

**HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT  
BOARD OF HEALTH MEETING  
November 18, 2021**

**MINUTES**

The meeting was convened by Mr. Elmslie at 9:30 am via Microsoft Teams.

Those in attendance were Messrs. Elmslie, Cane, Crate, Marshall, and Henderson, Mrs. Richardson, Mrs. Brown, Mrs. Roberts, Dr. Bocking, Mrs. Vickery, Mrs. Tremblay, and Mrs. Dickson.

**1. ADOPTION OF THE AGENDA**

Moved by Mr. Henderson

Seconded by Mrs. Brown

THAT the agenda be adopted as presented.

2021-134  
carried

**2. DECLARATION OF CONFLICT OF INTEREST**

None

**3. ADOPTION OF REGULAR MINUTES**

Moved by Mr. Crate

Seconded by Mrs. Richardson

THAT the regular minutes of the Board of Health meeting held on October 21, 2021  
be approved and signed electronically.

2021-135  
carried

**4. BUSINESS ARISING**

Letter of Concern RE: Impasse between Ministry of Health and the Ontario Association of Optometrists

Moved by Mr. Cane

Seconded by Mrs. Roberts

THAT the Board approve the proposed letter to the Ministry of Health and the  
Ontario Association of Optometrists.

2021-136  
carried

## 5. MEDICAL OFFICER OF HEALTH UPDATES

### HEALTH PROMOTION

#### *Healthy Babies Healthy Children Program*

The Healthy Babies Healthy Children (HBHC) program continues to be implemented, with some virtual adaptations made throughout the COVID-19 pandemic. Like many jurisdictions, we continue to see mental health and anxiety along with domestic violence as key trends affecting families in our Health Unit jurisdiction. In response to these trends the HBHC team implemented a mothers' circle aimed to promote optimal parental mental health. The circle provides an open safe space for mothers enrolled in the HBHC home visiting program to share feelings, participate in mindfulness, and discuss challenges experienced throughout the pandemic. In Q3 a total of two circles were facilitated by public health nurses. The mothers' circle was submitted as the first of its kind to the Ministry of Community, Children and Social Services and was accepted as part of our service agreement. Next steps are to fully implement the program and develop an evaluation to measure formally its impact with mothers.

### HEALTH PROTECTION

#### *Universal Influenza Immunization Program*

As mentioned last month, the official launch of the Universal Influenza Immunization Program (UIIP) took place on October 15<sup>th</sup>.

#### Highlights:

- Healthcare worker influenza immunization reporting will be required again this year. Long-term care homes and hospitals will directly report their immunization rates using a survey tool provided by the Ministry of Health.
- Long-term care homes will be required to capture resident influenza rates again this year.

#### Key dates:

- The Ministry will distribute the survey link and reporting materials by November 15<sup>th</sup>.
- Hospitals and long-term care homes may start inputting their influenza immunization rates when the survey link goes live on November 25<sup>th</sup>.
- The deadline for submitting influenza immunization data is January 15, 2022.
- The Health Unit will provide UIIP clinics for children less than 5 years of age on December 7<sup>th</sup> in the Lindsay office and on December 14<sup>th</sup> in the Port Hope office.

[Ontario Respiratory Pathogen Bulletin](#)

Public Health Ontario monitors and analyzes the spread and intensity of respiratory pathogen activity and influenza in Ontario to support local, provincial, federal, and global surveillance efforts. The website is updated weekly.

Although local COVID-19 activity has been low throughout October and the beginning of November, we are experiencing respiratory outbreaks due to other pathogens. Increased activity of rhinovirus, parainfluenza virus and Respiratory

Syncytial Virus has resulted in several outbreaks among childcare centres, long-term care homes, and retirement homes.

**CORPORATE SERVICES**

*Privacy Training*

All staff have received annual mandatory privacy training.

The training included a review of:

- Definitions of personal and personal health information under the *Municipal Freedom of Information and Protection of Privacy* and the *Personal Health Information Protection Acts*;
- Policies and procedures related to collecting and accessing personal and personal health information;
- Consent for release;
- Documentation procedures;
- Storage and security of records;
- Freedom of information requests; and
- Minimizing the risk of privacy breaches.

All staff were required to attest in writing that they had reviewed, in detail, the Health Unit's suite of privacy and records management policies and procedures by October 15<sup>th</sup>.

