THE BOARD OF HEALTH PRESENTS REPORT 11-008 AND RESPECTFULLY RECOMMENDS:

1. Public Health School Asthma Project Budget (BOH11029) (City Wide) (Item 5.1)

That the 2011-2012 budget for the Public Health School Asthma Project (PHSAP) in the amount of $103,200, which is 100% funded by the Ministry of Health and Long Term Care, be approved.

Council – September 28, 2011
2. **New Children's Mental Health Funding for Child & Adolescent Services (BOH11034) (City Wide) (Item 5.2)**

   (a) That the Medical Officer of Health be authorized and directed to receive, utilize and report on the use of funds for the New Children's Mental Health Funding for Child & Adolescent Services to support local initiatives aimed at increasing access to children's mental health services and reducing wait times;

   (b) That the Board of Health approve the increase of 5.0 FTE to the complement of Child and Adolescent Services which is 100% funded by The Ministry of Children and Youth Services.

3. **Citizens Committee Report on Farmers' Market White Paper (Item 5.3)**

   (a) That the Farmers' Market White Paper "Farmers' Markets in Hamilton Meeting Vendors' and Customers' Needs," be received;

   (b) That the issue of developing a Farmers' Market Policy based on the recommendations attached as Appendix "A" to Board of Health Report 11-008 be referred to the Planning Department using the White Paper "Farmers' Markets in Hamilton Meeting Vendors' and Customers' Needs," as a starting point;

   (c) That staff give consideration to allowing farmers to complement the sale of their own product, by permitting them to sell up to 50% of product from other Ontario grown farms, and report back to the Planning Committee.

4. **Injuries in Hamilton (BOH11025) (City Wide) (Item 5.4)**

   That Report BOH11025 respecting, Injuries in Hamilton, be received.

5. **Low Income Dental Program - Healthy Smiles Ontario - Update (BOH10002(b)) (City Wide) (Item 5.5)**

   That Report BOH10002(b) respecting, Low Income Dental Program - Healthy Smiles Ontario – Update, be received.
6. Communicable Disease and Health Hazard Investigations Quarterly Report (Q2) (April 1, 2011 to June 30, 2011) (BOH11019(a)) (City Wide) (Item 5.6)

That Report BOH11019(a) respecting, Communicable Disease and Health Hazard Investigations Quarterly Report (Q2), be received.

7. Child Blood Lead Prevalence Study Findings (BOH11030) (City Wide) (Item 7.1)

(a) That Report BOH11030 - Child Blood Lead Prevalence Study Findings, be received;

(b) That Public Works continue to offer Hamilton residents the "Check Size and Type Inspection" service for identifying lead service lines for water, free of charge;

(c) That the City of Hamilton continue to offer low interest loans to residents who wish to replace their portion of any residential water service line that is made of lead;

(d) That the Board of Health send a letter to the Ministry of Community and Social Services (MCSS) requesting that MCSS and the Ministry of the Environment (MOE) work together to provide 100% provincial funding for low-income households to access on-tap water filters;

(e) That Public Health Services, in collaboration with internal and external partners, develop and deliver an environmental lead awareness program that will attempt to reduce exposure to environmental lead for high-risk groups (children under age 7 and pregnant women and/or women who may become pregnant) and refer resource implications, if any, to the 2012 budget process.

8. Health Information Technology Plan (BOH11024) (City Wide) (Item 8.1)

That Report BOH11024 respecting, Health Information Technology Plan, be received.
9. **Harm Reduction Program - Street Health & Van Needle Exchange Situational Assessment (BOH11031) (City Wide) (Item 8.2)**

That Council endorse Public Health Services' implementation within current resources of the recommendations attached as Appendix "B" to Board of Health Report 11-008 from the Harm Reduction Situational Assessment of Street Health and Van Needle Exchange services.

10. **Nutritious Food Basket (BOH11027) (City Wide) (Item 8.3)**

(a) That the Board of Health correspond with the Premier of Ontario, the Minister of Community and Social Services, and the Commissioners of the provincial Social Assistance Review, to stress the immediate need for an evidence-based mechanism for setting annual social assistance rates that will meet basic living costs, including the cost of nutritious food, and allow individuals and families to live with dignity;

(b) That the Board of Health correspond with the Premier of Ontario to request that the province develop a comprehensive Ontario Food and Nutrition Strategy that will improve policies for:

   i) Social programs and working incomes,
   ii) Community planning and the agri-food system, and
   iii) Environments for healthy food and eating.

