

**BRANT COUNTY BOARD OF HEALTH
REGULAR AGENDA
Wednesday, April 21, 2021, 9:30 a.m, Zoom**

1. CALL TO ORDER

Chair John Bell

2. CONFLICT OF INTEREST

3. ADDITIONS TO AGENDA / Motion to APPROVE AGENDA

4. APPROVAL OF MINUTES

4.1 Motion to approve Brant County Board of Health Minutes of March 17, 2021

Pending Completion

5. FINANCIAL REPORT

5.1 2020 Audited Financial Statement **

Mr. Simon Salole/Ms. Diane Paxton

5.2 Report from the Finance and Audit Committee

Councillor John Sless

6. BUSINESS ARISING FROM PREVIOUS MINUTES

6.1 Report from the Chair

Chair John Bell

6.2 Report from the Medical Officer of Health *

Dr. Elizabeth Urbantke

6.3 Report from the Chief Executive Officer *

Dr. Jo Ann Tober

6.4 Food Safety Disclosure Report

No report

6.5 COVID-19 Reports

6.5.1 COVID-19 Case Management Report *

Dr. Elizabeth Urbantke

6.6.2 COVID-19 Immunization Report *

Dr. Jo Ann Tober

6.6.3 COVID Website Report *

Mr. Brent Richardson/Mr. Colin Hulks

6.6 Harm Reduction Program *

Mr. Gerry Moniz

Motion to accept reports as presented.

7. NEW BUSINESS

7.1 Substance Use and Smoke-Free Ontario Act Program Report *

Mr. Gerry Moniz

7.2 Whistleblower Policy and Procedure Revision *

Mr. Brent Richardson

Motion to accept reports as presented.

8. CORRESPONDENCE (*Board members may request a copy of items that are not attached from Board of Health Secretary*)

8.1 Correspondence from Peterborough Health Unit, dated February 12, 2021, re Food Literacy for Students Act.

8.2 Correspondence from Chatham-Kent Public Health, dated February 16, 2021, re paid sick leave.

8.3 Correspondence from Peterborough Public Health, dated February 16, 2021, paid sick leave.

8.4 Correspondence from Grey Bruce Health Unit, dated March 24, 2021, re legislative authority for boards of health.

Motion to receive the correspondence.

9. INCAMERA

10. QUESTIONS / ANNOUNCEMENTS

11. FUTURE AGENDA ITEMS

12. NEXT MEETING DATE

Wednesday, May 19, 2021, at 9:30 a.m.

13. ADJOURNMENT

Chair

** Attachments
⊕ to be distributed at the meeting*

***Attachments for Board of Health members only*

BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.2

DATE: April 21, 2021

FROM: Dr. Elizabeth Urbantke
Acting Medical Officer of Health

RE: Medical Officer of Health's Report

Focus has been on COVID-19 response and vaccination campaign which will be covered in separate reports.

Opioid data and response will be covered in separate report.

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.3**

DATE: April 21, 2021

FROM: Dr. Jo Ann Tober, Chief Executive Officer

RE: Chief Executive Officer Report

Association of Local Public Health Agencies (alPha) Conference and Annual General Meeting

The 2021 alPha Conference and Annual General Meeting is to be held on June 8, 2021. The meeting will be held virtually and the theme will be the critical role of Ontario's Public Health System including discussions on the COVID-19 response and the future of public health. The agenda for the conference and details of the Annual General Meeting have not been released.

Brantford Brant Ontario Health Team Update

The local Ontario Health Team (OHT) Executive Leadership group continues to meet on a biweekly basis to advance the development of the OHT. Working groups continue to address local priorities including mental health and addictions; homelessness; dementia; home and community care; digital health; and COVID vaccine sequencing. Discussions are underway on the budget allocations for the startup activities of the Ontario Health Team including the development of a communication plan and infrastructure to support the activities of the team.

Annual Service Plan

A draft of the annual service plan was submitted to the Ministry by the April 1, 2021 deadline. Given the uncertainty of the demands for the COVID response both for case and contact management as well as vaccine roll out, the Ministry has requested draft estimates of expenses to address the ongoing COVID response. These expenses will be updates and one-time extraordinary expense costs can be submitted when costs exceed the health unit budget.

BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.5.1

DATE: April 21, 2021

FROM: Dr. Elizabeth Urbantke, Acting Medical Officer of Health

RE: COVID-19 Case Management Report

Up-to-date metrics will be reported at the meeting.