**FOUNDATIONAL STANDARDS**

Foundational Standards staff for the most part remain fully engaged in supporting the ongoing COVID-19 pandemic response.

*Epidemiology*

Our epidemiology team continues to conduct COVID-19 case and contact and outbreak surveillance and reporting along with COVID-19 vaccine administration

surveillance and reporting. They also continue to conduct infectious disease surveillance and reporting activities and provide support to the harm reduction research analyst for opioid surveillance and reporting.

### *Continuous Quality Improvement*

Our Continuous Quality Improvement Coordinator is leading our Ontario Public Health Standards program recovery efforts from both a program planning and quality improvement perspective. Along with other members of the Recovery team, she is presently engaged in conducting focus group interviews with both staff and management that will provide us with information as to how we can best move forward with OPHS program recovery while maintaining our COVID-19 pandemic response through the 4<sup>th</sup> wave.

### *Health Equity*

Our Health Equity Coordinator continues to work with the Vulnerable Sector Working Group and the COVID-19 team to address the needs of vulnerable populations as they relate to case and contact and outbreak management. She has also been highly involved in COVID-19 vaccine planning to ensure that we are including strategies that will provide improved access by vulnerable populations to COVID-19 vaccine.

### *Professional Practice*

The Director of Foundational Standards and Chief Nursing Officer continues to provide professional practice support to both the COVID-19 team and the COVID-19 immunization team. She has assumed responsibility for Executive leadership for COVID-19 vaccine clinic operations and is working with COVID-19 immunization management and staff to plan and implement our next phase of COVID-19 immunization activities.

## **COVID-19 PANDEMIC RESPONSE**

Dr. Bocking advised the Board that there are currently 14 cases of COVID-19 in the Haliburton, Kawartha, Pine Ridge District Health Unit area and 178 high-risk contacts. High-risk contact numbers increase significantly when there are cases in schools. There are currently no outbreaks. The incidence rate is 6.9 per 100,000.

Provincially, the numbers are increasing and other health units are seeing significant COVID-19 activity to the extent that the medical officers of health in those areas are issuing letters of instruction to lower capacity limits in certain settings.

Vaccination progress is moving in slow incremental increases. There are 23,000 people in the Health Unit area that have yet to get their first dose of vaccine, so there is still a risk of outbreaks and community spread.

Moved by Mrs. Richardson

Seconded by Mr. Cane

THAT the MOH Updates be received for information.

2021-137  
carried

## 6. REPORTS

6.1 Bernie Mayer, Manager, Health Protection, provided the Board with an update on enforcement under the *Reopening Ontario Act* (ROA)

The Health Unit uses a progressive approach to enforce the regulations under the *Reopening Ontario Act* (ROA). Progressive enforcement includes engaging with individuals who are not complying; explaining why the Health Unit is responding; educating individuals on the rules and regulations; and enforcement as a last resort.

As of September 22, 2021, people are to be fully vaccinated and provide proof of their vaccination (POV) status to access certain businesses and settings.

Prior to September 22<sup>nd</sup>, the Health Unit provided education to various owners/operators by way of the Health Unit's website, press releases, information sent to business associations, Chambers of Commerce, mass emails, and municipal meetings.

Complaints are received through the Health Unit's Call Centre or the Environmental Health Department's intake line. Staff contact the premise for which a complaint was made against to engage, explain, and educate about COVID-19 requirements. After three separate complaints related to the same premise are received, the file is escalated to a Public Health Inspector (PHI) to investigate. The PHI will visit the premise to further engage, explain, and educate the premise owner/operator, and verify if the complaint is valid. If the complaint is verified, the PHI provides a warning and will conduct a follow-up visit to ensure requirements are being adhered to at the premise.

Enforcement could include a ticket under Part 1 of the *Provincial Offences Act* or a Summons under Part 111 of Provincial Offences Act. Enforcement has put significant pressures onto the PHIs workload. Additional time is required to: collect evidence and co-ordinate with external enforcement partners; co-ordinate service of tickets and/or summons; prepare evidence for court procedures; and prepare for and attend court for those that go to trial.

As of October 15, 2021, 33 formal warnings have been issued for non-compliance with masking and proof of vaccination requirements; 145 Section 22 warning letters have been issued, 17 charges under the ROA have been laid, and three charges have been made under the *Health Protection and Promotion Act* to individuals for not isolating.

