

## CORRESPONDENCE – MARCH 2019

- a) Date: 2019 February 6  
Topic: Provincial oral health program for seniors  
From: Simcoe Muskoka District Health Unit  
To: The Honourable Doug Ford

***Background:***

During the 2018 campaign, the Ontario Progressive Conservative Party pledged to implement a publicly funded dental care program for low-income seniors. This included a commitment to increase dental services through Public Health Units, Community Health Centres, and Aboriginal Health Access Centres, as well as to increase funding for service delivery in underserved areas. On February 6, 2019, the Board of Health for the Simcoe Muskoka District Health Unit wrote to Premier Ford in support of a Provincial Oral Health Program for low-income seniors.

***Recommendation:*** Receive.

- b) Date: 2019 February 14  
Topic: Provincial oral health program for low-income adults and seniors  
From: Haliburton, Kawartha, Pine Ridge District Health Unit  
To: The Honourable Doug Ford

***Background:***

On February 14, 2019, the Board of Health for Haliburton, Kawartha, Pine Ridge District Health Unit wrote to Premier Ford expressing support for the Ontario government's commitment to build a provincial dental program for low-income seniors. In addition, it was requested that the government consider how this program could eventually expand into a dental care program that also serves low-income non-senior adults.

***Recommendation:*** Receive.

- c) Date: 2019 January 31 (received February 7)  
Topic: Cannabis use in public spaces  
From: Council of the Region of Durham  
To: The Honourable Doug Ford

***Background:***

At its January 30, 2019 meeting, the Council of the Region of Durham adopted recommendations related to cannabis use in public spaces. These recommendations will prohibit the use of cannabis in public spaces as well as in enclosed public spaces and workplaces.

***Recommendation:*** Receive.

- d) Date: 2019 February 20

Topic: Public and environmental health implications of *Bill 66, Restoring Ontario's Competitiveness Act, 2018*  
From: Simcoe Muskoka District Health Unit  
To: The Honourable Doug Ford

***Background:***

On February 20, 2019, the Board of Health for the Simcoe Muskoka District Health Unit (SMDHU) wrote to Premier Ford expressing concern about the Ontario government's decision to enact *Bill 66, Restoring Ontario's Competitiveness Act, 2018*. The legislation was assessed by SMDHU staff regarding its implications for public and environmental health; staff were apprehensive over unintended negative consequences that could arise, including: negative impacts to Ontario's natural and built environment, degradation of important water sources, decreased preservation of green spaces, decreased opportunities for physical activities, impacts on child safety, and increased spread of infectious diseases.

***Recommendation:*** Receive.

- e) Date: 2019 February 11  
Topic: The *Smoke-Free Ontario Act 2017* and cannabis legislation  
From: Windsor-Essex County Health Unit  
To: The Honourable Caroline Mulroney

***Background:***

On February 11, 2019, the Board of Health for the Windsor-Essex County Health Unit wrote to Minister Caroline Mulroney in support of Peterborough Public Health's call to action and over shared concern regarding funding associated with cannabis legislation and the introduction of the *Smoke-Free Ontario Act 2017*. Refer to correspondence items b) and i) in the [December 12, 2018 Board of Health agenda](#).

***Recommendation:*** Receive.

- f) Date: 2019 February 11  
Topic: Mandatory food literacy curricula in Ontario schools  
From: Windsor-Essex County Health Unit  
To: The Honourable Christine Elliott, The Honourable Lisa Thompson

***Background:***

On February 11, 2019, the Board of Health for Windsor-Essex County Health Unit wrote to Ministers Elliott and Thompson in support of the KFL&A Public Health Board of Health's call to examine existing school curricula on food literacy and introduce food literacy and food skills as mandatory components of school curricula. Refer to correspondence item e) from the [September 20, 2018 Board of Health agenda](#).

***Recommendation:*** Receive.

g) Date: 2019 February 11  
Topic: Ontario's Basic Income Pilot  
From: Windsor-Essex County Health Unit  
To: The Honourable Doug Ford, The Honourable Lisa MacLeod

***Background:***

On February 11, 2019, the Board of Health for Windsor-Essex County Health Unit wrote to Premier Ford and Minister MacLeod in support of the Thunder Bay District Health Unit's concerns and call to action regarding reconsidering the termination of the Ontario Basic Income Pilot. Refer to correspondence item e) in the [January 24, 2019 Board of Health agenda](#).

***Recommendation:*** Receive.

h) Date: 2019 February 11  
Topic: Petition for an adequately funded national, cost-shared, universal healthy school food program  
From: Windsor-Essex County Health Unit  
To: The Honourable Ginette Petitpas Taylor

***Background:***

On February 11, 2019, the Board of Health for Windsor-Essex County Health Unit wrote to Minister Ginette Petitpas Taylor in support for the Toronto Board of Health and Senator Art Eggleton's call for a federal, universal healthy school food program. School food programs are increasingly seen as vital contributors to students' physical and mental health, and academic achievement. Research demonstrates that school food programs have the potential to improve food choices, prevent disease, and support academic success for all students. The Windsor-Essex County Health Unit urges the federal government to support an adequately funded national, cost-shared, universal healthy school food program to address the existing funding shortfalls.

***Recommendation:*** Receive.

i) Date: 2019 February 11  
Topic: Funding for Healthy Babies, Healthy Children (HBHC) program  
From: Windsor-Essex County Health Unit  
To: The Honourable Lisa MacLeod

***Background:***

On February 11, 2019, the Board of Health for Windsor-Essex County Health Unit wrote to Minister MacLeod in support of the Thunder Bay District Health Unit's call to action and concern regarding program funding for the Healthy Babies, Healthy Children (HBHC) program. Refer to correspondence item b) in the [January 24, 2019 Board of Health agenda](#) and [Report No. 023-19 \(March 21, 2019 Board of Health agenda\)](#).

***Recommendation:*** Receive.

- j) Date: 2019 February 26  
Topic: Connecting care in Ontario  
From: Helen Angus, Deputy Minister, Ministry of Health and Long-Term Care  
To: Medical Officers of Health, all Health Units

***Background:***

On February 26, 2019, Deputy Minister Helen Angus issued a letter regarding Minister Christine Elliott's announcement of the Government of Ontario's long-term plan to fix and strengthen the public health care system by focusing directly on the needs of Ontario's patients and families. This focus is intended to improve patient experience and enable better-connected public health care by establishing local Ontario Health Teams, which will integrate multiple existing provincial agencies into a single agency, Ontario Health. This agency would act as a central point for accountability and oversight of the province's public health care system. The structure of local public health will not be affected by these changes, although further changes are expected.

***Recommendation:*** Receive.

- k) Date: 2019 February 27  
Topic: Support for provincial oral health program for low-income adults and seniors  
From: Peterborough Public Health  
To: The Honourable Doug Ford

***Background:***

On February 27, 2019, the Board of Health for Peterborough Public Health wrote to Premier Ford in support of correspondence from Public Health Sudbury & Districts regarding support for provincial oral health programs for low-income adults and seniors. Refer to correspondence item a) in the [January 24, 2019 Board of Health agenda](#).

***Recommendation:*** Receive.

- l) Date: 2019 February 27  
Topic: Social Assistance Research Commission  
From: North Bay Parry Sound District Health Unit  
To: The Honourable Doug Ford, The Honourable Christine Elliott, The Honourable Lisa MacLeod

***Background:***

At its February 27, 2019 meeting, the Board of Health for the North Bay Parry Sound District Health Unit passed resolutions in support of *Bill 60, Ministry of Community and Social Services Amendment Act (Social Assistance Research Commission), 2018*. The Commission will make recommendations on social assistance policy, including social assistance rates that are based on the real costs of living in regions across Ontario and that take into account the cost of healthy eating. The North Bay Parry Sound District Health Unit continues to raise awareness about the importance of income security for low-income Ontarians in an effort to reduce food insecurity rates.

***Recommendation:*** Receive.

- m) Date: 2019 March 1  
Topic: alPHa information update for Board of Health members  
From: Association of Local Public Health Agencies (alPHa)  
To: All Boards of Health

***Background:***

On March 1, 2019, the Association of Local Public Health Agencies (alPHa) issued an update for Board of Health members that included: highlights from the 2019 alPHa Winter Symposium; an overview of the Board of Health orientation; information on health system restructuring; and a summary of alPHa responses and communications. Upcoming events include Minding Public Health, alPHa's 2019 annual general meeting and conference, to be held June 9–11, 2019, in Kingston, Ontario.

***Recommendation:*** Receive.

- n) Date: 2019 March 4  
Topic: Strengthening the Smoke-Free Ontario Act, 2017 to address the promotion of vaping  
From: Renfrew County and District Health Unit  
To: The Honourable Christine Elliott, Minister of Health

***Background:***

On March 4, 2019, the Board of Health for Renfrew County and District Health Unit wrote to Minister Elliott in support of Peterborough Public Health's urging of the Ontario government to strengthen the *Smoke-Free Ontario Act, 2017* to prohibit, through regulation, the promotion of vaping products. Refer to correspondence item b) in the [December 12, 2019 Board of Health agenda](#).

***Recommendation:*** Receive.

- o) Date: 2019 March 4  
Topic: Support for provincial oral health program for low-income adults and seniors  
From: Renfrew County and District Health Unit  
To: The Honourable Doug Ford

***Background:***

On March 4, 2019, the Board of Health for Renfrew County and District Health Unit wrote to Premier Ford in support of correspondence from Public Health Sudbury & Districts regarding provincial government support for an oral health program for low-income seniors and encouraging the government to expand the program to include low-income adults. Refer to correspondence item a) in the [January 24, 2019 Board of Health agenda](#).

***Recommendation:*** Receive.

p) Date: 2019 March 5  
Topic: Council of Ontario Medical Officers of Health (COMOH) resolution on HIV case management  
From: Association of Local Public Health Agencies (alPHA)  
To: All Boards of Health

***Background:***

On February 21, 2019, the Council of Ontario Medical Officers of Health (COMOH) affirmed the understanding that an undetectable HIV viral load poses effectively no risk of HIV transmission within a comprehensive public health approach to sexual health. COMOH further acknowledges the importance of communicating the Undetectable = Untransmittable (U = U) message as part of a comprehensive public health approach to sexual health.

***Recommendation:*** Endorse.

February 6, 2019

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building  
Queens's Park  
Toronto, ON M7A 1A1

Dear Premier Ford:

**Re: Support of a Provincial Oral Health Program for Seniors**

The Board of Health for the Simcoe Muskoka District Health Unit (Board) is encouraged by the new provincial government's support for a provincial oral health program for low-income seniors. The financial, health and social impacts of poor oral health in seniors has been a long standing area of concern for our Board.

In 2016, our Board sent a letter to the Minister of Health calling on the Provincial Government to expand access to publically funded dental care for all low income adults, including low income seniors and all institutionalized seniors. The letter cited how access to prevention and dental treatment would reduce oral health inequities in Ontario that profoundly impact some of the most vulnerable people in our local jurisdiction and the Province as a whole.

As an indication of this need, in 2017 there were 4,069 visits to emergency departments within hospitals in Simcoe and Muskoka for oral health reasons. This figure remains highly troubling. It shows that a large number of our residents lack access to preventive and restorative oral health care, and therefore, need to resort to emergency departments for their dental needs. Unfortunately, these visits further burden an already overwhelmed hospital system and ultimately fail to address the underlying oral health problems causing pain and infection.

