

Board of Health Meeting  
Dr. Vera Etches – Verbal report  
June 20, 2022

Good afternoon, Kwey, Unusakut (oo-nah-sa-coot), Taanishi, Ahnii, Bonjour,

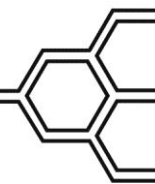
This evening, I will speak about reconciliation actions OPH is supporting and undertaking. I will share an update on the COVID-19 situation and our health system at this time. And, I will provide an update about how OPH is adjusting the scale of our COVID-19 response while remaining flexible and growing capacity to catch up on more public health services.

### **Ongoing Reconcili-Action Work at OPH**

OPH has continued to work with First Nations, Inuit and Metis Elders, communities, and organizations in the spirit of the four principles the Board of Health approved in OPH's Reconcili-Action Plan: Respect, Relationship, Reciprocity and Reflection. / SPO a continué de travailler avec les aînés, les communautés et les organisations des Premières nations, des Inuit(e)s et des Métis(se) dans l'esprit des quatre principes que le Conseil de santé a approuvés dans le Plan d'action pour la réconciliation de SPO : Respect, Relation, Réciprocité et Réflexion. This year has seen an ongoing commitment to these principles through a variety of actions.

**Respecting** Indigenous history and knowledge is at the forefront of the Reconcili-Action Plan. Bringing increased awareness to and understanding of the history of colonization and systemic racism is foundational. The Anti-Racism team (AR) hosted an Anti-Indigenous Racism workshop with 94 OPH and City employees to reflect on the history and present-day injustices faced by Indigenous Peoples in Canada and the resulting improved understanding will support work that recognizes anti-Indigenous racism a significant public health issue. Arising out of this workshop, OPH team members sought to access Indigenous Cultural Safety Training (ICST). Earlier in the year over 90 OPH employees from across the department piloted the newly launched Foundations of Indigenous Cultural Safety Training course. Moving forward, Indigenous Cultural Safety Training (ICST) will continue to be offered to all OPH employees.

**Relationship** building with Indigenous partners continues. Regular connections between service providers across OPH and Indigenous-led organizations, as well as



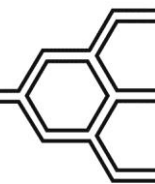
annual meetings with First Nations, Inuit and Metis partners have been ongoing. These meetings provide a safe space to share updates and concerns as well as celebrate successes for all attendees. Taking the lead from Indigenous partners, these meetings provide OPH with opportunities to listen, identify actions required, and be accountable to our partners as feedback provided forms a part of our annual evaluation of OPH's work on reconciliation.

In the spirit of **reciprocity**, working in partnership with Indigenous-led organizations to share knowledge and deliver services that benefit First Nations, Inuit and Metis community members has been ongoing. Recent examples include the adaptation of Covid-19 resources, such as information about COVID-19 anti-viral treatments now available in Inuktitut, and collaborative vaccine clinics housed within Indigenous Health Centers (Wabano and Akausivik) and staffed with OPH Public Health Nurses.

On May 25<sup>th</sup>, I was pleased to speak at the Wabano Centre in support of the Share your Story research project on Indigenous-specific racism and discrimination in health care across the Champlain region. This critical report, authored by Wabano in partnership with the Ottawa Aboriginal Coalition, presents powerful and painful stories that are intended to raise awareness, inspire individual and collective action for change, and build accountability for improvement across the health system.

In addition to highlighting stories, the report identifies common themes across individuals' experiences of poor care and shares recommendations for solutions that have been generated by Indigenous leaders. The report also provides a practical framework for local action to address anti-Indigenous racism. I personally find the framing of the actions according to the 7 sacred, or 7 grandfather teachings – Courage, Respect, Truth, Love, Humility, Honesty and Wisdom – an important lesson in itself about how to counter harmful ways of working with culturally appropriate approaches.

Funded in part by OPH, the report confirms that anti-Indigenous racism negatively impacts the health and wellness of Indigenous peoples and can cause First Nations, Inuit and Métis community members to avoid or delay accessing timely health care. In listening to the stories shared, and taking up the actions and accountability measures proposed in this report, the health system will be better able to ensure service improvement and a more equitable standard of care with Indigenous peoples across the region.



I highly recommend reading the Share Your Story report as part of a commitment to increase understanding of our shared history during National Indigenous History month.

