City of Hamilton BOARD OF HEALTH REVISED

Meeting #: 21-004

Date: April 4, 2022

Time: 9:30 a.m.

Location: Due to the COVID-19 and the Closure of City

Hall (CC)

All electronic meetings can be viewed at:

City's Website:

https://www.hamilton.ca/council-committee/council-committee-meetings/meetings-and-agendas

City's YouTube Channel:

https://www.youtube.com/user/InsideCityofHa

milton or Cable 14

Loren Kolar, Legislative Coordinator (905) 546-2424 ext. 2604

- 1. CEREMONIAL ACTIVITIES
- APPROVAL OF AGENDA

(Added Items, if applicable, will be noted with *)

- 3. DECLARATIONS OF INTEREST
- 4. APPROVAL OF MINUTES OF PREVIOUS MEETING
 - 4.1. March 21, 2022
- 5. COMMUNICATIONS
 - 5.1. Correspondence from Anita Dubeau, Board of Health Chair, Simcoe Muskoka District Health Unit, respecting a Response to the Opioid Crisis in Simcoe Muskoka and Ontario-wide

Recommendation: Be received.

6. DELEGATION REQUESTS

7. CONSENT ITEMS

8. STAFF PRESENTATIONS

8.1. Overview of COVID-19 Activity in the City of Hamilton 11 Mar 2020 to Present (to be distributed)

9. PUBLIC HEARINGS / DELEGATIONS

*9.1. Lisa Chalapenko, respecting Provincial Vaccine Mandates (approved at the March 21, 2022 meeting)

WITHDRAWN

*9.2. Dr. J. Tiessen, respecting Provincial Vaccine Mandates (approved at the March 21, 2022 meeting)

WITHDRAWN

10. DISCUSSION ITEMS

10.1. Annual Service Plan and Budget 2022 - Amendment to Recovery Related Costs (BOH22003(a)) (City Wide)

11. MOTIONS

- 12. NOTICES OF MOTION
- 13. GENERAL INFORMATION / OTHER BUSINESS
- 14. PRIVATE AND CONFIDENTIAL
- 15. ADJOURNMENT



BOARD OF HEALTH MINUTES 22-003

9:30 a.m.

Monday, March 21, 2022

Due to COVID-19 and the closure of City Hall, this meeting was held virtually

Present: Mayor F. Eisenberger

Councillors M. Wilson (Vice-Chair), J. Farr, N. Nann, S. Merulla, R. Powers, T. Jackson, E. Pauls, J.P. Danko, B. Clark, M. Pearson, B.

Johnson, L. Ferguson, and A. VanderBeek

Absent with

Regrets: Councillors T. Whitehead and J. Partridge – Personal

THE FOLLOWING ITEMS WERE REFERRED TO COUNCIL FOR CONSIDERATION:

1. Correspondence from Board of Health, Public Health Sudbury & Districts respecting a motion entitled "Health and Racial Equity: Denouncing Acts and Symbols of Hate" (Item 5.1)

(Nann/Pearson)

That the Correspondence from Board of Health, Public Health Sudbury & Districts respecting a motion entitled "Health and Racial Equity: Denouncing Acts and Symbols of Hate", be endorsed.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Fred	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek

ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

2. Public Beach Signage (BOH22004) (City Wide) (Item 7.1)

(Pearson/Ferguson)

That Report BOH22004, respecting Public Beach Signage, be received.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Free	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

3. Letter of Instructions for Infection Prevention and Control Measures for High-Rise Apartment Buildings and High-Rise Condominiums with 12 or More Storeys (BOH21007(a)) (City Wide) (Item 7.2)

(Nann/Powers)

That the Report BOH21007(a), respecting a Letter of Instructions for Infection Prevention and Control Measures for High-Rise Apartment Buildings and High-Rise Condominiums with 12 or More Storeys, be received.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Fr	ed Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	_	Ward 7	Councillor Esther Pauls

YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

FOR INFORMATION:

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(a) CEREMONIAL ACTIVITIES (Item 1)

There were no ceremonial activities.

(b) CHANGES TO THE AGENDA (Item 2)

The Committee Clerk advised the Board of the following changes to the agenda:

5. COMMUNICATIONS

5.2 Correspondence from the Lakewood Beach Community Council respecting Public Beach Signage Recommendation: Be received and referred to Item 7.1, Public Beach Signage (BOH22004) (City Wide)

6. DELEGATION REQUESTS

6.2 Lisa Chalapenko, respecting the Provincial Vaccine Mandate (for a future meeting)

CHANGE IN ORDER OF ITEMS:

Item 9.1, Kayla Hagerty and Dr. Aaron Doyle, Carleton University, respecting the COVID-19 Pandemic and its Impact on the Opioid Epidemic in Canada, be moved up the agenda to follow the consideration of the minutes of the Previous Meeting (Item 4.1).

(Powers/Pearson)

That the agenda for the March 21, 2022 Board of Health be approved, as amended.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES - Mayor Fred Eisenberger

YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
ABSENT	-	Ward 12	Councillor Lloyd Ferguson
YES	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(c) DECLARATIONS OF INTEREST (Item 3)

None

(d) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 4)

(i) February 14, 2022 (Item 4.1)

(Nann/Pauls)

That the Minutes of February 14, 2022 be approved, as presented.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

-	Mayor Fred	d Eisenberger
-	Ward 1	Councillor Maureen Wilson
-	Ward 2	Councillor Jason Farr
-	Ward 3	Councillor Nrinder Nann
-	Ward 4	Councillor Sam Merulla
-	Ward 5	Councillor Russ Powers
-	Ward 6	Councillor Tom Jackson
-	Ward 7	Councillor Esther Pauls
-	Ward 8	Councillor J. P. Danko
-	Ward 9	Councillor Brad Clark
-	Ward 10	Councillor Maria Pearson
-	Ward 11	Councillor Brenda Johnson
-	Ward 12	Councillor Lloyd Ferguson
-	Ward 13	Councillor Arlene VanderBeek
-	Ward 14	Councillor Terry Whitehead
-	Ward 15	Councillor Judy Partridge
		 Ward 1 Ward 2 Ward 3 Ward 4 Ward 5 Ward 6 Ward 7 Ward 8 Ward 9 Ward 10 Ward 11 Ward 12 Ward 13 Ward 14

(e) COMMUNICATIONS (Item 5)

(i) Correspondence from the Lakewood Beach Community Council respecting Public Beach Signage (Added Item 5.2)

(Nann/Ferguson)

That Correspondence from the Lakewood Beach Community Council respecting Public Beach Signage, be received and referred to Item 7.1, Public Beach Signage (BOH22004) (City Wide), for consideration.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Fred	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(f) DELEGATION REQUESTS (Item 6)

(Pauls/Partridge)

That the following Delegation Requests be approved, for a future meeting:

- (i) Dr. Julie A. Tiessen, respecting the Provincial Vaccine Mandate (Item 6.1)
- (ii) Lisa Chalapenko, respecting the Provincial Vaccine Mandate (Added Item 6.2)

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES
YES
YES
YES
YES

YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(g) CONSENT ITEMS (Item 7)

(i) Public Beach Signage (BOH22004) (City Wide) (Item 7.1)

(Pearson/Powers)

That Public Health Services and Public Works staff be directed to prepare and evaluation of the beach area located at the end of Green and Millen Roads, to determine if it can be classified as a public beach, with a report back to a future Board of Health meeting.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Free	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(Nann/Clark)

That staff be directed to provide a report respecting enhanced public information regarding the conditions of public beach waterways, including information respecting the International Blue Flag criteria, inclusive of non-digital communication methods.

