

Public Health

2024–2027 Business Plan
and 2024 Budget

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Executive Summary

Mission: To keep people healthy and reduce their risk of becoming ill. Core public health functions are assessment and surveillance, health promotion and healthy policy development, health protection, disease prevention, and emergency management.

Services we provide:

- Population health assessment and surveillance
- Infectious disease prevention, management and immunization
- Chronic disease and injury prevention
- Promotion of children’s healthy growth and development
- Protection from environmental health hazards and other health risks
- Community safety and well-being planning and support

Interesting facts about this service:

- Peel Public Health service delivery is provincially and regionally mandated. The service is cost shared with the Province. However, Provincial per-capita funding for Peel continues to be low, despite a rapidly growing and diverse population.
- Peel’s active tuberculosis rates have consistently been two times higher than the province.
- Climate change impacts will worsen health inequities through pathways such as increased heat events, poor air quality, extreme weather, vector-borne illnesses, and food and water contamination.
- Demand for Peel Public Health inspections has increased due to population growth and the accompanying increased number of food premises, recreational water premises and childcare centres, including a 12 per cent increase in the number of food premises from 2017 to 2022.
- Recovery and remobilization post COVID-19 pandemic is underway and will continue into 2024, with a gradual approach that mitigates challenges related to recruitment and retention, employee well-being, changing service needs and partner readiness.

Highlights of the Business Plan include:

- Continuing to remobilize the remaining mandated programs and services that were paused or scaled down during the pandemic.
- Transforming components of the COVID-19 response into sustainable operations through key changes such as integrating COVID-19 outbreak management and COVID-19 immunization into Public Health’s programming, including the new Immunization Services Division.
- Continuing to promote and support employee psychological health and safety with the end goals of improving employee well-being, increasing employee retention, and enhancing the capacity of the workforce as it recovers from pandemic-related impacts.
- Advancing the 2020-2029 Peel Public Health priorities: practicing effective public health; enabling active living and healthy eating; promoting mental well-being; reducing health-related impacts of climate change; and advancing health equity.
- Continuing to expand the reach of Peel’s Community Safety and Well-being Plan as mandated by provincial legislation.

Net Investment (\$000s)	2024	2025	2026	2027
Operating	40,091	42,488	44,672	47,494
Capital	350	2,350	550	1,300
Full Time Equivalents (FTE)*	734.1	734.1	734.1	734.1

*FTE and investment projections do not account for population growth

Core Services

Vision, Mission, Goals of Service and Service Delivery Model

Vision

Supporting people in Peel in living their healthiest possible life and contributing to the community with public health programs that are dynamic, inclusive and equitable.

Mission

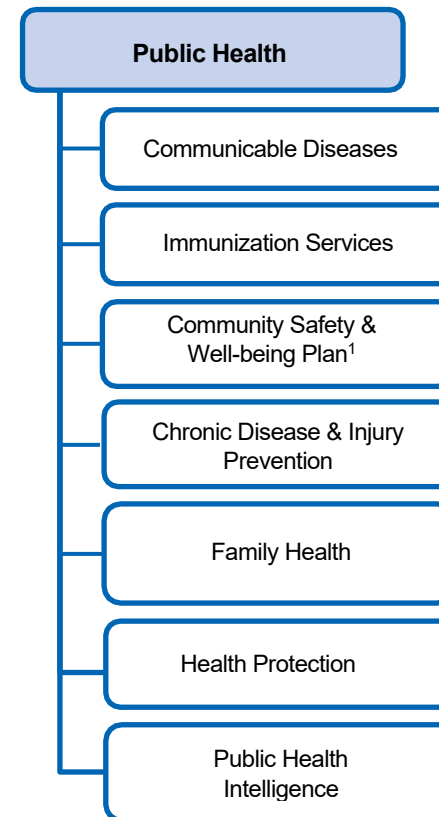
To keep people healthy and reduce their risk of becoming ill. Core public health functions are assessment and surveillance, health promotion and healthy policy development, health protection, disease prevention and emergency management.

Goals of Service

1. Complete the transition of COVID-19 emergency operations and vaccination efforts into sustainable operations to support the prevention and control of COVID-19 for 2024 onwards.
2. Continue the remobilization of mandated programs and services that were paused or significantly scaled down during the pandemic.
3. Continue to promote and support employees' psychological health and safety to increase retention, employee engagement and workforce capacity.
4. Continue to advance the approved 2020-2029 Peel Public Health Strategic Plan priorities: practicing effective public health; enabling active living and healthy eating; promoting mental well-being; reducing health-related impacts of climate change; and advancing health equity.

5. Through Health Services' Strategic Policy and Performance Division, continue implementation of Peel's Community Safety and Well-being Plan (2020-2024) to set the stage for renewal of the Plan in 2025. The Plan is a roadmap to make Peel a safer, more inclusive and connected community where all residents thrive.

Service Delivery Model



¹Peel's Community Safety & Well-being Plan is led by the Health Services Department's Strategic Policy and Planning Division and appears under the Peel Public Health organizational structure for budgeting purposes.

Service Levels and Trends

Service Levels

Public health service levels are provincially mandated through the *Health Protection and Promotion Act*, and include the following:

The Ontario Public Health Standards and Provincial Public Health Accountability Framework sets out the provincial requirements for all public health programs and services. The following are some of the ways in which Peel Public Health works to make communities healthier:

- Preventing chronic diseases and creating supportive environments where healthy behaviours are an easy choice.
- Protecting individuals from negative health impacts of substance use through harm reduction programs and tobacco and cannabis policies.
- Protecting the community through inspections of food, drinking and recreational water, personal service settings and tobacco and vaping vendors.
- Improving oral health among children and senior residents.
- Promoting children’s mental and physical development from birth to school years.
- Assessing population health needs and enhancing Peel Public Health emergency management planning.
- Protecting the community from contagious and potentially fatal diseases.

Peel Public Health 2020-2029 Strategic Plan: The Ontario Public Health Standards require Boards of Health to identify their priorities through a multi-year strategic plan. Building on the Region of Peel’s Community for Life plan, the 2020-2029 Peel Public Health Strategic Plan was approved on October 24, 2019, with the following priorities:

- Practicing Effective Public Health;
- Enabling Active Living and Healthy Eating;
- Promoting Mental Well-being;
- Reducing Health-Related Impacts of Climate Change; and
- Advancing Health Equity.

Community Safety and Well-being Plan: As legislated by the Ministry of the Solicitor General, municipalities must prepare and adopt a Community Safety and Well-being Plan, guided by the Ministry’s Community Safety and Well-being Planning Framework. For Peel, the Health Services Department’s Strategic Policy and Performance Division leads this work. In October 2020, Regional Council adopted Peel’s Community Safety and Well-being Plan (2020-2024), which sets out how partners across different sectors can work together to make Peel a safer, more inclusive and connected community where all residents thrive, with a focus on family violence, mental health and addictions and systemic discrimination. During 2024, the plan will undergo a refresh and renewal, to identify community priorities for the next four years (2025 to 2029).

