#### AGENDA MIDDLESEX-LONDON BOARD OF HEALTH

399 RIDOUT STREET NORTH SIDE ENTRANCE, (RECESSED DOOR) Board of Health Boardroom Thursday, 7:00 p.m. 2016 July 21

# MISSION - MIDDLESEX-LONDON HEALTH UNIT

The mission of the Middlesex-London Health Unit is to promote and protect the health of our community.

# MEMBERS OF THE BOARD OF HEALTH

Ms. Patricia Fulton **Mr. Jesse Helmer (Chair)** Dr. Trevor Hunter Mr. Marcel Meyer Mr. Ian Peer Ms. Nancy Poole Mr. Kurtis Smith **Ms. Joanne Vanderheyden (Vice-Chair)** 

# SECRETARY-TREASURER

Dr. Christopher Mackie

#### DISCLOSURE OF CONFLICTS OF INTEREST

#### APPROVAL OF AGENDA

#### **APPROVAL OF MINUTES**

Public Session - June 16, 2016 Board of Health meeting

#### DELEGATIONS

7:05 – 7:15 p.m.	Ms. Trish Fulton, Chair, Finance and Facilities Committee (FFC) re: Item #1 - Finance and Facilities Committee Meeting July 7, 2016 (Report No. 045-16).
	Receive: July 7, 2016 Finance and Facilities Committee meeting minutes
7:15-7:25	Mr. Trevor Hunter, Chair Governance Committee (GC), re: Item #2 – Governance Committee Meeting, July 21, 2016, verbal update.
	Receive: April 21, 2016 Governance Committee meeting minutes.
7:25-7:35	Ms. Rhonda Brittan, Manager, Healthy Communities and Injury Prevention and Ms Murial Abbott, Public Health Nurse re: Item #3: Community Drug and Alcohol Strategy (Report No. 046-16).

Item #	Report Name and Number	Link to Additional Information	Delegation	Recommendation	Information	Brief Overview
Com	mittee Reports					
1	Finance and Facilities Committee Meeting July 7 <sup>th</sup> (Report No. 045-16)	Receive: July 7 <sup>th</sup> FFC Minutes	x	X		To receive minutes and consider recommendations from the July 7 <sup>th</sup> FFC meeting.
2	Governance Committee Meeting July 21 <sup>st</sup> Verbal Update	July 21, 2016 Agenda Receive: April 21 <sup>st</sup> GC Minutes	x	x		To provide an update and consider recommendations from the July 21 <sup>st</sup> Governance Committee meeting.
Deleg	gations and Recommendation	Reports				
3	Middlesex London Community Drug and Alcohol Strategy (Report No. 046-16)	Appendix A	x		X	To provide an update on the status of the Middlesex London Community Drug and Alcohol Strategy
Infor	mation Reports		<u> </u>			
4	Residential Care Home Standards (Report No. 047-16)				х	To provide an update on the City of London bylaw proposal and the Health Unit's involvement, which is expected to follow a similar framework.
5	Summary Information Report (Report No. 048-16)	Appendix A			Х	To provide an update on Health Unit programs for July.
6	Medical Officer of Health Activity Report – July (Report No. 049-16)				х	To provide an update on the activities of the MOH for July 2016.

#### **OTHER BUSINESS**

#### Next meeting:

- Next Finance and Facilities Committee Meeting: Thursday September 1, 2016 @ 9:00 a.m.
- Next Board of Health Meeting: Thursday September 15, 2016 @ 7:00 p.m.
- Next Governance Committee Meeting: To Be Determined.

#### CORRESPONDENCE

a)	Date:	2016 June 2
	Topic:	Lyme disease
	From:	Hazel Lynn, Medical Officer of Health, Grey Bruce Health Unit
	To:	The Honourable Dr. Jane Philpott, The Honorable Dr. Eric Hoskins

### Background:

Lyme disease is transmitted to humans through the bite of an infected blacklegged tick (deer tick). The Middlesex-London Health Unit follows up on human Lyme disease cases, collects and tests ticks submitted by the public and provides surveillance of ticks in grassy and wooded areas.

### **Recommendation:**

Receive.

b)	Date:	2016 May 9 (Received 2016 June 9)
	Topic:	Lyme disease
	From:	Ralph Walton, Regional Clerk, Niagara Region
	To:	The Honourable Dr. Jane Philpott, The Honorable Dr. Eric Hoskins

## Background:

See item (a) above.

#### **Recommendation:**

Receive.

c) Date:	2016 June 7 (Received 2016 June 9)
Topic:	Legislation for the International Code of Marketing Breastmilk Substitute
From:	Hazel Lynn, Medical Officer of Health, Grey Bruce Health Unit
To:	The Honourable Dr. Jane Philpott

### Background:

The World Health Organization International Code of Marketing of Breastmilk Substitutes is a significant component of the Baby Friendly Initiative and sets out detailed provision regarding: products within its scope; appropriate dissemination of information and education on infant feeding; advertising or other forms of promotion to the general public of products within the scope of the code; measures to be taken in health systems, and with regards to health workers and employees of manufacturers and distributors; the labelling and quality of breastmilk substitutes and related products; and the implementation of the code and monitoring.

#### **Recommendation:**

Receive.

Date:	2016 May 26 (Received 2016 June 10)
Topic:	Environmental Health Program Funding
From: Lee Mason, Board of Health Chair, Algoma Pub	
To:	The Honourable Dr. Eric Hoskins
	Topic: From:

# Background:

There have been several recent changes to legislation involving the work of environmental health teams throughout Ontario. These changes and the corresponding increases in services that are being provided have not come with commensurate resources or staff training.

# **Recommendation:**

Receive.

e)	Date:	2016 May 26 (Received 2016 June 10)
	Topic:	Changes to the HPV Immunization Program
	From:	Lee Mason, Board of Health Chair, Algoma Public Health
	To:	The Honourable Dr. Eric Hoskins

# Background:

Human papillomavirus (HPV) is one of the most common sexually transmitted infections in the world. There are several types of HPV, some of which can cause cervical cancer and genital warts. The province currently offers the HPV vaccine free of charge to girls in Grade 8 at Ontario schools. This will be expanded to all students and begin to be offered in the 2016-2017 school year.

# **Recommendation:**

Receive.

f)	Date:	2016 June 15
	Topic:	Standards Modernization Process
	From:	Roselle Martino, Dr. David Williams and Dr. David Jones
	To:	All Health Units

# Background:

An Executive Steering Committee for the Standards Modernization (the "ESC"), which reports to the MOHLTC, has been established to provide overall strategic leadership and guidance on the review of the Standards Modernization with a goal to strengthen and enhance accountability and transparency within the public health system. The Middlesex-London Health Unit's Medical Officer of Health is representing the Council of Medical Officers of Health on the Governance committee reporting into ESC.

# **Recommendation:**

Receive.

g)	Date:	2016 June 19
	Topic:	Food Security in the District of Thunder Bay
	From:	Joe Virdiramo, Chair,
	To:	Mr. William Bradica, Chief Administrative Officer

# Background:

Food security exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. The Middlesex-London Health Unit pursues numerous strategies to enhance food security, some of these include: advocating for a basic income guarantee, increases to social assistance rates, and student nutrition programs.

# **Recommendation:**

Receive.

h) Date: 2016 June 21
Topic: Community Water Fluoridation
From: Scott McDonald, Chair, Board of Health, Peterborough Public Health
To: The Honourable Dr. Eric Hoskins

# Background:

Community water fluoridation is the process by which a water system operator adds fluoride in controlled amounts to raise naturally low fluoride levels to the optimal level of 0.7mg/L or 0.7ppm for dental health. Fluoride is added to London's drinking water to prevent cavities in children and adults. Decisions to fluoridate water systems are made at the municipal level.

# **Recommendation:**

Receive.

i)	Date:	2016 June 230	
	Topic: alPHa 2016 Annual Conference Proceedings		
	From:	From: Gordon Fleming, Manager, Public Health Issues, Association of Local Public Health	
		Agencies (alPHa)	
	To:	Medical Officers of Health, Chairs, and Boards of Health	

## Background:

The Association of Local Public Health Agencies (alPHa) seeks to assist local public health units in providing efficient and effective services that meet the needs of the people of Ontario. It also strives to assist in establishing, through collaboration with other organizations, a unified and powerful voice for public health in Ontario.

The annual general meeting was held between June  $5^{th}$  and  $6^{th}$ .

#### **Recommendation:**

Receive.

Copies of all correspondence are available for perusal from the Secretary-Treasurer.

#### CONFIDENTIAL

The Board of Health will move in camera to discuss matters regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

#### ADJOURNMENT



### **PUBLIC SESSION – MINUTES**

#### MIDDLESEX-LONDON BOARD OF HEALTH

#### 2016 JUNE 16

MEMBERS PRESENT:	Mr. Jesse Helmer(Chair)Mr. Trevor HunterMs. Trish FultonMr. Marcel MeyerMr. Ian PeerMs. Nancy PooleMr. Kurtis SmithMs. Joanne Vanderheyden(Vice-Chair)
MEDIA PRESENT:	Ms. Hala Ghonaim, London Free Press
OTHERS PRESENT:	<ul> <li>Dr. Christopher Mackie, Medical Officer of Health &amp; CEO</li> <li>Ms. Elizabeth Milne, Executive Assistant to the Board of Health &amp; Communications (Recorder)</li> <li>Mr. Wally Adams, Director, Environmental Health &amp; Infectious Disease</li> <li>Mr. Jordan Banninga, Manager, Strategic Projects</li> <li>Mr. Geoff Bardwell, Regional HIV/Aids Connection</li> <li>Ms. Rhonda Brittan, Manager, Healthy Communities &amp; Injury Prevention</li> <li>Ms. Sonja Burke, Regional HIV/Aids Connection</li> <li>Mr. Todd Coleman, Epidemiologist, Foundational Standard</li> <li>Ms. Shaya Dhinsa, Manager, Sexual Health</li> <li>Ms. Laura Di Cesare, Director, Corporate Services</li> <li>Mr. Dan Flaherty, Communications Manager</li> <li>Dr. Gayane Hovhannisyan, Associate Medical Officer of Health</li> <li>Mr. Brian Lester, Regional HIV/Aids Connection</li> <li>Ms. Ioann Majerovich, Field Epidemiologist, Public Health</li> <li>Agency of Canada</li> <li>Mr. John Millson, Associate Director, Finance</li> <li>Mr. Alex Tyml, Online Communications Coordinator</li> <li>Ms. Suzanne Vandervoort, Director, Healthy Living</li> </ul>

Chair Helmer called the meeting to order at 7:01 p.m.

#### **DISCLOSURES OF CONFLICT(S) OF INTEREST**

Chair Helmer inquired if there were any disclosures of conflict(s) of interest. None were declared.

#### APPROVAL OF AGENDA

Chair Helmer noted an amendment to the agenda, where he requested a verbal update from staff regarding the accusations of misconduct in a letter from Syrian Newcomers to the Community Care Access Centre (CCLC) London.

It was moved by Ms. Vanderheyden seconded by Mr. Smith *that the* **AGENDA** *for the June 16, 2016 Board of Health meeting be approved as amended.* 

#### **DELEGATIONS**

7:05 – 7:15 p.m.Ms. Trish Fulton, Chair, Finance and Facilities Committee (FFC) re: Item #1 - Finance and<br/>Facilities Committee Meeting June 8, 2016 Report No. 039-16.

Receive: June 8, 2016 Finance and Facilities Committee meeting minutes

#### **COMMITTEE REPORTS**

#### 1) Finance and Facilities Committee Meeting June 8<sup>th</sup> (Report No. 039-16)

Ms. Fulton provided a summary and context to the recommendations from the June 8, 2016 Finance and Facilities Committee (FFC) meeting.

It was moved by Ms. Fulton seconded by Mr. Meyer, that the Board of Health to approve the audited Financial Statements for the Middlesex-London Health Unit, December 31, 2015 as appended to report No. 016-16FFC as recommended by the Finance and Facilities Committee.

Carried

Carried

It was moved by Ms. Fulton, seconded by Mr. Peer, that the Board of Health:

- 1) approve a \$25,930 drawdown from the Sick Leave Reserve Fund to fund the 2015 sick leave payments to eligible staff; and further,
- 2) receive the 2015 -2016 Reserve / Reserve Fund Overview (Appendix A) for information; and further,
- 3) That Report No. 017–16FFC, "2015 Reserve / Reserve Fund Balances" be forwarded to the City of London and the County of Middlesex for information. As recommended by the Finance and Facilities Committee.

#### Carried

It was moved by Ms. Fulton seconded by Ms. Vanderheyden, *that the Board of Health receive Report No.* 018-16FFC re: "Q1 Financial Update Report & Factual Certificate" for information as recommended by *the Finance and Facilities Committee*.

Carried

It was moved by Ms. Fulton, seconded by Mr. Smith, *that the Board of Health receive the June* 8<sup>th</sup> *Finance and Facilities Committee meeting MINUTES*.

Carried

Ms. Fulton noted a correction to the time of the next Finance and Facilities Committee meeting, which will be held on Thursday, July 7, 2016 at 9:00 a.m.

#### **APPROVAL OF MINUTES**

It was moved by Mr. Smith, seconded by Ms. Fulton, *that the MINUTES for the May 19, 2016 Board of Health meeting be approved as amended.* 

Carried

- 2 -

7:15 - 7:25 p.m. Ms. Shaya Dhinsa, Manager, Sexual Health, and Mr. Todd Coleman, Epidemiologist re: Item # 2 Persons Who Inject Drugs in Middlesex-London: An Update Report No. 040-16.

#### **DELEGATION AND RECOMMENDATION REPORTS**

#### 2) Persons Who Inject Drugs in Middlesex London: An Update (Report No. 040-16)

Mr. Todd Coleman, Epidemiologist and Ms. Shaya Dhinsa, Manager, Sexual Health introduced and provided context to this report, reviewing the current epidemiological investigation, stakeholder engagement and strategies currently in development to address this public health emergency in persons who inject drugs in Middlesex-London. Dr. Gayane Hovhannisyan also provided context to this report and answered questions.

Discussion ensued about the following items:

- Current strategies in place to address the spread of disease in both persons who inject drugs and those who do not.
- The consultation process currently under way to identify a multidisciplinary approach and coordinated effort to develop a strategy to address HIV epidemic and unsafe injection drug practices in Middlesex-London. Some of the strategies discussed were street outreach model, supervised injection site, mapping of Hepatitis C/HIV cases, relevant resources and services, and identifying gaps in the community.

Mr. Brian Lester, Executive Director, Regional HIV/Aids Connection answered questions regarding the estimated number of injection drug users in Middlesex-London, factors that are impacting the ability to practice safe injection and the outreach, counselling and education efforts currently in place.

It was moved by Mr. Peer, seconded by Ms. Fulton, *that the Board of Health support in principle the allocation of resources within Middlesex-London Health Unit to address the emerging public health emergency in persons who inject drugs in Middlesex-London, with further details on strategy and resources to come to the Board of Health in September.* 

Carried

#### 3) A Food Policy Council for Middlesex-London (Report No. 043-16)

Chair Helmer requested a brief presentation from Ms. Ellen Lakusiak, Public Health Dietitian to provide a summary of the Food Policy Council launch event and this report.

Mr. Marcel Meyer provided an overview of the history of the Food Policy Council, who has been involved and some of the next steps.

