

2025 BUDGET

FOR

GENERAL PROGRAMS

SUPPORTED BY THE
CURRENT ONTARIO PUBLIC HEALTH STANDARDS,
PROTOCOLS, AND GUIDELINES
(Requirements for Programs, Services, and Accountability)

GENERAL PROGRAMS

The Road Ahead

&

2025 Budget

&

Priorities

STRATEGIC VISION, MISSION, AND VALUES



THE ROAD AHEAD…

The 2025 budget for Southwestern Public Health (SWPH) aims to ensure better health outcomes through evidence-based planning, addressing public health priorities, opportunities, issues, and challenges in the upcoming fiscal year, recognizing what we do in 2025 has an impact well beyond one year.

The budget builds on our strengths, including a robust evidence-based approach to program planning, an effective monitoring and evaluation system, a skilled and dedicated workforce, and strong community partnerships to position us well to make measurable improvements in the health of our communities. It also considers areas of improvement including enhancing community understanding of the role of public health and our readiness to support rapid population growth and diversification highlighting the need for targeted investments.

Opportunities to expand services and find efficiencies through strategic collaboration with municipal and community partners and innovations in technology offer pathways to growth, while threats like changing political climates and priorities, pending changes to the Ontario Public Health Standards, and increasing demands for services require prudent financial and strategic planning. This budget aims to capitalize on our strengths and opportunities while addressing challenges, ensuring we continue to meet the needs of our community both effectively and sustainably.

Key Considerations, Opportunities, Challenges, and Pressures

At the time of this report, the Ministry of Health has not yet shared any decisions regarding the *Strengthening Public Health* provincial strategy with local public health agencies. SWPH remains prepared to review and adapt as needed. This coming year's programs and budget reflect a "steady course" approach given potential changes in funding and mandate in 2026. Notably, the two remaining elements of the provincial strategy include:

- Potential changes in public health roles and responsibilities by re-scoping the Ontario Public Health Standards (OPHS). The new Standards may include changing what public health is responsible for locally and what may be developed more regionally or provincially. The Ministry has confirmed that since the release of the new Standards is delayed, local public health agencies are to plan 2025 using the existing Standards, and we can expect to see the new version in the coming months for implementation after 2025.

- Restoring some provincial funding of the provincial cost-share changes made in 2020, confirming a 1% provincial base budget increase in 2025, and reviewing public health funding methodology for implementation in 2026.

This context sets the stage for several key factors shaping SWPH's approach in 2025 and beyond:

1. **Strategic Planning in 2025**: Another reason for the "steady course" is the 'in development' strategic plan that will be considered in mid 2025 for launch in the 2026 year. Recent data collection efforts have provided a trove of relevant information that emphasizes the importance of local, evidence-informed, data-driven strategies, and that work will inform the planning done by staff for the 2026 year in conjunction with the priorities articulated in the upcoming 5-year strategic plan.

2. **Population Growth**: The population of the SWPH region grew by more than 8% between the 2016 and 2021 Census. That is 2.5 times more growth than the previous 5 years and we are projected to keep growing 2% a year each year. Some of the smaller urban centres in the region are growing even faster.

3. **Diseases of Public Health Significance (DOPHs)**: SWPH has absorbed the management of clinical and outbreak support for newly designated illnesses, including Covid-19, without dedicated provincial funding for this added respiratory disease. While these costs have been factored into this budget, SWPH will continue to request additional funding from the Ministry of Health to help offset the ongoing financial burden, particularly as Covid-19 remains a persistent public health concern.

4. **Emergency Preparedness**: Prioritizing emergency preparedness is essential and aligns with the strategic decisions made by the Board in 2023. This commitment focuses on collaboration with municipalities, community partners, and local leaders to improve readiness for unexpected events. Additionally, it includes integrating valuable lessons learned from the challenges posed by the pandemic.

5. **Short to Mid-Term Outcomes**: Much of public health's impact is measured over decades. The Board and staff have reiterated the importance of including program work that achieve short to mid-term health improvements within a 3–5-year horizon.

6. **Collaboration with Partners**: Continued collaboration with municipalities and other community partners, recognizing and respecting each organization's different priorities, and recognizing that so much of public health's work is not done alone.

7. **Health Human Resources**: This area continues to be challenging for many sectors and public health is no exception. It is vital that SWPH continue to focus on attracting top talent and retaining existing talent that align with our organization's values and culture.

8. **Expenditure Challenges** including:
    - An approximate 17% increase in our employee group benefit plans across all employee groups driven by claim experience, utilization, rising service costs, and fee guide increases. This has been a recurring trend, and SWPH is not alone in facing this challenge. Health units in the province are also projecting increases in the range of 11% to 24% for 2025.
    - Collective Agreement bargaining will commence in 2025 with one of our union partners whose current agreement expires on December 31, 2024.

The 2025 budget for Southwestern Public Health is more than just numbers; it reflects a commitment to the well-being of our communities and the dedication of the Board and staff to being wise stewards of resources. The choices we make regarding program and service delivery have a lasting impact on the health and safety of those we serve. This budget was developed to uphold the direction set by the Board of Health, to maintain its program and service momentum, and to be ready for what may lie ahead for public health in Ontario in 2025 and beyond.

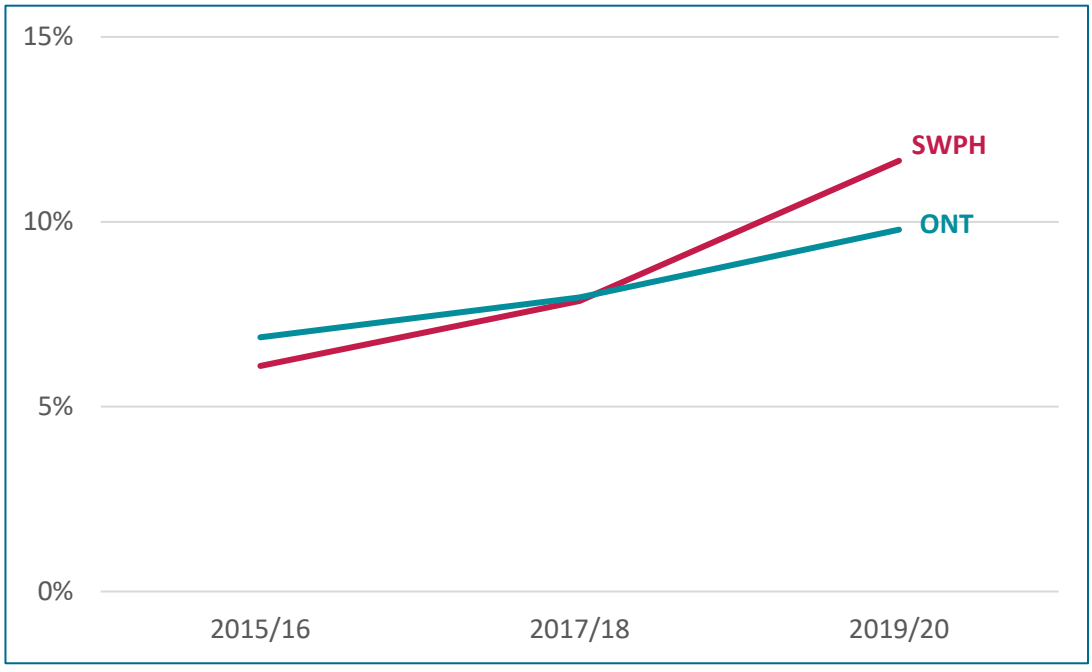
POPULATION HEALTH HIGHLIGHTS

This summary highlights some key public health issues in the Southwestern Public Health (SWPH) region. Understanding local needs is critical for informing the development and delivery of programs and services to improve population health.