The Ontario Progressive Conservative Party has pledged to implement a publically funded dental care program for low income seniors. As well, they have committed to increase dental services through Public Health Units, Community Health Centres, and Aboriginal Health Access Centres and to increase funding to provide investment for service delivery in underserved areas. Our Board sees firsthand the positive impact that our Healthy Smiles Dental Clinics have on the clients and communities we serve. In 2018, we completed approximately 4,300 appointments for eligible clients in our clinics and over 900 preventive appointments for

□ **Barrie:**  
15 Sperling Drive  
Barrie, ON  
L4M 6K9  
705-721-7520  
FAX: 705-721-1495

□ **Collingwood:**  
280 Pretty River Pkwy.  
Collingwood, ON  
L9Y 4J5  
705-445-0804  
FAX: 705-445-6498

□ **Cookstown:**  
2-25 King Street S.  
Cookstown, ON  
L0L 1L0  
705-458-1103  
FAX: 705-458-0105

□ **Gravenhurst:**  
2-5 Pineridge Gate  
Gravenhurst, ON  
P1P 1Z3  
705-684-9090  
FAX: 705-684-9887

□ **Huntsville:**  
34 Chaffey St.  
Huntsville, ON  
P1H 1K1  
705-789-8813  
FAX: 705-789-7245

□ **Midland:**  
B-865 Hugel Ave.  
Midland, ON  
L4R 1X8  
705-526-9324  
FAX: 705-526-1513

□ **Orillia:**  
120-169 Front St. S.  
Orillia, ON  
L3V 4S8  
705-325-9565  
FAX: 705-325-2091

Healthy Smiles Ontario children in schools. We support increasing clinical capacity, including in Public Health Units, in order to address the severe need among low income seniors. We await further news concerning public health's role in reducing barriers to oral health, increasing service delivery for low income seniors and improving health system efficiency.

Sincerely,

**ORIGINAL Signed By:**

Anita Dubeau  
Chair, Board of Health

AD:HM:cm

Cc. Honorable Christine Elliot, Minister of Health and Long-Term Care  
Dr. David Williams, Chief Medical Officer of Health  
Members of Provincial Parliament for Simcoe and Muskoka  
Ontario Boards of Health  
Ms. Loretta Ryan, Association of Local Public Health Agencies  
Ms. Jacquie Maund and Ms. Anna Rusak, Ontario Oral Health Alliance  
Mayors and Councils in Simcoe Muskoka  
Central Local Health Integration Network  
North Simcoe Muskoka Local Health Integration Network



The Honourable Doug Ford  
Premier of Ontario  
Legislative Building, Queen's Park  
Toronto, ON M7A 1A1  
(Sent via email to: [premier@ontario.ca](mailto:premier@ontario.ca) )

February 14, 2019

Dear Premier Ford

**Re: Support for Provincial Oral Health Program for Low-Income Adults and Seniors**

I am writing to you on behalf of the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit (Health Unit) to express our support for the Government of Ontario's commitment to build a provincial dental program for low-income seniors by increasing the funding for dental services in Public Health Units (PHUs), Community Health Centres (CHCs), and Aboriginal Health Access Centres and by investing in new dental services in underserved areas including increasing the capacity in PHUs and investing in mobile dental buses. The Health Unit's Oral Health staff take pride in being able to assist parents of children and youth 17 and under in our communities to access the Healthy Smiles Ontario program to look after their children's oral health needs and look forward to being able to help local seniors access dental care.

In our Health Unit area, we are fortunate to have two CHCs, one in Northumberland County and one in the City of Kawartha Lakes that offer low-cost dental programs, and there is a volunteer dental clinic in Haliburton County, run by dental professionals who provide treatment at no cost to residents with serious dental care needs. Our local social service agencies are able to offer some limited discretionary dental assistance to recipients of Ontario Works. Northumberland County Community & Social Services also has a Community Outreach program that may be able to provide minimal funding to some low-income adults and seniors to assist with health issues like dental care.

Despite the existence of these programs, our Health Unit's Oral Health staff regularly hear from adults and seniors who fail to qualify for these programs because discretionary funding has run out, they are not financially or clinically eligible for the program and/or they simply cannot afford to pay the reduced rate offered. This leaves many residents no choice but to visit their local Emergency Room (ER). Hospital data from the Ministry of Health and Long-Term Care tell us that in 2015, 1,208 adults living in our Health Unit area visited the ER for dental-related issues. At an estimated \$513 per dental-related ER visit, this cost the system \$619,700, for patients to access a painkiller or an antibiotic but no dental treatment. We also know from these data that over 75% of those visiting the ER are adults between the ages of 20 and 64. We therefore ask that while developing the proposed dental program for low-income seniors, that your government consider how this program could eventually expand into a dental care program that also serves low-income adults.

.../2

PROTECTION · PROMOTION · PREVENTION

**HEAD OFFICE**  
200 Rose Glen Road  
Port Hope, Ontario L1A 3V6  
Phone · 1-866-888-4577  
Fax · 905-885-9551

**HALIBURTON OFFICE**  
Box 570  
191 Highland Street, Unit 301  
Haliburton, Ontario K0M 1S0  
Phone · 1-866-888-4577  
Fax · 705-457-1336

**LINDSAY OFFICE**  
108 Angeline Street South  
Lindsay, Ontario K9V 3L5  
Phone · 1-866-888-4577  
Fax · 705-324-0455

Premier Ford  
February 14, 2019  
Page 2

We look forward to receiving more information about how Ontario public health units can facilitate and support the implementation of a new public dental program for low-income seniors, with the potential for this program to also serve low-income adults in the future.

Thank you again for your commitment to improving the oral health and overall health of Ontarians.

Sincerely

BOARD OF HEALTH FOR THE HALIBURTON,  
KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT



Cammie Jaquays  
Chair, Board of Health

AR/ALN:ed

cc (via email) : Honourable Christine Elliott, Minister of Health and Long-Term Care  
Dr. David Williams, Chief Medical Officer of Health, Minister of Health and Long-Term Care  
Mr. David Piccini, MPP, Northumberland Peterborough South  
Ms. Laurie Scott, MPP, Haliburton Kawartha Brock  
Municipalities within the Haliburton, Kawartha, Pine Ridge District Health Unit area  
All Ontario Boards of Health  
Ms. Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Ms. Pegeen Walsh, Executive Director, Ontario Public Health Association  
Association of Municipalities of Ontario



January 31, 2019

RECEIVED

FEB 07 2019

Medical Officer of Health

The Honourable Doug Ford  
Premier of Ontario  
Minister of Intergovernmental Affairs  
Room 281  
Legislative Building, Queen's Park  
Premier's Office  
Toronto ON M7A 1A1

COPY

The Regional  
Municipality  
of Durham

Corporate Services  
Department  
Legislative Services

605 Rossland Rd. E.  
Level 1  
PO Box 623  
Whitby, ON L1N 6A3  
Canada

905-668-7711  
1-800-372-1102  
Fax: 905-668-9963

durham.ca

Don Beaton, BCom, M.P.A.  
Commissioner of Corporate  
Services

Dear Minister Ford:

**RE: Motion re: Cannabis Use in Public Places**  
**Our File: P00**

Council of the Region of Durham, at a meeting held on January 30, 2019, adopted the following recommendations of the Committee of the Whole:

- "A) Whereas the use of cannabis became legalized in Canada on October 17, 2018; and
- B) Whereas every time cannabis is used it can adversely affect learning and remembering, mental health, and mood and feelings; and
- C) Whereas regular cannabis use over a prolonged period of time can injure the lungs, adversely affect mental health, and lead to physical dependence or addiction; and
- D) Whereas cannabis use in public places combined with its known health effects can adversely affect community safety, such as through impaired driving, etc.; and
- E) Whereas Section 11 of Schedule 1 (*Cannabis Act, 2017*) of *The Cannabis, Smoke-Free Ontario and Road Safety Statute Law Amendment Act, 2017*, S.O. 2017, c. 26 – Bill 174 prohibited the use of cannabis in public places; and
- F) Whereas Section 11 of Schedule 1 (Amendments to the Cannabis Act, 2017 and Other Acts) repealed Section 11 (Restrictions on places of consumption) of the *Cannabis Act, 2017*; and

If you require this information in an accessible format, please contact 1-800-372-1102 ext. 2097.



- G) Whereas Section 12 of the *Smoke-Free Ontario Act, 2017* prohibits the smoking or holding of lighted cannabis in only enclosed public places and workplaces; and
- H) Whereas it is desirable to mitigate the human health effects of cannabis use and to de-normalize the use of cannabis in all public places, particularly with respect to children and youth; and
- I) Whereas it is also desirable to mitigate the community safety impacts of cannabis use in all public places;
- J) Now therefore be it resolved that the Council of the Regional Municipality of Durham urges the Government of Ontario to amend the *Smoke-Free Ontario Act, 2017* such that the smoking or holding of lighted cannabis is prohibited in all public places; and
- K) Now be it further resolved that the Councils of Durham's lower-tier municipalities are requested to endorse this resolution; and
- L) Now be it further resolved that the Premier of Ontario, Deputy Premier & Minister of Health and Long-Term Care, Attorney General of Ontario, Minister of Finance, Durham's MPPs, Chief Medical Officer of Health, AMO, alPHA and all Ontario Boards of Health be so advised."



Ralph Walton,  
Regional Clerk/Director of Legislative Services

RW/np

- c: Honourable Christine Elliott, Deputy Premier and Minister of Health and Long-Term Care  
The Honourable Caroline Mulroney, Attorney General  
The Honourable Victor Fedeli, Minister of Finance  
Dr. David Williams, Chief Medical Officer of Health  
Pat Vanini, Executive Director, Association of Municipalities of Ontario (AMO)

Loretta Ryan, Executive Director, Association of Public Health  
Agencies (alPHa)  
Rod Phillips, MPP (Ajax/Pickering)  
Lorne Coe, MPP (Whitby/Oshawa)  
Lindsey Park, MPP (Durham)  
Jennifer French, MPP (Oshawa)  
Laurie Scott, MPP (Haliburton/Kawartha Lakes/Brock)  
Peter Bethlenfalvy, MPP (Pickering/Uxbridge)  
David Piccini, MPP (Northumberland-Peterborough South)  
Ontario Boards of Health  
Dr. R.J. Kyle, Commissioner and Medical Officer of Health



February 20, 2019

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building  
Queens's Park  
Toronto, ON M7A 1A1

Dear Premier Ford:

**Re: Public and Environmental Health Implications of Bill 66, Restoring Ontario's Competitiveness Act, 2018**

On behalf of the Simcoe Muskoka District Health Unit (SMDHU) Board of Health, I am writing to express concern about the Government of Ontario's decision to enact Bill 66, Restoring Ontario's Competitiveness Act, 2018.

We appreciate the intention to enhance employment opportunities throughout Ontario, and recognize good quality employment as a key element which influences health. Individuals who are unemployed, have precarious employment, or experience poor working conditions are at higher risk of stress, injury, high blood pressure and heart disease. However, the proposed bill will amend a number of acts and regulations intended to protect and promote public and environmental health.