11 **CORRESPONDENCE**

(i) Correspondence from Christine Heifer requesting the endorsement of the Lyme disease petition set forth by MPP Bob Bailey of Sarnia Lambton

Recommendation: Be received

(ii) alPHa 2010-2011 Annual Report

Recommendation: Be received

(iii) Sudbury & District Health Unit: The Role of Public Health Inspectors in Maintaining Housing in Northern and Rural Communities

Recommendation: Be received

Council – September 28, 2011
(iv) Sudbury & District Board of Health: motion respecting the development of safe cycling paths between Sudbury and Sault Ste. Marie.

Recommendation: Be received

(v) 2011 alPHa Conference Proceedings

Recommendations: Be received

(vi) HIV/AIDS Community-Based Response

Recommendation: Be received

(vii) alPHa Support for OMA Cycling Safety Policy Paper

Recommendation: That the OMA Cycling Safety Policy Paper be endorsed and referred to the Hamilton Cycling Committee

(viii) Smoke-Free Outdoor Spaces Resolution - Grey Bruce Health Unit Board of Health

Recommendation: Be received

(ix) alPHa Membership Proposal

Recommendation: Be received

(x) alPHa Fall Symposium Information

Recommendation: Be received

(xi) Ministry of Health and Long Term-Care respecting base funding of $116,699 to support the implementation of the Chief Nursing Officer (CNO) initiative.

Recommendation: That the Medical Officer of Health be authorized and directed to enter into an agreement to receive, utilize and report on the use of funds respecting the implementation of the Chief Nursing Officer initiative.

FOR THE INFORMATION OF COUNCIL:

(a) CHANGES TO THE AGENDA (Item 1)

The Clerk advised of the following changes to the agenda:
4. ADDED DELEGATION REQUEST

4.2 Delegation request from Carol Wood, representing the Social Action Committee, Ontario Association of Social Workers respecting the Nutritious Food Basket Report

7. ADDED PRESENTATION ITEMS

7.1.1 Letter from Mayor Bratina respecting the Child Blood Lead Prevalence Study Findings

The agenda was approved, as amended.

(b) MINUTES (Item 3)

(i) Board of Health Minutes, dated June 27, 2011. (Item 3.1)

The minutes from the June 27, 2011 Board of Health Meeting, were approved.

(c) DELEGATION REQUEST (Item 4)

(i) Delegation request from Elizabeth McGuire, representing the Campaign for Adequate Welfare and Disability Benefits (CAWDB), respecting the Nutritious Food Basket Report (Item 4.1)

The delegation by Elizabeth McGuire representing the Campaign for Adequate Welfare and Disability Benefits (CAWDB), respecting the Nutritious Food Basket Report, was approved to speak at today’s meeting as Item 8.3.1.

(ii) Delegation request from Carol Wood, representing the Social Action Committee, Ontario Association of Social Workers respecting the Nutritious Food Basket Report (Added Item 4.2)

The delegation by Carol Wood, representing the Social Action Committee, Ontario Association of Social Workers respecting the Nutritious Food Basket Report was approved to speak at today’s meeting as item 8.3.2

(d) CONSENT ITEMS (Item 5)

(i) Community Food Security Stakeholder Advisory Committee, Minutes, June 1, 2011 (Item 5.7)

The minutes of the Community Food Security Stakeholder Advisory Council – September 28, 2011
Committee meeting dated June 1, 2011, were received.

(e) PRESENTATIONS (Item 7)

(i) Child Blood Lead Prevalence Study Findings (BOH11030) (City Wide) (M. Lawson) (Item 7.1)

Mr. Lawson addressed the Board with the aid of a PowerPoint presentation. His comments included but were not limited to the following:

Lead Issues
- Environmental exposure to lead is a recurring concern, with limited research available.

Study Objectives
- To obtain an estimate of prevalence of children with clinically actionable blood lead levels and explore risk factors.

Study Components
- Community awareness, clinics for blood lead collection, risk factor questionnaire and a sample of water, dust and soil.

Study Area Population
- Certain areas with high concentrations are of low socio-economic markers, and reside in rental properties in the downtown core.

Sample Achieved
- Insufficient sample size to obtain a valid randomized representative sample, a convenience sample was obtained, 643 children were recruited for the study.

