

MEMO / NOTE DE SERVICE



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TO: Ottawa Board of Health

DESTINATAIRE : Conseil de santé publique Ottawa)

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SUBJECT: PROVINCIAL REGULATORY CHANGES AFFECTING PUBLIC HEALTH

OBJET : CHANGEMENTS RÉGLEMENTAIRES PROVINCIAUX TOUCHANT LA
SANTÉ PUBLIQUE

PURPOSE

The purpose of this memorandum is to provide the Board of Health with an overview of recent provincial regulatory changes affecting public health in Ontario.

BACKGROUND

The Ministry of Health and Long-Term Care (MOHLTC) is modernizing the public health legislative framework by: (1) publishing the updated Ontario Public Health Standards 2018 (OPHS), and (2) amending certain regulations under the *Health Protection and*

Promotion Act (HPPA). The OPHS identify the mandatory health programs and services and related minimum expectations to be delivered by all Ontario health units. The modernization of both the OPHS and amendments to regulations reflect the Ministry's commitment to improve transparency and accountability, to use evidence-informed decision-making and to provide a consistent approach to the application of regulations, protocols and guidelines across Ontario. The new OPHS came into effect on January 1st or at the time of publication by the Ministry. The amendments made to regulations under the HPPA to take effect on July 1, 2018.

Ottawa Public Health (OPH) is working closely with the MOHLTC to understand implications of the new standards and regulations in order to continue to deliver quality services during this transition period. OPH is supporting business owners, operators and partners whose businesses or work are affected by the new OPHS or amended regulations by providing current information on ottawapublichealth.ca, including printable summaries of key changes coming into effect. Public Health employees will use these summaries during encounters with clients and partners in order to engage in conversation about the upcoming changes and will work with them to ensure compliance within a reasonable timeframe.

Earlier this spring, the Province also announced changes to the *Smoke-Free Ontario Act, 2017* (SFOA) and the *Immunization of School Pupils Act* (ISPA) which will come into effect on July 1, 2018.

DISCUSSION

Below is a high-level list of some of the programs that have been included in the Ministry's modernization process and a short summary of the changes that will affect each one:

A new *Food Premises Regulation* has been passed under the HPPA (and referenced in the **Food Safety Protocol, 2018** under the OPHS). As part of this new regulation, the implementation of the mandatory food handler training is expected to present the greatest program impact. OPH is anticipating an influx in requests for in-class certified Food Handler Training sessions. OPH has and will continue to refer clients to the MOHLTC's list of accredited vendors who offer this certification course and will explore collaborations with local agencies and schools to support in-class food safety training. With consideration given to social economic factors and language barriers, OPH will endeavor to work in partnership with other Ontario health units to share course material

in other languages and to accommodate individuals to ensure compliance within a reasonable timeframe. On-line options for Food Handler Training will also be promoted.

In addition to the new regulation, OPH is pleased that the MOHLTC is developing a Food Code, which will be made available to health units in order to address the regulatory changes and to decrease inconsistencies when interpreting regulations.

A new regulation for *Personal Services Settings* (PSS) has also been passed under the HPPA. This regulation is the first of its kind in the province, and therefore will be unfamiliar to owners and operators of PSS. The regulation will work in conjunction with the new ***Infectious and Communicable Diseases Prevention and Control Standard*** of the OPHS, and the *Infection Prevention and Control Protocol, 2018*. Among other things, the regulation requires that PSS operators give notice to the Medical Officer of Health prior to operating, and sets out requirements addressing prohibited activities, invasive procedures, and conditions in the setting. OPH will work with operators to promote understanding, provide education and describe the time required to gain compliance with the new requirements. Because of this planned initiative, OPH may experience an increase in inspections and re-inspections at the onset of this new regulation coming into effect on July 1, 2018.

Changes under Ontario Regulation 567 Rabies Immunization and the updated **Rabies Prevention and Control Protocol** (2018) will standardize approaches across all public health units and fine-tune information that must be gathered for various purposes (e.g. risk assessment and post-exposure prophylaxis).

The **Public Pools regulation** addressing safe water has been amended under the HPPA. This regulation will now combine requirements for public swimming pools and public spas. With respect to pools, a Class “A” pool is defined as being a public pool to which the general public is admitted whereas a Class “B” pool is one where use is limited to occupants and their visitors (examples include apartment buildings, mobile home parks, hotels and campgrounds). This regulation includes changes to requirements such as lifeguard certification, admission standards, safety equipment and pool operator certification.

