

# **PUBLIC HEALTH SUMMARY**

Public Health

## **NET LEVY REQUIREMENT**

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
General Health Programs	1,111,242	1,155,500	1,196,700	3.6	0	(20,200)	1,176,500	21,000	1.8
Healthy Babies/Healthy Children	0	(2,700)	0	100.0	0	0	0	2,700	100.0
Healthy Communities Program	0	0	0	0.0	0	0	0	0	0.0
Prenatal & Postnatal Nurse Practitioner Program	0	(200)	0	100.0	0	0	0	200	100.0
Ontario Tobacco Strategy	(1)	(600)	0	100.0	0	0	0	600	100.0
Healthy Smiles Ontario	0	(300)	0	100.0	0	0	0	300	100.0
Fiscal Programs	1	(1,200)	10,700	991.7	0	(10,700)	0	1,200	100.0
Total Public Health	1,111,242	1,150,500	1,207,400	4.9	0	(30,900)	1,176,500	26,000	2.3

Public Health

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES	Actuals	BODGLI	Daaget	IIICI/(Deci)	ii iidatives	ii iitiative3	BODGLI	IIICI/(Deci)	inci/(Deci)
Salaries & Benefits	6.842.770	7,135,500	7.118.600	(0.2)	35,800	131,000	7,285,400	149.900	2.1
Materials & Supplies	207,164	149,800	229,800	53.4	0	0	229,800	80,000	53.4
Services	1,157,292	1,182,900	1,221,800	3.3	4,000	0	1,225,800	42,900	3.6
Transfer Payments/Grants	0	0	38,900	100.0	0	0	38,900	38,900	100.0
Interdepartmental Charges	784,979	834,500	790,500	(5.3)	0	0	790,500	(44,000)	(5.3)
Financial	595	1,000	600	(40.0)	0	0	600	(400)	(40.0)
Capital	970	0	0	0.0	10,600	0	10,600	10,600	100.0
TOTAL EXPENDITURES	8,993,770	9,303,700	9,400,200	1.0	50,400	131,000	9,581,600	277,900	3.0
REVENUES									
Federal/Provincial Grants	(6,870,531)	(7,104,300)	(7,157,400)	0.7	(50,400)	(156,900)	(7,364,700)	260,400	3.7
Municipal Recoveries	(791,769)	(844,600)	(818,200)	(3.1)	0	(5,000)	(823,200)	(21,400)	(2.5)
Financial Charges/Investment Income	(7,700)	(9,300)	(9,300)	0.0	0	0	(9,300)	0	0.0
Fees & Service Charges	(63,595)	(61,400)	(64,500)	5.0	0	0	(64,500)	3,100	5.0
Other Revenues	(51,635)	(36,300)	(47,500)	30.9	0	0	(47,500)	11,200	30.9
Transfer From Reserve & Reserve Funds	0	0	0	0.0	0	0	0	0	0.0
Interdepartmental Recoveries	(97,300)	(97,300)	(95,900)	(1.4)	0	0	(95,900)	(1,400)	(1.4)
TOTAL REVENUES	(7,882,530)	(8,153,200)	(8,192,800)	0.5	(50,400)	(161,900)	(8,405,100)	251,900	3.1
NET LEVY REQUIREMENT	1,111,240	1,150,500	1,207,400	4.9	0	(30,900)	1,176,500	26,000	2.3
STAFFING COMPLEMENT		83.99	83.74		0.37	1.69	85.80	1.81	



# **General Health Programs**

General Health Programs

#### **Purpose and Description of Function**

#### The Public Health Unit

The Health Unit obtains its legal authority under the <u>Health Protection and Promotion Act</u>. The Act specifies that Boards of Health must provide or ensure the provision of a minimum level of public health programs and services in specific areas through the Ontario Public Health Standards and corresponding Protocols. The purpose of the Public Health Standards is to set out the minimum requirements for fundamental public health programs and services targeted at prevention of disease, health promotion and health protection. Through these standards the Board of Health seeks to enable residents of the community to realize their fullest health potential. They do this by promoting improved health, preventing disease and injury, controlling threats to human life and function, and facilitating social conditions to ensure equal opportunity in attaining health for all.

The Haldimand-Norfolk Health Unit continues to administer a number of 100% provincially funded programs including the Infection Control Program (SARS), the Infection Control Practitioner, Healthy Babies Healthy Children, the Preschool Speech and Language Program, the Nurse Practitioner Program, the Smoke - Free Ontario Strategy, the Prenatal & Postnatal Nurse Practitioner Service, the Healthy Smiles Ontario Program, the Public Health Nurses - Priority Populations Program, and the Chief Nursing Officer.

### **General Health Programs**

The general health programs are cost shared with the Ministry of Health and Long-Term Care under the 75/25 funding formula capped at \$4,675,200, which results in an actual municipal contribution of approximately 30%. Haldimand County contributes 40.94% of the municipal share based on the number of households recorded annually on the assessment rolls.

