



October 13, 2020

Ron Taylor
Chief Administrative Officer
City of Kawartha Lakes
P.O. Box 9000
26 Francis St
Lindsay ON K9V 5R8

sent via email to: rtaylor@kawarthalakes.ca

RE: 2020 Levy in Arrears - \$139,735.42

Dear Mr. Taylor

With regards to our letters dated November 14, 2019, November 25, 2019 and January 16, 2020 (attached), as of today the City of Kawartha Lakes is in arrears in the amount of \$139,735.42 for the 2020 levy.

The *Health Protection and Promotion Act* states under Part VI, Health Units and Boards of Health:

“Payment by obligated municipalities

72 (1) The obligated municipalities in a health unit shall pay,

- (a) the expenses incurred by or on behalf of the board of health of the health unit in the performance of its functions and duties under this or any other Act; and
- (b) the expenses incurred by or on behalf of the medical officer of health of the board of health in the performance of his or her functions and duties under this or any other Act. 1997, c.30, Sched. D, s.8”

and;

“Payment in accordance with notice

(8) An obligated municipality that is given notice by a board of health under this section shall pay to the board of health the amounts required by the notice at the times required by the notice. 1997, c.30, Sched. D, s.8”

Not only are obligated municipalities required under the *Health Protection and Promotion Act* to pay their portion of the municipal levy, as indicated in previous correspondence, funding from municipalities is necessary in order to maintain program and service delivery to our communities; programs and services that are vital in protecting and improving health.

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If necessary, effective November we will start issuing invoices for any arrears. Thank you in advance for addressing your overdue account.

Please contact me if you have any questions at avickery@hkpr.on.ca or by phone, 1-866-888-4577, extension 1222.

Sincerely

BOARD OF HEALTH FOR THE HALIBURTON, KAWARTHA,
PINE RIDGE DISTRICT HEALTH UNIT



Angela Vickery, CHRL, CPM
Director, Corporate Services

AV/ed

Cc (via email): Hon. Doug Ford, Premier
Hon. Christine Elliott, Deputy Premier and Minister of Health
Hon. Laurie Scott, M.P.P. Haliburton-Kawartha Lakes-Brock
Board of Health for the HKPR District Health Unit
Dr. Lynn Noseworthy, Medical Officer of Health
Carolyn Daynes, City of Kawartha Lakes Treasurer



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1-866-888-4577

November 14, 2019

Jennifer Moore, Chief Administrative Officer, Northumberland County
Mike Rutter, Chief Administrative Officer, County of Haliburton
Ron Taylor, Chief Administrative Officer, City of Kawartha Lakes

by email to:

moorej@northumberlandcounty.ca
mrutter@county.haliburton.on.ca
rtaylor@kawarthalakes.ca

Dear Chief Administrative Officers

Re: 2020 Health Unit Assessment Estimate

At the Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health meeting held on September 19, 2019, the Board of Health was advised that we anticipate requiring a 10% increase over the 2019 allocation from our obligated municipalities for the 2020 cost-shared budget. At the October 17, 2019 Board of Health meeting a request was made that we provide you with a dollar amount for the anticipated 10% increase.

This budget increase for our obligated municipalities is necessary in order to maintain program and service delivery with an anticipated funding reduction of approximately 9.5% in our provincial base funding in 2020 and a change in the cost-shared funding formula for public health from 75% provincial/25% municipal to 70%/30%, which includes mandated programs that the Province previously funded at 100%. Please see attached correspondence from the Minister of Health. This 10% increase to our municipal assessment results in an assessment estimate for 2020 as follows:

Municipality	2020 Assessment	2019 Assessment	% Apportionment
County of Northumberland	\$2,304,271	\$2,094,792	47.88
City of Kawartha Lakes	\$2,045,033	\$1,859,121	42.49
County of Haliburton	\$463,508	\$421,371	9.63

Please contact me if you have any questions.

Sincerely

BOARD OF HEALTH FOR THE HALIBURTON, KAWARTHA,
PINE RIDGE DISTRICT HEALTH UNIT

Angela Vickery, CHRL, CPM
Director, Corporate Services

AV/ed

Copy to: Dr. Lynn Noseworthy, Medical Officer of Health, HKPR District Health Unit

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November 25, 2019

Jennifer Moore, Chief Administrative Officer, Northumberland County
Mike Rutter, Chief Administrative Officer, County of Haliburton
Ron Taylor, Chief Administrative Officer, City of Kawartha Lakes

Via email to:

moorej@northumberlandcounty.ca
mrutter@county.haliburton.on.ca
rtaylor@kawarthalakes.ca

Dear Municipal Partners,

We are writing to you today to make you aware of the dire financial circumstances the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health will be facing in 2020. As our Board of Health is primarily populated by Municipal elected officials, we are acutely aware of the financial pressures our obligated municipalities are facing as they prepare their 2020 budgets knowing that we are asking for a substantial increase in our 2020 municipal levy.

