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# The Regional Municipality of Durham

## COUNCIL INFORMATION PACKAGE

### July 31, 2020

#### Information Reports

- 2020-INFO-72      Commissioner and Medical Officer of Health – re: Durham Region Department COVID-19 Response
- 2020-INFO-73      Commissioner of Finance – re: - Passing of Bill 197: *COVID-19 Economic Recovery Act* and the impacts on the Development Charges Act, 1997 and to Community Benefits Charges under the Planning Act
- 2020-INFO-74      Commissioner of Works – re: 2019 Waste Management Annual Report

#### Early Release Reports

There are no Early Release Reports

#### Staff Correspondence

1. News Release re: Durham's single-use plastics display receives the Municipal Waste Association P&E Silver Award for its 2019 Waste Reduction Week campaign and single-use plastics display. The award was presented based on the creativity and innovation that went into advancing public engagement on single-use plastic waste and waste diversion. ([Durham's single-use plastics display receives the Municipal Waste Association P&E Silver Award](#))
2. Memorandum from Dr. R. Kyle, Commissioner and Medical Officer of Health – re: Health Information Update – July 26, 2020

#### Durham Municipalities Correspondence

1. Town of Ajax – re: Resolution passed at their Council meeting held on July 27, 2020, regarding the Protection of the Headwaters of the Carruthers Creek

#### Other Municipalities Correspondence/Resolutions

1. Township of South Glengarry – re: Resolution passed at their Council meeting held on July 20, 2020, regarding Long Term Care Homes

**Miscellaneous Correspondence**

There are no Miscellaneous Correspondence

**Advisory Committee Minutes**

There are no Advisory Committee Minutes

Members of Council – Please advise the Regional Clerk at [clerks@durham.ca](mailto:clerks@durham.ca), if you wish to pull an item from this CIP and include on the next regular agenda of the appropriate Standing Committee. Items will be added to the agenda if the Regional Clerk is advised by Wednesday noon the week prior to the meeting, otherwise the item will be included on the agenda for the next regularly scheduled meeting of the applicable Committee.

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# The Regional Municipality of Durham Information Report

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From: Commissioner & Medical Officer of Health  
Report: #2020-INFO-72  
Date: July 31, 2020

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**Subject:**

**Durham Region Health Department COVID-19 Response**

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**Recommendation:**

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Receive for information

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**Report:**

**1. Purpose**

- 1.1 To provide an update on Durham Region Health Department's (DRHD's) ongoing response to COVID-19.
- 1.2 As DRHD continues to be actively engaged in COVID-19 response activities, this report is provided in place of Program Reports for April – June 2020.

**2. Background**

- 2.1 On December 31, 2019, the World Health Organization (WHO) was first informed of cases of pneumonia with an unknown cause detected in Wuhan City, Hubei Province of China. On January 7, 2020 it was confirmed that the cause was a novel coronavirus (COVID-19). On January 30, 2020, the WHO declared the COVID-19 outbreak to be a public health emergency of international concern.
- 2.2 In early January, when there were no COVID-19 cases in Canada, the public health sector began close monitoring of the situation and preparations to respond in the event that symptoms consistent with COVID-19 appeared in people in Canada. DRHD was engaged with the Ministry of Health (MOH) and Public Health Ontario (PHO) at the earliest monitoring and surveillance stages.
- 2.3 Canada confirmed its first case of COVID-19 on January 25, 2020 related to travel in Wuhan China.

- 2.4 DRHD was monitoring the global situation very closely in order to prepare for the potential emergence of COVID-19 in the region and identify populations at risk. Close monitoring and pandemic preparedness activities enabled staff to take immediate action to address the risks of an outbreak of COVID-19 in the region.
- 2.5 As COVID-19 began to spread rapidly across the globe, DRHD mobilized its resources, began implementing measures identified in the Health Department Emergency Master Plan (HDEMP) and ensured ongoing communication with local health care providers including Lakeridge Health.
- 2.6 DRHD was informed of the first local positive COVID-19 case on February 28, 2020.
- 2.7 On March 11, 2020, with 118,319 cases globally, the WHO announced that COVID-19 was a pandemic.

### **3. Health Incident Management Group**

- 3.1 As one of DRHD's critical public health functions under the *Ontario Public Health Standards: Requirements for Programs, Services, and Accountability* (OPHS), it is required to prepare for emergencies to ensure 24/7 timely, integrated, safe and effective response to, and recovery from emergencies with public health impacts.
- 3.2 The HDEMP establishes the emergency management framework for DRHD in the event of a major health-related emergency in Durham Region.
- 3.3 As part of the emergency management framework, the HDEMP identifies the function and decision-making responsibilities of the Health Incident Management Group (HIMG). The HIMG is convened as required and is responsible for providing direction, coordination, communication and support to those responding to an emergency.
- 3.4 The HIMG was convened at the end of January, when the first cases of COVID-19 were confirmed in Canada, at which time the structure of the HIMG was confirmed as well as roles and responsibilities of each member.
- 3.5 The HIMG continues to operate under the Incident Management System (IMS) structure for a pandemic (see Attachment). The IMS is a standardized organization structure and set of operating principles that provides a means for coordinated efforts of multiple parties towards achieving common goals. In response to a pandemic, the IMS structure includes the following lead roles: Executive Lead (EL); Incident Manager (IM); Emergency Information Lead (EIL); Health & Safety Lead (HSL); Liaison Lead (LL); Operations Lead (OL); Planning Lead (PL); and Logistics, Finance & Administration Leads (LFALs). Additional teams are established under the Leads as required.
- 3.6 Under the IMS structure, staff members have been assigned to various roles by the EL according to their skills and expertise. Reporting relationships change according

to the IMS and staff has been working across divisions and in collaboration to achieve goals and implement response activities.

3.7 COVID-19 response activities detailed below are organized according to IMS structure and divisions, as appropriate.

**a. Executive Lead**

- As the EL of the HIMG, the Commissioner & Medical Officer of Health (C&MOH), with support from the Assistant Medical Officer of Health (AMOH), assumes the overall accountability function of the Command Role, oversees the deployment of resources and seeks appropriate approval as necessary for the use of resources external to DRHD as required. This role is responsible for communications to the Regional Chair, Chief Administrative Officer, Health & Social Services Committee (HSSC) and Regional Council as required. As well, the EL is responsible for communication to and from the MOH.

**b. Incident Manager**

- The IM reports to the EL and leads the outbreak response and manages the day to day activities pertaining to the intervention. All other IMS structure Leads report to the IM and the IM is ultimately responsible for ensuring that the scope of the response is appropriate to the scale of the situation. Moreover, the IM ensures that the response is effective, efficient and timely.

**c. Emergency Information**

- The EIL ensures the public is provided with appropriate information in a timely, accurate and accessible manner. The EIL prepares media statements for release and helps appoint and/or serves as the official spokesperson for DRHD during an emergency, continually monitoring and assessing the efficacy of both internal and external emergency messaging.
- Under the guidance of the EIL, communication of up to date, accurate information to health care providers, local business owners/operators and residents has been a key response activity since the very early implementation stages of the emergency management framework. A dedicated webpage was established to provide important and timely information to community partners and is continually updated as DRHD receives new information.
- The EIL has also been the lead on monitoring and responding to all media requests.
- The Community & Resource Development Team (CARD) supports the activities of the EIL, in collaboration with Health Protection Division (HPD) and Population Health Division (PHD).

**d. Health & Safety**

- The HSL ensures the health and safety of DRHD staff during an emergency. The HSL consults with Corporate Health and Safety personnel to ensure all current existing health and safety regulations and related policies are being followed and that any incidents involving employees are documented along with an action taken. The HSL works together with the IM and OL to identify or anticipate any physical or psychological health and safety concerns and will address them accordingly. The HSL reviews the need for and availability of personal protective equipment (PPE).

**e. Liaison**

- The LL acts as the primary contact person for communications with hospitals, primary care settings, allied health care professionals, long-term care homes (LTCHs) and retirement homes (RHs), schools and childcare centres in coordination with managers working in operations. The LL maintains communications with liaison contacts of other assisting and cooperating agencies in the response and monitors incident operations to identify any current or potential interagency issues.
- Under the direction of the LL, HPD and PHD staffs have been responsible for communicating accurate and up to date information with local partners and supporting them to implement required changes to their policies and procedures.
- The LL and the OL have been coordinating the support to institutions experiencing outbreaks. Staff have provided support to institutions to implement outbreak control measures including following Chief Medical Officer of Health directives, ensuring appropriate use of PPE, increasing environmental sanitation, cleaning and disinfection, and emphasizing the importance of hand hygiene amongst residents and staff. Staff also maintained daily contact with institutions experiencing outbreaks to provide support as required.
- Staff has continued to collaborate with local health care partners to develop operational procedures, support response to inquiries and address resource related concerns. Details regarding case and contact management, communications, testing, reporting and resources are discussed on an ongoing basis. As direction has been continually changing, roles, responsibilities and operational policies and procedures have required ongoing updating.
- DRHD is working with all school boards to plan for the reopening of schools. Staff continues to be involved in its usual capacity with schools to provide information about the critical public health measures that are required to keep school communities healthy and safe. DRHD will support school boards locally to operationalize public health measures and policy decisions developed by the Ministry of Education and MOH.

