

MEDICAL OFFICER OF HEALTH/CHIEF EXECUTIVE OFFICER BOARD REPORT OCTOBER 2014

Prepared by Dr. Kimberley Barker MD CCFP MPH FRCPC

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SUMMARY

This past month we have been busy putting the final touches to our strategic plan, our ten year cancer report as well as our report on how we contribute to health equity that was showcased to you last month. Staff from all programs have contributed to these reports and plans on top of their very busy fall schedules with the upcoming flu season and school based vaccine programs. We continue to be on track for meeting all of the Ministry of Finance and Ministry of Health requests for December of 2014, including the hosting of a risk management workshop for our leadership team on Oct 30th.

HUMAN RESOURCE UPDATE

Currently we have the following vacancies in Sault Ste. Marie: Two Public Health Inspectors, one Public Health Nurse, one Clerical and one Nurse Practitioner. We also have a vacant casual clerical position in Wawa.

VOLUNTEER SERVICES UPDATE

On October 1, 2014 we had an orientation session for volunteers who will assist us with the APH flu campaign in Sault Ste. Marie. The volunteers were informed of our Baby Friendly Initiative, processes for the flu clinics at our Willow Ave. building, Customer Service training for the Accessibility for Ontarians with Disabilities Act (AODA), and a tour of the first floor clinic area.

Volunteers in Elliot Lake with have a similar orientation session on October 8th.

We also participated in the United Way Volunteer Fair at Station Mall on October 3rd and 4th.

1. RISK MANAGEMENT

DENTAL

Topic: New Integrated Dental Program

This report addresses the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/ Deliverables:

Preventive Oral Health Services Standard (OPHS): Requirement #13 Children in Need of Treatment Standard (OPHS): Requirement #12

This report addresses the following Strategic Directions: Health Equity

Risk	٠	Children that do not meet the financial eligibility will no longer qualify
		to receive preventive services, resulting in the exclusion of
		approximately 843 vulnerable children in the Algoma District.

	Children in need of urgent care, who do not meet the financial
	eligibility, will not be able to receive a full course of treatment
	 Families and providers may struggle to navigate the dental care system
	• Children with unmet dental needs will be at risk of falling into system
	gaps, which can lead to more extensive and costly dental treatment
	and put children's overall health at risk.
Recommendations	That the Board of Health advocate along with other Public Health
	Agencies in supporting and maintaining the current preventive services
	and treatment for children with urgent dental conditions within the
	Ontario Public Health Standards.
Key Points	In August 2015, the Ministry of Health and Long-Term Care will integrate
Rey Points	six publicly funded dental programs into one. The six programs include
	Healthy Smiles Ontario program (HSO), Children in Need of Treatment
	(CINOT), Ontario Works, the Ontario Disability Support Program, the
	Assistance for Children with Severe Disabilities Program and preventive
	services within the Ontario Public Health Standards, 2008.
	These preservities shildren and youth and 17 and under from
	These programs will service children and youth aged 17 and under from
	low-income families based on predetermined income eligibility
A 1	requirements.
Analysis	The concern is that the focus is moving towards a financial-based and
	treatment-oriented model, rather than a primary prevention and needs
	based model. The family net income for a family with one child will need
	to be at or below \$21, 638 with a \$1,500 increase for every additional
	child in order to qualify for this new program (current Healthy Smiles
	Ontario Program eligibility).
	This may cause a financial hardship for low income families in our area
	who may no longer qualify for dental services and will have to pay out of
	pocket for this service.
	The proposed changes will create barriers and health inequities for the
	children in Algoma and does not align with our Health Equity strategic
	direction for 2014-2019.
Action	The Board of Health endorses and passes a Resolution to ensure that the
	current eligibility for preventive dental services and access to a full course
	of treatment for children with urgent dental conditions is maintained
	under the Ontario Public Health Standards.
	It is suggested that this Resolution be shared with other Health Units in
	the hopes of working collaboratively to ensure that preventive services
	are not removed.
Financial Implications	N/A
Staffing Implications	Unknown at this time.

