

BOARD OF HEALTH MEETING

Wednesday, March 1, 2023 9:30 a.m. - 11:30 a.m. In-Person

PLEASE NOTE:

There will be a Closed Session at the beginning of the meeting.

To ensure a quorum we ask that you please RSVP (Regrets Only) to clovell@hpeph.ca or 613-966-5500, Ext 231

Hastings Prince Edward Public Health

2019 - 2023 Strategic Plan

Our Vision

Healthy Communities, **Healthy People.**

Our Mission

Together with our communities. we help people become as healthy as they can be.

Our Values Show We CARE









Collaboration Advocacy Respect

Excellence

Our Strategic Priorities



Community **Engagement**



Staff **Engagement** and Culture



Population Health Assessment and Surveillance



Program Standards



Promotion



HASTINGS PRINCE EDWARD Public Health

BOARD OF HEALTH MEETING AGENDA

Wednesday, March 1, 2023 9:30 to 11:30 a.m. In-Person Meeting

- 1. CALL TO ORDER
- 2. LAND ACKNOWLEDGMENT (Board Chair to speak full version)

Hastings Prince Edward Public Health is situated and provides services on the traditional territory of the Anishinaabe, Huron-Wendat and Haudenosaunee people.

- 3. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF
- 4. APPROVAL OF THE AGENDA
- 5. CLOSED SESSION

THAT the Board of Health convene in closed session for the purpose of a discussion as it relates to Section 239(2) of the Municipal Act, and more specifically,

- (b) personal matters about an identifiable individual, including municipal or local board employees,
- (d) labour relations or employee negotiations; and
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board.
- 6. MOTIONS ARISING FROM CLOSED SESSION
- 7. APPROVAL OF THE MINUTES OF THE PREVIOUS BOARD MEETING
 - 7.1 Meeting Minutes of Wednesday, February 1, 2023

Schedule 7.1

- 8. BUSINESS ARISING FROM THE MINUTES
- 9. **DEPUTATIONS None**
- 10. COMMITTEE REPORTS

0.1 Finance Committee Report

10.1.1 2022 Fourth Quarter Revenues & Expenses

10.1.2 Status of GIC Investments

Schedule 10.1.1 Schedule 10.1.2

11. REPORT OF THE MEDICAL OFFICER OF HEALTH

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| 12.1 | 2022 AODA Annual Report | Schedule 12.1 |
|--------|---|-----------------|
| 12.2.0 | 2022 Occupational Health and Safety Report | Schedule 12.2.0 |
| 12.2.1 | 2022 Health and Safety Policy Statement | Schedule 12.2.1 |
| 12.2.2 | 2022 Violence and Harassment in the Workplace | |
| | Policy Statement | Schedule 12.2.2 |
| 12.3 | 2022 Privacy Report | Schedule 12.3 |
| 12.4 | 2022 Enforcement Report | Schedule 12.4 |
| 12.5 | Healthy Families Update | Schedule 12.5 |

13. CORRESPONDENCE AND COMMUNICATIONS

14. **NEW BUSINESS**

15. **INFORMATION ITEMS** (Available for viewing online at hep-ublicHealth.ca)
Schedule 15.0

16. DATE OF NEXT MEETING - Wednesday, May 3, 2023 at 9:30 a.m.

17. ADJOURNMENT



BOARD OF HEALTH MEETING MINUTES

Wednesday, February 1, 2023 Hastings Prince Edward Public Health (HPEPH)

Present: Dr. Jeffrey Allin, Provincial Appointee

Mr. David McCue, Councillor, City of Quinte West

Dr. Craig Ervine, Provincial Appointee

Mr. John Hirsch, Councillor, Prince Edward County

Mr. Sean Kelly, Councillor, City of Belleville

Mr. Michael Kotsovos, Councillor, City of Quinte West

Ms. Jan O'Neill, Mayor, Municipality of Marmora and Lake, County of Hastings

Mr. Garnet Thompson, Councillor, City of Belleville

Regrets: Mr. Paul Carr, Councillor, City of Belleville

Ms. Kimberly Carson, Mayor, Limerick Township, Hastings County

Kate MacNaughton, Councillor, Prince Edward County

Also Present: Dr. Ethan Toumishey, Acting Medical Officer of Health

Ms. Shelly Brown, Director of Community Programs Mr. David Johnston, Director of Corporate Services Ms. Nancy McGeachy, Director of Clinical Programs

Ms. Catherine Lovell, Executive Assistant

1. CALL TO ORDER

Dr. Toumishey called the meeting to order at 9:30 a.m.

2. LAND ACKNOWLEDGMENT - Spoken by Dr. Toumishey

Dr. Toumishey acknowledged Councillor Terry Cassidy's dedication and deep commitment to his service to the Board of Health. Councillor Cassidy will be remembered by all who had the great fortune to be championed by him and worked alongside him.

3. DISCLOSURE OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

There was no disclosure of pecuniary interest.

4. ELECTION OF THE CHAIR AND VICE CHAIR

Dr. Toumishey called for nominations for the position of Chair. Councillor Kotsovos was nominated by Councillor McCue and Mayor O'Neill was nominated by Dr. Craig Ervine. Both nominees confirmed they would stand for the nomination. A vote was taken by ballot with Mayor Jan O'Neill being elected as Chair of the Board.

Chair O'Neill assumed her position as Chair and called for nominations for the position of Vice Chair. Councillor Kelly was nominated by Councillor Thompson and Councillor Kotsovos was nominated by Councillor McCue, with both nominees agreeing to stand for the nomination. A ballot was taken whereby Councillor Kotsovos was elected to the position of Vice Chair of the Board.

5. APPOINTMENT OF COMMITTEE MEMBERS AND CHAIRS

Chair O'Neill reminded the members that as per the terms of reference for the Board of Health Committees that a municipal representative from each of the municipalities was required on both the Governance and the Finance Committees.

Chair O'Neill gave each of the Board members the opportunity to select the Committee they would like to sit on. The results of which are as follows:

Finance Committee

Governance Committee

Kimberly Carson Dr. Jeffrey Allin

Dr. Craig Ervine Sean Kelly

John Hirsch Kate MacNaughton

Michael Kotsovos David McCue

Garnet Thompson Jan O'Neill

Due to the absence of three (3) members, the election of Committee Chairs will be deferred to the first meeting of each Committee.

6. APPROVAL OF THE AGENDA

THAT the agenda for the Board of Health (Board) meeting on Wednesday, February 1, 2023 be approved as circulated.

MOTION:

Moved by: Craig Seconded by: Garnet

CARRIED

7. APPROVAL OF MINUTES OF PREVIOUS BOARD MEETING

THAT the minutes of the regular meeting of the Board held on November 2, 2022 be approved as circulated.

MOTION:

Moved by: Michael Seconded by: Craig

CARRIED

- 8. BUSINESS ARISING FROM MINUTES None
- 9. **DEPUTATIONS** None

10. COMMITTEE REPORTS - None

11. REPORT OF THE MEDICAL OFFICER OF HEALTH

THAT the report of the Medical Officer of Health be received as presented.

MOTION

Moved by: Sean Seconded by: David

CARRIED

- Respiratory Illness Season Dr. Toumishey reported we are seeing a decline in respiratory syncytial virus (RSV), flu and COVID-19 activity in our region and throughout the province. Paxlovid, an oral anti-viral treatment used to reduce severe outcomes from COVID-19 is now easier to access, prescriptions are available free of charge to eligible individuals through pharmacies across the province, from physicians or nurse practitioners, as well as clinical assessment centres.
- Immunization for School Pupils Act The Health Unit is in the process of updating vaccination records for local school-aged children and youth. As part of this process, approximately 7,500 letters have been sent home to students in Hastings and Prince Edward Counties whose vaccination record is out of date. The Health Unit is providing clinics at high schools for students in grades 8 to 12 and other special clinics in the community to aid parents in getting their children vaccinated.
- Sexual and Reproductive Health Awareness Week A yearly campaign designed to raise
 awareness about sexual and reproductive health, as well as promote resources to improve
 community health in Canada that runs from February 13 to 17, 2023 with the theme of Get the
 Facts and Get Tested.
- Food for You:Food for Two This program has been discontinued in favour of implementing the Nurse-Family Partnership program. This is an evidence-based, nurse home visitation program that improves the health, well-being and self-sufficiency of low-income, first-time parents and their children. This new program will remove transportation barriers, improve access to programs for high-risk prenatal clients throughout our regions and provide significant positive client outcomes.

12. STAFF REPORTS - None

13. CORRESPONDENCE AND COMMUNICATIONS - None

14. NEW BUSINESS

14.1 By-Law 2023-01 - Authorization for Borrowing up to \$1,000,000

MOTION

Moved by: Michael Seconded by: David

CARRIED

THAT the Board of Health approve the annual borrowing by-law of up \$1,000,000.

14.2 Proposed 2023 Board of Health Meeting Schedule

MOTION

Moved by: John Seconded by: Michael

CARRIED

THAT the 2023 Board of Health meeting schedule be approved as circulated.

15. INFORMATION ITEMS

THAT the Board of Health receive the information items as circulated.

MOTION

Moved by: Sean Seconded by: David

CARRIED

Chair O'Neill drew the Board's attention to the information items listed within the agenda and found on the Public Health website.

16. DATE OF NEXT MEETING - Wednesday, March 1, 2023 at 9:30 a.m.

17.ADJOURNMENT

MOTION:

Moved by: Sean Seconded by: David

CARRIED

THAT this meeting of the Board be adjourned at 9:58 a.m.

Chair O'Neill reminded members there would be a short break and then the orientation session will commence.

| Jan O'Neill, Boa | rd of Health Chair |
|------------------|----------------------|
| Approved at | , 2023 Board Meeting |



| To: | Hastings Prince Edward Board of Health |
|--------------------------------|---|
| Prepared by: | David Johnston, Director of Corporate Services |
| Reviewed by: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |
| Date: | Wednesday, March 1, 2023 |
| Subject: | 2022 Fourth Quarter Revenues & Expenses |
| Nature of Board Engagement: | ☐ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | Review and approve receipt of the fourth quarter revenues and expenses as presented. |
| Comments: | The following notes are provided to assist in the review of the attached Summary of Revenues & Expenses for the period from January 1 to December 31, 2022. • Within the Accountability Agreement reporting, we have separated costs to provide information related to ongoing |
| | mandatory programs and the Ontario Seniors Dental Care Program (OSDCP). |
| | Overall, as of December 31, we are within budget for revenues. |
| | The OSDCP has a small variance as of December 31. There was some overspending to accommodate the significant need in our community. However, the Ministry of Health is committed to funding this important initiative and we fully anticipate additional funding will be available for this program. |
| | • The variance in Ministry of Health annual and one-time grants relates to the flow of funds for the COVID-19 Vaccine program, versus actual expenses. This column includes funding for eight School-focused Nurses, the MOH Compensation grant, extraordinary costs associated with COVID-19 and funding for the Temporary Retention Initiative for Nurses. As of February 16, we are awaiting approval of the MOH Compensation grant. Allocations were made based on assumptions. |
| | The variance in Healthy Babies Healthy Children is a timing issue. This is an April to March fiscal year and revenues include the carry forward of funds from December 2021 in addition to 2022 funding. A portion of the funds will carry forward into 2023. |
| | • The variance in Federal Grants is also a timing issue. This is an April to March fiscal year and revenues include the carry forward of funds from December 2021 in addition to 2022 funding. The decision was made to end the Canada Prenatal Nutrition Program in December 2022, resulting in a repayable of unspent funds of \$66,713. |
| | Staff departures, vacancies and recruitment challenges resulted in a 7% variance in Salaries and Wages as of December 31, plus associated savings in Staff Benefits. |

- Travel Expenses are well under expectation. Staff redeployment to COVID-19 tasks, remote work and changes in our approach to service delivery for some programs are the rationale for this variance.
- Office Expenses, Printing, Postage continue to remain low due to changes in program work (e.g. fewer mailings, promotional materials and handouts, etc.)
- The increase to Professional & Purchased Services represent significant growth in OSDCP demand.

Summary of Revenues & Expenses for the period January 1 - December 31, 2022 For Board of Health Review - March 1, 2023 HASTINGS PRINCE EDWARD PUBLIC HEALTH

| | | 441001130,0040:010 | | | | | | | | |
|---|-----------------------|--------------------------------|-----------------------------------|--|----------------------------|---------------------------------|-----------------------|-----------------------------------|------------------------|---|
| | Accou | Accountability Agreement | ement | Other (| Other Grants and Contracts | ıtracts | | Totals and Budget Analysis | dget Analysis | |
| | Mandatory Programs | 100% Seniors Dental Program | TOTAL Ministry of Health Programs | Ministry of Health Annual and one time Grants | HBHC (April-March) | Federal Grants (April-March) | YEAR TO DATE TOTAL | ANNUAL BUDGET | YTD Budget Variance | YTD Actuals as % of budget (12/12 = 100%) |
| REVENUES | | | | | | | | | | |
| Ministry of Health Mandatory and 100% Programs | 9,276,492 | 1,117,978 | 10,394,470 | | | | 10,394,470 | 10,136,000 | (258,470) | 103% |
| Ministry of Health Annual and one time grants | | | 0 | 2,125,192 | | | 2,125,192 | 2,143,400 | 18,208 | %66 |
| Ministry of Health Mitigation Funding | 1,120,000 | | 1,120,000 | | | | 1,120,000 | 1,120,000 | 0 | 100% |
| Municipal Levies | 3,491,385 | | 3,491,385 | | | | 3,491,385 | 3,491,385 | 0 | 100% |
| Ministry of Children, Community & Social Services | | | 0 | | 1,136,135 | | 1,136,135 | 1,160,543 | 24,408 | %86 |
| Federal Grants | | | 0 | | | 185,676 | 185,676 | 128,988 | (56,688) | 144% |
| Expenditure Recoveries | 143,354 | 3,620 | 146,974 | | | | 146,974 | 138,700 | (8,274) | 106% |
| Transfer from Reserves | | | 0 | | | | 0 | 300,000 | 300,000 | %0 |
| Total Revenues | 14,031,231 | 1,121,598 | 15,152,829 | 2,125,192 | 1,136,135 | 185,676 | 18,599,833 | 18,619,016 | 19,183 | 100% |
| EXPENSES | | | | | | | | | | |
| Salaries and Wages | 8,590,528 | 286,636 | 8,877,164 | 1,322,494 | 821,754 | 90,437 | 11,111,849 | 11,895,016 | 783,167 | 93% |
| Staff Benefits | 2,270,325 | 77,392 | 2,347,717 | 313,426 | 216,354 | 11,339 | 2,888,836 | 3,210,000 | 321,164 | %06 |
| Staff Training | 154,542 | 121 | 154,663 | | 585 | | 155,248 | 159,000 | 3,752 | %86 |
| Travel Expenses | 97,338 | | 97,338 | 4,088 | 13,202 | 854 | 115,481 | 178,000 | 62,519 | %59 |
| Building Occupancy | 986,575 | 32,282 | 1,018,857 | | 67,500 | | 1,086,357 | 1,041,000 | (45,357) | 104% |
| Office Expenses, Printing, Postage | 27,866 | | 27,866 | 29,000 | 1,580 | | 58,446 | 75,000 | 16,554 | 78% |
| Materials, Supplies | 342,191 | 65,615 | 407,806 | | 4,399 | 4,818 | 417,022 | 442,000 | 24,978 | 94% |
| Professional & Purchased Services | 266,255 | 654,535 | 920,790 | | 2,200 | | 922,990 | 771,000 | (151,990) | 120% |
| Communications Costs | 115,320 | 3,500 | 118,820 | | 10,750 | | 129,570 | 139,000 | 9,430 | 886 |
| Information Technology | 248,331 | 27,840 | 276,171 | | 24,950 | | 301,121 | 374,000 | 72,879 | 81% |
| Capital Expenditures | 304,608 | | 304,608 | | | | 304,608 | 335,000 | 30,392 | 91% |
| Transfer to Capital/Operating Reserves | 627,352 | | 627,352 | | | | 627,352 | 0 | (627,352) | |
| Total Expenses | 14,031,231 | 1,147,922 | 15,179,153 | 1,669,008 | 1,163,273 | 107,447 | 18,118,880 | 18,619,016 | 500,136 | 826 |
| VARIANCE | (0) | (26,324) | (26,324) | 456,184 | (27,138) | 78,230 | 480,952 | 0 | 480,952 | |
| | | | | | | | | | | |



| То: | Hastings Prince Edward Board of Health |
|-------------------------------|---|
| Prepared by: | Amy Rankin, Finance Manager |
| Reviewed by: | David Johnston, Director of Corporate Services |
| Date: | Wednesday, March 1, 2023 |
| Subject: | Status of GIC Investment |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | No action required. |
| Background: | In June of 2022, the Health Unit invested \$2,307,481 of the Capital Reserve into a 1-year Guaranteed Investment Certificate (GIC) at a return rate of 4.25%. In addition, \$1,783,536 of the Operating Reserve was invested into a 1-year flexible GIC at a rate of 2.7%. While the flexible GIC has a lower rate of return, it allowed us the opportunity to liquidate the flexible GIC after 30 days if required for operations or, to reinvest and take advantage of higher interest rates. In September of 2022 as interest rates increased, the Operating Reserve GIC was redeemed and reinvested into a flexible GIC. The combined principal and interest of \$1,796,202 was reinvested into a 1-year flexible variable rate GIC. Again, this approach enabled us to quickly take advantage of rising interest rates. From September 26 to December 31, we saw rates from 4.2% to 5.2%. At December 31, interest earned on the two GIC investments is estimated to be a total of \$73,845. |
| Approved by: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |



| То: | Hastings Prince Edward Board of Health |
|-------------------------------|---|
| Prepared by: | Becky Stone, Chair, AODA Committee |
| Approved by: | Shelly Brown, Director of Community Programs |
| Date: | Wednesday, March 1, 2023 |
| Subject: | AODA Committee 2022 Year End Report |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☑ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | The attached report is presented for information purposes for the Board of Health regarding compliance with AODA. No action is required. |
| Background: | The Accessibility for Ontarians with Disabilities Act (AODA) sets out a process for developing and enforcing accessibility standards. The goal of the AODA and the Standards is to make the province accessible for all Ontarians with physical and mental disabilities by 2025. The purpose of the AODA Committee is to ensure compliance with the requirements of the AODA. The Committee works to identify, remove and prevent barriers to people with disabilities who work at or use the services of Hastings Prince Edward Public Health. The attached report outlines accomplishments and progress of the Committee towards the achievement of the accessibility plan during 2022. |
| Reviewed By: | Dr. Ethan Toumishey, Medical Officer of Health & CEO |



AODA Committee 2022 Year End Report



Background

In 2005, the Ontario Government passed the <u>Accessibility for Ontarians with Disabilities Act (AODA)</u> to make Ontario accessible by 2025. The AODA establishes standards related to accessibility that applies to both the public and private sector. These standards are intended to identify, remove and prevent barriers so that people with disabilities have more opportunities to participate in everyday life. The AODA stresses the primary principles of dignity, independence, integration and equality of opportunity in the review, development and implementation of all standards.

The <u>Accessibility Standards for Customer Service</u>, <u>Ontario Regulation 429/07</u> became law in January 2009. This Regulation established accessibility standards related to customer service. On July 1, 2011, the province of Ontario released the <u>Integrated Accessibility Standards</u>, <u>Ontario Regulation 191/11</u>. The <u>Integrated Regulation</u> includes general requirements such as policy development, planning, and training, with compliancy dates phased between 2012 and 2025. Compliance with standards is required in organizational areas that affect people with disabilities, including information and communications, employment, procurement, training, self-service kiosks, building accessibility, transportation, and general service policies and procedures. The development of a multi-year plan to meet these standards is a key component of the regulations.

The goal of the AODA and the Standards is to make the province accessible for all Ontarians with physical and mental disabilities by 2025.

Purpose of Report

The objective of the 2022 Year End report is to provide an overview of the progress and measures taken by Hastings Prince Edward Public Health (HPEPH) to improve accessibility. This report provides an update on the implementation of the Accessibility for Ontarians with Disabilities Act (AODA) Work plan 2022-2025.



2022 Work Plan Activities

In 2022, the AODA Committee met 3 times to carry out activities identified in the AODA Multi-Year Workplan. The following activities/actions were taken:

I. Accessible Customer Service

HPEPH is committed to providing accessible customer service to people with disabilities. This means that we will provide goods and services to people with disabilities with equitable high quality and timeliness as all other clients. Examples of this work are demonstrated by:

- Updating Service Cancellation and Office Closure Checklist to align with the Service Disruption Notice Policy. Changes included linking the policy to the checklist for easy review, and added direction for the Director of Corporate Services (or designate) and Program Managers to arrange to post a service disruption notice.
- Providing accessible services for all clients attending HPEPH led COVID-19 clinics.

II. Accessible Information and Communications

HPEPH is committed to making our information and communications accessible to people with disabilities. This is demonstrated by the following:

- Ongoing use of AODA knowledge in the development of communications and resources.
- HPEPH responded to 2 formal requests for information to be provided in an alternate format.



III. Accessibility Training

HPEPH is committed to providing training in the requirements of Ontario's accessibility laws and the Ontario Human Rights Code as it applies to people with disabilities. This is demonstrated by:

- Completing required AODA refresher training every 3 years.
- Communicating updated resources regarding the provision of services to people with disabilities such as the Service Cancellation and Office Closure Checklist

IV. Design of Public Spaces

HPEPH will meet accessibility laws when building or making major changes to public spaces.

HPEPH has procedures in place to prevent service disruptions to the accessible parts of our building and public spaces. The following preventative actions were taken:

- Inspection of all Accessible Elements was completed in March 2022 by the Building Maintenance Operator with no outstanding issues brought forward.
- Installing handrail in clinical area.

We are committed to providing accessible publications, programs and services to all. For assistance please call 613-966-5500; TTY: 711 or email accessibility@hpeph.ca. For more information, please visit www.hpePublicHealth.ca.



| То: | Hastings Prince Edward Board of Health |
|-------------------------------|---|
| Prepared by: | Shirley Davis and Sandy Stevenson, Co-Chairs Joint Health & Safety Committee |
| Approved by: | David Johnston, Director of Corporate Services |
| Date: | Wednesday, March 1, 2023 |
| Subject: | Occupational Health and Safety Report 2022 |
| Nature of Board Engagement | ☐ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | Request the Board of Health accept the 2022 Health and Safety Report including endorsement of the organizational Health and Safety and Workplace & Harassment Policy Statements. |
| Background: | As per the Public Health Accountability Framework, "the board of health shall comply with all legal and statutory requirements". The purpose of this report is to assure the Board of Health that Hastings Prince Edward Public Health (HPEPH) strives to be compliant with the Occupational Health and Safety Act (OHSA). |
| | HPEPH is committed to working co-operatively with unionized staff to organize and conduct a joint health and safety committee in accordance with the OHSA. The committee is dedicated to maintaining and improving standards of health and safety throughout HPEPH in order to prevent accident, injury and illness, and to promote overall employee safety. |
| | Key Activities in 2022 Held 5 regular meetings Earlier meetings were held through a combination of in-person and virtual due to COVID. Completed 16 HPEPH workplace inspections accompanied by Management. (Out of compliance as 2 inspections were missed) Reviewed Workplace Inspection Reports and followed up as needed. Reviewed 7 Incident Reports and followed up as needed: 1 Unsafe Material Handling 1 Slips, Trips and Falls 5 Other Evacuation plan updated: mandatory review by all staff – September 30, 2022 training provided to Wardens and Supervisors – October 3, 2022 evacuation drill - December 7, 2022 Fire Plan updated – November 10, 2022 |

| | Three (3) staff completed their Part 1 JHSC certification training and 1 completed their Part 2 JHSC certification training One (1) staff completed their Emergency First Aid Training/Certification Various H&S articles were included in the staff One Voice newsletter |
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| Reviewed By: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |



| То: | Hastings Prince Edward Board of Health |
|-------------------------------|---|
| Prepared by: | Cindy Tindal, Manager, HR & OD & Denise Hughes, HR Generalist |
| Approved by: | David Johnston, Director of Corporate Services |
| Date: | Wednesday, March 1, 2023 |
| Subject: | Health & Safety Policy Statement Update |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☑ Board approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | Board of Health to approve the motion set out below: THAT the Board of Health approve the updated Health & Safety Policy Statement. |
| Background: | A review of the current March 2, 2022 version of the H&S Statement was completed. The review consisted of a comparison against ISO 45001:2018 Health and Safety Audit requirements as well as legislated requirements set out in the Occupational Health and Safety Act. |
| | The following elements were found to be missing: Added the word "Policy" to the title H&S objectives statement Continuous Improvement statement Consultation and Participation of workers statement Specific expectations of Employees Expectations of Contractors (temporary workers or actual contractors) |
| Key Considerations | The following statements are to be added: POLICY: ✓ The prevention of all injuries, occupational illnesses and accidents by taking every reasonable effort to eliminate hazardous conditions and practices, reduce OH&S Risks and to continually improve in Occupational Health & Safety Management and performance by setting and reviewing Occupational Health & Safety Objectives and providing the resources for the maintenance of a safe and healthy work environment. ✓ Ensuring the Occupational Health & Safety Management System is implemented with full co-operation from all parties which will include consultation and participation of workers. PROCEDURE: • All employees need to accept personal responsibility to follow safety rules |
| | and guidelines and to plan and conduct their work safely and extend their concern for personal safety and health to fellow employees. Employees will report all unsafe and unhealthy conditions to a Manager or a member of the |

| | Health & Safety Committee. Employees who fail to comply with the Occupational Health & Safety Act and Regulations or any company Health & Safety rules, policies, procedures, or programs will be subject to discipline up to and including termination. All Contractors will accept responsibility to meet or exceed HPEPH's Health & Safety Program requirements. Contractors who fail to comply with the Occupational Health & Safety Act and Regulations or any HPEPH Health & Safety rules, policies, procedures, or programs, will be subject to contract |
|--------------|--|
| | cancellation or any other remedy as determined at the HPEPH's discretion |
| Reviewed By: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |

HASTINGS PRINCE EDWARD PUBLIC HEALTH POLICIES AND PROCEDURES

Section: HEALTH AND SAFETY Sub-Section: Corporate Statements

Policy Title: Health and Safety Policy Statement
Approved by: Hastings Prince Edward Board of Health

Date: March 1, 2023

PURPOSE:

To provide a safe and healthy workplace and ensure compliance with the Occupational Health and Safety Act.

POLICY:

Hastings Prince Edward Public Health (HPEPH) is committed to:

- ✓ A safe, clean and healthy work environment which is appropriate to the purpose, size and the context of the Organization.
- ✓ The prevention of all injuries, occupational illnesses and accidents by taking every reasonable effort to eliminate hazardous conditions and practices, reduce OH&S Risks and to continually improve in Occupational Health & Safety Management and performance by setting and reviewing Occupational Health & Safety Objectives and providing the resources for the maintenance of a safe and healthy work environment.
- ✓ Ensuring the Occupational Health & Safety Management System is implemented with full co-operation from all parties which will include consultation and participation of workers.
- Comply with all applicable legal requirements and any other requirements to which the organization subscribes that relate to Occupational Health & Safety hazards.

PROCEDURE:

Managers are responsible for training their employees and contractors in approved work methods, health and safety rules, policies, procedures, and programs and for notifying them of the existence of all known or reasonably foreseeable health and safety hazards. Managers are responsible for ensuring that all employees and contractors work in compliance with the Occupational Health & Safety Act and Regulations.

All employees need to accept personal responsibility to follow safety rules and guidelines and to plan and conduct their work safely and extend their concern for personal safety and health to fellow employees. Employees will report all unsafe and unhealthy conditions to a Manager or a member of the Health & Safety Committee. Employees who fail to comply with the Occupational Health & Safety Act and Regulations or any company Health & Safety rules, policies, procedures, or programs will be subject to discipline up to and including termination.

All Contractors will accept responsibility to meet or exceed HPEPH's Health & Safety Program requirements. Contractors who fail to comply with the Occupational Health & Safety Act and Regulations or any HPEPH Health & Safety rules, policies, procedures, or programs, will be subject to contract cancellation or any other remedy as determined at the HPEPH's discretion.

APPLICABILITY:

This policy applies to all employees, students, volunteers, visitors, and contractors to HPEPH. This policy will be reviewed, signed, and dated annually.

LEGISLATION:

Procedures and decisions related to this policy shall comply with the Occupational Health and Safety Act, Workplace Safety and Insurance Act and other relevant laws and regulations regarding health and safety.

| Reviewed and Approved by: | |
|------------------------------------|-----------|
| | |
| Jan O'Neill, Board of Health Chair | Date: |



Briefing Note for Board of Health

| То: | Hastings Prince Edward Board of Health | |
|---------------------------------|--|--|
| Prepared by: | Cindy Tindal, Manager, HR & OD & Denise Hughes, HR Generalist | |
| Approved by: | David Johnston, Director of Corporate Services | |
| Date: | Wednesday, March 1, 2023 | |
| Subject: | Workplace Violence & Harassment Policy Statement Update | |
| Nature of Board Engagement: | ☑ For Information ☐ Strategic Discussion ☑ Board Approval and motion required ☐ Compliance with Accountability Framework ☐ Compliance with Program Standards | |
| Action Required: | Board of Health to approve the motion set out below: THAT the Board of Health approve the updated Workplace Violence & Harassment Policy Statement. | |
| Background and Current Status: | A review of the current March 2, 2022 version of the Violence Statement was completed as well as the requirements for a Workplace Harassment Policy. The review consisted of a comparison against ISO 45001:2018 Health and Safety Audit requirements as well as legislated requirements set out in the Occupational Health and Safety Act (OHSA). The following elements were found to be missing: No formal Harassment Statement Outdated definition of violence No definition of harassment Referenced a "violence coordinator" – not in place Did not include domestic violence | |
| Key Considerations and Options: | The Violence Statement has been updated in the Workplace Violence and Harassment Policy. Definitions have been added (harassment, sexual harassment, discrimination) and updated (violence) as per the OHSA. Descriptions of workplace harassment has been added. Removed reference to a Workplace Violence Coordinator Added reference to domestic violence reporting requirements. Updated statements for Board of Health approval. | |
| Reviewed by: | Dr. Ethan Toumishey, Medical Officer of Health and CEO | |

HASTINGS PRINCE EDWARD PUBLIC HEALTH POLICIES AND PROCEDURES

Section: HEALTH AND SAFETY
Sub Section: Corporate Statements

Policy Title: Workplace Violence & Harassment Policy Statement

Approved By: Hastings Prince Edward Board of Health

Date: March 1, 2023

In accordance with the Occupational Health and Safety Act, and the Ontario Human Rights Code, the management of Hastings Prince Edward Public Health (HPEPH) is committed to protecting staff from abusive or violent behaviour and will take all reasonable precautions to prevent violence and protect employees from acts of violence in the workplace.

HPEPH is also committed to providing a fair and equitable work environment where all individuals are treated with respect and dignity. This policy will confirm that violence, harassment, and discrimination will not be tolerated in the workplace.

Workplace violence means:

- the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker; and
- an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker; and
- a statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.

Workplace harassment means:

- engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome; or
- · workplace sexual harassment.

Workplace sexual harassment means:

- engaging in a course of vexatious comment or conduct against a worker in a workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome; or
- making a sexual solicitation or advance where the person making the solicitation or advance is in a
 position to confer, grant or deny a benefit or advancement to the worker and the person knows or
 ought reasonably to know that the solicitation or advance is unwelcome.

Discrimination is the act of treating someone differently, by denying a benefit or imposing additional or unfair burdens upon them on the basis of certain personal characteristics protected by law.

Workplace harassment typically takes place more than once over a period of time, with the intent of embarrassing, offending or humiliating someone. Harassment may include such behaviour as name-calling; making inappropriate jokes or remarks that demean, ridicule or intimidate; stereotyping based on someone's personal characteristics or background; displaying or circulating offensive pictures or material; workplace bullying; offensive or intimidating phone calls or emails; inappropriate sexual touching, advances, suggestions or requests; as well as other forms of offensive and insulting behaviour.

Workplace harassment may include incidents that occur beyond the normal workplace. For example, comments posted on social media or other unwelcome behaviour towards co-workers outside of working hours may constitute workplace harassment.

Workplace harassment and discrimination often take place based on certain personal characteristics protected by law, including without limitation: race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status, or disability.

As per the Workplace Violence and Risk Assessment and Anti-Discrimination Anti-Harassment Procedures:

 Management will provide training about workplace violence prevention to all staff, and conduct workplace hazard assessments.

HASTINGS PRINCE EDWARD PUBLIC HEALTH POLICIES AND PROCEDURES

| Section: | HEALTH AND SAFETY |
|--------------|----------------------|
| Sub-Section: | Corporate Statements |

Policy Title: Workplace Violence & Harassment Policy Statement

- Where events are escalating or appear to have the potential to become violent, staff are expected to take any reasonable actions to diffuse, avoid or remove themselves from potential harm.
- In threatening or violent situations staff should call the authorities (e.g. police or EMS) for immediate help first and contact his or her manager after the immediate situation is resolved.
- When past abuse or violent behaviours are a risk factor, staff will be informed as required and the manager will take reasonable precautions or make changes to the service delivery to protect staff.

When harassing, discriminatory, threatening or violent events occur, staff shall inform their Manager as soon as possible.

Upon notification, HPEPH management will:

- take immediate action as needed and reasonable to protect staff.
- investigate, report and deal with incidents of workplace violence or harassment in a timely manner. The
 complainant and alleged offender shall be treated fairly while preserving the dignity and self-respect of
 all persons involved.
- maintain information confidential to the degree it does not interfere with the investigation.

This includes issues of domestic violence. To the extent that a worker is being subjected to domestic violence, and believes that a spouse or partner may pose a risk to them in the workplace, the worker is encouraged to report those concerns to management so that appropriate precautions can be taken.

Workplace violence and harassment or discrimination is not condoned in any way from staff and will be dealt with using corrective action up to and including termination. Where the abusive person is a member of the public appropriate action may include issuing a no trespassing notice, referral to police for investigation under the Criminal Code, withdrawal of services, severing the relationship or any other action necessary to protect the security of staff.

Application

| This policy applies to all emplo | yees, students, volunte | ers, suppliers, clients, vis | sitors and anyone else on our |
|----------------------------------|-------------------------|------------------------------|-------------------------------|
| premises or conducting busine | ss with HPEPH. This po | olicy will be reviewed, sig | ned and dated annually. |

| Jan O'Neill, Board of Health Chair | Date | |
|------------------------------------|------|--|



| То: | Hastings Prince Edward Board of Health |
|-------------------------------|--|
| Prepared by: | Nancy McGeachy – Director of Clinical Programs; Privacy Officer, Chief Nursing |
| Approved by: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |
| Date: | Wednesday, March 1, 2023 |
| Subject: | 2022 Privacy Report |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☑ Compliance with Accountability Framework ☐ Compliance with Program Standards |
| Action Required: | No action required. |
| Background: | As per the Public Health Accountability Framework, "the board of health shall comply with all legal and statutory requirements". The purpose of this report is to assure the Board of Health that Hastings Prince Edward Public Health (HPEPH) strives to be compliant with privacy legislation including the Personal Health Information Protection Act (PHIPA) and the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). |
| | Privacy Program |
| | Hasting Prince Edward Public Health (HPEPH) is committed to respecting privacy, safeguarding confidential information and ensuring the security of the personal health information (PHI) and personal information (PI) that it collects, stores, and maintains. The objectives of the privacy program is to: |
| | foster a culture of privacy within public health; |
| | ensure privacy and security is incorporated into all public health programs and services; and |
| | ensure compliance with privacy legislation. |
| | HPEPH's privacy program is delivered and managed by the Privacy and Security Officer. Duties and responsibilities of the Privacy and Security Officer include implementing policies and procedures, arranging staff education and training, ensuring mechanisms and processes are in place to safeguard the privacy of individuals, and to respond to any inquiries and requests for information. As well, the Privacy and Security Officer chairs the Privacy and Security Committee. |
| | Key Activities for 2022 The Annual Public Health Statistical Reports for 2022 were completed and submitted to the Information & Privacy Commissioner (IPC) of Ontario in February 2023. The following statistics were reported to the IPC: HPEPH responded to 3 requests for information under the Freedom of Information Act |

- There were 2 privacy breaches in which information was disclosed without an individual's authority
 - "Unauthorized disclosure was through misdirected faxes" 0
 - "Unauthorized disclosure was through misdirected emails 0
 - "Unauthorized disclosure was through other means -2
- None of the above breaches met the criteria for mandatory reporting to the IPC.
- 2. Two Privacy Impact Assessments (PIA's) were completed for new programs or services developed and implemented in 2022. PIA's are conducted to help identify actual/potential risks an initiative, program or technology poses to PHI.
- 3. The Privacy Policy and associated procedures and forms were reviewed and updated in 2022. No significant changes were made.
- 4. To increase staff knowledge about privacy and compliance with legislation the Privacy Officer began to share privacy tips on a regular basis to all staff. These are communicated frequently in HPEPH's internal staff eNewsletter, "One Voice", and will continue throughout 2023.



| To: | Hastings Prince Edward Board of Health |
|-------------------------------|--|
| Prepared by: | Roberto Almeida, Program Manager |
| Approved by: | Shelly Brown, Director of Community Programs |
| Date: | Wednesday, March 1, 2023 |
| Subject: | Enforcement Report |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☑ Compliance with Program Standards |
| Action Required: | No action required. |
| Background: | The Ontario Public Health Standards requires boards of health to publicly disclose results of all inspections or information in accordance with the Consumption and Treatment Services Compliance and Enforcement Protocol, 2021 (or as current); the Food Safety Protocol, 2018 (or as current); the Health Hazard Response Protocol, 2018 (or as current); the Infection Prevention and Control Complaint Protocol, 2018 (or as current); the Infection Prevention and Control Disclosure Protocol, 2018 (or as current); the Infection Prevention and Control Protocol, 2018 (or as current); the Recreational Water Protocol, 2018 (or as current); the Safe Drinking Water and Fluoride Monitoring Protocol, 2018 (or as current); the Tanning Beds Protocol, 2018 (or as current); and the Tobacco, Vapour and Smoke Protocol, 2018 (or as current). |
| Comments: | Enforcement activities are regularly presented to the Hastings Prince Edward (HPEPH) Board of Health once per year at the March meeting outlining the previous year's activities. |
| | This report presents a summary of inspections and enforcement activity between January 1 and December 31, 2022. |
| | Starting in 2022, HPEPH has also started posting charges and convictions for COVID-19 related offences on a special page on our website: https://hpepublichealth.ca/charges-convictions/ . |
| | The 2022 charges list, including known resolved ones, is enclosed as Appendix A to this report. 1. Tobacco Enforcement Officers completed Smoke-Free Ontario Act (SFOA) inspections, including: 1 compliance check to ensure area retailers are not providing tobacco or vapour products to a person who is less than 19 years of age 115 inspections to ensure tobacco vendors follow display and promotion restrictions 107 inspections to ensure vapour product vendors follow display and promotion restrictions 41 inspections to ensure all secondary schools, public places, |

hospital property, sporting areas, outdoor restaurant/bar patios, playgrounds) meet the following:

- 100% smoke-free
- have "no smoking/no vaping" signs posted; and
- do not contain ashtrays

The SFOA inspections resulted in one (1) charge for smoke/hold lighted tobacco in enclosed workplace or public place and 21 warnings laid during this period.

Tobacco Enforcement Officers also dealt with 56 public complaints, enquiries and requests for resources (no smoking/vaping signs).

The above totals were achieved although staff were reassigned to COVID-19 response as needed.

Most tobacco convictions were handled with the Early Resolution System in place at the Hastings County and Prince Edward County Provincial Offences Courts.

The Early Resolution System affords the accused the opportunity to meet with the HPEPH prosecutor and plead guilty in return for a lesser fine, thereby reducing the need to have a trial.

- 2. Public Health Inspectors working across several Healthy Environments programs completed several activities, including:
 - 1,976 food premises inspections
 - 1746 routine
 - 130 reinspection
 - 57 complaint
 - 43 pre-operational
 - 613 rabies investigations:
 - Top three animals: 403 dogs, 156 cats, 31 bats
 - 101 small drinking water systems inspections
 - 97 routine
 - 1 reinspection
 - 3 complaint
 - 238 recreational water facilities (e.g. wading pools, swimming pools) inspections
 - 203 routine
 - 28 reinspection
 - 3 complaint
 - 4 pre-operational
 - 279 personal services settings (e.g. hair salons, tattoo parlours) inspections
 - 245 routine
 - 25 reinspection
 - 4 complaint
 - 5 pre-operational
 - 1,448 public complaints, enquiries and requests for information (does not include COVID-19 complaints)

A total of four (4) Community Health Protection Orders were issued to mitigate health hazards at a swimming pool (2), a restaurant, and a retail establishment.

| Reviewed By: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |
|--------------|--|
| | Overall, these activities are in accordance with the Board of Health's mission statement. |
| | Public Health Inspectors and Tobacco Enforcement Officers assigned to COVID-19 response followed up on 471 COVID-19 related complaints and carried out inspections, resulting in 7 total charges during this period. |
| | The above totals were achieved although staff were reassigned to COVID-19 response as needed. |
| | The progressive enforcement procedure in the Food Safety Program led to 19 related charges. Failure to vaccinate a dog resulted in 2 rabies charge. |



Appendix A - Enforcement Report

Listing of charges laid in 2022 under the Reopening Ontario Act (ROA), Smoke-Free Ontario Act (SFOA), and Health Protection and Promotion Act (HPPA) for the period from January 1, 2022 to December 31, 2022.

***Legal disposition listed where outcome from the provincial courts is known.

| FACILITY NAME | ADDRESS | STATUTE | OFFENCE | STATUS | OFFENCE DATE | RESOLUTION DATE |
|---|----------------------------------|---------|--|--|----------------------|----------------------|
| LIQUOR CONTROL BOARD OF ONTARIO (LCBO) | 125 North St, Stirling | НРРА | Community Health Protection Order – closure of facility to the public due to ongoing sewage backup | Order Rescinded (December 30, 2022) | December 28, 2022 | December 30, 2022 |
| ROYAL HAVELI | 366 N Front St, Belleville | НРРА | Food premise not maintained to permit sanitary maintenance of walls. | Unresolved | December 22, 2022 | NA |
| ROYAL HAVELI | 366 N Front St, Belleville | НРРА | Use food equipment not in good repair, to wit: damaged refrigerator door seal. | Unresolved | December 22, 2022 | NA |
| ROYAL HAVELI | 366 N Front St, Belleville | НРРА | Food premise not maintained with food handling room in sanitary condition. | Unresolved | December 22, 2022 | NA |
| THEO'S PIZZERIA | 20 Forsyth St, Marmora | НРРА | Fail to ensure presence of certified food handler or supervisor during all hours of operation | Conviction \$390.00 | November 23, 2022 | January 10, 2023 |
| LITTLE MASTER'S SUBMARINE | 65 Ontario St, Trenton | HPPA | Fail to ensure equipment surface cleaned as necessary. | Conviction \$120 | November 2, 2022 | December 29, 2022 |
| LITTLE MASTER'S SUBMARINE | 65 Ontario St, Trenton | НРРА | Food premise not maintained with clean floors in food-handling room. | Conviction \$55 | November 2, 2022 | December 29, 2022 |
| LITTLE MASTER'S SUBMARINE | 65 Ontario St, Trenton | НРРА | Fail to provide handwashing stations with adequate supplies | Conviction \$120 | November 2, 2022 | December 29, 2022 |

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Reopening Ontario Act (ROA), Smoke-Free Ontario Act (SFOA), and Health Protection and Promotion Act (HPPA)

| FACILITY NAME | ADDRESS | STATUTE | OFFENCE | STATUS | OFFENCE DATE | RESOLUTION DATE |
|--|---------------------------------|---------|--|------------|---------------------|--------------------|
| | Avenue, Belleville | | | | | |
| INDIVIDUAL | 250 Sidney St, Belleville | ROA | Individual- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 25, 2022 | Ϋ́ |
| LOYALIST MARTIAL ARTS ACADEMY INC. | 250 Sidney St, Belleville | ROA | Corporation- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 25, 2022 | ΑN |
| INDIVIDUAL | 250 Sidney St, Belleville | АРРА | No person shall hinder or obstruct a person acting under a direction of a medical officer of health lawfully carrying out a power, duty or direction under this Act. | Unresolved | January 20, 2022 | N A |
| INDIVIDUAL | 250 Sidney St, Belleville | ROA | Individual- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 13, 2022 | V V |
| LOYALIST MARTIAL ARTS ACADEMY INC. | 250 Sidney St, Belleville | ROA | Corporation- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 13, 2022 | V V |
| INDIVIDUAL | 250 Sidney St, Belleville | ROA | Individual- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 6, 2022 | V V |
| LOYALIST MARTIAL ARTS ACADEMY INC. | 250 Sidney St, Belleville | ROA | Corporation- fail to comply with a section 7.0.2 Order (failure to abide by specific rules/close while in a lockdown) | Unresolved | January 6, 2022 | ∀ Z |



| To: | Hastings Prince Edward Board of Health |
|-------------------------------|---|
| Prepared by: | Nancy McGeachy, Director of Clinical Programs |
| Approved by: | Shelly Brown, Director of Community Programs |
| Date: | Wednesday, March 1, 2023 |
| Subject: | Healthy Families Update |
| Nature of Board Engagement | ☑ For Information ☐ Strategic Discussion ☐ Board approval and motion required ☐ Compliance with Accountability Framework ☑ Compliance with Program Standards |
| Action Required: | No action required. |
| Background: | The Healthy Families Team addresses the Healthy Growth & Development (HGD) Program Standard. The program's overarching goal is to achieve optimal preconception, pregnancy, newborn, child, youth, parental and family health. The HGD standard also stipulates that the board of health shall provide all components of the Healthy Babies Healthy Children Program. In 2019 the Foundational Standards Team completed a Program Review to determine alignment with the Ontario Public Health Standards (OPHS) and develop recommendations to enhance program design and monitoring and evaluation. The program review started with assessing the current surveillance data related to maternal and infant health outcomes. After an initial review of the evidence a more in-depth review of evidence supporting these programs was completed, then together with program management and staff, recommendations for program enhancement were recommended. In 2022 when the Program Manager and staff returned to normal operations an Operational Plan for 2022/2023 was developed using the recommendations from the 2019 Program Review leading to the launch of two new evidence-based programs in 2023. |
| Reviewed By: | Dr. Ethan Toumishey, Medical Officer of Health and CEO |





Healthy Families Update

Nancy McGeachy, Director of Clinical Programs Board of Health Wednesday March 1, 2023

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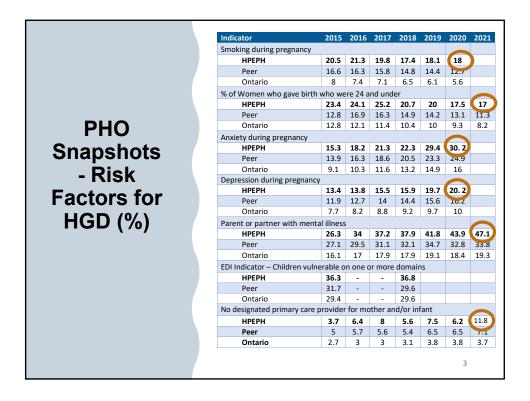
Healthy Growth & Development Standard (HGD)

- Goal To achieve optimal preconception, pregnancy, newborn, child, youth, parental, and family health
- Topics:

Breastfeeding
Growth and development
Healthy pregnancies
Mental health promotion
Preparation for parenting
Positive parenting

Healthy Babies Healthy Children (HBHC)

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HGD Program Review Recommendations 2019

- Establish prenatal education programs that are tailored to at-risk groups or priority populations.
- Address perinatal mental health by improving access to mental health care services.
- Develop a referral pathway and screening process for perinatal mental health concerns.

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Key Activities Healthy Families 2023

- Priority re-opening of Baby & Me Drop In.
- Leading implementation of community wide Ages & Stages Questionnaire (ASQ) screening.
- Development of Care Pathway and completion of universal screening using the Edinburgh Postnatal Depression Scale (EPDS).
- Launch of Nurse-Family Partnership (NFP) and Steps To Wellness programs.

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NFP Program



- Evidence-based, intensive home visiting

 program
- Delivered by public health nurses (PHN).
- Licensed program currently in eight countries.
- Program fidelity requires adherence to 14 core model elements.



Three program goals to improve:

- 1 Pregnancy outcomes
- Infant and child's health and development
- Parents' health and economic selfsufficiency

Results of randomized controlled trials (RCTs)

Child health outcomes

• 67% less likely to experience behavioural and intellectual problems by age 6.

- 56% fewer ER visits for accidents and poisonings through to age 21.
- 48% reduction in child abuse and neglect.

Maternal health outcomes

- 82% increase in months employed.
- 79% reduction in preterm delivery among women who smoke cigarettes.
- 72% fewer convictions of mothers.
 (measured when the child is 15 years of age).
- 35% fewer cases of pregnancy-induced hypertension.
- 31% reduction in closely spaced (<6months) subsequent pregnancies.
- 18% fewer preterm births.





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Eligibility criteria



First pregnancy or first-time parenting



24 years of age or younger



Limited support and resources (socioeconomic disadvantage)



Enrollment or first visit by the end of the 28 week of pregnancy





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Steps To Wellness

- Evidence-based program.
- Nine-week series
- Develop skills, strategies and tools to help manage depression and anxiety.
- Group format is cost effective and has potential to support more mothers.
- · Improves access to care.

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Results of randomized controlled trials (RCT)

- Clinically significant decrease in postpartum depression and anxiety
- Improvement in mother-infant relationship/bonding
- Decrease in parental anger/rejection
- Decrease in infant focused anxiety and improvements in emotional regulation in infants
- Those who received cognitive behavioural therapy for post-partum mood disorder were five times more likely to experience remission from depression

Eligibility Criteria:

- Pregnant and new mothers with babies up to 18 months of age.
- Score of 10 20 on EPDS (mild to moderate depression or anxiety)

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Listing of Information Items Board of Health Meeting – March 1, 2023

- 1. Timiskaming Health Unit Letter to Prime Minister Trudeau re Alcohol Health Warning Labels dated February 8, 2023.
- 2. Association of Local Public Health Agencies Letter to Premier Doug Ford re Boards of Health Order in Council Appointments dated February 10, 2023.