

**Report to:** Finance Committee, Board of Health  
**Submitted by:** Dr. Nicola Mercer, Medical Officer of Health & CEO  
**Subject:** 2016 FIRST QUARTER FINANCIALS

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**RECOMMENDATION(S)**

- (a) That the Finance Committee makes recommendation to the Board of Health to receive the 2016 First Quarter Financials, as presented, for information.

**BACKGROUND**

Wellington-Dufferin-Guelph Public Health’s (WDGPH) annual budget consists of several sub-budgets based on different funders and funding structures. The sub-budgets have been numbered and these numbers have been used consistently throughout this report. The main budget of the organization consists of the sub-budgets numbered (1) through (7) below. In addition to the main budget, WDGPH receives several community grants for projects which are aligned with and build upon the work of Public Health in the community. These community grants are numbered (8) through (12) below.

No.	Program/Budget Name	Funder(s)	Year-end
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**Cost-Shared Sub-budgets**

1	Cost-shared Mandatory Programs	Ministry of Health and Long-Term Care (MOHLTC); City of Guelph; County of Wellington; County of Dufferin	December 31 <sup>st</sup>
2	Cost-shared Related Programs	Ministry of Health and Long-Term Care (MOHLTC); City of Guelph; County of Wellington; County of Dufferin	December 31 <sup>st</sup>

**100% Funded Sub-budgets**

3	100% MOHLTC Funded Programs	Ministry of Health and Long-Term Care	December 31 <sup>st</sup>
4	Healthy Babies Healthy Children (HBHC)	Ministry of Children and Youth Services	December 31 <sup>st</sup>
5	Preschool Speech and Language (PSL)	Ministry of Children and Youth Services	March 31 <sup>st</sup>
6	Wee-Talk	County of Wellington	December 31 <sup>st</sup>
7	Canadian Prenatal Nutrition Program (CPNP)	Public Health Agency of Canada	March 31 <sup>st</sup>

### Other Community Grants

8	Poverty Elimination Task Force (PETF)	City of Guelph, County of Wellington, United Way Wellington-Dufferin-Guelph	December 31 <sup>st</sup>
9	Children's Report Card	County of Wellington, Dufferin Coalition for Kids (DuCK), Dufferin Child & Family Services (DCAF)	December 31 <sup>st</sup>
10	Nurturing Neighbourhoods	Family and Children's Services Guelph-Wellington	December 31 <sup>st</sup>
11	My Health e-Snapshot: A Preconception Health Research Study	Women's College Hospital	December 31 <sup>st</sup>
12	System of Care	County of Wellington, KidsAbility, CMHA Waterloo-Wellington	December 31 <sup>st</sup>

The 2016 budget approved by the Board of Health on October 7, 2015 only included sub-budgets (1), (2), and (3) above. These sub-budgets were submitted to the MOHLTC via the Program Based Grants (PBG) submission on March 1, 2016. Total budgeted revenue and expenses for all of the Cost-Shared Mandatory, Cost-Shared Related (Vector-Borne Diseases and Small Drinking Water Systems), and 100% MOHLTC Funded budgets are below:

No.	Name of Budget	BOH Approved	2015 One Time Grants Deferred	Total 2016 Budget
1	Cost-Shared Mandatory	\$20,223,271	\$319,216	\$20,542,487
2	Vector-Borne Diseases	\$206,221		\$206,221
2	Small Drinking Water Systems	\$54,772		\$54,772

	Name of Budget	Funding Requested
3	Needle Exchange	\$50,000
3	Enhanced Food Safety	\$40,300
3	Healthy Smiles Ontario	Not included in submission
3	Infection Control	\$333,400
3	Smoke Free Ontario	\$409,500
3	Electronic Cigarettes Act	\$19,200
3	Enhanced Safe Water	\$21,600
3	Chief Nursing Officer	\$121,500
3	Infection Control Nurses Initiative	\$90,100
3	Social Determinants of Health Nurses	\$180,500
3	MOH Compensation	\$83,714

In addition to the MOHLTC and municipal funding, WDGPH will receive funding for 2016 for the following programs/projects:

	<b>Program/Project</b>	<b>Funding</b>
4	Healthy Babies Healthy Children	\$1,567,992
5	Preschool Speech and Language	\$808,573
6	Wee-Talk	\$367,921
7	Canadian Prenatal Nutrition Program	\$63,410
8	Poverty Elimination Task Force	\$130,841
9	Children's Report Card	\$113,000
10	Nurturing Neighbourhoods	\$40,125
11	My Health eSnapshot: A Preconception Health Research Study	\$15,000
12	System of Care	\$46,829

In addition to the above funding, the following one-time grant requests were submitted to MOHLTC for 2016:

#### **2016 One-Time Grant Requests (Cost-Shared)**

<b>Name of Grant</b>	<b>Provincial Funding Requested</b>
Positive Space Training	\$15,000
Website	\$200,000
Psychological Health & Safety in the Workplace	\$15,000
Dental Clinic Equipment	\$34,230
ERP Consultant	\$75,000
Oral Health Practice Management Software	\$25,000

#### **2016 One-Time Grant Requests (100% MOHLTC Funded)**

<b>Name of Grant</b>	<b>Provincial Funding Requested</b>
Immunization of School Pupils Act Regulatory Amendments Implementation	\$60,681
PHI Practicum	\$10,000
Additional Parking Spaces	\$250,000
Health Protection Tablets	\$74,800
New Shelburne Location Renovations*	\$400,000

\* please refer to Finance Committee Report BH.04.JUN0916.R09 – 2016 One-Time Grants Update.

### **PUBLIC HEALTH AND/OR FINANCIAL IMPLICATIONS:**

#### **Appendix 1: Cost-shared Mandatory Programs (1)**

*Cost-shared Mandatory Programs are the public health programs and services that boards of health are required provide to the communities they serve in accordance with the Health Protection and Promotion Act (HPPA), Ontario Public Health Standards (OPHS) and the Organizational Standards. MOHLTC funding for mandatory programs is provided on a global*

*basis (as opposed to a line by line basis), and boards of health are responsible for allocating the funding to meet the requirements of the HPPA, OPHS, and Organizational Standards according to local needs and priorities.*

### **Current Net Position:**

*Appendix “1”* represents the statement of revenue and expenditures for the quarter ended March 31, 2016, for the Cost-shared Mandatory programs. As reported on the attached statement, there was a net excess of revenue over expenditures of \$533,657 for the quarter. Budget to actual variances of greater than \$100,000 are explained below:

**Salary and benefits** expenses had a positive variance of \$413,463 for the quarter as a result of three vacant management staff positions, maternity leaves, a leave of absence, and temporary and casual staff who have a two week payroll lag.

**Building Occupancy** expenses had a positive variance of \$107,965 for the quarter as a result of lower than budgeted maintenance costs. Several maintenance projects are scheduled for later in the year.

### **Appendix 2: All Other Programs (2 – 12)**

*Appendix Two presents the Funding and Expenditures for the quarter for the Cost-Shared Related (Small Drinking Water Systems and Vector-Borne Diseases) and 100% funded programs.*

#### **Ministry of Health and Long-Term Care Cost-shared Related Programs**

**Vector Borne Diseases** – funding provided for this program must be used for the ongoing surveillance, public education, prevention and control of all reportable and communicable vector-borne diseases and outbreaks of vector-borne disease, which include, but are not limited to, West Nile Virus and Lyme Disease.<sup>1</sup>

**Small Drinking Water Systems** – this funding is provided to support the ongoing assessments and monitoring of small drinking water systems. Under this program, public health inspectors are required to conduct new and ongoing site-specific risk assessments of all small drinking water systems within the oversight of the Board of Health; ensure system compliance with the regulation governing the small drinking water systems; and, ensure the provision of education and outreach to the owners/operators of small drinking water systems.<sup>1</sup>

#### **Ministry of Health and Long-Term Care 100% Funded Programs**

**Needle Exchange** – this funding is provided for the purchase of needles and syringes, and their associated disposal costs, for the Board of Health’s Needle Exchange Program.<sup>1</sup> In 2015, there was \$9,994 more spent than was provided in provincial funding. Municipal funding was used to cover the shortfall. The 2016 provincial funding request is \$50,000.

**Enhanced Food Safety** – this initiative was established to augment the Board of Health’s capacity to deliver the Food Safety Program.<sup>1</sup> This funding pays for 0.35 FTE of a Public Health Inspector, and some program supplies costs and training.

**Healthy Smiles Ontario** – this program provides prevention and basic treatment services for children and youth, from low-income families, who are 17 years of age or under, and who do not have access to any form of dental coverage.<sup>1</sup> This program has been merged with the CINOT and CINOT Expansion programs effective January 2016, with the merged program currently being referred to as HSO II by the Ministry. The funding envelope for this program has not yet been provided by the Ministry. Public Health Units were not asked to submit a budget request for this program with the PBG submission which was due in early March 2016.

**Infectious Diseases Control Initiative** – this funding pays for 2.0 FTE Public Health Nurses and 1.0 FTE Epidemiologist, as well as some travel and equipment costs. The funding is provided for the sole purpose of monitoring and controlling infectious diseases and enhancing the Board of Health’s ability to handle and coordinate increased activities related to outbreak management.<sup>1</sup>

**Smoke Free Ontario** – this funding is provided in support of the government’s Healthy Change Strategy and Action Plan. The Smoke-Free Ontario Strategy is a multi-level comprehensive tobacco control strategy aiming to eliminate tobacco-related illness and death by preventing experimentation and escalation of tobacco use among children, youth and young adults; increasing and supporting cessation by motivating and assisting people to quit tobacco use; and protecting the health of Ontarians by eliminating involuntary exposure to second-hand smoke.<sup>1</sup>

**Electronic Cigarettes Act** – this funding was provided to prepare for the implementation and enforcement of the *Electronic Cigarettes Act (ECA)*, which was effective January 1, 2016.