It was moved by Ms. Vanderheyden, seconded by Ms. Poole, *that Mr. Meyer be nominated as the Board of Health representative on the Food Policy Council.* 

Carried

Mr. Meyer agreed to let his name stand and encouraged others interested to apply to the Council. The online application process is available on the Health Unit's website.

Dr. Mackie provided context to this report and outlined why the Board was requested to have a representative. Looking for someone to represent the perspective of the health unit, background in the area, understanding the values of the health unit, what the Middlesex-London Health Unit mandate is, not to commit program or resources.

It was moved by Ms. Vanderheyden seconded by Ms. Poole, that the Board of Health

- 1. Receive Report No. 043-16, A Food Policy Council for Middlesex- London and,
- 2. Appoint Mr. Meyer to sit on the Middlesex- London Food Policy Council.

#### **INFORMATION REPORTS**

Chair Helmer requested a motion to approve all information reports at once.

It was moved by Mr. Smith, seconded by Mr. Hunter, that the Board of Health approve all information items at once.

#### 4) Summary Information Report for June 2016 (Report No. 041-16)

It was moved by Mr. Smith, seconded by Mr. Hunter, that the Board of Health receive Report No. 041-16 Summary Information Report - June for information.

#### 5) Medical Officer of Health Activity Report – June (Report No. 042-16)

It was moved by Mr. Smith seconded by Mr. Hunter, that the Board of Health receive Report No.042-16 re: Medical Officer of Health Activity Report – June for information.

#### CORRESPONDENCE

Chair Helmer made note of correspondence item j) the resolution submitted by the Health Unit to Advocate for a Comprehensive Province-Wide Healthy Eating Approach Integrating the Recommendations in the Senate's Report on Obesity and the Heart and Stroke Foundation Sugar, Heart Disease and Stroke Position Statement, including Taxation of Sugar Sweetened Beverages was carried with a friendly amendment.

It was moved by Ms. Fulton, seconded by Mr. Meyer that the Board of Health receive correspondence *items a) through j).* 

Carried

Dr. Mackie made note of Appendix A from the Summary Information Report, outlining some of the changes to components in to the Patients First Discussion Paper and advising that he will sit as Co-Chair for the 2016/2017 Executive Committee of the Council of Ontario Medical Officers of Health (COMOH). This role will began in June 2016 and could lead to Chairing COMOH in the future.

Mr. Meyer provided additional comments on the Patients First Discussion Paper and a summary of the discussion on this topic at the recent Association of Local Public Health Agencies Annual General Meeting that he attended in Toronto.

#### **OTHER BUSINESS**

#### Verbal Update on the letter from Syrian Newcomers regarding the conduct of the Community Care Access Centre in the resettlement process.

Chair Helmer provided context to the request for a verbal update from staff, advising that a small number of Syrian Newcomers wrote a letter outlining some concerns with the services provided by the Community Care Access Centre during the resettlement process.

Dr. Gayane Hovhannisyan, Associate Medical Officer of Health provided an update on the Health Unit's role in assisting with providing outbreak management and vaccinations to Syrian Newcomers, clarifying that the Health Unit was not identified in the letter of concern. Dr. Hovhannisyan advised Public Health Inspectors inspected all facilities that provided food and did not identify any significant infractions or risk to health. The

Carried

2016 June 16

Carried

Carried

Carried

Health Unit also worked with other stakeholders and healthcare providers to address health care needs of Newcomers, particularly on immunization and prevention of outbreaks.

Chair Helmer took a moment to acknowledge that it was Mr. Wally Adams, Director, Environmental Health & Infectious Diseases last meeting; thanking him for his service and contributions to the organization.

#### **Upcoming meetings**

- Next Finance and Facilities Committee Meeting: Thursday July 7<sup>th</sup> @ 9:00 a.m.
- Next Governance Committee Meeting: Thursday July 21<sup>st</sup> @ 6:00 p.m.
- Next Board of Health Meeting: Thursday July 21<sup>st</sup> @ 7:00 p.m. •

#### CONFIDENTIAL

At 8:27 p.m. Chair Helmer invited a motion to move in camera to discuss an item regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

At 8:27 p.m. it was moved by Ms. Vanderheyden, seconded by Mr. Meyer that the Board of Health move in camera to discuss an item regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

At 8:27 p.m. all Health Unit staff, except Dr. Mackie, Dr. Hovhannisvan, Mr. Jordan Banninga, Ms. Laura Di Cesare, Mr. John Millson, Ms. Suzanne Vandervoort, Ms. Heather Lokko, and Ms. Elizabeth Milne left the meeting.

At 9:21 p.m. it was moved by Ms. Vanderheyden, seconded by Mr. Meyer that the Board of Health rise and return to public session to adjourn the meeting.

At 9:21 p.m. the Board of Health returned to public session.

#### ADJOURNMENT

At 9:22 p.m., it was moved by Ms. Vanderheyden, seconded by Mr. Meyer, that the meeting be adjourned.

