



Sudbury & District Board of Health 2010 Cost-Shared Operating Budget

City of Greater Sudbury Council

Dr. Penny Sutcliffe

Medical Officer of Health/Chief Executive Officer

Monday, November 23, 2009





2010 Cost-Shared Operating Budget Summary

- Total of \$21,706,897
 - 2.4% overall increase over 2009
 - 2.2% municipal levy increase
 - 3.0% provincial grant increase
- Within a context of fiscal constraint:
 - Maintains 2009 service level
 - Enhancement to children's dental program
 - Maintains critical capacity to respond to emergent issues

Public Health Funding Process

Legislative Basis

Boards of Health approve the budget:

...shall give annually to each obligated municipality in the health unit a written notice...of the amount that the board of health estimates will be required to defray the expenses...[required for the performance of the board's functions and duties]

Municipalities are required to pay:

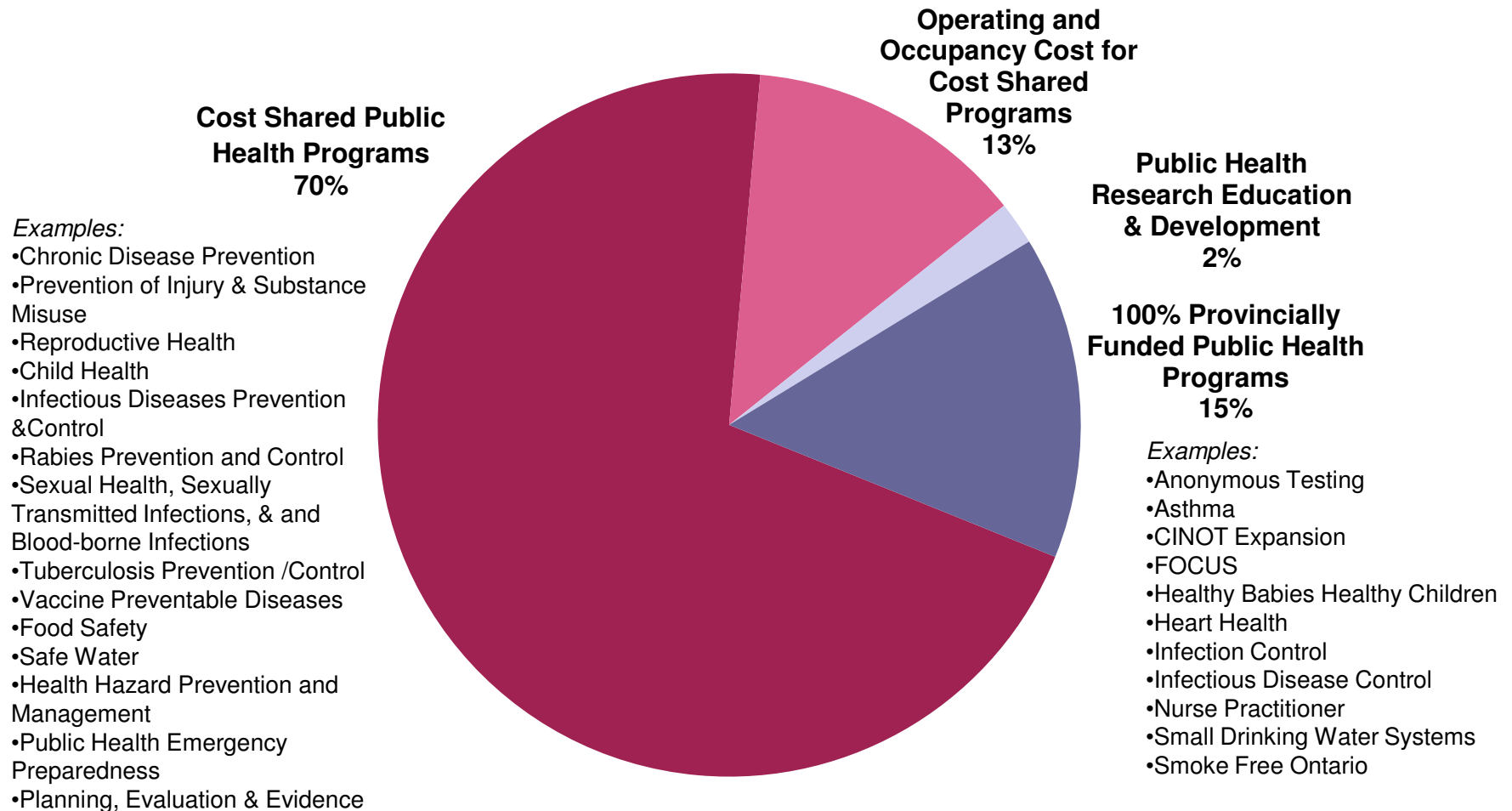
...shall pay the expenses incurred by or on behalf of the board of health [or MOH] of the health unit in the performance of its functions and duties under this or any other Act.