**Enhanced Safe Water** – the purpose of this initiative is to increase the Board of Health’s capacity to meet the requirements of the Safe Water Program Standard under the OPHS.<sup>1</sup> This funding pays for 0.15 FTE of a Public Health Inspector, as well as some program supplies and training.

**Chief Nursing Officer** – funding provided for the Chief Nursing Officer position at the Health Unit. The purpose of the Chief Nursing Officer in the Board of Health is to enhance the health outcomes of the community at individual, group, and population levels, through contributions to organizational strategic planning and decision making; by facilitating recruitment and retention of qualified, competent public health nursing staff, and by enabling quality public health nursing practice.<sup>1</sup>

**Infection Prevention and Control Nurse** – this funding pays for 1.0 FTE Public Health Nurse. The majority of the Infection Prevention and Control Nurse’s time must be spent on infection prevention and control activities.<sup>1</sup>

**Social Determinants of Health Nurses Initiative** – this funding pays for 2.0 FTE Public Health Nurses. With this funding, public health nurses with specific knowledge and expertise on social determinants of health and health inequities issues will provide enhanced supports internally and externally to the Board of Health to address the needs of priority populations impacted most negatively by the social determinants of health in the Board of Health area.<sup>1</sup>

**MOH Compensation Initiative** – funding provided by the Province to subsidize the salary/benefits/stipends for the Medical Officer of Health to ensure compensation falls within the salary ranges outlined in the 2012 Physician Services Agreement and subsequent addendums to that agreement.<sup>1</sup>

#### Ministry of Children and Youth Services Funded Programs

**Healthy Babies Healthy Children** – under this program 8.2 FTE Public Health Nurses, 5.8 FTE Family Home Visitors, 1.0 Data Entry Clerk, and 1.0 Program Assistant are funded to help children get a healthy start in life. The program does this by helping infants and children up to age six and their families through: screening and assessments, supports for new parents, and help in finding community programs and resources.<sup>2</sup>

**Preschool Speech and Language** – this funding pays for 2.0 FTE Speech Language Pathologists and 0.6 of a FTE Wee Talk Administrator employed by WDGPH, and approximately 4 Speech Language Pathologists employed by Groves Memorial Hospital, Fergus, St. Joseph’s Healthcare, Guelph, and Headwaters Hospital, Orangeville. Together with the three hospitals, WDGPH coordinates the provision of speech pathology services in the Counties of Wellington and Dufferin, and the City of Guelph. This funding has a fiscal year of April to March.

County of Wellington Wee Talk this funding is provided by the County of Wellington to integrate with the speech pathology services available in Wellington County funded by the Ministry of Children and Youth Services under the Preschool Speech and Language program.

Canadian Prenatal Nutrition Program - this funding is provided by the Public Health Agency of Canada on an April to March fiscal year, to deliver a comprehensive program to promote and support optimal nutrition and health in pregnant and early postpartum women who live in difficult life situations.<sup>3</sup>

Other Community Grants - various other community grants are provided by the three municipalities served by WDGPH, and other community partners (Family and Children’s Services and United Way). The work undertaken with this funding falls within the mandate of WDGPH under the HPPA, OPHS, and Organizational Standards. This funding provides additional resources to WDPGH to augment the work of the Agency.

#### **Appendix 3: One-Time Grants**

A summary of the status of expenditures from 2015 one-time grants with a March 31, 2016 spending deadline, as at March 31, 2016 has been provided at *Appendix 3*.

#### **APPENDICES:**

***Appendix “1”*** - Statement of Revenue & Expenditures for the quarter ended March 31, 2016  
– Cost Shared Mandatory Programs

***Appendix “2”*** – Q1 Financial Report 2016: All Other Programs

***Appendix “3”*** – Q1 Financial Report 2016: 2015 One-Time Grants

## REFERENCES:

1. Ontario. Ministry of Health and Long-Term Care. Financial Planning, Accountability and User Guide for Program-Based Grants for Mandatory and Related Public Health Programs and Services; 2015.
2. Ministry of Children and Youth Services [homepage on the Internet]. Available from: <http://www.children.gov.on.ca/htdocs/English/topics/earlychildhood/health/index.aspx>.
3. Canada. Public Health Agency of Canada. Canada Prenatal Nutrition Program Contribution Agreement; October 2013.

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