

**MINUTES – FOURTH MEETING
SUDBURY & DISTRICT BOARD OF HEALTH
SUDBURY & DISTRICT HEALTH UNIT, BOARDROOM
THURSDAY, JUNE 18, 2015, AT 1:30 P.M.**

BOARD MEMBERS PRESENT

Claude Belcourt
René Lapierre
Ken Noland
Mark Signoretto (arrived at 1:40 pm)

Janet Bradley
Stewart Meikleham
Rita Pilon
Carolyn Thain

Robert Kirwan (arrived at 1:50 pm)
Paul Myre
Ursula Sauvé

BOARD MEMBERS REGRETS

Jeffery Huska

Paul Schoppmann

STAFF MEMBERS PRESENT

Shelley Westhaver
Stacey Laforest

Nicole Frappier
Rachel Quesnel

Marc Piquette
Dr. P. Sutcliffe

GUESTS

Dr. X. Wang, NOSM Resident
Dr. J. Jackman, NOSM Resident
Media

R. LAPIERRE PRESIDING

1.0 CALL TO ORDER

The meeting was called to order at 1:30 p.m.

2.0 ROLL CALL

3.0 DECLARATION OF CONFLICT OF INTEREST

None.

4.0 DELEGATION / PRESENTATION

i) New Sudbury & District Health Unit Website

- Jamie Lamothe, Senior Communications Officer, Corporate Services Division
- Cynthia Peacock-Rocca, Manager, Environmental Health Division

J. Lamothe was invited to introduce and demonstrate the *new* SDHU website. The new site has been developed to:

- improve how information is organized on the site and enhance the information that is provided to clients as well as the services offered to them through the site;
- upgrade to a highly functional and easy-to-use open-source software that adapts to future needs and offers the SDHU flexibility of working with various vendors;
- increase the accessibility of the website so that individuals with disabilities are able to better access and use the site.

The SDHU is ensuring it meets specific obligations under the Accessibility for Ontarians with Disabilities Act (AODA) so that its website and its contents are as accessible as possible. For example, it is now possible for people who use assistive technologies to easily navigate the site and the information is offered in different formats such as posted scripts for videos.

The multi-device compatibility includes a responsive design allowing full content to be displayed on various devices such as mobile phones, tablets, and desktops. The navigation meets the user's needs and applies research-based web design principles, based on usability studies and best practices and includes structures that encourage exploring other content. The customer service feature makes it easier for clients to connect with us and request services, e.g. requesting appointments for clinics or using online registration for certain classes.

C. Rocca was welcomed to demonstrate the updated *Check Before You Eat* inspection disclosure website and new public education program. The SDHU has had a proactive food safety inspection results disclosure site in place since 2009. This updated disclosure site has now been rebranded the "Check Before You Eat!" site. The updated site features an interactive map of our service area that illustrates the location of all food premises where the user can access detailed inspection data for each food premises.

In 2014, the BOH passed motion 32-14 directing staff to enhance its promotion of safe food handling and the food safety program, with particular emphasis on the food safety inspection program and how to access inspection information. The Check Before You Eat decal program is being initiated now that the Check Before You Eat feature in on our new website. Owners and operators of food premises will be receiving a package in the mail shortly that contains various information such as the Check Before You Eat decal, a description of the program and the bi-annual Food Watch newsletter. A media release will subsequently be sent to all media outlets advising the public of this new program.

Questions and comments were entertained and Dr. Sutcliffe thanked the teams involved with these collaborative projects that crossed over the whole organization under the leadership of J. Lamothe. We will continue to improve the site and staff are excited regarding its functionalities, accessibility and further potential for the future.

5.0 MINUTES OF PREVIOUS MEETING

i) Third Meeting – May 21, 2015

A question concerning the 100% funded Healthy Communities Partnership Fund was entertained.

23-15 APPROVAL OF MINUTES

Moved by Noland – Myre: THAT the minutes of the Board of Health meeting of May 21, 2015, be approved as distributed.

CARRIED

6.0 BUSINESS ARISING FROM MINUTES

None.

