



The Regional Municipality of Durham

COUNCIL INFORMATION PACKAGE

April 26, 2019

Information Reports

- [2019-INFO-22](#) Commissioner of Works – re: Planning and Construction of the Emergency Well in the Community of Sunderland, in the Township of Brock
- [2019-INFO-23](#) Commissioner and Medical Officer of Health – re: Program Reports
- [2019-INFO-24](#) Chief Administrative Officer – re: Nuclear Emergency Preparedness Review (EPREV) Mission in Canada

Early Release Reports

There are no Early Release Reports.

Staff Correspondence

There is no Staff Correspondence

Durham Municipalities Correspondence

1. [Town of Whitby](#) – re: Resolution passed at their Council meeting held on April 15, 2019, regarding Municipal Voters' List

Other Municipalities Correspondence/Resolutions

1. [Town of Minto](#) – Resolution passed at their Council meeting held on April 16, 2019, regarding Ontario Municipal Partnership Fund
2. [City of Brantford](#) – Resolution passed at their Council meeting held on March 26, 2019, regarding Single-use Plastic Straws

Miscellaneous Correspondence

1. [Central Lake Ontario Conservation Authority \(CLOCA\)](#) – re: Resolution passed at their meeting held on March 19, 2019, regarding Port Darlington Shoreline Hazard Study

Advisory Committee Minutes

1. Durham Nuclear Health Committee (DNHC) minutes – [April 5, 2019](#)

Members of Council – Please advise the Regional Clerk at clerks@durham.ca, if you wish to pull an item from this CIP and include on the next regular agenda of the appropriate Standing Committee. Items will be added to the agenda if the Regional Clerk is advised by Wednesday noon the week prior to the meeting, otherwise the item will be included on the agenda for the next regularly scheduled meeting of the applicable Committee.

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The Regional Municipality of Durham Information Report

From: Commissioner of Works
Report: [#2019-INFO-22](#)
Date: April 26, 2019

Subject:

Planning and Construction of the Emergency Well in the Community of Sunderland, in the Township of Brock

Recommendation:

Receive for information.

Report:

1. Purpose

1.1 This report provides information regarding the planning and construction of the Sunderland emergency well, in the Township of Brock (Brock), with a total project cost of \$2,100,000*. Dollar amounts followed by an asterisk (*) are before applicable taxes.

2. Background

2.1 The Sunderland Drinking Water System (DWS) includes two municipal wells that service approximately 1,500 people. A site-specific condition developed at Municipal Well #2 (MW2) located at S1270 Concession 6 in Sunderland, within the Township of Brock, which resulted in MW2 being taken offline. Sunderland has been relying on the single Municipal Well #1 (MW1) for water supply system to the community. The Sunderland DWS has not had a standby well since September 2017 and therefore, the system has been vulnerable should any serious problem arise with MW1.

-
- 2.2 In September 2017, an emergency was declared by the Commissioner of Works, and the Regional Municipality of Durham (Region) moved forward with the planning, design, and construction of a new municipal well to replace MW2 and establish security to the Sunderland DWS.
- 2.3 In order to plan a new emergency standby well, the Region needed to find a new groundwater source, and commission and utilize a treatment and pumping facility to maintain water services until a new permanent well location could be commissioned.
- 2.4 All project activities needed to be compliant with legislation for water infrastructure which includes the Environmental Assessment Act, the Heritage Act, the Safe Drinking Water Act, the Clean Water Act, and the Ontario Water Resources Act. On April 18, 2018, a Declaration Order #792/2018 was approved and issued by the Ministry of the Environment, Conservation and Parks (MECP), which included eight conditions.
- 2.5 Regional staff developed a plan that included the necessity to drill and commission an emergency well located away from the existing municipal well field to minimize the possibility of causing any problems with the existing MW1, as it was the only active well servicing the community. The Region identified two potential properties in Sunderland that provided a suitable emergency well location and which were owned by the Region (Attachment #1). Water of suitable quantity and quality was located at 32 Jane Street, where the existing storage facility (standpipe) is currently located.
- 2.6 The drilling activities resulted in the installation of several test wells at these two locations which will need to be decommissioned after the emergency well is operational. The emergency well will herein be referred to as Municipal Well #3 (MW3).
- 2.7 Regional staff developed a design to meet current MECP requirements and expedite the implementation of MW3 by recommending a packaged water treatment facility.
- 3. Implementation Activities: Drilling, Site Works, Treatment Facility and Commissioning (MW3)**
- 3.1 The implementation plan included a Project Team to expedite MW3 and meet the conditions set out by the MECP.

- 3.2 The Project Team included internal Regional staff for project management and contract administration. External resources were required for the declared emergency project based on the ability and past experience on Regional projects. The following external resources were used:

Task	External Resource
Archeological Assessment	This Land Archaeology Inc.
Engineering Services	R.V. Anderson Associates Limited
General Contractor	Nick Carchidi Excavating Limited
Hydrogeological Study, Field Services and Permit Approval	R.J. Burnside & Associates Limited
Water Treatment Facility	Newterra Ltd.
Well Drilling	Well Initiatives Limited

- 3.3 The project requirements and approvals were confirmed during the project planning to ensure all regulatory approvals were met.

4. Financial Implications

- 4.1 Section 11 of the Purchasing By-Law #68-2000 (Amended) requires that should the value of emergency work exceed \$25,000 a joint report by the “designated official” and the appropriate department head is to be submitted to the appropriate standing committee and Council, setting out the nature of the emergency and the necessity of the action taken.
- 4.2 The financial impact of the development of MW3 is \$2,100,000* . The water supply project will be funded through user rates. The funding of this unexpected emergency project will be determined at the discretion of the Commissioner of Finance. The project is anticipated to be complete by June 2019, including external site works.

The project components are detailed as follows:

4.3

Project Element	Cost *
Engineering – Internal	\$80,000
Engineering – External	\$363,600
Construction – Internal	\$20,000
Construction – External	\$1,605,000
Utilities	\$3,800
Permits and Approvals	\$5,700
Other Related Costs (sampling and testing)	\$21,900
Total Project Cost	\$2,100,000

5. Conclusion

- 5.1 The Community of Sunderland, within the Township of Brock, will have a new well (Municipal Well #3) with standby power that meets the Ministry of the Environment, Conservation and Parks’ treatment requirements and external site works.

- 5.2 The Class Environmental Assessment for the Sunderland Water Supply and Distribution System for additional capacity has begun, and the Notice of Commencement was issued on February 11, 2019. Information and updates related to this project are available at the [Region's Public Works Projects](http://www.durham.ca/WorksProjects) (www.durham.ca/WorksProjects).
- 5.3 This report has been reviewed by the Finance Department.
- 5.4 For additional information, please contact Kelly Murphy, Project Manager at 905-668-7711, extension 3370.

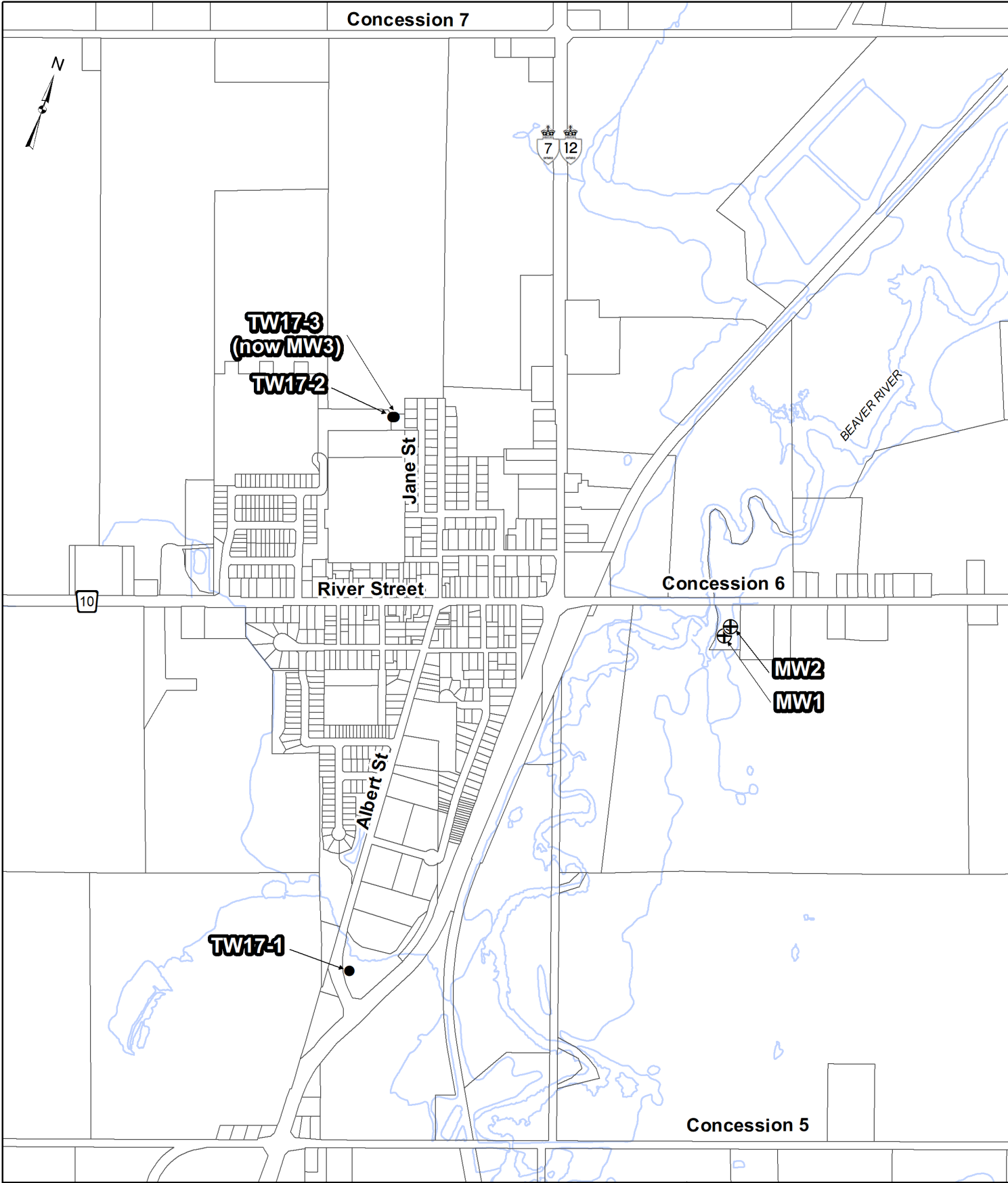
6. Attachments

Attachment #1: Map of drilling locations on Regional properties in Sunderland

Respectfully submitted,

Original signed by John Presta for

Susan Siopis, P.Eng.
Commissioner of Works



**The Regional Municipality of Durham
Works Department**
This map has been produced from a variety of sources. The Region of Durham does not make any representations concerning the accuracy, likely results, or reliability of the use of the materials. The Region hereby disclaims all representations and warranties.
 © MPAC and its suppliers. All rights reserved.
 Not a plan of Survey.
 Map Date: April 9, 2019

- ⊕ Municipal Well
- Test Well



**Map of Drilling
Locations
Sunderland**



The Regional Municipality of Durham Information Report

From: Commissioner & Medical Officer of Health
Report: #2019-INFO-23
Date: April 26, 2019

Subject:

Program Reports

Recommendation:

Receive for information

Report:

1. Purpose

- 1.1 To provide an update on Durham Region Health Department (DRHD) programs and services.

2. Highlights

- 2.1 DRHD reports for January – March 2019 include the following key highlights:

- a. Health Analytics, Policy & Research – Health Analytics Information Products;
- b. Health Protection – Emergency Management, Food Safety, Part 8 Ontario Building Code (Sewage Systems) and Safe Water updates;
- c. Healthy Families – Durham Health Connection Line and Healthy Families updates;
- d. Healthy Living – Healthy Living (including Chronic Disease Prevention, Mental Health, Oral Health and Substance Misuse) and *Smoke-Free Ontario Act, 2017* updates;
- e. Infectious Diseases – Immunization; Infectious Diseases Prevention and Control updates; and
- f. Paramedic Services – Administration, Logistics, Operations and Quality Development updates.

