health Protection and Promotion Act, R.S.O. 1990 (HPPA), municipal governments are required to pay the expenses of the Board of Health and the Medical Officer of Health. Provincial funding, established through policy and accountability agreements, is provided as grants for specified portions (traditionally 75% or 100%) of program based and one-time budgeted expenditures. As the sharing of costs between the Province and the municipalities is not embedded in the HPPA, municipalities are left to pay the net costs deemed necessary by the Board of Health to deliver mandatory public health programs.

As part of their 2019 Budget, the Province announced it was making changes to the provincial/municipal cost sharing formula for public health. Despite the reduction in funding, the expectation is that health units will maintain current service levels and accountabilities under the Ontario Public Health Standards.

In August 2020, the Brant County Health Unit (BCHU) was advised of the maximum funding available under the Ministry of Health (MoH) Public Health Funding and Accountability 2020-2021 Agreement with the Brant County Board of Health. As anticipated, the Base Budget Funding included a 5% (\$413,500) decrease for Mandatory Programs. Appendix A provides a summary of the approved Grants and Budget.

Within the 2020 Budget, BCHU provided for a potential decrease in funding and had budgeted a \$300,000 reduction in MoH Public Health funding. As noted in the July Financial Report, BCHU is forecasting that the impact of the \$100,000 budgeted funding shortfall can be mitigated with Mandatory Program Operating Cost savings.

The financial impact of the change to the 2020-2021 cost sharing formula was implemented with minimal impact on the City of Brantford and County of Brant 2020 Operating Budgets. BCHU absorbed the shortfall as detailed below.

Brant County Health Unit - 2020 Budget and Actual Funding Variance

	2019 Budget	2020 Budget	Budgeted Increase (Decrease) \$	Budget Increase (Decrease) %	Net 2020 Funding Variance
Ministry of Health Public Health Division	\$8,496,500	\$8,196,500	(\$300,000)	(3.5%)	(\$413,500)
City of Brantford	\$2,481,463	\$2,531,092	\$49,629	2%	\$49,629
County of Brant	\$917,802	\$946,560	\$28,758	3%	\$28,758
Total	\$11,895,765	\$11,674,152	(\$221,613)	(1.9%)	(\$335,113)

As anticipated the MoH has made a provision for mitigation funding to offset any increased public health costs of municipalities as a result of the cost-sharing changes. With minimal impact on municipal 2020 Operating Budgets the maximum amount eligible for mitigation funding, in accordance with the Provincial Guidelines is \$78,387. This amount represents the incremental budgeted cost sharing contributions for the City of Brantford (\$49,629) and County of Brant (\$28,758).

Appendix A – Schedule “A” Grants and Budget

DETAILED BUDGET – MAXIMUM BASE FUNDS (FOR THE PERIOD OF JANUARY 1, 2020 TO DECEMBER 31, 2020, UNLESS OTHERWISE NOTED)			
Program/Sources of Funding	2019 Approved Allocation (\$)	Increase/(Decrease) (\$)	2020 Approved Allocation (\$)
Mandatory Programs (70%)	8,388,500	(413,500)	7,975,000
MOH / AMOH Compensation Initiative (100%)	108,000	(7,200)	100,800
Ontario Seniors Dental Care Program (100%)	533,500	-	533,500
Total Maximum Base Funds	9,030,000	(420,700)	8,609,300

DETAILED BUDGET – MAXIMUM BASE FUNDS (FOR THE PERIOD OF APRIL 1, 2020 TO MARCH 31, 2021, UNLESS OTHERWISE NOTED)	
Project Initiatives	2020-2021 Approved Allocation (\$)
Mitigation (100%)	413,500
Mandatory Programs: Public Health Inspector Practicum Program (100%) *	10,000
MOH / AMOH Compensation Initiative (100%)	8,200
Temporary Pandemic Pay Initiative	86,700
Total Maximum One-Time Non-Capital Funds	518,400

MAXIMUM TOTAL FUNDS	2019-2020 Approved Allocation (\$)	2020-2021 Approved Allocation (\$)
Base and One-Time Non-Capital Funding	9,030,000	9,127,700

DETAILED BUDGET – MAXIMUM BASE FUNDS (FOR THE PERIOD OF APRIL 1, 2021 TO MARCH 31, 2022, UNLESS OTHERWISE NOTED)	
Project Initiatives	2020-2021 Approved Allocation (\$)
Mitigation (100%)	413,500
Total Maximum One-Time Funds	413,500

* BCHU was approved for funding only one (\$10,000) of two (\$20,000) practicums requested within the 2020 Annual Service Plan and Budget Submission.