## Objectives for the Coming Year

- 1. To complete Phase 2 of the comprehensive service review which began in 2011 to determine proper allocation of resources and the most effective organizational structure.
- 2. To identify areas of realignment of staff skills to task in order to improve compliance with the Ontario Public Health Standards.
- 3. To continue to adapt to the current fiscal realities within the aim of continuing to provide cost effective and quality services and programs to both Haldimand and Norfolk Counties.
- 4. To continue to closely monitor the upcoming changes in the public health sector as announced by the Ministry of Health and Long Term Care and the Ministry of Children and Youth Services and keep the Board informed as to the effects of these changes on the Health Unit.
- 5. To provide ongoing and consistent direction to all teams within the Health Unit.
- 6. To continue to provide consistent and unified internal and external communication.

General Health Programs

#### **Major Budget Changes**

New Budget Initiatives: Continued review of program staffing needs to carry on specific programs have resulted in the following changes to Salaries and Benefits:

- HSS.510.2013.128 Program Assistant Health Admin \$10,200 increase
- HSS.521.2013.129 Flu Clinics Casual RNs Reduced Hours (\$13,600) decrease
- HSS.521.2013.130 HPV Vaccine clinics Casual RNs (\$5,200) decrease
- HSS.521.2013.131 Meningococcal Vaccine Clinics Casual RNs (\$8,100) decrease
- HSS.524.2013.142 HBHC (Healthy Babies, Healthy Children) New Nursing Position Salaries & Benefits only, \$100,000 100% funded, no levy impact
- HSS.510.2013.125 Public Health Inspector SDWS (Small Drinking Water System) \$36,200.

#### Board of Health Approved Initiative:

• HSS.515.2013.141 - Panorama, Phase 1 - \$50,400 and 100% funded no levy impact.

The Vaccine related New Budget Initiatives contribute to the Ministry funding and Haldimand recoveries resulting in a savings of \$20,200.

Salaries overall have decreased by \$12,800 or 0.3% including the above New Budget Initiatives and Board of Health Approved Initiative. This is primarily due to the agreements that were settled this past year resulting in lower economic increases. Benefits costs continue to rise and increased by \$139,800 or 12.7%. Overall, the net increase for Salaries and Benefits is 2.3%.

Under Materials & Supplies, a net increase of \$62,500 or 50.2% is based on the following:

- Office and computer supplies have increased by \$2,900 based on projected purchases for 2013 and projected actuals for 2012.
- Promotional supplies has increased by \$4,300 based on the addition of Public Health Awareness Initiatives, such as Needle Exchange, World Tuberculosis Day, etc... now integrated into the permanent budget, subject to funding.
- Medical supplies has increased by \$9,000 based on the above new Public Health Awareness Initiatives as well.
- Program supplies increased by \$4,100 increasing the amount of infant car seats by \$2,000, educational materials for Sexual Health and World Tuberculosis Programs in the amount of \$2,100.
- Operating supplies have had the largest increase of \$42,200 based on the testing supplies required in 2013 for the Healthy Environment Team, and the addition of the Small Drinking Water Systems Program funding.

Under Services, a net increase of \$65,400 or 7.4% is based on the following:

General Health Programs

- Land/Building rentals have been reduced by \$19,400 since leasehold improvement payments for the Caledonia office were completed in August 2012, and a slight reduction of \$200 for equipment leases.
- Under Professional /Consulting Services, Legal services increased by \$10,000 based on 2011 and 2012 actuals and Consulting Services increased by \$600 based on contract increase.
- Advertising has decreased by \$4,300 based on 2012 actuals and projected 2013 expenditures.
- Computer services has increased by \$2,500 to cover the costs of the computer software system used by the Public Health Inspectors.
- Contracted services
  - o represents the largest increase of \$61,100, primarily driven by the Rapid Risk Surveillance System annual fees and other related statistical packages used in the Epidemiology area with a net impact of \$62,200. Offset by the removal of one time expenditures for the Bed Bug Program \$32,500. Expenditures to assist with the completion of the Service Review increased by \$7,500. Testing, collection and shipping materials for the Vector Borne Disease program has been decreased by \$3,700 based on 2011 and 2012 actuals.
  - o Postage has increased by \$2,000 due to the increase in postage costs in 2013 and the projected volume of mail.
  - Physician's fees has increased by \$22,800 to cover Norfolk's share of 0.5 FTE, of the Medical Officer of Health. In previous years we
    were paying based on a 0.4 FTE.
  - o Rabies quarantine has increased by \$2,000 based on the increase in animal bites and the projected actuals for 2013.
  - o Courier services increase of \$800 based on 2011 & 2012 actuals round out the contracted services.

