



# The Regional Municipality of Durham

## COUNCIL INFORMATION PACKAGE

### January 27, 2023

#### Information Reports

- [2023-INFO-05](#) Commissioner of Works – re: 2022 Source Water Protection Annual Report
- [2023-INFO-06](#) Commissioner & Medical Officer of Health – re: Durham Region Health Department COVID-19 Response and Restoration
- [2023-INFO-07](#) Commissioner of Planning and Economic Development – re: Durham Region Charity Bike Ride
- [2023-INFO-08](#) Commissioner & Medical Officer of Health -re: Durham Region Health Department Accreditation
- [2023-INFO-09](#) Commissioner of Works – re: Implementation of the Federal Single-use Plastics Prohibition Regulation

#### Early Release Reports

There are no Early Release Reports

#### Staff Correspondence

1. [Memorandum from Dr. R. J. Kyle, Commissioner & Medical Officer of Health](#) – re: Health Information Update – January 22, 2023
2. [Memorandum from John Presta, Commissioner of Works](#) – re: Durham York Energy Centre - Quarterly (Q3 – 2022) Long-Term Sampling System Report

#### Durham Municipalities Correspondence

There are no Durham Municipalities Correspondence

#### Other Municipalities Correspondence/Resolutions

There are no Other Municipalities Correspondence

**Miscellaneous Correspondence**

There are no Miscellaneous Correspondence

**Advisory / Other Committee Minutes**

1. Durham Environmental and Climate Advisory Committee (DECAC) minutes – [January 19, 2023](#)

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 of Works  
Report: [#2023-INFO-05](#)  
Date: January 27, 2023

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**Subject:**

2022 Source Water Protection Annual Report

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**Recommendation:**

Receive for information.

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**Report:**

**1. Purpose**

1.1 This report is being provided with a copy of each Source Water Protection Annual Report (Attachments #1 to #3) required by the Clean Water Act, 2006. The attached reports provide a summary of the implementation efforts and activities undertaken in 2022. Each report will be submitted to the corresponding Source Protection Authority by February 1, 2023.

**2. Background**

2.1 The Regional Municipality of Durham (Region) is divided into three Source Protection Regions: The Credit Valley, Toronto and Region, Central Lake Ontario Source Protection Region (CTC), the South Georgian Bay Lake Simcoe Source Protection Region (SGBLS) and the Trent Conservation Coalition Source Protection Region (TCC).

2.2 The attached reports summarize the legislated and voluntary proactive activities the Region has undertaken in 2022 to comply with the Clean Water Act, 2006 and Source Protection Plans. Local Source Protection Plans contain policies that set out the reporting requirements for the Region. These reporting requirements have been developed by the Source Protection Committees and vary between Source Protection Regions. In addition to the local reporting requirements, the Region has a duty to report the actions taken by Risk Management Officials and Risk

Management Inspectors to the respective Source Protection Authority under the Clean Water Act, 2006.

- 2.3 On October 31, 2014, the TCC Source Protection Plan received approval from the Ministry of the Environment, Conservation and Parks (MECP). The TCC Source Protection Plan was approved with an effective date of January 1, 2015.
- 2.4 On January 26, 2015, the SGBLS Source Protection Plan received approval from the MECP. The SGBLS Source Protection Plan was approved with an effective date of July 1, 2015.
- 2.5 ON January 28, 2015, the CTC Source Protection Plan received approval from the MECP. The CTC Source Protection Plan was approved with an effective date of December 31, 2015.
- 2.6 The annual report includes information on the management of existing drinking water threats, development of Risk Management Plans, education and outreach initiatives and planning implications under each specific Source Protection Plan.

### **3. Implementation**

- 3.1 All the properties and landowners with significant drinking water threats have met or corresponded with Regional staff regarding the activities occurring on their properties. Based on current information, it is estimated that approximately 16 Risk Management Plans in total are required to address significant drinking water threats in the Region. The Source Water Protection Plans require Risk Management Plans to be negotiated and implemented within five years of approval. Eleven Risk Management Plans have been negotiated to date and one rescinded in 2022 due to a business closure.
- 3.2 Two Section 58(4) and Section 58(7) notices were issued on August 30, 2021 to property owners that are refusing to negotiate with the Region to establish a Risk Management Plan on their properties. These notices were issued to indicate to the owners that in the event a Risk Management Plan is not negotiated in good faith, the Region, in accordance with the Clean Water Act, 2006, will establish a plan on their behalf.
- 3.3 Two Section 58(10) Orders establishing a Risk Management Plan were issued on May 1, 2022 due to property owners not negotiating with the Region to establish a Risk Management Plan. The Orders were issued in accordance with the Clean Water Act, 2006.

- 3.4 During negotiations, it was found that approximately 90 per cent of the risk management measures contained in the Risk Management Plans included best management practices which were already in place at each location. These practices included:
- Employee training records
  - Inspection records
  - Health and safety inspections
  - Spill prevention
  - Work instructions
  - Proper chemical handling; and
  - Storage and regulated waste disposal
- 3.5 The education and outreach component of source water protection is being implemented through social media posts, new website content, hard copy materials and staff presentations.
- 3.6 Regional staff continue to participate in several working groups with other municipalities, conservation authorities and the province to collaborate on implementation of risk management measures, risk management plans, municipal guidance documents and education and outreach.
- 3.7 Regional staff continue to work in partnership with the City of Toronto and Region of Peel as members of the Lake Ontario Collaborative Group. The group is currently working with a project team to continue the development of the Decision Support System and 3-D hydrodynamic model of western Lake Ontario. This model supports decision making and emergency spills response. The model uses existing data inputs from partners such as Ontario Power Generation, Toronto and Region Conservation Authority, Ministry of the Environment, Conservation and Parks as well as specialized monitoring equipment that will be procured as part of this project. This work program is being completed to satisfy the Lake Ontario policies in the approved CTC Source Protection Plan.
- 3.8 Phase 1 of the Lake Ontario Water Quality Forecasting System has been completed. The system is currently operational, with data validation completed in 2022. Phase 2 work is currently underway which includes improvements to model calibration and tributary time of travel, as well as the incorporation of ECO lab and additional lake monitoring equipment.

- 3.9 Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review. Planning Act applications received by the Region are being screened to ensure the requirements of the Source Protection Plans are being implemented.

#### **4. Updated Groundwater Modelling Project**

- 4.1 In 2018, work commenced to update the groundwater modelling for the Regional municipal wells. Groundwater modelling for 27 municipal wells, throughout the Region's eight well systems, was updated to reflect new Wellhead Protection Areas. The update is expected to change the shape of the Wellhead Protection Areas surrounding the municipal wells. This anticipated change, specifically in the community of Cannington in the Township of Brock, may affect which properties are impacted by Source Protection Plan policies. For this reason, staff have delayed the negotiation of four Risk Management Plans in Cannington to ensure only those properties captured by the new modelling are required to adhere to Source Protection Plan policies.

#### **5. Source Protection Plan Implementation Extension**

- 5.1 SGBLS was granted an extension until July 1, 2022, by the MECP to implement the source protection plan policies.
- 5.2 TCC was granted an extension until January 1, 2023, by the MECP to implement the source protection plan policies. Source protection in this area has been fully implemented apart from continuing education and outreach policies.

#### **6. Conclusion**

- 6.1 The attached reports provide a summary of the implementation efforts and activities undertaken in 2022.
- 6.2 For additional information, please contact Tavis Nimmo, Risk Management Official, at (905) 668-7711 ext. 3737.

#### **7. Attachments**

Attachment #1: Risk Management Official Annual Report – Credit Valley – Toronto and Region – Central Lake Ontario Source Protection Region – January 1, 2022, to December 31, 2022

Attachment #2: Risk Management Official Annual Report – South Georgian Bay Lake Simcoe Source Protection Region – January 1, 2022, to December 31, 2022

Attachment #3: Risk Management Official Annual Report – Trent Conservation Coalition Source Protection Region – January 1, 2022, to December 31, 2022

Respectfully submitted,

**Original signed by:**

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John Presta, P.Eng., MPA  
Commissioner of Works

**Attachment #1 to Report #2023-INFO-05**

The Regional Municipality of Durham

Risk Management Official Annual Report

Credit Valley – Toronto and Region – Central Lake Ontario Source Protection Region

January 1, 2022 – December 31, 2022



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## 1. List of Abbreviations and Acronyms

AR	Assessment Report
BMP	Best Management Practice
CA	Conservation Authority
CWA	Clean Water Act, 2006
DNAPL	Dense Non-Aqueous Phase Liquid
E&O	Education and Outreach
ID	Identification
IPZ	Intake Protection Zone
MECP	Ministry of the Environment, Conservation, and Parks
OFEC	Ontario Farm Environmental Coalition
OMAFRA	Ontario Ministry of Agriculture, Food and Rural Affairs
PI	Prescribed Instrument
RMI	Risk Management Inspector
RMM	Risk Management Measures
RMO	Risk Management Official
RMP	Risk Management Plan
SDWT	Significant Drinking Water Threat
SPA	Source Protection Authority
WHPA	Wellhead Protection Area

## 2. Report Information

Name of Municipality	The Regional Municipality of Durham
Source Protection Authority	Credit Valley-Toronto and Region-Central Lake Ontario
Water Supply System	Uxville Industrial Park
SPA Staff Contact	Don Ford
Submitted By	Tavis Nimmo, Risk Management Official
Date Submitted	January 31, 2023

## 3. Annual Report

This annual report is provided in accordance with Section 81 of the *Clean Water Act, 2006*. It outlines the activities undertaken by the Regional Municipality of Durham in 2022 that were required by legislation as well as a summary of progress to date in implementing the Source Protection Plan.

## 4. Risk Management Officials, Inspectors and Training

RMO/RMI require renewal course every five years.

Name	Title	RMO/RMI Training Date	Property Entry Training Date
Beata Golas	Risk Management Official	December 2021	December 2021
Tavis Nimmo	Risk Management Official	December 2021	December 2021
Colin Hall	Risk Management Inspector	September 2022	September 2022
Maureen Bianchet	Risk Management Inspector	December 2019	February 2019
Ashley Brettell	Risk Management Inspector	December 2019	November 2019
Carly Graham	Risk Management Inspector	March 2018	March 2018

## 5. Risk Management Office

### 5.1. Provide an overview of work planned for 2023

Item	Description
Threat Verification	Threat verification complete. Potential new threat verification for fuel storage in 2023 due to MECP technical rules changes. Waiting on approval of technical rule changes.
RMPs	RMPs have all been completed.
E&O	Staff will continue distributing education and outreach materials in areas with low and moderate threat levels as rules permit.
Application Review and Section 59 Notices	Continue to review Planning Act/Building Permit applications.
Incentives	Reviewed and determined there is no need for incentives in this period.

## 6. Annual Progress Report as per Section 46(1) Clean Water Act, 2006 and Section 52(1) O.Reg 287/07

6.1. Provide an update for applicable RMO implementer policies

SDWT Type	Policy ID	Status	Existing Percent Complete
Waste Disposal Site	WST-1, WST-6	Complete	100
DNAPL	DNAP-1	Complete	100
Organic Solvents	OS-1	Complete	100

6.2. Provide the number and type of Section 59 notices issued. The risk management office reviews planning/building applications in vulnerable areas to determine if potential land use activities pose a threat to the quality or quantity of municipal drinking water sources.

Number of Section 59 Notices Where No Prohibition or No RMP Required	Number of Section 59 Notices Where RMP Required
0	0

6.3. Provide the number of instances the RMO received a notice and/or copy of the PI that states the PI conforms to SDWT policies.

SDWT	Prescribed Instrument
0	N/A

6.4. Provide the number of inspections for prohibited activities

Total Inspections for Prohibited Activities	Properties Inspected for Prohibited Activities	Properties Where Prohibited Activities Were Taking Place
0	0	0

6.5. Provide the number of inspections for activities requiring a risk management plan

Total Inspections for Activities Requiring an RMP	Total Properties Inspected Where an RMP is in Place	Properties Inspected that were in Contravention of their RMP
1	1	0

6.6. RMO tools and resources evaluation

Tool / Resource		Comments and Suggestions
Source protection Interactive Mapping Tool	<input checked="" type="checkbox"/>	Assists both Durham and area municipality in locating properties of interest and determining policy requirements.
Risk Management Official Forum	<input type="checkbox"/>	
Resource Catalogue / Campaign in a Box toolkit	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach webinar	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach community of practice	<input type="checkbox"/>	

Guidance Materials (fact sheets, information bulletins)	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
MECP Training (e.g., RMO Certification, property entry)	<input checked="" type="checkbox"/>	Reference material
OMAFRA/OFEC information sessions	<input checked="" type="checkbox"/>	Assisted with development of agricultural materials and establishing dialogue.
Other: Please Specify:	<input checked="" type="checkbox"/>	Source Water Protection table of threats and circumstances tool aids in threat verification.

6.7. Provide a list of SDWT. See appendix A for a detailed summary of SDWT by type.

Municipality or Township	Zone	Score	Threat Type
Uxville	WHPA-A	10	Waste Disposal Site
	WHPA-A	10	DNAPL
	WHPA-A	10	Organic Solvent

## 7. Legislated Annual Reporting Requirements as per Section 81 Clean Water Act, 2006 and Section 65 O.Reg 287/07

7.1. Risk Management Plans Agreed to Under Section 58(5) of CWA

#	Township	WHPA or IPZ	SDWT Activity
1	Uxville	WHPA-A	Waste Disposal Site, DNAPL, Organic Solvent

7.2. Risk Management Plans Established by Order Under Section 58(10) Of CWA

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

7.3. Risk Management Plans Established by Order Under Section 58(12) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Reason for Refusal
0	-	-	-	-

7.4. Risk Management Plans RMO Refused to Agree to or Establish Under Section 58(16) or Section 58(15) of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
0	-	-	-	-

7.5. Orders Issued by RMO Under Part IV of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
0	-	-	-	-

7.6. Notices Received from a Person Engaged in an Activity, Notifying RMO of Their Possession/Intent to Obtain Prescribed Instrument Under Section 61(2) & (7) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.7. Notices Issued by RMO Under Section 61(6) &amp; (8) of CWA Notifying a Person Engaged in a SDWT Activity of the Termination of an Exemption Under Section 61(1)

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.8. Section 61 (1) Exemptions Granted

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.9. Inspections Carried Out Under a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
1	Uxville	WHPA-A	Waste Disposal Site, DNAPL, Organic Solvent

## 7.10. Inspections Resulting in Non-Compliance with a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.11. Inspections Conducted on Prohibited Activities

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.12. Cases Where Prohibited Activities Were Being Engaged in During Inspections

Description of Circumstances
N/A

## 7.13. Risk Assessments Submitted, Accepted and Not Accepted Under Section 60

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.14. Instances Where RMO Caused a Thing to be Done Under Section 64 of CWA

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.15. Prosecutions Made Under Section 106 of CWA

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.16. Prosecutions Made Under Section 106 of CWA Resulting in Conviction

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 8. Septic Re-Inspection Program

Item	Description
Required Inspections	Uxville (3)
Lead Authority	Laura Freeland, Manager, Durham Region Environmental Health, Chief Building Official.
Inspection Protocol	A visual inspection is conducted on the property and the site is recorded by GPS then entered into a database. If a potential malfunction of the septic system is detected, then further inspection is conducted.
Inspection Progress	Re-inspections conducted in 2021. Due again in 2026.

## 9. Source Protection Plan Policy Reporting Requirements

### 9.1. RMO Policy Reporting Requirements

SDWT	Policy ID	Status	Details
General	GEN-1	In Progress	Amendments to the Durham Region Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Waste	WST-1	Complete	One RMP negotiated to deal with disposal of waste oil and lubricants. Best management practices in place prior to RMP included safe handling, spill prevention and response and staff training. Property owner provided with source water overview to include in on site staff training.
	WST-6	Not Applicable	No PCB storage or disposal threats.
Agricultural Source Material	ASM-2	Not Applicable	No ASM application threats.
	ASM-4	Not Applicable	No ASM storage threats.
Non-Agricultural Source Material	NASM-1	Not Applicable	No NASM application threats.
	NASM-2	Not Applicable	No NASM storage threats.
Livestock Grazing	LIV-1	Not Applicable	No livestock grazing threats.
	LIV-3	Not Applicable	No outdoor confinement or farm-animal yard threats.
Fertilizer	FER-2	Not Applicable	No application of fertilizer threats.
	FER-3	Not Applicable	No handling and storage of fertilizer threats.
Pesticide	PES-1	Not Applicable	No application of pesticide threats.
	PES-2	Not Applicable	No handling and storage of pesticide threats.
Road Salt	SAL-1	Not Applicable	No application of road salt threats.
	SAL-2	Not Applicable	No application of road salt threats.
	SAL-7	Not Applicable	No handling of road salts threats.

Snow Storage	SNO-1	Not Applicable	No storage of snow threats.
Fuel	FUEL-3	Not Applicable	No fuel threats.
DNAPL	DNAP-1	Complete	One RMP negotiated to deal with potential DNAPLs. Best management practices in place prior to RMP included safe handling, spill prevention and response, and staff training. Property owner provided with source water overview to include in staff training.
Organic Solvent	OS-1	Complete	One RMP negotiated to deal with organic solvents. Best management practices in place prior to RMP included safe handling, spill prevention and response, and staff training. Property owner provided with source water overview to include in staff training.
Recharge	REC-2	Complete	No quantity threats identified.

### 9.2. Municipality Policy Reporting Requirements

SDWT	Policy ID	Status	Details
General	GEN-1	In Progress	Amendments to the Durham Region Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	GEN-2	Complete	One RMP established. Annual inspections to be conducted to ensure conformity.
	GEN-5	Complete	Cost of septic inspections was covered by the Region. Completed in 2021 and due again in 2026.
	GEN-7	Not Applicable	Only applicable in ICA.
	GEN-8	In Progress	Municipality has engaged and provided E&O materials to properties with significant threats. Low and moderate threats targeted for distribution in 2023.
Waste	WST-2	Complete	Exempt wastes have not been found to date.
Sewage	SWG-1	Complete	Septic inspection program completed in 2015.
	SWG-2	Complete	E&O materials developed in collaboration with area municipalities. To be delivered as needed.
	SWG-6	Complete	Regional council passed amendment to by-law #89-2003 requiring mandatory connection on October 23, 2019.
	SWG-7	Not Applicable	Only applicable in ICA.
Fertilizer	FER-4	Not Applicable	No fertilizer threats.
Pesticide	PES-4	Not Applicable	No pesticide threats.
Road Salt	SAL-8	Not Applicable	No significant road salt threats.
Fuel	FUEL-4	Not Applicable	No fuel threats.



