



**Minutes of the Board of Health Regular Meeting**

Thursday, April 22, 2010  
Board Room, Brockville Office  
458 Laurier Boulevard  
4:03 p.m. – 7:05 p.m.

Present: J. Butt, Chair  
B. Fletcher, Vice Chair  
S. Dodge  
J. Earle  
K. Giroux  
G. Grewal  
R. Haley  
L. Sowchuk  
A. Warren  
A. Carter, Medical Officer of Health  
J. Pearce, Treasurer  
H. Bruce, Recording Secretary

Absent: L. Paine

Regrets: F. Kinsella  
K. Graham  
J. Lousley

Invitees: Susan Healey – Communications Coordinator  
Kris Sample - Webmaster

J. Futch – Director – Department of Clinical Services  
S. Gates – Director – Quality Improvement Department  
J. Hess – Director – Family Health Department  
J. Lyster – Director – Health Protection Department  
J. Mays – Manager – Health Protection Department

R. Cleary, M. Green

1. Call to Order:

J. Butt called the meeting to order at 4:03 p.m. He advised that we have regrets from J. Lousley and F. Kinsella and K. Graham is on business and will call in.

2. Approval of the Agenda:

J. Butt advised that there was a request because B. Fletcher has to leave at 5:00 p.m. to move item 6.10 Almonte Evaluation Report up to the beginning of the meeting. Could we also consider any items that would impact on B. Fletcher that we need to review as well? There are 2 items to be addressed item 6.8. Reimbursement of Extraordinary H1N1 Expenses and item 6.10 Almonte Evaluation Report. These will be moved to section 4 on the agenda.

It was moved by: J. Earle

Seconded by: K. Giroux

That: The agenda of the April 22, 2010 Regular Meeting be approved as amended.

Motion Carried.

3. Approval of Minutes:

3.1. Approval of the Minutes from the Board of Health Regular Meeting held on February 18, 2010:

It was moved by: J. Earle

Seconded by: K. Giroux

That: The minutes of the February 18, 2010 Board of Health Regular Meeting be approved as circulated.

Motion Carried.

J. Butt advised that we will now discuss item 6.8. Reimbursement of Extraordinary H1N1 Expenses.

Dr. Carter advised that the ministry will return \$588,000 to us for our H1N1 extraordinary expenses that we incurred from May to December, 2009.

S. Dodge joined the meeting at 4:09 p.m.

The Board has to pass a resolution today to accept the money and J. Butt will sign the document. This Board allowed the municipal portion of the public health funding to creep up to about 30% of our budget. This brings them back closer to the 75/25 split.

It was moved by: J. Earle

Seconded by: K. Giroux

That: The Board of Health accept the one-time funding of \$588,251 (at 100%) for the period up to December 31, 2009 for extraordinary expenses incurred by the Leeds, Grenville and Lanark District Health Unit in response to H1N1, subject to the 2009 Grant Terms and Conditions.

Motion Carried.

J. Pearce advised that the actual cost to deliver the response was \$958,000. Some of that is covered by the per shot allowance and about \$100,000 would be shared by the cost shared budget. This is up to December 31. Dr. Carter stated that there was a lot of overtime involved which contributed to the high cost. G. Grewal asked you won't be making any additional requests? J. Pearce advised that the only unusual cost would be the rental of vans, but she is sure that would be covered by the per shot funding. J. Butt stated that we do not expect any more expenses. J. Pearce commented that we are to submit for how many shots we delivered in each quarter and then we reconcile if there is any discrepancy.

Dr. Carter commented given that we have this money, it fortunately came when we were having some extraordinary expenses. There is the Smiths Falls office being completed and we already know there will be extra expenses there. They hit some rock while doing the foundation and will charge us extra for that. We already had approved by the Board the Smiths Falls office furniture and generator costs which we submitted to the ministry as one time expenses to be cost shared. Also approved and submitted was the payroll and time tracking software expense.

We looked at what we needed to cover, such as the extra overruns in the Smiths Falls office. Then we looked at what we thought would be reasonable use of this money, to do things that we have known for years that we have to do but we did not have the funding, or to do things that would help us save operating costs in the future.

The Brockville parking lot was never drained properly. We tried an inexpensive fix and it did not work. The problem only gets worse every year. It is a safety hazard and a Board liability because we have had a number of people fall and had a broken bone but fortunately have not been sued. All the requests for cost shared one time funding had to be submitted before the end of March so the parking lot request was sent into the ministry. If the ministry approves their share the municipal share will be about \$60,000 out of this one time funding. We should take this opportunity to get this problem fixed as it will only get worse.

Dr. Carter referred to the hand out and item 2. We have been requesting 2 positions that are term for immunization in order to allow us to meet the requirements of the Immunization of School Pupils Act and the Day Nurseries Act. The Board has always wanted to fix this problem. We estimate we can do this with 2 clerks for 2 years for a total of \$185,000.

Item 3 is the Smiths Falls building. We hit rock which caused increased charges. We still do not have our full building permit from Smiths Falls because they want to charge us \$15,000 for the sidewalk along the side of the property. Not having a building permit is starting to become an issue for our builder. We also wanted to do a carpet upgrade and felt we should upgrade them to the type we have in Brockville.

B. Fletcher asked what was the contingency put away for that with the original cost? J. Pearce stated that the original contingency got eaten up with the changes to design. B. Fletcher stated that we do not have a contingency that is why you are asking for these funds.

Item 4 is the Resource Allocation Consultant. We have gotten to the resource allocation step of our program review and have met with our steering committee and their advice is that we seek some outside help with the resource allocation step of this process. It is very complex. SMC also feels this needs to be done. This is something we need to get right. We have put a lot of staff time and energy into this process. We have been given some suggestions such as someone from Queen's University School of Business.

Item 5 is the External Privacy Audit. Dr. Carter explained that there was a catastrophe at one health unit during H1N1. 84,000 patient records were lost and available to others without protection. That brought forth the issue of the kind of liability that health units face. alPHa brought in a person from the privacy commissioner's office who spoke to us and they recommended that Boards of Health do privacy audits. We have tried to keep up with privacy legislation. We think we are very good, but this other health unit that got into trouble thought they were in good shape as well. It would make all of us, SMC and the Board, more comfortable to ensure that we are not in a position of liability. Once an audit is done we can carry on with it on our own.

Item 6 is the Pay Equity Compliance External Review. This was recommended in the last 3 non union compensation reviews but has never been done due to lack of funding.

Item 7 is the External Outer Office Review. The Board would appreciate having a better process in place for how we look at outer offices and how to look at serving all of our communities from how many offices. How many do we need and what should they look like? There are options for storefront locations right through to a permanent set up with staff reporting out of that office. They have quite different costs. We felt having a person do a review would be very useful. Dr. Carter advised that the resident we had working with us from Queens did a literature review and developed a framework so we have some steps done towards this process. This would be a third party review. J. Butt stated that items 4 through 7 would involve external contracts.

Item 8 is the purchasing of vans. In the run up to the H1N1 immunization campaign the ministry funded health units to develop an electronic system for running mass clinics and we implemented that on the fly. It involves quite a bit of heavy equipment. Our previous procedure of staff driving their own cars to clinics does not work because this equipment doesn't fit into a car. We were forced to rent vans during H1N1. Even with that we were not happy with the safety issues.

The rental vans did not have the safety feature that blocks loose cargo from moving forward. We could not protect staff in a head on collision.

Now that we have this electronic equipment, it saves data entry time. If we can have the vans to take it and staff to immunization clinics there will be quite a bit of mileage savings. In the summer, students travel doing presentations with heavy equipment and the vans would be very useful for them. We do occasionally rent vehicles to let our staff drive to meetings. There is a total of \$16,000 a year spent on that travel. There will be the extra cost of maintenance on the 2 vans, but she still thinks we will save \$7,000 – \$8,000 in the operating budget per year. The upfront costs are there. These are things we have always wanted to do, but have never been able to contemplate doing them.

R. Haley asked how much did it cost to do H1N1 service overall? J. Pearce advised \$958,000. R. Haley stated you got \$588,000 back. J. Pearce stated that we got over \$200,000 for the shots and we invested about \$100,000 out of our budget. R. Haley stated that we got our money back. This replaces the money we spent so there is no new money. J. Pearce stated that it is one time money.

J. Butt stated that some place in there was a whole bunch of work that was planned to be done during H1N1 that was not done. We know because of the tie up of resources, the work the program review was to do did not get done. We planned on a budget and submitted the bill and got \$600,000. We could stick it in the bank and build up the reserve. Dr. Carter is presenting on that. What are our chances of ever getting that infusion again? Slim to none. Is there an opportunity for us to invest in our future in a series of one time projects? That is where she came up with the list.

R. Haley stated this is not extra money; we have to put it back. Dr. Carter advised that it is work that our nurses did not do. We can't go back and do that work now. J. Butt explained that R. Haley is saying I hear you, but it is not new money, it represents money that we spent. You are right, but all of the work we should have done last year we did not do. R. Haley stated that he does not see that as having any bearing on putting the money back.