BRANT COUNTY BOARD OF HEALTH
REPORT #: 5.2

DATE: September 9, 2020

FROM: Lisa DiDonato, Acting Manager, Finance

RE: Financial Report for the period ending July 31, 2020

The purpose of this report is to provide an update on the financial position of the Brant County Health Unit (BCHU) and on the expenditures incurred to respond to the COVID pandemic.

The Financial Variance and Forecast, attached as Appendix 1, provides a synopsis of the financial results of BCHU for the seven months ended July 31, 2020, and a forecast for the year ending December 31, 2020.

For the period ended July 31, 2020, the Health Unit had a Net Expenditure surplus of \$1.2 million. Although the BCHU has experienced favourable financial results to July 31, 2020, there has been and will continue to be an increase in spending as clinics reopen and program and services are expanded. For the year ending December 31, 2020, BCHU is forecasting a \$11,653 Net Expenditure surplus.

In August 2020, BCHU was advised of the maximum funding available under the Ministry of Health (MoH) Public Health Funding and Accountability Agreement 2020-2021 with the Brant County Board of Health. As anticipated, the Base Budget Funding included a 5% (\$413,500) decrease for Mandatory Programs.

As part of the 2020 Budget, BCHU provided for a potential decrease in funding and had budgeted a \$300,000 reduction in MoH Public Health funding. The BCHU is forecasting that the impact of the \$100,000 budgeted funding shortfall can be mitigated with Operating Cost savings within the Mandatory Programs.

At this time, BCHU is confident that the existing level of funding from both the City of Brantford and the County of Brant will be enough to fund programs, services, and COVID costs for 2020.

Appendix A

Brant County Health Unit
Financial Variance and Forecast
For the Period Ending July 31, 2020

	Budget	Actual	Variance	% of	Budget	Forecast	Forecast
	7/31/2020	7/31/2020	Surplus (Deficit)	Budget	2020	2020	Surplus (Deficit)
Mandatory Programs							
Salaries	3,746,804	3,588,804	158,000	55.9%	6,423,092	6,328,308	94,784
Benefits	937,057	944,882	(7,825)	58.8%	1,606,382	1,630,322	(23,940)
Mileage	15,575	14,558	1,017	54.5%	26,700	25,683	1,017
Staff Development	57,479	26,319	31,160	26.4%	99,535	97,792	1,743
Supplies	566,558	355,084	211,474	36.5%	972,496	931,927	40,569
Building Maintenance and Operations	304,448	258,724	45,724	49.6%	521,910	521,931	(21)
Professional Fees	80,111	36,448	43,663	26.0%	140,333	140,333	-
Total MP Expenses	5,708,032	5,224,819	483,213	53.4%	9,790,448	9,676,295	114,153
Total 75% Funded	75,644	45,089	30,555	34.8%	129,676	129,676	-
100% Funded							
MCYS	600,763	603,780	(3,017)	58.6%	1,030,735	1,030,735	-
MoH Public Health	875,880	720,200	155,680	48.0%	1,501,511	1,501,511	-
MoH Public Health Seniors Dental	310,916	38,582	272,334	7.2%	533,500	298,582	234,918
MoH Health Promotion	234,509	175,367	59,142	43.6%	402,015	402,015	-
Health Canada	47,326	46,138	1,188	56.9%	81,130	81,130	-
Total 100% Funded	2,069,394	1,584,067	485,327	44.6%	3,548,891	3,313,973	234,918
Total Gross Expenditures	7,853,070	6,853,975	999,095	50.9%	13,469,015	13,119,944	349,071
MCYS	(601,262)	(601,265)	3	58.3%	(1,030,735)	(1,030,735)	-
MoH Public Health	(4,781,500)	(4,997,542)	216,042	61.0%	(8,196,500)	(8,094,000)	(102,500)
MoH Public Health Seniors Dental	(311,208)	(311,208)	-	0.0%	(533,500)	(298,582)	(234,918)
Health Canada	(47,326)	(49,326)	2,000	60.8%	(81,130)	(81,130)	-
Municipal Funding	(2,028,630)	(2,022,563)	(6,067)	58.2%	(3,477,652)	(3,477,652)	-
Other Revenue	(86,625)	(59,441)	(27,184)	39.8%	(149,498)	(149,498)	-
Total Revenue	(7,856,551)	(8,041,345)	184,794	59.7%	(13,469,015)	(13,131,597)	(337,418)
Net Expenditures (Revenue)	(3,481)	(1,187,370)	1,183,889		-	(11,653)	11,653