Mental Health

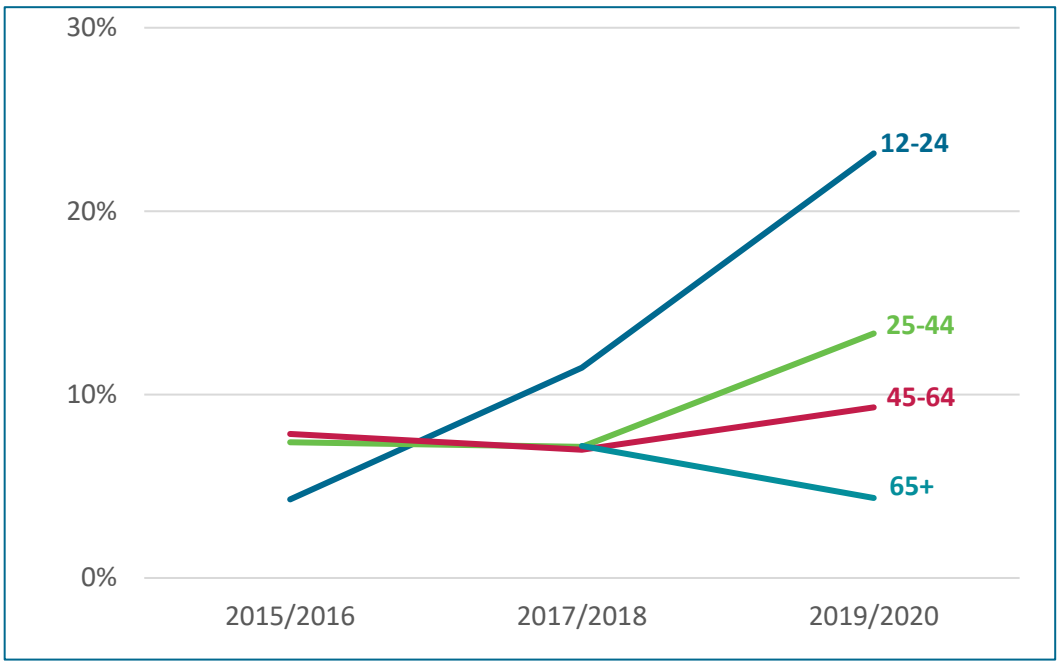
Evidence suggests that the mental health of the population has declined in recent years. Statistics Canada conducts the Canadian Community Health Survey (CCHS) and collects data from people across the country regarding their health and wellbeing. The proportion of CCHS respondents, aged 12 and over, who rated their mental health as fair or poor has increased over time, both locally and provincially. In the SWPH region, the proportion almost doubled between 2015/16 and 2019/20 (6.1% vs. 11.7%) (Figure 1).

Figure 1. More people rate their mental health as fair or poor in 2019/20 compared to 2015/16



Examining self-perceived mental health by age group, it can be seen that the proportion of SWPH respondents aged 12-24 years old who rated their mental health as poor or fair was over 5x higher in 2019/20 compared to 2015/16 (23.2% vs. 4.3%) (Figure 2).

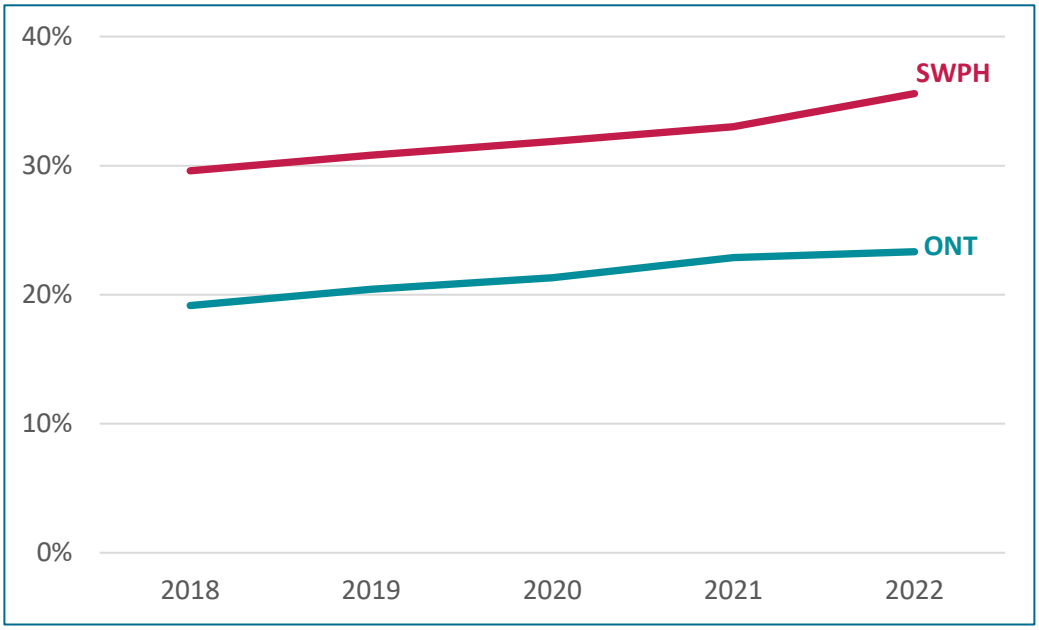
Figure 2. Locally, over 5x more 12–24 year-olds rated their mental health as poor or fair in 2019/20 compared to 2015/16



Maternal Mental Health

Mental health concerns during pregnancy were higher locally compared to the province. In 2022, around 1 in 3 pregnant women (35.6%) who lived in the SWPH region experienced mental health issues, predominantly anxiety and/or depression (Figure 3).

Figure 3. Locally, 1 in 3 pregnant women experienced mental health issues in 2022



Tobacco use during pregnancy was highest among women aged 24 and under; however, usage has decreased among this age group in recent years, from 18.7% in 2018 to 12.7% in 2022 (Figure 4). Cannabis use during pregnancy was also highest among women aged 24 and under with 16.0% of local pregnant women in this age group reporting using it in 2022, up from 12.6% in 2020.