B. Fletcher stated that we used our budget last year to do H1N1 and did not have to do the other piece because H1N1 was the priority, so in fact we could take \$588,251 and put it in the bank and take it off this year's budget for example. We spent our budget last year doing H1N1. We didn't do what we can't redo. Dr. Carter is saying we can't put the money back because it does not help us. Now we want to do one time things that we don't normally have the money to do.

G. Grewal asked last year's budget is closed, did you run a deficit? J. Pearce stated no. The ministry is paying that portion at 100%. J. Earle stated that you are essentially being paid twice for this. Now even though you worked within the existing budget the ministry has given you a windfall. Now that you don't have a deficit and have this you are sitting with a choice to spend it, or put it in reserves, or some sort of direct service to client care.

J. Butt commented J. Earle is saying are you funding the person that will give the needle? No Dr. Carter advised, but the child will not go to their doctor to get the shot if we do not do our part. A. Warren stated that we are not meeting mandatory requirements and need to meet the Immunization of School Pupils Act.

G. Grewal stated that he is not sure about the \$50,000 for 2 vans. Dr. Carter advised that she spoke to the dealer about this. J. Butt stated that we can probably reduce the costs by doing some advertising.

G. Grewal commented that these external reviews are fine, but they will probably have additional costs in their report to the Board. J. Butt stated that a lot of the things we did, we did ourselves but there was a feeling from the Board that in some instances our credibility would be better accepted if it involved someone external. Dr. Carter stated that the external office review could possibly save the Board money by doing services in alternate ways. It was the Board's request for us to do the program review including resource allocation because we might find ways to save money. At least these 2 have potential cost savings.

Dr. Carter stated that usually when we come to October and November we realize that we have lapsed funding usually through gapping. To use this money, we found one time expenses but we need to ensure that any products we order are in the door by the end of the year. One of the things we will do is ensure that any lapsed funding occurring this year will go toward funding this list. This means it will be funded with 25 cent dollars, but if the Board approves it and gives us the luxury of getting things done now, we can do a better job rather than rushing purchases in November and December.

J. Butt stated that with respect to the parking lot, the asphalt was placed on fill and there was no drainage or granular and it is a mess. S. Dodge commented that the money that was invoiced to the ministry for H1N1 was primarily staff hours. The service delivery review was not done due to H1N1, are there other things that staff did not do? Will there be significant overtime that the Board will be looking at this year? Dr. Carter stated that some were overtime hours and there is a lot of work that our staff does that can't be redone. Health promotion activities in the schools, it was not done which is ongoing. J. Butt stated that H1N1 was full days from early morning to 8 p.m.

J. Earle stated that he would not look at anything past item 4 on this list. In item 1 – the Brockville parking lot, he stated that there should be a catch basin in the parking lot and he is suggesting there could be cost overruns. Dr. Carter advised that we will not touch the parking lot until we know if we get the 75% money. J. Butt stated that J. Earle is saying that there will be cost overruns. You have no granular; you have to take out existing asphalt. Dr. Carter advised that the engineers have looked at this and we will sign a contract with them that they will deliver this for \$259,000. J. Pearce stated that there is no catch basin currently in this parking lot.

R. Haley asked how many vans did we rent during H1N1? Dr. Carter advised that we rented 2 vans – day to day. R. Haley asked would 1 suffice? J. Pearce commented that we operate with 2 teams, one in the north and one in the south. It would not be practical to have 1 van. G. Grewal asked where will the vans be located? J. Pearce advised 1 in Smiths Falls and 1 in Brockville.

J. Butt called the motion. J. Earle stated that he would vote on items 1 to 4. B. Fletcher suggested asking for the full motion and then asking if individuals want items pulled out. J. Earle asked that we pull out items 5, 6, 7 and 8. B. Fletcher moved that we take a separate vote on items 5, 6, 7 and 8. G. Grewal seconded this. J. Butt called the question on items 5, 6, 7 and 8. B. Fletcher advised that we are voting on approving items 5, 6, 7 and 8 for \$105,000. J. Butt asked all those in favour. 5 board members were in favour with 3 against. The motion was carried.

The remainder of the motion is for items 1, 2, 3 and 4.  
All board members were in favour unanimously.  
The final motion is for \$511,506. The vote was carried 5 to 3.

It was moved by: K. Giroux  
Seconded by: J. Earle  
That: The Board of Health approve the Investment Strategy for H1N1 funds in the amount of \$511,506.

Motion Carried.

Dr. Carter advised that there is one more motion.

It was moved by: A. Warren  
Seconded by: L. Sowchuk  
That: The \$588,251 be placed in the reserve fund until such time as it is needed for the approved expenses.

Motion Carried.

J. Butt stated that in the past we have talked about the province reviewing funding and coming up with a new system. He advised that they formed a working group to provide advice to the minister. Health unit organizational standards are part of that effort and that document will be coming out soon. It will be an online survey for board members. We will be emailing board members this information once it is available. J. Butt stated that they asked him to consider being part of the panel and he agreed.

B. Fletcher asked who is doing the report on the Almonte office? Dr. Carter advised it is for information only. B. Fletcher asked is that a public document now? Dr. Carter advised yes. B. Fletcher would like to put it on the agenda for the next meeting.

**ACTION: Almonte Evaluation Report will be added to the May agenda under business arising.**

B. Fletcher stated that H. Bruce has agreed to be his campaign manager for the Leeds, Grenville and Lanark Cancer Society. He will be shaving his head on June 11<sup>th</sup> to raise money. There is a form that Heather has and if anyone wishes to donate please feel free. He would appreciate any support going to this good cause.

B. Fletcher left the meeting at 5:01 p.m.

J. Butt reverted to the original order of the agenda. S. Gates will give an update under item 4.1.

4. Business Arising:

4.1. Program Review Update:

S. Gates reviewed the report. We have completed the situational assessment questionnaires and we are currently working on completing the capacity questionnaires. We have conducted a partner survey of over 600 partners including municipalities and as of last week we received almost 200 responses. We should have the prioritization list completed by May 10 and would like to ask the Board for some of their time to release this list to them.

We felt that an additional meeting would be beneficial to the Board to further explain the process. It was recommended by the steering committee that we get some external input regarding the resource allocation. The terms of reference of the resource allocation committee are attached for your approval. We made one minor change to the program review steering committee terms of reference as well.

Since we missed the 2010 budget submission we are aiming to have resource allocation done by October at the latest to use this information for the 2011 budget.

J. Butt stated that we should be picking the date soon for this additional meeting. S. Gates commented that we were hoping it would be before the May 20<sup>th</sup> Board of Health Meeting. The special meeting will be held at 3:00 p.m. on May 20<sup>th</sup>. There will be a meeting of the program review steering committee on May 13<sup>th</sup> and they are welcome to attend on May 20<sup>th</sup> as well.

J. Butt thanked S. Gates for her presentation.

It was moved by: R. Haley

Seconded by: L. Sowchuk

That: The Board of Health approve:

- A special meeting in May to receive the results of prioritization and discuss the consistency testing that was conducted on the criteria;
- VI-280\_huam – The terms of reference for the Resource Allocation Committee as circulated;
- The funding to a maximum of \$20,000, to hire an external consultant to design the resource allocation process;

- VI-270\_huam – The terms of reference for the Program Review Steering Committee as circulated.

Motion Carried.

## 5. Presentations:

### 5.1. Communications/Website:

S. Gates stated that we welcome the opportunity tonight to present to you the communications side of the QI department. She will set the context of the presentation and then hand it over to members of the creative team. Communications is part of the OPHS. When they rewrote the guidelines, 12 of the 13 contain a requirement around communications. We have a creative team to meet these requirements – Susan Healey is our Communications Coordinator, Oksana Shewchenko is our Production Artist, Jodi Drummond is our Production Assistant and Kris Sample is our Webmaster. K. Sample has redesigned our website and will be launching it here tonight.

S. Gates introduced S. Healey. S. Healey gave a power point presentation. See Appendix #1. How do we communicate with the public? The communications team consults with staff through multiple methods. Our team works together on the consistency of these messages.

As the Communications Coordinator she builds relationships with the media. This was very important during H1N1 when many staff were unavailable. We also keep current with what is happening in the media.

S. Healey discussed advertising with the group. We did a special campaign on the CINOT dental program where we used the cinema, facebook and radio stations to reach young adults aged 13-17. S. Healey reviewed print resources with the Board and discussed future communications.

S. Healey turned the presentation over to K. Sample. He spoke about the website and the improvements that have been made to it. The website was originally launched in 2000. During the H1N1 crisis there was a need from the public to access information and we were getting feedback from them that there were items that were difficult to find on the website. We looked at improving our communication. The site was in need of a revamp. We have developed a new design with a fresh modern look that is easy to navigate. There is almost 1000 pages of information within our website. We will be monitoring feedback and the traffic we are experiencing to further improve our method of distributing this information to the public.

S. Dodge asked how are you monitoring the usages? K. Sample advised that there is Webdesk to help monitor. S. Dodge asked can you monitor page by page? K. Sample commented that we will be looking into that as well. We will try to work with Ripnet and Google. The website was shown and reviewed with board members.

