

## **Board of Health Meeting September 21, 2017**

### **Summary**

#### **New Funding for the Community Opioid Response**

The Leeds, Grenville and Lanark District Health Unit will receive an additional \$150,000 in annual on-going staff funding as part of the Provincial Strategy to Prevent Opioid Addiction and Overdose. The funding is to support implementation of the harm reduction pillar building on programs and services already offered, and building sustainable community outreach and response capacity. The scope of the work includes:

- Leading/supporting the development, implementation, and evaluation of a local overdose response plan. This is well underway in Lanark, Leeds and Grenville led by the Harm Reduction Steering Committee with multiple partners.
- Providing training for, and the distribution of naloxone, to eligible community organizations so they can in turn provide naloxone to their client groups. A survey is being sent to community organizations to identify their need for naloxone and training.
- Early warning and surveillance – The Health Unit will participate in the ministry harm reduction survey that captures data on naloxone distribution and use. The Leeds, Grenville and Lanark region has an early warning system in place with the Health Unit as the hub to share information from police, EMS, hospitals, coroner, other health units, emergency visit database (ACES), and the overdose reporting tool with other partners.

#### **Opioid Overdose Response by Firefighters**

The Health Unit has developed a policy and procedure to support municipal firefighters in an opioid overdose situation in collaboration with the Emergency Coordinators, the EMS-Paramedic Programs, and the Fire Service Coordinators of both Lanark County and the United Counties of Leeds and Grenville. The first responders will be responsible for the initial assessment, airway and respiratory support, and CPR, if needed. When the vehicle arrives, the additional firefighters will provide support until EMS arrives, including providing naloxone, if available. The Health Unit has trained some municipal fire departments to use naloxone according to the policy, and several more have expressed interest. EMS-Paramedics of Lanark County and United Counties of Leeds and Grenville are also possible trainers.

## **MOHLTC Expert Panel Report**

In January 2017, Minister Hoskins, Ministry of Health and Long-Term Care, established an Expert Panel on Public Health to provide advice on structural, organizational, and governance changes for Ontario's public health sector within a transformed health system. The Expert Panel's Report was released earlier this summer. The report, if accepted and acted upon by Minister Hoskins, would set local public health on a new and untested path. Fourteen Regional Public Health Entities (RPHE) would be set up in parallel to the 14 LHIN's, replacing the current 36 Ontario Health Units. The local municipal role in governance would be very limited, and it is not clear how the current municipal funding would be managed in a much broader entity. The report lacks important implementation information, leaving questions about whether the proposed governance and organizational structure would be cost beneficial and would improve programs and services to our community, or, if it would simply add another costly administrative layer with a reduction in funds available for local programs and services.

## **Apportionment of the Municipal Levy**

The Board of Health strongly recommended that the more accurate Statistics Canada population data be used to apportion the municipal levy among obligated municipalities rather than the MPAC population data. MPAC had stressed that their population data collected every four years for enumeration purposes should not be used for any other purposes. Obligated municipalities were asked to advise the Health Unit by August 31, 2017 whether they agreed with the Board's recommendation. Four of the six obligated municipalities agreed with using Statistics Canada data to apportion the municipal levy, one did not, and one has not communicated their preference. According to the Health Protection and Promotion Act, if the municipalities cannot agree on the method for the apportionment of the municipal levy, then MPAC must be used for 2017. The Board will revisit this in 2018.

## **Program Update**

The Leeds Grenville Healthy Kids Community Challenge Theme 3, *Healthy Recreation Concession Situational Assessment*, is underway. Interviews will be conducted with the municipal Recreation Coordinators or other staff to learn more about the food environment in municipal recreation facilities throughout the Leeds, Grenville and Lanark region. The plan is to discuss what is currently happening in recreation facilities, and if the Health Unit toolkit/support would be helpful to the staff in promoting healthier food that is available for sale in their facilities.

The MOHLTC will be extending the requirement to post inspection reports on the Health Unit website to other environmental health programs beyond food premises, for example, arenas, personal service settings, and day cares in the near future.