Context

We believe that it will be helpful for you for us to provide some context for this significant increase to our 2020 municipal levy.

On Thursday, April 11, 2019, the Government of Ontario presented its 2019 Budget – Protecting What Matters Most. For Ontario's public health system, the proposals were:

- Adjust the provincial-municipal cost-sharing of public health funding;
- Establish 10 regional public health entities and 10 new regional boards of health with one common governance model by 2020 – 2021; and
- Project annual savings of \$200 million by 2021-2023.

A copy of the Medical Officer of Health's April 18, 2019 Report to the Board of Health is enclosed for your information. (Attachment 1)

In early May, the Ministry of Health and Long-Term Care set up calls with each of the provincial health units to discuss their submitted 2019 Annual Business Plan and Budget Submission, discuss the planned changes for this year and related mitigation opportunities, and ensure this next phase of planning supported their local needs and priorities. During our Health Unit's meeting with Ministry staff, we were verbally advised that the Ministry would be decreasing its grant to the Health Unit by \$1,200,000 for its fiscal year April 1, 2019 – March 31, 2020. To help with our transition costs we were to receive one-time funding of \$800,000. A copy of the Medical Officer of Health's June 18, 2019 Report to the Board of Health is enclosed for your information. (Attachment 2)

On May 27, 2019, the Premier of Ontario held a news conference and announced that the "in-year cuts to public health, child-care and land ambulance will not go ahead. It was not clear whether they would proceed next year;" (CTV (May 27, 2019)). (Attachment 2)

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On May 24, 2019 the Eastern Ontario Wardens' Caucus passed a resolution regarding the "restructuring of public health units, and the serious impact this could have on rural and small urban municipalities" and on May 27, 2019, the Eastern Ontario Mayors' Caucus passed a resolution regarding the "Changes to Public Health". (Attachment 2) A number of meetings were held with representatives of the Eastern Ontario Wardens' Caucus and the Medical Officers of Health for the following health units: Renfrew County & District; Eastern Ontario; Leeds, Grenville and Lanark District; Kingston, Frontenac, Lennox & Addington, Hastings Prince Edward; Peterborough; and Haliburton, Kawartha, Pine Ridge District. (Attachment 2)

On August 20, 2019, the Minister of Health sent correspondence to the Chair of the Board of Health regarding Ministry funding for the 2019/2020 funding year (January 2019-December 2019). A copy of the correspondence is attached. (Attachment 3) In her correspondence, the Minister stated the following:

"In order to support public health unit planning for 2020, municipalities can use a planned funding change to bring the municipal share to 30% for public health programs and services effective as of January 1, 2020. However, to help provide additional stability as municipalities begin to adapt to shifting funding models, our government will also provide one-time mitigation funding to assist all public health units and municipalities to manage this increase while we work to transform the public health system across the province over the next couple of years. While final confirmation of 2020 funding will be provided through the 2020 Budget process, we expect that all municipalities will be protected from any cost increases resulting from this cost-sharing change that exceed 10% of their existing costs."

The September 13, 2019 update (Attachment 4) from the Association of Local Public Health Agencies (aLPHA) included the following information:

"At the recent annual conference of the Association of Municipalities of Ontario (AMO) in Ottawa, Minister of Health Christine Elliott made several important announcements regarding public health modernization. These included the following:

- More time will be given to accommodate changes to the cost-sharing arrangement and changes to 2019 funding models will be paused;
- Starting on January 1, 2020, all municipalities will transition to a 70-30 provincial/municipal cost-sharing funding model. In the first year, no health unit will experience an increase of more than 10 percent of current public health costs as a result of this cost-sharing change;
- A renewed consultation with public health partners and municipalities will be launched on the province's proposed larger regional public health structure approach. This will be in addition to the work being done by already-established technical tables; and
- The consultation will include the release of a discussion paper, which will outline the Ministry's proposals for boundaries for the new regional public health entities, among other aspects."

On October 10, 2019, the Government of Ontario announced that "Jim Pine, Chief Administrative Officer of the County of Hastings and former member of the Board of Directors of the Association of Municipalities of Ontario, will serve as advisor for renewed consultations on strengthening and modernizing public health and emergency health services. Pine will play a key role in facilitating productive discussions between the Ministry of Health and public health, emergency health and municipal stakeholders." The consultations will start in Fall 2019 and are expected to conclude in 2020. (Attachment 5)

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In preparation for these consultations, alPha has developed a Statement of Principles – Public Health Modernization. (Attachment 6)

The Discussion Paper: Public Health Modernization was released on November 18, 2019. (the Discussion Paper can be access [here](#)).