In consideration of the proposed amendments, Bill 66 was assessed by SMDHU staff for implications to public and environmental health. We are apprehensive of unintended negative consequences which may arise from the implementation of this bill. The attached appendices outline concerns related to Schedule 3 ([Appendix 1](#)) and Schedule 5 ([Appendix 2](#)). Schedule 10 ([Appendix 3](#)) is also included, though the Board of Health is aware of media reports and social media remarks made by Honourable Minister Clark indicating "*when the legislature returns in February, (the Government) will not proceed with Schedule 10 of the Bill.*" This is welcomed, however, from our assessment of Bill 66 as it is presently written, its implementation to amend and repeal current legislation will potentially result in:

- Negative impacts to Ontario's natural and built environment;
- Degradation of important water sources;
- Decreased preservation of greenspaces including agricultural lands, forests, parks and natural heritage features;
- Decreased opportunities for physical activity;
- Impacts to child safety; and
- Increased risk of the spread of infectious diseases.

☐ **Barrie:**  
15 Sperling Drive  
Barrie, ON  
L4M 6K9  
705-721-7520  
FAX: 705-721-1495

☐ **Collingwood:**  
280 Pretty River Pkwy.  
Collingwood, ON  
L9Y 4J5  
705-445-0804  
FAX: 705-445-6498

☐ **Cookstown:**  
2-25 King Street S.  
Cookstown, ON  
L0L 1L0  
705-458-1103  
FAX: 705-458-0105

☐ **Gravenhurst:**  
2-5 Pineridge Gate  
Gravenhurst, ON  
P1P 1Z3  
705-684-9090  
FAX: 705-684-9887

☐ **Huntsville:**  
34 Chaffey St.  
Huntsville, ON  
P1H 1K1  
705-789-8813  
FAX: 705-789-7245

☐ **Midland:**  
B-865 Hugel Ave.  
Midland, ON  
L4R 1X8  
705-526-9324  
FAX: 705-526-1513

☐ **Orillia:**  
120-169 Front St. S.  
Orillia, ON  
L3V 4S8  
705-325-9565  
FAX: 705-325-2091

We request the government consider the impacts on the public health and safety of residents of Ontario prior to Bill 66 proceeding through the legislative process. We thank you for the opportunity to provide comment and your consideration of our feedback.

Sincerely,

**ORIGINAL Signed By:**

Anita Dubeau  
Chair, Board of Health

AD:BA:cm

cc. Honorable Christine Elliot, Minister of Health and Long-Term Care  
Honorable Steve Clark, Minister of Municipal Affairs  
Honorable Lisa Thompson, Minister of Education  
Honorable Rod Phillips, Minister of the Environment, Conservation and Parks  
Dr. David Williams, Chief Medical Officer of Health  
Members of Provincial Parliament for Simcoe and Muskoka  
Ontario Boards of Health  
Ms. Loretta Ryan, Association of Local Public Health Agencies  
Association of Municipalities of Ontario  
Ontario Public Health Association  
Members of Provincial Parliament  
Municipal Councils  
Central Local Health Integration Network  
North Simcoe Muskoka Local Health Integration Network



## **Appendix 1: Concerns and considerations related to Schedule 3 – Ministry of Education**

SMDHU recognizes the efforts to enhance child care availability to families by increasing the total number of children under the age of two that can be cared for by home child care providers. Though evidence on optimal infant to caregiver ratios is inconclusive, the current limits in Child Care and Early Year's Act, 2014, were chosen to ensure child safety<sup>1</sup>. We urge the government to evaluate the effects of this legislation on child safety and developmental outcomes if implemented. The proposed changes will not adequately address issues of access, affordability, and quality child care for families. Similar to our high quality education system, a child care strategy that prioritizes accessibility, affordability and quality is best addressed through a government system that ensures universal access to high quality care.

In addition, there may be implications to infection prevention and control due to the proposed amendment to paragraph 4 subsection 6 (4) of the Child Care and Early Years Act, 2014, which recommends the reduction of the age restriction from six years of age to four for registration in authorized recreation and skill building programs. Authorized recreational and skill building programs are not proactively inspected for food safety nor infection prevention and control by local public health units. With immunization follow-up doses for several diseases (e.g. measles, pertussis, and chickenpox) not occurring until a child is between 4 – 6 years, coupled with the potential for decreased hygienic practices and larger numbers of children congregating in one location<sup>2</sup>, there is the potential for the spread of vaccine-preventable diseases. Facilities that are not required to be inspected may not have the administrative (e.g. policies on when to exclude ill children) or physical (e.g. appropriate disinfectants) infrastructure to prevent infections. By lowering the age from six years to four, a potential increased infectious disease risk will occur for children 4-6 years attending these programs.

---

<sup>1</sup> Ontario Ombudsman. 2014. Ombudsman Report: "Careless about Childcare" Investigation into how the Ministry of Education responds to complaints and concerns relating to unlicensed daycare providers .Available at: [www.ombudsman.on.ca/Files/sitemedia/Documents/Investigations/SORT%20Investigations/CarelessAboutChildCareEN-2.pdf](http://www.ombudsman.on.ca/Files/sitemedia/Documents/Investigations/SORT%20Investigations/CarelessAboutChildCareEN-2.pdf)

<sup>2</sup> Canadian Paediatric Society. 2015. Well Beings: A Guide to Health in Child Care – 3<sup>rd</sup> edition.

**Appendix 2: Concerns and considerations related to Schedule 5 - Ministry of Environment, Conservation and Parks**

The purpose of the Toxics Reductions Act (TRA) is to prevent pollution and protect human health and the environment, through reducing the use and creation of toxic substances within Ontario. While SMDHU supports efforts to avoid duplication of existing provincial and federal regulations, it is important to recognize the need to reduce the availability of toxic substances within Ontario. Existing federal requirements through the National Pollutant Release Inventory and the Chemical Management Plan have limitations to supporting further reduction of toxic substances that the province of Ontario hoped to address. The TRA can provide important economic benefits which lead to potential cost savings, creating new markets, and supporting employee health and safety. Similar legislation has shown to be effective in other jurisdictions in the United States that have required toxic reduction plans. Thus, SMDHU encourages the province to not eliminate the TRA, but to evaluate more effective opportunities for toxics reduction in Ontario that can support creating healthy environments while reducing barriers for business

### **Appendix 3: Concerns and considerations related to Schedule 10 - Ministry of Municipal Affairs and Housing**

The Planning Act and associated provincial regulations support effective planning, by ensuring development meets community needs, allows for sustainable economic growth, while protecting green spaces such as agricultural lands, forests, parks and natural heritage features which provide multiple health, economic and environmental benefits. The health benefits of well-designed communities based on provincial policies include better air quality, protected drinking water supplies, availability of locally grown foods, reduced urban heat islands, increased climate resiliency, mitigation of vector-borne diseases, increased opportunities for physical activity, general wellbeing and lower health care costs. Conservation of natural heritage features such as the Greenbelt addresses climate change mitigation (carbon sequestration) and adaptation (mitigating flood risks). For example, the Greenbelt actively stores carbon, with an estimated value of \$4.5 billion over 20 years; annual carbon sequestration is valued at 10.7 million per year<sup>1</sup>. Benefits of greenspaces are communicated within the 'Preserving and Protecting our Environment for Future Generations: a Made in Ontario Environment Plan' which identifies the government's commitment to protect the Greenbelt for future generations<sup>2</sup>.

SMDHU is concerned that the proposed amendment to the Planning Act will allow the use of *Open for Business* planning by-laws to permit the use of these important lands for alternative purposes without adhering to existing local planning requirements, such as official plans. Employment land needs are explicitly identified within local planning documents, and thus the use of the by-law will compromise long-term planning decisions. While the by-law may provide short-term economic benefit through the expansion of employment lands, this will be at the expense of long-term, sustainable economic development and protection of green space currently prescribed by the Planning Act.

In addition, Bill 66 allows municipalities to bypass important environmental legislation and discount protections for clean water and environmentally sensitive areas across Ontario. After the events of 2000 in Walkerton, where seven people died and thousands were ill<sup>3</sup>, Ontario put legislation in place to protect the over 80% of Ontarians who get their drinking water from municipal sources. The Clean Water Act, which directly addresses 22 of the 121 recommendations made following the Walkerton Inquiry, supports the adoption of a watershed based planning process, and serves as the instrument for the creation of source water protection plans.

Current legislation protects drinking water sources and greenspace. The changes proposed in Bill 66 will weaken a number of noteworthy acts including the Clean Water Act, the Great Lakes Protection Act, the Lake Simcoe Protection Act, the Greenbelt Act, the Oak Ridges Moraine Conservation Act, and the Places to Grow Act. Currently these acts prevail in the case of conflict between a municipal plan and the noted act; under the proposed changes this would no longer be the case.

---

<sup>1</sup> Tomalty, R. 2012. *Carbon in the Bank: Ontario's Greenbelt and its role in mitigating climate change*. [Vancouver]: David Suzuki Foundation

<sup>2</sup> Ministry of the Environment, Conservation and Parks. 2018. *Preserving and protecting our environment for future generations: A Made-in-Ontario environment plan*. [Toronto]: Ontario Ministry of the Environment, Conservation and Parks.

<sup>3</sup> Walkerton Inquiry (Ont.) and Dennis R. O'Connor. 2002. *Report of the Walkerton Inquiry: A strategy for safe drinking water*. [Toronto]: Ontario Ministry of the Attorney General.

Notably, Section 39 of the Clean Water Act currently requires all Planning Act decisions to conform to policies in approved source protection plans that address significant drinking water threats prescribed by the Clean Water Act<sup>i</sup>. This important provision must remain applicable to all municipal planning and zoning decisions in order to protect public health and safety.

Bill 66 not only impacts drinking water, but also moves back progress made on protecting Lake Simcoe. The Lake Simcoe Protection Act was created to safeguard the watershed and protect our Great Lakes and Lake Simcoe from environmental damage. Lake Simcoe attracts 9 million visitors on an annual basis and accounts for approximately \$1 billion dollars in annual spending. Due to the economic, environmental and health impacts that the *Open for Business* planning bylaw will present, we urge the government to remove the amendment to the Planning Act, from Bill 66. At minimum, public health authorities should be granted the ability under the *Planning Act* to review and comment on open for business bylaw applications, due to potential risk and hazards to health and for the protection and promotion of public health and safety.

---

<sup>i</sup> Threats identified in the act include landfills, sewage systems, and the storage or handling of fuel, fertilizers, manure, pesticides, road salt, organic solvents and other substances on lands near wells or surface water intake pipes used by municipal drinking water systems

February 11, 2019

The Honorable Caroline Mulroney  
Ministry of the Attorney General  
McMurtry-Scott Building, 720 Bay Street  
Toronto, ON M7A 2S9  
[Caroline.mulroney@pc.ola.org](mailto:Caroline.mulroney@pc.ola.org)

Dear Minister Mulroney:

**Smoke-Free Ontario Act, 2017 and Cannabis legislation**

On behalf of our board of health, I am writing you in support of Peterborough Public Health's (PPH) call to action and shared concern regarding funding associated with the cannabis legislation and the introduction of the *Smoke-Free Ontario Act 2017*.

The Windsor-Essex County Health Unit (WECHU) applauds the ministry on the modernization of smoking regulations in Ontario and welcomes the additional restrictions outlined in the new legislation due to their alignment with local and regional goals related to reducing places of use for harmful products. The consequences however, of the inclusion of electronic cigarette-use and the smoking of cannabis as prohibited products in prescribed places involve the added responsibility of public health tobacco enforcement officers in enforcing these regulations. In addition, the transfer of responsibility from the province to local public health units related to the oversight of tobacconist and specialty vape store authorizations represents an additional burden on administrative and enforcement resources.