FROM: Dr. Jo Ann Tober, Chief Executive Officer

RE: COVID-19 Immunization Report

The provincial vaccine rollout continues to follow the Ministry of Health Three Phase Framework for vaccine administration in Ontario. The Premier announced the start of Phase 2 of the plan on April 6, which continues the focus on high-risk populations and includes the immunization of adults 60 to 79 years of age in 5-year increments, high-risk congregate settings (shelters, community living) individuals with high-risk health conditions, special education teachers, individuals in identified hot spots and those who cannot work from home. Phase 2 is expected to last from April to June 2021. Phase 3 includes adults 59 years of age and younger and is expected to begin in June 2021. Below is a table produced by the Ministry outlining the populations and timelines for Phase 2.

Overview of Phase Two

Projected Phase Two sequencing April to June – updated as of April 9

	Phase 2		
	April	May	June
Older Adults	Over 75 Over 70 Over 65 Over 60		
Health Conditions	Individuals with Health Conditions		
	Highest Risk & Caregivers	High Risk & Certain Caregivers	At-Risk Health Conditions
Congregate Settings	High Risk Congregate Settings		
Hot Spots	COVID-19 Hot Spots Communities		* Peel and Toronto
	Highest Risk Communities *	Remaining Hot Spots Communities	
Other priority*	Special Education Workers Education Workers in hot spots		*contact risk equivalent to HCW
Cannot-Work-From-Home		Workers who cannot work from home	
		Group 1	Group 2



Locally, individuals over 60 years of age, those individuals with the highest risk and high-risk health conditions, and special education teachers have been invited to book appointments for immunization at mass immunization clinics. Mobile teams have been delivering vaccines to those in high-risk congregate settings. Vaccination to homebound individuals is being provided in partnership with the Community Paramedics and immunizations to specific individuals with the highest risk health conditions including dialysis and oncology patients is being provided in partnership with the Brant Community Healthcare System.

A limited supply of the AstraZeneca Vaccine is now available in the community and is being administered through 4 local pharmacies: Rexall on 72 Grand River St. N in Paris, Sobey's Pharmacy on 307 Grand River St. N in Paris, and Drugstore Pharmacy at 410 Fairview Dr. in Brantford and Loblaw Pharmacy, King George Rd, N Brantford. In addition, some primary care providers will also be administering the AstraZeneca to their patients. The eligibility for administration of AstraZeneca is individuals 55 years of age and older.

Vaccinations continue to occur through both mass immunization clinics and mobile teams throughout the community. Vaccine supply has remained limited but is expected to increase in June. Immunization clinics in the community will continue to run at the capacity of vaccine supply. Up to date information on vaccines delivered within the community will be presented at the Board meeting.

**BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.5.3**

DATE: April 21, 2021

**FROM: Brent Richardson, Director, Human Resources
Colin Hulks, Manager, Information Technology**

RE: COVID-19 Website Report

Background:

This report includes information and an update related to Brant County Health Unit's (BCHU) online COVID immunization booking system.

Required information:

While BCHU elected to go forward with our own online booking system, we continue to evaluate our needs and compare the benefits of our system with that of the Provincial booking system. We initially elected to go with our own system for many reasons including both the flexibility and control it provides to us. At the time this decision was made the Provincial system was not available. The current status of the online booking system is that it has been running in a stable state for over a week with no reported issues as of April 7th.

As part of this initiative and to improve the system, from both a client and administration perspective, we have and will continue to implement changes and adjustments to provide improved performance and stabilization of the platform. These changes include both programming and infrastructure modifications that are required to address previous issues encountered as a direct result of the ever-shifting landscape of the Ministry's guidance. These constant, and often without-notice, changes have forced us to make programming code changes and alterations at all hours and at very short notice. Some of these changes have resulted in system instability at times. We recognize that this has been disruptive to clients trying to book appointments; unfortunately, these have been urgent, necessary, and unavoidable.

Our dedicated Information Technology (IT) professionals including our senior and junior programmers have been working tirelessly to implement efficiencies, not only to deal with the identified issues but also for anticipated or projected future changes. The Team has gone to great lengths to optimize the system to ensure future stability and avoid any future downtime. We anticipate these changes to be fully implemented by April 16th. We expect these enhancements will provide dramatically increased performance and reliability of the system. This has been a team effort of not only the IT staff but many other teams across the Health Unit to assist with the enhancement of the online booking system.

It remains our position based on feedback from many other health units across the Province that our internal system still provides a superior platform to the Provincial on-line booking system.

BRANT COUNTY BOARD OF HEALTH
REPORT #: 6.6

DATE: April 21, 2021

FROM: Gerry Moniz, Manager, Chronic Disease Prevention and Injury Prevention (CDIP)

RE: Harm Reduction Report

Overview of Activities in March 2021

Brantford-Brant Community Drugs Strategy (Drugs Strategy)

1. The Drug Strategy Coordinator met with members of the Drugs Strategy working groups, coordinating committee and advocacy committee to discuss the progress to date and directions for moving forward. The Coordinator chaired two meetings of the coordinating committee. The work is underway to formulate an action plan for 2021 in line with the four pillars approach (prevention, treatment, enforcement, and harm reduction).
2. The Strategy partners are exploring the possibility of a survey with community partners and people who use drugs regarding experiences and community priorities.