- 2.2 Boards of health are required to “superintend, provide or ensure the provision of the health programs and services required by the [Health Protection and Promotion] Act and the regulations to the persons who reside in the health unit served by the board” (section 4, clause a, HPPA). In addition, medical officers of

health are required to “[report] directly to the board of health on issues relating to public health concerns and to public health programs and services under this or any other Act” (sub-section 67.(1), HPPA). Accordingly, the Health Information Update is a component of the Health Department’s ‘Accountability Framework’, which also may include program and other reports, Health Plans, Quality Enhancement Plans, Durham Health Check-Ups, Performance Reports, business plans and budgets; provincial performance indicators and targets, monitoring, compliance audits and assessments; RDPS certification; and accreditation by Accreditation Canada.

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM
Commissioner & Medical Officer of Health

ABBREVIATIONS

- ACP – Advanced Care Paramedic
- BBI – Blood – Borne Infection
- BHV – Blended Home Visiting
- BIA – Business Improvement Area
- BOH – Board of Health
- CA – *Cannabis Act*
- CCC – Child Care Centre
- CCHC – Carea Community Health Centre
- CCHS – Canadian Community Health Survey
- CELHIN – Central East Local Health Integration Network
- CFG – Canada’s Food Guide
- CFH – Certified Food Handler
- CHC – Community Health Centre
- CMHA – Canadian Mental Health Association
- CSTADS – Canadian Student Tobacco, Alcohol and Drugs Survey
- CTS – Consumption and Treatment Service
- DC – Durham College
- DCAS – Durham Children’s Aid Society
- DCDSB – Durham Catholic District School Board
- DDSB – Durham District School Board
- DHCL – Durham Health Connection Line
- DHF – Durham Healthy Families
- DHRC – Durham Harm Reduction Coalition
- DMHS – Durham Mental Health Services
- DNGS – Darlington Nuclear Generating Station

- DO – Designated Officer
- DPHS – Diseases of Public Health Significance
- DPZ – Detailed Planning Zone
- DRHD – Durham Region Health Department
- DRPS – Durham Regional Police Service
- DRT – Durham Region Transit
- ED – Emergency Department
- EDI – Early Development Instrument
- EOCFC – EarlyON Child and Family Centre
- ESW – Emergency Service Worker
- FHT – Food Handler Training
- FS – Food Safety Program
- FV – Family Visitor
- FYS – Frontenac Youth Services
- HARP – Health Analytics, Research & Policy Team
- HBHC – Healthy Babies Healthy Children
- HC – Health Canada
- HCP – Healthcare Provider
- HP – Health Protection Division
- HPPA – *Health Protection and Promotion Act*
- HQ – Headquarters
- HSO – Healthy Smiles Ontario
- IDA – In-Depth Assessment
- IPAC – Infection Prevention and Control
- IRCC – Immigration, Refugees and Citizenship Canada
- ISPA – *Immunization of School Pupils Act*
- JHSDR – John Howard Society of Durham Region
- KI – Potassium Iodide

- KPRDSB – Kawartha Pine Ridge District School Board
- LD – Lyme Disease
- LH – Lakeridge Health
- LINC – Language Instruction for Newcomers to Canada
- LRADG – Low-Risk Alcohol Drinking Guidelines
- LSPA – *Lake Simcoe Protection Act, 2008*
- LTCH – Long-Term Care Home
- MMF – Murry McKinnon Foundation
- MNRF – Ministry of Natural Resources and Forestry
- MOECP – Ministry of Environment, Conservation and Parks
- MOH – Medical Officer of Health
- MOHLTC – Ministry of Health and Long-Term Care
- NAAT – Nucleic Acid Amplification Test
- NM – Nutrition Month
- NRT – Nicotine Replacement Therapy
- OAVT – Ontario Association of Veterinary Technicians
- OBC – Ontario Building Code
- OH – Oral Health Division
- OHIP – Ontario Health Insurance Plan
- OPG – Ontario Power Generation
- OPHS – *Ontario Public Health Standards: Requirements for Programs, Services, and Accountability*
- OSCMHS – Ontario Shores Centre for Mental Health Sciences
- OSDUHS – Ontario Student Drug Use and Mental Health Survey
- OTU – Ontario Tech University
- PA – Professional Activity
- PAS – Pinewood Addiction Services
- PCP – Primary Care Paramedic

- PHD – Population Health Division
- PHI – Public Health Inspector
- PHN – Public Health Nurse
- PHNt – Public Health Nutritionist
- PHU – Public Health Unit
- PNGS – Pickering Nuclear Generating Station
- PSS – Personal Services Settings
- RAM – Rabies Awareness Month
- RDPS – Region of Durham Paramedic Services
- RECY – Resources for Exceptional Children and Youth
- RRFSS – Rapid Risk Factor Surveillance System
- SA – Salvation Army
- SCSOPS – Supervised Consumption Services and Overdose Prevention Site
- SFOA – *Smoke-Free Ontario Act, 2017*
- SHC – Sexual Health Clinic
- STI – Sexually Transmitted Infection
- TAMI – Talking About Mental Illness
- TB – Tuberculosis
- TEO – Tobacco Enforcement Officer
- TU – Trent University
- TVPA – *Tobacco and Vaping Products Act*
- UIIP – Universal Influenza Immunization Program
- VBD – Vector-Borne Disease
- WCIS – Welcome Centre Immigrant Services
- WD – Works Department
- WNV – West Nile Virus



Health Analytics, Research & Policy

Report for January – March 2018

Health Analytics Information Products

[Making Children the Priority](#)

This report focuses on early childhood development in the priority neighbourhoods. Specifically, the report focuses on indicators relating to children under six living in low income, the enhanced 18-month well-baby visit, breastfeeding, school readiness as measured by the EDI, and police-reported domestic incidents.

Although the priority neighbourhoods continue to have challenges with low income levels and poor health status, there are some improvements in early childhood development indicators. Specifically, more children are receiving the enhanced 18-month well-baby visit, more mothers are breastfeeding for at least six months, and fewer kindergarten children are vulnerable in physical health and well-being, and in one or more EDI domains. The most improvement was seen in the Health Neighbourhoods of Downtown Oshawa and Lakeview.

Alcohol Use in Durham Region

Three reports using data from CCHS provided information about local alcohol use. Durham Region results were similar to Ontario. Reports are available at durham.ca/healthstats.

Most adults (80 per cent) had a pattern of drinking that was in accordance with Canada's LRADG. The LRADG recommend no more than two drinks a day for women, to a maximum of 10 per week and no more than three drinks a day for men, to a maximum of 15 per week, with an extra drink allowed on special occasions. These guidelines help

moderate alcohol consumption and reduce immediate and long-term alcohol-related harm.

About one quarter (24 per cent) of adults reported a heavy drinking episode at least once a month in the past year. Heavy drinking is defined as drinking four or more alcoholic drinks on the same occasion for women, or five or more drinks for men.

Over one-quarter (26 per cent) of local youth aged 12 to 18 reported drinking alcohol in the past year. Although percentages by income could not be examined for the region because of small numbers, the likelihood of drinking increased with income for Ontario youth.

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM
Commissioner & Medical Officer of Health



Health Protection

Report for January – March 2019

Emergency Management

DRHD is responsible for the pre-distribution of KI tablets to institutions (CCCs, hospitals, LTCHs, schools, and youth detention centres) and first responders located within the DPZ (formerly known as the primary zone). The DPZ is a 10 km radius around DNGS and PNGS.

In 2012, the KI tablets that were pre-distributed to all DPZ institutions and first responders had an expiry date of April 2019. Planning and coordination to replace these tablets began in early 2018.

By February 2019, DRHD had distributed 265,000 new KI tablets with an expiry date of January 2029 to all institutions, first responders, as well as WD and DRT that may be called upon to assist during a nuclear emergency.

Following the distribution of new KI tablets, DRHD coordinated the collection of the old stock of expired KI tablets. By the end of April 2019, DPZ institutions and first responders are expected to return their expired tablets to DRHD for safe disposal by OPG.

Residents and businesses within the DPZ were not included as part of this project as they received new KI tablets in 2015 that do not expire until 2027.

Food Safety

One of the focuses for FS is to identify ways to introduce the concept of food waste diversion to local food premises operators. DRHD is working with FoodRescue.ca, which is a branch of Second Harvest in Toronto and aims to divert food that was otherwise

destined for waste into the hands of those who need it, including those in priority populations. Building on this, DRHD is also collaborating with WD in enhancing its food waste messaging to the public to include food safety components.

The FHT program continues to be a robust part of FS. Between January 1 to March 31, **26** classes have been conducted, with an additional **5** proctoring sessions during that time. Of note, on a PA day at the DCDSB, every principal attended one of two FHT sessions (held during the morning and afternoon) and became CFHs to better support their school nutrition programs.

A new process for special events was launched in January, including updated vendor application forms and the addition of multiple event listings on each application. The new process was introduced to municipalities and was met with much positivity and appreciation. Part of the process includes one dedicated point person for all applications to streamline and to increase efficiencies.

Collaboration with PHD continues in 2019 with a newly expanded vlogging team. Two additional PHIs are trained to deliver and create content for Facebook and Twitter. The first vlog was produced in March with a member of this team also speaking at DC as part of the Horticulture curriculum, and as a speaker at the annual Durham Farm Fresh symposium (this year's theme: Navigating On-Farm Value Added).

Part 8 OBC (Sewage Systems)

The OBC was amended by O. Reg 315/10 which establishes and governs mandatory on-site sewage system maintenance inspection programs to be administered by principal authorities (i.e., BOHs, conservation authorities and/or municipalities) in certain areas.

Inspections were initially required in specific areas located within 100 metres of the Lake Simcoe shoreline. Phase II of the LSPA extends to land located within 100 metres upland of other lakes or ponds and permanent rivers and streams in the Lake Simcoe watershed.

The Townships of Brock and Uxbridge entered into agreements with DRHD for the management of this program within their respective jurisdictions. Between May and August summer students will continue to inspect properties identified as requiring inspection as part of this program.

Inspections conducted under mandatory on-site sewage system maintenance inspection programs are required every five years. The initial inspections that were required in areas

located within 100 metres of the Lake Simcoe shoreline were conducted between 2013 and 2015. Properties that were initially inspected under Phase I of the LSPA in 2014 will be inspected by summer students between May and August.

Safe Water

As in past years, HP staff will collect bacteriological water samples from local public beaches, in accordance with the *Operational Approaches for Recreational Water Guideline*, to determine if they are safe for swimming.

Beginning on June 3, **14** public beaches will be routinely monitored for water quality. Activities carried out at each beach include obtaining water samples to be analysed for elevated levels of bacteria to advise area residents and visitors of the beaches that are safe for swimming. Beaches with elevated levels of bacteria are posted as unsafe for swimming with appropriate signage.

Each week after test results are reviewed, they are posted on durham.ca, distributed via social media and sent to the members of the media to assist with public notification of beach postings.

HP staff will investigate reports of suspected blue-green algae and other adverse events reported at public beaches. Where the visual presence of blue-green algae is confirmed, a referral for follow-up testing is made to MOECP. Where the presence of a blue-green algae bloom is confirmed by laboratory testing, signage will be posted advising the public, information will be distributed to the media and there will be a posting on durham.ca. In early 2019, HP staff met with MOECP to discuss roles and responsibilities. Staff will meet with WD to discuss blue-green algae response in the summer.

Respectfully submitted,

Original signed by

Lisa Fortuna
Director, Health Protection Division



DURHAM
REGION
HEALTH
DEPARTMENT



Healthy Families

Report for January – March 2019

Durham Health Connection Line

DHCL is a confidential telephone help line available to people living, working and visiting Durham Region. PHNs provide assessment, health information, counselling, and referrals to community services. The community can access information and resources that promote and protect health on a variety of topics. From January to March 2019, DHCL responded to **3,280** inquiries from the community.