DNAPL	DNAP-2	Complete	E&O materials developed in collaboration with area municipalities. To be delivered as needed.
Organic Solvent	OS-2	Complete	E&O materials developed in collaboration with area municipalities. To be delivered as needed.
Lake Ontario	LO-G-3	In Progress	Phase 1 of the Lake Ontario Water Quality Forecasting System has been completed. The system is currently operational, with data validation completed in 2022. Phase 2 work is currently underway which includes improvements to model calibration and tributary time of travel, as well as the incorporation of ECO lab and additional lake monitoring equipment.
Demand	DEM-4	Complete	Water conservation plan finalized in April 2020.
	DEM-5	Complete	E&O materials developed in collaboration with area municipalities. To be delivered as needed.
	DEM-9	Complete	Water sources outside WHPA-Q1 to reduce quantity demand have been assessed.
Recharge	REC-3	Complete	Screening tool developed to assist with property and threat verification. E&O materials developed in collaboration with local municipalities. Incentives have been reviewed and determined they are not needed.

### 9.3. Planning Approval Authority Policy Reporting Requirements

SDWT	Policy ID	Status	Details
Waste Disposal Site	WST-5	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Sewage	SWG-3	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	SWG-4	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	SWG-9	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	SWG-12	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

Sewage	SWG-14	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	SWG-16	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	SWG-18	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Road Salt	SAL-3	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Demand	DEM-2	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Recharge	REC-1	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

## Appendix A

Significant Drinking Water Threats	A	B	C	D	Remaining SDWTs to be Addressed (A+B-C=D)
The establishment, operation, or maintenance of a waste disposal site within the meaning of Part V of the <i>Environmental Protection Act</i> .	3		2	1	0
The establishment, operation or maintenance of a system that collects, stores, transmits, treats, or disposes of sewage.	6			6	0
The application of agricultural source material to land.					
The storage of agricultural source material					
The management of agricultural source material					
The application of non-agricultural source material to land					
The handling and storage of non-agricultural source material					
The application of commercial fertilizer to land					
The handling and storage of commercial fertilizer					
The application of pesticide to land					
The handling and storage of pesticide					
The application of road salt					
The handling and storage of road salt					
The storage of snow					
The handling and storage of fuel	1		1		0
The handling and storage of a dense non-aqueous phase liquid	3		2	1	0
The handling and storage of an organic solvent	1			1	0
The management of runoff that contains chemicals used in the de-icing of aircraft					
The use of land as livestock grazing or pasturing land, an outdoor confinement area or a farm-animal yard O. Reg. 385/08, Section 3.					
Water taking from an aquifer without returning the water to the same aquifer or surface water body					
Reducing recharge of an aquifer					
<b>Total</b>	<b>14</b>		<b>5</b>	<b>9</b>	<b>0</b>

A = Original estimate of SDWT in the Approved Assessment Report

B = Additional SDWT identified after SPP approved as a result of field verification

C = SDWT included in enumeration estimates at time of plan approval but subsequently determined through field verification that: (i) it was **not** actually engaged in at a particular location after all or (ii) it was **no longer** engaged in at the location

D = SDWT addressed through policy implementation.

**Attachment #2 to Report #2023-INFO-05**

The Regional Municipality of Durham

Risk Management Official Annual Report

South Georgian Bay Lake Simcoe Source Protection Region

January 1, 2022 – December 31, 2022

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**1. List of Abbreviations and Acronyms**

AR	Assessment Report
ASM	Agricultural Source Material
BMP	Best Management Practice
CA	Conservation Authority
CWA	Clean Water Act, 2006
DNAPL	Dense Non-Aqueous Phase Liquid
E&O	Education and Outreach
ID	Identification
IPZ	Intake Protection Zone
MECP	Ministry of the Environment, Conservation, and Parks
OFEC	Ontario Farm Environmental Coalition
OMAFRA	Ontario Ministry of Agriculture, Food and Rural Affairs
PI	Prescribed Instrument
RMI	Risk Management Inspector
RMM	Risk Management Measures
RMO	Risk Management Official
RMP	Risk Management Plan
SDWT	Significant Drinking Water Threat
SPA	Source Protection Authority
WHPA	Wellhead Protection Area

## 2. Report Information

Name of Municipality	The Regional Municipality of Durham
Source Protection Authority	South Georgian Bay Lake Simcoe
Water Supply Systems	Cannington, Sunderland, Uxbridge
SPA Staff Contact	Bill Thompson
Submitted by	Tavis Nimmo, Risk Management Official
Date Submitted	January 31, 2023

## 3. Annual Report

This annual report is provided in accordance with Section 81 of the *Clean Water Act, 2006*. It outlines the activities undertaken by the Regional Municipality of Durham in 2022 that were required by legislation as well as a summary of progress to date in implementing the Source Protection Plan.

## 4. Risk Management Officials, Inspectors and Training

RMO/RMI require renewal course every five years.

Name	Title	RMO/RMI Training Date	Property Entry Training Date
Beata Golas	Risk Management Official	December 2021	December 2021
Tavis Nimmo	Risk Management Official	December 2021	December 2021
Colin Hall	Risk Management Inspector	September 2022	September 2022
Maureen Bianchet	Risk Management Inspector	December 2019	February 2019
Ashley Brettell	Risk Management Inspector	December 2019	November 2019
Carly Graham	Risk Management Inspector	March 2018	March 2018

## 5. Risk Management Office

### 5.1. Provide an overview of work planned for 2023

Item	Description
Threat Verification	Threat verification is required for one additional property due to Sunderland municipal well 3. Previous attempts at contacting the property owner have failed. Formal notification will be sent to the property owner in 2023.
RMPs	Staff are awaiting the results of the wellhead delineation project to confirm RMP requirements for the community of Cannington. Section 58(4) and 58(7) notices issued to one property owner on August 30 <sup>th</sup> , 2021. Section 58(10) Order establishing an RMP was issued on May 1 <sup>st</sup> , 2022. One RMP in Uxbridge for DNAPL and Organic Solvents has been rescinded due to the facility permanently closing.
E&O	Staff will continue distributing education and outreach materials in areas with low and moderate threat levels.
Application Review and Section 59 Notices	Continue to review Planning Act/Building Permit applications.

Incentives	Reviewed and determined there is no need for incentives in this period.
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## 6. Annual Progress Report as per Section 46(1) Clean Water Act, 2006 and Section 52(1) O.Reg 287/07

### 6.1. Provide an update for applicable RMO implementer policies

SDWT	Policy Number	Status	Existing Percent Complete
Waste Disposal Site	WAST(b)-1,2	Complete	100
Sewage	SEWG(b)-1	Complete	100
Agriculture	ASM(App)-1,2 ASM(Store)-1,2	In Progress	75
Fertilizer	FERT(App)-1 FERT(H&S)-1,2	Complete	100
Pesticide	PEST(App)-1 PEST(H&S)-1,2	In Progress	75
Fuel	FUEL-1,2	Complete	100
DNAPL	DNAPL-1,2	Complete	100
Organic Solvents	SOLV-1	Complete	100
Livestock Grazing	LSTOCK-1,2,3	Complete	100
Restricted Land Use	RLU-1	Complete	100

### 6.2. Provide the number and type of Section 59 notices issued. The risk management office reviews planning/building applications in vulnerable areas to determine if potential land use activities pose a threat to the quality or quantity of municipal drinking water sources.

Number of Section 59 Notices Where no Prohibition or no RMP Required	Number of Section 59 Notices Where RMP Required
0	0

### 6.3. Provide the number and type of any prescribed instrument the RMO received in order to conform to a SDWT policy.

SDWT	Prescribed Instrument
0	N/A

### 6.4. Provide the number of inspections for prohibited activities

Total Inspections for Prohibited Activities	Properties Inspected for Prohibited Activities	Properties Where Prohibited Activities Were Taking Place
0	0	0

### 6.5. Provide the number of inspections for activities requiring a risk management plan

Total Inspections for Activities Requiring an RMP	Total Properties Inspected Where an RMP is in Place	Properties Inspected that were in Contravention of their RMP
1	1	0



## 6.6. RMO tools and resources evaluation

Tool / Resource		Comments and Suggestions
Source protection Interactive Mapping Tool	<input checked="" type="checkbox"/>	Assists both Durham and area municipality in locating properties impacted by source water protection.
Risk Management Official Forum	<input type="checkbox"/>	
Resource Catalogue / Campaign in a Box toolkit	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach webinar	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach community of practice	<input type="checkbox"/>	
Guidance Materials (fact sheets, information bulletins)	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
MECP Training (e.g., RMO Certification, property entry)	<input checked="" type="checkbox"/>	Reference material
OMAFRA/OFEC information sessions	<input checked="" type="checkbox"/>	Assisting with development of agricultural materials and establishing dialogue
Other: Please Specify:	<input checked="" type="checkbox"/>	Source Water Protection table of threats and circumstances tool aids in threat verification.

## 7. Legislated Annual Reporting Requirements as per section 81 Clean Water Act, 2006 and section 65 O.Reg 287/07

### 7.1. Risk Management Plans Agreed to Under Section 58(5) of CWA

#	Township	WHPA or IPZ	SDWT Activity
1	Cannington	WHPA-B	Waste Disposal Site, DNAPL, Organic Solvent
2	Uxbridge	WHPA-A	DNAPL, Organic Solvent (Rescinded in 2022)

### 7.2. Risk Management Plans Established by Order Under Section 58(10) Of CWA

#	Township	WHPA or IPZ	SDWT Activity
1	Cannington	WHPA-B	Pesticide Application, ASM Application

### 7.3. Risk Management Plans Established by Order Under Section 58(12) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Reason for Refusal
0	-	-	-	-

### 7.4. Risk Management Plans RMO Refused to Agree to or Establish Under Section 58(16) or Section 58(15) of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
0	-	-	-	-

## 7.5. Orders Issued by RMO Under Part IV of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
1	Cannington	B	Pesticide application, ASM application	Pathogen threat #4 Chemical threat #52

## 7.6. Notices Received from a Person Engaged in an Activity, Notifying RMO of Their Possession/Intent to Obtain Prescribed Instrument Under Section 61(2) &amp; (7) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.7. Notices Issued by RMO Under Section 61(6) &amp; (8) of CWA Notifying a Person Engaged in a SDWT Activity of the Termination of an Exemption Under Section 61(1)

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.8. Section 61 (1) Exemptions Granted

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

## 7.9. Inspections Carried Out Under a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
1	Cannington	WHPA-B	Waste Disposal Site, DNAPL, Organic Solvent

## 7.10. Inspections Resulting in Non-Compliance with a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.11. Inspections Conducted on Prohibited Activities

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.12. Cases Where Prohibited Activities Were Being Engaged in During Inspections

Description of Circumstances
N/A

## 7.13. Risk Assessments Submitted, Accepted and Not Accepted Under Section 60

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.14. Instances Where RMO Caused a Thing to be Done Under Section 64 of CWA

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

## 7.15. Prosecutions Made Under Section 106 of CWA

Description
N/A

7.16. Prosecutions Made Under Section 106 of CWA Resulting in Conviction

Description
N/A

**8. Septic System Inspection Program**

Item	Description
Required Inspections	Uxbridge (1) Sunderland (2) Cannington (17)
Lead Authority	Laura Freeland, Manager, Durham Region Environmental Health, Chief Building Official.
Inspection Protocol	A visual inspection is conducted on the property and the site is recorded by GPS then entered into a database. If a potential malfunction of the septic system is detected, then further inspection is conducted.
Inspection Progress	Re-inspections conducted in 2021. Due again in 2026.

**9. Source Protection Plan Policy Reporting Requirements**

9.1. RMO Policy Reporting Requirements

SDWT	Policy Number	Status	Details
Waste Disposal Site	WAST(b)- 1	Complete	One RMP negotiated to date to deal with disposal of waste oil and lubricants. Best management practices in place prior to RMP included safe handling, spill prevention and response and staff training. Property owner provided with source water overview in order to include in on site staff training.
	WAST(b)- 2	Not Applicable	No future threats seen through planning/building permit application.
Sewage	SEWG(b) -1	Not Applicable	No SDWTs requiring RMP in 2022.
Agricultural Source Material	ASM(App)-1	In Progress	Threat verification to be completed in 2023 due to several potential threats at Sunderland municipal well 3. RMPs to be negotiated in 2023 pending approval of the new Cannington WHPA and updated AR by the MECP.
	ASM(App)-2	Not Applicable	No future threats.
	ASM(Store)-1	Not Applicable	No existing storage threats.
	ASM(Store)-2	Not Applicable	No future storage threats.
Non-agricultural Source Material	NASM(App)-1	Not Applicable	No NASM threats.
	NASM(App)-2	Not Applicable	
	NASM(H&S)-1	Not Applicable	
	NASM(H&S)-2	Not Applicable	
Fertilizer	FERT(App)-1	Not Applicable	No fertilizer threats.
	FERT(H&S)-1	Not Applicable	No handling and storage threats.

SDWT	Policy Number	Status	Details
Fertilizer	FERT(H&S)-2	Not Applicable	
Pesticides	PEST(App)-1	In Progress	RMPs to be negotiated in 2023 pending approval of the new Cannington WHPA and updated AR by the MECP.
	PEST(H&S)-1	Not Applicable	No handling and storage threats.
	PEST(H&S)-2	Not Applicable	
Road Salt	SALT(App)-1	Not Applicable	No application threats in vulnerable areas.
	SALT(H&S)-1	Not Applicable	No handling and storage threats.
Snow Storage	SNOW-1	Not Applicable	No snow threats.
	SNOW-2	Not Applicable	
Fuel	FUEL-1	Complete	No fuel threats found through verification efforts.
	FUEL-2	Not Applicable	No threats found in 2022.
Dense Non-Aqueous Phase Liquids	DNAPL-1	Complete	No DNAPL threats remain.
	DNAPL-2	Not Applicable	No threats found in 2022.
Organic Solvents	SOLV-1	Complete	No organic solvent threats remain.
Livestock Grazing	LSTOCK-1	In Progress	Verification efforts complete. RMP dependent on approval of the new Cannington WHPA and updated AR by the MECP.
	LSTOCK-2	Not Applicable	No outdoor confinement areas or farm animal yard threats.
	LSTOCK-3	Not Applicable	
Restricted Land Use	RLU-1	In Progress	Amendments to the Durham Region Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

**9.2. Municipality Policy Reporting Requirements**

SDWT	Policy Number	Status	Details
Waste Disposal Site	WAST(b)- 5	Complete	The Region will continue to promote the safe disposal of household hazardous waste material.
Sewage	SEWG(b) -5	Complete	Durham Region Sewer Use By-law #55-2013 does not permit cross connections. Durham also has no combined sewer overflows.
	SEWG(c)- 3	Complete	Region council passed amendment to by-law #89-2003 requiring mandatory connection on October 23, 2019
	SEWG(c)- 4	Not Applicable	Area municipality responsibility.
Road Salt	SALT(H&S)- 2	Not Applicable	No handling and storage threats.

SDWT	Policy Number	Status	Details
Fuel	FUEL-4	Not Applicable	Area municipality responsibility through property standards by-law.
Organic Solvents	SOLV-2	Complete	No threats found in 2022.
Demand	DEMD-3	Complete	Water conservation plan finalized in April 2020.
E&O	EDU-11	Complete	Signage installed prior to plan approval.
Incentive	INCENT- 3	Not Applicable	Area municipality responsibility.
	INCENT- 4	Not Applicable	Area municipality responsibility.

## 9.3. Planning Approval Authority Policy Reporting Requirements

SDWT	Policy Number	Status	Details
Land Use Planning	LUP-1	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-2	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-3	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-4	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-5	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-6	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-7	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-8	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

SDWT	Policy Number	Status	Details
Land Use Planning	LUP-10	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-11	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-12	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-13	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	LUP-15	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

## Appendix A

Significant Drinking Water Threats	A	B	C	D	Remaining SDWTs to be Addressed (A+B-C-D)
The establishment, operation, or maintenance of a waste disposal site within the meaning of Part V of the <i>Environmental Protection Act</i> .	1			1	0
The establishment, operation or maintenance of a system that collects, stores, transmits, treats, or disposes of sewage.	21	4	3	22	0
The application of agricultural source material to land.	11	1	7	1	4
The storage of agricultural source material					
The management of agricultural source material					
The application of non-agricultural source material to land					
The handling and storage of non-agricultural source material					
The application of commercial fertilizer to land		3	2		1
The handling and storage of commercial fertilizer					
The application of pesticide to land	9	1	6	1	3
The handling and storage of pesticide					
The application of road salt					
The handling and storage of road salt					
The storage of snow					
The handling and storage of fuel	27	1	4	24	0
The handling and storage of a dense non-aqueous phase liquid	15	1	15	1	0
The handling and storage of an organic solvent	1	3	3	1	0
The management of runoff that contains chemicals used in the de-icing of aircraft					
The use of land as livestock grazing or pasturing land, an outdoor confinement area or a farm-animal yard O. Reg. 385/08, Section 3.		3	1		2
Water taking from an aquifer without returning the water to the same aquifer or surface water body					
Reducing recharge of an aquifer					
<b>Total</b>	<b>85</b>	<b>17</b>	<b>41</b>	<b>51</b>	<b>10</b>

A = Original estimate of SDWT in the Approved Assessment Report

B = Additional SDWT identified after SPP approved as a result of field verification

C = SDWT included in enumeration estimates at time of plan approval but subsequently determined through field verification that: (i) it was **not** actually engaged in at a particular location after all or (ii) it was **no longer** engaged in at the location

D = SDWT addressed through policy implementation

**Attachment #3 to Report #2023-INFO-05**

The Regional Municipality of Durham

Risk Management Official Annual Report

Trent Conservation Coalition Source Protection Region

January 1, 2022 – December 31, 2022



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## 1. List of Abbreviations and Acronyms

AR	Assessment Report
BMP	Best Management Practices
CA	Conservation Authority
CWA	Clean Water Act, 2006
DNAPL	Dense Non-Aqueous Phase Liquid
E&O	Education and Outreach
ID	Identification
IPZ	Intake Protection Zone
MECP	Ministry of the Environment, Conservation, and Parks
OFEC	Ontario Farm Environmental Coalition
OMAFRA	Ontario Ministry of Agriculture, Food and Rural Affairs
PI	Prescribed Instrument
RMI	Risk Management Inspector
RMM	Risk Management Measures
RMO	Risk Management Official
RMP	Risk Management Plan
SDWT	Significant Drinking Water Threat
SPA	Source Protection Authority
WHPA	Wellhead Protection Area

## 2. Report Information

Name of Municipality	The Regional Municipality of Durham
Source Protection Authority	Trent Conservation Coalition Source Protection Region
Water Systems	Blackstock, Greenbank, Port Perry, Orono, Newcastle
SPA Staff Contact	Jenna Stephens, Pam Lancaster
Submitted By	Tavis Nimmo, Risk Management Official
Date Submitted	January 31, 2023

## 3. Annual Report

This annual report is provided in accordance with Section 81 of the *Clean Water Act, 2006*. It outlines the activities undertaken by the Regional Municipality of Durham in 2022 that were required by legislation as well as a summary of progress to date in implementing the Source Protection Plan.

## 4. Risk Management Officials, Inspectors and Training

RMO/RMI require renewal course every five years.

Name	Title	RMO/RMI Training Date	Property Entry Training Date
Greg Lymer	Risk Management Official	February 2021	February 2021
Beata Golas	Risk Management Official	December 2021	December 2021
Tavis Nimmo	Risk Management Official	December 2021	December 2021
Colin Hall	Risk Management Inspector	September 2022	September 2022
Maureen Bianchet	Risk Management Inspector	December 2019	February 2019
Ashley Brettell	Risk Management Inspector	December 2019	November 2019
Carly Graham	Risk Management Inspector	March 2018	March 2018

## 5. Risk Management Office

### 5.1. Provide an overview of work planned for 2023

Item	Description
Threat Verification	Threat verification complete.
RMPs	RMPs complete. Section 58(4) and 58(7) notices issued to one property owner on August 30 <sup>th</sup> , 2021. Section 58(10) Order establishing an RMP was issued on May 1 <sup>st</sup> , 2022.
E&O	Staff will continue distributing Education and outreach materials in areas with low and moderate threat levels.
Application Review and Section 59 Notices	Continue to review Planning Act/Building Permit applications.
Incentives	Will continue to work with property owners to guide potential funding opportunities.

**6. Annual Progress Report as per Section 46(1) Clean Water Act, 2006 and Section 52(1) O.Reg 287/07**

**6.1. Provide an update for applicable policy implementation**

SDWT Type	Policy ID	Status	Existing Percent Complete
Sewage Systems	S-9; S-10	Complete	100
Agriculture	A-1(1-3); A-4(1-3)	Complete	100
Fuel	F-1; F-2(1-2)	Complete	100

**6.2. Provide the number and type of Section 59 notices issued. The risk management office reviews planning/building applications in vulnerable areas to determine if potential land use activities pose a threat to the quality or quantity of municipal drinking water sources.**

Number of Section 59 Notices Where No Prohibition or No RMP Required	Number of Section 59 Notices Where RMP Required
0	0

**6.3. Provide the number and type of prescribed instrument the RMO received in order to conform to a SDWT policy.**

SDWT	Prescribed Instrument
0	N/A

**6.4. Provide the number of inspections for prohibited activities**

Total Inspections for Prohibited Activities	Properties Inspected for Prohibited Activities	Properties Where Prohibited Activities Were Taking Place
0	0	0

**6.5. Provide the number of inspections for activities requiring a risk management plan**

Total Inspections for Activities Requiring an RMP	Total Properties Inspected Where an RMP is in Place	Properties Inspected that were in Contravention of their RMP
7	4	0

**6.6. RMO tools and resources evaluation**

Tool / Resource		Comments and Suggestions
Source protection Interactive Mapping Tool	<input checked="" type="checkbox"/>	Assists both Durham and area municipality in locating properties impacted by source water protection.
Risk Management Official Forum	<input type="checkbox"/>	
Resource Catalogue / Campaign in a Box toolkit	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach webinar	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
Education & Outreach community of practice	<input type="checkbox"/>	

Guidance Materials (fact sheets, information bulletins)	<input checked="" type="checkbox"/>	Assisted in development of E&O materials.
MECP Training (e.g., RMO Certification, property entry)	<input checked="" type="checkbox"/>	Reference Material
OMAFRA/OFEC information sessions	<input checked="" type="checkbox"/>	Assisted with development of agricultural materials and establishing dialogue.
Other: Please Specify:	<input checked="" type="checkbox"/>	Source Water Protection table of threats and circumstances tool aids in threat verification.

**7. Legislated Annual Reporting Requirements as per Section 81 Clean Water Act, 2006 and Section 65 O.Reg 287/07**

7.1. Risk Management Plans to Date Agreed to Under Section 58(5) of CWA

#	Township	WHPA or IPZ	SDWT Activity
1	Port Perry	WHPA-A	Fuel Storage
2	Port Perry	WHPA-A	Use of Land for Livestock Grazing
3	Newcastle	IPZ-2	Fuel Storage
4	Greenbank	WHPA-A	ASM Application, Fertilizer Application
5	Greenbank	WHPA-A	Use of Land for Livestock Grazing
6	Orono	WHPA-A	Pesticide Application
7	Greenbank	WHPA-A	ASM Application, Fertilizer Application, Pesticide Application

7.2. Risk Management Plans Established by Order Under Section 58(10) Of CWA

#	Township	WHPA or IPZ	SDWT Activity
1	Greenbank	WHPA-A	Fertilizer Application

7.3. Risk Management Plans Established by Order Under Section 58(12) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Reason for Refusal
0	-	-	-	-

7.4. Risk Management Plans RMO Refused to Agree to or Establish Under Section 58(16) or Section 58(15) of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
0	-	-	-	-

7.5. Orders Issued by RMO Under Part IV of CWA

#	Township	WHPA or IPZ	SDWT Activity	Circumstances
1	Greenbank	WHPA-A	Application of Fertilizer	Chemical threat #22

7.6. Notices Received from a Person Engaged in an Activity, Notifying RMO of Their Possession/Intent to Obtain Prescribed Instrument Under Section 61(2) & (7) Of CWA

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

7.7. Notices Issued by RMO Under Section 61(6) & (8) of CWA Notifying a Person Engaged in a SDWT Activity of the Termination of an Exemption Under Section 61(1)

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

7.8. Section 61 (1) Exemptions Granted

#	Township	WHPA or IPZ	SDWT Activity	Prescribed Instrument
0	-	-	-	-

7.9. Inspections Carried Out Under a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
1	Port Perry	WHPA-A	Fuel
2	Port Perry	WHPA-A	Livestock Grazing. No response. Staff will continue inspections efforts during first quarter of 2023.
3	Newcastle	IPZ-2	Fuel. No response. Staff will continue inspections efforts during first quarter of 2023.
4	Greenbank	WHPA-A	ASM Application, Fertilizer Application
5	Greenbank	WHPA-A	Livestock Grazing
6	Orono	WHPA-A	Pesticide Application. No response. Staff will continue inspections efforts during first quarter of 2023.
7	Greenbank	WHPA-A	ASM Application, Fertilizer Application, Pesticide Application
8	Greenbank	WHPA-A	Fertilizer Application

7.10. Inspections Resulting in Non-Compliance with a Risk Management Plan

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

7.11. Inspections Conducted on Prohibited Activities

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

7.12. Cases Where Prohibited Activities Were Being Engaged in During Inspections

Description of Circumstances
N/A

7.13. Risk Assessments Submitted, Accepted and Not Accepted Under Section 60

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

7.14. Instances Where RMO Caused a Thing to be Done Under Section 64 of CWA

#	Township	WHPA or IPZ	SDWT Activity
0	-	-	-

7.15. Prosecutions Made Under Section 106 of CWA

Description
N/A

## 7.16. Prosecutions Made Under Section 106 of CWA Resulting in Conviction

Description
N/A

## 8. Septic System Inspection Program

Item	Description
Required Inspections	Blackstock (5) Greenbank (17) Port Perry (3)
Lead Authority	Laura Freeland, Manager, Durham Region Environmental Health, Chief Building Official.
Inspection Protocol	A visual inspection is conducted on the property and the site is recorded by GPS then entered into a database. If a potential malfunction of the septic system is detected, then further inspection is conducted.
Inspection Progress	Re-inspections conducted in 2021. Due again in 2026.

## 9. Source Protection Plan Reporting Requirements

## 9.1. RMO Reporting Requirements

Type	Policy #	Status	Details
General	G-8(1)	Complete	Implementation of source protection plan and negotiation of RMPs complete.
	G-8(2)	Complete	Prioritization and negotiation of RMPs complete.
	G-8(3)	Complete	The miscellaneous provisions required by this policy have been established in the RMP process.
Sewage	S-9	Complete	
	S-10	Not Applicable	Section 59 screening tool will be used for future threat verification.
Agriculture	A-1(1)	Complete	Section 58(4) and 58(7) notices issued to one property owner on August 30 <sup>th</sup> , 2021. Section 58(10) Order establishing an RMP was issued on May 1 <sup>st</sup> , 2022.
	A-1(2)	Complete	Applicable prescribed instruments will be considered, as appropriate.
	A-1(3)	Not Applicable	No handling and storage of pesticide threats present.
	A-4(1)	Not Applicable	No future threats.
	A-4(2)	Not Applicable	No future threats.
	A-4(3)	Not Applicable	No future threats.
Fuel	F-1	Not Applicable	No future threats.
	F-2(1)	Complete	Fuel threat RMPs have been negotiated and established.
	F-2(2)	Complete	Annual inspection required as part of negotiated RMP.

Road Salt	R-1(1)	Not Applicable	No road salt threats.
	R-1(2)	Not Applicable	No road salt application threats.
	R-5	Not Applicable	No road salt storage threats.
	R-6	Not Applicable	No road salt storage threats.
Waste Disposal Site	W-3	Not Applicable	No waste disposal site threats.
	W-4(1)	Not Applicable	No waste disposal site threats.
	W-4(2)	Not Applicable	No waste disposal site threats.
DNAPL	D-1	Not Applicable	No DNAPL threats.
	D-2	Not Applicable	No DNAPL threats.
	D-3(1)	Not Applicable	No DNAPL threats.
	D-3(2)	Not Applicable	No DNAPL threats.
Non-Agricultural Source Material	N-2	Not Applicable	No NASM application, storage or handling threats.
	N-3	Not Applicable	No NASM application, storage or handling threats.
Snow Storage	O-1(3)	Not Applicable	No snow storage threats.
	O-2	Not Applicable	No snow storage threats.
Aquaculture	Q-1	Not Applicable	No aquaculture threats.
	Q-2	Not Applicable	No aquaculture threats.
Aircraft De-icing	P-1(1)	Not Applicable	No De-icing threats.
	P-1(4)	Not Applicable	No De-icing threats.
Monitoring for Nitrate	I-1	Not Applicable	Blackstock Well 1 decommissioned to eliminate nitrate issue. Groundwater from MW8 continues to be monitored for nitrates, results are listed in the annual water quality report.

9.2. Municipality Reporting Requirements

Type	Policy #	Status	Details
General	G-3(1)	Not Applicable	No properties purchased in 2022.
	G-5(1)	Complete	Source water overview materials developed in collaboration with area municipalities. Additional targeted material developed to address low and moderate threats. E&O policy.
	G-5(2)	Complete	Source water overview materials developed in collaboration with area municipalities. Additional targeted material developed to address low and moderate threats.
	G-5(3)	Complete	Durham taking lead role in E&O.
	G-5(4)	Complete	Durham taking lead role in E&O.
	G-5(5)	Complete	E&O program continues to be developed, existing materials include fact sheets and BMPs to eliminate threats to drinking water, this includes existing and future fuel threats.



General	G-5(6)	Complete	Targeted materials developed. Materials include fact sheets and BMPs to eliminate threats to drinking water; this includes existing and future fuel threats.
	G-6(3)	Complete	Signs installed prior to plan approval.
	G-11(1)	Complete	All emergency response plans updated.
Sewage	S-1(1)	Complete	Septic inspections completed in 2021. Due again in 2026.
	S-4(1)	Complete	Regional council passed amendment to by-law #89-2003 requiring mandatory connection on October 23, 2019.
	S-6(1)	Complete	Emergency response plan updated.
	S-6(3)	Complete	Maintenance and asset management activities have been assessed and completed.
	S-8(2)	Not Applicable	Area municipality responsible for stormwater management.
Snow Storage	O-1(1)	Not Applicable	No snow storage threats.
	O-1(2)	Not Applicable	No snow storage threats.
Transportation Corridors	OT-1(1)	Complete	Spill response plan updated.
	OT-1(2)	Complete	Response plan reviewed and updated as needed annually.
Transport Pathways	OT-2(1)	Complete	Targeted materials developed. Materials include fact sheets and BMPs to eliminate threats to drinking water.
	OT-2(2)	Complete	Regional council passed amendment to by-law #89-2003 to eliminate transport pathways on October 23, 2019.
Pipeline	L-2(8)	Complete	Spills response plan located at all plants and maintenance depots. Also available online in the Regions Integrated Management System. Includes notification of all applicable parties in the event of a spill.
	L-2(9)	Complete	Spills response for pipeline rupture updated to include source water protection.
	L-2(10)	Complete	No activation of emergency response plan in 2022.
	L-2(11)	Complete	Emergency response plans reviewed annually and updated as needed.
Water Quantity Demand	Y-1(6)	Complete	Water conservation plan finalized in April 2020.

## 9.3. Planning Approval Authority Reporting Requirements

Type	Policy #	Status	Details
General	G-7(2)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	G-10(1)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Sewage	S-3(2)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	S-4(3)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	S-5(1)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	S-7(1)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Road Salt	R-4(3)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Waste	W-2(2)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
Water Quantity	Y-1(2)	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.
	Z-1	In Progress	Amendments to the Durham Regional Official Plan to implement the policy have been initiated and will be completed as part of the Municipal Comprehensive Review.

## Appendix A

Significant Drinking Water Threats	A	B	C	D	Remaining SDWTs to be Addressed (A+B-C=D)
The establishment, operation, or maintenance of a waste disposal site within the meaning of Part V of the <i>Environmental Protection Act</i> .					
The establishment, operation or maintenance of a system that collects, stores, transmits, treats, or disposes of sewage.	88	1	62	27	0
The application of agricultural source material to land.	8		5	3	0
The storage of agricultural source material	1		1		0
The management of agricultural source material					
The application of non-agricultural source material to land	1		1		0
The handling and storage of non-agricultural source material					
The application of commercial fertilizer to land	63		59	4	0
The handling and storage of commercial fertilizer	1		1		0
The application of pesticide to land	7		5	2	0
The handling and storage of pesticide	1		1		0
The application of road salt					
The handling and storage of road salt					
The storage of snow					
The handling and storage of fuel	34	2	33	3	0
The handling and storage of a dense non-aqueous phase liquid	2		2		0
The handling and storage of an organic solvent					
The management of runoff that contains chemicals used in the de-icing of aircraft					
The use of land as livestock grazing or pasturing land, an outdoor confinement area or a farm-animal yard O. Reg. 385/08, Section 3.	1	2	2	1	0
Water taking from an aquifer without returning the water to the same aquifer or surface water body					
Reducing recharge of an aquifer					
<b>Total</b>	<b>207</b>	<b>5</b>	<b>172</b>	<b>40</b>	<b>0</b>

A = Original estimate of SDWT in the Approved Assessment Report

B = Additional SDWT identified after SPP approved as a result of field verification

C = SDWT included in enumeration estimates at time of plan approval but subsequently determined through field verification that: (i) it was **not** actually engaged in at a particular location after all or (ii) it was **no longer** engaged in at the location

D = SDWT addressed through policy implementation

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 3111



# The Regional Municipality of Durham Information Report

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From: Commissioner & Medical Officer of Health  
Report: [#2023-INFO-06](#)  
Date: January 27, 2023

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**Subject:**

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

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**Recommendation:**

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, vaccination, and regular program activities.
- 1.2 As DRHD continued to be actively engaged in COVID-19 response activities during the last quarter of the year 2022, while also working to restore regular programs and services, this report is provided in place of Program Reports for October 1 to December 31, 2022.

**2. Background**

- 2.1 It has been almost three years since the World Health Organization (WHO) announced that COVID-19 was a pandemic, with 118,319 cases globally on March 11, 2020. By December 31, 2022, there were over 655 million confirmed cases, with over 6.6 million deaths globally.
- 2.2 DRHD continues to respond to COVID-19 and deliver vaccines.
- 2.3 Ongoing response efforts include case and contact management, communications, inspections, investigations, monitoring and surveillance, testing support, implementation of modified programs, and plans that can be quickly adapted to mitigate risks.

2.4 Over the past three years, COVID-19 response efforts were a priority for DRHD and required significant resource commitments. In the first year of the response, many regular public health programs and services were suspended to allow DRHD staff to focus on COVID-19, but gradually, programs were restored starting with high priority programs. For about two years, DRHD balanced the restoration of public health programs and services with ongoing pandemic response needs, including continued requirements for vaccinating eligible populations. In 2023, DRHD continues to restore public health programs and services while balancing the need to respond to new waves of COVID-19 and vaccinating additional eligible populations.

### 3. Status of COVID-19 in Durham Region

3.1 The [Durham Region COVID-19 Data Tracker](#) shows the number of COVID-19 cases in Durham Region by age, gender, and whether hospitalized or deceased. This tool also displays the number of cases by reported or episode date, school and childcare absenteeism, the status of outbreaks in institutions, wastewater surveillance, and vaccinations. As of December 31, there were over **1.5 million** clicks on the link to the Data Tracker since its launch on [durham.ca/novelcoronavirus](#). From October 1 to December 31, there were **4,341** clicks on the link to the Data Tracker.

3.2 As of December 31, Durham Region reported **71,504** confirmed COVID-19 cases, with **3,443** cases reported between October 1 and December 31, 2022.

3.3 From October 1 to December 31, results from Durham's COVID-19 wastewater surveillance showed that viral signals for SARS-CoV-2 continued to be high, indicating that COVID-19 is still prevalent in the community.

3.4 For hospitalizations, Durham Region's seven-day average ranged between **three** to **eighteen** between October 1 and December 31, 2022.

3.5 By December 31, 2022, Ontario remained in wave seven of the COVID-19 pandemic, driven by the Omicron variant. Waves one to seven are summarized below.

- a. The first wave began on February 26, 2020 and ended on August 31, 2020. There were three noticeable phases: growth, flattening and recovery.
- b. The second wave occurred from September 1, 2020 to February 28, 2021, peaked in January 2021, then flattened over the course of January into February.
- c. The third wave began on March 1, 2021, peaked mid-April, and ended July 31, 2021.
- d. The fourth wave began on August 1, 2021 and daily case counts remained steady throughout the fall, then concluded on December 14, 2021.
- e. The fifth wave began on December 15, 2021 and ended on February 28, 2022. This wave was driven by the emergence of the Omicron variant. The

fifth wave resulted in the highest daily case counts reported of all COVID-19 waves so far.