Finally, alPha intends to solicit input from Ontario health units and has developed a Member Feedback document, which includes “Questions for Discussion by Theme”. The deadline for health unit feedback is January 3, 2020 and one response per health unit has been requested. (Attachment 7)

Haliburton, Kawartha, Pine Ridge District Health Unit Information

On August 20, 2019, the Health Unit received information from the Ministry of Health regarding its 2019-2020 Public Health Funding (Attachment 8 -Schedule “A” Grants and Budget - January 1, 2019 to December 31, 2019).

Our 2019 approved allocation from the Ministry is \$13,672,200. The approved allocation includes Mandatory Programs (Cost-Shared) (\$10, 966,900, which was the same allocation as for 2018) as well as 100% funded programs. The provincial Government plans to change the funding formula in 2020 from its current 75% (provincial)/25% (municipal) for cost-shared programs to 70% (provincial)/30% (municipal) for cost-shared programs and most 100% funded programs except the new Ontario Seniors Dental Care Program and a couple of other 100% funded programs.

In 2020, in addition to the \$1,200,000 reduction in base funding from the Ministry of Health, we anticipate financial pressures related to increased costs for insurance, WSIB, leasing and staffing, which we estimate will add an additional \$500,000 to our funding shortfall for a total of \$1,700,000. While we were advised by Ministry staff that we would expect approximately \$800,000 in one-time funding to help with our transition costs, we have received nothing in writing regarding this amount from the Ministry. In the Minister’s letter of August 20, 2019, we were advised that the “final confirmation of 2020 funding will be provided through the 2020 Budget process”. Historically, the earliest we have received Budget approvals has been in May, but usually we receive this information in August and on occasion as late as December in the fiscal year.

The Health Unit has faced funding challenges for a number of years due to funding freezes (2015, 2016, 2017 and 2019) in the provincial share of our cost-shared budget. While we are very appreciative of our municipalities on-going financial support of the Health Unit, with yearly funding increases in the order of 2 - 2.5 % in their portion of our cost-shared budget, the increases have not been sufficient to keep up with annual cost increases to the Health Unit. As a result of our on-going funding shortfalls, we have implemented many strategies including: closing two offices (Brighton and Campbellford); renegotiating our other leases; decreasing our staff complement; restructuring our organization; implementing Continuous Quality Improvement initiatives as well as IT and other technological initiatives; and revising our organizational Program Planning process, which will permit prioritizing initiatives at the intervention level.

Over the summer through some work with neighbouring health units (Peterborough; Eastern Ontario; Leeds, Grenville and Lanark District; Kingston, Frontenac, Lennox & Addington; and Hastings Prince Edward), we confirmed that among these six health units including our Health Unit, ours is the largest geographically, has the third largest population and the second lowest number of staff.

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We know that we are achieving our Ministry targets and doing great work with our partners, including with our obligated municipalities as well as lower-tier municipalities in addition to our local school boards, hospitals, local health care providers, Children's Aid Societies and others. However, the significant reductions in our provincial funding that we anticipate in 2020 will negatively impact our public health programs and services and ultimately the health of the population in our many communities. Unfortunately, the estimated increases in our municipal levies for 2020 will not solve the shortfall with which we are faced.

Recently you received a letter from us requesting a 10% increase in our yearly allocation. This is not something we did lightly, but after careful examination and considering the full range of our services, and the potential negative impacts of reduced public health programs and services on the health of our population, it was our only option. We included a copy of the Minister's 2019 funding letter advising of the funding formula change and that Mandatory Programs previously funded at 100% would now only be funded at 70%. We were also advised that we should seek the additional funds from you our Municipal partners, but that the increases should not be more than 10% over the 2019 levies. (Attachment 3)

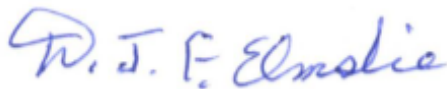
As our only sources of funding are our obligated municipalities and the Province, we find ourselves financially handcuffed, and the result is our request for a 10% increase to meet our mandated requirements.

We will be writing a similar letter to the Province, alpha, and the Eastern Ontario Wardens and Mayors Caucuses, and will send a copy to all appropriate MPPs, outlining our plight and seeking a resolution.

In the meantime, we will continue to provide you, our partners, with the many public health programs and services we are mandated to provide in order to protect and promote the health of our population and prevent disease in the most efficient and cost-effective way we can. We do seek your help and cooperation in providing us with the necessary funding to carry out our mandate. As always, we are open to discussion on this and any related issues and welcome your suggestions or any other help you might provide.