Healthy Families

Access to health information and community services/programs is a basic determinant of health. Newcomers to Canada often experience challenges that affect their health including difficulty accessing culturally appropriate services. Health Neighbourhoods data show an increase of recent immigrants in many areas of Whitby.

The LINC program was developed in the early 90s and is funded by IRCC. LINC provides basic language training in English or French to facilitate social, cultural, economic and political integration. By developing linguistic communication skills, immigrants and refugees are better able to function in Canadian society and contribute to the economy. LINC is a free program provided to permanent residents of Canada, convention refugees or those whose application for permanent resident status is being processed.

In November 2018, DRHD collaborated with Whitby LINC and EOCFC to support the needs of newcomers through provision of relevant health information, as well as information on supports and programs they can access in their community to increase capacity.

The LINC program runs through the DCDSB out of St. John the Evangelist Parish, which lies on the border of a priority neighbourhood (Downtown Whitby). From January to March, DRHD provided **3** Lunch and Learn sessions to newcomers with children 0 to 6 years of age and **4** displays with a PHN in attendance.

The Lunch and Learn sessions had **18** adults and **16** children attend and the displays had **79** adults attend with **44** adults actively engaging with the PHN and accessing available resources.

Respectfully submitted,

Original signed by

Jean Nesbitt
Director, Population Health Division
Chief Nursing Officer



Healthy Living

Report for January – March 2019

Healthy Living

Chronic Disease Prevention

Electronic Cigarettes and Vaping

According to HC, electronic cigarettes (i.e., e-cigarettes) and vaping products are on the rise, specifically among youth and young adults.

Vaping is the act of inhaling and exhaling an aerosol produced by a vaping product, such as an e-cigarette. Vaping does not require burning like cigarette smoking. The device heats a liquid into a vapour, which then turns into aerosol. This vapour is often flavoured and can contain nicotine. Vaping devices are usually battery-powered. They may come with removable parts and have many names and brands such as JUUL and VYPE.

E-cigarette use among Ontario students:

- **5 per cent** of elementary students and **17 per cent** of secondary students reported smoking e-cigarettes within the past year (OSDUHS, 2016-2017)
- **13 per cent** of elementary and **9 per cent** of secondary students felt there is no risk of harming themselves physically (OSDUHS, 2016-2017)
- **53 per cent** of all students thought it would be "fairly easy" or "very easy" to get a vaping product such as an e-cigarette if they wanted one (CSTADS, 2016-2017)

The liquid used in vapour products, also known as e-liquid or e-juice generally consists of propylene glycol, glycerin, water, nicotine and flavourings. Some e-juices may contain no nicotine and those that do can vary in strength. E-juices contain several chemicals that

are known to be toxic (e.g., formaldehyde and acrolein). Currently, ingredients vary from brand to brand and are not regulated.

The health effects from exposure to second-hand vapour are still unknown. Although health effects of e-cigarettes are uncertain, long term exposure to the e-cigarette vapour may be harmful to health. E-cigarette use increases the risk of ever smoking cigarettes among youth and young adults.

Recent evidence indicates that using an e-cigarette or vaping device can cause harm, especially to youth. Chemicals found in many e-juices have been linked to lung damage, heart disease and eye irritation. Many e-juices contain nicotine and students using them are at risk of becoming addicted. Nicotine can alter teen brain development and can affect memory and concentration.

On May 23, 2018, Canada enacted the new TVPA which regulates the manufacture, sale, labelling and promotion of tobacco and vaping products sold in Canada. In Ontario, under the SFOA, the minimum age of access for vaping products is 19 years. The TVPA includes significant restrictions on the promotion of vaping products, such as bans on:

- advertising that appeals to youth
- lifestyle advertising
- sponsorship promotion
- giveaways of vaping products or branded merchandise

In addition to new legislation, HC released a new vaping campaign called [Consider the Consequences](#). This campaign targets high school students, educators and parents with vaping facts and messaging and includes:

- 3 posters
- high school kits
- YouTube videos
- a parent tip sheet
- vaping infographics
- high school and community events as part of the National tour

To date, **6** local high schools have been chosen to take part in the National tour scheduled for May to June.

DRHD continues to build awareness on e-cigarette and vaping use among community partners and has developed key messaging about the new legislation and enforcement.

To support educators and parents, DRHD developed educator and parent presentations for an educator session focusing on cannabis and vaping on April 5 for high school educators of DDSB and a parent information session, respectively. Additional sessions are scheduled for later this month. **Three** displays have been provided for parents and educators with cannabis and vaping messaging.

To increase awareness of the harmful effects of e-cigarettes and vaping, a social media post was featured on the DHF social media platform on April 14. Staff also conducted a media interview with Metroland newspaper on cannabis edibles and vaping.

Healthy Eating

Nutrition-related chronic diseases and conditions such as cancer, cardiovascular diseases, cancer, hypertension, obesity and type 2 diabetes continue to be issues of public health concern in Canada and locally. As diet is a modifiable risk factor for the prevention of many chronic diseases, the role of dietary guidance at the national level is important and influential in many respects (HC, 2019).

HC is mandated to develop and promote evidence-based dietary guidance which: informs nutrition and health education, policies and programs; supports consistent messaging about healthy eating; and provides a standard for the assessment of dietary intakes of Canadians. HC communicates its dietary guidance through many well-known policies and guidelines, including the CFG. The CFG is used in many ways, from policy development and program design through to individual nutritional assessment and counselling. It assists people to make food choices to meet nutrient needs and improve their health (HC, 2019).

On January 22, HC launched its 7th version of the CFG entitled, [Canada's Food Guide. Eat Well. Live Well.](#) Apart from the obvious visual changes, the new guide is primarily an online resource developed for various users including the general public, health professionals and policy makers. New information on healthy eating habits was included for the first time. A [snapshot](#) of the new food guide is a printable, double-sided resource that provides a brief overview of key CFG messages including:

- Eat a variety of healthy foods each day
 - Have plenty of vegetables and fruits
 - Eat protein foods
 - Choose whole grain foods
 - Make water your drink of choice
- Healthy eating habits – Healthy eating is more than the foods you eat
 - Be mindful of your eating habits
 - Cook more often

- Enjoy your food
- Eat meals with others
- Use food labels
- Limit foods high in sodium, sugars or saturated fat
- Be aware of food marketing

The evidence for these recommendations has been available and growing for some time, and PHNs and PHNTs at DRHD have been incorporating this information in the development and implementation of community-wide campaigns, curriculum resources, activity kits, client resources, on-line learning modules, presentations, social media posts and numerous other vehicles. There is more work to be done as indicated by the following statistics:

- In 2017, **12 per cent** of local students reported drinking sugar sweetened beverages daily or more in the past week, representing approximately **6,390** students. (OSDUHS, 2018)
- In 2014, over one third (**38 per cent**) of local residents aged 12 and over ate vegetables and fruits five or more times per day. (DRHD, 2016)
- In 2017, **27 per cent** of local students in Grades 7 to 12 were either overweight or obese, representing approximately **13,400** students. (OSDUHS, 2018)
- In 2013/2014, **57 per cent** of adults 18 and older were overweight or obese. (DRHD, 2017)

For 2019, PHNs and PHNTs will be providing educational sessions for teachers to help build their capacity in educating students about the new food guide. As well, an educational toolkit developed to help decrease the consumption of sugar sweetened beverages in local youth, will be piloted in local elementary schools.

References

Durham Region Health Department (DRHD). (2016) Canadian Community Health Survey (CCHS). (2016). Facts on: Vegetable and Fruit Consumption Durham Region. Retrieved from: <https://www.durham.ca/en/health-and-wellness/resources/Documents/HealthInformationServices/HealthStatisticsReports/Vegetable-and-Fruit-Consumption.pdf>

Durham Region Health Department. (2017). Canadian Community Health Survey (2013-2014). Facts on: Adult overweight and obesity in Durham Region. Retrieved from: <https://www.durham.ca/en/health-and-wellness/resources/Documents/HealthInformationServices/HealthStatisticsReports/Vegetable-and-Fruit-Consumption.pdf>

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Nutrition Month

March was NM across Canada. The goal of NM is to highlight nutrition as a key component of health, and to focus on motivating and enabling Canadians to make informed food choices to improve their health. NM also stimulates nutrition related activities in communities across Canada. The 2019 theme “Unlock the Potential of Food” is focused on the following five topics:

- Potential to fuel: planning nutritious snacks and meals every day for energy
- Potential to discover: fostering healthy eating habits in children by teaching them to shop and cook
- Potential to prevent: understanding how food can help prevent chronic diseases like type 2 diabetes and heart disease
- Potential to heal: learning how food can promote healing
- Potential to bring us together: enjoying the benefits of bringing families and friends together with food (Dietitians of Canada, 2019)

DRHD supported NM through various social media platforms. Through the DHF social media accounts: **6** Facebook, **4** Twitter and **2** Instagram posts were developed and resulted in over **1000** engagements.

Tobacco Use

In Ontario, tobacco is responsible for more than **13,000** deaths. Based on 2016 RRFSS data, **12 per cent**, or about **63,600** of local adults are currently smokers.

Evidence suggests that campus-based interventions such as cessation programs on campuses (including provision of NRT, self-help materials and technology-based supports), smoke-free policies and comprehensive tobacco control strategies (including

policies and programs, media campaigns and advertising bans) have shown to be effective to increase quit rates and decrease cigarette consumption, and could have a large impact on all Ontario school campuses (Smoke-Free Ontario Scientific Advisory Committee, 2016).

DC Oshawa, OTU, and TU Durham GTA Campus have smoke-free policies in place. In addition to providing campuses with support on smoke-free policies, DRHD continues to provide support utilizing various tobacco control strategies. These include: 1Day Stand event, educational displays and promotion of cessation services. The 1Day Stand event:

- Provides a platform for continued promotion of campus' smoke-free policies to encourage compliance
- Helps increase awareness of free cessation supports available to students, faculty and staff
- Provides the campus community with a channel for giving feedback related to the smoke-free campus policy, smoking, and second-hand smoke on campus

DRHD implemented the 1Day Stand event on March 20 at DC Oshawa, DC Whitby, OTU North Oshawa, OTU South Oshawa, and TU Durham GTA Campus. PHNs and TEOs supported the event at the five locations. The event engaged over **500** students and staff members and provided an opportunity for community engagement. Most participants stated that they supported the smoke-free policy.

References

Smoke-Free Ontario Scientific Advisory Committee, Ontario Agency for Health Protection and Promotion (Public Health Ontario). Evidence to guide action: Comprehensive tobacco control in Ontario (2016). Toronto, ON: Queen's Printer for Ontario; 2017. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/comprehensive-tobacco-control-2016.pdf?la=en&hash=DE4676CF1F5377111D1A5AD4CAC323024787E0AA>

Mental Health

PHNs continue to focus on mental health in local schools, given the alarming statistics. **Twenty-six per cent** of secondary school students reported fair to poor mental health and **13 per cent** of elementary students reported fair to poor mental health (OSDHUS, 2016-2017).

The implementation of the TAMI program is part of a broader comprehensive strategy to improve student mental health, reduce stigma, and promote positive coping strategies.

The evidence-based program provides sessions over five days and includes a student summit event. The goals of the program are to:

- Play a key advisory role in the development of school-based mental health awareness programming
- Provide teachers with information on mental illness to support the curriculum
- Provide links to community resources, support and professional help
- Provide opportunities for people living with mental health issues to participate in an anti-stigma awareness campaign
- Support and conduct on-going research and evaluation of the program (TAMI, 2016)

DRHD has been a partner of the TAMI coalition since 2016. The coalition members include:

- CMHA – Durham
- CCHC
- DCAS
- DDSB
- DCDSB
- DMHS
- DRHD
- FYS
- KPRDSB
- LH Child, Youth and Family Program
- MMF
- OSCMHS
- PAS
- RECY – Durham Region

PHNs are assigned to work with all local publicly funded schools. One of the goals of PHNs is to promote positive mental health within their school communities. This includes assessment, provision of support for educators, supporting school and classroom leadership, student engagement, and helping schools to build on their existing supportive environments.