J. Butt asked you are live now? K. Sample stated yes this is live. Various sections were viewed. The Board of Health mirror site was reviewed. Dr. Carter advised that we want to have a picture and a bio from each board member. We thought we ought to show it to you before we go ahead with this. This was reviewed by the Board. S. Healey has brought the camera tonight for pictures to be taken. The Board agreed to go live with this. Dr. Carter and J. Butt thanked K. Sample and S. Healey for their presentation.

## 5.2. Land Control:

J. Lyster advised that land control is a stand alone self funded program offered through the health unit. She gave a presentation on land control. See Appendix #2.

J. Butt asked will we be telling people in advance to go to the website for forms? How do I know to be pointed there? J. Lyster advised that we have a program to bring it forward. Our client base is becoming more and more computer oriented. There are forms on line available.

Land control ended with a surplus of \$61,000 in 2009. Leeds and the Thousand Islands instituted a septic reinspection bylaw and will do so again this year. Many health units that deliver land control programs have higher fees than we do. Kingston charges \$730 per permit which is \$180 more than what our permit costs. We are looking at \$110,000 that we could have generated with this additional \$180.

The Board asked for data on fees charged by municipalities within Leeds, Grenville and Lanark who do not use the health unit to provide septic permits. The hard work of the staff in 2009 should be acknowledged. J. Lyster reviewed graphs in the presentation with board members. As a general rule our fees are lower. J. Butt thanked J. Lyster for her presentation.

It was moved by: G. Grewal

Seconded by: L. Sowchuk

That: The Board of Health receive the Land Control Annual Report as information.

Motion Carried.

## 6. New Business:

### 6.1. Accounts Payable for January:

J. Pearce advised that this is accounts payable for the first 2 months of the year. The obvious difference between the 2 reports is that in February we had the fourth payment to our contractor. We also had 3 remittances to the government for our source deductions and only 1 in January on a partial pay period.

As well OMERS has been slow to take our money from our bank account. They did not take the amount owing for December until February. Our first pay in January is a partial pay. This amounted to the \$600,000 difference.

G. Grewal asked what is the legal expense for in January? J. Pearce advised it could be regarding the milk issue, Smoke-Free Ontario items, court appearances on Smoke-Free Ontario charges as well as possible land control. Dr. Carter stated that our solicitor bills us every once in a while for all services, not for just one thing.

J. Earle questioned 48 IP phones? J. Pearce advised that these phones can retain all of the programming if staff move their phone. Right now we have to call Bell every time we want a phone moved at \$100 each time. Dr. Carter commented that they are useful during an outbreak or H1N1. People can plug their phones in and get calls on their regular extension in any room in the health unit.

R. Haley questioned animal trapping. J. Pearce advised that we have Darcy Alkerton on a retainer. He is very helpful to the person on call responding to animal bites.

It was moved by: L. Sowchuk

Seconded by: R. Haley

That: The Board of Health approve Health Unit Accounts Payable for the month of January 2010 in the amount of \$730,498.55.

Motion Carried.

#### 6.2. Accounts Payable for February:

It was moved by: A. Warren

Seconded by: L. Sowchuk

That: The Board of Health approve Health Unit Accounts Payable for the month of February 2010 in the amount of \$1,335,788.34.

Motion Carried.

#### 6.3. One Time Funding Request:

J. Pearce stated that as Dr. Carter mentioned earlier we had a deadline of March 31<sup>st</sup> to submit to the ministry one time funding and the issue of the parking lot came up. We submitted this business case to the ministry but it has to be formally approved by the Board. The municipal share is \$66,000.

It was moved by: A. Warren

Seconded by: L. Sowchuk

That: The Board of Health approve the one-time funding request for parking lot reconstruction of the Brockville Office in the amount of \$259,000 as submitted to the Ministry.

Motion Carried.

#### 6.4. 2010 Land Control Budget:

J. Pearce stated that this is the 2010 land control program and as J. Lyster mentioned earlier we are in a better position than last year, which was a \$25,000 deficit. We predicted to end 2009 to be just below a break even point. As it turned out we did end up in 2009 with a \$61,000 surplus.

In 2010 we are using conservative activity figures and if things carry on the revenue should be higher than predicted in this budget. The Board did approve a 10% increase to the sewage application fee which will bring the total program revenue to just under \$450,000. We are gapping 1 PHI position to gain some stability in the program. Other PHI's will be trained to provide land control services to have better capacity and flexibility. The program will not be able to hire a student this year for the summer.