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 5.3**

DATE: September 9, 2020

FROM: Lisa DiDonato, Acting Manager, Finance

RE: COVID-19 Financial Projections Report

The purpose of this report is to provide an update on the expenditures incurred to respond to the COVID-19 pandemic.

As expected, the Brant County Health Unit (BCHU) has seen an increase in the use of personal protective equipment (PPE), cleaning, disinfecting and hand hygiene supplies. The incremental costs associated with the COVID response are provided for in the financial variance. The expectation is that BCHU's COVID-related costs, including personnel deployment costs, can be provided for within the forecasted surplus.

COVID Related Expenditures

	Supplies	Wages	Total
March	\$2,456	\$29,217	\$31,673
April	\$12,010	\$51,031	\$63,041
May	\$11,920	\$36,716	\$48,636
June	\$15,576	\$35,796	\$51,372
July	\$16,739	\$24,461	\$41,200
August Estimate	\$15,000	\$24,461	\$39,461
Total Year to Date	\$73,701	\$201,682	\$275,383

At this time, the Health Unit is confident that the existing level of funding from both the City of Brantford and the County of Brant will be enough to fund programs, services, and COVID costs for 2020.

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.2**

DATE: September 9, 2020

**FROM: Dr. Elizabeth Urbantke
Acting Medical Officer of Health**

RE: Medical Officer of Health's Report

In response to the recent increase in complaints from the Eagle Place/East Ward community regarding discarded needles, Brant County Health Unit has initiated the following measures (see appended full report):

- Daily Needle Sweep blitz and confirmed First Responders had not been picking up needles as rumoured.
- Increased messaging by outlining ways to report discarded needles, including email, phone, and online via multiple channels including social media, flyers, Neighbourhood Associations
- Communicated with the Substance Users Network of Brantford, which has resulted in the formation of a volunteer needle sweeps group to assist in ongoing needle sweeps of the downtown and East ward areas.

Please see full report attached.

The purpose of the Needle Exchange (NE) program is to provide harm reduction supplies and education to support reduction in sexually transmitted infections and blood-borne infections (e.g., HIV, Hepatitis B [HBV], Hepatitis C [HCV]) through reduced sharing of drug paraphernalia. The NE provides harm reduction supplies for safer injection and safer inhalation, along with condoms, lip balm, and hand sanitizer. In addition, NE sites dispense naloxone kits and train individuals to respond to overdoses and administer naloxone. The distribution of harm reduction supplies by a Board of Health is a requirement under the Ontario Public Health Standards. The Needle Exchange Program in Brant has been in place for at least 10 years. The Health Unit has a plan, pending ethics approval, that would evaluate the program and its impact on drug use within Brant.

Eagle Place/East Ward Needle Reporting Investigation and Response

For the Brant County Health Unit's Board of Health

August 17, 2020

Introduction

Prior to and throughout the COVID 19 pandemic, BCHU has been implementing various activities to support safe retrieval and disposal of used needles in Brant. This activities include: monitoring and responding to calls for needle pick up across Brantford; conducting needle sweep blitz; providing education and resources (such as sharps containers) to businesses and residents/property owners regarding safe disposal; working with community partners to install community disposal bins in key locations where discarded needles have historically been reported and/or found.