7.0 REPORT OF THE MEDICAL OFFICER OF HEALTH / CHIEF EXECUTIVE OFFICER

i) June 2015 – Medical Officer of Health / Chief Executive Officer Report

Words for thought in this month's report introduces the new Air Quality Health Index (AQHI) that will be launched by the province this month. The AQHI will forecast and report on air quality and educate the public on the health risks associated with air pollution. It will also provide health-based recommendations and offer specific advice for people who are vulnerable to the effects of air pollution. The Sudbury & District Health Unit (SDHU) will be including the AQHI in its public health messaging.

Board members are encouraged to read and provide feedback regarding the SDHU's 2014 annual report titled *Public Health: It's in Your Interest*. The report has been designed for a widespread distribution electronically and is Accessibility for Ontarians with Disabilities Act (AODA) compliant.

The Association of Local Public Health Agencies (aLPHa), the Sudbury & District Board of Health and other Ontario boards of health have been advocating to the province to ensure enough time is taken to effectively plan for the integration of the provincial oral health programs to ensure more children and youth have access to free dental care. Board members were informed that the Ministry of Health and Long-Term Care has recently announced that it is extending the August 1, 2015, deadline for this integration to January 2016.

Board members were thanked for attending the SDHU's inaugural Public Health Champion Award ceremony this morning at 10:30 a.m. The first ever recipient is Franco Marriotti, retired Science North biologist, in recognition of his leadership in numerous environmental initiatives.

The May 21 meeting with the LaCloche Foothills Association was deferred by the Association. Dr. Sutcliffe reported on a meeting held on May 21, 2015, with representatives of the Sudbury East Municipal Association (SEMA) where there was good dialogue regarding public health in Ontario, the SDHU as well as local public health programs and services, needs and issues. In response to SEMA's request, the SDHU has prepared a report that is specific to the Sudbury East area summarizing Sudbury East activities for 2014. The report will be shared with the Board with today's addendum and will then be shared with SEMA. It is the SDHU's intention to produce a similar report for each of our district office areas.

Dr. Sutcliffe reported on the Council of Ontario Medical Officers of Health (COMOH) Section meeting on June 9, 2015, following the aLPHa AGM and resolution session which she as well as Board members J. Bradley and U. Sauvé attended. Both Board members were invited to provide verbal highlights regarding the aLPHa Annual Conference 2015, Rethinking Public Health, held from June 7 to 9 in Ottawa.

U. Sauvé provided an overview of the conference themes and resolutions that were carried during the resolution session. J. Bradley summarized the conference topics and provided highlights from a workshop during the Board section meeting by Valerie Tarasuk from the University of Toronto regarding food insecurity in Canada. The workshop helped Board members gain an understanding of this important public health problem and to discuss possible policy solutions through an interactive learning experience. This workshop summary prompted a discussion among the Sudbury & District Board of Health members regarding contributing factors towards food insecurities confirming this Boards' commitment to addressing health inequities.

J. Bradley displayed a plaque that Dr. Sutcliffe received at the June alPHa meeting in recognition of her work as alPHa President following a two-year term as Chair of COMOH. Board members congratulated Dr. Sutcliffe recognizing her contributions to the public health system at the provincial level.

A postcard regarding sustainable food was distributed to the Board members who were invited to attend a local conference on October 3.

The Senior Management Executive Committee has been carefully monitoring changes in the expectations of local public health and considering the implications for the SDHU structure and initiatives, such as the increased emphasis on community and stakeholder engagement and communications as per the Ontario Public Health Organizational Standards. Recent organizational changes align the SDHU to ensure capacity for strategic leadership. These changes, which are within the board-approved budget parameters, include the creation of the Assistant Director, Strategic Engagement, a change in one position to Senior Communications Officer and elimination of the Manager of Communications position.

With the position being vacant since September 2013, active recruitment for the Associate Medical Officer of Health position will resume shortly.

This monthly report outlines the twice yearly Corporate Services divisional routine updates and items that require mandatory reporting. More timely issues are included in the monthly MOH/CEO reports.

