



Addendum: Board of Health Meeting

Thursday, January 15, 2026

1:30 p.m.

Boardroom, Public Health Sudbury & Districts

ADDENDUM – FIRSTH MEETING
BOARD OF HEALTH
JANUARY 15, 2026

8.0 ADDENDUM

DECLARATIONS OF CONFLICT OF INTEREST

- i) **Supplementary Document for the Board of Health Presentation: *Inquest into the deaths of Luke Moore, Lorraine Shaganash, Lizzie Sutherland, Mark Ferris, and Douglas Taylor***
 - Verdict of Inquest Jury: 2021 Blastomycosis Outbreak in Constance Lake:
Jury Recommendations Relevant to Local Public Health Agencies
- ii) **City of Greater Sudbury Council Advocacy – Public Health Funding**
 - City of Greater Sudbury Council Resolution dated November 25, 2025

Verdict of Inquest Jury: 2021 Blastomycosis Outbreak in Constance Lake

Jury Recommendations Relevant to Local Public Health Agencies

The following is a selection of recommendations from the [coroner's inquest](#) into the deaths of five people from Constance Lake First Nation in 2021. The verdict was delivered on November 19, 2025. The Jury put forth 79 recommendations total, this document highlights 9 with the responses of how Public Health Sudbury & Districts are addressing them.

Recommendation #1:

Hôpital Notre-Dame Hospital ("NDH"), Ornge, Public Health Ontario ("PHO"), the Ministry of Health, Northeastern Public Health ("NEPH"), and Indigenous Services Canada ("ISC") should commit to Joyce's Principle, which aims to guarantee to all Indigenous people the right of equitable access, without any discrimination, to all social and health services, as well as the right to enjoy the best possible physical, mental, emotional, and spiritual health, including the recognition and respect of Indigenous people's traditional and living knowledge in all aspects of health.

Public Health Sudbury & Districts Actions for #1:

Public Health Sudbury & Districts affirms Joyce's Principle as foundational to our organizational values and Public Health Sudbury & Districts practice. Joyce's Principle recognizes the right of Indigenous peoples to equitable access to health and social services, free from racism and discrimination, and to receive those services without delay or denial due to jurisdictional disputes, while upholding the right to self-determination. Through our Indigenous Engagement Strategy, Public Health Sudbury & Districts is actively working to create culturally safe, inclusive, and equitable systems by

- Advancing our Positive Space Initiative to foster inclusive and respectful environments.
- Committing to applying the lessons learned from our Unlearning & Undoing White Supremacy and Racism project across policies, practices, and workplace culture.
- Implementing ongoing mandatory cultural safety and anti-racism training for staff.
- Supporting Indigenous representation at all levels of governance, leadership, and advisory structures.

- Respecting Indigenous ways of knowing and engaging Elders, Knowledge Holders, and community voices in program design and decision-making.

This work is ongoing and relational, recognizing that reconciliation requires sustained action and accountability.

Recommendation #4:

NDH, Ornge, PHO, and NEPH should create and publish on their websites, within six months of this verdict, a plan to implement the Truth and Reconciliation Commission (“TRC”) Calls to Action 22 and 23 as applicable.

Public Health Sudbury & Districts Actions for #4:

Public Health Sudbury and Districts is actively advancing TRC Calls to Action 22 and 23 through its Indigenous Engagement Strategy and workforce practices:

Call to Action 22 – Indigenous Healing Practices

- Public Health Sudbury & Districts recognizes the value of Indigenous healing practices and works in partnership with Indigenous communities to support culturally grounded approaches to health and wellness. The Indigenous Public Health team will work with teams that provide direct client care to incorporate culturally safe and grounded practices into the delivery of clinical services by end of 2027.

Call to Action 23 – Indigenous Health Workforce & Cultural Safety

- **Increasing Indigenous representation:** Public Health Sudbury & Districts supports Indigenous recruitment by promoting employment opportunities through Indigenous job boards and networks. Of note, there are staff who identify as Indigenous including the Indigenous Public Health staff who are all Anishinaabe and the Board of Health has a dedicated Indigenous Board member.
- **Cultural competency training:** Public Health Sudbury & Districts requires ongoing, mandatory learning, as well as facilitates the voluntary Unlearning Club for participating staff, regularly offers anti-racism education, and Indigenous-led training opportunities.

Recommendation #24:

The Ministry of Health should create an inventory of public health programs and services available to First Nation communities and compare the inventory to the Ontario Public Health Standards with the goal of identifying and improving access to public health services for First Nation community members. The Ministry of Health to share this inventory with ISC, and any applicable Tribal Council in relation to transferred communities.

