

Addendum: Board of Health Meeting

Thursday, October 17, 2019

**ADDENDUM – SIXTH MEETING
BOARD OF HEALTH
OCTOBER 17, 2019**

7.0 ADDENDUM

DECLARATIONS OF CONFLICT OF INTEREST

- i) Vaping and Vapour Products
 - Letter from the Board of Health Chair, Kingston, Frontenac and Lennox & Addington Public Health to the Minister of Health dated October 11, 2019
 - Public Health Agency of Canada News Release Re Statement from the Council of Chief Medical Officers of Health on vaping in Canada dated October 11, 2019
- ii) Expansion of Alcohol Retail Outlets
 - Letter from the Board of Health Chair, Southwestern Public Health to the Minister of Health dated September 11, 2019
- iii) Public Health Modernization – North East Public Health Transformation Initiative

PUBLIC HEALTH MODERNIZATION – NORTH EAST PUBLIC HEALTH TRANSFORMATION INITIATIVE

MOTION:

WHEREAS in its April 2019 budget, the Government of Ontario announced transformations to the public health system; and

WHEREAS on September 12 and on October 10, 2019, respectively, Deputy Minister Helen Angus announced the new roles of Executive Lead (Assistant Deputy Minister Alison Blair) and of Special Advisor (Mr. Jim Pine) for public health modernization; and

WHEREAS it was communicated that the Special Advisor will play a key role in facilitating discussions between the Ministry of Health, municipal elected officials and administrative leadership on public health and on emergency health services; and

WHEREAS the five Boards of Health in North East Ontario*, having been engaged since 2017 in identifying opportunities for collaboration and potential shared services, remain committed to continued collaboration;

THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts support the request of the Chairs of the five Boards of Health in the North East, namely that the Ministry of Health hold public health consultation sessions that are separate and distinct from the emergency health services consultation sessions;

AND FURTHER THAT the July 2019 submission to Deputy Helen Angus and Chief Medical Officer of Health Dr. David Williams, Transforming Public Health for the People of Northeastern Ontario, be shared with Mr. Jim Pine and ADM Blair;

AND FURTHER THAT Mr. Pine be invited to meet with the leadership of the five North East Boards of Health to share the work of the North East Public Health Transformation Initiative and engage further on developing a local public health system that best meets the public health needs of the people of the North East.

*** Algoma Public Health, North Bay Parry Sound District Health Unit, Porcupine Health Unit, Public Health Sudbury & Districts, and Timiskaming Health Unit**

October 11, 2019

The Honourable Christine Elliott, Deputy Premier
Minister of Health
Hepburn Block 10th Floor
80 Grosvenor Street
Toronto, ON M7A 1E9

Dear Minister Elliott:

Re: Vapour Products Display and Promotion

The Kingston, Frontenac and Lennox & Addington (KFL&A) Board of Health is writing to you to express deep concerns about the on-going promotion of vaping products in Ontario.

While vapour products are generally regarded as safer than combustible tobacco cigarettes, these products are not risk-free and are known to contain and emit potentially toxic substances. KFL&A Board of Health is alarmed by the rising vaping rates among youth. The sharp increase in youth vaping rates is especially concerning given the availability and promotion of nicotine containing vapour products, the impact of nicotine on the developing brain, and the recent upward trending of cigarette smoking among this population. Our concerns are further compounded by the vaping related pulmonary disease reports emerging from the United States, Quebec and our own province.

A suite of robust regulatory measures is needed to address the rise in vapour product use and to protect our most vulnerable populations from the harms associated with these products. Because exposure to vapour products marketing and advertising decreases the perception of the associated risk of vaping and increases the odds of trying these products, immediate action is needed to limit youth's exposure to product promotion. Our youth and young adults are frequently being exposed to vaping advertising on the internet, at point of sale in convenience stores and gas stations, as well as on television, magazines, billboards, social media, and public transit. To that end, KFL&A Board of Health passed the following motion on 2019-09-25:

THAT the KFL&A Board of Health urge the Provincial Government to immediately remove Sections 21 and 22 of Regulation 268 of the Smoke-Free Ontario Act, 2017, so that retailers of vaping products will not be allowed to promote them and so that the promotion and display of vape products are subject to the same prohibition as tobacco products.

