

**RESOLUTIONS CONSIDERED AT THE
2002 alPHa ANNUAL CONFERENCE**

Resolution Number	Sponsor	Title
A02 – 1	alPHa Board of Directors	alPHa Membership Fee Structure
A02 – 2	Board of Health for the Hastings & Prince Edward Counties Health Unit	Adequate Funding for Public Health Programs and Services
A02 – 3	Regional Municipality of Durham	Commission on the Future of Health Care in Canada
A02 – 4	Regional Municipality of Durham	Mandatory Cervical Screening Test Reporting
A02 – 5	Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health	Reporting on Sexual Health, AIDS and Other STD Teaching
A02 – 6	Council of Ontario Medical Officers of Health of alPHa	Arsenic in Drinking Water
A02 – 7	Council of Ontario Medical Officers of Health of alPHa	Influenza Immunization and Reporting
A02 – 8	Regional Municipality of Durham	Routine Childhood Immunization
A02 – 9	Regional Municipality of Durham	Safe Drinking Water
A02 – 10	Council of Ontario Medical Officers of Health of alPHa	Aboriginal Public Health in Ontario

alpha RESOLUTION NO. A02 - 1

TITLE: alpha Membership Fee Structure

SPONSOR: alpha Board of Directors

WHEREAS the Ministry of Health and Long-Term Care, Public Health Branch discontinued the funding of the Association of Local Public Health Agencies (alpha) on April 1, 2001; and

WHEREAS the Ministry of Health and Long-Term Care, Public Health Branch's contribution of funds amounted to 40 percent of alpha's total operating budget; and

WHEREAS alpha's role as representing Ontario's Boards of Health is not represented by any other association; and

WHEREAS alpha's value to members in terms of cost savings through affinity programs, improved public health policy and legislation and the increased services being provided to Boards of Health is acknowledged; and

WHEREAS there is a recognized increased need for an association to represent, to facilitate discussion and policy development, to share information and to educate the membership across Ontario's Boards of Health; and

WHEREAS the number of issues that require a co-ordinated response on behalf of Boards of Health is increasing in scope and complexity; and

WHEREAS alpha's Board of Directors has renewed the Association's strategic direction to focus the organization on increasing its centralized advocacy with the provincial government and other agencies where appropriate and co-ordinating Ontario's Boards of Health response to public health issues; and

WHEREAS other health associations similar in size and capacity as alpha charge membership fees in excess of 300 percent more in relation to their members' budget size; and

WHEREAS the proposed increase to the membership fees will bring the average percentage of the association operating budget for professional/occupational associations congruent with other similar associations;

NOW THEREFORE BE IT RESOLVED THAT membership fees charged to Boards of Health be increased retroactively effective April 1, 2002 as per the following schedule:

Board of Health Annual Budget*		Total Fee
up to	\$4 M	\$ 3,700
\$4 M	to \$7 M	\$ 5,000
\$7 M	to \$12 M	\$ 7,000
\$12 M	to \$20 M	\$ 9,000
\$20 M	to \$30 M	\$ 11,000
\$30 M	to \$50 M	\$ 13,000
over	\$50 M	\$ 50,000

*the amount of the membership fee is based on the current year's budget and only includes the portion of the budget used for public health services

Action from Conference:

Moved: P. Sutcliffe (Sudbury)
Seconded: J.C. Caron (Porcupine)

Carried

2002 alpha RESOLUTION NO. A02 -2

TITLE: Adequate Funding for Public Health Programs and Services

SPONSOR: Board of Health for the Hastings and Prince Edward Counties Health Unit

WHEREAS the objects of the *Health Protection and Promotion Act (HPPA)* are to provide for the organization and delivery of public health programs and services, the prevention of the spread of disease and the protection and promotion of the health of the people of Ontario; and

WHEREAS the *HPPA* requires boards of health to provide or ensure the provision of mandatory health programs and services in accordance with guidelines published by the Minister of Health and Long-Term Care; and