Result: Motion CARRIED by a vote of 12 to 0, as follows:

YES	-	Mayor Free	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
ABSENT	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(h) STAFF PRESENTATIONS (Item 8)

(i) Overview of COVID-19 Activity in the City of Hamilton 11 Mar 2020 to Present (Item 8.2)

Dr. E. Richardson, Medical Officer of Health; Michelle Baird, Director, Healthy and Safe Communities and Melissa Biksa, Manager, Healthy and Safe Communities, addressed the Board with an Overview of COVID-19 Activity in the City of Hamilton 11 Mar 2020 to present, with the aid of a PowerPoint presentation.

(Pearson/VanderBeek)

That the Presentation respecting an Overview of COVID-19 Activity in the City of Hamilton 11 Mar 2020 to present, be received.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Fre	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson

YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(f) DELEGATION (Item 9)

(i) Kayla Hagerty and Dr. Aaron Doyle, Carleton University, respecting the COVID-19 Pandemic and its Impact on the Opioid Epidemic in Canada (Item 9.1)

Kayla Hagerty and Dr. Aaron Doyle, Carleton University, addressed the Board respecting the COVID-19 Pandemic and its Impact on the Opioid Epidemic in Canada.

(Pearson/Johnson)

That the Delegation from Kayla Hagerty and Dr. Aaron Doyle, Carleton University, addressed the Board respecting the COVID-19 Pandemic and its Impact on the Opioid Epidemic in Canada, be received.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

YES	-	Mayor Free	d Eisenberger
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
ABSENT	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

(Eisenberger/Nann)

That the Medical Officer of Health be directed to review and prepare a report for the Board of Health on the Canadian Drug Coalition Policy respecting the Decriminalization of Simple Possession of Drugs and consider local treatment centre use and success metrics.

Result: Motion CARRIED by a vote of 13 to 0, as follows:

-	Mayor Fre	d Eisenberger
-	Ward 1	Councillor Maureen Wilson
-	Ward 2	Councillor Jason Farr
-	Ward 3	Councillor Nrinder Nann
-	Ward 4	Councillor Sam Merulla
-	Ward 5	Councillor Russ Powers
-	Ward 6	Councillor Tom Jackson
-	Ward 7	Councillor Esther Pauls
-	Ward 8	Councillor J. P. Danko
-	Ward 9	Councillor Brad Clark
-	Ward 10	Councillor Maria Pearson
-	Ward 11	Councillor Brenda Johnson
-	Ward 12	Councillor Lloyd Ferguson
-	Ward 13	Councillor Arlene VanderBeek
-	Ward 14	Councillor Terry Whitehead
-	Ward 15	Councillor Judy Partridge
	- - -	 Ward 1 Ward 2 Ward 3 Ward 4 Ward 5 Ward 6 Ward 7 Ward 8 Ward 9 Ward 10 Ward 11 Ward 12 Ward 13 Ward 14

(g) ADJOURNMENT (Item 15)

(Pearson/Jackson)

That, there being no further business, the Board of Health be adjourned at 1:31 p.m.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

YES	-	Mayor Fred Eisenberger	
YES	-	Ward 1	Councillor Maureen Wilson
YES	-	Ward 2	Councillor Jason Farr
YES	-	Ward 3	Councillor Nrinder Nann
YES	-	Ward 4	Councillor Sam Merulla
YES	-	Ward 5	Councillor Russ Powers
YES	-	Ward 6	Councillor Tom Jackson
YES	-	Ward 7	Councillor Esther Pauls
YES	-	Ward 8	Councillor J. P. Danko
YES	-	Ward 9	Councillor Brad Clark
YES	-	Ward 10	Councillor Maria Pearson
YES	-	Ward 11	Councillor Brenda Johnson
YES	-	Ward 12	Councillor Lloyd Ferguson
YES	-	Ward 13	Councillor Arlene VanderBeek
ABSENT	-	Ward 14	Councillor Terry Whitehead
ABSENT	-	Ward 15	Councillor Judy Partridge

Respectfully submitted,

Chair, Board of Health

Loren Kolar Legislative Coordinator Office of the City Clerk



March 16, 2022

The Honourable Christine Elliott Minister of Health House of Commons Ottawa, ON K1A 0A6

Dear Minister Elliott:

Re: Response to the Opioid Crisis in Simcoe Muskoka and Ontario-wide

On March 16, 2022, the Simcoe Muskoka District Health Unit (SMDHU) Board of Health endorsed a set of provincial recommendations to help address the ongoing and escalating opioid crisis experienced within Simcoe Muskoka and province-wide. Despite regional activities in response to the opioid crisis, there remains an urgent need for heightened provincial attention and action to promptly and adequately address the extensive burden of opioid-related deaths being experienced by those who use substances.

In the 19 months of available data since the start of the pandemic (March 2020 to September 2021) there have been 245 opioid-related deaths in Simcoe Muskoka. This is nearly 70% higher than the 145 opioid-related deaths in the 19 months prior to the start of the pandemic (August 2018 to February 2020), when our communities were already struggling in the face of this crisis. The first nine months of 2021 saw an opioid-related death rate more than 33% higher than the first nine months of 2020, suggesting the situation has not yet stabilized.

As such, the SMDHU Board of Health urges your government to take the following actions:

- 1. Create a multisectoral task force to guide the development of a robust provincial opioid response plan that will ensure necessary resourcing, policy change, and health and social system coordination.
- 2. Expand access to evidence informed harm reduction programs and practices including lifting the provincial cap of 21 Consumption and Treatment Service (CTS) Sites, funding Urgent Public Health Needs Sites (UPHNS) and scaling up safer opioid supply options.
- 3. Explore revisions to the current CTS model to address the growing trends of opioid poisoning amongst those who are using inhalation methods.
- 4. Expand access to opioid agonist therapy for opioid use disorder through a range of settings (e.g. mobile outreach, primary care, emergency departments), and a variety of medication options.
- 5. Provide a long-term financial commitment to create more affordable and supportive housing for people in need, including people with substance use disorders.
- 6. Address the structural stigma and harms that discriminate against people who use drugs, through provincial support and advocacy to the Federal government to decriminalize personal use and possession of substances and ensure increased investments in health and social services at all levels.