- f. The sixth wave began on March 1, 2022, peaked between the second half of April, then trended downwards starting in early May, and concluded on June 18, 2022. This wave was driven by the Omicron BA.2 sub-variant.
- g. The seventh wave began on June 16, 2022, and was ongoing on December 31, 2022, although case numbers were steady.

#### 4. Status of COVID-19 Vaccines in Durham

- 4.1 As of December 31, 2022, **over 1.6 million** doses of COVID-19 vaccines were administered in Durham Region. Durham's two-dose vaccination rate was approximately **80 per cent** for the entire eligible population (i.e., six months plus), **nearly half** of the population aged five and older received a booster, and **16.5 per cent** of the population aged five and older received a bivalent booster.
- 4.2 Most vaccines administered in Durham Region between October 1 and December 31 were given at pharmacies (**46 per cent**), or community and hospital clinics (**42 per cent**). Other channels for administering vaccines in Durham included pop-up clinics, primary care clinics, mobile clinics, provincial clinics, and workplace clinics.
- 4.3 Eligibility for COVID-19 vaccines expanded over time. At the time of writing this report, individuals six months and older are eligible for the primary series of COVID-19 vaccines, and people aged five and older are eligible for bivalent boosters. Detailed information on vaccine eligibility is available online at [durham.ca/covidvaccines](https://durham.ca/covidvaccines).

#### 5. COVID-19 Response

- 5.1 As one of DRHD's critical public health functions under the [Ontario Public Health Standards: Requirements for Programs, Services, and Accountability](#) (OPHS), the Health Department 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.
  - 5.2 COVID-19 response activities include case management and contact tracing; communications; inspections and investigations; issuing instructions and orders; surveillance; and testing support. A snapshot of some of DRHD's response activities is provided in the [#PublicHealthProtects Infographic](#) which is updated every three months and available on [durham.ca/novelcoronavirus](https://durham.ca/novelcoronavirus).
- a. **Communications**
    - DRHD is responsible for communicating medical advice and guidance to local partners, Regional partners and the public. Staff must ensure that information is provided in a timely, accurate and accessible manner.

- Communications occur through numerous platforms including phone interactions with residents and community partners, responses to media requests, public appearances through local media outlets, participation in community events, participation on local planning tables, social media and online at durham.ca.
- A dedicated [COVID-19](#) webpage on durham.ca was established early in the pandemic to provide important and timely information to community partners and residents. The webpage is continually updated as DRHD receives new information.
- The webpage includes: information on case status in Durham Region; a page on [COVID-19 vaccines](#); [COVID-19 Case and Contact Information Hub](#); [COVID-19 Guidance and Advice for Businesses and Organizations](#); [COVID-19 testing](#) information; information about [Masks](#); facts and frequently asked questions; information for health care professionals; local outbreak information; and resources (e.g., mental health resources).
- DRHD also manages an online vaccine booking system, which is accessible by visiting [durhamvaccinebooking.ca](#). From October 1 to December 31, there have been **11,752** clicks on the booking website.
- Durham Health Connection Line (DHCL) continues to respond to COVID-19 and vaccine inquiries from the public and local partners. From October 1 to December 31, 2022, there have been **1,229** COVID-19 phone and email interactions with residents and community partners.

**b. Instructions and Orders**

- The Commissioner & Medical Officer of Health (C&MOH) and Associate Medical Officer of Health (AMOH) continue to provide medical advice, guidance, and oversight throughout the COVID-19 pandemic. 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 to mitigate local risks. The C&MOH and AMOH are also DRHD's COVID-19 media spokespersons.
- The C&MOH and AMOH have issued various instructions and class orders to address health risks presented by COVID-19 throughout the pandemic.
- Orders issued in 2021 are outlined in Council Information Packages from July 30, 2021 ([#2021-INFO-81](#)), April 30, 2021 ([#2021-INFO-48](#)), October 29, 2021 ([#2021-INFO-112](#)) and February 4, 2022 ([#2022-INFO-7](#)).
- On February 4, 2022, DRHD's Section 22 Class Order for workplaces, dated Nov. 23, 2020, and revised Jan. 13, 2022, was revoked to align with provincial legislation.

**c. Outbreak Management**

- DRHD has coordinated outbreak management support to institutions, including childcare centres, schools, and post-secondary institutions. Staff members also supported congregate living and workplace settings experiencing outbreaks. Supports involved implementing outbreak control

measures including following Chief Medical Officer of Health directives, ensuring appropriate use of personal protective equipment (PPE), increasing environmental sanitation, cleaning, and disinfection, and advocating for hand hygiene among residents and staff. Staff members also maintained daily contact with institutions experiencing outbreaks to provide support as needed.

- From October 1 to December 31, Public Health Inspectors (PHIs) managed **97** COVID-19 suspected or confirmed outbreaks in institutional settings (**20** hospitals, **37** long-term care homes, **40** retirement homes), and **15** in congregate living settings (**13** group homes, and **two** shelters). Please note that due to changes in provincial guidelines, as of January 6, 2022, outbreaks are not declared in childcare and school settings and as of January 30, 2022, outbreaks are not declared in workplaces.

#### d. **Surveillance**

- The Health Analytics & Research Team (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, and engagement with Public Health Ontario (PHO) and the Ministry of Health regarding COVID-19 surveillance, data analysis, and reporting.
- HART continues to monitor the spread of COVID-19 across Durham Region and identify opportunities to enhance the information available to community partners and residents.
- The [Durham Region COVID-19 Data Tracker](#) provides details on the status of COVID-19, wastewater surveillance, vaccinations, and school/childcare absenteeism across Durham Region. It is updated weekly on Wednesdays. The [Weekly Snapshot](#) shows key public health indicators for Durham Region related to COVID-19 vaccination, virus spread and severity by week including weekly incidence rate of COVID-19 per 100,000, laboratory testing and percent positivity, outbreaks in institutions and congregate living settings, hospitalizations, and deaths.
- Updates were made to the Data Tracker's Vaccinations tab on August 10, 2022 to include coverage rates for the second booster and to update age groups to coincide with vaccine eligibility.
- In December 2022, HART launched a survey to evaluate the COVID-19 Data Tracker. Input from community partners and the public will help to improve ways DRHD's communicates information about public health issues.

#### e. **Testing Support**

- In collaboration with provincial and local partners, DRHD supported the establishment of local testing sites and related policies and procedures. Provincial direction regarding testing has experienced numerous changes



over time. Testing guidance is updated as needed on the [COVID-19 Testing](#) page on [durham.ca](#). DRHD has collaborated with local partners to update procedures and resources as appropriate. Most importantly, on December 30, the Ontario government announced new [testing guidance](#), which limited public access to COVID-19 testing centres. This decision was made in response to the rapidly spreading and highly transmissible Omicron variant.

- Region of Durham Paramedic Services (RDPS) provided essential support to testing activities by collecting nasal swabs in targeted populations, and screening clients for COVID-19.
- Between January 1 and December 31, 2022, RDPS collected **220** nasal swabs in congregate living settings and screened **63,692** clients for COVID-19.

## 6. COVID-19 Vaccine Distribution and Administration

- 6.1 Currently, six COVID-19 vaccines are authorized for use in Canada: AstraZeneca/COVISHIELD (Vaxzevria), Janssen (Johnson & Johnson), Medicago (Covifenz), Moderna (Spikevax), Novavax (Nuvaxovid), and Pfizer-BioNTech (Comirnaty). Information about the approvals and use of these vaccines is detailed in the April 29 Information Report ([#2022-INFO-36](#)), under section 6.1.
- 6.2 The Province led the distribution of the primary series of COVID-19 vaccines in Ontario through a [three-phase plan](#) and is now leading the distribution of boosters. Locally, the COVID-19 Vaccine Planning Steering Table provides oversight and advice on the vaccine roll-out in Durham Region. The Steering Table has representation from DRHD, Lakeridge Health, local primary care physicians, and the Durham Emergency Management Office.
- 6.3 Up to date information about groups eligible to receive COVID-19 vaccines and boosters is available at [durham.ca/covidvaccines](#).
- 6.4 As of December 31, **over 1.1 million** doses of COVID-19 vaccines were administered at DRHD and Lakeridge Health community and hospital clinics, **379,065** doses were administered at pharmacies, **61,697** doses were administered in primary care settings, **55,645** doses were administered at hotspot pop-up clinics, **41,279** doses were administered at DRHD mobile clinics, **18,462** doses were administered at provincial clinics, and **1,639** doses were administered at workplace clinics.
- 6.5 Between October 1 to December 31, RDPS' mobile teams administered **26** COVID-19 vaccines to homebound clients through the Community Paramedicine – High Intensity Support at Home Program.

## 7. Restoration and Regular Programs and Services

- 7.1 DRHD developed an adaptive restoration plan to resume program activities during the COVID-19 pandemic. From October 1 to December 31, DRHD responded to

the ongoing COVID-19 pandemic, and continued to restore regular programs and services. Programs and services that operated between October 1 and December 31 are described below.

a. **HART**

- Released **two** new interactive health surveillance dashboards: the Population Data Tracker and the Cancer Data Tracker, available online at [durham.ca/population](https://durham.ca/population) and [durham.ca/cancerstats](https://durham.ca/cancerstats).
- Provided an update on local cancer statistics and an overview of the new Cancer Data Tracker to the Durham Nuclear Health Committee.
- Released **six** infographics for diseases of public health significance, available online at [durham.ca/healthstats](https://durham.ca/healthstats).
- In collaboration with Population Health Division, launched a new client experience survey on November 13 to gather feedback from the public about their experience with DRHD's programs and services, available online at [durham.ca/healthsurvey](https://durham.ca/healthsurvey).
- Launched **two** online public surveys to evaluate two of DRHD's main communication tools during the COVID-19 pandemic (i.e., the [COVID-19 Data Tracker](#), and [messages from the Medical Officer of Health](#)).
- Launched **one** online survey of community partners and DRHD staff to evaluate the Durham Region COVID-19 Data Tracker, and messages from the Medical Officer of Health.
- Published **one** article titled "Modeling COVID-19 Transmission using IDSIM, an Epidemiological-Modeling Desktop App with Multi-Level Immunization Capabilities" in collaboration with Ontario Tech University.
- Completed **one** evaluation report regarding results from the Healthy Babies Healthy Children Client Feedback Survey.

b. **Health Protection**

- PHIs conducted **108** compliance inspections of international agricultural worker accommodations.
- PHIs conducted **798** compliance inspections of food premises and **191** re-inspections.
- PHIs inspected **27** small drinking water systems to ensure safe and sanitary conditions, resulting in issuing **two** warning notices.
- Staff processed **45** building permit applications and **seven** applications for additions.
- PHIs conducted **287** rabies investigations and **zero** of the **12** animals submitted to the Canadian Food Inspection Agency lab in Ottawa tested positive for rabies.
- **Twenty-nine** individuals received rabies post-exposure prophylaxes.

c. **Healthy Families**

- PHNs provided breastfeeding support to postpartum clients through **246** clinic consultations (in person, virtual or telephone) and **141** home visits.
- Healthy Babies Healthy Children PHNs and Family Visitors provided **895** home visits (in person, virtual or telephone) to families to develop and address goals related to healthy child development and effective parenting.
- Infant and Child Development staff completed **849** visits with families whose children have a developmental diagnosis or who are at risk of a developmental delay.
- PHNs facilitated **11** health education sessions for parents on strategies to support growth and development milestones related to emotional maturity and social competence for school readiness.
- PHNs completed **four SMILE** prenatal classes for young expectant mothers on topics including pregnancy, labour and delivery, and early parenthood.
- PHNs facilitated **six** Food 4 Thought nutrition sessions to at-risk young expectant mothers on topics to increase the number of babies born at a healthy weight, improve the health of both infant and mother, and support breastfeeding.

d. **Healthy Living**

- From October 1 to December 31, the Oral Health Division (OHD) had **1,335** appointments for care, seeing **1,169** unique patients including **1,060** seniors, and **109** children and youth.
- From October 1 to December 31, PHNs continued to collaborate with Opioid Task Force members to address the [opioid response plan](#) areas of prevention, treatment, harm reduction and enforcement.
- From October 1 to December 31, **1,337** Naloxone kits (**1,184** kits and **153** refills) were distributed to eligible organizations to give to their clients for preventing opioid related overdose deaths.

e. **Infectious Diseases**

- From October 1 to December 31, Population Health Division staff:
  - (a) Investigated **231** adverse events following immunization.
  - (b) Completed **1,374** vaccine orders, **eight** vaccine fridge inspections, and **21** cold chain investigations.
  - (c) Answered **974** immunization calls from Durham Region residents.
  - (d) Administered **28,064** vaccine doses to students in Grade 7 to 12 at immunization clinics.
  - (e) Distributed **5,638** *Immunization of Schools Pupils and the Child Care and Early Years Act, 2014* notices.
  - (f) Managed **839** infectious disease cases and followed up with **139** contacts. Infectious diseases included tuberculosis, latent tuberculosis infection, communicable diseases, and sexually transmitted infections.

(g) Completed **2,962** virtual and in-person appointments at the Oshawa and Pickering Sexual Health Clinics.

f. **Paramedic Services**

- Between October 1 and December 31, RDPS:
  - (a) Responded to **37,685** emergency calls.
  - (b) Completed COVID-19 screenings for each patient and **2,618** screened positive.
  - (c) Spent **9,766** hours of offload delay. The average time to arrive at hospitals to offload patients was **70** minutes and during this time, the **90th** percentile ambulance offload time was **190** minutes.

g. **Privacy & Information Security**

- The *Municipal Freedom of Information and Protection of Privacy Act* provides individuals the right to request access to municipal government information and records containing their own personal information. The Privacy & Information Security Team (P&IST) received and responded to **four** access requests between October 1 and December 31.
- The *Personal Health Information Protection Act, 2004* (PHIPA) provides individuals with a right to access their personal health information held by DRHD. Between October 1 and December 31, P&IST received and responded to **five** requests from clients to access their record of personal health information.
- P&IST also responded to **one** request from a client to access their personal health information related to COVID-19.
- Under PHIPA, DRHD must take steps that are reasonable in the circumstances to ensure personal health information is protected against theft, loss, and unauthorized use and disclosure. A privacy breach occurs when there is a contravention of this provision. Between October 1 and December 31, the privacy team investigated and closed **two** privacy incidents.
- Between October 1 and December 31, DRHD provided **two** staff members with access to a Health Information System that provides real-time access to digital health records from health care providers across Ontario.

8. **Conclusion**

- 8.1 Starting in February 2022, Ontario began gradually lifting public health measures. Although not mandatory, Ontario public health officials continue to recommend that those who feel ill should isolate while symptomatic and return to work or school 24 hours after their symptoms have improved.
- 8.2 Lifting remaining public health measures does not mean the risk of COVID-19 has been eliminated; it indicates that the province is ready to move to a longer-term approach to living with and managing COVID-19.

- 8.3 DRHD staff members are working to incorporate COVID-19 management and response as part of regular Infectious Diseases program activities and staff remains engaged in vaccine planning and administration.
- 8.4 DRHD remains flexible and continuously evaluates resources to ensure it has capacity to respond to the pandemic while offering regular programs when feasible.
- 8.5 Plans for the restoration of regular services through 2023 will be adjusted if needed, based on provincial requirements and the status of the COVID-19 pandemic, including requirements to vaccinate eligible populations.
- 8.6 DRHD continues to be committed to keeping the public and local partners informed on the status of the COVID-19 pandemic and COVID-19 vaccines.

Respectfully submitted,

Original signed by

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

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2564



# The Regional Municipality of Durham Information Report

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From: Commissioner of Planning and Economic Development  
Report: [#2023-INFO-07](#)  
Date: January 27, 2023

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**Subject:**

Durham Region Charity Bike Ride

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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 members of Regional Council that staff from the Regional Planning Division's Transportation Planning Section and the Lakeridge Health Foundation will be hosting a charity bike ride event for the public on May 28, 2023.
- 1.2 The charity bike ride will be a significant one-day regional event to promote physical activity, active transportation and support regional health care.

**2. Background**

- 2.1 Lakeridge Health Foundation is the primary lead for the planning and hosting of the event which will raise funds and awareness for the Oshawa and Whitby Hospital sites of Lakeridge Health (see Attachment #1 for more information).

- 2.2 Preliminary routes have been drafted for the ride (see Attachment #2). The intermediate route would be approximately 27 km in length and would use a variety of cycling facilities within the Town of Whitby. The advanced route would be 80 km in length, on various cycling facilities in Whitby, Scugog, and Oshawa. The ride would start and end at Durham Regional Headquarters.
- 2.3 Participants will be able to register for the ride as individuals or as a group. Those not able to take part in the ride may still contribute through donations and attend activities planned on site, after the ride concludes.
- 2.4 A celebratory event will take place at Regional Headquarters after riders return which will include prizes and medals, remarks from champions and individuals in the community. Other activities such as complimentary bike tune-ups and education sessions will also take place. Food and beverages will be offered through various food truck vendors. Community groups will be on-site to promote local bike-friendly businesses and programs. The south portion of the parking area at Headquarters will be reserved for this portion of the event (see Attachment #3).
- 2.5 Hosting a charity ride at the end of May is an excellent opportunity to promote other Regional active transportation initiatives, like Bike Month, which takes place annually between June 1 to 30.

### **3. Work Completed to Date and Next Steps**

- 3.1 A project team led by Lakeridge Health Foundation and assisted by staff from the Transportation Planning Section has been established to determine core objectives, resources and partners for the event.
- 3.2 A Charity Ride Planning Committee, including representatives from Lakeridge Health Foundation, Durham Regional Police Services, Public Works (Traffic), Planning and Economic Development (Transportation), Risk Management & Insurance, Corporate Services (Legal Services), City of Oshawa, Township of Scugog, Town of Whitby, Durham's Active Transportation Committee (DATC), and bicycle shop owners and cycling advocates has been assembled. As more route and logistical details are confirmed, staff will also be engaging with public health and emergency services.
- 3.3 A website and fundraising platform will be administered by Lakeridge Health Foundation to provide event details, registration and sign up and fundraising information.

- 3.4 A traffic management plan will be prepared for the event. Notices will be circulated to residents and nearby businesses to inform them of any closures to help limit any disruptions.
- 3.5 The Committee will continue to meet regularly up until the event in May and a summary report will be provided after the event, as part of Bike Month.

