

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2015 July 16

SUMMARY INFORMATION REPORT FOR JULY 2015

Recommendation

It is recommended that Report No. 047-15 re Information Summary Report for July 2015 and the attached [appendix](#) be received for information.

Key Points

- Collaboration is planned between the Middlesex-London Health Unit and London Health Sciences Centre to improve birth outcomes for pregnant women and newborns by providing timely resources and education.
- The discussion about the decriminalization and legalization of cannabis is global and is part of the Federal election campaign, making it timely for public health to consider what legal and regulatory approach best reduces the risks of health and social harms associated with cannabis use.
- Health Unit records that include client personal information were stolen from an employee vehicle. Efforts are currently underway to notify the affected individuals and the Information and Privacy Commissioner's Office/Ontario.

Background

This report provides a summary of information from a number of Health Unit programs. Appendices and links will provide further details, and additional information is available on request.

LHSC/MLHU Collaborative Antenatal Resources and Education (CARE)

The LHSC/MLHU Collaborative Antenatal Resources and Education (CARE) initiative was developed in response to feedback received from pregnant women and nursing staff in regards to the current practice of attending a 36 week 1 hour pre-admit visit at LHSC. Nurses recognized they were providing women with an overwhelming amount of information with much of it being untimely. Clients also expressed dissatisfaction with the visit stating they felt rushed with their needs not being met.

This prompted the development of the Collaborative Antenatal Resources and Education (CARE) program between MLHU and LHSC. The goal is to connect women to services early and provide key information to support positive pregnancy and birth outcomes. The CARE program pilot will start in September 2015 and will consist of four visits starting at 18 weeks gestation with the fourth visit at 36 weeks. Clients will be screened, provided with information and resources in a timely way in both one on one and group sessions.

Cannabis – Health Implications of Decriminalization, Legalization, and Regulation

The legislating of cannabis varies globally from complete prohibition, such as in Canada, to decriminalization in Portugal, to legalization with and without strict regulation in the United States. Although cannabis is illegal in Canada, it is the most widely used illicit drug in Ontario. In 2013, the Centre for Addiction and Mental Health determined that 42.6% of the general population has used cannabis in their lifetime with 14.1% admitting to use in the past year. Cannabis use, as with other drug use, is associated with health risks thus having public health and community implications. Annually in September, the Southwest Injury Prevention Network organizes the Not By Accident Conference. “Cannabis Legalization: Is this a trip we want to take?” is the title of this year’s conference scheduled for September 17th. The organizing committee has intentionally structured the day with a blend of speakers with varying positions and research, outlining both the positive and negative consequences of cannabis legalization. Following the conference and a further review of the evidence (see [Appendix A](#)), staff of Middlesex London Health Unit will bring a public health position on cannabis to the Board of Health for consideration.

Information Privacy Breach

On Friday, July 03, 2015, a laptop and hardcopy client records were stolen from an employee vehicle that was parked on the lower level of the lot adjacent to the 50 King Street office building. As a result of a preliminary investigation into this incident, the personal information of approximately 12 families was contained within a locked case that was contained within the bag holding the laptop. Health Unit policy prohibits leaving laptops and client files in vehicles, even when locked. It is the Health Unit’s practice to encrypt all agency laptops. Additionally, an agency username and password are required in order to gain access to any information contained on this device. Information Technology staff are able to trace individual devices and remotely “wipe” these items. The sensitivity of the stolen information is considered to relatively low. It is not believed that the loss of this information could result in any significant harms to the client (e.g. financial loss, negative impact on reputation, etc.). However, in accordance with S. 12(2) of the *Personal Health Information Protection Act* (PHIPA) efforts are currently underway to develop a notice to inform all of the individuals whose information was stolen. Staff will also be contacting the Information and Privacy Commissioner’s Office/Ontario to inform them of this privacy breach. The investigation into this privacy breach is ongoing and remedial steps to prevent a privacy breach of this nature will be reported to the Board of Health and the IPC/O.



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