



Minutes of the Board of Health Regular Meeting

Thursday, February 16, 2017

Videoconference

25 Johnston St., Smiths Falls/458 Laurier Blvd., Brockville

Room C/Board Room

4:00 p.m. – 5:20 p.m.

Present:

A. Warren, Chair	D. Nash
A. Churchill	H. Patel
P. Deery	Regrets: D. Malanka, C. Russell-Julien
J. Gallipeau	
I. Hargreaves	P. Stewart, Medical Officer of Health/CEO
T. Jansman	H. Bruce, Executive Assistant

T. Anderson – Manager - Quality, Corporate and Information Services	J. Lyster – Director- Community Health Protection
J. Empey – Manager - Quality, Corporate and Information Services	J. Mays – Manager – Community Health Protection
S. Gates – Director - Quality, Corporate and Information Services	

Agenda Item	Key Discussion Points	Decision	Action
1. Call to Order	A. Warren called the meeting to order at 4:00 p.m. and welcomed everyone.	n/a	n/a
2. Welcome and Introduction of New Board Member	A. Warren introduced D. Nash as the United Counties representative that is replacing R. Jones. D. Nash advised that this is his first term as Mayor of Merrickville-Wolford and his second term on council. Board members introduced themselves.	n/a	n/a
3. Approval of the Agenda	The agenda was reviewed.	It was moved by: Phil Deery Seconded by: T. Jansman That: The agenda of the February 16, 2017 Regular Meeting be approved as circulated. Motion Carried.	n/a
4. Conflict of Interest Declaration	The question was raised if there were any conflicts of interest to declare. None were raised.	n/a	n/a
5. Presentation:			
5.1. The Healthy Menu Choices Act - JM	J. Mays presented on the Healthy Choices Menus Act. (See Appendix #1) She gave an update on menu labelling. The Act was introduced in 2015 but the regulation being enforced came into effect on January 1, 2017. Public health units are the designated bodies used to enforce the Act and regulation. All owners and operators of regulated food premises should		

Agenda Item	Key Discussion Points	Decision	Action
	<p>comply with this legislation effective January 2017.</p> <p>The premise is that by displaying the calories this provides customers nutrition information to make healthier choices. Calories however are only a small piece of the nutrition of any food, and we need to remember that.</p> <p>This legislation applies to any type of food premise with 20 or more locations in Ontario. This does not apply to cafeterias in plants, or daycares or long term care homes. It is premises that have substantially the same name and substantially the same standard foods – that is who the legislation will be applied to. The calories for every standard food and beverage on menu items will be displayed. A contextual statement is also required. Flyers need to show calories unless there is no price list. We are supposed to be monitoring these flyers and the calories will have to be put on each display item as well.</p> <p>The ministry has to designate the public health inspectors under the Act. We need to have a letter of appointment and ID cards. We cannot enforce this legislation until we have the proper ID and we have not received this ID yet.</p> <p>For our implementation plan for the first</p>		

Agenda Item	Key Discussion Points	Decision	Action
	<p>year, we have designated 1 inspector to take the lead on this program in order to achieve consistent messaging. This person will then be the expert.</p> <p>The ministry has sent out a lot of communications to the industry and restaurants already. We will supplement with fact sheets. We have had inquiries from some chains that have just bought the name but there is no support behind the name – individual owners. The ministry advised us to get our own legal advice around this for interpretation.</p> <p>We have 180 premises within our area that need to be assessed under this legislation. Board members raised concerns about giving the public a little bit of information, but not all of the pieces. What does the measurement of success of this Act look like? P. Stewart stated that many people are very concerned about this. There are many other factors to healthy eating other than calories.</p> <p>The legislation does not allow the province to implement the legislation; it needs to be implemented by a local health unit. Board members discussed the cost to restaurant owners.</p> <p>The question was raised are we only dealing with chain restaurants? J. Mays advised yes</p>	<p>Board members agreed to amend the letter being sent to Minister Hoskins to add additional legal costs associated with implementing the Menu Labelling Act.</p>	