Findings on Blood Lead Levels
- The majority of children in the study had low blood lead level. Six children were at or above the acceptable amount set by Health Canada.

Environmentally Associated with BLLs
- There was an association with old housing, historic roadways and lead.

Summary
- The study provided information on lead exposure in an older urban community.
- Hamilton is likely consistent with similar communities, but a small number of children are exposed to levels that would require clinical intervention.

Next Steps
- PHS will work with stakeholders to develop intervention strategies and will seek to lower risk of exposure to environmental lead.
- Spread the results of this study.
The Board asked questions of Mr. Lawson. The discussion included but was not limited to the following:

- Committee noted that higher concentrations of lead were found in industrial areas. Are people carrying lead home with them when working in areas of higher concentration. Staff indicated that individuals working in those environments should change clothing when coming home to lower exposure to themselves and children.

- The Committee asked questions of the public strategy that PHS will take to inform the community of hazards associated with lead in the downtown area. Staff indicated that they have begun to compile ways of engaging the community.

- Committee asked what will be done to make landlords aware of issues surrounding lead. Staff indicated that they do not have an action plan in place, but the City does have some processes in place.

- Committee asked when a comprehensive report will be available. Staff indicated that there is currently no timeline on its completion.

- Committee felt that it was necessary that PHS work to share their findings with both the medical and academic community.

- Committee asked staff if they had an action plan in place to deal with areas of high levels of lead. Staff indicated that it was difficult to draw conclusion with the sample size of the study, or to take action at this time.

(f) DISCUSSION ITEMS (Item 8)

(i) Health Information Technology Plan (BOH11024) (City Wide) (Item 8.1)

The Board discussed the matter. Comments included but were not limited to the following:

- Councillor Ferguson was concerned that the City was putting funds behind matters that the Province may be responsible for. Staff indicated that the Province is not concerned with what each agency uses for their own operational needs.

(ii) Harm Reduction Program - Street Health & Van Needle Exchange Situational Assessment (BOH11031) (City Wide) (Item 8.2)

Dr. Richardson introduced the matter. Comments included but were not limited to the following:

- The needle exchange program is not being extended to include crack pipes. Other communities are performing the same functions.
The Board discussed the matter. Comments included but were not limited to the following:

- The Committee asked why crack pipes are being added to the program. Staff indicated that if users have legions in their mouths it can spread diseases such as hepatitis and HIV.
- The Committee was interested in obtaining more data respecting hepatitis, HIV, and drug use.
- The Committee inquired as to the legality of carrying a crack pipe. Staff indicated that they were not sure about the legality, but have sought the opinion of our Legal Department in crafting the recommendation.
- Staff indicated that the purpose of the program is to lower the harm associated with drug use and to promote individuals with substance abuse issues to seek assistance.
- Committee was interested in obtaining statistics to look at how effective treatment of individuals has been.

(Farr/Merulla)
That Council endorse Public Health Services’ implementation within current resources of the recommendations from the Harm Reduction Situational Assessment of Street Health and Van Needle Exchange services. CARRIED

The motion CARRIED on the following vote.

<table>
<thead>
<tr>
<th>Yeas</th>
<th>Collins, Farr, Ferguson, McHattie, Merulla, Partridge, Pasuta</th>
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<tbody>
<tr>
<td>Total Yeas</td>
<td>7</td>
</tr>
<tr>
<td>Nays</td>
<td>Clark, Duvall, Johnson, Whitehead</td>
</tr>
<tr>
<td>Total Nays</td>
<td>4</td>
</tr>
<tr>
<td>Absent</td>
<td>Bratina, Jackson, Morelli, Pearson, Powers</td>
</tr>
<tr>
<td>Total Absent</td>
<td>5</td>
</tr>
</tbody>
</table>

(iii) Nutritious Food Basket (BOH11027) (City Wide) (Item 8.3)

(i) Delegation request from Elizabeth McGuire, representing the Campaign for Adequate Welfare and Disability Benefits (CAWDB), respecting the Nutritious Food Basket Report (Added Item 8.3.1)

The delegation by Elizabeth McGuire respecting the Nutritious Food Basket Report, was received.
(ii) Delegation request from Carol Wood, representing the Social Action Committee, Ontario Association of Social Workers respecting the Nutritious Food Basket Report (Added Item 8.3.2)

A copy of Carol Wood’s speaking notes were provided to the Clerk for the public record.

