

Medical Officer of Health: Report to The Board of Health

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Medical Officer of Health Update

COVID-19 Update

COVID-19 continues to circulate, with XBB.1.5 (“Kraken”) now likely the predominant subvariant. This variant is more transmissible than previous strains, but it is unclear whether the severity of illness caused by XBB differs from previous SARS-CoV-2 variants. Provincially, case numbers, percent positivity and hospitalizations were not rising as of February 9. Locally, active case numbers, percent positivity and hospitalizations have been increasing in the last 2-4 weeks. A large jump in hospitalizations due to COVID-19 last week prompted the Health Unit to notify high-risk settings such as long-term care and retirement homes of the increases risk. In this message, the importance of vaccination of residents as well as infection prevention and control (IPAC) practices were reiterated.

Globally, there were fears that the lifting of China’s “Zero COVID” policy could see the emergence of even more highly transmissible subvariants, but to date there has not been evidence of that.

COVID-19 Immunization

The Health Unit continues to offer COVID-19 and influenza vaccine clinics in all five geographic hubs across our region, as well as support community partners with their vaccination efforts. Demand is waning, but the Health Unit continues to have a higher vaccination rate for those aged 60 plus than the provincial average. Preparations have begun for an upcoming spring vaccination campaign, which will be based on anticipated recommendations from the National Advisory Committee on Immunization (NACI) as well as guidance from the Ministry of Health (Ministry) and Office of the Chief Medical Officer of Health.

Management of the COVID-19 vaccine inventory continues to be human resource intensive, given the strict storage and handling requirements for COVID-19 vaccines, relatively short shelf-life of mRNA vaccines, number of products in circulation, specialized software required for documenting dose administration, and the regular reporting requirements of the Ministry.

Influenza and Other Respiratory Infections Update

Though the onset of this influenza season was earlier than usual, activity has significantly tapered off in recent weeks. For weeks five and six of 2023, the Health Unit reported no influenza activity, and only a single case was reported in week four. Since the start of this respiratory season, we have reported 518 influenza A cases, no influenza B cases, and no co-infections with A and B. In Ontario for week five enterovirus was the most commonly circulating non-influenza respiratory virus, at 7.6%, which is consistent with local findings. Of note, the influenza case numbers reported are an underestimate of the actual influenza cases in the community as testing is not widespread.



Per- and Polyfluoroalkyl Substances (PFAS)

PFAS are man-made chemicals that persist in the environment for years and are known to have adverse health effects. Over 98% of the population have some detectable level of PFAS in their bloodstream. Some PFAS chemicals may be eliminated from our bodies in days or weeks, and some may persist for years. PFAS exposure occurs from many sources as PFAS have been used in a wide variety of products but are now mostly banned substances with few exceptions.

The main source of PFAS exposure in the Health Unit district was a result of contamination associated with the use of aqueous film-forming foams (AFFFs) to extinguish fuel fires or during firefighting training at the 22 Wing Canadian Forces Base North Bay. The PFAS subsequently leached into Lees Creek which empties into Trout Lake, North Bay's municipal drinking water source.

On February 11, 2023, Health Canada opened public consultation on a new proposed objective for PFAS in drinking water. The proposed objective is lower than the Ministry of the Environment, Conservation and Parks (MECP) Interim Advice Value (70 ng/L for 11 PFAS) and recommends levels below 30 ng/L for the sum of all PFAS detected in drinking water. Health Canada is recommending that treatment plants strive to maintain PFAS concentrations in drinking water as low as reasonably achievable (ALARA). Currently, the objective is a recommendation only and not enforceable. The decision to adopt the proposed Health Canada objective in Ontario rests with the province.

The objective value of 30 ng/L for the sum of all PFAS in drinking water was arrived at based on the precautionary principle and not a health-based value. That is, the lower the concentration of PFAS in drinking water, the lower the public health risk. This is due to incomplete scientific evidence. There are many unknowns and uncertainties. Currently, research is unable to determine the PFAS concentrations in drinking water or in our bloodstream that accurately correlates to adverse health effects. Hence, the lower the better.

Programs and Services Updates

Corporate Services

Building and Maintenance

Parry Sound

- Parry Sound office planning continues in preparation for the new leased location. Finalizing the floorplan with the landlord to identify fixtures, electrical, furniture, sinks, doors, mechanical etc. in preparation for the landlord to tender construction to meet timelines. Currently on track for occupancy later this year.