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ENVIRONMENTAL HEALTH

Topic: Public Health Emergency Preparedness Protocol and training of Board of Health (BoH) members

This report addresses the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/ Deliverables:

Public Health Emergency Preparedness Protocol Requirements 1-8

This report addresses the following Strategic Directions: Health Equity, Employee Engagement and Collaboration

Risk	The risk of not doing Board of Health training annually on Emergency Preparedness Protocol is that we are then not meeting the protocol requirements. The Emergency Preparedness Protocol requires that the		
	requirements. The Emergency Preparedness Protocol requires that the BoH shall be trained in emergency planning, attend or be a part of an exercise of the plan in whole or in part at least annually.		
Recommendations	The BoH members review the current APH emergency plan to ensure		
Recommendations	understanding of APH's role in working with our community partners.		
	Would need approval to exercise a part of the emergency plan with the		
	Board members to ensure we are meeting the requirement of Board		
	training		
Key Points	The requirements of the Emergency Protocol states that APH shall:		
	1. Identify potential hazards in the Algoma District		
	2. Develop a continuity of operations plan		
	3. Develop an emergency response plan for APH		
	4. Implement a 24/7 on call system		
	5. Provide training to staff on emergency planning		
	6. Ensure officials are oriented to the plan		
	7. Exercise the plan		
	To date all requirements are met except the training and exercise of the plan with the BoH. All APH staff review the emergency plan annually, as well they are offered an online IMS 100 training course. In addition the EH staff also attend a scribe course, IMS 200 in class training, emergency communication course, and Ontario Public Health IMS 200 training. As well they		
	participate in multiple community emergency training exercises and		
	conferences such as the Rural and Ready symposium with the Chippewa County Health Department.		
Analysis	It is important for APH to address the requirement of training for the BoH		
-	members and to exercise a portion of the emergency plan to meet not		
	only the Ontario Program Standard requirements but to also ensure the		
	BOH are aware of their role and are able to respond in the event of an		
	emergency.		

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Action	 To address the issue we: Maintain the emergency plan for APH offices which encompasses the District of Algoma Collaborate with communities throughout the district to provide assistance and ensure APH is part of their emergency plan Plan annual training for staff as well as the BOH Our proposed action is to exercise the call out list and contact BoH members on a week night or weekend to ensure we are able to contact everyone with our current contact lists.
Financial Implications	None
Staffing Implications	None

2. PROGRAM HIGHLIGHTS

CHRONIC DISEASE PREVENTION

Topic: Healthy Kids Community Challenge - North Channel 4 Kids

This report addresses the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/ Deliverables: *Chronic Disease Prevention Program*

This report addresses the following Strategic Directions: Collaborate effectively

The Ministry of Health and Long Term Care was accepting applications for the Healthy Kids Community Challenge Fund and joint application was submitted by the communities of: MacDonald, Meredith and Aberdeen Township; Laird Township; Johnson Township; the Town of Bruce Mines; Plummer Additional Township; the Town of Thessalon; Thessalon First Nations; the Municipality of Huron Shores; the Town of Blind River; Mississauga First Nations; and the Unorganized regions of Central North Algoma District. This joint application exemplifying community collaboration has been selected as one of the successful applicants and the group will be known as North Channel 4 Kids.

Across the Province 45 communities were successful in their applications to the Ministry of Health and Long-Term Care for the Healthy Kids Community Challenge Fund, including the City of Sault Ste. Marie. The Fund will support local healthy and active lifestyle initiatives for children and youth.

Funding will be provided over the next four years for the communities to support and promote local healthy and active lifestyle programs for children and youths. The communities will receive funding towards training and marketing tools to support local programs such as community gardens and kitchens and, local physical activity programs.

This is an exciting new opportunity for the communities to collaborate to serve the children and youth of the North Shore.

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COMMUNITY MENTAL HEALTH

Topic: 308 Conversations

This report addresses the following CMH Program Guidelines/ Deliverables: NELHIN MH&A priority # 3-Enhance care supports for individuals with complex issues by working closely with health community sectors, ministries and governments.

Recently, the World Health Organization (WHO) released its first global report on suicide prevention, and is a "call for action to address a serious public health problem which has been shrouded in taboo for far too long". The report found that suicides take place all over the world and at almost any age, however noted that in the 15 to 29-year age group, suicide is the second leading cause of death globally. The WHO encourages governments to set up national prevention plans, noting that currently only 28 countries are known to have such strategies. "No matter where a country currently stands in suicide prevention, effective measures can be taken, even just starting at local level and on a small scale," said Alexandra Fleischmann, a scientist at the WHO's department of mental health and substance abuse.