WHEREAS the *HPPA* requires obligated municipalities to pay for all of the expenses of their respective boards of health and medical officers of health in accordance with the written notice that boards of health are required to submit to its obligated municipality(ies); and

WHEREAS the Minister of Health and Long-Term Care may provide grants to boards of health for the purposes of the *HPPA*; and

WHEREAS many obligated municipalities have been unable to increase property taxes to pay for public health programs and services;

WHEREAS those health units that are most in need of public health programs and services often include those municipalities that have the least ability to pay for those services; and

WHEREAS recent developments including the Walkerton Inquiry; new drinking water regulations; the emergence of West Nile virus; bioterrorism threats; new and/or expanded provincial initiatives such as the influenza vaccination program, Healthy Babies, Healthy Children program, the Early Years program; local public health issues such as local tobacco by-law development, and teenage pregnancy prevention, etc. have resulted in a increased requirements and demands being placed on boards of health; and

WHEREAS the 2000 Mandatory Program Indicator Questionnaire Results found that no board of health is fully compliant with the *Mandatory Health Programs and Services Guidelines*; and

WHEREAS Recommendation 2 of the Report of the Walkerton Inquiry, Part I states, in part, that the Public Health Branch or the Minister's delegate should assess whether resourcing allocations by the Province of Ontario require adjustment to ensure full compliance with the *Mandatory Health Programs and Services Guidelines*;

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) urges the Government of Ontario to ensure that all boards of health receive adequate municipal and provincial funding such that all boards of health are able to fully comply with the *Mandatory Health Programs and Services Guidelines*; and

AND FURTHER that alpha urges the Government of Ontario to recognize and affirm that an unwillingness to adequately fund public health programs and services results in further erosion of these essential programs and services which will adversely affect the health of all Ontarians and will lead to many preventable hospitalizations and deaths occurring resulting in substantial additional costs to the health care system and the overall economy.

Action from Conference:

Moved:

L. Noseworthy (Hastings & Prince Edward)

Seconded:

G. Hebert (Porcupine)

Carried

2002 alpha RESOLUTION NO. A02 -3

TITLE: Commission on the Future of Health Care in Canada

SPONSOR: Regional Municipality of Durham

WHEREAS on February 6, 2002 the Interim Report of the Commission on the Future of Health Care in Canada was tabled in the House of Commons; and

WHEREAS all Canadians are invited to shape the future of health care in Canada by responding to the Interim Report; and

WHEREAS Commissioner Romanow has reaffirmed the five principles of the *Canada Health Act*, namely comprehensiveness, universality, portability, public administration and accessibility; and

WHEREAS Commissioner Romanow is specifically seeking input and advice on whether and how to modernize the *Canada Health Act*; and

WHEREAS public health, i.e., health protection and promotion and disease and injury prevention, programs and services are critical to improving and maintaining the health of Canadians; and

WHEREAS all Canadians should have access to high quality public health services; and

WHEREAS provincial restructuring of public health, e.g., downloading in Ontario, may have lead to an erosion in public health services; and

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) urge the Honourable Roy Romanow, Commissioner, Commission of the Future of Health Care in Canada to recommend to the Government of Canada that:

- the five principles of the *Canada Health Act* are extended to cover public health services in order to preserve and protect them; and
- the federal/provincial/territorial governments recognize the importance of the broader determinants in improving and maintaining the health of Canadians and work together to identify, address and advance such determinants.

Action from Conference:

Moved: L. O'Connor (Durham)

Seconded: P. Sutcliffe (Sudbury)

Carried

2002 alpha RESOLUTION NO. A02 - 4

TITLE: Mandatory Cervical Screening Test Reporting

SPONSOR: Regional Municipality of Durham

WHEREAS cervical cancer is a leading cause of death in women; and

WHEREAS there is emerging medical evidence that links the presence of human papilloma virus with the progression of mild cervical abnormalities to invasive cervical cancer; and

WHEREAS cervical cancer deaths are preventable through regular Pap smear and confirmatory testing; and

WHEREAS effective cervical cancer control is best accomplished through an organized province-wide cervical screening program; and