- 7. Increase investments in evidence-informed substance use prevention and mental health promotion initiatives, that provide foundational support for the health, safety and well-being of individuals, families, and neighbourhoods, beginning from early childhood.
- 8. Fund a fulltime position of a Drug Strategy Coordinator/Lead for the Simcoe Muskoka Opioid Strategy.

The SMDHU Board of Health has endorsed these recommendations based on the well-demonstrated need for a coordinated, multi-sectoral approach that addresses the social determinants of health and recognizes the value of harm reduction strategies alongside substance use disorder treatment strategies, as part of the larger opioid crisis response. Evidence has shown that harm reduction strategies can prevent overdoses, save lives, and connect people with treatment and social services. Further, there is an urgent need to change the current Canadian drug policy to allow a public health response to substance use, through decriminalization of personal use and possession paired with avenues towards health and social services, as our Board called for in 2018. These recommendations collectively promote effective public health and safety measures to address the social and health harms associated with substance use.

Sincerely,

ORIGINAL Signed By:

Anita Dubeau Board of Health Chair Simcoe Muskoka District Health Unit

cc: Associate Minister of Mental Health and Addictions
Attorney General of Ontario
Chief Medical Officer of Health
Association of Local Public Health Agencies
Ontario Health
Ontario Boards of Health
Members of Parliament in Simcoe Muskoka
Members of Provincial Parliament in Simcoe Muskoka
Mayors and Municipal Councils in Simcoe Muskoka



COVID-19 Situation Report & Organizational Update

Board of Health April 4, 2022



Overview

- 1. Overall Status
- 2. COVID-19 Situation Report
- 3. Scarsin Forecast
- 4. COVID-19 Vaccine Update
- 5. Organizational Update



Overall Status

- Seeing increased COVID-19 transmission in Hamilton
 - Due to changes in protective behaviours and increasing prevalence of BA.2, a more transmissible Omicron sub-variant
 - Reported cases, test positivity, hospitalizations and wastewater indicators continue to increase
 - Intensive care unit admissions remain low and stable
- Updated forecasts indicate that COVID-19 will continue to circulate in Hamilton out past the end of June 2022



Overall Status

- Vaccination Status (As of March 31, 2022):
 - 90.4% of 12yrs+ with one dose, 88.1% with two doses
 - 53.1% of 5-11yrs with one dose, 36.2% with two doses
 - 57.1% of 18yrs+ with 3rd dose

- Make sure you are up-to-date with your vaccines
 - Eligibility for additional boosters undergoing review at federal, provincial levels



Overall Status

- Hamiltonians are encouraged to use protective measures to reduce serious health consequences from COVID-19 infections
 - Get vaccinated and stay up-to-date with vaccines
 - Wear a mask when indoors and/or when unable to distance
 - Stay home if you have COVID-19 symptoms
 - Speak to your healthcare provider, know in advance if you're eligible for treatment and where to access
 - Practice physical distancing

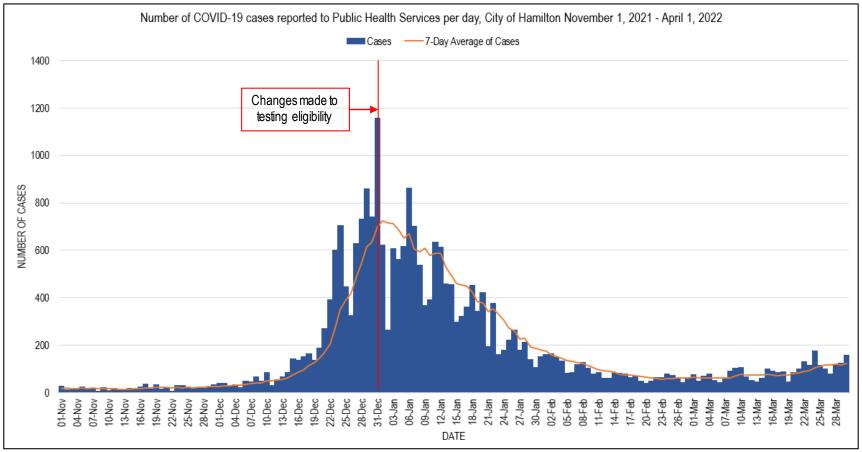


SITUATION REPORT

Erin Rodenburg, Epidemiologist



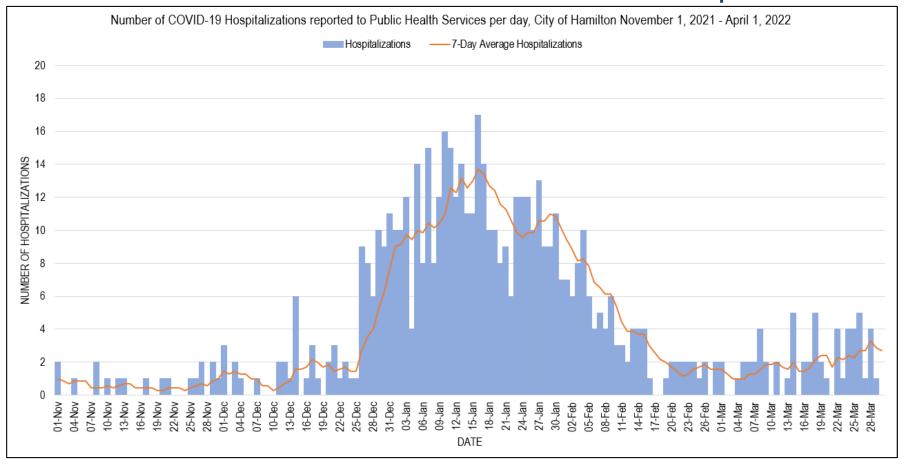




- COVID-19 Case data is known to be underestimated due to Polymerase Chain Reaction (PCR) test eligibility, however
 it remains an important measure to determine the trends of COVID-19 transmission in our community
- As of April 1, 2022, the 7-day average of cases is **124**, which has increased since last Board of Health (March 21, 2022), when the 7-day average of cases was **84**



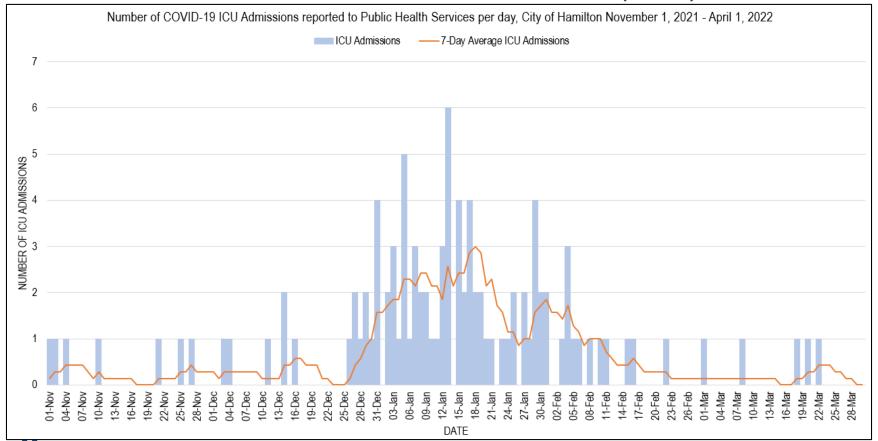
Hospitalizations



- COVID-19 Hospitalizations had levelled off since the peak of the Omicron wave but has since begun to increase.
- As of April 1, 2022, there were approximately 2.7 new COVID-19 hospitalizations per day reported to Hamilton Public Health. This 7-day average was 1.7 at our last Board of Health (March 21, 2022) update