Other examples of OPH collaboration with Indigenous partners on community-identified priorities include participation on and support for the work of the OAC COVID-19 Research Committee as well as the Indigenous Women's Safety Table.

**Reflection** is another principle of reconciliation and an essential part of OPH's commitment to become a culturally safe and humble organization. Following the pilot of the Indigenous Primary Health Care Council's inaugural Foundations of Indigenous Cultural Safety Training course, two facilitated talking circles took place with Elders earlier this year to provide OPH employees with a chance to share lessons learned and ways to apply their knowledge in practice. A third talking circle focused on re-imagining Reconcili-ACTION at OPH.

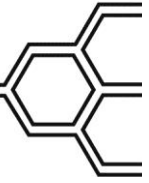
The diversity, equity and inclusion audit carried out by Dr Ariff Kachra, of Strat-ology Consulting has resulted in material and feedback that is starting to prompt systematic reflection at an organizational level. This audit is referred to in the agenda item of information previously distributed related to the City of Ottawa's Anti-racism strategy.

I look forward to a September discussion with the Board on the final report and how OPH will advance the recommendations that have been identified to improve our organization's internal environment and work with equity-deserving groups for better health.

Bringing the final report and next steps to the Board in September will allow a new senior leadership team member with a dedicated mandate for Healthy Equity, Diversity and Inclusion, who we are planning to welcome in mid-July, to assess what is needed to take the recommendations and assist the whole OPH team with the transformation needed.

### **COVID-19 Update**

OPH is now updating our COVID-19 Dashboard twice a week on Tuesdays and Fridays, and we continue to closely monitor the local situation through various indicators. Taken together, these monitoring indicators provide a picture of the levels of COVID-19 in the community and the risk of severe outcomes among Ottawa's population. In addition to updating the [COVID-19 Dashboard](#), OPH is also releasing weekly animated presentations of data trends and key messages to provide timely guidance to residents.



These weekly snapshots are shared through OPH's Facebook and Twitter channels and posted on [OttawaPublicHealth.ca/coronavirus](https://OttawaPublicHealth.ca/coronavirus) – usually on Wednesday afternoons.

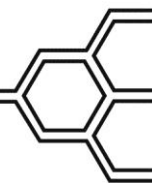
Since last week's update we are now seeing:

- Wastewater viral levels are at a moderate level, having remained above previous lows, and have been increasing over the last week;
- Testing per cent positivity remains at a low level (considering the eligible population, compared to when access to testing changed in December) and is increasing
- New COVID-19 hospital admissions remain low and are stable; and
- New confirmed outbreaks remain at low levels but are increasing.

Hearing and seeing that the wastewater level of COVID-19 and the lab test percent positive are increasing again means we need to become more aware of how to avoid exposure to and transmission of COVID-19, especially if we or those around us are at higher risk of severe outcomes (as described on our website [OttawaPublicHealth.ca/RiskReduction](https://OttawaPublicHealth.ca/RiskReduction)). Isolating when you are ill with respiratory symptoms is important and details on isolation requirements are on our website.

We continue to offer and to promote COVID-19 vaccination, however, the number of people getting vaccinated has been decreasing week over week. Now is the time to \ get the latest booster dose for which you are eligible - this provides important protection from hospitalization and death. / C'est le moment opportun pour rappeler que le fait d'avoir la dernière dose de rappel pour laquelle vous êtes éligible offre une protection importante contre l'hospitalisation et le décès.

Some people under 60 are wondering if they will soon become eligible for another booster dose in Ontario. The latest information I have is that the National Advisory Committee on Immunization (NACI) is likely to release recommendations based on the science for additional COVID-19 booster doses within a month or so. The Ontario Ministry of Health's guidance tends to follow the NACI recommendations. Similarly, we are awaiting guidance on immunization for children under 5 years of age, which is anticipated this summer. In the meantime, there are people of all ages who have fallen behind in accessing COVID-19 boosters. Only 56% of the population has a third dose of COVID-19 vaccine. Getting up-to-date with the vaccine doses you are eligible for is the



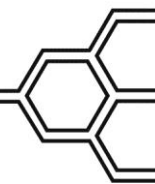
most important step you can take to protect against getting and transmitting COVID-19. There are plenty of walk-in options for vaccination, at pharmacies and public health clinics.

Applying other layers of protection to reduce the impact of COVID-19, such as gathering outdoors, taking steps to improve ventilation when gathering indoors, wearing a mask indoors when physical distancing may be difficult, monitoring for symptoms and staying home when sick are all still very relevant and important through another COVID-19 wave.