Carried

**JESSE HELMER** Chair

**CHRISTOPHER MACKIE** Secretary-Treasurer

Carried

Carried

Carried



**REPORT NO. 045-16** 

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2016 July 21

# FINANCE AND FACILITIES COMMITTEE MEETING - JULY

The Finance and Facilities Committee met at 9:00 a.m. on Thursday July 7, 2016 (<u>Agenda</u>). The following items were discussed at the meeting and recommendations made:

Reports	Recommendations for Board of Health's Consideration
Proposed 2017 PBMA Process, Criteria & Weighting ( <u>Report No. 023-16FFC</u> )	It was moved by Ms. Vanderheyden, seconded by Mr. Peer, <i>that the Finance and Facilities Committee recommend that the Board of health approve the 2017 PBMA criteria and weighting that is proposed in Appendix A to Report No. 023-16FFC.</i> Carried.

The Finance and Facilities Committee moved in-camera to discuss items regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

The next Finance and Facilities Committee meeting will be Thursday, September 1, 2016.

This report was prepared by Elizabeth Milne, Executive Assistant to the Board of Health and Communications.

On phi.

Christopher Mackie, MD, MHSc, CCFP, FRCPC Medical Officer of Health



#### PUBLIC MINUTES Finance and Facilities Committee 50 King Street, Room 3A MIDDLESEX-LONDON BOARD OF HEALTH 2016 July 7, 9:00 a.m.

COMMITTEE	
MEMBERS PRESENT:	Ms. Trish Fulton (Committee Chair)
	Mr. Marcel Meyer
	Mr. Ian Peer
	Mr. Jesse Helmer
	Ms. Joanne Vanderheyden
<b>OTHERS PRESENT:</b>	Dr. Christopher Mackie, Medical Officer of Health & CEO
	Ms. Elizabeth Milne, Executive Assistant to the Board of Health &
	Communications (Recorder)
	Ms. Laura Di Cesare, Director, Corporate Services
	Mr. John Millson, Associate Director, Finance
	Dr. Chimere Okoronkwo, Manager, Oral Health
	Ms. Suzanne Vandervoort

At 9:00 a.m., Chair Fulton called the meeting to order.

#### 1. DISCLOSURES OF CONFLICT(S) OF INTEREST

Chair Fulton inquired if there were any disclosures of conflict of interest to be declared. None were declared.

#### 2. APPROVAL OF AGENDA

It was moved by Mr. Helmer, seconded by Mr. Peer *that the <u>AGENDA</u>* for the July 7, 2016 *Finance and Facilities Committee meeting be approved*.

#### 3. APPROVAL OF MINUTES

It was moved by Ms. Vanderheyden, seconded by Mr. Meyer *that the <u>MINUTES</u> from the June 8, 2016 Finance and Facilities Committee meeting be approved.* 

Carried

Carried

#### 4. CONFIDENTIAL

At 9:02 a.m. Chair Fulton invited a motion to move in camera to discuss items regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

It was moved by Mr. Helmer, seconded by Mr. Peer that the Finance and Facilities Committee move in camera to discuss items regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

Carried

At 11:35 a.m. it was moved by Ms Vanderheyden, seconded by Mr Helmer *that the Finance and Facilities Committee rise and return to public session to report that progress had been made on items* 

regarding identifiable individuals and a proposed or pending acquisition of land by the Middlesex-London Board of Health.

Carried

At 11:35 a.m. the Finance and Facilities Committee returned to public session.

#### 5. **NEW BUSINESS**

#### 5.1 Proposed 2017 PBMA Process, Criteria & Weighting (<u>Report No. 023-16FFC</u>)

It was moved by Ms. Vanderheyden, seconded by Mr. Peer, *that the Finance and Facilities Committee recommend that the Board of health approve the 2017 PBMA criteria and weighting that is proposed in Appendix A to Report No. 023-16FFC.* 

Carried

#### 6. OTHER BUSINESS

Chair Fulton inquired if an August meeting was required by staff and advised the Committee that she would be away for the next scheduled Finance and Facilities Committee meeting in August.

Dr. Mackie advised that the Committee can remove the next meeting date (August 4<sup>th</sup>) date from their calendar at this time and that staff will advise if an alternate date is required in August.

#### 7. ADJOURNMENT

Chair Fulton invited a motion to adjourn the meeting.

It was moved by Mr. Peer, seconded by Mr. Helmer that the meeting be adjourned.

Carried

At 11:38 a.m. Chair Fulton adjourned the meeting.

TRISH FULTON Committee Chair DR.CHRISTOPHER MACKIE Secretary-Treasurer



REPORT NO. 046-16

- TO: Chair and Members of the Board of Health
- FROM: Christopher Mackie, Medical Officer of Health

DATE: 2016 July 21

# MIDDLESEX LONDON COMMUNITY DRUG & ALCOHOL STRATEGY

#### Recommendation

It is recommended that Report No. 046-16 re "Middlesex London Community Drug & Alcohol Strategy" be received for information.

### **Key Points**

- Middlesex-London Health Unit is leading the development of a Community Drug & Alcohol Strategy built upon diverse perspectives, evidence, expertise and existing community strengths and partnerships.
- The Strategy is guided by collaboratively developed vision, mission and guiding principles and was based on British Columbia's four pillars framework.
- The Strategy is an important step and will require long-term commitment to address the complex and evolving issue of problematic substance use.