#### f. Operations and Planning

- The OL directs and coordinates operational action items established in Incident Action Plans (IAPs). The OL is responsible for monitoring and reviewing the response items and reporting progress to the HIMG at regular operational meetings to ensure all action items are being addressed and fulfilled in a timely manner. The OL works with LFALs in order to obtain the required staff and resources to achieve the tasks set out by the IAP. The OL works with the HSL to address any safety issues.
- The PL assesses the situation on a continual basis and makes projections with the information gathered. The PL works closely with the IM when forming the IAP and is responsible for collecting and managing data and information throughout the emergency response. The PL also plays a major role in the post-emergency evaluation of the effectiveness of DRHD's emergency response.
- The OL and PL have oversight of the following COVID-19 response activities: case management and contact tracing; development of communication products; documentation; epidemiological investigations and surveillance; help lines; infection control for health care providers; protocols, policies and procedures; and staffing and resource needs.
- Case and contact management continue to be a main focus of COVID-19 response activities. There have been more than 5,100 cases and contacts managed by public health nurses.
- Ongoing reporting to the Province regarding contact tracing has informed the gradual reopening of the economy. DRHD has consistently surpassed the provincial target of contacting 90% of new cases within 24 hours.
- DRHD continues to provide support to hospitals, primary care providers and local health care facilities to ensure compliance with guidelines and reporting requirements. Ongoing support is also provided to academic institutions, school boards, and designated offices for emergency services.
- Using the latest evidence and recommendations received from provincial partners, staff has developed communications, guidance documents and resources for local stakeholders such as FAQs, Facts About documents, Fax Abouts and Infographics. Resources are continually updated as the Region moves through the stages of the Province's Framework for Reopening.
- Timely information is provided to allied health care professionals, businesses, childcare centres, health care providers, local shelters, municipalities and schools to help local partners and the public understand requirements and preventive actions they can take to prevent the spread of illness.
- Throughout May and June DRHD worked in collaboration with local partners to mobilize resources to conduct surveillance testing in emergency childcare centres, group homes and shelters, long-term care homes, retirement homes and other congregate living settings.

- Surveillance testing helped to further understand the spread of COVID-19 in congregate living settings and helped to prevent further outbreaks.
- The Health Analytics & Research Team (HART) has been providing the surveillance expertise and an epidemiological perspective throughout the emergency response. HART activities are detailed below.
  - Durham Health Connection Line (DHCL) is responding to COVID-19 inquiries from the public and local partners. To date, there have been more than 89,400 phone interactions with residents and community partners.
  - In collaboration with provincial and local partners, DRHD has supported the establishment of local testing sites and related policies and procedures. As provincial direction regarding testing has evolved to allow for any person to be tested who has at least one symptom or those that are concerned that they have been exposed to someone with COVID-19, DRHD has collaborated with local partners to update procedures and resources.
  - In collaboration with Regional partners, staff has provided support to farm owners/operators who employ temporary foreign workers. Guidance was provided about precautions they should take in response to COVID-19. With the assistance of Region of Durham Paramedic Services (RDPS), surveillance testing of temporary foreign workers was completed to help to proactively prevent the spread of COVID-19 among the agricultural worker population. Staff is available to provide support to farm owners/operators as required.
  - On an ongoing basis, staff: reviews provincial directives, guidance and protocols that are continually being revised; implements required changes; communicates relevant information; provides direction and guidance to local partners; and updates communications and resources for the public.
  - Staff continues to identify needs for additional tools and resources for local partners and the public as new information is received from provincial and federal levels. Staff develops resources and tools to ensure residents have the latest information on best practices, directives and instructions to protect their health.

**g. Logistics, Finance & Administration**

- The LFALs are responsible for obtaining, organizing and tracking any supplies required in the outbreak response, including space, security, equipment and services including authorizing and documenting all related expenses by preparing reports related to these expenses, as well as any claims or alleged injuries during the response.
- They have been: maintaining staff schedules; collaborating with Corporate Services and Finance Departments; and keeping all managers and staff informed about changes to operational and human resources policies.
- The Administrative Services team has been providing support to the LFALs and its activities are detailed below.

#### **4. Office of the Commissioner & Medical Officer of Health**

- 4.1 The C&MOH and AMOH continue to provide medical advice, guidance and oversight throughout the COVID-19 pandemic. They review advice, best practices and directives from the federal and provincial levels, maintain ongoing communications with the Province and participate on several local planning tables to ensure that timely information is provided to community and Regional partners, local health care providers, Municipal officials, residents and DRHD staff.
- 4.2 They have the responsibility of: monitoring the spread of COVID-19 at the local level; assessing risks and impacts; and using their medical expertise to provide recommendations on how best to mitigate risks within the region.
- 4.3 By responding to media requests, making public appearances through local media outlets and participating in community events, the C&MOH and AMOH have been available to address public concerns, respond to questions, offer medical advice and provide instructions on how residents can protect themselves, their families and community members from COVID-19.
- 4.4 On April 7, 2020, the C&MOH used his legal authority under Section 22 of the *Health Protection and Promotion Act* (HPPA) to issue a class order that requires anyone that has tested positive for COVID-19 or anyone who has had contact with a person that has COVID-19 to self-isolate for 14 days or longer, if directed by public health staff. This order remains in effect.
- 4.5 On April 21, 2020, the C&MOH issued an order to Lakeridge Health and Orchard Villa that required Lakeridge Health to lead the monitoring, investigating and responding of the COVID-19 outbreak at Orchard Villa and required Orchard Villa to enhance measures for the protection of residents and staff.
- 4.6 On June 24, 2020 the C&MOH issued a class order under the authority of the HPPA that requires all owners and operators of agricultural farms in the region who employ temporary foreign workers to implement public health measures and take actions listed in the order to minimize the risks to health for those they employ.
- 4.7 On July 6, 2020 the C&MOH issued instructions to commercial establishments to have a policy in place to prohibit people not wearing a non-medical mask or face covering from entering or remaining in the premises.

##### **a. Administrative Services**

- The Administrative Services Team continues to support COVID-19 response actions including receiving and disseminating over 37,500 incoming labs for follow-up by OL and PL and retrieving messages from five incoming phone extensions for follow-up.
- Staff has been supporting the activities of the OL and PL and ensuring that important communications and updates are provided to local community

- partners in an accessible format, such as FaxAbout documents to health care providers.
- The Administrative Services Team has also been instrumental in assisting the HSL to procure and manage resources, monitor inventory and distribute equipment and supplies.
- Staff has been responsible for preparing COVID-19 testing kits for use by local facilities and RDPS. As of July 15, 8,750 testing kits have been prepared by administrative support staff.

**b. Community & Resource Development**

- CARD continues to work with HPD and PHD staff on the design and posting of infographics, social media messages and health information resources.
- Social media sites including Facebook, Twitter and Instagram are used to provide timely information and updates to residents. CARD has completed 652 posts to date resulting in 885,602 Twitter impressions, 1,104,173 Facebook impressions and 168,114 Instagram impressions.
- CARD is the lead on monitoring and responding to all media requests. Requests from the media have been received consistently since January when the virus was spreading globally. CARD has received 315 media requests related to COVID-19.
- The comprehensive COVID-19 website includes information on DHCL, COVID-19 testing in Durham Region, the current situation, a comprehensive Community Reopening Toolkit, the status of cases in Durham Region, Section 22 class orders and special instructions issued by the C&MOH, messages from the C&MOH, up to date information regarding provincial and federal orders and directives, resources for local partners including health care professionals, the school community and food premises, fact sheets and other DRHD resources. The website includes the information that community partners need to protect their clients and staff and the information that residents need to protect themselves, their families and others in the community. From February 29 to July 13, there have been 527 COVID-19 website related tasks completed resulting in 1,193,323 page views of [www.durham.ca/novelcoronavirus](http://www.durham.ca/novelcoronavirus).
- CARD also designed and maintains the COVID-19 intranet site on The Insider which provides up to date information for Regional staff.

**c. Health Analytics & Research**

- HART is responsible for assessment and surveillance of COVID-19 from an epidemiological perspective. Responsibilities include: development and adaptation of existing data systems to document information; production of data quality reports and identification of gaps or issues; communication and engagement with PHO and the MOH regarding surveillance; and analyzing and reporting data related to cases of COVID-19 in Durham Region.