Figure 4. Tobacco use during pregnancy was highest among women aged 24 and under, however has decreased in recent years

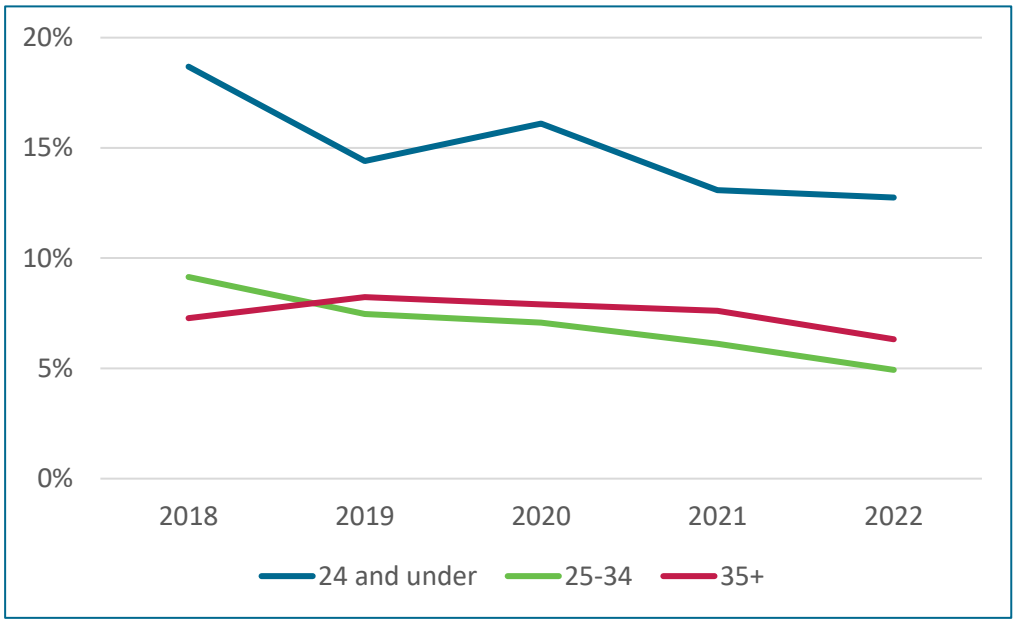
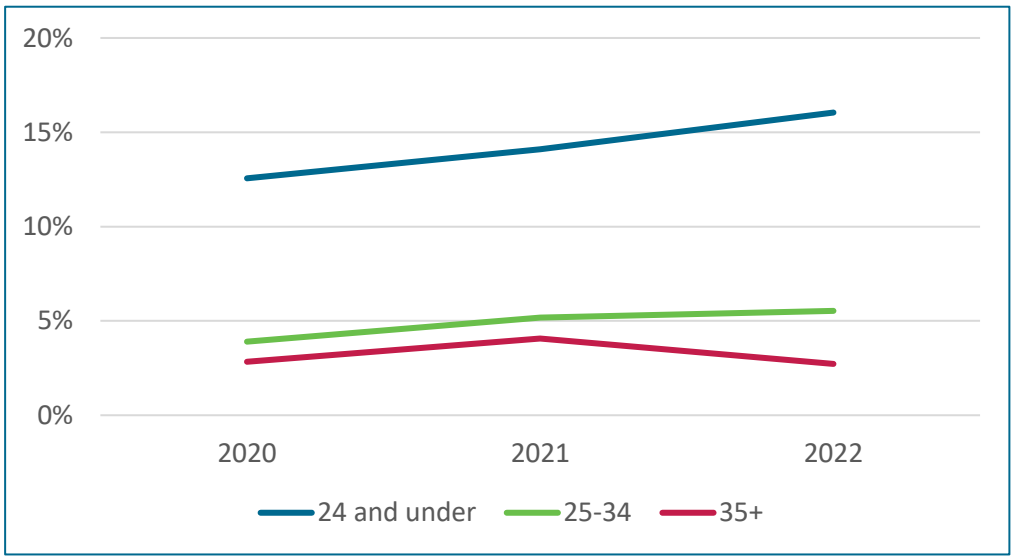


Figure 5. Cannabis use during pregnancy was highest among women aged 24 and under and use increased between 2020 and 2022

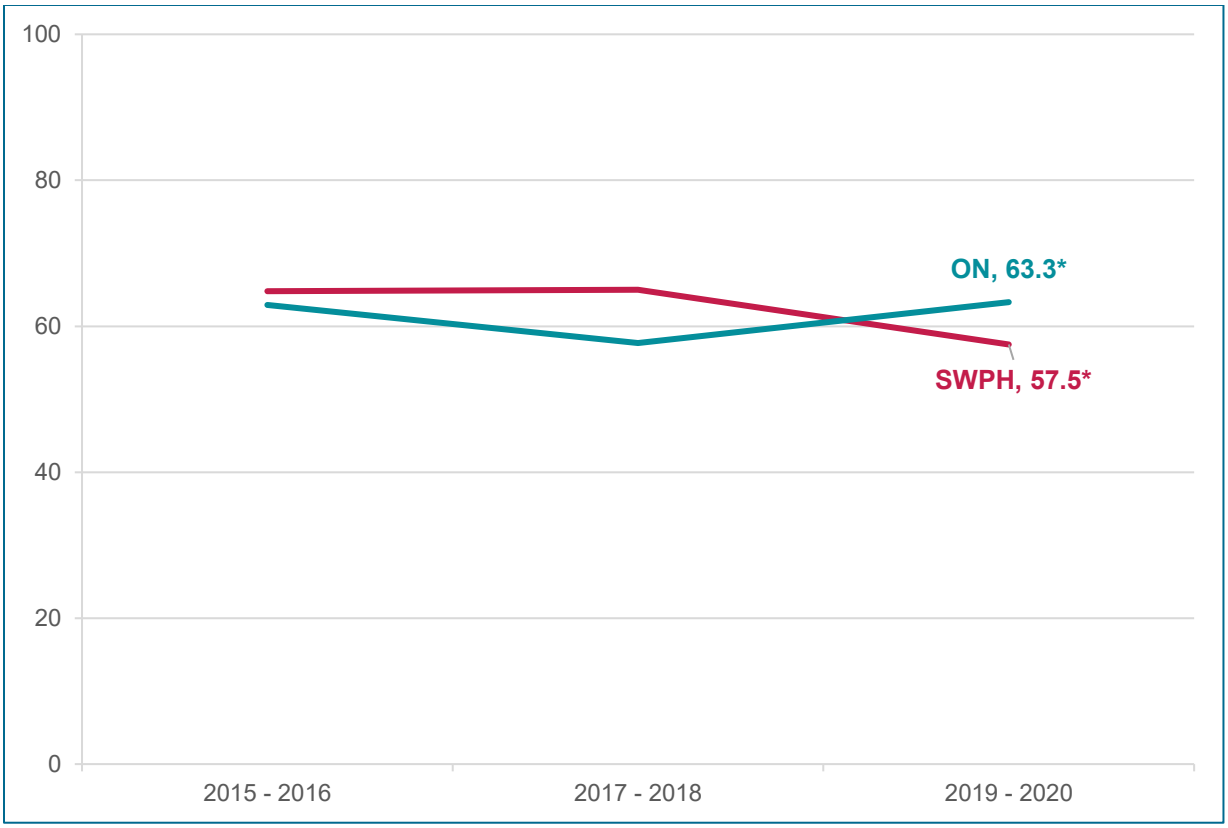


Adverse Childhood Events (ACEs)

Adverse childhood events (or ACEs) are events that are potentially traumatic, occurring in childhood (to children between the ages of 0 and 17 years). These events can include experiencing violence, or something in a child's environment like having a parent with a substance use or mental health disorder.

