



BOARD OF HEALTH MEETING

September 2, 2020
9:30 a.m. – 11:00 a.m.

To ensure a quorum we ask that you please
RSVP (Regrets Only) to
clovell@hpeph.ca or 613-966-5500, Ext 231

Please note there will be a
Closed Session at the beginning
of the meeting

Hastings Prince Edward Public Health 2019 - 2023 Strategic Plan

Our Vision

**Healthy Communities,
Healthy People.**

Our Mission

**Together with our communities,
we help people become as
healthy as they can be.**

Our Values Show We CARE



Collaboration



Advocacy



Respect



Excellence

Our Strategic Priorities



**Community
Engagement**



**Staff
Engagement
and Culture**



**Population Health
Assessment and
Surveillance**



**Program
Standards**



**Health
Promotion**

Board of Health Agenda

Wednesday, September 2, 2020

9:30 to 11:00 a.m.

1. **CALL TO ORDER**
2. **DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF**
3. **APPROVAL OF THE AGENDA**
4. **CLOSED SESSION**

THAT the Board of Health convene in closed session for the purpose of:

a discussion of personnel issues in accordance with Section 239 (2) b; personal matters about an identifiable individual, including municipal or local board employees; and information explicitly supplied in confidence to the municipality or local board by Canada, a province or territory or a Crown agency of any of them.

5. **APPROVAL OF MINUTES OF THE PREVIOUS BOARD MEETING**
– June 3, 2020 [Schedule 5.0](#)
6. **BUSINESS ARISING FROM THE MINUTES**
7. **DEPUTATIONS**
8. **COMMITTEE REPORTS**
 - 8.1 **Finance Committee Update** - Terry
 - 8.2 **Governance Committee** - None
9. **REPORT OF THE MEDICAL OFFICER OF HEALTH**
 - 9.1 Funding Update [Schedule 9.0](#)
 - 9.2 Response and Resilience Plan (to be forwarded under separate cover) [Schedule 9.1](#)[Schedule 9.2](#)
10. **STAFF REPORTS**

Verbal Reports

 - 10.1 Social Determinants of Health [Schedule 10.1](#)

Written Reports

 - 10.2 Perinatal Mental Health in Hastings Prince Edward [Schedule 10.2](#)
11. **CORRESPONDENCE AND COMMUNICATIONS** - None
12. **NEW BUSINESS**
13. **INFORMATION ITEMS** (Available for viewing online) [Schedule 13.0](#)
14. **DATE OF NEXT MEETING** – Wednesday, October 7, 2020
15. **ADJOURNMENT**



BOARD OF HEALTH MEETING MINUTES

Wednesday, June 3, 2020

Hastings Prince Edward Public Health (HPEPH)

Via Teleconference

Present: Ms. Jo-Anne Albert, Mayor, Municipality of Tweed, County of Hastings, Chair
Dr. Jeffrey Allin, Provincial Appointee
Mr. Stewart Bailey, Councillor, County of Prince Edward
Mr. Andreas Bolik, Councillor, County of Prince Edward
Mr. Terry Cassidy, Councillor, City of Quinte West
Dr. Craig Ervine, Provincial Appointee
Ms. Deborah Goulden, Provincial Appointee
Mr. Michael Kotsovos, Councillor, City of Quinte West
Ms. Jan O'Neill, Mayor, Municipality of Marmora and Lake, County of Hastings
Mr. Bill Sandison, Councillor, City of Belleville

Also Present: Dr. Piotr Oglaza, Medical Officer of Health and CEO
Dr. Alexa Caturay, Acting Medical Officer of Health
Ms. Valerie Dunham, Director of Corporate Services/Associate CEO
Ms. Catherine Lovell, Executive Assistant

Absent: Mr. Sean Kelly, Councillor, City of Belleville

1. CALL TO ORDER

Chair Albert called the meeting to order at 9:30 a.m.