Submissions of eight ticks to the Public Health Ontario lab identified two blacklegged ticks and one testing positive for the bacteria that causes Lyme disease.

The SDHU continues to monitor the Gogama train derailment situation as it relates to water quality and fish consumption.

Questions and comments were entertained. Clarification was provided regarding the types of requests the SDHU receives relating to freedom of information requests.

24-15 ACCEPTANCE OF REPORTS

Moved by Belcourt – Noland: THAT the Report of the Medical Officer of Health and Chief Executive Officer for the month of June 2015 be accepted as distributed.

CARRIED

8.0 NEW BUSINESS

i) Items for Discussion

a) Immunization of School Pupils Act (ISPA) Enforcement

- Briefing Note from the Medical Officer of Health dated June 11, 2015

Beginning in the 2014/15 school year, elementary and secondary school students were required to comply with changes in the *Immunization of School Pupils Act* (ISPA). Health units across the province experienced a significant increase in workload relating to the enforcement of the ISPA which also coincided with the role out of the provincial electronic immunization module of Panorama. Some health

units indicated that they are unable to uphold the ISPA and the Chief Medical Officer of Health subsequently communicated a clear directive to Ontario public health units to ensure that, by September 2015, all school-aged children are compliant with the ISPA provisions.

Dr. Sutcliffe reassured the Board that the SDHU has been responsive to the changes in legislation under the leadership of Shelley Westhaver, Director, Clinical and Family Services. Alignment of resources has allowed us to be compliant with the legislation and ensure a good position with Panorama. However, these efforts have also resulted in challenges for the Health Unit related to duplicate records or unreported immunizations.

The proposed motion today calls for an electronic immunization record and common electronic data base to address the current challenges at the local public health level in collecting immunization data.

25-15 ENFORCEMENT OF THE IMMUNIZATION OF SCHOOL PUPILS ACT (ISPA)

Moved by Pilon – Thain: WHEREAS each public health unit in Ontario is required to enforce the Immunization of School Pupils Act by assessing and maintaining immunization records of school pupils (students) each year; and

WHEREAS parents/guardians whose child(ren) receive vaccine at a health care provider other than public health are required to provide notification of their child's immunizations to their local public health unit; and

WHEREAS healthcare providers are not required under the provisions of the Health Protection and Promotion Act to report immunizations to the Medical Officer of Health; and

WHEREAS incomplete immunization records create significant challenges to the enforcement of the ISPA indicated by the numbers of students suspended from attendance at school under the Act, as well as parental and guardian frustration;

THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health recommend to the Minister of Health and Long Term Care that amendments to provincial regulations be made requiring health care providers to report to the Medical Officer of Health all immunizations administered to individuals under 18 years of age.

FURTHER THAT the Sudbury & District Board of Health advocate to the Minister of Health and Long Term Care for the integration of all health care provider electronic immunization records onto a common electronic data base to ensure efficient and accurate sharing of immunization records.

FURTHER THAT this motion be forwarded to the Association of Local Public Health Agencies, the Chief Medical Officer of Health and all Ontario Boards of Health.

CARRIED

b) Board of Health Manual

- Briefing Note to the Board Chair dated June 11, 2015

A review has been undertaken of the Board Manual and revisions are proposed for the Board's approval. Dr. Sutcliffe highlighted significant changes which, if approved, will be posted on Board Effect.

While most changes are housekeeping in nature to reflect the Board's shift from paper to electronic meetings, other updates were required to reflect legislation and the Ontario Public Health Organizational Standard.

A new information sheet recommends the establishment of a Board Finance Standing Committee. Other noteworthy changes include the delegation of authority under the Municipal Freedom of Information and Protection of Privacy Act to the MOH and the requirement for the Board Chair's approval of MOH expenses.

Questions were entertained.

26-15 BOARD OF HEALTH MANUAL

Moved by Signoretti – Belcourt: THAT the Board of Health, having reviewed the Board of Health Policy & Procedure Manual, approves the contents therein.

CARRIED

Discussion ensued regarding terms for the Finance Standing Committee, Board Executive Committee as well as for the elected Chair and Vice-Chair. Pros and cons were shared and it was clarified that the Health Protection and Promotion Act stipulates that the term of for the Chair and Vice-Chair are for the year.