Although boards of health were permitted to submit for reimbursement of costs incurred due to the legalization of cannabis, through a one-time grant application process in which the Windsor-Essex County Health Unit requested \$197,392, there are concerns about the ability to ensure effective enforcement and oversight over the long-term without sustained resources dedicated to enforcement, administration, and public education. To date, no such resources have been received by the Windsor-Essex County Health Unit and there is no guarantee that resources allocated to municipalities to assist with the costs associated with cannabis legalization will be redistributed to public health agencies.

With the introduction of a sustained and dedicated funding model to account for the additional responsibilities introduced through the Smoke-free Ontario Act 2017, as well as those associated with cannabis legalization, public health units across Ontario will be able to efficiently and effectively enforce and provide oversight over these new requirements. Without these supplementary resources, WECHU has significant and legitimate concerns related to its ability to maintain existing programming when these new requirements are taken into account.

The Windsor-Essex County Health Unit thanks you for your consideration.

Sincerely,



Gary McNamara  
Chair, Board of Health



Theresa Marentette, RN, MSc  
Chief Executive Officer, Chief Nursing Officer

<https://www.wechu.org/board-meetings/january-2019-board-meeting>

Encl. Peterborough Public Health – Letter to Hon. Caroline Mulroney – Nov 2018

c: The Hon. Doug Ford, Premier of Ontario  
The Hon. Christine Elliott, Minister of Health and Long-Term Care, Deputy Premier  
Association of Local Public Health Agencies (ALPHA)  
Association of Municipalities of Ontario (AMO)  
Ontario Boards of Health  
Local Municipal Councils  
Windsor-Essex MPPs  
Windsor-Essex Board of Health



February 11, 2019

Hon. Christine Elliott, Deputy Premier  
Minister, Ministry of Health and Long-Term Care  
80 Grosvenor St., Hepburn Block, 10<sup>th</sup> Floor  
Toronto, ON M7A 1E9  
[christine.elliottco@pc.ola.org](mailto:christine.elliottco@pc.ola.org)

Hon. Lisa Thompson, Minister  
Ministry of Education  
900 Bay St., Mowat Block, 22<sup>nd</sup> Floor  
Toronto, ON M7A 1L2  
[lisa.thompson@pc.ola.org](mailto:lisa.thompson@pc.ola.org)

Dear Ministers Elliott and Thompson:

### **Mandatory Food Literacy Curricula in Ontario Schools**

On behalf of the Windsor-Essex County Health Unit, we would like to express our support for the Kingston, Frontenac, Lennox & Addington Board of Health's call to examine the current school curricula concerning food literacy, and the introduction of food literacy and food skills as a mandatory component of school curricula.

Food literacy and food skills are the foundation for healthy eating, encompassing factors including food and nutrition knowledge, and the skills necessary to prepare healthy and affordable meals. In Canada, food literacy has been in decline over the past few decades affecting all segments of society. The lack of essential food literacy skills coupled with changes in the food environment and increased practices in marketing of unhealthy food and beverages have made it a challenge for Ontarians to practice healthy eating habits. It has led to an increase of pre-prepared, packaged and convenience foods higher in fat, salt and sugar; and foods linked to a greater risk of diet-related chronic diseases.

The school setting is an opportunity to support students with knowledge and food skills that will equip them to make healthy decisions in a complex food environment. While, the current system makes food literacy curriculum available to students in high school, it is estimated that only one-third of Ontario students who entered Grade 9 from the 2005/06 to 2009/10 school years earned one or more credits in a course that included a food literacy component during their secondary school education. Food literacy needs to be part of the mainstream school curriculum, incorporated in a cross-curricular approach starting at the elementary school level. This approach would ensure that healthy eating concepts are consistently taught, reinforced, and reflected as students move through the school years.

As the Ministry of Education engages in a consultation regarding the education system in Ontario, our Board of Health strongly urges that mandatory food literacy and food skills training be included in the school curricula.

The Windsor-Essex County Health Unit thanks you for your consideration.

Sincerely,



Gary McNamara  
Chair, WECHU Board of Health



Theresa Marentette, RN, MSc  
Chief Executive Officer, Chief Nursing Officer

<https://www.wechu.org/board-meetings/september-2018-board-meeting>

Encl. KFL&A Public Health – Letter to Hon. Indira Naidoo-Harris – April 2018

c: Ontario Boards of Health  
Windsor-Essex Board of Health  
Lisa Gretzky, MPP Windsor-West  
Percy Hatfield, MPP Windsor-Tecumseh  
Taras Natyshak, MPP Essex  
Rick Nicholls, MPP Chatham-Kent-Essex  
WEC local school boards  
Dr. David Williams, Chief Medical Officer of Health  
Association of Local Public Health Agencies (alPHA)  
Association of Municipalities of Ontario (AMO)  
Ophea and ODPH





February 11, 2019

The Honorable Doug Ford  
Premier of Ontario  
[premier@ontario.ca](mailto:premier@ontario.ca)

The Honorable Lisa MacLeod  
Minister of Children, Community and Social Services  
[lisa.macleodco@pc.ola.org](mailto:lisa.macleodco@pc.ola.org)

Dear Premier Ford and Minister MacLeod:

**Ontario's Basic Income Pilot**

On behalf of our Board of Health, I am writing to you in support of Thunder Bay District Health Unit's concern and call to action to reconsider the termination of the Ontario's Basic Income Pilot and reduction of scheduled increases to the Ontario Works and Ontario Disability Support Programs (3% to 1.5%).

The Windsor-Essex County Board of Health has previously written the government expressing its support for the Basic Income Pilot as an evidence-based program to improve quality of life for the most vulnerable Ontarians.

The Windsor-Essex County Health Unit agrees that addressing issues of poverty is a public health priority, and a health equity and human rights issue. Individuals, or households, with lower incomes experience higher levels of food insecurity and suffer from higher mortality from chronic diseases, including mental illness. In Windsor approximately 33% of children under 18, or 1 in 3, live in poverty. Providing a basic income assists in ensuring their basic needs are met, including proper nutrition, and allowing children to grow healthy and reach their full potential.

The Windsor-Essex County Health Unit thanks you for your consideration.

Sincerely,



Gary McNamara  
Chair, Board of Health



Theresa Marentette, RN, MCs  
Chief Executive Officer, Chief Nursing Officer

<https://www.wechu.org/board-meetings/january-2019-board-meeting>

Encl.

c: Association of Local Public Health Agencies (ALPHA)  
Association of Municipalities of Ontario (AMO)  
Ontario Boards of Health  
Windsor-Essex MPPs  
Windsor-Essex Board of Health



**Thunder Bay District  
Health Unit**

**MAIN OFFICE**  
999 Balmoral Street  
Thunder Bay, ON P7B 6E7  
Tel: (807) 625-5900  
Toll Free in 807 area code  
1-888-294-6630  
Fax: (807) 623-2369

**GREENSTONE**  
P.O. Box 1360  
510 Hogarth Avenue, W.  
Geraldton, ON P0T 1M0  
Tel: (807) 854-0454  
Fax: (807) 854-1871

**MANITOUWADGE**  
1-888-294-6630

**MARATHON**  
P.O. Box 384  
Marathon Library Building  
Lower Level,  
24 Peninsula Road  
Marathon, ON P0T 2E0  
Tel: (807) 229-1820  
Fax: (807) 229-3356

**NIPIGON**  
P.O. Box 15  
Nipigon District  
Memorial Hospital  
125 Hogan Road  
Nipigon, ON P0T 2J0  
Tel: (807) 887-3031  
Fax: (807) 887-3489

**TERRACE BAY**  
P.O. Box 1030  
McCausland Hospital  
20B Cartier Road  
Terrace Bay, ON P0T 2W0  
Tel: (807) 825-7770  
Fax: (807) 825-7774

TBDHU.COM

November 21, 2018

Hon. Doug Ford  
Premier of Ontario  
[Doug.fordco@pc.ola.org](mailto:Doug.fordco@pc.ola.org)

Hon. Lisa Macleod  
Minister of Children, Community and Social Services  
[Lisa.macleodco@pc.ola.org](mailto:Lisa.macleodco@pc.ola.org)

Dear Premier Ford and Minister Macleod,

As chair of the board of health for the Thunder Bay District Health Unit, I am writing to convey my concern at the termination of Ontario's Basic Income Pilot and reduction of the scheduled increase to Ontario Works and Ontario Disability Support Program from 3% to 1.5%, and urge you to reconsider your decision.

The government's current decision is a retraction of the pre-election indications to continue the project, and will place more than 4000 pilot participants in very challenging socio-economical circumstances. The pilot was provincially and nationally recognized as a pivotal opportunity to study the impact of basic income on societal, economical and health outcomes in Ontario. Significant resources have already been invested in the planning and implementation of the project; to terminate the project at this inopportune time would be wasteful especially without gathering insight from its outcomes.

The Thunder Bay District Health Unit believes that addressing issues of poverty is a public health priority, and a healthy equity and human rights issue. There is considerable research to show that individuals or households with lower income experience higher levels of food insecurity, which is linked to higher levels of adverse health and societal outcomes, compared to those with higher incomes<sup>1</sup>. This includes morbidity and/or

mortality from chronic diseases (i.e. obesity, diabetes), mental illness (i.e. depression, anxiety, and reduced learning and productivity), infant mortality, infectious diseases, amongst others<sup>1</sup>. In 2014, 11.9% or 594,900 Ontario households experienced food insecurity<sup>2</sup>, which is defined as the inadequate or insecure access to food due to financial constraints<sup>1</sup>. This statistic is acknowledged as an underestimate as it does not reflect households in First Nations reserves and those that are homeless<sup>2</sup>. Furthermore, 64% of Ontario households reliant on social assistance were food insecure<sup>2</sup>. In some cases, employment does not guarantee that a household's basic needs are met, as almost 60% of food insecure Ontario households were relying on income from wages and salaries<sup>2</sup>. As a result, the estimated burden on healthcare costs from socio-economic health inequalities amounts to a staggering \$6.2 billion annually, with Canadians in the lowest income bracket accounting for approximately 60% of these costs<sup>3</sup>. The fact is, health is related to food security, which is deeply rooted in poverty. It's not just about having inadequate skills or nutrition knowledge to prepare healthy food, or that the distance to supermarkets is too far – the main reason is the lack of adequate disposable income for food<sup>2</sup>.

The allocation of Thunder Bay as a designated pilot site of the Ontario Basic Income Pilot was an exciting opportunity to explore the impact of basic income in our community and to gather local level data. Poverty and food insecurity pose a risk for certain individuals in our District. Most recent data from Statistics Canada indicates that 13.8% of all households in the District of Thunder Bay are considered low-income, of which 19.8% are children aged 0 – 17<sup>4</sup>. This represents approximately 1 in 7 households being food insecure. As an example of how the basic income pilot positively impacts food security, I will use the most recent information from our local Nutritious Food Basket (2018; Appendix 1). The monthly cost of food for a family of four in the District of Thunder Bay is \$828.68 per month. If the family relies on Ontario Works, the income remaining for other living expenses is limited and increases risk for financial strain, whereas the same family enrolled in the basic income pilot would be in a much better position to meet their basic needs. Furthermore, the on-going effectiveness of the Guaranteed Income Supplement for

seniors provides evidence of how overall health is improved from ensuring financial security<sup>5,6</sup>. As an advocate for promoting socio-economic and health equity within my community, I am supportive of the Ontario Basic Income Pilot and increased social assistance rates as it is based on evidence informed research indicating the strong relationship between income, food security and health.