Under Training and Travel, a net increase of \$14,600 is made up of the following:

- Mileage has increased by \$7,500 as a result of the Small Drinking Water Systems Program (\$3,600), the Panorama Program (\$2,000) and the increase in area coverage of the Public Health Nurses Priority Population (\$2,800) offset by staff reducing the number of kilometers anticipated for 2013 resulting in a reduction of \$900.
- Training and Development, shows a net increase of \$4,100. Again, as part of the new Small Drinking Water Systems Program (\$2,800), the Panorama Program (\$2,000) and a decrease in training for Public Health Nurses Priority Population (-\$1,000) offset by ongoing review of staff training requirements anticipated for 2013 resulting in a net increase of \$300.
- Meeting expenses have increased by \$4,100 based on the actuals for 2012 and the projections for 2013. Staff in Service meetings for Public Health is held twice a year, and other additional meetings as part of the Public Health Admin budget (\$1,000), and anticipated meeting expenses as part of the Infection Prevention and Control Week meetings with outside agencies and community groups (\$2,500). Balance of increases (\$600) due to anticipated incremental increases in 2013.
- Memberships and Associations have decreased by \$1,100. Due largely to the decision not to renew the Association of Local Public Health Agencies (ALPHA) membership, a decrease of \$5,400 with an increase of \$2,900 in anticipation of the Ministry's future requirement that all health units be accredited. Miscellaneous membership increases of \$1,400 round out the changes.

Under Transfer to Others, two programs with 100% funding for Salaries and Benefits - Public Health Nurses - Priority Population (\$32,900) and the Chief Nursing Officer (\$6,000), this transfer will cover additional expenditures such as promotional, office and other supplies and services, funding

General Health Programs

these expenditures under the umbrella of the Cost Shared Program.

Under Interdepartmental Charges, a net decrease of \$47,000 is based on the following:

- IT Computer Replace Costs decreased by \$5,900.
- Telephone charges decreased by \$3,700.
- Cell phone charges increased by \$2,800.
- Gilbertson Drive building rent decreased by \$39,000, which includes a correction to the 2012 budget that resulted in a decrease of \$47,000 to the interdepartmental charges.
- Dunnville Drive building rent increased by \$1,000.
- Clerk's Printing increased by \$200.
- Clerk's admin charges (record management) increased by \$1,500.
- Finance charges decreased by \$100.
- Insurance admin charges decreased by \$800.
- IT support charges decreased by \$9,300.
- HR charges increased by \$1,000.
- H&SS Admin charges increased by \$1,500.
- Health admin charges increased by \$3,800.
- Miscellaneous changes amounting to a net decrease of \$100.

Financial charges has decreased by \$400 based on prior year's actual history for bank service charges.

Under Revenues, the following contributory factors include:

- Ministry funding has been adjusted based on anticipated Ministry funding levels for 2013 (2% capped increase over the 2012 approved level), resulting in an increase in funding of \$75,600. Adding in the funding for the HSS.510.2013.128 Program Assistant Health Admin \$7,600, HSS.524.2013.142 HBHC (Healthy Babies, Healthy Children) New Nursing Position \$100,000, and HSS.510.2013.125 Public Health Inspector SDWS (Small Drinking Water System) \$50,400 accounts for the increase in funding of \$260,700.
- Municipal recoveries are reduced based on Haldimand/Norfolk household percentages rather than population. The adjustment for this is \$36,600 offset by a reduction in recoveries of \$15,200 based on reduced expenditures.
- Fees and Service Charges increased the net levy by \$3,100 due to a projected 14.3% increase in inspection fees based on previous years actuals.
- Other Revenues have decreased by \$5,000 largely due to a reduction in the projected recoveries for the Health Administration since we don't anticipate receiving as much from the Canada Employment Centre for work placements.

Approved Ministry funding is based on 75% Provincial Share, 25% Municipal Share.

General Health Programs

The 2013 proposed operating budget results in a 70% Provincial Share, 30% Municipal Share.

### **Performance Measures**

Performance indicators, the program deliverables and the expected outcomes are outlined in the annual operational plan completed by the Health Unit and the 2011-2013 Accountability Agreement with the Ministry of Health and Long Term Care.