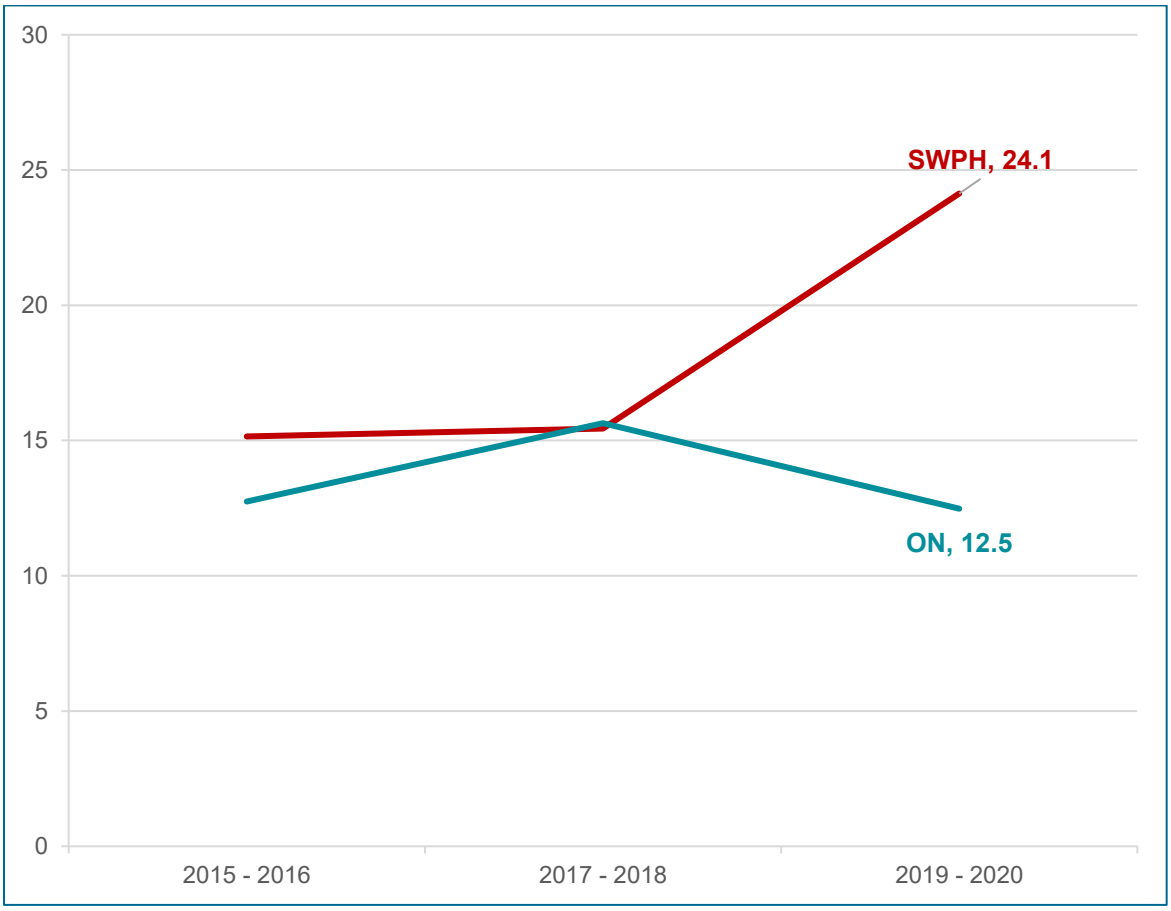
According to the Canadian Community Health Survey (CCHS), a large proportion of parents (approximately 58%) in the SWPH region report being either a regular drinker, smoking cannabis, or using another illicit drug (Figure 6). This has remained relatively stable over time and is comparable to parents across Ontario (approximately 63%).

Figure 6. The proportion of parents in the SWPH region reporting being a regular drinker or using cannabis or illicit drugs is comparable to that of parent across Ontario



The proportion of parents in the SWPH region who self-reported that they had been diagnosed with a mental health condition (in this case, this is either an anxiety disorder or a mood disorder) has increased substantially between 2015/16 and 2019/20 (Figure 7). In 2019/20, the local proportion was more than 10% higher than parents in Ontario (24.1% vs. 12.5%, respectively).

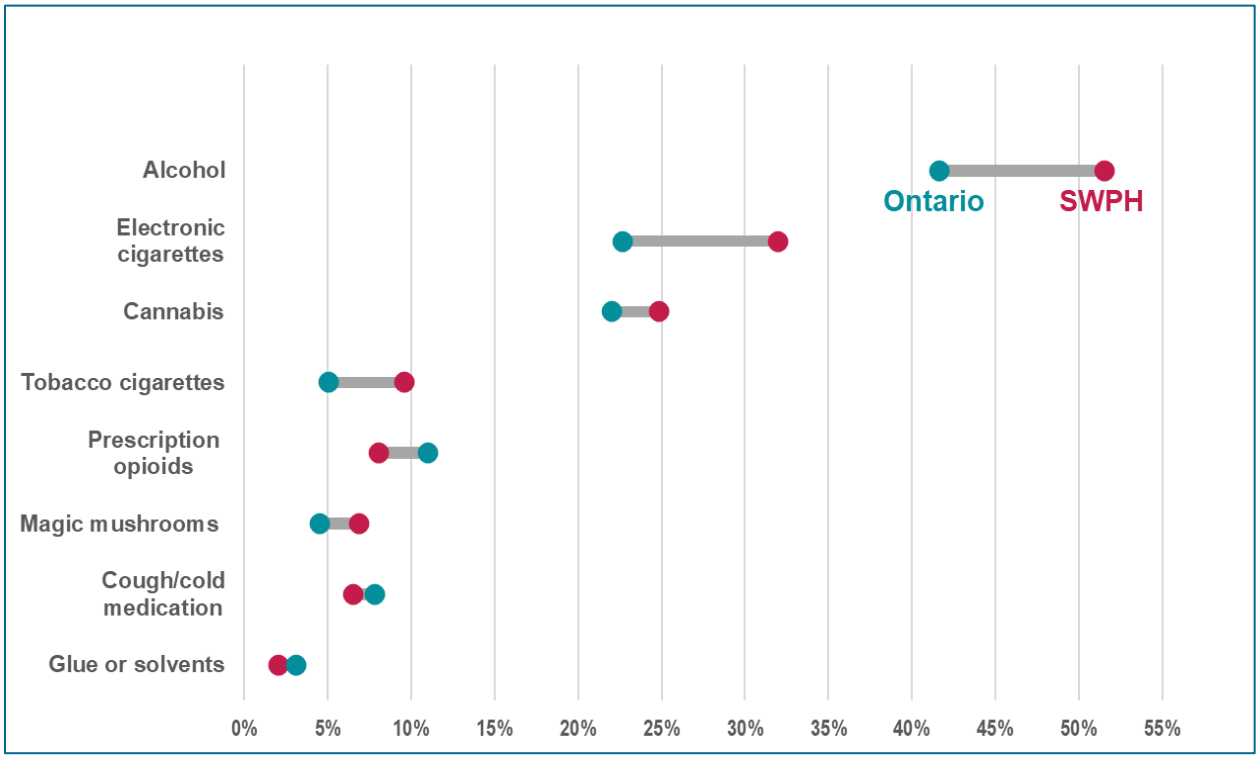
Figure 7. There was an increase in the proportion of parents in the SWPH who reported having either a mood or anxiety disorder in 2019/2020



Youth Substance Use

Local youth report using alcohol, tobacco, e-cigarettes, cannabis, and magic mushrooms more than youth in Ontario. Over half of local youth report drinking alcohol in the last 12 months, approximately 10% higher compared to youth in Ontario. However, the use of tobacco was the most significant as 2x more youth in the SWPH region reported smoking than youth in Ontario (Figure 8). Local youth also think that it is easy to access alcohol (82%), tobacco (68%), cannabis (65%), and prescription pain relief (26%).