#### Background

Substance use affects individuals, families and communities within Middlesex County and the City of London, whether directly or otherwise through negative impacts on health, personal relationships, safety, crime, and overall community wellness.

Middlesex-London Health Unit (MLHU) is significantly involved in programs and initiatives related to substance use, including the Counterpoint Needle Exchange, The Naloxone Program, the Fentanyl Patch Return Program, and programs and policy advocacy related to reducing alcohol-related harms and substance use prevention initiatives. The Health Unit is also involved in concerted action to address HIV and Hepatitis C in people who inject drugs with the development of a comprehensive HIV strategy. This includes stakeholders who are engaged at the local and provincial levels. Across London and Middlesex there are numerous organizations with programs addressing issues related to substance use and addiction.

In late 2015, MLHU began development of the Middlesex-London Community Drug and Alcohol Strategy ('the Strategy"). The Strategy builds on existing partnerships, and will incorporate diverse perspectives to build a sustainable approach to preventing, reducing and managing problematic substance use.

#### **First Steps**

In November 2015 and January 2016, meetings were hosted with the participation of over 80 diverse community stakeholders from both London and Middlesex County. While the extent and value of existing services and resources was fully acknowledged, there was strong agreement that moving forward with a community drug strategy requires a collective and coordinated community effort – one based on a Four Pillar framework of (1) Prevention, (2) Treatment, (3) Enforcement and (4) Harm reduction. It was agreed that the Strategy must reduce silos and prioritize collaboration through shared vision and purposeful policies, processes and plans. In addition to reaching consensus that MLHU is well-positioned to provide leadership to the Strategy, the group provided a clear message that the approach must be truly collaborative for the Strategy to realize short and long-term success. During the stakeholder meetings those in attendance were

invited to share perspectives on current issues of priority, indicate interest in contributing to the drug strategy, identify guiding principles, and begin to form workgroups around the four pillars. Additionally an expression of interest process was proposed and agreed to for the formation of a steering committee.

#### **Current Status**

The Steering Committee of the Community Drug & Alcohol Strategy is a broadly representative group that is inclusive of diverse sectors and includes people with lived experience (see <u>Appendix A</u>). Three meetings, with the initial one being in April 2016, have resulted in the development of a vision, mission, guiding principles and terms of reference. A key early decision of the Steering Committee was the explicit inclusion of alcohol in the Strategy. The Steering Committee is co-chaired by Brian Lester, Regional HIV/AIDS Connection and Muriel Abbott, MLHU. To support the development of the Strategy MLHU is providing additional staff resources including a health promoter, epidemiologist and program evaluator.

Four pillar workgroups - Prevention, Harm Reduction, Treatment and Enforcement - have each had an initial meeting in June. Each group reviewed issues raised at the earlier community meetings, and discussed the need and processes for collecting baseline information regarding current services across Middlesex and London. It was acknowledged that there are several initiatives underway that are relevant to the Drug and Alcohol Strategy.

A comprehensive environmental scan to identify, inventory and map existing services and programs across London and Middlesex is starting, with the goal of completion in Fall 2016. The goal is to identify needs, gaps and areas that can be aligned with the Strategy for enhanced impact and action. This includes urgent issues that require immediate action.

#### **Next Steps**

A plan for broader consultation and engagement with the community is being developed to further identify and define issues related to substance use to ensure a comprehensive understanding of issues and priorities. This will guide literature searches, and inform development of recommendations for moving forward. This broader consultation will begin in late 2016.

The compilation of data, evidence and perspectives will result in the need to prioritize interventions to address the multiple and complex issues related to substance use. Based on the comprehensive and prioritized recommendations approved by the Steering Committee, implementation, monitoring and evaluation plans will be developed. A communication platform and plan to keep the community informed of progress will be put in place.

To realize its vision of "a caring, inclusive, and safe community that works collaboratively to reduce and eliminate the harms associated with drugs and alcohol," the Strategy must demonstrate long-term commitment that embraces the concept of community responsibility and is responsive to the complex issue of problematic substance use while addressing gaps, limiting duplication and meeting emerging needs.

This report was prepared by Ms. Muriel Abbott, Public Health Nurse, Ms. Khalidah Bello, Health Promoter, and Ms. Rhonda Brittan, Manager, Healthy Communities and Injury Prevention Team.

Christopher Mackie, MD, MHSc, CCFP, FRCPC Medical Officer of Health

# Appendix A

# Steering Committee Middlesex-London Community Drug & Alcohol Strategy

Name	Organization
Muriel Abbott	Middlesex London Health Unit
Brandon Agnew	London CAReS
Joe Antone	Southwest Ontario Aboriginal Health
	Access Centre
Casey D	Community Member
Sandra Datars Bere	City of London, Housing, Social Services
	and Dearness Home
Jon DeActis	Mission Services
Al Edmondson	Mayor-Middlesex Centre
Janel Gracey	Thomas Street Treatment Centre, Strathroy
Lori Hassall	Canadian Mental Health Association
	Middlesex
Sharon Koivu	London Health Sciences Centre
Tracy Law	London Area Network of Substance Users
Brian Lester	Regional HIV/AIDS Connection
Daryl Longworth	London Police Service
Janet McAllister	Centre for Addiction and Mental Health
Catherine McInnes	London Arts Council
Suzanne Morrison	London Diversity & Race Relations
	Advisory Committee
Michelle Quintyn	Goodwill Industries Great Lakes
Jan Richardson	City of London, Homeless Prevention
Linda Sibley	Addiction Services Thames Valley
Kelly Simpson	Southwest Local Health Integration
	Network
Julia Stewart	Downtown London
Michael Van Holst	City of London Councillor- Ward 1
Prevention Pillar TBD	
Enforcement Pillar TBD	
Treatment Pillar TBD	
Harm Reduction Pillar TBD	