.../2

Kingston, Frontenac and Lennox & Addington Public Health

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KFL&A Board of Health applauds the Government of Ontario's recently expressed concerns about youth vaping and the health risks and your willingness to find evidence-informed solutions to address this emerging public health issue.

Sincerely,



Denis Doyle, Chair
KFL&A Board of Health

*Copy to: Ian Arthur, MPP Kingston and the Islands
 Randy Hillier, MPP Lanark-Frontenac-Kingston
 Daryl Kramp, MPP Hastings-Lennox and Addington
 Mark Gerretsen, MP Kingston and the Island
 Scott Reid, MP Lanark-Frontenac-Kingston
 Mike Bossio, MP Hastings-Lennox and Addington
 Ginette Petitpas Taylor, Minister, Health Canada
 Dr. David Williams, Chief Medical Officer of Health, Ministry of Health
 Dr. Theresa Tam, The Chief Public Health Officer
 Loretta Ryan, Association of Local Public Health Agencies
 Ontario Boards of Health*

NEWS FROM PUBLIC HEALTH AGENCY OF CANADA

Transmitted by Cision on October 11, 2019 10:16

Statement from the Council of Chief Medical Officers of Health on vaping in Canada

OTTAWA, Oct. 11, 2019 /CNW/ - We are increasingly concerned by the substantial rise of vaping among Canadian youth. As nicotine in any form is highly addictive, non-smokers who vape products containing nicotine are at risk of going on to use tobacco products such as cigarettes.

As we stated in [April 2019](#), Canada has seen the rates of youth smoking decline significantly in recent years, but youth are now turning to vaping in large numbers. We are very concerned that a new generation of youth addicted to nicotine will lead to a resurgence in smoking—reversing decades of progress and creating new public health problems.

Youth are particularly susceptible to nicotine's negative effects, which can include altering their brain development and affecting their memory and concentration.

While the harms of vaping products are starting to emerge, researchers are still gathering data on their potential effectiveness as a means of helping smokers quit smoking. What we do know is that, regardless of a person's age, vaping can lead to nicotine addiction and can increase exposure to harmful chemicals for people who are non-smokers.

Individuals who use vaping products breathe in a mixture of chemicals, which include harmful and potentially harmful substances such as nicotine, solvents, cancer-causing chemicals (e.g., formaldehyde), heavy metals and flavourings. It is also not clear what underlying risk there may be from inhalation of ultra-fine particles created by the mechanism of vaping technology that permits inhalation deep into the lung.

Some chemicals (e.g., flavourings) in vaping products may be safe to eat, but have not necessarily been tested for safety when inhaled. Limited information is available on the health effects of inhaling glycerol (a common vaping diluent) and the majority of flavourings used in vaping liquids.

We cannot stand by and watch a new generation of Canadians become dependent on nicotine or be exposed to products that could have significant negative consequences for their health.

We are also very concerned about the emergence of severe pulmonary illness related to vaping in the United States and now in Canada. We have been working together to monitor

the situation closely, to identify potential cases in Canada, and to support the investigation into the cause(s) of the illnesses.

To date, the investigation into severe pulmonary illness in the United States suggests that products containing tetrahydrocannabinol (THC) play a role in the outbreak. The suspected cause is a chemical exposure, but the specific chemical or chemicals remain unknown at this time. No single product or substance has been linked to all cases, and more information is needed to know whether a single product, substance, brand or method of use is responsible for the outbreak.

While the severe pulmonary illnesses related to vaping are under investigation, we recommend to all Canadians that:

- You consider refraining from using e-cigarettes or vaping products, particularly any products that have been purchased illegally, including any products that contain THC. Cannabis use has risks, some of which remain unknown and can have short- and long-term harms to your health, including dependence.
- You see a healthcare provider immediately if you have recently used vaping products and you have symptoms of pulmonary illness (e.g., cough, shortness of breath, chest pain) like those reported in the outbreak.
- You not return to smoking cigarettes if you are using nicotine-containing vaping products as a means of quitting cigarette smoking.

Even in the absence of the severe pulmonary illnesses related to vaping, Canadians should remember that:

- If you don't smoke, don't vape.
- Vaping is not recommended for youth, pregnant women, or adults who do not currently use tobacco products.
- Youth who vape should seek support to quit completely.
- Youth and adults currently vaping nicotine should NOT switch to smoking tobacco products.
- If you use vaping products, do not buy them from illegal or unregulated sources, including products containing THC. Products obtained from the illegal market are not subject to any controls or oversight and may pose additional risks to your health and safety.
- You should never modify vaping products or add any substances to these products that are not intended by the manufacturer.
- You should let your health care provider know about your vaping history, especially if you have respiratory symptoms.

