

**Report to  
Rapport au:**

**Ottawa Board of Health  
Conseil de santé d'Ottawa  
19 October 2015 / 19 octobre 2015**

**and Council  
et au Conseil  
28 October 2015 / 28 octobre 2015**

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**Submitted by  
Soumis par:  
Dr./ D<sup>r</sup> Isra Levy  
Medical Officer of Health/Médecin chef en santé publique**

**Contact Person  
Personne ressource:  
Lou Flaborea, Account Manager / Gestionnaire  
Financial Services Unit / Unité des services financiers  
Deputy City Treasurer Controller Branch / Direction du trésorier municipal adjoint  
– Contrôleur, Finance Department / Service des finances  
613-580-2424, ext./poste 21728, [Lou.Flaborea@ottawa.ca](mailto:Lou.Flaborea@ottawa.ca)**

**Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE      File Number: ACS2015-OPH-IQS-0010**

**SUBJECT: 2015 OPERATING BUDGET Q2 – BOARD OF HEALTH FOR THE CITY  
OF OTTAWA HEALTH UNIT STATUS REPORT**

**OBJET: BUDGET DE FONCTIONNEMENT 2015 AU DEUXIEME TRIMESTRE –  
RAPPORT D'ÉTAPE DU CONSEIL DE SANTÉ DE LA  
CIRCONSCRIPTION SANITAIRE DE LA VILLE D'OTTAWA**

## **REPORT RECOMMENDATIONS**

**That the Board of Health for the City of Ottawa Health Unit:**

- 1. Receive this report for information.**
- 2. Recommend that Ottawa City Council approve the creation of five full-time equivalents, which are 100 percent provincially funded, to provide dental health services for Ottawa's Urban Aboriginal Community at the Wabano Centre for Aboriginal Health.**

## **RECOMMANDATIONS DU RAPPORT**

**Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa :**

- 1. reçoive ce rapport à titre d'information;**
- 2. recommande au Conseil municipal d'Ottawa d'approuver la création de cinq emplois équivalents temps plein, financés entièrement par la Province, afin de fournir des services de santé dentaire à la communauté autochtone urbaine d'Ottawa au centre de santé autochtone Wabano.**

## **BACKGROUND**

The purpose of this report is to present the Board of Health with the 2015 Q2 operating results for Public Health Programs. Ottawa Public Health (OPH) management actively reviews quarterly results to ensure that spending and revenue results are not indicative of any underlying issues needing to be highlighted or addressed.

The 2015 operating budget second quarter results present actual year-to-date revenues and expenditures against the amounts budgeted for the corresponding period.

## **DISCUSSION**

### **Provincial Funding Update**

Funding for cost shared public health programming was reflected in the 2015 budget with a projected 2.0% increase from the province (\$568K). On September 4, OPH was informed of a 6.4% base funding increase (\$1,818K), resulting from changes to the provincial funding model outlined in Document 3.

The impact of this additional funding on the traditional cost shared formula (75% provincial and 25% municipal) allows for Ottawa's municipal contribution level to be

reduced from 28% to 26.5%, moving closer to the funding formula. The additional funding will also be used in 2015 to offset the extraordinary costs related to the implementation of the *Immunization of School Pupils Act*.

Additional base funding was also received for the 100% provincially funded Healthy Smiles Ontario Program (\$55.7K), the Harm Reduction Program Initiative (\$16.3K) and the new *Electronic Cigarettes Act* Protection and Enforcement Program (\$54.9K).

The Ministry approved \$213.8K in one-time cost shared funding requests for: Special Events Public Health Inspector (\$41.3K), Communications Plan for Enhanced Point-of-Sale Disclosure (\$60K), Environmental Health Web Application (\$37.5K) and Building an Urban Aboriginal Health Strategy (\$75K). One-time 100% provincial funding was approved for the *Electronic Cigarettes Act* Protection and Enforcement (\$54.9K), Expanded Smoking Cessation Programming for Priority Populations (\$22.5K), and a Public Health Inspector Practicum Placement (\$10K). All one-time funding is available until March 31, 2016.

### **Dental Clinic at the Wabano Centre for Aboriginal Health**

In 2014, OPH received 100% provincial capital funding to build a dental clinic at the Wabano Centre for Aboriginal Health. In September 2015, the Ministry also provided on-going 100% provincial base funding to support operations for this dental clinic. OPH recommends that City Council, through the Board of Health, approve the creation of five new full-time equivalent positions for clinic staff who would work at the clinic to provide treatment and prevention services care to Aboriginal children, youth and adults as well as outreach in the broader aboriginal community. Increasing access to oral health treatment and preventative services for Ottawa's Aboriginal community will improve equitable and timely access to oral health care. Finally, this clinic will ensure services are provided in a culturally safe space.