Our population level of immunity meant the April-May wave did not result in as many severe illnesses and outbreaks as the December-January wave—with the latest surge there was still a significant wave of hospitalizations and deaths—and we will work with the province to assess and counter signs of increased severity of illness in the coming weeks. The actions we take to decrease COVID-19 may need to be adjusted according to the COVID-19 level to prevent hospitalizations. The course of COVID-19 is unpredictable, with new variants leading to increases in transmission at this time, and ongoing evaluation of the implications required.

What is clear to us at OPH is that efforts to recover from social isolation are also important for the population's health at this point. Re-connecting with friends and engaging in social and physical activities promote health. Therefore, OPH will continue to promote a harm reduction approach to gatherings and continue to keep populations with a higher risk of severe illness as a focus. / Il est clair que les efforts pour se rétablir de l'isolement social sont aussi importants pour la santé de la population. Reprendre contact avec des amis et s'engager dans des activités sociales et physiques favorisent la santé. Par conséquent, SPO continuera de promouvoir une approche de réduction des risques lors des rassemblements et mettra ses efforts sur les populations qui ont un risque plus élevé de maladie grave.

The OPH team has been promoting infection prevention and control practices and ensuring residents and staff in Long-Term Care and Retirement Homes, and other congregate settings are up to date with their vaccinations, given this is a population most at risk. We are also strongly recommending ongoing mask use in all healthcare settings and congregate settings. We continue to expand our presence in neighbourhoods with barriers to accessing health services and translating key information, such as about anti-viral treatment into multiple languages.



We are in a better place in terms of population immunity than we have been but we know the pandemic is far from over. While the hospitalizations for COVID remain low, our hospitals are certainly under strain at this time.

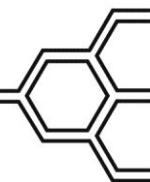
There are multiple drivers of the challenges that hospitals like CHEO are reporting in their emergency rooms and they are better suited to speak to the health system issues. I understand that the flow of people who no longer need hospital care into long-term care settings continues to be challenging. Staffing levels required to catch up on procedures and surgeries and maintain care are demanding to reach in the context of limited health human resources. Primary care providers are juggling many competing priorities while the proportion of Ottawa's population without a primary care provider is significant and increasing, with emergency rooms often being the only healthcare service accessible to many. I am meeting with primary care leaders this coming week to see what solutions OPH may support. I and OPH team members continue to meet with hospital and health system partners on areas of collaboration like Infection Prevention and Control and maintaining access to testing and promotion of anti-virals.

I want to remind people that COVID-19 Assessment Centres and Care Clinics continue to operate in the Ottawa region to help those in our community affected by COVID-19. The *Moodie Care and Testing Centre* (operated by the QCH), the *Ottawa Hospital Clinical Assessment Centre*, the *Kids Come First Clinic* (run by CHEO), and the *East Ottawa Kids COVID Care Clinic* are great additions to primary care. These sites can provide assessment to symptomatic individuals – including children – and provide access to testing and treatment if eligible.

The provincial approach to case and contact management for COVID-19 continues to be limited to follow-up with people who test positive in high-risk settings. As well, we are maintaining data entry for anyone who tests positive by PCR test as an additional source of information.

With changes in the COVID-19 situation and the OPH response, our budget assumptions must also change.

Based on the results of the first quarter of the year, OPH is projecting an over-expenditure for the 2022 fiscal year. Our budget was developed in the fall of 2021, when the COVID-19 situation was improving following access to vaccines. The surge with the more transmissible Omicron variant at the end of 2021 and in the first few months of this year required a larger than predicted response effort, with a greater number of



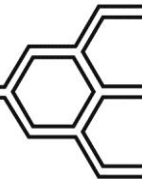
outbreaks in congregate settings than ever, leading to higher than anticipated expenditures. The significant public health effort to provide booster doses to adults and then youth, also required higher than expected staffing related costs.

The extent of the over-expenditure and any potential shortfall will be determined by the continued COVID-19 response, provincial announcements regarding additional vaccine eligibility, and the amount of provincial funding available to offset the extraordinary costs. The Q2 Budget Status Report to the Board of Health, scheduled for the September Board meeting, will provide further updates and a year-end forecast.

