

Chatham-Kent Board of Health

Minutes

Wednesday, November 21, 2018

10:30 a.m.

Call to Order

Present: Councillor Joe Faas, Chair
Councillor Brock McGregor
Councillor Carmen McGregor
Councillor Bob Myers, Vice-Chair
Mr. Ron Carnahan
Ms. Sharon Pfaff
Dr. David Colby, Medical Officer of Health
Teresa Bendo, Director, Public Health
Dr. April Rietdyk, General Manager, Community Human Services
Lisa Powers, Executive Assistant, Community Human Services

Regrets: Ms. Noreen Blake

1. Provision for Declaration of Pecuniary Interest

No member of the Board declared a pecuniary interest on any matter on the open session agenda.

2. Recess To Closed Session

Mr. Carnahan moved, seconded by Councillor C. McGregor:

“That the Board of Health move into a Closed Session Meeting pursuant to Section 239 of the Municipal Act, 2001, as amended, for the following reasons:

- Personal matters about an identifiable individual, including municipal or local board employees

The Chair put the Motion.

Motion Carried

3. Adjournment Of Closed Session

4. Resumption of Open Board of Health Meeting – 11:00 a.m.

5. Minutes of the Board Meeting September 12, 2018

Ms. Pfaff moved, seconded by Councillor Myers:

“That the minutes of the September 12, 2018 Board of Health meeting be approved.”

The Chair put the Motion.

Motion Carried

6. Business Arising from the Minutes - None

7. Education/Training

a) Amendments to the Smoke Free Ontario Act, presentation by Carina Caryn

In an effort to educate the Board on the new Smoke Free Ontario Act, Ms. Caryn shared a PowerPoint outlining pertinent updates, and reinforced the comprehensiveness of the Chatham-Kent Smoke Free By-law. Information was shared regarding public education.

The *Smoke-Free Ontario Act (SFOA), 2017* was expected to be passed July 1, 2018, but was actually passed on October 17, 2018. This replaces the former *SFOA* and *Electronic Cigarettes Act (ECA)* and now includes prohibitions related to smoking/vaping tobacco and recreational and medical cannabis. Public health units are responsible for enforcement.

In response to questions from the Board, Ms. Caryn clarified that while there are no current plans to publicise smoking rates in Chatham-Kent, there may be an opportunity to share this information in the future.

Mr. Carnahan moved, seconded by Councillor Myers that:

“The presentation on Amendments to the Smoke Free Ontario Act be received.”

The Chair put the Motion.

Motion Carried

b) Update on Potassium Iodide (KI) Plan, presentation by Teresa Bendo and Dr. David Colby

In an effort to update the Board on this issue, Ms. Bendo and Dr. Colby shared a PowerPoint presentation regarding the purpose and process for this project. This project aims to provide KI tablets to all persons within the secondary zones of the Fermi 2

(Monroe, MI) and Perry (Ohio) nuclear power facilities. A general project timeline was shared, and the Board can expect updates early in 2019.

Councillor B. McGregor moved, seconded by Mr. Carnahan that:

“The presentation on the potassium iodide plan be received.”

The Chair put the Motion.

Motion Carried

New Business

A. Items Requiring Action

- a) 2019 Meeting Schedule, prepared by Dr. April Rietdyk

Recommendation

It is recommended that:

1. The following dates be set as meeting dates for the Chatham-Kent Board of Health for 2019:
 - Wednesday, January 16, 2019
 - Wednesday, February 20, 2019
 - Wednesday, March 20, 2019
 - Wednesday, April 17, 2019
 - Wednesday, May 15, 2019
 - Wednesday, June 19, 2019
 - Wednesday, September 18, 2019
 - Wednesday, October 16, 2019
 - Wednesday, November 20, 2019
 - Wednesday, December 18, 2019

Background

The Chatham-Kent Board of Health meets in accordance with the Chatham-Kent Board of Health Meeting Procedures, Section III - 3 of the General Policy and Procedure Manual. The policy states:

“The regular monthly meeting of the Board shall be the third Wednesday of each month, except in July and August, commencing at the hour of 11:00 a.m., unless otherwise ordered by a Board Resolution or as soon as possible after inclement weather has forced postponement of the meeting. The closed session will precede the regular meeting and will begin at 10:30 a.m. As per Section 52 of the Health Protection and Promotion Act, a

majority of the Board members will constitute a quorum of the Board of Health.

Administration will prepare the agenda monthly, with the exception of July and August but if the occasion arises where important business cannot be completed at the meeting, the Chair of the Board will arrange a subsequent meeting.”

Comments

The proposed dates follow the direction of the policy in that they fall on the third Wednesday of the month. However, the Board has, on occasion, chosen to move the June meeting to the last Wednesday in the month, to shorten the time between the June and September meeting.

Areas of Strategic Focus and Critical Success Factors

The recommendation in this report supports the following areas of strategic focus:

- Economic Prosperity:
Chatham-Kent is an innovative and thriving community with a diversified economy
- A Healthy and Safe Community:
Chatham-Kent is a healthy and safe community with sustainable population growth
- People and Culture:
Chatham-Kent is recognized as a culturally vibrant, dynamic, and creative community
- Environmental Sustainability:
Chatham-Kent is a community that is environmentally sustainable and promotes stewardship of our natural resources

The recommendation in this report supports the following critical success factors:

- Financial Sustainability:
The Corporation of the Municipality of Chatham-Kent is financially sustainable
- Open, Transparent and Effective Governance:
The Corporation of the Municipality of Chatham-Kent is open, transparent and effectively governed with efficient and bold, visionary leadership
- Has the potential to support all areas of strategic focus & critical success factors
- Neutral issues (does not support negatively or positively)

Consultation

The Chatham-Kent Public Health General Policy and Procedure Manual was utilized for direction.

Financial Implications

There are no financial implications as a result of the recommendation.

Councillor C. McGregor moved, seconded by Councillor B. McGregor that:

“The 2019 Meeting Schedule be approved.”

The Chair put the Motion.

Motion Carried

- b) Chatham-Kent Nutritious Food Basket – The Cost of Eating Well 2018, prepared by Lyndsay Davidson, RD

Recommendations

It is recommended that:

1. A letter be sent to the Minister of Families, Children and Social Development to encourage additional funding for poverty reduction in Budget 2019.
2. A letter be sent to the Ministry of Children, Community and Social Services to encourage an immediate increase to social assistance rates to reflect the cost of Nutritious Food Basket and local housing costs.

Background

How much does it cost to eat a basic healthy diet in Chatham-Kent? This year will mark the 19th year that the Chatham-Kent Public Health Unit has completed a survey of area grocery stores to determine the cost of feeding a family of four for one week.

The Nutritious Food Basket (the Basket) contains 67 items that together form a healthy diet. Careful attention ensures the list contains a variety of less expensive foods from the four food groups of Eating Well with Canada’s Food Guide. The Basket contains a 5% automatic calculation that is used to account for miscellaneous foods used in meal preparation like spices, seasonings, condiments, baking supplies, coffee and tea; but it does not contain food items like pop, cookies or other unhealthy packaged treats. It also does not cover necessities purchased along with groceries, such as toilet paper, soap, toothpaste and household cleaning supplies.

There are a number of assumptions that the Basket makes including that individuals have the time, ability, food skills, literacy, and language skills to prepare meals from scratch; that consumers have access to stores and always purchase the lowest priced items, and; that they shop every one to two weeks.

The results of the Nutritious Food Basket are used provincially to help advocate for changes to public policy that will work to ensure that all citizens have access to an adequate income to support basic needs, including healthy food.

Comments

The cost of the Chatham-Kent Nutritious Food Basket in 2018 was \$193.31. This amount is based on average costs of feeding a family of four for one week. Food costs were obtained from six different grocery stores across Chatham-Kent in both urban and rural settings. This year, the average weekly cost for a family of four has increased by 0.7%.

The Food Insecurity Workgroup of the Ontario Dietitians in Public Health (ODPH) has created an Income Scenario Tool to help put the Nutritious Food Basket results into a realistic context of costs for individuals and families. The following table outlines scenarios including housing costs specific to Chatham-Kent, as well as food costs obtained from the 2018 Nutritious Food Basket for Chatham-Kent.