I strongly urge the province to maintain the continuation of the Ontario Basic Income Pilot and the scheduled increases of Ontario Works and Ontario Disability Support Program. The need for adequate income from basic income and social assistance rates provides socio-economic stability and equity, and is highlighted in the report: "Income Security – A Roadmap for Change"<sup>7</sup>.

Ontario has the opportunity to champion an initiative that could have a profound impact on informing future policies that could expand to the international level. But more importantly, it could provide the residents of Thunder Bay and Ontario with improved livelihood, healthy equity, and the opportunity to live with dignity.

Yours Sincerely,

**Original Signed by**

Joe Virdiramo, Chair,  
Board of Health for Thunder Bay District Health Unit

cc. Michael Gravelle, MPP (Thunder Bay-Superior North)  
Judith Monteith-Farrell, MPP (Thunder Bay-Atikokan)  
All Ontario Boards of Health

References:

1. PROOF Food Insecurity Policy Research. (2017). Household Food Insecurity in Canada: Factsheets. Accessed at: <http://proof.utoronto.ca/resources/fact-sheets/>
2. PROOF Food Insecurity Policy Research. (2016). Household Food Insecurity in Canada – Research to identify policy options to reduce food insecurity. Accessed at: <http://proof.utoronto.ca/resources/proof-annual-reports/annual-report-2014/>

3. Public Health Agency of Canada. (2016) The direct economic burden of socioeconomic health inequalities in Canada: an analysis of health care costs by income level. Accessed at: [http://vibrantcanada.ca/files/the\\_direct\\_economic\\_burden\\_-\\_feb\\_2016\\_16\\_0.pdf](http://vibrantcanada.ca/files/the_direct_economic_burden_-_feb_2016_16_0.pdf).
4. Statistics Canada. (2016). Census Profile, 2016 Census (Income). Accessed at: <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CD&Code1=3558&Geo2=PR&Code2=35&Data=Count&SearchText=thunder%20bay&SearchType=Begins&SearchPR=01&B1=Income&TABID=1>
5. Government of Canada. (2016). Canada's most vulnerable single seniors will see an increase of up to \$947 annually to the Guaranteed Income Supplement. Accessed at: <https://www.canada.ca/en/employment-social-development/news/2016/06/canada-s-most-vulnerable-single-seniors-will-see-an-increase-of-up-to-947-annually-to-the-guaranteed-income-supplement.html>
6. McIntyre, L, Kwok, C, Herbert-Emery, J.C, Dutton, D.J. (2016). Impact of a guaranteed annual income program on Canadian senior's physical mental and functional health. *Can J Public Health*;107(2):e176-e182
7. Income Security Reform Working Group, First Nations Income Security Reform Working Group, Urban Indigenous Table on Income Security Reform. (2017). Income Security – A Roadmap for Change. Accessed at: [https://files.ontario.ca/income\\_security\\_-\\_a\\_roadmap\\_for\\_change-english-accessible\\_0.pdf](https://files.ontario.ca/income_security_-_a_roadmap_for_change-english-accessible_0.pdf)

**Appendix 1 - Comparison of Household Income and Expenses for Families (2018)**

Low-income households often live in rental housing. Using the average costs of renting in the District of Thunder Bay for 2018, and the results from the NFBS, here are five family scenarios outlining their respective monthly costs of living.

<b>Scenarios</b>	<b>Family of 4 Ontario Works (2 parents; 2 children)</b>	<b>Family of 4 Ontario Basic Income Pilot (2 parents; 2 children)</b>	<b>Family of 4 Full-Time Minimum Wage (2 parents; 2 children)</b>	<b>Family of 4 Median Income (After Tax) (2 parents; 2 children)</b>	<b>Family of 3 Ontario Works (1 parent; 2 children)</b>
<b>Monthly Income<sup>i</sup></b>	<b>\$2601.00</b>	<b>\$3353.00</b>	<b>\$3622.00</b>	<b>\$7871.00</b>	<b>\$2382.00</b>
Rent <sup>ii</sup>	\$1194.00 (3 Bdr. Apartment)	\$1194.00 (3 Bdr. Apartment)	\$1194.00 (3 Bdr. Apartment)	\$1194.00 (3 Bdr. Apartment)	\$959.00 (2 Bdr. Apartment)
Cost of Food <sup>iii</sup>	\$828.68	\$828.68	\$828.68	\$828.68	\$595.84
<b>Income Remaining for Other Living Expenses</b>	<b>\$578.32</b>	<b>\$1330.32</b>	<b>\$1599.32</b>	<b>\$5848.32</b>	<b>\$827.16</b>

- i. Incomes (except those including the Ontario Basic Income Pilot) derived from NFBS Income Scenario Spreadsheet (May 2018), developed by the Ontario Dietitians in Public Health - Locally Driven Collaborative Project Food Insecurity Working Group
- ii. Rental cost calculations are from the Rental Market Report – Canada Mortgage and Housing Cooperation (June 2017)
- iii. Based on the NFBS for the District of Thunder Bay (May 2018)



February 11, 2019

Hon. Ginette Petitpas Taylor  
Minister of Health, Canada  
House of Commons  
Ottawa, On K1A 0A6

[Ginette.petitpastaylor@parl.gc.ca](mailto:Ginette.petitpastaylor@parl.gc.ca)

Dear Minister Petitpas Taylor:

**Petition for an adequately-funded national cost-shared universal healthy school food program**

On behalf of the Windsor-Essex County Health Unit, we are writing to express our support for Toronto's Board of Health and Senator Art Eggleton's call for a federal universal health school program, passed at WECHU's September 2018 Board of Health meeting.

Student nutrition programs (SNPs) are community-based meal and snack programs that operate primarily in schools. School food programs are increasingly seen as vital contributors to students' physical and mental health, and academic achievement. A growing body of research demonstrates the potential of school food programs to improve food choices, prevent disease, and support academic success (including academic performance, reduced tardiness, and improved student behaviour) for all students.

In Windsor and Essex County, SNPs have been a driving force in ensuring children have access to healthy food and beverages throughout the school day. This is especially important because our region has low rates of vegetables and fruit consumption in children.

In Ontario, SNPs are run locally by students, parents and volunteers, and are funded through multiple sources including provincial funding, local community groups and organizations, grants, and local fundraising. For most programs, the current funding available does not cover the full cost to run the programs at full capacity. As well, many schools lack the infrastructure to support cooking healthy meals.

To deal with these funding shortfalls, programs resort to a variety of methods including reducing the number of meals served, offering fewer servings with smaller portions, relying on ready-made food more often, or decreasing the quality of food offered. These can significantly undermine the potential positive health effects that SNPs can have on Canadian children.

Given the documented benefits of SNPs, we urge the federal government to support an adequately-funded national cost-shared universal healthy school food program. Sustained federal investment, as proposed by Senate Motion no. 358, would leverage local efforts and allow SNPs to expand their impact and improve children's health and educational outcomes, while lowering future healthcare costs.

The Windsor-Essex County Health Unit thanks you for your consideration.

Sincerely,



Gary McNamara  
Chair, Board of Health



Theresa Marentette, RN, MSc  
Chief Executive Officer, Chief Nursing Officer

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2018.HL28.5>

<https://www.wechu.org/board-meetings/september-2018-board-meeting>

c: Cheryl Hardcastle, MP Windsor-Tecumseh  
Brian Masse, MP Windsor West  
Tracey Ramsey, MP Essex  
Dave Van Kesteren, MP Chatham Kent-Leamington  
Hon. Christine Elliott, Deputy Premier, Ontario Minister of Health and Long-Term Care  
Ontario Boards of Health  
Windsor-Essex County Board of Health  
Association of Public Health Agencies (aPHa)  
Association of Municipalities of Ontario (AMO)  
Federation of Canadian Municipalities  
Ontario Student Nutrition Program, Windsor-Essex Region  
WEC local school boards



February 11, 2019

The Honorable Lisa MacLeod, Minister  
Ministry of Children, Community and Social Services  
56 Wellesley Street West, 14<sup>th</sup> Floor  
Toronto, ON M7A 1E9

Dear Minister MacLeod:

**Funding for the Healthy Babies, Healthy Children (HBHC) program**

On behalf of our Board of Health, I am writing to you in support of Thunder Bay District Health Unit's call to action and shared concern regarding the Healthy Babies, Healthy Children (HBHC) program funding.

As noted in Thunder Bay District Health Unit's call to action, the 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 is a mandatory program for Boards of Health.

The Windsor Essex County Health Unit has seen an increase in the complexity of the clients in the HBHC program. As evidenced by the 2018 *Response to Screening and Working With Families With Complex Needs* survey that was completed by all 35 public health units, the HBHC program is seeing an increase in the complex needs of the clients across the province. This survey highlights the need for the potential changes to the model. However, the Ministry has indicated that there is no funding available for the implementation of these changes to the HBHC program in the 2019 fiscal year. Over the last several years, our local School Boards have expressed concerns over the number of children who are experiencing challenges at school entry. The inability to change the current model will continue to affect the percentage of children who achieve optimal growth and development and readiness for school.

The province did indeed commit to funding the HBHC program at 100%. However, since 2008, the HBHC program has not seen any increases in the budget except for the one-time funding in 2012 to support the implementation of the 2012 protocol, and an increase in our FTE to support the Liaison role.

Furthermore, as noted in Thunder Bay District Health Unit's call to action, the review of the HBHC program in 2016 by MNP found a funding gap of approximately \$7.808m (Ministry of Children and Youth Services - Healthy Babies Healthy Children Program Review Executive Summary p.7). Notably, this gap continues to grow every year with the increases in salaries, benefits, and operational costs.

On behalf of the Windsor-Essex County Health Unit, we thank you for your consideration.

Sincerely,



Gary McNamara  
Chair, Board of Health



Theresa Marentette, RN, MSc  
Chief Executive Officer, Chief Nursing Officer

<https://www.wechu.org/board-meetings/january-2019-board-meeting>

c: Association of Local Public Health Agencies (alPHa)  
Association of Municipalities of Ontario (AMO)  
Ontario Boards of Health  
Windsor-Essex MPPs  
Windsor-Essex Board of Health



## Thunder Bay District Health Unit

### MAIN OFFICE

999 Balmoral Street  
Thunder Bay, ON P7B 6E7  
Tel: (807) 625-5900  
Toll Free in 807 area code  
1-888-294-6630  
Fax: (807) 623-2369

### GREENSTONE

P.O. Box 1360  
510 Hogarth Avenue, W.  
Geraldton, ON P0T 1M0  
Tel: (807) 854-0454  
Fax: (807) 854-1871

### MANITOUWADGE

1-888-294-6630

### MARATHON

P.O. Box 384  
Marathon Library Building  
Lower Level,  
24 Peninsula Road  
Marathon, ON P0T 2E0  
Tel: (807) 229-1820  
Fax: (807) 229-3356

### NIPIGON

P.O. Box 15  
Nipigon District  
Memorial Hospital  
125 Hogan Road  
Nipigon, ON P0T 2J0  
Tel: (807) 887-3031  
Fax: (807) 887-3489

### TERRACE BAY

P.O. Box 1030  
McCausland Hospital  
20B Cartier Road  
Terrace Bay, ON P0T 2W0  
Tel: (807) 825-7770  
Fax: (807) 825-7774

TBDHU.COM

November 21, 2018

*SENT VIA EMAIL*

The Honourable Lisa MacLeod  
Minister of Children, Community and Social Services  
14th Flr, 56 Wellesley St W,  
Toronto, ON  
M7A 1E9

Dear Minister MacLeod,  
On behalf the Thunder Bay District Health Unit (TBDHU) Board of Health, it is with significant concern that I am writing to you regarding funding for the Healthy Babies, Healthy Children (HBHC) Program.