General Health Programs

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	5,328,697	5,468,800	5,440,500	(0.5)	35,800	119,500	5,595,800	127,000	2.3
Materials & Supplies	177,323	124,600	187,100	50.2	0	0	187,100	62,500	50.2
Services	928,479	886,000	947,400	6.9	4,000	0	951,400	65,400	7.4
Transfer Payments/Grants	0	0	38,900	100.0	0	0	38,900	38,900	100.0
Interdepartmental Charges	634,179	683,700	636,700	(6.9)	0	0	636,700	(47,000)	(6.9)
Financial	595	1,000	600	(40.0)	0	0	600	(400)	(40.0)
Capital	0	0	0	0.0	10,600	0	10,600	10,600	100.0
TOTAL EXPENDITURES	7,069,273	7,164,100	7,251,200	1.2	50,400	119,500	7,421,100	257,000	3.6
REVENUES									
Federal/Provincial Grants	(4,956,468)	(4,970,400)	(5,046,000)	1.5	(50,400)	(134,700)	(5,231,100)	260,700	5.2
Municipal Recoveries	(791,769)	(844,600)	(818,200)	(3.1)	0	(5,000)	(823,200)	(21,400)	(2.5)
Fees & Service Charges	(63,595)	(61,400)	(64,500)	5.0	0	0	(64,500)	3,100	5.0
Other Revenues	(48,899)	(34,900)	(29,900)	(14.3)	0	0	(29,900)	(5,000)	(14.3)
Transfer From Reserve & Reserve Funds	0	0	0	0.0	0	0	0	0	0.0
Interdepartmental Recoveries	(97,300)	(97,300)	(95,900)	(1.4)	0	0	(95,900)	(1,400)	(1.4)
TOTAL REVENUES	(5,958,031)	(6,008,600)	(6,054,500)	0.8	(50,400)	(139,700)	(6,244,600)	236,000	3.9
NET LEVY REQUIREMENT	1,111,242	1,155,500	1,196,700	3.6	0	(20,200)	1,176,500	21,000	1.8
STAFFING COMPLEMENT		62.35	62.10		0.37	1.35	63.82	1.47	



# **Healthy Babies/Healthy Children**

Healthy Babies/Healthy Children

#### Purpose and Description of Function

The goal of the Healthy Babies Healthy Children program is to promote optimal physical, communicative, and psychosocial development in children who are at risk. This will be accomplished by:

- 1. Increasing the access to and the use of needs based services and supports for children who are at risk of poor physical, cognitive, communicative, and psychosocial development, and their families.
- 2. Increasing effective parenting ability in high-risk families.
- 3. Increasing the proportion of high-risk children achieving appropriate developmental milestones.
- 4. The HBHC Program is offered to women and their families during the prenatal period and to families with children from birth up to transition to school.

The attainment of these objectives is linked to the Reproductive Health and Child Health objectives in the Mandatory Health Programs and Service Guidelines. This program is 100% funded by the Ministry of Children and Youth Services; however, the program is capped at \$792,100.

### **Objectives for the Coming Year**

- 1. Maintain a network of health and social service providers to ensure that families with children who are at risk of physical, cognitive, communication and/or psychosocial problems, have access to a range of prevention and early intervention services. This will be done by collaborating with the Children's Services Coordinating and Advisory Group and its member agencies.
- 2. Link families with children who are at risk of physical, cognitive, communication and/or psychosocial problems to appropriate supports and services in the community. This will be determined through the ongoing implementation and review of service agreements with all of the relevant local service providers.
- 3. Screening prenatally and at birth to identify those at risk who will be further assessed to identify the high-risk families with children. Work will be done with local physicians to identify prenatal women at risk.
- 4. Ensure that high risk families with children who would benefit from a family home visitor, have access to this service through the Health Unit. Continue to facilitate access to the family home visiting program with direct referrals from the Children's Aid Society, Haldimand-Norfolk R.E. A.C.H., Women's Services and Norfolk Help Centre, for families at risk who meet the program criteria.
- 5. Continue and maintain strategies to ensure contact with all families having a baby within 48 hours of discharge.

#### **Major Budget Changes**

This program continues to feel the pressures of insufficient provincial funding. There has not been an increase in funding for the past six years, which has resulted in adjustments to the staffing levels. In 2013 the program will maintain the same staffing level as 2012, however, unless additional provincial funding becomes available in the future, additional reductions in the staffing compliment may be necessary.

Healthy Babies/Healthy Children

It is anticipated that the approved funding level for this program will once again be capped at \$792,100.

Salaries and benefits have increased overall by \$3,800 or .5%. Salaries decreased by \$6,800 but benefits increased by \$10,600 with the largest increase of \$7,100 in pension benefits.

Materials and Supplies have increased by \$1,800. Operating supplies are responsible for 100% of this increase to fund anticipated increase in expenditures.

Services have a \$4,700 increase in mileage due to the budgeted increase in per kilometer cost and the increase in required travel throughout Haldimand and Norfolk Counties.

Interdepartmental charges overall show a decrease of \$7,600, due mainly to Computer Replace Costs and Cell Phone charges with a \$1,500 increase in Equipment, but offset by a reduction to Insurance Admin of \$100 and a decrease in Health Administration Charges of \$9,000. Due to projected expenditures necessary to carry out the program, the Health Administration Charges were used to balance the budget.

#### **Performance Measures**

The Grant Agreement from the Ministry of Children and Youth Services outlines the program standards and indicators and the expected outcomes.