Moved by Mr. Henderson

Seconded by Mrs. Roberts

THAT the update on enforcement under the *Reopening Ontario Act* be received for information.

2021-138  
carried

6.2 Lorna McCleary, Manager, Health Promotion, and Vidya Sunil, Acting Manager, COVID-19 Response Immunization provided the Board with

an update on the Fall Vaccine Rollout

The Health Unit's fall vaccine rollout includes plans for first and second doses for those that have been eligible, but have yet to receive their vaccine, children ages 5-11, and those who are eligible for third doses.

The Health Unit is and will be administering vaccine through mass immunization clinics, including weekend clinics at schools. Appointments can be made through the Provincial Booking System, and through a walk-in model. Hospitals, primary care, and EMS have offered to vaccinate their own staff and vaccine will also be available at pharmacies. As with the initial round of vaccine, Community Paramedics will be reaching out to homebound people and other vulnerable groups.

The vaccination strategy for the 5-11 age group will be through primary care where possible, pharmacy, and mass immunization clinics. The mass immunization clinic model for this age group will be family friendly, accommodate for the additional time needed for children, have private areas for those that may be anxious, and have distraction tools as well as incentives.

Moved by Mr. Henderson

Seconded by Mr. Cane

THAT the update on the Fall Vaccine Rollout plan be received for information.,

2021-139  
carried

**7. NEW BUSINESS**

7.1 Healthy Babies Healthy Children Q3 Monitoring Report

Moved by Mrs. Roberts

Seconded by Mr. Cane

THAT the Healthy Babies Healthy Children Q3 Monitoring Report be received for information.

2021-140  
carried

7.2 One-Time Funding to support extraordinary costs associated with preventing, monitoring, detecting, and containing COVID-19

Moved by Mrs. Roberts

Seconded by Mrs. Richardson

THAT the update regarding one-time funding to support extraordinary costs associated with COVID-19 be received for information.

2021-141  
carried

7.3 Unaudited Month-End Operating Statements

Moved by Mr. Marshall

Seconded by Mr. Crate

THAT the draft non-audited Operating Statements for the ten-month period ending October 31, 2021 in the amount of \$18,813,914 be received for information.

2021-142  
carried

7.4 Policy Revision

Moved by Mrs. Richardson  
Seconded by Mr. Cane  
THAT the revision to the Immunization Requirements policy be approved. 2021-143  
carried

**8. BUSINESS FROM BOARD MEMBERS**

None

**9. CORRESPONDENCE**

Moved by Mrs. Roberts  
Seconded Mrs. Brown  
THAT the following correspondence be received for information and filed: 2021-144  
carried

- alPHa Summary – 2021 Ontario Economic Outlook and Fiscal Review
- Association of Local Public Health Agencies' Information Break

**10. IN-CAMERA SESSION**

Moved by Mr. Henderson  
Seconded by Mrs. Richardson  
THAT the Board of Health move in-camera to review the minutes from the October 21, 2021 closed session, legal and personnel items. 2021-145  
carried

Moved by Mrs. Richardson  
Seconded by Mrs. Brown  
THAT the in-camera session be dissolved, and the membership return to the Board of Health. 2021-146  
carried

Moved by Mr. Crate  
Seconded by Mr. Cane  
THAT the in-camera minutes from October 12, 2021 meeting be approved and signed electronically. 2021-147  
carried

Moved by Mr. Marshall  
Seconded by Mrs. Roberts  
THAT personnel item 10.3 be received for information. 2021-148  
carried

Moved by Mrs. Brown  
Seconded by Mrs. Richardson  
THAT legal item 10.4 be received for information. 2021-149  
carried

Moved by Mr. Crate

Seconded by Mr. Marshall

THAT the Board receive the information provided in personnel item 10.5

2021-150  
carried

**11. DATE OF NEXT MEETING**

The next open session meeting of the Board of Health will be held at the Best Western in Cobourg on December 2, 2021.

**12. ADJOURNMENT**

Moved by Mr. Cane

Seconded by Mr. Crate

THAT the meeting be adjourned. The meeting adjourned at 10:52 am.

2021-151  
carried

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Chair

\*\*\*approved December 2, 2021\*\*\*

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Recorder