Figure 8. Over 50 percent of SWPH youth report having consumed alcohol in the last 12 months compared to 42 percent of youth across Ontario.

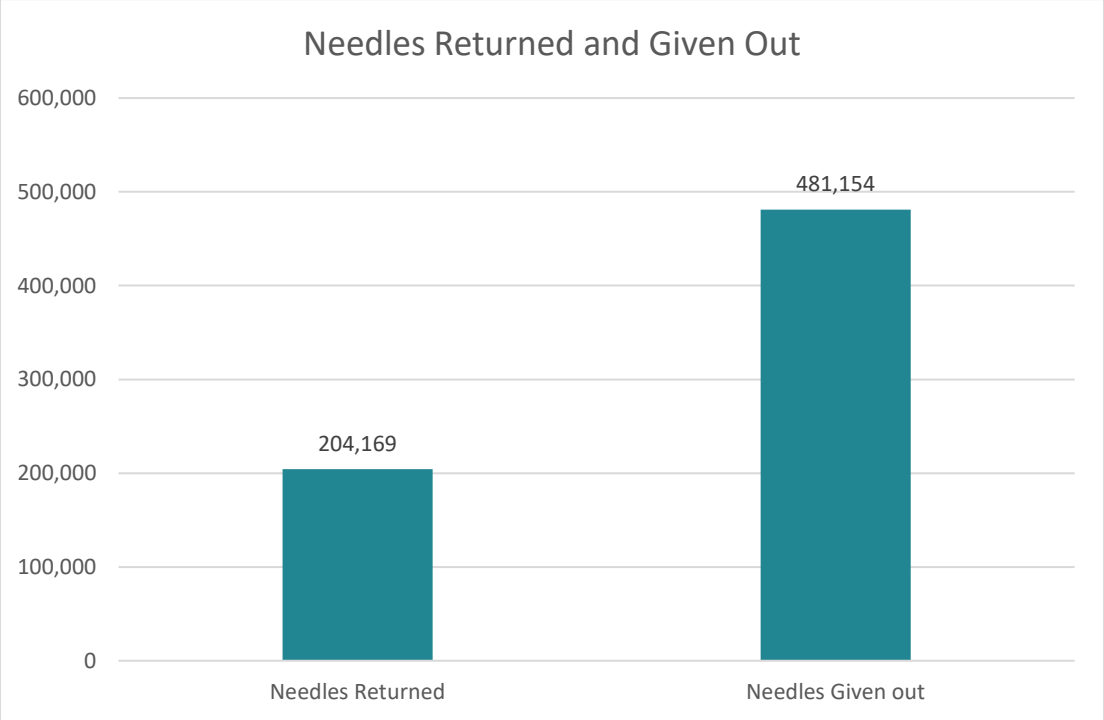


Harm Reduction

The improper disposal of needles and harm reduction supplies has long been acknowledged as a serious public health challenge in our communities. The needle syringe program remains a critical component of SWPH's approach to reducing the risk of blood-borne infections among people who use substances. With rising concerns about substance use in the region, this program provides essential services, including needle exchange and the distribution of naloxone kits.

In 2023, SWPH facilitated the safe disposal of over 204,169 thousand sharps, while providing 481,154 thousand sharps, resulting in a commendable return rate of 42.4%. With 32 access points throughout the region for the return of sharps, we have significantly enhanced community access and engagement in safe disposal practices. This strong performance highlights the program's effectiveness in promoting public health and underscores the importance of continuing our community sharps program to maintain these vital services.

Figure 9.



In 2023 at Southwestern Public Health Units 728 naloxone kits were distributed to clients and community members. There were also 8,728 naloxone kits distributed by pharmacies in the SWPH region, contributing to overdose prevention efforts.

Figure 10.

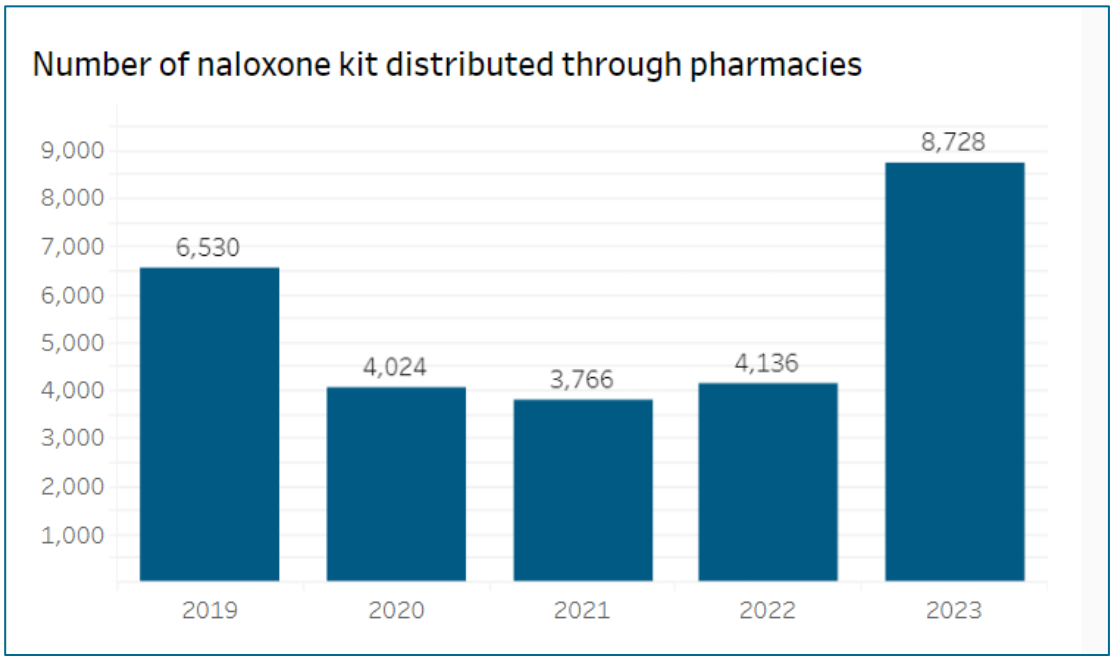
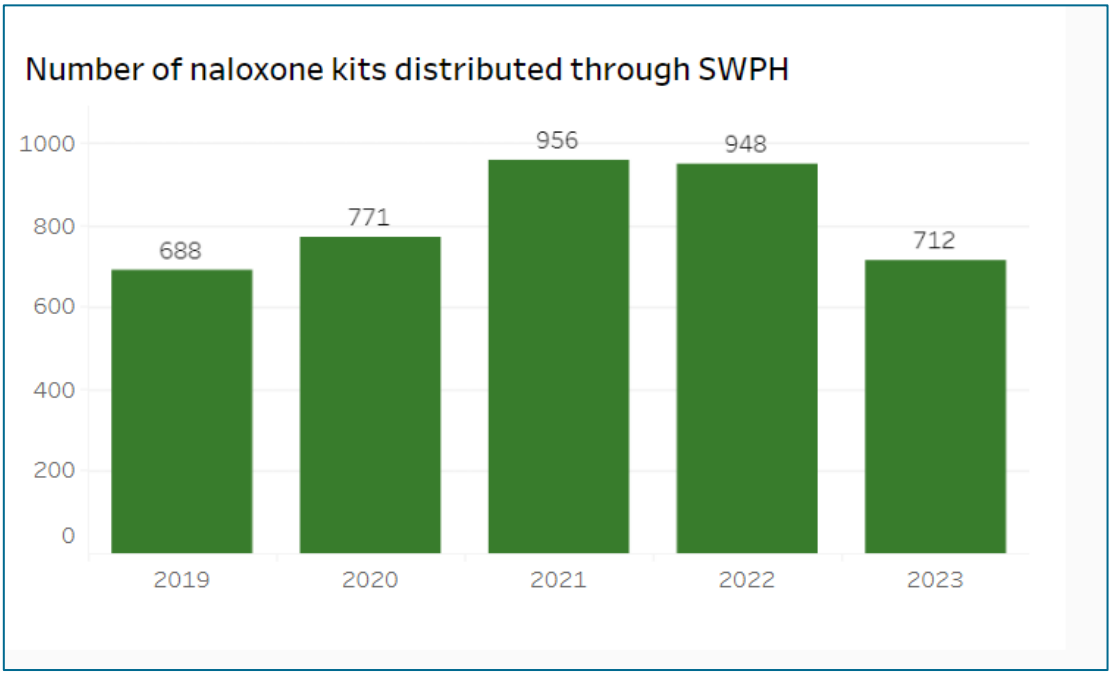