J. Pearce advised that we would like to come back to the Board in the fall once we know what the activity level is for the first 8 months. The staff can't be reduced any further. G. Grewal asked would it be helpful to show the contribution margin and variable costs and fixed costs? That way we could see how much is contributing. J. Pearce stated that the program is self sustaining; the fees pay for the program. If we decided to disband the program that impact would be the lost capacity of PHI's and the allocated cost of \$60,000 which is revenue going into our public health budget. That would be money we would have to find in public health to manage the budget.

G. Grewal asked is there a way to reorganize this? J. Pearce stated that if we ever decided to disband this we would have close to \$70,000 in lost revenue in public health. G. Grewal asked if it is a fee for service, are you asking the Board to subsidize something that everyone benefits from? If we were to stop providing the program, would municipalities be able to do it cheaper than the Board? How much does Rideau Lakes charge? J. Lyster advised that it is her understanding that Rideau Lakes charges more. We can get that information. Kingston set the stage in deciding not to disband the program. J. Butt commented that it is a fair question; we must be competitive because no one has replaced our service.

J. Pearce stated that it is this Board's job to approve this budget. The allocated costs have been established by ratios that have been in place for a long time and if it is the Board's wish to reduce those we can comply. J. Butt stated that G. Grewal is asking that we organize the presentation so that it is easier to see. J. Pearce commented that she would like to know how it should look. J. Butt advised that G. Grewal will send J. Pearce a template.

J. Earle stated that right now building is not taking place, but renewals of septic systems are holding steady. In Brockville we had 19 housing starts last year. If the rural municipalities are having the same downturn in sewage permits, at some point we will have to reevaluate the cost of our service versus different alternatives. J. Butt commented that is what G. Grewal is saying. J. Lyster stated that over a 14 year period 600 sewage permits seems to be the average. J. Earle stated that he suspects there has been a significant reduction in new sewage permits.

It was moved by: L. Sowchuk

Seconded by: R. Haley

That: The Board of Health approve the 2010 Land Control Operating Budget in the amount of \$467,149.

Motion Carried.

6.5. Low Income Dental Program:

R. Cleary presented on behalf of R. Kavanagh. She is asking for approval of the one time revised infrastructure costs for the Low Income Dental Program.

It was moved by: G. Grewal

Seconded by: L. Sowchuk

That: The Board of Health approve the revised application for one-time infrastructure costs for the Low Income Dental Program for Leeds, Grenville and Lanark in the amount of \$330,630.18.

Motion Carried.

6.6. CINOT – 2009 Extension of Grant Terms and Conditions:

J. Pearce advised that this is a housekeeping item and the Board is required to approve an extension of the 2009 grant terms and conditions until the 2010 grant terms and conditions are prepared.

It was moved by: R. Haley

Seconded by: L. Sowchuk

That: The Board of Health approve the CINOT - 2009 Extension of Grant Terms and Conditions.

Motion Carried.

6.7. PSL 2010-11 Budget:

J. Pearce stated that you will see last year we submitted a budget reflecting the needs of the program and the ministry came back to say we needed the same level of funding. We had to cut supplies to zero and gap positions. The program has ongoing needs and they recommend that we submit a full budget to provide this program, which is \$75,000 higher than the previous approved budget to make the ministry aware. The waiting list for children is growing. We need to advocate for full funding. There is also one time funding included here to set up the new clinic in the Smiths Falls office. R. Haley asked where was the extra money built into our budget? J. Pearce stated that this is going to the ministry for 100% funding. She referred to the letter in the package regarding the impacts.

It was moved by: J. Earle

Seconded by: K. Giroux

That: The Board of Health approve the 2010/11 Language Express Base Budget submission in the amount of \$490,417 and the One-Time Expense Request in the amount of \$8,560.

Motion Carried.

6.8. Reimbursement of Extraordinary H1N1 Expenses:

This was discussed previously.

6.9. HUAM Updates:

6.9.1. V-1645-0 – Influenza Immunization:

Dr. Carter advised that when H1N1 came we found that the wording in our policy did not fit this very different flu year and realized we should try to generalize the policy to fit more unusual situations. Instead of specifying influenza vaccination we changed it to protection. We just made a few minor wording changes to make it more general.

L. Sowchuk asked was there any vaccine left over? Dr. Carter advised yes there was vaccine left over and it goes back to the Ontario government pharmacy and it is their problem. The province has a huge wastage of influenza vaccine this year.

It was moved by: K. Giroux

Seconded by: J. Earle

That: The Board of Health approve the revision to HUAM policy V-1645-0 Influenza Immunization as circulated.

Motion Carried.

