



The Regional Municipality of Durham

Health & Social Services Committee Agenda

Council Chambers
Regional Headquarters Building
605 Rossland Road East, Whitby

Thursday, May 6, 2021

9:30 AM

Please note: In an effort to help mitigate the spread of COVID-19, and to generally comply with the directions from the Government of Ontario, it is requested in the strongest terms that Members participate in the meeting electronically. Regional Headquarters is closed to the public, all members of the public may [view the Committee meeting](#) via live streaming, instead of attending the meeting in person. If you wish to register as a delegate regarding an agenda item, you may register in advance of the meeting by noon on the day prior to the meeting by emailing delegations@durham.ca and will be provided with the details to delegate electronically.

1. Roll Call

2. Declarations of Interest

3. Adoption of Minutes

- A) Health & Social Services Committee meeting – April 8, 2021

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4. Statutory Public Meetings

There are no statutory public meetings

5. Delegations

There are no delegations

6. Presentations

- 6.1 R.J. Kyle, Commissioner and Medical Officer of Health re: COVID-19 Update

7. Health

7.1 Correspondence

7.2 Reports

A) Repair and Maintenance of Region of Durham Paramedic Service (RDPS) Equipment (2021-MOH-4)

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8. Social Services

8.1 Correspondence

8.2 Reports

There are no Social Services Reports to consider

9. Advisory Committee Resolutions

There are no advisory committee resolutions to be considered

10. Confidential Matters

There are no confidential matters to be considered

11. Other Business

12. Date of Next Meeting

Thursday, June 3, 2021 at 9:30 AM

13. Adjournment

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The Regional Municipality of Durham

MINUTES

HEALTH & SOCIAL SERVICES COMMITTEE

Thursday, April 8, 2021

A regular meeting of the Health & Social Services Committee was held on Thursday, April 8, 2021 in the Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby, Ontario at 9:30 AM. Electronic participation was offered for this meeting.

1. Roll Call

Present: Councillor Chapman, Chair
Councillor Pickles, Vice-Chair
Councillor Anderson
Councillor Carter
Councillor Dies
Councillor Roy
Councillor Wotten
Regional Chair Henry attended the meeting at 9:39 AM
***all members of the Committee participated electronically**

Also

Present: Councillor Barton
Councillor Crawford
Councillor Foster
Councillor Highet
Councillor McLean
Councillor Mulcahy
Councillor Ryan
Councillor Smith
***all visiting Councillors participated electronically**

Staff

Present: E. Baxter-Trahair, Chief Administrative Officer
S. Danos-Papaconstantinou, Commissioner of Social Services
T. Fraser, Committee Clerk, Corporate Services – Legislative Services
R. Inacio, Systems Support Specialist, Corporate Services – IT
J. Jenkins, Manager, Population Health, Health Department
R.J. Kyle, Commissioner and Medical Officer of Health
P. McTavish, Associate Medical Officer of Health
J. Nesbitt, Director, Population Health and Chief Nursing Officer
V. Olmstead, Manager, Population Health, Health Department
A. Riddell, Housing Program Coordinator, Social Services

E. Valant, Manager, Affordable Housing & Homelessness Initiatives, Social Services
N. Prasad, Committee Clerk, Corporate Services – Legislative Services
***all staff except R. Inacio participated electronically**

2. Declarations of Interest

There were no declarations of interest.

3. Adoption of Minutes

Moved by Councillor Roy, Seconded by Councillor Anderson,
(14) That the minutes of the regular Health & Social Services Committee meeting held on Thursday, March 4, 2021, be adopted.

CARRIED

4. Statutory Public Meetings

There were no statutory public meetings.

5. Delegations

5.1 Carion Fenn, Carion Fenn Foundation, and Mike Young, Principal, Durham Catholic Virtual Elementary School, re: Durham Kids Health Week Project in partnership with Durham Catholic Virtual Elementary School

Carion Fenn, President and CEO, Carion Fenn Foundation, and Mike Young, Principal, Durham Catholic Virtual Elementary School, provided a delegation with regards to the Durham Kids Health Week Project in partnership with the Durham Catholic Virtual Elementary School.

M. Young stated that the Durham Catholic Virtual Elementary School is a 100% online virtual school with 3,508 students. It is supported by 117 regular classroom teachers from junior kindergarten to grade 8; 21 French immersion classes from grade 1 to grade 8; and has about 200 student support staff. He advised that student health has been a concern from the beginning of the virtual environment and not having students physically in class has required a huge switch. He stated that getting students to move and take care of themselves is something that is done daily and consciously.

M. Young advised that students and staff, along with mental health leads, have put together activities designed for various age groups that focus on key areas. He stated that some of the activities focused on during the mental health week are as follows:

- April 19th – reducing screen time
- April 20th – sleep

- April 21st – nutrition
- April 22nd – physical activity
- April 23rd – mindfulness

M. Young advised that each classroom teacher will be provided with resources and the expectation is to deliver one or more lessons each day on the topics. He stated that mental health impacts students' abilities for learning and engagement and it is their job to help promote positive mental health.

C. Fenn stated that on April 22, Durham Catholic elementary school students, staff and family members will join a forum for two hours of fitness, music, discussion about mental health and bullying, mindfulness minutes, games, and a live cooking demonstration. She advised that more information is available on the [Carion Fenn website](#) and thanked Durham Region for proclaiming April 18th to 24th as Durham Kids Health Week.

C. Fenn and M. Young responded to questions of the committee.

6. Presentations

6.1 R.J. Kyle, Commissioner and Medical Officer of Health, re: COVID-19 Update

R.J. Kyle, Commissioner and Medical Officer of Health provided a PowerPoint presentation with regards to a COVID-19 Update. A copy of the PowerPoint was provided to members in advance of the meeting.

Highlights of the presentation included:

- COVID-19 Update
- Provincial Stay at Home Order
- Current Status
- Variants of Concern
- Vaccines – Current State
- Extended Intervals for Second Dose
- Provincial COVID-19 Vaccine Plan
- Durham COVID-19 Vaccine Plan
- Mobile COVID-19 Vaccine
- Hot Spot Communities
- Durham Region Vaccine Uptake
- COVID-19 Vaccine – AstraZeneca
- Current Vaccine Clinic Locations

R.J. Kyle advised that a new stay at home order was announced by the province which took effect at 12:01 AM on April 8th. He advised that non-essential retailers will be limited to curbside pick-up and delivery; big box stores will be limited to selling essential items; and schools and childcare centres will remain open.

R.J. Kyle provided a breakdown of statistics with regards to the third wave of the pandemic; current outbreak numbers; current status of cases; and details regarding the variants of concern. With regards to vaccines, he advised that there are 4 approved vaccines in Canada with Pfizer-BioNTech and Moderna being the two available in Durham Region. He advised that AstraZeneca has recently arrived and will be available in Durham Region through pharmacies and the Johnson & Johnson vaccine may arrive later in April.

R.J. Kyle advised that as of March 10, 2021, most second doses have moved to 16 weeks to ensure more people can receive the first dose due to the limited supply, as recommended by the National Advisory Committee on Immunization. The extension will help protect the adult population and contribute to health equity. Some exceptions to the extension are transplant recipients and individuals with cancer on certain treatments.

R.J. Kyle provided an overview of the provincial COVID-19 Vaccine Plan. He stated that Phase 1 of the plan targets the high-risk populations; Phase 2 will focus on mass deliveries of vaccines; and Phase 3 will be a steady state. He advised that Durham Region has moved into Phase 2 of the Plan.

R.J. Kyle advised that mobile clinics are available to provide vaccines to populations and individuals who may have difficulty accessing larger clinics. He provided an overview of hot spot communities and advised that in December 2020, both Ajax and Pickering were identified as high priority communities as they have been significantly impacted by COVID-19. He provided an overview of the plan to address these hot spots. He advised that AstraZeneca is available at multiple participating pharmacies in Durham Region and is available to anyone 55 years and older. He further advised that many of the pharmacies are located in the hot spots and bookings can be made directly with the pharmacies.

Staff responded to questions with regards to having a conversation with the province about getting timely updates; whether there can be more clarification on using the website to access different vaccination locations; jurisdiction over the closure of Durham Region schools; the possibility of community groups to help with supporting the vaccination clinics; whether all Durham Region firefighters and police officers have been vaccinated; whether by-law enforcement officers can be vaccinated; what is done with leftover vaccines at the end of the day; the percentage uptake of the vaccine; whether schools in the hot spots will be closed; whether there is a certain amount of vaccinations allocated to different groups; and the availability of the Moderna vaccine.

6.2 E. Valant, Manager, Affordable Housing & Homelessness Initiatives, regarding
2021 Point in Time Count

Erin Valant, Manager, Affordable Housing & Homelessness Initiatives, and Alyxandra Riddell, Housing Program Coordinator, provided a PowerPoint Presentation with regards to 2021 Point in Time Count.

Highlights of the presentation included:

- 2021 Point in Time Count & Durham's By-Name List
- What is a Point in Time Count
- Durham's 2021 Point in Time Count
- Point in Time Counts & By-Name Lists
- Coordinated Access in Action – February 2021
- Actively Homeless Highlights
- Coordinated Access Highlights
- Using Data to Drive Reductions

E. Valant advised that a Point in Time (PiT) Count captures numbers and basic demographics of people experiencing homelessness over a 24-hour period. The following are the three ways the Count is conducted:

- a Street Count to identify all unsheltered residents;
- a Sheltered Count to identify all people staying in shelters; and
- a Service Count to identify people accessing services who have no fixed address.

E. Valant advised that the PiT Count is currently scheduled for the week of April 19 to 23, 2021. She advised that staff will be meeting on April 9th to have conversations based on the new stay at home order announced by the province. She also advised that due to COVID-19, the Count will be scaled back a bit and volunteers will be solicited from organizations operating within the homelessness support system.

E. Valant stated that data received from the PiT Count are often used to kickstart a community's By-Name List, which is a list of all people experiencing homelessness in a community. She provided an overview of the differences in the PiT Count and the By-Name Lists. She advised that the By-Name Lists provides all the information needed for Coordinated Access, which helps to prioritize people for housing resources based on need. She also provided an overview of the Coordinated Access data as of February 2021.

A. Riddell provided an overview of the data with regards to age and acuity of the actively homeless population and advised that as of February 2021, there were 122 people actively experiencing homelessness. She stated that the Coordinated Access system has successfully housed over 104 chronically homeless people and of those housed, there has been a zero percent return to homelessness.

A. Riddell stated that the By-Name List and Coordinated Access Data is reviewed monthly to monitor trends in inflow and outflow; to inform system changes to drive reductions in chronic homelessness; and to identify areas of need and advocate for resources specific to those needs.

E. Valant responded to questions with regards to the continuation of the current strategies being used and the reasons behind the large percentage of actively homeless male adults.

7. Health

7.1 Correspondence

There were no communications to consider.

7.2 Reports

A) The Association of Local Public Health Agencies (ALPHA) Call for Board of Health Nominations (2021-MOH-3)

Report #2021-MOH-3 from R.J. Kyle, Commissioner and Medical Officer of Health, was received.

Moved by Councillor Pickles, Seconded by Regional Chair Henry,
(15) That we recommend to Council:

- A) That the nomination of Councillor Bob Chapman for election to the ALPHA Board of Directors for a two-year term to represent the Central East Region be endorsed; and
- B) That two members of Regional Council be identified to sponsor the nomination and complete the nomination form.

CARRIED

8. Social Services

8.1 Correspondence

There were no communications to consider.

8.2 Reports

A) Canada-Ontario Community Housing Initiative (COCHI) Program 2020-2021
Take-up Plan (2021-SS-5)

Report #2021-SS-5 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Wotten, Seconded by Councillor Carter,
(16) That Report #2021-SS-5 of the Commissioner of Social Services be received for information.

CARRIED

B) Housing Program Appeals 2020 (2021-SS-6)

Report #2021-SS-6 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Wotten, Seconded by Councillor Carter,
(17) That Report #2021-SS-6 of the Commissioner of Social Services be received for information.

CARRIED

9. Advisory Committee Resolutions

There were no advisory committee resolutions to be considered.

10. Confidential Matters

There were no confidential matters to be considered.

11. Other Business

There was no other business to be considered.

12. Date of Next Meeting

The next regularly scheduled Health & Social Services Committee meeting will be held on Thursday, May 6, 2021 at 9:30 AM.

13. Adjournment

Moved by Councillor Pickles, Seconded by Councillor Wotten,
(18) That the meeting be adjourned.

CARRIED

The meeting adjourned at 11:23 PM

Respectfully submitted,

B. Chapman, Chair

N. Prasad, Committee Clerk



The Regional Municipality of Durham Report

To: Health & Social Services Committee
From: Commissioner & Medical Officer of Health
Report: #2021-MOH-4
Date: May 6, 2021

Subject:

Repair and Maintenance of Region of Durham Paramedic Services (RDPS) Equipment

Recommendation:

That the Health & Social Services Committee recommends to Regional Council:

- A) That the Stryker Pro Care Emergency Care Transport Protect Service Program package be adopted as the standard for a three (3) year term for RDPS to facilitate the repair and annual maintenance of Stryker stretchers, power loaders and stair chairs;
 - B) That the Commissioner of Finance be authorized to award the sole source purchase agreement of the Stryker Pro Care Emergency Care Transport Protect Service Program for the repair and annual maintenance package for all current Stryker stretchers, power loaders and stair chairs from Stryker Canada ULC at an annual cost of approximately \$135,000 for a term of three (3) years, to be funded from the approved 2021 and annual Paramedic Services Business Plan and Budget; and
 - C) That the Commissioner of Finance be authorized to execute any required agreements.
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Report:

1. Purpose

- 1.1 The purpose of this report is to obtain approval for the sole source purchase of the Stryker Pro Care Emergency Care Transport Protect Service Program to facilitate the repair and annual maintenance of RDPS equipment including Stryker stretchers, power loaders and stair chairs.

2. Background

- 2.1 Stryker Canada ULC currently provides a suite of patient carrying devices and equipment to RDPS. These include, but are not limited to, power stretchers, power loaders and stair chairs.
- 2.2 The Stryker power stretcher and power loader system significantly reduced the need for manual lifting of patients. The power stretcher allows for power height adjustments to allow patients to be loaded onto and off the stretcher safely and conveniently. The power loader system allows the stretcher to be loaded onto the ambulance at the touch of a button. This system has significantly reduced the risk of injury to paramedics by reducing the instances of manual lifting required.
- 2.3 Stryker Canada ULC is the Canadian branch of Stryker. Stryker was founded in 1941 and is one of the world's leading medical technology companies. Its product line is based on a diverse array of innovative products and services in Orthopedics, Medical and Surgical, and Neurotechnology and Spine.

3. Previous Reports and Decisions

- 3.1 Report #2017-COW-141, approved June 14, 2017, authorized:
 - a. That the Stryker Power Pro XT ambulance cot and inductive power load be adopted as the standard for RDPS for a period of seven (7) years;
 - b. The purchase of up to forty-three (43) Stryker Power Pro XT ambulance cots and inductive power load systems from Rowlands Emergency Vehicle Products Inc. under the terms, conditions and pricing of the Region of Peel's RFP 2016-158P, at a total cost not to exceed \$1,556,987, with financing provided from the approved 2017 RDPS Capital Budget;
 - c. That the Region of Durham leverage the Region of Peel's contract pricing, terms and conditions of their RFP 2016-158P with Rowlands Emergency Vehicle Products Inc., utilizing the RFP clause allowing Broader Public Sector Service Providers to enter into their own contracts with the successful service provider, as permitted by the Region of Durham's Purchasing By-Law; and
 - d. The Commissioner of Finance be authorized to execute the agreement.

4. RDPS Existing Stryker Equipment

- 4.1 All RDPS ambulances are currently outfitted with the Stryker power loader and power stretcher system. Due to the wear and tear on both the power stretcher and power loader system over time, it requires annual maintenance as well as routine repairs to worn parts and electronics. This ensures the system remains in good working condition, reduces the probability of costly breakdowns, and extends the longevity of the system.

- 4.2 RDPS also currently utilizes Stryker stair chairs, which are another type of patient carrying device. As with the power stretcher and loader system, the stair chair also requires annual maintenance and repairs to ensure it is in good working condition.
- 4.3 Stryker Canada ULC has been identified as the only vendor who is able to offer this repair and annual maintenance package in accordance with the original manufacturer's specification and quality. RDPS is mandated by the Ministry of Health Equipment Standards to ensure that all equipment is maintained to the original manufacturer's specification and quality.

5. Financial Implications

- 5.1 Should the Stryker Pro Care Emergency Care Transport Protect Service Program not be purchased, RDPS risks pre-emptive replacement of the Stryker patient carrying devices. The cost to replace a power stretcher would be approximately \$20,000 and a power loader \$25,000.
- 5.2 The purchase of Stryker Pro Care Emergency Care Transport Protect Service Program will be funded from the Paramedic Services approved 2021 operating budget, at an estimated annual cost of approximately \$135,000 for a term of three (3) years.

6. Relationship to Strategic Plan

- 6.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
 - a. Goal 5: Service Excellence
 - Optimize resources and partnerships to deliver exceptional quality services and value.

7. Conclusion

- 7.1 It is recommended that the Stryker Pro Care Emergency Care Transport Protect Service Program package be adopted as the standard for a three (3) year term.
- 7.2 It is recommended that authorization be provided to award the sole source purchase agreement of the Emergency Care Transport Protect Program services to Stryker Canada ULC, funded from the approved 2021 and annual Paramedic Services Business Plan and Budget.
- 7.3 It is also recommended that the Commissioner of Finance be authorized to execute any required agreements.
- 7.4 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the recommendations.

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM
Commissioner & Medical Officer of Health

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer