

Medical Officer of Health: Report to The Board of Health

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Medical Officer of Health Update

COVID-19 Update

As we are all aware, Ontario is experiencing wave six of the COVID-19 pandemic driven by the more transmissible BA.2 subvariant, waning immunity, and lifting of public health measures. On April 14, the Ontario Science Table released their most recent COVID-19 projections. Wastewater surveillance suggests that community transmission may have peaked. However, they indicated that hospital occupancy is likely to continue to rise for some time, with uncertainty in the timing and height of the peak. COVID-19 infection rates among health care workers are increasing and this combined with potentially high hospitalization rates will reduce Ontario's ability to provide care for non-COVID-19 patients.

The Science Table reaffirmed that masking in indoor areas will substantially reduce the risk of getting and spreading COVID-19 as will improvements to ventilation. Additionally, a complete vaccine series (currently 2 doses in children, 3 doses in adolescents and adults, 4 doses in older adults and high-risk groups) provides strong protection against hospital and ICU admission and is the best defense against getting symptoms and spreading COVID-19.


The mask mandate in high-risk settings (long-term care homes, retirement homes, congregate care, etc.) and on public transit is set to expire on April 27, 2022. Medical Officers of Health are advocating to have this mandate extended to protect vulnerable individuals. Locally, we continue to strongly recommend continued use of a well fitted three-layer mask or use of a medical mask in all public indoor settings and to remain up to date with their COVID-19 vaccinations.

Locally, it is not possible to determine if the sixth wave has peaked or not. Due to limited testing, reported case numbers are an underestimate of the true infections and community spread. Throughout our district, over the past few weeks, there has been a slow but steady increase in patients hospitalized with COVID-19. Similarly, there has been an increase in hospitalizations due to COVID-19 but to a lesser extent.

April 21, 2022:

- 20 patients hospitalized with COVID-19
- 7 patients hospitalized due to COVID-19

April 20, 2022:

- 2 patients admitted to the ICU due to COVID-19
 - 0 patients admitted to the ICU due to COVID-19 on ventilators
- 

While individual case and contact management is no longer required, the Health Unit continues to work with high-risk settings to manage COVID-19 outbreaks. Since the beginning of April, the number of ongoing outbreaks has remained steady between five and ten at any one time.

Immunizations remain the best protection against severe illness, hospitalization, and death. COVID-19 vaccinations continue to be offered in a variety of venues throughout the district by the Health Unit, pharmacies, and primary health care providers. Appointments can be booked online or by calling the Health Unit. Walk-ins are also welcomed.

The Health Unit has been steadily reducing the backlog of missed regular (non-COVID-19) vaccinations due to the pandemic priority and recovery will take some time to achieve pre-pandemic immunization rates.

Post-Acute COVID-19 Syndrome (PACS)

On April 22, 2022, Public Health Ontario released the document *Post-Acute COVID-19 Syndrome in Adults* which is a rapid review of the literature pertaining to results from systematic reviews and meta-analyses. This is an update from their previous publication *Persistent Symptoms and Post-Acute COVID-19 in Adults – What We Know So Far (April 9, 2021)*.

Highlights:

- The definition of and diagnostic criteria for PACS are not yet well established
 - PACS as persistent or new sequelae present three or more weeks after severe, mildly symptomatic, or asymptomatic SARS-CoV-2 infection
- PACS mean prevalence ranges from 51% - 80%
- Most common symptoms:
 - fatigue
 - shortness of breath
 - anxiety
 - depression
 - sleep disorder
 - cognitive and memory impairments; and
 - negative impacts on quality of life (QoL)
- Most common risk factors:
 - increased disease severity during acute SARS-CoV-2 infection; and
 - female sex
- Studies with control groups not infected with COVID-19 (e.g., healthy controls, patients with alternative diagnoses)
 - consistently found overall greater rates or risk of persistent symptoms consistent with PACS among patients with COVID-19 compared to symptoms in those without COVID-19
- Follow-up periods:
 - studies did not consistently indicate if prevalence of PACS or PACS sequelae increased, decreased, or remained stable over time

Summary:

- PACS is a condition experienced by a substantial number of individuals with previous SARS-CoV-2 infection
- Care for patients with PACS will likely place added stresses on
 - health care
 - including increased emergency department visits
 - outpatient care
 - inpatient care and rehabilitation involving multidisciplinary teams
 - social support systems

Programs and Services Updates

Corporate Services

Building and Maintenance

- Supported decommissioning of external COVID-19 Vaccine clinics.
- Weekly monitoring of personal protective equipment (PPE) cleaning supplies for COVID-19 (sanitizer and disinfectant).
- Conducted HVAC spring maintenance.
- Fire sprinkler maintenance was conducted including valve upgrades in support of a 2020 fire safety legislation change.
- Reconfigured an exam room to be a sterile reprocessing room for the Oral Health and Sexual Health programs.
- Installed interior wall corner guards at the North Bay office.
- Installed exterior closed-circuit television cameras.
- Planning future options for our Burks Falls and Parry Sound locations.

Communications

Media Relations

- Throughout the months of February, March, and April the Health Unit saw a decrease in COVID-19 media inquiries and an increase in our non-COVID-19 media inquiries. April 21, 2022, marked the last scheduled press conference related to COVID-19.

COVID-19

- Continue to promote vaccination clinics through a weekly personal service announcement dissemination and maintain up-to-date COVID-19 information on the website.

Social Media

- Notable social media posts over the last three months included: the clarification of masking requirements for the public, daily COVID-19 update, the inaugural Canadian public health week, a play on Wordle to promote face coverings at the Health Unit, facts about food insecurity, mental health and harm reduction messaging.

Communication Plans and Campaigns

- Communications has supported a number of recent non-COVID-19 communications activities such as: Think You'll Win? gambling harm reduction campaign, promotion of school catch-up vaccinations, and Mattawa walking campaign.

Emergency Preparedness

- Emergency Management work continues in support of COVID-19 response, primarily focused on Incident Management System, municipality liaisons, and support for the immunization strategy.
- The Acting Manager of Emergency Management has taken over managing responsibilities for the COVID-19 Call Centre (general and booking) since the last Board of Health update which continues to serve the public well.
- The Acting Manager of Emergency Management is continuing to represent the Health Unit at regular municipal emergency control group meetings and is responding to inquiries from municipal leaders and provincial partners.
- The Acting Manager of Emergency Management is working closely with the Immunization Strategy Team to coordinate and plan COVID-19 vaccine clinics within the municipalities.

Information Technology

- Call center implementation/configuration/training/support.
- Onsite vaccine clinic support.
- Desktop deployments - Call Center support.
- Laptop and workstation deployments - working from home requirements.
- Application rollout training - Call Center phone system.
- Ongoing support for Human Resource - new hire orientations.
- Ongoing support for Finance - asset management - working from home.
- Ongoing support for the upgrade of the Finance / HR / Payroll system
- Completing regularly scheduled network infrastructure maintenance
- Evaluating mobile device management software
- VPD Laptop refresh complete
- VPD Clinic workstations complete
- Ongoing Mobile Device Management Rollout
- Ongoing EH program laptop refresh
- Ongoing HBHC laptop refresh

Planning and Evaluation

Population Health Assessment and Surveillance

- Analysis of COVID-19 related data (cases, hospitalizations, outbreaks, vaccine coverage) continues to support internal planning, situational awareness, and potential response. Work was completed to ensure COVID-19 case data quality and reporting was adjusted given the surge in cases from early winter, changes in testing eligibility, and changes in definitions.
- Planning for the second iteration of the COVID-19 Community Survey has begun. Questions will be added about vaccine hesitancy. Many of the questions asked in the first round will remain to allow for point-in-time comparisons. It is anticipated that the survey will be disseminated in May/June with data analysis completed by the fall.

- Information collected through the Overdose Reporting System is sent to more than 160 community partners in weekly updates through the Health Unit's interactive [surveillance dashboard](#). The Health Unit also continues to collect data based on the increasing trends noted locally during the pandemic.

Health Equity:

- In collaboration with community partners providing trusted community spaces, continue to support COVID-19 vaccine clinics to reach individuals who are under housed, transient, or experiencing homelessness; individuals who use substances; and newcomers to Canada.

Planning

- Initiated strategic recovery priority setting with executive team and management. The goal is to establish organizational recovery priorities for 2022-23 that are informed by community voices and needs, support recovery needs, and are facilitated by internal and external collaboration.

Quality Assurance

Policies and Procedures

- Totals for policies, procedures, and associated documents issued between January 1 and March 31, 2022, are: 42 documents issued, and 16 new documents assigned.

Quality Issue Reports (QIR)

- Total QIRs completed (closed) between January 1 and March 31, 2022, are 29: 5 at level 0, 19 at level 1, and 5 at level 2.
- Classifications are as follows: 14 impacting people (third party, personnel, or client), 9 related to organizational/professional standards, 5 related to resources, and 1 related to reputation.

Clinical Services

Communicable Disease Control

The COVID-19 pandemic continues to be the focus of the Communicable Disease Control (CDC) program. In recent months, the Case and Contact Management (CCM) support group has been downsized. The Provincial Workforce (PWF) now completes case management for individuals not linked to a highest risk setting. Outbreaks in highest risk settings and case management for individuals linked to a highest risk setting are still managed by the Health Unit. Highest risk settings include hospitals, congregate living settings with medically and socially vulnerable individuals, including but not limited to long-term care homes, retirement homes, First Nation elder care lodges, group homes, shelters, hospices, correctional institutions, and housing for International Agricultural Workers. In 2022, the CDC program has managed 56 COVID-19 outbreaks in 33 locations throughout the district.

The CDC program continues to manage enteric and respiratory outbreaks and complete case management and contact tracing for diseases of public health significance.

The Infection Prevention and Control (IPAC) Hub continues to work with and support congregate living settings. The IPAC HUB supports the provision of IPAC knowledge, training, and expertise. In

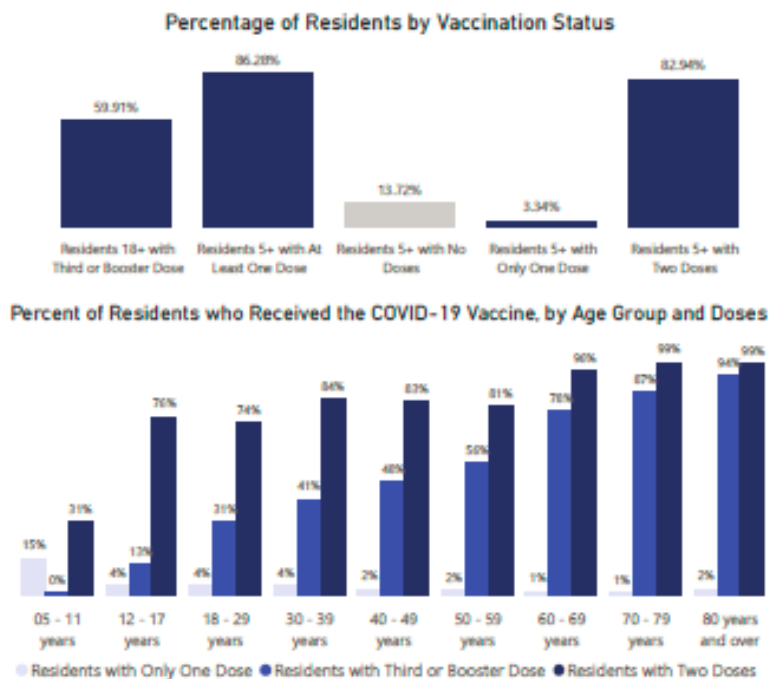
March 2022, twenty-five congregate living settings throughout the Nipissing and Parry Sound districts received IPAC financial support. Congregate living settings were offered IPAC assessments and the opportunity to apply for up to \$5,000.00 of funding. Successful applicants have used the funding for IPAC equipment, personal protective equipment including N95 masks and to have N95 fit testing done, rapid antigen tests, plexiglass barriers, HEPA filters, as well as educational opportunities for staff and volunteers. A total of \$88 000 was provided to successful applicants.

COVID-19 Immunization Strategy

A complete vaccine series (currently two doses in children, three doses in adolescents and adults, and four doses in older adults and high-risk groups) provides strong protection against hospital and intensive care unit admission and is the best defence against getting symptoms and spreading the COVID-19 virus. COVID-19 vaccination offers the best protection against severe illness from COVID-19 (Science Table COVID-19 Advisory for Ontario, April 2022).

The Health Unit’s COVID-19 vaccination program continues to provide immunizations for first, second, third (first booster) and fourth (second booster) doses to everyone who is eligible in clinics across the district. Over the course of the COVID-19 pandemic, we have worked with pharmacies, hospitals, emergency medical services, congregate care facilities, primary care, local school boards, Indigenous communities, and a wide variety of community partners to provide 274,639 doses of COVID-19 vaccine.

Vaccination rates as of the week of April 20, 2022, in the North Bay Parry Sound district are shown in the table below.



Nursing Practice

Professional Practice Manager/COvax Manager: Continues to work closely with the Immunization Strategy to ensure that COvax dose administration and inventory records are accurate. This includes monitoring all internal Health Unit clinics, as well as any community partners (with the exception of pharmacies) that provide the COVID-19 vaccine in the district are accurately accounting for and documenting doses and inventory for the vaccine. The COvax team offers regular outreach and support to community partners providing COVID-19 vaccine. This role will be transitioned to the Temporary COVID-19 Vaccine Implementation Manager on May 1, 2022.

Students were welcomed back to the Health Unit starting in January 2022. There was a total of 13 nursing students, 1 Dietetic Intern, and 1 Bachelor of Education student who participated in student placements in Vaccine Preventable Diseases, Communicable Disease Control, Communications, Healthy Living, and Healthy Schools. Student placements are scheduled to start for the Spring intake and receipt of submissions for the Fall intake are ongoing.

Part of the portfolio of the Professional Practice Manager (PPM) is Personal Health Information Lead. In addition to ongoing consultation with Health Unit staff with questions and concerns related to privacy, the PPM created the Privacy Impact Assessment (PIA) Operational Procedure which was reviewed and approved by the privacy committee and the Management of a Privacy Breach Operational Procedure which is currently under review by the Privacy Committee. The PPM in collaboration with Information Technology supported the Environmental Health team to complete a PIA for the Public Dashboard 'Check Then Go' to ensure that there were minimal privacy risks and mitigation strategies. The PIA was then brought forward for review and approval by the Privacy Committee. The PPM completed an intensive education program through the Osgoode School of Law at York University related to Privacy Law and Information Management in Healthcare.

Another core focus of the PPM is ensuring professional practice standards are met for all staff. A request was made to the Executive Team to develop a policy on Quality Practice and was approved and will be drafted over the coming months. The PPM facilitated the College of Nurses Annual Reflective Practice activity which was offered to all Health Unit registered nursing staff. An educational session was scheduled for April 21, 2022, for Health Unit staff who will be acting as preceptors for summer students and student placements. The Ministry of Health has announced regulatory practice changes for registered nurses, registered practical nurses, and nurse practitioners effective July 1, 2022, related to the authority to perform point-of-care testing. The PPM is working in collaboration with the Health Unit programs that will be affected by these changes to ensure that medical directives, policies, and procedures align with the new regulatory practice.

Oral Health

The Oral Health team is happy to report that after a two-year break due to prioritization of the organizational response to the pandemic, in school dental screenings have resumed across the Health Unit district.

After receiving approval in February 2022 from all district school boards to resume dental screenings in schools, the Oral Health team began providing the service to grade 2 students in our district elementary schools in March, which will continue until June.

Communication sent to parents/guardians prior to the visit re-assures them that dental screenings are done in a controlled environment and enhanced COVID-19 protocols are being followed.

Student safety is the main concern, therefore, additional measures such as separating class cohorts, distancing, and student hand hygiene are being followed.

As always, dental report cards are sent home with every student screened, with feedback on their oral health and if an urgent issue is identified, parents/guardians will receive assistance for coverage through Health Smiles Ontario if needed.

Sexual Health

Syphilis:

There continues to be a greater than average number of new cases of syphilis within the Health Unit district in 2022. The internal Syphilis Urgent Response Group continues to meet to evaluate the situation and implement strategies from a health promotion and case and contact management lens. The Sexual Health team continues to communicate and collaborate with health care providers in the district to increase awareness of syphilis in the region and to promote testing. A communications campaign was implemented in early Fall 2021 to increase awareness of the rise in syphilis cases amongst the target population through social media ads and distribution of posters to social service and health care providers.

Vaccine Preventable Diseases

In accordance with the *Immunization of School Pupil's Act (ISPA)*, all students registered in school are required to provide up-to-date immunization records for required vaccines including tetanus, diphtheria, polio, pertussis, measles, mumps, rubella, meningococcal disease, and varicella. There are also recommended vaccines such as Hepatitis B and Human Papillomavirus, that, while not required, are highly recommended and available free of charge to grades 7 and 8 students who. Due to the COVID-19 pandemic, we know that there are many kids who are overdue for both the required and recommended vaccines. This year we are offering a hybrid approach to reach as many kids as possible in the quickest way possible. Under ISPA, students who are overdue for required vaccines risk school "suspension". Throughout the pandemic, the Ministry lifted the suspension process, however, we are aware that it will soon be reinstated and therefore, have a goal to reach all overdue students by December 2022.

In March, 2,928 ISPA notices were mailed to parents/guardians of students with overdue immunization records. A total of 2,975 consent forms and notifications to sent to parents/guardians of students eligible for recommended vaccines.

In April and May, the Vaccine Preventable Diseases team will be attending 17 in-school clinics including all schools in Parry Sound as well as the most rural schools in the district. Four weekend community hub clinics will be held in Mattawa, West Nipissing, Sundridge, and North Bay to accommodate students in more urban areas. Both booked appointments and walk-in traffic will be accepted at these clinics. Additionally, appointments will be available at the North Bay and Parry Sound offices. Alternately, families can have vaccines administered at their primary care provider.

Community Services

Environmental Health

As of April 1, Environmental Health launched a new online portal called *Check Then Go* for the public to access local health inspection results. The *Check Then Go* online portal shows real-time inspection results for inspected businesses and settings throughout the region served by the Health Unit. The public can access the *Check Then Go* portal by going to myhealthunit.ca/CheckThenGo or scanning the QR code on the sign which is located at the entrance of inspected businesses and settings.

Environmental Health is resuming in-person delivery of the Food Handler Training Certificate course which had been suspended due to the COVID-19 pandemic. Between then and now, any individuals who desired to take this course were directed to seek alternate approved Food Handler Safety Training, including enrollment in Thunder Bay District Health Unit's web-based 'In Good Hands' course. The Health Unit strives to increase the number of certified food handlers by working within the North Bay and Parry Sound districts to fulfill and exceed requirements under Ontario Food Premises Regulation 493/17. In 2019, 881/895 (98%) food handlers were certified, augmenting their chances of securing employment in food premises.

Environmental Health continue to work with the Department of National Defense (DND), the Ministry of Environment Parks and Conservation, and the City of North Bay on the ongoing surveillance and monitoring of PFAS matters. DND continues with the quarterly water testing for private residents. DND has conducted discussions with owners of water wells around the affected area to supply point-of-use filters.

Environmental Health is transitioning to the resumption of complete delivery of programs and are preparing for spring and summer facilities reopening, including recreational camps.

Healthy Families

The Healthy Families Program is focusing its COVID-19 recovery efforts on supporting families and children to regain or achieve mental health and stability. This approach aligns with the agency Mental Health Promotion Framework and the 2018 Ontario Public Health Standard for Healthy Growth and Development. This Standard is broad and includes but is not limited to the following topics for consideration based on an assessment of local needs by local health units: breastfeeding; growth and development; healthy pregnancies; mental health promotion; preconception health; pregnancy: preparation for parenting; positive parenting.

Given that program staffing resources are not yet fully restored, Healthy Families has identified the following priorities for the remainder of 2022:

- maintain/restore direct client services, within context of client and staff safety as per COVID-19 measures. These services include Healthy Babies Health Children, universal postpartum telephone follow-up, Family Health Information line, breastfeeding clinics, online prenatal and parenting education, in-person prenatal and food skills groups.
- prioritized program planning in the areas of positive parenting, mental health promotion, and growth and development screening and referral activities, to begin implementation late 2022. Planning will also result in a multiple-year plan for evidence-based individual, group and population level interventions in these priority areas.

The Healthy Families team will continue to adapt to the evolving community and COVID-19 context by using creative strategies for direct service provision via telephone, virtual, and in-person meeting, both indoor and outdoor. Health promotion activities will also strive to respond to emerging needs as we concurrently complete multi-year implementation plans for the prioritized focus areas.

Below is a snapshot of direct service metrics for the first quarter of 2022:

Healthy Families Direct Service: Jan-Mar 2022	
Births to resident families	147
Postpartum follow-ups	72
With Risk Home Visits	213
Active families	46
Families on Waitlist	43
Breastfeeding Clinic encounters	32
Online Prenatal	3
Triple P	6
Family Health Information Line	270

Healthy Living

The Healthy Living team is planning to conduct the Nutritious Food Basket costing project in May/June. The costing was not completed in 2020 or 2021 due to the pandemic and ongoing staff redeployment to the COVID-19 response, and the costing tool required updating to be consistent with the new Canada's Food guide. In February, the team supported the Ontario Dietitians in Public Health project to validate the new costing tool for use with online food costing. Validity testing data analysis and refinement of the costing protocol and tool is underway. It is anticipated that pilot testing of an in-store/online hybrid model of Nutritious Food Basket data collection will take place in late May-June 2022. Data collected this year will not be comparable to past years, due to the change in the costing tool. This project has had support from Public Health Ontario and many health units across the province. The Nutritious Food Basket data is used to monitor food affordability, which supports advocacy efforts related to the cost of healthy eating, food insecurity, and poverty reduction.