The Minister may make grants:

...may make grants for the purposes of this Act on such conditions as he or she considers appropriate.

Source: Health Protection and Promotion Act

Total 2010 Budget Cost-Shared and 100% Provincial



November 23, 2009

SDHU 2010 Cost Shared Operating Budget

*Note: Figures based on 2009 MOHLTC approved funding

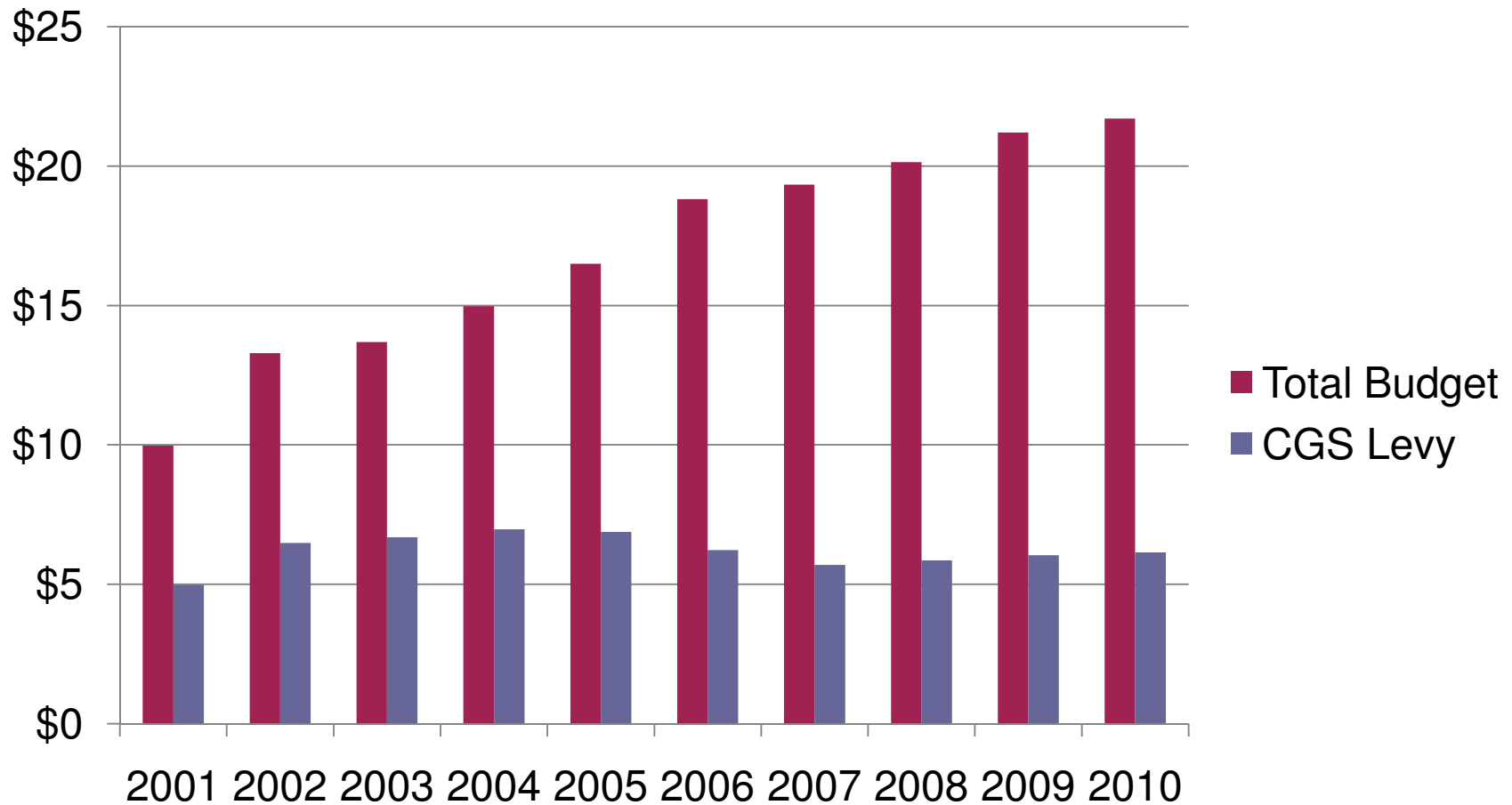
Budget Background

Provincial funding envelope has recently provided for an overall growth allocation of no more than 5% to boards of health

- *...unlikely that the increases that have been available in recent years will continue in future years... plan budgets based on minimal increases* (MOHLTC October 2009)

SDHU Budget History

Total Cost-Shared & CGS Levy



Budget Background

New Ontario Public Health Standards approved and effective January 1, 2009 requiring more evidence-informed practice

Leveraging our history as a teaching health unit (PHRED – Public Health Research Education and Development Unit)

Budget Background

Breakdown of 2.4% overall increase:

- 2.2%** to maintain programs including common cost drivers such as negotiated settlements, staff movement on salary grids, benefits
- 0.2%** to maintain operating expenditures

Budget Details

Expenditures

Expenditures	Contribution to overall increase	Comparison with 2009 budget line
Salary	1.5%	2.3%
Benefits	0.7%	4.5%
Non-salary	0.2%	1.0%
Total budget	2.4%	

SUDBURY & DISTRICT HEALTH UNIT

Approved 2010 Budget

Municipal Levy (excluding VBD Contingency)

	2009	2010
Total Budget (excluding VBD contingency)	20,707,239	21,206,897
VBD Contingency (to be billed separately)	500,000	500,000
Total Budget	21,207,239	21,706,897
Municipal Levy	6,040,138	6,149,905
Municipal Levy - Vector Borne Disease	18,713	21,646