Agenda Item	Key Discussion Points	Decision	Action
	<p>for now. How will this affect our independent owners? J. Mays advised that it is a chain regardless of ownership. If you have bought the name you are affected like everyone else in the province. Board members felt that these types of programs have no gauge to tell us whether they are effective or not.</p> <p>J. Gallipeau suggested that the Board write a letter to Minister Hoskins to advocate on behalf of their community about their concerns about the Menu Labelling Act.</p> <p>The question was raised, what about fines? J. Mays advised yes, there is a whole protocol. First of all it is all about education. Our goal is to get them to comply. We want to work with people and educate them and find out what their barriers are. We will do everything before we fine people.</p> <p>A. Warren thanked J. Mays for her presentation.</p>	<p>The Board agreed to write a letter to Minister Hoskins about their concerns about the Menu Labelling Act.</p>	
6. Consent Agenda			
<p>6.1. Approval of the Minutes from the Board of Health Regular Meeting held on January 19, 2017</p> <p>6.2. 2016 Financial Statement</p> <p>6.3. MOHLTC Financial</p>	<p>The motion was read.</p>	<p>It was moved by: A. Churchill Seconded by: D. Nash That: The following items on the consent agenda be approved as circulated: 6.1. Approval of the Minutes from the Board of Health Regular Meeting held on</p>	

Agenda Item	Key Discussion Points	Decision	Action
Controls Checklist 6.4. General Correspondence 6.5. Duty of Care Report		January 19, 2017 6.2. 2016 Financial Statement 6.3. MOHLTC Financial Controls Checklist 6.4. General Correspondence 6.5. Duty of Care Report Motion Carried.	
7. New Business:			
7.1. Finance:			
7.1.1. MOHLTC One Time Budget Submissions	<p>P. Stewart advised that every year when the MOHLTC sends us the budget package they include items for one time funding that we can apply for.</p> <p>The first 5 items the ministry asked us if we were interested in applying for:</p> <ul style="list-style-type: none"> • Fridge Replacement • Expanded HPV program for boys – RPN to help do the clinics. • 2 PHI practicums – Last year we were funded \$10,000 for 1. We have done very well with this. J. Mays thinks we can manage 2, so we are putting in for 2. • Healthy Menu Choices Act – They said that we could apply for funding. We are trying for a 0.5 FTE Public Health Inspector. 	<p>It was moved by: P. Deery Seconded by: T. Jansman That: The Board of Health approve the submission of the following projects for 2017 one-time funding from the MOHLTC:</p> <ul style="list-style-type: none"> • Fridge Replacement (\$16,834) • Expanded HPV Immunization (boys) – 0.5 FTE RPN (\$28,034) • 2 Public Health Inspector Practicums (\$20,000) 	

Agenda Item	Key Discussion Points	Decision	Action
	<ul style="list-style-type: none"> • Smoking Cessation – This allows us to apply for nicotine replacement patches. <p>The last 2 are the ones that we need.</p> <ul style="list-style-type: none"> • Website Replacement – We have to totally replace our website so that we are AODA compliant. We also want it accessible to mobile devices. Another health unit did get one time funding last year. • Opioid Strategy – We would like to hire a consultant to develop a community plan. <p>The last 2 items we hope the ministry will approve and the top 5 are very likely.</p>	<ul style="list-style-type: none"> • Healthy Menu Choices Act – 0.5 FTE Public Health Inspector (\$48,609) • Smoking Cessation for Priority Populations (\$29,812) • Website Replacement (\$50,000) • Opioid Strategy (\$10,000) <p>Motion Carried.</p>	
7.1.2. BOH Policy V-175- Internal Financial Controls	<p>P. Stewart advised that the Internal Financial Controls Policy needs to be revised to reflect that the Finance Team now Reports to the Director QCIS. The Director, S. Gates now needs to have signing authority for the Health unit.</p> <p>The rest of the finance policies will be reviewed at the next Finance, Property and Risk Management Committee Meeting.</p>	<p>It was moved by: D. Nash Seconded by: A. Churchill That: Board of Health Policy V-175 Internal Financial Controls be approved as revised.</p> <p>Motion Carried.</p>	
7.1.3. Signing Authority	<p>The motion was read.</p>	<p>It was moved by: T. Jansman Seconded by: P. Deery That: Two signatures shall be required on each cheque, with the combination being comprised of the Medical Officer of Health/CEO or Business Manager or Director, Quality, Corporate</p>	

Agenda Item	Key Discussion Points	Decision	Action
		<p>and Information Services with any one of the Chair or Vice Chair.</p> <p>The signing officers for the Corporation of the Leeds, Grenville and Lanark District Health Unit for the year 2017 are as follows:</p> <p>Medical Officer of Health/CEO <u>Dr. Paula Stewart</u></p> <p>Business Manager <u>Jackie Empey</u></p> <p>Director Quality, Corporate and Information Services <u>Shani Gates</u></p> <p>Chair <u>Anne Warren</u></p> <p>Vice Chair <u>Doug Malanka</u></p> <p>Motion Carried.</p> <p>I certify this to be a true copy of the Resolution passed by the Board of Health of the Leeds, Grenville and Lanark District Health Unit at a meeting duly called and regularly held on the 16th day of February, 2017.</p>	

