TO: Mayor and Members  
   Board of Health  

WARD(S) AFFECTED: CITY WIDE

COMMITTEE DATE: May 25, 2010

SUBJECT/REPORT NO: 
Alcohol, Drug & Gambling Services Budget BOH10009 (City Wide)

SUBMITTED BY: 
Elizabeth Richardson, MD, MHSc, FRCPC  
Public Health Services Department

PREPARED BY: 
Susan Boyd  (905) 546-2424 ext. 2888

SIGNATURE:

RECOMMENDATION:

That the 2010/2011 budget submissions for Alcohol, Drug & Gambling Services, which is 100% funded by the Hamilton Niagara Haldimand Brant, Local Health Integration Network (HNHB - LHIN), Ministry of Children and Youth Services, Children’s Aid Society, and Remedial Measures – cost recovery program be approved, which will include a reduction of 0.45 FTE.

EXECUTIVE SUMMARY

Alcohol, Drug & Gambling Services (ADGS) is a 100% funded program that provides comprehensive assessments, outpatient counselling, referrals for treatment, and community outreach to individuals in the Hamilton community. The funding allocation for the 2010/2011 budget year does not cover rising staffing costs and an overall decrease of 0.45 FTE is needed to achieve a balanced budget. The FTE reduction will be managed by the decrease in part-time staff’s hours and the elimination of a 0.3 FTE position.

FINANCIAL / STAFFING / LEGAL IMPLICATIONS (for Recommendation(s) only)

Financial: Overall funding levels for the 2010/2011 budget have increased slightly, however, this increase was not able to maintain previous program FTE. This is due to
rising staffing costs from the 3% settlement in CUPE 5167 collective agreement and step increases. The following table shows a comparison of budget allocation from 2008/2009 through to 2010/2011, with FTE complement.

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</thead>
<tbody>
<tr>
<td>Choices and Changes, MCYS (Children's Aid Societies)</td>
<td>$127,126</td>
<td>$142,620</td>
<td>$132,836</td>
<td>1.44</td>
<td>1.64</td>
<td>1.40</td>
<td>0.20</td>
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<tr>
<td>Community Funding/Grant Back on Track (Remedial Measures)</td>
<td>$92,500</td>
<td>$84,696</td>
<td>$191,089</td>
<td>0.91</td>
<td>0.86</td>
<td>1.26</td>
<td>0.05 (increase)</td>
</tr>
<tr>
<td>Community Funding/Grant Employment &amp; Income Supports Branch (Ontario Works)</td>
<td>Budget stays in OW</td>
<td>Budget stays in OW</td>
<td>Budget stays in OW</td>
<td>1.0</td>
<td>1.0</td>
<td>1.0</td>
<td>Transfer of FTE from OW</td>
</tr>
<tr>
<td>Substance Use</td>
<td>$702,296</td>
<td>$687,284</td>
<td>$676,627</td>
<td>7.3</td>
<td>7.3</td>
<td>7.6</td>
<td>-</td>
</tr>
<tr>
<td>Problem Gambling</td>
<td>$303,106</td>
<td>$296,625</td>
<td>$292,026</td>
<td>2.8*</td>
<td>3.1</td>
<td>3.3</td>
<td>0.3</td>
</tr>
<tr>
<td>Total FTE</td>
<td></td>
<td></td>
<td></td>
<td>13.45</td>
<td>13.9</td>
<td>14.56</td>
<td>0.45</td>
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*this includes the 0.3 FTE reduction of the clerk position

**Staffing:** There will be FTE reductions of 0.2 in the Choices and Changes Program, 0.3 FTE in Problem Gambling, and an increase of 0.05 in Community Funding/Grants (refer to analysis / rationale for recommendations).

**Legal:** No Implications.

**HISTORICAL BACKGROUND**  (Chronology of events)

Alcohol, Drug & Gambling Services (ADGS) is a 100% funded program providing outpatient treatment to individuals experiencing concerns with substance use and gambling. The majority of funding is received from the HNHB - LHIN. In 2009/2010 and 2010/2011 the HNHB - LHIN held back funding for in-year distribution within sectors where there was recognized need. This program received an increase of 1.575% for the 2010/11 budget which was not able to off-set the impact of the last CUPE 5167 collective agreement settlement, as well as step increases for staff.