WHEREAS Cancer Care Ontario has developed and administers the Ontario Cervical Screening Program (OCS); and

WHEREAS the OSCP has financed the development of CytoBase, a software program designed to support the establishment of cervical cancer registry; and

WHEREAS an effective cervical cancer registry requires the accurate and complete reporting of all Pap smear, colposcopy and biopsy test results; and

WHEREAS the Government of Manitoba has recently completed the implementation of a cervical cancer registry using CytoBase; and

WHEREAS the Government of Manitoba has also amended the *Diseases and Dead Bodies Regulation* under the *Public Health Act* such that laboratory operators and colposcopists are required to file reports on cervical cancer screening to the medical director of the Manitoba Cervical Cancer Screening Program;

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) urges the Government of Ontario to amend the *Health Protection and Promotion Act* and the regulations thereunder such that laboratory operators and colposcopists are required to file reports on cervical cancer screening to the appropriate person employed by Cancer Care Ontario;

AND FURTHER that alpha urges the Government of Ontario to work with alpha and other key stakeholders to investigate and advance the mandatory reporting, under the authority of *the Health Protection and Promotion Act*, of other non-communicable diseases.

Action from Conference:

Moved: R. Kyle (Durham)

Seconded: A. Hukowich (Haliburton, Kawartha)

Carried

2002 alpha RESOLUTION NO. A02 - 5

TITLE: **Reporting on Sexual Health, AIDS and Other STD Teaching**

SPONSOR: Haliburton, Kawartha, Pine Ridge District Health Unit Board of Health

WHEREAS Boards of Health are required to work with community partners to ensure the provision of programs to the public that promote appropriate individual reproductive and sexual health choices and such programs shall include as a minimum, three hours of sexual health education annually and the provision of three hours annually of education about AIDS and about other Sexually Transmitted Diseases (STD's), to all students in grades 7-9 by the person or organizations that operates the school¹; and

WHEREAS in schools where this education is not provided, the Board of Health will report this to the Ministry of Health and Long-Term Care, and a program of equivalent activities targeted to school-aged children shall be delivered through other community settings²; and

WHEREAS the teachings of issues relating to healthy sexuality is part of the Ontario health curriculum for grades 7-9³; and

WHEREAS the Minister of Education may require a Board of Education to report to the Minister⁴; and

WHEREAS school principals are required to provide reports to the Minister of Education and Boards of Education but are prohibited to provide information to persons outside the Ministry unless in compliance with a specific requirement of the Education Act or its regulations⁵;

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alPHa) petition the Minister of Health and Long-Term Care to request the Minister of Education to amend appropriate sections of the Education Act so as to require the reporting of the proportion of students in grades 7-9 receiving the minimum three hours of sexual health teaching and three hours of education about AIDS and other STD's, annually, by schools, and further that such reports be provided to the Boards of Health having jurisdiction for each school.

Action from Conference:

Moved:

A. Hukowich (Haliburton, Kawartha)

Seconded:

R. Kyle (Durham)

Carried

1 Mandatory Health Programs and Services Guidelines, December 1997, p. 37, p. 62

2 Ibid

3 The Ontario Curriculum Grades 1-8 Health and Physical Education 1998, p. 18, 19

The Ontario Curriculum Grades 9 and 10 Health and Physical Education 1999, p. 10

4 Education Act, Section 8(1) 27.1

5 Education Act, Sections 265(j); 266(2), (6), (7) & (10)

2002 alpha RESOLUTION NO. A02 - 6

TITLE: Arsenic in Drinking Water

SPONSOR: Council of Ontario Medical Officers of Health of alpha

WHEREAS Arsenic is a known human carcinogen¹; and

WHEREAS Ontario has an Interim Maximum Acceptable Concentration (IMAC) of Arsenic in drinking water of 0.025 mg/L² (25 parts per billion ppb) since at least 1994³; and

WHEREAS the Government of Canada established an objective level for arsenic of less than or equal to 0.005 mg/L (5 ppb) in 1978⁴; and