Trends

Growing Population Needs

A strong local public health service is needed to address the public health needs for a diverse growing population, continue post-pandemic recovery, and keep the Peel community healthy. With an anticipated future growth in Peel to 2.28 million residents by 2051, the pressure to meet these growing public health needs will continue.

Some examples include impacts to communicable diseases and health protection programs and services. Due to population growth and the rising global burden of tuberculosis, Peel continues to experience increased cases, without parallel enhancement in program capacity. For health protection, there is an increased demand for Peel Public Health inspections due to population growth and the accompanying increased number of food premises, recreational water premises and childcare centres. There is also significant non-compliance with the Waterpipe Smoking By-law and increasing challenges with vaping in Peel schools.



Provincial Underfunding

The impact to Peel concerning the Province's August 2023 Strengthening Public Health in Ontario announcement remains unclear. Commencing in 2024, the Ministry of Health will provide an annual one per cent funding increase prorated over the next three years, until a longer-term funding agreement is developed. Of concern is that the inflationary costs exceed the proposed annual one per cent funding increase over the next three years.

Peel Public Health has consistently been underfunded by the Province and is one of the lowest per capita funded health units in Ontario. Provincial funding has remained almost stagnant since 2018, representing a deficit of almost \$10 million, excluding

temporary COVID-19 funding. This has resulted in a workforce strained to deliver mandatory services for increasing population health needs. Although Peel Public Health is continuously finding and employing efficiencies to address this concern, adequate, predictable, and sustainable funding is necessary to support the successful rebuilding and remobilization of a strong public health service.

Remobilization of Peel Programs and Services

Remobilization of Peel Public Health programs and services that were paused or scaled down to respond to COVID-19 is expected to continue until the end of 2024, with further stabilization expected in future years. Remobilization efforts continue to be impacted by recruitment and retention challenges, including high turnover in temporary contracts, retirements, extended sick leaves and the competitive labour market for employees throughout the health sector. This has resulted in significant vacancies at all levels, including senior leadership, and requires resources to hire, train and onboard a rapidly changing workforce.

Additionally, the COVID-19 pandemic increased community need for some Peel Public Health services. For example, there has been an increase in home-based food businesses and special events in the evenings and on weekends which require food or personal services inspections. Finally, Peel's community partners have experienced significant organizational change themselves, and need to follow steps to rebuild their capacity to resume programming.

Supporting Employee Well-Being

The extensive demands and unpredictability of the pandemic had many negative effects on our workforce's well-being, due in part to the prolonged response, high workload, recruitment and retention challenges, and public harassment. These factors have contributed to a workforce that is reporting compassion fatigue, burnout, stress, anxiety, and exhaustion. Evidence shows that leaders are key champions and critical resources for enabling positive workplace

culture and employee well-being. By focusing on developing leadership capacity and resources, we will meet our departmental goal of having effective, inclusive, and compassionate leaders. A continued focus on, and resourcing for, leadership development and workforce well-being will be needed in the years ahead.

Sustainability of COVID-19 Operations

Peel Public Health has dismantled the temporary organizational structure, originally set up to respond to COVID-19, and will continue to transition the remaining COVID-19 activities towards sustainable operations consistent with Provincial mandates. This work involves implementing key changes, including integrating COVID-19 and outbreak management into the regular operation of communicable diseases and integrating all vaccination programs through the new Immunization Services Division. While short term funding for COVID-19 costs have been covered through the Region of Peel's COVID-19 Recovery Reserve created in 2021, and has been approved for use in 2024, it remains unclear as to how the Province plans to integrate COVID-19 related operational costs into long-term funding.

Reducing Health-Related Impacts of Climate Change

Our changing climate is impacting human health and, of particular concern, is disproportionately impacting vulnerable populations by increasing temperature-related morbidity and mortality, negatively impacting air quality, increasing the risk of injury and loss of life from extreme weather, increasing the risk of illness through food and water contamination, as well as vector-borne disease, and increasing stress and harming mental health. Additional resources are needed to help mitigate potential health-specific impacts by developing programming and urgent response plans to increase the resiliency of the community and address health equity.

Health Inequities across Peel Communities

The pandemic put a spotlight on community inequities in Peel and the lived experiences of marginalized individuals and groups across Peel neighbourhoods – often referred to as “hotspots” during the pandemic. The impact of the pandemic in Peel clearly demonstrates that new commitments and initiatives are required to drive health equity outcomes forward. Efforts must now focus on dismantling the systems of power and oppression that remain in place and that reinforce unfair, unjust, and inequitable treatment, access to services and the overall health and well-being of people. Deepening our knowledge of local health inequities, co-designing approaches around local needs and furthering reciprocal relationships that share power with local community and systems partners is needed.

Mental Health, Healthy Eating and Active Living Disruptions

The COVID-19 pandemic disrupted daily life in different ways. To varying degrees, many people experienced increased exposure to risk factors that deteriorated mental well-being (e.g., substance use, isolation, lack of available services) and limited or decreased opportunities to engage in health promoting behaviours (e.g., outdoor physical activity, access to healthy food, social activities).

Mental health promotion continues to be a priority for Peel Public Health. During the 2022/2023 school year, the School Health Teams offered two mental health promotion programs: the Playground Activity Leaders in Schools Program, and the Yes 4 Mental Health Program. The number of schools participating in each of these programs increased between the 2019/20 and 2022/23 school years. For the Playground Activity Leaders in Schools Program, the number of schools participating increased from 79 in 2019/20 to 205 in 2022/23 and the number participating in the Yes 4 Mental Health Program increased from 15 to 32 during that same time frame. In 2024, Peel Public Health will restart work on its Strategic Priorities, including the strategic priority of Promoting Mental Well-being in the Community.

Performance Measures and Results

The Region of Peel is committed to delivering services economically and efficiently. The Region’s performance measures are used to help assess how well we are doing at achieving our goals and where we need to improve operations. The results also inform decision-making and strengthen accountability.

Quintuple Aim Framework: The performance measures utilized by Peel Public Health are well-aligned with the “Quintuple Aim” framework adopted by Health Services (as shown in Figure 1). Public Health strives towards the simultaneous focus on advancing health equity, enhancing client and resident experience, improving population health, enhancing employee experience, and improving value of care.

