



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

**MEETING MINUTES**

Regular Board of Health Meeting  
Thursday, June 28, 2012  
Ear Falls Municipal Council Chambers

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**MEMBERS PRESENT:** John Albanese, Chair  
Jim Belluz, Dennis Brown, Russ Fortier, Margaret Harland, Julie Roy, Paul Ryan,  
Doug Squires, Bill Thompson

**PARTICIPATING:**  
Dr. Jim Arthurs, Medical Officer of Health (MOH)  
Alex Berry, CQI Coordinator  
Melanie Buffet-Gauthier, Senior Human Resource Officer (Recorder)

**REGRETS:** Dave Canfield, Mel Fisher, Mark Perrault

**1. CALL TO ORDER**

Chair John Albanese called the meeting to order at 8:30 a.m.  
Introductions were made:

- Alex Berry, CQI Coordinator (agenda #6, Northwestern Health Unit Annual Public Health Report Card);
- Melanie Buffet-Gauthier, Senior Human Resource Officer, meeting recorder for Cindy Crandall, Senior Administrative Assistant.

**2. APPROVAL OF AGENDA**

|                                                                                   |                   |
|-----------------------------------------------------------------------------------|-------------------|
| <b>Motion / Resolution: 64-2012</b>                                               |                   |
| THAT the Agenda for the Board of Health meeting dated June 28, 2012, be approved. | J. Roy<br>P. Ryan |

**3. DECLARATIONS OF PECUNIARY INTEREST & GENERAL NATURE THEREOF**

None was declared.

**4. MINUTES OF BOARD OF HEALTH MEETING, April 20, 2012**

|                                                                                            |                       |
|--------------------------------------------------------------------------------------------|-----------------------|
| <b>Motion / Resolution: 65-2012</b>                                                        |                       |
| THAT the Minutes of the Board of Health meeting held May 25, 2012, be approved as written. | P. Ryan<br>M. Harland |

## 5. SENIOR MANAGEMENT REPORTS

### **Medical Officer of Health Report - Dr. Jim Arthurs, Medical Officer of Health (MOH)**

*During the preparation period for this report Dr. Arthurs provided on-site coverage for Dr. Jim Chirico, MOH, North Bay Parry Sound District Health Unit. Dr. Arthurs' management report will be provided to the Board of Health meeting on June 28, 2012.*

[Refer to 5.1, Medical Officer of Health Report, page 8]

### **CQI Coordinator Report**

*Submitted by Alex Berry, CQI Coordinator*

Continuous Quality Improvement Program – January to May 2012

#### Strategic Planning

The strategic planning consultations were completed between March and May. All Board of Health members and agency staff had the chance to provide input into the next strategic plan. A report including the input from all front-line staff and Board of Health members was prepared and posted to Sharepoint, accessible to all staff.

Participants were asked to complete evaluations at each consultation session. One hundred and twenty-five (125) evaluations were completed.

- 100% of respondents "agreed" or "strongly agreed" with the statement "The process encouraged participation."
- 87% of respondents "agreed" or "strongly agreed" with the statement "I understand the current NWHU strategic planning process. "
- 86% of respondents "agreed" or "strongly agreed" with the statement "I understand how I can participate in the strategic planning process."

Generally, staff reported that they appreciated being able to have direct input into the strategic planning process and asked to be kept informed of the process through Sharepoint.

The Strategic Planning Working Group met in May and will meet again in June to outline the core content of the 2013-16 strategic plan. A working draft document will be shared with the Board for initial feedback at its August meeting and with the staff via SharePoint.

We are on track to present a final draft to a joint Board of Health / management meeting in September and a final version for approval at the November meeting of the Board of Health.

#### Accountability Agreements and 2012 Targets

We are waiting to hear from the Ministry regarding reporting requirements for 2012 related to the targets approved by the Board of Health at its February meeting.

### Accreditation

The Ontario Council on Community Health Accreditation (OCCHA) was in here (in Kenora) on May 31 for our 2012 annual review. We met all the requirements for accreditation. We will begin preparing for the spring 2013 full re-accreditation submission and review over the summer.

An important by-product of our accreditation work has been that we have developed data collection systems for other similar audits of health unit processes. We are using our experience with accreditation to prepare for the Work Well Audit (Ministry of Labour) and for the Baby-Friendly Initiative, one of the indicators in the new Accountability Agreements. Both those processes include an audit of health unit policies, procedures and practices by an external body.

### Public Health Report Card

We are pleased to present the 2012 Public Health Report Card (PHRC) to the Board of Health. The PHRC reports on health unit activities in 2011 contributing towards achievement of the objectives outlined in the 2010-2012 Strategic Plan and the targets outlined in the new Ministry Accountability Agreements.

Once received by the Board of Health, the PHRC will be distributed to our funders and community partners. Similar to last year, we will be evaluating the PHRC to see how it can be improved in future years.

### CQI – Team Projects

Every health unit team (i.e., Program teams, Finance, HR and IT) will complete at least one CQI project each year, above and beyond the more general evaluative work already taking place. The following projects are being undertaken in 2012:

- Chronic Disease & Injury Prevention – is working on a team monitoring and reporting system where each staff person can enter their activities and service statistics directly into SharePoint. The system will then automatically consolidate the data from these individual files into a team summary, available in real-time to the manager.
- Enforcement – is reviewing and revising their team procedure manual. Discussions in this project regarding how to best structure an on-line procedure manual will contribute to future work across the agency as we rationalize the policy and procedure system in the health unit.
- Sexual Health – is developing an anonymous client coding system for the needle exchange / harm reduction program. This will then allow us to develop a more robust monitoring and reporting system for the program and the ability to tailor services to clients based on their service usage.
- Dental – will be phasing in the implementation of the provincial OHISS on-line stats system. Eventually all health units will be required to use the OHISS system. By starting now with health Educators, we can improve our ability to monitor and report on program activities and make the transition to the new system more manageable.
- Family Health – is developing a SharePoint-based system to collect data from new moms regarding breastfeeding initiation rates and other services. We need to call new moms at specific intervals to comply with Baby Friendly Initiative (BFI) status (e.g., 2 weeks, 2 months, 4 months) and the new on-line system will not only store the info that we collect but will alert staff regarding who needs to be called when.

- Communicable & Infectious Disease – is reviewing service delivery models for the annual influenza immunization program. They are documenting the up-dated service objectives and developing new data collection forms so that the flu immunization program can be better evaluated in future years.
- Speech, Hearing & Vision –is investigating who we're "missing" for the 2-week infant hearing screens. This will be done by asking new moms who use and don't use the service why they are or are not using the service. This information will allow us to increase future screening coverage rates.
- Finance – will evaluate the roll-out of the SharePoint Purchase Order system which is intended, in part, to save staff time in the processing of financial paperwork.
- Human Resources – is working on building and then implementing a system to prepare the health unit for a Work Well Audit by the Ministry of Labour.
- Information Technology / Services – developed a team operational plan with the direct input of front line IT staff and the management team.
- Foundations – is investigating client feedback or satisfaction mechanisms that can be used as part of the evaluation of Foundations team services and that may be useable across the health unit generally.

### **Dental Program**

*Submitted by Dawn Sauvé, Manager, Dental Health*

#### Healthy Smiles Ontario (HSO)

Our Healthy Smiles Ontario campaign has continued into 2012 with various promotional activities throughout the district. Although the eligibility criteria are quite strict, we continue to be pleased with how the program is flourishing in our area. Our team continues to promote the program and enroll clients. As of the end of May we had 112 clients signed up. From January 1, 2012, to April 30, 2012, a total of 36 days of dental treatment services were provided in the community clinics. In total, 98 clients received treatment with 165 visits overall and 472 procedures being performed in the community clinics in Ignace and Pickle Lake.