The delegation by Carol Wood respecting the Nutritious Food Basket Report, was received.

(e) GENERAL INFORMATION (Item 11)

11.2 Outstanding Business List

On a motion the following Outstanding Business List due date were amended as follows:

(a) Item D: The MOH to report back to the BOH re: the progress made regarding the City’s request that key stakeholders and the LHINS work together in identifying the optimal model for Obstetrics, Gynaecology and Neonatology services
Current Due Date: June 27, 2011
Proposed New Due Date: November 28, 2011

(f) ADJOURNMENT (Item 13)

The Board of Health adjourned at 12:30 p.m.

Respectfully submitted,

Councillor B. McHattie, Vice Chair
Board of Health

Christopher Newman
Legislative Assistant
Board of Health
September 26, 2011

Council – September 28, 2011
Citizen Committee Report on Farmers’ Market White Paper from the Community Food Security Stakeholder Committee

Recommendations

1. That the Board of Health receive the Farmer’s Market White Paper for information.

2. That the issue of developing a Farmers’ Market Policy be referred to the planning department for further study, using the White Paper as a starting point.
Background

- Need was identified in 2009-2010 for a comprehensive policy in the City of Hamilton that would allow farmers to set up a stand or market on city property and to sell their local product directly to residents.

- White Paper was produced in 2011 with input from the literature and community.

White Paper Findings

- Hamilton needs a barrier free farmers’ market policy.

- A clear, comprehensive and user-friendly policy, that supports a variety of farmers’ markets, will have a positive economic impact on the entire community.

- Hamilton’s lack of a farmers’ market policy is out of touch with community needs.
Six Recommendations

1. A comprehensive farmers' market policy should be developed in consultation and collaboration with community partners.

2. The policy should allow farmers' markets to run like not-for-profits, with supportive infrastructure that is either low cost or rent free.

Six Recommendations

3. Each farmers' market must have a governing structure that includes farmers in the decision making process.

4. Farmers' market accessibility and affordability need to be improved through increased transit options and reduced parking fees.
Six Recommendations

5. There should be a single point of contact to help streamline information and support the ongoing operation of farmers’ markets.

6. A comprehensive policy will have a strong promotional aspect, including the creation of a local brand and online presence to increase public awareness and facilitate a collaborative network across markets.

Policy is one step towards food security in Hamilton

By following up on the findings of this White Paper, the Board of Health will be showing leadership in moving Hamilton:

“towards being a place where all community residents obtain a safe, culturally acceptable, nutritionally adequate diet through a sustainable food system that maximizes self-reliance and social justice.”
SUBJECT: Harm Reduction Program - Street Health & Van Needle Exchange Situational Assessment (BOH11031) (City Wide)

Recommendations:

<table>
<thead>
<tr>
<th>Short Term Recommendations</th>
<th>Long Term Recommendations</th>
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<tbody>
<tr>
<td>Develop a program logic model with clear goals and objectives, target population, and matched activities and outcomes</td>
<td>Explore opportunities to collaborate services with other partners</td>
</tr>
<tr>
<td>Continue to provide evening hour Street Health Clinic services</td>
<td>Collaborate with other teams within Public Health Services to make more services available to Street Health Clinic clients</td>
</tr>
<tr>
<td>Continue to provide appropriate first aid services for abscesses and skin problems</td>
<td>Explore opportunities to establish 24 hour NEP fixed sites in Hamilton</td>
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<tr>
<td>Ensure staff at the Street Health Clinic follow medical directives and policies &amp; procedures for the services they provide</td>
<td>Distribute safer inhalation kits through current needle exchange sites and the Van</td>
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<td>Increase the awareness of the Van services in the community</td>
<td>Consider contributing to research to address the current gap in research and evaluation in this area</td>
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The short term recommendations were operational in nature and have been implemented as part of the program's process of continuous quality improvement.

The long-term recommendations are planned to be addressed through:

1. Increased collaboration with community partners i.e. Shelter Health Network to provide enhanced Street Health Clinic services and hours.

2. Expansion of harm reduction services to include the distribution of safer crack use supplies to reduce the risk of Hepatitis C and HIV infection from shared equipment.

3. Consultation and collaboration with community partners and neighborhoods to support implementation of recommendations consistent with the Four Pillars Drug Strategy.