Currents statistics on retrieval of used needles, Jan to Aug 2020

- The number of calls/complaints to BCHU regarding used needles peaked in May 2020 and has been decreasing over the summer months.
- Notwithstanding the single unusual incident where BCHU was called by a boarding house to pick up a large bin of used needles in January (1367), the number of collected used needles trended upward in the first 5 months of 2020 and has been decreasing over the summer months
- In the first two weeks of August:
 - There has been no increase in call/complaints to BCHU regarding used needles; a total of 9 calls/complaints received and addressed
 - A total of 12 needles have been picked up by BCHU, including 3 as a result of resident complaint, and 9 – as part of the needle sweep blitz
 - In one instance, a busines owner provided a box with 25 needles found on their property

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug (up to Aug 17)
# calls	9	11	16	23	25	21	16	9
total needles picked up	1367	33	34	73	135	89	36	37
# needles resident picked up	1	3	26	44	10	19	10	25
# needles BCHU picked up	1366	30	8	29	125	70	26	12
# instances resident picked up	1	0	3	9	6	8	6	1
# instances BCHU picked up	8	11	13	14	19	13	10	8

Response

In response to the recent increase in complaints from the Eagle Place/East Ward community regarding discarded needles, BCHU has initiated the following measures:

- Daily Needle Sweep blitz in East Ward, August 11-14 (see details below)
- Increased social media messaging by outlining ways to report discarded needles, including email, phone and online (started on August 14/2020)

- Distributed a flyer in East Ward outlining the needle reporting system and steps to safely dispose used needles, (started August 13, 2020)
- Provided information on the needle reporting channels to Brantford Police, Fire, and EMS services (Aug 17 2020) and also confirmed their members had not been picking up used needles.
- Provided information re: the needle reporting system and steps to safely dispose used needles to the Eagle Place Neighbourhood Association for inclusion in their upcoming newsletter; safe retrieval of needles will be a topic of discussion at their next meeting
- MOU with the City of Brantford is being developed to increase the number of community Needle Bins. Four new bins will be introduced to the community immediately based on where needles are most likely to be found, including in the East Ward area.
- Communicated with the Substance Users Network of Brantford (August 14, 2020), which has resulted in the formation of a volunteer needle sweeps group to assist in on going needle sweeps of the downtown and East ward areas.

NEEDLE SWEEPS BLITZ, EAST WARD /EAGLE PLACE – AUG 11-14

DATE	Location	Needles Found
Aug 11	<ul style="list-style-type: none"> • Ontario and Cayuga St to Erie Ave and the Circle K lot area • Winston Court property, Parsons Park and Princess Elizabeth School • townhouse complex, riverside gardens and the Marlene Ave property including the vacant lot area beside it. • Pontiac, Strathcona and Tecumseh Streets and the alley way running between Foster and Ontario ST. 1.5 hours	0
Aug 12	<ul style="list-style-type: none"> • Railway tracks at Rose Ave and both large vacant lots on Mohawk St., between Eagle and Cayuga • Belview Park • Tom Thumb Park • Moose Park and the neighbourhoods surrounding them 2.0 hours	0
Aug 13	<ul style="list-style-type: none"> • Area was behind the Petro Canada on Clarence Street • Large wooded area and along the rail track, • Property of a closed down garden center. • *These areas not usually accessed by the public 2.0 Hours	9
Aug 14	<ul style="list-style-type: none"> • Bellview School grounds • Tutela Park • Secluded area of John Wright Soccer fields • Brant Crossing skate park & Surrounding area • Under the BSAR over pass by River Green Park 1.5 hours	0

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.2.1**

DATE: September 9, 2020

**FROM: Dr. Elizabeth Urbantke
Acting Medical Officer of Health**

RE: Medical Officer of Health Short- and Long-Term Plan

In response to the Ministry of Health's Phase 2 Audit of the Brant County Health Unit, a short-term and long-term plan for Medical Officer of Health activities and commitments was developed. (see attached for Board Members)

The plan was developed through ongoing discussions with staff, managers, and senior leadership at Brant County Health Unit.

The plan was reviewed by and feedback received from:

- Dr. Joyce Lock, Medical Officer of Health, Southwestern Public Health
- Dr. David Mowat, Consultant in Public Health and Preventive Medicine, and former Chief Medical Officer of Health of Ontario.

In addition, the following were reviewed:

- Health Protection and Promotion Act
- Ontario Public Health Standards: Requirements for Programs, Services, and Accountability
- Policy Framework on Medical Officer of Health Appointments, Reporting and Compensation
- Brant County Health Unit Position Description – Medical Officer of Health
- Set of Minimum Competencies for Medical Officers of Health in Canada
- Core Competencies for Public Health in Canada - Public Health Agency of Canada.

