

**HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT
BOARD OF HEALTH MEETING**

April 20, 2023

MINUTES

The meeting was convened by Mr. Marshall at 9:29 am at the Health Unit's Port Hope office.

Those in attendance were Messrs. Marshall, Crate, Logel (left at 11:10 am), Ryall, and Perry (via Teams), Dr. Hankivsky, Mrs. Richardson, Dr. Bocking, Mr. Bernett, and Mrs. Dickson (Recorder).

Ms. Beaulac (Health Unit) was absent with regrets.

1. LAND ACKNOWLEDGEMENT

The Haliburton, Kawartha, Pine Ridge District Health Unit is situated on the traditional territories of the Michi Saagiig and Chippewa Nations. This includes the territories of Treaty 20 and Williams Treaties. We respectfully acknowledge that these Nations are the stewards and caretakers of these lands and waters for all time and that they continue to maintain this responsibility to ensure their health and integrity for generations to come.

The Haliburton, Kawartha, Pine Ridge District Health Unit recognizes the many harms done to Indigenous peoples and our collective responsibility to right those wrongs. As an organization that is rooted in a colonial system, we are committed to change, to building meaningful relationships with Indigenous communities and in improving our understanding of local Indigenous peoples as we celebrate their cultures and traditions, serve their communities, and responsibly honour all our relations.

2. ADOPTION OF AGENDA

Moved by Dr. Hankivsky

Seconded by Mrs. Richardson

THAT the agenda be adopted as presented.

2023-51

carried

3. DECLARATION OF CONFLICT OF INTEREST (David)

None

4. ADOPTION OF MINUTES

Moved by Mr. Crate

Seconded by Dr. Hankivsky

THAT the minutes from the March 16, 2023 meeting be approved.

2023-52

carried

5. BUSINESS ARISING

None

6. MEDICAL OFFICER OF HEALTH UPDATES

Communicable Disease Prevention and Control:

- *Immunization of School Pupils Act (ISPA)*
 - 2nd letters to students/guardians not in compliance with the ISPA were sent out at the end of March
- COVID-19
 - Ongoing low-moderate community transmission
 - 18 deaths and 74 hospital admissions attributed to COVID-19 in 2023
 - Spring COVID-19 vaccination booster campaign
- Sexual health clinics – soft launch of e-booking system

Environmental Health:

- Commencing inspections for summer camps
- Preparing to begin tick dragging in areas not yet endemic for Lyme disease
- Media release related to avian influenza

Injury Prevention and Substance Use:

- Presentation to Northumberland County Council on opioid overdose crisis and harm reduction
- Opioid Overdose Alert issued April 14

Foundational Standards:

- Launch of Continuous Quality Improvement framework (March)
- Launch of Customer Experience Pledge and Standards

Communication Services

- Website redesign and development in progress. Go live date: July 2023

- Recent & Upcoming Campaigns
 - Oral Health Month (April)
 - Infant Safe Sleep Campaign (March 13-17)
 - Prenatal Mental Health (ongoing)
 - Climate Change (coming in May)
 - Emergency Preparedness (ongoing)

Dr. Hankvisky requested that campaigns be shared with Board members and obligated municipalities so they may assist in sharing messaging.

Moved by Mr. Logel

Seconded by Mr. Ryall

THAT the Medical Officer of Health updates be received for information.

2023-53
carried

7. REPORTS

7.1 Lisa van der Vinne, Continuous Quality Improvement Coordinator, presented to the Board about the Health Unit's Customer Experience Standard

The Ontario Public Health Standards (OPHS) require boards of health to “ensure a culture of quality and continuous organizational self-improvement that underpins programs and services and public health practice, and demonstrates transparency and accountability to clients, the public, and other stakeholders”. Listed as part of this requirement is the measurement of client, community, community partner and stakeholder experience to inform transparency and accountability.

In order to support fulfillment of this OPHS requirement, the creation of a client engagement strategy was incorporated into the third strategic priority (DELIVER) of the HKPR District Health Unit's Strategic Plan. One of the associated goals with this strategic priority is to improve client-centered services and accessibility.