2. ROLL CALL

Catherine, Board Secretary completed a roll call.

Chair Jo-Anne thanked staff for the tremendous job being done with COVID-19 in these unprecedented times and noted the Board's appreciation and gratitude for HPEPH under Dr. Oglaza's guidance and expertise and noted her pride in serving as board chair during this time.

Jo-Anne welcomed Dan Coleman, partner at Welch LLP, Dr. Alexa Caturay as Acting Medical Officer of Health, and Dr. Jeffrey Allin, as the Board's new provincial appointee. Jo-Anne said goodbye to Joy Martin and Deborah Goulden wishing them well in the future and thanking them for being supportive of staff and the Board. She also welcomed back Dr. Craig Ervine, who was reappointed to the Board for a one-year term and congratulated Dr. Oglaza on the birth of his third child.

Jo-Anne noted, for the media, that Dr. Oglaza would be available after the meeting for a question and answer session.

3. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

There was no disclosure of pecuniary interest.

4. APPROVAL OF AGENDA**MOTION:**

Moved by: Jan

Seconded by: Terry

THAT the agenda for the Board of Health (Board) meeting on Wednesday, June 3, 2020 be approved as circulated.

CARRIED

5. APPROVAL OF MINUTES OF PREVIOUS BOARD MEETING – April 1, 2020**MOTION:**

Moved by: Bill

Seconded by: Andreas

THAT the minutes of the regular meeting of the Board held on April 1, 2020 be approved as circulated.

CARRIED

6. BUSINESS ARISING FROM MINUTES - None**7. DEPUTATIONS - None****8. COMMITTEE REPORTS (MOTION)****8.1 Finance Committee****8.1.1 – Approval of Audited Financial Statements – Presented by Dan Coleman**

Mr. Dan Coleman presented the audited financial statements noting a few items:

- The financial statements were reviewed by the Finance Committee in April.
- On page 3 is the Independent Auditors Report where there is an opinion paragraph that says the financial statements are in all respects fair, it was a clean audit and there are no qualifications.

Mr. Coleman went on to discuss some of the statements. There were no questions at the end of his presentation.

Chair Cassidy thanked Mr. Coleman for his presentation of the financial statements to the Finance Committee and again to the Board. Chair Cassidy also commended HPEPH staff for having good sound accounting through the difficult times of public health modernization.

MOTION:

Moved by: Terry

Seconded by: Michael

THAT the 2019 audited financial statements for Hastings Prince Edward Public Health be approved as presented.

CARRIED

8.2 Governance Committee

8.2.1 – *Policy Advocacy Policy*

Dr. Oglaza discussed this policy as per the briefing note noting that policy advocacy is a proactive approach that aims to provide evidence and encourages us to work cooperatively. The policy outlines a clear procedure for staff and Board members to work together to identify and act upon policy advocacy issues.

MOTION:

Moved by: Jan

Seconded by: Deborah

THAT the Board of Health approve the Policy Advocacy policy as circulated for immediate application.

CARRIED

8.2.2 – *Board of Health Member Competencies Inventory*

This is a follow up item from the self evaluation survey and was noted as a deficiency by board members themselves in the survey. Because there is no formal mechanism for HPEPH to be aware of the skill sets of board members it is being proposed that this Competency Inventory be completed by all members. It was stated that having an inventory of these skill sets will allow HPEPH executive to engage board members where their expertise can be utilized.

MOTION:

Moved by: Bill

Seconded by: Craig

THAT the Board of Health approve and support the Schedule of Competency / Skills Inventory and proceed with having each Board member complete their own inventory and return it to the Board secretary.

CARRIED

8.2.3 - *Strategic Planning Progress Report*

Dr. Oglaza noted that in 2018, the Board led the development of the 2019-2023 Strategic Plan and that despite the onset of the COVID-19 pandemic, HPEPH has continued to make progress with our strategic priorities. The report highlights our accomplishments during 2019 to May of 2020. There were no questions.