#### **4. Previous Reports and Decisions**

- 4.1 No previous reports or decisions have been made on this topic to date.

#### **5. Relationship to Strategic Plan**

- 5.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
  - a. Environmental Sustainability: Cycling is a sustainable travel solution, and a charity bike ride promotes the use and safe operation of bicycles.
  - b. Community Vitality: Fundraising will contribute to healthcare research and services to support the health of residents of our community.
  - c. Economic Prosperity: The charity ride and celebratory event supports partnerships with local services and businesses.
  - d. Service Excellence: The charity bike ride can help optimize resources and support quality services valued by the community.

#### **6. Conclusion**

- 6.1 The charity bike ride supports local cancer research and mental health and will help showcase the progress that the Region and its area municipalities are making to support active transportation, while strengthening partnerships between Lakeridge Health, the Region, Area Municipalities, local cycling groups and the public.
- 6.2 The charity bike ride also helps establish the region as a premier cycling destination and a leader in coordinating and delivering community-based cycling initiatives and programs.



**7. Attachments**

Attachment #1: Lakeridge Health Foundation Backgrounder

Attachment #2: Proposed Routes – Charity Ride

Attachment #3: Draft Event Site Plan for Day-Of Event

Respectfully submitted,

Original signed by

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Brian Bridgeman, MCIP, RPP  
Commissioner of Planning and  
Economic Development

# Attachment 1: Lakeridge Health Backgrounder

## About Lakeridge Health Foundation



Lakeridge Health Foundation is dedicated to helping advance health care in Durham Region by raising funds and awareness for both the Oshawa and Whitby sites of Lakeridge Health, one of the largest health systems in Ontario.

The Foundation supports Lakeridge Health through generous donations from individuals and organizations, signature events, community partnerships and third-party initiatives.

Funds raised are granted to our Hospital sites for the upgrade and replacement of equipment, capital projects and new hospital spaces, investing in innovative research and funding educational opportunities.

In 2017, Lakeridge Health Foundation received distinguished accreditation from the Imagine Canada Standards Program.

For more information, visit [www.lhfoundation.ca](http://www.lhfoundation.ca).

Thanks to the generosity of our donors, the following equipment and capital upgrades have been funded in recent years:

### Interventional Radiology



This area is now 2x larger and has innovative new 3D imaging equipment.

### Smart IV Pumps



200 Smart IV Pumps were replaced across both Hospital sites to better serve patients and staff.

### Operating Rooms



Two operating rooms were renovated to house new minimally-invasive surgical equipment.

### Fetal Monitor



A new fetal monitor was funded to help care for our tiniest patients and expecting mothers.

Charitable Registration Number: 11924 9126 RR0001



The Standards Program Trustmark is a mark of Imagine Canada used under licence by Lakeridge Health Foundation

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**This is our  
cancer.**

**This is our cause.**



**Lakeridge  
Health  
Foundation**

**We're raising \$20 million to advance cancer care, close to home.**

**1 in 2 of us will be diagnosed with cancer in our lifetime.** This disease affects us all. It's our biggest challenge, and that should have an effect on you.



Thanks to donor support, Durham Region is home to one of the top cancer centres in Ontario. The R.S. McLaughlin Durham Regional Cancer Centre in Oshawa, in partnership with departments

throughout our Hospitals, provides exceptional cancer care to over 18,000 families every year.

Through your generosity, *Our Cancer Campaign* will invest \$20 million in every facet of the cancer journey and ensure our community has access to the very best cancer care and expertise in the province.

→ Your donation will fund new laboratory and diagnostic tools to screen and prevent cancer earlier than ever before.

→ Your investment will bring in new minimally-invasive surgical tools that allow for less time in the Hospital and fewer complications.

→ Your commitment will further life-saving research in new cancer medications and improve the patient experience.



Learn more about Lakeridge Health Foundation's *Our Cancer Campaign* and how you can help at [www.OurCancer.ca](http://www.OurCancer.ca).

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**7,000 new cancer patients came to us  
for help last year**

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**“When my mom was diagnosed with cancer, it consumed her. It consumed all of our lives. It changed our family. It was our cancer.”**

Sharisa Mohamed's mom, Miriam, was diagnosed with cancer in 2018 and has been treated at Lakeridge Health, a short drive from her home.



## Proposed route (intermediate)

27  
km

Better suited to intermediate riders

2  
hours

Shorter duration of a ride to support those comfortable cycling at a more leisurely pace

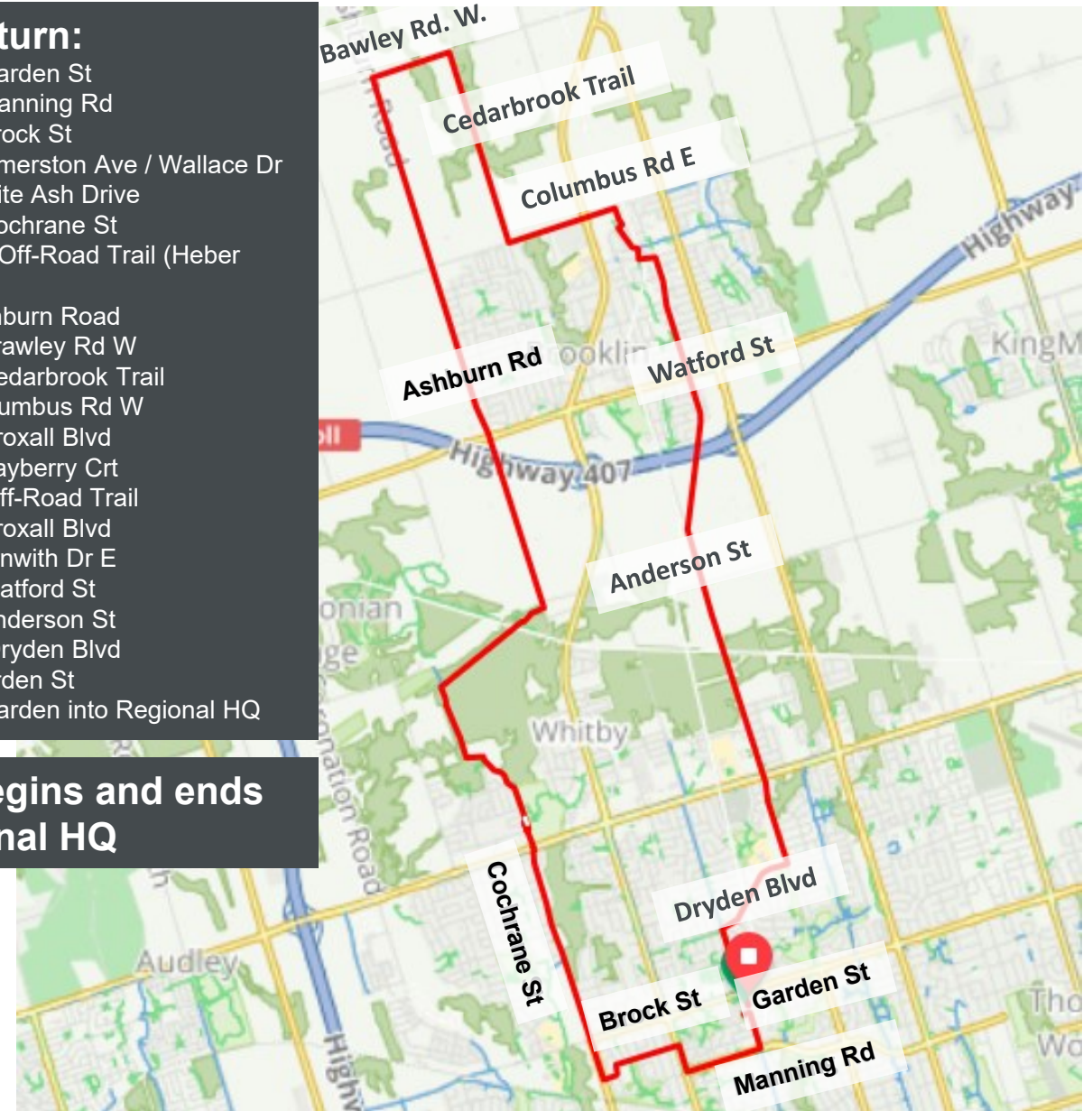
### Mix of cycling facilities

- Mix of high and low road volume and facilities with a range in level of separation (paved shoulders; signed routes bike lanes, etc.)

### Turn-by-turn:

- Right on Garden St
- Right on Manning Rd
- Right on Brock St
- Left on Palmerston Ave / Wallace Dr
- Left on White Ash Drive
- Right on Cochrane St
- Right onto Off-Road Trail (Heber Down)
- Left on Ashburn Road
- Right on Brawley Rd W
- Right on Cedarbrook Trail
- Left on Columbus Rd W
- Right on Croxall Blvd
- Right on Bayberry Crt
- Left onto Off-Road Trail
- Right on Croxall Blvd
- Left on Carnwith Dr E
- Right on Watford St
- Right on Anderson St
- Right on Dryden Blvd
- Left on Garden St
- Right on Garden into Regional HQ

Route begins and ends at Regional HQ



# Proposed route (advanced)

83.8  
km

Better suited to experienced riders

3  
hours

Longer duration of a ride for those looking for a challenge and scenic route

## Mix of cycling facilities

- Mix of high and low road volume and facilities with a range in level of separation (paved shoulders; signed routes bike lanes, etc.)

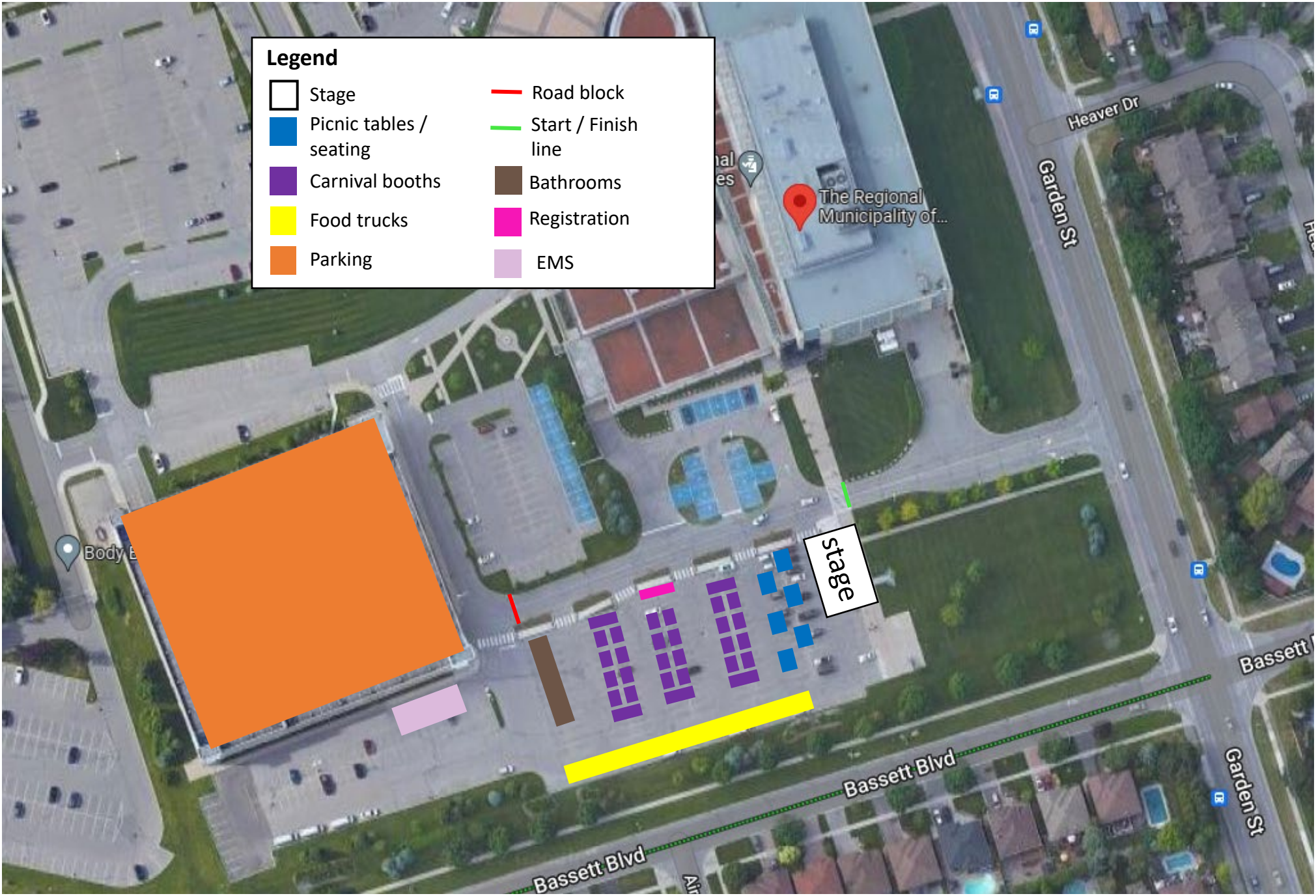
## Turn-by-turn:

- Right on Garden St
- Right on Manning Rd
- Right on Starr Avenue
- Right on Centre St
- Left on Palmerston Ave
- Left on White Ash Drive
- Right on Cochrane St
- Right onto Off-Road Trail (Heber Down)
- Left on Ashburn Rd
- Left on Townline Rd
- Right on Ashburn Rd
- Left on Marsh Hill Rd
- Right on RR 21
- Right on Scugog Line 6
- Left on Queen St
- Right on Water St
- Left on Scugog Street / Hwy 7A
- Right on Cartwright West
- Left on Church St
- Right on Old Scugog Rd
- Right on Roy Carter St
- Left on Darlington St
- Right on Concession Rd 10
- Right on Raglan Rd E
- Left on Ritson Rd N
- Right on Columbus Rd E
- Right on Croxall Blvd
- Left on Carnwith Dr
- Right on Watford St
- Right on Anderson St
- Right on Dryden Blvd
- Left on Garden St
- Right on Garden into HQ





Attachment #3:  
Draft Event  
Site Plan for  
Day-Of Event



If this information is required in an accessible format, please contact 1-800-372-1102 ext. 3111



# The Regional Municipality of Durham Information Report

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From: Commissioner & Medical Officer of Health  
Report: [#2023-INFO-08](#)  
Date: January 27, 2023

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**Subject:**

Durham Region Health Department Accreditation

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**Recommendation:**

Receive for information

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**Report:**

**1. Purpose**

1.1 To provide an update on Durham Region Health Department's (DRHD's) accreditation status.

**2. Background**

2.1 Accreditation is an ongoing process of assessing health care and social services organizations against national and international standards of excellence to identify areas for improvement to their services.

2.2 Since 2017, DRHD has been accredited by [Accreditation Canada](#). Accreditation Canada is an independent, not-for-profit, Canadian organization that has been accrediting health care organizations for more than 55 years. Through its Qmentum standards, Accreditation Canada supports health care organizations to improve quality, safety and efficiency.

2.3 DRHD's accreditation status requires review every four years, however, accreditation review was delayed until 2022 due to the COVID-19 pandemic.

2.4 DRHD staff began preparations for accreditation in early 2022 and established teams to review compliance with current standards and required organizational practices applicable to public health and paramedic services.

- 2.5 As part of the accreditation process, staff was asked to complete the Worklife Pulse Tool and Client Safety Tool surveys. Results were used by Accreditation Canada surveyors to inform their assessment.
- 2.6 From December 5 to December 8, 2022, Accreditation Canada surveyors visited DRHD sites to evaluate compliance against standards.
- 2.7 On-site evaluations involved: observing staff providing services; interviewing staff, clients, families and others; reviewing documents and files; and recording results.

### **3. Accreditation Results**

- 3.1 On January 10, 2023, DRHD was informed that it is Accredited and has met the requirements of the Qmentum accreditation program.
- 3.2 An Executive Summary of the Accreditation Report (see Attachment #1) highlights some key achievements, strengths and opportunities for improvement. Of the approximate 650 applicable standards, only six were unmet.
- 3.3 DRHD was commended for its engagement initiatives, partnerships, knowledge of communities and experienced staff. Accreditation Canada surveyors also received positive comments from clients about DRHD's programs and processes.
- 3.4 A detailed Accreditation Report was provided to DRHD which will help to focus ongoing quality improvement efforts.

### **4. Conclusion**

- 4.1 The accreditation process through Accreditation Canada supports continuous quality improvement efforts and helps to ensure that DRHD is providing the highest quality of services to Durham Region residents. The process also helps to ensure that DRHD is meeting organizational standards and requirements for public health and paramedic services as mandated by the Ministry of Health.
- 4.2 DRHD is in the process of reviewing the Accreditation Report and will identify specific actions and related timelines for service improvement in response to Accreditation Canada recommendations. Outstanding issues will be incorporated into DRHD's quality improvement plans.

### **5. Attachments**

Attachment #1: Executive Summary - Durham Region Health Department Accreditation Report



Respectfully submitted,

Original signed by

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



## Durham Region Health Department

### Accredited

**Durham Region Health Department** has met the requirements of the Qmentum accreditation program and has shown a commitment to quality improvement.

**Durham Region Health Department** is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **Durham Region Health Department** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### Durham Region Health Department (2022)

Durham Region Health Department promotes and protects the health of Durham Region residents by providing a wide range of health enhancing programs and emergency medical services that address the growing and changing needs of our community.

Our goals are to help the people of Durham Region lead healthy, dynamic and satisfying lives by enhancing the environment where we live, work and play, and to contribute to healthy community planning and effective policy-making.

We are mandated by applicable provincial laws (e.g., Ambulance Act, Health Protection and Promotion Act), standards (e.g., Ontario Public Health Standards and Protocols) and guidelines.

### Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) [www.isqua.org](http://www.isqua.org), a tangible demonstration that our programs meet international standards.

Find out more about what we do at [www.accreditation.ca](http://www.accreditation.ca).

## Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

### On-site survey dates

December 4, 2022 to December 8, 2022

### Locations surveyed

- **7** locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed **Accredited** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

### Standards used in the assessment

- **5 sets of standards** were used in the assessment.

## Summary of surveyor team observations

*These surveyor observations appear in both the Executive Summary and the Accreditation Report.*

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

\*\*\*

A member of council is appointed the representative to link Health Department with Council. This structure has been effective since municipality operates back office tasks and budget preparation and management.