The Customer Experience Standard is intended to establish a shared organizational standard for employees that outlines the expectations for customer service. Implementation of this standard will enable the Health Unit to measure, monitor, report and implement improvements related to customer experience.

The HKPR District Health Unit Customer Experience Standard has two components: an internal standard for employees and a public facing Pledge which applies to clients, community, partners, and the public.

The Pledge

At HKPR District Health Unit, our values are trust, engagement, accountability, and leadership. Our pledge is to:

- Treat you with courtesy and respect.
- Listen and work with you to best meet your needs.
- Respond in a timely manner.
- Make health information easy to understand.
- Make our programs and services as inclusive and accessible as possible.
- Keep your personal information safe.
- Make improvements based on feedback that you provide.

The public facing Pledge will be launched in summer of 2023.

Moved by Mrs. Richardson

Seconded by Mr. Perry

THAT the Board of Health endorse the HKPR District Health Unit Customer Experience Standard, including the public facing Pledge and the 10 Standards for employees.

2023-54
carried

7.2 Opioid Overdose Crisis (Dr. Bocking)

The opioid drug poisoning crisis is a growing public health concern. There has been a steady increase of opioid overdose deaths across the province. Local data shows that there were 28 toxic opioid deaths within the County of Haliburton, City of Kawartha Lakes, and Northumberland County from January to September 2022, and 249 emergency department visits related to opioid overdose in 2022. Opioid overdose deaths and emergency department visits were at their highest count in 2021 during the peak of the COVID-19 pandemic. Toxic supply is a contributing factor to drug poisoning. Potent opioids such as Fentanyl can be found in over 80% of the drug supply across the province, and locally Fentanyl has been the predominant opioid involved in unintentional overdose related deaths since 2017.

The HKPR District Health Unit is mandated through the Ontario Public Health Standards and Substance Use Prevention and Harm Reduction Guideline to deliver harm reduction and substance use prevention public health programming. Harm reduction refers to policies, programs and practices that aim to reduce the adverse health, social and economic consequences associated with substance use. A harm reduction approach is evidence-informed and client-centred to reduce the health and social harms associated with substance use without requiring individuals to abstain from drug consumption.

Mandated programs include the Harm Reduction Enhancement Program that requires the Health Unit to implement a local opioid overdose response, establish a surveillance system, and lead naloxone distribution programming in the community; the Needle Exchange Program that establishes community disposal kiosks, and distributes needles and inhalation equipment in collaboration with community partners, and Health Promotion programming that enhances public awareness of harm reduction and works to establish the Haliburton, Kawartha Lakes, Northumberland (HKLN) Drug Strategy to identify evidence-informed comprehensive prevention and harm reduction strategies to address the growing opioid poisoning crisis.

Four Policy Solutions to Reduce Drug Poisoning Deaths and Injuries in Ontario

In April 2022, the Drug Strategy Network of Ontario (DSNO) published four policy solutions to reduce the harms experienced by people who consume unregulated drugs. The DSNO policy solutions are action-oriented and reframe the drug poisoning crisis as a solvable problem. The policy solutions include:

1. Addressing the urgency of the opioid crisis;
2. Expanding evidence-informed harm reduction and treatment practices throughout Ontario;
3. Eliminating the structural stigma that discriminates against people who use drugs; and
4. Increasing investments in prevention and early intervention services that provide foundational support for the health, safety and well-being of individuals, families, and neighbourhoods.

HKPR District Health Unit has aligned prevention and harm reduction programming to each policy solution outlined by the DSNO. In addition, the Health Unit continues to support and collaborate with the HKLN Drug Strategy. The HKLN Drug Strategy includes more than 50 regional and local organizations.

The HKPR District Health Unit has several initiatives planned for 2023 to further strengthen supports across the four policy solutions. This includes:

- Collaborating with the HKLN Drug Strategy to develop and complete a comprehensive overdose prevention needs assessment and feasibility study for sanctioned consumption services, including exploring a drug checking program.
- Collaborating with provincial and local police services and community partners to re-focus efforts on decriminalization and establish diversion pathways to treatment programs.
- Collaborating with community partners to ensure that people with lived and living experience are involved in harm reduction program development and evaluation.
- Enhancing awareness of drug poisonings in the community by providing local opioid overdose and death data and continuing to issue community opioid overdose alerts, including piloting real-time surveillance data published through the HKPR District Health Unit Know More Overdose Surveillance Dashboard.