Municipal Levy - Infectious Disease Control	-	-
Municipal Levy PHRED	-	-
Municipal Levy CINOT Expansion	-	50,046
Total Levy**	6,058,851	6,221,597

	2009 Population*	% Population	2009 Levy	2010 Levy	Difference	Monthly Billing
Assignack (Township of)	814	0.445%	26,720	27,686	966	2,307
Baldwin (Township of)	556	0.304%	18,419	18,914	495	1,576
Barrie Island (Township of) ***	0	0.000%	1,636	0	-1,636	0
Billings (Township of)	488	0.266%	15,874	16,549	675	1,379
Burpee and Mills (Township of)	309	0.169%	10,906	10,514	-392	876
Central Manitoulin (Township of)	1,731	0.945%	58,165	58,794	629	4,900
St. Charles	1,220	0.666%	41,443	41,436	-7	3,453
Chapleau (Township of)	2,329	1.272%	80,764	79,139	-1,625	6,595
French River	2,382	1.301%	88,520	80,943	-7,577	6,745
Espanola Town	4,991	2.725%	168,073	169,539	1,466	14,128
Gordon Township	467	0.255%	13,996	15,865	1,869	1,322
Gore Bay Town	784	0.428%	25,629	26,628	999	2,219
Markstay-Warren	2,623	1.432%	87,975	89,093	1,118	7,424
Northeastern Manitoulin & the Islands (Town)	2,232	1.219%	76,342	75,841	-501	6,320
Naim & Hyman (Township)	433	0.236%	13,996	14,683	687	1,224
Killarney	408	0.223%	13,451	13,874	423	1,156
Sables-Spanish River (Township of)	2,864	1.564%	96,760	97,306	546	8,109
City of Greater Sudbury	158,154	86.364%	5,208,791	5,373,220	164,429	447,768
Tehkummah (Township of)	340	0.186%	11,391	11,572	181	964
TOTAL	183,125	100%	6,058,851	6,221,597	162,746	518,466
Per Capita Rate			33.26	33.97	0.72	

Per Capita Increase/-Decrease over previous year **2.2%**

* Population data per 2009 Ontario Population Report, Municipal Property Assessment Corporation, Oct 2009

** The above levy excludes VBD Control Measures Contingency. It will be billed only if expenditures deemed necessary by the Medical Officer of Health.