With our very best regards,

BOARD OF HEALTH FOR THE HALIBURTON,
KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT



Doug Elmslie
Chair, Board of Health

DE/aln/ed

CC Board of Health Members



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January 16, 2020

Via email to:

Mike Rutter, Chief Administrative Officer, County of Haliburton
Ron Taylor, Chief Administrative Officer, City of Kawartha Lakes

mrutter@county.haliburton.on.ca
rtaylor@kawarthalakes.ca

Dear Sirs,

As we have heard back from you that your Councils did not approve the requested increase for the Board of Health 2020 Budget, we are writing to explain the next steps.

The Province of Ontario has mandated that the Boards of Health provide a variety of public health programs and services under the [Health Protection and Promotion Act](#) and the [Ontario Public Health Standards, Requirements for Programs, Services and Accountability \(2018\)](#). As we explained in our previous letter to you, some of these programs were funded 100% by the Ministry, at no cost to the partner municipalities. In 2019 Boards of Health were advised (letter attached), that this formula would change for the 2020 budget year. The Boards of Health were mandated to continue to provide these programs but would only be compensated for 70% of the funding; Boards of Health were instructed to recover the missing 30% from partner municipalities.

This change to Provincial funding has left the Board of Health in the difficult position of providing programs and services without adequate funding. That is why we have sought an increase to the municipal levy. If the municipalities have chosen to not pay this increase, they will be shown as being in arrears.

As a result of this conundrum, we will be asking the Ministry for its advice and guidance in resolving this issue. As well, at the forum with Mr. Jim Pine, this issue was raised very strongly by both the attending boards of health and municipalities as being an untenable situation. We will have to wait until the consultations are completed, and the final report is written before we know the outcome.

In the meantime, the Board of Health will continue to provide all of the services it is mandated to perform for our partner municipalities to the high standard you have come to expect.

Best regards,

BOARD OF HEALTH FOR THE HALIBURTON,
KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT

A handwritten signature in blue ink that reads "D. J. F. Elmslie".

Doug Elmslie
Chair, Board of Health

DE/ain/ed

CC: Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health Members

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ATTACHMENT

Ministry of Health

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and Minister of Health

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06pro-2019-01185

AUG 28 2019

Ms. Cammie Jaquays
Chair, Board of Health
Haliburton, Kawartha, Pine Ridge District Health Unit
200 Rose Glen Road
Port Hope ON L1A 3V8

Dear Ms. Jaquays:

The Ontario government is taking a comprehensive approach to modernize Ontario's health care system which includes a coordinated public health sector that is nimble, resilient, efficient, and responsive to the province's evolving health needs and priorities. While the broader health care system undergoes transformation, a clear opportunity has emerged for us to transform and strengthen the role of public health and its connectedness to communities.

As you are aware, the government made the decision to maintain the current cost-sharing arrangements for boards of health for 2019, to provide municipalities with additional time to find efficiencies that will ensure the sustainability of these critical shared public health services.

As a result, the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit will be provided up to \$13,672,200 in base funding and up to \$59,000 in one-time funding for the 2019-20 funding year, to support the provision of public health programs and services in your public health unit. Dr. David Williams, Chief Medical Officer of Health, will write to the Haliburton, Kawartha, Pine Ridge District Health Unit shortly concerning the terms and conditions governing the funding.

While the way in which we are implementing our plan to strengthen public health has changed, the need to do so has not. The current public health structure requires modernization – having 35 independent entities, all with varying capacity, does not facilitate consistent implementation of the core elements of a strong public health system.

Our government has heard that the scale and pace of change is of concern to the public health and municipal sectors. While the modernization of the public health sector remains a priority, the Ministry of Health intends to consult with public health and municipal partners throughout the fall of 2019 to inform the development of Regional Public Health Entities and to ensure that adequate time is provided for thoughtful dialogue and implementation planning.

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Ms. Cammie Jaguszyn

In order to support public health unit planning for 2020, municipalities can use a planned funding change to bring the municipal share to 30% for public health programs and services effective as of January 1, 2020. However, to help provide additional stability as municipalities begin to adapt to shifting funding models, our government will also provide one-time mitigation funding to assist all public health units and municipalities to manage this increase while we work to transform the public health system across the province over the next couple of years. While final confirmation of 2020 funding will be provided through the 2020 Budget process, we expect that all municipalities will be protected from any cost increases resulting from this cost-sharing change that exceed 10% of their existing costs.

We continue to rely on your strong leadership to build a modern and sustainable public health sector. Thank you for the important service that your public health unit provides to Ontarians, and your ongoing dedication and commitment to addressing the public health needs of Ontarians.

Sincerely,



Christine Elliott
Deputy Premier and Minister of Health

c: Dr. Lynn Noseworthy, Medical Officer of Health, Haliburton, Kawartha, Pine Ridge District Health Unit