The Department has conducted multiple engagement initiatives to ensure partnerships within various subcommunities within the Region. This has been extremely beneficial as multiple Community Partnerships and community relationships have been developed as a result of this . The Health Department has strong knowledge base of the many communities and their needs. The demographic knowledge base has allowed the Health Department to use this information to better plan for programs and community needs both current and future.

The Leadership is experienced in Public Health and in Emergency Services which produced an excellent combination to provide new and varied programs to the Region during Covid- Excellent initiatives!!!!

The Public Health Division had many long term employees who identified they were extremely happy working for the Region and felt valued by the employer. The staff identified there was opportunity for advancement with in the Division , as well as opportunity for continuing education of their choice and this was paid for by the Region. Emergency Services identified a gap in visibility of EMS leadership. The Worklife pulse survey identified an overall lack of recognition in the EMS ranks. EMS tracer activities confirmed the survey results to be accurate. The Division has many initiatives in place to continue to supplement the employee base through linkages with colleges and universities.

Care and Service has been delivered by EMS and Public Health through out the length of the pandemic. The pandemic has produced opportunities for both EMS and Public Health to assess their existing care delivery and to produce alternative options to the programs to meet Covid and IPAC needs, and as well develop new and alternative program options.









We had the opportunity to interview clients from several Public health program areas and all voiced positive comments regarding public health programs and processes. Unfortunately the team was unable to illicit current information regarding EMS client satisfaction from consumers but partners such as Lakeridge Health all had extremely positive comments regarding the satisfaction they had regarding EMS service and partnership.

## Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

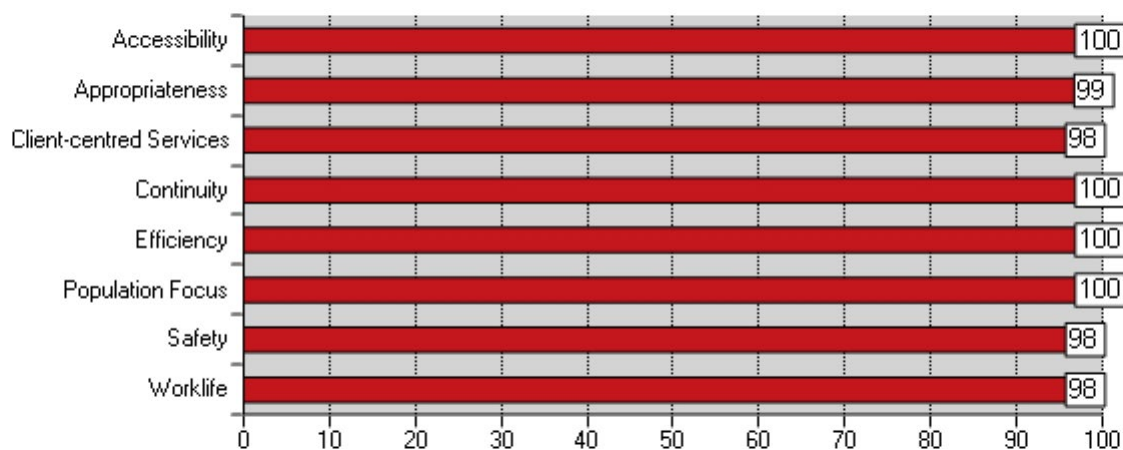
The quality dimensions are:

	<b>Accessibility:</b>	Give me timely and equitable services
	<b>Appropriateness:</b>	Do the right thing to achieve the best results
	<b>Client-centred Services:</b>	Partner with me and my family in our care
	<b>Continuity:</b>	Coordinate my care across the continuum
	<b>Efficiency:</b>	Make the best use of resources
	<b>Population Focus:</b>	Work with my community to anticipate and meet our needs
	<b>Safety:</b>	Keep me safe
	<b>Worklife:</b>	Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service “looks like.” It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

**Quality Dimensions: Percentage of criteria met**



# Overview: Standards results

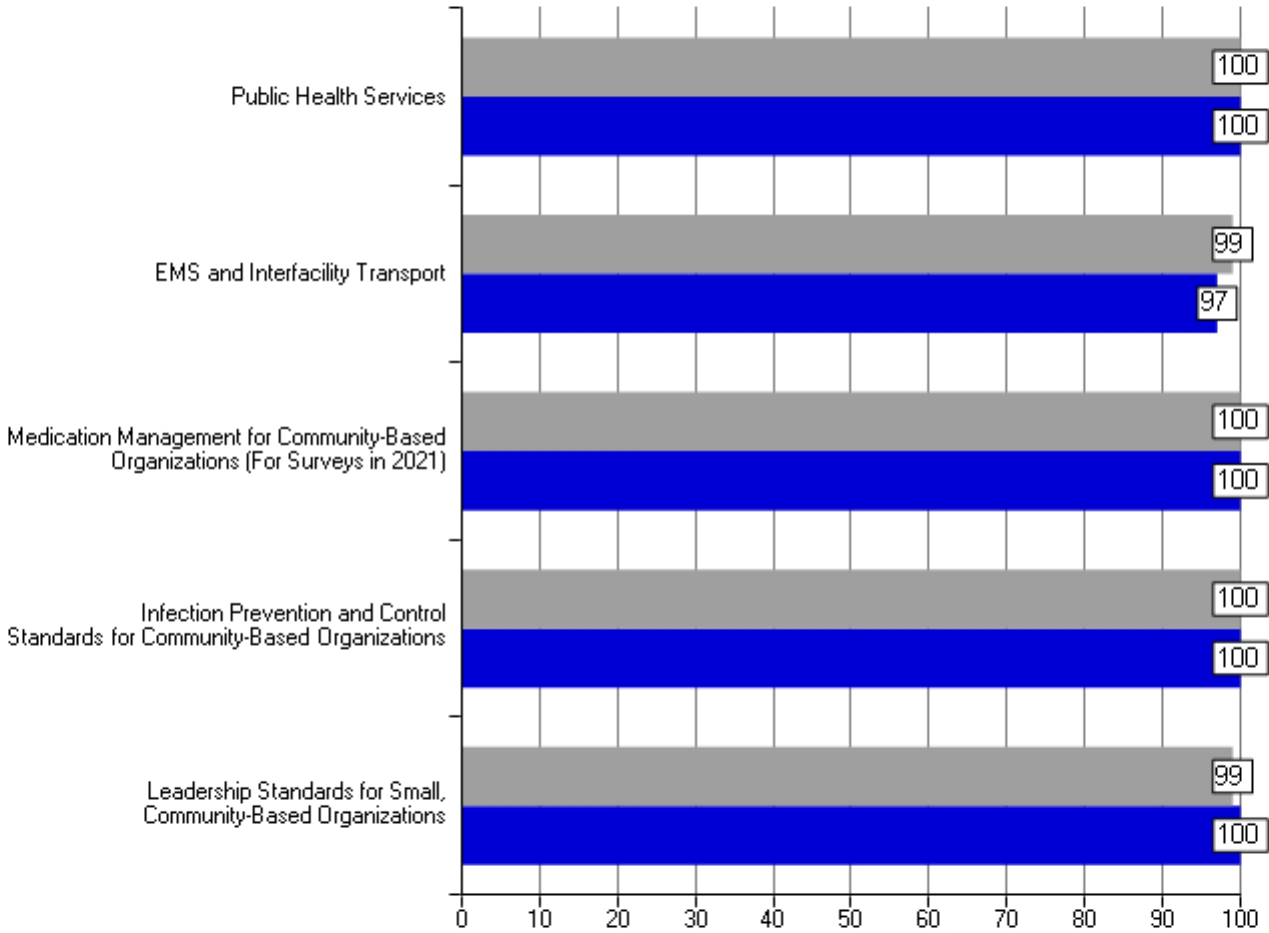
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

**Standards: Percentage of criteria met**

■ High priority criteria met    ■ Total criteria met



## Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

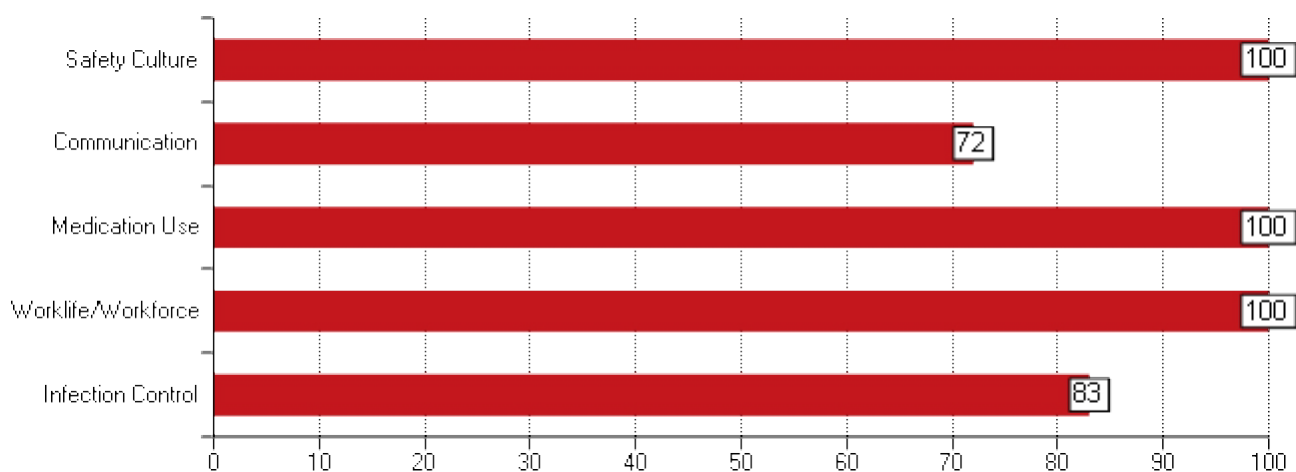
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPs are categorized into six safety areas, each with its own goal:

- **Safety culture:** Create a culture of safety within the organization
- **Communication:** Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- **Medication use:** Ensure the safe use of high-risk medications
- **Worklife/workforce:** Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control:** Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- **Risk assessment:** Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

**ROP Goal Areas: Percentage of tests for compliance met**





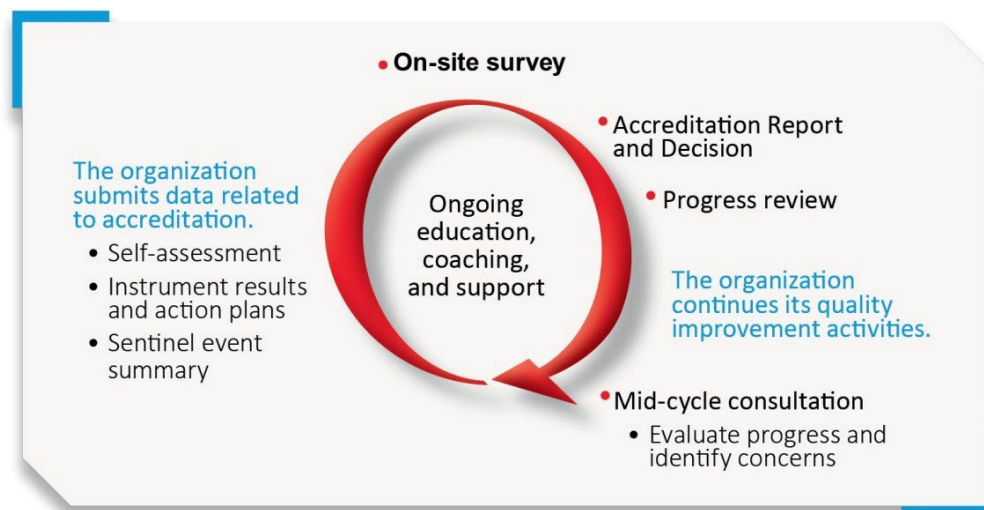
## The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

### Qmentum: A four-year cycle of quality improvement



As **Durham Region Health Department** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

## Appendix A: Locations surveyed

- 1 Breast Feeding Clinic
- 2 Health Protection Division
- 3 Oral Health Division
- 4 Oshawa Sexual Health Clinic
- 5 Paramedic Services station - Ajax (04)
- 6 Paramedic Services station - Whitby (00)
- 7 Regional Headquarters - 2nd Floor

## Appendix B

### Required Organizational Practices

#### Safety Culture

- Patient safety incident disclosure
  - Patient safety incident management
  - Patient safety quarterly reports
- 

#### Communication

- Information transfer at care transitions
  - The “Do Not Use” list of abbreviations
- 

#### Medication Use

- Concentrated Electrolytes
  - High-Alert Medications
  - Narcotics Safety
- 

#### Worklife/Workforce

- Patient safety plan
  - Patient safety: education and training
  - Preventive Maintenance Program
  - Workplace Violence Prevention
- 

#### Infection Control

- Hand-Hygiene Compliance
  - Hand-Hygiene Education and Training
  - Reprocessing
-

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: [#2023-INFO-09](#)  
Date: January 27, 2023

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**Subject:**

Implementation of the Federal Single-use Plastics Prohibition Regulation

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**Recommendation:**

Receive for information

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**Report:**

**1. Purpose**

1.1 This report provides an update on the implementation of the Federal Single-use Plastics Prohibition Regulation and implications for Durham Region waste management programs.

**2. Background**

2.1 The Government of Canada has been working to reduce plastic waste since 2018 and the signing of the [Ocean Plastics Charter](#), pledging to move toward a more sustainable approach to managing plastics.

2.2 On June 22, 2022, Canada published the [Single-use Plastics Prohibition Regulations](#) (Regulation) under the Canadian Environmental Protection Act, 1999. The Regulation prohibits the manufacture, sale and use of many non-essential Single-use Plastics (SUP).

2.3 The Regulation addresses six problematic SUP:

- a. Checkout bags
- b. Cutlery

- c. Foodservice waste made from or containing plastics (including expanded or extruded polystyrene, polyvinyl chloride, oxodegradeable plastic or black plastic made with carbon black)
  - d. Ring carriers (used to hold six beverage cans together as one unit)
  - e. Stir sticks
  - f. Straws
- 2.4 The prohibition on manufacture and import for sale of most of the regulated items took effect on December 20, 2022.

### **3. Previous Reports and Decisions**

- 3.1 Report [#2020-INFO-79](#) titled 'Update on Single Use Plastics Policies in the Regional Municipality of Durham' (Region) detailed federal, provincial, Regional and local area municipality actions on SUP.
- 3.2 Report [#2020-INFO-113](#) titled 'Update on the Federal Government's Single-Use Plastics Plan to Achieve Zero Plastic by 2030' provided an update on federal actions and policy implications regarding the reduction or elimination of SUP.
- 3.3 Report [#2022-INFO-66](#) titled "Federal Single-use Plastics Prohibition Regulations" provided an overview of the finalized Federal Single-use Plastics Prohibition Regulations including phase-in dates for regulated items.

### **4. Implications for Durham Region**

- 4.1 The Regulation includes an exemption for single-use plastic flexible straws that bend at the neck and are commonly used for accessibility purposes. The Region's Long-term Care Homes will continue to be able to purchase these straws to distribute to residents despite the ban. Plastic medicine cups are not covered by the Regulation and will continue to be available.
- 4.2 For all other items listed in the regulation, suppliers and retailers will be required to change to non-plastic alternatives. However, plastic versions of the banned items may still be offered to consumers as existing retail stock is used up during 2023. The ban on supply does not take effect until December 2023.
- 4.3 The Region does not currently accept plastic checkout bags, cutlery, straws or stir sticks in the Blue Box. Residents are directed to place these items in the garbage or return to retail for checkout bags. This messaging will not change in 2023 as

businesses provide consumers with a mix of plastic and non-plastic versions of these common single-use items.

- 4.4 Paper checkout bags continue to be accepted in the Blue Box and paper straws are accepted in the Region's Green Bin program. Residents are encouraged to use the Region's [Know Before You Throw](#) tool to confirm the proper management of other single-use items.
- 4.5 As the Region develops its organics management plan there may be opportunities to divert additional non-plastic take-out containers and cutlery out of the waste stream for anaerobic digestion and this option will be investigated.

## 5. Relationship to Strategic Plan

- 5.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
  - a. Environmental Sustainability:
    - Goal 1.2 – Increase waste diversion and resource recovery
    - Goal 1.3 – Protect, preserve and restore the natural environment, including green spaces, waterways, parks, trails and farmlands
    - Goal 1.4 – Demonstrate leadership in sustainability and addressing climate change

## 6. Conclusion

- 6.1 Common single-use plastic items are being phased out of commerce in Canada starting in December 2022 with a ban on manufacturing plastic checkout bags, cutlery, straws, stir sticks, take out containers and ring carriers.
- 6.2 Exemptions for accessibility ensure the continued availability of flexible plastic straws in Long-term Care Homes. However, suppliers will begin providing non-plastic alternatives to other banned single-use plastics that may be used in Long-term Care Homes and other Regional facilities.
- 6.3 The Regional Municipality of Durham's waste management programs will be evaluated to determine if plastic alternatives to cutlery and take out containers can be diverted from the garbage. Messaging to residents to place these items in the garbage will continue while the evaluation of alternatives takes place.

6.4 For additional information, contact: Gioseph Anello. Director Waste Management Services, at 905-668-4113, extension 3445.

Respectfully submitted,

**Original signed by:**

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John Presta, P.Eng., MPA  
Commissioner of Works



# Interoffice Memorandum

**Date:** January 27, 2023

**To:** Health & Social Services Committee

**From:** Dr. Robert Kyle

**Subject:** Health Information Update – January 22, 2023

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Health  
Department

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

*“Service Excellence  
for our Communities*

A stylized blue graphic element resembling a hand or a flame, positioned behind the text.



