

**ALGOMA PUBLIC HEALTH BOARD MEETING
JANUARY 27, 2016 @ 5:00 PM
SAULT STE MARIE ROOM A&B 1ST FLOOR, APH SSM**

ADDENDUM

11) Addendum

- a) APH Attendance to the Provincial Pre-Budget Consultation on January 22, 2016 Ian Frazier,
Committee Chair

- b) Legislation to Enforce Infection Prevention and Control Practices within Invasive Personal Service Settings under the HPPA Chair
 - i. Letter to Premier Wynne from Haliburton, Kawartha, Pine Ridge District Health Unit – January 21, 2016

- c) Cannabis Regulation and Control Chair
 - i. Letter to Prime Minister Trudeau from Grey Bruce Health Unit – January 20, 2016

MEMORANDUM

To: APH Board

From: Ian Frazier, Chairman of the Finance and Audit Committee

Date: January 22, 2016

Subject: Attendance to the Provincial Pre-Budget Consultation

I was asked to attend the Provincial Pre-Budget Consultation hosted by the Honourable Mitzie Hunter, Associate Minister of Finance along with David Oraziotti, Local Member of Provincial Parliament on the 22nd of January, 2016.

In Ms. Hunter's opening remarks she stated that it is the intent of the Ministry to help Sault Ste. Marie and area to improve and grow. There were approximately 15 people in attendance and there were eleven (11) presentations made. The eleven (11) that presented were:

1. Innovation Centre
2. Domtar
3. Community First Credit Union
4. Canadian Cancer Society
5. Essar Steel
6. Sault District Prospectors Association
7. Chamber of Commerce
8. Ontario Aboriginal Housing Services
9. Economic Development Corporation
10. Algoma Public Health
11. Unidentified person who spoke about arts and culture

Discussion was limited to five to eight minutes each. Most people had formal presentations completed for submission and then presented to the hosts an overview of their submission. A brief summary of the points I raised during my presentation are as follows:

- APH covers a large rural area from north of Wawa, through Sault Ste. Marie and to the east to Elliot Lake
- Our annual operating budget is over \$21M per year, we directly employ over 200 people and due to our large area of coverage we operate with 4 offices
- Last year the Ministry implemented a new funding model that resulted in 28 out of 36 health units receiving 0% increase in funding
- The Ministry has also reduced the acceptance of special one-time funding requests
- That a 0% increase for a year or two may be sustainable by a health unit but the projected 3-5 year of no increases could result in downgrade of services
- We would ask the Ministry to reconsider their position of the new funding model as it places rural health units at a disadvantage

I was asked a couple of questions and responded that our health unit has taken on offering additional services over and above our mandate of which funding affects our ability to offer such services.

Overall it was a good consultation and we have the opportunity by January 31, 2016 to submit a formal proposal to the Ministry of Finance for consideration, if we so desire.



21 January 2016

The Hon. Kathleen Wynne
Premier of Ontario
Legislative Building - Queen's Park
Toronto ON M7A 1A1

Re: Legislation to Enforce Infection Prevention and Control Practices within Invasive Personal Service Settings under the *Health Protection and Promotion Act*

Dear Premier Wynne

Ontario has no legislation regulating infection prevention and control practices to minimize the risk of blood borne disease transmission from practices/procedures performed at invasive Personal Service Settings (PSS). The PSS Protocol under Ontario Public Health Standards (OPHS) govern the activities of Public Health Units regarding PSS infection control such as causing one inspection per year for invasive services which is the same frequency for non-invasive PSS such as a hair salon.


Public Health Inspectors (PHIs), in accordance with the OPHS and best practices, inspect invasive PSS without provincial legislation that outlines legal requirements for infection control needs and operator responsibilities. Infection prevention and control practices are a major component of assessing invasive PSS to minimize the transmission risks of blood-borne disease.

Invasive PSS such as tattoo/body modification establishments or other invasive PSS require extra attention and time for PHIs to mitigate risk to the public by ensuring operators have adequate infection prevention and control practices in place. The Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit views the importance of public health regulations to minimize the risk of blood-borne disease transmission from invasive personal service settings.

The Haliburton, Kawartha, Pine Ridge District Board of Health therefore urges the Government of Ontario to enact legislation for infection prevention and control requirements for invasive PSS under the *Health Protection and Promotion Act* with a suitable enforcement program such as short-form wording under the *Provincial Offences Act*.

Sincerely

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


Mark Lovshin
Board of Health Chair

.../2

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The Hon. Kathleen Wynne

Encl. 2

Cc:

The Honourable Eric Hoskins, Minister of Health and Long-Term Care

Ms. Laurie Scott, MPP, Haliburton-Kawartha Lakes-Brock

Mr. Lou Rinaldi, MPP, Northumberland-Quinte West

Mr. Patrick Brown, MPP, Simcoe North – Leader of the Progressive Conservative Party of Ontario

Ms. Andrea Horwath, MPP, Hamilton Centre – Leader of the New Democratic Party of Ontario

Dr. David Williams, Chief Medical Officer of Health

Board of Health Chairs

Association of Local Public Health Agencies

HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT BOARD OF HEALTH RESOLUTION

- TITLE:** Enactment of Legislation to enforce infection prevention and control practices within invasive Personal Service Settings (PSS) under the *Health Protection and Promotion Act*.
- SPONSOR:** Haliburton, Kawartha, Pine Ridge District Health Unit
- WHEREAS** Ontario has no legislation governing infection prevention and control practices to minimize the risk of blood borne disease transmission from practices/procedures performed at invasive Personal Service Settings (PSS); and
- WHEREAS** The Personal Service Setting Protocol under the *Ontario Public Health Standards* (OPHS) governs the activities of public health units regarding PSS infection control; and
- WHEREAS** The OPHS mandate one inspection per year for invasive personal service settings, which is the same frequency for non-invasive PSS such as a hair salon; and
- WHEREAS** Public Health Inspectors (PHIs), in accordance with the OPHS and best practices, inspect invasive PSS without provincial legislation that outlines legal requirements for infection control needs and operator responsibilities; and
- WHEREAS** Infection prevention and control practices are a major component of assessing invasive PSS to minimize the transmission risks of blood-borne disease; and
- WHEREAS** Invasive PSS such as tattoo/body modification establishments or other invasive PSS require extra attention and time for PHIs to mitigate risk to the public by ensuring operators have adequate infection prevention and control practices in place.

NOW THEREFORE BE IT RESOLVED that the Haliburton, Kawartha, Pine Ridge District Board of Health strongly recommends and urgently requests the Government of Ontario to enact legislation implementing infection prevention and control requirements for invasive personal service settings under the *Health Protection and Promotion Act* with a suitable enforcement program such as short-form wording under the *Provincial Offences Act* to allow for the enforcement of non-compliance with the legislation under the *Health Protection and Promotion Act*.

AND FURTHER that the Haliburton, Kawartha, Pine Ridge District Board of Health strongly recommends and urgently requests that the Association of Local Public Health Agencies advocate to the Premier of Ontario and the Minister of Health and Long-Term Care, to enact legislation implementing infection prevention and control requirements for invasive personal service settings under the *Health Protection and Promotion Act* with a suitable enforcement program such as short-form wording under the *Provincial Offences Act* to allow for the enforcement of non-compliance with the legislation under the *Health Protection and Promotion Act*.

Haliburton, Kawartha, Pine Ridge Health Unit

21 January 2016

Backgrounder – Resolution for Legislation to Enforce Infection Prevention and Control Practices within Invasive Personal Service Settings under the Health Protection and Promotion Act

Public Health Inspectors report an increase in the number of tattoo shops opening for business since the spring. Two shops in Bobcaygeon, one in Fenelon Falls and one in Minden have opened within a few months of each other.

Public health inspectors in accordance with best practice inspect these shops without provincial legislation outlining legal requirements for infection control needs and operator responsibility.

Infection control practices are major components of assessing a tattoo shops to reduce transmission risks of blood-borne disease. Invasive personal services setting such as tattoo shops require extra attention and time for Public Health Inspectors to mitigate risk to the public by ensuring operators have adequate infection control practices in place.

Ontario has no legislation governing infection control practices within invasive Personal Service Settings. The Ontario Public Health Standards mandate one inspection per year in invasive Personal Service Settings, which is similar to that for a hair salon.

Recommendations

1. That the Board of Health for the Haliburton, Kawartha, Pine Ridge District Health Unit urges the Government of Ontario to move forward with the development and implementation of Legislation for infection prevention and control requirements for invasive personal service settings under the *Health Protection and Promotion Act* with a suitable enforcement program such as short-form wording under the *Provincial Offences Act* to allow for the enforcement of non-compliance with the legislation under the *Health Protection and Promotion Act*; and
2. That the Board of Health of the Haliburton, Kawartha, Pine Ridge District Health Unit advises the Premier of Ontario of this recommendation, and copies the Minister of Health and Long-Term Care, Leaders of the Opposition Parties, and the MPPs of Northumberland County, City of Kawartha Lakes and Haliburton County; and
3. That the Board of Health of the Haliburton, Kawartha, Pine Ridge District Health Unit recommends to the delegates of the 2016 Association of Local Public Health Agencies that its resolution regarding the enactment of legislation implementing infection prevention and control requirements for invasive personal service settings under the *Health Protection and Promotion Act* with a suitable enforcement program such as short-form wording under the *Provincial Offences Act* to allow for the enforcement of non-compliance with the legislation under the *Health Protection and Promotion Act* be endorsed.

January 20, 2016



The Right Honourable Justin Trudeau
Prime Minister of Canada
House of Commons
Ottawa ON K1A 0A6

Dear Prime Minister Trudeau:

Re: Cannabis Regulation and Control: Public Health Approach to Cannabis Legalization

On December 18, 2015 at a regular meeting of the Board for the Grey Bruce Health Unit, the Board considered the attached resolution #54-15 from Sudbury and District Health Unit regarding Cannabis Regulation and Control. The following motion was passed:

Motion No: 2015-109

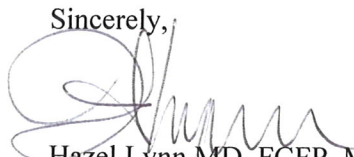
Moved by: Gary Levine

Seconded by: Laurie Laporte

“That the Board of Health for the Grey Bruce Health Unit supports the resolution from Sudbury and District Health Unit regarding cannabis regulation and control and supporting a public health approach to cannabis legalization.”

Carried

Sincerely,



Hazel Lynn MD, FCFP, MHSc
Medical Officer of Health

Cc: Hon. Jody Wilson-Raybould, Minister of Justice and Attorney General of Canada
Hon. Jane Philpott, Minister of Health
Hon. Kathleen Wynne, Premier of Ontario
Hon. Madeleine Meilleur, Attorney General for ON
Larry Miller, MP Bruce-Grey-Owen Sound
Benn Lobb, MP Huron-Bruce
Kellie Leitch, MP Simcoe-Grey
Bill Walker, MPP Bruce-Grey-Owen Sound
Lisa Thompson, MPP Huron-Bruce
Jim Wilson, MPP Simcoe-Grey
Dr. David Williams, Chief Medical Officer of Health (Interim)
Linda Stewart, Executive Director, Association of Local Public Health Agencies
Pegeen Walsh, Executive Director, Ontario Public Health Association
Dr. Catherine Zahn, President and CEO, Centre for Addiction and Mental Health
All Ontario Boards of Health

Encl.

Working together for a healthier future for all.

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December 1, 2015

VIA ELECTRONIC MAIL

The Right Honourable Justin Trudeau
Prime Minister of Canada
House of Commons
Ottawa, ON K1A 0A6

Dear Prime Minister Trudeau:

**Re: CANNABIS REGULATION AND CONTROL: Public Health
Approach to Cannabis Legalization**

At its meeting on November 19, 2015, the Sudbury & District Board of Health carried the following resolution #54-15:

WHEREAS the election platform of Canada's recently elected federal government includes the intention to legalize, regulate, and restrict access to marijuana; and

WHEREAS within the current criminalization context, cannabis is widely used in the SDHU catchment area: 23.5% of youth used in the previous 12 months, 52.3% of people aged ≥19 have tried cannabis and 13% currently use cannabis; and

WHEREAS the health risks of cannabis use are significantly lower than tobacco or alcohol but are increased in those who use it frequently, begin at an early age and/or who have higher risk of cannabis-related problems (i.e. certain psychiatric conditions, cardiovascular disease, pregnancy); and

WHEREAS a public health approach focused on high-risk users and practices – similar to the approach favoured with alcohol and tobacco that includes strategies such as controlled availability, age limits, low risk use guidelines, pricing, advertising restrictions, and general and targeted prevention initiatives – allows for more control over the risk factors associated with cannabis-related health and societal harms; and

WHEREAS the Ontario Public Health Standards require boards of health to reduce the frequency, severity, and impact of preventable injury and of substance misuse;

Letter

Re: Cannabis Regulation And Control: Public Health Approach to Cannabis Legalization

December 1, 2015

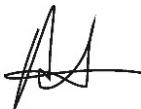
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THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health support a public health approach to the forthcoming cannabis legalization framework, including strict health-focused regulations to reduce the health and societal harms associated with cannabis use; and

FURTHER THAT this resolution be shared with the Honourable Prime Minister of Canada, local Members of Parliament, the Premier of Ontario, local Members of Provincial Parliament, Minister of Health and Long-Term Care, Federal Minister of Health, the Attorney General, Chief Medical Officer of Health, Association of Local Public Health Agencies, Ontario Boards of Health, Ontario Public Health Association, the Centre for Addiction and Mental Health, and local community partners.

Members of the Sudbury & District Board of Health respectfully request that the Right Honourable Prime Minister use a public health approach to the regulation and legalization of cannabis in Canada.

Sincerely,



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

cc: Hon. Jody Wilson-Raybould, Minister of Justice and Attorney General of Canada
Hon. Jane Philpott, Minister of Health
Carol Hughes, MP Algoma, Manitoulin, Kapuskasing
Paul Lefebvre, MP Sudbury
Marc Serré, MP Nickel Belt
Hon. Kathleen Wynne, Premier of Ontario
Hon. Madeleine Meilleur, Attorney General of Ontario
Glenn Thibeault, MPP Sudbury
France Gélinas, MPP Nickle Belt
Michael Mantha, MPP, Algoma-Manitoulin
Dr. David Williams, Chief Medical Officer of Health (Interim)
Linda Stewart, Executive Director, Association of Local Public Health Agencies
Pegeen Walsh, Executive Director, Ontario Public Health Association
Dr. Catherine Zahn, President and Chief Executive Officer, Centre for Addiction and Mental Health
Ontario Boards of Health