

Board of Health Meeting Summary

January 11, 2012

Peterborough County-City
HEALTH UNIT
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Board of Health Elections

Deputy Mayor Andy Sharpe of Havelock-Belmont-Methuen was elected as Chair of the Peterborough County-City Board of Health for his second consecutive one-year term. Jill Smith, Band Councillor from Hiawatha First Nation, was elected Vice Chair of the board for 2012.

A Day in the Life – Infant Toddler Development Program Worker

Occupational Therapist Osk Jenkins presented an overview of a typical day in her role as an Infant Development Worker (IDW) with the [Infant Toddler Development Program](#) (ITDP). There are four IDWs who support families who have children with developmental delays due to premature birth or various diagnosed conditions such as cerebral palsy and Down's syndrome. During her time with families she assesses clients, models good developmental play, discusses any attachment issues, and provides guidance and encouragement to parents about their child's progress. All premature infants born 35 weeks or earlier are screened and followed until three years of age to ensure their development is on track. Ms. Jenkins noted that she and her colleagues are seeing an increase in flat-head syndrome (plagiocephaly) in the community. In addition to their work in the field, ITDP workers attend case conferences with other agencies to support client needs, provide expert advice on child development and parenting to Family Healthline callers, and run a multiples group for families with twins, triplets, etc. In 2011, ITWs partnered with Fleming College to develop and deliver an infant massage program to families. Ms. Jenkins shared feedback from a recent program evaluation which revealed how strongly local families value the ITDP and the positive impact it has on developing their parenting skills and child's development.

Staff Report: Infant Toddler Development Program

The board approved to continue hosting the ITDP for the 2012 year despite its underfunding by the Ministry of Children and Youth Services (MCYS). The expected 2012 program budget of \$242,423 will not have had an increase in ten years and will require staffing reductions in order to deliver it within the limited funding provided. The number of children being referred to and being served by the program has not decreased. The board discussed ways of building on past efforts to advocate for increased funding from the MCYS which provides 100% of the budget for this program. These services are not provided by other agencies in the Peterborough area.

2012 Summary Report on Selected Cancers in Peterborough City and County

This [new report](#) provides an overview of the burden of cancer in Peterborough County and City including the incidence, mortality and trends of selected common cancers among local residents between 1986 and 2007. The report revealed that Peterborough males experienced higher incidence rates of lung cancer (6.5%) and melanoma (24.4%); however had significantly lower incidence rates of prostate cancer (5.4%) than the rest of Ontario. Relative to the province, local women had significantly higher rates of lung cancer (21.9%), melanoma (21.5%), and uterine cancers (14.7%). Overall, lung cancer mortality rates were significantly higher for both Peterborough men (6.6%) and women (14.9%) compared to Ontario. The board approved the report's recommendations that included advocating for more risk factor surveillance data, identifying additional indicators that may affect cancer outcomes, and increasing awareness and education of cancer risk factors and screening opportunities.

Performance Management Working Group, Ministry of Health and Long Term Care: Public Health Accountability Agreement Indicators

Dr. Pellizzari presented the Ministry of Health and Long Term Care's (MOHLTC) baseline targets for health unit performance to be included in the new accountability agreements boards of health signed in 2011. Targets cover a selection of public health activities such as the percentage of food premises inspected, follow-up times for specific reported diseases, youth smoking rates, vaccination coverage rates, and compliance status with the Baby-Friendly Initiative. Many other indicators are still under development, especially ones that relate to health promotion activities, the Foundational Standard of the Ontario Public Health Standard, health units' work on the social determinants of health and the strength of health unit partnerships. Health units now have an opportunity to negotiate their proposed targets for 2012 and 2013. . The MOHLTC will evaluate the performance of each health unit against these indicators to determine future funding.

2010 Annual Report of the Chief Medical Officer of Health

Dr. Pellizzari presented an overview of Dr. Arlene King's 2010 Annual Report, *[Health, Not Health Care- Changing the Conversation](#)*. In her report Dr. King noted that the factors that influence good health lie, for the most part, outside of the health care and health promotion sectors. The emphasis needs to move away from health care and move towards a better understanding of the common risk factors for poor health. For example, tobacco, healthy eating, regular exercise and harmful alcohol use are accountable for 60% of all cause mortality. If trends continue, children in next generation will have a lower life expectancy than their parents. Dr. King highlighted the important role of non-health care players in improving public health, such as Ontario's transportation sector. While Ontario's licensed driver population has increased by 135% over the past 35 years, the number of driving-related fatalities has dropped steadily from 1,959 in 1973 to 631 in 2008. In 2008, Ontario had the lowest traffic fatality rate among North American jurisdictions – the tenth year in a row this province has ranked either lowest or second-lowest in this area. Traffic-related injuries have been successfully reduced because of a number of road safety initiatives, such as mandatory seat belts and child booster seats, improved road construction, and Ontario's graduated licensing program.

Next Meeting: Wednesday, February 8, 2012 at 10 Hospital Drive in the Peterborough County-City Health Unit board room.

Respectfully submitted,

Dr. Rosana Pellizzari
Medical Officer of Health

Deputy Mayor Andy Sharpe
Chair, Board of Health

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