REPORT NO. 047-16

- TO: Chair and Members of the Board of Health
- FROM: Christopher Mackie, Medical Officer of Health

DATE: 2016 July 21

# **RESIDENTIAL CARE HOME STANDARDS**

## Recommendation

It is recommended that Report No. 047-16 re "Residential Care Home Standards" be received for information.

# **Key Points**

- The City of London business licensing bylaw will soon be amended to include several new types of business classifications.
- Group Homes are a new classification of business to be included in the bylaw, which will require public health inspection for initial licensing approval as well as for ongoing monitoring.
- The amended bylaw along with Standard Operating Procedures (SOP) will be presented to the City's Community and Protective Services Committee on July 19, 2016.

# Background

Public Health Inspectors (PHIs) in Environmental Health currently inspect between 50 and 70 group homes that receive supports from government agencies including the Ministry of Health and Long-Term Care and the Ministry of Community and Social Services. These inspections focus on food safety, cleanliness and sanitation as well as a variety of items that enable the residents to live in a safe environment. This workload currently consumes less than 0.1 FTE of resources. Private or non-profit service operators of group homes in the city of London that are not receiving government supports are not required to meet the same standards. Many of these homes have been classified as lodging homes and the care provisions at these facilities have not been regulated.

The proposed revisions to the bylaw will ensure that private or non-profit group home operators receive proper licensing approvals and comply with SOPs. The SOPs will address issues related to food safety, nutrition, building and fire standards as well as a variety of other care provisions. It is anticipated that Environmental Health PHIs from Middlesex-London Health Unit (MLHU) will begin assisting the City of London in licensing and inspecting group homes operated by private or non-profit service operators. The Environmental Health PHIs have a well-established and effective working partnership with the City of London licensing department, particularly with new food premises. It is anticipated that a similar practice could be followed for the new classification of group home.

# **Conclusion/Next Steps**

The impact on MLHU resources is difficult to determine at this time as many of the details along with a final inventory of homes has yet to be established. City of London bylaw estimates that there are approximately 12 such residences that could fit this new classification. Annual licensing inspections are anticipated to take approximately 2 hours each. This would add about 24 hours of staff time per year which can be absorbed within the current Public Health Inspector caseload. However, re-inspections associated with infractions would add to this demand. Staff will continue to work with the City of London to monitor demand on MLHU resources and will report back to the Board of Health once it is more concretely determined.

This report was prepared by David Pavletic, Manager - Food Safety & Healthy Environments.

Christopher Mackie, MD, MHSc, CCFP, FRCPC Medical Officer of Health



REPORT NO. 048-16

TO:	Chair and Members of the Board of Health
FROM:	Christopher Mackie, Medical Officer of Health
DATE:	2016 July 21

# SUMMARY INFORMATION REPORT FOR JULY 2016

#### Recommendation

It is recommended that Report No. 048-16 Summary Information Report for July and the attached appendices be received for information.

#### **Key Points**

• The Canadian Nurse-Family Partnership Education (CaNE) project – based on the Nurse Family Partnership (NFP) which is an evidence-based home visiting program targeting young, low-income, first time mothers - will develop, pilot and evaluate a Canadian model of education for NFP nurses and supervisors, with NFP education launching in December 2016 and client recruitment beginning in late January 2017.

# Nurse Family Partnership (NFP)

In 2015, the Canadian Nurse-Family Partnership Education (CaNE) Project was launched in Ontario to develop, pilot and evaluate a Canadian model of education for public health nurses and supervisors responsible for delivering the NFP (Appendix A). The CaNE Project is funded by a \$351,000 grant received from the Local Poverty Reduction Fund, and significant in-kind and moderate funding contributions from participating health units. The Ministry of Children and Youth Services approved allocation of NFP nurses, supervisors and administrative staff from the Healthy Babies Healthy Children Program to implement the NFP. The Project is a collaboration between the Middlesex-London Health Unit (MLHU), Toronto Public Health, the City of Hamilton (Public Health Services), NFP International and McMaster University. A third health unit is currently considering being an implementation site. The Middlesex-London Health Unit is the lead health unit for the CaNE Project. On June 29th, a provincial CaNE Project clinical lead was seconded by MLHU from Hamilton Public Health. This lead will be involved in developing and delivering the education plan for the Canadian education sites in collaboration with an NFP international consultant from the University of Colorado, and will coordinate the development and implementation of the NFP at designated sites. A research team from McMaster University will coordinate the evaluation of the nurse education program. Over the next few months, three working groups will be formed to address curriculum development and delivery, implementation of the NFP at the participating sites, and evaluation of the CaNE project. MLHU will be actively involved in each of these working groups. Estimated timelines include delivery of the NFP curriculum to NFP nurses and supervisors from December 2016 to January 2017, with plans to recruit clients in late January 2017. MLHU will have four public health nurses providing service through the NFP program.