- HART continues to monitor the spread of COVID-19 across Durham Region and identify opportunities to enhance the information that is provided to community partners and residents.
- On April 3, 2020, HART launched a new dashboard, the Durham Region COVID-19 Data Tracker, which shows the number of COVID-19 cases in Durham Region by status (home isolation, hospitalized, resolved, deceased), municipality, age and gender. This resource also displays the number of new cases and cumulative cases by reported date and onset date as well as information on the status of outbreaks in hospital sites, long-term care homes and retirement homes. The Data Tracker's most recent enhancements include information on exposure source, a map of cases by Health Neighbourhood and monitoring indicators that show how well Durham Region is doing in terms of virus spread and containment, health system capacity, public health capacity and laboratory testing.
- Since April 3, 2020, there have been approximately 580,000 clicks on the Data Tracker.
- HART continues to identify opportunities to improve the Data Tracker and includes additional information as it becomes available.
- HART continues to provide support to PHD with entering case related information into the internal client data system and the integrated Public Health Information System (iPHIS), verifying data quality and conducting surveillance of local COVID-19 cases.

**d. Privacy & Information Security**

- The Privacy & Information Security Team has been providing advice to the C&MOH and DRHD management on privacy issues related to protection of personal health information. While DRHD continues to provide as much information as possible to community partners and the public about the status of COVID-19 in the region, it must ensure that it complies with privacy legislation and follows guidance from the Information and Privacy Commissioner of Ontario.
- The Privacy & Information Security Team has provided advice regarding: restoration of DRHD services; providing clients access to their lab results via secure means; data sharing opportunities with Ontario Tech University and Lakeridge Health; facilitating access to Ontario Laboratory Information System (OLIS) data; collection, use and disclosure of personal health information while teleworking; and changes to DRHD policies to facilitate ongoing essential services during the COVID-19 pandemic.

**5. Health Protection**

- 5.1 As noted above, HPD staff is supporting activities under the IMS structure. Additionally, public health inspectors have existing relationships and knowledge of local businesses and premises which has helped to communicate important information.

- 5.2 Public health inspectors have supported local businesses, such as food premises, and emergency childcare centres to implement physical distancing measures, infection prevention and control (IPAC) procedures and policies regarding PPE to protect the health of their clients and their staff. A comprehensive Community Reopening Toolkit was developed to provide businesses and the community with information on the various stages of reopening of services as announced by the Province. Information in the Community Reopening Toolkit includes links to resources from a variety of industry agencies and numerous guidance documents for sector-specific businesses and services.
- 5.3 HPD continues to monitor compliance with the class order pursuant to Section 22 of the HPPA and issues warnings to persons that commit an offence under the Order. HPD has completed 37 investigations for people failing to self-isolate under the Section 22 Class Order.
- 5.4 In addition to COVID-19 response activities, HPD is ensuring that ongoing health protection activities continue, such as complaint-based inspections of food premises and small drinking water systems, issuing food recall warnings and public health notices, responding to health hazards and other infectious diseases outbreaks.
- 5.5 Beach monitoring began in June to test water samples for high levels of bacteria. Test results are posted on durham.ca weekly in the Durham Region Weekly Beach Report.
- 5.6 West Nile surveillance activities began at the beginning of June and weekly adult mosquito surveillance results are provided on [www.durham.ca](http://www.durham.ca).
- 5.7 Public health inspectors have been investigating all animal bites and scratches to prevent the spread or rabies to residents, with more than 670 rabies investigations completed to date.
- 5.8 Public health inspections are currently focused on ensuring that required preventive measures to safeguard against COVID-19 have been implemented.

## **6. Oral Health**

- 6.1 On March 15, 2020, the Royal College of Dental Surgeons of Ontario (RCDSO) strongly recommended that all non-essential and elective dental services should be suspended, and that emergency treatment should continue. Emergency treatment is defined as trauma to teeth and bones of the face, uncontrolled hemorrhage related to the mouth and jaws, pain that is not relieved with medication, and swelling.
- 6.2 The Oral Health Division (OHD) suspended all Healthy Smiles Ontario (HSO) and Ontario Seniors Dental Care Program (OSDCP) services in response to RCDSO recommendations as well as health promotion activities for Ontario Disability Support Program (ODSP) and Ontario Works (OW) clients. School screening activities were suspended as schools were closed as of March 16, 2020.

- 6.3 While most OHD staff was seconded to COVID-19 activities, the remaining OHD staff members responded to oral health inquiries and coordinated access to urgent dental care within the community for HSO, OSDCP and OW clients. A triage process was implemented to ensure access to urgent oral health services for clients that contacted the OHD.
- 6.4 Following guidance from the RCDSO and the Province, the Oral Health Clinic began a phased reopening on July 6, 2020. Services are being provided to clients by appointment only to help control the spread of COVID-19. There is currently a 1,500-person waiting list for oral health services due to the suspension of services. Clinic hours have been expanded to address client needs and to ensure appropriate physical distancing of staff in the clinic.

## **7. Population Health**

- 7.1 While most PHD staff is still currently involved in COVID-19 response, some clinical programs and services are gradually being restored. Services are now being provided at the Breastfeeding and Sexual Health Clinics. The Infant and Child Development program is providing virtual care to clients and the Immunization program will provide appointments for priority clients.
- 7.2 PHD continues to assess its resource needs to respond to COVID-19 and will restore programs and services in a phased approach as resources become available.

## **8. Paramedic Services**

- 8.1 RDPS continues to respond to requests for emergency care and ensures provision of pre-hospital advanced life support procedures as required.
- 8.2 With the ongoing COVID-19 pandemic, ensuring the health and safety of paramedics continues to be a focus so that they are available to respond to emergencies in the community.
- 8.3 RDPS continues to be engaged with provincial partners to receive ongoing updates and ensures new medical directives, protocols and best practices are implemented with the goal of minimizing exposure to respiratory droplets and risk of infection. New protocols regarding screening, treatment, documentation, PPE and transportation were implemented across RDPS and paramedics have been educated and trained on the changes in response to COVID-19.
- 8.4 RDPS is actively engaged with hospital partners and provides support to address issues and challenges related to COVID-19. There have been ongoing discussions to address challenges experienced by smaller facilities that may not have adequate resources or space to support isolation of cases and where possible, bypass agreements have been established.

- 8.5 RDPS has provided essential support to enhanced surveillance testing activities. Enhanced surveillance testing assisted DRHD to further understand the spread of COVID-19 in congregate living settings and helped to proactively prevent outbreaks in group settings such as local emergency childcare centres. RDPS has collected 5,356 nasal swabs from area residents, emergency childcare centre staff, clients and staff of long-term care homes, migrant farm workers, retirement homes, shelters and other congregate living settings.
- 8.6 RDPS continues to work closely with public health and local and provincial partners to respond to the evolving COVID-19 situation. Updates are provided to all paramedics to ensure staff is informed and prepared to protect themselves, their clients and respond as required.

## **9. Conclusion**

- 9.1 COVID-19 continues to be a public health priority and will remain a priority throughout the restoration and new normal periods.
- 9.2 As the COVID-19 pandemic response continues to require ongoing communication and effective collaboration across DRHD, the IMS structure remains in place. The HIMG continues to meet daily to provide updates on response activities and members support each other through implementation.
- 9.3 An Adaptive Restoration Plan has been developed which will be adjusted as new information becomes available.
- 9.4 Restoration of public health programs and services has begun in a staged approach. Programs will be modified to ensure public and staff safety and will be restored based on when staff can be released from COVID-19 activities.
- 9.5 As the Region of Durham and local Municipalities have been planning the return to work of staff, DRHD has developed guidance to support a gradual reopening. A phased re-introduction of staff is recommended to support ongoing requirements for physical distancing.
- 9.6 There continues to be a significant risk to the community from COVID-19. DRHD will continue to engage with local and provincial partners to monitor this risk and implement provincial recommendations and directives.
- 9.7 DRHD is committed to continue to keep the public and local partners informed of the status of the COVID-19 pandemic in the region.