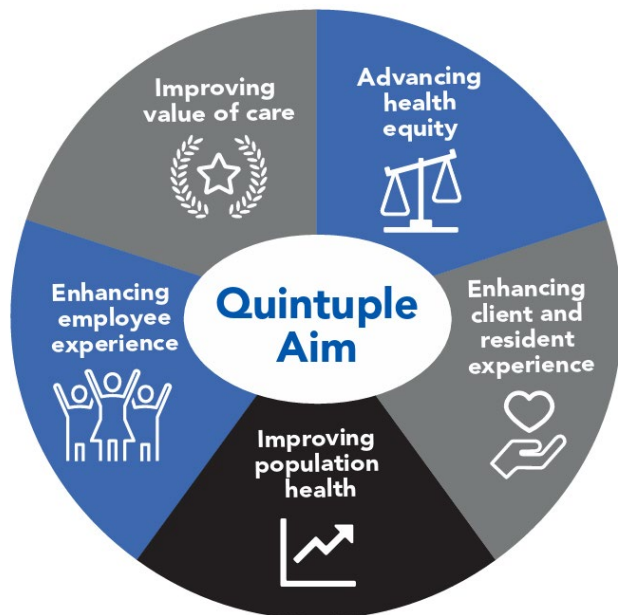


Figure 1: Quintuple Aim

The Quintuple Aim provides a framework for addressing system-level challenges as we advance healthcare in Peel Region. This model expands on the previous Quadruple Aim framework with the addition of a fifth aim for health equity. This is intentional and in recognition that without an explicit aim for health equity we will miss the opportunity to build equity into all we do and how we work. At Peel, this means that health services, experiences and systems are equitable, just and work for everyone; no one is left out or behind regardless of social position or other socially determined circumstances. Our division strives towards the simultaneous pursuit of all five aims in the work we do.

Peel Public Health, in partnership with others in Health Services, is exploring avenues to incorporate health equity in the performance measurement framework. Capturing and reviewing data that illustrates the sociodemographic characteristics of our community and those accessing services will help highlight groups that may be experiencing inequities. This will be essential to designing targeted interventions and improve how we are providing community and pre-hospital care to Peel’s diverse population.

Business Process Measures: There are several measures of health outcomes related to health protection and direct service delivery in Peel reported on the Region’s Community for Life dashboard, including:

Number of children and seniors who received dental care: It measures how many individuals received preventative services for dental conditions. The goal is to reduce risk of chronic diseases and other oral health conditions (e.g., tooth decay, pain, etc.) by reducing inequalities in access to dental care. For the 2022/2023 school year, a total of 74,187 children were screened for dental issues, of which approximately 8,300 children were identified as having an urgent dental condition. In 2022, over 7,637 low-income seniors received free emergency or routine dental care.

Number of Healthy Babies Healthy Children home visits: It measures the amount of service provided to Peel families to nurture children's growth and development and reduce health inequities for families. The goal is to provide support to at-risk families with children 0 to 6 to support them to ensure the best possible start in life. In responding to the pandemic, the program pivoted to a virtual visit model, with 9,502 virtual visits completed from April 2020 to February 2023, after which the Healthy Babies Healthy Children Program was able to remobilize its home visiting service.

Percentage of high-risk food premises receiving inspections: The goal is to help protect the public against foodborne illness. In 2022, Peel Public Health inspected 96.5 per cent of high-risk food premises at least once. This includes both general high-risk food premises and high-risk institutional settings. Of the high-risk institutional settings, 100 per cent of these premises had at least one inspection.

Number of vaccine doses administered through Peel Public Health: Peel's Public Health clinics support vaccine coverage, which is important for infection prevention in the community. The goal is to attain an adequate level of coverage based on population needs. Since December 2020, through the mass vaccination program, Peel Public Health provided leadership and oversight for the delivery of over 3.7 million doses of the COVID-19 vaccine to eligible residents and directly delivered over 1.5 million doses. Routine school-based immunizations, which were paused during the COVID-19 pandemic restarted in March 2022. During the 2022/2023 school year, over 83,000 vaccines were administered by school and community clinics, including vaccines for Human Papillomavirus (HPV), Hepatitis B, and Meningococcal.



Number of infectious disease cases managed: The goal is to protect Peel residents from immediate risk of infectious diseases and outbreaks, preventing further spread. In 2022, Peel Public Health monitored and, per Provincial guidelines, managed over 9,900 confirmed cases of reportable infectious diseases excluding COVID-19.

Financial Measures: the Ontario Public Health Standards mandate Peel Public Health to provide annual service budget plans, quarterly financial reports, and year-end attestations to the Ministry. These reports detail standard financial and program service indicators across public health units in Ontario.

Supporting Employee Well-Being: to address mental health and well-being, particularly for employees who work in high stress and trauma-exposed work environments, various tailored initiatives were implemented to support leadership capacity building and employee well-being. These initiatives included the establishment of a Health Services Culture and Well-being Community of Practice; procurement of resources and services from experts in health care workplace and workforce well-being (e.g., TEND Academy and the Canadian Mental Health Association); dedicated debriefing sessions for our leadership to develop their capacity to facilitate and participate in challenging conversations about mental well-being and inclusive workplace culture; and mentoring and coaching opportunities across all levels of leadership to create safe spaces for our leaders to grow and receive timely feedback.

Awards and Achievements

Awards

Peel Public Health employees were recognized in three award categories as part of **Peel Celebrates**, the Region's annual employee awards program:

- **CAO Award for Excellence: Mass Vaccination Program Team**, who worked with internal and external partners, actively problem-solving and constantly pivoting operations to administer over 3.7 million COVID-19 vaccine doses in Peel.
- **Health Services Commissioner's Values in Action Award: Vaccine Management Team**, who provided adaptable leadership to ensure that vaccine operations ran effectively and efficiently.
- **Community for Life Award: The Black, African, Caribbean Communities Core Team**, who worked tirelessly to build trust and provide backbone support to the needs of communities who have been disproportionately impacted by COVID-19. Black, African and Caribbean-focused clinics, co-designed with community partners, delivered over 16,500 COVID-19 vaccines and provided supportive environments where community members felt safe and connected to their communities and cultures.

Achievements

COVID-19 Response

In addition to mass vaccination, Peel Public Health achieved significant service milestones during the COVID-19 pandemic:

- Monitored and, per Provincial guidelines, managed over 208,000 confirmed and probable COVID-19 and over 2,000 confirmed outbreaks in institutional and community-based settings.

- Answered more than 510,000 calls from residents and businesses concerning the COVID-19 virus, outbreaks and vaccinations.
- Conducted over 13,500 health inspections for COVID-19 and routine operations in restaurants, personal service settings, recreational water facilities and other public spaces (March 2020 - March 2022).