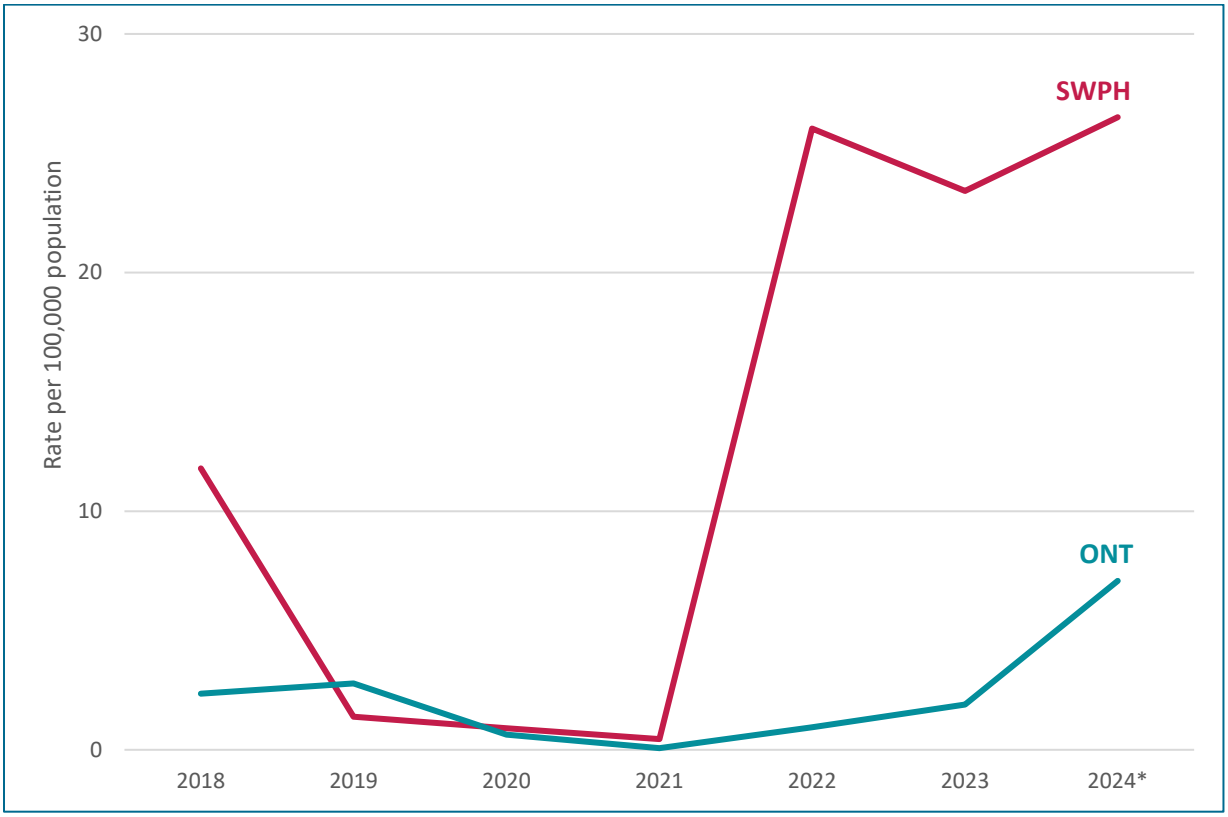
Figure 11.



Respiratory Illness

Pertussis is a respiratory illness that is most severe in children under 1 year of age, especially for those who are unvaccinated or under-vaccinated. Pertussis comes in waves locally that are typically not seen on a provincial level. However, in 2024, many health units across the province are experiencing an increase in pertussis cases, driving up the provincial rate (12).

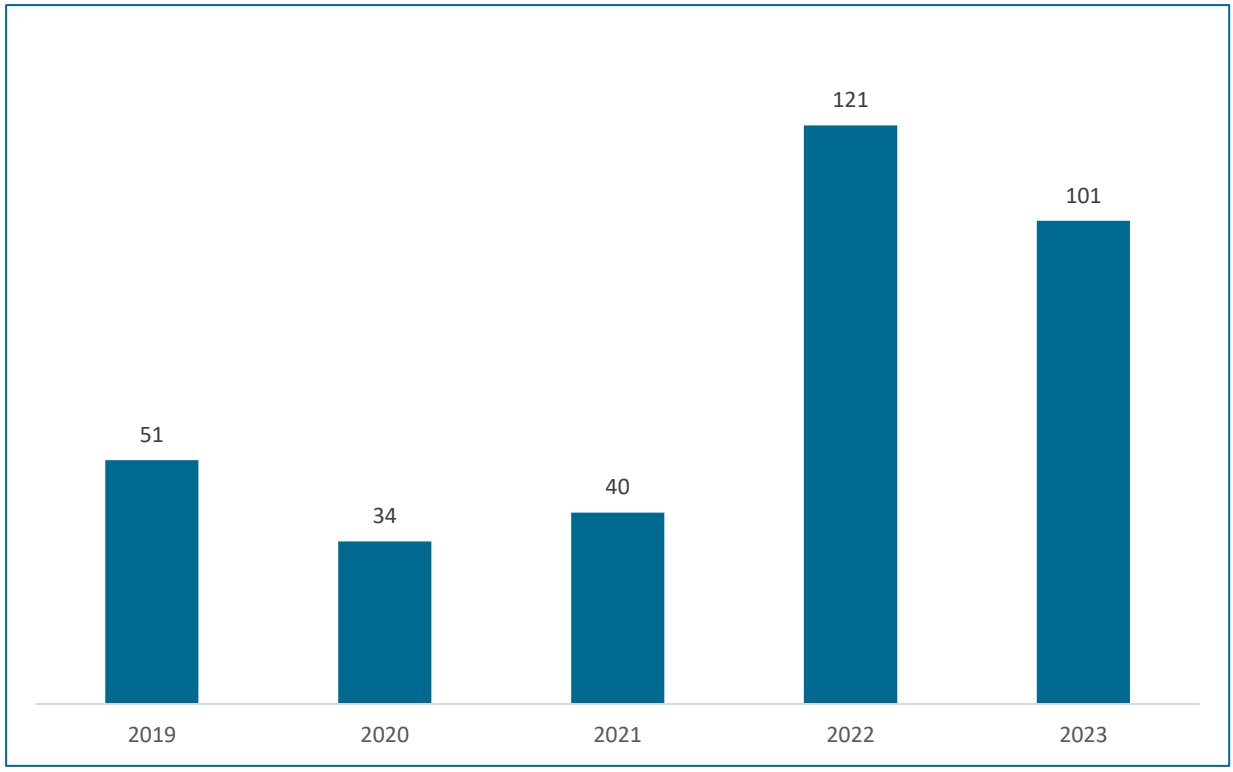
Figure 12. In recent years pertussis rates have been high locally and in 2024 the provincial rate increased