MOTION:

Moved by: Bill

Seconded by: Craig

THAT the Board of Health receive the report as presented.

CARRIED

8.2.4 - **Land Acknowledgement**

Dr. Oglaza discussed the briefing note and highlighted that a land acknowledgement is a first step in recognizing colonialism and that we are committed to working with the Indigenous communities. He also emphasized that establishing a land acknowledgement must be done in collaboration with the local Indigenous communities. There were no questions.

MOTION:

Moved by: Terry

Seconded by: Michael

THAT the Board of Health support staff in working with local Indigenous communities for the development of a land acknowledgement statement to be later used within the context of Hastings Prince Edward Public Health.

9. REPORT OF THE MEDICAL OFFICER OF HEALTH

COVID-19 Update

Dr. Oglaza informed the Board that we have a total of 43 lab confirmed cases with 5 active cases currently in our area but have had no new cases since May 18, 2020.

- The testing strategy has been expanded to allow testing for any individual who has symptoms as well as any asymptomatic individuals who are concerned about potential exposure.
- The province continues to lead a phased approach to reopening, most recently allowing many business and retail services to reopen, with certain restrictions in effect.
- We are continuing to support our partners at Ontario Health, hospitals, and community paramedicine, in the provision of testing to those who are concerned about exposure. There are local assessment centres in Bancroft, Belleville, Picton and Trenton.
- HPEPH offered a webinar for local businesses in partnership with Hastings County to provide an overview of current provincial regulations, available resources, the scope of our role and support we can provide and answered questions posed by businesses.
- HPEPH is working on plans to resume select in-person services, beginning with those that have the highest community need. For example, we are resuming immunization appointments this week with a focus on early childhood and adolescent vaccines, urgent breastfeeding consults, urgent sexual health services and STI treatments, to name a few.
- While our service delivery is changing to keep clients and staff safe, meeting local public health needs continues to be our top priority.

Discussion ensued around COVID-19 with Drs. Oglaza and Caturay answering questions from the Board.

MOTION

Moved by: Craig

Seconded by: Stewart

THAT the report of the Medical Officer of Health be received as presented.

CARRIED

10. WRITTEN REPORTS

- 10.1 **2019 Privacy Report**
- 10.2 **Planning Cycle and Quality Improvement Program**
- 10.3 **2019 Annual Report and Celebration of Accomplishments**

These reports were presented as noted in the Agenda briefing notes with no questions asked by the Board.

MOTION

Moved by: Jan

Seconded by: Michael

THAT the Board of Health receive all written reports as presented.

CARRIED

11. CORRESPONDENCE AND COMMUNICATIONS**12. NEW BUSINESS** - None**13. INFORMATION ITEMS**

Chair Albert drew the Board's attention to the information items listed within the agenda and can be accessed on the HPEPH website at hpePublicHealth.ca.

MOTION

Moved by: Bill

Seconded by: Jan

THAT the Board of Health receive the information items as circulated.

CARRIED

14. DATE OF NEXT MEETING – Wednesday, September 2, 2020**15. ADJOURNMENT****MOTION:**

Moved by: Terry

Seconded by: Andreas

THAT this meeting of the Board be adjourned at 10:42 a.m.

CARRIED

Jo-Anne Albert, Chair

Updates from the MOH

- **COVID-19 Update**
- **Response and Resilience Plan**
- **Funding Update** (See Schedule 9.1)
- **Exit - Farewell**