With the COVID-19 pandemic, some of the items of the short-term plan have been delayed or put on hold, for example in-person physician engagement events were scheduled in the Spring. However, the pandemic has accelerated the progress of some items, for example my integration with community leaders with the participation in our Joint Municipal EOC which includes the municipalities, emergency services, acute care sector, and school boards. Since February, much of my focus has been on the COVID response but I have looked for opportunities to continue to incorporate what is outlined in the plan as much as possible.

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.3**

DATE: September 9, 2020

FROM: Jo Ann Tober

RE: Chief Executive Officer Report

School-Focused Nurses in Public Health Units

On July 30, 2020, the Government of Ontario announced the investment of \$50 million to hire up to 500 additional school-focused nurses in public health units to provide rapid-response support to schools and boards in facilitating public health and preventative measures, including contact tracing and COVID-19 mitigation strategies. Under this initiative, the Brant County Health Unit (BCHU) was allocated approximately 5 positions. Subsequently, on August 26, 2020, the Ontario government announced an additional \$12.5 million to support up to 125 additional nursing positions in public health units to help schools manage COVID cases. This additional funding allocated up to 2 more nursing positions to BCHU. Health units have been required to provide daily reports to the Ministry of Health on progress with hiring the nurses under this initiative. Recruitment efforts are underway to fill the up to 7 nursing positions at BCHU. Information on funding for these positions is still outstanding and the budget for these positions is still unknown.

Adjustments to Ministry of Health Funding

The format for the funding approval from the Ministry of Health has been modified to consolidate numerous previously-separated budgets into a more global budget. This consolidation will facilitate the transfer of funds between program areas and may streamline funding reporting requirements. Information has also been provided on one-time mitigation funding for both 2020 and for 2021. This is the first time funding information for the next fiscal year has been provided.

COVID -19 Extraordinary Costs Reimbursement Request Process

On August 21, 2020, the Ministry of Health Public Health Division released a request for public health units to submit a COVID-19 Expense Form template for reimbursement for extraordinary expenses. This request is only for funding beyond what can be accommodated in current health unit budget envelopes. Health units must continue to track COVID-19 expenses separately and all health units must submit a request form by September 11, 2020 even if no extraordinary funding is being requested.

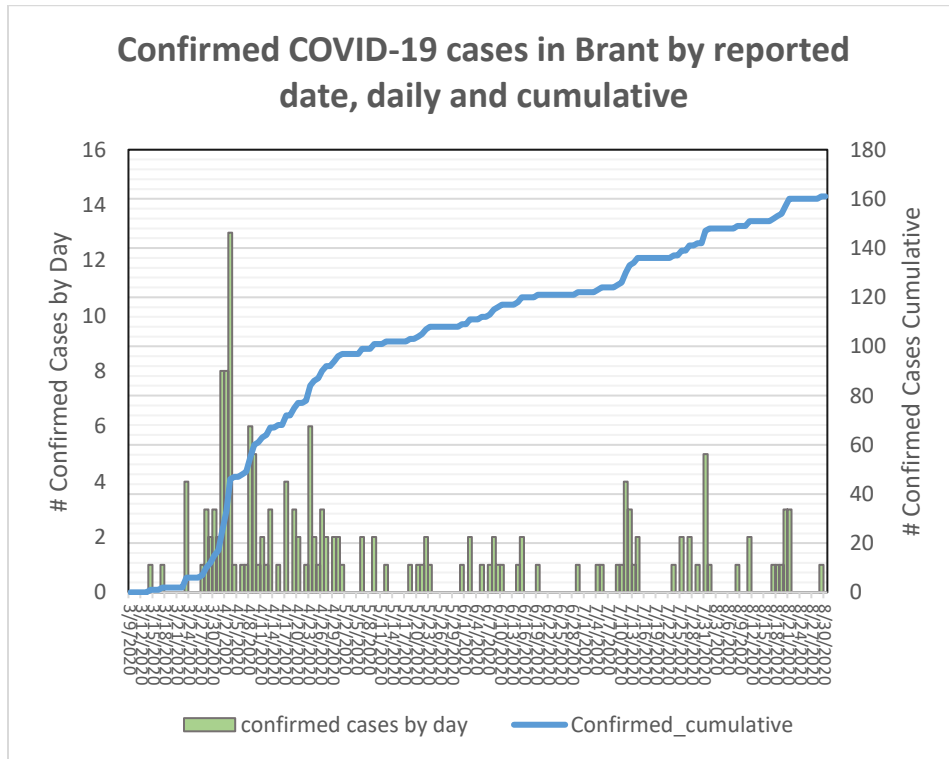
Ministry of Health Reporting Requirements

The Ministry of Health has adjusted in-year reporting requirements. The 2019 required program activity and indicator reporting has been deferred until January 2021. Mid-year 2020 program activity and indicator reporting has also been deferred with the expectation that both 2019 and 2020 reporting will be due in January 2021.