Agenda Item	Key Discussion Points	Decision	Action
		<p>Date this <u>16th</u> day of <u>February</u>, 2017</p> <p><u>Heather Bruce</u> Executive Assistant of the Board of Health</p>	
7.2. Governance Committee Report:	A. Warren is reporting on this because C. Russell-Julien is not present today.		
7.2.1. Committee Membership	<p>Please send Committee Expression of Interest form to H. Bruce if you are interested in sitting on the Governance or Finance, Property and Risk Management Committee.</p> <p>We recommend that you do sit on one of these committees while you are on the Board.</p>	<p>It was moved by: A. Churchill Seconded by: D. Nash That: Board of Health members indicate their interest in participating on the Governance Committee or Finance, Property and Risk Management Committee by completing the Committee Expression of Interest Form and sending it to Heather Bruce by email by March 3, 2017.</p> <p>Motion Carried.</p>	
7.2.2. Generative Discussions	<p>You will recall that last year we had a session with Jacques Levesque about generative governance discussions and advantages of doing that.</p> <p>We had hoped to have a generative discussion but time has not permitted this.</p>	<p>It was moved by: H. Patel Seconded by: T. Jansman That: A generative discussion be held at the April 20, 2017 Board of Health meeting on the topic "Community Response to the Problematic</p>	

Agenda Item	Key Discussion Points	Decision	Action
	It has been decided that a generative discussion will take place at the April 20 th Board of Health meeting. The topic will be Community Response to the Problematic Use of Opioids.	Use of Opioids". Motion Carried.	
7.2.3. Board Audit	Within the alPHa toolkit it talks about having an audit to look at efficiency and effectiveness. It is being recommended that we go through an audit at the next Governance Committee meeting.	It was moved by: D. Nash Seconded by: A. Churchill That: The Governance Committee will perform an audit of the Board of Health using the Governance Audit Questionnaire provided in the alPHa Governance Toolkit. Recommendations will be made to the Board on strengths and how its functioning could be improved. Motion Carried.	
7.3. Notice to Bargain	P. Stewart advised that both of our collective agreements with CUPE and ONA are up on March 31, 2017 and both unions have given us notice to bargain. CUPE will be done in the next month or so and then ONA will be shortly thereafter.		
7.4. Minister's Expert Panel on Public Health	P. Stewart is bringing this here for the Board's attention. It was a year ago that Minister Eric Hoskins suggested that public health be brought into the LHIN (funding). Our Board wrote a letter, along with others, to say it was not appropriate and the		

Agenda Item	Key Discussion Points	Decision	Action
	<p>Minister decided to delay the decision until the Expert Panel on Public Health could advise him.</p> <p>The Minister of Health and Long-Term Care has now formed the Expert Panel on Public Health. The mandate letter states the work will include a review of various models for integration for public health into the broader health system.</p> <p>P. Stewart expressed concern that the work of the Expert Panel is confidential and doesn't include consultation with the field. She will keep the Board apprised of the reports from the Expert Panel.</p>	<p>The Board agreed to include in the letter to Minister Hoskins about the Menu Labelling Act concerns about the lack of consultation for the Expert Panel on Public Health.</p>	
<p>8. MOH Verbal Report</p>	<p>P. Stewart gave her MOH Verbal Report. (See Appendix #2)</p> <p>A. Warren advised that on March 14, 2017 from 6:00 – 9:00 p.m. there will be a session held in Gananoque to talk about fentanyl. The health unit will be there and a Sargent from our police department as well. Everyone is welcome to attend.</p> <p>P. Stewart advised that we need to identify someone else to attend the LHIN Sub-region meetings. A. Churchill attends and R. Jones used to attend when she was on the Board. The goal is to get organizations working together. D. Nash expressed an interest. The next meeting is on March 3rd</p>		<p>P. Stewart to submit D. Nash's name to the LHIN group.</p>