Public Health Sudbury & Districts Actions for #24:

Public Health Sudbury & Districts currently works with First Nation communities to support a range of public health programs aligned with the Ontario Public Health Standards. Services are provided when requested and through partnerships with individual First Nation communities. The specific services offered are determined by each community based on their priorities and needs. This is not a complete list of all Public Health Sudbury & Districts services that may be available or provided:

- Chronic Disease Prevention and Well-Being Program Standard
 - Non-Mandatory Oral Health Programs
 - Healthy Eating
 - Mental Health Promotion
 - Healthy Sexuality
- Healthy Growth and Development Program Standard
 - Healthy Growth and Development
 - Parenting
 - Infant feeding
 - Healthy Pregnancies
- Immunization Program Standard
 - Community Based Immunization Outreach
 - COVID-19 Vaccine Program
- Safe Water Campaigns
- School Health Program Standard
 - School dental
 - Healthy Smiles Ontario Program
 - Oral Health Assessment and Surveillance
- Substance Use and Injury Prevention Program Standard
 - Harm Reduction Program Enhancement
 - Needle Syringe Program
- Foundational Standards

Public Health Sudbury & Districts would support Ontario Ministry of Health efforts to formally inventory and share this information with Indigenous partners and government agencies to improve transparency, coordination, and equitable access.

Recommendation #27:

The Ministry of Health, local Boards of Health, and ISC to explore opportunities for relationship building among public health units and ISC, with a focus on responding to future public health emergencies in First Nation communities.

Public Health Sudbury & Districts Actions for #27:

Public Health Sudbury & Districts is actively collaborating with ISC to strengthen relationships and coordinated responses, including

- Joint work on Diseases of Public Health Significance
- Collaboration in responding to the opioid and substance-related harms, including harm reduction supports in First Nations
- Ongoing engagement to improve readiness for public health emergencies in First Nation communities, with an active commitment to offering meaningful collaboration informed by lessons learned through our shared work during the Covid-19 pandemic.

This relationship-based approach aligns with Public Health Sudbury & Districts' Indigenous Engagement Strategy and emphasizes trust, communication, and shared responsibility.

Recommendation #28:

The Ministry of Health, local Boards of Health, applicable Tribal Councils, and ISC should meet to develop and establish clear roles and responsibilities, in response to future public health emergencies and outbreaks.

Public Health Sudbury & Districts Actions for #28:

Public Health Sudbury & Districts is actively engaged in discussions with ISC, and Indigenous partners to clarify and formalize roles and responsibilities during public health emergencies, DOPHS and partnerships. This work is ongoing and is being approached collaboratively to ensure clarity, respect for jurisdiction but also not allowing it to limit our support for effective response.

Recommendation #31:

NDH and NEPH to explore ways to encourage and support Indigenous membership on their boards and advisory committees, including outreach opportunities with First Nation communities and urban Indigenous partners, coordinating with committee chairs or other people who are responsible for the appointment of members, and identifying and addressing existing or potential barriers to participation by First Nation communities.

Public Health Sudbury & Districts Actions for #31:

Public Health Sudbury & Districts currently has an Indigenous member on its Board of Health and continues to prioritize Indigenous voices in governance. Public Health Sudbury & Districts has

- Communicated with First Nation and urban Indigenous partners regarding opportunities for board representation;
- Invited communities to nominate or recommend off-reserve band members; and,
- Worked to identify and reduce barriers to participation, consistent with principles of equity and inclusion.

Recommendation #33:

To support equitable, informed, and culturally respectful public health interventions and responses, the Ministry of Health should consider requiring local Boards of Health to collect race, ethnicity, and Indigenous identity data (where appropriate) for all diseases of public health significance, including blastomycosis. Data on Indigenous identity should be collected in partnership with Indigenous communities and aligned with OCAP data principles.