Consumption Services – Needs Assessment and Feasibility Study

The first step in seeking a federal exemption and provincial funding for consumption services involves demonstrating community need. Community needs assessments are multi-faceted and must involve individuals who use substances in addition to collaboration across multiple organizations and sectors.

HKPR District Health Unit is exploring different strategies to facilitate a community needs assessment for consumption services across all three geographic regions that we serve. Similar to other smaller, more rural health units, we do not have the internal capacity to coordinate such a large and complex community needs assessment without redeploying significant human resources from other public health programs and services. However, other health units have had success in working with third party consultants to assist in the coordination and implementation of the needs assessment.

A successful community needs assessment will require the support and endorsement of many organizations including municipalities, community-based organizations, and individuals impacted by substance use and drug poisonings. It is important that any such community needs assessment be completed as part of collaborations with and the work of the regional and local drug strategies. The needs assessment should also have a broad scope to assess a variety of overdose prevention strategies not limited to fixed sanctioned consumption and treatment sites.

Dr. Hankivsky indicated that her council is eager to learn what role they may be able to play in supporting strategies. Dr. Hankivsky and Health Unit representatives will meet to discuss a proposal to put forth to the Municipality of Port Hope Council.

Moved by Mr. Ryall

Seconded by Dr. Hankivsky

THAT the Board of Health endorse the Drug Strategy Network of Ontario policy solutions to reduce drug poisoning deaths and injury in the regions of HKPR District Health Unit.

2023-55
carried

8. NEW BUSINESS

8.1 Strategic Plan

The current HKPR District Health Unit Strategic Plan runs from 2019 to 2023. Although the Health Unit has had success in advancing several strategic priorities associated with this plan, focus on the COVID-19 pandemic delayed implementation of some initiatives. Lessons learned from the pandemic have been incorporated into the existing strategic plan to ensure that strategic priorities reflect the current landscape.

Moved by Mr. Logel

Seconded by Mrs. Richardson

THAT the Board of Health approve an extension of the current HKPR District Health Unit Strategic Plan until 2024.

2023-56
carried

8.2 2023 Budget

An initial 2023 budget was approved by the Board at the October 2022 Board of Health meeting; however, adjustments were made to the budget submitted as part of the 2023 Annual Service Plan (ASP) based on 2022 Q4 actual spending.

The HKPR District Health Unit's budget submitted as part of the 2023 ASP is \$23,749,702, which is less than the original \$25,107,620 that was approved in October 2022.

Reductions in one-time funding requests to the Ministry of Health for COVID-19 related expenses account for the majority of the budget decrease. The amount included in the 2023 ASP Budget is the amount that was communicated to the three obligated municipalities and reflects a 0% increase.

Moved by Dr. Hankivsky

Seconded by Mr. Perry

THAT the Board of Health approve the revised 2023 Budget in the amount of \$23,749,702.

2023-57
carried

8.3 Unaudited Operating Statements: January – March 2023

Unaudited operating statements have been provided for January, February and March 2023. The statements reflect the 2023 budget submitted to the Ministry of Health as part of the Annual Service Plan.

In summary, for the first quarter of fiscal 2023, the statements show a deficit from operation of \$1,016,047.

Variance Analysis

- The province has not released one-time funding yet this year in the areas of Mitigation Funding (\$193,325), School Focused Nurses Initiative (\$100,000), COVID-19 Extraordinary Costs (\$280,136), and COVID-19 Vaccine Program (\$298,706). As such, 21.4% of income has been received for the first quarter. This will be corrected once the Ministry of Health releases this funding.

- The first quarter includes an extra pay period as well as vacation payouts from the previous year. As such, expenditures associated with salaries and benefits appear to be overspent but will be balanced later in the year.
- Expenditures related to supplies appears underspent however most program areas purchase supplies later in the year.
- Expenditures related to communications appear overspent as our telephone provider was paid for the whole year in January.
- Occupancy costs appear overspent as April rent for Port Hope was paid in March.