Vision: To be the best place in Canada to raise a child, promote innovation, engage citizens and provide diverse economic opportunities.

Values: Honesty, Accountability, Innovation, Leadership, Respect, Excellence, Teamwork
The Choices and Changes Program is a joint initiative in partnership with Catholic Children’s Aid Society and the Children’s Aid Society. ADGS provides services onsite at both Children's Aid Societies to address the needs of people who experience parenting issues combined with substance use problems. Previously funding was received from the Ministry of Child and Youth Services with top up funding from both Children Aid Societies. Recently the Child Welfare system has been experiencing financial pressure and this has effected funding for the 2010/2011 budget year.

The Back on Track – Remedial Measures Program is a cost recovery program managed by the Centre for Addiction and Mental Health (CAMH), on behalf of the Ministry of Transportation, and provides assessment, education and treatment for those individuals who have been convicted of impaired driving. Each year's revenue is projected based on the previous year's earnings.

**POLICY IMPLICATIONS**

The HNHB – LHIN and the Ministry of Child and Youth Services policy requires all their funded programs to submit a balanced budget.

**RELEVANT CONSULTATION**

Public Health Services has consulted with the Finance & Administration Division regarding the preparation of the 2010-11 ADGS budget. ADGS has consulted with CAMH and the Children's Aid Societies regarding the funding received from these sources. Labour relations was consulted regarding the reduction in FTE as this resulted in the deletion of a position.

**ANALYSIS / RATIONALE FOR RECOMMENDATION**

The overall funding level for the 2010/2011 budget has increased slightly, however, this increase is not able to maintain previous program FTE due to rising staff costs related to CUPE 5167 collective agreement increases and salary step increases. There has been an increase in funding from the HNHB – LHIN and through the Back on Track - Remedial Measures Program. The increase in funding from the cost recovery program, Back on Track – Remedial Measures program, will be re-invested back into the program with a 0.05 FTE increase to enhance direct service delivery hours within this program. To balance the HNHB – LHIN funded programs a 0.3 FTE reduction was required and this has been managed by eliminating the clerk position located within the problem gambling budget. This will minimize the direct service impact by not reducing the clinical FTE complement; however, will result in increasing pressure on existing administrative staff. To manage this pressure some of the project tasks which were covered by the clerk position will return to clinical staff, and deadlines for tasks being assigned to existing
administrative staff may need to be extended to manage workloads. This will have a minimal impact on direct services, however, clinical staff may need increased prep time prior to delivering direct services. Due to the financial pressures within the child welfare system, the Catholic Children’s Aid Society have ended their funding portion (previously $15,390) that topped up funding received from the Ministry of Children and Youth Services, Community Capacity Building Initiative Funding. This has lead to a 0.2 clinical FTE reduction in this program which may impact wait times by increasing the current wait of 2 weeks to an average wait of 6 weeks for initial consultation.

**ALTERNATIVES FOR CONSIDERATION:**

(include Financial, Staffing, Legal and Policy Implications and pros and cons for each alternative)

The Board of Health could decide not to approve the ADGS budget submissions. This is not recommended for the following reasons:

- A highly-effective community partnership has been established with the Children’s Aid Societies and this partnership would be in jeopardy.

- The Back on Track remedial measures program provides essential education, awareness and treatment to individuals who have potential impact to prevent further recidivism and increase awareness of harms.

- The HNHB - LHIN funded programs provide services to a significant number of individuals needing addiction treatment. Not providing treatment could leave many vulnerable individuals without treatment.

**CORPORATE STRATEGIC PLAN** (Linkage to Desired End Results)


**Intergovernmental Relationships**
- Maintain effective relationships with other public agencies

**Social Development**
- Residents in need have access to adequate support services