There was a combination of Healthy Smiles Ontario (HSO), Ontario Works (OW), Children in Need of Treatment (CINOT), Ontario Disability Support (ODSP) and Non-Insured Health Benefits (NIHB) clients.

During the month of May the Mobile Dental Office (MDO) commenced treatment in the Rainy River district. Dental services have been completed for this area and the MDO will be moving to Fort Frances starting on June 18. We anticipate a very busy schedule for this community.

We are still in discussions with the Ministry of Health and Long-Term Care to obtain clear guidelines on the proper usage of the \$400,000 state-of-the-art MDO.

#### Community Water Fluoridation

All four fluoridating communities in the Northwestern Health Unit's catchment area are working well within the optimum fluoridation ranges, and continue to be monitored by us each month.

Dr. Arlene King, Chief Medical Officer for Ontario, recently said that water fluoridation is one of the most cost-effective interventions that exist, and water fluoridation is the number one recommendation in her recent report, *Oral Health – More Than Just Cavities*.

Community water fluoridation continues to be an effective and excellent public health method to reduce the severity of tooth decay in all ages by 20 to 40%<sup>1</sup>.

### Annual Dental Meeting

On June 6 -7, 2012, our team had a very successful annual Dental Health Team meeting at Cedar Point Lodge. Mark Perrault, CEO, and Karen Pries, Health Promoter Intern student, joined us on the first day; and Alex Berry, Continuous Quality Improvement Coordinator, on the second day.

Overall, many good public health discussions took place. It was agreed the standards set in the Northwestern Health Unit's dental health programs are very high. We introduced a revised screening protocol in 2008, and a recent review of this change has demonstrated that our delivery of preventive dental services has doubled since 2008. We will continue to monitor program statistics to determine if this approach helps to reduce the very high decay levels in northwestern Ontario. The change uses the more cost-effective health educator position to provide more screenings, allowing hygienists to perform more preventive services (fluoride varnishes, sealants and scalings).

This presentation and discussion led very nicely into Dr. Arlene King's report and our future program direction. Much discussion took place around the importance of clinical interventions such as dental sealants, increasing fluoride availability through community water fluoridation, fluoride varnish, and tooth brushing with fluoridated toothpaste to increase host-resistance to disease. Discussion also took place on cost-effectiveness of different publicly funded oral health programs, Children's Oral Health Initiative (COHI), etc. We feel the Northwestern Health Unit is well supported by science regarding best practice models and tripartite cooperation.

Presentations from Karen and Alex along with team discussion were very productive.

### Children's Oral Health Initiative (COHI) and Annual Report

Last month a three-year agreement for COHI was signed to continue delivering disease prevention and health promotion services to First Nations communities.

We are now entering our seventh year of providing services. We will continue to collect baseline epidemiological data that will be used to implement and evaluate the programs and determine trends in oral disease.

Our team continues to work hard to help eliminate dental health disparities and access issues. We look forward to continued service delivery in these communities in order to promote good oral health practices and to raise awareness about the prevention of dental disease.

### University of Manitoba Students

In 2009 we started a partnership with the University of Manitoba to mentor two second-year dental hygiene students. The program is now in its third year. In March two students had the

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<sup>1</sup> American Dental Association ([www.ada.org](http://www.ada.org)). *Fluoridation Facts: Celebrating 60 Years of Water Fluoridation*. 2005. Executive Summary, p.4

opportunity to travel north and shadow our public health dental hygienist and health educator.

This continues to be an excellent opportunity to educate the university students about public health. It has proven to be an excellent partnership for both public health and the University of Manitoba. We will continue with this initiative as it shows recognition by the academic community of the standard of programs being delivered by our Health Unit.