## **10. Attachment**

Attachment: IMS Functional Chart for 2019-nCoV

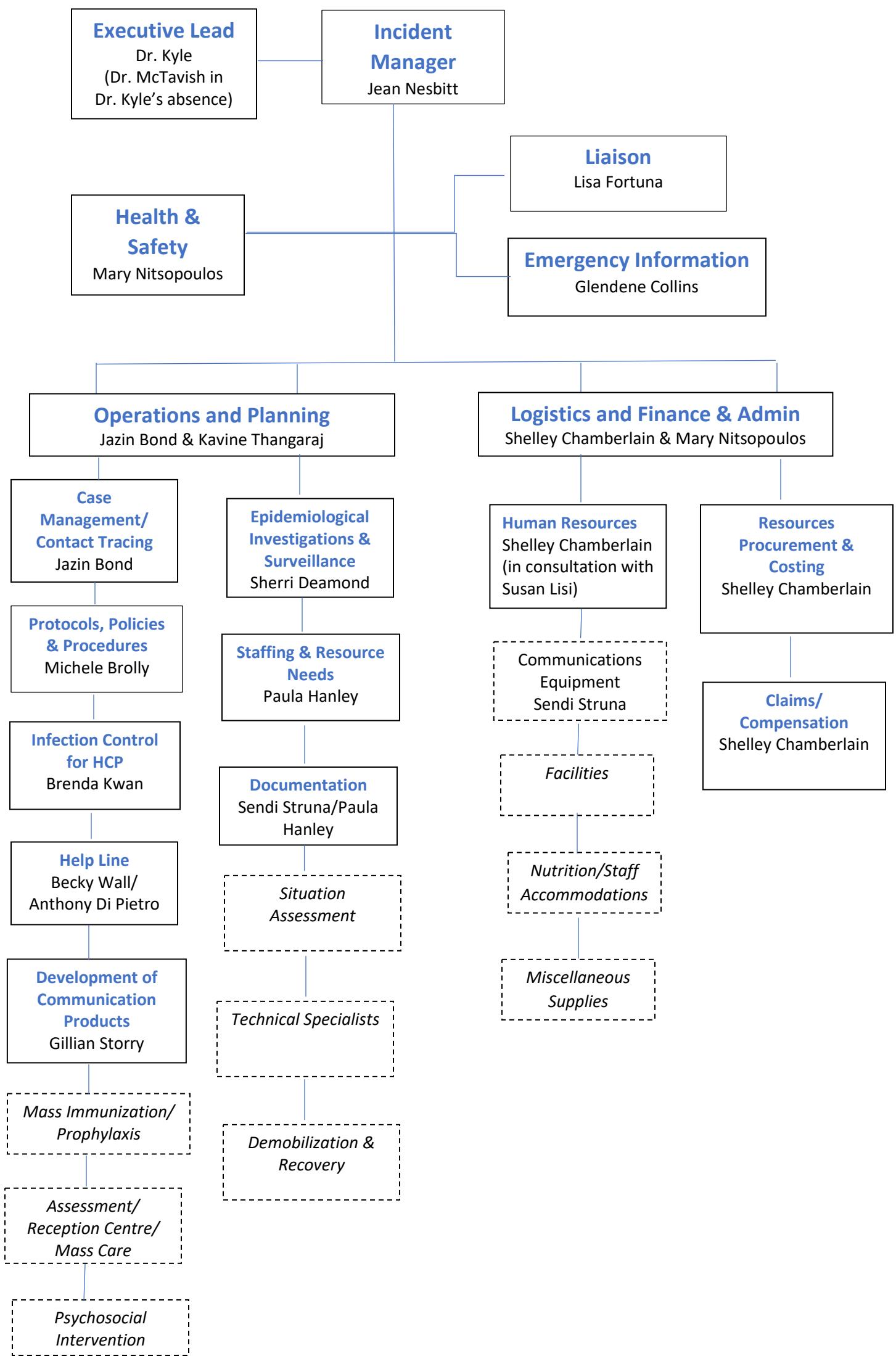
Respectfully submitted,

Original signed by

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

## IMS Functional Chart for 2019-nCoV



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# The Regional Municipality of Durham Information Report

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From: Commissioner of Finance  
Report: #2020-INFO-73  
Date: July 31, 2020

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**Subject:**

Passing of Bill 197: *COVID-19 Economic Recovery Act* and the impacts on the Development Charges Act, 1997 and to Community Benefits Charges under the Planning Act

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**Recommendation:**

Receive for information

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**Report:**

**1. Purpose**

- 1.1 The purpose of this report is to advise Council of the passing of Bill 197: *COVID-19 Economic Recovery Act* on July 21, 2020 which amends a number of pieces of legislation. This report deals with the changes to the Development Charges Act, 1997 (DCA) and Planning Act as it relates to Community Benefits Charges (CBC).

**2. Background**

- 2.1 Bill 108, *More Homes, More Choice Act, 2019*, received Royal Assent on June 6, 2019. Subsequent to Bill 108 receiving Royal Assent, Bill 138, *Plan to Build Ontario Together Act* received Royal Assent in December 2019 which included a number of changes to Bill 108. In late December 2019, certain sections of Bill 108 and Bill 138 were proclaimed, and Regulation 454/19 was released, which resulted in a number of changes to the DCA, effective January 1, 2020.

- 2.2 The changes to the DCA on January 1, 2020 included the deferral of DC payments for a number of development types and the freezing of DC rates under certain conditions (previously reported in Report 2020-INFO-6 in January 2020). As the changes to the DCA impacted both Regional and area municipalities on January 1, 2020, the Region has been working collaboratively with the local municipalities to implement the new requirements. Local municipalities collect development charges on behalf of the Region.

- 2.3 Bill 197, COVID-19 Municipal Economic Recovery Act, received Royal Assent on July 21, 2020. The bill amends multiple pieces of legislation, including the DCA and Planning Act. The amendments in respect of this legislation further revise some of the modifications under Bill 108 and Bill 138 not yet proclaimed. The Bill has received Royal Assent; however, the provisions of the Bill will be in force once proclaimed.
- 2.4 The following provides a summary of the changes to the DCA and the CBC under the Planning Act that under Bill 197 will come into effect when proclaimed and the next steps in order to comply with the new legislation.

### **3. Impacts of Bill 197**

- 3.1 There are many positive aspects of Bill 197 which strengthens the ability for municipalities to fund growth-related infrastructure, through development charges and the community benefits charges. Bill 197 also provides municipalities sufficient time to implement or amend the appropriate by-laws to comply with the new rules.
- 3.2 The following table provides a summary of the changes with more detailed discussion following in the remainder of section 3 and Attachment #1.

	<b>Changes to DCA</b>	<b>Impact on Durham Region</b>	<b>Impact on Area Municipalities</b>
Eligible Services	<p>Bill 197 expands list of DC eligible services:</p> <ul style="list-style-type: none"> <li>a. Childcare and early years programs;</li> <li>b. Housing Services;</li> <li>c. Services related to proceedings under the Provincial Offences Act;</li> <li>d. Services related to emergency preparedness; and</li> <li>e. Services related to Airports (only in Regional Municipality of Waterloo)</li> </ul>	<p>Social Services is not identified in Bill 197 as an eligible DC service. The Region's DC By-law includes Social Services facilities.<sup>1</sup></p> <p>DCs can be collected for ineligible services for two years after Bill 197 is proclaimed</p>	Does not include municipal parking, cemeteries or airports (exception being the Region of Waterloo)
Ten Per cent Statutory Reduction	Bill 197 eliminates the ten per cent statutory reduction	Allows increased cost recovery for Long Term Care, Paramedic Services, Housing Services and Studies	Increased cost recovery for numerous services for the eight area municipalities within Durham

	<b>Changes to CBC and Parkland Dedication</b>	<b>Impact on Durham Region</b>	<b>Impact on Area Municipalities</b>
Eligibility Criteria	<p>Only lower and single tier can implement a CBC By-law</p> <p>Only applies to buildings with at least 5 storeys and 10 units</p> <p>Cannot be imposed on non-residential development</p> <p>Municipalities can use DCs and CBCs interchangeably to fund an eligible service</p>	Cannot impose a CBC By-law	<p>Can impose a CBC By-law for services that are not DC eligible, like cemeteries and municipal parking</p> <p>Need to implement a CBC By-law within two years of Bill 197 being proclaimed</p>
Parkland Dedication	Bill 197 maintains the ability of municipalities to impose the alternative parkland rate, through by-law to acquire land for parks or cash in lieu	Does not apply to Durham Region	Existing parkland by-laws can remain in effect for two years after Bill 197 is proclaimed

Note

1. Region's DC By-law includes facilities related to Ontario Works delivery and family services. Under Bill 197, the Region will no longer be able to collect DCs for these facilities.

### **Approved Changes to Development Charges**

- 3.3 Bill 108 proposed that many of the “soft” services be removed from the DCA framework and be funded through the community benefits charges regime. Subsequent draft regulations proposed to put back many of the “soft” services into the DCA framework. Through Bill 197, additional “soft” services have been moved back into the DCA and the ten per cent statutory reduction is eliminated
- 3.4 Services eligible for Development Charges now include:
  - a. Ambulance;
  - b. Waste Diversion;
  - c. Public Libraries;
  - d. Long-term care;
  - e. Parks and recreation (excluding parkland acquisition);
  - f. Public health;
  - g. Childcare and early years programs;
  - h. Housing Services;
  - i. Services related to proceedings under the Provincial Offences Act;
  - j. Services related to emergency preparedness; and
  - k. Services related to Airports (only in Regional Municipality of Waterloo).