*2024 is a partial year of data, extracted on October 7, 2024

The COVID-19 virus is responsible for the majority of institutional outbreaks in the SWPH region. In 2022 and 2023 there was a large increase in confirmed respiratory outbreaks in institutions, including retirement homes, long-term care homes and hospitals (Figure 13).

Figure 13. There was an increase in the number of confirmed institutional respiratory outbreaks in 2022 and 2023



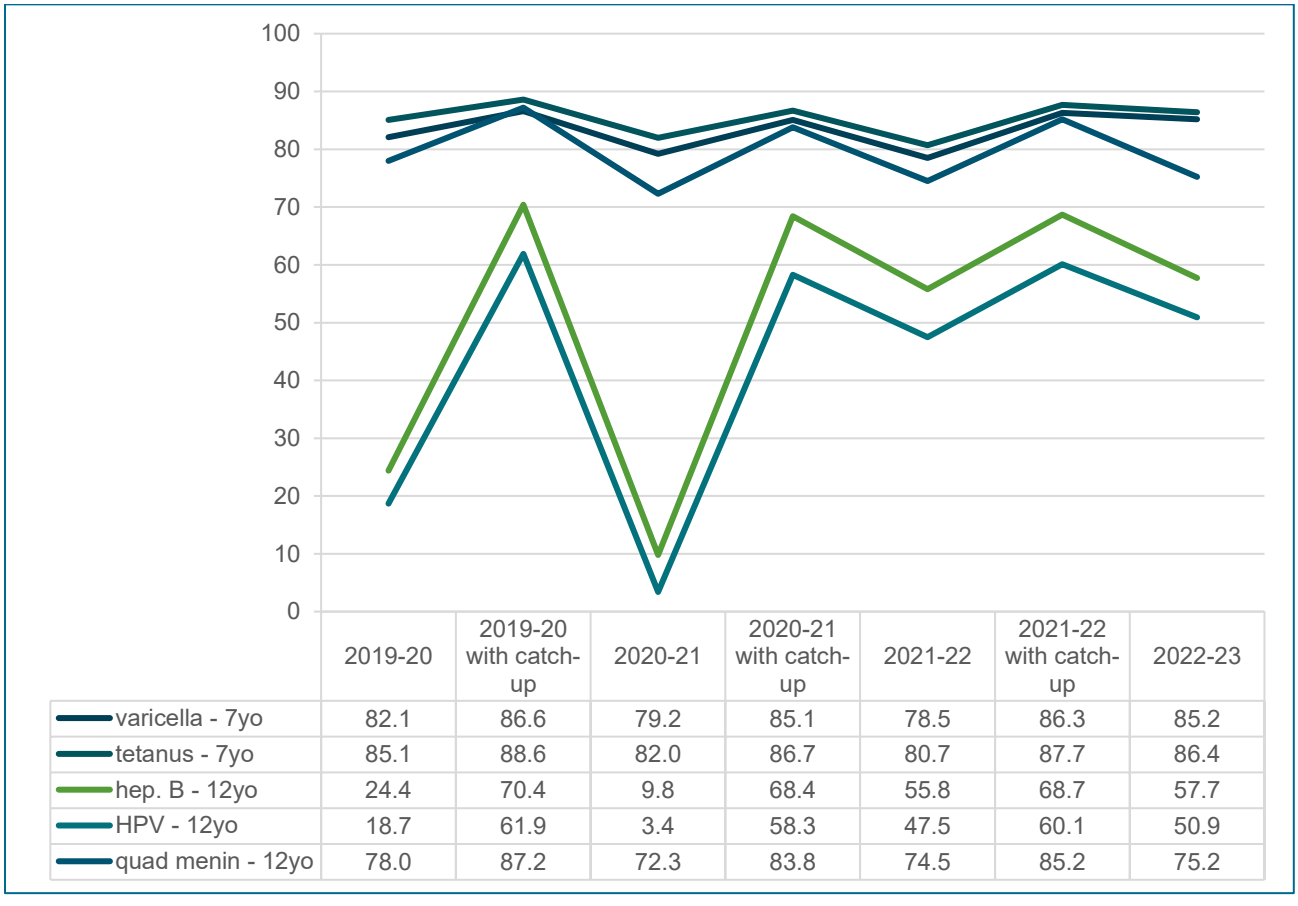
Immunizations

The COVID-19 pandemic affected the up-to-date (UTD) immunization coverage rates for school-aged children across the province for several school years which has resulted in a need for additional “catch-up” activities.

It is expected that coverage rates for the 2022/2023 school year, for these particular vaccinations, as well as some others not pictured (measles, mumps, and rubella for example), will be back on track following public health catch-up (Figure 14).

The most pronounced increases in coverage over time occurred for the HPV and MCV4 vaccinations, which increased by more than 10% after catch-up activities, compared to 4-7% increases observed for the varicella and tetanus vaccinations (Figure 14).

Figure 14. SWPH catch-up activities have been getting more students up-to-date (UTD) on several vaccinations each school year since the onset of the COVID-19 pandemic



	2019-20	2019-20 with catch-up	2020-21	2020-21 with catch-up	2021-22	2021-22 with catch-up	2022-23
varicella - 7yo	82.1	86.6	79.2	85.1	78.5	86.3	85.2
tetanus - 7yo	85.1	88.6	82.0	86.7	80.7	87.7	86.4
hep. B - 12yo	24.4	70.4	9.8	68.4	55.8	68.7	57.7
HPV - 12yo	18.7	61.9	3.4	58.3	47.5	60.1	50.9
quad menin - 12yo	78.0	87.2	72.3	83.8	74.5	85.2	75.2

2025 GENERAL PROGRAM BUDGETS

STRATEGIC ALIGNMENTS

Strategic Alignments Highlights:

Southwestern Public Health (SWPH) plays a crucial role in building strategic partnerships and engaging community partners and municipalities within Oxford County, Elgin County, and the City of St. Thomas to develop healthy public policy that supports community priorities through various initiatives. Through public health's expertise and mandate to protect and promote community health, SWPH engages with diverse partners to create collaborative solutions that improve health outcomes, reduce disparities, and enhance community resilience.