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 is a mandatory program for Boards of Health.

In 1997 the province committed to funding the Healthy Babies Healthy Children program at 100%. Province wide funding allocations have been essentially "flat-lined" from an original allocation that was completed in 2008, with the exception of the one-time funding increases for implementation of the 2012 Protocol. In the interim, collective agreement settlements, travel costs, pay increments and accommodation costs have increased the costs of implementing the HBHC program. Management and administration costs related to the program are already offset by the cost-shared budget for provincially mandated programs.

Simultaneously the complexity of clients accessing the program has increased requiring that more of the services be delivered by professional versus non-professional staff. The TBDHU has made every effort to mitigate the outcome of this ongoing funding shortfall however it has become increasingly more challenging to meet the targets set out in HBHC service agreements. At the current funding level services for these high-risk families will be reduced.

In 2016 the firm MNP performed a review of the HBHC program provincially and found that "based on the activities of the current service delivery model, and using the targets outlined in the service agreements ... there is a gap in the current funding of the program of approximately \$7.808M." (Ministry of Children and Youth Services - Healthy Babies Healthy Children Program Review Executive Summary p.7)

The Thunder Bay District Board of Health continues to advocate that the Ministry of Children, Community and Social Services fully funds the Healthy Babies Healthy Children program, including all staffing, operating and administrative costs.

.../2

Minister McLeod  
November 21, 2018

Page 2

Thank you for your attention to this important public health issue.

Sincerely,

**Original Signed by**

Joe Virdiramo, Chair  
Board of Health  
Thunder Bay District Health Unit

cc. Michael Gravelle, MPP (Thunder Bay-Superior North)  
Judith Monteith-Farrell, MPP (Thunder Bay-Atitkokan)  
All Ontario Boards of Health

**Ministry of Health  
and Long-Term Care**

Office of the Deputy Minister

Hepburn Block, 10<sup>th</sup> Floor  
80 Grosvenor Street  
Toronto ON M7A 1R3  
Tel.: 416 327-4300  
Fax: 416 326-1570

**Ministère de la Santé  
et des Soins de longue durée**

Bureau du sous-ministre

Édifice Hepburn, 10<sup>e</sup> étage  
80, rue Grosvenor  
Toronto ON M7A 1R3  
Tél. : 416 327-4300  
Télééc. : 416 326-1570



February 26, 2019

**FROM:** **Helen Angus**  
Deputy Minister  
Ministry of Health and Long-Term Care

**RE:** Letter from Deputy Minister, Helen Angus, Regarding  
Connecting Care in Ontario

Today, Christine Elliott, Deputy Premier and Minister of Health and Long-Term Care, delivered the Government of Ontario's long-term plan to fix and strengthen the public health care system by focusing directly on the needs of Ontario's patients and families.

The key focus of Ontario's transformative plan is improving the patient experience and enabling better connected public health care.

The government intends to introduce legislation that would, if passed, support the establishment of local Ontario Health Teams that connect health care providers and services around patients and families, and integrate existing multiple provincial agencies into a single health agency – Ontario Health.

Under the new Ontario Health Teams delivery model, health care providers will work as one coordinated team – focusing on the needs of patients at a local level, so people can more easily navigate the system and experience simple transitions from one service provider to another.

When Ontario Health Teams are established, people's choice of providers would remain but they would also have more available care options through technology. As well, with safeguards in place to protect personal health information, patients would have an option to securely access digital health services, such as having access to their electronic health records and virtual care options for patients.

I have seen many projects across the province that have started integration processes and I am confident that many of you, as dedicated care providers and planners, would see a role in better connecting health care for your local communities.

To help achieve an improved experience for both patients and health care providers and planners, the government would integrate multiple provincial agencies and specialized provincial programs into a single agency – Ontario Health. This agency would act as a central point of accountability and oversight of the province's public health care system.

The continuity of patient care remains the top priority. This is why this transition would be done carefully and roll out in phases.

We will continue to work as we are currently doing and you can continue to reach out to your ministry representative and/or key contact.

**We will make sure to provide regular communication during this transformation through the [ontario.ca/connectedcare](http://ontario.ca/connectedcare) page and through emails. I invite you to sign up to receive regular email updates at [Connected Care Updates](#)**

**I am inviting you to a webcast later today, where ministry leaders and I will discuss this health care system announcement.**

**Date:** Tuesday, February 26, 2019

**Time:** 1:45 – 2:30 p.m.

**Webcast Link:** [vvcnetwork.ca/MOHLTCstakeholderwebcast/](http://vvcnetwork.ca/MOHLTCstakeholderwebcast/)

**The video of this webcast will be posted online if you are not able to attend.**

The changes ahead of us are significant but necessary to build a modern, sustainable system that is organized around people's needs and outcomes. I would like to take this opportunity to acknowledge and thank you for your ongoing professionalism and the excellent work you have been doing, which we truly rely on.

I look forward to working together to improve our health care system and to give each and every Ontarian the high quality care they deserve.

Helen Angus

February 27, 2019

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building, Queen's Park  
Toronto, ON M7A 1A1  
Sent via e-mail: [doug.ford@pc.ola.org](mailto:doug.ford@pc.ola.org)

Dear Premier Ford:

**Re: Support for Provincial Oral Health Programs for Low Income Adults and Seniors**

At its meeting held on February 13, 2019, the Board of Health for Peterborough Public Health considered correspondence from Sudbury & District Health Unit regarding the above noted matter.

Oral health is essential to overall health and quality of life at every stage of life and has been recognized as a basic human right. The Board echoes the recommendations outlined in their resolution (attached) and we fully support the provincial government's plan to invest in an oral health program for low-income seniors and urge that access be expanded to include low-income adults.

We look forward to receiving more information about how local public health agencies in Ontario can assist and support the implementation of a new oral health program for low-income seniors, with the potential to include low-income adults.

We appreciate your attention to this important public health issue.

Yours in health,

***Original signed by***

Councillor Kathryn Wilson  
Chair, Board of Health

/ag  
Encl.

cc: The Hon. Christine Elliott, Minister of Health and Long-Term Care  
Dr. David Williams, Ontario Chief Medical Officer of Health  
Local MPPs  
Association of Local Public Health Agencies  
Ontario Boards of Health



**Public Health**  
**Santé publique**  
SUDBURY & DISTRICTS

December 7, 2018

VIA ELECTRONIC MAIL

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building  
Queen's Park  
Toronto, ON M7A 1A1

Dear Premier Ford:

**Re: Support for Provincial Oral Health Program for Low Income Adults and Seniors**

I am very pleased to write to you on behalf of the Board of Health for Public Health Sudbury & Districts to share our sincere appreciation for the provincial government's support of a provincial oral health program for low-income seniors. This is a welcome addition to oral health programs already available for children and youth in low-income families through Healthy Smiles Ontario.

The Board of Health for Public Health Sudbury & Districts has a keen interest in oral health. In reviewing our 2018 data on oral health, we identified that to further support oral health for all Ontarians, programs are needed for low-income adults, in addition to those in place or planned for children, youth and seniors.

At its meeting on November 22, 2018, the Board of Health carried the following resolution #42-18:

**Sudbury**

1300 rue Paris Street  
Sudbury ON P3E 3A3  
t: 705.522.9200  
f: 705.522.5182

**Rainbow Centre**

10 rue Elm Street  
Unit / Unité 130  
Sudbury ON P3C 5N3  
t: 705.522.9200  
f: 705.677.9611

**Sudbury East / Sudbury-Est**

1 rue King Street  
Box / Boîte 58  
St.-Charles ON P0M 2W0  
t: 705.222.9201  
f: 705.867.0474

**Espanola**

800 rue Centre Street  
Unit / Unité 100 C  
Espanola ON P5E 1J3  
t: 705.222.9202  
f: 705.869.5583

**Île Manitoulin Island**

6163 Highway / Route 542  
Box / Boîte 87  
Mindemoya ON P0P 1S0  
t: 705.370.9200  
f: 705.377.5580

**Chapleau**

101 rue Pine Street E  
Box / Boîte 485  
Chapleau ON P0M 1K0  
t: 705.860.9200  
f: 705.864.0820

**Toll-free / Sans frais**

1.866.522.9200

[phsd.ca](http://phsd.ca)





Letter

Re: Support for Provincial Oral Health Program for Low Income Adults and Seniors

December 7, 2018

Page 2

*WHEREAS* as compared with other provinces, Ontario has the lowest rate of public funding for dental care, as a percentage of all dental care expenditures and the lowest per capita public sector spending on dental services, resulting in precarious access to dental preventive and treatment services, especially for low-income Ontarians; and


*WHEREAS* the Ontario Progressive Conservative party pledged to implement a comprehensive dental care program that provides low income seniors with quality care by increasing the funding for dental services in Public Health Units, Community Health Centres, and Aboriginal Health Access Centres and by investing in a new dental services in underserved areas including increasing the capacity in public health units and investing in mobile dental buses;

*THEREFORE BE IT RESOLVED THAT* the Board of Health for Public Health Sudbury & Districts fully support the Premier's plan to invest in oral health programs for low income seniors and further encourage the government to expand access to include low income adults; and

*FURTHER* that this motion be shared with area municipalities and relevant dental and health sector partners, all Ontario Boards of Health, Chief Medical Officer of Health, Association of Municipalities of Ontario (AMO), and local MPPs.

Thank you for your attention to this matter and I look forward hearing more about the role public health can take in support of a new oral health program for low income adults and seniors that is cost effective and accessible.

Sincerely,



Penny Sutcliffe, MD, MHSc, FRCPC  
Medical Officer of Health and Chief Executive Officer

cc: Honorable Christine Elliott, Minister of Health and Long-Term Care  
Dr. David Williams, Chief Medical Officer of Health, Minister of Health and Long-Term Care  
Mr. Jamie West, MPP, Sudbury  
Ms. France Gelinias, MPP, Nickel Belt  
Mr. Michael Mantha, MPP, Algoma-Manitoulin  
All Ontario Boards of Health  
Constituent Municipalities within Public Health Sudbury & Districts  
Ms. Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Association of Municipalities of Ontario  
Dr. David Diamond, President, Sudbury & District Dental Society  
Dr. Tyler McNicholl, vice-president, Sudbury & District Dental Society  
Ms. Jacque Maund, Alliance for Healthier Communities

February 27, 2019

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building, Room 281  
Queen's Park  
Toronto, ON M7A 1A1

The Honourable Christine Elliott  
Deputy Premier and Minister of Health and Long-Term Care  
College Park, 5<sup>th</sup> Floor  
777 Bay Street  
Toronto, ON M7A 2J3

The Honourable Lisa MacLeod  
Minister of Children, Community and Social Services  
Hepburn Block, 6<sup>th</sup> Floor  
80 Grosvenor Street  
Toronto, ON M7A 1E9

The Board of Health for the North Bay Parry Sound District Health Unit (Board) would like to share with you the resolutions passed at our recent meeting on February 27, 2019. The resolutions highlight our continued support of staff and community stakeholders to reduce health inequities, and our support for Bill 60, an act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission. A copy of the motion passed is included as Appendix A.

One in seven households in our Health Unit region experience food insecurity. Included is a copy of our [2018 Food Insecurity poster](#), highlighting this important statistic, as Appendix B. Our goal with this key messaging is to emphasize the magnitude of this issue in our area. The [full report](#) is available on our website.

