



**BOARD OF HEALTH FOR THE
NORTHWESTERN HEALTH UNIT**

MEETING MINUTES

Regular Board of Health Meeting

December 5, 2012

Northwestern Health Unit Kenora City View Centre Boardroom

PRESENT: John Albanese, Chair
 Jim Belluz, Dave Canfield, Margaret Harland, Shayne MacKinnon, Julie Roy, Paul Ryan,
 Doug Squires, Bill Thompson

IN ATTENDANCE:
 Dr. Jim Arthurs, Medical Officer of Health (MOH)
 Mark Perrault, CEO
 Dorothy Strain, Executive Assistant (Recorder)

REGRETS: Dennis Brown, Russ Fortier

1. CALL TO ORDER

Chair John Albanese called the meeting to order at 8:30 a.m.
 He introduced Shayne MacKinnon, joint appointee for Machin and Dryden municipalities,
 who was appointed to the Board of Health following the resignation from Dryden Council of
 Mel Fisher.

2. APPROVAL OF AGENDA

Addition: Agenda #10, Non Agenda Items:
 10.1 Resignations of Board of Health Members

Motion / Resolution: 92-2012	
THAT the Agenda for the Board of Health meeting dated December 5, 2012, be approved as amended.	B. Thompson P. Ryan

3. DECLARATIONS OF PECUNIARY INTEREST & GENERAL NATURE THEREOF

None was declared.

4. MINUTES OF BOARD OF HEALTH MEETING, October 19, 2012

Motion / Resolution: 93-2012	
THAT the Minutes of the Board of Health meeting held October 19, 2012, be approved as written.	P. Ryan D. Squires

5. PUBLIC HEALTH PROGRAMS

Dr. Arthurs reviewed the new reporting format and report template for reports to the Board of Health that will be formally implemented in January 2013. The Medical Officer of Health (programs) report and Chief Executive Officer's report (administration) will be included in the meeting Minutes. Staff reports will be appended to their respective superior's report but will not be included in the Minutes. The report template was utilized by several staff for program and administration reports submitted to the December meeting as a 'trial run'.

The new Minutes format for management reports to the Board is also being implemented for the December meeting, as a 'trial run' for Board members' review.

5.1 Medical Officer of Health Report – *Dr. Jim Arthurs, Medical Officer of Health* Reference # 2012-12-05-5.1

PURPOSE

To report the activities, thoughts, reflections and goals of the Medical Officer of Health over the past month.

BACKGROUND

Previous reports with focuses on change, accountability, community engagement, and financial responsibility.

LINK TO THE STRATEGIC PLAN

To emphasize the direction and goals of our current strategic plan, with specific attention to community engagement

DISCUSSION

Strategic Planning

As we approach the end of 2012, I find it significant to look back at all the changes and improvements that the Northwestern Health Unit has made in this past year. This is not to say that it has been easy nor to insinuate that all of us, including myself, fully understand the meanings and implications of continuous improvement and change. I have also noticed that many other agencies within health care and public health are also working hard on developing new and meaningful strategic plans.

As I have mentioned in the past, the Northwestern Health Unit has been engaged by several other agencies:

- Lake of the Woods District Hospital Board
- Riverside Health Care Facilities, Inc.
- Ontario Ministry of Health and Long Term Care, Public Health Division
- Public Health Ontario

It is no accident that all of us have developed or are developing similar strategic plans. Each has different focus on goals and what they do best, while at the same time each has a focus on possible budgetary restraints, along with accountability, measurements and demonstration of improvement, chronic disease, healthy eating and concerns about inactivity. Whether this “likeness” is a fallout from the 2008 recession, global economy, multiple expensive military activities, global warming, natural disasters, governmental budgetary deficits, the Drummond report, is unknown; but for certain all need to consider how we can work together, plan better, and show that we have made a difference.

Alex Berry, CQI Coordinator, and I made a presentation to Riverside Health Care Facilities Board of Directors on October 19 to share the Balanced Scorecard concept in our strategic plan, and to discuss how we arrived at our focused goals in each quadrant. In a follow-up note to Alex and me, Riverside Health Care’s CEO Alan Katz indicated that the information shared was “instrumental” in the launch of their strategic planning weekend.