Healthy Babies/Healthy Children

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	708,828	731,700	735,500	0.5	0	0	735,500	3,800	0.5
Materials & Supplies	7,113	3,000	4,800	60.0	0	0	4,800	1,800	60.0
Services	39,263	35,300	40,000	13.3	0	0	40,000	4,700	13.3
Interdepartmental Charges	19,401	19,400	11,800	(39.2)	0	0	11,800	(7,600)	(39.2)
TOTAL EXPENDITURES	774,605	789,400	792,100	0.3	0	0	792,100	2,700	0.3
REVENUES									
Federal/Provincial Grants	(774,605)	(792,100)	(792,100)	0.0	0	0	(792,100)	0	0.0
TOTAL REVENUES	(774,605)	(792,100)	(792,100)	0.0	0	0	(792,100)	0	0.0
NET LEVY REQUIREMENT	0	(2,700)	0	100.0	0	0	0	2,700	100.0
STAFFING COMPLEMENT		9.50	9.50		0.00	0.00	9.50	0.00	



# Prenatal & Postnatal Nurse Practitioner Program

Prenatal & Postnatal Nurse Practitioner Program

#### Purpose and Description of Function

The purpose of the Prenatal & Postnatal Nurse Practitioner Initiative is to increase accessibility of prenatal & postnatal services to individuals of lower socioeconomic status including the Low German Speaking community and teen mothers. The goal is to increase positive maternal and child health outcomes. This program is 100% funded by the Ministry of Children and Youth Services.

#### Objectives for the Coming Year

- 1. To review strategies to improve access to prenatal health care including conducting a local needs assessment.
- 2. To increase the number of postnatal women and their infants receiving regular follow up care.
- 3. To establish collaborative networks to allow for efficient shared care/transfer of care of consultation.
- 4. To increase the number of women linked to community resources.

#### **Major Budget Changes**

Salaries and Benefits show a decrease of \$2,100 or -1.7%. This is due to the following explanation:

HSS.531.2013.126 - Program Assistant NPN Program, has a zero net levy impact based on the following information from the Public Health department - "Adjustments have been made to the FTE's for this program to better reflect the staffing requirements. The Prenatal Postnatal Nurse Practitioner position has been reduced from 0.87 FTE to 0.74 FTE. The Program Assistant position has been increased from 0.25 FTE to 0.50 FTE. Both of these changes were noted in a New Budget Initiative for 2013. The planned staffing changes have been accommodated within the existing budget for salaries and benefits, resulting in a decrease of \$2,100".

Materials and Supplies, specifically medical supplies has increased slightly by \$900 to balance budget to projected funding.

Interdepartmental charges have an overall increase of \$1,400, primarily due to the \$1,800 increase in Health Administration Charges for the supervision of the program, offset by a \$400 decrease in IS Computer Replace Costs.

#### **Performance Measures**

The Grant Agreement with the Ministry of Children and Youth Services outlines the key components and core services that are to be provided under the program.

Prenatal & Postnatal Nurse Practitioner Program

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	62,855	120,900	118,800	(1.7)	0	0	118,800	(2,100)	(1.7)
Materials & Supplies	269	4,000	4,900	22.5	0	0	4,900	900	22.5
Services	3,702	4,000	4,000	0.0	0	0	4,000	0	0.0
Interdepartmental Charges	9,900	9,900	11,300	14.1	0	0	11,300	1,400	14.1
TOTAL EXPENDITURES	76,726	138,800	139,000	0.1	0	0	139,000	200	0.1
REVENUES									
Federal/Provincial Grants	(76,726)	(139,000)	(139,000)	0.0	0	0	(139,000)	0	0.0
TOTAL REVENUES	(76,726)	(139,000)	(139,000)	0.0	0	0	(139,000)	0	0.0
NET LEVY REQUIREMENT	0	(200)	0	100.0	0	0	0	200	100.0
STAFFING COMPLEMENT		1.12	1.12		0.00	0.12	1.24	0.12	



# **Ontario Tobacco Strategy**

Ontario Tobacco Strategy

#### Purpose and Description of Function

The purpose of the Smoke-Free Ontario Strategy is to lead and coordinate Smoke-Free Ontario funded programs within the Health Unit and, as appropriate, establish linkages to programming dealing with highly correlated health risk factors.

There are three components to the Smoke-Free Ontario Strategy. They are the Tobacco Control Coordination, Local Capacity Building (Enforcement) and Youth Engagement. The Tobacco Control Coordination is the education and coordination component of the Smoke-Free Ontario Program. The Local Capacity Building (Enforcement) is responsible for the enforcement of the Smoke-Free Ontario Act including all of the requirements with respect to controls related to smoking tobacco, the sale or provision of tobacco, the display, storage, handling, and the promotion and distribution of tobacco products. The Youth Engagement Program engages high school students in activities related to the use of tobacco products and the related health issues. This program is 100% funded by the Ministry of Health and Long Term Care and the funding is capped at \$281,800.