**UPDATES FOR HEALTH & SOCIAL SERVICES COMMITTEE**  
**January 22, 2023**

**Health Department Media Releases/Publications**

**[tinyurl.com/mr2u5w6u](https://tinyurl.com/mr2u5w6u)**

- Health Department celebrates National Non-Smoking Week January 15 to 21 (Jan 13)

**GOVERNMENT OF CANADA**

**Employment and Social Development Canada**

**[tinyurl.com/4mdhczed](https://tinyurl.com/4mdhczed)**

- Minister Gould announces funding for projects for the social inclusion and well-being of vulnerable children and youth (Jan 18)

**Health Canada**

**[tinyurl.com/yrmcmjf8](https://tinyurl.com/yrmcmjf8)**

- Statement from the Minister of Health and the Minister of Mental Health and Addictions and Associate Minister of Health on National Non-Smoking Week (Jan 16)

**Innovation, Science and Economic Development Canada**

**[tinyurl.com/4nvmsy4m](https://tinyurl.com/4nvmsy4m)**

- Government of Canada announces the recipients of support from INOVIAT's Focus Fund (Jan 18)

**Prime Minister's Office**

**[tinyurl.com/58na44xk](https://tinyurl.com/58na44xk)**

- Declaration of North America (DNA) (Jan 10)

**Public Health Agency of Canada**

**[tinyurl.com/88upvmj](https://tinyurl.com/88upvmj)**

- Statement from the Council of Chief Medical Officers of Health (CCMOH) on Alcohol Consumption (Jan 18)

**GOVERNMENT OF ONTARIO**

**Premier's Office**

**[tinyurl.com/4nrchacd](https://tinyurl.com/4nrchacd)**

- Pharmacists Now Treating Thirteen Common Ailments and Renewing Prescriptions for Most Medications (Jan 11)

**[tinyurl.com/487kvv42](https://tinyurl.com/487kvv42)**

- Ontario Reducing Wait Times for Surgeries and Procedures (Jan 16)

**[tinyurl.com/5hcyfps3](https://tinyurl.com/5hcyfps3)**

- New "As of Right" Rules a First in Canada to Attract More Health Care Workers to Ontario (Jan 19)

[tinyurl.com/mr48j6h9](https://tinyurl.com/mr48j6h9)

- Ontario Expanding Learn and Stay Grant to Train More Health Care Workers (Jan 20)

## **OTHER ORGANIZATIONS**

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

[tinyurl.com/5n7ypu5x](https://tinyurl.com/5n7ypu5x)

- Public Health Matters (Vaccines) (Jan 13)

### **Canadian Centre on Substance Abuse and Addiction**

[tinyurl.com/27bwaers](https://tinyurl.com/27bwaers)

- More than 6 drinks a week puts your health at risk: New Canada's Guidance on Alcohol and Health (Jan 17)

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

[tinyurl.com/24mcmbm2](https://tinyurl.com/24mcmbm2)

- Government of Canada invests \$23 million in pediatric cancer consortium (Jan 18)

[tinyurl.com/2p8b8njc](https://tinyurl.com/2p8b8njc)

- Government of Canada announces new clinical trials consortium, training platforms, and research projects to improve the health of Canadians (Jan 19)

### **Canadian Ophthalmological Society**

[tinyurl.com/3pn4c8bu](https://tinyurl.com/3pn4c8bu)

- Glaucoma Awareness Month draw attention to preventable vision loss: Canadian Ophthalmological Society (Jan 10)

### **IC/ES**

[tinyurl.com/2a6nykjm](https://tinyurl.com/2a6nykjm)

- Ontario study finds variation in mental health medication use in children and youth (Jan 18)

[tinyurl.com/525fcsj5](https://tinyurl.com/525fcsj5)

- New online calculator predicts risk of developing kidney disease (Jan 20)

### **Ontario Hospital Association**

[tinyurl.com/3jvmn6px](https://tinyurl.com/3jvmn6px)

- OHA Welcomes Opportunity to Integrate Community Surgical Centres into Ontario's Health Care System (Jan 16)

### **Registered Nurses' Association of Ontario**

[tinyurl.com/2j8thxaj](https://tinyurl.com/2j8thxaj)

- For-profit care: Taking care of investors, not Ontarians, says RAO (Jan 16)



The Regional  
Municipality of  
Durham

Works Department

# Memorandum

**Date:** January 27, 2023

**To:** Regional Chair Henry and Members of Regional Council

**From:** John Presta, P.Eng, MPA, Commissioner of Works

**Copy:** Elaine Baxter-Trahair, Chief Administrative Officer  
Giuseppe Anello, M.Eng., P.Eng., PMP, Director, Waste  
Management Services

**Subject:** Durham York Energy Centre  
Quarterly (Q3 - 2022) Long-Term Sampling System Report

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The attached report for the third quarter of 2022 provides details with respect to data related to the Long-Term Sampling System (LTSS) at the Durham York Energy Centre (DYEC), referred to as the AMESA system.

This report includes AMESA data collected from June 24, 2022, to September 25, 2022, and is structured as follows:

1. Sections 1 and 2 provide background,
2. Sections 3 to 8 provide specific quarterly AMESA data,
3. Section 9 provides ambient air data for the same time period, and
4. Section 10 responds to inquiries received during the quarter.

**End of Memo**

Attachment: DYEC LTSS Quarterly (Q3 - 2022) Report  
(June 24, 2022, to September 25, 2022)



**Durham York Energy Centre**  
**Long-Term Sampling System**  
**Quarterly (Q3) Report**  
**July 2022 to September 2022**

Prepared by

The Regional Municipality of Durham

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## 1. Introduction

This report provides additional details with respect to the reporting of operational data related to the AMESA Long-Term Sampling System (LTSS) for Dioxin and Furans at the Durham York Energy Centre (DYEC).

This report covers the third quarter (Q3) of 2022 and includes AMESA data collected from June 24, 2022, to September 25, 2022.

## 2. Background

To meet the requirements of Environmental Compliance Approval (ECA) Condition 7(3), a continuous sampling system (the Adsorption Method for Sampling Dioxins and Furans (AMESA) LTSS), is installed on each of the two boiler units at the DYEC to sample Dioxins and Furans.

The operation of the AMESA system was initiated in 2015 and has been maintained in accordance with current guidance from the AMESA manufacturer, the North American vendor ENVEA, and the AMESA Technical Manual.

The AMESA system is used only for the purpose stated in ECA Condition 7(3), which relates to Dioxins and Furans emissions trend analysis and evaluation of Air Pollution Control equipment performance. The AMESA results themselves do not constitute a compliance point for the facility operations.

ECA Condition 7(3), Testing, Monitoring and Auditing Long-Term Sampling for Dioxins and Furans, states:

- (a) The Owner shall develop, install, maintain, and update as necessary a long-term sampling system, with a minimum monthly sampling frequency, to measure the concentration of Dioxins and Furans in the Undiluted Gases leaving the Air Pollution Control (APC) Equipment associated with each Boiler. The performance of this sampling system will be evaluated during the annual Source Testing programs in accordance with the principles outlined by 40 CFR 60, Appendix B, Specification 4.1

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<sup>1</sup> 40 CFR Part 60 refers to the Code of Federal Regulations – Standards of Performance for New Stationary Sources

- (b) The Owner shall evaluate the performance of the long-term sampling system in determining Dioxins and Furans emission trends and/or fluctuations as well as demonstrating the ongoing performance of the APC Equipment associated with the Boilers.

AMESA results are available at the site when requested by the Ministry of Environment, Conservation and Parks (MECP) and reported to the MECP as part of the Annual Report required by ECA Approval Condition 15 and posted to the DYEC website.

As the results of the LTSS AMESA sampling are reported annually as a 12-month rolling average to the MECP and contained in the Annual Report, a request from the public was granted in 2021 to provide more frequent updates. Quarterly reports containing validated, calculated results for each AMESA sampling run for both boiler units are prepared for Council and subsequently posted to the website.

### 3. Cartridge Replacement Schedule

The AMESA sampling cartridge duration is approximately 30 days before it is removed and sent to the laboratory for analysis. As each boiler unit is independent, the duration may differ due to such things as alternating maintenance activities.

<b>AMESA Cartridge Replacement Schedule</b>				
<b>Unit #</b>	<b>Run #</b>	<b>Start Date</b>	<b>End Date</b>	<b>Duration (days)</b>
1	75	27-Jun-22	25-Jul-22	25
2	75	24-Jun-22	25-Jul-22	29
1	76	25-Jul-22	26-Aug-22	25
2	76	25-Jul-22	26-Aug-22	19
1	77	26-Aug-22	26-Sept-22	31
2	77	26-Aug-22	26-Sept-22	31

**Note 1: The cartridge duration times may differ even though the start and end dates are the same for both boiler units.**

### 4. Laboratory Analysis

There were no issues identified with the AMESA sample cartridges or the analysis at the laboratory; however, the laboratory continues to experience delays in analysis and reporting.

## **5. Durham and York Regions and Covanta Monthly Data and Operations Review**

Staff from The Regional Municipality of Durham and the Regional Municipality of York Regions meet with Covanta both weekly and monthly on an established schedule to discuss facility operations, and to review environmental monitoring results, trends and calculations where required for all monitoring programs, and the available AMESA results.

## **6. Oversight of AMESA Results**

The Regional Municipality of Durham and the Regional Municipality of York Region staff and Covanta meet with the MECP on a quarterly basis to discuss all items pertinent to the ECA and the Environmental Monitoring Programs and facility operations. Any concerns which are not determined to be reportable incidents in accordance with the ECA are discussed along with day-to-day operations and monitoring.

Any events which the ECA deems reportable are done in accordance with the appropriate ECA condition.

Results of the AMESA LTSS are reported to the MECP in the DYEC Annual Reports and posted to the DYEC website. AMESA trends of validated data are presented as a 12-month rolling average together with an analysis to demonstrate the ongoing performance of the APC Equipment. The MECP has no concerns with the AMESA results detailed in the 2021 Annual Report as posted via this link: [MECP Review of the DYEC 2021 Annual Report](#). The [2021 Annual Report](#) has been posted to the website.

## **7. AMESA Performance**

The measured concentrations for each of the 17 dioxin and furan congeners identified in the laboratory certificate of analysis are applied to established calculations to obtain a Calculated Result. These calculations quantify the Dioxins and Furans per reference metre cube of flue gas. Additionally, standard temperature, pressure and oxygen correction factors are also applied to the measured concentration to obtain a value for regulatory comparison. Finally, each of the 17 dioxin and furan congeners are multiplied by their respective toxic equivalency factor (TEF) and added together to obtain a total dioxin and furan total toxic equivalence (TEQ). The ECA for the DYEC specifies the use of the NATO classification scheme for Dioxins and Furans and therefore the NATO TEF factors are applied to obtain the TEQ calculation. The Table below shows each of the AMESA sampling Runs, the start and end time the cartridge was in-situ for each boiler unit, and the calculated result.

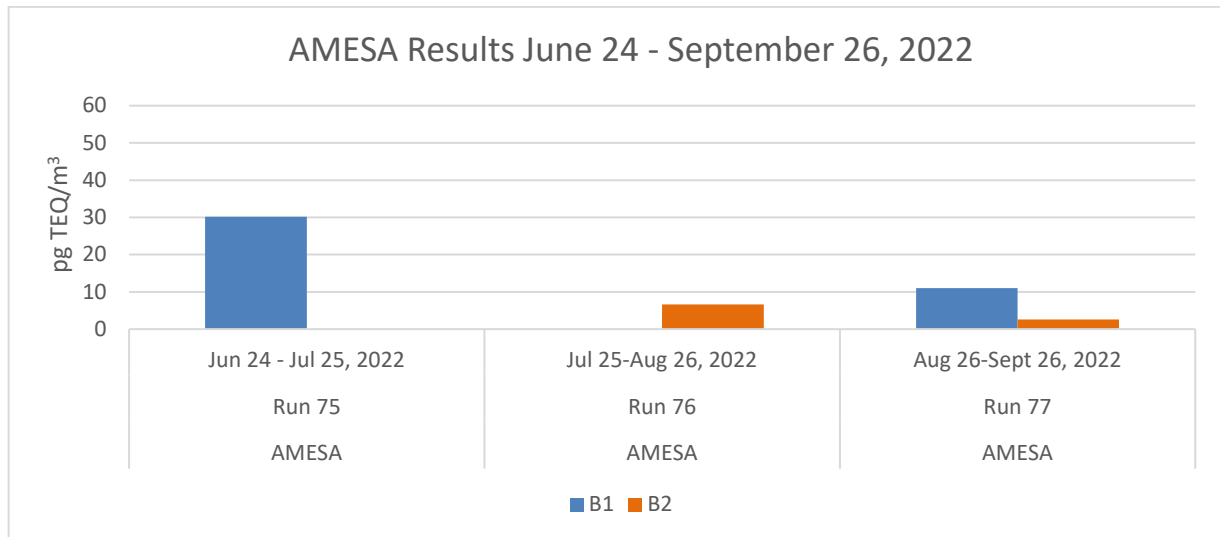


### AMESA Calculated Results

Unit #	Run #	Start Date	End Date	Calculated Result (pg TEQ/Rm <sup>3</sup> )
1	75	27-Jun-22	25-Jul-22	30.139
2	75	24-Jun-22	25-Jul-22	invalidated
1	76	25-Jul-22	26-Aug-22	invalidated
2	76	25-Jul-22	26-Aug-22	6.61
1	77	26-Aug-22	26-Sept-22	11.022
2	77	26-Aug-22	26-Sept-22	2.601

**Note 2: Boiler Unit #2 Run 75 and Boiler Unit #1 Run 76 AMESA results were invalidated.**

While AMESA has no regulatory limit associated for compliance as it is used to supplement source testing, the ECA directs that, “The Owner shall evaluate the performance of the long-term sampling system in determining Dioxins and Furans emission trends and/or fluctuations as well as demonstrating the ongoing performance of the APC Equipment associated with the Boilers.” The Regions, their Engineering and Air Emissions oversight consultants and Covanta will continue to monitor DYEC performance as it relates to AMESA results and trends. The Table below displays the results of the AMESA sampling runs carried out in the third quarter (Q3) of 2022.



**Note 3: Boiler Unit #2 Run 75 and Boiler Unit #1 Run 76 AMESA results were invalidated.**

## 7.1 Investigation

There were two results which triggered the AMESA Investigation Checklist during the third quarter (Q3) of 2022.

The laboratory analysis of Boiler Unit #2, AMESA Run #75, which commenced service June 24, 2022, prompted a comprehensive evaluation of operations and maintenance activities and/or conditions that occurred during the time the AMESA sampling cartridge was in-situ. On July 16 and July 23, 2022, there were incidents where the AMESA system was sampling during non-isokinetic conditions due to a burner reliability issue which had the potential to adversely affect the sample integrity.

The laboratory analysis of Boiler Unit #1, AMESA Run #76, which commenced service July 25, 2022, prompted a comprehensive evaluation of operations and maintenance activities and/or conditions that occurred during the time the AMESA sampling cartridge was in-situ. On July 25, 2022, work was undertaken related to a plugged economizer. Due to the corrective maintenance being completed for the plugged economizer during this period there was a high probability the AMESA system was sampling during non-isokinetic conditions.

## 7.2 Corrective Action

Following investigations into both events triggering the AMESA Investigation Checklist during Q3, Covanta has proposed the following actions moving forward.

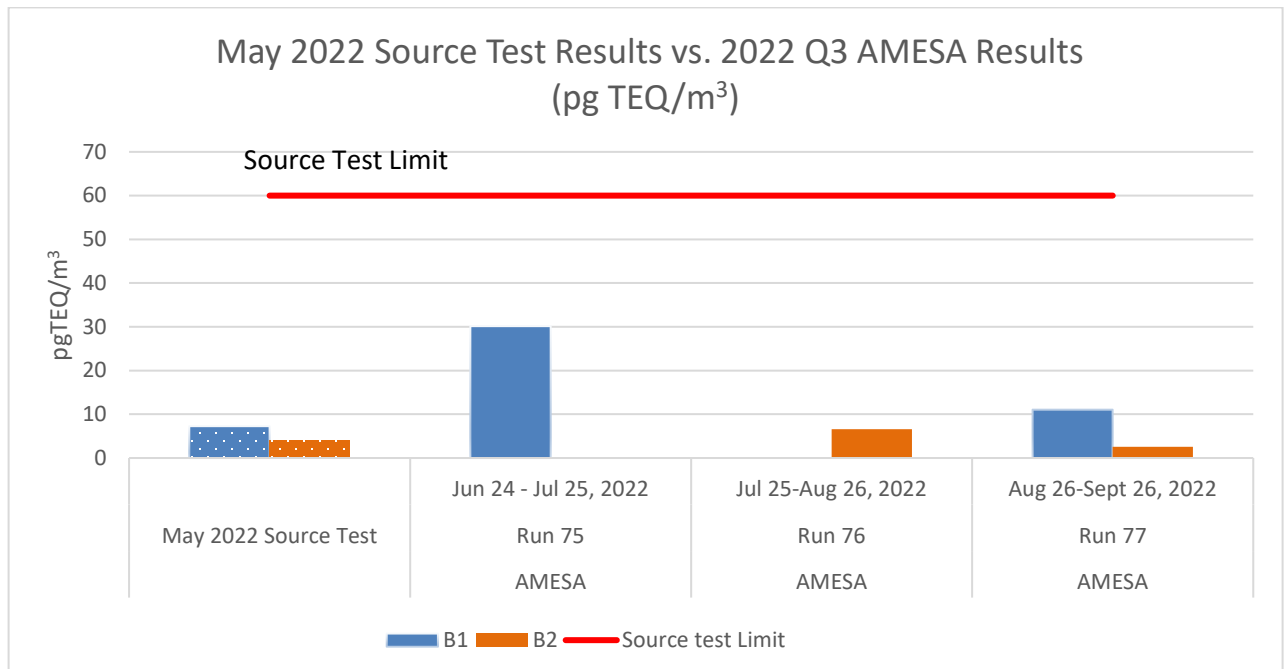
- A monthly review of the flue gas zone temperatures to allow for expedited actions for temperature drops or outliers that could lead to conducive formation of dioxins and furans.
- Periodic walk downs of the entire system to ensure no leakage of oxygen that could contribute to de novo synthesis in critical locations.
- A third-party inspection of Boiler Unit #2 burner as part of the upcoming minor outage scope to resolve the burner reliability issues.
- Exploring the option of an addition to the trigger input coupled with the set steam flow requirement. This will allow the integrity of the AMESA sample to be protected by isolating the AMESA system from the process during an operating condition that has high potential to be non-isokinetic.

## 8. AMESA relative to most current Source Testing Dioxin and Furan Results

AMESA is not used to assess compliance and should not be evaluated against Ministry standards, such as the Dioxin and Furan Source testing limit. The testing

methodology for AMESA and Source testing sampling and analysis are different and are set out within their prescribed sampling method and manufacturer guidelines.

The AMESA results are presented in the chart below to show how the Q3 calculated values compare to the most current source testing results. The source test compliance limit for Dioxins and Furans is 60 pgTEQ/m<sup>3</sup>. The chart below shows the AMESA Q3, 2022 results as compared to the 2022 Spring source test results. Results from the Spring source test also indicated the Dioxins and Furans result is below the regulatory compliance limit.