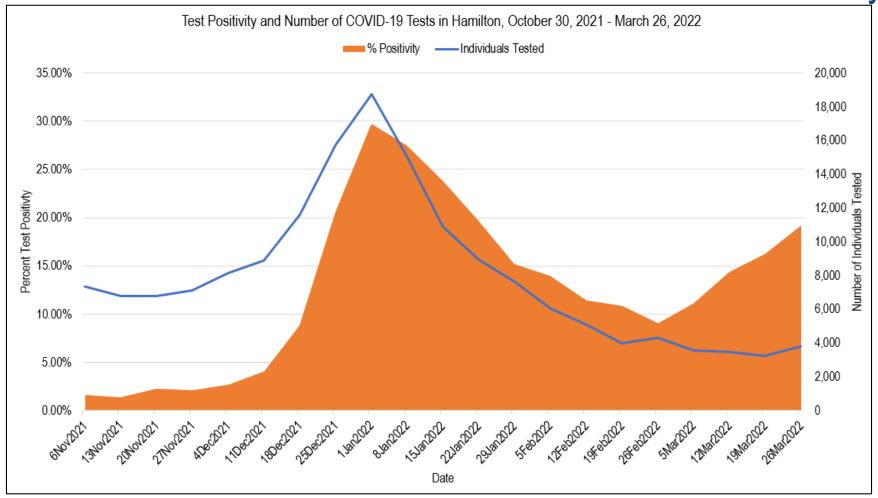
Intensive Care Unit (ICU) Admissions



- COVID-19 intensive care unit admissions had been decreasing since the peak of the Omicron wave and have since levelled off.
- As of April 1, 2022, there were **0.0** new COVID-19 intensive care unit admissions per day reported to Hamilton Public Health. This 7-day average has been less than **0.5** since February 17, 2022



Test Positivity

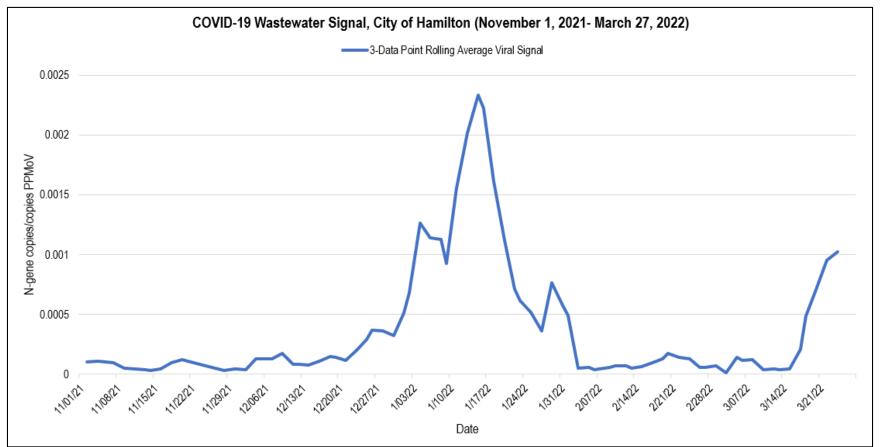


Key Message

Most recently, test positivity and the number of individuals tested has been increasing



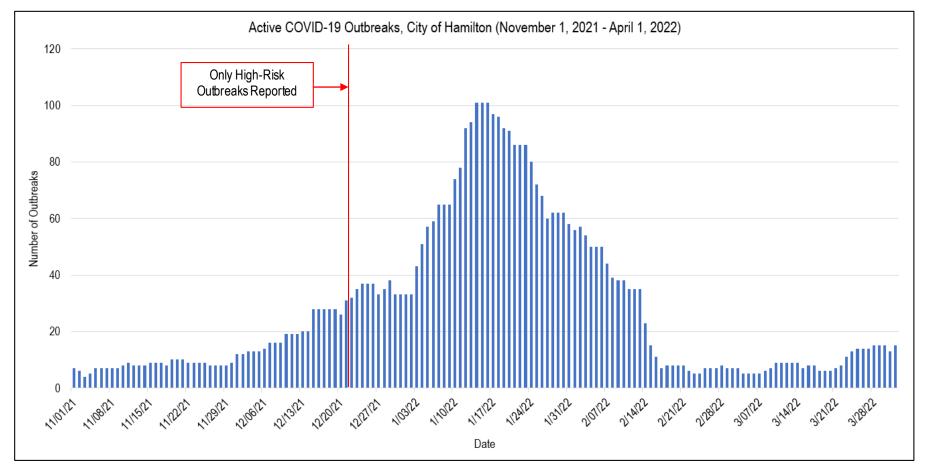
Wastewater Surveillance



- COVID-19 Wastewater Surveillance is a new tool being used by Hamilton Public Health Services to understand community transmission
- The 3-point average of viral signal for detecting COVID-19 in wastewater samples is increasing in samples taken between March 18 27, 2022



Active outbreaks



- COVID-19 outbreak activity in the Omicron wave peaked in mid-January 2022
- The number of active COVID-19 outbreaks in recent weeks has begun to increase after levelling off from mid-February to mid-March 2022



SCARSIN FORECAST

Ruth Sanderson, Epidemiologist

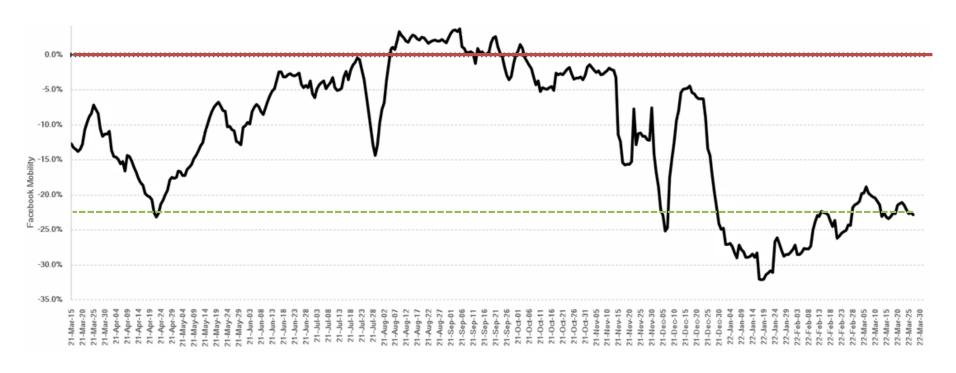


Scarsin Forecast Key Messages

- Updated resurgence base scenario forecast out to the end of June 2022 which now includes:
 - The increased transmission impact of the Omicron subvariant BA.2 assumed to be at 45% of cases on March 31, 2022
 - Waning immunity from both infections and vaccines
- Mobility continues to increase modestly
- With the removal of mandate for protective measures, infections are forecast to increase in the short term, however with the increase of BA.2, these higher levels will likely be sustained for a longer period than previously forecast (out beyond June 2022)