Healthy Schools

The Healthy Schools team has continued to support schools, childcares, transportation services, and families as the province moves into reopening and recovery. The funding for the School-Focused Nurse positions has been extended until Dec 31, 2022, allowing for the Healthy Schools team to move into strategic planning alongside the school boards and childcares to plan for Fall 2022.

Healthy Schools is working with Oral Health and Vaccine Preventable Diseases teams as they resume in-person work in schools with a focus on our partnerships with the local school boards.

Healthy Schools has continued to support the COVID-19 vaccine for youth 5-17, most recently targeting the 5-11 age range using a health equity lens and data to ensure we are offering opportunities for vaccination to those hardest to reach.

Healthy Schools continues to closely monitor the needs of our schools and childcares to ensure materials and campaigns reflect the need and audience using social media platforms to extend our reach.

Finance

The new external auditor, KPMG LLP, audited the records in the early part of April. The Finance team prepared all necessary documents to assist the new audit team familiarize themselves with the Health Unit's systems and practises. The audited financial statements were presented at the April 20 Finance and Property Committee meeting.

The Annual Service Plan was filed with the province on February 28 using the budget approved by the Board of Health as well as an estimate for COVID-19 spending for 2022 of \$4,596,221, and a request for Recovery funding of \$1,425,000. The Ministry of Health (Ministry) also allowed for requests for a Public Health Inspector (PHI) Practicums. A request for \$13,500 was submitted for this. If approved, the COVID-19 funding, recovery funding, and PHI Practicum funding will be 100% provincial funding. The Ministry plans to approve budgets early in May; therefore, the budget reconciliation is expected to be brought to the Finance and Property Committee of the Board of Health in June. Notice of additional provincial funding for the Infection Prevention and Control Hub was received in March in the amount of \$1,030,000. This will also be included in the budget reconciliation in June.

Human Resources

Compensation

As reflected in the staffing section, we are processing a number of employment separations due to off-boarding casual employees previously hired to support the clinics, as well as re-hiring or extending casual staff to maintain necessary staffing levels. Additionally, the upgrade to the integrated HR/Finance/Payroll system from NAV to Sparkrock 365 is well underway with the go-live date for the new system targeted for early June. Continuing support from Finance and temporary Payroll Assistant position will help ensure a successful transition to the new Sparkrock 365 system and essential support for the bi-weekly pay process.

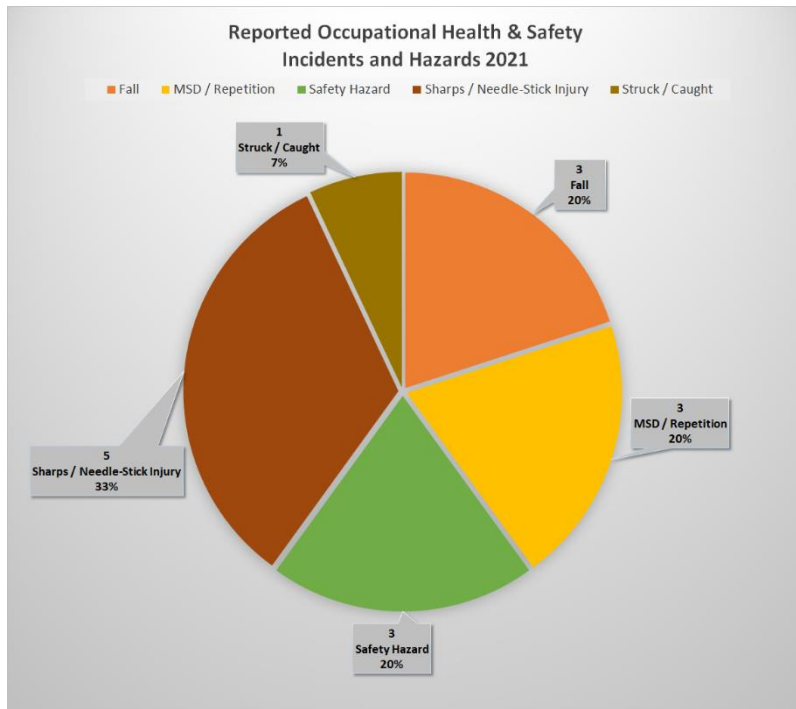
Employee & Labour Relations

A Joint OPSEU/ONA/Management Committee meeting was held on April 1, 2022. The next meeting is scheduled in June 2022. The OPSEU and ONA collective agreements expired on March 31, 2022. Dates have been scheduled in June 2022 to meet with OPSEU and ONA Negotiations Committees.