Board of Health Briefing Note

To:	Hastings Prince Edward Board of Health
Prepared by:	Valerie Dunham, Director of Corporate Services/Associate CEO
Reviewed by:	Dr. Alexa Caturay, Acting Medical Officer of Health
Date:	Wednesday, September 2, 2020
Subject:	Funding Updates
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input checked="" type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	No action required.
Background:	<p>The following information is provided as updates to the Finance Committee meeting held in July. Since that meeting, a number of provincial announcements have been made which change the financial environment at Hastings Prince Edward Public Health (HPEPH). Please note the following.</p> <ul style="list-style-type: none"> You will recall that the new cost sharing funding formula for public health went into effect on January 1, 2020. This new formula changed the required cost sharing from a 75/25% to a 70/30% formula. The total cost of the change for municipalities funding HPEPH was \$1,120,000. For 2020, the increase for municipalities was limited to a 10% increase with the balance funded by the province as mitigation funding. For HPEPH, the mitigation funding was budgeted as \$838,000 and the increase of \$282,000 was to be drawn from our municipal operating reserves. On August 21, we received our Accountability Agreement and were advised that the province is now contributing 100% of the cost of the formula change with mitigation funding in the amount of \$1,120,000 for 2020. The province has also confirmed that mitigation funding in the same amount will be received for 2021. This was welcome news to HPEPH for both the 2020 and 2021 budget years. On August 21, we received the application forms to apply for Extraordinary Costs related to COVID-19. The application form is due September 11 and will reimburse HPEPH for some of the extraordinary costs incurred through the COVID-19 response. All budgeted revenues must be utilized first before being eligible for the reimbursement of extraordinary costs. On July 30, as part of its plan for the safe reopening of schools in September, the Government of Ontario announced an investment of \$50 million to hire up to 500 additional school-focused nurses in public health units to provide rapid-response support to schools and boards in facilitating public health and preventive measures, including screening, testing, tracing and mitigation strategies.

	<ul style="list-style-type: none">• We are pleased to share that on August 11, the Ministry provided details of this program which provides HPEPH with 6 School Focussed nurses. The goal is to have these nurses in place as soon as possible which means that we are redeploying nurses already on staff to fill this critical role in the community.• On August 26, the provincial government announced an increased investment of up to \$12.5 million for 125 additional nursing positions in public health units. HPEPH has been allocated 2 additional nurses for a total of 8 school-focussed positions.• During the Finance Committee meeting held in July, a draft of the 2021 budget indicates a shortfall in the amount of approximately \$250,000. Discussion took place at the Finance Committee regarding the budget shortfall and how to address it. Considering the provincial announcements since that time, although more work has been done on the budget preparations, it is too premature to provide any more information until we address the outcomes of the funding packages provided. It is anticipated that HPEPH will require funds from the operating reserves to support our continued response to COVID-19 and balance the 2021 budget. More information will be forthcoming over the coming months.
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Board of Health Briefing Note

To:	Hastings Prince Edward Board of Health
Prepared by:	Victoria Law, Social Determinants of Health Public Health Nurse
Approved by:	Veronica Montgomery, Foundational Standards Manager
Date:	Wednesday, September 2, 2020
Subject:	Social Determinants of Health (SDOH)
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input checked="" type="checkbox"/> Compliance with Program Standards
Action Required:	No action required.
Background:	<p>The Ontario Public Health Standards recognizes health equity as one of the key Foundational Standards. One of the health equity program outcomes is to increase awareness among the public and community partners of the impact of the social determinants of health (SDOH) on health outcomes, and increase supports for actions to decrease health inequities(1).</p> <p>The SDOH are widely recognized to contribute to significant health disparities between members of the general population. The SDOH are described by the National Collaborating Centre for Determinants of Health (NCCDH) as “the interrelated social, political and economic factors that create the conditions in which people live, learn, work and play”(2).</p> <p>In order to meet the health equity standard, the Health Equity Training Plan was launched in 2018 with two goals:</p> <ol style="list-style-type: none"> 1. To enhance awareness and knowledge among members of the HPEPH workforce regarding the SDOH, health equity and public health’s role to reduce health inequities; and 2. Prepare members of the HPEPH workforce to take action to reduce health inequities in public health programs and services. <p>This training plan includes the launch of public issue framing activities. Issue framing provides an opportunity to publicly highlight the SDOH and demonstrate the role that public health plays. COVID-19 delayed the original launch of this public information, however the effects of the ongoing pandemic have heightened the attention of the public on how personal circumstances shape opportunities to live a healthy life. This has provided a window of opportunity to further demonstrate how social determinants such as early childhood development, income and income distribution, and education, literacy and skills play a role in lifelong health and well-being.</p> <p>The issue framing information helps us meet one of our strategic priorities, community engagement. This publicly available information will increase awareness of the role of public health, our programs and services. It will also help us to serve as a voice of advocacy to champion the best possible health for</p>