North Bay

- Providing new access card photos for all staff.

COVID-19

- Weekly monitoring of personal protective equipment cleaning supplies for COVID-19 (sanitizer and disinfectant).

Communications

- Communications continues to provide updates regarding COVID-19 developments but has shifted to supporting more program work and organizational committee work.
- Other projects Communications is supporting includes “Think You’ll Win” gambling campaign, Icelandic Prevention Model event media support, Food Insecurity report and social media support, February 23 Kids Vaccine Day planning, digital media planning for Family Health Information Line, and additional one-off program social media and website needs.

Emergency Management

- With the elimination of the Manager of Emergency Management position, distribution of Emergency Management Foundational Standards work to other programs/services continues.

Information Technology

- Conducted a security audit to identify and address any potential vulnerabilities.
- Performed software and system updates to ensure the latest security patches were installed.
- Distributed new tablets for incoming Board of Health members.
- Board of Health orientation for new members.
- Healthy Living and Finance computer refresh.
- Number of cyber investigations: 160

Planning and Evaluation

Population Health Assessment and Surveillance

- The [Nipissing Parry Sound Public Health Atlas](#) was updated with the most recent 2021 census data. The Health Atlas is an interactive tool that shows multiple public health indicators and demographic data in a dashboard format. In addition, the [Health Unit Region Population Estimates](#) were updated to the 2021 census year. Population estimates provide more frequent measures of population counts for aggregated levels of geography. Data is available for use among all programs and services to inform and support planning, presentations, and/or program/project development.
- Planning & Evaluation continues to learn more about Indigenous data governance guided by the strategic Indigenous engagement work of Healthy Living and through a provincial epidemiologists’ working group on Indigenous Engagement. In alignment with First Nations principles of ownership, control, access, and possession (OCAP), Indigenous-related census indicators (e.g., Indigenous identity, Indigenous mother tongue) as well as census data for any First Nations community were not included in the Health Atlas update.
- The Nipissing Parry Sound Data Collaborative (NPSDC) has recently re-convened meetings after a pandemic break. Priority setting has begun, focusing on population level indicators of health and well-being. The terms of reference are being re-established as new community partners join.
- Information collected through the Overdose Reporting System is sent to more than 160 community partners in weekly updates through the Health Unit’s interactive surveillance dashboard. The Health Unit also continues to collect data based on the increasing trends noted locally during the pandemic. Since January 1, 2023, there have been 12 overdoses/negative drug reactions with one resulting in death within the Health Unit district.
- The Health Unit is working with Centre for Addiction and Mental Health (CAMH) to implement the next round of the [Ontario Student Drug Use & Health Survey \(OSDUHS\)](#) for the 2022/23 school year for elementary and secondary schools in the Health Unit region. All school boards in the region have consented to participate. Individual school recruitment is currently taking place,

led by CAMH. Data acquired from the oversampling of local schools will enable the Health Unit to better analyze mental health, substance use, and well-being indicators.

Health Equity

- In collaboration with community partners providing trusted community spaces, the Health Unit is planning a limited number of COVID-19 vaccine clinics to reach individuals who are under housed, transient, or experiencing homelessness; and individuals who use substances
- A presentation was made to Ontario health units via the Ministry of Health (Ministry) on our organization's strategic approach to addressing the rise in infectious syphilis cases and increased risk of congenital syphilis cases in our region.

Planning

- An enumeration of recovery priority activities has been completed to determine how many interventions address the four organizational recovery priorities (i.e., Getting Children and Youth Back on Track; Nurturing Mental Health Recovery; Prioritizing Equity-Seeking Populations; and Strengthening Community Development). A monitoring framework is currently being developed and activities will be monitored and reported on quarterly throughout 2023.

Quality Assurance

Policies and Procedures

- Totals for policies, procedures, and associated documents processed between January 1 and February 8, 2023, were 14 documents issued, and 3 new documents assigned.

Quality Issue Reports (QIR)

- A total of six QIRs were completed (closed) between January 1 and February 8, 2023. Five were a level 1 (incident did occur but no harm, loss, or damage) and one was a level 2 (temporary or minor harm, loss, or damage – recovery in days/weeks).
- All were classified as related to organizational/professional standards.