While our community has a broad gamete of important social service and food charity programs in place to assist those experiencing food insecurity, this complex issue cannot be adequately or sustainably addressed at the local level. Food insecurity is defined as inadequate or insecure access to food due to financial constraints, which highlights low income as the root of the problem. Our Health Unit continues to raise awareness about the importance of income security for low income Ontarians, in an effort to reduce food insecurity rates. Food insecurity is a significant public health problem because of its great impact on health and well-being. In light of the release of the new Canada's Food Guide, it is important to note that these dietary recommendations are out of reach for many low-income Canadians.

While there are a number of risk factors for being food insecure, social assistance recipients are at particularly high risk. Research has shown that 64% of households in Ontario receiving social assistance

experience food insecurity, demonstrating that social assistance rates are too low to protect recipients from being food insecure. For this reason, our Board supports Bill 60, an act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission. This group will make recommendations on social assistance policy, including social assistance rates based on the real costs of living in regions across Ontario, taking into account the cost of healthy eating. Our Health Unit, community partners and households receiving social assistance are eagerly awaiting the release of more details about the changes that will be made to Ontario's social assistance system following Minister MacLeod's announcement on November 22, 2018. Please consider the establishment of the Social Assistance Research Commission as part of the changes that will ensue by prioritizing Bill 60.

Last year, we expressed our support and feedback to the previous government on the *Income Security: A Roadmap for Change* report. This report was prepared in collaboration with many experts, including Indigenous representatives, and has already undergone a public consultation process. Please take into account the elements outlined in this report when implementing changes to the current social assistance system. We emphasized this last August, when we expressed our concern about the cancellation of the basic income pilot project and the reduction to the scheduled increase to social assistance rates in 2018.

Thank you for taking the time to review this information and we will look forward to hearing next steps in strengthening income security in Ontario.

Sincerely,



James Chirico, H.BSc., M.D., F.R.C.P. (C), MPH  
Medical Officer of Health/Executive Officer



Don Brisbane  
Vice-Chairperson, Board of Health

#### Enclosures (2)

Copied to:

Victor Fedeli, MPP, Nipissing  
Norm Miller, MPP, Parry Sound-Muskoka  
John Vanthof, MPP, Timiskaming-Cochrane  
Robert Bailey, MPP, Sarnia-Lambton  
Paul Miller, MPP, Hamilton East-Stoney Creek  
North Bay Parry Sound District Health Unit Member Municipalities  
Joseph Bradbury, Chief Administrative Officer, DNSSAB  
Janet Patterson, Chief Administrative Officer, PSDSSAB  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Ontario Boards of Health

Your lifetime partner in healthy living.  
Votre partenaire à vie pour vivre en santé.

**NORTH BAY PARRY SOUND DISTRICT HEALTH UNIT  
BOARD OF HEALTH**

**RESOLUTION**

**DATE:** February 27, 2019

**MOVED BY:** Mike Poeta

**RESOLUTION:** #BOH/2019/02/04

**SECONDED BY:** Dan Roveda

*Whereas, The Nutritious Food Basket Survey results show that many low income individuals and families do not have enough money for nutritious food after paying for housing and other basic living expenses; and*

*Whereas, The Board of Health for the North Bay Parry Sound District Health Unit recognizes the impact of adequate income on food security and other social determinants of health; and*

*Whereas, Food insecurity rates are very high among social assistance recipients; and*

*Whereas, Bill 60 (An Act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission) would help ensure social assistance rates are indexed to inflation, reviewed on an annual basis, and reflect regional costs of living including the cost of a Nutritious Food Basket; and*

*Whereas, the Ontario Public Health Standards require public health units to assess and report on the health of local populations, describing the existence and impact of health inequities;*

*Therefore Be It Resolved, That the Board of Health for the North Bay Parry Sound District Health Unit continue to support the efforts of employees and community stakeholders to reduce health inequities, including food insecurity; and*

*Furthermore Be It Resolved, That the Board of Health support Bill 60 (An Act to amend the Ministry of Community and Social Services Act to establish the Social Assistance Research Commission); and*

*Furthermore Be It Resolved, That the Board of Health provide correspondence of these resolutions to district municipalities, Ontario Boards of Health, Victor Fedeli, MPP (Nipissing), Norm Miller, MPP (Parry Sound-Muskoka), John Vanthof, MPP (Timiskaming-Cochrane), the Honourable Doug Ford (Premier), the Honourable Lisa MacLeod (Minister of Community and Social Services), the Honourable Christine Elliott (Minister of Health and Long-Term Care) and the Association of Local Public Health Agencies (ALPHA).*

**CARRIED:** ✓ **VICE-CHAIRPERSON:** Original Signed by Don Brisbane

# 1 in 7

**Nipissing and Parry Sound homes are food insecure because they don't have enough money.**

**This can mean:**

- Worrying about running out of food
- Eating less healthy food
- Skipping meals
- Having poor health



Be informed [myhealthunit.ca/foodinsecurity](http://myhealthunit.ca/foodinsecurity)

## **Update to Board of Health Members March 1, 2019**

### **2019 alPHa Winter Symposium**

Thank you to all those who attended our recently concluded 2019 Winter Symposium in Toronto. More than a hundred members from 34 health units convened on February 21 to hear discussion panels on the connection between public health and mental health, and managing risk, and participate in an orientation session for new board of health members and a business meeting for medical/associate medical officers of health. A highlight was an evening reception and special guest lecture co-hosted by the Dalla Lana School of Public Health at the University of Toronto. Guest speaker Dr. Rueben Devlin, Special Advisor and Chair of the Premier's Council on Improving Health Care and Ending Hallway Medicine, presented the government's vision for excellence in health care. Full proceedings of the Symposium plenary sessions will be available to the membership shortly. In the meantime, alPHa sincerely thanks the presenters, conference planning committee members, and the Dalla Lana School of Public Health for their participation, assistance with and support of this event.

[View alPHa's photos from the Winter Symposium on Twitter here](#)

### **BOH Orientation**

At the recent orientation session for new and returning board of health members, alPHa's Executive Director and Past President gave an overview of the association, its role and organizational structure, and the current public health system. alPHa legal counsel James LeNoury reviewed board of health liabilities, including general liabilities of board members and the responsibilities of boards of health under the *Health Protection and Promotion Act*. Click the links below to see the slide decks (login and password required).

[View the orientation slide deck by alPHa](#)

[View the board of health liability presentation by J. LeNoury](#)

[Download the 2018 Orientation Manual for BOH Members](#)

[Download the Governance Toolkit for Ontario BOHs](#)

### **Health System Restructuring**

On February 26, the Ontario government announced plans to introduce legislation that would, if passed, support the establishment of local Ontario Health Teams that connect health care providers and services around patients and families, and integrate multiple existing provincial agencies into a single health agency – Ontario Health. Existing agencies slated for integration include the 14 Local Health Integration Networks, Cancer Care Ontario, Health Quality Ontario and eHealth Ontario, among others. On February 27, first reading was passed on Bill 74, *The People's Health Care Act*, which would enable the proposed amendments to take place. Although public health was not mentioned in the announcement, alPHa will continue to monitor developments as they arise.

[Read Bill 74, The People's Health Care Act here](#)

[Read Ontario's announcement on health care reform here](#)

[Read the Association of Municipalities of Ontario's briefing on the announcement](#)

## alPHA Responses & Communications

On February 12, alPHA responded to the first report of the Premier's Council on Improving Health Care and Ending Hallway Medicine, *Hallway Health Care: A System Under Strain*. alPHA's letter underscored public health's role in health protection and illness prevention, activities that can help the government achieve its health mandate. The letter also included alPHA's pre-budget submission to government.

[Download alPHA's response to the Hallway Health Care report](#)

[Read the Hallway Health Care report here](#)

The Association also wrote to the Minister of Finance in response to provincial consultations on alcohol choice and convenience. alPHA's correspondence of January 31 outlined public health concerns regarding the negative health and societal impacts of increased availability of alcohol in the province. It also asks the government to develop a comprehensive provincial alcohol strategy.

[Read alPHA's letter on proposed changes to the sale of alcohol](#)

On January 30, alPHA's President presented the Association's pre-budget submission and public health resource paper to several Progressive Conservative MPPs in Whitby, Ontario. He spoke before Durham Region MPPs Lorne Coe, Lindsey Park and Doug Downey, parliamentary assistant to the finance minister. The opportunity to present was part of the government's 2019 budget consultations. alPHA's submission focused on public health's contributions in keeping people healthy and underscored their tremendous value. In support of the submission, alPHA also drafted a 2-page resource document. The communiqué is being used to start a conversation with MPPs about the importance of local public health and to demonstrate public health's strong return on investment.

[Read alPHA's pre-budget submission here](#)

[Read alPHA's public health resource paper here](#)

## alPHA Correspondence

Check out our online library that houses the latest [letters and correspondences](#) sent by alPHA to government and other stakeholders on public health issues of the day. Scroll down and click the documents to view alPHA's letters of concern, responses to public consultations, and other materials, including responses from government.

## Upcoming Events and Meetings for All Board of Health Members

**June 9-11, 2019:** Minding Public Health, [alPHA 2019 Annual General Meeting & Conference](#), Four Points by Sheraton Hotel & Suites, 285 King St. E., Kingston, Ontario. [Book your accommodations](#) now as space is limited. See a [save the date flyer](#). Program and registration details coming soon.

**June 11, 2019** (during alPHA Annual Conference): alPHA Boards of Health Section Meeting

*This update was brought to you by the Boards of Health Section Executive Committee of the alPHA Board of Directors. alPHA provides a forum for member boards of health and public health units in Ontario to work together to improve the health of all Ontarians. Any individual who sits on a board of health that is a member organization of alPHA is entitled to attend alPHA events and sit on the Association's various committees. Learn more about us at [www.alphaweb.org](http://www.alphaweb.org)*





# Renfrew County and District Health Unit

"Optimal Health for All in Renfrew County and District"

---

March 04, 2019

The Honourable Christine Elliott  
Deputy Premier of Ontario  
Minister of Health and Long-Term Care  
[christine.elliottco@ola.org](mailto:christine.elliottco@ola.org)

Dear Minister Elliott,

**Re: Strengthening the Smoke-Free Ontario Act, 2017 to address the promotion of vaping**

At the February 26, 2019 regular meeting of the Board of Health for the Renfrew County and District Health Unit (RCDHU) the Board considered the attached correspondence from Peterborough Public Health urging the Ontario government to strengthen the Smoke-Free Ontario Act, 2017 to prohibit through regulation, the promotion of vaping products.

The following motion was recommended by the Stakeholder Relations Committee and accepted by the Board on February 26, 2019:

**Resolution: # 3 SRC 2019-Feb-08**

A motion by M. A. Aikens; seconded by J. Dumas; be it resolved that the Stakeholder Relations Committee recommend to the Board that the RCDBH support the correspondence from Peterborough Health Unit urging the province to strengthen the Smoke-Free Ontario Act 2017 and prohibit the promotion of vaping products and further that it be cc as per the Sudbury letter.