	<p>all. These are two of the approaches in our strategic plan to meet our community engagement strategic priority.</p> <p>More information can be found on our new webpage: hpePublicHealth.ca/healthequity</p>
Reviewed By:	Dr. Alexa Caturay, Acting Medical Officer of Health

References

1. Ontario Ministry of Health and Long-Term Care. Protecting and Promoting the Health of Ontarians – Ontario Public Health Standards: Requirements for Programs, Services, and Accountability. 2018;1–75.
2. National Collaboration Centre for Determinants of Health. Glossary of Essential Terms [Internet]. Antigonish, NS; 2014. Available from: http://nccdh.ca/images/uploads/comments/Glossary_EN-_FINAL_May_19.pdf




Social Determinants of Health

Board of Health
September 2, 2020

Victoria Law, Social Determinants of Health
Public Health Nurse


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Outline

- Background
- Context
- Key Messages
- Next Steps

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Background


"The social determinants of health are the interrelated social, political and economic factors that create the conditions in which people live, learn, work and play."

(National Collaborating Centre for Determinants of Health, 2014)

Equality



Equity



3

Robert Wood Johnson Foundation

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Strategic Plan: 2019-2023

Community Engagement

- Increase awareness of the role of public health and our programs and services
- Serve as a voice of advocacy to champion the best possible health for all

4

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Ontario Public Health Standards: Health Equity

- “There is an increased awareness on the part of the LHINs and other community partners **of the impact of social determinants of health on health outcomes** and increased supports for action to decrease health inequities” (OPHS, 2018, p. 21)

5

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The Context

- The 2018 Health Equity Training Plan has two goals:
 1. To enhance **awareness** and **knowledge** of the internal workforce regarding the social determinants of health (SDOH), health equity, and Public Health's role to reduce health inequities
 2. To prepare members of the HPEPH workforce to take action to reduce health inequities in public health programs and services

6

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Communication Goals

- Raise awareness of the SDOH in our communities
- Provide education on how the SDOH relate to health
- Demonstrate that public health has a role to play in addressing the SDOH alongside community partners

7

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Key Message #1

Your health has been influenced by many circumstances that are beyond your control.

8

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Key Message #2

Health begins in our families, is shaped by our education, and is maintained by being able to afford the necessities of life.

9

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Public Health**

Key Message #3

Public Health is working to identify
and reduce inequities in our
communities.

10

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**HASTINGS PRINCE EDWARD
Public Health**

Next Steps

- Empower staff members to act on the social determinants of health
- Continue to increase knowledge of the public and local stakeholders through a targeted campaign in 2021

11

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**HASTINGS PRINCE EDWARD
Public Health**

Thank you

12

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Social Determinants of Health

At Hastings Prince Edward Public Health, we define the Social Determinants of Health to be the following^{1,2,3}:



Access to Health
Services



Culture, Race
and Ethnicity



Disability



Early Childhood
Development



Education, Literacy
and Skills



Employment, Job Security
and Working Conditions



Food Insecurity



Gender Identity
and Expression



Housing



Income and Income
Distribution



Indigenous Status



Personal Health
Practices and Resiliency



Physical
Environments



Sexual Orientation
and Attraction



Social Inclusion
and Exclusion



Social Support
Networks

If you have any questions regarding the social determinants of health (SDOH), or what you can do in your role to help people facing health inequities related to the SDOH, please reach out to the Foundational Standards Social Determinants of Health Public Health Nurse, Victoria Law at: vlaw@hpeph.ca or extension 304.