- 3.5 Municipalities would continue to be able to use development charges to fund growth-related studies (e.g. DC background studies, planning studies and studies completed for the purpose of generating a capital program for an eligible service).
- 3.6 For local municipalities, the expanded list of services does not include those witnessed in some DC by-laws, such as municipal parking, cemeteries or airports (the exception being the Region of Waterloo).
- 3.7 Durham's current Region-wide DC By-law includes a Health and Social Services category, which includes capital cost for Social Services (i.e. facilities for Ontario Works delivery and Family Services). Social Service is not identified as an eligible service under Bill 197 and therefore will no longer be eligible to be included in future DC by-laws.
- 3.8 Municipalities can continue to collect development charges for two years after Bill 197 is proclaimed, unless the by-law expires or is repealed earlier. Therefore, the Region will continue to collect development charges for the social services facilities under the current DC by-law for two years after Bill 197 is proclaimed.
- 3.9 The elimination of the ten per cent statutory reduction is effective once Bill 197 is proclaimed. For Durham, the ten per cent reduction impacts Long Term Care, Paramedic Services, Housing Services, and Development Related Studies under the Region's current Region-wide DC By-law. An amendment to the by-law is necessary, once Bill 197 is proclaimed, to remove these reductions.
- 3.10 Bill 197 also provides flexibility in grouping services together into a class within the DC by-law, for the purposes of reserve fund management and administration of DC credits.

#### **Approved Changes to Community Benefit Charges and Parkland Dedication Affecting Local Municipalities Only**

- 3.11 The CBC framework only applies to lower and single tier municipalities. The changes to the CBCs made through Bill 197 are provided in Attachment #1.

#### **4. Financial Implications on Durham Region**

- 4.1 The Region benefits from the changes to the DCA as the ten per cent statutory reduction is removed for all services. As well, the list of eligible services has increased which may provide opportunities to collect DCs for new services, e.g. emergency preparedness.
- 4.2 However, social services is no longer an eligible service, which will have a financial impact on the Region. As mentioned previously, municipalities can continue to collect development charges for ineligible services for up to two years after Bill 197 is proclaimed. Therefore, the Region will continue to collect DCs for the social services facilities for two years and these funds will be transferred to a general capital reserve, as required by Bill 197.

- 4.3 Based on the current DC reserve fund balance for the social services facilities (approximately \$2.1 million) and forecasted revenue over the next two years, it is estimated that the Region will have approximately \$3.0 million in DCs to support the financing of the social service facilities. Based on the 2018 DC Study, an estimated \$9.5 million in DC funding was anticipated to be collected for these facilities.
- 4.4 Although the Region's DC rate will decrease with the removal of social service facilities from the DC by-law, the removal of the ten per cent statutory reduction will increase the DC rate for a number of services (applicable to the services noted above). The removal of the ten per cent reduction will also benefit the Region if the application for a fifth long-term care facility is approved, as it is anticipated that a portion of this facility will be financed by DCs.

## **5. Next Steps**

- 5.1 As approved by Regional Council in November 2019 (Report #2019-F-41), staff will be amending the Region's DC By-laws to reflect changes to the DCA. In the interim, the Region's DC By-laws will be applied in a manner that is consistent with the DCA (i.e. to comply with all the amendments effective January 1, 2020).
- 5.2 Forthcoming, amendments to the Region's DC By-laws will need to consider:
  - a. Removal of the statutory ten per cent reduction for Long Term Care, Paramedic Services, Child Care and Public Health (component of Health and Social Services), Housing Services, and Development Related Studies;
  - b. Removal of the Social Services component of Health and Social Services from the DC By-law;
  - c. Consideration of new DC services like emergency preparedness;
  - d. Implementing an interest rate policy to address the foregone revenue for DC deferral and freezing;
- 5.3 Work is underway on a new DC By-law for waste diversion services.
- 5.4 Staff will provide an update in the fall to provide specific timing for any new DC by-law and / or amendments to the existing DC by-laws.

## **6. Conclusion**

- 6.1 Bill 197 provides many positive outcomes for both Durham Region and the lower tier municipalities in Durham.
- 6.2 The Inter-departmental DC working group will continue to analyze the Bill and undertake the necessary work to amend and prepare new DC by-laws as required by Bill 197. The inter-departmental group will continue to facilitate ongoing discussions with the local area municipalities.

- 6.3 This report has been prepared with assistance of the Works, Legal and the Planning and Economic Development Departments.

**7. Attachments**

Attachment #1: Approved Changes to Community Benefit Charges and Parkland Dedication Affecting Local Municipalities Only

Respectfully submitted,

Original Signed By

Nancy Taylor, BBA, CPA, CA  
Commissioner of Finance

**Attachment #1:**

**Approved Changes to Community Benefit Charges and Parkland Dedication  
Affecting Local Municipalities Only**

1. The significant changes to the CBC framework made through Bill 197 are as follows:
  - a. Imposition of a CBC by-law is limited to lower and single tier municipalities, as upper tier municipalities cannot implement a CBC by-law;
  - b. The CBC is now limited to only be imposed on buildings with at least ten units and at least 5 storeys;
  - c. A CBC cannot be imposed on non-residential developments;
  - d. Municipalities can use DCs and CBCs interchangeably to fund an eligible service, provided that the capital costs to be funded by CBCs are not also funded by DCs or under the parkland dedication provisions of the Planning Act;
  - e. Municipalities need to implement a CBC by-law within two years of the proclamation of Bill 197, but can be implemented sooner;
  - f. Bill 197 maintains the ability of municipalities to impose the alternative parkland rate, through by-law, to acquire land for parks or cash in lieu. Bill 197 sets out process for the by-law to be appealed to LPAT. Existing parkland by-laws can remain in effect for two years after Bill 197 is proclaimed.
- 1.2 Although the expanded list of DC eligible services does not include municipal services such as parking, cemeteries or airports (except for Waterloo), the growth-related capital costs associated with these services could be considered for inclusion in a CBC by-law.
- 1.3 The CBC continues to be a land value-based charge to pay for growth-related infrastructure costs. The charge will be limited to a prescribed percentage of the value of land to be developed. The percentages in the draft regulation from February 2020 was ten per cent for lower tier municipalities and fifteen per cent for single tier municipalities. Future regulation will be released by the Province to identify the prescribed percentages for lower and single tier municipalities.
- 1.4 A CBC Strategy needs to be undertaken prior to passing a CBC by-law to justify the collection of fees. The strategy has many similar elements to a DC background study and is appealable to LPAT.

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 3540.



# The Regional Municipality of Durham Information Report

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From: Commissioner of Works  
Report: #2020-INFO-74  
Date: July 31, 2020

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**Subject:**

2019 Waste Management Annual Report

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**Recommendation:**

Receive for information

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**Report:**

**1. Purpose**

1.1 The Waste Management Annual Report (Attachment #1) highlights waste management activities, accomplishments and program results for 2019.

**2. Background**

2.1 The Waste Management Annual Report is prepared annually to summarize waste management activities, tonnages and program results from the previous year. The report also provides information on potential waste management program changes considered by the Regional Municipality of Durham (Region) or the Province.

2.2 The Waste Management Annual Report is posted on the Region's webpage and is available to the public.

**3. Summary of Residential Waste Managed**

3.1 In 2019 the Region managed 224,096 tonnes of residential waste through its curbside, multi-residential and Waste Management Facility programs. Of this tonnage, 103,459 tonnes were actively diverted from disposal via one of the Region's diversion programs: Green Bin Organics, Blue Box Recycling, Leaf and

Yard Waste or Other Programs (electronics, tires, re-use and household hazardous waste). Details of these programs are provided in the 2019 Waste Management Annual Report.

**Table 1: 2019 Durham Region Waste Management Tonnages**

Material	Tonnes
Garbage	120,637
Green Bin Organics	28,522
Blue Box Recycling	41,738
Leaf and Yard Waste	26,646
Other Diversion	6,553
Total	224,096
RPRA Diversion Rate	63% (pending RPRA verification)

- 3.2 Waste Diversion Ontario has been replaced by the Resource Productivity and Recovery Authority (RPRA) as the agency responsible for compiling and verifying municipal waste diversion rates in Ontario. In 2017, the diversion calculation methodology was changed by RPRA to recognize recycled materials recovered through energy-from-waste. This change resulted in an increase in the Region's diversion rate by approximately 10 per cent. The RPRA calculated diversion rate also includes diversion credits for resident activities such as grasscycling and backyard composting.

