

THE REGIONAL MUNICIPALITY OF NIAGARA

PUBLIC HEALTH SERVICES COMMITTEE

REPORT 12-2005

Minutes of a meeting of the Public Health Services Committee held in Committee Room 4, Regional Municipal Building, Thorold, Ontario on August 8, 2005, commencing at 12:35 p.m.

ATTENDANCE

Committee: Councillors Timms, Chair; Almas; Baty; Harry; Trombetta.

Staff: Mr. Mike Trojan, Chief Administrative Officer; Dr. Williams, Medical Officer of Health; Ms. Reilly, Legislative Assistant.

Staff

Part-time: Ms. Columbus, Manager, Workplace Wellness Promotion, P.H.; Ms. Gordon, Manager, Dental Programs; Dr. Klooz, Associate Commissioner of Health; Ms. Jugley, Manager, Community Mental Health; Ms. Loewen, Manager, Sexual Health; Mr. Miron, Corporate Health Services Manager, H.R.; Ms. St. John, Director, Clinical Services; Ms. Wodchis, Director, Chronic Disease Prevention.

QUORUM

There being a lack of ordinary quorum at the meeting, the Committee Chair determined that the ordinary quorum for the meeting be reduced to five members, pursuant to Part 11, Section 11.7 of the Procedural By-law 7174-93.

JOINT REPORTS

**(Joint Reports can be found behind
the joint reports tab in the Blue Book)**

135. "Corporate Wellness Program"
– Employee Health Report and 2005 Annual Operating Plan

Ms. Columbus, Manager, Workplace Wellness Promotion and Mr. Miron, Corporate Health Services Manager, attended to present the outcome of the recent Employee HeartWorks Survey and subsequent Employee Health Report and to advise Committee of the Corporate Wellness Committee's 2005 Annual Operating Plan.

Moved by Councillor Baty
Seconded by Councillor Harry

That Report PHD 49-2005, August 8, 2005 (HR 28-2005, August 2, 2005) regarding the "Corporate Wellness Program" – Employee Health Report and 2005 Annual Operating Plan be received for information.

Carried.

PUBLIC HEALTH DEPARTMENT

136. Liaisons/External Committees Inventory for Niagara Region
Public Health Department (NRPHD)

Ms. Wodchis, Director, Chronic Disease Prevention, presented Report PHD 47-2005 which provides an inventory of liaisons and external committees. Ms. Wodchis commented that the inventory highlights the importance of partnerships in public health programming in the Niagara Community and that an inventory of liaisons and external committees is required as part of the accreditation process.

Moved by Councillor Trombetta
Seconded by Councillor Baty

That Report PHD 47-2005, August 8, 2005, respecting Liaisons/External Committees Inventory for Niagara Region Public Health Department (NRPHD), be received for information.

Carried.

137. Dental Indices Survey 2004-2005 Update

Dr. Klooz, Associate Commissioner of Health, provided highlights of the Dental Indices Survey as required by the Ministry of Health and Long-Term Care Mandatory Guidelines. He advised that data gathered for the survey indicate that changes in dental programming that occurred in 1995 are continuing to provide significant positive results related to dental health for children. Dr. Klooz outlined these strategies that include the development of a pit and fissure sealant program, the elimination of the school-based fluoride mouth-rinse program and dental health education and oral hygiene instruction. Currently, when compared with other health units, Niagara Region ranks near the top in most dental indices measured for children in every age group.

Moved by Councillor Almas
Seconded by Councillor Harry

That Report PHD 50-2005, August 8, 2005, respecting Dental Indices Survey 2004-2005 Update, be received for information.

Carried.

138. Oral Report
Accommodations

Ms. St. John, Director, Clinical Services, provided information on the Public Health Department's move to their new accommodations on Hannover Drive. While the moving of storage started on July 25th, the official move took place July 28th through August 1st. Ms. St. John commented there were a number of lessons learned that will assist in the next move to the new Regional Headquarters. She commented that they would be looking at a more staged in approach for the next move and emphasized the importance of taking into consideration staff's input with respect to the environment, design and functional requirements. Ms. St. John commented that they will need to examine the dismantling and assembling of 20 year old furnishings that do not have the capacity for new technology versus new furniture, better designed for the new setting. Aerial photographs (provided by Dr. Sider) of the Hannover accommodations were circulated to Committee.