Conference Attended

On November 9 I attended an all-day symposium in Fort Frances attended by more than 350 persons from schools, school boards, public health and other agencies. The title was “Calm, Alert, and Learning”. The main speaker was Dr. Stuart Shanker, with Dr. Charles Pascal’s introductory remarks about his report regarding early learning in Ontario, “With Our Best Future in Mind: Implementing Early Learning in Ontario” (2009). Both of these authors and researchers emphasized that preparing children from birth to six years to learn to self-regulate is hugely important for them to be ready for learning in school. The introduction of self-regulation was presented in relation to five domains—biological, emotional, cognitive, social and prosocial (empathy and respect for others). Absence of learned self-regulation was linked to many of the chronic illnesses and unhealthy behaviours that are the focus for our many programs – developmental disorders, internalizing problems, externalizing problems, personality disorders, memory disorders, alcoholism and risky behaviours, obesity, diabetes and cancer, coronary heart disease, and immune system disorders. My take away message is that focusing our energy and time on youth and young adults will assist us in reaching our goals of improving the health of our population. Of course, other adults and seniors cannot be ignored.

Medical Placements

I enjoy and find it rewarding to spend time with students of health disciplines, especially young physicians. Raising awareness of what public health does with our area’s established physicians and health workers in family health teams is also important and needs requires focus on my part.

One example of our success in engaging medical students and potential young physicians who are learning awareness of public health is the learning pathway for present fourth year Northern Ontario School of Medicine (NOSM), student, Melanie Kowal. Melanie was one of the first recipients of our Carl Lindstrom Bursary that helps students to advance their interests in health care.

Our staff and I had several opportunities to assist Melanie to learn more about public health when she was a third year student. As a fourth year student, Melanie chose to complete an elective in public health with the Northwestern Health Unit. She is looking forward to participating in her family medicine residency also in Kenora. We have played a small part in her career, and it is a nice success story of engaging students early and assisting their learning process.

BUDGETARY IMPACT None

RECOMMENDATION

That the Board of Health receive the Report of the Medical Officer of Health.

Motion / Resolution: 94-2012	
THAT the Report of the Medical Officer of Health be accepted as presented.	J. Belluz P. Ryan

5.2 Dental Program Report

*Submitted by Dawn Sauvé, Manager, Dental Health
Reference # 2012-12-05-5.2*

The report will be retained on file.

Northwestern Health Unit Resolution

Dr. Arthurs provided further background and context for the appendix to Dental Health Report, proposed Resolution re: Northwestern Health Unit endorsement of the 2012 Report of the Chief Medical Officer of Health, Dr. Arlene King, "Oral Health- More than Just Cavities".

Motion / Resolution: 95-2012	
THAT the Dental Health Program Report be accepted as presented.	D. Squires J. Belluz

<p>Motion / Resolution: 96 -2012</p>	
<p>WHEREAS dental decay is the most common chronic childhood disease in children and adolescents; is five times more common than asthma; is one of the main reasons preschool children receive a general anesthetic; and is the second most expensive disease category in Canada (Health Canada, 2010); and</p> <p>WHEREAS 47% of Canadian children have had dental disease by six years of age and 96% of adults have had dental disease in their lifetime (Health Canada, 2010); and</p> <p>WHEREAS oral health and overall health are inextricably linked and oral disease can lead to infection, pain, abscesses, chewing problems, poor nutritional status, damaged self-esteem, loss of sleep; and may affect school performance, ability to learn and potential to thrive (US Department of Health and Human Services, 2000);</p> <p>NOW THEREFORE BE IT RESOLVED that the Board of Health for the Northwestern Health Unit urges the Government of Ontario to endorse and support the report of the Chief Medical Officer of Health for Ontario, Dr. Arlene King, "Oral Health - More Than Just Cavities", April 2012, that urges the government to:</p> <ul style="list-style-type: none"> • conduct a review of current policies and mechanisms to ensure all Ontarians have access to optimally fluoridated drinking water; • conduct an immediate review of how publicly funded dental programs and services are monitored and evaluated; • consider how to improve the integration and/or alignment of low-income oral health services within the broader health care system; and • explore opportunities to improve access to and awareness of oral health services to First Nations people in Ontario <p>AND FURTHER BE IT RESOLVED that copies of this resolution be forwarded to the Premier of Ontario; the Minister of Health and Long-Term Care; Public Health Ontario; the Association of Local Public Health Agencies; the Ontario Public Health Association; Local Members of Parliament and the Provincial Parliament; Northwestern Health Unit obligated municipalities; and all Ontario Boards of Health.</p> <p><u>References</u> Health Canada, 2010. <i>Canadian Health Measures Survey (CHMS), Oral Health Statistics 2007-2009</i>. http://www.hc-sc.gc.ca/hl-vs/pubs/oral-bucco/fact-fiche-oral-bucco-stat-eng.php</p> <p>U.S. Department of Health and Human Services, 2000. <i>Oral Health in America: A Report of the Surgeon General—Chapter 5</i>. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health. Retrieved from: http://www.nidcr.nih.gov/DataStatistics/SurgeonGeneral/sgr/chap5.htm</p> <p><i>Oral Health – More Than Just Cavities, April 2012, Chief Medical Officer of Health, Dr. Arlene King's Report.</i> http://www.health.gov.on.ca/en/common/ministry/publications/reports/oral_health/oral_health.pdf</p>	<p>J. Belluz M. Harland</p>