APH participated in just such a local event, on September 10th, 2014, World Suicide Prevention Day. The event called "308 Conversations" was organized by the 308 Members of Parliament (MP) across Canada, locally hosted by MP Bryan Hayes, and created opportunity for our community to have a dialogue about suicide prevention. APH-Community Mental Health Staff along with Sault Area Hospital, Canadian Mental Health Association and Algoma Family Services facilitated the discussion which took place around 4 themes: Discussing Suicide, Suicide as a Public Health Issue, Stigma, Resource Deployment.

The discussion was excellent. About 50 district wide community members participated in the conversation, several of whom have lost a family member or friend or colleague to suicide, various service agency representatives, the Mayor of SSM, First Nations community, physicians and several community members at large. The conversations inspired individuals to take an active role in preventing suicide within the community, encouraged people to ask the question when concerned about another person "are you having thoughts of suicide?", and created awareness about local support networks and service providers that can help. In addition, many ideas about how we can create better capacity to prevent suicide in our community, particularly, building resiliency in and improving on protective factors for our local youth.

The timing of 308 Conversations corresponds with government plans to create a federal framework for suicide prevention before the end of 2014. Bill C-300, a private members bill that became law in 2013, calls for the Government of Canada to develop the framework in consultation with relevant non-governmental organizations, provinces, territories and relevant federal departments. Our local dialogue was recorded, summarized and forwarded, and will be added to the other "308 Conversations" as part of community consultation and in support of a National Suicide Prevention Framework.

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ENVIRONMENTAL HEALTH

Topic: Radon

This report addresses the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/ Deliverables: Health Hazard Prevention and Management requirements 1 through 5. <u>http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf</u>

This report addresses the following Strategic Directions: Collaboration, Health Equity

Algoma Public Health will be conducting our annual Radon Awareness campaign beginning in November to highlight Lung Cancer Awareness month.

Radon is a colorless, odorless radioactive gas that is found naturally in the environment. Traces of radon gas can be found in homes throughout Canada and in Algoma. Did you know radon is the second leading cause of Lung Cancer¹ in Canada? "It is estimated that 13.6% of lung cancer deaths in Ontario are attributed to Radon"²

Our awareness campaign is multifaceted and includes the following strategies:

- Issue media promoting the national "Take Action on Radon" awareness campaign. Media used will include print ads, bill boards, radio, Facebook [®], Twitter [®], APH website, and Shaw cable, as well staff will have displays at all APH offices. In addition, radon information videos may be displayed during intermissions of Grey Hound hockey games for the month of November.
- 2. Outreach to local stores that sell Radon Test Kits (such as home supply stores).
- 3. Provision of a rebate program to encourage home owners to test their homes. The rebate program will be advertised on APH social medial accounts and at retail locations.
- 4. Provision of health environment for kids (www.healthyenvironmentforkids.ca) pamphlets to daycare operators to share with parents. Pamphlets promote radon testing and mitigation.
- 5. Working with local Radon certified companies to support Radon awareness.
- 6. PHIs may provide presentations and training to the Home Inspector students at Sault College.
- 7. GIS mapping of provided test results from home owners.
- 8. Participation of PHI on the Ontario Radon Working Group.
- Continue to lobby for changes to the Ontario Building code under Bill 96, Radon Awareness and Prevention Act which can be found at: <u>http://www.ontla.on.ca/web/bills/bills_detail.do?locale=en&Intranet=&BillID=2580</u>

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Our campaign provides individuals with information in order to raise awareness on how to reduce their exposure to Radon and their risk of lung cancer. Our goal is to encourage the public to test their homes and know their radon reading/result. If the reading/result exceeds the national guideline, the goal is for home owners to act upon this information and mitigate their risk by installing proper ventilation and remediation to their homes.

We are hoping our Radon Campaign will continue to raise awareness of the risk of lung cancer, as well as encourage the public to report their home testing kit results to APH. This will also provide support for the launch of the Cancer Report in Algoma

References:

¹Health Canada and WHO documents (all one reference is: http://www.hc-sc.gc.ca/ewh-semt/radiation/radon/effects-effets-eng.php)

² Lung cancer risk from radon in Ontario, Canada: How many lung cancers can we prevent? Emily Peterson, Amira Aker, Jin Hee Kim, Ye Li, Kevin Brand, Ray Copes, August 2013.