#### **4. Conclusion**

- 4.1 The Regional Municipality of Durham operates comprehensive programs for the collection of recyclable and waste materials, in addition to multi-residential collection services, community collection events, and the operation of three waste management facilities. The 2019 Waste Management Annual Report highlights the activities and accomplishments of the Waste Management Division. Table 1, above, provides details on the tonnages collected and managed by the Region in 2019.

4.2 For additional information, please contact Gioseph Anello, Director, Waste Management, at 905-668-7711, extension 3445.

**5. Attachments**

Attachment #1: [2019 Waste Management Annual Report](#)

Respectfully submitted,

**Original signed by:**

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Susan Siopis, P.Eng.  
Commissioner of Works

If you require this information in an accessible format, please contact 905-668-4113 ext. 2997.



## The Regional Municipality of Durham News Release

July 27, 2020

### Durham's single-use plastics display receives the Municipal Waste Association P&E Silver Award

**Whitby, Ontario** – The Regional Municipality of Durham has received the Municipal Waste Association P&E Silver Award in the category Other Tool, for its 2019 Waste Reduction Week campaign and single-use plastics display. The award was presented based on the creativity and innovation that went into advancing public engagement on single-use plastic waste and waste diversion.

On October 23, 2019, Regional Headquarters in Whitby was buried behind a pile of single-use plastics in recognition of Waste Reduction Week and Imagine a Day Without Water. The display represented one third of the 22,000 single-use plastic bottles collected in the Region's curbside Blue Box program per day—a small glimpse at the more than eight million bottles collected each year.

To reduce single-use plastics, the Region has installed water filling stations at Regional Headquarters, introduced reusable eco containers and compostable straws for take-out meals and drinks, and stopped selling bottled water in the Regional Headquarters cafeteria. Since installing the water filling stations, more than 155,000 single-use water bottles have been saved.

With an innovative approach and focus on bringing climate change action into economic and social development initiatives, Durham is committed to being leaders in waste management through projects such as the [Mixed Waste Pre-sort and Anaerobic Digestion Facility](#) and the current [Long-Term Waste Management Plan](#) consultation.

Residents are encouraged to watch our [single-use plastics video](#) and learn more about Durham Region's waste reduction initiatives at [durham.ca/waste](http://durham.ca/waste).

#### Quotes

"Congratulations to staff on this prestigious award and for once again showcasing Durham Region's environmental leadership. Not only did the single-use plastics display highlight the need for change as a community—it also highlighted our innovative approach and the actions we are taking towards implementing that change. The Region is currently developing a new Long-Term Waste Management Plan that will continue to strive towards positive environmental change."

**- Elaine Baxter-Trahair, Chief Administrative Officer, The Regional Municipality of Durham**

[durham.ca](http://durham.ca)



If you require this information in an accessible format, please contact 905-668-4113 ext. 2997.

“Durham Region is changing the way we think about waste through real world examples that clearly define the impact we have on the environment. Our goal is that through this forward-thinking approach, we will create a cultural shift that will continue to improve the way our community embraces waste reduction. I’m proud of our team and share my congratulations for having their hard work recognized with this award.”

**- Giuseppe Anello, Director of Waste Management, The Regional Municipality of Durham**

– 30 –

Media inquiries:

**The Regional Municipality of Durham:**

Brooke Pollard – Communications Co-ordinator

905-668-7711 ext. 2997 or [Brooke.Pollard@durham.ca](mailto:Brooke.Pollard@durham.ca)

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If you require this information in an accessible format, please contact 1-800-667-5671



Health  
Department

# Interoffice Memorandum

**Date:** July 31, 2020

**To:** Health & Social Services Committee

**From:** Dr. Robert Kyle

**Subject:** Health Information Update – July 26, 2020

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Please find attached the latest links to health information from the Health Department and other key sources that you may find of interest. Links may need to be copied and pasted directly in your web browser to open, including the link below.

You may also wish to browse the online Health Department Reference Manual available at [Board of Health Manual](#), which is continually updated.

Boards of health are required to “superintend, provide or ensure the provision of the health programs and services required by the [Health Protection and Promotion] Act and the regulations to the persons who reside in the health unit served by the board” (section 4, clause a, HPPA). In addition, medical officers of health are required to “[report] directly to the board of health on issues relating to public health concerns and to public health programs and services under this or any other Act” (sub-section 67.(1), HPPA).

Accordingly, the Health Information Update is a component of the Health Department’s ‘Accountability Framework’, which also may include program and other reports, Health Plans, Quality Enhancement Plans, Durham Health Check-Ups, business plans and budgets; provincial performance indicators and targets, monitoring, compliance audits and assessments; RDPS certification; and accreditation by Accreditation Canada.

Respectfully submitted,

Original signed by

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

## **UPDATES FOR HEALTH & SOCIAL SERVICES COMMITTEE**

**July 26, 2020**

### **Health Department Media Releases/Publications**

**<https://tinyurl.com/ydhs462q>**

- Durham Region Weekly Beach Report (Jul 3)

**<https://tinyurl.com/ydd5rjjx>**

- Non-medical masks and face coverings mandatory while in indoor places accessible to the public (Jul 6)

**<https://tinyurl.com/ya7xssad>**

- Clinic Reopening (Jul 7)

**<https://tinyurl.com/ydhs462q>**

- Durham Region Weekly Beach Report (Jul 10)

**<https://tinyurl.com/ydhs462q>**

- Durham Region Weekly Beach Report (Jul 16)

**<https://tinyurl.com/ydhs462q>**

- Durham Region Weekly Beach Report (Jul 23)

### **GOVERNMENT OF CANADA**

#### **Canadian Border Services Agency**

**<https://tinyurl.com/y7vah8ym>**

- Travel restrictions to Canada remain in place for July holidays (Jun 30)

#### **Canadian Heritage**

**<https://tinyurl.com/ybx9bc7e>**

- Final Components of Phase 2 of the COVID-19 Emergency Support Fund for Cultural, Heritage and Sport Organizations Announced (Jul 7)

#### **Department of Finance Canada**

**<https://tinyurl.com/y9s8eool>**

- Historic COVID-19 Plan Provides Canadians With the Support They Need to Get Through the Economic Crisis (Jul 8)

#### **Employment and Social Development Canada**

**<https://tinyurl.com/y8ug7spe>**

- Canadian seniors to receive one time tax-free payment this week (Jul 6)

**<https://tinyurl.com/yae3zf4x>**

- Service Canada begins the gradual and safe reopening of in-person locations across the country (Jul 7)

**<https://tinyurl.com/yc9rbwzj>**

- The Government of Canada publishes final regulations on changes to federal labour standards for work-integrated learning (Jul 8)

**<https://tinyurl.com/y4asym1q>**

- Minister Qualtrough announces new details on proposed financial support for persons with disabilities during COVID-19 (Jul 17)

**<https://tinyurl.com/y5x53uod>**

- Canada Child Benefit is increasing again (Jul 20)

**<https://tinyurl.com/yyefgyhg>**

- The Government of Canada is providing funding to support child care for returning workers (Jul 24)

### **Health Canada**

**<https://tinyurl.com/yavr6np6>**

- Certain hand sanitizers containing may pose health risks (Jul 3)

**<https://tinyurl.com/yat9bzul>**

- Health Canada confirms ban of advertising for vaping products wherever they can be seen or heard by youth (Jul 8)

**<https://tinyurl.com/y9k6ynzj>**

- Certain hand sanitizers may pose health risks (Jul 10)

**<https://tinyurl.com/yyjanmy4>**

- Certain hand sanitizers containing technical-grade ethanol may pose health risks (Jul 17)

**<https://tinyurl.com/y5q7k7kr>**

- Certain hand sanitizers may pose health risks (Jul 21)

### **Immigration, Refugees and Citizenship Canada**

**<https://tinyurl.com/ybz39rsx>**

- Citizenship change benefits couples with fertility issues and same-sex couples (Jul 10)

**<https://tinyurl.com/yybjooyw>**

- Ministers responsible for immigration meet to jointly plan for the future of immigration in Canada amid COVID-19 (Jul 24)

### **Indigenous Services Canada**

**<https://tinyurl.com/y5vg2ofj>**

- Update on COVID-19 in Indigenous communities (Jul 17)

### **Infrastructure Canada**

**<https://tinyurl.com/yb4na3fu>**

- New Green Municipal Fund tool drives energy efficiency (Jul 7)

**<https://tinyurl.com/yyoqchez>**

- Safe Restart Agreement helps Canadian communities get back on their feet (Jul 23)

**Natural Resources Canada**

**<https://tinyurl.com/ydz4cp7h>**

- Emergency Funding for COVID-19 Safety Measures in Forest Operations (Jul 10)