Overall Mobility, Hamilton



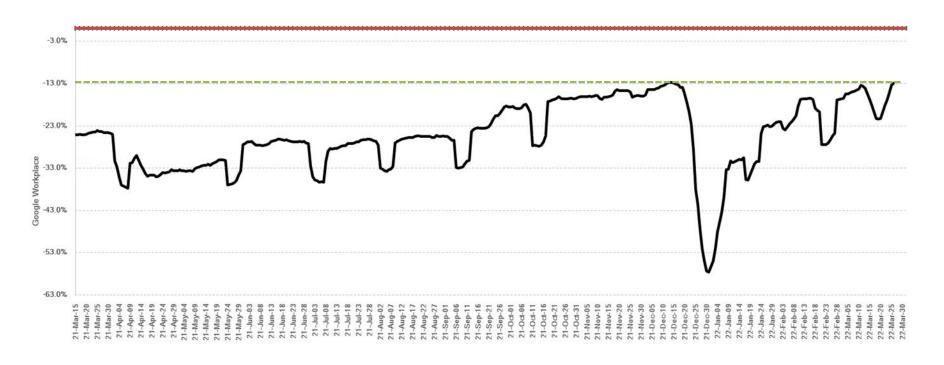
Data Source: Scarsin Decision Support System retrieved Mar 29, 2022

Key Messages:

 Overall, community mobility continues to remain low. Mobility is increasing slowly while oscillating and was at 23% below pre-pandemic levels on March 27, 2022



Workplace Mobility, Hamilton



Data Source: Scarsin Decision Support System retrieved Mar 29, 2022

Key Messages:

 Workplace mobility is at pre-Omicron levels; however, it is still 13% below pre-pandemic levels as of March 26, 2022



Overview of Scenarios and Assumptions

Scenario 1 – Resurgence Elevated contact transmission with staged reopening and BA.2

Scenario Assumes:

- Public health measures aligned with Ontario's reopening plan including lifting of mask mandates on March 21, 2022
- Omicron severity is approximately 36% severity of Delta
- Transmission rates adjusted for increased transmission of Omicron subvariant BA.2 at 1.3 times that of BA.1. Assume BA.2 at 45% of cases as of March 31, 2022 and increasing from there
- Transmission rates were aligned with current hospital actuals
- Comprehensive waning immunity, 2nd and 3rd dose immunity incorporated as well as waning immunity for those infected at 210 days
- Vaccinations updated (included 4th doses) to align with Hamilton's actuals and planned doses out to end of Dec 2022; targets adjusting for decreasing trend in dose throughput

Limitation:

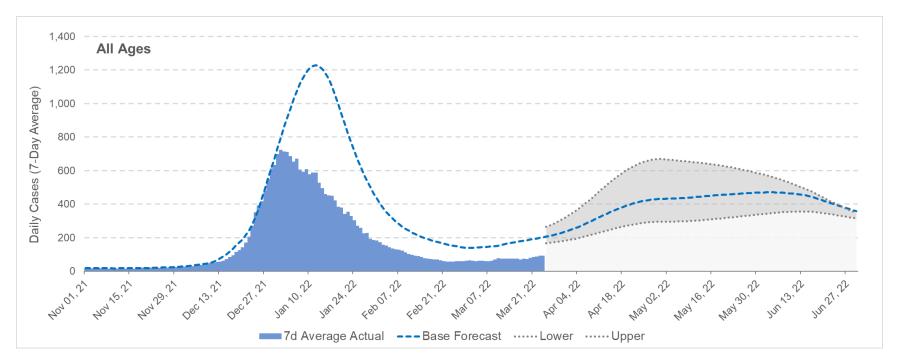
 Challenging to model the spread of COVID-19 due to major changes in testing practices late December 2021, which led to increased undercounting through identified lab-confirmed cases

Updated Data:

- Case/ hospital/ death data retrieved March 27, 2022
- Updated vaccination and mobility data



Scarsin Forecast COVID-19 Cases, Hamiltonians



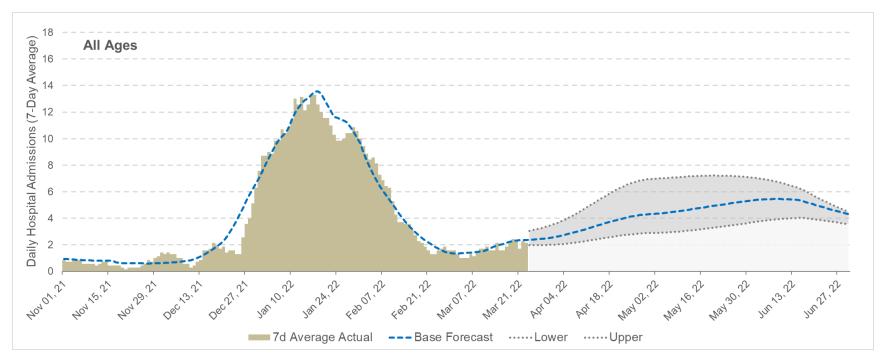
Data Source: Scarsin Decision Support System retrieved March 28, 2022

Key Messages:

■ Base Scenario – Resurgence continues to indicate that Hamilton will likely experience an increase in cases due to increased transmission from the changes in Hamiltonian's preventive behaviours due to reopening and increasing levels of the Omicron sub-variant BA.2 circulating. This surge may be prolonged into the summer



Scarsin Forecast COVID-19 Hospital Admissions among Hamiltonians



Key Messages:

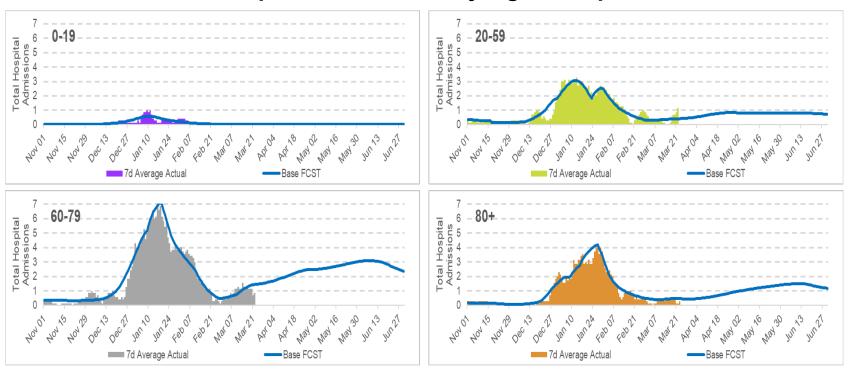
Data Source: Scarsin Decision Support System retrieved Mar 28, 2022

