

Present: Councillor M. Pearson (Chair) Councillors A. Johnson, J. Farr, M. Green, S. Merulla, C. Collins, T. Jackson, T. Whitehead, D. Conley, L. Ferguson, A. VanderBeek, R. Pasuta

Absent with

regrets: Mayor F. Eisenberger, Councillors J. Partridge and B. Johnson – City Business

THE BOARD OF HEALTH PRESENTS REPORT 16-001 AND RESPECTFULLY RECOMMENDS:

1. Ministry of Health and Long-Term Care Discussion Paper, "Patients First : A Proposal to Strengthen Patient-Centered Health Care in Ontario" (Added Item 7.1)

- (a) That the Mayor and Council Representative for the Association of Municipalities of Ontario work with the Association of Municipalities of Ontario to present any municipal concerns respecting the proposed change in governance and provincial funding;
- (b) That the Mayor meet with the Chair of the Local Health Integration Network to discuss the proposed changes in governance and funding;
- (c) That members of the Board of Health participate in a survey and workshops to educate themselves further on the province's proposals and related issues, and identify areas for feedback; and
- (d) That based on the survey and workshops, the Medical Officer of Health develop a draft submission from the Board of Health to the Province for consideration at the February 18, 2016 Board of Health meeting.

2. Seniors Oral Health Outreach Program (BOH15010(a)) (City Wide) (Item 8.1)

That a Seniors' Oral Health Outreach Program be implemented that would address the oral care needs of low-income seniors and would include:

- (i) Partnerships with institutions offering Personal Support Worker programs to develop oral health curriculums that would improve oral care outcomes for seniors in Long Term Care;
- (ii) Partnerships with outside agencies that focus on low-income seniors groups in the community to increase access to existing programs and services for seniors at high-risk for poor oral health; and
- (iii) A **one-year** pilot initiative with Macassa Lodge in the City of Hamilton, providing employee educational workshops, fluoride varnish, oral health surveillance and interim stabilization therapy.

3. Community Health Worker Model in Chronic Disease and Cancer Prevention (BOH16001) (City Wide) (Item 8.2)

That Report BOH16001 respecting the Community Health Worker Model in Chronic Disease and Cancer Prevention, be received.

FOR THE INFORMATION OF THE BOARD OF HEALTH:

(a) CHANGES TO THE AGENDA (Item 1)

The Clerk advised of the following change:

1. ADDED PRESENTATION (ITEM 7)

Ministry of Health and Long-Term Care Discussion Paper, "Patients First : A Proposal to Strengthen Patient-Centered Health Care in Ontario". (Added Item 7.1)

The agenda for the January 11, 2016 Board of Health was approved, as amended.

(b) DECLARATIONS OF INTEREST (Item 2)

None.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 3)

(i) December 7, 2015 (Item 3.1)

The Minutes of the December 7, 2015 meeting of the Board of Health were approved, as presented.

(d) DELEGATION REQUESTS (Item 4)

 Delegation request from Ms. Jo-Ann Mattina, De dwa da dehs nye>s Aboriginal Health Centre respecting the programs and services offered by the Aboriginal Health Centre and to discuss partnership opportunities with the City of Hamilton (for today's meeting). (Item 4.1)

The delegation request from Ms.Jo-Ann Mattina, De dwa da dehs nye>s Aboriginal Health Centre respecting the programs and services offered by the Aboriginal Health Centre and to discuss partnership opportunities with the City of Hamilton, be approved for today's meeting.

(e) PRESENTATIONS (Item 7)

(i) Ministry of Health and Long-Term Care Discussion Paper, "Patients First : A Proposal to Strengthen Patient-Centered Health Care in Ontario" (Added Item 7.1)

Dr. Richardson, Medical Officer of Health, addressed the Board respecting the Ministry of Health and Long-Term Care Discussion Paper, "Patients First : A Proposal to Strengthen Patient-Centered Health Care in Ontario", with the aid of a PowerPoint presentation. A copy has been included in the public record. Her comments included, but were not limited to:

What is the Patients First Discussion Paper?

- Regionalization and integration of health care unfolded across Canada over past 30 yrs
- Response to Fiscal pressures, Rediscovery of Social Determinants Of Health, prevention and promotion
- Desire to improve local decision-making and increase accountability
- Improve efficiency and consistency by decreasing number of organizations and breaking down silos
- Ontario's approach is slower, evolutionary compared to other provinces

- Minister proposing next step in major health system restructuring
- Opportunity for Board of Health and Public Health Services to provide thoughtful feedback to influence proposal
- how to gain most benefit for the community, and avoid unintended negative consequences

Patients First is about health and health care system transformation:

- Improve access
- Care coordinated, integrated closer to home
- Better information, support patient decision making
- Protect universal public health care value, quality, sustainability
- Proposal outlines an expanded role for Local Health Integration Networks including in primary care, home and community care, and Public Health Services

What does this mean?