Recovery and Remobilization

By the end of 2023, 70 per cent of programs are projected to be remobilized, including:

- For the 2022/2023 school year, more than 74,000 dental screenings were completed, of which 8,300 children were identified with urgent dental conditions requiring treatment.
- Despite a 38 per cent increase in personal service settings, 98 per cent of high-risk personal service setting inspections were completed in 2022.
- Peel Public Health was the first public health unit in Ontario to restart *Immunization Schools Pupils Act (ISPA)* screening. For the 2022/2023 school year, 184,111 letters were sent to parents of children in prioritized grades to increase routine childhood vaccine coverage, resulting in school and community clinics administering 88,076 routine school immunization doses.
- The Healthy Babies Healthy Children program, which promotes healthy growth and development of newborns and young children, had over 90 per cent of its' workforce redeployed during the pandemic (2020-2022). After completing 641 virtual visits during 2022, home visits resumed in February 2023 with over 1,190 completed by the end of June and a target of over 2,800 to be completed by year-end 2023.

Supporting Employee Well-being

- In 2023, 124 leaders across Public Health will have participated in a two-day Inclusive Leader training program to learn about and address the impact of bias, harassment and other barriers to a positive workplace environment.
- Over 150 supervisors participate in a Community of Practice to support their learning and sharing, given the large number of new leaders at this level.
- More than 50 Employee Ambassadors were recruited to promote and share diversity, equity and inclusion programs, policies, events and other team-level activities.
- Public Health's leadership in employee well-being has supported the creation of a provincial Community of Practice to share resources and approaches to implementing trauma-informed and psychological health and safety practices for healthcare workers in public health settings.

Supervised Consumption Services

- Peel is facing a drug toxicity crisis, with 682 drug-related deaths in the last five years (2018-2022). Opioid toxicity deaths increased by 68 per cent from 2018 to 2021. They returned to pre-pandemic levels in 2022 and remain elevated, with over 100 people dying in 2022. These deaths primarily impact adults aged 25-44 who are alone at the time of overdose. Responding to drug toxicity related harms is a top priority for Peel Public Health and community partners. As part of a harm reduction approach, supervised consumption services are low-threshold health care services that prevent overdoses by allowing drug use under the supervision of staff trained in overdose response.

- In July 2023, Regional Council as the Board of Health reaffirmed support for Peel's first interim Supervised Consumption Services. Funding of \$5.8 million for up to two years for the interim site was unanimously approved by Regional Council in July 2022. The site is anticipated to open by end of 2023 and will be operated by Moyo Health and Community Services, with WellFort Community Health Services as the clinical lead. Regional funding for the site serves as a bridge for the provincial funding model for Consumption and Treatment Services.

Community Safety and Well-Being

Collective implementation of Peel's Community Safety and Well-being Plan continued through 2022 and 2023, including:

- In November 2022, Peel Region launched its third annual Family and Intimate Partner Violence campaign to increase public and bystander awareness and encourage residents to start the conversation about gender-based violence. The 'Break the Silence' campaign generated over 10 million impressions across bus, shelter, billboards and social media channels.
- Using 2022 seed funding, partners designed a clinical model and business case for an innovative 24/7 Crisis Walk-in in Brampton and Mississauga which will make it easier for people experiencing mental health or addictions crisis to get care. A Disaggregated Workforce Assessment Tool (DWAT) was developed to support organizations to collect workforce sociodemographic data and improve equity and inclusion in their workplaces.

The 2024 - 2027 Business Plan Outlook

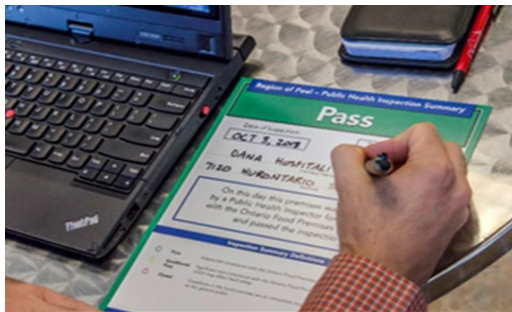
Planning for the Future

Addressing Capacity Needs in Critical Areas

Peel's active tuberculosis rates have consistently been two times higher than the province. The absolute number of cases has increased over time due to population growth, while Peel's incidence rates of active tuberculosis remained stable. Increasing tuberculosis program capacity will help prevent transmission in the community.

With population growth, and the accompanying increase in the number of food premises, recreational water premises and childcare centres, there is an increased demand for Peel Public Health inspections. Expanding inspection capacity will allow Peel Public Health to respond to the increased number of public complaints and inspection requirements of food premises, water and other facilities requiring inspections.

The impacts of climate change will worsen health inequities through pathways such as increased heat events, poor air quality, extreme weather, vector-borne illnesses, and food and water contamination. Public Health requires additional capacity to address health impacts of climate change and reduce risk to Peel residents' health and well-being.



Recovery and Remobilization

Peel Public Health's post COVID-19 recovery and remobilization will continue into 2024, with a gradual and flexible approach that mitigates, where possible, challenges related to recruitment and retention, employee well-being, changing service needs and partner readiness. By the end of 2023, 70 per cent of Peel Public Health's programs will be remobilized, with the remainder remobilizing by end of 2024. This is consistent with well-documented emergency management evidence indicating that the recovery and rebuilding following an emergency response will take as long, if not longer, than the actual response.

In addition, many program plans are being updated to reflect community changes and lessons learned post-COVID-19. The pausing and scaling back of public health programs and services was necessary to enable the COVID-19 response. While necessary, the full impact of reduced service levels due to the COVID-19 pandemic is not yet known.

Efforts are ongoing to support the continuity of COVID-19 operations. This includes the ongoing integration of provincially mandated components of the COVID-19 response, such as outbreak management and immunization, into Peel Public Health's programming alongside other communicable diseases.

Initiatives are also ongoing with Human Resources and other health system partners to create a robust Health Human Resources strategy, which will reduce hiring and retention challenges, as well as mitigate risk for future emergency planning. This will include hiring additional contract employees and leaders to support workload, vacation and leaves, and onboarding demands while Health Services recovers and rebuilds from pandemic-related impacts.

Supporting Employee Well-being

Capacity building for leaders and employee engagement activities will continue to be needed to address residual and emerging well-being needs from the impact of the pandemic response and the uncertainty related to the Peel's governance transition. We will build on the lessons learned from the last few years and look at the opportunities ahead – this will require a continued focus on and resourcing for leadership development and workforce well-being.

2020-2029 Peel Public Health Strategic Plan

Remobilization work also includes plans to refocus and resume work on the 2020-2029 Peel Public Health Strategic Plan, endorsed by Regional Council on October 24, 2019. The five priorities identified in the Strategic Plan are: practicing effective public health, enabling active living and healthy eating, promoting mental well-being, reducing health-related impacts of climate change and advancing health equity.