#### Objectives for the Coming Year

- 1. To continue to educate the general public about the Smoke-Free Ontario Act.
- 2. To further establish working relationships with local workplaces and tobacco vendors to ensure they have the appropriate information regarding the Smoke-Free Ontario Act.
- 3. To protect the general public and workers from second hand smoke.
- 4. To enforce the legislation regarding retail marketing and youth access to tobacco products.
- 5. Work in partnership with other Public Health Unit staff and community stakeholders to actively engage youth in taking action to address health issues of importance to them with respect to changing individual and community attitudes about tobacco use, denormalize tobacco industry and its products, and address other correlated risk factors.

#### Major Budget Changes

This program is 100% funded by the Ministry and is capped at \$281,800.

- The increase in salaries and benefits of \$10,600 is due to incremental and economic salary increases and higher benefit rates. Salaries increased by \$6,200 or 3.4% and benefits by \$4,400.
- Promotional supplies are increasing by \$4,300 encompassing a decrease to Local Capacity Building and Youth Engagement of \$1,000 and

Ontario Tobacco Strategy

\$2,700 respectively and an increase to the newly created cost centre for TCAN (Tobacco Canada) related promotional items for movie nights, t-shirts, etc... (\$8,000).

- Printing and Advertising show a net increase of \$3,300. A reduction of \$700 to printing to balance the budget, a decrease to Local Capacity Building and Youth Engagement of \$1,000 each. Included is also an increase to the newly created cost centre for TCAN (Tobacco Canada) related advertising (\$6,000) which is to be reimbursed by the Central West Tobacco Area Network.
- Interdepartmental charges have increased slightly by \$300.
- Revenues are increasing by \$16,200 to reflect the funding to be provided by the Central West Tobacco Area Network for tobacco related activities.

Public Health staff have indicated that reductions to this budget will not affect the level of services provided in 2013.

#### **Performance Measures**

The Grant Agreement from the Ministry of Health and Long Term Care outlines the scope of service for the program, the program deliverables and the objectives to be achieved.

Ontario Tobacco Strategy

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	216,399	229,500	240,100	4.6	0	0	240,100	10,600	4.6
Materials & Supplies	8,708	5,400	9,700	79.6	0	0	9,700	4,300	79.6
Services	18,902	18,000	19,600	8.9	0	0	19,600	1,600	8.9
Interdepartmental Charges	28,300	28,300	28,600	1.1	0	0	28,600	300	1.1
TOTAL EXPENDITURES	272,309	281,200	298,000	6.0	0	0	298,000	16,800	6.0
REVENUES									
Federal/Provincial Grants	(272,309)	(281,800)	(281,800)	0.0	0	0	(281,800)	0	0.0
Other Revenues	0	0	(16,200)	100.0	0	0	(16,200)	16,200	100.0
TOTAL REVENUES	(272,309)	(281,800)	(298,000)	5.7	0	0	(298,000)	16,200	5.7
NET LEVY REQUIREMENT	0	(600)	0	100.0	0	0	0	600	100.0
STAFFING COMPLEMENT		3.50	3.50		0.00	0.00	3.50	0.00	



# **Healthy Smiles Ontario**

Healthy Smiles Ontario

#### Purpose and Description of Function

As part of Ontario's Poverty Reduction Strategy, the provincial government committed \$45 million a year to provide greater access to dental services for low income families. The health unit's role was to develop a local plan to ensure provision of preventative and early treatment to low income children ages 0 to 17. This program is 100% funded by the Ministry of Health and Long Term Care and capped at \$308,500.

#### **Objectives for the Coming Year**

- 1. Continue to operate dental clinics in the Health and Social Services offices in Simcoe and Dunnville.
- 2. Education and promotion of oral health to low income families.
- 3. Work with the local service providers (dentists) to expand their services to incorporate the treatment for low income families.

## **Major Budget Changes**

As a relatively new program, Healthy Smiles Ontario, formerly known as Low Income Dental. Strict funding guidelines have made it a challenge to find suitable recipients. However, now that the program has both dental clinics operational, increased program growth is expected in 2013. In order to provide service in both the Simcoe and Dunnville clinics, the dental hygienist position has been increased from 0.5 FTE to 1.0 FTE through New Budget Initiative (HSS.534.2013.132). Since the dental assistant only works part time during the school year, that position has been reduced from 0.5 FTE to 0.3 FTE (HSS.534.2013.133). The resulting impact of the above noted changes is an increase in salaries and benefits of \$22,200.

The impact of the Salaries and Benefits before this change was a reduction of \$600.

- Materials and Supplies, has increased by \$2,800 which includes increases in dental supplies in anticipation of the program growth.
- Services sees a \$300 reduction in Advertising to reflect the increase in web based advertising and a decrease to Contracted Services to offset the dental hygienist position of \$28,200 plus a slight increase of \$200 based on the expected program growth for Training and Travel.
- Interdepartmental charges have increased overall as follows:
  - o Telephone charges increase of \$300.
  - o Gilbertson Building Rental increase of \$500.
  - o Dunnville Building Rental decrease of \$1,000.
  - o Finance charges increase of \$700
  - ∘ IT Support charges increase of \$2,400
  - o HR Charges increase of \$1,000

Healthy Smiles Ontario

Revenues show a small error correction of \$300. The 2012 funding budget was entered as \$308,800 when it should have been entered as \$308,500.