- Regional planning and performance management across health system
- Creation of Local Health Integration Networks sub-regions
- Local Health Integration Networks and Public Health Services linked to plan population and public health
- Moving all Community Care Access Centres functions to the Local Health Integration Networks
- Disband Community Care Access Centres Boards
- Needs of specific populations who experience inequitable access to health care services to be identified and met
- Improved public reporting

Implications for Public Health Units:

- Creation of formal relationship between Ministry of Health and Long-Term Care and Local Health Integration Networks leadership
- Transfer dedicated provincial funding for Public Health Units to the Local Health Integration Networks
- Local Health Integration Networks ensure use for Public Health Services purposes
- Local Health Integration Networks establish accountability agreements with Public Health Units
- Local Boards of Health continue to set budgets
- Board of Health, Land Ambulance continue to be managed at Municipal level
- Province also reviewing Public Health Services & Ontario Public Health Organizational Standards

• Expert Panel to be appointed to advise on opportunities to deepen Local Health Integration Networks / Public Health Unit partnerships and improve Public Health Services capacity and delivery

Opportunities

- Regionalization to be more responsive to local needs
- Improving access and health outcomes
- Enhanced focus on population health
- Potentially addresses Social Determinants Of Health more broadly through action and advocacy

General Challenges:

- Big transition across many elements of the system
- Lacks overarching framework of what is expected to be provided and who is responsible as in the province of British Columbia
- What is the best structure, tools for Local Health Integration Networks Governance?
- Difficult to prioritize across a diverse range of issues
- Will this make a difference in costs, access, quality, health?

Challenges to Public Health Services:

- Urgent/acute needs tends to push out population health needs
- How maintain focus on health Social Determinants Of Health and not just health care
- How to maintain Public Health Services independence & advocacy
- How to maintain local innovation
- Future role of Board of Health
- Changes in Public Health Services programming
- Changes to how funding allocated and to whom

Provincial Next Steps:

- Legislative change in Spring 2016
- Ontario Public Health Services & Ontario Public Health Organizational Standards Review in December 2016
- Local Health Integration Networks Public Health Unity Expert Panel

Public Health Services Next Steps:

- Engage with other interested City departments
- Ministry of Health and Long-Term Care staff to engage with Local Health Integration Networks, province, and other partners
- Encourage all staff to submit feedback
- Develop and submit Ministry of Health and Long-Term Care and Board of Health responses
- Actively participate in as many ways and as often as possible

Proposed process for Public Health Services feedback:

- All staff encouraged to submit individual feedback
- Ministry of Health and Long-Term Care and Board of Health to submit two responses
- Process to develop Board of Health feedback
- Survey Board of Health based around 28 Ministry of Health and Long-Term Care questions
- Identify top two or three systems and top two or three public health issues for deeper discussion
- Hold three Board of Health workshops to educate on issues and identify feedback
- Staff collate feedback for Feb 18, 2016 Board of Health meeting
- Board of Health debate and decide on final response for submission

The Presentation from the Medical Officer of Health respecting the Ministry of Health and Long-Term Care Discussion Paper, "Patients First : A Proposal to Strengthen Patient-Centered Health Care in Ontario", was received.

For disposition on this matter, refer to Item 1.

(f) DISCUSSION ITEMS (Item 8)

(i) Seniors Oral Health Outreach Program (BOH15010(a)) (City Wide) (Item 8.1)

Dr. Ninh Tran, Associate Medical Officer of Health, and Glenda McArthur, Director, Clinical & Preventative Services, answered questions from the Board respecting Report BOH15010(a) respecting Seniors Oral Health Outreach Program. Sub-section (iii) of Report BOH15010(a) respecting Seniors Oral Health was revised to include the following:

(iii) A **one-year** pilot initiative with Macassa Lodge in the City of Hamilton, providing employee educational workshops, fluoride varnish, oral health surveillance and interim stabilization therapy.

For disposition on this matter, refer to Item 2.

(ii) Community Health Worker Model in Chronic Disease and Cancer Prevention (BOH16001) (City Wide) (Item 8.2)

Ms. Pezzetta Director, Healthy Living Section, introduced Ms. Jo Ann Mattina, Ms. Pat Mandy, Board Chair and Ms. Constance McKnight, Executive Director of the De dwa da dehs nye>s Aboriginal Health Centre.