On May 2nd, the provincial government confirmed one-time funding of \$22.2M for the on-going COVID-19 response, including \$13.8M for the vaccine campaign. Although this amount does not off-set OPH's projected expenditures to year-end, the Ministry provided all health units with an assurance that, through the Q2 Ministry reporting process, there will be the ability to explain adjustments in assumptions and request additional reimbursement of 2022 COVID-19 Extraordinary Costs, as for 2020 and 2021.

Given these budget pressures, and the decrease of severe COVID-19 in our community and changed provincial guidelines, which bring a decrease in our COVID-related work, we have taken steps to assess what level of response is required for the remainder of 2022 and adjust our budget assumptions accordingly. In deciding where and how much to reduce our workforce at this time, the senior leadership team was guided by a number of criteria. Most significant among those were keeping our ability to respond to a surge of COVID-19, maintaining services that protect populations disproportionately affected by COVID-19, as well as the ability to provide access to additional booster doses of COVID-19 vaccine, alongside pharmacy and primary care and other partners.

Before COVID-19, OPH had approximately 700 employees and hired approximately 3,500 additional employees, many casual and part-time and including 600 full-time at the peak of the response, to ensure we had capacity to meet the needs in the community. This work included immunization, following up with people who test positive and their contacts, help in preventing and managing outbreaks across healthcare and multiple settings, medical consultations, communicating with the wider community and specific audiences, supporting the school community and reaching priority populations in different ways through our Community Engagement Team.



Decreasing our COVID response is part of the OPH recovery roadmap, with a focus on the future state of OPH, identifying the right priorities as an organization, and including our ongoing COVID response work as core public health work. For many teams, such as case management, outbreaks and immunization, demobilizing the COVID response has been taking place in a phased approach over the last few months, while for other teams, the shift to decreasing COVID work has begun and will continue.

I want to thank those who have already moved on from OPH, those who will be leaving us at the end of this month and those who will stay on as we continue to transition to our future state. Temporary employees provided a valuable contribution in supporting our response to the pandemic. We could not have protected and supported the population without their work. / Je tiens à remercier les personnes qui ont déjà quitté SPO, les personnes qui partiront à la fin du mois et ceux et celles qui resteront alors qu'on poursuit notre transition vers notre état futur. Les employés temporaires ont apporté une contribution précieuse en soutenant notre réponse à la pandémie. Nous n'aurions pas pu protéger et soutenir la population sans leur travail.

### **Storm Response**

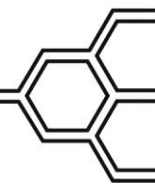
Speaking of surge capacity, the OPH team continues to demonstrate flexibility to adjust to challenges in our community, such as the May 21 storm that affected virtually every area of our City and left 180,000 Ottawa residents without power. The City entered into Enhanced Operations for this severe weather event and mobilized the Emergency Operations Centre to coordinate response activities across City services.

OPH supported the City of Ottawa's Emergency Operations Centre, particularly within the Human Needs and Public Safety Branch, to reach residents who were most affected by the storm during prolonged power outages.

During this enhanced response, OPH's priorities were to ensure continuity of OPH's existing services to the community, disseminate timely and accurate information to residents and operators on food and well water safety, promote mental health supports for the community, as well as support the City's approach for wellness visits.

OPH worked closely with the City's Wellness Visit Task Force and, in collaboration with Ottawa Fire Services and the Canadian Red Cross, teams of nurses were deployed to do door-to-door wellness visits in priority areas. Ottawa residents in need were connected to resources such as meal delivery, referrals to OPH's healthy growth and development program and mental health services, and power chargers provided by





Hydro Ottawa to maintain the operation of medical equipment, including at-home dialysis and **continuous positive airway pressure machine (C-PAP)** machines. OPH employees were also deployed to community support centres to answer questions from residents.

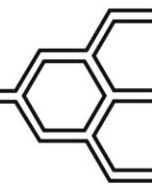
The severe weather response reinforced the importance of leveraging existing relationships and nurturing new partnerships to strengthen community action, create supportive environments, and assist individuals, families, and communities in preparing for, responding to, and recovering from emergencies.

### **Monkeypox**

On June 10<sup>th</sup>, OPH reported the first lab-confirmed case of monkeypox in an Ottawa resident and the Communicable Disease, Sexual Health and Harm Reduction, and Immunization Teams have been pivoting to new work and drawing on others across the organization for additional capacity. The individual has recovered and OPH has followed up with close contacts, including to provide post-exposure prophylaxis vaccination. The risk to the general public at this time is very low.