139. Oral Report
Assertive Community Treatment Team (ACTT) Program Funding Enhancements

Ms. Loewen, Manager, Sexual Health, apprised Committee of recent increases for mental health programs. The Community Mental Health Program (CMHP) will be seeing an annualized increase of direct Ministry funding from its current budget of \$1,530,114 to \$2,378,066. This includes \$22,952 for a 1.5% overall operating budget increase, \$600,000 for the anticipated second half of the ACTT funding and \$225,000 for 3 intensive case management positions. As this funding is being received mid year, the \$600,000 and \$225,000 will be pro-rated and funded at 75% for 2005/06 fiscal year. This means that the total operating budget for CMHP of direct Ministry funding for 2005/06 will be \$2,194,316. Ms. Loewen also advised that flow through funding for the Early Intervention program, from St. Joseph's of \$135,000 (annualized) is anticipated. This too, will be pro-rated at 75%, resulting in additional monies for 2005/06 of another \$101,250. Also received is flow through money from CMHA in the

amount of \$69,258 for the Phase II homelessness initiative. This means that the total operating budget for 2005/06 would be \$2,364,824 or \$2,582,324 (annualized). All this funding has been anticipated (and approved) for several months and is reflected in committee reports PHD 40-2005, PHD 22-2005 and PHD 54-2004. The funding is a result of the First Ministers Health Accord funding which started last year and is planned for a total of four years. It is focused on four priority areas for Mental Health: case management, ACTT, Early Intervention and crisis. Its objective is to increase the total number of clients serviced with serious mental illness and reduce the reliance/demand on hospitalization. Ms. Loewen commented that the Region should continue to pursue this funding next year to ensure that Niagara receives its "fair share" as Niagara remains well below benchmarks for case management and ACTT services for its population.

140. Oral Report
West Nile Virus

Dr. Williams, Medical Officer of Health, provided an update on the West Nile Virus. She advised that there are 5 human cases of West Nile Virus in Ontario (with one in Toronto). There have been no human cases in Niagara to date but Niagara has its first positive mosquito pool. Dr. Williams advised that they will continue to promote preventive measures through August and September.

CORRESPONDENCE

141. Moved by Councillor Harry
Seconded by Councillor Baty

That Communications PHSC 46-2005 from P. Sutcliffe, Medical Officer of Health and Chief Executive Officer, Sudbury & District Health Unit (July 4, 2005) respecting "Physical Punishment of Children and Youth", be received.

Carried.

142. Moved by Councillor Almas
Seconded by Councillor Trombetta

That the following communications be received:

PHSC 47-2005 Position Paper of the Council of Ontario Medical Officers of Health "Enhancing Local Public Health Capacity in Ontario".

PHSC 48-2005 Position Paper summarizing the input of the Board of Health Section of the Association of Local Public Health Agencies (aLPHa) to the Ministry of Health and Long-term Care's Public Health Capacity Review Committee.

Carried.

Councillor Timms, Committee Chair, requested Committee to hold onto the COMOH report and the BOH aLPHa reports to the Capacity Review Committee, and to note the common ground in both papers for clearer and more measurable performance guidelines and contrasting positions regarding fully autonomous Health Units. COMOH recommends all health Units be Autonomous, while BOH section of AMO recommends those Health units operating well be left alone with regard to Governance Structure.

CLOSED SESSION

143. Moved by Councillor Harry
Seconded by Councillor Baty

That this Committee do now meet in Closed Session for purposes of receiving information of a confidential nature relating to property matters.

Carried.

144. Oral Report
Accommodations

Ms. St. John and Dr. Williams provided additional information on the Public Health Department's accommodations.

145. Moved by Councillor Trombetta
Seconded by Councillor Baty

That this Committee do now rise without report.

Carried.

ADJOURNMENT

Committee adjourned at 1:48 p.m. to meet again on Monday, August 22, 2005, at 12:30 p.m. in C.R. 4, Regional Headquarters.

Bruce Timms
Chair

Gail Reilly
Legislative Assistant

Pam Gilroy
Regional Clerk