Sh/p/h.

Christopher Mackie, MD, MHSc, CCFP, FRCPC Medical Officer of Health





# Local Poverty Reduction Fund Grant: The CaNE Project

# Purpose of the Canadian Nurse-Family Partnership Education (CaNE) Project

The purpose of the CaNE project is to develop, pilot and evaluate a Canadian model of education for public health nurses and supervisors responsible for delivering Nurse-Family Partnership (NFP), in a small number of Ontario public health units. This project will:

- Create a public health nursing workforce that is clinically competent to deliver NFP
- Establish a sustainable model of NFP nurse education that can be efficiently delivered to nurses in a wide variety of geographical locations
- Improve pregnancy outcomes, birth outcomes, parenting capacity, and maternal achievement in education and employment

# The Nurse-Family Partnership Program

- Is an evidence-based, intensive home visiting program delivered by nurses to socially and economically disadvantaged pregnant women and first-time mothers
- Supports families to improve pregnancy and child health outcomes, and develop economic self-sufficiency
- Works for all young low-income first-time families, and is an especially good fit for female lone parents
- Is about partnering with and building on families' strengths to support mothers and children to break the cycle of poverty

# Who is Involved?

- NFP International Community and the Prevention Research Center for Family and Child Health, University of Colorado, Denver, CO (consultant)
- McMaster University, Hamilton, ON (lead researcher)
- Hamilton Public Health, Hamilton, ON (clinical lead)
- Middlesex-London Health Unit, London, City of Toronto (Public Health Division) (educational participants and NFP implementers)

# **Primary Evaluation Questions**

- Following completion of the NFP Canada Nurse Education program, are Ontario public health nurses and supervisors clinically competent to deliver the NFP program?
- Understanding that program fidelity is critical to ensuring client outcomes are achieved, is the NFP program being implemented as it is intended?

# www.healthunit.com



REPORT NO. 049-16

- TO: Chair and Members of the Board of Health
- FROM: Christopher Mackie, Medical Officer of Health

DATE: 2016 July 21

Infectious Diseases

# MEDICAL OFFICER OF HEALTH ACTIVITY REPORT – JULY

#### Recommendation

# It is recommended that Report No. 049-16 re: Medical Officer of Health Activity Report – July be received for information.

The following report highlights activities of the Medical Officer of Health (MOH) for the period of June 6, 2016 to July 8, 2016.

The MOH attend the alPHa Annual Conference in Toronto on June 6<sup>th</sup> and 7<sup>th</sup>. On day one of the conference, he presented and was on a panel for the Patients First initiative. He also had the opportunity to meet with Finance Critic/MPP Vic Fedeli to discuss Public Health funding. On the second day of the conference, the MOH was the key note speaker at the Breakfast Discussion hosted by the Heart and Stroke Foundation. The conference ended with a session for MOH's with Dr. David Williams, Chief Medical Officer of Health.

Throughout the summer months, the MOH will be attempting to meet one on one with each Manager at the Health Unit and then with each Team. It is hoped that staff will take these opportunities to discuss any issues, make inquires and put forward suggestions that they may have.

The Medical Officer of Health and CEO also attended the following teleconferences and events:

June 8	Attended Human Rights Tribunal
June 9	Met with Mel Sheehan to discuss the Mayor's Advisory Panel on Poverty (MAPOP) Met with external partners to discuss Mental Health issues in the community
June 10	Attended a Screening, Assessment and Intervention Team meeting
June 13	Attended the CPHA Conference to present at the Leadership and Influence workshop Was interviewed by CBC Radio in regards to changes to the Smoke-Free Ontario Act
June 15	Attended the Youth Opportunities Unlimited (YOU) Governance and Executive meeting
June 17	Was interviewed by Sean Meyer regarding HIV/HepC stats Participated in the Ice Cream Sundae Celebration to recognize the 6 <sup>th</sup> month anniversary of the organization's restructuring
June 20	Welcomed and provided orientation to Steve Turner, as the New Director of EHID Attended the London for All Implementation Conversation at the Boys and Girls Club
June 22	Attended the retirement celebration for Wally Adams, Director of Environmental Health &

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June 23 Attended a YOU Board meeting Participated in the Annual MLHU United Way Golf Tournament Met with Teresa Bendo, Director at Chatham-Kent Public Health

- June 28 Participated in an interview with Joseph Couture, London Yodeller in regards to HIV/HepC stats
- June 29 Hosted a meeting of The Collaborative Champions
- July 4 Participated in a phone conversation with Fraser Health in regards to supervised consumption services
- July 5 Attended the CBC London Launch Event at Edgar and Joe's Café
- July 6 Met with Lesley James from the Heart and Stoke Foundation
- July 7 Attended the Finance and Facilities Committee meeting
- July 8 Attended the Organizational Governance Committee meeting in Toronto

This report was prepared by Lynn Guy, Executive Assistant to the Medical Officer of Health.

Christopher Mackie, MD, MHSc, CCFP, FRCPC Medical Officer of Health

**This report addresses** Ontario Public Health Organizational Standard 2.9 Reporting relationship of the Medical Officer of Health to the Board of Health