

DATE: April 24, 2009

REPORT TITLE: **100 PER CENT MOHLTC FUNDED STAFFING RESOURCES**

FROM: Janette Smith, Commissioner of Health Services  
 David L. Mowat, MBChB, MPH, FRCPC, Medical Officer of Health

## RECOMMENDATION

**That the agreement for the enhancement of the Infection Prevention and Control program be executed;**

**And further, that the 2009 Public Health Budget be adjusted upward by \$80,000 and 0.8 Full Time Equivalent (FTE) to reflect the additional infection prevention and control funding effective January 1, 2009 and its related program costs;**

**And further, that the 2009 Public Health Human Papillomavirus (HPV) vaccination program be allowed to convert two contract staff to Full Time Equivalents which is fully funded by the Ministry of Health and Long-Term Care (MOHLTC).**

## REPORT HIGHLIGHTS

- Peel Public Health has successfully educated and forged ties with infection prevention partners in the health care field within the Region of Peel and adjacent health units, including acute and long term care, as well as other community partners, Regional Infection Control Networks, schools boards, and regulated health care professionals.
- The MOHLTC has provided written notification that they will provide \$80,000 of funding for an Infection Control Specialist which would allow Peel Public Health to recruit 0.8 FTE fully funded by the Province. The \$80,000 grant has the condition that the funding will be utilized to increase the nursing complement within the health unit.
- The HPV vaccination program was introduced in August of 2007 and is fully funded by the MOHLTC.
- In 2008 the MOHLTC extended the eligibility criteria to allow girls who were in grade eight in 2007-2008 an additional year to complete their series.

## DISCUSSION

### 1. Background

#### **Infection Prevention and Control (IPAC) Program**

The Infection Control Specialists support the 23 non-Regionally run long-term care homes, five Regional homes, and three hospitals infection prevention and control programs. These positions were created as a result of the outcomes and learnings from SARS. While Peel has

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been publicly acknowledged at numerous MOHLTC events and National IPAC conferences for having a well established IPAC program, there are always areas for further enhancement and evaluation of services.

In the fall of 2008, the MOHLTC recognized the need for health units across the Province of Ontario to enhance infection prevention and control programs within the health departments. Traditionally, health care institutions have been their own resource for IPAC knowledge. Public health has been educating our institutions and partners in current routine practices, and have now been given the opportunity to meet the updated requirements within the Ontario Public Health Standards (January 2009).

### **Human Papillomavirus (HPV) Immunization**

The Ontario Cervical Screening Program describes the HPV vaccine as an important tool in the battle against cervical cancer, with the potential to be the biggest advance in preventing cervical cancer since the Pap test. The implementation of the provincially funded HPV vaccine program for girls in grade eight is a positive step in the direction of reducing morbidity and mortality associated with HPV infection in the upcoming generation.

Peel Public Health has worked closely with the Peel and Dufferin-Peel Catholic District School Boards to ensure that all parents in Peel are offered the opportunity to have their daughters receive vaccination against HPV.

A review of the first year of the HPV program in Peel was undertaken and a strategy developed to enhance promotional efforts and streamline program delivery to continue to build trust and confidence among parents and students in this important disease prevention opportunity.

## **2. Staffing**

This additional staffing will enhance current IPAC and HPV programs. The IPAC staffing funding will allow for enhancing a program to meet updated infection prevention and control requirements.

Currently, the work at the HPV program is being done by contract staff. The benefit of making positions full time equivalents is that we save costs of training and retraining due to turnover and the staff conversions may provide additional capacity for additional work at no net cost to the Region of Peel.

## **3. Funding**

The MOHLTC has provided written notification that they will provide \$80,000 of funding for an Infection Control Specialist (see Appendix I) which would allow Peel Public Health to recruit 0.8 FTE fully funded by the Province. The \$80,000 grant has the condition that the funding will be utilized to increase the nursing complement within the health unit.

The MOHLTC also reimburses the Region of Peel \$8.50 per dose of Gardasil administered within the school-based immunization program. The revenue fully funds the 2009 HPV program at a cost of \$153,393 which includes salary and benefits of 2 staff, medical supplies and materials to deliver 203 additional HPV clinics.

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**FINANCIAL IMPLICATIONS**

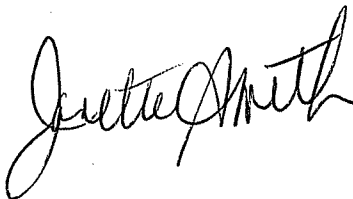
The MOHLTC will provide \$80,000 of funding for an Infection Control Specialist which would allow Peel Public Health to recruit 0.8 FTE fully funded by the Province.

The recommended staff conversions within the HPV Program of two contract staff to full-time equivalents can be done at no net cost to the Region of Peel. The 2009 budget for the HPV program does not need to be adjusted as the salary and benefit costs of two staff and the corresponding recovery from the MOHLTC are included.

**CONCLUSION**

Prevention of infection and control is one of the important functions of Public Health. With the addition of a 0.8 FTE Infection Control Specialist fully funded by the MOHLTC, Peel Public Health can continue to monitor and respond to emerging infectious diseases.

In order to provide better management of the HPV Immunization Program, Peel Public Health is requesting to convert two contract staff to full time equivalents at no net cost to the Region of Peel as the program is fully funded by the MOHTLC. HPV immunization is an important strategy to decrease the rate of HPV and to decrease the long term effects of HPV, such as the reduction in the rate of cervical cancer.



Janette Smith  
Commissioner of Health Services



David L. Mowat, MBChB, MPH, FRCPC  
Medical Officer of Health

**Approved for Submission:**



D. Szwarc, Chief Administrative Officer

02 May 13/09

*For further information regarding this report, please contact  
Isabelle Mogck, Director, Communicable Diseases Division at extension 2615 or via email at  
isabelle.mogck@peelregion.ca*

*Authored By: Danielle Steinman, Manager, Communicable Disease Control and Infection  
Prevention & Surveillance, Communicable Diseases Division  
Loretta Rowan, Manager, Vaccine Preventable Diseases Section, Communicable Diseases  
Division*

- c. Legislative Services  
Manager, Financial Support Unit (FSU)

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**Ministry of Health  
and Long-Term Care**

Assistant Deputy Minister

Public Health Division  
11TH Floor, Hepburn Block  
Queen's Park  
Toronto ON M7A 1R3

Telephone: (416) 212-3831  
Facsimile: (416) 325-8412

**Ministère de la Santé  
et des Soins de longue durée**

Sous-ministère adjoint

Division de la santé publique  
Édifice Hepburn, 11e étage  
Queen's Park  
Toronto ON M7A 1R3

Téléphone : (416) 212-3831  
Télécopieur : (416) 325-8412



FEB 10 2008

Dr. David Mowat  
Medical Officer of Health  
Peel Public Health  
44 Peel Centre Drive, Suite 102  
Brampton ON L6T 4B5

Dear Dr. Mowat:

I am pleased to provide specific details on the funding allocation of the 9,000 nurses commitment that your local public health unit will receive. The government's 2007 platform included a commitment to create 17.55 million additional hours of nursing service (9,000 nursing positions).

The funding for your public health unit was announced on September 26, 2008 as part of a larger announcement on improving patient safety measures. The government committed to creating infection control resource teams, funding 66 more infection prevention and control practitioners in hospitals and local public health units, and supporting more effective antibiotic usage.

Your public health unit will receive funding for the following initiative:

- **Recruitment of one (1) Infection Prevention and Control Nurse (\$80,000).**

The criteria to recruit an Infection Prevention and Control Nurse and the Ministry of Health and Long-Term Care reporting requirements are provided in Appendix B.

Please be advised that this funding is subject to both the 2008 Program-Based Grants Terms and Conditions and the 2008 Program-based Grants extension letter that apply to the provincial base funding provided to public health units. In order to accept this condition, please return a signed copy of Appendix A to this letter.

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Please find attached to this letter:

- Appendix A - Sign-Back Agreement for Local Public Health Unit
- Appendix B - Ministry Eligibility Criteria for the recruitment of ICNs

If you have previously indicated that the recruitment efforts for your ICN are complete, please contact Tiffany Jay at [tiffany.jay@ontario.ca](mailto:tiffany.jay@ontario.ca). If you have any additional questions regarding this initiative, Tiffany will be pleased to assist you.

I would like to take this opportunity to thank you for your continued commitment and support for a revitalized and effective public health system in Ontario.

Yours truly,



Allison J. Stuart  
Assistant Deputy Minister (A)

Attachment

c: Tiffany Jay, Director (A), Strategic Planning and Implementation Branch  
Marjorie Wilcox, Director (A), Controllership and Resources Management Branch

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APPENDIX A

2009 Approved Funding Allocation

Sign-Back Agreement for Local Public Health Unit

On behalf of the public health unit, I acknowledge that our organization has received a total of \$80,000 that is to be used for the 9,000 nurses commitment as outlined below and in the accompanying letter.

Peel Public Health

INITIATIVE	NEW BASE	FTE
Recruitment of Infection Prevention and Control Nurse	\$80,000	1.0

We recognize that this funding must be utilized based on the criteria outlined in Appendix B. This funding will be subject to audit, report back and reconciliation.

A signature from a representative, who has the authority to bind the Board of Health for the Peel Public Health, is required below to indicate acceptance of the condition that this funding is subject to the 2008 Program-Based Grants' Terms and Conditions and the 2008 Program-based Grants extension letter.

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Date: \_\_\_\_\_

Please return a signed copy of this form using one of the following methods:

By fax to: 416-212-7832; or  
Scanned copy by email to: [tiffany.jay@ontario.ca](mailto:tiffany.jay@ontario.ca)

## 100 PER CENT MOHLTC FUNDED STAFFING RESOURCES

### Appendix B

#### Ministry Eligibility Criteria

Recruitment of an Infection Prevention and Control Nurse (ICN) must consider the following:

#### 1. For the Recruitment of an Infection Prevention and Control Nurse

##### A. 9,000 nurses commitment Program Requirements for Funding

- Must be used for the creation of additional hours of nursing service (Full Time Equivalents (FTEs)).
- Must be used for nursing salaries/benefits and cannot be used to support operating or education costs.

##### B. Qualifications for the Infection Prevention and Control Nurse Position

- Applicant must have a nursing designation (Registered Nurse or Registered Practical Nurse).
- Applicant must have or is committed to obtaining a Certification in Infection Control within three (3) years of beginning employment.
- A majority of the ICN's time must be spent on infection prevention and control activities.

#### 2. MOHLTC Reporting Requirements

- On a quarterly basis, report financial and statistical data to the MOHLTC on FTE numbers, and salary and benefit costs as part of regular reporting using existing mechanisms. Details on the reporting of these positions can be found in the 2009 Program-Based Grants User Guide.
- Maintain this position as part of baseline nurse staffing levels.

Please note this funding is subject to both the 2008 Program-Based Grants Terms and Conditions and the 2008 Program-based Grants extension letter that apply to the provincial base funding provided to public health units.