Clinical Services

Communicable Disease Control

The Communicable Disease Control (CDC) program monitors trends of reportable infectious diseases to detect increases or clusters of cases (outbreaks); monitors disease incidence trends to determine the need for intervention and success of interventions; identifies groups at highest risk of disease, behavioral risk factors and etiology of infections; and disseminates surveillance findings to those who need to know in order to take any required actions.

The CDC program manages both enteric and respiratory outbreaks in congregate living settings and collaborates with the Infection and Prevention and Control (IPAC) Hub and congregate living settings managing outbreaks in these settings. In 2023, 16 outbreaks have been declared and managed in congregate living settings.

The CDC program also completes case management and contact tracing for reportable diseases (Diseases of Public Health Significance or DOPHS). In 2023, 96 DOPHS have been reported to and managed by the CDC program. Influenza is an example of a DOPHS that is reported to the Health Unit.

The number of influenza A cases has decreased, there have been 12 laboratory-confirmed cases in 2023. In December 2022, 180 laboratory-confirmed influenza A cases were reported.

The IPAC Hub regularly shares IPAC Best Practice resources and completes IPAC Assessments in long-term care homes, retirement homes, and other congregate living settings. Since the start of 2023, 120 interactions have occurred with congregate living settings. These interactions include outbreak management, IPAC Assessments, exposure assessments, and consultation regarding admissions and transfers.

Professional Practice

The role of the Professional Practice Manager, Personal Health Information Lead is to support the organization to foster quality professional practice that meets best practice standards, regulatory college practice standards, certification standards, and legislative requirements including requirements under the *Personal Health Information Protection Act, 2004*. Current priority activities include:

- Facilitation of the Transition to Public Health Orientation for staff new to public health starting in late February 2023 with a full complement of participants (10 employees);
- Facilitation of 18 student placements for this winter semester and management of student placement requests for the upcoming summer semester;
- Development and/or update of the following policies and procedures:
 - Infection Prevention and Control Policy,
 - Reprocessing and Storage of Medical Instruments Procedure,
 - Photography, Video, and Audio Recording Consent and Storage Process Procedure,
 - Privacy Audits Procedure,
 - Privacy and Security Training Procedure (which includes updating of Privacy, Confidentiality and Acceptable Technology Use Employee Education),
 - Performance Readiness Plans for Preventing Occupational Sharps Injury Procedure, and
 - Documentation Procedure.
- Consultation with the Healthy Families program to review processes related to consent and disclosure of personal health information with Children's Aid Society and other service agencies;
- Co-chair the Management Committee and facilitate the development of a new format/model of the Management Committee to focus on planning and decision-making at the Management Committee;
- Supporting the internal transition of the Ministry of Health Case and Contact Management (CCM) software expansion in collaboration with our internal program representatives (CDC, SH, VPD, EH, P&E and IT); and
- Supporting quality assurance activities for registered nurses and nurse practitioners as required by the College of Nursing of Ontario and planning in collaboration with the Chief Nursing Officer upcoming Nursing Professional Resource Group professional development activities.

Oral Health and Vision Screening

As part of the Ontario Seniors Dental Care Program (OSDCP), we have been offering dentures to eligible clients 65 years and older. To do this, we partnered with dentists and denturists across the district. To date, we have provided 300 sets of dentures (101 in 2021, 177 in 2022, and 22 so far in 2023).

We currently offer denture services in West Nipissing, Mattawa, South River, and Parry Sound; however, we had yet to successfully recruit a denturist from North Bay to participate in the OSDCP. As a result, seniors from North Bay have been required to travel to receive dentures, which can be a barrier or a challenge for some. Oral Health is now pleased to report that a denturist from outside the city has graciously offered to travel to North Bay to provide these services. Weekly visits by the denturist, starting at the end of March, will allow seniors to receive treatment in North Bay.

Sexual Health/Clinical Information

Sexual Health Update: Rates of syphilis infection are rising across Canada and Ontario and in January, the Ministry of Health asked the Health Unit to share the strategies employed locally to address rising syphilis rates with Ministry staff, other public health units, and other interested parties. Over 140 individuals from across the province joined the call and learned about the initiatives that the Health Unit has implemented to address the rising syphilis rates. We were pleased to share our local strategy and learn about public health interventions used in other regions of the province that may be useful locally.