**<https://tinyurl.com/y6h5wtj4>**

- Canada Joins Three Percent Club to Improve Global Energy Efficiency (Jul 22)

**Prime Minister's Office**

**<https://tinyurl.com/y5bbgnxe>**

- More support for Canadians through the Safe Restart Agreement (Jul 16)

**Public Health Agency of Canada**

**<https://tinyurl.com/y8sc9j4g>**

- Statement from the Chief Public Health Officer of Canada on June 30, 2020 (Jun 30)

**<https://tinyurl.com/y7ygr4lk>**

- Canada Extends Mandatory Requirements Under the Quarantine Act for Anyone Entering Canada (Jun 30)

**<https://tinyurl.com/y6uhamkn>**

- Statement from the Chief Public Health Officer of Canada on July 1, 2020 (Jul 1)

**<https://tinyurl.com/y76t4ahn>**

- Statement from the Chief Public Health Officer of Canada on July 4, 2020 (Jul 4)

**<https://tinyurl.com/yb6o73zr>**

- Statement from the Chief Public Health Officer of Canada on July 5, 2020 (Jul 5)

**<https://tinyurl.com/yb6q4nbf>**

- Statement from the Chief Public Health Officer of Canada on July 6, 2020 (Jul 6)

**<https://tinyurl.com/yawry7c7>**

- Statement from the Chief Public Health Officer of Canada on July 7, 2020 (Jul 7)

**<https://tinyurl.com/y89kgdux>**

- Statement from the Chief Public Health Officer of Canada on July 9, 2020 (Jul 9)

**<https://tinyurl.com/yc92p8tb>**

- Statement from the Chief Public Health Officer of Canada on July 10, 2020 (Jul 10)

**<https://tinyurl.com/yck923pp>**

- Statement from the Chief Public Health Officer of Canada on July 11, 2020 (Jul 11)

**<https://tinyurl.com/yc6qdnjd>**

- Statement from the Chief Public Health Officer of Canada on July 12, 2020 (Jul 12)

**<https://tinyurl.com/y8crorxe>**

- Statement from the Chief Public Health Officer of Canada on July 13, 2020 (Jul 13)

**<https://tinyurl.com/y8au7hlj>**

Government of Canada supports initiative to help Canadians with low incomes access fresh produce (Jul 14)

**<https://tinyurl.com/y9y3wofs>**

- Statement from the Chief Public Health Officer of Canada on July 15, 2020 (Jul 15)

**<https://tinyurl.com/ydytv98l>**

- Statement from the Chief Public Health Officer of Canada on July 16, 2020 (Jul 16)

**<https://tinyurl.com/y6m72s3c>**

- Statement from the Chief Public Health Officer of Canada on July 18, 2020 (Jul 18)

**<https://tinyurl.com/yyth6njh>**

- Statement from the Chief Public Health Officer of Canada on July 19, 2020 (Jul 19)

**<https://tinyurl.com/y5fuodbe>**

- Statement from the Chief Public Health Officer of Canada on July 20, 2020 (Jul 20)

**<https://tinyurl.com/y62ffe8k>**

- Statement from the Chief Public Health Officer of Canada on July 22, 2020 (Jul 22)

**<https://tinyurl.com/y5xqypvo>**

- Statement from the Chief Public Health Officer of Canada on July 23, 2020 (Jul 23)

**<https://tinyurl.com/yxsbyj2j>**

**Statement from the Chief Public Health Officer of Canada on July 25, 2020 (Jul 25)**

**<https://tinyurl.com/y5acw5oo>**

- Statement from the Chief Public Health Officer of Canada on July 26, 2020 (Jul 26)

## **Public Services and Procurement Canada**

**<https://tinyurl.com/y5gzyhvo>**

- Government of Canada announces creation of Essential Services Contingency Reserve through Safe Restart Agreement (Jul 21)

## **Women and Gender Equality Canada**

**<https://tinyurl.com/y3um86bx>**

- Government of Canada provides emergency COVID-19 funds to nearly 1,000 organizations delivering essential frontline supports to those fleeing violence and abuse (Jul 20)

## **GOVERNMENT OF ONTARIO**

### **Ministry of Agriculture, Food and Rural Affairs**

**<https://tinyurl.com/yc7xbudn>**

- Canada and Ontario Supporting Farmers through Enhanced Insurance Protection (Jul 9)

**Ministry of the Attorney General**

<https://tinyurl.com/ycb8c399>

- Ontario Courts Gradually Resuming In-person Proceedings (Jun 30)

**Ministry of Children, Community and Social Services**

<https://tinyurl.com/y9lbbb5c>

- Ontario Elimination the Practice of Birth Alerts (Jul 14)

**Ministry of Economic Development, Job Creation and Trade**

<https://tinyurl.com/yblxxcjy>

- Ontario Focusses on Renewal, Growth, and Economic Recovery (Jul 10)

**Ministry of the Environment, Conservation and Parks**

<https://tinyurl.com/y4ozazgm>

- Minister's 10-Year Report on Lake Simcoe (Jul 17)

**Ministry of Government and Consumer Services**

<https://tinyurl.com/yafyg6mq>

- Ontario Reviews Elevator Laws (Jul 2)

**https://tinyurl.com/y9ted5es**

- Ontario Extends Expiry Period of Marriage Licences (Jul 16)

**Ministry of Health**

<https://tinyurl.com/y5vuxpmv>

- Ontario Announces Five New Ontario Health Teams (Jul 23)

**Ministry of Long-Term Care**

<https://tinyurl.com/ycnlc34l>

- Canadian Armed Forces Depart Ontario Long-Term Care Homes (Jul 3)

**https://tinyurl.com/ydbunag9**

- Ontario Launches Long-Term Care Pilot Project to Help End Hallway Health Care (Jul 14)

**https://tinyurl.com/y7p87k3a**

- Ontario Accelerating the Development of Long-Term Care Homes (Jul 15)

**Ministry of Municipal Affairs and Housing**

<https://tinyurl.com/y32vqunt>

- Ontario Strengthens Protections for Tenants (Jul 22)

**Ministry of Transportation**

<https://tinyurl.com/y8cp7s88>

- Ontario Makes it Easier for Truck Drivers to get Tested for COVID-19 (Jul 8)

**Office of the Premier**

<https://tinyurl.com/y9wzgk6r>

- Ontario Provides Additional Funding to Support Municipalities and Urban Indigenous Community Partners (Jul 2)

**<https://tinyurl.com/yazjs6ql>**

- Ontario Supporting Restaurants as Province Safely Reopens (Jul 3)

**<https://tinyurl.com/ydgo6dj5>**

- Ontario Launches Online Training to Promote Safe Workplaces (Jul 3)

**<https://tinyurl.com/y8kmdjjr>**

- Government Proposes Made-in-Ontario Plan for Growth, Renewal and Economic Recovery (Jul 6)

**<https://tinyurl.com/ybxhqcp5>**

- Ontario Introduces Legislation to Protect Public Health as Economy Reopens (Jul 7)

**<https://tinyurl.com/y8vrvsnc>**

- Ontario Starting Down the Path to Growth, Renewal and Economic Recovery (Jul 8)

**<https://tinyurl.com/yckt7wuu>**

- Ontario Extends Emergency Orders (Jul 9)

**<https://tinyurl.com/yaad5zy7>**

- Ontario Taking Bold Action to Address Racism and Inequity in Schools (Jul 9)

**<https://tinyurl.com/yo4asgz>**

- Nearly All Businesses and Public Spaces to Reopen in Stage 3 (Jul 13)

**<https://tinyurl.com/yaarwntd>**

- Province Supports Development of Made-in-Ontario N95 Respirators (Jul 14)

**<https://tinyurl.com/y76bqe97>**

- Ontario Extends Emergency Orders (Jul 16)

**<https://tinyurl.com/yydm4wj1>**

- Province Takes Steps to Ensure All Ontarians Benefit from Local Research and Innovation (Jul 17)

**<https://tinyurl.com/y2kjddhs>**

- Ontario Moving More Regions into Stage 3 (Jul 20)

**<https://tinyurl.com/y4fbckxz>**

- Ontario Unveils New Innovative Approach to Building Long-Term Care Homes Faster (Jul 21)

**<https://tinyurl.com/y2dvzft4>**

- Ontario Legislature Adjourns after Significant Sitting in Response to COVID-19 (Jul 22)

## **OTHER ORGANIZATIONS**

### **Association of Local Public Health Agencies**

<https://tinyurl.com/y8qjpcbr>

- Dr. Peter Donnelly Letter (Jul 3)

<https://tinyurl.com/ycrd2ntm>

- Vaping Products Advertising Letter (Jul 9)