Ms. Mandy addressed the Board with the aid of a PowerPoint presentation. A copy has been included in the public record. Her comments included, but were not limited to:

- An Aboriginal Health Access Centre that provides Indigenous people with access to culturally appropriate health care programs and services.
- Our name, De dwa da dehs nye>s, embodies the concept of "we're taking care of each other amongst ourselves."
- Our Centre provides programming in the following areas:
 - Primary Health Care (Physicians, Nurse Practitioners, and other allied health care professionals)
 - Health Promotion and Traditional Healing
 - Advocacy, Navigation and Outreach Services
 - Mental Health and Addictions Services
 - o Homelessness

Case for new site in Hamilton - Current Space:

- Not accessible
- Building size is inadequate to house the current program
- Proposed program too large to fit on the existing site
- Zoning will not allow size of building that will fit proposed program
- Outdated building and building systems
- Location of building is not ideal for serving the population further east more appropriate
- Not conducive to the integration of traditional and western medicine
- Not aligned with best practice space standards

- Challenging re. Infection Control Standards and best practice.
- No opportunities for outdoor ceremonial space or sweat lodge
- New Facility Program Space Requirements: 37,212 SF (for the Aboriginal Health Centre only)

Ms. McKnight addressed the Board with the aid of a PowerPoint presentation. A copy has been included in the public record. Her comments included, but were not limited to:

• The Vision - A "one-stop shop" for Indigenous People, where organizations come together to provide a bundle of services focused on improving the social determinants of Health for Indigenous People living in the Hamilton Communities.

A landmark location and resources to define and create a new model that is:

- A celebration of culture and a deep respect for tradition;
- A connection with the community including themes of healing, wellness and restorative powers, economic sustainability, training and employment;
- Legacy space for the Hamilton and Brantford Communities and Indigenous Persons
- A space for inclusiveness and an expression of being welcome

Partnerships with:

- Dental Services
- Physiotherapy
- Chiropody
- Other Indigenous Programs that will support the Traditional and Spiritual Health of the Community
- Housing
- Friendship Centres
- Affiliation Agreement with McMaster University
- Research Partnerships

Relationship with the City of Hamilton:

- City Housing:
 - Our Homeward Bound Program is funded through Housing First funding administered by the City of Hamilton. The program aims to house chronically and episodically Aboriginal Homeless persons in the City of Hamilton.

- Planning Department:
 - We have met with the representatives of the Planning Department to look at opportunities for land within the City of Hamilton for the creation of a new Community Hub
- Public Health:
 - Ongoing discussions among the Management Team of both organizations to identify possible areas for partnerships
 - Cancer Screenings, Smoking Cessation, Community Food Handling Programs, Alcohol and Substance Abuse Programs, Dental Services, Need Exchange, Anonymous HIV testing, etc.

Ellen Pezzetta, Director, Healthy Living Section, provided an introduction and overview Report BOH16001 respecting the Community Health Worker Model in Chronic Disease and Cancer Prevention, to the Board. Ms. Pezzetta answered questions from the Board.

Staff were directed to provide the Mayor and the appropriate Councillor with updates respecting the ongoing search for a new premises for the Aboriginal Health Centre.

The presentation from Ms. Pat Mandy, Board Chair and Ms. Constance McKnight, Executive Director of the De dwa da dehs nye>s Aboriginal Health Centre, respecting the programs and services offered by the Aboriginal Health Centre and to discuss partnership opportunities with the city of Hamilton, was received.

For disposition of this matter, refer to Item 3

(g) GENERAL INFORMATION / OTHER BUSINESS (Item 11)

(i) Correspondence from the Sudbury and District Health Unit respecting Cannabis Regulation and Control : Public Health Approach to Cannabis Legalization (Item 11.1)

Correspondence from the Sudbury and District Health Unit respecting Cannabis Regulation and Control : Public Health Approach to Cannabis Legalization, was endorsed and referred back to Public Health Services Staff for inclusion in reports relating to this topic. (ii) Correspondence from the Sudbury and District Health Unit respecting the Endorsement of Action for Smoke-Free Multi-Unit Housing (Item 11.2)

Correspondence from the Sudbury and District Health Unit respecting the Endorsement of Action for Smoke-Free Multi-Unit Housing, was endorsed and referred back to Public Health Services Staff for inclusion in reports relating to this topic.

(iii) Correspondence from the Ministry of Health and Long-Term Care respecting an update on the status of the *Electronic Cigarettes Act, and Smoke-Free Ontario Act*, under the *Making Healthier Choices Act*. (Item 11.3)

Correspondence from the Ministry of Health and Long-Term Care respecting an update on the status of the *Electronic Cigarettes Act*, and *Smoke-Free Ontario Act*, under the *Making Healthier Choices Act*, was endorsed and referred back to Public Health Services Staff for inclusion in reports relating to this topic.

(iv) Correspondence from the Acting Medical Officer of Health respecting the release of the a Ministry of Health and Long-Term Care Discussion Paper with Proposed Changes to Public Health and Ontario's Health System (Item 11.4)

Correspondence from the Acting Medical Officer of Health respecting the release of the a Ministry of Health and Long-Term Care Discussion Paper with Proposed Changes to Public Health and Ontario's Health System, was received.

(g) ADJOURNMENT (Item 13)

That, there being no further business, the Board of Health adjourned at 3:45 p.m.

Respectfully submitted,

Deputy Mayor M. Pearson Chair, Board of Health

Loren Kolar Legislative Coordinator Office of the City Clerk