27-15 BOARD OF HEALTH FINANCE STANDING COMMITTEE

Moved by Myre – Meikleham: THAT the Sudbury & District Board of Health appoint the following three Board of Health members to the Board of Health Finance Standing Committee for 2015:

1. ***Carolyn Thain***
2. ***René Lapierre***
3. ***Claude Belcourt***

CARRIED

c) Healthy Babies Healthy Children (HBHC) Program

- Briefing Note from the Medical Officer of Health dated June 11, 2015

The HBHC program is 100% provincial funded where public health nurses and family home visitors provide supportive services to new families. This program has been subject to a funding freeze for several years. This Board previously advocated for adequate funding for the HBHC program twice by board motions in 2010 and 2004, joining other Ontario Boards of Health as this is a well known issue throughout the province. Although some other health units have decided to reduce the HBHC services in their health units, the SDHU is not proposing such action at this time.

28-15 HEALTHY BABIES HEALTHY CHILDREN (HBHC) PROGRAM

Moved by Pilon – Thain: WHEREAS the Healthy Babies Healthy Children (HBHC) program is a prevention/early intervention initiative designed to ensure that all Ontario families with children (prenatal to age six) who are at risk of physical, cognitive, communicative, and/or psychosocial problems have access to effective, consistent, early intervention services; and

WHEREAS the Healthy Babies Healthy Children program is a mandatory program for Boards of Health; and

WHEREAS in 1997 the province committed to funding the Healthy Babies Healthy Children program at 100% and the HBHC budget has been flat-lined since 2008; and

WHEREAS collective agreement settlements, travel costs, pay increments and accommodation costs have increased the costs of implementing the HBHC program, the management and administration costs of which are already offset by the cost-shared budget for provincially mandated programs; and

WHEREAS the HBHC program has made every effort to mitigate the outcome of the funding shortfall, this has becoming increasingly more challenging and will result in reduced services for high-risk families if increased funding is not provided.

THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health direct staff to prepare a budget and program analysis of the HBHC program, outlining pressures and options for mitigation, detailing program and service implications of these options as compared against Ministry of Children and Youth Services expectations; and

FURTHER THAT the Sudbury & District Board of Health advocate strongly to the Minister of Children and Youth Services to fully fund all program costs related to the Healthy Babies Healthy Children program, including all staffing, operating and administrative costs.

FURTHER THAT this motion be forwarded to the Ministers of Children and Youth Services and Health and Long-Term Care, the Association of Local Public Health Agencies, Ontario Boards of Health and the Chief Medical Officer of Health.

CARRIED

d) Disclosure and Transparency

- Briefing Note from the Medical Officer of Health dated June 11, 2015
- Memorandum from Ministry of Health and Long-Term Care Executive Director, R. Martino, to Medical Officers of Health and Associate Medical Officers of Health dated June 9, 2015

The briefing note details the province's direction towards transparency in reporting practices such as through revised Ontario Public Health Standards requiring public disclosure of non-routine infection prevention and control lapse investigations.

The Sudbury & District Health Unit will comply with requirements outlined in the revised Ontario Public Health Standards upon their release. We have already

begun to explore the concept of open government and the potential implications for public health work.

The Check Before You Eat campaign is an example of SDHU initiatives moving toward more transparency of non-routine inspections. Dr. Sutcliffe noted that each scenario of reporting has to be assessed for risk and feasibility to ensure nothing is jeopardized and privacy is protected, such as releasing charges and convictions under the Smoke-Free Ontario Act Charges.

The proposed motion is seeking the Board's support for the spirit of the direction for the SDHU to develop detailed reporting practices for disclosure.

Questions were entertained.