As part of the pandemic recovery work to re-integrate public health nurses into school settings to offer sexual health promotion and clinical services, there are five events planned in February at secondary and post-secondary institutions. At the secondary level, nurses will connect with students to improve awareness of trusted adults in the school setting and share information about available sexual health services. At the post-secondary level, the public health nurses will attend a “Sexy Health Fair” to promote services and provide general sexual health information. These events align with Action Canada for Sexual Health and Rights’ annual Sexual and Reproductive Health week campaign. This year’s campaign has a theme of “Get the Facts,” looking at ways we can identify, create, and share accurate and accessible information to support individuals in making informed decisions about their bodies and lives. Furthermore, these events will be used to share health promotion resources created by IMPACT, the Health Unit’s youth engagement committee. All of these activities align with the Health Unit’s recovery priority of *Getting Children and Youth Back on Track*.

Harm Reduction/Clinical Information/Needle Syringe Program Update:

A public health nurse from the Sexual Health team who works in harm reduction was invited to join the provincial Harm Reduction Advisory Committee (HRAC), which holds representation from public health and community harm reduction staff and is hosted by Ministry of Health programs (Addictions and Substances Policy and Program Unit of the Office of the Chief Medical Officer of Health, AIDS and Hepatitis C Programs, Mental Health and Addictions Division, and the Ontario Harm Reduction Distribution Program). HRAC is a provincial advisory committee whose purpose is to provide an opportunity for advice from the field to enhance Ministry-funded harm reduction programs. Some of the committee's goals include increasing understanding of harm reduction-related program and service delivery needs, issues, and gaps, expanding knowledge of best practices and supporting evidence-informed program delivery, and enhancing coordination, communication, and partnerships among partners in the harm reduction sector and the Ministry. We look forward to actively participating and contributing to this provincial committee by sharing knowledge and experiences gained from the field and in-turn learning about best and emerging practices to address harm reduction needs locally.

Vaccine Preventable Diseases

COVID-19 and Influenza

COVID-19 and influenza vaccine demand continue to decline. Currently we are running approximately seven clinics per month across the district where both COVID-19 and influenza vaccines are offered. Additionally, both vaccines continue to be offered at in-house clinics when clients are unable to attend a

community clinic. The Health Unit has vaccine coverage rates slightly above the provincial average for adults 60 years of age plus, and at or slightly below the provincial average for those 59 and under. We continue to look at new strategies to improve these rates.

Secondary School Catch-up Program

In January and February, the Vaccine Preventable Diseases (VPD) team hosted vaccine clinics in all 13 secondary schools across the district. Prior to the clinics, every secondary student immunization record was assessed by a public health nurse to identify outstanding vaccines. As a result, 3,116 consent forms were mailed to students/families in the district. During these clinics, all vaccines were offered to students with signed consent forms. These vaccines included Tetanus, Diphtheria, Pertussis (Tdap), Measles, Mumps, Rubella (MMR), Hepatitis B (HB), Human Papilloma Virus (HPV), and Meningitis (Men-C-ACYW-135). Uptake was on average 35-45%. Additional planning for catch-up initiatives and opportunities to reach the remaining students continues.

Elementary School Catch-up Program and National Kids Vaccination Day

In early February VPD mailed 1,757 elementary vaccine consent forms to students/families across the district who had overdue vaccine records. In preparation for the influx of expected calls for appointments, VPD is planning a media release and social media campaign to align with **National Kids Vaccination Day** on Wednesday, February 23. The media release will also include announcement of March Break Kid's Vaccination Clinics in North Bay and Parry Sound during the March Break. This day will be made kid-centric (movie, popcorn, therapy dogs, and potentially an appearance of local Battalion players to sign autographs and take pictures). There will also be a prize package given away to a lucky participant. We are hopeful that this clinic will appeal to many of families in the community.

Childcare Annual Review

Each year, VPD is required to complete an annual immunization assessment of all registered childcares within the district. An annual assessment is a review of immunization records for all staff and children registered in childcare. Childcares provide the Health Unit with a list of all staff and registrants and each record is assessed to ensure they are up to date. In follow up, notifications of required immunizations will be provided, if applicable and we work with individuals and families to ensure outstanding vaccinations are completed. This process helps to reduce potential outbreaks in childcares and helps to ensure students proceeding into the school system are up to date on vaccinations prior to entering school.

Community Services

Environmental Health

Clients may now register for in-person food handler certification courses through the Health Unit's website. There are a minimum of 14 courses offered per year, with each course holding up to 16 students. The new online process offers students a more time efficient registration, however, call-in registrations are still accepted.