### **Chief Executive Officer Report**

*Submitted by Mark Perrault, Chief Executive Officer*

#### Kenora Office Move

During the past month we have been busy preparing for the Wolsley office move. Timelines are still on track and we have started communicating our key messages to the public, which include:

*Effective Monday, July 30, Northwestern Health Unit services will no longer be located at 21 Wolsley Street.*

*We look forward to welcoming you at our new address, 210 First Street North, on Tuesday, August 7, 2012.*

*We will work hard to ensure a seamless transition for clients and partners during the week we are closed.*

*The services currently offered at our Market Square location will NOT be affected by this move.*

#### Association of Local Public Health Agencies (alPHA) Conference

I attended the Association of Local Public Health Agencies (alPHA) AGM and Conference, June 10-12, in Niagara Falls along with four Board of Health members. I am happy to announce that Russ Fortier, public appointee to our Board of Health, was elected to alPHA's Board of Directors as the representative for the North West Region, which comprises Thunder Bay District and Northwestern Health Units.

Over the past number of years we (and at least nine other health units) have identified several needed changes to alPHA's constitution to reflect the new management structures of Boards of Health, which now include the separation of the MOH and CEO positions, Chief Nursing Officers, Information Technology, Human Resource and Privacy managers or professionals that are not reflected in alPHA's current structure.

"Doing more with less (or the same)" was certainly a key message delivered by the Ministries of Health and Long-term Care and Children and Youth Services. While there was no hint of budget cuts, the growth rate of public health expenditures will be slowed down due to the Ontario economy. We were informed that our 2012 funding letters have been produced and are waiting for signatures. We should be receiving them by the end of June.

One of the conference highlights for me was an interactive session with Sylvia Shedden, Director, Public Health Standards, Practice and Accountability Branch (Ministry of Health and Long-Term Care – ‘Ministry’) and Liam Scott, Legal Counsel for the Ministry, who provided an overview of health unit funding history and boards’ of health and municipalities’ legal responsibilities.

At the Resolution session of the conference there were some spirited debates on topics such as bicycle helmets for all ages (passed); Gardasil vaccination for boys (passed as amended to include all students from grade 8 to grade 12, with a recommendation to look at grade 7); transfer of oversight of Healthy Babies, Healthy Children and Preschool Speech Programs from Ministry of Children and Youth Services to the Ministry of Health and Long-term Care (tabled for review); and mandatory physical education classes for every grade up to and including grade 12 (tabled for review).

## **Finance Report**

*Submitted by Lois Bailey, Chief Financial Officer*

Total revenues for the four months ending April 30, 2012, are \$5,007,027 (including a carry-over of funding from 2011 of \$109,591) and total expenditures \$4,831,816 resulting in an excess of revenues over expenditures of \$175,211. The cost shared programs (not including Healthy Babies, Healthy Children) are reporting a surplus of \$163,906; whereas the 100% funded and other programs are contributing an additional \$11,304 to the surplus.

The carry-over of funding relates to revenue that was deferred at the end of 2011 for specific projects and programs including Diabetes Strategy, Speech and Hearing programs, Student Nourishment program, and the VoIP (Internet Phone) project, \$50,320.

### Cost Shared Programs

A review of the actual year-to-date funding related to Cost Shared Programs and Unorganized Territories indicates a net shortfall of \$217,920 compared to budget. Until such time as the Ministry of Health and Long-Term Care approves the 2012 budget, a variance will continue to grow as funding is recorded on a cash basis. In the expenditure categories, most variances are either reasonable or explainable. A \$209,985 combined variance from salaries (\$193,015) and benefits (\$16,970) are related to gapped positions and the Public Sector Salary freeze. As long as there are gapped positions the variance will continue to exist and grow. Presently there are two public health inspector vacancies, a nursing position and the communication advisor remains unfilled. A variance of \$107,539 and \$47,205 in one-time expenses exists as new projects have not started. Expenditures to-date include \$44,781 in final costs related to the VoIP project.