*** Amalgamated with Gordon Township

H1N1

Public Health in the News

Sudbury fights H1N1

High-risk groups urged to get shot

Health Unit to expand H1N1 vaccination groups

Vaccine has added protection

H1N1 influenza tightens grip around Sudbury

Grippe A H1N1

Volunteers screening for fevers, coughs

Working with area schools

City's vaccination clinics appear well-organized: nurse

'That's public health – to get them before they get sick'

'That's public health - to get them before they get sick'

Posted By CAROL MULLIGAN, THE SUDBURY STAR

Updated 14 days ago



The Sudbury Star Sudbury Star reporter Carol Mulligan says the H1N1 shot didn't hurt a bit, despite the grimace. Public health nurse Brenda Stankiewicz made the experience educational and even fun. Star photo

Word of advice on the H1N1 flu shot

Posted By COLLEEN ROMANILUK, FOR THE SUDBURY STAR

Updated 17 days ago



Al Crobedu gets a H1N1 vaccine from public health nurse Karly Cook at the immunization clinic held at the Capreol Arena last week. Gino Donati/The Sudbury Star

Home > Sudbury News

Sudburians line up for hours to get new vaccine



This was the scene today at the Tom Davies centre in Lively, as residents lined up to get their flu shots. People had to wait over three hours to receive the vaccine.

[watch the video](#)

[view the photo gallery](#)

Oct 30, 2009

By: Sudbury Northern Life Staff

At Lockerby Composite, the rumour is some 300 students and around 10 teachers came down with the H1N1 virus and we are still counting. Not many people I knew were sick until one night when a sick friend paid a visit. Turns out, he gave it to almost everyone I knew. I had contact with, including me. This is not a regular flu and it has officially

poster child for the flu shot. Actually, the only time I decided to get it, maybe I gave in to the myth that it causes you to get the flu, or maybe I ironically, this year, the day before the H1N1 vaccine was made I didn't think it was serious at first, just a tickle in my throat, but by an unrelenting cough and a fever. Being a high school student, I had that "it would be worse to me."