On March 22, **9** PHNs and **4** community partners involved with the TAMI coalition completed TAMI training. The training was led in partnership with the DCDSB mental health leader and a PHN.

A PHN, as a member of the TAMI coalition, attends meetings, conducts training and provides expertise in the planning, implementation and evaluation of the TAMI program in collaboration with community partners. Since January 2019, **6** introductory sessions have been supported by PHNs in their assigned schools. As well, the PHN TAMI coalition member completed **2** speaker sessions.

Oral Health

OH had an extremely busy fall and winter and is on target to complete the oral health school screening program by the end of the school year. To date, **19,609** children have received dental screening and of these, **1,122** children (or **5.7 per cent**) were identified as having urgent needs. Staff is in the process of ensuring these children access dental care to treat their urgent conditions.

Oral health promotion staff has provided grade specific education to children in high intensity schools. By the end of the school year it is anticipated that approximately 7,000 children will have received oral health education. Staff has also been very active on social media promoting program updates and important oral health messaging on multiple platforms. Some highlights include: the floss dance; Rooty, the molar mascot contest; and more recently April's Oral Health Month message, "Oral Health Through the Years".

The DRHD Oral Health Clinic has been providing services to children and youth on the HSO program. The clinic has served **1,023** children from January to the end of March 2019 and assisted **575** families enroll in the HSO program.

DRHD was very excited to hear about the much-anticipated low-income seniors dental program, announced in the 2019 Ontario Budget. It has been communicated that the roll-out of this program will occur near the end of this summer. Information regarding the structure of this program should be received soon.

Substance Misuse

Opioid overdoses have been identified as a public health crisis.

- Between 2013 and 2017, the number of ED visits in Durham Region related to opioid poisoning more than doubled to **57** visits per **100,000** people
- The number of deaths in the region related to opioid use more than tripled from **18** to **58** cases between 2013 and 2017
- Between 2017 and 2018, **68 per cent** of suspected opioid overdose calls received by RDPS were in Oshawa

- In 2017, the census metropolitan area identified for Oshawa had the 6th highest rate of opioid poisoning ED visits in Ontario; higher than Toronto, London and Hamilton

The opioid crisis is a complex public health issue. Evidence indicates that the most effective way to address the opioid crisis is to employ a comprehensive approach that centers on prevention, harm reduction, enforcement as well as having multiple access points to treatment.

In the fall of 2017, MOHLTC announced that PHUs across the province were accountable under the MOHLTC's Harm Reduction Program Enhancement to address the opioid situation by developing a local opioid response plan, including an early warning and surveillance system as well as acting as a central distributor for naloxone.

The [Durham Region Opioid Response Plan](#), which aligns with HC's [Canadian Drugs and Substances Strategy](#), outlines six priority areas for action:

1. Coordinate surveillance activities and use of 'real-time' data from across sectors
2. Support ongoing knowledge exchange/intelligence sharing related to opioids
3. Increase public and service provider awareness of the connection between mental health, trauma and substance abuse
4. Increase treatment options that are relevant and accessible within Durham Region
5. Develop a local evidence-based harm reduction strategy that fosters service coordination and increased access to harm reduction services and supplies for priority populations
6. Continue addressing illicit drug production, supply and distribution

On October 22, 2018, MOHLTC announced a new CTS model that will replace the former SCSOPS models established by the previous government. MOHLTC has allocated \$31 million in annual funding for 21 approved sites and began reviewing proposals April 1, 2019.

At a minimum, CTS include:

- Distribution and disposal of harm reduction supplies
- Education
- Harm reduction
- Onsite or defined pathways to addictions treatment services
- Onsite or defined pathways to wrap-around services including: primary care, mental health, housing and/or other social supports
- Provision of naloxone and oxygen

- Removal of inappropriately discarded harm reduction supplies (e.g., potentially contaminated needles and other drug use equipment) surrounding the CTS area
- Supervised consumption (injection, intranasal, oral) and overdose prevention services

CTS sites integrate and build on existing services in the community for people struggling with substance use. CTS sites provide better access to care in a stigma-free/judgement-free environment and serve as an entry-point to health care services for people who struggle with substance use. Evidence shows a CTS site:

- Connects people who use drugs with basic health and social services
- Increases community safety by reducing the number of people who inject in public places as well as reducing the number of needles discarded publicly
- Is not associated with increased drug use or crime
- Lowers rates of infectious diseases associated with shared needles
- Reduces overdose deaths

As part of the CELHIN's Opioid Strategy that is focused on preventing, treating, and reducing the harms associated with opioid use, LH, JHSDR and DRHD developed a proposal for a CTS site.

Research shows a CTS site will have the greatest impact on overdose mortality if it is no more than 500 meters away from “hot spots” of opioid use and if it is easily accessible by foot and transit. Between 2017 and 2018, **68 per cent** of suspected opioid overdose calls received by RDPS were in Oshawa. Therefore, Oshawa was identified as the potential location for a CTS.

DRHD supported the development of the CTS proposal and application process. Consultation began in December and continued through to March 26, 2019 with:

- Community agencies (i.e., harm reduction service providers and health and social services agencies)
- Community residents
- Individuals with lived experience with drug addictions
- Local politicians including the Mayor of Oshawa
- The downtown Oshawa BIA

The main goals of the consultation were to provide information on the proposal, gather feedback, determine the level of support for the proposal and gain a better understanding of community need.

A public consultation survey was available from February 22 to March 13, 2019. Of the **903** responses received, **549** respondents indicated they lived in Oshawa. All respondents lived (**96 per cent**), worked (**49 per cent**) or were students (**13 per cent**) in Durham Region.

The results of the public consultation are available in the [Survey Report: Consumption and Treatment Services Community Consultation](#). Additionally, a public open house information night was held March 12, 2019 at the Oshawa Library McLaughlin Branch.

An online survey for downtown Oshawa BIA members was available from November to December 2018 and an information meeting was held February 20, 2019 at the downtown Oshawa BIA office. BIA survey results indicate that **73 per cent** of respondents agree there is an opioid crisis; **81 per cent** believe there are benefits to having a CTS site in Oshawa; **53 per cent** indicate they do not have concerns with a CTS; **54 per cent** report noticing an increase in inappropriately disposed needles in the area surrounding their businesses; **42 per cent** report having clients use substances in their facility or restroom.

LH, JHSDR and DRHD surveyed individuals with lived experience in April 2018 and established a focus group of those with lived experience in December 2018. Approximately **70 per cent** of survey respondents stated they currently use drugs in public settings such as parking lots, parks or restrooms, while **30 per cent** indicated they use substances in a private residence, often alone. All focus group participants said they and or others would consider going to a CTS site to use. Almost all participants suggested a CTS location near or in downtown Oshawa was best and recommended that it be open in the afternoon and evening/night. Participants identified that access to social services at a CTS would be very beneficial.

An extensive public communication campaign was launched to ensure community members were informed of the proposed CTS, the online survey and the Open House Information Night. The public communication campaign consisted of traditional media including **seven** paid advertisements and **eight** earned media articles, as well as a comprehensive social media campaign that resulted in approximately **165,402** impressions.

On March 26, 2019 LH, JHSDR and DRHD presented to Oshawa City Council requesting endorsement of the CTS application to HC and MOHLTC. This was the second appearance before Council to discuss the proposal. Oshawa City Council declined to endorse a plan to establish a CTS site in the city by a **six to five** vote.

As of April 5, MOHLTC announced that **15** CTS sites have been approved and that applications will be accepted on an ongoing basis. MOHLTC will continue to assess proposals based on local conditions (e.g., morbidity, mortality and other proxy measures for drug use), capacity to provide a CTS (including proximity to similar services, CCCs, parks and schools), evidence of community support and ongoing community engagement, and accessibility.

As well, DRHD continues to advance the work of the [Durham Region Opioid Response Plan](#). Throughout the development and implementation of this plan, extensive consultation was undertaken. The consultation findings are detailed in the [Durham Region Health Opioid Consultation Report](#), which was released in February 2019.

On February 28 and March 1, 2019, the DHRC hosted the bi-annual “What’s the Harm?” Conference at Deer Creek Golf and Banquet Facility in Ajax. DRHD is a member of this coalition.

The conference was organized by members of the DHRC, including representatives from CCHC, DRHD, DRPS, JHSDR and the SA.

Over **140** individuals from various community agencies were in attendance for the two-day conference. The theme for the 2019 conference was “Reducing Stigma: The Hidden Crisis” and topics focused on issues related to the opioid crisis locally and in Ontario.

More specifically, conference speakers shared information about the realities of stigma, current and promising practices for harm reduction, challenges and solutions related to overdose prevention strategies, Indigenous community perspectives, hepatitis C and HIV treatment, trauma informed care and current local drug trends.

Conference evaluation findings indicate:

- **89 per cent** agreed or strongly agreed that the presenters increased their awareness about current harm reduction/substance use treatment services in Durham Region
- **89 per cent** agreed or strongly agreed that the presenters increased their awareness about current issues and trends related to harm reduction services in Durham Region
- **83 per cent** agreed or strongly agreed that the presenters increased their understanding about stigma and trauma informed care
- **86 per cent** agreed or strongly agreed that the presenters and topic discussions encouraged them to reflect on their own thoughts, attitudes and beliefs

- **63 per cent** agreed or strongly agreed that they were able to network and create meaningful connections at the conference
- **86 per cent** agreed or strongly agreed that they learned actionable information that would help them in their work

References

Canadian Institute for Health Information. Opioid Related Harms in Canada. December 2018. Ottawa ON: CIHI; 2018. Retrieved from:

<https://www.cihi.ca/sites/default/files/document/opioid-related-harms-report-2018-en-web.pdf>

Ontario Agency for Health Protection and Promotion (Public Health Ontario), Interactive Ontario Opioid Tool (2017). Toronto. Retrieved from:

<https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool>

Smoke-Free Ontario Act, 2017

The TEOs continue to complete their mandatory compliance inspections in accordance with the *Tobacco, Vapour and Smoke Protocol, 2018* under the OPHS. The TEOs conduct one inspection on each tobacco and vapour product retailer for compliance with the ban on display and promotion. They conduct two test shops annually on each tobacco retailer and one test shop on each vapour product retailer for compliance with the ban on the sale of products to persons under 19 years of age.

The TEOs have been quite active in responding to complaints involving individuals smoking substances, including cannabis, in enclosed workplaces and prohibited public places under SFOA. These complaint investigations have in some cases, included joint inspections involving the local by-law enforcement agency as well as referrals and subsequent follow-up investigations by DRPS regarding potential issues of non-compliance with the CA.

The TEOs have been frequently involved with issues of non-compliance involving students smoking and vaping within secondary schools and on school property. The TEOs have provided presentations and information to the school administrators, students and staff, as well as DRPS officers who are assigned to the secondary schools.

DRHD continues to work towards the repeal of the current Regional by-law to Regulate Smoking in Public Places and the Workplace that was first passed in 2002 for

replacement with a new Regional Smoke-Free By-Law. The new by-law will remove the outdated sections in the former by-law and will include new requirements to strengthen smoking and vaping restrictions in workplaces and public places throughout the region. Consultations have been completed with key stakeholders, and the draft by-law will be presented to Regional Council in April 2019 and sent to local municipalities if approved by Regional Council.

Respectfully submitted,

Original signed by

Jean Nesbitt
Director, Population Health Division
Chief Nursing Officer

Original signed by

Lisa Fortuna
Director, Health Protection Division



Infectious Diseases

Report for January – March 2019

Immunization

2018-2019 Universal Influenza Immunization Program

During the 2018-2019 influenza season, individuals six months of age and older who live, work or go to school in Ontario could receive the influenza vaccine free of charge through their CHC, HCP, hospital, LTCH, participating workplace or pharmacy.

Prior to the launch of the influenza season, DRHD PHNs conducted fridge inspections for all sites participating in the UIIP. PHNs ensured all sites met requirements as per the MOHLTC [Vaccine Storage and Handling Guidelines](#). During these visits, HCPs received support with respect to the importance of maintaining vaccine storage and handling practices to ensure the effectiveness of vaccines and the safety of clients. Additionally, communication and resources were provided to assist in educating clients regarding the importance of receiving the influenza vaccine.

To further promote the importance of the influenza vaccine to local residents, a media release was issued on October 23, 2018. This resulted in a radio interview, a television interview and **two** newspaper articles. PHNs also attended **two** community events in October and November to promote the influenza vaccine and to distribute resources. CCCs, schools, HCO offices and pharmacies throughout the region were specifically targeted with promotional materials, and information was also disseminated through [durham.ca](#) and the DRHD newsletter. During November and December 2018, **six** interactive Facebook posts targeting parents were created for the DHF Facebook page. Influenza posts consistently reached over **3,000** users and resulted in **208** likes, shares and comments.

Between October 2018 and February 2019, DRHD distributed **98,945** doses of influenza vaccines to HCPs, with **56,660** doses distributed to participating pharmacies. The increased distribution and resulting availability of the influenza vaccine has greatly improved accessibility to residents. However, children under five years of age and those without OHIP were identified as a priority population, as pharmacists can only administer influenza vaccines to individuals five years of age and older who have a valid OHIP card. Given that this population, especially those under the age of two, are at a greater risk of developing influenza-related complications, identifying strategies to provide the influenza vaccine was important; the influenza vaccine is considered the best protection against getting and spreading the flu. Evidence further suggests that low socioeconomic status is a strong predictor for the under-immunization of children and adults.

In response to the identified needs, **four** influenza immunization clinics were held in November and December 2018, in strategic locations across the region in partnership with WCIS. Targeted priority populations included children under five years of age and their families, individuals with no OHIP coverage, new immigrants and low-income families. Additionally, influenza vaccines were provided to priority and high-risk clients at Regional HQ. In total, **212** influenza immunizations were administered at local clinics.

DRHD will continue to work in collaboration with key stakeholders to raise awareness of the importance of getting the influenza vaccine and making it accessible to everyone across the region.

Community Immunization Clinics: Nurses Supporting Under Immunized Students in Durham Region

In accordance with the OPHS, the BOH is required to promote and provide provincially funded immunization programs and services to eligible persons in the health unit, including underserved and priority populations, to reduce or eliminate the burden of vaccine preventable diseases.

Locally, community clinics provide access to publicly funded vaccines for all residents without OHIP coverage, a HCP, or those who are at risk of suspension. Clinics are held throughout the year by appointment, typically at Regional HQ. Additional clinics are added throughout the school year to align with immunization-related school suspensions, which are enforced in compliance with ISPA, and to provide students who missed vaccines offered through the school-based immunization program in Grades 7 and 8.

In 2018, DRHD held **113** immunization clinics varying from large catch-up clinics, 1:1 clinics and ad hoc clinics at Regional HQ. A total of **842** clients were seen, and **1,503** doses of publicly funded vaccines were administered. Off-site, "Suspension Prevention Support Day"

clinics were scheduled in high schools identified as requiring additional support to decrease the number of high school students who would be suspended. Over seven days, PHNs provided clinics in **nine** high schools, **three** of which were in priority neighbourhoods. A total of **111** vaccines were administered to **90** students, of whom **21** did not have OHIP and **15** did not have access to a HCP.

During the influenza season, **six** record assessment and immunization clinics were held at the Ajax and Pickering WCIS and its affiliated education centres in Oshawa and Whitby. In total, **143** clients were seen, with **111** flu vaccines and **17** other vaccines administered to these high-risk populations. Additionally, in response to a request from a private school, an influenza immunization clinic was held due to a respiratory outbreak impacting local international students and **71** students were immunized.

DRHD staff will review data identifying which clients are using the catch-up clinics at Regional HQ to determine if targeted strategies are required to increase accessibility to priority populations. As such, the model of community clinics may evolve as the next iteration will explore opportunities to leverage partnerships with community stakeholders to offer immunization clinics within the priority neighbourhoods.

Infectious Diseases Prevention and Control

Child Care Centres

DRHD is in the process of sending out the spring Wee Care newsletter and will be sending a survey to operators shortly to evaluate the effectiveness of this newsletter.

Designated Officer Education

The *Infectious Diseases Protocol, 2018* under the OPHS requires DRHD staff to notify ESWs, including fire, police and paramedics, if an exposure to an infectious disease has occurred. PHNs are available to respond to possible exposures on a 24/7 basis.

Each emergency service site appoints DOs to receive and document reports of exposure from ESWs, assess if an exposure could have occurred, and contact DRHD for assistance if required. PHNs are available for consultation, assessing risk of exposure, providing education and counselling to the DO or ESW, including testing and treatment recommendations if required.

On January 29, 2019, PHNs provided an education session for six newly appointed Platoon Chiefs at Whitby Fire Services. The education session included:

- An orientation to the DPHS list
- The process for reporting exposures to the standby PHN
- Case scenarios
- A review of the Infectious Diseases Quick Reference Guide for DOs developed by DRHD
- Orientation to the principles of IPAC, hand hygiene and routine risk assessment practices

Health Care Provider Mail Out

Public Health is responsible for the prevention, detection and management of diseases of public health importance. This includes providing instructions to HCPs under the HPPA about reporting DPHS and deaths from such diseases to the local MOH.

Reporting DPHS is one of the most effective ways to prevent the spread of infectious diseases in our community. Timely reporting ensures follow-up and prevention and control of the spread of disease. PHNs investigate and manage identified cases and contacts of infectious diseases to reduce the burden of these diseases in the community.

On March 13, 2019, DRHD distributed updated infectious diseases information to **358** local HCPs. Resources enclosed in the package included:

- An updated DPHS list
 - This list provides information to HCPs about which diseases must be reported and the timelines for reporting (e.g., as soon as possible or next business day)
 - The list reflects the new requirements issued in the updated OPHS requiring reporting as soon as possible of invasive *Haemophilus influenzae*, regardless of subtype
- Infographics displaying statistics, trends and risk factors about the following infectious diseases in the region:
 - Gonorrhoea
 - Hepatitis C
 - Invasive Group A Streptococcal Infections (iGAS)
 - Syphilis
 - TB

Between 2013 and 2017, on average, **24** cases of iGAS, **162** cases of hepatitis C, **239** cases of gonorrhoea, **13** cases of TB, and **56** cases of syphilis were reported and managed locally each year.

Infection Prevention and Control Lapses

From January to March, **13** IPAC complaints were investigated and **eight** were posted. Of these eight, **seven** of these occurred in PSS premises and one occurred in a dental clinic. The main issues that continue to be identified in PSS IPAC lapses are reuse of single-use items and inadequate cleaning and disinfecting of implements. These topics will be a focus for planned PSS vlogs,

The dental clinic issues identified included issues surrounding sterilizer usage and proper monitoring. HP will work with OH on a vlog to identify common IPAC lapse issues in dental clinics.

Outbreak Summary

From January to March, **47** outbreak investigations were launched. Of those, **29** were respiratory and **18** enteric. Influenza A was the causative agent for eight respiratory outbreaks and norovirus was the cause of three enteric outbreaks. The 2018-2019 influenza season was once again unpredictable, with Influenza A affecting the senior population during the second wave in March.

Personal Services Settings

HP inspection staff has started a community engagement project for local PSS operators. Staff completed some one on one feedback sessions with operators and they indicated they would like to receive training and current information from DRHD. HP will be sending monthly information to the operators through emails and vlogs are being created which highlight areas of training that staff members believe will be useful for operators.

Rabies Prevention and Control

To date **296** reports of animal bites have been investigated compared to the **217** reports during the same time period in 2018. DRHD has also issued **31** anti-rabies treatments to victims in 2019. In 2018 a total of **112** treatments were issued for the entire year.

HP has submitted a total of **9** animals for rabies testing in 2019. In 2018 there was a total of **39** animal submissions for the year. No animals have tested positive for rabies to date this year in the region. In 2018 **one** bat tested positive for rabies in the region.

DRHD will be hosting the Rabies Prevention & Control Inter-Agency Stakeholder meeting on May 16, 2019. This annual event, which is being held during RAM, brings together a variety of agencies from the region that are involved in animal bite prevention and rabies

control. Topics presented by a variety of expert guest speakers include local, as well as provincial, rabies activity, post-exposure rabies prophylaxis, and details on the rabies specimen testing submission program. Agencies presenting include DRHD, MNRF, MOHLTC, OAVT and Sanofi Pasteur.

MOHLTC released a new *Rabies Prevention and Control Protocol, 2019*, effective February 2019. The new protocol provides clarification regarding reporting outcomes of the risk assessment for potential rabies exposures to HCPs. HP has reviewed the protocol and made the necessary updates to its investigation procedures in order to comply with this requirement.

HP continues to collaborate with local stakeholders to assist in the establishment, promotion, and delivery of low-cost rabies vaccination clinics. There are two low-cost rabies vaccination clinics scheduled in Pickering in May.

Reportable Diseases

From January to March, **408** DPHS were investigated. Influenza tops the list at **305** cases followed by **34** cases of salmonella and **25** cases of campylobacter enteritis. The 2018-2019 influenza season affected mostly the younger population (under 10 years old) during December to January but the senior population was affected the most from February to March. Influenza A was the most common strain affecting residents whereas in previous seasons, Influenza A and B were both common. Influenza continues to be unpredictable every season and thus the need for continued surveillance.

Sexual Health Clinics

During January to March, 2019, DRHD SHCs in Oshawa and Pickering served **736** new clients and **1,423** return clients. A total of **3,023** client interactions including subsequent follow-up appointments and telephone counselling occurred during this time. There were **421** client interactions with individuals residing in priority neighbourhoods. In addition to booked appointments, **113** walk-in clients received SHC services.

Clients aged 12 to 24 can purchase low-cost contraceptives through the SHC. With the introduction of OHIP+ there has been a significant decrease in contraceptive purchases. Currently **233** packages of contraceptives have been purchased with an additional **207** external prescriptions being dispensed. With the change to OHIP+ effective April 1, 2019, the SHC anticipates an increase in purchases of low-cost contraceptives.

Testing for STIs resulted in **1,300** urine NAATs for chlamydia and gonorrhoea, along with **283** blood tests for BBIs including syphilis, HIV and hepatitis C. With the introduction of

new guidelines for testing gonorrhea in specific high-risk populations, **49** oropharyngeal swabs and **27** rectal swabs were completed. This resulted in **12** positive cases of gonorrhea which otherwise would not have been identified using urine NAAT.

To prevent the spread of STIs and associated health risks, the SHC provides clients with treatment at no cost. To date, **259** chlamydia, **73** gonorrhea, **10** trichomoniasis, and **17** syphilis treatments were administered. There were **85** bacterial vaginosis, **176** genital wart, **24** herpes and **89** molluscum treatments provided.

The SHCs provide clients with the opportunity to receive publicly funded vaccines, particularly those that prevent STIs and BBIs including hepatitis A and B, and human papillomavirus (HPV). In the past three months **125** immunizations were provided.

Vector-Borne Diseases

The WNV prevention and control program will begin activities in May 2019. The program includes weekly surveillance of potential breeding sites for WNV vector mosquitoes and subsequent larvicide treatments of the identified breeding sites. The scheduled three rounds of regional roadside catch basins will take place in June, July and August and will include the treatment of private backyard catch basins. The adult mosquito trapping activity begins in June and continues on a weekly basis until the end of September.

LD activities also begin in the spring as the public brings in ticks to DRHD to be submitted for identification and testing for the bacteria that can cause LD. HP staff will also be conducting active tick surveillance at parks and conservation areas throughout the region in the spring and fall. Results of the surveillance activities will be included in a weekly summary report and a map which will be posted on durham.ca.

Once again, a robust communication plan has been developed for both WNV and LD involving print media, social media, and digital advertisements. The target messaging being provided to the public in 2019 will be based upon the results of RRFSS which for LDs indicates that a significant percentage of the public do not check themselves for ticks after visiting an outdoor park or location that may be a suitable site for tick activity. Additional information on the vector-borne program activities during 2018 is included in the upcoming “**Vector-borne Diseases Annual Report 2018**” which will be posted on durham.ca.

HP will be collaborating with HARP to produce a “**West Nile Virus in Durham Region 2013-2017**” infographics poster to provide information to the local health care community on the average number of WNV cases reported, the gender and average age of the

cases, the risk factors, symptoms, and treatment for the cases during that five-year time period. The poster will also be posted on the HCPs and VBD webpages.

Respectfully submitted,

Original signed by

Jean Nesbitt
Director, Population Health Division
Chief Nursing Officer

Original signed by

Lisa Fortuna
Director, Health Protection Division



Paramedic Services

Report for January – March 2019

Administration

Work is underway to begin the competition process for a replacement Operations Superintendent position. Once the process is complete RDPS will be working towards acting Superintendent opportunities for paramedic staff as part of succession planning initiatives.

Logistics

RDPS has taken possession of nine replacement ambulances from Demers. Staff is working with colleagues in WD to certify the vehicles and make them operational. Thirty-five replacement Panasonic Toughbook laptops have been deployed throughout the fleet.

Operations

RDPS is still experiencing increased call volumes and off-load delay challenges at local area hospitals which continues to challenge both front-line staff and resource availability to the community. Changes to the deployment plan last fall are assisting in decreasing end of shift overtime and allowing for more break opportunities for paramedics. RDPS will continue to work with hospital partners to address the off-load delay challenges.

Quality Development

Staff was busy with the recruitment of part-time PCPs as well as full-time ACPs. The recruitment process consists of three phases; written testing, practical testing and a panel interview. Orientation of new staff will commence the first week of March.

Respectfully submitted,

Original signed by

Troy Cheseboro
Chief/ Director



The Regional Municipality of Durham Information Report

From: Chief Administrative Office
Report: [#2019-INFO-24](#)
Date: April 26, 2019

Subject:

Nuclear Emergency Preparedness Review (EPREV) Mission in Canada

Recommendation:

Receive for information

Report:

1. Purpose

1.1 To summarize the details of the nuclear Emergency Preparedness Review (EPREV) mission coming to Canada in June 2019.

2. Background

2.1 The International Atomic Energy Agency (IAEA), will, at the request of a participating country, conduct an Emergency Preparedness Review (EPREV) which is an international peer review to appraise the level of preparedness for nuclear or radiological emergencies against internationally accepted standards.

2.2 In February 2017, a request was sent through Health Canada to the International Atomic Energy Agency (IAEA) to conduct an EPREV mission in Canada in 2019.

2.3 The objective of the Canadian EPREV mission is to review and assess Canada's arrangements for effectively responding to nuclear emergencies, and to identify areas requiring improvement as well as best practices.

2.4 The scope of the EPREV mission is limited to emergency preparedness and response arrangements at the Darlington Nuclear Generating Station, and the Point Lepreau Generating Station (NB) with a focus on the offsite emergency management authorities.

2.5 Health Canada is the overall national lead organization. The Ontario Fire Marshall and Emergency Management Ontario (OFMEM) is the provincial lead. The Region

of Durham Emergency Management Office is a member of and has provided input through the established steering committee and planning committee. Corporate Communications participates on the communications working group, comprised of representatives from partner organizations, providing advice and support.

3. Current Status

- 3.1 The EPREV team will be visiting Canada from June 3 -14, 2019 and will be in Ontario between June 4-7. The EPREV team will be conducting site visits in Durham Region on June 6, 2019, including the Regional Emergency Operations Centre. Health Canada will post information about the mission on its website during Emergency Preparedness Week (May 5 to 11). A news release, issued by the IAEA, will be sent out following the mission. In addition, public communications will take place once the formal report is officially available. These activities may result in media coverage.

4. Conclusion

- 4.1 The EPREV mission will culminate in a formal report to Health Canada citing their findings including recommendations and best practices.

Respectfully submitted,

Original signed by

Warren Leonard, M.Sc.
Director, Emergency Management Office



Town of Whitby
Office of the Town Clerk
575 Rossland Road East, Whitby, ON L1N 2M8
www.whitby.ca

April 17, 2019

Association of Municipalities of Ontario
200 University Avenue, Suite 801
Toronto ON M5H 3C6

Re: Municipal Voters' List

Please be advised that at a meeting held on April 15, 2019 the Council of the Town of Whitby adopted the following as Resolution #139-19:

Whereas, concerns over the quality of the Municipal Voters List is not a new phenomenon;

Whereas, in 2012, the Association of Municipal Managers, Clerks and Treasurers of Ontario (AMCTO) published a Voters List Position Paper and since that time has been advocating for transformational changes to the way that Ontario creates and maintains the Voters' List for municipal elections;

Whereas, the Preliminary List of Electors, which forms the Voters' List in Ontario, is supplied by data from the Municipal Property Assessment Corporation (MPAC);

Whereas, despite the incremental changes made by MPAC, MPAC has a limited ability to fix the currency and accuracy issues that impairs the current process and the Voters' List continues to be flawed with data inaccuracies and outdated information; and ,

Whereas, a transformational solution to the way that the Voters' List is created and managed is required.

Now Therefore Be it Resolved:

1. That the Council of the Town of Whitby supports the re-establishment of the multi-stakeholder working group between the Ministry of Municipal Affairs, Ministry of Finance, AMCTO, MPAC, Elections Canada and Elections Ontario in exploring and identifying ways to create and maintain the Voters' List for Municipal Elections;

.../2

2. That representatives from MPAC be invited to a future Committee of the Whole meeting to hear the Town of Whitby's concerns and advise the Town of Whitby on what steps MPAC will be taking in the future; and,
3. That a copy of this motion, respecting the Voter's List for Municipal Elections be circulated to all Durham Region municipalities and the Association of Municipalities of Ontario (AMO).

Should you require further information, please do not hesitate to contact the Office of the Town Clerk at 905-430-4315.



Christopher Harris
Town Clerk

Copy:

clerks@durham.ca
alexander.harras@ajax.ca
bjamieson@townshipofbrock.ca
clerks@clarington.net
clerks@oshawa.ca
clerks@pickering.ca
jnewman@scugog.ca
cleroux@town.uxbridge.on.ca

APR 18 19 4:11 PM

Afreen Raza

Original
To: CIP
Copy
To:
C.C. S.C.C. File

Subject: FW: Town of Minto Council Meeting Tuesday April 16, 2019 Item 9 f) Ontario Municipal Partnership Fund Resolution

Subject: Town of Minto Council Meeting Tuesday April 16, 2019 Item 9 f) Ontario Municipal Partnership Fund Resolution

Good Afternoon:

The Council of the Town of Minto met on April 16, 2019 to consider the above noted item and passed the following motion:

MOTION: COW 2019-069
Moved by: Councillor Elliott; Seconded by: Councillor Anderson

Whereas the Provincial government announced it was conducting a review of the Ontario Municipal Partnership Fund (OMPF), which provides annual funding allotments to municipal governments to help offset operating and capital costs; and

Whereas Municipalities were further advised that the overall spending envelope for the program would decrease having a significant impact on future budgets and how funds are raised by Municipalities as funding will be reduced by an unspecified amount; and

Whereas if allocations to municipalities are reduced, Councils will need to compensate with property tax increases or local service reductions; and

Whereas, the 2018 Town of Minto allocation was \$1,630,700 which is equivalent to 33.96% of the Town's municipal property tax revenue; and

Whereas the Town of Minto prides itself on efficient and value for money practices every day;

And Whereas, a 33.96% increase in the municipal property tax rate would increase the municipal component of property taxes paid for an average household by \$403 per year;

Now therefore be it resolved that although an interim payment has been received, Council of the Town of Minto expresses grave concern with the potential reduction and/or loss of the OMPF allotment in future years;

And Further, Council petitions the Provincial government to complete the OMPF review in an expeditious manner as future financial consideration ensures municipal sustainability;

And furthermore, that this resolution be circulated to the Premier, Ministers of Finance, Municipal Affairs and Housing, our local MPP and all Ontario municipalities for their endorsement and support.

Annilene McRobb, Dipl. M.M., CMO
Deputy Clerk
Town of Minto
T 519.338.2511 x 230

F 519.338.2005
E annilene@town.minto.on.ca
www.town.minto.on.ca



C.S. - LEGISLATIVE SERVICES

Original
To: CIP
Copy
To:
C.C. S.C.C. File
Take Appr. Action

April 16, 2019

Below is a copy of a Resolution adopted by Brantford City Council at its meeting held March 26, 2019. In keeping with City Council's direction, a copy is being distributed to other municipalities in the Province of Ontario.

C. Touzel
City Clerk

RESOLUTION

6.1 Single-Use Plastic Straws

WHEREAS section 8(1) of the *Municipal Act, 2001* requires that the powers of a municipality are to be interpreted broadly so as to confer broad authority on the municipality to enable the municipality to govern its affairs as it considers appropriate and to enhance the municipality's ability to respond to municipal issues; and

WHEREAS section 8(3) of the *Municipal Act, 2001* permits the municipality to pass by-laws under section 10 and 11 which: regulates or prohibits the matter; and to require persons to do things respecting the matter; and

WHEREAS section 10(2) of the *Municipal Act, 2001* permits single-tier municipalities to pass by-laws respecting the following matters: economic, social and environmental well-being of the municipality, including respecting climate change; and

WHEREAS the Council of The Corporation of the City of Brantford wishes to consider regulating or prohibiting the sale and distribution of single-use plastic straws in the municipality in order to reduce: (a) littering; (b) the impact on landfills; (c) the impact on sewers; and (d) the contribution to climate change;

NOW THEREFORE BE IT RESOLVED THAT City Staff BE DIRECTED to:

1. Analyze the impacts of single-use plastic straws in the municipality; and how to reduce those impacts through the regulation and prohibition of single-use plastic straws;

2. Consult with the public and impacted industries, including but not limited to:
 - i. Retail Stores;
 - ii. Restaurants;
 - iii. Manufacturers and Distributors, as applicable;
 - iv. Chamber of Commerce;
 - v. Brantford Accessibility Advisory Committee; and
 - vi. Brantford Environmental Policy Advisory Committee;

3. THAT City Staff REPORT BACK to Council on the results of their analysis and consultation; along with a process, including timelines, to:
 - a. In the first phase, regulate the sale and distribution of single-use plastic straws, taking into account existing inventories and the sourcing of alternate suppliers; and
 - b. In the final phase, prohibit the sale and distribution of single-use plastics straws.

4. THAT a copy of this resolution BE FORWARDED to the MP and MPP Brantford-Brant, the Association of Municipalities of Ontario (AMO), the Federation of Canadian Municipalities (FCM) and other municipalities in the Province of Ontario.

From: [Clerks](#)
To: [Susan Siopis](#); [Brian Bridgeman](#)
Cc: [Lori Rosamond](#); [Elia Mastrangelo](#); [Melodee Smart](#); [Debbie Brideau](#)
Subject: FW: CLOCA Resolution Regarding Port Darlington Shoreline Hazard Study
Date: April-24-19 11:13:15 AM
Attachments: [image003.png](#)

Good Morning,

Forwarding from the Clerks email.

Regards,

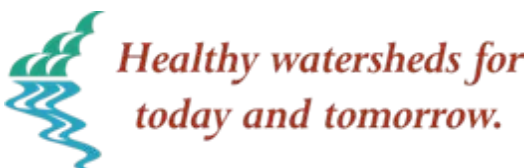
Legislative Services-Council Services
Corporate Services

From: Margaret Stauffer <mstauffer@cloca.com>
Sent: Wednesday, April 24, 2019 10:58 AM
To: 'agreentree@clarington.net' <agreentree@clarington.net>
Cc: Chris Darling <cdarling@cloca.com>; Chris Jones <cjones@cloca.com>; Erin.OToole@parl.gc.ca; rod.phillipsco@pc.ola.org; serge.imbrogno@ontario.ca; bill.thornton@ontario.ca; laurie.leblanc@ontario.ca; lindsey.parkco@pc.ola.org; JFrench-CO@ndp.on.ca; lorne.coeco@pc.ola.org; peter.bethlenfalvyco@pc.ola.org; Ralph Walton <Ralph.Walton@durham.ca>; alexander.harras@ajax.ca; clerks@oshawa.ca; 'clerks@pickering.ca' <clerks@pickering.ca>; jnewman@scugog.ca; Debbie Leroux <dleroux@town.uxbridge.on.ca>; harrisc@whitby.ca; Brian Bridgeman <Brian.Bridgeman@Durham.ca>; 'dave.meredith@ajax.ca' <dave.meredith@ajax.ca>
Subject: CLOCA Resolution Regarding Port Darlington Shoreline Hazard Study

This email is being sent on behalf of Chris Darling, Chief Administrative Officer. Please see link below to access the above-noted correspondence.

https://cloca-my.sharepoint.com/:b:/p/mstauffer/Ed_dzTqvGz1CtTjxyXai-skBXYG9c3Kwq2AhLg1kjYeuZA?e=8UTfL8

Margaret Stauffer, Administrative Assistant
Central Lake Ontario Conservation Authority
100 Whiting Avenue, Oshawa, ON L1H 3T3
Tel: 905-579-0411, ext. 111 Fax: 905-579-0994
www.cloca.com





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L1H 3T3
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Fax (905) 579-0994

Web: www.cloca.com
Email: mail@cloca.com

Member of Conservation Ontario

April 24, 2019

Via Email

Ms. Anne Greentree, Clerk
Municipality of Clarington
40 Temperance Street
Bowmanville ON L1C 3A6

Dear Ms. Greentree:

**Subject: Central Lake Ontario Conservation Authority Resolution Regarding
Port Darlington Shoreline Hazard Study
CLOCA IMS No: PSSG 4177**

Original
To: CIP
Copy B.B. ✓
To: S.S. ✓ emailed
C.C. S.C.C. File
Take Appr. Action

At their meeting of March 19, 2019 the Central Lake Ontario Conservation Authority (CLOCA) Board of Directors passed the following Resolution:

Authority Resolution #38/19

1. ***THAT the final Port Darlington (West Shore) Shoreline Management Report, Report on Flooding and Port Darlington Shore Protection Concepts Report be received;***
2. ***THAT the amendments to the CLOCA Policy and Procedural Document for Regulation and Plan Review contained in Appendix 4 be recommended for adoption following approval of flood mitigation as outlined in #5;***
3. ***THAT the CLOCA Board of Directors Recommends to the Council of the Municipality of Clarington that consultations be commenced, to be led in collaboration between the Municipality of Clarington, Region of Durham and CLOCA, for the development of a Long-Term Incremental Voluntary Land Disposition Program for lands in the Port Darlington Area that are deemed to have unacceptable risk from natural hazards , based on the principle of willing seller-willing buyer, and pending the results of negotiations with other potential funding partners, pursue Option #2 or #3 of the Baird Report;***
4. ***THAT the CLOCA Board of Directors Requests that the Municipality of Clarington Implement the Clarington Official Plan Regulatory Shoreline Policies, as amended by Official Plan Amendment 107, and the CLOCA Policy and Procedural Document for Regulation and Plan Review, through a Zoning By-law enacted under the Planning Act;***
5. ***THAT the CLOCA Board of Directors recommends that the Council of the Municipality of Clarington consider the options to improve safe access along municipal road in the Port Darlington area as part of capital planning and budgeting and that the implementing road works be constructed where feasible and appropriate;***



Ms. Anne Greentree, Clark
Municipality of Clarington

April 24, 2019

6. *THAT the CLOCA Board of Directors Requests that St Marys Cement/Votorantim Cimentos support efforts to protect people and property in the Port Darlington Area through supporting implementing programs and projects as recommended in Staff Report #5630-19;*
7. *THAT Port Darlington residents and all contributors to the Study be thanked for their participation and contribution to the study process;*
8. *THAT Staff Report #5630-19 be circulated to participants in the Study Consultation, Watershed Members of Parliament and Provincial Parliament, the Region of Durham and the Ontario Ministries of the Environment, Conservation and Parks, Natural Resources and Forestry, and Municipal Affairs and Housing.*

RES. #38/19, CARRIED AS AMENDED

Accordingly, please find Staff Report #5630-19 attached.

Yours truly,



Chris Darling, MCIP, RPP
Chief Administrative Officer

CD/CJ/ms

Encl.

cc: Hon. Erin O'Toole MP, Erin.OToole.C1A@parl.gc.ca
Hon. Rod Phillips, MPP (Ajax), Minister of the Environment, Conservation and Parks rod.phillipsco@pc.ola.org
Serge Imbrogno, Deputy Minister, Ministry of the Environment, Conservation and Parks serge.imbrogno@ontario.ca
Bill Thornton, Deputy Minister, Ministry of Natural Resources and Forestry bill.thornton@ontario.ca
Laurie LeBlanc, Deputy Minister, Ministry of Municipal Affairs and Housing laurie.leblanc@ontario.ca
Lindsey Park, MPP (Durham) kindsey.parkco@pc.ola.org
Jennifer K. French, MPP (Oshawa) JFrench-CO@ndp.on.ca
Lorne Coe, MPP (Whitby – Oshawa) lorne.coeco@pc.ola.org
Hon. Peter Bethlenfalvy, MPP (Pickering-Uxbridge), President of the Treasury Board
peter.bethlenfalvyco@pc.ola.org
Ralph Walton, Regional Municipality of Durham, ralph.walton@durham.ca
Alec Harras, Town of Ajax, Alexander.harras@ajax.ca
Clerk, City of Oshawa, clerks@oshawa.ca
Debbie Shields, City of Pickering, clerks@pickering.ca
JP Newman, Township of Scugog, jnewman@scugog.ca
Debbie Leroux, Township of Uxbridge dleroux@town.uxbridge.ca
Chris Harris, Town of Whitby, harrisc@whitby.ca
Brian Bridgeman, Region of Durham, Brian.Bridgeman@durham.ca
Dave Meredith, Town of Ajax, Dave.Meredith@ajax.ca

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DURHAM NUCLEAR HEALTH COMMITTEE (DNHC) MINUTES

Location

Darlington Nuclear Energy Complex
1855 Energy Drive, Courtice

Meeting Room

Information Centre Conference Room

Date

April 5, 2019

Time

1:00 PM

Host

Darlington Nuclear

Members

Dr. Robert Kyle, Durham Region Health Department (DRHD) (Chair)
Ms. Mary-Anne Pietrusiak, DRHD
Ms. Laura Freeland, DRHD
Dr. Tony Waker, Ontario Tech University
Mr. Raphael McCalla, Ontario Power Generation (OPG)
Mr. Loc Nguyen, OPG
Mr. Phil Dunn, Ministry of the Environment, Conservation and Parks
Dr. John Hicks, Public Member
Ms. Susan Ebata, Public Member
Ms. Jane Snyder, Public Member
Mr. Marc Landry, Public Member
Dr. Barry Neil, Public Member
Dr. Lubna Nazneen, Alternate Public Member

Presenters/Observers

Mr. Brian Devitt (Secretary)
Ms. Jo-Ann Facella, Nuclear Waste Management Organization (Presenter)
(NWMO)
Mr. Derek Wilson, NWMO (Presenter)
Ms. Lisa Frizzell, NWMO
Ms. Cheryl Johnston, OPG (Presenter)
Mr. Scott Berry, OPG (Presenter)
Mr. Kapil Aggarwal, OPG (Presenter)
Ms. Jennifer Knox, OPG
Ms. Donna Pawlowski, OPG
Ms. Jessica Jones, OPG

Ms. Christine Drimmie, Office of the Regional Chair and CAO
Ms. Amy Burke, Municipality of Clarington
Ms. Lynn Jacklin, Durham Nuclear Awareness
Ms. Melissa Ivey, Haliburton, Kawartha, Pine Ridge District Health Unit
Mr. A.J. Kehoe, Durham Region Resident

Regrets

Ms. Janice Dusek, Public Member
Ms. Veena Lalman, Public Member
Dr. David Gorman, Public Member
Mr. Hardev Bains, Public Member
Mr. Matthew Cochrane, Alternate Public Member
Alan Shaddick, Alternate Public Member
Ms. Lisa Fortuna, DRHD

Robert Kyle opened the meeting and welcomed everyone.

Robert Kyle thanked Cheryl Johnston and Darlington Nuclear staff for arranging the very interesting tour today of the Darlington Waste Management Facility (DWMF) for 9 DNHC Members from 9:00 am to 12:00 pm.

Cheryl Johnston mentioned that Darlington Nuclear has arranged a similar tour of the DWMF for DNHC Observers and others who regularly attend DNHC meetings. The tour is scheduled for May 27, 2019 from 9:00 am to 12:00 pm. She mentioned that those who are interested to join the tour will need to notify Brian Devitt directly and Darlington staff will follow-up with its security clearance requirements for the tour.

1. Approval of Agenda

The Revised Agenda was adopted.

2. Approval of Minutes

The Minutes of January 11, 2019 were adopted as written.

3. Correspondence

3.1 Robert Kyle's office received approved Minutes of the Pickering Nuclear Generating Station (NGS) Community Advisory Council meetings held on January 15, 2019.

3.2 Robert Kyle's office received an update of the report from Dr. Frank Greening, Intervenor at the November 8, 2018 Canadian Nuclear Safety Commission (CNSC) public meeting held in Ottawa, concerning the exposure of Darlington NGS refurbishment workers to an airborne alpha hazard in

February 2018 and Dr. Greening's update of his report was dated January 18, 2019.

3.3 Robert Kyle's office received OPG's Darlington Refurbishment Newsletter, Happening Now, concerning the progress of Unit 2 at the two-year mark of the Project reporting it is on schedule for restart by February 2020 dated January 24, 2019.

3.4 Robert Kyle's office received the OPG notification, dated February 14, 2019, that Jeffrey Lyash, President and CEO of OPG, is leaving OPG effective March 31 and will be replaced on April 1, 2019 by Ken Hartwick who has held the position of CFO and Senior VP at OPG since 2016.

3.5 Robert Kyle's office received OPG's Fourth Quarter 2018 Darlington Refurbishment Project Newsletter concerning major milestones on the horizon for the Project dated March 26, 2019.

4. Presentations

4.1 Progress report by the NWMO concerning Implementing Canada's Plan for Used Nuclear Fuel

Jo-Ann Facella, Director, Community Well-being Assessment and Dialogue, and Derek Wilson, Chief Engineer and VP, Contract Management, NWMO, provided an update on the long-term management of used nuclear fuel in Canada.

Derek mentioned NWMO was formed in 2002 as required by the *Nuclear Fuel Waste Act*. NWMO's mandate includes:

- To collaboratively develop and implement the long-term management of Canada's spent fuel.
- To ensure the Project only proceeds with the interested host community, First Nation and Métis communities and surrounding municipalities all working in partnership.