#### **Performance Measures**

The Grant Agreement with the Ministry of Health and Long Term Care outlines the scope of services for the program, the program deliverables and the objectives to be achieved.

Healthy Smiles Ontario

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	44,827	67,200	66,600	(0.9)	0	22,200	88,800	21,600	32.1
Materials & Supplies	2,800	2,600	5,400	107.7	0	0	5,400	2,800	107.7
Services	111,500	205,500	177,200	(13.8)	0	0	177,200	(28,300)	(13.8)
Interdepartmental Charges	33,200	33,200	37,100	11.7	0	0	37,100	3,900	11.7
Capital	970	0	0	0.0	0	0	0	0	0.0
TOTAL EXPENDITURES	193,297	308,500	286,300	(7.2)	0	22,200	308,500	0	0.0
REVENUES									
Federal/Provincial Grants	(193,297)	(308,800)	(286,300)	(7.3)	0	(22,200)	(308,500)	(300)	(0.1)
TOTAL REVENUES	(193,297)	(308,800)	(286,300)	(7.3)	0	(22,200)	(308,500)	(300)	(0.1)
NET LEVY REQUIREMENT	0	(300)	0	100.0	0	0	0	300	100.0
STAFFING COMPLEMENT		1.00	1.00		0.00	0.30	1.30	0.30	



# **Preschool Speech & Language**

Preschool Speech & Language:

#### Purpose and Description of Function

The Preschool Speech, Language and Audiology Program provides a full range of speech-language interventions to children in Haldimand and Norfolk Counties, from birth to 70 months. The goal of these services is to increase the number of children entering school with age appropriate speech and language skills.

The vision for this program is that every preschool child who requires speech and language and audiology services will receive the resources and have the acquired communication skills needed for the performance of daily activities required for personal and social sufficiency at home and at school. This program is funded 100% by the Ministry of Children and Youth Services and the funding is capped at \$489,300.

Due to no increases in Ministry funding for the past number of years, a wait list for service is in place, with the average wait time being 16 weeks. The current funding has also caused the program to adjust its staffing levels over the past three years by gapping maternity leaves and other staff vacancies.

#### Objectives for the Coming Year

- 1. 45% of all initial assessments will be provided to children by 30 months of age.
- 2. 100% of children who are discharged for the reasons "attending JK", "attending SK" and "attending Grade 1" will receive transition to school plans.
- 3. 75% of all children aged 0-6 during this fiscal year who have ever received PSL services, will have received parent training at some point during their period of service delivery.
- 4. Individual treatment with a speech language pathologist and individual treatment with a mediator together will comprise no more than 35% of the total interventions provided.
- 5. The Outcome Measures Tool will be completed with 90% of children over 12 months of age receiving an initial assessment.
- 6. The Outcome Measures Tool will be completed with 90% of children over 12 months of age receiving intervention after a period of six months has passed or at a change in intervention type, whichever comes first.

#### **Major Budget Changes**

This program continues to feel the pressures to meet mandatory requirements due to the lack of provincial funding. There has not been an increase in funding for the past six years, resulting in the reduction of staff and a longer wait time for service. In anticipation of no additional funding, the Preschool Secretary/Receptionist position (New Budget Initiative - HSS.526.2013.136) was reduced from 1.0 FTE to 0.8 FTE in November of 2012. A maternity leave has also been gapped from September 2012 to January 2013.

A waiting list has been in place for the last two years and the approximate wait time for service is 16 weeks.

Preschool Speech & Language:

It is anticipated that the Ministry funding for this program will not be increased and once again be capped at \$489,300.

The change in expenditures for this program include:

- Salaries and benefits have decreased by \$10,700 due to the reduction in the Secretary/Receptionist position noted above.
- Materials and Supplies, has increased by \$7,700 which includes increases in office supplies (\$2,700) and operating supplies, (\$6,400) and a \$200 reduction in Library Materials and a \$1,200 reduction in Medical Supplies.
- Services sees a \$1,000 reduction in Advertising to reflect the 2011 & 2012 actuals, an increase of \$1,200 to Contracted Services for the annual charge for the REACH Parent Info Line and Training and Travel have been increased by \$700 based on an ongoing review of staff mileage (\$300) and training (\$400) requirements anticipated for 2013.

Interdepartmental charges have increased overall as follows:

- IS Computer Replace Costs increase of \$400.
- o Gilbertson Building Rental increase of \$2,100.
- o Dunnville Building Rental decrease of \$900.
- o Insurance Admin Charges decrease of \$100
- o Health Admin charges increase of \$500

### **Performance Measures**

The Grant Agreement with the Ministry of Children and Youth Services outlines the scope of service for the program, the program deliverables and the outcomes to be achieved.