Adults and youth needing support to deal with nicotine addiction, whether they are using tobacco or vaping products, should speak to their health care provider and seek out proven

cessation therapies, such as medication, or approved nicotine replacement therapies, such as gums, patches and lozenges. Canadians can also access supports from trained specialists who can help them develop a quit-smoking plan and provide referrals in their community.

We reiterate our call from April: We need to create environments that prevent youth vaping by strengthening regulatory frameworks and policies that restrict the accessibility and availability of vaping products and reduce the appeal of such products to youth. This includes plain packaging, health warnings and regulating the sale and marketing of vaping products and flavourings, and putting in place school and community policies that reduce use and encourage positive youth development.

In Canada, we have seen the first cases of pulmonary illness related to vaping and a number of other incidents are under investigation. Together with colleagues in the United States, we are all doing our part to find out what is causing these illnesses. Until more is known, we repeat our call for Canadians to consider refraining from vaping.

Dr. Theresa Tam
Chief Public Health Officer of Canada

Dr. Bonnie Henry
Provincial Health Officer, British Columbia
Chair, Council of Chief Medical Officers of Health

Dr. Brendan E. Hanley
Chief Medical Officer of Health, Yukon
Vice-Chair, Council of Chief Medical Officers of Health

Dr. Janice Fitzgerald
I/Chief Medical Officer of Health, Newfoundland and Labrador

Dr. Heather Morrison
Chief Public Health Officer, Prince Edward Island

Dr. Robert Strang
Chief Medical Officer of Health, Nova Scotia

Dr. Jennifer Russell
Chief Medical Officer of Health, New Brunswick

Dr. Horacio Arruda
Director of Public Health and Assistant Deputy Minister
Ministry of Health and Social Services, Québec

Dr. David Williams
Chief Medical Officer of Health, Ontario

Dr. Brent Roussin
Chief Public Health Officer, Manitoba

Dr. Saqib Shahab
Chief Medical Health Officer, Saskatchewan

Dr. Deena Hinshaw
Chief Medical Officer of Health, Alberta

Dr. Michael Patterson
Chief Medical Officer of Health, Nunavut

Dr. Kami Kandola
Chief Public Health Officer, Northwest Territories

Dr. Evan Adams
Chief Medical Officer, First Nations Health Authority, British Columbia

Dr. Tom Wong
Chief Medical Officer, Public Health, Indigenous Services Canada

Important Links

[About Vaping](#)

SOURCE Public Health Agency of Canada

For further information: Media Relations, Public Health Agency of Canada, 613-957-2983, hc.media.sc@canada.ca; Public Inquiries, Call toll-free: 1-866-225-0709, Email: info@hc-sc.gc.ca

September 11, 2019

christine.elliott@ontario.ca

The Honourable Christine Elliott
Minister of Health
College Park 5th Floor
777 Bay St.
Toronto, ON M7A 2J3

Dear Honourable Christine Elliott:

Re: Expanding alcohol retail outlets

The Government of Ontario continues to outline their plans to increase the accessibility of beverage alcohol in Ontario. Recently, the province announced plans to introduce legislation to end the near monopoly on beer sales and expand alcohol sales to corner, big-box, and more grocery stores, resulting in more retail outlets. Research has long established that increasing access to alcohol is related to a subsequent increase in alcohol use and, in turn, alcohol related harms (e.g., alcohol-related diseases, injuries, violence, crime, and traffic crashes). Therefore, this proposed change to legislation is concerning considering alcohol use is already a leading preventable cause of morbidity and mortality in Ontario.