I went to the clinic on time was run though. number about 9 Posted

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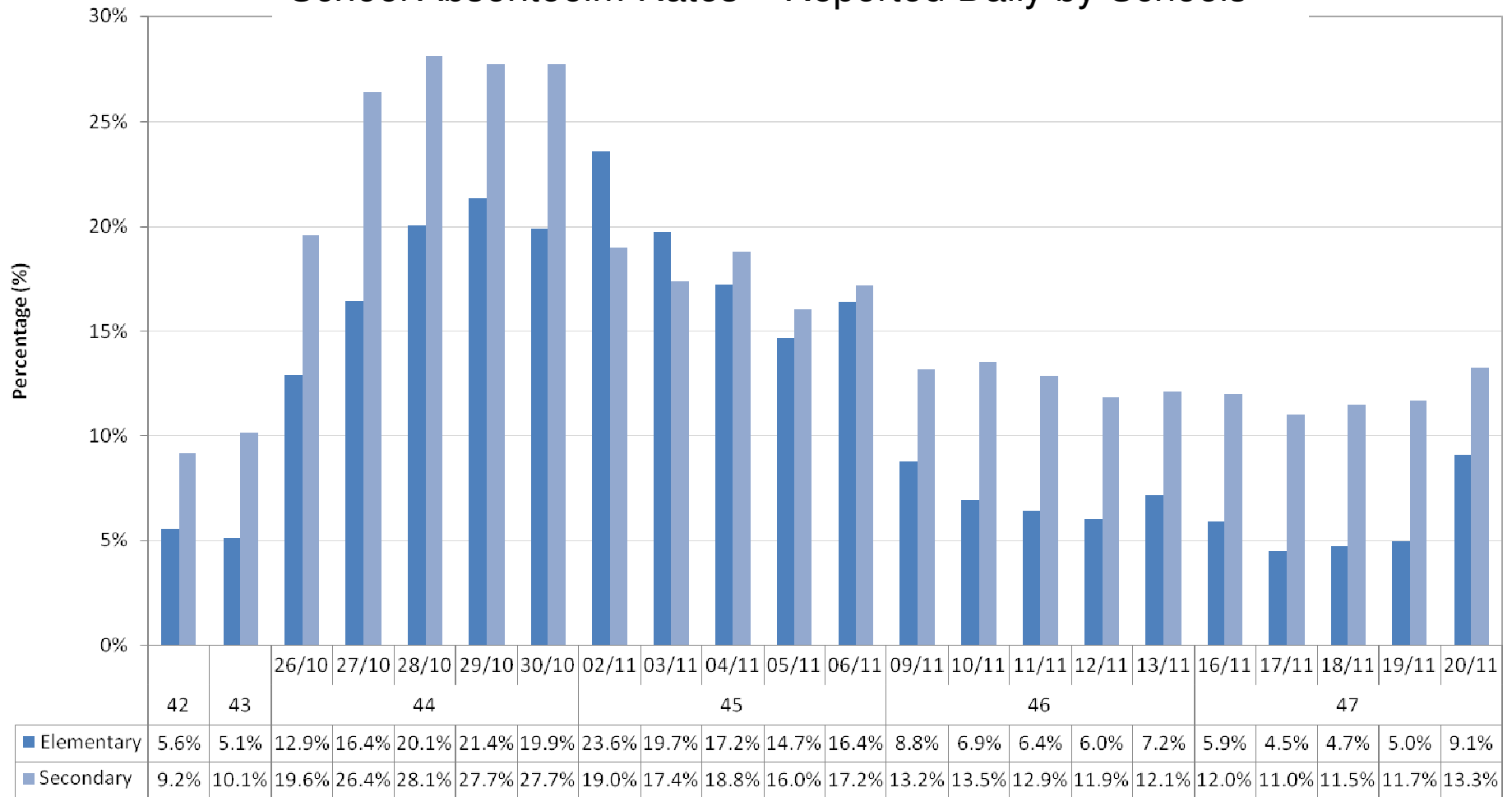
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Contact the