OPH works closely with the Ontario Ministry of Health and Public Health Ontario, local infectious disease experts and health care providers to respond to cases of monkeypox in the community. We have communicated with local physicians and nurse practitioners to provide information on symptoms, lab testing and diagnosis, infection control practices, treatment and reporting requirements for monkeypox, as well as emerging uses of smallpox vaccine.

On June 16, the Ministry of Health distributed small quantities of vaccine to begin to provide an additional option for vaccinating Ottawa residents who may be at increased risk related to monkeypox. A targeted vaccination effort began over last weekend for people who meet the provincial eligibility criteria and OPH is working closely with the AIDS Committee of Ottawa and with MAX Ottawa to share information with the community not only about risks, symptoms and seeking medical care if individuals suspect they have the virus, but also about who may be eligible for pre-exposure prophylaxis as quantities of vaccine increase. OPH has also engaged with the Gay Men's Sexual Health Alliance to foster `networking, information sharing, and information provision to the groups that, to date, are most affected by Monkeypox. Further, the AIDS Committee of Ottawa will be hosting a Zoom workshop this Thursday, June 23<sup>rd</sup> where Dr. Paul MacPherson will provide community partners with an educational



session on the status of monkeypox. A team member from the Sexual Health team will be present to represent OPH and speak to community members about our efforts to date.

## **Look Ahead**

Looking ahead - At the February Board of Health meeting, I shared OPH's Recovery Roadmap, and I can confirm it continues to be used to align our various strategic initiatives.

We are now in Step 3 of the OPH Recovery Plan. While OPH continues the response to COVID-19, the key action in this step is to identify future priorities as an organization.

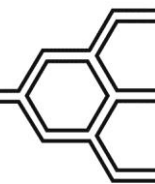
Our employee engagement strategy resulted in over 3,000 ideas being generated while our community partners and community engagement initiative is also yielding a significant number of ideas and suggestions on how we can work with communities in the future.

Important work over the next few months will be to further engage with OPH employees on some of the themes that have emerged. The Recovery Team recently launched a Virtual Data Walk using the Engage Ottawa technology platform. This Virtual Data Walk is an internal interactive activity to share back what we have heard from OPH teams in more detail and to collect feedback and comments on some of the ideas employees would like to pursue into the future.

Many of the ideas generated through our Recovery and Re-imagine process align with current OPH strategic goals of continuously improving and evolving our core work to maximize impact. The bulk of the ideas shared throughout this engagement work have been identified as operational enhancements that we can implement over the coming months as quality improvement initiatives.

We also plan to continue to review ideas generated through our internal and external engagement activities that could be actioned in 2023 and will be integrating new data and findings that may inform and support further analysis and recommendations, including the recent Diversity, Equity and Inclusion Audit and Emergency Response Evaluation, the highlights of which Dr. Gully presented to you earlier this evening.

As per my last update, we remain committed to our Wellness@Work plan promoting training, strengthening leadership development, promoting wellness resources with



employees as well as check-in tools for leaders. We also continue to promote the importance of rest, taking vacation and time off when possible. We are aware that for many recovery remains an aspiration and we are hopeful that people will be able to make the most of the summer. / Nous continuons aussi de promouvoir l'importance du repos, des vacances et des congés lorsque cela est possible. Nous sommes conscients que pour plusieurs, le rétablissement demeure une aspiration et nous espérons que les gens seront en mesure de profiter au maximum de l'été.

As a last update about OPH's capacity to advance priorities into the future, I am happy to report that the Senior Leadership Team role of Director, Stakeholder Relations and Community Engagement will be taken up by Pauline Tam on July 18. Jessica Breckenridge has been working in this role since Ashley Brambles moved to another role with the City of Ottawa and I know you will join me in recognizing that Jessica has provided leadership through a challenging period of change. She has approached the role with care and collaboration, helping the team to set new priorities and keep connected to partners and the public. Thank you, Jessica!

Pauline Tam will be bringing a passion for improving health services, which you may recall from her days as an award-winning journalist with The Ottawa Citizen. Pauline will also draw on experience working in hospital communications, on stakeholder relations and communications for federal Ministers and in the federal public service, where her most recent work included building a new team and working with equity-deserving groups to assess how Statistics Canada can support information-generation that may help advance the well-being of all populations. I anticipate that Pauline's thoughtful and strategic approach to work will include reaching out to Board members over the summer as part of her orientation.

I would be happy to take any questions. / Cela conclut mon rapport verbal. Il me fera plaisir de répondre à vos questions.