

BOARD REPORT

Friday, May 23, 2014



Medical Officer of Health

REPORT TO THE BOARD

Friday, May 23, 2014

alPHa Resolutions will be debated at the alPHa Annual General Meeting (AGM) prior to alPHa's 2014 Annual Conference, *Preventing More to Treat Less: Public Health and Primary Health Care Together.* The AGM and Resolution Session is on Tuesday June 3, 2014 from 6:00 p.m. to 8:00 p.m. at the Sheraton Parkway Toronto North.

A brief summary is provided here and the full package with background information is attached for your reference.

A14-1

Sponsor: Association of Public Health Epidemiologists in Ontario (APHEO) alPHa requests Statistics Canada to:

- make available specific data to support public health planners in smaller areas with smaller populations
- reinstate a mandatory long form census or otherwise gather and make available specific, small population level, information from administrative databases

A14-2

Sponsor: Board of Health for Peterborough County-City Health Unit alPHa requests Health Canada to:

- regulate the manufacturing consistency of e-cigarettes
- conduct research on the long-term health effects of using e-cigarettes, and exposure to second hand vapour
- regulate the promotion, sale and use of e-cigarettes in Ontario

A14-3

Sponsor: Board of Health for Peterborough County-City Health Unit alPHa requests that the Ministry of Housing and Municipal Affairs and the Ontario Ministry of Health & Long-Term Care and other stakeholders:

- ensure that new provincially and municipally funded multi-unit dwellings are designated smoke-free; and
- future provincial funding for housing require, for eligibility of funding, that any new units be designated as smoke free

A14-4

Sponsor: Simcoe Muskoka District Health Unit alPHa to call for the Province of Ontario to:

- amend regulations of the Safe Drinking Water Act requiring community water fluoridation for all municipal water systems (when source-water levels are below the Health Canada recommended level of 0.7 mg/L) to prevent dental caries.
- provide the funding and technical support to municipalities required for community water fluoridation

A14-5

Sponsor: alPHa Board of Directors

Request that alPha's Constitution be updated to allow alPHa Board members from Affiliate organizations to serve as Officers of the Association.

A14-6

Sponsor: alPHa Board of Directors

- request that alPHa's Constitution be updated to references to rotations between sections as noted in the original Constitution
- that the Board of Directors establish rules and procedures with respect to the selection of officers and representation of the sections and affiliates on the executive committee
- the updated Constitution be provided to member local public health units for their information

A14-7

Sponsor: Haliburton, Kawartha, Pine Ridge District Health Unit alPHa strongly recommends and urgently requests:

- the Prime Minister of Canada, Minister of Agriculture and Agri-Food, Minister of Children and Youth Services, Minister of Education and Minister of Health to enact legislation implementing all provisions of the international Code of marketing of Breast-Milk Substitutes and its subsequent relevant World Health Assembly Resolutions
- The above ministries establish a sustainable enforcement program to allow for monitoring and addressing non-compliance with the legislation.

Hazel Lynn

Attachment: alPHa Resolutions for Consideration at June 2014 Annual General Meeting

Program Report May 2014



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WEBSITE: www.publichealthgreybruce.on.ca

We work with the Grey Bruce community to protect and promote health.

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CLIENT SERVICES

Measles Activity

Investigations have been undertaken for 24 Grey Bruce residents who were potentially exposed to measles cases outside of the area. Measles cases were from Simcoe-Muskoka, Peel and Middlesex London Health Unit. Grey Bruce Health Unit has not had a case of measles since 1996.

In Ontario, two doses of the combined measles, mumps and rubella (MMR) vaccine is administered to children; the first on or after their first birthday and the second at 4-6 years of age. In 1996, Ontario introduced the second dose of measles vaccine and held catch-up campaigns across the province to bring vaccine protection to almost 100%.

With the increased measles activity in Ontario, two doses of the measles vaccine are advised for anyone who has not had the measles in the past.

Red blotchy appearance is typical of measles rash at its peak. The early signs of measles are runny nose with fever, red and puffy eyes, cough and malaise. During this early stage, white or greyish spots, which look like small grains of sand with a reddish base also develop on the inner lining of the mouth; these spots are peculiar to measles.



Oral Health Program Changes

On October 2010, the province launched the Healthy Smiles Ontario (HSO) providing free basic preventive dental coverage to children and youth 17 years and under from low-income families. Other dental programs currently offered by the Grey Bruce Health Unit include Children in Need of Treatment (CINOT) for children 0-13 years, CINOT expansion for children 13-17 years and the Children's Oral Health Initiative (COHI).

This past April, the province announced expanded eligibility for the HSO program adjusting the eligibility threshold from \$20,000 Adjusted Family Net Income to \$21,513 with an increase of \$1500 for each additional child. Another hike in income eligibility will come in July to match changes to the Ontario Child Benefit income thresholds.

Expanded eligibility is expected to open access to the program for an additional 70,000 children and youth province-wide. In Grey Bruce, an additional 200 children are anticipated. The program has seen 487 clients since its start, with 372 clients currently enrolled. While projections suggest 572 children enrolled in Grey Bruce, the number could be significantly higher. A report from the Canada Revenue Agency indicates there are 5,780 children in Grey Bruce under 18 years of age in families with an Adjusted Family Net Income of less than or equal to \$20,000.

Additionally, the province has announced plans to integrate oral health programs and benefits for low-income children and youth into one program by August 2015. This integration will involve third party administration. Currently, we administer the Bruce County Ontario Works child dental program as well as HSO, CINOT and CINOT expansion. In 2013, 2,184 claims were processed with 1,187 children using these programs.

HSO Income Eligibility Requirements

Dependent Children in Household	1 Child	2 Children	3 Children	4 Children	5 Children	6 Children	7 Children	8 Children	9 Children
Adjusted Family	\$21,513	\$23,025	\$24,538	\$26,050	\$27,563	\$29,075	\$30,588	\$32,100	\$33,613



HEALTHY COMMUNITY DEVELOPMENT

Getting Your Community to PLAY

PLAY in Bruce Grey was featured at the 2014 Parks and Recreation Ontario (PRO) Educational Forum and Trade Show March 25 – 28 in Niagara Falls. The theme this year "The Many Faces of Play". PRO is a non-profit association that advances the health, social and environmental benefits of quality recreation and parks. The *PLAY in Bruce Grey* presentation "Let's Play: Inspiring Community Involvement in Physical Activity" was selected as it supports evidence-based practices and is builds upon on collaborative partnerships.

Health Promoter Jason Weppler and co-presenter Shanna Reid from the Town of Saugeen Shores worked with municipal partners to develop the *PLAY in Bruce Grey* presentation. Grey Bruce is recognized as a leader in developing creative strategies of community engagement in being active. This year Bruce Power is providing \$10,000 towards the "Longest Day of Play" targeting children to get outside and be active. The web site http://playbrucegrey.com provides all supportive resources.



ENFORCEMENT / RESEARCH / SURVEILLANCE

New Food Safety Regulations Training

A first-of-its-kind course is being created to deliver a Food Safety Regulation Training program this fall through Georgian College. This four-part course is designed to help food-business owners/managers better understand and navigate the regulatory environment in order to build and expand successful businesses.

Grey County has received Rural Economic Development (RED) funding for the development and delivery of the Food Safety Regulations Training program. This course is being developed in partnership with the Grey Bruce Health Unit, Georgian College, Bruce and Simcoe Counties and with input from food industry advisors.

Regulations governing food reach across three levels of government, involves 30 agencies, over 50 acts of parliament, hundreds of sets of regulations, and thousands of pages of guidelines and policy interpretations. Business operators are expected to know and comply with regulations that oversee their enterprises. This can be an overwhelming investment of time and a steep learning curve. Presently there are no training courses available that approach food regulatory systems at the overview and planning level and there is a growing need for more comprehensive food safety regulation training.







Central Resources

Central Resources provides a one stop location for all printing and program materials. Services include ondemand printing, copying and laminating as well as collating documents, workshop materials and specialized kits. On-demand printing eliminates the need to stockpile resources. An annual review maintains current copyright permissions. Program codes ensure jobs costs are assigned to appropriate programs and support planning and budgeting.

Following a pilot for the sexual health program using Inflow Inventory Software, the inventory control program has expanded to include the dental program, office supplies and off-site sexual health clinic and needle exchange inventories.

Distribution of inventory is tracked electronically. An online Resource List is maintained including non-cost inventory such as *Canada Food Guides*, car seats, display boards and presentation equipment. Staff can review a list and make an electronic request from drop down menus. Operations are supported by a Central Resources Manual.

Stock levels are monitored and purchases made to maintain a pre-determined supply. Analysis of purchase orders for basic inventory requests can identify products and supplies that are frequently requested and may be added to the standard inventory.

Savings are realized through bulk purchase for cross program inventory and by limiting product loss using a first in/first out stock rotation. A manual monthly accounting is conducted to reconcile inventory and to eliminate data entry error.

Centralizing production of print materials and implementing the InFlow Inventory system has shown an overall savings of \$35,000 in staff time on printing, production and manual inventory control.