Where alcohol privatization and deregulation has occurred elsewhere in Canada (e.g. Alberta and British Columbia), alcohol availability has risen significantly, with subsequent increases in consumption and related harms.^{1,2,3} Additionally, following the 2015 partial deregulation of alcohol sales in Ontario, increases in the number of alcohol outlets and longer average hours of operation were positively associated with increased emergency department visits attributable to alcohol.⁴ Alcohol costs to the individual and society are significant. A recently published document shows that alcohol costs Ontario \$5.34 Billion for healthcare, lost productivity, criminal justice and other direct costs.⁵

Furthermore, it is important to consider that the impacts of increased alcohol availability may disproportionately impact vulnerable populations. In British Columbia, privatization is associated to reduced compliance with age of sale policies, which can be observed by the low rates of compliance in privatized stores in comparison to government stores.⁶ The implication is that the sale of alcohol becomes easier for underage drinkers, increasing the risk of alcohol-related harms for a population that is already considered especially vulnerable to the negative impacts of alcohol.

We are requesting the Ontario government consider the impact of increasing the number of retail outlets on the health and safety of Ontarians before moving forward with more legislative changes.

We also request the Ontario Government consider the following recommendations proposed by the Council of Ontario Medical Officers of Health and The Centre for Addiction and Mental

Health to mitigate the potential harms associated with new policy and regulatory changes to increase alcohol availability in Ontario. We believe it is possible to create a culture of lower risk alcohol use in Ontario that balances interests in public health, government revenue, economic development and consumer preference.

Some measures we request be implemented include:

- Regulate retail availability, including the density, location, hours of sale, and access restrictions.
- Give municipalities the authority to restrict outlet density and hours and days of sale.
- Conduct a risk-based assessment for every tailgating event.
- Ensure operational compliance by expanding the current Mystery Shopper Program to encompass bi-annual visits to every alcohol outlet with publicly reported penalties that escalate with repeat offences.
- Conduct annual education visits to retail outlets.
- Implement pricing policies that will increase provincial revenue while also reducing alcohol-related harms.

Now is the time for Ontario to take leadership and address the harms of alcohol use. Therefore, as outlined in the government's report, we are interested in ensuring the government work with public health experts to ensure increasing convenience does not lead to increased social and healthcare costs related to alcohol. Thank you for your consideration.

Sincerely,



Larry Martin
Chair, Board of Health

- c. The Honourable Doug Ford, Premier of Ontario
Ernie Hardeman, MPP, Oxford
Jeff Yurek, MPP, Elgin-Middlesex-London
Pegeen Walsh, Executive Director, Ontario Public Health Association
Loretta Ryan, Executive Director, Association of Local Public Health Agencies
Association of Local Public Health Agencies
Ontario Boards of Health
Area municipalities served by Southwestern Public Health

References

1. Flanagan, G. Sobering Result: The Alberta liquor retailing industry ten years after privatization. Canadian Centre for Policy Alternatives and Parkland Institute; 2003. Retrieved from:
https://www.policyalternatives.ca/sites/default/files/uploads/publications/National_Office_Pubs/sobering_result.pdf
2. Statistics Canada (2015). Impaired driving in Canada, 2015. Retrieved from:
<https://www150.statcan.gc.ca/n1/en/daily-quotidien/161214/dq161214b-eng.pdf?st=ZXKFqtLj>.
3. Solomon, R., Cardy, J. Noble, I., & Wulkan, R. Mapping Our Progress to Safer Roads: The 2012 Provincial and Territorial Legislative Review. London, ON; MADD; 2012. Retrieved from:
http://www.madd.ca/media/docs/MADD_Canada_2012_Provincial_and_Territorial_Legislative_Review_FINAL.pdf.
4. Myran, DT, Chen JT, Giesbrecht N, Rees, VW. The association between alcohol access and alcohol-attributable emergency department visits in Ontario, Canada. *Addiction*. 2019;114(7), 1183-91.
5. Canadian Substance Use Costs and Harms Scientific Working Group. Canadian Substance Use Costs and Harms in the Provinces and Territories (2007–2014). Ottawa, ON: Canadian Centre on Substance Use and Addiction; 2018. Available from:
<http://csuch-cemusc.ccsa.ca/Resource%20Library/CSUCH-Canadian-Substance-Use-Costs-Harms-Provincial-Territorial-Report-2018-en.pdf>
6. MADD. Provincial Liquor Boards: Meeting the Best Interests of Canadians. 2014. Retrieved from:
http://www.madd.ca/media/docs/MADD_Canada_Provincial_Liquor_Boards.pdf.
7. Centre for Addiction and Mental Health (2019). Alcohol Policy Framework. Toronto: CAMH.

PUBLIC HEALTH MODERNIZATION – NORTH EAST PUBLIC HEALTH TRANSFORMATION INITIATIVE

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