WHEREAS the National Research Council of the United States National Academy of Sciences has concluded that:

1. There is increasing evidence that chronic exposure to arsenic in drinking water may be associated with an increased risk of hypertension and diabetes,⁵ and
2. the **excess** cancer risk for bladder and lung cancers combined at arsenic concentrations in drinking water between 3 and 20 ppb are estimated to be between 9 and 72 per 10,000 people.⁶

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) urges the Government of Ontario to amend Regulation 459/00 under the Ontario Water Resources Act to set a Maximum Acceptable Concentration for Arsenic in drinking water of 0.003 mg/L (3 ppb).

Action from Conference:

Moved:

A. Hukowich (Haliburton, Kawartha)

Seconded:

D. Corriveau (Porcupine)

Carried

¹International Agency for Research in Cancer

²Schedule 4, Ontario Regulation 459/00 as amended by O.R. 506/01 under the Ontario Water Resources Act

³Ontario Drinking Water Objectives (Revised, 1994), p. 10

⁴Guidelines for Canadian Drinking Water Quality 1978 , Supporting Documentation, p. 159

⁵ Arsenic in Drinking Water: 2001 Update, p. 214

⁶ Ibid., p. 223

2002 alpha RESOLUTION NO. A02 - 7

TITLE: Influenza Immunization and Reporting

SPONSOR: Council of Ontario Medical Officers of Health of alpha

WHEREAS member organizations within the Association of Local Public Health Agencies are required to “promote immunization for children and adults through policy and procedure development in institutions and to health care workers”¹; and

WHEREAS public health staff have a duty to implement programs to reduce or eliminate various infectious diseases through infection control and vaccination programs inside institutions as well as within the community as a whole; and

WHEREAS the Ministry of Health and Long-Term Care requires reporting of influenza immunization status annually for employees of hospitals and Long Term Care facilities; and

WHEREAS the Ambulance Act requires that all emergency medical attendants and paramedics receive influenza immunization annually unless contraindicated²;

WHEREAS a union representing such workers has argued that it is discriminatory to single out only this category of health service worker for annual influenza immunization; and

WHEREAS the maintenance of up to date immunization against influenza protects the employee’s personal health, ensures workplace safety, protects the integrity of public health staffing, reduces the potential for staff to transmit influenza to well or vulnerable members of the public and sets the appropriate example;

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) request that the Minister of Health and Long-Term Care amend:

1. Regulation 566 (Qualifications of Boards of Health Staff) under the Health Protection and Promotion Act to require that all employees of Boards of Health be required to be immunized annually against influenza unless contraindicated and
2. the Mandatory Health Programs and Services Guidelines to require Boards of Health to report to the Minister of Health on the influenza immunization status of employees annually.

Action from Conference:

Moved:

A. Hukowich (Haliburton, Kawartha)

Seconded:

R. Kyle (Durham)

Carried

¹Mandatory Health Programs and Services Guidelines December 1997, p. 66

²Ontario Regulation 257/00 as amended to O. Reg 386/01, Section 6(1)(h)

2002 alPHa RESOLUTION NO. A02 - 8

TITLE: Routine Childhood Immunization

SPONSOR: Regional Municipality of Durham

WHEREAS the Government of Ontario has publicly funded vaccines against diphtheria, H. influenza b, measles, mumps, pertussis, polio, rubella and tetanus for routine childhood immunization for many decades; and

WHEREAS on October 15, 2001, the National Advisory Committee on Immunization (NACI) recommended that all infants receive meningococcal conjugate vaccine as part of routine immunization; and

WHEREAS on January 15, 2002, the NACI recommended that all children 23 months of age receive pneumococcal conjugate vaccine as part of routine immunization; and

WHEREAS on February 15, 2002, the NACI recommended that all children between 12 and 18 months of age receive varicella vaccine as part of routine immunization; and

WHEREAS meningococcal conjugate vaccine, pneumococcal conjugate vaccine and varicella vaccines are licensed for use for routine childhood immunization in Canada;

NOW THEREFORE BE IT RESOLVED THAT the Association of Local Public Health Agencies (alPHa) urges the Government of Ontario to include meningococcal conjugate vaccine, pneumococcal conjugate vaccine and varicella vaccine in the schedule of publicly funded routine childhood immunization in accordance with the relevant NACI recommendations.

