



Hamilton

INFORMATION REPORT

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	August 11, 2016
SUBJECT/REPORT NO:	Ontario Public Health Standards and Protocol Update (BOH16044) (City Wide)
WARD(S) AFFECTED:	City Wide
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SIGNATURE:	

Council Direction:

Not Applicable

Information:

In May 2016, the Ministry of Health and Long-Term Care (MOHLTC) released amendments to the Ontario Public Health Standards (OPHS) along with three new and twelve revised protocols.

The revisions to the OPHS and introduction of the new protocols are described in the report below. A summary of changes made to existing protocols can be found in Appendix A.

Ontario Public Health Standards

Several changes have been made to the OPHS, the document which establishes requirements for public health programs and services under the Health Protection and Promotion Act (HPPA). Some of the key changes are identified below.

In the revised version of the OPHS, reference to the following has been removed:

- The reference to the 75%/25% provincial/municipal cost-sharing relationship in 2008 for public health programs.
- The reference table identifying Ontario Acts and associated regulations citing the Board of Health and Medical Officer of Health.

In addition, within the HPPA summary in the revised OPHS, it was added that the Health Programs and Services section of the HPPA would provide optional health programs and services that may be delivered by a board of health.

At this time, it is not clear whether these revisions represent only editing of the document to bring it up to date, or signal other changes that may be contemplated in the face of the changing health care landscape in Ontario. As Public Health Services (PHS) continues to receive information and engage with the MOHLTC on these changes, updates will be communicated back to the Board of Health in a timely manner.

Healthy Smiles Ontario Protocol

The new Healthy Smiles Ontario (HSO) Protocol replaces the Preventive Oral Health Services Protocol and the Children in Need of Treatment Program Protocol and outlines services to be offered to children meeting clinical and financial eligibility.

As part of this protocol, new clinical services were introduced that public health units are expected to provide including:

- Re-screening of children prior to Children's Aid Society (C&AS) referral; and,
- Case management requiring contact of a third party to determine if treatment has been initiated.

Service requirements of this new protocol will have an impact on current PHS resources. To meet protocol requirements, Registered Dental Hygienists (RDH) will need to spend additional time re-screening a child prior to CAS referral and completing case management calls.

Eligibility and inclusion criteria have also changed for the following oral health services:

- Topical fluoride application;
- Pit and fissure sealants; and,
- Interim stabilization therapy.

Less restrictive and broader inclusion criteria for oral health services also have the potential to increase the number of clients seen by PHS. To meet the goals of HSO, additional time will also need to be dedicated to oral health navigation and promotion.

These are all part of the substantial changes that the HSO program has undergone over the past two years. The 2016 allocation for the program has not yet been communicated to health units by the Province. Depending on client uptake over time and the provincial budget allocation, there is a possibility of a budget pressure in the future. Management will monitor the situation and report back if budget pressures result.

Electronic Cigarette Compliance Protocol

The Electronic Cigarettes Compliance Protocol supports the Electronic Cigarettes Act, 2016 (ECA) which requires all public health units to conduct inspections and enforcement in order to:

- Test the compliance of retailers in the sale and supply of electronic cigarettes to consumers 19 years and over;
- Ensure electronic cigarettes vendors post legislated signs; and,
- Apply a progressive enforcement strategy to address non-compliant vendors.

As with all tobacco inspections, as part of the Electronic Cigarette Compliance Protocol, PHS is expected to compile and report all ECA inspection and enforcement activity in the MOHLTC's electronic database. In addition, Provincial Offenses Officers designated by the MOHLTC are required to attend MOHLTC training. At this time, standards for vendor education are not included in the new protocol, however, it is expected these will follow with upcoming ECA display and promotion regulations.

PHS has received base and one-time funding to support staffing and health promotion/education costs related to ECA. The addition of ECA work to the Tobacco Control Program has required the time and expertise of both health promotion, and, tobacco enforcement staff, as well as additional work outside usual business hours. However the nature of work related to this program continues to evolve. At this point, staff time has been reallocated to the ECA from the existing complement, and the new funds are being used for health promotion/education and staff over-time for enforcement activities. Management will continue to monitor the service demands resulting from these new requirements and pending regulations, and adjust the 2017 budget submission accordingly. No levy pressure is expected to result from these protocol changes.

Guidance Document for the Management of Animals in Child Care Centres

Licensed child care centres often incorporate animals into their program activities. The Guidance Document for the Management of Animals in Child Care Centres describes how public health units can support child care providers to decrease the risk of animals causing diseases (e.g., salmonellosis and other gastrointestinal infections) in children. The guidance provided is based on evidence and best practices, and, PHS has already implemented much of the required education work as part of the ongoing inspections of child care centres. This guidance document provides PHS with provincial support and additional tools for issues related to animals in child care centres. PHS will be incorporating material within the guidance document into a revised daycare manual and sharing it with child care centre operators. No staffing or budget implications will occur as a result of this new guidance document.

Changes to Existing Protocols

Appendix A outlines changes to existing protocols under the OPHS. The majority of these are minor editorial revisions. Others, such as those under the immunization Management Protocol and Infection Prevention and Control in Child Care Centres Protocol, have more substantial revisions that bring the protocol up to date with current practice. In most cases, staff has already updated our own practices to reflect current best practice. In the case of the Tobacco Control Protocol, the updates reflect the legislative changes introduced earlier around flavoured tobacco, outdoor smoke free areas and shisha/waterpipe tobacco. Further details can be found in Appendix A. There are no budget pressures identified for the current year due to these protocol changes.

Appendices Attached:

Appendix A to Report BOH16044 – Ontario Public Health Standards: Revisions to Existing Protocols