FROM: Dr. Jo Ann Tober, Chief Executive Officer
Dr. Elizabeth Urbantke, Acting Medical Officer of Health

RE: COVID-19 Report

An up-to-date report on COVID-19 numbers will be provided at the Board meeting.



Case distribution by transmission in Ontario vs. Brant as of August 28:

Transmission type	Ontario		Brant	
	Count	Percentage	Count	Percentage
Close contact or outbreak related	29466	70.3%	111	69.4%
No Epi-link/Community	9065	21.6%	28	17.5%
Travel	2059	4.9%	21	13.1%
No Info-Missing	678	1.6%	-	-
No Info-Unk	667	1.6%	-	-
Total	41935	100.0%	160	100%

New Case and Contact Management Tool

On August 20, 2020, Brant County Health Unit (BCHU) went live with the new provincial Case and Contact Management (CCM) data reporting tool. For COVID-19 this replaces the iPHIS system. This system integrates information from the lab system and Contact + to facilitate notification of cases and streamline information gathering and reporting. As with the transition to any new technology, there were challenges but overall the transition has been smooth and the benefits can be seen.

School Re-Opening

BCHU has been working with the school boards and private schools to support the return to school being as safe as possible including limiting COVID-19 transmission and promoting the health of children and youth. Keeping schools open with in-person learning options is important for the overall health of our community. Of note, local public health units do not approve school reopening plans. That said, BCHU has been working with the schools on many different levels. Local public health units will be the lead in investigating and managing cases and contacts within school locations and declaring outbreaks. In addition, BCHU will continue to monitor and assess transmission risks in our community and absenteeism in schools.

To support the reopening of schools, the province announced funding for additional school-focused nurses in public health units to provide rapid-response support to schools and boards in facilitating public health and preventative measures, including screening, testing, tracing, and mitigation strategies. The BCHU school team has already been in contact with their schools to provide support in preparation for school opening.

Evaluation

An evaluation has been developed to learn about the effectiveness and efficiency of BCHU's COVID-19 response by examining its process, activities, and outcomes. Phase 1 of the evaluation will focus on examining the response activities and related processes between March and August 2020 (6 months of response). It will aim to: validate if activities are being implemented as planned; identify variations from the planned activities, if any; and provide recommendations for improvement. Phase 2 of the evaluation will focus on examining the response outcomes. The evaluation will take a contribution analysis approach to determine whether and to what extent BCHU activities have contributed to the outcomes observed following the pandemic response. The intended audience for the evaluation findings will be BCHU's senior leadership team in preparation for a potential second wave and future pandemics of this nature.

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 7.2**

DATE: September 9, 2020

FROM: Jo Ann Tober

RE: Brantford Brant Ontario Health Team Report

Background

The provincial government announced the formation of Ontario Health Teams (OHT) to transform the provincial health care landscape. By building high-performing integrated care delivery systems across Ontario that provide seamless, fully-coordinated care for patients, Ontario Health Teams will help achieve better outcomes for patients, improved population health, and better value for the province.

On July 23, 2020, the Ministry of Health announced the approval for 5 new Ontario Health Teams and invited 17 additional Teams to submit a full application. The Brantford Brant Ontario Health Team was one of the Teams invited to move forward in the application process with the submission of a full application which is due on September 18, 2020.

The members of the Brantford Brant Ontario Health Team include the following: Adult Recreation Therapy Centre; Alzheimer's Society of Hamilton, Brant and Haldimand Norfolk; Brant Community Healthcare System; Brant County Health Unit; Canadian Mental Health Association- Brant, Haldimand Norfolk Branch; De dwa dah dehs nye>s Aboriginal Health Access Centre; Family Counselling Centre of Brant; Grand River Community Health Centre; John Noble Home; Participation Support Services; Persons with Lived Experience; St. Leonard's Community Services; St. Joseph's Lifecare Centre, part of the St. Joseph's Health System; and Woodview Mental Health and Autism Services. Each of the members of the Brantford Brant Ontario Health Team are required to be a signatory on the application, confirming their support for the local OHT and to indicate their intent to continue to partner on the ongoing development work required to fully form the OHT.