Action from Conference:

Moved: A. Hukowich (Haliburton, Kawartha)
Seconded: R. Kyle (Durham)

Carried

2002 alPHa RESOLUTION NO. A02 - 9

TITLE: Safe Drinking Water

SPONSOR: Regional Municipality of Durham

WHEREAS guidelines are not strong enough to ensure safe drinking water by protecting water at its sources; and

WHEREAS the Ontario Ministry of the Environment (MOE) appears to take the position that the community must prove harm to the environment before it will act, despite scientific evidence that there are contamination issues; and

WHEREAS the MOE's surface water testing near sound-sorb (paper-fibre biosolids and sand) showed significant exceedences against both the Contaminated Site Guidelines Table A (a potable groundwater condition) and the Provincial Water Quality Guidelines; and

WHEREAS testing of the Oshawa sound-sorb berm showed significant E.coli contamination, as did the testing by the Region of Durham using Gartner Lee, an independent consultant, and to date the MOE has ordered no remedial action; and

WHEREAS it would be desirable to have a province-wide statutory and regulatory water source protection obligation for rural residents; and

WHEREAS in Walkerton seven people died and more than two thousand and three hundred became ill as a result of contaminated drinking water which occurred because of a lack of co-ordination as emphasized at the Walkerton inquiry,

NOW THEREFORE BE IT RESOLVED THAT the Association of Local Public Health Agencies (alPHa) urges the Government of Ontario to establish a drinking water branch in the Ontario Ministry of the Environment which would encompass protecting sources and conservation in regards to safe water, especially on the Oak Ridges Moraine, and enacting policies and practices directed at preventing drinking water problems.

Action from Conference:

Moved: R. Kyle (Durham)
Seconded: B. MacKay (Toronto)

Carried

2002 alpha RESOLUTION A02 - 10

TITLE: Aboriginal Public Health in Ontario

SPONSOR: Council of Ontario Medical Officers of Health of alpha

WHEREAS Recent correspondence from the Ministry of Health and Long-Term Care clearly indicates that Ontario Board's of Health are fully responsible to deliver all aspects of the Health Protection and Promotion Act and its regulations, including the Mandatory Programs and Services Guidelines; and

WHEREAS a draft review of the Ontario Public Health Infrastructure Available to Aboriginal Peoples by the Public Health Branch indicates many areas of confusion and uncertainty in regards to jurisdictional authority and responsibility in most program, service and legal roles of Ontario's municipal public health system on First Nation Reserves; and

WHEREAS there has been no formal consultation between all parties involved, including First Nations, Treaty Organizations, Federal Government, Provincial Government, Municipal Government and Boards of Health;

NOW THEREFORE BE IT RESOLVED that the Association of Local Public Health Agencies (alpha) strongly recommends and urgently requests that a comprehensive review and consultation process, to include First Nations representatives, senior federal and provincial health ministry representatives, municipal government representatives, alpha and Boards of Health representatives, be initiated by the provincial and federal government for the purpose of:

- 1) Clearly determining an Aboriginal Public Health system in and for Ontario First Nation citizens;
- 2) Developing, resourcing and staffing an Aboriginal Public Health Resource centre;
- 3) Establishing methods of funding, reporting and evaluating such systems so as to guarantee the equitable and quality delivery of all aspects of the *Health Protection and Promotion Act* and its Regulations to all First Nation citizens of Ontario while maintaining fiduciary responsibility of the Federal government in accordance with the Canadian Constitution (British North American Act) and Treaty rights of First Nation Citizens.

Action from Conference:

Moved: D. Williams (Thunder Bay)
Seconded: I. Parkes (Northwestern)

Carried