**Note 4: Boiler Unit #2 Run 75 and Boiler Unit #1 Run 76 AMESA results were invalidated.**

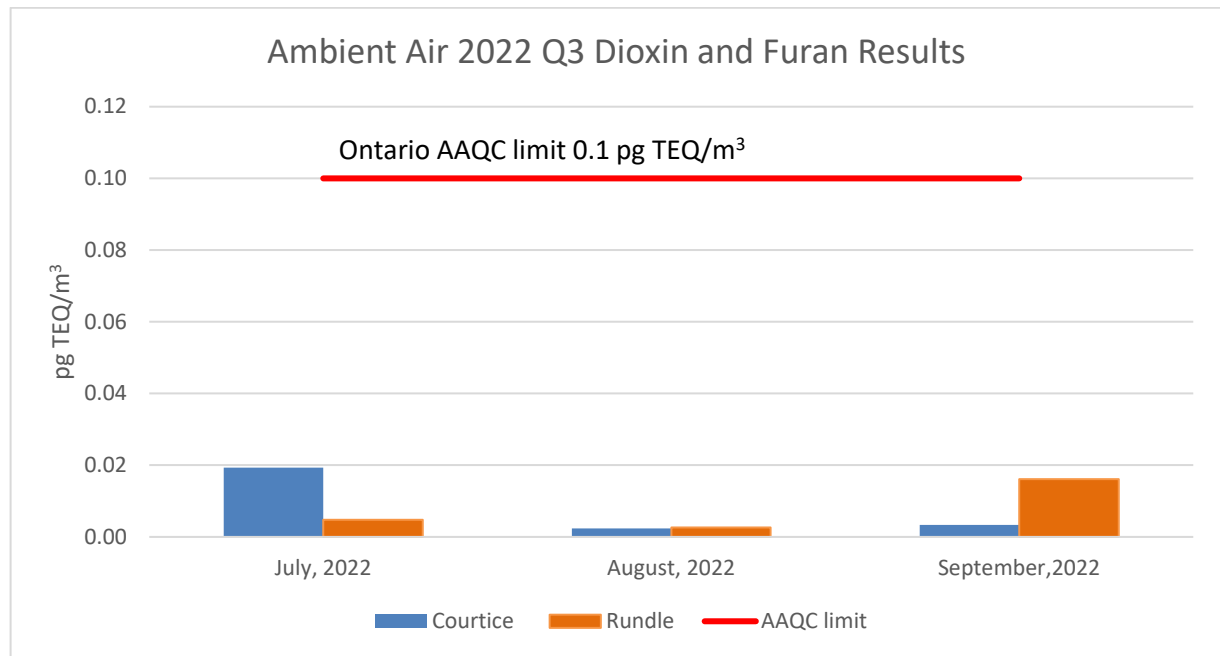
## 9. Ambient Air Dioxin and Furan Results – Third Quarter (Q3) 2022

The Ambient Air Monitoring Program samples for dioxins and furans. The sampling methodology, units of measurement and the reporting limits are prescribed differently and cannot be compared directly to the source testing or AMESA results. The Ambient Air monitoring program does not measure point source emissions, but it does provide an indication of local air quality. The monitoring equipment samples air, which captures ambient air emissions from a variety of emissions sources in the area. The results of ambient air monitoring assist in informing on local air quality and may suggest contributing factors based on meteorological conditions such as wind speed and direction.

As can be seen in the graph below, the dioxin and furan results measured from both ambient air stations monitored as part of the DYEC ambient air monitoring program

are below the Ontario Ambient Air Quality Criteria of 0.1 picogram Toxic Equivalency per cubic metre (pgTEQ/m<sup>3</sup>) during the third quarter (Q3) of 2022.

Of additional note, the Ontario Ambient Air Quality Criteria is 10 times lower than the Ontario Regulation 419 Upper Risk Threshold of 1 pgTEQ/m<sup>3</sup> for dioxins and furans.



## 10. Durham York Energy Centre Inquiries

The MECP District Manager provided a response letter dated December 28, 2022 (Attachment #1), in relation to questions raised by the Council of the Municipality of Clarington through Resolution #C-266-21 on the Long-Term Sampling System for the monitoring of Dioxin and Furan emissions (AMESA) from the DYEC. The MECP provided the following statements in their letter:

- “The AMESA system is not used for the purpose of assessing compliance, nor should the system results be compared to ministry standards, limits, or criteria for the purpose of compliance.”
- “The AMESA work plan was developed and revised by Covanta and the Regions with the assistance of the system manufacturer and input from the ministry. The ministry reviewed and accepted the evaluation and validation process outlined in the AMESA plan.”
- “Covanta and the Regions are operating the AMESA system in compliance with the conditions of the Environmental Compliance Approval (ECA), including

Condition 7(3), and the ministry will continue to provide guidance regarding the evaluation and validation of the AMESA system.

- “Ongoing compliance monitoring programs indicate that Covanta and the Regions of York and Durham are operating the DYEC in compliance with ministry emission limits, which are protective of human health and the environment.”

## **End of Report**

**Ministry of Environment,  
Conservation and Parks**  
*Drinking Water and Environmental  
Compliance Division*

**Ministère de l'Environnement,  
de la Protection de la nature et des Parcs**  
*Division de la conformité en matière d'eau  
potable et d'environnement*



Central Region

Région du Centre

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**Telephone:** 905-427-5600  
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**Fax:** 905-427-5602

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Ajax ON L1S 7J5  
**Téléphone :** 905 427-5600  
**Sans frais :** 1-800-376-4547  
**Télécopieur :** 905 427-5602

December 28, 2022

Mayor Adrian Foster  
Municipality of Clarington  
40 Temperance Street  
Bowmanville, ON, L1C 3A6

Dear Mayor Foster,

Thank you for contacting the ministry's York Durham District office to discuss concerns that are being raised at Clarington Municipal Council about topics specific to the local air quality in Clarington.

Ministry staff have previously met with yourself, Clarington councillors and community residents to discuss concerns related to air quality and emissions from the Durham York Energy Centre (DYEC). At a technical briefing in 2019, ministry air scientists presented information about air monitoring and sampling at the DYEC in response to concerns being raised.

The ministry assesses compliance at the DYEC through continuous air emissions monitoring, source testing and emission modelling. These are the same emission assessment and monitoring processes accepted by the ministry for all facilities that thermally process municipal waste. Ongoing compliance monitoring programs indicate that Covanta and the Regions of York and Durham are operating the DYEC in compliance with ministry emission limits, which are protective of human health and the environment.

The DYEC operates a separate emission sampling system (AMESA) that generates data for the specific use of Covanta (the operator) and the Regions to assess emission trends and the operational performance of the facility. The AMESA system is not used for compliance assessment, nor should the system results be compared to ministry standards, limits or criteria for the purpose of compliance. The system is used by Covanta and the Regions to assess trends and fluctuations in emissions from the DYEC. Covanta and the Regions are operating the AMESA system in compliance with the conditions of the Environmental Compliance Approval.

Thank you for suggesting that ministry staff attend future municipal council meetings. Ministry staff have resumed attending the Energy from Waste-Waste Management Advisory Committee (EFW-WMAC). As this committee has been established to discuss issues and concerns related to the facility, this forum may be better suited to ensure participation of those who have an interest in the operation of the facility.

In addition to responding to your specific concerns, I also wish to update you on action the ministry has taken to address ongoing concerns regarding ambient air quality in Clarington.

As you will recall, in July 2018 the ministry produced a memorandum summarizing the analysis of air quality data to observe possible trends, sources or patterns and to provide an overview of general ambient air quality throughout Clarington. This analysis, which included data from air monitoring stations operated throughout Durham Region from 2013-2016, showed that air quality in Clarington is similar to that of other communities in southern Ontario.

The ministry has updated the 2018 memorandum to include additional data from 2017 to 2020. The updated memorandum also includes air monitoring results from the mobile air monitoring Trace Atmospheric Gas Analyzer (TAGA), which was deployed in Clarington in July 2021 as a result of our commitment at our March 2021 meeting to conduct mobile air monitoring in the community and to assess the current ambient air quality in Clarington.

This updated analysis, which included data from air monitoring stations operated throughout Durham Region from 2013-2020, confirms the 2018 findings that air quality in Clarington is similar to that of other communities in southern Ontario. A copy of the technical memorandum and supporting infographic is enclosed. The memorandum will also be provided to the Regions, industry stakeholders and any interested community members.

The ministry remains committed to working with you to protect the air quality in Clarington. If you have any questions or comments, you can contact me at (905) 442-3105 or [celeste.dugas@ontario.ca](mailto:celeste.dugas@ontario.ca)

Sincerely,



Celeste Dugas  
District Manager  
York Durham District

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2097.

## The Regional Municipality of Durham

### MINUTES

#### DURHAM ENVIRONMENT AND CLIMATE ADVISORY COMMITTEE

January 19, 2023

A regular meeting of the Durham Environment and Climate Advisory Committee was held on Thursday, January 19, 2023 in Council Chambers, Regional Municipality of Durham Headquarters, 605 Rossland Road East, Whitby at 7:14 PM. Electronic participation was permitted for this meeting.

#### 1. Introduction of the new Planning and Economic Development Committee Representatives

A. Luqman welcomed Councillor Shahid as the new representative from the Planning & Economic Development Committee for DECAC.

#### 2. Roll Call

Present: G. Carpentier, Scugog, Chair  
O. Chaudhry, Pickering  
S. Clearwater, Whitby  
B. Foxton, Uxbridge  
G. Layton, Oshawa, Second Vice-Chair attended the meeting at 7:45 PM  
K. Lui, Member at Large  
K. Murray, Member at Large  
Councillor Shahid  
B. Shipp, Member at Large  
**\*all members of the committee participated electronically**

Absent: A. Abu-Rayash, Member at Large  
J. Cuthbertson, Clarington, First Vice-Chair  
R. Dickinson, Brock  
M. Nasir, Ajax  
S. Panchal, Youth Member  
D. Stathopoulos, Member at Large

#### Staff

Present: R. Inacio, Systems Support Specialist, Corporate Services – IT  
A. Luqman, Senior Planner, Planning & Economic Development Department  
I. McVey, Manager of Sustainability, CAO's Office  
S. Ciani, Committee Clerk, Corporate Services – Legislative Services



### 3. **Approval of Agenda**

Moved by K. Murray, Seconded by Councillor Shahid,  
That the agenda for the January 19, 2023 Durham Environment and  
Climate Advisory Committee (DECAC) meeting, be approved.  
CARRIED

### 4. **Declarations of Interest**

There were no declarations of interest.

### 5. **Adoption of Minutes**

Moved by Councillor Shahid, Seconded by O. Chaudhry,  
That the minutes of the Durham Environmental Advisory Committee  
meeting held on Thursday, November 17, 2022, be adopted.  
CARRIED

### 6. **Presentation**

#### A) SaveSoil (Presented by: Aseem Malhi, Mayooraan Velayuthampillai, Brajeet Bathal, and Cavita Sharma)

Aseem Malhi, Mayooraan Velayuthampillai, Brajeet Bathal, and Cavita Sharma  
appeared before the Committee to provide a PowerPoint presentation regarding  
SaveSoil.

Highlights from the presentation included:

- Why Soil?
- Why Now?
- Soil Degradation – A Global Issue
- Save Soil
- Supporters
- Living Soil
- Ramifications of Soil Degradation
  - Food Crisis
  - Water Scarcity
  - Loss of Biodiversity
  - Climate Change
  - Loss of Livelihood
  - Conflict and Migration
- We Should Act Now! 2050 Projections
- Increase Organic Content in Soil to a Minimum of 3-6%
- Sadhguru (Yogi and Visionary)
  - Presented a 3-Pronged Strategy to Safeguard Soil Health & to Support Farmers at COP15 - UNCCD

C. Sharma responded to questions from the Committee regarding what SaveSoil events are being planned for the future; how members of the Committee can participate or support the SaveSoil movement; and whether the Durham Agricultural Advisory Committee (DAAC) and Environmental Defence Canada have been consulted.

Discussion ensued regarding the importance of making local connections so that members of the public can see specifically where they fit and how they can make a difference; and the importance of how soil is managed when lands are being developed, and the problem of moving potentially contaminated soil from construction sites onto agricultural land.

## 7. Items for Discussion

### A) Change to DECAC (Terms of Reference)

A. Luqman advised that the Durham Environmental Advisory Committee (DEAC) has been formally renamed as the Durham Environment and Climate Advisory Committee (DECAC). She advised that last Fall was spent revising the terms of reference to incorporate the climate portfolio that was within the Durham Region Roundtable on Climate Change Committee (DRRCC) mandate, and the revisions were endorsed by Regional Council on December 21, 2022.

A. Luqman further advised that the DECAC with the new membership should be formed by May 2023.

### B) Evolution of the Durham Region Roundtable on Climate Change (DRRCC) and Durham Environmental Advisory Committee (DEAC) (Report 2022-COW-28) – Ian McVey

I. McVey advised that the former DRRCC is currently being set up as an independent entity at Ontario Tech University with a mandate to provide a broader set of accountability and transparency measures with respect to our progress towards a low carbon, net zero, and climate resilient Region. He advised that the composition for the DRRCC Leadership Committee will include 2 chairs (Regional Chair Henry and a representative from Ontario Tech University), 8 representatives from the local area municipalities (the mayor or designate), and 8-10 individuals representing other organizations and sectors in the community.

I. McVey advised that a report will be presented at the February Committee of the Whole (COW) meeting to appoint the local area municipal representatives. He advised that staff are working with Ontario Tech University through the Brilliant Energy Institute to develop a more comprehensive method of measuring greenhouse gas data, with the ability to separate it by sector and municipality in order to set priorities. He further advised that the first meeting of the DRRCC Leadership Committee will occur in April, with an in-person public forum to be hosted in the Fall at Ontario Tech University.

C) Spring Pollinator Seed Distribution Project

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A. Luqman inquired whether the Committee was interested in participating in a Spring pollinator seed distribution again this year. She advised that roughly 1,200 seed pollinator packets were distributed at Regional waste day events in May and June of last year.

Discussion ensued regarding the possibility of distributing food seed packets along with the pollinator seed packets in response to the current food crisis; reaching out to local Durham nurseries for possible donations of seeds; and if the Committee chose to distribute food seeds, whether native food seeds could be acquired.

Further discussion ensued regarding potential distribution of non-native food seeds, and if the Committee should provide additional education and information to the public on the reasons why non-native seeds were chosen.

It was the consensus of the Committee to distribute pollinator seed packets again this year. A. Luqman advised that she would start the procurement process with respect to the seeds/materials and asked that those interested in volunteering send her an email.

D) Update on Trailhead Parking in Regional Forests

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G. Carpentier expressed his continued concerns regarding inadequate public consultation and transparency within the pilot project, and whether there is sufficient representation from local nature committees in the discussion.

A. Luqman advised that she reached out to internal staff and was informed that closer to the end of the pilot (end of Summer or early Fall of 2023), the landowners would review all of the feedback they had received, and the information would be used to inform the next steps. She advised that they will also be looking at input from the Durham Mountain Biking Association, the Oak Ridges Trail Association, the Expert Horseman's Association, and the Green Durham Association.

A. Luqman asked that G. Carpentier email her a list of the local nature organizations that should be included in the consultation process in order to forward it to the appropriate staff for consideration.

**8. For Information**

A) Commissioner's Report #2023-P-3: 2022 Annual Reports of the Durham Active Transportation Committee, Durham Agricultural Advisory Committee and Durham Environmental Advisory Committee

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A copy of Report #2023-P-3 of the Commissioner of Planning & Economic Development was received.

- B) Investing in the Future of Ontario's Greenbelt: A Conservation Finance Blueprint for Southern Ontario, Smart Prosperity Institute, December 2022
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A copy of Investing in the Future of Ontario's Greenbelt: A Conservation Finance Blueprint for Southern Ontario, Smart Prosperity Institute, December 2022 was received.

Concerns were raised regarding the report's findings that "without further investment, the conservation finance gap in Ontario is estimated to grow to \$13.5 billion by 2030"; and that, "investing in the conservation and restoration of near-urban ecosystems, carries an even higher potential for generating substantial economic returns, while improving community resilience".

- C) LEAF 2022 Annual Report
- 

A copy of the LEAF 2022 Annual Report was received.

- D) LEAF Backyard Tree Planting Program Year 3 Interim Report, July-December 2022
- 

A copy of the LEAF Backyard Tree Planting Program Year 3 Interim Report, July-December 2022 Works was received.

Staff responded to questions from the Committee regarding the length of the LEAF Backyard Tree Planting Program; where the funding for the program comes from; and what trees or shrubs were chosen most often by homeowners.

A concern was raised regarding whether the specific addresses of where the trees or shrubs were planted needed to be identified in the report. I. McVey advised that he would forward that concern to LEAF for consideration.

- E) Commissioner's Report #2022-COW-30: Update on the Approval of the Lakeshore East GO Extension to Bowmanville
- 

A copy of Report #2022-COW-30 of the Commissioner of Planning & Economic Development was received.

- F) Commissioner's Report #2022-COW-31: Durham Region's Response to the Provincial Consultation on Proposed Amendments to the Greenbelt Plan, ERO postings #019-6216 and #019-6238
- 

A copy of Report #2022-COW-31 of the Chief Administrative Officer was received.

- G) Commissioner's Report #2022-P-20: Planning and Economic Development Department Achievements, 2018-2022
- 

A copy of Report #2022-P-20 of the Commissioner of Planning & Economic Development was received.

H) Information Report #2022-INFO-95: Durham Meadoway Visioning Study

A copy of Report #2022-INFO-95 of the Commissioner of Planning & Economic Development was received.

I) Minutes of the December 6, 2022, Durham Agricultural Advisory Committee (DAAC) meeting

A copy of the December 6, 2022, Durham Agricultural Advisory Committee meeting minutes was received.

G. Carpentier advised that Z. Cohoon, Chair, DAAC, presented the DAAC 2022 Annual Report to the Planning & Economic Development Committee on January 10, 2023, but due to technological issues, DEAC's 2022 Annual Report delegation was deferred until the February 7, 2023 Planning & Economic Development Committee.

Moved by Councillor Shahid, Seconded by S. Clearwater,  
That Information Items 8. A) to I) inclusive, be received for information.

CARRIED

**9. Other Business**

There was no other business considered.

**10. Date of Next Meeting**

The next regular meeting of the Durham Environment and Climate Advisory Committee will be held on Thursday, February 16, 2023, starting at 7:00 PM in the Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby.

**11. Adjournment**

Moved by Councillor Shahid, Seconded by O. Chaudhry,  
That the meeting be adjourned.

CARRIED

The meeting adjourned at 8:26 PM

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G. Carpentier, Chair, Durham Environment and  
Climate Advisory Committee

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S. Ciani, Committee Clerk