Moved by Mr. Logel

Seconded by Mrs. Richardson

THAT the Board of Health receive the briefing note as well as the unaudited operating statements for January, February and March 2023 for information.

2023-58
carried

8.4 2022 Health and Safety Report

Dr. Bocking shared a report with the Board which listed key initiatives, training activities, and incident reports in order to demonstrate compliance with the *Occupational Health and Safety Act* (OHSA) for the year 2022.

THAT the Board of Health receive the 2022 Health and Safety Report for information.

2023-59
carried

8.5 Changes to Approval Process for Certain Policies

The *Ontario Public Health Standards: Requirements for Programs, Services, and Accountability* (OPHS) outlines requirements for Boards of Health regarding the creation of policies and procedures. There are currently 89 policies and procedures that require Board of Health approval and 167 policies and procedures that may be approved directly by the Medical Officer of Health. On review of the OPHS, Health Unit staff have identified 10 policies and procedures that could be transitioned to only require approval by the Medical Officer of Health.

Moved by Mrs. Richardson

Seconded by Mr. Logel

THAT the Board approve the following policies be approved by the Medical Officer of Health on a go forward basis:

- Community Partnerships
- Participation on Boards, Committees, Coalitions, and Work-Related Meetings

- Communicating with the Public
- IT Support
- Email
- Network Backup
- Purging Data
- Orientation
- Student Placements
- Potassium Iodide

2023-60
carried

9. BUSINESS FROM BOARD MEMBERS

9.1 Board Committees

Mr. Marshall proposed the the Board of Health establish a Governance Committee and a Finance and Audit Committee. The [“Good Governance and Management Practices” domain of the Ontario Public Health Standards](#) states that, “Boards of health are held accountable for executing good governance practices to ensure effective functioning of boards of health and management of public health units.” Committees of the Board of Health would assist the Board as a whole in fulfilling its oversight responsibilities for fiduciary, legal and regulatory requirements. Currently, the Board of Health does not have any committees.

Discussion points included:

- Municipal members have a number of obligations
- Revisit the terms of reference and the number of meetings
- Consider virtual meetings, with the dates being decided by the people that are on the committee.
- Could increase time to current meeting dates, or have a committee of the whole agenda item.

Mr. Marshall asked the Board to review the terms of reference for each committee and deferred a decision until the May Board of Health meeting.

10. CORRESPONDENCE (David and Dr. Bocking)

Moved by Mr. Perry

Seconded by Mrs. Richardson

THAT the following correspondence be received and filed:

- Ontario Public Health Association – Ontario 2023 Budget Summary
- Association of Local Public Health Agencies – March Information Break

2023-61
carried

11. IN-CAMERA SESSION

Moved by Mr. Crate

Seconded by Mr. Ryall

THAT the Board of Health move in-camera to review the closed session minutes from the March 16, 2023 meeting, a personnel item, and a property item.

2023-62
carried

Moved by Mr. Crate

Seconded by Mrs. Richardson

THAT the in-camera be dissolved, and the membership return to the Board of Health open session.

2023-63
carried

Moved by Dr. Hankivsky

Seconded by Mr. Ryall

THAT the Board of Health approve the in-camera minutes from March 16, 2023.

2023-64
carried

Moved by Mr. Perry

Seconded by Mr. Crate

THAT the Board of Health receive the information provided under in-camera item 11.2 Personnel for information.

2023-65
carried

Moved by Mrs. Richardson

Seconded by Mr. Ryall

THAT the Board of Health receive the information provided under in-camera item 11.3 Property for information.

2023-66
carried

12. DATE OF NEXT MEETING

The next meeting of the Board of Health will be held at the Lindsay office on May 18, 2023, from 9:30 am – 11:30 am.

13. ADJOURNMENT

Moved by Mrs. Richardson

Seconded by Dr. Hankivsky

THAT the meeting be adjourned. The meeting adjourned at 11:22 am.

2023-67
carried

Board of Health Chair
Approved May 19, 2023

Recorder