Harm reduction program

3. The needle return incentive pilot program was launched on April 1st. Three Needle Exchange Program (NEP) sites have started to accept used needles and distribute incentives and education materials. To date 6 people have returned approximately 1700 needles.
4. BCHU and City Staff determined the exact location for installation of three of four new needle disposal bins. The fourth is pending City approval. A company has been contacted to install the bins.
5. BCHU continues to carry out a number of harm reduction activities as per the public health mandate, such as:
 - Public awareness activities to shift attitudes and beliefs about substance use and harm (anti-stigma campaign)
 - Monitoring and responding to calls for needle pick up
 - Regular needle sweeps across the city
 - Needle distribution, collections of and reporting on used needles
 - Education and resource distribution (such as sharps containers—both large and pocket-sized) to people who use substances, businesses, residents/property owners, and the public

Opioid surveillance

6. 13 Opioid-related overdoses and 1 death were reported in March. One alert was issued regarding a spike in overdoses from March 12 to 14.

FROM: Gerry Moniz, Manager, Chronic Diseases Prevention and Injury Prevention

RE: Substance Use and Smoke-Free Ontario Act Program Report

Substance Use

The goal of the Substance Use program is to reduce the burden of substance use (including excessive use) and minimize the harms associated with it. The key focus areas include: public education on the topics of alcohol, cannabis, tobacco and e-cigarette; enforcement of the Smoke-Free Ontario Act (SFOA); smoking cessation support; capacity building among community partners; and policy development support.

The highlights for 2020 include:

- 100% of tobacco and e-cigarette vendors inspected under the SFOA
- 96.6% of local tobacco vendors were compliant with youth access legislation (tobacco sales to minors)
- 100% of tobacco vendors were in compliance with display, handling and promotion sections of the SFOA
- 100% of local e-cigarette retailers were in compliance with the Electronic Cigarettes Act
- 13 warnings and 2 tickets were issued by Tobacco Enforcement Officers (TEOs) under the SFOA
- Additionally, the TEOs responded to a total of 538 COVID-19 related public complaints under the Emergency Management and Civil Protection Act
- A total of 404 individuals attended the group-based smoking cessation workshops and received a five-week kit of free nicotine replacement patches.
- BCHU continued to support the Health Educators Reaching Other Students (HEROS) group to plan and implement youth engagement activities in the community. A total 12 student volunteered for the HEROS initiative in 2020. Together with BCHU staff, the HEROS group:
 - created a youth focused vaping campaign that was promoted on social media.
 - hosted 1 event at a high school which focused on vaping and harms associated with it (“Use Your Instincts” campaign)
- Due to COVID-19, most in-person health education workshops, presentations, health fairs on the risks of substance use were cancelled in 2020. Instead, social media was utilized to disseminate public health messaging on various health topics, such as: the risks of driving under the influence of alcohol and other substances; safe consumption of alcohol and cannabis for youth, pregnant women, and the general population; the benefits of quitting smoking and substance misuse.

In 2021, the Substance Use program team will:

- conduct public education campaigns and social media messaging to raise awareness of the following:
 - the harmful effects of cannabis and alcohol use among the general population and at risk groups, such as youth, young adults and pregnant women;
 - the potential harms associated with e-cigarettes use in youth and adult non-smokers

FROM: Brent Richardson, Director, Human Resources

RE: Whistleblower Policy and Procedure Report

Background:

This report includes a recommended change to the Whistle Blower Policy and Procedure.

Required information:

The Ministry of Health, having reviewed our policy and procedure, has provided a recommended change to the Brant County Health Unit (BCHU) Whistle Blower policy and procedure.

Recommendation:

That the Board of Health amend the current Whistle Blower policy and procedure based on the Ministry recommendation as follows:

Whistle Blower Procedure Pg. 2 - Paragraph 8

Current:

All reported Whistleblower occurrences/events or concerns are treated as confidential and handled with due care. The Board of Health and BCHU may not be able to act on anonymous reporting as proper investigation may prove impossible without sufficient information and the opportunity to substantiate allegations by obtaining further facts and information and confirming good faith. Furthermore, disclosure may be required surrounding legal investigations or proceedings

Proposed new: All reported Whistleblower occurrences/events or concerns are treated as confidential and handled with due care. The Board of Health and BCHU may not be able to act on ~~anonymous~~ **all reports**. A proper investigation may prove impossible without sufficient information and the opportunity to substantiate allegations by obtaining further facts and information and confirming good faith. Furthermore, disclosure may be required surrounding legal investigations or proceedings.

Note: Individuals may file an anonymous report under the policy.