■ The Base Scenario – Resurgence indicates that the recent increase in new hospital admissions is likely to continue into the summer. Approximately 400 new hospital admissions are anticipated between April 4 to June 30, 2022. The timing of the peak will vary depending on the level of transmission. The surge is forecast to remain below the previous peak Omicron-wave level



Scarsin Hospitalizations Base Scenario Resurgence

COVID-19 Hospital Admissions by Age Group, Hamiltonians



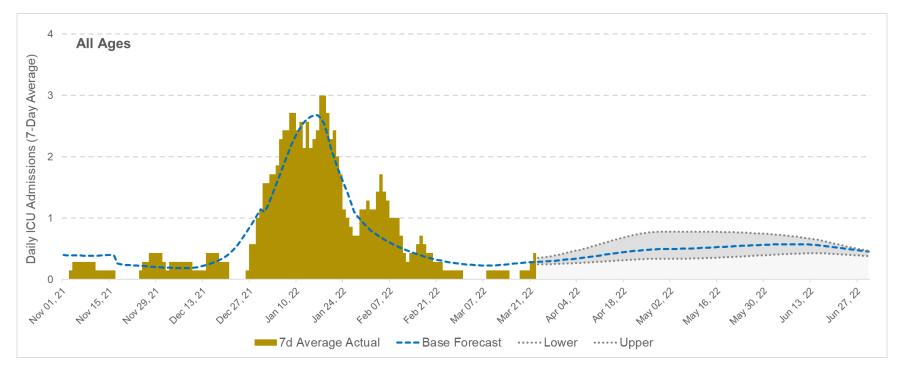
Data Source: Scarsin Decision Support System retrieved Mar 28, 2022

Key Messages:

■ Trajectories differ by age group. The 60–79-year-old age group may drive new hospital admissions



Scarsin Forecast COVID-19 Intensive Care Unit Admissions among Hamiltonians



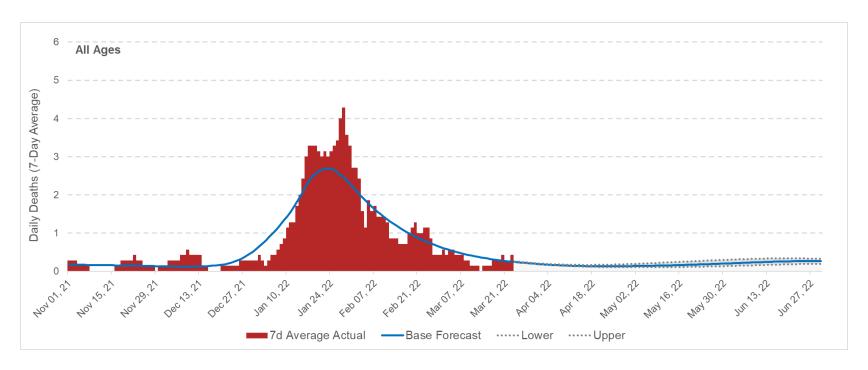
Data Source: Scarsin Decision Support System retrieved Mar 28, 2022

Key Messages:

■ The **Base Scenario** – **Resurgence** scenario predicts 44 new intensive care unit admissions among Hamiltonians from April 4 to June 30, 2022. Intensive care unit admissions will increase slightly about pre-Omicron levels and remain below peak levels to the end of June 2022



Scarsin Forecast Deaths Due to COVID-19 among Hamiltonians



Data Source: Scarsin Decision Support System retrieved Mar 28, 2022

Key Messages:

■ The **Base Scenario** — **Resurgence** scenario predicts 16 deaths between April 4 to June 30, 2022, and return to near pre-Omicron wave levels out to June 30, 2022



Scarsin Forecast Summary

- The forecast, now out to the end of June 2022, indicates that COVID-19 is expected to continue to circulate in Hamilton
- With the removal of mandate for protective measures and the increase in transmission due to BA.2, the current resurgence of cases and hospitalizations may be sustained out past the end of June 2022
- As anticipated, Hamilton's susceptible population is steadily increasing as the protection from vaccinations and past infections wane



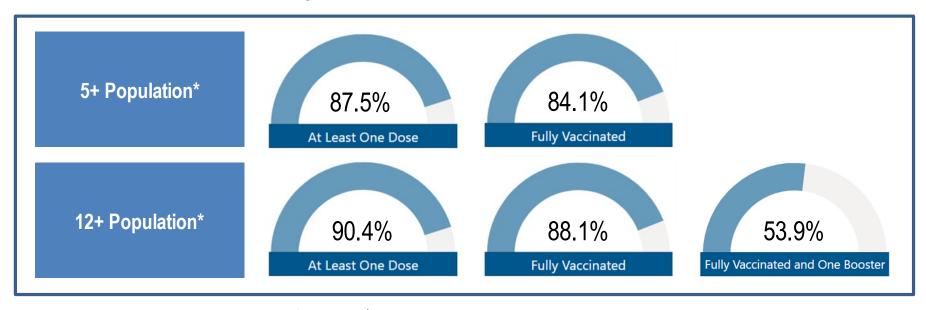
COVID VACCINE UPDATE

Melissa Biksa, Manager – COVID-19 Vaccine



COVID-19 Vaccine – Overall Coverage

Estimated as of End Of Day March 31, 2022



- Minimal recent change in 1st and 2nd dose coverage among 12+ year-old population
- Coverage in 5 to 11 year-old population increased to **53.1%** (1st dose) and **36.2%** (2nd dose)
- 3rd dose coverage in adult population is **57.1%** with higher coverage in older age groups

Note: Includes Hamilton residents and individuals vaccinated in Hamilton who cannot be assigned to a health unit region.

*The 5+ population includes individuals born in 2016 or earlier, 12+ population includes individuals born in 2009 or earlier, and 18+ population includes individuals born in 2003 or earlier. Sources: IntelliHealth (COVAXon Data Load); IntelliHealth (Population Projections, 2020).