In 2023, Peel Public Health completed an assessment of progress to date, identified community interventions to be prioritized and focused on planning and rebuilding partnerships. Work is expected to continue in 2024 and onwards.

System Partnerships and Equity

Health equity was identified as a strategic area of importance across Health Services, acknowledging key work to be done to meaningfully embed health equity approaches across the department. This work requires deepening relationships with communities and the institutions within those communities to build trust. Working collaboratively will promote a deeper understanding of the lived experiences of communities, and the intersections between those communities, and allow inequities to be exposed and solutions to be co-designed. Intentional collaboration is required to build relationships and ensure internal processes support flexible, community-driven approaches to improving health outcomes.

In addition, the Community Safety and Well-being Plan is founded on the understanding that “quick fixes” will not address the systemic discrimination, barriers and other root causes which undermine community safety and well-being. Priority must continue to be placed on building and sustaining effective cross-sectoral partnerships such as those built with Community Safety and Well-being partners and community organizations during the pandemic to create system alignment and improvements that will address inequities and improve community well-being.

Finding Efficiencies

Continuous Improvement

The objective of the Region's Continuous Improvement Program is to optimize service delivery and maximize value for tax dollars spent. The completion of continuous improvement initiatives positively impacts client experience, employee engagement, cost savings and cost avoidance.

Given historical Provincial underfunding, Peel Public Health has a history of cautiously balancing the requirements of service delivery planning with the need to maintain capacity to flexibly respond to community needs. Services have been further strained during the pandemic.

The following continuous improvement initiatives were identified during the early stages of remobilization of programs that had either paused or scaled back during the pandemic:

- Revising procedures to minimize on-site visits regarding low-risk animal exposure investigations, reducing time and mileage costs on these investigations
- Digitizing COVID-19 laboratory records and files to eliminate the need to store paper files, resulting in cost savings

In addition, as part of the integration of vaccination programs into a new Immunization Services Division, various continuous improvement initiatives have been identified including:

- Re-structuring and realigning workforce, resulting in a 50 per cent reduction of the workforce by January 1, 2024, and anticipated continued refinement aligned to the evolving immunization needs in community
- Consolidating and streamlining functions, roles, and responsibilities in the inventory management and transport of vaccines and supplies, reducing the dependency on vendors and associated costs
- Improving client experience at vaccination clinics through efficiencies such as the streamlining of registration and administration, enhancing/automating the consent review process and the introduction of measures to reduce the risks of medical errors
- Continuing to work in partnership with all health system and community partners to enhance and ensure access to vaccination aligned to health equity principles

Transforming Our Business with Technology

Technology plays a critical role in the delivery of programs and services offered by Peel Public Health. By upgrading existing technology systems and bringing new software online, Peel Public Health will enable service delivery improvement and focus on increasing efficiencies for internal processes and for residents.

Leveraging Technology to Improve Service Delivery:

Service Transformation: Peel Public Health's public website underwent revitalization to better meet and support our community's needs. Customer services will be improved by replacing printable forms with web forms that can be submitted electronically. Additionally, work will continue on a provincially led initiative to replace the provincial surveillance system for infectious diseases with a cloud-based solution.

Online Vaccine and Medication Order Project: Introduced in 2023, an online vaccine and medication portal provides a 'one stop shop' for community partners to place an online vaccine order for COVID-19 vaccines. Project enhancements will facilitate the ordering of other routine vaccines and in turn, build efficiencies with the ordering process, to allow facilities to receive orders in a timely manner and to provide excellent customer service.

Electronic Medical Records: The use of Electronic Medical Records is expected to improve efficiency in the capture and management of client and service delivery while ensuring that legislative requirements for access, security and privacy are met.

Electronic Medical Records are also anticipated to provide added functions such as: eliminating duplicate charts across health clinics; facilitating client self-scheduling and proactive appointment alerts; increasing compliance with college-mandated client charting standards; providing point-of-sale and inventory management; capturing and facilitating billing; and providing detailed reporting and analytics. Electronic Medical Records will help to increase Peel Public Health's capacity for data collection, analysis and reporting to enhance communications, provide another channel for surveillance, and facilitate performance management and program evaluations for improvement.

Proposed Operating Budget

This part of the Business Plan sets out the financial resources required to deliver the proposed 2024-2027 Business Plan. Information is provided by major expenditures and revenue. The costs to maintain existing service levels and operationalize prior decisions are identified in the base budget changes separately from proposed changes. The net cost for the service in 2023 was \$37.8 million and the proposed budget for 2024 is \$40.1 million.

Net Expenditures: \$40.1 million (Total Expenditures: \$134.3 million)

Description \$'000	2022 Actuals	2023 Approved Budget	2024 Proposed Budget	\$ Change Over 2023	% Change Over 2023
Operating Costs	17,347	9,616	10,337	721	7.5%
Labour Costs	115,575	111,742	94,082	(17,660)	(15.8)%
Reserve Contributions	271	271	271	-	-
Debt Charges	-	-	-	-	-
Grant Payments	10,106	8,150	10,470	2,320	28.5%
Facility, IT, HR and other support costs	22,528	23,089	23,369	280	1.2%
Recoveries	(3,622)	(4,040)	(4,271)	(231)	5.7%
Total Expenditures	162,205	148,829	134,259	(14,570)	(9.8)%
Grants and Subsidies	(124,172)	(67,566)	(72,100)	(4,534)	6.7%
Supplementary Taxes	-	-	-	-	-
Fees and Services Charges	(780)	(906)	(906)	-	-
Transfer from Development Charges	-	-	-	-	-
Contributions from Reserves	-	(42,570)	(21,161)	21,409	(50.3)%
Total Revenues	(124,952)	(111,043)	(94,168)	16,875	(15.2)%
Total Net Expenditure	\$37,252	\$37,786	\$40,091	\$2,305	6.1%

Note: May not add up due to rounding

2024 Operating Budget Pressures

\$'000	Total Expenditures	Total Revenue	Net Cost 2024 vs 2023	
2023 Revised Cost of Service	148,829	111,043	37,786	%
Cost of Living/Inflation				
Labour costs	2,805	-	2,805	
Goods and Services	344	-	344	
Cost of Living/Inflation				
Increase in Provincial funding	1,697	2,790	(1,093)	
Other Pressures¹	697	697	-	
Cost Mitigation²	(608)	-	(608)	
Base Budget Changes Subtotal	4,935	3,487	1,448	
Service Level Demand³				
Three permanent and two contract staff - Tuberculosis Program Capacity Building (BR #1)	543	194	350	
One permanent and two contract staff - Reduce the Health Impacts of Climate Change (BR #2)	371	229	143	
Three permanent and three contract staff - Enhanced Inspection Capacity (BR #3)	659	294	365	
Reduction in contract positions to respond to COVID-19 funded by reserve (2023-500)	(21,079)	(21,079)	-	
Service Level Changes Subtotal	(19,505)	(20,363)	858	
Total 2024 Budget Change	(14,570)	(16,876)	2,305	
2024 Proposed Budget	\$134,259	94,167	40,091	6.1%

Note: May not add up due to rounding

Operating budget pressure notes:

Other Pressures¹

- Building Safer Communities, 100% externally funded \$1,831 thousand.
- Supervised Consumption Services decrease due to one-time costs for set up, reduction of \$764 thousand.
- Rat Control Subsidy Program under review, 100% reserve funded in 2023, holding of \$283 thousand.
- Locally Driven Collaborative Projects ending, 100% externally funded, reduction of \$87 thousand.