Preschool Speech & Language:

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	404,988	415,200	415,200	0.0	0	(10,700)	404,500	(10,700)	(2.6)
Materials & Supplies	9,050	8,200	17,300	111.0	0	0	17,300	9,100	111.0
Services	32,825	30,900	31,500	1.9	0	0	31,500	600	1.9
Interdepartmental Charges	44,698	44,700	46,700	4.5	0	0	46,700	2,000	4.5
TOTAL EXPENDITURES	491,561	499,000	510,700	2.3	0	(10,700)	500,000	1,000	0.2
REVENUES									
Federal/Provincial Grants	(481,126)	(489,300)	(489,300)	0.0	0	0	(489,300)	0	0.0
Financial Charges/Investment Income	(7,700)	(9,300)	(9,300)	0.0	0	0	(9,300)	0	0.0
Other Revenues	(2,735)	(1,400)	(1,400)	0.0	0	0	(1,400)	0	0.0
TOTAL REVENUES	(491,561)	(500,000)	(500,000)	0.0	0	0	(500,000)	0	0.0
NET LEVY REQUIREMENT	0	(1,000)	10,700	1,170.0	0	(10,700)	0	1,000	100.0
STAFFING COMPLEMENT		5.55	5.55		0.00	(0.20)	5.35	(0.20)	



# **Nurse Practitioner Program**

Nurse Practitioner Program

#### Purpose and Description of Function

The purpose of the Nurse Practitioner program (within the Sexual Health program) is to expand the clinical sexual health services including access to birth control and sexually transmitted infection testing including HIV/AIDS. This program is funded 100% by the Ministry of Health and Long Term Care and is capped at \$122,900.

#### Objectives for the Coming Year

- 1. To provide clinical sexual health services in Haldimand and Norfolk Counties.
- 2. To provide birth control counselling and low cost birth control.
- 3. To provide sexually transmitted disease testing and free treatment.
- 4. To provide non-nominal HIV testing, counselling and referral.
- 5. To collaborate with community partners and priority populations in policy development and health promotion.

### Major Budget Changes

Adjustments have been made to the FTE's for this program to better reflect the staffing requirements. The Nurse Practitioner position has been reduced from 0.72 FTE to 0.59 FTE. The Program Assistant position has been increased from 0.25 FTE to 0.50 FTE. Both of these changes were noted in the detailed description of the New Budget Initiative HSS528.2013.127 for 2013.

The planned staffing changes have been accommodated within the existing budget for salaries and benefits, resulting in a slight decrease of \$300.

- Materials and Supplies, has decreased by \$1,400 which includes a \$200 reduction in Library Materials and a \$1,200 reduction in Medical Supplies.
- Training and Travel have been adjusted by an overall increase of \$1,100 based on an ongoing review of staff mileage (\$700) and training (\$400) requirements anticipated for 2013.

Interdepartmental charges have increased overall as follows:

Nurse Practitioner Program

- o IS Computer Replace Costs increase of \$400.
- o Telephone charges increase of \$300.
- o Gilbertson Building Rental increase of \$200.
- o Finance charges increase of \$800
- o HR Charges increase of \$1,200
- ∘ IT Support Charges increase of \$100

#### Performance Measures

The Grant Agreement with the Ministry of Health and Long Term Care outlines the program description, the program deliverables and the expected outcomes.

Nurse Practitioner Program

	2012	2012	2013	2013	Board of Health	New	2013	2013	2013
	Forecasted	APPROVED	Adjusted	ADJ BUD %	Approved	Budget	PROPOSED	Budget \$	Budget %
	Actuals	BUDGET	Budget	Incr/(Decr)	Initiatives	Initiatives	BUDGET	Incr/(Decr)	Incr/(Decr)
EXPENDITURES									
Salaries & Benefits	76,178	102,200	101,900	(0.3)	0	0	101,900	(300)	(0.3)
Materials & Supplies	1,900	2,000	600	(70.0)	0	0	600	(1,400)	(70.0)
Services	3,700	3,200	2,100	(34.4)	0	0	2,100	(1,100)	(34.4)
Interdepartmental Charges	15,300	15,300	18,300	19.6	0	0	18,300	3,000	19.6
TOTAL EXPENDITURES	97,078	122,700	122,900	0.2	0	0	122,900	200	0.2
REVENUES									
Federal/Provincial Grants	(97,078)	(122,900)	(122,900)	0.0	0	0	(122,900)	0	0.0
TOTAL REVENUES	(97,078)	(122,900)	(122,900)	0.0	0	0	(122,900)	0	0.0
NET LEVY REQUIREMENT	0	(200)	0	100.0	0	0	0	200	100.0
STAFFING COMPLEMENT		0.97	0.97		0.00	0.12	1.09	0.12	