COVID-19 Vaccine – Geographic Coverage

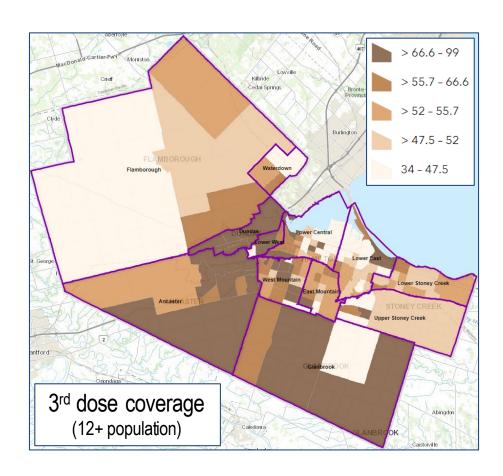
Estimated as of End Of Day March 28, 2022

12yrs+ Population

- Majority of areas have achieved over 90% 1st and 2nd dose coverage
- Lowest coverage continues to exist in Flamborough and Waterdown, but also in areas within Lower Central, Lower East and Lower Stoney Creek

Pediatric Population

- Ancaster, Dundas, Glanbrook and Lower West over 60% 1st dose coverage
- Lowest coverage continues to exist in Lower East, but also in areas within Lower Stoney Creek, Lower Central and West Mountain



Sources: IntelliHealth (COVAXon Data Load); Statistics Canada (2016 Census) adjusted for population growth estimated by the Planning and Economic Development Department, City of Hamilton



COVID-19 Vaccine – Operational Update

- Limeridge Mall clinic currently operating as Grade 7/8 vaccines catch-up clinic
 - As of March 31, 2022, 1022 vaccines have been administered.
 815 appointments are booked between April 1 and 15, 2022
 - COVID-19 vaccines will still be available
- Mobile Team operating one clinic per day, 5 days per week
- COVID-19 vaccines continue to be available through various community channels



COVID-19 Vaccine – Communications Campaign



Campaign launched March 31, 2022



COVID-19 Vaccine – Additional Booster Eligibility

 National Advisory Committee on Immunization (NACI) reviewing at the federal level

 Provincial guidance expected to follow after the National Advisory Committee on Immunization (NACI) recommendations



Status Summary

- Seeing increased COVID-19 transmission in Hamilton
- Hamiltonians are encouraged to use protective measures to reduce serious health consequences from COVID-19 infections
 - Stay up-to-date with your vaccines
 - Wear a mask when indoors and/or when unable to distance
 - Stay home if you have COVID-19 symptoms
 - Speak to your healthcare provider, know in advance if you're eligible for treatment and where to access
 - Practice physical distancing



ORGANIZATIONAL UPDATE

Dr. Elizabeth Richardson, Medical Officer of Health

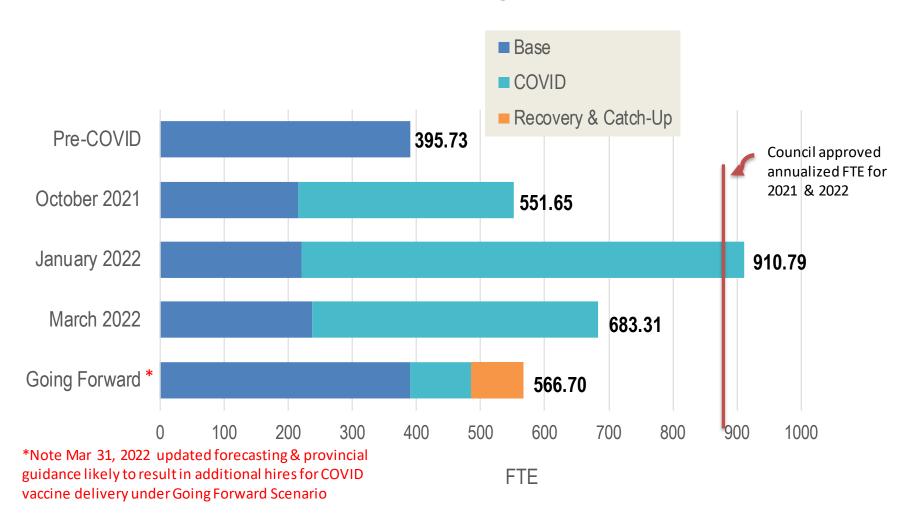


Adapting PHS During Pandemic & Recovery: The Challenge

- Ongoing role in COVID-19 disease control, vaccine delivery as COVID-19 transitions over the coming year(s) requires extra resources
- Need to resume full operations as per Standards
- Significant deficits of care and service backlog require period of enhanced programming to meet community needs, address service levels and reduce risks
- Staff numbers, capacity, and recruitment significantly impacted by length and extent of public health response
- Capacity and time for change/process low
- Prioritization of work remains essential



Snapshots of Staffing Numbers late 2021-2022





Adapting Public Health Services During Pandemic & Recovery: Risks

- COVID-19 related
 - Resurgences, new waves, waning immunity & new variants make for fluctuating path
 - Provincial direction for local Public Health continues to change frequently
 - Responses often urgent
 - Continue to require flexible staffing for pandemic response
 - O. Reg 116/200 under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020 (redeployment of public health staff) ends as of April 27, 2022
 - Passing 2-year mark for temporary contracts unionized staff (ONA, CUPE) and small number non-union staff (mostly Supervisors, Managers)



Adapting Public Health Services During Pandemic & Recovery: Risks

- Extent of deficits of care/community need may outstrip resources
- Public health system reviews coming
 - Extent and timing of any related change uncertain
- Provincial funding
 - Annual funding increase less than inflation
 - Recovery funding criteria, quantum not well-defined



Adapting Public Health Services During Pandemic & Recovery: Mitigation Strategies

- Return majority of permanent staff to base positions by April 26, 2022 timeline, including necessary management
- Continue to ask Province for longer term plans to improve sustainable planning (financial and human resources)
- Provincial funding letters expected soon will provide some clarity



Adapting Public Health Services During Pandemic & Recovery: Mitigation Strategies

- Priority program reopening/recovery focus:
 - School aged immunizations,
 - Mental health & substance misuse across lifespan,
 - Prenatal, early years, school programming
 - Oral/dental health,
 - Resuming full capacity for all inspections
 - Continue to monitor & adapt strategies to align with roles and funding
 - Continue to adapt Public Health Services structure to support reopening of all services, catch-up and response roles



One-Time Funding Request – Recovery and Catch-Up

- Initial request (\$20.8M) submitted to the Ministry on March 1, 2022 as part of the Annual Service Plan & Budget
- Planning continues to evolve, details of recovery and catchup have been further refined based on needs, recruitment and capacity
- Based on this further analysis, recovery costs will be reduced to \$9.0M
- An amended request will be forwarded to the Ministry upon approval





QUESTIONS?



CITY OF HAMILTON PUBLIC HEALTH SERVICES Office of the Medical Officer of Health

то:	Mayor and Members Board of Health
COMMITTEE DATE:	April 4, 2022
SUBJECT/REPORT NO:	Annual Service Plan & Budget 2022: Amendment to Recovery Related Costs (BOH22003(a)) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Carolyn Hureau (905) 546-2424 Ext. 6004
SUBMITTED BY:	Dr. Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services
SIGNATURE:	

RECOMMENDATION

That the Board of Health authorize and direct the Medical Officer of Health to submit an amendment to the one-time funding request for recovery and catch-up (included in the 2022 Annual Service Plan and Budget) to the Ministry of Health in keeping with what is outlined in Report BOH22003(a).