Carried

Sincerely,

Janice Visneskie Moore  
Chair, Board of Health  
Renfrew County and District Health Unit

cc (via email): The Honourable Doug Ford, Premier of Ontario  
Dr. David Williams, Chief Medical Office of Health  
The Honourable John Yakabuski, MPP, Renfrew-Nipissing-Pembroke



Ontario Boards of Health

Loretta Ryan, Executive Director, association of Local Public Health  
Agencies

Pegeen Walsh, Executive Director, Ontario Public Health  
Associations

Association of Municipalities of Ontario

Jacque Maund, Alliance for Healthier Communities

7 International Drive, Pembroke, Ontario K8A 6W5 • [www.rcdhu.com](http://www.rcdhu.com)

• Health Info Line 613-735-8666 • Health Promotion & Clinical Services 613-735-8651 • Dental 613-735-8661  
• Immunization 613-735-8653 • Environmental Health 613-735-8654 • Reception 613-732-3629 • Fax 613-735-3067  
Toll Free: 1-800-267-1097



November 5, 2018

The Honourable Christine Elliott  
Minister of Health and Long-Term Care  
10th Floor, Hepburn Block  
80 Grosvenor Street  
Toronto, ON M7A 2C4  
[christine.elliott@pc.ola.org](mailto:christine.elliott@pc.ola.org)

Dear Minister Elliott,

**Re: Strengthening the Smoke-Free Ontario Act (2017) to address the promotion of vaping**

At its meeting on October 10, 2018, the Board of Health for Peterborough Public Health passed a motion to urge the Ontario government to strengthen the Smoke-Free Ontario Act (2017) and prohibit through regulation, the promotion of vaping products.

By and large the changes in the updated Act and regulations are viewed favorably by Peterborough Public Health as it harmonizes medicinal cannabis, recreational cannabis, conventional cigarettes, and e-cigarette laws into one piece of legislation. However, health experts conclude that allowing retail vaping displays and promotion will put thousands of children and youth at risk of nicotine addiction. The legislation only bans actual vaping product displays at retail outlets and does not restrict other types of retail promotion for vaping products. It permits the widespread promotion of vaping products in convenience stores, gas bars and other retail locations across Ontario. This includes freestanding brand promotions now located inside and outside retail locations like gas bars, posters including pictures of products, video product promotion, and many other types of promotion including those featuring actual vaping products, are all allowed. Mass media promotion of vaping produces (i.e., television advertising) has already been seen in Ontario.

Public health representatives are very concerned about the outcome of nicotine exposure on the adolescent brain. There is also more evidence of respiratory health impacts among young vapers. We are sure that these serious health impacts must be of concern to you and the Government of Ontario as well. We agree with a federal commitment to reducing tobacco use to 5% in Ontario by 2035<sup>1</sup> and fear that current promotion of vaping will actually lead to increased tobacco use among youth. Recently released results from the Canadian Tobacco, Alcohol and Drugs Survey (CTADS) shows that current smoking rates for Canadians aged 15 years and over have actually increased to 15.1% in 2017 from 13.0% in 2015.<sup>2</sup> Your action is urgently needed to protect the health of youth in Ontario and avoid an epidemic of vaping and nicotine addiction. We must work collaboratively to ensure that young people do not start smoking or vaping.

In conjunction with the above actions, the Board of Health requests that the Province invest in a timely evaluation of the implementation of the Smoke-Free Ontario Act to monitor the impacts of the limited promotion of vaping products with a commitment to make the required amendments as soon as possible.

Sincerely,

**Original signed by**

Councillor Henry Clarke  
Chair, Board of Health

cc: Hon. Doug Ford, Premier of Ontario  
Local MPPs  
Ontario Boards of Health  
Association of Local Public Health Agencies

---

<sup>1</sup> Health Canada (2018). Canada's Tobacco Strategy. Retrieved from <https://www.canada.ca/content/dam/hc-sc/documents/services/publications/healthy-living/canada-tobacco-strategy/overview-canada-tobacco-strategy-eng.pdf>

<sup>2</sup> Statistics Canada (2018). Canadian Tobacco, Alcohol and Drugs Survey (CTADS): Summary of results for 2017. Retrieved from <https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2017-summary.html>



# Renfrew County and District Health Unit

"Optimal Health for All in Renfrew County and District"

---

March 04, 2019

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building, Queen's Park  
Toronto, ON M7A 1A1  
[premier@ontario.ca](mailto:premier@ontario.ca)

Dear Premier Ford,

**Re: Support for Provincial Oral Health Program for Low Income Adults and Seniors**

At the February 26, 2019 regular meeting of the Board of Health for the Renfrew County and District Health Unit (RCDHU) the Board considered the attached correspondence from Sudbury & Districts Public Health regarding support for the oral health program for low income seniors and encouraging the government to expand access to include low income adults.

The following motion, recommended to the RCDHU Board of Health by the Stakeholder Relations Committee, was accepted by the Board on February 26, 2019:

**Resolution: # 3 SRC 2019-Feb-08**

A motion by J. Dumas; seconded by M. A. Aikens; be it resolved that the Stakeholder Relations Committee recommends that the Board endorse correspondence from Sudbury and Districts Public Health regarding support for a provincial oral health program for low income adults and seniors and further that it be cc'd as per the Sudbury Board of Health letter with the addition to alPHA and the Honourable MPP John Yakabuski.

Carried

Sincerely,

*Janice Visneskie Moore*  
Janice Visneskie Moore  
Chair, Board of Health  
Renfrew County and District Health Unit

cc (via email): The Honourable Christine Elliott, Minister of Health and Long-Term Care  
Dr. David Williams, Chief Medical Officer of Health

The Honourable John Yakabuski, MPP, Renfrew-Nipissing-Pembroke  
Ontario Boards of Health

Loretta Ryan, Executive Director, Association of Local Public Health  
Agencies

Pegeen Walsh, Executive Director, Ontario Public Health Association  
Association of Municipalities of Ontario

Jacque Maund, Alliance for Healthier Communities



**Public Health**  
**Santé publique**  
SUDBURY & DISTRICTS

December 7, 2018

VIA ELECTRONIC MAIL

The Honourable Doug Ford  
Premier of Ontario  
Legislative Building  
Queen's Park  
Toronto, ON M7A 1A1

Dear Premier Ford:

**Re: Support for Provincial Oral Health Program for Low Income Adults and Seniors**

I am very pleased to write to you on behalf of the Board of Health for Public Health Sudbury & Districts to share our sincere appreciation for the provincial government's support of a provincial oral health program for low-income seniors. This is a welcome addition to oral health programs already available for children and youth in low-income families through Healthy Smiles Ontario.

The Board of Health for Public Health Sudbury & Districts has a keen interest in oral health. In reviewing our 2018 data on oral health, we identified that to further support oral health for all Ontarians, programs are needed for low-income adults, in addition to those in place or planned for children, youth and seniors.

At its meeting on November 22, 2018, the Board of Health carried the following resolution #42-18:

**Sudbury**

1300 rue Paris Street  
Sudbury ON P3E 3A3  
t: 705.522.9200  
f: 705.522.5182

**Rainbow Centre**

10 rue Elm Street  
Unit / Unité 130  
Sudbury ON P3C 5N3  
t: 705.522.9200  
f: 705.677.9611

**Sudbury East / Sudbury-Est**

1 rue King Street  
Box / Boîte 58  
St.-Charles ON P0M 2W0  
t: 705.222.9201  
f: 705.867.0474

**Espanola**

800 rue Centre Street  
Unit / Unité 100 C  
Espanola ON P5E 1J3  
t: 705.222.9202  
f: 705.869.5583

**Île Manitoulin Island**

6163 Highway / Route 542  
Box / Boîte 87  
Mindemoya ON P0P 1S0  
t: 705.370.9200  
f: 705.377.5580

**Chapleau**

101 rue Pine Street E  
Box / Boîte 485  
Chapleau ON P0M 1K0  
t: 705.860.9200  
f: 705.864.0820

**Toll-free / Sans frais**

1.866.522.9200

[phsd.ca](http://phsd.ca)



Letter

Re: Support for Provincial Oral Health Program for Low Income Adults and Seniors

December 7, 2018

Page 2

*WHEREAS* as compared with other provinces, Ontario has the lowest rate of public funding for dental care, as a percentage of all dental care expenditures and the lowest per capita public sector spending on dental services, resulting in precarious access to dental preventive and treatment services, especially for low-income Ontarians; and

*WHEREAS* the Ontario Progressive Conservative party pledged to implement a comprehensive dental care program that provides low income seniors with quality care by increasing the funding for dental services in Public Health Units, Community Health Centres, and Aboriginal Health Access Centres and by investing in a new dental services in underserved areas including increasing the capacity in public health units and investing in mobile dental buses;

*THEREFORE BE IT RESOLVED THAT* the Board of Health for Public Health Sudbury & Districts fully support the Premier's plan to invest in oral health programs for low income seniors and further encourage the government to expand access to include low income adults; and

*FURTHER* that this motion be shared with area municipalities and relevant dental and health sector partners, all Ontario Boards of Health, Chief Medical Officer of Health, Association of Municipalities of Ontario (AMO), and local MPPs.

Thank you for your attention to this matter and I look forward hearing more about the role public health can take in support of a new oral health program for low income adults and seniors that is cost effective and accessible.

Sincerely,



Penny Sutcliffe, MD, MHSc, FRCPC  
Medical Officer of Health and Chief Executive Officer

cc: Honorable Christine Elliott, Minister of Health and Long-Term Care  
Dr. David Williams, Chief Medical Officer of Health, Minister of Health and Long-Term Care  
Mr. Jamie West, MPP, Sudbury  
Ms. France Gelinias, MPP, Nickel Belt  
Mr. Michael Mantha, MPP, Algoma-Manitoulin  
All Ontario Boards of Health  
Constituent Municipalities within Public Health Sudbury & Districts  
Ms. Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Association of Municipalities of Ontario  
Dr. David Diamond, President, Sudbury & District Dental Society  
Dr. Tyler McNicholl, vice-president, Sudbury & District Dental Society  
Ms. Jacque Maund, Alliance for Healthier Communities

- WHEREAS** advances in treatment and timely interventions and supports have allowed people living with HIV to manage their illness and live a healthy life; and
- WHEREAS** there have been no confirmed cases of sexually transmitted HIV to an HIV-negative partner when the HIV-positive partner was continuously on antiretroviral therapy (ART) with sustained viral suppression; and
- WHEREAS** when a person living with HIV on ART takes their medications consistently as prescribed and maintains a confirmed suppressed viral load, there is effectively no risk of their passing the infection on to their sex partners; and
- WHEREAS** Canada's Chief Public Health Officer and Provincial and Territorial Chief Medical Officers of Health have acknowledged the important work of the Undetectable = Untransmittable (U=U) campaign, which promotes the scientific evidence that indicates that when an individual is being treated for HIV and maintains a suppressed viral load, there is effectively no risk of sexual transmission; and
- WHEREAS** the Ontario Public Health Standards require the use of health promotion approaches to increase adoption of healthy behaviours among the population and create supportive environments to promote healthy sexual practices;

**NOW THEREFORE BE IT RESOLVED** that the Council of Ontario Medical Officers of Health endorse the message that an undetectable HIV viral load poses effectively no risk of HIV transmission within a comprehensive public health approach to sexual health;

**AND FURTHER** that the Council of Medical Officers of Health join the Chief Public Health Officer of Canada and the Provincial and Territorial Chief Medical Officers of Health in acknowledging the importance of communicating the U=U message as part of a comprehensive public health approach to sexual health;

**AND FURTHER** that the Chief Public Health Officer of Canada, Provincial and Territorial Chief Medical Officers of Health, Ontario Minister of Health and Long-Term Care and all Ontario Boards of Health be so advised.

***CARRIED February 21, 2019***