| Monthly Income/Expenses | Single Man (Ontario Works) | Single Man (ODSP) | Family of 4 Ontario Works | Family of 4 Minimum Wage Earner | Family of 4 Medium Income (after tax) |
|---|-----------------------------------|--------------------------|----------------------------------|--|--|
| Income – after tax, includes Benefits & Credits) | \$810.00 | \$1,251.00 | \$2,582.00 | \$3,603.00 | \$7,967.00 |
| Estimated Shelter Costs | \$556.00 | \$680.00 | \$1,010.66 | \$1,010.66 | \$1,010.66 |
| Food (Nutritious Food Basket) | \$235.26 | \$235.26 | \$837.68 | \$837.68 | \$837.68 |
| What's Left? | \$18.74 | \$335.74 | \$733.66 | \$1,754.66 | \$6022.66 |
| % Income required for Shelter | 69% | 54% | 39% | 28% | 13% |
| % Income required for Food | 29% | 19% | 32% | 23% | 11% |

People still need funds for utilities, phone, transportation, cleaning supplies, personal care items, clothing, gifts, entertainment, internet, school supplies, medical and dental costs, and other costs.

Overall, the above chart demonstrates that there are significant financial pressures on families and individuals living on low incomes in Chatham-Kent. Those living on low incomes have little, if any, money left over to cover basic monthly expenses after paying for food and shelter. In general, food in Chatham-Kent is affordable for residents with adequate incomes. For example, a family of four with a median income spends only 11% of their after tax income on food. Households with low incomes spend up to 32% of their income on food, not because food costs too much, but because their incomes are too low.

It has been shown that the source of a household's income is strongly related to food insecurity. Food insecurity is more common in households with lower incomes, on social assistance, or headed by a female lone parentⁱ and households with children under the age of 18ⁱⁱ.

It is known that while community food programs may address poor food skills, nutrition knowledge, or food access, and have a role to play in communities, they do not address the root cause of food insecurity, which is a lack of income, or poverty. In August, the Government of Canada released the "Opportunity for All – Canada's First Poverty Reduction Strategy". The strategy sets for the first time in Canada's history, an official measure of poverty, Canada's Official Poverty Line. The strategy also includes targets and tracking of indicators including food security. Additionally, it showcases the poverty reduction efforts that have been announced in previous budgets, and discusses plans to create a National Advisory Council on Poverty with a mandate to both advise and report on the progress that the Government is making towards the yearly targets.

Areas of Strategic Focus and Critical Success Factors

The recommendations in this report support the following areas of strategic focus:

- Economic Prosperity:
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Chatham-Kent is recognized as a culturally vibrant, dynamic, and creative community
- Environmental Sustainability:
Chatham-Kent is a community that is environmentally sustainable and promotes stewardship of our natural resources

The recommendations in this report support the following critical success factors:

- Financial Sustainability:
The Corporation of the Municipality of Chatham-Kent is financially sustainable

- Open, Transparent and Effective Governance:
The Corporation of the Municipality of Chatham-Kent is open, transparent and effectively governed with efficient and bold, visionary leadership
- Has the potential to support all areas of strategic focus & critical success factors
- Neutral issues (does not support negatively or positively)

Consultation

The results from the Nutritious Food Basket will be shared with the Chatham-Kent community through agencies/groups such as the Chatham-Kent Food Policy Council, Food Link Chatham-Kent, Building Healthy Babies, and the Chatham-Kent Prosperity Roundtable. Public health dietitians will utilize the information to aid with program development and future evaluation, as well as supporting local food charity organizations as requested. The results will also be incorporated into various programs including the foods skills program and the Healthy Eating on a Budget Workshop.

Financial Implications

There are no financial impacts to the health unit budget as a result of the Nutritious Food Basket.

Councillor Myers moved, seconded by Mr. Carnahan that:

“The Chatham-Kent Nutritious Food Basket report be approved, and administration prepare correspondence as recommended.”

The Chair put the Motion.

Motion Carried

- c) Chatham-Kent Public Health Unit Risk Management Plan, prepared by Teresa Bendo

Recommendation

It is recommended that:

1. Chatham-Kent Public Health Unit Risk Management Plan be approved.

Background

Under the Good Governance and Management Practices Domain of the Ontario Public Health Standards: Requirements for Programs, Services and Accountabilities, boards of health are required to have a risk management plan.

The risk management plan calculates the overall risk exposure of each of the risks identified by the board of health based on the risk likelihood and impact; it also requires boards of health to report on key mitigation activities, implementation owner, and timing.

To demonstrate this accountability, the Ministry of Health and Long Term Care (MOHLTC) requires that boards of health submit a risk management plan that includes its high risk areas as part of their third quarter standards activity reporting. Chatham-Kent Public Health Unit (CKPHU) identified funding/ resource allocation and provincial policy decisions as areas which present high risk, such as: funding; changes in legislation, and; the new Standards.

Comments

At the October 2017 Board of Health meeting, the Board approved CKPHU's risk management plan with the following actions to be taken in 2017-19 to further mitigate risks to the organization.

The chart on page two of this report outlines the planned actions and the status of those actions.

| Risk Sub-section | Planned Actions | Timeline | Status of Actions |
|---|---|-----------------|--|
| Inadequate funding/ resource allocation | Implement annual program budget marginal analysis process Continue advocacy from Board of Health | 2017-ongoing | Complete- actions built into annually planning Program budget marginal analysis process implemented for 2018-19 budget and planned for 2019-20 budget |
| Organizational performance management framework | Continue planning and evaluation framework implementation Implement the new Service Plan | 2017-ongoing | Ongoing Framework developed. Integrated planning being piloted in Chronic Disease & Well-Being in 2019. |

| | | | |
|--|---|---------|---|
| | requirements of the MOHLTC in 2018 | | |
| Constructive/healthy labour relations environment | Continue regular meetings with unions, inform unions of issues that may impact their membership | Ongoing | Ongoing |
| Province's policy direction (Patients First/ Public Health transformation) | Continue communication to staff Actively participate on food safety and chronic disease protocol workgroups Provide feedback on revised protocols, guidelines, Expert Panel reports as requested Review the new Standards and reallocate staff to respond to those Standards | 2017-19 | Complete Communication to staff through various methods: presentation at staff meetings, emails, town halls, team meetings Participated in protocol workgroups Provided feedback on protocols, guidelines and reports as requested Reorganization of teams completed May 2018 |
| External Communications | Reallocate resources in order to have a greater focus on external communications/ promotions of public health programs and services and health and risk communications messaging | 2018 | Complete Community Outreach/ Public Relations position hired September 2018 |

A copy of the 2019-2022 risk assessment management plan can be found in Appendix 1.

The following chart details actions that will be taken in 2019-2021 to further mitigate risk to the organization.

| Risk Sub-section | Planned Actions | Timeline |
|---|--------------------------------|-----------------|
| Inadequate funding/ resource allocation | Continue mitigation strategies | Ongoing |

| | | |
|---|---|--------------|
| Organizational performance management framework | Continue planning and evaluation framework implementation Implement the Service Plan submission and reporting requirements of the MOHLTC in 2019 Implement organizational performance monitoring system to support the strategic plan | 2017-Ongoing |
| Constructive/healthy labour relations environment | Continue regular meetings with unions, inform unions of issues that may impact their membership | Ongoing |
| Information Management system | Implement an electronic health record | 2019-2021 |

Areas of Strategic Focus and Critical Success Factors

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Consultation

There was no consultation required in producing this report.

Financial Implications

There are no financial implications to this report.

Councillor Myers moved, seconded by Ms. Pfaff that:

“The Risk Management Plan be approved.”

The Chair put the Motion.

Motion Carried

B. Information Reports to be received

a) Director's Update for the Month of November 2018, prepared by Teresa Bendo

Background

The purpose of this report is to provide an overview of current events or issues arising at the Chatham-Kent Public Health Unit (CKPHU).

Comments

2018 Service Award Recipients

This year seven public health employees were honoured at the annual service awards ceremony on Nov 15:

- 30 years- Nicole Lund, Patti Nauta, Sandy Shadd
- 20 years- Karen Loney
- 15 years- Shelley Charbonneau, Carolyn Martin, Karen Frith

Congratulations to these employees for their ongoing service and commitment to CKPHU and the community.

Community Awareness/ Usage Study

With the CKPHU strategic plan identifying community engagement as a current priority, CKPHU contracted with Ipsos to implement a community survey among adults in Chatham-Kent in early November.

The results of this survey will provide a better understanding of familiarity, perceptions, awareness and satisfaction with the health unit and the programs and services offered. CKPHU will use the information to support planning efforts related to community engagement, communications, and public relations.

Technology Improvements- BORN/ISCIS

On September 10 a new system was launched for the Healthy Babies Healthy Children (HBHC) Postpartum Screening process. This new system, BORN/ISCIS, is a web-based program combining components of the hospital's Better Outcomes Registry and Network Information System (BORN) with components of the HBHC Integrated Services for Children Information System (ISCIS), allowing CKPHU to share information with Chatham-Kent Health Alliance for more accurate and efficient screening of postpartum mothers and babies.

November 29 Year-End Staff Celebration

Board members are invited to CKPHU's year-end staff meeting and celebration of 2018 accomplishments. Breakfast will be available between 9:00-10:00 a.m. at the WISH Centre at 177 King St E., followed by the staff meeting.

International Plowing Match 2018

During the International Plowing Match held in Pain Court, ON in September the Healthy Environments team conducted inspections throughout the course of the event. On-site inspections were completed each day. Over the course of 8 days, more than 35 vendors were inspected, over 170 inspections were conducted, and other on-site consultations and safety assessments were completed.

Public health inspectors were also present to monitor food safety during the Guinness Book of World Records successful attempt to make the world's largest Caesar drink.

Consultation

There was no consultation involved in producing this information report.

Financial Implications

There are no financial implications with this information report.

- b) Q3 2018 Standards Activity Report as of September 30, 2018, prepared by Teresa Bendo

Background

The Board of Health is required to provide quarterly financial reports to the Ministry in accordance with direction provided in writing from the Province to comply with Schedule C of the Accountability Amending Agreement No. 7 for the 2018-19 funding year.

Comments

A copy of the Q3 Standards Activity Report is attached as Appendix 1.

On March 1, 2018, the Chatham-Kent Public Health Unit (CKPHU) submitted a base budget with no increase as directed by the Province. On May 4, 2018, CKPHU received notice of a \$113,000 base budget increase from the Province.

CKPHU anticipates a favourable variance of 1% in mandatory programs due to unanticipated staffing vacancies. CKPHU expects to fully spend the approved one-time funding budget.

In addition, CKPHU submitted one in-year request of \$33,000 in order to fund the distribution of potassium iodide (KI) tablets to parts of Chatham-Kent as part of the emergency preparedness program.

Financial Implications

There are no additional financial implications with this report.

Councillor B. McGregor moved, seconded by Councillor Myers that:

“The two information reports be received.”

The Chair put the Motion.

Motion Carried

C) Items to be Received and Filed

Mr. Carnahan moved, seconded by Councillor B. McGregor:

“That items a) to g) be received and filed.”

- a) Memo from Roselle Martino dated October 1, 2018 regarding the Child Visual Health and Vision Screening Protocol 2018
- b) Association of Local Public Health Agencies (alPHa) update to Board of Health members
- c) Letter from Peterborough Public Health to Legalization of Cannabis Secretariat regarding Regulatory Framework for Cannabis Storefronts in Ontario
- d) Letter from Southwestern Public Health Unit to Premier Doug Ford regarding increase in actions in response to opioid crisis
- e) Letter from Peterborough Public Health to Christine Elliott regarding Strengthening the Smoke-Free Ontario Act (2017) to Address the Promotion of Vaping

- f) Letter from Peterborough Public Health to Christine Elliott regarding Sustainable Infrastructure and Financial Supports for Local Drug Strategies
- g) Hastings Prince Edward Public Health Unit 2019-2023 Strategic Plan

The Chair put the motion.

Motion Carried

9. Non-Agenda Items- None

The Chair recognized and thanked Councillor Myers for his time on the Board of Health, and wished him well for the future.

10. Motions of Closed Session

Dr. Rietdyk reported that information was received by the Board from Administration regarding an identifiable person, either a municipal or board employee.

Councillor B. McGregor moved, seconded by Councillor C. McGregor that:

“The verbal report provided by Dr. Rietdyk be received as information.”

The Chair put the Motion.

Motion Carried

11. Time, Date and Place for the Next Meeting of the Board

The next meeting of the Board will be held Wednesday, December 19, 2018 at the Health and Family Services building, 435 Grand Ave. W., Chatham, with the open portion of the meeting to start at 11:00 a.m.

12. Adjournment

Moved by Ms. Pfaff that the meeting be adjourned at 11:38 am.

Joe Faas, Chair

¹ Sharon I. Kirkpatrick* and Valerie Tarasuk. Food Insecurity Is Associated with Nutrient Inadequacies among Canadian Adults and Adolescents. J Nutr. 2008. Retrieved from <http://jn.nutrition.org/content/138/3/604.full>

ⁱⁱ Tarasuk, V, Mitchhell, A, Dachner, N. (2014). Household food insecurity in Canada, 2012. Toronto: Research to identify policy options to reduce food insecurity (PROOF). Retrieved from <http://nutritionalsciences.lamp.utoronto.ca>