VACCINE PREVENTABLE DISEASE

Topic: Vaccine Preventable Disease Program

This report addresses the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/Deliverables: OPHS Vaccine Preventable Disease Requirement #7:

The board of health shall promote and provide provincially funded immunization programs to any eligible person in the health unit, including:

- Board of health-based clinics;
- School-based clinics (including, but not limited to, hepatitis B and meningococcal immunization);
- Community-based clinics; and
- Outreach clinics to priority populations.

Regular Immunization Clinics

Over 8000 immunizations have been provided throughout the district of Algoma at APH regular immunization clinics. The Health Promotion Centre closed in June 2014 at the Cambrian Mall and all clinics in Sault Ste. Marie are now held in the Algoma Room at 294 Willow Ave.

School Program

The VPD nurses and school nurses have begun the Grade 7 Hepatitis B and Meningococcal and Grade 8 HPV program. Nurses will be going into all elementary schools to deliver the program across the district. This year Meningococcal is a mandatory vaccine in Grade 7 under the Immunization of School Pupils Act (ISPA). Vaccine Preventable Disease Program nurses with help from the school nurses will be delivering a catch-up program in high school for Meningococcal vaccination dating back to students born in 1997.

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Flu Season

The Influenza joint campaign with the GHC will be starting Oct 14, 2014 (Oct 21st in district sites). All flu clinics in SSM will be held at 294 Willow Ave. The strains for the vaccine will be the same as last year:

- A/California/7/2009 (H1N1)pdm09-like virus;
- A/Texas/50/2012 (H3N2)-like virus;
- B/Massachusetts/2/2012-like virus.

There is no indication of circulating influenza virus to date in Canada.

Panorama- the new provincial integrated data base for the purpose of validating, recording and tracking student immunization status was launched on July 14, 2014. All immunization records in IRIS were transferred to the new Panorama system. Orientation and education to the new system has been ongoing. School records are being matched to the new electronic school board transmission, STIX.

3. PARTNERSHIPS

BOARDS OF EDUCATION

The four school board Directors met with us at APH to discuss how we can better meet our own mandate under the Ontario Public Health Standards. This included exploring a new model being delivered by the French School Board.

SAULT AREA HOSPITALS

Our two executive teams met to review progress against joint activities from the last ninety days and new goals and activities were agreed upon for the next ninety days.

ST JOSEPH'S GENERAL HOSPITAL, ELLIOT LAKE

Mike Hukazalie (CEO) and Pierre Ozolins (AED) have agreed to meet with me this week to discuss a closer working relationship.

GROUP HEALTH CENTER

We continue to meet monthly to ensure that their new senior management team are familiar with the work that we do and joint opportunities including the establishment of a data sharing agreement.

CEO TABLE

APH hosted the quarterly CEO table meeting which was extremely well attended and we have agreed to support the Safe Communities and Wellness initiative outlined by the Chief of Police at our meeting. This will be in addition to the work we will do on the Healthy Kids Community Challenge.

POST SECONDARY TRAINING

The NOSM medical students are progressing well in their projects and the staff are delighted to be contributing to their learning. We also have a Masters of Public Health student from Waterloo here with us for three months.

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LOCAL HEALTH INTEGRATION NETWORK

We have received approval to lead the next phase of the SSM Health Links.

ESSAR Steel

Public Health Ontario spent the day with us to celebrate the opening of the new Public Health Inspector Program and we were able to take a tour with them through ESSAR Steel to provide them with a firsthand look at potential health concerns.

Public Health Ontario

We continue to work very closely with PHO looking at the results of the soil study around ESSAR as well as the brown water concerns in SSM. In follow up to the ESSAR Steel tour, ESSAR has shared their air quality results with PHO who are analyzing the data on our behalf.

GOOD NEWS

The Common Thread Quilt Guild in Orleans, Ontario has donated 24 quilts to our Infant and Child Development program. The quilters guild would like APH to donate these quilts throughout the Algoma district to families who have children that are premature, ill or have special needs. They plan to provide us with a supply of these vibrant cozy quilts every summer.

NEXT STEPS

We look forward to launching our Strategic Plan, once approved by the Board, including a staff potluck lunch on Monday, October 20th. The four strategic directions have working groups assigned to them to ensure the implementation and monitoring of the activities to support these directions.

At the end of October the Leadership Team will spend two days off site for management skill training as well as risk management training being provided by both the Ministry of Health and the Ministry of Finance staff. We look forward to our second annual staff Hallowe'en party!

Respectfully submitted,

Dr Kim Barker, MD CCFP MPH FRCPC