





February 10, 2020

Jim Pine
Special Advisor on Public Health and Emergency Health
Ministry of Health
5<sup>th</sup> Floor
777 Bay Street
Toronto ON M7A 2J3

Dear Mr. Pine,

The Wellington-Dufferin-Guelph Public Health (WDGPH) unit plays an invaluable role delivering critical public health services in each of our communities. Together, the County of Wellington, Dufferin County and the City of Guelph are pleased to see the province broadly consulting on public health enhancements. Given the municipal relationship to public health, we are keen to contribute to these discussions and share Ontario's goal of improving public health service delivery for the benefit of our residents.

As Ontario continues to look for improvements to public health service-delivery, we urge the Ministry of Health to consider the following municipal input:

### Protect municipal governments and property taxpayers from fiscal risk and increased costs

Our municipal governments have made significant property-tax funded investments in public health infrastructure that are above and beyond what is required of our communities. WDGPH owns two facilities primarily financed by municipal property tax dollars. Our municipal governments also continue to have external debenture obligations for these facilities.

Should amalgamations occur, current legislation suggests that these property tax-funded assets would be transferred over to the new public health unit without compensation to the contributing municipalities. Since WDGPH may be amalgamated with neighboring communities that have not made comparable investments, there is a risk that the new unit would have capital and real estate needs our municipalities would be required to fund in addition to what has already been invested locally. These scenarios would be unfair to local residents and taxpayers currently serviced by WDGPH. They would also create fiscal risk for our municipal governments.

A change in the cost-share formula would also put additional financial tension on the property tax base. Public health costs cannot be downloaded to municipal governments without risking an increase in property taxes for our residents.







To protect municipal governments and property taxpayers:

- ✓ Amend Section 77(2) and 77(3) of the Health Protection and Promotion Act, 1990, to ensure assets cannot be transferred without compensation in the event of a public health merger if the assets have been financed primarily by municipal governments beyond cost-share obligations.
- ✓ Ensure the value of past and existing municipal investments to public health above and beyond current payment obligations are considered part of the municipal cost-share.
- ✓ To advance good asset management, ensure that funds for capital needs and maintenance are set aside by public health units as part of the budgeting process.
- ✓ Maintain the current 70/30 breakdown between the province and municipal governments for cost-shared programs as well as 100% provincially funded programs.
- ✓ Should mergers occur, any resulting implementation and restructuring costs should be borne by the province and not property taxpayers.

## Maintain the relationship to municipal social services

The strong relationship that has formed between our municipal governments and WDGPH has led to successful service delivery and innovative partnerships that have benefited our residents. It is important that the relationship between municipal social services and public health be preserved and enhanced as part of reforms.

The Province should invest in public health and social service partnerships that work together jointly to address the social determinants of health and make value-added local interventions.

#### Create boundaries that make sense for our communities

Public health works best when it is locally-focused and well-connected to other social and health services available in the community. It is critical that any new boundaries, mergers or regional health units arising from reforms reflect the needs and realities of the communities they will serve.

- ✓ Align any new public health geographic boundaries with existing municipal boundaries, the new Ontario Health Teams, and social services delivery areas
- ✓ Ensure mergers reflect residents' geographic patterns of health service access and utilization
- ✓ Build on current partnerships between public health, social services, and other community providers







# Protect municipal representation and expertise on the Board of Health

Currently, the WDGPH Board is comprised of representatives from each of our municipalities to reflect municipal contributions and the local interest in public health. This governance model is key in fostering alignment between municipal and public health objectives. It has also facilitated local collaboration and ensured residents have access to a public health unit open to prioritizing and supporting the needs of its local communities.

The current 70/30 cost-share arrangement between the province and municipal governments is also tied to local governance and the municipal ability to influence public health service provision. Reducing the municipal presence on Boards of Health would strain this relationship and potentially create political challenges.

To eliminate these potential pitfalls in a new governance model:

- ✓ The City of Guelph, Dufferin County and Wellington County should continue to have representation on the Board of Health.
- ✓ Serving as a municipally elected official should count as sufficient qualification and expertise to sit on a Board of Health.

#### **Next Steps**

The current consultation on public health modernization should serve as the foundation for further discussions on public health restructuring if consolidations are to occur. More municipal engagement will be necessary to discuss a smooth transition and overall implementation once the Province has determined its preferred service-delivery model. A steady and thoughtful approach is important to ensure service quality and continuity, to protect the property tax base, and to maintain value-adding coordination with key municipal social services.

Should you have any questions or require more information on this submission, please contact Kate Sullivan, Acting Manager of Policy and Intergovernmental Relations for the City of Guelph at <a href="mailto:kate.sullivan@guelph.ca">kate.sullivan@guelph.ca</a>. Our municipal governments would also be pleased to host you for regional consultations on public health and emergency medical services should you be in the area.

Sincerely,

Scott Stewart Chief Administrative Officer

City of Guelph

Scott Wilson Chief Administrative Officer County of Wellington Sonya Pritchard

Sonya Pritchard
Chief Administrative Officer
County of Dufferin