5.3 Speech, Hearing & Vision Program Report

Submitted by Debbie Cousineau, Manager, Speech, Hearing & Vision
Reference # 2012-12-05-5.3

The report will be retained on file.

<p>Motion / Resolution: 97-2012</p>	
<p>THAT the Speech, Hearing & Vision Program Report be accepted as presented.</p>	<p>J. Roy M. Harland</p>

6. CORPORATE ADMINISTRATION

6.1 Chief Executive Officer Report – Mark Perrault, CEO

Reference # 2012-12-05-6.1

As this is my last report for 2012, I would like to summarize where we have been for the past year and what the future may look like.

Clearly, the development of the 2013-2016 Strategic Plan was the most significant event of 2012 and it will be the guiding document for the organization, going forward. Changes are required to the way we do work and how we measure what we do. Unlike previous strategic plans, staff and program managers were fully engaged in its development, which should expedite the adoption of the changes.

The second major event was the development of the Kenora City View office. This was the largest office development undertaking in my nineteen years in the organization. Due to an excellent logistics plan and a team of dedicated staff, the move created relatively few and minor service disruptions.

Also this year we switched over all of our offices to a new Internet telephone system (Voice Over IP), which has not only nearly eliminated long distance charges, but has opened up a whole new array of options for communicating and sharing service delivery across our decentralized offices. One example is the ability to have a dedicated 'flu line' number ring in seven different offices to ensure a live answer.

A job analysis of the non-union, non-management staff was also undertaken this year. Our administrative support services have undergone rapid changes over the past number of years, due to new initiatives such as our CQI program and communications strategy and also to changes in technology including SharePoint, HRWare software, Internet telephone, Helpdesk and soon, a new website. Other factors included increasing requirements for occupational health and safety including a Work Well Audit, and the implementation of the new Ontario Public Health Organizational Standards.

Looking forward into next year, preparations are already in motion for Accreditation, which is scheduled for April. Preparations are also being made for our All Staff Conference which will be held in May in Dryden. Work is also moving ahead for our new website, which we plan to launch in conjunction with our All Staff Conference.

Also in May, Public Health Ontario will be visiting the Health Unit as part of its strategic planning process.

Fiscally, our 2012 expenditures are in line with what we budgeted at the beginning of the year. Revenues for 2013 are still an unknown. We will either have to use the reserves that we set aside for the City View and Sioux Narrows offices, or we won't, depending upon the Ministry of Health and Long-term Care's decision regarding our requested one-time funding

grants. We have been told that a favourable decision promising; but we will not hear until mid-December. Ministry officials have said they do not have any information regarding funding for next year – but not to expect much, if any, increase to our cost shared budget. We have already made the decision to not raise municipal levies, so our budgeting process for next year (and the year after at least) will involve doing more with roughly the same. I expect to present our 2013 budget at our February Board of Health meeting; but in the interim, we have already started implementing changes to help us move forward with controlling our costs.

Finally, I would like to take the opportunity to thank the Board of Health and Staff for the privilege of working for you this year, and to wishing all of you a wonderful Holiday Season and a New Year full of optimism and joy.

Verbal Update – Mark Perrault, CEO

Correction: Mr. Perrault clarified that the All Staff Conference will be held in April 2013 and not in May as recorded in his report.

Kenora City View Office – A successful Grand Opening for the City View Office Centre was held December 4, 2012. The public was invited to attend. Tours of the facility (former Mount Carmel School) were provided.

The formal media launch of the Northwestern Health Unit 2013-2016 Strategic Plan was also held at the event.

Northwestern Health Unit 2013 Budget: Municipalities will be notified that the Health Unit is preparing the 2013 budget with the municipal per capita levy to be maintained at \$54.33.

IT and Operations – Problems encountered with implementation of the VoiceOver IP (internet phone) system are being addressed. Reporting of costs for the new system and related telephone expenses (data transmission) is in process.