References available upon request.

Board of Health Briefing Note

To:	Hastings Prince Edward Board of Health
Prepared by:	Alison Dubien, Public Health Nurse and Brooke Cousins, Health Promoter
Approved by:	Shelly Brown, Program Manager, Healthy Families
Date:	Wednesday, September 2, 2020
Subject:	Perinatal Mental Health in Hastings Prince Edward
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	No action required
Background:	<p>Perinatal Mood and Anxiety Disorders (PMADs) are the most common complication of childbirth.</p> <p>PMAD is an umbrella term for different mood disorders including depression, anxiety and postpartum psychosis. PMADs can occur at any time during pregnancy or within the first year after the birth of a baby and can impact anyone. The effects of untreated PMADs are far reaching and very costly to our healthcare system. Rates of maternal mental health concerns are high in Hastings and Prince Edward Counties. The attached infographic paints a picture of our local context and the steps we are taking to make a difference within our community by strengthening partnerships with agencies that support families.</p> <p>This work contributes to the following Ontario Public Health Standards Healthy Growth and Development requirement:</p> <p><i>The board of health shall develop and implement a program of public health interventions using a comprehensive health promotion approach to support healthy growth and development in the health unit population. The program of public health interventions shall be informed by:</i></p> <ul style="list-style-type: none"> <i>i. An assessment of risk and protective factors that influence healthy growth and development.</i> <i>ii. An assessment of existing programs and services within the area of jurisdiction of the board of health to build on community assets and minimize duplication.</i> <i>iii. Consultation and collaboration with local stakeholders in the health, education, municipal, non-governmental, social, and other relevant sectors to address mental health promotion.</i>
Reviewed By:	Dr. Alexa Caturay, Acting Medical Officer of Health

Perinatal Mental Health in Hastings Prince Edward

The most common complication of childbirth

Perinatal Mood Anxiety Disorders (PMADs) include a range of mental health conditions such as anxiety, depression, and postpartum psychosis. These conditions can range from mild to severe.

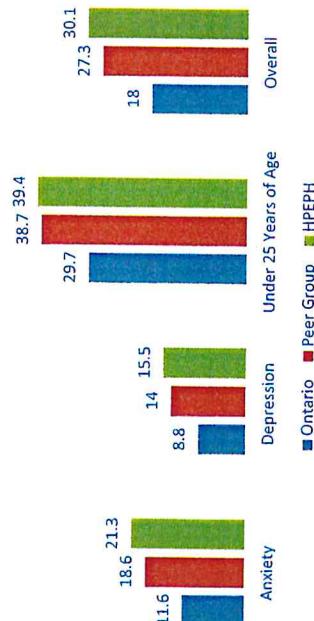
PMADs can occur at any time during pregnancy or within the first year after the birth of a baby, which makes this a particularly vulnerable time for mental health in a family.

PMADs can impact anyone

- PMADs do not discriminate
- Money and socioeconomic status do not provide immunity from PMADs



Maternal Mental Health Concerns During Pregnancy



Data sources: RMAO BPG Assessment and Interventions for Perinatal Depression, StatsCan, PHO Snapshots, Postpartum Support International (2017)

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PMAD symptoms vary and can include:

- Having less interest and/or finding less enjoyment in things
- Feeling sad most of the time
- Feeling anxious or worried
- Changes in appetite, energy, sleep or concentration