Agenda Item	Key Discussion Points	Decision	Action
	<p>in the morning.</p> <p>The motion to adjourn the regular meeting was read at 5:02 p.m.</p>	<p>It was moved by: P. Deery Seconded by: T. Jansman That: The Board of Health Regular Meeting adjourn.</p> <p>Motion Carried.</p>	
9. In-camera Items:	The motion to move in-camera was read.	<p>It was moved by: H. Patel Seconded by: T. Jansman That: The Board move into a closed session of the Board of Health due to the following:</p> <ul style="list-style-type: none"> • Labour relations or employee negotiations <p>Motion Carried.</p>	
9.1. Labour Relations			
10. Report from In-Camera (if necessary)	A labour relations issue was discussed and there is nothing to report further.	<p>It was moved by: D. Nash Seconded by: A. Churchill That: This closed session rise and report.</p> <p>Motion Carried.</p>	
11. Time, Date and Location of Next Meeting	The next meeting will be held on Thursday, April 20, 2017. Everyone will be required to attend in Brockville.		
12. Adjournment		<p>It was moved by: A. Churchill Seconded by: D. Nash That: The meeting adjourn at 5:20</p>	

Agenda Item	Key Discussion Points	Decision	Action
		p.m. Motion Carried.	

A. Warren, Chair

Date

H. Bruce, Executive Assistant

Date

c: Board members
Shared Drive



Joan Mays

Manager, Community Health Protection Department



Healthy Menu Choices Act, 2015

- The *Healthy Menu Choices Act, 2015* and its accompanying regulation Ontario Regulation 50/16 came into effect on January 1st, 2017.
- Public Health Units have been designated to enforce this Regulation and Act



Why?

- Requiring the display of calories on menus will provide customers with nutrition information to help them make well-informed choices about what they eat and feed their children when dining out.



Who does this apply to?

The types of food service premises with 20 or more locations in Ontario affected by this legislation include:

- Restaurants
- Quick service restaurants
- Convenience stores
- Grocery stores
- Movie theatres
- Public-facing cafeterias
- Bakeries
- Food trucks
- Buffets
- Ice cream shops
- Coffee shops

Applies to processed/prepared food or drink items that are intended for immediate consumption on the premises or elsewhere without further preparation by a customer before consumption (i.e., foods considered to be 'ready to eat').



What is expected?

Owners and operators of regulated food service premises with 20 or more locations in Ontario must comply with this legislation requiring them to display calories on menus for standard food items as follows:

1. **Number of calories for every standard food and beverage item on menus, display tags or labels where standard food items are put on display as well as for self-serve food and beverage items; and**
2. **Contextual statement: The average adult requires approximately 2,000 to 2,400 calories per day; however, individual calorie needs may vary.**



Where must calories be displayed?

- Calories must be displayed on any menu that lists standard food items offered for sale by a regulated food service premises. A menu includes:
 - Paper Menus
 - Electronic Menus (e.g. menus on tablets)
 - Menu Boards
 - Drive-Through Menus
 - Online Menus***
 - Online Applications***
 - Advertisements***
 - Promotional Flyers***
- Where standard food items are put on display, calories must be displayed on labels or tags.
- *****Calories only need to be displayed on online menus, applications, advertisements and promotional flyers if prices for standard food items are displayed and the standard food items listed are available for delivery or take away ordering.**



Displaying calories on a restaurant menu

Calories posted per serving, and number of servings per item is listed

Calories posted in at least the same size, font, format, and prominence as the name/price of the standard food item

Shareable Appetizers	Entrees	Desserts
<p>Spinach Dip \$6.99 190 Cals/serving, serves 4</p> <p>Nachos \$13.99 400 Cals/serving, serves 4</p> <p>Bruschetta \$7.99 250 Cals/serving, serves 2</p>	<p>Chicken \$16.99 Chicken, mashed potatoes and grilled vegetables 600 Cals</p> <p>Steak \$23.99 7-bone steak with mashed potatoes and grilled vegetables 890 Cals</p> <p>Vegetable Stir-Fry \$15.99 Assorted vegetables cooked in a teriyaki sauce and served on rice 450 Cals</p> <p>Salmon \$20.99 Salmon with grilled vegetables and a house salad 600 Cals</p>	<p>Chocolate Mousse Cake \$6.99 450 Cals</p> <p>Neopolitan Ice-cream \$3.99 250 Cals</p>
Salads	Drinks	
<p>House Salad \$8.99 320 Cals</p> <p>Cesar Salad \$10.99 520 Cals</p>	<p>Pop \$1.99 0-190 Cals</p> <p>Juice \$1.99 120-140 Cals</p> <p>Sparkling Water \$1.99 0 Cals</p> <p>The average adult requires approximately 2,000 to 2,400 calories per day; however, individual calorie needs may vary.</p>	

Contextual statement posted in same font, format, size, and prominence as name/price of standard food item and in close proximity to standard food items. Posted on one side of a pamphlet style menu. Statement would also be posted on the opposite side if the menu continues.

