

Report to: Finance Committee, Board of Health
Submitted by: Elizabeth Bowden, Interim Director of Administrative Services
Subject: 2016 THIRD QUARTER FINANCIALS

RECOMMENDATION(S)

- (a) That the Finance Committee makes recommendation to the Board of Health to receive the 2016 Third 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 st
2	Cost-shared Related Programs	MOHLTC; City of Guelph; County of Wellington; County of Dufferin	December 31 st

100% Funded Sub-budgets

3	100% MOHLTC Funded Programs	MOHLTC	December 31 st
4	Healthy Babies Healthy Children	Ministry of Children and Youth Services (MCYS)	December 31 st
5	Preschool Speech and Language	MCYS	March 31 st
6	Wee-Talk	County of Wellington	December 31 st
7	Canadian Prenatal Nutrition Program (CPNP)	Public Health Agency of Canada (PHAC)	March 31 st

Other Community Grants

8	Poverty Elimination Task Force (PETF)	City of Guelph, County of Wellington, United Way Wellington-Dufferin-Guelph	December 31 st
9	Children's Report Card	County of Wellington, Dufferin Coalition for Kids (DuCK), Dufferin Child & Family Services (DCAF)	December 31 st
10	Nurturing Neighbourhoods	Family and Children's Services Guelph-Wellington	December 31 st
11	My Health e-Snapshot: A Preconception Health Research Study	Women's College Hospital	December 31 st
12	System of Care	County of Wellington, KidsAbility, Canadian Mental Health Association (CMHA) Waterloo-Wellington	December 31 st
13	2016 One-Time Grants	MOHLTC	March 31 st

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.

On September 23, 2016 WDGPH received the Provincial Funding Approval, as outlined in Finance Committee Report BH.04.OCT1316.R13.

The budget figures in the attached Appendices reflect the approved Provincial funding per the September 23, 2016 Provincial funding approval.

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 Protocols 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 nine months ended September 30, 2016, for the Cost-shared Mandatory programs. As reported on the attached statement, there was a positive variance totalling \$849,995 for the first nine months of the year. This is a decrease from the positive variance reported in the second quarter, and

will substantially decrease by year-end as projects that have been underway in the third and fourth quarters of the year wrap up. The forecast to the end of the year based on projects currently underway in the fourth quarter is a year-end surplus in the range of \$50,000 to \$100,000. This preliminary estimate is subject to fluctuation if some ongoing projects are unable to be completed by year-end. Projects currently underway include:

- Fergus office renovations;
- IT Systems Assessment
- IT Security Assessment
- Phone System Assessment
- ERP Systems Assessment
- Chancellors Way parking lot security installation

Budget to actual variances of greater than \$100,000 are explained below:

Salary and benefits expenses had a positive variance of \$798,092 for the first nine months as a result of two vacant Director positions (one of which has subsequently been filled), one vacant management position (subsequently filled), maternity leaves, a leave of absence, and temporary and casual staff who have a two week payroll lag.

Appendix 2: All Other Programs (2 – 12)

Appendix Two presents the Funding and Expenditures for the first nine months of the year for the Cost-Shared Related (Small Drinking Water Systems and Vector-Borne Diseases) and 100% funded programs.

MOHLTC 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.¹

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.¹

MOHLTC 100% Funded Related 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.¹ In 2015, there was \$9,994 more spent than was provided in provincial funding. Municipal funding was used to cover the shortfall. In 2016, provincial funding of \$50,000 was requested and received.

Enhanced Food Safety – this initiative was established to augment the Board of Health’s capacity to deliver the Food Safety Program.¹ This funding pays for less than 0.5 of a FTE 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.¹ 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.

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.¹

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.¹

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.¹ This funding pays for less than 0.2 of a FTE 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.¹

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.¹

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.¹

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.¹

MCYS Funded Programs

Healthy Babies Healthy Children – under this program Public Health Nurses, Family Home Visitors, a Data Entry Clerk, and a 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.²

Preschool Speech and Language – this funding pays for Speech Language Pathologists and a part-time Wee Talk Administrator employed by WDGPH, as well as Speech Language Pathologists employed by Groves Memorial Hospital in Fergus (serving Wellington and Dufferin Counties), and St. Joseph’s Healthcare in Guelph (serving the City of Guelph). 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 MCYS under the Preschool Speech and Language program.

Canadian Prenatal Nutrition Program - this funding is provided by the PHAC 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.³

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.

APPENDICES:

Appendix “1” – Statement of Revenue & Expenditures for the nine months ended September 30, 2016 – Cost Shared Mandatory Programs

Appendix “2” – Q3 Financial Report 2016: All Other Programs

Appendix “3” – Q3 Financial Report 2016: 2016 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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Wellington-Dufferin-Guelph Public Health

APPENDIX "1"

Statement of Revenue and Expenditures

Finance Committee Report BH.04.NOV1716.R16

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Total Cost-Shared Mandatory Programs

For the Nine Months Ended September 30, 2016

	Annual Budget	YTD Budget	Actual	Variance	Variance
	2016	2016	2016	Variance*	% of Total Annual Budget
	\$		\$	\$	%
Municipal and provincial funding					
Province of Ontario - MOHLTC	11,986,100	9,059,522	9,059,522	0	0.0%
City of Guelph	3,650,642	2,737,982	2,737,981	(1)	0.0%
County of Wellington	2,600,782	1,950,586	1,950,586	0	0.0%
County of Dufferin	1,702,047	1,276,535	1,276,535	0	0.0%
One Time Grants - MOHLTC	226,259	226,259	226,259	0	0.0%
	20,165,830	15,250,884	15,250,883	(1)	0.0%
Other revenue					
Transfers from Reserves	75,420	75,420	0	(75,420)	-0.4%
Interest	20,000	15,000	21,217	6,217	0.0%
	95,420	90,420	21,217	(69,203)	-0.3%
Total revenue	20,261,250	15,341,304	15,272,100	(69,204)	-0.3%
Expenses					
Employee salaries, wages and benefits	14,730,906	10,912,754	10,114,662	798,092	3.9%
Staff training	166,151	123,795	90,494	33,301	0.2%
Board/volunteer training and recognition	41,707	31,230	41,159	(9,929)	0.0%
Travel	300,797	225,374	166,636	58,738	0.3%
Building occupancy	3,040,601	2,135,630	2,131,950	3,680	0.0%
Office expenses, printing, postage	191,025	142,195	132,479	9,716	0.0%
Professional and purchased services	759,362	596,599	553,336	43,263	0.2%
Program materials and supplies	496,235	375,132	388,368	(13,236)	-0.1%
Office equipment	24,858	11,425	19,882	(8,457)	0.0%
Information and IT equipment	555,852	347,823	336,423	11,400	0.1%
Communication costs	161,400	121,050	111,302	9,748	0.0%
One-time	301,679	301,679	301,679	0	0.0%
Total net operating costs	20,770,573	15,324,686	14,388,370	936,316	4.6%
Expenditure recoveries	(509,323)	(359,494)	(342,377)	(17,117)	-0.1%
Total net expenditures after expenditure recoveries	20,261,250	14,965,192	14,045,993	919,199	4.5%
Excess of revenue over expenditures	0	376,112	1,226,107	849,995	

* Variances greater than \$100,000 are explained in the body of the accompanying report.

Program	Provincial/ Municipal Split	Fiscal Year-end	Provincial Funding Approved	Municipal Funding Approved	"Other" Funding Approved	Total Funding	YTD Funding Received	YTD Expenditures	Excess (Deficiency) of YTD Funding over Expenditures	Projected Surplus (Deficit) at Year-End
Vector-Borne Diseases (2)	Cost-Shared	December 31st	150,700	55,521		206,221	154,664	83,417	71,247	0
Small Drinking Water Systems (2)	Cost-Shared	December 31st	40,600	14,172		54,772	41,083	39,915	1,168	0
Needle Exchange (3)	100% Provincial	December 31st	50,000			50,000	23,096	31,128	(8,032)	0
Enhanced Food Safety (3)	100% Provincial	December 31st	40,300			40,300	30,223	26,782	3,441	0
Healthy Smiles Ontario (3)	100% Provincial	December 31st	767,400			767,400	716,699	538,465	178,234	0
Infection Control (3)	100% Provincial	December 31st	333,400			333,400	250,054	243,318	6,736	0
Smoke Free Ontario (3)	100% Provincial	December 31st	409,500			409,500	307,119	297,214	9,905	0
Electronic Cigarettes Act (3)	100% Provincial	December 31st	19,200	0		19,200	14,400	6,996	7,404	0
Enhanced Safe Water (3)	100% Provincial	December 31st	21,600			21,600	16,200	11,478	4,722	0
Chief Nursing Officer (3)	100% Provincial	December 31st	121,500			121,500	91,131	88,914	2,217	0
Infection Control Nurses Initiative (3)	100% Provincial	December 31st	90,100			90,100	67,573	65,935	1,638	0
Social Determinants of Health Nurses (3)	100% Provincial	December 31st	180,500			180,500	135,377	132,090	3,287	0
MOH Compensation (3)	100% Provincial	December 31st	83,714			83,714	62,835	61,250	1,585	0
Healthy Babies Healthy Children (4)	100% Provincial	December 31st	1,567,992			1,567,992	1,176,248	1,115,003	61,245	0
Preschool Speech and Language (5)	100% Provincial	March 31st	763,573			763,573	399,253	341,128	58,125	0
County of Wellington Weetalk (6)	100% Municipal	December 31st		367,921		367,921	275,941	277,883	(1,942)	0
Canadian Prenatal Nutrition Program (7)	PHAC	March 31st			63,410	63,410	59,605	25,050	34,555	0
Community Grants* (8, 9, 10, 11, 12)	Various funders**	December 31st		204,156	134,389	338,545	307,712	235,619	72,093	0

*Community Grants include:
 Poverty Elimination Task Force
 Children's Report Card
 Nurturing Neighbourhoods
 My Health eSnapshot
 System of Care

**Various Funders are:
 City of Guelph
 County of Wellington
 Dufferin Coalition for Kids (DuCK)
 United Way Wellington-Dufferin-Guelph
 Family and Children's Services Guelph Wellington
 Women's College Hospital
 Dufferin Child and Family Services (DCAF)
 KidsAbility
 CMHA Waterloo-Wellington

Name of Grant	Funder	Provincial/ Municipal Split	Fiscal Period for Eligible Expenditures	2016 Provincial One-Time Funding	Municipal Funding	Total Funding	2016 Expenditures to date	Balance Remaining (Overspent)	Projected Carryover to Q1 2017
Healthy Smiles Ontario Program: Clinical Dental Equipment	MOHLTC	100/0	April 1, 2016 to March 31, 2017	34,300	-	34,300	-	34,300	-
Healthy Smiles Ontario Program: Dental Practice Management Software	MOHLTC	100/0	April 1, 2016 to March 31, 2017	25,000	-	25,000	-	25,000	-
Panorama	MOHLTC	100/0	April 1, 2016 to March 31, 2017	157,500	-	157,500	-	157,500	157,500
Public Health Inspector Practicum	MOHLTC	100/0	April 1, 2016 to March 31, 2017	10,000	-	10,000	10,000	-	-