SHARE

H1N1 Surveillance: Partnership

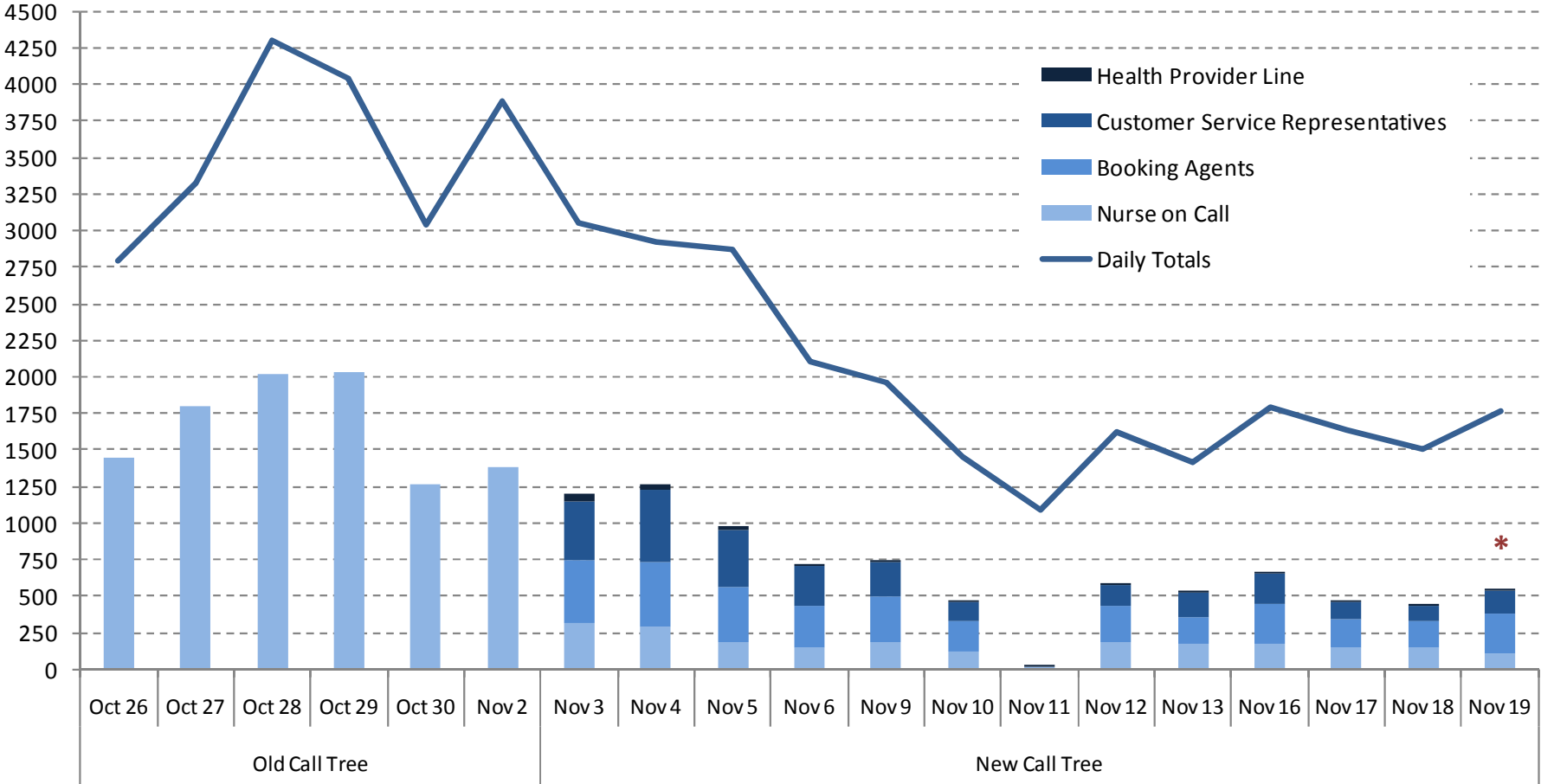
School Absenteeism Rates – Reported Daily by Schools