Calorie range posted for lowest calorie option to highest calorie option

Displaying calories for menu items with multiple varieties

Range accounts for different varieties

Calories declared per individual serving



Baked Goods		Cals
Cookie	\$0.90	150-190
1/2 Dozen	\$3.99	
Dozen	\$6.99	
Donut	\$1.09	140-260
1/2 Dozen	\$4.79	
Dozen	\$7.29	
Donut Hole	\$0.29	70-90
10	\$1.99	
20	\$3.49	
Muffin	\$1.09	320-540
1/2 Dozen	\$4.79	
Dozen	\$7.29	
Bagel	\$1.19	210-390
With Cream Cheese	\$1.99	350-530
With Butter	\$1.69	310-490

The average adult requires approximately 2,000 to 2,400 calories per day; however, individual calorie needs may vary.

Calories declared for each variety

Serving size is one

Implementation for LGL Health Unit

- All Public Health Inspectors will be designated under the Act.
- One inspector assigned to lead Menu Labelling
 - Consistency
 - expertise
- Supplement communication to industry



Leeds, Grenville and Lanark District Health Unit

MOH Verbal Report

February 16, 2017

Organization

The Ministry of Health and Long-Term Care has notified all Health Units that they expect to release the proposed modernized Ontario Public Health Standards for community consultation in February 2017. The final version will be sent to the Health Units in May 2017 with expected implementation in January 2018. This timing coincides well with the plan to start the renewal of the Strategic Plan in September 2017.

Two Request for Proposals have been prepared – one to identify an effective and efficient Electronic Medical Record for the Health Unit clinical services; and one to identify the appropriate platform for the new Health Unit Activity Reporting System.

The Health Unit now has the ability to accept credit card payment for services offered. (i.e. land control, vaccine purchase, food handler courses, rental of facilities etc.) This will improve service to our clients.

Program Update

The Health Unit is helping to plan an Opioid Mass Overdose Emergency Response Exercise on Monday, February 27, 2017 in Kingston in collaboration with Public Health Ontario and Kingston, Frontenac, Lennox and Addington Public Health. The day will bring together public health, police, fire, EMS, hospitals, health care providers and others to identify what will be needed to respond to a situation where several people have an opioid overdose in one place and/or in a short period of time. This scenario has already happened elsewhere in Canada and Ontario, and stretches available resources. The workshop will also help to inform the development of the community Opioid Plan. The Health Unit will be presenting information on the opioid crisis at the Town of Gananoque Public Information Night on March 14, 2017.

The Power Up Youth Summit was held in Gananoque on February 3-5 thanks to a Ministry of Tourism, Culture and Sport Ontario 150 Partnership Program Grant. It focused on Rural Youth Civic Engagement and was attended by 52 youth from 17 different organizations across Leeds, Grenville & Lanark Counties. Youth were inspired to connect with their communities, participated in interactive workshops that provided the skills and knowledge to take back home and networked with peers. Sunday morning was spent action-planning with their groups and adult allies. The Summit also provides funding for the groups to implement those action plans!

The Healthy Kids Community Challenge introduced the Community Water Bottle Filling Station Initiative to engage communities around the second theme of: *Water Does Wonders*. This initiative encourages kids and families to drink water as a healthy alternative to sugar-sweetened beverages. Water Bottle Filling Stations that provide access to fast, clean, hands-free water have been installed across Leeds-Grenville in partnership with 23 charitable and non-profit organizations/groups.

As of January 1st 2017 all tobacco products that contain or impart an aroma of Menthol have been prohibited. We have conducted over 100 visits to our local tobacco retailers to ensure compliance with the legislation. We expect to be done with visiting all tobacco retailers by the end of February. Most are very compliant, although some warnings have been issued.

LHIN

The Lanark, Leeds, Grenville Sub-Region of the SELHIN continues to plan how to improve health services in the sub-region. The second Forum for Health, Community Care and Social Service Governors and Leaders will be held on Friday, March 3, 2017. The title of the forum is "Opportunities to Strengthen Patient-centred Care in Lanark Leeds and Grenville." The Health Unit will participate in the forum.

The Health Unit has also participated in the Champlain LHIN initiative called "Thrive" to study child and youth health services capacity planning across their region.

Provincial work continues through the Ministers Panel on Public Health to "recommend changes to the local public health sector that would support the realization of the Minister's vision for an integrated health sector as outlined in *Patients First: A Proposal to Strengthen Patient-Centred Health Care in Ontario*."