Public Health Sudbury & Districts Actions for #33:

Public Health Sudbury & Districts is advancing secure and respectful data sharing through

- Existing Band Council Resolution (BCR) with a First Nation for case and contact management;
- Memoranda of Understanding for harm reduction signed with the following First Nations and organizations:
 - Atikameksheng Anishnabek
 - Aundeck Omni Kanig First Nation
 - Brunswick House First Nation
 - Chapleau Cree
 - Chapleau Ojibway
 - Enahtig Healing Lodge
 - Gwekwaadziwin Miikan
 - M'Chigeeng First Nation Health Services
 - Mnaamodzawin Health Services Inc.
 - Naandwe Miikaan – Naandwechige-Gamig (Wiky Health Centre)
 - Ngwaagan Gamig Recovery Centre
 - Noojmowin-Teg Health Centre
 - Sheshegwaning First Nation
 - Zhiibahaasing First Nation
 - Sheguindah First Nation

- Ontario Aboriginal HIV AIDS Strategy (OAHAS)
- Shkagamik Kwe Health Centre
- UCCM Anishnabek Police
- Wahnapiatae Norman Recollet Health Centre
- Whitefish River First Nation
- Wiidookaage Waadandan Inc.
- Wikwemikong Tribal Police Service
- **First Nations that border Public Health Sudbury & Districts's Service Area**
 - Sagamok Anishnawbek
- The development of an Indigenous Data Sovereignty Strategy which will explore future data-sharing agreements with interested communities; and,
- Ensuring community consultation informs what data is shared, how it is shared, and for what purposes.

All information-sharing initiatives are guided by OCAP® principles and community-driven consent.

Recommendation #34:

PHO, the Ministry of Health, and ISC should collaborate to establish a secure information sharing process (in alignment with OCAP data principles) among relevant public health agencies.

Public Health Sudbury & Districts Actions for #34:

Public Health Sudbury & Districts is committed to Indigenous data sovereignty and is currently

- In the beginning stages of planning to develop an Indigenous Data Sovereignty Strategy, including engaging Indigenous communities to guide how identity data is collected, used, stored, and shared by ensuring this work is done in a good way;
- Including Indigenous identity collection into the new electronic medical records (EMR) and surveillance data systems as per the Indigenous Data Sovereignty Strategy, ensuring key staff have completed OCAP® training, with plans to expand training for staff involved in, research, health promotion, data collection and use.

Recommendation #35:

A trilateral table should be established for the First Nations Information Governance Centre. ISC and the Ministry of Health to engage in a process to explore and achieve the development of legislation, information sharing protocols, and/or memorandum of understanding to address the

collection, use, and disclosure of personal health information and personal information relating to members of First Nations communities and First Nations health data, including for research purposes, guided by OCAP principles. This process would include but not be limited to information sharing in times of a public health emergency and should include consultation with the Information and Privacy Commissioner of Ontario.

Public Health Sudbury & Districts Actions for #35:

Public Health Sudbury & Districts supports Indigenous-led data governance and recognizes that First Nations must lead the development of information-sharing frameworks that affect their communities. While broader legislative and trilateral processes fall outside Public Health Sudbury & Districts' direct authority, Public Health Sudbury & Districts is

- Working collaboratively with First Nations communities and ISC;
- Advancing its Indigenous Data Sovereignty Strategy in alignment with OCAP® principles, CARE principles and community collaboration; and,
- Supporting consistent, informed, and respectful approaches to Indigenous health data governance.

December 15, 2025

Public Health Sudbury & Districts
10 Elm St,
Sudbury ON
P3C5N3

Re: 2026 Public Health Sudbury & Districts Budget Presentation

The following resolution was ratified by Council of the City of Greater Sudbury on November 25, 2025:

WHEREAS many health issues are worsening in the community, and there is a growing need for the prevention work undertaken by public health;

AND WHEREAS in 2023 the Ontario government committed to restoring funding for public health units to the level previously provided under the 75 percent provincial / 25 percent municipal cost sharing ratio;

AND WHEREAS in 2026 the Province's share of the 2026 Public Health Sudbury & Districts budget will be 61.6 percent, meaning that municipalities will need to fund \$3.8 million more than their share to make up for the shortfall;

AND WHEREAS the City of Greater Sudbury's share of the \$3.8 million shortfall is \$3.2 million;

THEREFORE BE IT RESOLVED that the City of Greater Sudbury directs that a letter be sent on behalf of the Mayor and Council to the Honourable Doug Ford, Premier of Ontario, the Honourable Sylvia Jones, Minister of Health, and Deborah Richardson, Deputy Minister of Health, to advocate that the Province of Ontario restore funding for public health units to the 75 percent provincial share of the cost-sharing ratio it previously committed to;

AND BE IT FURTHER RESOLVED that a copy of the letter be sent to the Board of Health for Public Health Sudbury & Districts, the Association of Municipalities of Ontario and the Association of Local Public Health Agencies.

Yours truly,



Brigitte Sobush
Manager of Clerk's Services/Deputy City Clerk
c. Members of City Council