EXECUTIVE SUMMARY

On February 14, 2022, the Board of Health authorized and directed the Medical Officer of Health to submit the 2022 Annual Service Plan and Budget (ASPB) to the Ministry of Health (Ministry) in keeping with the content outlined in Report BOH22003. Staff submitted the 2022 ASPB on March 1, 2022. The 2022 ASPB submission totalled \$91,974,897 including \$45,346,380 in base funding and \$46,628,517 in one-time funding requests. A description of these one-time funding requests is provided in Report BOH22003. On March 14, 2022, staff submitted an additional one-time funding request to replace outdated vaccine refrigerators (\$225,350).

This report outlines an amendment to the one-time funding request related to recovery and catch-up. This funding was requested to address the deficits of care in the community and the backlog of services that have resulted from many important public health programs being partially or fully on-hold over the past two years in order to

SUBJECT: Annual Service Plan & Budget 2022: Amendment to Recovery Related Costs (BOH22003(a)) (City Wide) - Page 2 of 5

deploy substantive resources to the COVID-19 emergency response. The original ASPB submission included a one-time request of \$20,882,772 to support recovery work. Since that time, planning has continued to evolve and details regarding recovery and catch-up have been further refined to align with the ongoing assessment of needs within the community. Staff have also reassessed the feasibility of recovery and catch-up activities based on current organizational capacity and ongoing recruitment challenges. Based on this further analysis, it is estimated that recovery costs will total \$9,000,924 for 2022.

Alternatives for Consideration - Not Applicable

FINANCIAL - STAFFING - LEGAL IMPLICATIONS

Financial:

Approval of the 2022 ASPB and submission to the Ministry is required to receive provincial funding to support the delivery of public health programs and services under the Standards. The original 2022 ASPB submission totalled \$91,974,897, including \$45,346,380 in base funding and \$46,628,517 in one-time funding requests. A breakdown of the one-time funding requests is provided below:

- COVID-19 General Program (non-vaccine) \$12,112,449;
- COVID-19 Vaccine Program \$10,862,727;
- COVID-19 Recovery & Catch-Up \$20,882,772;
- Public Health Inspector Practicum Program \$30,000:
- ASPB Base Funding Shortfall Request \$2,387,989;
- Ontario Seniors Dental Care Program Reguest \$325,300; and,
- Ontario Seniors Dental Care IT Equipment for Bus \$27,279.

Further details regarding the one-time funding requests above are provided in Report BOH22003. It should be noted that an additional one-time request for purpose-built vaccine refrigerators (\$225,350) was submitted to the Ministry on March 14, 2022 (not included in the original submission). This funding is to replace current vaccine refrigerators that are outdated resulting in several maintenance issues. Replacement of these refrigerators will ensure Hamilton Public Health Services continues to meet government and industry priorities of delivering vaccine service to the general public, preventing wastage and remaining in compliance with the Storage and Handling protocol.

This report outlines an amendment to the one-time funding request related to recovery and catch-up. Through ongoing recovery planning efforts, staff have further detailed and refined recovery related costs. Based on this further analysis, it is estimated that \$9,000,924 will be required in 2022 to support Public Health Services in addressing the backlog of services and deficits of care in the community.

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If any further adjustments to recovery related programming covered by this ASPB one-time funding are required, these can be submitted through the regular quarterly reports to the Ministry.

Staffing: The amended recovery costs include a total of 81.50 FTE to support the

work.

Legal: Boards of health are accountable for meeting all requirements included in

the Standards pursuant to the Health Protection and Promotion Act. It is a requirement within the Standards that boards of health submit an ASPB each year. Approval and submission of the 2022 ASPB to the Ministry

fulfils this requirement.

HISTORICAL BACKGROUND

Each year Public Health Services develops an ASPB that outlines the planned service delivery for the coming year. Approval and submission of the ASPB to the Ministry is required to receive provincial funding to support the delivery of public health programs and services under the Standards. In keeping with this requirement, staff submitted the 2022 ASPB on March 1, 2022. Details regarding the submission were outlined in Report BOH22003 that was shared with BOH on February 14, 2022. This included a one-time funding request of \$20,882,772 to support PHS in addressing the deficits of care in the community and the backlog of services that have resulted from many important public health programs being partially or fully on hold due to the COVID-19 pandemic.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The Standards outline requirements that direct the delivery of mandatory public health programs and services by public health units pursuant to the *Health Protection and Promotion Act*. It is a requirement within the Standards that boards of health submit an ASPB each year to the Ministry.

RELEVANT CONSULTATION

Not Applicable.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Since the 2022 ASPB was submitted on March 1, 2022, recovery planning has continued to evolve, and staff have further detailed and refined recovery related activities for 2022 to align with the ongoing assessment of needs within the community. As part of this planning, staff also considered the feasibility of recovery and catch-up initiatives for 2022 based on current organizational capacity, both within Public Health

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Services as well as supportive services such as Human Resources and Finance & Administration. In addition, PHS continues to experience challenges with recruitment as detailed in Report BOH22002 that was brought forward to BOH on January 10, 2022 further impacting capacity. Based on this analysis, it is estimated that recovery costs will total \$9,000,924 for 2022 as opposed to \$20,882,772 included in the original submission. The priority areas for recovery and catch-up in 2022 include:

- Catch-up on routine immunizations for students (i.e., Hepatitis B, HPV, Meningococcal) – close to 50,000 in need of routine immunizations (on-hold since March 2020);
- Catch-up on Immunization of School Pupils Act (ISPA) screenings (on-hold since March 2020);
- Catch-up on dental screenings in schools approximately, 40,000 in need of screening (on-hold since March 2020);
- Ramp-up mental health and wellbeing supports in schools and school communities experiencing the most significant health impacts and inequities;
- Ramp-up infant and early years mental health initiatives to help address the disproportionate impact the pandemic has had on toddlers and young children resulting from extremely limited opportunities for social interaction and social/emotional development;
- Ramp-up supports for parents and caregivers (particularly for those with children aged 3.8 years to 6 years) including opportunities for screening, interventions and developmental support referrals;
- Catch-up on Healthy Smiles Ontario preventive services approximately 278 children on the waitlist (on-hold since March 2020);
- Increase capacity related to the Ontario Seniors Dental Care Program (OSDCP) in order to clear the backlog and reduce wait times that have resulted from reduced service levels during the pandemic**;
- Develop and implement a health equity strategy that incorporates and builds on lessons learned through the pandemic;
- Ramp-up support for population health assessment related to health equity and other public health priorities; and,
- Support for Public Health Services' recovery including strategic and program planning to incorporate lessons learned through the pandemic, policy development and maintenance, and staff mental health and wellbeing.

**Note: OSDCP costs were also included in Ontario seniors dental base funding increase request (\$624,304). If this is not approved as part of the base funding increases, staff have requested that it be included in the recovery and catch-up funding.

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ALTERNATIVES FOR CONSIDERATION

Not Applicable.

ALIGNMENT TO THE 2016 - 2025 STRATEGIC PLAN

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable.