



The Regional Municipality of Durham

Health & Social Services Committee Agenda

Council Chambers
Regional Headquarters Building
605 Rossland Road East, Whitby

Thursday, June 6, 2019

9:30 AM

1. Declarations of Interest

2. Adoption of Minutes

- A) Health & Social Services Committee meeting – [May 9, 2019](#)

Pages 3 - 10

3. Statutory Public Meetings

There are no statutory public meetings

4. Delegations

- 4.1 Shauna Bookal, Volunteer Run Director, Community Engagement, CIBC Run for the Cure – Durham Region and Lacey Tryon, Volunteer Run Director, Logistics, CIBC Run for the Cure – Durham Region, re: the October 2019 Canadian Cancer Society CIBC Run for the Cure and its 20th Anniversary

5. Presentations

- 5.1 Melissa Hutchinson, Manager, Population Health re: Durham Region Opioid Response Plan

6. Health

- 6.1 Correspondence

- 6.2 Reports

- A) Amendment to By-Law 17-2016, the Durham Region Personal Services Setting By-Law ([2019-MOH-4](#))

11 - 14

7. Social Services

7.1 Correspondence

7.2 Reports

- | | |
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| A) Award of Proposal RFP-181-2019 for the provision of a Primary and Secondary Food and Disposables Distributor for the Region of Durham's four (4) Long-Term Care Homes (2019-SS-5) | 15 - 18 |
| B) HealthPro Procurement Services Inc.'s Various Nutrition and Food Supplier Selections for the Region of Durham's four (4) Long-Term Care Homes (2019-SS-6) | 19 - 35 |
| C) Application for New Long-Term Care Beds to the Ministry of Health and Long-Term Care (2019-SS-7) | 36 - 38 |
| D) Update on Provincial Program and Funding Changes Affecting the Social Services Department (2019-SS-8) | 39 - 45 |
| E) Victim Services Pilot Project to address Human Trafficking in Durham (2019-SS-9) | 46 - 48 |

8. Advisory Committee Resolutions

There are no advisory committee resolutions to be considered

9. Confidential Matters

There are no confidential matters to be considered

10. Other Business

11. Date of Next Meeting

Thursday, September 5, 2019 at 9:30 AM

12. Adjournment

Notice regarding collection, use and disclosure of personal information:

Written information (either paper or electronic) that you send to Durham Regional Council or Committees, including home address, phone numbers and email addresses, will become part of the public record. This also includes oral submissions at meetings. If you have any questions about the collection of information, please contact the Regional Clerk/Director of Legislative Services.

The Regional Municipality of Durham

MINUTES

HEALTH & SOCIAL SERVICES COMMITTEE

Thursday, May 9, 2019

A regular meeting of the Health & Social Services Committee was held on Thursday, May 9, 2019 in Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby, Ontario at 9:30 AM

Present: Councillor Chapman, Chair
Councillor Anderson
Councillor Carter attended the meeting at 9:37 AM due to municipal business
Councillor Dies
Councillor Roy
Councillor Wotten
Regional Chair Henry

Absent: Councillor Pickles, Vice-Chair

Staff

Present: A. Andrews, Manager, Strategic Partnerships and Initiatives attended for part of the meeting
E. Baxter-Trahair, Chief Administrative Officer
C. Boyd, Solicitor, Regional Solicitor's Office
T. Cheseboro, Director and Chief of RDPS
H. Drouin, Commissioner of Social Services
L. Fortuna, Director, Health Protection, Environmental Health
B. Goodwin, Director, Administration
S. Howson, Administrative Assistant, Corporate Communications
J. Hunt, Director, Legal Services, Corporate Services – Legal attended for part of the meeting
R. Inacio, Systems Support Specialist, Corporate Services – IT
R.J. Kyle, Commissioner and Medical Officer of Health
N. Prasad, Committee Clerk, Corporate Services – Legislative Services

1. Declarations of Interest

There were no declarations of interest.

2. Adoption of Minutes

Moved by Councillor Roy, Seconded by Councillor Wotten,
(24) That the minutes of the regular Health & Social Services Committee
meeting held on Thursday, April 4, 2019, be adopted.
CARRIED

3. Statutory Public Meetings

There were no statutory public meetings.

4. Delegations

- 4.1 Stephanie Bell, Executive Dean, School of Interdisciplinary Studies, Durham College; Audrey Andrews, Manager of Strategic Partnerships and Initiatives, Social Services Department, Region of Durham; and Jason Hunt, Director of Legal Services, Corporate Services, Region of Durham regarding Access to Justice Hub
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Mark Frayne, Professor, Lawyer and Coordinator of the Paralegal Program, Durham College; Audrey Andrews, Manager of Strategic Partnerships and Initiatives, Social Services Department, Region of Durham; and Jason Hunt, Director of Legal Services, Corporate Services, Region of Durham, provided a PowerPoint presentation with regards to Durham's Access to Justice Hub. Mark Frayne attended in place of Stephanie Bell.

J. Hunt stated that the Access to Justice Hub ("The Hub") is a 5-year pilot project and a partnership between the Durham Community Legal Clinic and Durham College. He stated that the Social Services Department of the Region of Durham has also been involved in bringing a financial empowerment lens to the project.

M. Frayne stated that social and justice services are facing extreme demands and pressures and a gap in needs assessment in Durham Region confirms that many residents face multiple barriers in accessing assistance with their legal, social and financial needs. The hope is that The Hub will assist in addressing these problems.

M. Frayne stated that The Hub is a unique project and is the first of its kind in Canada. It provides a "one stop shop" for legal, financial and social services available to Durham residents. He stated that it is also an education and research centre created to improve community collaboration and partnership; promote an accessible and fair justice system; and contribute towards poverty prevention and reduction. He also advised that The Hub is located close to priority neighbourhoods and transit.

Moved by Councillor Carter, Seconded by Councillor Roy,
(25) That M. Frayne be granted a one-time 2-minute extension in order to finish his delegation.

CARRIED

M. Frayne stated that next steps for The Hub are as follows: continued community outreach and awareness to local municipalities, Durham Region Law Association and local agencies; recruitment of Board and Executive Members; finalization of by-laws and not-for-profit incorporation status; and continuation in seeking funding and grants to assist the initiative.

J. Hunt and M. Frayne responded to questions of the committee.

5. Presentations

5.1 Dr. R. J. Kyle, Commissioner and Medical Officer of Health regarding Public Health Restructuring

Dr. R. J. Kyle, Commissioner and Medical Officer of Health provided a PowerPoint Presentation with regards to Public Health Restructuring. A copy of the Presentation was provided as a handout.

Dr. Kyle stated that the provincial government is implementing its priorities as expressed in the 2019 Ontario budget which includes changes to public health and ambulance services. He provided an overview and background information as it relates to the public health restructuring.

Highlights of the presentation included:

- Background
 - Ontario Releases Expert Panel Report on Public Health (July 20, 2017)
 - COMOH (Council of Medical Officers of Health) Submission – EPPH Report (October 12, 2017)
 - alPHA Submission – EPPH Report (October 17, 2017)
 - alPHA Pre-Budget Submission (January 25, 2019)
 - alPHA Public Health Resource Paper (January 25, 2019)
- 2019 Ontario Budget
 - alPHA Memo – 2019 ON Budget (April 11, 2019)
 - alPHA News Release – 2019 ON Budget (April 12, 2019)
 - alPHA Speaking Points – Toronto Board of Health (April 15, 2019)
 - alPHA Position Statement – PH Restructuring (April 25, 2019)
 - CMOH Memo – PH Modernization (April 29, 2019)
 - alPHA Letter to the Minister (May 3, 2019)
- Local Impacts
 - Health Protection and Promotion Act (HPPA)

- Legislation and Ontario Public Health Standards
- 2019/2020 PH Grant
- Regional vs Local Public Health Entities
- Governance – Role of Municipalities?
- Leadership/Management
- Regional vs. Local Programs & Services
- Back-office Functions – Finance, HR, IT, etc.
- Labour Relations
- Current Leases etc.
- Other

During the presentation, Dr. Kyle stressed the following key points:

- Previous government had a 'Patients First' agenda.
- Local public health capacity has been eroding over years of no increases in budgets and the system will not withstand the large-scale system disruption proposed.
- Restructuring is happening at a time when there is less provincial investment in public health.
- alPHA's News Release in April 2019 announced the province's plans to reduce funding by \$200 million per year which represents about a 26% reduction in the province's investment in public health units.
- Public health is funded by obligated municipalities (upper and single tier municipalities) however, discretionary grants can be administered by the Minister.
- The government has exercised its discretion by cutting back provincial advancements to public health with the understanding that municipalities will pay for public health services.
- Not only are municipalities required to fund public health but what they do is heavily prescribed by the province either in legislation or Ontario public health standards.
- After a phone call with the Ministry, the expectation is that the impact of the Region's grant will be minimal.
- The Region's Health Department still has to provide programs and services while the restructuring is happening.
- While all the restructuring is happening, there is the creation of the new Ontario Health Super Agency and the Ontario Health Teams.
- The Region's Health Department will be expected to implement the low-income seniors' dental program when announced.
- Further details are expected in the weeks and months ahead.
- Expectation that the governing legislation (the Health Protection and Promotion Act) will be opened up in the fall to make provision for regional public health entities, etc.

5.2 Troy Cheseboro, Chief of Region of Durham Paramedic Services (RDPS),
regarding Region of Durham Paramedic Services Update

T. Cheseboro, Chief of Region of Durham Paramedic Services (RDPS) provided a PowerPoint Presentation with regards to Paramedic Services Update. A copy of the Presentation was provided as a handout.

Highlights of the presentation included:

- Call Volume
 - Priority 1-4
 - Priority 1-4 +8
 - 39% Increase since 2014
- Total Patient Carrying Calls
- Current Patterns
- Calls vs Vehicle Hours
- Vehicle/Staffing Changes
- Provincial Update
 - April 15, 2019 – received notice that the Ministry of Health and Long-Term Care intends to look at restructuring paramedic services
 - April 16, 2019 – emergency Board meeting with Ontario Association of Paramedic Chiefs (OAPC) to receive update
 - April 16, 2019 – notified staff of information received and to await details
 - April 17, 2019 – OAPC provided media release
- Information
 - OAPC has long supported changes to dispatch system in the form of CAD updates as well as call prioritization software
 - OAPC has suggested creation of a College of Paramedics
 - OAPC has suggested changes to provincial oversight

T. Cheseboro responded to questions with regards to whether the Primary Care Outreach Pilot will be impacted; the amalgamation of all services together and how that will affect the final union collective agreement; the creation of separate unions for paramedics; timeline with regards to the changes; and public input.

6. Health

6.1 Correspondence

- A) Correspondence from the Association of Local Public Health Agencies (aLPHa) to the Minister of Health and Long-Term Care dated May 3, 2019 regarding Modernizing Ontario's Health Units
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A copy of the correspondence from the Association of Local Public Health Agencies (aLPHa) to the Minister of Health and Long-Term Care dated May 3, 2019 regarding Modernizing Ontario's Health Units was provided as an attachment to the Addendum.

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

- A) That the correspondence from the Association of Local Public Health Agencies regarding Modernizing Ontario's Health Units be endorsed; and
- B) That whereas in the 2019 Ontario budget, the Government announced its plan to restructure Ontario's public health system and reduce public health funding by \$200 million per year; and

Whereas it has proposed changing the cost-sharing arrangement such that the provincial share is reduced to 70% and the municipal share is increased to 30% for 2019-2020 and 2020-2021, with the provincial share to be further reduced to 60% in 2021-2022; and

Whereas the cost-sharing changes will apply to all 100% provincially funded programs; and

Whereas it is replacing 35 local boards of health and creating 10 Regional Public Health Entities, governed by autonomous boards of health; and

Whereas boards of health are mandated to provide public health programs and services in accordance with the Health Protection and Promotion Act, other relevant legislation and in accordance with the Ontario Public Health Standards: Requirements for Programs, Services, and Accountability; and

Whereas the creation of 10 Regional Public Health Entities is likely to cause major disruptions in every facet of the public health system; and

Whereas public health programs and services demonstrate superior value for money and return on investment; and

Whereas public health programs and services protect and promote the health and well-being of local residents thus reducing the demand on acute care services; and

Whereas the Regional Municipality of Durham is a member of the Association of Local Public Health Agencies (aLPHa); and

Whereas alPHa has been fully engaged in representing and advancing its members' interests with respect to public health restructuring including the attached letter to the Deputy Minister & Minister of Health and Long-Term Care;

Now therefore be it resolved:

That the Ontario government is urged to:

- Maintain its current provincial funding level to the Durham Region Health Department for 2019-2020,
- Consider deferring any future changes to the cost-sharing formula until it has consulted with alPHa, AMO, boards of health and obligated municipalities, including the Regional Municipality of Durham;
- Consult with local municipalities to inform decisions regarding boundaries, funding, governance, mandate, organizational structure, operations, etc. of the proposed 10 Regional public health entities, and

Be it further resolved that the Premier of Ontario, Deputy Premier & Minister of Health and Long-Term Care, Minister of Finance, Durham's MPPs, Chief Medical Officer of Health, AMO, alPHa and all Ontario boards of health be so advised.

CARRIED

6.2 Reports

There were no Health reports to consider.

7. **Social Services**

7.1 Correspondence

There were no communications to consider.

7.2 Reports

There were no Social Services reports to consider.

8. **Advisory Committee Resolutions**

There were no advisory committee resolutions to be considered.

9. Confidential Matters

There were no confidential matters to be considered.

10. Other Business

There was no other business to consider.

11. Date of Next Meeting

The next regularly scheduled Health & Social Services Committee meeting will be held on Thursday, June 6, 2019 at 9:30 AM in Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby.

12. Adjournment

Moved by Councillor Wotten, Seconded by Councillor Carter,
(27) That the meeting be adjourned.

CARRIED

The meeting adjourned at 10:29 AM

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: [#2019-MOH-4](#)
Date: June 6, 2019

Subject:

Amendment to By-Law 17-2016, the Durham Region Personal Services Setting By-Law.

Recommendation:

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

- A) That the current By-Law 17-2016 be amended to reflect updated infection prevention and control best practices received by the Ontario Agency for Health Protection and Promotion (Public Health Ontario).
 - B) That it approves and passes the amending by-law which updates the definition of “Infection Prevention and Control Best Practices for Personal Services Settings” at clause 1 and updates clause 4 to refer to current infection prevention and control best practices.
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Report:

1. Purpose

- 1.1 To seek approval of the attached amending by-law which amends By-Law 17-2016, a by-law to regulate compliance with infection prevention and control best practices and disclosure of health inspection information to the public regarding Personal Services Settings.

2. Background

- 2.1 By-Law 17-2016 was passed on March 9, 2016.
- 2.2 Since the by-law was passed, Public Health Ontario has released an update to the Infection Prevention and Control Best Practices for Personal Services Settings document that is referred to in the by-law.

3. Current Status

- 3.1 By-Law 17-2016 requires every person owning, operating, employed on or in a Personal Services Setting to comply with the Infection Prevention and Control Best Practices for Personal Services Settings, 2009, which was originally published by the Ministry of Health and Long-Term Care.
- 3.2 Oversight of the best practices document was transferred to Public Health Ontario, a Crown agency that provides expert scientific and technical support to government, local public health units, and health care providers.
- 3.3 Public Health Ontario released the [Guide to Infection Prevention and Control in Personal Service Settings, 3rd Edition](#) in November 2018 to replace the Infection Prevention and Control Best Practices for Personal Services Settings, 2009.
- 3.4 By-Law 17-2016 must be amended to ensure that owners, operators and employees of Personal Services Settings comply with the most recent guide.
- 3.5 Amendments are required to both the definition of “Infection Prevention and Control Best Practices for Personal Services Settings” in clause 1 and the reference to the document in clause 4.

4. Conclusion

- 4.1 In summary, it is recommended that Council approves and passes the proposed by-law to amend By-Law 17-2016 being a by-law to regulate compliance with infection prevention and control best practices and disclosure of health inspection information to the public regarding Personal Services Settings.

5. Attachments

Attachment #1: Draft Amending By-Law

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 Office

By-law Number **-2019
of The Regional Municipality of Durham

Being a by-law to Amend By-law 17-2016 being a by-law to regulate compliance with infection prevention and control best practices and disclosure of health inspection information to the public regarding Personal Services Settings.

Whereas the Council of The Regional Municipality of Durham has passed By-law 17-2016 to create a mandatory health inspection and disclosure program to improve the health of Region of Durham inhabitants and visitors.

And whereas the Province of Ontario has updated the standards, procedures and requirements in regard to infection prevention and control practices and how Personal Services Settings are inspected.

Now therefore, the Council of The Regional Municipality of Durham hereby enacts as follows:

1. That By-law 17-2016 be amended at clause 1 to remove the definition of “Infection Prevention and Control Best Practices for Personal Services Settings” and replace with the following definition:

“Infection Prevention and Control Best Practices for Personal Services Settings” means the most current Guide produced by Ontario Agency for Health Protection and Promotion or the Province of Ontario for the control of infections and to assist in developing policies and procedures to ensure an optimal level of care is provided, where such Guide should be seen as directing principles and indications or outlines of the expected practice.

2. That By-law 17-2016 be amended at clause 4 to remove the words “Infection Prevention and Control Best Practices for Personal Services Settings, 2009, as set by the Ministry of Health and Long-Term Care and the Province of Ontario pursuant to the HPPA” and replace with “the current Infection Prevention and Control Best Practices in Personal Services Settings as set by the Ontario Agency for Health Protection and Promotion or the Province of Ontario”.

This By-law Read and Passed on the -----th day of -----, 2019.

J. Henry, Regional Chair and CEO

R. Walton, Regional Clerk



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-5](#)
Date: June 6, 2019

Subject:

Award of Proposal RFP-181-2019 for the provision of a Primary and Secondary Food and Disposables Distributor for the Region of Durham's four (4) Long-Term Care Homes.

Recommendations:

That the Health and Social Services Committee recommends to Regional Council that:

- A) Sysco Central Ontario, a division of SYSCO Canada Inc. be awarded as the Primary Distributor for Food and Disposables Distribution Services in the estimated amount of \$4.5 million, and Gordon Food Service Ontario Inc. (GFS) be awarded as the Secondary Distributor in the estimated annual amount of \$500,000 for the Region of Durham's four (4) Long-Term Care Homes commencing December 1, 2019 through to November 30, 2023 with an option to extend for one (1) additional three (3) -year term and one (1) additional two (2) -year term, all in accordance with the terms and conditions set forth in the Region's Request for Proposal #RFP-181-2019 and HealthPro Procurement Services Inc.'s Nutrition and Food and Disposables Distribution Service Contracts #DE04977 and #DE04978; and
 - B) The existing agreements with GFS as the Primary Distributor and Sysco as the Secondary Distributor be extended to November 30, 2019 to allow time for transition of the menus and ordering patterns at each of the Region's four (4) Long-Term Care Homes; and
 - C) The Commissioner of Finance be authorized to execute any necessary agreements for distribution services and software subscriptions, including any required contract extensions and ongoing software maintenance and support.
-

Report:

1. Purpose

- 1.1 The purpose of this report is to recommend to Regional Council that the selected service providers listed for the provision of Primary and Secondary Food and

Disposables Distribution for the Long-Term Care Homes within the Region of Durham, in accordance with the terms and conditions of the Request for Proposal #RFP-181-2019 and HealthPro Procurement Services Inc's Nutrition and Food and Disposables Distribution Service Contracts #DE04977 and #DE04978, be approved for contract award.

2. Background

- 2.1 A competitive process (RFP) was undertaken to determine a source for the supply of a primary and secondary food service distributor for the Long-Term Care Homes within the Region of Durham.
- 2.2 The Region's RFP process was conducted based on the distributor prequalification process undertaken by HealthPro Procurement Services Inc. for their Nutrition and Food and Disposables Distribution Service Contracts #DE04977 and #DE04978.
- 2.3 The Region has been a member of HealthPro Procurement Services Inc., since 1996. This agreement with HealthPro has been recognized by Regional Council (as referenced in Reports 2011-LTC-14, 2012-LTC-05 and 2013-F-68).
- 2.4 HealthPro Procurement Services Inc. is a non-profit organization that combines the group purchases of several hospitals and long-term care homes within Canada, to form various contracts for goods and services established through supplier negotiations, requests for proposals, or competitive tenders. Beneficial pricing is obtained through bulk discounts offered by suppliers due to the large volumes of purchases made annually.
- 2.5 HealthPro Procurement Services Inc. conducted an RFP for the prequalification of food and disposable distribution services. The following three (3) companies were prequalified by HealthPro Procurement Services Inc. in both the food and disposables distribution service contracts under their contract #DE04977 and #DE04978 respectively:
 - a. Flanagan Foodservice
 - b. Gordon Food Services Inc.
 - c. Sysco Central Ontario, a division of SYSCO Canada Inc.
- 2.6 It was therefore, in the Region's best interest to leverage the pre-qualification process conducted by HealthPro Procurement Services Inc. and select a Primary and Secondary Distributor to cover its Long-Term Care Home requirements, by conducting an RFP process based on the HealthPro Procurement Services Inc. prequalification contracts. Due to the importance of procuring food and supplies on a timely basis for the LTC Homes, the four (4) Homes need to maintain both a primary and secondary food distributor. The secondary food distributor will supply food, beverages and other supplies on a less frequent basis as an alternate back-up, in the event the primary vendor is not able to supply the required product, such as but not limited to items out of stock, unavailability or an emergency requirement.

- 2.7 The intent of this RFP was to allow the HealthPro Procurement Services Inc. prequalified proponents to demonstrate their value-added services, customer services and proposed software system and various components/features with implementation plan meeting the Region's requirements for both the food and disposables distribution services under one main contract. The terms and conditions within the HealthPro Procurement Services Inc. contracts were the minimum standard on which the Region's #RFP-181-2019 was based.

3. Request for Proposal Process

- 3.1 #RFP-181-2019 was issued and distributed to the prequalified vendors on February 15, 2019. The RFP included a general scope of work and evaluation criteria. The RFP closed on March 12, 2019. The Respondents to the RFP were evaluated based on evaluation criteria.
- 3.2 Proposal submissions were received from the following three (3) firms:
- a. Flanagan Foodservice
 - b. Gordon Food Services Inc.
 - c. Sysco Central Ontario, a division of SYSCO Canada Inc.
- 3.3 The submissions were evaluated by the Evaluation Committee consisting of five (5) representatives from the LTC Division and overseen by Purchasing and based on the evaluation criteria. As a result of the evaluation for the value added, customer services and software system requirement evaluation criteria sections, Gordon Food Services Inc. and Sysco Central Ontario were invited to provide presentations. Following the presentations, the final scores were determined.
- 3.4 Based on the evaluation, Sysco Central Ontario received the highest point score.

4. Financial Implications

- 4.1 The Region of Durham's Purchasing By-law 68-2000 (Amended), Section 10.4.4 indicates that proposals received shall be analyzed and tabulated by the selection committee and an award determined. A report setting out the results and recommending an award shall be submitted by the designated official and Department Head to the appropriate standing committee and Council who shall make a decision.
- 4.2 Expenditures with the Primary and Secondary food distributors totalled approximately \$4.84 million in 2018, and approximately \$5 million is budgeted within the 2019 Food Service Program budgets for the four (4) long-term care homes for food and related supplies. The Primary Distributor will receive approximately 90% of the annual business with the Secondary Distributor receiving the remaining 10% of the business. These expenditures will also be included in future years' budgets.

5. Conclusion

- 5.1 It is recommended that Sysco Central Ontario, a division of SYSCO Canada Inc. be awarded as the Primary Distributor in the estimated annual amount of \$4.5 million, and Gordon Food Services Inc. be awarded as the Secondary Distributor in the estimated annual amount of \$500,000 for the Long-Term Care Homes within the Region of Durham commencing on December 1, 2019 and expiring November 30, 2023, with an option to extend for one (1) additional three (3)-year term and one (1) additional two (2)-year term, all in accordance with the terms and conditions set forth in the Request for Proposal #RFP-181-2019 and HealthPro Procurement Services Inc.'s Food and Disposables Distribution Service Contracts #DE04977 and #DE04978.
- 5.2 It is further recommended that the existing agreements with Gordon Food Service as the Primary Distributor and Sysco Central Ontario as the Secondary Distributor be extended to November 30, 2019 to allow time for transition of the menus and ordering patterns at each of the four (4) Long-Term Care Homes.
- 5.3 Finally, it is recommended that the Commissioner of Finance be authorized to execute any applicable distribution and software subscription agreements, including any required contract extensions and ongoing software maintenance and support.
- 5.4 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the financial recommendations.

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-6](#)
Date: June 6, 2019

Subject:

HealthPro Procurement Services Inc.'s Various Nutrition and Food Supplier Selections for the Region of Durham's four (4) Long-Term Care Homes.

Recommendations:

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

- A. That the HealthPro Procurement Services Inc. Nutrition and Food contract offered to the Region as a member of HealthPro Procurement Services Inc. for the four (4) Long-Term Care Homes nutrition and food requirements, be awarded to the various prequalified single suppliers included in Table 1 HealthPro #NFS-01-04-19 (Attachment 1) attached and the various prequalified multi suppliers included in Table 2 HealthPro #NFS-01-04-19 (Attachment 2) attached, representing a total cost of approximately \$515,000 annually for a contract term of three (3)-years up until March 31, 2022, with an option to extend for one (1) additional two (2) year term; and
 - B. That the Commissioner of Finance be authorized to execute the HealthPro Procurement Services Inc.'s Phase 2 Multi Supplier Selection form (Attachment 3), and any required agreements and/or extensions related to the various food contracts in Table 1 and Table 2.
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Report:

1. Purpose

- 1.1 The purpose of this report is to provide details and seek approval to award the recommended single and multi source suppliers included in Table 1 and Table 2 attached to this Report, for the Region of Durham's four (4) Long-Term Care Homes (LTCH) for one (1) three (3)-year term with an option to extend for one (1) additional two (2) year term in accordance with Report 2013-F-68 (Attachment 4).

2. Background

- 2.1 The Region has been a member of HealthPro Procurement Services Inc. since 1996. This agreement with HealthPro has been approved by Regional Council (Report #2013-F-68). The Region's membership agreement with HealthPRO is in its final optional year expiring in 2019. A report is currently being developed to request approval for a further multi-year extension with HealthPro to coincide with the existing contracts with HealthPro that are ongoing up until at least the year 2024 and potentially beyond if all extension years are exercised by HealthPro and the Region.
- 2.2 HealthPro issued a Request for Tender (RFT) #NFS-01-04-19 (1, 2 and 3) for the prequalification of single and multiple suppliers for their various food and nutrition contracts scheduled to begin on April 1, 2019 for a period of three (3) years, with an option to extend for one (1) additional two (2) year term. Under these contracts, the Region can take advantage of favourable HealthPro contract pricing for the nutrition and food items being purchased by the Long-Term Care Homes.
- 2.3 Of the thirty-five (35) contracts the Region committed to prior to the release of the HealthPro RFT, only five (5) of the contracts are considered multi source supplier selections. The other 30 contracts were awarded by HealthPro as single supplier contracts for nutrition and food items (detailed in Table 1 and Table 2 attached).
- 2.4 Report 2013-F-68, item 3 subsections i-iii and iv outlines the parameters to determine a final source of supply where more than one supplier is identified by the Group Purchasing Organization (GPO) through their competitive process.

3. Supplier Selection for Multi-Supplier Contracts:

- 3.1 The determination of final source of supply where multiple suppliers were prequalified was made in accordance with one or more of the parameters set out in Report 2013-F-68, specifically, the ability to maintain continuity of source of supply or required product and through consultation with the Procurement Officer and the LTC Home based on HealthPro Procurement Services Inc.'s on-line Decision-Making Tool, past purchasing practices, menu and resident preference.
- 3.2 The final multi source supplier(s) are included in Table 2 attached.

4. Financial Implications

- 4.1 The Region of Durham's Purchasing By-law 68-2000 (Amended), Section 10.4.4 indicates that proposals received shall be analyzed and tabulated by the selection committee and an award determined. A report setting out the results and recommending an award shall be submitted by the designated official and Department Head to the appropriate standing committee and Council who shall make a decision.

- 4.2 Expenditures for the previous thirty-five (35) HealthPro contracts totalled \$513,000 in 2018. Financing in the amount of \$515,000 for renewing thirty-five (35) HealthPro contracts in Table 1 and 2 attached is contained within 2019 Food Service Program budgets of the four (4) LTC Homes for food and related supplies.

5. Conclusion

- 5.1 It is recommended that the Nutrition and Food Service contracts offered to the Region as a member of HealthPro continue to be leveraged at a cost of approximately \$515,000 annually for one (1) three (3)-year term with an option to extend for one (1) additional two (2) year term.
- 5.2 It is further recommended that the final source supplier(s) as determined in accordance with the one or more of the parameters set out in Report 2013-F-68, specifically, the ability to maintain continuity of source of supply of required product as well as purchasing practices, menus and resident preference, be awarded for the five (5) contracts for which multi source suppliers were identified through the HealthPro competitive bid process.
- 5.3 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the financial recommendations.

6. Attachments

Attachment #1: Table 1 HealthPro #NFS-01-04-19

Attachment #2: Table 2 HealthPro #NFS-01-04-19

Attachment #3: HealthPro Procurement Services Inc.'s Phase 2 Multi Supplier Selection form

Attachment #4: Report 2013-F-68

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer

Table 1

Attachment: 1

**HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (1) – Single Source Supplier Award Recommendations**

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Single Source Suppliers for Award	Supplier Brand(s)	+ or - % Change from Expiring Contract	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
DE01037	Pasta Sauce	Primo Foods Inc.	Primo	5.44%	DE01037 Pasta Sauce (Primo Foods Inc.)	\$2,350
DE01085	Bagels	Canada Bread Company Ltd.	Bakersource and Canada Bread	18.77%	DE01085 Bagels (Canada Bread Company and Oakrun Farm Bakery Ltd.)	\$4,200
DE01146	Fries	Lamb Weston	Generation 7, Hampton Manor, Hearty House, Lamb's, Stealth and Sweet Things	-0.02%	DE01146 Fries (Lamb Weston)	\$11,300
DE01149	Pudding and Gelatin Refrigerated	Kozy Shack Enterprises LLC (Land O'Lakes)	Kozy Shack	0.00%	DE01149 Pudding, Mousse and Gelatin (Land O'Lakes)	\$35,470
DE01482	Dressing Salad Spreadable Portion	Kraft Heinz Canada	Kraft Miracle Whip	3.48%	DE01482 Dressing Salad Spreadable (Kraft Heinz Canada)	\$2,450
DE01487	Ice Cream Novelty	Chapman's Ice Cream	Chapman's	-19.23%	01487 Ice Cream Novelty (Chapman's)	\$10,000
DE04909	Ice Cream	Chapman's Ice Cream	Chapman's	2.42%	DE931CA Ice Cream (Chapman's)	\$17,700
DE04908	Beverage Crystals	Dr. Oetker Canada Ltd.	Dr. Oetker	1.99%	DE351CA Beverage Crystals (Dr. Oetker)	\$700
DE04910	Pudding, Mousse & Gelatin Powder	Berthelet Food Products Inc.	Berthelet McLean	-12.21%	DE523CA Pudding, Mousse & Gelatin Powder (Dr. Oetker)	\$7,200
DE04911	Tea	Spectrum Food Group	Olinda	9.49%	DE350CA Tea (Tetley Canada Inc.)	8,600
DE04912	Sweeteners	Zast Food	Sugar Twin	8.03%	DE521CA Sweeteners	\$3,700

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**HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (1) – Single Source Supplier Award Recommendations**

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Single Source Suppliers for Award	Supplier Brand(s)	+ or - % Change from Expiring Contract	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
		Corporation			(Zast Food Corp)	
DE04914	Muffin Batter – Frozen	Tasty Selections	Tasty Selections	14.09%	DE331CA Muffin Batter Frozen (Pepsico Foods Canada)	\$12,200
DE04915	Deli Meat – Sliced, Shaved and Portion	Sofina Foods Inc.	Vienna	-1.47%	DE450CADeli Meat (Maple Leaf)	\$54,400
DE04917	Eggs – Liquid & Fully Cooked – Refrigerated & Frozen	Burnbrae Farms Limited	Burnbrae Farms, Eggs2Go, Naturegg, Prestige	24.09%	DE610CA Eggs, Liquid & Frozen (National Eggsolutions)	\$17,500
DE04918	Seafood Shelf Stable	Shafer-Haggart Ltd.	Admiral	3.81%	DE535CA Seafood, Canned (Shafer-Haggart Ltd.)	\$10,700
DE04919	Pasta Dry	Primo Foods Inc.	Primo	-0.57%	DE536CA Pasta (Primo Foods Inc.)	\$8,000
DE04920	Pasta Frozen	Catelli Foods Canada Corporation	Arrezzo, Olivieri	7.08%	DE536CA Pasta (Catelli Foods)	\$34,500
DE04923	Vegetables, Canned	Bonduelle Canada Inc.	Bonduelle	9.91%	DE160CA Vegetables, Canned (Bonduelle Canada Inc.; Primo Foods Inc.)	\$6,500
DE04924	Dressing Salad Pourable – Portion	Kraft Heinz Canada	Kraft	2.84%	DE518CA Dressing Salad Pourable (Kraft Heinz, Unilever Food Solutions)	\$10,100
DE04925	Cake Sheet	The Original	The Original	4.23%	DE435CA Cake Sheet	\$35,400

Table 1

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**HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (1) – Single Source Supplier Award Recommendations**

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Single Source Suppliers for Award	Supplier Brand(s)	+ or - % Change from Expiring Contract	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
DE04926	Cake, Special Diet	Cakerie Healthcare Food Services	Cakerie Simply good	1.99%	(The Original Cakerie) DE439CA Cake, Special Diet (Healthcare Food)	\$10,300
DE04927	Cake, Other	Healthcare Food Services	Simply Good	2.10%	DE635CA Cake, Other (Healthcare Food)	\$8,300
DE04927	Dessert Bars	The Original Cakerie	The Original Cakerie	5.88%	DE636CA Dessert Bars (The Original Cakerie)	\$18,100
DE04929	Dessert Portion	Give & Go Prepared Foods	Bakersource, Homestyle, Kimberley's Bakeshoppe, The Worth Crumb, Two-Bite	0.81%	DE637CA Dessert Portion (Give & Go)	\$7,500
DE04930	Caterware	Polar Pak Inc.	ECO, Greenstripe, Polar Caterline, Polar Green Good, Polar Pac, Polar Pak n Serve	-0.29%	DE812CA Caterware (Dart Container Corp; Pactiv Canada Inc.; Polar Pak Inc.)	\$6,000
DE05004	Rice Frozen	Shalit Foods Inc. (Marsan Foods Limited)	Balanced Cuisine	-11.18%	DE171CA Rice (Campbells; Healthcare Food)	\$4,200
DE05006	Dressing Salad Pourable – Bulk	Kraft Heinz Canada	Kraft, Pure Kraft, Richardson, RSVP	2.91%	DE518CA Dressing Salad Pourable (Kraft Heinz, Unilever Foods)	\$10,100

Table 1

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**HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (1) – Single Source Supplier Award Recommendations**

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Single Source Suppliers for Award	Supplier Brand(s)	+ or - % Change from Expiring Contract	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
DE05009	Dressing Salad Spreadable – Bulk	Kraft Heinz Canada	Kraft, Miracle Whip, RSVP, Salad Bowl	2.98%	DE01482 Dressing Salad Spreadable (Kraft Heinz Canada)	\$8,800
DE05011	Pudding, Mousse & Gelatin – Shelf Stable, RTU	Kraft Heinz Canada	Jello-O	3.26%	DE01149 Pudding, Mousse & Gelatin, RTU (Land O' Lakes)	\$13,680
DE04922	Potato Products, Frozen	McCain Foods Canada	McCain	0	DE560CA Potato Products, Frozen (McCain Foods)	32,300
					2019 Total Estimated Budget for HealthPro Single Supplier Food Contracts:	\$412,250

Table 2
HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (2 and 3) – Multi Source Supplier Award Recommendations
Attachment: 2

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Multi Source Supplier(s) for Award	Supplier Brand(s)	LTC Home Selection	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
***DE03820	Salads Refrigerated	Country Queen Foods	Country Queen Foods	LVM	DE03820 Salads Refrigerated (Reser's Fine Foods)	\$18,000
		Keybrand Food	Keybrand	HDE, HDT, FVL		
***DE03979	Turkey – Cooked and Raw	Exceldor Foods Ltd.	Butterball, Sous Chef	All Homes	DE03979 Turkey – Raw and Cooked (Exceldor Foods)	\$21,200
		Sofina Foods Inc.	Cuddy, Lilydale	FVL, HDE		
***DE05153	Chicken – Fully Cooked, Diced, Battered & Breaded	Olymel	Flamingo, Olymel	HDT, LVM		
		Reuven International	Reuven	HDT, FVL, HDE	DE03973 Chicken Battered and Breaded/DE03974 Chicken Breast Cooked/DE03975 Chicken Diced Cooked (Concord Premium Meats, Exceldor Foods, JD Sweid, McCain, Reuven)	\$34,000
		Sofina Foods Inc.	Cuddy, Janes, Sofina	All Homes		
*DE04913	Bread Frozen (wheat based and gluten free bread)	Olymel	Flamingo, Galco, Olymel, Village	LVM		
		Canada Bread Company Ltd. (for all wheat based bread) – Prequalified as Single Source by HealthPro	Bakersource, Canada Bread	All Homes	DE433CA Bread Frozen (Furlani's, Healthcare Foods, Oakrun Farm Baking Ltd., Readybake Foods; Richard Products)	\$8,300

Table 2
HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (2 and 3) – Multi Source Supplier Award Recommendations

Attachment: 2

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

HealthPro Food and Nutrition Contract Number	HealthPro Food and Nutrition Contract Description	Recommended Multi Source Supplier(s) for Award	Supplier Brand(s)	LTC Home Selection	Expiring HealthPro Contract Number, Description & Supplier	2019 LTC Estimated Budget For Each Contract
		O'Dough's (for all gluten free bread) – Prequalified as Single Source by HealthPro	O'Dough's	All Homes		
**DE04916	Eggs Frozen Value Add	Burnbrae Farms Limited – Prequalified for a two supplier selection by HealthPro.	Burnbrae Farms, Prestige	All Homes	DE610CA Eggs, Liquid and Frozen (National Eggsolutions)	\$19,300
		EggSolutions - Prequalified for a two supplier selection by HealthPro.	EggSolutions, Sunnyfresh, Wholesome Farms	All Homes		
					2019 Total Estimated Budget for HealthPro Multi Supplier Food Contracts:	\$100,800

*DE04913 Bread Frozen – Only two suppliers were pre-qualified by HealthPro for this Contract - Canada Bread Company (for wheat based bread only) and O'Dough's (for gluten free bread only). As a result, both suppliers are being recommended for award by the LTC Homes.

Table 2

Attachment: 2

**HealthPro Purchasing Services Inc. Various Food & Nutrition Prequalified Suppliers
RFQ #NFS-01-04-19 (2 and 3) – Multi Source Supplier Award Recommendations**

Contract Term: April 1, 2019 to March 31, 2022 (plus option to extend for (1) one additional, (2) two year term)

****DE04913 Bread Frozen** - Only two suppliers were pre-qualified by HealthPro for this Contract - Burnbrae Farms Limited and EggSolutions. This is a HealthPro two-supplier selection contract, as a result, the recommendation for award from the LTC Homes is for both these suppliers.

*****DE03820 Salads Refrigerated, DE03979 Turkey Cooked and Raw and DE05153 Chicken Fully Cooked, Diced, Battered and Breaded** – Multiple suppliers were prequalified by HealthPro for each of these Contracts. The LTC Homes made their supplier selections based on HealthPro's Decision Making Tool (price), product quality, menus/textures, ordering practices and Resident preferences.

SUPPLIER SELECTION

Contract Start Date – April 1, 2019

Please select only one supplier for each contract to which you have already committed:

Service	Contract #	Type	Contract Name	Awarded Suppliers		Member Start Date (if different)	Estimated Annual Usage* (in dollars)
DE	03820	CA	SALADS REFRIGERATED	Country Queen Foods Keybrand Foods Reser's Fine Foods	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
DE	03979**	CA	TURKEY – COOKED & RAW	Belmont Meats Exceldor Foods Ltd. Olymel Sofina Foods Inc.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
DE	04913	CA	BREAD FROZEN	Canada Bread Company Ltd. O'Dough's	<input type="checkbox"/> <input type="checkbox"/>		
DE	04916**	CA	EGGS FROZEN VALUE ADD	Burnbrae Farms Limited EggSolutions	<input type="checkbox"/> <input type="checkbox"/>		
DE	05153**	CA	CHICKEN – FULLY COOKED, DICED, BATTERED & BREADED	Concord Premium Meats JD Sweid Olymel Reuven International Sofina Foods Inc.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

**Please select up to 2 suppliers for 03979, 04916 and 05153.

Members are reminded that commitments resulting in a change of supplier may require lead time for implementation/transition. As implementation times vary depending on the contract and member specifics, please contact HealthPRO if you require assistance in estimating implementation/transition timelines. Commitments that do not result in a change of supplier may require up to 30 days for processing. Upon receipt of this form, HealthPRO will provide you with the contract start date for your organization.

Please note Authorized signatory not required as authorization was provided at the Commitment Phase. This form is strictly for supplier selection.

Organization name: _____

Operational contact name: _____

Telephone number: _____

Email address: _____

Print name: _____

Date: _____

1 Please return to Catherine Chong by email:
cchong@healthprocanada.com



The Regional Municipality of Durham
 Report to: Finance and Administration Committee
 From: R. J. Clapp, Commissioner of Finance
 Report No.: 2013-F-68
 Date: June 18, 2013

SUBJECT:

Group Purchasing with HealthPRO Procurement Services Inc. and Medbuy Corporation

RECOMMENDATIONS:

That the Finance & Administration Committee recommends to Regional Council that:

- 1) A new Participation and Shareholder Agreement be negotiated with HealthPRO Procurement Services Inc., a Group Purchasing Organization (GPO), in which the Region currently maintains membership, for a five-year period, 2013 to 2018, with the option to renew for the term of one additional year;
- 2) Any contracts offered to the Region as a member of GPOs HealthPRO and Medbuy continue to be leveraged and expanded upon, conditional on those Contracts being established through a competitive method similar to that noted in the Region's By-law and through organizations that meet the requirements of the Broader Public Sector (BPS) Procurement Directive;
- 3) Where more than one supplier is identified by the GPO through their competitive process, the Designated Official (under the Purchasing By-law #68-2000 (as amended)) in consultation with the user Department, utilize one or more of the following parameters to determine a final source of supply:
 - i) A Supplier is already under contract with the Region (for other goods/services) and it has been confirmed that the supplier provides consistently acceptable service, favourable payment and/or contract terms;
 - ii) The ability of the Supplier to offer the Region additional rebates or incentives in addition to those offered through the GPO contracts (added-value);
 - iii) Supplier's ability to meet the delivery requirements and/or Response Times of the Region's user department;
 - iv) Ability to maintain continuity of source of supply of required products;
 - v) Work with the Department to standardize on products if possible, obtain samples for review and evaluation from a functional and/or clinical perspective in order to choose which GPO contract best suits their needs;
- 4) The Commissioner of Finance be authorized to execute the necessary Agreements including any amendments, and Contract commitments.

REPORT:**1.0 PURPOSE**

- The purpose of this report is to recommend to Regional Council that the Region continue to leverage and expand upon the number of Contracts offered by both Medbuy and HealthPRO, two of Canada's largest Group Purchasing Organizations (GPO). The Region is currently a member of both Medbuy and HealthPRO. An agreement was established with Medbuy in August 2012 (Report 2012-F-53 and 2012-MOH-40). The existing agreement with HealthPRO was entered into on March 13, 1996 and needs to be updated, as recommended in this Report.

2.0 BACKGROUND**2.1 HealthPRO Procurement Services Inc.**

- The Region has been a member of HealthPRO Procurement Services Inc. since 1996. This agreement with HealthPRO has been recognized by Regional Council (as referenced in Reports 2011-LTC-14, 2012-LTC-05). There is a current need to update the existing Participation and Shareholder Agreement in place with HealthPRO to better reflect the present state of public purchasing obligations and the Region's contractual requirements.
- HealthPRO Procurement Services Inc. is one of Canada's largest GPO's and serves approximately 260 members and represents over 800 healthcare facilities. HealthPRO Procurement Services Inc. is a non-profit organization that combines the group purchases of hospitals and long term care homes to form various contracts for goods and services established through supplier negotiations, requests for proposals, or competitive tenders.
- Representatives of the Region's Long Term Care homes have, in the past, participated as a Committee member in HealthPRO Request for Proposals (RFP's) issued to establish suppliers and distribution sources for various products required by the Region's Long Term Care Homes.
- Current HealthPRO Contract Commitments (Long Term Care Homes)
 - Food Distribution
 - Various Food Contracts (Dairy, Meat, Bread/Rolls, Eggs, Beverages, Soups, Purees, Gravies, Vegetables, Fruits)
 - Incontinence Supplies
 - Warewashing Chemicals

2.2 Medbuy Corporation

- The Region became an Associate Member of Medbuy in August 2012 primarily through the need to purchase Pharmaceuticals for its EMS Division. (Report 2012-F-53 and 2012-MOH-40).

- Medbuy Corporation is a GPO that has provided group purchasing services to Canadian healthcare organizations for more than 22 years and its members include hospitals, long-term care facilities and publicly funded EMS services including Hamilton EMS and Muskoka EMS.
- Current Medbuy Contract Commitments:
 - Pharmaceutical Contracts for EMS
 - Medical/Surgical Contracts for EMS

2.3 Request for Information

- In September 2012, a Request for Information (RFI) 418-2012 was issued to gather information on other GPO's and/or Buying Groups. The RFI was posted on the Region's website and 6 responses were received. From the information contained in the responses, it was deemed that, HealthPro and Medbuy are the only two GPO's that meet the overall needs of the Region in terms of compliance to the Ontario Ministry of Finance's Broader Public Sector (BPS) Supply Chain Secretariat's Procurement Directive (BPSPD) and the variety of large scale contracts that can be offered to the Region as a whole. As the Region is an existing member of Medbuy and HealthPRO, it is recommended that the Region continue to leverage and expand upon the number of Contracts offered by these two GPO's.

3.0 ANALYSIS

3.1 Benefits of utilizing GPO's (Medbuy and HealthPRO)

- The following are some of the benefits of utilizing GPO's, specifically Medbuy and HealthPRO:
 1. Leverage buying power of the GPO, rather than competitively bidding our smaller isolated volumes, allowing for procurement of items at a lower cost, therefore yielding greater cost savings across the entire organization, and better utilization of public funds.
 2. Medbuy and HealthPRO have a focus on Healthcare procurement and Long Term Care requirements, however, they also offer a wide variety of other contracting categories from which any department of the Region can benefit.
 3. Medbuy and HealthPRO, as Group Purchasing Organizations, are both obligated to comply with the Ontario Ministry of Finance's BPS Supply Chain Secretariat's Procurement Directive (BPSPD). Both Medbuy and HealthPRO have provided the Region with documents that attest that their business operations comply fully with the Ontario Ministry of Finance Broader Public Sector Supply Chain Directive.

4. Efficiencies will be gained as a result of the reduced administrative efforts involved with managing the competitive bidding process for both the Region's user department(s) and Purchasing Section. This leads to a more effective management of resources by utilizing strategic procurement objectives and will result in efficiencies of scale.
5. GPO contracts are not restricted to individual Regional departments and thus the Region as whole has the ability to realize the benefits from the cost savings generated through group purchasing.
6. HealthPRO and Medbuy both offer rebates/dividends to the Region based on annual contract purchases. Rebates are established during the competitive bidding process between the GPO and the manufacturer directly on an individual contract basis. Usually, a percentage rebate based on purchases made is rewarded back to members on monthly, quarterly or annual basis. In 2012, the Region received in excess of \$90,000 in rebates based on annual purchases made by leveraging the HealthPRO contracts referenced in 5.0 Financial Implications herein. It is estimated that the Region will start to yield rebates associated with Medbuy contracts by October 2013. While the agreement with Medbuy was signed in August 2012, the Region just started to make purchases in March 2013. The rebates are applied to the relevant budgets to provide the net cost for the programs.

3.2 Recommended Approach to Select a Contract and Final Source of Supply for Multiple Vendors

- Dependent on the type of commodity being purchased, both Medbuy and HealthPro may have similar contracts available for the Region to choose from.
- Some GPO contracts also result in more than one source of supply available to their membership. For example, a manufacturer with which the GPO forms the contract may identify more than one distributor to purchase their products through.
- Where more than one GPO offers a contract or where more than one manufacturer or distributor of that manufacturer is selected by the GPO through their competitive process, it is recommended that the Designated Official (under the Purchasing By-law #68-2000 (as amended)) in consultation with the user Department, utilize one or more of the parameters as identified in the body of this report to determine a final source of supply, as relevant and appropriate based on one or more of the following requirements:
 - a) A Supplier is already under contract with the Region (for other goods/services) and it has been confirmed that the supplier provides consistently acceptable service, favourable payment and/or contract terms;

- b) The ability of the Supplier to offer the Region additional rebates or incentives in addition to those offered through the GPO contracts (added-value);
- c) Supplier's ability to meet the delivery requirements and/or Response Times of the Region's user department;
- d) Ability to maintain continuity of source of supply of required products;
- e) Work with the Department to standardize on products if possible, obtain samples for review and evaluation from a functional and/or clinical perspective in order to choose which GPO contract best suits their needs.

3.3 Approval Process to be Followed for Notification of Selection of Supplier

- When the Region elects to leverage a contract with a GPO the Region's Purchasing By-law 68-2000 (as Amended), Article 10.0 will be followed accordingly to recommend an award and obtain Council approval in each case.

4.0 PURCHASING BY-LAW

- Section 13.0 of the Purchasing By-Law 68-2000 (as amended) establishes the ability to enter into arrangements on a co-operative basis where there are economic advantages in doing so, provided the method of acquisition and the awarding and reporting process is in accordance with the requirements of the Region's By-Law.

5.0 FINANCIAL IMPLICATIONS

- Below are the 2013 approved operating budgets associated with commodities where GPO contracts are either currently in place, or have potential to be expanded upon further:

SPEND/BUDGET INFORMATION	2013 BUDGET
Medical Supplies (LTC)	\$483,900
Medical Supplies and Pharmaceuticals (EMS)	\$819,800
Incontinence Supplies	\$480,000
Nursing Supplies & Infection Control	\$423,400
Raw Food (LTC)	\$4,328,800
Laundry Chemicals (LTC)	\$37,500
Total	\$6,573,400

6.0 CONCLUSION

- It is recommended that a new Participation and Shareholder Agreement be negotiated with HealthPRO Procurement Services Inc., a Group Purchasing Organization (GPO), in which the Region currently maintains membership, for a five-year period, 2013 to 2018, with the option to renew for the term of one additional year.
- It is also recommended that any contracts offered to the Region as a member of GPOs HealthPRO and Medbuy continue to be leveraged and expanded upon, conditional on those Contracts being established through a competitive method similar to that noted in the Region's By-law and through organizations that meet the requirements of the Broader Public Sector (BPS) Procurement Directive.

Respectfully submitted for your approval.

R.J. Clapp, CPA, CA
Commissioner of Finance

Recommended for Presentation to Committee:

G.H. Cubitt, M.S.W.
Chief Administrative Officer



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-7](#)
Date: June 6, 2019

Subject:

Application for New Long-Term Care Beds to the Ministry of Health and Long-Term Care

Recommendation:

That the Health and Social Services Committee recommends:

That the Regional Chair and Regional Clerk be authorized to sign the application for submission to the MOHLTC indicating the Region's endorsement of the application to build a new 200-bed Long-Term Care Home in North Pickering and its acceptance of the terms and conditions as outlined in the Long-Term Care Home Development and Redevelopment Application Declaration and Application Form.

Report:

1. Purpose

- 1.1 The purpose of this report is to seek the endorsement of Regional Council to submit an application to build a new 200-bed Long-Term Care Home in North Pickering which is part of the Durham West sub-region of the Central East Local Health Integration Network (CE LHIN).

2. Background

- 2.1 In January 2019, the government of Ontario released the document, "Hallway Health Care: A System Under Strain". The Ministry of Health and Long-Term Care (MOHLTC) announced its strategy to end hallway medicine which would see the addition of 15,000 new long-term care beds in Ontario within five (5) years to help meet demands of an aging population.
- 2.2 While there has been no official call for applications, there is an open window for interested parties to submit applications to the MOHLTC. Of the 15,000 new beds over five (5) years promised by government 7,232 new beds have been allocated throughout the province as of April 30, 2019.

- 2.3 The Application Form and the Application Declaration as well as the Construction Funding Subsidy Policy and Design Standards will be made available at the request of committee members.
- 2.4 Highlights from the Construction Funding Subsidy (CFS) Policy for the LTCHs per diem calculation include:
- a. The size of the home;
 - b. The level of environmental standard the project meets, using Leadership in Energy and Environmental Design (LEED);
 - c. The proportion of basic rooms versus preferred accommodation in the home;
 - d. Enhanced transition support;
 - e. Successful non-profit and municipal home applicants will be eligible for up to \$250,000 per home to assist in planning and organizing for development
- 2.5 Funding per diem for a 200-bed LEED Silver home is \$18.03 or \$1,316,190 annually for 25 consecutive years. This is inclusive of \$1 per diem or \$73,000 annually for LEED Silver Certification.

3. Discussion

- 3.1 The healthcare system is facing capacity pressures and with demographic projection, there will be added strain on the system. As of February 2019, the first choice wait list for admission to LTC in Durham West is 1,618 individuals with an average annual placement of 292 beds per year. Because of long wait times for admission to LTC, people are waiting in hospitals before moving to an open bed in an LTC home.
- 3.2 There were 322 alternate level of care (ALC) patients in acute care beds in the Central East Local Health Integration Network (CELHIN) as of February 2019. The largest number of ALC days are attributed to patients waiting to be discharged to LTC. With LTC homes in the CELHIN running at 99.3% occupancy rate, coupled with a growing population, this pressure will continue to grow.
- 3.3 Many of the ALC patients are considered “difficult to place” and their applications for long-term care are often refused by home operators. Examples of “difficult to place” patients include those with specialized medical needs or severe aggressive behaviours associated with dementia.
- 3.4 The building design of the proposed new LTC home would consider the challenges associated with the “difficult to place” population. The proposed 200 bed LTC home would include a twenty (20) bed Transitional Behavioural Supports Unit, subject to designation and funding, two (2) twenty-six (26) bed secure units and a twenty (20) bed Resident Home Area providing specialized medical care. The proposed LTC home would also include two (2) short stay respite beds.

- 3.5 The proposed new LTC home would be built in Seaton along Whitevale Road, just west of Brock Road, in the City of Pickering. The neighbourhood will be a mix of residential development and parkland, with a community park located directly to the south of the proposed site. This home would be the only LTC home in North Pickering.

4. Financial Implications

- 4.1 If the application to the MOHLTC for a new 200-bed LTC home is approved by the MOHLTC, a business case will be prepared in consultation with the departments of Finance and Works and a report seeking approval to proceed with the development of a new LTC home and acceptance of the conditions as outlined in the Application for Long-Term Care Home Development and Redevelopment will be prepared for Regional Council. As per the Region's Budget Management Policy, all new capital projects undertaken by Regional Departments require a business case to ensure benefits to stakeholders by striving for an appropriate prioritization of taxpayers' dollars and resources.
- 4.2 Finance staff will review the application before submission to the Province.

5. Conclusion

- 5.1 The Region of Durham has a long history as a stellar care provider and Regional homes are a preferred choice for many residents.
- 5.2 In January 2019, the government announced that 15,000 new long-term care beds would be awarded to meet public demands of an aging population.
- 5.3 Durham Region requires additional long-term care beds given the current wait lists and the projected increase in seniors' population.
- 5.4 If the application for a new long-term care home in North Pickering is approved by the MOHLTC, a business case will be brought forward to Regional Council seeking approval to proceed.

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-8](#)
Date: June 6, 2019

Subject:

Update on Provincial Program and Funding Changes Affecting the Social Services Department

Recommendation:

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

That the Ontario government be requested to reconsider the implementation of changes to program design, funding and cost-sharing formulas for Social Services until 2020 and to consult with the Ontario Municipal Social Services Association and its members, including the Regional Municipality of Durham, on the nature and scope of these changes.

Report:

1. Purpose

- 1.1 The 2019 Ontario Budget and subsequent communications from various provincial Ministries have outlined several funding and program changes that will affect the Social Services Department. This report provides a summary of the changes to programs and funding and the impacts to Social Services based on the incomplete information available.

2. Background

- 2.1 Since the April 11, 2019 Provincial Budget announcement, the Social Services Department has been receiving communications from some of the five Ministries which provide funding for Regionally delivered programs. We are learning of changes in provincial funding levels and in Regional cost-sharing requirements, in some cases retroactively.

- 2.2 Information is being delivered in a piecemeal manner, with provincial officials conveying incomplete details through letters and phone calls with different program areas at different times. This is making it very difficult for Social Services to fully determine what the impacts will be this year, and in the future.
- 2.3 Staff are also hearing about multi-year funding reductions, or changes to cost-sharing formulas that would see Durham Region Social Services paying for a greater proportion of program and service costs in future years.
- 2.4 The following sections discuss different program areas based on the incomplete provincial information available so far.

3. Early Learning and Child Care

- 3.1 Access to early learning and child care is imperative and has a direct impact on the economic vitality of our region.
- 3.2 Information from the Ministry of Education indicates that the child care funding allocation will decrease, and Durham will be required to share more of the costs of expanding child care thus potentially limiting the ability of the Region to create new child care spots. While the Ontario budget commits up to \$1 billion to create a maximum of 30,000 child care spaces in schools province-wide over a five-year period it appears that Durham would have to bear additional costs to access new spaces. The previous Ontario government had committed in 2017 to fully fund the creation of 100,000 new child care spaces over five years.
- 3.3 On April 18, 2019, the Region received a funding allocation letter from the Ministry of Education indicating that the 2019 Child Care funding allocation will decrease by \$1.85M from the 2018 total allocation. The Region had budgeted for no Provincial funding increase in 2019, unless previously confirmed by the Provincial government. As a result, the Provincial funding in the 2019 Council approved budget is overstated by \$1.85M.
- 3.4 In addition, the Province has also advised of new cost-sharing ratios for certain programs.
 - a. The Child Care Expansion Program that had been 100% provincially-funded now requires the Region to pay 20% of operating costs, which translates to an additional \$2M in net Regional expenditures in 2019 to access the same amount of provincial provided in 2018. This change was originally announced by the province to be retroactive to April 1, 2019. Media reports indicate that the Premier of Ontario has now stated that there will be no retroactivity.
 - b. There are also changes to authorized allocations and cost-sharing on program Administration. Previously, the Region could allocate up to 10% provincial funding towards the administrative costs associated with providing the Expansion, Wage Enhancement, and Early Learning and Child Care provincial programs. Now, only 5% of the provincial funds for these programs can be allocated to administration and the Region is not required to cost-share at 50-

50. Based on current information the estimated shortfall is approximately \$1.0M in 2019, annualized to \$1.4M in 2020.

- 3.5 If all commitments in the 2019 Regional Budget approved by Council are to be maintained, the estimated budget shortfall is approximately \$4.85 M.
- 3.6 The Region has been advised by Ministry staff that we will need to see the detailed Service Contract and Transfer Payment Agreement to be able to determine the actual impact of the Provincial changes. Social Services understands that there may be some flexibility in how it utilizes municipal funding to offset the provincial cutbacks, but it appears that doing so could reduce services to families. Until we have the final documents from the Ministry, the Region is unable to commit to meeting the needs of our children and families and must continue a freeze on child care fee subsidy placements. Currently, the wait list for child care fee subsidy is more than 5,000 children and the length of time on the waitlist is in excess of a year.
- 3.7 In 2019 the Ministry of Education will be considering updates to the Child Care Funding Formula and a new child care plan. Our families are depending on the service improvements outlined in Durham's Early Learning and Child Care Service Plan 2018-2022. To adequately plan and maintain our service delivery, we require a funding commitment beyond 2019.
- 3.8 As of March 31, 2019, the province ended its 100% provincially-funded Fee Stabilization Program to support child care worker minimum wages and other compensation, and to stabilize licensed child care fees with the 2018 increase in the minimum wage level. In 2018, \$2 million dollars in Fee Stabilization payments was provided to service providers in Durham Region. The impact this funding reduction will have on increases to child care fees paid by parents and The Region of Durham for child care fee subsidy is not yet known.
- 3.9 The provincial budget proposed a new Ontario Childcare Access and Relief from Expenses (CARE) tax credit. Under this proposed program families could receive up to \$6,000 per child under seven, up to \$3,750 per child between the ages of seven and 16, and up to \$8,250 per child with a severe disability. The proposed new CARE tax credit would provide for up to 75 percent of their eligible child care expenses for a range of child care options, would start with the 2019 tax year and would be available in addition to provincial and federal tax relief for eligible child care expenses (Child Care Expense Deduction).
- 3.10 The limited information provided about the Province's new CARE income tax credit program does not address how the program will integrate with the existing service delivery model or how funding to child care operators may be impacted.

4. Housing

- 4.1 Affordable, accessible and suitable housing is essential for healthy communities, and strong and vibrant neighbourhoods.

- 4.2 At Home in Durham, the Durham Region Housing Plan 2014-2024, reinforces the Region's commitment to ending homelessness in Durham; and ensuring affordable rent and greater housing choice for everyone. Durham residents and businesses, through Regional property taxes, will invest over \$41M in 2019 to support the Housing Plan.
- 4.3 Adequate sustainable funding from upper levels of government is essential to develop effective local strategies to address increasing needs.
- 4.4 We recognize the need for more affordable and accessible housing options and will be reviewing the province's new Housing Supply Action Plan to determine its impact on Regional responsibilities, costs and residents.
- 4.5 Access to safe and affordable housing is a right not a privilege.
- 4.6 On April 17, 2019, The Region received a funding allocation letter from the Minister of Municipal Affairs and Housing with the following advice. It should be noted that only current year funding was confirmed with all future years' funding represented as "Planning Allocation".
- a. The 2019-20 funding for the final year of the Investment in Affordable Housing for Ontario – 2014 Extension (IAH-E) initiative will be \$2.66M. The Program Delivery and Fiscal Plan (PDFP) for this funding was approved by Council in January 2015 (ref #2015-J-13). Rent Supplements provided under this program will end on March 31, 2024.
 - b. The 2019-20 funding for the Ontario Priorities Housing Initiative (OPHI) will be \$4.5M. OPHI is modelled after the previous IAH-E program and an Investment Plan is required to be submitted to the Province by September 15, 2019. Future funding includes \$2.3M in 2020-21 and \$3.7M in 2021-22.
 - c. The 2019-20 funding for the Canada-Ontario Community Housing Initiative (COCHI) will be \$525k. COCHI funding represents a reinvestment of federal funding tied to end of mortgages and operating agreements. Future funding includes \$288k in 2020-21 and \$442k in 2021-22.
 - d. The 2019-20 allocation for the Community Homelessness Prevention Initiative (CHPI) will be \$8M – which was less than the previously allocation of \$9.1M confirmed by the Province and reflected in the Region's 2019 approved Budget. Future funding includes \$9.1M in each of 2020-21 and 2021-22.
- 4.7 As a result, the Provincial funding under the CHPI program is overstated in the 2019 Council approved budget, creating a financial pressure of \$0.8M in 2019 (annualized decrease of \$1.1M in 2019-20 CHPI funding). The impact will be felt, in part, by the community agencies we partner with to serve the homeless and the marginally housed.

5. Long-Term Care and Services for Seniors

- 5.1 We are waiting for further details about funding allocations for long-term care and services for seniors.
- 5.2 The Ontario government has announced the creation of 15,000 new long-term beds over 5 years across the province. Despite the growing population of seniors in the Region only 270 of the 7,232 allocated so far have been awarded by the province to long-term care operators in Durham.
- 5.3 Additional facilities and services will be required over the next decade to support the changing demographics in the Region of Durham.

6. Ontario Works Income and Employment Supports

- 6.1 Limited information regarding the proposed fundamental changes for Social Assistance employment programs makes it difficult for Regional staff to appropriately plan for continued high-quality services.
- 6.2 The Provincial Government announced that it will be integrating its social assistance employment services into Employment Ontario over the next few years, with three prototypes to be approved later in 2019. Through a competitive process open to any public, not-for-profit or private sector organization, service system managers will be selected to deliver the Employment Ontario programs. The Provincial Government is scheduling vendor engagements to provide organizations interested in bidding for the role of service system manager with information about the government's plans for the transformation and more details about the preliminary operating model as well as to obtain input from prospective vendors. The schedule for the actual bidding process would follow.
- 6.3 While the province is creating uncertainty around the continued Regional delivery of employment supports for social assistance recipients it has also mandated the Region to achieve client outcomes of 3% above the actual amounts achieved in 2018 or face a claw-back of up to 15% of the associated provincial funding. Durham Region included \$6.9M in its 2019 Budget, so there is a possible \$1M impact in 2019. Since client success in the job market depends on many factors outside Social Services staff control, the risk to our funding is difficult to assess. The potential claw-back provides an incentive for the Region to commit substantial resources to a program that it may ultimately have to wind-down in the medium-term future. Provincial staff have now advised that the Region will be allocated only \$6.7M rather than the \$6.9M budgeted.
- 6.4 Provincial staff have recently provided some information regarding the Ontario Works (OW) Program Delivery Allocation, which is cost-shared 50% provincial and 50% Regional. The Region has budgeted for over \$13.8M of provincial subsidy in 2019 which is tied directly to the front-line delivery of Social Assistance in Durham. A shortfall of approximately \$0.4M in provincial funding is now forecast and which is expected to impact the level and quality of staff support for clients.

- 6.5 or several years, the provincial government has discussed plans to reform the social assistance system by simplifying the rate structure and complex system of rules and by modernizing service delivery through the increased use of technology and the reduction of administration burden. The 2019 provincial budget forecasts annual spending reductions in the social services sector for the next three years. It can be expected that there will be reductions over this time period in the funding received by Durham Region to deliver social assistance programs.
- 6.6 The Ontario government is proposing to end the Transition Child Benefit (TCB) effective November 1, 2019. TCB payments would be discontinued for all current recipients under both Ontario Works and the Ontario Disability Support Program (ODSP) and no new applicants would be eligible to receive the benefit. Transition Child Benefits (TCB) are issued to recipients who have dependent children under the age of 18 or trustees who care for a child receiving Temporary Care Assistance (TCA) under Ontario Works. The TCB is issued in cases where the parent/recipient/trustee is not receiving the Ontario Child Benefit (OCB) or the Canada Child Benefit (CCB) based upon annual reporting of income tax through Canada Revenue Agency (CRA). This Benefit is also issued in cases where the parent/recipient/trustee may only be receiving a portion of the OCB or CCB and not the maximum amount. The maximum amount of this benefit is \$230 per dependent child in a given month. The program is fully funded by the Province and the allocation in the 2019 Social Services Budget is \$0.87 million.
- 6.7 While the elimination of the TCB will not adversely impact the Region's social assistance budget, it will negatively impact families not eligible for the Canada Child Benefit Supplement or OCB due to their status in Canada or a higher taxable family income in the prior tax year. It is unknown if the end of TCB may therefore lead to increased service pressure in the Social Services Department's Homelessness and Housing Assistance programs.
- 6.8 Changes to the earnings exemptions for Ontario Works recipients and for ODSP recipients, as well as proposed changes to the definitions of disability used to determine ODSP eligibility may result in an increased workload for front-line staff in the Social Services Department. While these anticipated pressures on the Social Services Department workload and budget may not be apparent in the current fiscal year they will occur during a period when provincial funding can be expected to be reduced.

7. Conclusion

- 7.1 During the preparation of the 2019 Regional Budget, staff were aware of the risk of reductions in provincial funding for Social Services. As Regional Council was advised during the 2019 Regional Budget process, reductions in provincial funding will have a significant impact on the Region's ability to continue to deliver the same level of programs and services. The Region, through its long-term financial planning is positioned to be able to respond to any in-year reductions in provincial investment allowing program areas the time needed to adjust programs and

services to the new provincial investment levels.

- 7.2 However, we are now approaching the end of the second quarter of the Regional fiscal year and the size and scope of provincial funding reductions are not fully known. Additionally, the province has announced unilateral and retroactive changes to cost-sharing arrangements that transfer costs from the province to the Social Services Department. This places additional pressure on the property tax-supported Regional budget and impacts the Region's ability to effectively and appropriately plan for and respond to provincial funding reductions in 2019.
- 7.3 Social Services will continue to monitor information as it is received from various Ministries to analyze changes to funding and program delivery, assess impacts and options and report further to the Health and Social Services Committee.
- 7.4 Regional Council could also request the Ontario government reconsider implementation of its proposed changes to Social Services program delivery, funding and cost-sharing until there has been further consultation with municipalities. The delay will allow the Region of Durham the opportunity to work with the province as additional information is required to consider options and develop feasible implementation plans.

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-9](#)
Date: June 6, 2019

Subject:

Victim Services Pilot Project to address Human Trafficking in Durham

Recommendations:

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

- A) That the Region of Durham enter into a Memorandum of Understanding (MOU) with Victim Services of Durham Region (VSDR) for a pilot project to address and assist in the prevention of Human Trafficking in Durham;
 - B) That one-time funding up to a maximum of \$200,000 be provided to VSDR for the pilot project and the agency be required to segregate the funding to ensure reporting and accountability in a manner satisfactory to the Commissioner of Finance and further that any unused funds be returned to the Region of Durham;
 - C) That \$100,000 of the approved 2019 budget for the Social Investment Fund be reallocated to the VSDR pilot project, bringing the total budget for this pilot project to \$200,000; and
 - D) The Commissioners of Social Services and Finance be authorized to execute the necessary agreements.
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Report:

1. Purpose

- 1.1 Regional Council, through the 2019 Business Plans and Budget, approved one-time funds of \$100,000 for a pilot partnership with Victim Services of Durham Region (VSDR) to assist in the prevention of Human Trafficking.

- 1.2 Social Services is seeking approval to execute a Memorandum of Understanding with VSDR for this pilot project and to allocate up to an additional \$100,000 from the 2019 approved budget for the Social Investment Fund for this pilot.

2. Background

- 2.1 The Social Services Department is often a first point of contact for victims of human trafficking in Durham. Staff within the Income and Employment Support Division continue to work with external agencies to prevent, coordinate, and intervene when victims come forward seeking support to break-free from their traffickers.

3. Pilot Project Deliverables and Outcomes

- 3.1 The overall purpose of this pilot program, to be undertaken by the VSDR, is to increase service delivery and prevention within Durham Region and ensure the efforts to intervene are coordinated.
- 3.2 VSDR will hire a Human Trafficking Regional (HT) Coordinator who will create a regional awareness campaign that will educate Durham residents about human trafficking to debunk myths and misconceptions and support residents in identifying human trafficking so that it can be reported. The HT Coordinator will work with local post-secondary institutions to evaluate the Durham response model.
- 3.3 The agency will also hire a Human Trafficking Prevention Facilitator to increase the scope of prevention of human trafficking in Durham Region by conducting human trafficking prevention workshops with grade 9 students within the 30 high schools in Durham Region.
- 3.4 Presentations will be conducted in classrooms, instead of assembly style to better engage young people. Pre and post measurements will be gathered to assess increase in youth knowledge of human trafficking following a Victim Services of Durham Region prevention workshop.
- 3.5 The facilitator will also provide presentations to educators and school administrators. Pre and post measurement of service providers training will be done to document the increase in understanding and knowledge of concrete tools used for intervention. Additionally, the prevention facilitator will conduct outreach to organizations which serve youth in Durham and provide training on how to specifically support this population and intervene appropriately.

4. Financial Implications

- 4.1 The 2019 approved Business Plans and Budget included \$100,000 in funding for the pilot partnership with VSDR. The 2019 approved Business Plan and Budget also included total funding of \$1.0 million for the Social Investment Fund. It is recommended that up to an additional \$100,000 be allocated from the approved Social Investment Fund for this pilot partnership, bringing the total budget for this partnership to \$200,000.

- 4.2 Further it is recommended that Victim Services of Durham Region be required to segregate the funding to ensure reporting and accountability in a manner satisfactory to the Commissioner of Finance, with any unused funds to be returned to the Region.

5. Conclusion

- 5.1 The Social Investment Fund is available to support initiatives which: help prevent and reduce the depth of poverty; support attachment to the workforce; and invest in social infrastructure. The Social Services Department is often a first point of contact for victims of human trafficking in Durham and recognizes the opportunity to prevent, coordinate, and intervene when victims come forward seeking support to break-free from their traffickers.
- 5.2 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the recommendations.

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer