

THE REGIONAL MUNICIPALITY OF NIAGARA
PUBLIC HEALTH AND SOCIAL SERVICES COMMITTEE

REPORT 6-2006

Minutes of a meeting of the Public Health and Social Services Committee held in Committee Room 4, Regional Municipal Building, Thorold, Ontario, on Tuesday, April 18, 2006 at 2:05 p.m.

ATTENDANCE

Committee: Councillors Hildreth, Co-Chair; Almas; Angelone, Baty; Casselman, Marshall; Mastroianni

Staff: Mr. Trojan, Chief Administrative Officer; Mr. Hutchings, Commissioner of Community Services; Dr. Williams, Medical Officer of Health and Commissioner of Public Health; Dr. Sider, Associate Medical Officer of Health; Dr. Klooz, Associate Commissioner of Public Health; Ms. Heidebrecht, Director, Children's Services; Ms. Pennisi, Director Social Assistance and Employment Opportunities; Ms. Gilroy, Regional Clerk; Ms. Staines, Legislative Assistant

Staff

Part-time: Ms. Armstrong, Tobacco Enforcement; Ms. Biscaro, Director, Population Health; Mr. Cunnane, Director Emergency Services Division; Mr. Geremia, Public Health; Ms. Gordon, Manager, Dental Programs; Mr. Jones, Director, Administration Services, Public Health; Ms. Jugley, Manager, Community Mental Health; Mr. Kyne, Director, Legal Services; Ms. Rix, Manager, Tobacco Program; Mr. Roberts, Associate Director, EMS Paramedic Service; Ms. Wodchis, Director, Chronic Disease Prevention;

Guests: Dr. Doug Munkley

PRESENTATIONS

91. Resuscitation Outcomes Consortium (ROC)

Dr. Doug Munkley, Base Hospital Medical Director, was introduced by Mr. Roberts. Dr. Munkley outlined his responsibilities, including continuing medical education and on-line medical advice to paramedics regarding patient issues. Dr. Munkley spoke to Committee respecting the Resuscitation Outcomes Consortium (ROC) initiative which is a multi-national, multi-centre study group examining trauma care and cardiac care. This study carries a \$48 million budget

for a five-year period, funded mainly by the Canadian Institute of Health Research and the U.S. Department of Defence. There are over two hundred EMS services and three hundred hospitals involved in the study, which is comprised of a Hypertonic Saline Trauma Study and a Cardiac Arrest Study. This collaboration between the Ontario Pre-hospital Advanced Life Support (OPALS) group and the ROC is of great benefit to the Niagara EMS, putting our paramedics on the advanced edge of patient care.

Moved by Councillor Angelone
Seconded by Councillor Marshall

That the oral report by Dr. Munkley respecting the Resuscitation Outcomes Consortium (ROC) be received

Carried.

92. Accessibility Coordinator Agreement

Mr. Hutchings, Commissioner of Community Services, reported on a consultative process with the City of St. Catharines which has led to a shared services arrangement for accessibility coordination services. The coordinator's main responsibilities for the Region will include assisting with the 2006-2007 Accessibility Plan and orientation and facilitation services to the Accessibility Advisory Committee. This agreement is included in the 2006 budget through the Clerk's office.

Moved by Councillor Mastroianni
Seconded by Councillor Angelone

That the oral report by Mr. Hutchings respecting the Accessibility Coordinator Agreement, be received.

Carried.

OPERATIONS
(STATUS REPORTS)

93. Community Mental Health Program Annual
Operating Plan and Budget (2006-2007)
PHD 31-2006

Moved by Councillor Angelone
Seconded by Councillor Baty

That Report PHD 31-2006, April 18, 2006, respecting the Community Mental Health Program Annual Operating Plan and Budget (2006-2007), be received for information; and

That the Regional Chair be authorized to execute the Ministry of Health and Long-Term Care (MOHLTC) documents in approval of the Community Mental Health Program 2006/2007 Annual Operating Plan and Budget.

Carried.

94. Electronic Ambulance Call Report Charting – Request for Proposal
PHD 33-2006

Moved by Councillor Baty
Seconded by Councillor Angleone

That Report PHD 33-2006, April 18, 2006, respecting the Electronic Ambulance Call Report Charting – Request for Proposal, be received;

That the Emergency Services Division proceed with the release of the Electronic Ambulance Call Report RFP; and

That the purchase of this system be funded from the approved 2006 Capital Budget (GR0602).

Carried.

95. Emergency Medical Services (EMS) – Center of Excellence Accreditation

Mr. Cunnane announced that the EMS Dispatch has received accreditation as a Center of Excellence from the National Academy of Emergency Dispatch. Niagara is the fourth centre in Canada to receive this distinction, and the first in the world to receive the honour in the first year of operation. The award will be formally presented in Florida later this month. Mr. Cunnane and his staff were applauded by the Committee for this exceptional award.

96. Ontario Works Dental Program for Dependent Children
And the Ontario Disability Support Dental Program
PHD 34-2006 (COM 28-2006)

It was noted by Dr. Klooz that the potential cost savings outlined in the recommendations of this report should be of interest to the province and could be discussed during the “Niagara Week” visit next week. Mr. Trojan noted that the presentations to the provincial ministries are presently being finalized, but that this item may be noted informally in discussions next week.

Moved by Councillor Marshall
Seconded by Councillor Mastroianni

That Report PHD 34-2006 (COM 28-2006), April 18, 2006, respecting Ontario Works Dental Program for Dependent Children and the Ontario Disability Support Dental Program, **as amended**, be received for information ; and

That the Regional Chairman write the Minister of Health and Long-Term Care, the Minister of Community and Social Services, **and local MPP's** requesting the following:

- Allow Consolidated Municipal Services manager (CMSM) the choice to determine who manages and administers the ODSP Dental Program.
- Re-introduce pre-authorization and time and frequency limitations in the Ontario Works Dental Programs for Dependents fee schedule.
- Introduce pre-authorization and time and frequency limitations in the ODSP fee schedule, regardless who manages and administers the program.
- Consider introducing dental need criteria in all fee schedules, as well as a financial/economic eligibility criterion.
- Consider having one consistent fee schedule for children, using the CINOT fee schedule as the model.

Carried.



**Joint Statement of the Ontario Dental Association
and the Regional Municipality of Niagara
Re: Niagara Region Report PHD 34-2006/COM-28-2006**

The purpose of this Joint Statement is to ensure that the public receives accurate information as referred to in the Report Re: Ontario Works Dental Program for Dependent Children and the Ontario Disability Support Dental Program (PHD 34-2006/COM-28-2006) ('Report').

First, the Niagara Region acknowledges that the ODA's primary mission is to provide exemplary oral health care and to promote the attainment of optimal health for the people of Ontario.

In addition, the information noted below should be read in conjunction with the Report.

1. Accerta Claim Service Corporation ("Accerta"), and not the ODA, administers the various dental programs. Accerta is a separate and distinct corporate entity from the ODA, with its own mandate.

Accerta's mission is to deliver industry-leading healthcare plan management to governments and private business in Ontario and other Canadian markets. Accerta strives to create plans that stimulate access to health care for plan recipients, provide fair and consistent treatment to health care providers, and contemporaneously ensure accountability and cost containment for the plan provider.

Accerta's mission is complementary to the mission of the ODA which is to provide exemplary oral health care and to promote the attainment of optimal health for the people of Ontario.

2. All officers of the ODA are very much concerned with ensuring that patients receive complete and proper treatment.

The ODA has a long history of developing dental programs with tight controls. The Ministry of Community and Social Services' (MCSS) Schedule of Dental Benefits and Fees is based on the dental program developed by the ODA for the provincial government and contains very clear time and frequency limitations on a majority of services. These limitations significantly exceed the restrictions contained in private dental plans and were established for the specific purpose of containing costs. Cost containment mechanisms have been traditionally recommended by the dental profession and the restrictions outlined in the MCSS Schedule are effective when applied appropriately.

The ODA fully appreciates that governments require dental programs with built-in cost containment features due to the limited availability of government funds. Historically, the ODA has developed cost contained dental plans for governments and will continue to do so. Many of these plans remain in effect today.

3. Next, with respect to fluctuations in the monthly expenditures in OW dental programs, as reflected in Appendix A, further evidence is required to explain the decrease in monthly expenditures from 2000 – 2002 and the subsequent increase from mid-2003 onward. As of mid-2003, both time and frequency limitations remained integral to the MCSS Schedule.

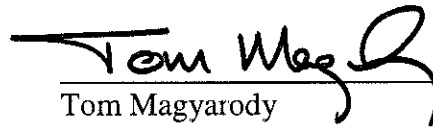
Finally, in relation to these issues, there has been no formal study performed to establish that dentists overtreat patients or provide unnecessary treatment when cost thresholds and pre-authorized requirements are removed. In fact, in relation to the MCSS Schedule, dentists are paid 60% of their current fees. In many cases dentists actually provide more valuable treatment to these patients than the fees which are recovered, or are reimbursed at a level below the cost of practice. In effect, these dentists donate their services based on patient needs.

Submitted by:



Mike Trojan
Chief Administrative Officer
Regional Municipality of Niagara

Submitted by:



Tom Magyarody
Executive Director
Ontario Dental Association

97. 2006 Public Health Budget and Program-Based Grant
PHD 36-2006

Moved by Councillor Baty
Seconded by Councillor Almas

That Report PHD 36-2006, April 18, 2006, respecting the 2006 Public Health Budget and Program-Based Grant, be received;

That the additional funding based on a revised calculation of Ministry of Health and Long-Term Care funding be applied to the approved 2006 Public Health Budget to ensure sustainability of investments in public health programs included in that budget; and

That the 2006 Terms and Conditions document for Local Public Health Programs (Mandatory or General Programs) for the program-based grant (PBG) be approved and signed by the Board of Health Chairman.

Carried.

98. National Child Benefit Plan 2005 Expenditures and 2006 Budget
COM 26-2006

P. Heidebrecht provided an overview of the NCB expenditures and projections for 2006. It was noted that in light of the potential change in commitment for new child care funding in 2007 and beyond that the Region's dependency on NCB funding for child care will continue. Councillor Hildreth noted that one of the NCB funded programs "Pro-Kids" is hosting a reception on April 27, at 6:30 to recognize the many service clubs that donate in-kind supports. All members are invited to attend.

Moved by Councillor Casselman
Seconded by Councillor Mastroianni

That Report COM 26-2006, April 18, 2006, respecting the National Child Benefit, be received; and

That the 2006 National Child Benefit (NCB) expenditures plan be approved.

Carried.

INFORMATION

99. Annual Tobacco Compliance Report
PHD 26-2006

Ms. Rix introduced Deborah Armstrong, a Tobacco Enforcement Officer. Ms. Rix and Ms. Armstrong answered questions from the Committee on the provincial regulations and the responsibilities of the enforcement staff. It was noted that an Open House for public information on the new Smoke-Free Ontario regulations was being held in the Council Chambers this afternoon, and Councillors were invited to drop in after the meeting.

Moved by Councillor Angelone
Seconded by Councillor Baty

That Report PHD 26-2006, April 18, 2006, respecting the Annual Tobacco Compliance Report, be received for information.

Carried.

100. Periodontal Disease as a Risk Factor for Low-Birth-Weight Infants
PHD 29-2006

Moved by Councillor Almas
Seconded by Councillor Casselman

That Report PHD 29-2006, April 18, 2006, respecting Periodontal Disease as a Risk Factor for Low-Birth-Weight Infants, be received for information.

Carried.

PLANNING AND PRIORITIES
(STRATEGIC PLANNING/POLICY)

101. Child Poverty
PHD 35-2006/COM 27-2006

Discussion ensued concerning the source of data included in the report and the need to gather more focused statistical information to draw attention to the needs of children at risk. Members of this Committee expressed their concern about the importance of this issue and the need to make a case for greater funding in this area.

Moved by Councillor Baty
Seconded by Councillor Marshall

That Report PHD 35-2006/COM 27-2006 be noted in the "Planning and Priorities (Strategic Planning/Policy)" section of the Minutes, rather than as an "Information" item.

Carried.

Moved by Councillor Angelone

Seconded by Councillor Mastroianni

That Report PHD 35-2006/COM 27-2006, April 18, 2006, respecting Child Poverty, be received for information; and

That staff be directed to prepare an annual progress report regarding child poverty reduction activities in Niagara Region including tracking outcomes of previous recommendations to end the National Child Benefit clawback, increase social assistance rates, living wage initiatives and increase Provincial investment in child care.

Carried.

(Refer to Staff Directions)

QUORUM

There being a lack of ordinary quorum at this point in the meeting, the Committee Chair determined that the ordinary quorum for the meeting be reduced to six members, pursuant to Part 15, Section 15.8.2 of the Procedural By-law 120-2005.

INFORMATION (Continued)

102. Moved by Councillor Casselman
Seconded by Councillor Mastroianni

That PHSS 15-2006, a letter from George Smitherman, Minister, Ministry of Health and Long-Term Care, March 2, 2006, respecting public health funding, be received.

Carried.

OTHER BUSINESS

103. Salmonella Outbreak

Dr. Sider provided information concerning the recent Salmonella outbreak as a result of contaminated cheese products. The process for analyzing data related to outbreaks of this nature and how the information is disseminated was outlined.

Moved by Councillor Mastroianni
Seconded by Councillor Baty

That the oral report by Dr. Sider respecting the Salmonella Outbreak, be received.

Carried.

CLOSED SESSION

104. Moved by Councillor Mastroianni
Seconded by Councillor Baty

That this Committee do now meet in Closed Session for the purpose of receiving information of a confidential nature relating to property and other matters.

Carried.

105. Implementation of the Smoke-Free Ontario Act
PHD 25-2006

Moved by Councillor Casselman
Seconded by Councillor Marshall

That Report PHD 25-2006, April 18, 2006, respecting the Implementation of the Smoke-Free Ontario Act, be received **as amended**, and the recommendations contained therein be approved; and

That a review be scheduled in three years to decide if it is necessary to keep the Region's smoking by-law in place once the legislation concerning the Smoke-Free Ontario Act has been tested in the courts.

Carried.

CONFLICT OF INTEREST

Councillor Almas declared an indirect pecuniary interest with respect to Report COM 29-2006, Accessibility Advisory Committee Membership *Ontarians with Disabilities Act, 2001*, as is acquainted with an applicant for the Committee, and he therefore vacated the Committee Room and took no part in the discussion of, or voting on, this matter.

QUORUM

There being a lack of ordinary quorum at this point in the meeting, the Committee Chair determined that the ordinary quorum for the meeting be reduced to five members, pursuant to Part 15, Section 15.8.2 of the Procedural By-law 120-2005.

106. Accessibility Advisory Committee Membership
Ontarians with Disabilities Act, 2001
COM 29-2006

Moved by Councillor Baty
Seconded by Councillor Mastroianni

That Report COM 29-2006, April 18, 2006, respecting the Accessibility Advisory Committee Membership *Ontarians with Disabilities Act, 2001*, be received for information and the recommendations contained therein be approved.

Carried.

107. Moved by Councillor Baty
Seconded by Councillor Mastroianni

That this Committee do now rise with report.

Carried.

STAFF DIRECTIONS

That staff be directed to:

- Gather more focused statistical information to draw attention to the needs of children at risk (See Minute Item 101).

ADJOURNMENT

The Committee adjourned at 4:45 p.m., to meet again in Committee Room 4 on May 16 at 2:00 p.m

Jill Hildreth
Co-Chair

Betty Staines
Legislative Assistant

Pam Gilroy
Regional Clerk