6.9.2. V-1675-0 – Contact Lists:

J. Pearce advised that our experience during H1N1 led us to revise and enhance the policy around how we should keep these contact lists up to date.

It was moved by: J. Earle

Seconded by: K. Giroux

That: The Board of Health approve the revision to HUAM policy V-1675-0 Contact Lists as circulated.

Motion Carried.

6.9.3. V-1795-0 – Scented Products:

J. Pearce advised that this is a new policy. We have deliberated about how to do this and what would work best. Asking staff to minimize the use of scented products and to use their discretion would be best. J. Earle asked where do we draw the line? R. Haley stated that you might want to review this in a few months, it may be too light. Some people have strong reactions and this is very serious. J. Butt stated that there is support in principle but we need to revisit it because it may not be inclusive enough.

It was moved by: J. Earle

Seconded by: K. Giroux

That: The Board of Health approve HUAM policy V-1795-0 Scented Products as circulated.

Motion Carried.

6.9.4. V-1805-0 – Office Equipment:

The issue of individuals using ball chairs came up. They were called ergonomic chairs ordered by healthcare providers so we did not realize that we were buying ball chairs. Now we have them and we as an agency should not be willing to accept the liability should someone be injured. Specific recommendations were discussed. We would purchase equipment if it was recommended by a doctor.

It was moved by: R. Haley

Seconded by: L. Sowchuk

That: The Board of Health approve HUAM policy V-1805-0 Office Equipment as circulated.

Motion Carried.

6.10. Almonte Evaluation Report:

This report will be coming back to the next meeting.

It was moved by: G. Grewal

Seconded by: R. Haley

That: The Board of Health receive the Almonte Office Closure Evaluation Results as information.

Motion Carried.

7. Advocacy:

7.1. Smiths Falls Health Village Expansion:

J. Butt advised that this is an advocacy issue that K. Graham brought forward. Do we support having all of these services in a single health village? Do we need to talk to him about it? Dr. Carter advised that this is time limited and there is no cost to us and may benefit us.

It was moved by: L. Sowchuk

Seconded by: R. Haley

That: The Board of Health support the concept of an integrated Smiths Falls Health Village and provide a letter of support to Peter McKenna at the Merrickville District Community Health and Services Centre.

Motion Carried.

8. Verbal Report of the Medical Officer of Health:

Dr. Carter stated that we are short of time and have a lot to cover incamera. She will email her verbal report to board members.

Dr. Carter showed the certificate of appreciation awarded to the LGLDHU for H1N1 efforts. This will be posted and framed.

**MOHLTC Implementation of Performance Management:**

MOHLTC is making progress on many fronts with implementation planned for January 2011. They are planning to make an announcement soon which will provide a general update on the ministry's current work on performance management. As soon as we see it we will forward it to you by email.

**Organizational Standards for Health Units:**

The MOHLTC is developing Organizational Standards for Health Units as part of the Performance Management process. These standards will probably include many of the Governance and Accountability items that were included in the Initial Report on Public Health such as having a strategic plan, health status report, tested emergency response plan, accreditation, MOH performance evaluation, board orientation and board self-evaluation. The ministry held a Focus Group event on March 23 to get feedback on an initial draft of the Organizational Standards. Mr. Butt was invited to this but was unable to attend. The focus group participants provided detailed advice on areas for improvement that the ministry is now considering. A wider consultation (e-survey) on the Organizational Standards is planned for later in the spring, and will be open to board members. We will make every effort to make sure that you are all made aware of this survey. Keep your eyes on your email as MOHLTC rarely gives us much notice on these things. They have promised to allow 3 weeks for response.

## **Family Health:**

The organizers of a provincial workshop on Roots of Empathy have invited our Roots of Empathy coordinator, Denise Kall, to present our 'model' of Roots implementation as part of a session on community development. This is a train the trainer model with school boards and has worked well for us. Congratulations Denise!

## **Health Promotion:**

### **Smoke Free Ontario**

Mike Kennedy of the Smokers Club in Smiths Falls was not given leave to appeal his previous convictions under the Smoke Free Ontario Act to the Supreme Court of Canada. Mr. Kennedy's case was turned down with court costs. The lawyer representing Kennedy refused to comment on the case. This is good news and hopefully the end of this process. Tobacco Inspectors conducted a total of 143 inspections for the month of March. A total of 11 written warnings and 2 charges were laid for infractions under the SFOA. Winners were announced for the Driven to Quit Challenge. The grand prize as well as the two vacation vouchers and the regional prize were awarded to Ottawa area Quitters. Congratulations to the 529 local participants who made a quit attempt and are hopefully remaining smoke-free.

