



## **Board of Health Meeting May 23, 2024**

### **Summary**

#### **Strengthening Public Health**

The Tri-Board Merger Committee established to explore a potential merger with Hastings Prince Edward (HPE) Public Health, Kingston, Frontenac and Lennox & Addington (KFL&A) Public Health and the Leeds, Grenville and Lanark District Health Unit has transitioned to the South East Transition Team (SETT). They will be responsible for conducting the preparations and making recommendations to the future health unit's Board of Health. A Memorandum of Understanding is being drafted to guide the work of the SETT over the next seven months with an anticipated merger date of January 1, 2025.

Stephen Bird, Public Appointment for the LGL Board of Health, was appointed as the fourth member of the LGL Board of Health to sit on the SETT.

#### **Association of Local Public Health Agencies (alPHA) Conference and Annual General Meeting**

Peter McKenna, Board Chair, will be attending the upcoming alPHA Conference and Annual General Meeting being held in June and board members passed a motion appointing him as the voting delegate for the Leeds, Grenville and Lanark District Health Unit.

#### **Sexual Health Service Updates**

Dr. Li advised that there has been a rise in sexually transmitted infections (STIs) in the province for a number of years now, including in our region and LGLDHU has one of the highest rises of syphilis in Ontario. The epidemiology of STIs more broadly is also changing, with growing risks among gay, bisexual, and men who have sex with men, those who are homeless, and those who use unregulated substances. All of this means that the health unit needs to shift resources to focus on high-risk populations, including an outreach model. Given limited resources as an organization, this means changes are needed to some of our sexual health services.

We are currently reviewing potential changes which includes changes to sexual health clinic schedules and shifting to a by-request model for certain sexual health clinic sites that are consistently less busy, rather than pre-booked clinic times. Other changes include further promotion of self-testing options and having a greater focus on those with no primary care provider. Changes to sexual health services is an example of work being done in programs across the organization to assess and shift our services as a result of evolving health needs post-pandemic.

## **Chief Medical Officer of Health's Annual Report**

The Chief Medical Officer of Health in Ontario recently released an annual report on the use of key psychoactive substances in Ontario: nicotine, alcohol, cannabis, and unregulated substances such as opioids. This is an excellent report that highlights the health harms and economic harms of these substances, as well as evidence-based interventions to prevent these harms. The report can be found at the following link:

<https://www.ontario.ca/page/chief-medical-officer-health-2023-annual-report>

Consistent with the Health Unit's work, the report emphasizes an all-of-society approach to substance use and harms. There are many interventions that we know are effective in preventing substance use and harms, and these interventions fall beyond public health and in the scope of clinicians, municipalities, the private sector, the province, and many more.

## **Public Health Ontario Labs**

The Auditor General has issued a report with a recommendation that Public Health Ontario Labs (PHOL) wind down their private well water testing. Private homes with well water are able (and highly encouraged!) to get their wells tested for bacterial contamination and this testing is provided for free to private homes, with pick-up and drop-off locations at the Health Unit across the LGL region. The program is run by the province, through PHOL, and the Health Unit is the distribution depot. Of note, access to and funding for private well water testing is determined by the province and by PHOL, and is not under the Health Unit's control.

Board members discussed correspondence received from municipalities regarding the proposed phase-out of private well water testing and requested that further information on local data be provided by staff for further discussion at a future Board of Health meeting.

## **Measles**

There has been a rise in cases of measles in Ontario as a result of disruptions to measles vaccination globally during the COVID-19 pandemic. Most Ontario cases have been associated with travel, and have been among individuals who had not received measles vaccination. There have been no cases in the LGL region yet, though our infectious diseases team has done a number of investigations of suspected cases. Measles typically causes a mild illness, though around one in 1000 people may have severe or life-altering complications. The single most effective way to prevent measles infection is the measles vaccine.

## **Retirement of Susan Yates**

Peter McKenna, Board Chair, thanked Susan Yates, Director of Clinical Services and Chief Nursing Officer for the Health Unit for her service and wished her well in her retirement.