Occupational Health and Safety

The Health Unit continues to maintain the COVID-19 Workplace Safety Plan according to changes in public health measures and those we feel are necessary for the workplace. To date, there have not been any reported cases of COVID-19 resulting from a workplace exposure. Additionally, a significant amount of work has been done to address priority mental health needs of staff and prepare for a broader internal mental health strategy to be implemented later this year as part of the recovery process.

Staff reported a total of 15 occupational health and safety incidents and hazards in 2021. Below is a summary:



Professional Development

Internal professional development sessions recently coordinated by Human Resources include:

Date	Professional Development Session	Number of Participants
March 10, 2022	De-escalating Potentially Violent Situations	4
March 22, 2022	De-escalating Potentially Violent Situations	6
March 25, 2022	De-escalating Potentially Violent Situations	9
March 28, 2022	De-escalating Potentially Violent Situations	10

Renewal of de-escalation training is required at least every three years, which is provided by the Public Health Nurse, Occupational Health certified to teach (internally) the De-escalating Potentially Violent Situations training program from the Crisis and Trauma Resources Institute.

Staffing

Human Resources continues to support COVID-19 immunization clinics. This support includes scheduling staff and volunteers to work at clinics and continuing recruitment efforts to staff these clinics as needed.

As of January 1, 2022, the following temporary positions were filled as a result of a leave of absence, backfilling employees assigned to temporary job assignments related to COVID-19, temporary positions COVID-19-related work, summer student funding, and to assist with workload:

- COVax Administrator, COVID-19 Immunization Strategy (1.00 FTE) from January 17, 2022, to April 14, 2022
- Program Administrative Assistant, Finance (1.00 FTE) from January 31, 2022, to June 30, 2022
- Program Administrative Assistant, Reception (1.00 FTE) from February 28, 2022, to February 24, 2023
- Program Administrative Assistant, Parry Sound (Casual) effective April 1, 2022
- Community Health Promoter, Healthy Living (1.00 FTE) from April 11, 2022, to October 7, 2022

- Research Assistant, Planning, Evaluation and Communications (1.00 FTE) from April 25, 2022, to March 31, 2023
- Communicable Disease Control Student, Communicable Disease Control (1.00 FTE) from May 2, 2022, to August 26, 2022
- Student Public Health Inspectors, Environmental Health (2.00 FTE) from May 2, 2022, to August 26, 2022
- Vector-Borne Diseases Technician, Environmental Health (1.00 FTE) from May 9, 2022, to October 7, 2022
- Vaccine Preventable Diseases Student, Vaccine Preventable Diseases (1.00 FTE) from May 16, 2022, to August 19, 2022
- Health Promotion Student, Healthy Schools and Healthy Living (1.00 FTE) from May 16, 2022, to August 19, 2022

As of January 1, 2022, the following permanent positions were filled. These vacancies were created because of retirements, internal transfers, and a resignation:

- Senior Public Health Inspector, Environmental Health (1.00 FTE) effective January 4, 2022
- Program Administrative Assistant, Sexual Health and Clinical Information (1.00 FTE) effective January 26, 2022
- Public Health Inspector, Environmental Health (1.00 FTE) effective January 31, 2022
- Public Health Inspector, Environmental Health (1.00 FTE) effective February 28, 2022
- Tobacco Enforcement Officer, Environmental Health (0.40 FTE) effective April 6, 2022

The recruitment of the following permanent and temporary positions is currently under way:

- Certified Dental Assistant Level II, Oral Health and Vision Screening (1.00 FTE)
- Bilingual Program Administrative Assistant, Vaccine Preventable Diseases (1.00 FTE)
- Epidemiologist, Planning, Evaluation and Communications (1.00 FTE)

There has been no net increase in permanent positions.

Approved by

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