Public health inspectors (PHIs) have issued closure orders for one spa and one swimming pool, one ticket to an operator of the small drinking water system for failing to comply with Ontario Regulation 319/08, and four tickets to a food premises operator. Operators can appeal orders that are issued to the *Health Services Appeal and Review Board*, pay the charges, or request a trial in court.

Tobacco enforcement officers have issued two tickets, 19 warnings, and seized two packages of cigarettes. They have responded to two complaints, removed over 50 illegal vapes (fruit flavoured) from shelves of two convenience stores and made one presentation in schools regarding vaping violations.

A nursing home in the Health Unit service area was charged last year (2022) with three violations under Section 26 of the Ontario Regulation 319/08:

1. Improper disinfection – The operator failed to notify the Medical Officer of Health (MOH) immediately;
2. Owner failed to designate the operator, and
3. Owner failed to ensure operator trained in safety procedures.

The facility's Committee opted to challenge the charges in court, which was scheduled on January 24, 2023. However, before this date, the committee reached out to the Health Unit's legal counsel seeking to settle the matter outside the court. After consultation, on January 24, 2023, both counsels and the Chair of the Committee reached a compromise, and the subsequent trial was fixed to June 27, 2023. In the interim, the Committee is to assign someone to ensure that the system is providing potable water at all times during operation.

In 2021, a section 22 order under the *Health Protection and Promotion Act* (HPPA) was issued by the Medical Officer of Health to a local business owner for violation of the *Reopening Ontario Act* (ROA, 263/20) by refusing to conduct curbside operations only. Subsequently, the local business owner was charged with repeated non-compliance of the section 22 order. A trial scheduled for January 30, 2023, was postponed to later in March at the request of defence legal counsel.

Healthy Families

The Healthy Families Program continues to work with clients day-to-day through:

- Breastfeeding Clinics
- MotherCare program (in collaboration with Children's Aid Society)
- Families in the Kitchen (currently on hold due to volunteer shortage)
- Healthy Babies Healthy Children Blended Home Visiting program (public health nurses and family home visitors)
- Family Health Information Line (telephone support/information)

In addition to the above client-based work, the team has the following priorities related to health promotion:

- Working with **community partners** to re establish and strengthen partnerships adversely affected by the COVID-19 pandemic.
- **Parenting** – participation and leadership in re-establishing the Comprehensive Approach to Positive Parenting (CAPP) committee to plan, implement and evaluate an integrated system of services to promote positive parenting in the Nipissing and Parry Sound districts.
- **Breastfeeding** – decision making underway related to Baby-Friendly Initiative Redesignation.
- **Mental Health** – working towards a comprehensive, evidence-based approach to foster awareness, knowledge, and coordinated action for mental health promotion within the Healthy Families program (e.g., support responsive relationships, strengthen core skills, reduce sources of stress for families).

- **Growth and Development** – continue to work the with One Kids Place and other partners on implementing SmartStart Hub and creating a clear entry point for families to access services for their children.
- **Reproductive Health** – assessment of online and face-to-face prenatal education services in our communities to determine next steps related to provision of prenatal education by the Health Unit.

Healthy Living

The Healthy Living team is working with the Gambling Harm Reduction Partnership to expand the “Think You’ll Win?” gambling harm reduction campaign to include odds of winning at roulette, bingo, online slots, and sports betting. The campaign features scenarios that may seem unbelievable but are statistically more likely to happen than winning big.

Initially launched in 2022, the “Think You’ll Win?” campaign aims to reduce gambling-related harms in the early stages, provide information and statistics that counteract the positive messages from gambling outlets, and educate on the nature of gambling as entertainment, not a means for income. The evaluation of the campaign showed that the large majority of survey respondents resonated with the lighthearted approach (82.4%) and agreed that these are important messages to continue to be shared in our community (84%). Over three-quarters of respondents (77%) said that these messages encouraged them to think about the nature of gambling.

The campaign’s success is notable as research shows that people believe inaccurate information about gambling behaviour and its outcomes. Misconceptions and misperceptions (e.g., gambling as an income-generating behaviours) are common across the gambling spectrum. Problem gambling can affect anyone no matter their socioeconomic status. It also affects the family of the individual who gambles, and the community. The campaign will be re-launched at the beginning of March will include a mix of online and offline advertisements, such as billboard advertisements.