Derek provided comments and estimated timelines for the Project that included:

- The Site Selection narrowing process should lead to a selected site in 2023.
- The Regulatory Approval process will include:
 - The Centre of Expertise in 2024
 - Detailed Site Characterization Starts in 2024
 - Environmental Assessment and Licence Application in 2028
 - The Construction Licence for the Project to be granted in 2032
- The Design and Construction process will include:
 - Design and Construction starts in 2033
 - Operation of the Project begins in 2043

- Assessments are underway in 5 Ontario communities/siting areas as part of the Site Selection Process that includes:
 - Ignace/Wabigoon area
 - Manitouwadge area
 - Hornepayne area
 - Huron-Kinloss
 - South Bruce

Derek mentioned that the Key Priorities in the Site Selection Process include:

- Advancing partnerships with discussions and learning engagement activities.
- Advancing field work that includes:
 - Borehole drilling is ongoing in the Ignace/Wabigoon area
 - Planning for boreholes in Hornepayne and Manitouwadge areas
 - Planning for boreholes in Southern Ontario
- Advancing the technical program includes working towards serial production of used fuel containers and buffer systems.
- Developing a transportation framework includes advancing engagement and technical assessments.
- NWMO has developed a reconciliation statement and is committed to contribute to reconciliation in all work by co-creating a shared future built on rights, equity and well-being.

Derek provided detailed engineering information and design concepts NWMO is developing that include:

- Handling and storing of fuel bundles for underground placement rooms with engineered barrier systems.
- Developing new concepts for containers to store fuel bundles in preparation for storage.
- Conducting trials of up to 20 containers for full-scale emplacement in realistic geometry.
- NWMO has participated in various international meetings focused on safe handling and long-term storage of used nuclear fuel using DGRs.

Jo-Ann provided information on NWMO's on-going transportation engagement that includes preparing a planning framework, publishing reports and advancing technical assessments of transportation means and modes for moving the nuclear fuel bundles to the DGR when constructed.

Jo-Ann and Derek or their associates will update the DNHC next year on the progress NWMO is making in its Site Selection Process for used nuclear fuel in Canada. More information about NWMO is available at its website, nwmo.ca.

4.2 Progress Report by OPG concerning its Nuclear Waste Management Program at Pickering and Darlington NGSs and the proposed Deep Geological Repository (DGR)

Kapil Aggarwal, Director, Eastern Waste Operations and DGR Nuclear Waste Management (NWM) Division, OPG, provided a report concerning OPG's nuclear waste management division's responsibilities.

Kapil provided an OPG overview that included:

- OPG is owned by the Province of Ontario.
 - Supplies approximately 50% of Ontario's electricity
 - 9,300 employees
 - 66 hydro electric stations
 - 2 biomass stations
 - 2 natural gas stations
- Nuclear Generating Stations include:
 - Pickering
 - Darlington
 - Bruce that is leased to Bruce Power

Kapil mentioned the 3 pillars of the NWM Division that included:

- Stewardship – We look after waste responsibly.
- Lasting Solutions – We seek a permanent solution for disposal.
- Peace of Mind – We try to provide peace of mind for the public.

Kapil referred to the 3 Waste Management Facilities (WMF) operated by OPG:

- Western WMF that stores low and intermediate-level waste (L&ILW) from all NGSs including Bruce Power's used fuel.
- Darlington WMF that stores used fuel and some Darlington refurbishment waste.
- Pickering WMF that stores used fuel and some Pickering refurbishment waste.

Kapil provided detailed information on the Pickering WMF that included:

- In 2018, the CNSC renewed the Pickering WMF operating licence for 10 years until 2028.
- The licence includes construction of Storage Building 4 to store Dry Storage Containers (DSCs) that will be completed by August 2020 and Storage Buildings 5 and 6 will be built in future years when needed.
- In 2019, the planned target for the Pickering WMF is for 40 DSCs of used fuel.
- To date, there are 932 DSCs stored at the Pickering WMF.
- For 25 years, Pickering WMF staff have worked without a lost-time accident.

Kapil provided detailed information on the Darlington WMF that included:

- The 10-year CNSC licence continues until 2023.
- The licence includes construction of Storage Building 3 that will be completed by 2023 and Storage Buildings 4 and 5 in future years when needed.
- In 2019, the planned target for the Darlington WMF is for 57 DSCs.
- To date, there are 584 DSCs stored at the Darlington WMF.
- Darlington Refurbishment Waste from Unit 2 is also safely stored on site.
- Since 2007, Darlington WMF staff have worked without a lost-time accident.

Kapil explained that the NWM Division has an ongoing focus on reducing its environmental footprint by minimizing waste volumes. This is accomplished by sorting waste to determine what can be recycled or reused. Approximately half of the low-level waste is incinerated at the Western WMF with approximately 90% reduction in volume. Innovative ways to reduce volume of large metal objects such as heat exchangers and steam turbines is accomplished by:

- Segmentation or chopping larger objects into smaller segments.
- Ablation or removing the outer shell of the objects.
- Melting the metal objects to reduce the size.

Kapil explained that research is being conducted into new decommissioning technologies with various universities and new waste management tools are being used such as:

- Operators and designers collaborate within a 3D virtual environment of the waste facility with a virtual reality headset.
- Staff are using wireless tablets to save time and input reports from the field without using of paper reports.
- Exploring new robotic welding technologies for DSC lid-to-base welds.
- Using laser Mapping Container Verification to verify the integrity of welds for continuous IAEA inspections.
- OPG has participated in various international meetings focused on spent fuel, radioactive management and transportation of refurbishment waste in support of Darlington and Bruce with its major component replacement.

Kapil mentioned the proposed OPG DGR for L&ILW at the Bruce Power site. Since all L&ILW waste storage is interim only, the DGR will provide the permanent disposal of L&ILW. The DGR is proposed to be built at the Bruce Nuclear site in Kincardine where the rock structure is very stable, impermeable and ideal for the proposed DGR.

Kapil reviewed the approval process status of the proposed DGR that included:

- 2011-14, the Joint Review Panel (JRP) reviewed the proposed DGR and environmental assessment.
- 2015, the JRP issued its findings that reported:
 - The DGR will protect the public, lake and environment

- The DGR project should proceed “now rather than later”.
- 2016-17, the Government of Canada requested additional information, including the impact on the Saugeen Ojibway Nation (SON).
- 2018-19, OPG engaged in a respectful dialogue with SON and they committed to gain a community decision by the year end 2019.
- 2020-22, OPG expects to receive environmental assessment approval and a site preparation and construction licence approval from the CNSC.

Kapil or his associates will provide the DNHC with regular updates concerning OPG’s NWM program at Pickering and Darlington NGSs and the DGR. More information is available by accessing the OPG website at www.opg.com.

4.3 Progress Report by OPG concerning the Darlington Refurbishment Project

Scott Berry, Senior Manager, Corporate Relations and Communications, Darlington Nuclear Refurbishment Project, OPG, provided a progress report on the Project using many interesting visual aids.

Scott reviewed several progress indicators and highlights for the Project that included:

- The Project remains on time and on budget.
- Unit 2 is on target for completion as planned for early 2020.
- Unit 2 is approximately 80% complete.
- Unit 2 bulk work is approximately 85% complete.
- The turbine work is nearing completion.
- Currently installing fuel channels assemblies and feeder pipes.

Scott provided a detailed explanation of the 5 Execution Phases and Schedules for Unit 2 that includes:

- Lead-in Phase: defuel and dewater reactor, install barriers to isolate Unit 2 from the station.
- Removal Phase A: open airlocks and install shielding, install work platforms, remove feeder tubes and sever pressure tubes and bellows.
- Removal B: remove end fittings, pressure tubes and calandria tubes.
- Installation Phase: inspect and install calandria tubes, fuel channels (pressure tubes, bellows and end fittings) and install feeder tubes.
- Lead-Out Phase: load fuel and remove equipment, heat-up and conduct low power testing, conduct high power tests and connection to the grid including 9 restart control hold points with CNSC oversight.

Scott provided a progress report on Unit 3 that will be the next unit for refurbishment at Darlington NGS.

- OPG received Board funding approval in March 2019 for Unit 3.
- Unit 3 will take approximately 40 months for refurbishment.

- The Execution Schedule for Unit 3 will use the many lessons learned from Unit 2 to save time and costs.
- OPG is on track for Unit 3 refurbishment to begin in early 2020.

Scott or his associates will continue to provide the DNHC with progress reports on the Darlington Refurbishment Project. More information on the Project is available at opg.com.

5. Communications

5.1 Community Issues at Pickering Nuclear

Cheryl Johnston, Manager, Corporate Relations and Communications, Darlington Nuclear, provided an update on Community Issues at Pickering and the highlights were:

- Pickering Units 1, 4, 5, 6 and 8 are operating at or close to full power.
- Pickering Unit 7 is in a planned maintenance outage.
- Pickering hosted their annual March Break Madness program from March 11-15 and approximately 2,000 community members attended and participated in the free educational and family-friendly programs offered.
- Pickering hosted a station tour for the Town of Ajax Mayor and Council on March 26.

Analièse St. Aubin, Manager, Corporate Relations and Communications, Pickering Nuclear, OPG, can be reached at 905-839-1151 extension 7919 or by email at analiese.staubin@opg.com for more information.

5.2 Community Issues at Darlington Nuclear

Cheryl Johnston, Manager, Corporate Relations and Communications, Darlington Nuclear, provided an update on the Community Issues at Darlington and the highlights were:

- Darlington Units 1 and 3 are operating at close to full power.
- Darlington Unit 4 is in a planned maintenance outage and Unit 2 is undergoing refurbishment.
- Darlington hosted a station tour in mid-February for MPPs Cuzzetto, Kramp and Piccini.
- Darlington hosted the National Safety Review Board (NSRB) from March 4-8 to examine key areas of operations and the NSRB noted the strong cross-functional teamwork and sense of pride in the work being done at Darlington.
- Darlington hosted their annual March Break Madness program from March 11-15 and approximately 2,000 community members attended and participated in the educational and family-friendly programs offered.

Cheryl Johnston can be reached at 905-623-6670 extension 7038853 or by email at cheryl.johnston@opg.com for more information.

5.3 Corporate Community Issues at OPG

Cheryl Johnston provided an update on corporate leadership issues and the highlights were:

- On March 4, OPG welcomed its new Nuclear President, Dominique Minière, who comes with 40 years experience in the nuclear industry in France where he was the Chief Operating Officer and Vice President of Finance.
- On April 1, Ken Hartwick became the new President and CEO of OPG replacing Jeffrey Lyash. Ken previously held the position of Chief Financial Officer and Senior Vice President with OPG since 2016.

6. Other Business

6.1 Topics Inventory Update

Robert Kyle indicated the Topics Inventory will be revised to include the presentations made today.

6.2 Future Topics for the DNHC to Consider

Robert Kyle indicated the theme of the next DNHC meeting scheduled for June 14 will be *Environmental Monitoring at Pickering and Darlington NGSs* that may include:

- Progress report by OPG concerning the results of the 2018 Environmental Monitoring Report at Pickering and Darlington NGSs.
- Progress report by OPG concerning the results of the 2018 Groundwater Monitoring Program at Pickering NGS.

6.3 DNHC Meeting change from November 15 to November 22, 2019

Robert Kyle mentioned the DNHC meeting that was scheduled for November 15 has been changed to November 22, 2019.

6.4 Details of Optional Tour for DNHC Observers on May 27, 2019

Brian Devitt mentioned that Darlington Nuclear has invited DNHC Observers and others to participate in a tour of its DWMF on May 27 from 9:00 am to 12:00 pm. The tour will begin in the Conference Room at the Darlington Energy Complex.

Brian will email the DNHC Observers and others who did not attend the tour today with detailed information about the tour and request those interested in participating in the tour, to email him by April 26.

Darlington staff will follow-up with each participant requesting personal ID information required for the OPG security clearance for those joining the tour.

7. Next Meeting

Location

Durham Regional Headquarters
605 Rossland Road East, Whitby
Meeting Room LL-C

Date

June 14, 2019

Time

12:00 PM Lunch served, 1:00 PM Meeting begins

Host

DRHD

8. Adjournment 3:40 P.M.