Week/Date

H1N1 Response: Surge Capacity

SDHU Telephone Response

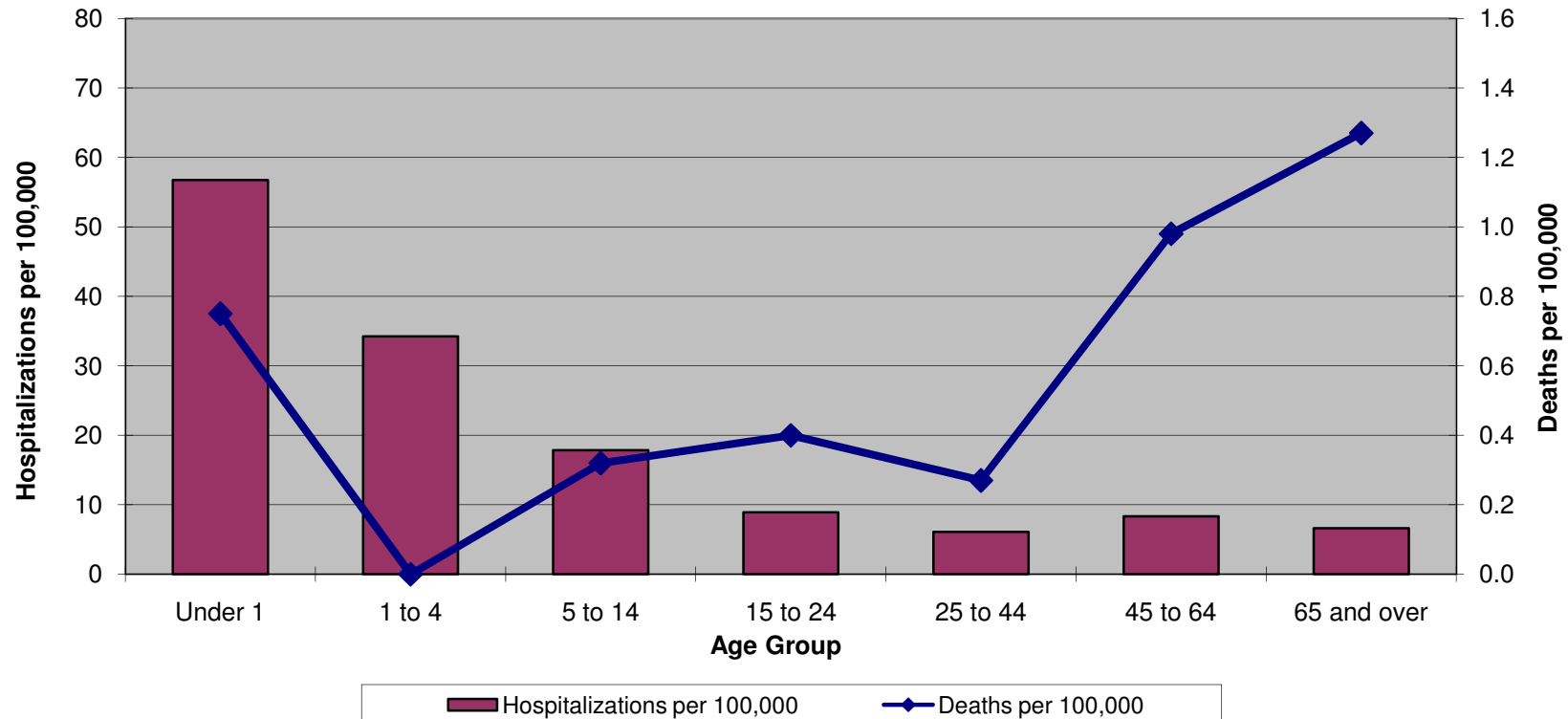


* The general population became eligible for the pH1N1 vaccine

Why get vaccinated? Who's at risk?

Ontario pH1N1 Cumulative Hospitalizations and Deaths by Age Group per 100,000

(Data from Ontario Pandemic (H1N1) 2009 Virus Epidemiologic Summary, 18 Nov 2009)



Overall hospitalization rate: 10.26 per 100,000
Overall death rate: 0.61 per 100,000

Budget 2010 Conclusion

- Cost-shared budget of \$21,706,897
- 2.4% overall increase
 - 2.2% municipal levy increase
 - 3.0% provincial grant increase
- Maintains 2009 program and service level
 - While incorporating capacity to respond to new program requirements and emerging issues

Make it a
**Healthy
Day!**

Sudbury & District Health Unit
Service de santé publique de Sudbury et du district



**Strategic Plan
2010-2012**

*Working with our communities to promote
and protect health and to prevent disease.*

Strategic Priorities

1 Champion equitable opportunities for health in our communities.

- Reduce social and economic barriers to healthy choices
- Address a broad range of underlying factors that impact health
- Support all communities to reach their full health potential

2 Strengthen relationships with priority neighbourhoods and communities, and strategic partners.

- Invest in relationships based on community needs and opportunities
- Help build capacity in others
- Monitor our effectiveness at working in partnership

3 Strengthen the generation and use of evidence-informed public health practices.

- Implement effective processes and outcomes
- Apply surveillance, evaluation and research results
- Exchange knowledge, internally and externally

4 Support community voices to speak about issues that impact health equity.

- Facilitate diverse community engagement
- Support advocacy and policy development at local and provincial levels
- Tailor programs and services to reflect community voices and needs

5 Maintain excellence in leadership and agency-wide resource management as key elements of an innovative learning organization.

- Cultivate a skilled, prepared, and responsive workforce
- Invest resources wisely
- Build capacity



Sudbury & District

Health Unit

Service de
santé publique





Vision:

Healthier communities in which the Sudbury & District Health Unit plays a key role.

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