The Public Pools regulation also introduces a third Class of pool, “Class C facilities” (comprising wading pools, public spray pads, public splash pads and water slide receiving basins), and sets out related rules and regulations. This regulation will work in conjunction with the Safe Water Standard under the OPHS. OPH will continue to communicate with pool operators about these new regulations during routine

compliance inspections and through ottawapublichealth.ca. OPH will also work collaboratively with operators to gain compliance and to prevent or reduce the burden of water-borne illnesses and injuries related to recreational water use.

Under the **Healthy Environments Standard** is an updated Health Hazard Response Protocol and a new Healthy Environments and Climate Change Guideline. The updated Health Hazard Response Protocol replaces the former *Identification, Investigation and Management of Health Hazards Protocol (2008)*. It includes new provisions for public disclosure of recreational camps inspection results. This protocol now includes requirements for inspection of facilities, formerly included in the Risk Assessment and Inspection of Facilities Protocol, 2016, that no longer exists.

The new Healthy Environments and Climate Change Guideline involves promoting healthy built and natural environments to enhance population health and mitigate environmental health risks. Public Health Units are required to engage municipalities and community partners in Healthy Environment Strategies and must assess health impacts related to climate change using Ontario's Climate Change and Health Toolkit (2016), or similar model, to assess the health vulnerability within the community. The protocol also includes explicit language for PHUs to participate in local planning processes under the *Ontario Planning Act* for updating or reviewing municipal by-laws and standards to improve health outcomes, to address impacts of the social determinants of health, and to address local impacts of climate change and reduce exposure to environmental health hazards.

Amendments to the regulation under the **ISPA** will require health care providers in Ontario to report to the Medical Officer of Health immunizations administered to all children for the designated diseases specified under the Act. These are: Diphtheria, Tetanus, Polio, Measles, Mumps, Rubella, Meningococcal Disease, Pertussis (whooping cough) and Varicella (chickenpox) – for children born in 2010 or later.

The regulation prescribes three methods of reporting to the public health unit by the physician or nurse who administers the vaccine:

1. on-line web application, Immunization Connect Ontario for Health Care Providers (ICON-HCP);
2. submission of immunization records through a compatible electronic medical records system; or

3. if, in the opinion of the medical officer of health (MOH), there is a technical or administrative reason that prevents submission via the first two methods, the information may be submitted on a special form (Health Care Provider Record of Administered Immunization) via a secure method of transmission.

Under the regulation, the information must be reported within 14 days of administering the vaccine or earlier if indicated by the MOH (i.e. during student suspension periods).

Finally, with respect to **Smoke-Free regulations**, on July 1, 2018, the SFOA, 2017 will repeal the existing *Smoke-Free Ontario Act* (SFOA) and *Electronic Cigarettes Act, 2015* (ECA) and replace them with a single legislative framework.

The SFOA, 2017 and its regulation will prohibit the smoking of tobacco, the use of an e-cigarette to vape any substance and the smoking of medical cannabis in all enclosed public spaces and enclosed workplaces, as well as additional prohibited places, such as child care centres, and children's playgrounds, that were prohibited under the SFOA.

The SFOA, 2017 regulation prohibits the smoking of tobacco, the use of an e-cigarette and the smoking of medical cannabis in:

- Public areas within 20 metres from the perimeter of the grounds of a school;
- The outdoor grounds of a community recreation facility, and public areas within 20 metres of these grounds; and
- Public areas within nine metres from a restaurant or bar patio.

The SFOA, 2017 and its regulation set out limited exemptions for the smoking of tobacco, the use of e-cigarettes, and the smoking and vaping of medical cannabis in:

- Controlled rooms in residential care facilities (e.g., long-term care homes, certain retirement homes, publicly funded supportive housing), designated psychiatric facilities and designated veterans' facilities;
- Guest rooms in hotels, motels and inns that have been designated by the proprietor or employer to accommodate smoking and vaping; and
- Scientific research and testing facilities, if the smoking or vaping is for the purpose of conducting research or testing concerning tobacco, vapour products or cannabis.

The SFOA, 2017 and its regulation also include an exemption for the smoking and vaping of medical cannabis and the use of e-cigarettes inside controlled rooms in residential hospices.

The SFOA, 2017 will prohibit the display and promotion of vapour products with provisions for specialty vape shops to apply to the local Board of Health for an exemption if all requirements specified in the Regulation are satisfied ([section 21 of Regulation 286/18](#)).

OPH will work with key stakeholders such as Business Improvement Areas and restaurant associations, school boards and schools, community recreation facilities, vape shop vendors and others to share information about the new legislation and initiate discussions of collective approaches to work together to uphold the legislation.

CONCLUSION

OPH staff will continue to monitor any regulatory changes that may impact operations, work with Ministry staff to understand the implications for public health practice, consult with clients and partners on implementation and report to the Board of Health as appropriate.

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Medical Officer of Health