29-15 TRANSPARENCY IN REPORTING PRACTICES

Moved by Thain – Meikleham: WHEREAS the Minister of Health and Long-Term Care has requested that each Board of Health and Medical Officer of Health make transparency a priority objective in business plans; and

WHEREAS the Minister of Health and Long-Term Care has requested that each Board of Health and Medical Officer of Health publicly disclose more detailed information with respect to non-routine infection prevention and control lapse investigations in accordance with planned revisions to the Ontario Public Health Standards; and

WHEREAS the Minister of Health and Long-Term Care has requested that each Board of Health and Medical Officer of Health take steps towards developing and establishing new reporting practices to make information readily available to the public; and

WHEREAS the Sudbury & District Health Unit has made a commitment to transparency;

THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health direct staff to plan appropriate actions to increase transparency in public reporting practices including expansion of the current proactive disclosure system and revisions to applicable sections of the Board of Health manual.

CARRIED

- e) Sudbury & District Health Unit 2013-2017 Performance Monitoring Plan**
 - Strategic Narrative Report, June 2015

Joint Board/Staff Performance Monitoring Working Group member, R. Pilon, was invited to speak to the summer edition of the Strategic Narrative Report dated June 2015. The Working Group recently reviewed the five key SDHU activities that are included in the report.

R. Pilon reviewed the five strategic priority narratives which are each linked to a strategic priority and represent the broad scope of work across all division and our district offices. The process for collecting and selecting the narratives was also reviewed. Kudos were extended to staff for their work which clearly aligns with the Board's strategic priorities.

ii) Correspondence

a) Access to Alcohol

Sudbury & District Board of Health Motion #08-15 Modernization of Beverage Alcohol Regulations in Ontario

- Letter from the Premier to the Sudbury & District Health Unit Medical Officer of Health dated May 15, 2015

No discussion.

b) Smoke-Free Multi-Unit Housing

- Letter from the Perth District Health Unit Board to the Minister of Health and Long-Term Care dated May 19, 2015

No discussion.

c) Bill 45, Making Healthy Choices Act

- Letter from the Peterborough County-City Health Unit Board Chair to the Premier of Ontario dated May 14, 2015
- Email from M. Greenberg dated May 26, 2015

No discussion.

d) Low Income Dental Integration

- Letter from R. Martino, Executive Director, Public Health Division, and M. Greenberg, Interim ADM, Health Promotion Division, Ministry of Health and Long-Term Care dated June 2, 2015
- Health Bulletin dated May 29, 2015

No discussion.

e) Basic Income Guarantee

- Letter from Simcoe Muskoka District Board of Health to the Federal and Provincial Government dated May 28, 2015

No discussion.

f) Ontario Public Health Standards – Amendments to the Institutional/Facility Outbreak Prevention and Control Protocol

- Memo from Interim Chief Medical Officer of Health to Board Chairs, Associate/Medical Officers of Health dated May 29, 2015

No discussion.

30-15 ACCEPTANCE OF NEW BUSINESS ITEMS

Moved by Meikleham – Myre: THAT this Board of Health receives New Business items 8 i) to ii).

CARRIED

9.0 ITEMS OF INFORMATION

- | | | |
|------|---|--------------|
| i) | SDHU Strategic Plan Newsletter
(English and French versions) | Spring 2015 |
| ii) | Ministry of Health and Long-Term Care
News Release “ <i>Joint Statement by Ministerial
Participants of Pharmacare Roundtable</i> ” | June 8, 2015 |
| iii) | 2015 Sudbury & District Health Unit’s
Annual Report (English and French versions) | |

A print copy of the annual report is available for the Board; however, the report will be shared with others electronically.

10.0 ADDENDUM

31-15 ADDENDUM

Moved by Meikleham – Myre: THAT this Board of Health deals with the items on the Addendum.

CARRIED

DECLARATION OF CONFLICT OF INTEREST

There were no declarations of conflict of interest.

i) Algoma Public Health

- Assessor’s Report on Algoma Public Health, *April 24, 2015*
- Ministry of Health and Long-Term Care Actions on Assessor’s Report, *June 2015*
- Letter from the District of Algoma Health Unit Board of Health Chair to the Sudbury & District Board of Health Chair dated June 17, 2015

On June 16, 2015, the Minister of Health and Long-Term Care was in Sault Ste. Marie to publicly share the Assessor’s Report on the Algoma Public Health and the MOHLTC’s response and actions to the report which are summarized the MOHLTC Actions on Assessor’s Report, June 2015.