Cost Mitigation²

- Peel Public Health Clinic moving from 150 Central Park Drive, Brampton to 10 Peel Centre Drive, Brampton \$208 thousand
- Line by line efficiencies \$400 thousand

Service Level Demand³

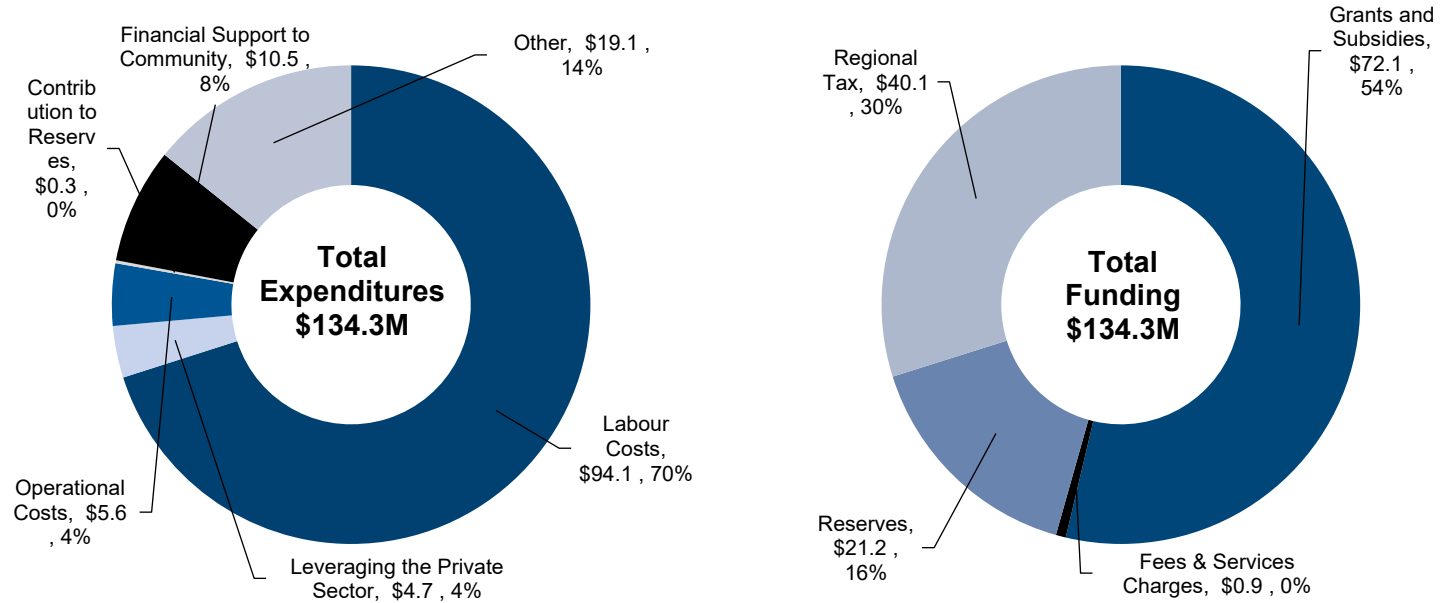
- Budget Request # 1 - Request three permanent full-time and two contract staff for Tuberculosis Program Capacity Building.
- Budget Request # 2 - Request one permanent full-time and two contract staff to Reduce the Health Impacts of Climate Change.
- Budget Request # 3 - Request three permanent full-time and three contract staff to Enhance Inspection Capacity.
- Reduction in contract positions to respond to COVID-19 - funded from Tax Stabilization reserve (Council Resolution #2023-500).

Staffing Resources to Achieve Level of Service

Sub Service	2023	2024	2025	2026	2027
Communicable Diseases	112.7	115.7	115.7	115.7	115.7
Immunization Services	96.0	96.0	96.0	96.0	96.0
Community Safety & Well-being	10.2	10.2	10.2	10.2	10.2
Chronic Disease & Injury Prevention	202.6	202.6	202.6	202.6	202.6
Family Health	154.7	154.7	154.7	154.7	154.7
Health Protection	98.9	101.9	101.9	101.9	101.9
Public Health Intelligence	52.0	53.0	53.0	53.0	53.0
Total	727.1	734.1	734.1	734.1	734.1

Note: Staffing resources are regular positions (Full Time Equivalent, FTE). FTE projections do not account for current Peel population growth and additional population growth from Bill 23 (*More Homes Built Faster Act*).

2024 Total Expenditures & Funding Source (In \$M)



2024 Budget Risks

- Risk of provincial changes to Peel Public Health funding
- Risk of no sustainable provincial COVID-19 response funding
- Provincial funding does not account for population growth

2025 - 2027 Operating Forecast

	Budget			Forecast					
	2023	2024		2025		2026		2027	
	\$'000	\$'000	%	\$'000	%	\$'000	%	\$'000	%
Total Expenditure	148,829	134,259	(9.8)%	127,972	(4.7)%	126,010	(1.5)%	128,232	1.8%
Total Revenue	(111,043)	(94,168)	(15.2)%	(85,483)	(9.2)%	(81,338)	(4.8)%	(80,738)	(0.7)%
Net Expenditure	37,786	40,091	6.1%	42,488	6.0%	44,672	5.1%	47,494	6.3%

Note: May not add up due to rounding

- Forecast years' increases are related to maintaining base services.
- 2025 forecast decreases as a result of 225.5 temporary full-time staff whose contracts are expected to end in 2024 for the COVID-19 response (Council Resolution #2023-500)
- 2025 forecast decrease as a result of seven temporary full-time staff whose contracts are expected to end in 2024 for the Tuberculosis Program Capacity, Enhanced Peel Public Health Inspection Capacity and Reduce the Health Impacts of Climate (2024 Budget Requests)
- 2026 forecast decreases as a result of the Supervised Consumption Services in Peel is expected to be full funded by Public Safety Canada (Council Resolution #2022-693)
- Based funding increases 1% each year 2024, 2025 and 2026, no announcement for 2027 therefore assumed same funding as 2026 at this time

Proposed Capital Budget

Capital Budget: \$0.4 million (Ten Year Plan: \$11.7 million)

2024 Capital Budget Overview

The following table provides a summary of Peel Public Health’s planned capital project activity for 2024, including funding sources for both new capital project requests in 2024 and projects carried forward to 2024.