<https://tinyurl.com/yxl3q4vr>

- Face Coverings Letter (Jul 23)

### **Canadian Cancer Society**

<https://tinyurl.com/ya2bokja>

- New clinical trial will test treatment for mitigating COVID-19 infections in people with cancer (Jul 9)

### **Canadian Foundation for Healthcare Improvement**

<https://tinyurl.com/yau6oxj7>

- Experts Outline Key Steps for Hospitals to Welcome Back Family Caregivers During COVID-19 (Jul 8)

### **Canadian Institutes of Health Research**

<https://tinyurl.com/y4jltpf>

- Government of Canada invests \$5.7M in new research to study deadly blood infections (Jul 23)

### **Canadian Medical Association**

<https://tinyurl.com/ya3lj9bn>

- Are we prepared for a COVID-19 resurgence? CMA highlights top 5 issues Canada needs to address (Jul 9)

### **Financial Accountability Office of Ontario**

<https://tinyurl.com/yyxw7wx8>

- Waitlist for needs-based autism services reached 27,600 children in 2019-20 (Jul 21)

### **Heart & Stroke Foundation**

<https://tinyurl.com/yayayd2b>

- Study shows access to quality health care, tied to people living longer with chronic disease, results in higher COVID-19 deaths (Jul 15)

### **McGill University**

<https://tinyurl.com/y5d89rb7>

- New Study Offers First Glimpse Into How Widespread COVID-19 Antibodies are in Canada's Adult Population (Jul 23)

### **National Association of Friendship Centres**

<https://tinyurl.com/y8kypphg>

- National Association of Friendship Centres launches campaign to tackle COVID-19 misconceptions among urban Indigenous communities (Jul 14)

**Office of the Auditor General of Canada**

<https://tinyurl.com/yda985xj>

- 2020 Spring Reports of the Auditor General of Canada (Jul 8)

**Ombudsman Ontario**

<https://tinyurl.com/y9h8spx9>

- Ombudsman Reports on 2019-2020 – “A Year Like No Other” (Jun 30)

**Ontario Hospital Association**

<https://tinyurl.com/yc6c63pg>

- Ontario Must Prepare Healthcare System for Second Surge of COVID-19 Patients (Jul 13)

<https://tinyurl.com/y2zgp4hu>

- Ontario Health Teams Must Evolve Based on Lessons Learned from COVID-19 (Jul 23)

**Ontario Medical Association**

<https://tinyurl.com/yxfa7xnp>

- Opening of Indoor Bars in Ontario Potential Risk (Jul 17)

**Ontario Power Generation**

<https://tinyurl.com/y5rn55wf>

- Ontario Power Generation Launching Centre for Canadian Nuclear Sustainability (Jul 22)

**Ontario Tech University**

<https://tinyurl.com/yadoosja>

- What you flush away could help uncover the arrival of a second COVID-19 wave (Jun 29)

**Public Health Ontario**

<https://tinyurl.com/yco5af5p>

- PHO Connections (Jul 9)

**Registered Nurses Association of Ontario**

<https://tinyurl.com/y8v5qb3s>

- RNAO launches new social media campaign #Maskathon (Jul 14)

<https://tinyurl.com/y7m768hd>

- RNAO calls on government to immediately reunite families with their loved ones in all long-term care homes in Ontario (Jul 15)

**Royal Society of Canada**

<https://tinyurl.com/ycf64qzf>

- Royal Society of Canada Policy Briefing on COVID-19 and The Future of Long-Term Care (Jul 3)

**Statistics Canada**

**<https://tinyurl.com/ybjd4ea9>**

- Statistics Canada and the Canadian Chamber of Commerce Release Results of the Second Business Survey on the Impacts of the COVID-19 (Jul 14)

**<https://tinyurl.com/y7evzsc2>**

- Joint Statement Signals Significant Statistical Enhancement for Canada's Criminal Justice System (Jul 15)



**TOWN OF AJAX**  
65 Harwood Avenue South  
Ajax ON L1S 3S9  
[www.ajax.ca](http://www.ajax.ca)

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Honourable Minister Steve Clark  
Ministry of Municipal Affairs and Housing  
17th Floor  
777 Bay St.  
Toronto, ON  
M5G 2E5  
[steve.clark@pc.ola.org](mailto:steve.clark@pc.ola.org)

**DELEVERED BY EMAIL**

July 29, 2020

**Re: Protection of the Headwaters of the Carruthers Creek**

Please be advised that the following resolution was passed by Ajax Town Council at its meeting held July 27, 2020:

WHEREAS on June 29, 2020, Pickering Council endorsed a motion requesting that Minister Steve Clark enact a Ministerial Zoning Order (MZO) to fast-track the urbanization of approximately 2,200 hectares of lands (community of Veraine, northeast Pickering) on the headwaters of the Carruthers Creek;

AND WHEREAS Durham Region is currently undergoing a Municipal Comprehensive Review (MCR) which includes a Land Needs Assessment to determine future urban land requirements in the Region, which is to be completed, by July 2022;

AND WHEREAS Durham Regional Council will receive a report regarding the MZO request for consideration at its July 29<sup>th</sup> meeting.

AND WHEREAS the headwaters of the Carruthers Watershed is located in the 'White Belt', and if the requested MZO is approved, it would take away potential settlement area boundary expansions being considered through the MCR in Durham such as the Municipality of Clarington, City of Oshawa and Town of Whitby;

AND WHEREAS the headwaters are surrounded by protected Greenbelt lands, which will require the extension of municipal infrastructure (roads, waters, sewers) through the Greenbelt at a significant lifecycle cost to taxpayers;

AND WHEREAS the draft Toronto and Region Conservation Authority's (TRCA) Carruthers Watershed Plan indicates developing the headwaters will increase natural hazards and flood risk, placing people, properties, and infrastructure at risk of flooding downstream in Ajax by 77%

AND WHEREAS approval of the MZO circumvents the public planning process eliminating public consultation on this development and public consultation on the Carruthers Watershed Plan.

NOW THEREFORE BE IT RESOLVED THAT the Town of Ajax does not support the City of Pickering's Ministerial Zoning Order (MZO) request to re-zone the headwaters of the Carruthers (northeast Pickering) to allow for development;

AND THAT the City of Pickering be urged to withdraw its MZO letter to Minister Steve Clark requesting that the headwaters be urbanized by the developer, being Dorsay Development Corporation;

AND THAT the Town continues to support the Carruthers Creek Watershed Plan process

AND THAT the Town continues to supports opportunities for comprehensive public consultation.

AND THAT this motion be sent to Minster Steve Clark, Minister Rod Phillips, Dorsay Developments, and the City of Pickering and all Durham Region municipalities.

If you require any additional information please do not hesitate to contact Rachael Wraith, Acting Manager of Public & Strategic Affairs, at 905-619-2529 ext. 3325 or [rachael.wraith@ajax.ca](mailto:rachael.wraith@ajax.ca)

Sincerely



Sarah Moore  
Acting Manager of Legislative Services/Acting Deputy Clerk

Copy: Minister Rod Phillips  
Dorsay Development Corporation  
Durham Region Municipalities  
Regional Councillor J. Dies  
Regional Councillor S. Lee  
Rachael Wraith, Acting Manager of Public & Strategic Affairs



## CORPORATION OF THE TOWNSHIP OF SOUTH GLENGARRY

MOVED BY Stephanie Jaworski

RESOLUTION NO 229-2020

SECONDED BY Lyle Warden DATE July 20, 2020

WHEREAS the COVID-19 pandemic has disproportionately affected the vulnerable elderly population in Canada's long-term care (LTC) homes and some of Ontario's LTC homes are among those with the highest fatality rates in the country as the pandemic has exposed deplorable conditions in many LTC homes across Canada; and

WHEREAS it is the mandate of the Ministry of Long-Term Care to inspect long term care homes on an annual basis and these inspections have consistently dropped in number since 2017 with only nine completed out of 626 long term care homes in 2019; and

WHEREAS residents have been endangered by personnel moving between infection zones without adequate equipment; and

NOW THEREFORE BE IT RESOLVED THAT the Council of the Township of South Glengarry urges the Ontario government to provide funding to increase full-time positions in place of casual and part-time labour in long term care homes and requests that the Ministry of Long-term Care acts to regularly inspect all long term care homes, and sound infection control measures are put in place at all Ontario long term care homes, and that this resolution be forwarded to Premier Ford, the Minister of Long-term Care Merrilee Fullerton and all Ontario municipalities for consideration.

CARRIED

DEFEATED

POSTPONED

  
Mayor Frank Prevost

Recorded Vote:	Yes	No
Mayor Prevost	—	—
Deputy Mayor Warden	—	—
Councillor Lang	—	—
Councillor Jaworski	—	—
Councillor McDonell	—	—