Recommendations in the Assessor’s report were summarized by Dr. Sutcliffe.

The Sudbury & District Board of Health were appreciative of the letter from the Algoma Public Health Board of Health recognizing this Board’s support as well as coverage by Dr. Sutcliffe as Acting MOH and by Sandra Laclé as Acting Chief Executive Officer.

The potential implications from the assessor’s report and Ministry actions were discussed such as the skills based board. One of the recommendations in the Assessor’s report was the possible merger with the Sudbury & District Board of Health; however, the Ministry has

indicated that this will be reviewed in the larger context of public health review as indicated in the Minister's mandate letter.

Questions were entertained.

The situation will be closely monitored as to future direction and the Board will be kept apprised of any actions or new developments. Should actions or discussions take place regarding the merger recommendation, this Board would be convened to discuss implications.

ii) Association of Local Public Health Agencies (ALPHA) Resolutions Session, 2015 Annual General Meeting (AGM)

- Disposition of Resolutions, *June 2015*

Previously discussed under agenda item 7.0

iii) 2014 Snapshot of Public Health – Sudbury East Report, June 2015

The 2014 Snapshot of Public Health Report provides a summary of public health activities that have taken place in the Sudbury East area in 2014. Board members are encouraged to read the report. The SDHU is exploring the feasibility of developing a similar report for other areas within its catchment area, including Chapleau and municipal associations of Lacloche Foothills and Manitoulin Island.

iv) Northern Ontario Evacuation of First Nation Communities – Resolution 50-2015

- Letter from the Thunder Bay District Health Unit Medical Officer to Dr. Sutcliffe dated April 13, 2015

The Thunder Bay District Board of Health is seeking support from other Boards of Health to encourage the provincial government to review existing protocols and plans for a better and safer First Nation evacuation/relocation process.

The Sudbury & District Board of Health agreed that the correspondence to the provincial government should be shared with local municipalities.

32-15 NORTHERN ONTARIO EVACUATIONS OF FIRST NATIONS COMMUNITIES

Moved by Sauvé – Bradley: WHEREAS the evacuation and relocation of residents of a number of First Nations communities in Northwestern Ontario and along the James Bay Coast, is required on a close to annual basis due to seasonal flooding and risk of forest fires; and

WHEREAS a safe, effective, and efficient temporary community relocation is challenging within the current reactive model; and

WHEREAS a proactive, planned and adequately resourced evacuation system would ensure the maintenance of quality evacuation centers in pre-selected host municipalities, as well as appropriate infrastructure to ensure the health and safety of evacuees in a culturally acceptable manner; and

WHEREAS the Thunder Bay District Board of Health passed a motion on March 18, 2015, and has submitted a letter dated April 10, 2015 to the Honourable Kathleen Wynne requesting that the provincial government address the ongoing lack of resources and infrastructure to ensure the safe, efficient and effective temporary relocation of First Nations communities in Northwestern Ontario and the James Bay coast when they face environmental and weather related threats in the form of seasonal flooding and forest fires;

THEREFORE BE IT RESOLVED THAT the Sudbury and District Board of Health support the Thunder Bay District Board of Health's resolution 50-2015 dated March 18, 2015; and

FURTHER THAT a copy of this motion be forwarded to the Premier of Ontario, Ministers responsible for Health and Long-Term Care, Community Safety and Correctional Services, Aboriginal Affairs, Northern Development and Mines, Natural Resources and Forestry, local area Members of Provincial Parliament and all Ontario Boards of Health.

CARRIED

13.0 ANNOUNCEMENTS / ENQUIRIES

Kudos were extended to the SDHU and staff for its contributions to the most recent Rainbow Routes new trail map project.

Board members were encouraged to completed the Board evaluation regarding today's Board meeting.

14.0 ADJOURNMENT

33-15 ADJOURNMENT

Moved by Bradley – Sauv : THAT we do now adjourn. Time: 3:56 p.m.

CARRIED

(Chair)

(Secretary)