### 100% Funded Programs

As per the report titled “100% Funded Programs”, total revenues for the year are \$1,203,399 compared to the budget of \$1,141,423 (an excess of \$61,976) and include \$40,059 in third party revenues from the mobile dental program (Healthy Smiles Ontario) and a carry-over of \$59,271 in funding from 2011. Actual expenditures for all 100% funded programs are \$1,192,095 compared to the budget of \$1,152,570; a difference of \$39,525

that is primarily related to expenses for program supplies and services. Due to the nature of the Student Nutrition Program, transfer payments to schools occur at different times than funding received.

### **5.1 Medical Officer of Health Report – Provided by Dr. Arthurs**

Dr. Arthurs provided a verbal report to the meeting. Summary notes for his report were distributed, and are on file.

#### Medical Officer of Health Coverage for North Bay Parry Sound District Health Unit

Dr. Arthurs provided background to the formaldehyde spill that occurred within the catchment area of North Bay Parry Sound District Health Unit (NBPSDHU) while he was providing vacation coverage for Dr. Jim Chirico, Medical Officer of Health.

In response to a request from NBPSDHU senior staff, Dr. Arthurs travelled to North Bay to provide on-site coverage during the week of June 10-16 to address issues concerning communication of roles and responsibilities among municipal, community and provincial agencies and organizations that arose following the spill and remain ongoing.

Dr. Arthurs commented upon the importance of emergency preparedness training for all levels of municipal and community organizations. Northwestern Health Unit management and administration staff have received basic training in the Incident Management System (IMS) (provincial emergency preparedness protocol). Training for enforcement staff and Board of Health Executive Committee members is being considered.

#### Dental Program Report, Management Report (page 3)

The number of eligible clients in this region for the Healthy Smiles Ontario (HSO) initiative remains low. Dr. Arthurs is involved in discussions with provincial, federal and First Nations representatives regarding a pilot project involving partnership with Health Canada to make services of the dental van available to First Nations clients.

Discussion ensued regarding eligibility requirements for the HSO program. Julie Roy reported that at a recent teleconference with Ministry of Health and Long-Term Care, officials advised that the Ministry will not be revising the eligibility income 'threshold' during the next three years.

#### Discussion, Questions

Cable TV Community programs: Discussion ensued regarding making Kenora's daily community program available to other regional communities that are serviced by the cable provider. Health Unit staff will be following up with the cable provider.

Medical Officer of Health (MOH) Coverage: Discussion ensued regarding arrangements for MOH vacation/on call coverage among northern Ontario units, and related concerns for 'surge capacity' during emergencies or unanticipated situations. Dr. Arthurs will be raising this topic for discussion at the northern medical officers of health fall teleconferences.

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|----------------------------------------------------------------------------|-------------------------|
| <b>Motion / Resolution: 66-2012</b>                                        |                         |
| THAT the Report of the Medical Officer of Health be accepted as presented. | J. Belluz<br>D. Squires |

**5.2 Chief Executive Officer Report**

John Albanese conveyed CEO Mark Perrault’s regrets for the meeting.

Finance Report: Julie Roy informed that notification of 2012 funding from the Ministry of Health and Long-Term Care is imminent. The Ministry has not provided details to date.

Kenora Office Move: Melanie Buffet-Gauthier confirmed that renovations are on schedule for the City View building. The move from Wolsley office is scheduled for the week of July 30- August 3.

Contract Epidemiologist Position: Dr. Arthurs provided background for management’s decision to create a contract epidemiologist position to provide short-term support for the full-time epidemiologist.

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|--------------------------------------------------------------------------|--------------------------|
| <b>Motion / Resolution: 67-2012</b>                                      |                          |
| THAT the Report of the Chief Executive Officer be accepted as presented. | D. Squires<br>R. Fortier |

**6. PRESENTATION: NWHU ANNUAL PUBLIC HEALTH REPORT CARD**

Alex Berry, CQI Coordinator, distributed the Northwestern Health Unit’s Annual Public Health Report Card (2011) and provided an accompanying presentation. He described the distribution list and process for the Report.