Activities aimed at preventing and reducing gambling-related harms are guided by the Ontario Public Health Standard - Substance Use & Injury Prevention.

Healthy Schools

The Healthy Schools program strives to achieve optimal health of school-aged children and youth through partnership and collaboration with school boards, schools, and community partners. Over the course of the COVID-19 pandemic and the recovery period, the program has had an additional compliment of public health nurses funded via the [School-Focused Nurses](#) initiative. Recent highlights of their work include:

- Coordination of an internal Continuous Quality Improvement (CQI) project to identify ways to interact with school boards, schools, and childcares in a more collaborative, efficient, and meaningful way.
- Collaborating with schools on mental health initiatives for students and youth.
- Collaborating with the Vaccine Preventable Diseases (VPD) program to support school-based vaccine clinics
- Supporting the planning of the [Icelandic Model](#) events taking place in Parry Sound on February 23 and North Bay on February 24. [Registration](#) is still open for community partners who wish to learn more.

Finance

The Ministry of Health fourth quarter report was filed on January 31. It contained forecasts for year end and for the final quarter for one-time funding that expires on March 31. Currently the Finance team is preparing for the annual audit and are awaiting the Annual Service Plan document from the Ministry. In preparation for that document Finance has prepared budget estimates for one-time funding requests.

The Ministry has reduced the bi-weekly cash flow for expected surpluses in COVID-19 funding and Infection Prevention and Control Hub funding for 2022.

Testing continues on the updated cloud-based version of the integrated accounting system before going live in April.

Human Resources

Compensation

Following year-end activities, auditors will conduct their review of 2022 payroll starting in March 2023.

Testing continues to update the integrated Finance/Human Resources information system to a cloud-based system. Training sessions for employees and managers will be provided before going live with the new system.

Employee & Labour Relations

The next joint OPSEU/ONA/Management Committee meeting will be held on March 23, 2023. As a result of the decision made to eliminate a permanent 0.8 FTE Public Health Nurse Specialist, Planning and Evaluation, the bumping process is underway as per the ONA collective agreement.

Occupational Health & Safety

The Occupational Health and Safety (OHS) Operational Policy has been updated within the new policy framework. Subsequently, the existing OHS work instructions will be transferred to the new procedure format.

Management of the internal emergency colour code protocols has transferred from Emergency Management to Human Resources (OHS). Work is underway to integrate and align these protocols into the existing OHS framework to address not only the physical importance but also the psychological impacts during and resulting from these events.

Professional Development

Internal professional development sessions recently coordinated by Human Resources since the last report include:

Professional Development Session	Number of Participants
Basic Life Support/CPR	14

Staffing

Human Resources continues to schedule casual nurses, COVax Assistants, and COVID-19 Clinic Assistants to work at COVID-19 immunization clinics across our district.

The following temporary positions were recently filled. These vacancies were created as a result of work related to COVID-19, a leave of absence, an internal transfer, and to assist with workload:

- Public Health Nurse (1.00 FTE), School Focused, Healthy Schools from January 23, 2023, to June 30, 2023
- Acting Program Manager (1.00 FTE), Healthy Families from January 24, 2023, to February 21, 2023
- Public Health Nurse (1.00 FTE), Vaccine Preventable Diseases effective date to be determined until June 30, 2023
- Public Health Inspector (1.00 FTE), Environmental Health (1.00 FTE) effective date to be determined for 6 months

The following permanent positions were recently filled. These vacancies were created because of a retirement and an internal transfer.

- Program Administrative Assistant (0.72 FTE), Healthy Schools effective February 20, 2023
- Community Health Promoter (1.00 FTE), Healthy Schools effective date to be determined

The recruitment of the following permanent and temporary positions is currently under way:

- Public Health Nurse, Healthy Families (0.90 FTE)
- Program Administrative Assistant (Casual)

We continue our efforts to recruit a permanent Certified Dental Assistant Level II, Oral Health and Vision Screening, a permanent Management Administrative Assistant, Quality Assurance, a permanent Bilingual Community Health Promoter, Healthy Schools, a temporary and a permanent Public Health Nurse, Communicable Disease Control, a permanent Public Health Nurse in Healthy Families and Sexual Health, and two temporary Public Health Nurses, Healthy Families.

There has been no net increase in permanent positions.

Approved by

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