Capital Plan By Funding Source	Carry-forward from Prior Years (WIP) (\$'000)	2024 Capital Budget (\$'000)	Total Capital in 2024 (\$'000)
DC Growth	-	-	-
Externally Funded	5,615	-	5,615
Non-DC Internal	1,425	350	1,775
Total Expenditures	7,040	350	7,390
# of Projects	7	2	9

Existing Capital Projects - \$7.0M

- \$4.2M Peel Public Health Ontario Seniors Dental Care Program Clinic new operatories in progress; East Mississauga, Mississauga Central, Mississauga West and Brampton West (four facilities)
- \$1.4M Mobile Dental Clinic is for Ontario Seniors Dental Care Program funded by Ministry of Health was delayed in 2020 due to COVID-19; work started but was not completed by March 31, 2022. Budget increased \$515K funded through internal services
- \$1.2M Electronic Medical Records is on-going in the implementation phase
- \$0.2M Peel Public Health Information Management Improvements; decommissioning of Two-Tier Electronic Documentation (TTED) and implementation of Salesforce Lighting funded by Peel Public Health and Information Technology

2024 Capital Budget - \$0.4M

Key Highlights:

- \$0.3M Peel Public Health Information Management Improvements
- \$0.1M Peel Public Health clinics and facilities for leasehold Improvements

See Appendix I for details.

2024 Budget Risks

None

Operating Impact of 2024 Capital Budget

None

Proposed Capital Plan

2024 - 2033 10-Year Capital Plan - \$11.7M

By Project Classification:

State of Good Repair \$11.7M	DC Funded Growth \$-M	Non-DC Funded Growth & Other \$-M
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Key Highlights:

- \$5.4M Peel Public Health clinics and facilities for larger leasehold improvements
- \$2.8M Peel Public Health clinics and facilities for leasehold improvements
- \$2.5M Peel Public Health Information Management Improvements
- \$0.8M Mobile Dental Clinic bus replacement
- \$0.2M Needle exchange vans (two) replacement costs

See Appendix II for details.

2024 Financing Sources and Funding Status (\$'000)

			2024				
<u>Project</u>	<u>Name</u>	<u>Description</u>	<i>Total Expense</i>	<i>Development Charges</i>	<i>Reserves & Reserve Funds</i>	<i>External Funding</i>	<i>Debt Funding</i>
245306	Public Health Information Management Improvements	Public Health Information Improvements		250		250	
245308	Public Health Clinics and Facilities - Leasehold Improvements	Fund for leasehold improvements for clinics		100		100	
Public Health			350		350		

2024 Ten Year Combined Capital Program (\$'000)

			<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>	<u>2028</u>	<u>Yrs 6-10</u>	<u>Gross</u>
Project	Name	Description							
245306	Public Health Information Management Improvements	Public Health Information Improvements	250	250	250	250	250	1,250	2,500
245308	Public Health Clinics and Facilities - Leasehold Improvements	Fund for leasehold improvements for clinics	100	300	300	300	300	1,500	2,800
255307	Public Health Clinics and Facilities	Fundfor leasing public health clinics related to growth	0	1,800	0	0	0	3,600	5,400
275304	Mobile Dental Clinic (Bus)	Mobile Dental Clinic (Bus)	0	0	0	750	0	0	750
285305	Needle Exchange Vans	Needle Exchange Vans Replacement	0	0	0	0	260	0	260
Public Health			350	2,350	550	1,300	810	6,350	11,710

Budget Requests

This table presents the costs by Budget Request for proposed new initiatives. Each BR is numbered. Detailed descriptions of the budget requests can be found in the pages following the table.

Proposed Initiative	Division	Budget Request #	FTEs Requested	Contract FTE Requested	Net Operating Impact \$	Capital \$
Tuberculosis Program Capacity Building	Communicable Diseases	1	3.0	2.0	349,494	-
Public Health resources to support reducing the health impacts of climate change	Public Health Intelligence and Health Protection	2	1.0	2.0	142,533	-
Enhanced public health inspection capacity	Health Protection	3	3.0	3.0	365,208	-
TOTAL			7.0	7.0	857,235	-

Budget Request #: 1

Proposed Initiative	Department	Division	Service Area
Tuberculosis Program Capacity Building	Health Services	Communicable Diseases	Public Health

Description of Budget Request

Tuberculosis impacts vulnerable populations, with Peel rates twice that of Ontario. Three permanent staff and two contract staff are required to bolster a team that has been chronically underfunded. Caseloads impede consistently meeting mandates and prohibit optimal care outlined by the Canadian tuberculosis Standards. Subsequently, Peel residents with tuberculosis receive sub-optimal care and fewer services than residents in neighbouring jurisdictions, increasing individual morbidity and mortality and transmission risk.

Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	543,081	(193,587)	-	-
Less: Internal and Capital Recovery	-	-	-	-
Total Expense	543,081	(193,587)	-	-
Rate Stabilization Reserve	193,587	(193,587)	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
Total Revenue	193,587	(193,587)	-	-
Net Impact - Tax	349,494	-	-	-
Net Impact - Utility Rate	-	-	-	-
FTEs	3.0	-	-	-

Required Capital Investment

	2024 \$
Total Expenditures	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
Total Funding	-

Why Staff Recommend this Initiative

Growth in the Region's population coupled with the rising global burden of tuberculosis has resulted in increased tuberculosis case counts in Peel without parallel increases in program capacity. Chronic underfunding has created high caseloads which, when combined with increasingly complex cases, means public health is not able to consistently meet tuberculosis standards or deliver optimal care. Increased resources are needed to consistently meet mandated case and contact management of active infectious tuberculosis and latent tuberculosis.

Details of Service Change

Additional permanent resources will prevent further spread of tuberculosis in Peel by:

- Providing all active tuberculosis cases with directly observed therapy to facilitate successful treatment completion as outlined in the tuberculosis Guidelines. Currently only infectious tuberculosis cases and high-risk clients (children, drug-resistant, etc.) are prioritized.
- Ensuring comprehensive contact tracing, including the provision of tuberculosis skin tests to facilitate contact screening for close and high-risk contacts, increasing contact screening completion rates which are below program indicator targets.
- Offer new short-course LTBI treatment to increase uptake and successful completion. Because LTBI can progress to active disease, treatment for LTBI is important for reducing the risk of development of infectious tuberculosis disease from LTBI in the future. We are unable to offer this recommended first-line treatment option due to staffing constraints.
- Facilitate support for socioeconomic challenges that act as barriers to treatment success.