Implementation of Sharepoint intranet continues. Additional departments are being incorporated for on-line operations.

Motion / Resolution: 98-2012	
THAT the Report of the Chief Executive Officer be accepted as presented.	J. Roy J. Belluz

6.2 Finance Report – Provided by Mark Perrault

Reference # 2012-12-05-6.2

The report was distributed to the meeting. The new report format (template) was explained. Significant budget variances to date were reviewed.

A current focus for finance staff is on financial reporting formats and programming of financial software modules for enhanced and improved timely reporting.

Motion / Resolution: 99-2012	
THAT the Finance Report be accepted as presented.	D. Canfield S. MacKinnon

6.2.1 2011-2012 Annual Program Settlements/Reconciliations**6.2.1.1 Ministry of Children and Youth Services**

Motion / Resolution: 100-2012	
THAT the Board of Health accepts and approves the signing of the Ministry of Children & Youth Services settlement forms for the Student Nutrition Program for the period April 1, 2011-March 31, 2012.	M. Harland S. MacKinnon

6.2.1.2 Ministry of Health and Long-Term Care, Health Promotion Division

Motion / Resolution: 101-2012	
THAT the Board of Health accepts and approves the signing of the Ministry of Health and Long-Term Care Health Promotion Division settlement forms for the Smoke-Free Ontario Program for the period January 1, 2011-December 31, 2011; and for the Diabetes Prevention Program for the period April 1, 2011-March 31, 2012.	J. Belluz D. Canfield

6.2.2 Healthy Babies, Healthy Children Program New Public Health Nurse Position

Motion / Resolution: 102-2012	
THAT the Board of Health for the Northwestern Health Unit approves a new full-time public health nurse position, effective immediately, to support the delivery of the Healthy Babies, Healthy Children program. Full (100%) funding of \$100,000 for this position is provided by the Ministry of Children and Youth Services under the provincial '9,000 Nurses Commitment' initiative.	D. Canfield J. Roy

Board of Health members recessed at 10:30 a.m.
Mr. Albanese called the meeting to order at 11:00 a.m.

7. REPORT OF EXECUTIVE COMMITTEE MEETING, NOVEMBER 16, 2012

Julie Roy, Committee Chair, provided a verbal report of the Committee's meeting held November 16, 2012.

2013 Meeting Dates: Julie Roy conveyed the Committee's recommendation for a fixed meeting day of the month for the Board's 2013 meetings. Fourth Friday of the month was identified. Executive Committee meetings will be held two weeks prior to the Board meeting.

Discussion: Board of Health members discussed scheduling conflicts for municipal appointees.

Northwestern Health Unit 2013 Budget: Management will submit the 2013 draft consolidated budget to the Board of Health's February meeting. The budget will be prepared factoring the current municipal per capital levy (\$54.33).

Northwestern Health Unit Fleet: The Health Unit is considering acquiring a fleet of vans for use by staff whose work involves extensive travel. Consideration of economic and operational viability is being prepared.

Dental Pilot: A preliminary summary for the Big Grassy First Nation community pilot was provided to the Committee. A report of the Big Grassy and Sabaskong communities projects is being prepared for a meeting of federal (Health Canada), provincial, First Nations, and Health Unit officials on December 7. At the recent Association of Local Public Health Agencies (alPHA) Fall Symposium, Ministry of Health and Long-Term Care officials recognized the project as an example of collaborative activities being encouraged for public health units.

Financial Consultant: The Committee met with Richard Findlay, independent CGA, who has been contracted to provide consultative services.

Succession Planning: Consideration of a procedure for recruitment of/for the MOH and CEO positions and also for provision of short-term CEO coverage was referred to the Committee's next meeting.

7.1.1 2011-2012 Annual Program Settlements/Reconciliations

This agenda item was discussed during the Finance Report (6.2.1).

7.2 Healthy Babies, Healthy Children Program New Public Health Nurse Position

This agenda item was discussed during the Finance report (6.2.2).

7.3 In Camera Session

At 11:35 a.m. Board of Health members moved to an in camera session.

Motion / Resolution: 103-2012	
THAT the Board of Health moves to an in camera session to discuss: - <i>Personal matters concerning an identifiable individual, including municipal or Board employees</i> - <i>Litigation or potential litigation, including matters before administrative tribunals, affecting the Board</i>	J. Roy M. Harland

Dorothy Strain left the meeting 11:35 a.m.

Board of Health members moved out of the in camera session at 1:00 p.m.

Dorothy Strain re-joined the meeting at 1:00 p.m.