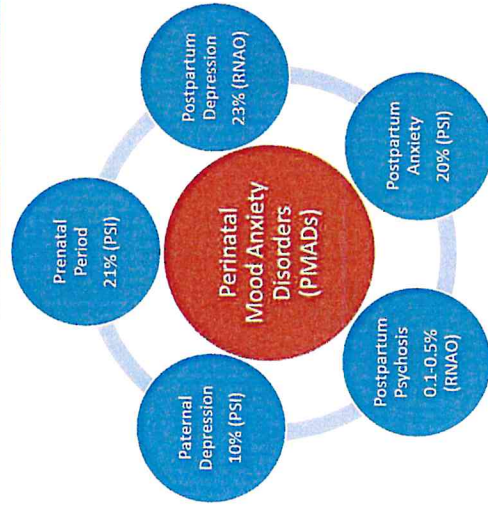
Cost of untreated PMADs

In Ontario, an estimated **\$20 MILLION** is spent each year on complications from untreated prenatal depression.



Risks of untreated PMADs:

- Isolation, social withdrawal
- Relationship problems
- Increased risk of poor breastfeeding outcomes
- Developmental delays and behaviour problems in infants/children
- Delayed language, motor, social and cognitive development in infants/children
- Child abuse and neglect



What HPEPH can do:

- Universal screening for all pregnant and postpartum persons in all interactions with new parents
- Strengthen relationships and develop referral mapping with community partners to aid in improving early access to mental health services
- Provide education and awareness within the community
- Work to decrease stigma
- Support new parents



Listing of Information Items

Board of Health Meeting – September 2, 2020

1. County of Lambton – Letter to Minister Elliott re: Clarification on Ministry's Criteria to Move to Stage 3 in the – *Framework for Reopening Our Province* dated June 19, 2020
2. Haliburton, Kawartha, Pine Ridge District Health Unit – Letter to Minister Elliott re: Endorsement of the alPHA's response to the public health modernization discussion paper dated June 19, 2020
3. Haliburton, Kawartha, Pine Ridge District Health Unit – Letter to Justin Trudeau re: support for basic income for all Canadians during the COVID-19 pandemic and beyond dated June 19, 2020
4. Haliburton, Kawartha, Pine Ridge District Health Unit – Letter to Christine Elliott re: Endorsement of correspondence regarding the 2020 municipal cost share of public health funding from Eastern Ontario Health Unit and correspondence regarding COVID-19 and reconsiderations related to public health modernization from alPHA dated June 19, 2020
5. Timiskaming Health Unit – Letter to Justin Trudeau re: Basic income for income security during Covid-19 pandemic and beyond dated June 9, 2020
6. Grey Bruce Health Unit – Letter to Bruce Lauckner re: Ontario Health reporting inaccuracy Covid-19 enhanced surveillance of long-term care dated June 8, 2020
7. Simcoe Muskoka District Health Unit – Letter to Justin Trudeau re: Basic income for income security during Covid-19 pandemic and beyond dated May 20, 2020
8. Peterborough Public Health – Letter to Justin Trudeau re: Endorsement of the letter from Simcoe Muskoka District Health unit, basic income for income security during Covid-19 pandemic and beyond dated June 25, 2020
9. Porcupine Health Unit – Letter to Justin Trudeau re: Basic income for income security during Covid-19 pandemic and beyond dated June 29, 2020
10. Renfrew County and District Health Unit – Letter to Justin Trudeau re: Basic income for income security during Covid-19 pandemic and beyond dated July 16, 2020
11. Renfrew County and District Health Unit – Letter to Christine Elliott re: Endorsement of the alPHA's response to the public health modernization discussion paper dated July 16, 2020
12. Renfrew County and District Health Unit - Letter to Christine Elliott re: Endorsement of correspondence regarding the 2020 municipal cost share of public health funding from Eastern Ontario Health Unit and correspondence regarding COVID-19 and reconsiderations related to public health modernization from alPHA dated July 16, 2020
13. Chatham-Kent Public Health – Letter to Justin Trudeau re: Basic income for income security during Covid-19 pandemic and beyond dated July 27, 2020

The above information items can be found on the Hastings Prince Edward Public Health's website through the link in the Agenda Package or by going to our website at hpePublicHealth.ca.