SWPH's partnership and collaboration mandate fosters impactful partnerships in several key areas. This includes partnerships with school boards on the promotion of healthy relationships, thereby increasing a sense of belonging and contributing positively to physical, mental and emotional well-being. It also supports coordinated efforts with municipalities and first responders to enhance emergency readiness. Our commitment to partnership is evident in all our clinical services and healthy growth and development initiatives, involving healthcare providers such as physicians, nurse practitioners, and dental practices. This mandate means we work alongside long-term care homes and other congregate living settings to protect our most vulnerable. Also, municipal partnerships inform policies on planning, housing, climate change adaptation and mitigation strategies, as well as food security through income-based interventions.

SWPH plays a crucial role in mobilizing the community to implement essential initiatives. This involves gathering diverse stakeholders, including municipalities, healthcare providers, local businesses, community organizations, and residents, to collaborate on complex issues affecting the community. These issues require coordinated efforts and the pooling of resources that support the implementation of shared and local priorities established through plans such as Safe and Well and the Community Drug and Alcohol Strategies. SWPH also partners with businesses by offering guidance, resources, and training to help owners and operators understand and comply with health regulations such as food safety and recreational and drinking water standards, all of which contribute to the overall well-being of the community.

Participation in coalitions and similar bodies addresses critical community issues, including mental health and addictions, housing, poverty, and climate change. In addition to bringing people together and mobilizing the community, SWPH often supports these coalitions with data and evaluation assistance to ensure that initiatives and strategies are evidence-based and adaptable to the changing needs of the community. SWPH plays a vital role in enhancing collaborative efforts to advance the community in an impactful, equitable, and sustainable way, ultimately improving health outcomes.

2025 GENERAL PROGRAM BUDGETS

SUPPORTING COSTS

Supporting Costs Highlights:

Public health is expected to achieve compliance with the standards outlined in the Ontario Public Health Standards Accountability Framework in the areas of grants and budget, delivery of programs and services, fiduciary requirements, good governance and management practices, and public health practice.

SWPH is required to comply with its accountability agreements between SWPH and applicable Ministries. Some requirements include:

- ✓ Delivery of all provincially mandated programs and services outlined in the current Ontario Public Health Standards
- ✓ Quarterly and annual financial reporting
- ✓ Asset inventory and office equipment maintenance
- ✓ Effective procurement practices
- ✓ Updating development of, and adherence to, policies and procedures
- ✓ Ensuring adequate board of health orientation and development
- ✓ Developing and maintaining strategies in the areas of communications, human resources, information technology, risk management, program evaluation, and stakeholder engagement

This involves leadership and support across the organization in the areas of:

- ✓ Board governance including standing committees and ad hoc committees where applicable
- ✓ Accountability and performance target monitoring
- ✓ Fiscal due diligence and financial management
- ✓ Privacy of health information and personal information
- ✓ professional practice and continuous quality improvement
- ✓ Strategies to support internal and external communications to applicable audiences
- ✓ Staff committees/working groups to support program delivery and compliance
- ✓ Oversight of building and rental costs of three facilities as well as maintenance
- ✓ Information technology management including hardware/software licenses, and protection of data
- ✓ Emergency management and business continuity planning
- ✓ Insurance
- ✓ Legislative compliance, risk management, and legal matters

One-Time Funding Request
100% Provincially Funded

2025

Budget and Highlights

Included:

- *Public Health Inspector Practicum Program*
- *Sharps Program*
- *Infection Prevention and Control (IPAC) Hub*

One-Time Funding Request
100% Provincially Funded

Project Title:

Public Health Inspector Practicum Program

Public Health Inspector Practicum Program Highlights:

a. To provide a practicum for two students who are enrolled or who already have a degree in a program of instruction approved by the Canadian Institute of Public Health Inspectors (CIPHI) Board of Certification (BOC).

b. To be eligible to sit the Examination to obtain the Certificate in Public Health Inspection (Canada), every candidate must satisfactorily complete a twelve (12) week minimum practicum in the basic inspection programs.

c. This practicum must be coordinated by a qualified person who holds the CPHI(C) at the supervisory level of the agency where the practicum is to take place. SWPH staff coach and mentor student PHI candidates in preparation for their BOC exam for the duration of the 12-week practicum.

d. SWPH benefits from the public health inspector practicum program as the students support the completion of lower risk inspection activity under the mentorship of certified public health inspectors. Additionally, students contribute by sharing innovation and health promotion / education ideas for program delivery. Moreover, our staff who act as student preceptors, gain leadership and staff development opportunities.

One-Time Funding Request
100% Provincially Funded

Project Title:

Sharps Program

Sharps Program Highlights:

The goal of a comprehensive needle syringe and inhalation equipment program is to distribute needles/syringes and other drug use supplies as an effective method in reducing bloodborne infections (such as HIV, Hepatitis B and C, syphilis) associated with injection or inhalation drug use.

a. The demand for sterile harm reduction equipment has decreased compared to the previous year; however, it remains higher than pre-pandemic levels. It is essential that SWPH continues to distribute needles/syringes to prevent the transmission of HIV, Hepatitis B and Hepatitis C infections. Both HIV and HCV can spread in the blood, and a major risk factor for both HIV and HCV infection is injection drug use.

b. As part of this strategy, SWPH collaborates with Regional HIV/AIDS Connection and Canadian Mental Health Association Thames Valley Addiction and Mental Health Services to facilitate the distribution and collection of harm reduction supplies via a mobile outreach program.

c. The 2025 goals of the program include meeting or exceeding sharps return rates found in similar Ontario jurisdictions and ensuring that sharps disposal options are available to clients in areas where they are needed most. These goals align with the recommendations found in the Ontario Public Health Standards, 2018 and the Substance Use Prevention and Harm Reduction Guideline, 2018. Achieving these goals will necessitate additional kiosks in known underserviced areas and regular maintenance and disposal.

One-Time Funding Request
100% Provincially Funded

Project Title:
Infection Prevention and Control HUB

Infection Prevention and Control (IPAC) HUB Highlights:

a. As part of the province's comprehensive plan *Keeping Ontarians Safe: Preparing for Future Waves of COVID-19,* local networks of IPAC expertise (IPAC Hubs) were developed across the health system to enhance IPAC practices in community-based, congregate living organizations (CLOs). These organizations include long-term care homes, retirement homes, residential settings funded by the Ministry of Health (MOH), residential settings for adults and children funded by Ministry of Children, Community and Social Services (MCCSS), shelters, and supportive housing. Through these province-wide networks, CLOs are able to access IPAC expertise, collaborative assistance and just-in-time advice, guidance, and direct support on IPAC practices.

b. In collaboration with the Ministry of Health and other Ministries involved in this initiative, Ontario Health identified hospitals and public health units from across the province to lead local IPAC Hubs. Southwestern Public Health (SWPH) is the local IPAC Hub lead in this area, that works to coordinate and collaborate with satellite hubs and health system partners in Oxford County, Elgin County, and the City of St. Thomas, as well as Huron Perth to ensure that this specialized guidance and support is available to our congregate living organizations throughout the region.

c. As the lead for the local IPAC Hub, SWPH is responsible for ensuring accountability for funds transferred from the Ministry of Health to satellite hubs, including monitoring of required deliverables. Oxford County, Elgin County, and the City of St. Thomas IPAC services for congregate living organizations are administered by staff funded by the IPAC Hub. Services include support for IPAC training, policies and procedures, outbreak preparedness and assistance with on-site IPAC assessments.

Accessible Document