Motion / Resolution: 104-2012	
THAT the Board of Health moves out of the in camera session to resume regular business.	J. Belluz B. Thompson

The following motions arising from the in camera session were received:

Motion / Resolution: 105-2012	
THAT revisions to the organizational chart be approved as presented, effective December 5, 2012, for additions of the following manager positions: - Communications & HR Services - IT and Operations; and deletion of the following position: - Chief Financial Officer	B. Thompson P. Ryan

Motion / Resolution: 106-2012	
<p>THAT the Board of Health for the Northwestern Health Unit approves the creation of the following new positions, effective December 5, 2012</p> <ul style="list-style-type: none"> - Quality Improvement Officer - Planning Officer - Health Planner 	<p>S. MacKinnon J. Belluz</p>
Motion / Resolution: 107-2012	
<p>THAT the Board of Health for the Northwestern Health Unit approves adjustments to the 2013 non-union salary grid as presented, effective January 1, 2013.</p>	<p>J. Roy S. MacKinnon</p>
Motion / Resolution: 108-2012	
<p>THAT the Board of Health for the Northwestern Health Unit approves adjustments to the 2013 union (COPE) salary grid as presented, effective January 1, 2013.</p>	<p>J. Roy S. MacKinnon</p>
Motion / Resolution: 109-2012	
<p>THAT the report of the Executive Committee be accepted as presented.</p>	<p>D. Squires P. Ryan</p>

8. ASSOCIATION OF LOCAL PUBLIC HEALTH AGENCIES (aLPHa) CONFERENCES

8.1 Delegates’ Reports of aLPHa Fall Symposium, November 7-8, 2012

Board of Health delegates John Albanese, Doug Squires, and Julie Roy provided verbal reports. Russ Fortier submitted a written summary.

Keynote speaker was Leonard Domino, Government Relations Consultant. His message was that future government funding is uncertain. Economizing and ‘belt tightening’ should be expected. Ministry staff for 14 programs presented information and updates. Panel presentations from health units were provided, for strategic planning and scorecards.

The Ministry of Health and Long-Term Care announced audits of health units. Two audits will be conducted each year. Northwestern Health Unit volunteered to host an audit.

Delegates noted that there was no session on board of health governance issues, which would have been useful given the assemblage of board of health members, medical officers of health, and agency staff representatives.

8.2 alPHa Winter Symposium, February 14-15, 2013

Motion / Resolution: 110-2012	
<p>THAT the following Board of Health members be approved to attend the Association of Local Public Health Agencies (alPHa) Winter Symposium, February 14-15, 2013, in Toronto: <i>Chair, Vice-Chair</i> Expenses to be provided by the Northwestern Health Unit.</p>	<p>P. Ryan B. Thompson</p>

9. NOMINATING COMMITTEE, JANUARY 2013 BOARD OF HEALTH MEETING

Paul Ryan reviewed By-Law #1 (Board of Health Constitution) provision for executive elections at the first meeting of the new year [January 2013].

Motion / Resolution: 111-2012	
<p>That the following Board of Health members be appointed to the ad hoc nominating committee for the election of 2013 officers and membership to the Executive Committee at the 2013 January Board of Health meeting: <i>Paul Ryan</i></p>	<p>J. Belluz S. MacKinnon</p>

10. NON AGENDA ITEMS

10.1 Resignation of Board of Health Members

Dryden Councillor Shayne MacKinnon was recently appointed to the Board of Health as joint appointee for Dryden and Machin municipalities, following the resignation of Mel Fisher from Dryden Council in September 2012.

Margaret Harland’s resignation from the Board of Health as joint appointee for Red Lake and Ear Falls municipalities, effective December 31, 2012, was announced.

Appreciation was expressed for Mr. Fisher’s and Ms. Harland’s service to the Board of Health.

11. NEXT MEETING DATES, JANUARY 2013

Discussion:

A request for third Friday of January for the January 2013 meeting was made.

January 2013 Board of Health meeting

Date: Friday, January 18, 2013 Time: 8:30 a.m.

Location: Dryden

Executive Committee meeting

Date: Thursday, January 10, 2013 11:00 a.m.

Location: Kenora City View office Board Room

12. ADJOURNMENT

Doug Squires adjourned the meeting at 1:50 p.m.

BOARD OF HEALTH FOR THE NORTHWESTERN HEALTH UNIT:

CONFIRMED AS WRITTEN

THIS DAY OF2013

CHAIR, BOARD OF HEALTH

RECORDING SECRETARY