### **Q2 Operating Results**

Based on the results to June 30, 2015, OPH is projecting a break-even position for the current fiscal year. At the end of the second quarter, there was a planned surplus in cost shared programs. This was created in anticipation of a significant retroactive adjustment related to the settlement of the outstanding collective agreements with CIPP and CUPE, which both expired on December 31, 2013. Given a current city-wide staffing freeze and recently announced increases to provincial funding levels for OPH cost shared programs, OPH anticipates balancing its compensation budget by year-end.

Document 1 provides operating budget details on second quarter results for the various Ontario Public Health Standards. Financial information is presented by funding type, which includes cost shared (75% province and 25% municipal); City funded (100% municipal); and provincial or federal funded (100% provincial or federal) along with a breakdown by specific program.

Document 2 provides compensation information showing the actual salary, benefits and overtime costs incurred by OPH during the corresponding period.

**Table 1: Summary of Q2 2015 Results**

<b>2015 Q2 Status Report</b>	<b>Annual Budgeted Expenditures (\$000)</b>	<b>Annual Budgeted Provincial Revenue (\$000)</b>	<b>Annual Budgeted Municipal Revenue (\$000)</b>	<b>YTD Net Surplus / (Deficit) (\$000)</b>
<b>Ottawa Public Health</b>	<b>54,751</b>	<b>42,441</b>	<b>12,310</b>	<b>330</b>

### **Q2 Compensation Results**

Document 2 shows the operating status for OPH compensation expenditures up to June 30, 2015. The current financial information shows OPH has spent 51% of its total compensation budget in the first half of 2015 operations.

### **Operating Budget Adjustments and Transfers**

A summary of the budget adjustments and transfers made, either through the delegated authority given to the Medical Officer of Health or through Board and Council-approved reports is included in the quarterly operating status reports. Table 2 identifies the budget adjustments that were made to reflect the provincial funding announcement.

**Table 2: Summary of Q2 2015 Operating Budget Adjustments**

<b>Description</b>	<b>Increase / (Decrease) Expenditures (\$000)</b>	<b>Increase / (Decrease) Revenue (\$000)</b>	<b>Increase / (Decrease) Net Budget (\$000)</b>
Cost Shared Programs	500	1,250	-750

Healthy Smiles Ontario	-174	-174	0
Healthy Smiles Ontario (Wabano Dental Clinic)	209	209	0
Harm Reduction	16	16	0
Smoke-Free Ontario	110	110	0
Workplace Smoking Cessation	12	12	0
One-time Cost Shared	214	214	0
<b>Total</b>	<b>887</b>	<b>1,637</b>	<b>-750</b>

### **2016 Budget Planning Process**

The [Proposed 2016 Budget Timeline and 2016-2018 Budget Directions](#) report, approved by the City of Ottawa Finance and Economic Development Committee on October 6, 2015, outlines the City's 2016 budget direction and timelines. Based on the report, the draft 2016 Board of Health operating budget will be tabled on November 9, 2015 and presented to the Board for approval on December 7, 2015.

OPH has begun to identify operational pressures for 2016 that address the 2015-2018 Strategic Directions and are service critical. This activity will help to inform the Board of Health's 2016 budget.

### **RURAL IMPLICATIONS**

There are no rural implications to this information report.

### **CONSULTATION**

The purpose of this report is administrative in nature and therefore no public consultation is required.

### **LEGAL IMPLICATIONS**

There are no legal impediments to implementing the recommendations of this report.

### **RISK MANAGEMENT IMPLICATIONS**

There are no risk management implications associated with this report.

## **FINANCIAL IMPLICATIONS**

As outlined in the report.

## **ACCESSIBILITY IMPACTS**

There are no accessibility impacts associated with this report.

## **SUPPORTING DOCUMENTATION**

DOCUMENT 1 - Ottawa Public Health 2015 2<sup>nd</sup> Quarter Operating Status Report

DOCUMENT 2 - Ottawa Public Health 2015 2<sup>nd</sup> Quarter Compensation Status Report

DOCUMENT 3 – September 4, 2015 letter from Dr. Eric Hoskins, Minister of Health and Long-Term Care to Councillor Shad Qadri, Chair, Ottawa Board of Health

## **DISPOSITION**

Upon approval by City Council, staff will implement recommendation 2 of this report.