## **Clinical Services:**

Immunization Week is April 24-30<sup>th</sup>, 2010. One week a year we focus on the benefits of immunization for the entire population. The Health Unit activities for this week include:

- Articles in the newsletters we produce.
- Newspaper articles throughout the tri-county.
- Posters and 3000 pamphlets sent to all the day care centres.
- Posters sent to primary care providers with their April vaccine orders.
- Additional staffing planned for every immunization clinic next week to increase our capacity to allow everyone the opportunity to catch-up on their routine immunizations.
- A colouring activity for 4-6 year olds highlighting immunization that can be accessed from our website. There will be a prize draw on May 3<sup>rd</sup> and the boy and girl who are winners will receive a bicycle and helmet.

## **Health Protection:**

**Small Drinking Water Systems** –MOHLTC is now keeping close tabs on our progress on risk assessments by requiring monthly reports. A provincial report places LGLDHU in the

group of 14 above average performers in comparison of the other Health Units in the province on progress towards completing SDWS risk assessments.

**Safe Water** – Beaches will be assessed this coming summer according to the new Beach Management protocol and Beach Management guidance documents. Starting in June water quality sampling will occur throughout the summer months to the long weekend in September. The main change this year is that we will be tracking specific climate and water information that may provide a foundation for a predictive model in the future rather than the reactive after the fact model for beach water quality surveillance that we do now.

**Food Safety** – There were several food recall related activities in the last month relating to Listeria contaminated foods. Staff were involved in contacting facilities serving vulnerable groups and other notification activities.

There will be food handler training at the end of the month in Brockville and Smiths Falls.

A disclosure process will be instituted June 1, 2010 allowing the public to access the results of food premises inspections. This will be a simple process based on responses received from the public and food premises operators to the survey conducted on the LGLDHU website. The process will be as follows:

- Requests can be submitted via our website to a dedicated e-mail address or via forms that will be available in all of our offices.
- Response will have a turn around time of 2 weeks and include the inspection report along with an explanation of terms to assist the reader in interpreting the inspection report.
- Requests will be noted on the premises' electronic file and tracked on a database which will be reviewed quarterly.

In the future, when funding is available, a quicker process allowing a website GIS search with immediate feedback may be implemented. This has the potential to be positive for tourism in LGL area as many tourists are familiar with such systems in their home jurisdiction.

**Emergency Preparedness** – We are in the process of reviewing the current LGLDHU emergency plan. This includes meeting with community partners, including municipalities and MOE. A final document will be presented to the Board of Health in October 2010.

**Eastern ASPHIO** (Association of Supervisors of Public Health Inspectors from eastern Ontario) will be meeting in Gananoque at the end of June. Attending will be a guest from the Ministry of Health and Long-Term Care, Tony Amalfa, Manager Environmental Health, and also a representative from the Canadian Institute of Public Health Inspectors.

**Public Health Inspector summer students** – We have hired 3 students to assist in the Health Protection Department and complete a 12 week practicum which is required before taking the formal oral examination for certification as a PHI. The students will be starting May 10<sup>th</sup> and ending just before the September long-weekend.

9. Correspondence:

J. Butt reviewed the correspondence.

10. Incamera Meeting:

The motion to move incamera was read at 6:33 p.m.

It was moved by: A. Warren

Seconded by: L. Sowchuk

That: This Board move into a closed session of the Board of Health due to the following:

- (a) the security of the property of the municipality or local board;
- (b) personal matters about an identifiable individual, including municipal or local board employees;
- x (c) a proposed or pending acquisition or disposition of land by the municipality or local board;
- x (d) labour relations or employee negotiations;
- (e) litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board;
- x (f) advice that is subject to solicitor-client privilege, including communications necessary for that purpose;
- (g) a matter in respect of which a board or committee may hold a closed meeting.

Motion Carried.

A short break was taken.

It was moved by: K. Giroux

Seconded by: J. Earle

That: This closed session rise and report.

Motion Carried.

11. Report from Incamera:

J. Butt advised that the occupancy date for the Smiths Falls office is June 8, 2010.

12. Time, Date and Location of the Next Meeting:

The next meeting will be held on Thursday, May 20, 2010 at 3:00 p.m. in Brockville.

13. Adjournment:

It was moved by: A. Warren  
Seconded by: L. Sowchuk  
That: The meeting adjourn at 7:05 p.m.

Motion Carried.

\_\_\_\_\_  
J. Butt, Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
H. Bruce, Recording Secretary

\_\_\_\_\_  
Date

c: Board members  
HU offices  
Municipalities  
Shared Drive