In order to meet the aggressive application submission timeline, partners in the Ontario Health Team have been meeting weekly to review Ministry requirements and data packages, and to complete the full application. As part of the ongoing work to prepare to become an OHT, local Primary Care Providers have formed a Primary Care Council to collaboratively participate in the application process, Stakeholder engagement with patients, families, and caregivers has been occurring to ensure this important input is also included in the develop of the OHT. In addition, a Governance meeting was held on September 4 to discuss the interim governance structure and strategy for the Team.

The application is still in development. Up-to-date details of the status and content of the application will be provided at the Board of Health meeting.

Recommendation

That the Board of the Brant County Health Unit

- **Approve the Brant County Health Unit as a signatory to the Brantford Brant Ontario Health Team Full Application.**

FROM: Jo Ann Tober

RE: Medical Officer of Health Appointment

Background

Board of Health Requirement to Recruit a Medical Officer of Health

Boards of health have many roles under the Health Protection and Promotion Act (HPPA), including the requirement that the board of health make every effort to expeditiously recruit/appoint a full-time medical officer of health (MOH). The physician is to be appointed by the board of health as an Acting MOH, thereby possessing all the powers of the MOH under the HPPA and can act daily to direct staff in the delivery of public health programs and services and manage an infectious disease outbreak or other public health emergency.

Section 62(1)(a) of the HPPA requires every board of health to appoint a **full-time** MOH. Boards of health may also appoint one or more AMOHs (s. 62(1)(b)).

Section 62(2) stipulates that if the position of the MOH becomes vacant, the board of health and the Minister, acting in concert, shall work expeditiously towards filling the position with a full-time MOH.

While the HPPA does not define the full-time MOH requirement specified in section 62(1)(a), the ministry's policy is that the board of health will retain a full-time MOH at a minimum of a 0.8 full-time equivalent (FTE), i.e., **28 to 32 hours or 4 days per business week on-site at the public health unit**, excluding after-hours availability. The ministry may request verification of full-time MOH status including copies of signed offer letters, employment contracts, and/or other relevant documents to establish that the MOH is full-time. **The Minister may not approve a MOH on a permanent basis where the MOH is not full-time.**

Qualifications for a Medical Officer of Health

Section 64 of the HPPA describes the eligibility requirements for appointment as a MOH or an AMOH. In particular: he or she must be a physician; possess the qualifications and requirements prescribed by regulations for the position (see below); and, the Minister must approve the proposed appointment.

Ontario Regulation 566 of the HPPA provides as follows:

1.(1) The requirements for employment as a MOH or an AMOH in addition to those set out in section 64 of the HPPA are that the person be the holder of:

- a) a fellowship in public health and preventative medicine from The Royal College of Physicians and Surgeons of Canada (RCPSC); [or],
- b) a certificate, diploma or degree from a university in Canada that is granted after not less than one academic year of full time post graduate studies or its equivalent in public health comprising,

- i. epidemiology;
 - ii. quantitative methods;
 - iii. management and administration; and
 - iv. disease prevention and health promotion; [or],
- c) a qualification from a university outside Canada that is considered by the Minister to be equivalent to the qualifications set out in clause (b).

Please note that a “physician” (while not defined in the HPPA) is considered to be a person with a current Certificate of Registration for Independent Practice with the College of Physicians and Surgeons of Ontario (CPSO) that enables the person to practice in Ontario.

Recruitment and engagement of a Medical Officer of Health for the Brant County Health Unit

During the summer of 2019, the Brant County Board of Health undertook the recruitment of a Medical Officer of Health and Dr. Elizabeth Urbantke was the successful candidate for the position. Dr. Urbantke was engaged as the Acting Medical Officer of Health as she was in the final stages of completion of her Masters in Public Health which is a necessary requirement for appointment as a Medical Officer of Health.

Dr. Urbantke has successfully completed her Masters degree and now holds all of the qualifications for appointment.

Recommendation

That the Board of Health direct staff to apply to the Minister of Health and the Chief Medical Officer of Health for the appointment of Dr. Elizabeth Urbantke as the full time Medical Officer of Health for the Brant County Health Unit.