**6.1 Medical Officer of Health Report - Additional Items provided by Dr. Arthurs**

Social Determinants of Health Video: Northwestern Health Unit’s adaptation of Sudbury & District Health Unit’s video, *Let’s Start a Conversation About Health...And Not Talk About Health Care at All* is available on ‘You Tube’. Dr. Arthurs recommended it be shared with municipal councils and committees.

Partnerships and Collaborations: Dr. Arthurs described recent meetings and interactions with primary care facility administrators in Atikokan, Fort Frances and Kenora. Communications will be followed up for opportunities for ongoing communication and cooperation.

**Meeting Break**

A recess was called at 10:30 a.m.

Ear Falls municipal office staff members and Red Lake media representative joined Board of Health members for the morning break. A short walk was taken, guided by Ear Falls Health Unit office Health Educator Glenna Wigle.

John Albanese called the meeting to order at 11:00 a.m.

**7. STRATEGIC PLANNING UPDATE**

Russ Fortier reported that the Strategic Planning Working Group’s final meeting was held on June 27. The draft strategic plan document will be posted for staff feedback prior to the Board’s review at the Board of Health meeting on August 10. The final document will be brought to the Board’s September education session for final review. He expressed appreciation to Alex Berry, CQI Coordinator, for his expert facilitation of the strategic planning process.

**8. ASSOCIATION OF LOCAL PUBLIC HEALTH AGENCIES (aPHa) CONFERENCE, JUNE 10-12**

**8.1 Delegates’ Reports**

Board of Health delegates John Albanese, Doug Squires, Russ Fortier and Julie Roy provided written or verbal reports of their attendance, and described highlights.

**8.2 Update: NW Region representative to aPHa Board of Directors**

Russ Fortier was elected to the aPHa Board of Directors as the North West Region representative at aPHa’s Boards of Health Section meeting held June 12. The North West region comprises Northwestern and Thunder Bay District Health Units. Mr. Fortier’s term extends two years. He expressed appreciation for the Board’s support during the election process.

**9. OUT OF COUNTRY CONFERENCE (STAFF)**

Dr. Arthurs explained that the request is being submitted for Board of Health approval prior to the conference’s published agenda because of the considerable savings available for early registration.

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| <b>Motion / Resolution: 68-2012</b>                                                                                                                                                                                                                                                                                                                                                              |                               |
| <p>THAT the Board of Health authorizes Lee Pitt, Information Services Coordinator, Alex Berry, Continuous Quality Improvement Coordinator, and Pam Baxter, Administrative Assistant, to attend the Microsoft Sharepoint Conference 2012, Las Vegas, Nevada, November 12-15, 2012. Expenses for this Conference will be provided by administration funds designated for continuing education.</p> | <p>J. Roy<br/>B. Thompson</p> |

**10. NON AGENDA ITEMS**

Congratulations were extended to Sioux Narrows-Nestor Falls municipality upon their new municipal facility. Board members were encouraged to visit it.

Discussion arose regarding the importance physical activity in schools. It was noted that daily physical activity is a curriculum requirement that is often not complied with. The important role health units can play to promote it was a prominent topic of discussion and debate at the recent aPHa Conference.

**11. NEXT MEETING DATES**

**Regular August Board of Health meeting**

Date: Friday, August 10 Time: 8:30 a.m.

Location: Dryden Holiday Inn Express Meeting Room

**Executive Committee meeting**

Date: Tuesday, July 24 Time: 11:00 a.m.

Location: Dryden NWHU Board Room

**12. ADJOURNMENT**

Margaret Harland adjourned the meeting at 11:20 a.m.

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

**CONFIRMED AS WRITTEN**

**THIS ..... DAY OF .....2012**

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**CHAIR, BOARD OF HEALTH**

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**RECORDING SECRETARY**