Tuberculosis case and contact management is highly complex, and orientation, training and capacity building for new staff is extensive and time consuming. The tuberculosis program is currently meeting staffing needs through the use of contract staff. Contract staff will regularly look for permanent employment, leading to high turnover. Additionally, consistent staffing is required to build the foundational relationships with physicians and community partners needed to collaboratively manage tuberculosis cases in Peel.

Service Impact

New permanent staffing resources will support the achievement of outcomes by enabling the program to conduct thorough case and contact management, provide direct screening of contacts who may otherwise not complete screening due to lack of health coverage or other barriers, support isolation and treatment completion by providing directly observed therapy to all clients and connecting them to community services to support socioeconomic challenges, and reestablish and scale up partnerships with community partners. Public health plays a critical role in preventing progression from inactive latent tuberculosis infection to active tuberculosis disease, early identification of cases, preventing transmission within the community and ensuring treatment success for individuals with active tuberculosis. Historical staffing constraints have made comprehensive contact tracing and screening difficult. Many clients face socioeconomic challenges that create barriers when accessing health care – precarious employment or housing, language barriers, stigma, lack of family or community supports, and often do not have health coverage. This creates complexities that the program area must navigate to meet Ministry mandates.

Budget Request #: 2

Proposed Initiative	Department	Division	Service Area
Public Health resources to support reducing the health impacts of climate change	Health Services	Public Health Intelligence Health Protection	Public Health

Description of Budget Request

The Council approved Public Health Strategic Priority Reducing Health Impacts of Climate Change is complementary and coordinated with the mitigation work of the Office of Climate Change and Energy Management's Climate Change Action Plan. The request is for one permanent staff to support future public health urgent response planning (Public Health Intelligence) and two contract staff (Health Protection) to build capacity and develop regional health-related adaptation strategies.

Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	371,321	(228,788)	-	-
Less: Internal and Capital Recovery	-	-	-	-
Total Expense	371,321	(228,788)	-	-
Rate Stabilization Reserve	228,788	(228,788)	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
Total Revenue	228,788	(228,788)	-	-
Net Impact - Tax	142,533	-	-	-
Net Impact - Utility Rate	-	-	-	-
FTEs	1.0	-	-	-

Required Capital Investment

	2024 \$
Total Expenditures	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
Total Funding	-

Why Staff Recommend this Initiative

We are seeing changes to Peel's climate and impacts to the health of communities through changes in disease patterns such as vector-borne disease, increases in morbidity and mortality from extreme weather events, increased risk of food and water contamination and worsening air quality. Public Health can help mitigate potential impacts by developing programming and urgent response plans to increase the resiliency of the community and address health equity.

Details of Service Change

Approval of this budget request will increase Peel Public Health's capacity to ensure that people are protected from urgent climate-related health risks such as extreme heat and weather, worsening air quality, infectious diseases, food- and water-borne hazards, and impacts to mental health. The public health strategic priority has not had dedicated resources or support to date. The three positions will be involved in work to: increase internal public health knowledge around climate change; engage with the community and stakeholders to mitigate potential health related impacts of climate change; enhance public health programming (disease surveillance, monitoring of key metrics such as the presence of black-legged ticks, addressing issues related to health equity); develop robust climate change adaptation programs, in consultation with stakeholders such as internal partners and the local area municipalities. Staff will be working closely with the Office of Climate Change and Energy Management to ensure that programming and outreach are done in a coordinated fashion without duplication.

Service Impact

Using the Public Health Climate Change Vulnerability Assessment, vulnerable populations and communities will be identified and prioritized. Leveraging existing programs within the Region, Public Health will work with partners and stakeholders to consult and develop programs and plans to address and mitigate climate change related health impacts. Key areas of focus include vector-borne diseases programming, food and drinking water safety, recreational waters (beach testing, algae blooms), air quality, heat notification and response, the built form and urgent response capacity. Staff will work with the Office of Climate Change and Energy Management and with the Regional Emergency Management Office as well as with the local area municipalities and community stakeholders.

Budget Request #: 3

Proposed Initiative	Department	Division	Service Area
Enhanced Public Health Inspection Capacity	Health Services	Health Protection	Public Health

Description of Budget Request

During the pandemic, many public health inspected settings changed their business models. Currently, there has been an increase in special events, typically in the evening and on weekends. Many premises were inspected infrequently during the pandemic, resulting in more complicated and increased inspections as well as increased enforcement. Three permanent staff and three contract staff are required to stabilize and complete mandated inspections.

Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	659,262	(294,054)	-	-
Less: Internal and Capital Recovery	-	-	-	-
Total Expense	659,262	(294,054)	-	-
Rate Stabilization Reserve	294,054	(294,054)	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
Total Revenue	294,054	(294,054)	-	-
Net Impact - Tax	365,208	-	-	-
Net Impact - Utility Rate	-	-	-	-
FTEs	3.0	-	-	-

Required Capital Investment

	2024 \$
Total Expenditures	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
Total Funding	-

Why Staff Recommend this Initiative

Growth in the Region has resulted in inspection pressures. From 2017 to 2022, there has been a 12% increase in food premises and a 4% increase in recreational water facilities. During COVID-19, premises were inspected infrequently resulting in more complicated inspections and increased progressive enforcement needs. The number of special events has grown, there is significant non-compliance with the Waterpipe By-law and increasing challenges with vaping in Peel schools.

Details of Service Change

The additional staff will be used to support the full scope of public health inspector duties including inspections in settings ranging from food premises, special events, personal service settings and childcare, as well as duties related to education and enforcement of the waterpipe by-law and other tobacco and vaping legislation. Having additional contract staff during this timeframe will also allow Health Protection to ensure the accuracy of the inspection databases and align the work boundaries of each public health inspector's work district to account for growth. Ensuring that there is capacity to complete mandated inspections and respond to requests for service in the community reduces the risk of morbidity and mortality related to the inspected settings, creates equity and builds trust and confidence with business and the public.

Service Impact

The additional staff will allow inspections to be completed as per the requirements of the Ontario Public Health Standards, allow more capacity to inspect special events which typically occur after hours and on weekends and to respond to the increase in requests for service from the community in a timely manner. For example, the additional contract staff will help address the increase in public complaints related to food, water and health hazards which have increased 5% from 2017 to 2023. Also, infection prevention and control complaints/service requests have increased 79% from 2016. An intensified enforcement strategy to deter non-compliance of Peel's Waterpipe Smoking By-law would be implemented and the additional staff would inspect premises more frequently. A change to the staffing model for youth access inspections now requires two PHIs per shift and will require approximately 450 extra PHI hours. The additional contract staff will assist with these inspections.

