

## What's Up with Legionella?

By Arne Faremo CPHI(C), Christopher Radziminski MASc PEng RPBio, and Kalpna Solanki CPHI(C) BSc MBA

Almost every week, there are legionellosis outbreaks, mainly in cities throughout North America. So, what's going on? Are we seeing a higher number of cases because of climate change, higher density living, or better diagnosis? The studies do not conclusively identify any one of the aforementioned parameters as a main factor, but the information suggests legionellosis is increasingly a problem.

Looking at the rates of Legionellosis in BC and Canada between 2002 and 2018 shows:

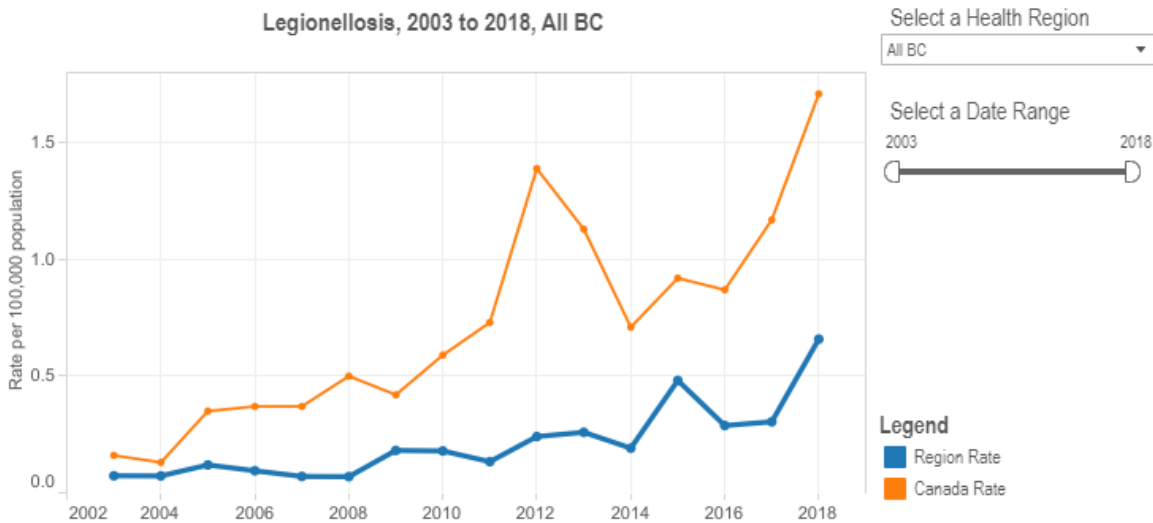


Figure 1: Reportable Dashboard, BCCDC

A review of the cases in the United States shows similar trends:

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## What's Up With Legionella continued. . . .

Legionnaires' disease is on the rise in the United States  
2000-2018

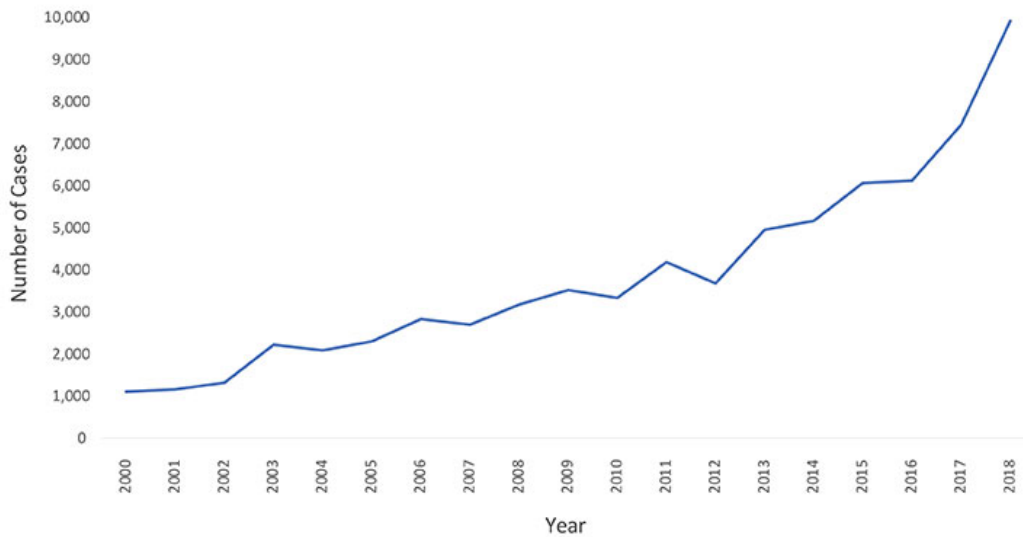


Figure 2: Nationally Notifiable Disease Surveillance System

Legionnaires' disease and Pontiac Fever are most often caused by the bacteria *Legionella pneumophila*, but all species of *Legionella* can cause disease. These bacteria grow within amoeba and other protozoans that colonize biofilms that are present on virtually all surfaces that contact water. Although the bacteria are quite common in nature and cause few problems there, they can flourish in building water systems such as pipes, cooling towers, tanks, and other components of a human built environment when there is a combination of stagnant water, warm temperatures, and a lack of disinfectant residuals. When the water containing the bacteria is aerosolized via cooling towers, hot tubs, shower heads, irrigation systems, or ornamental fountains, people nearby can be exposed to *Legionella* bacteria when they breathe in the mist. Risk factors for severe Legionellosis include being male, over 50 years of age, having a history of smoking, and being immunocompromised (e.g. due to a chronic medical condition and/or recent immune suppressive therapy).

*Legionella* bacteria were first-determined to be the cause of a pneumonia-like illness in 1976 amongst people who went to a Philadelphia convention of the American Legion, ergo the name 'Legionnaires' Disease'. However, the bacteria were also implicated in another illness previously. The first identified cases of Pontiac Fever (a milder, self-limiting illness) occurred in 1968 in Pontiac, Michigan, among people who worked at and visited the city's health department. It wasn't until *Legionella* was discovered after the 1976 outbreak in Philadelphia that public health officials were able to show that the same bacterium causes both diseases. If you want to really nerd out, check out Scanlon et al (2020), page 12 (section 4.1) for some interesting history of *Legionella*, starting in 1954: <https://tinyurl.com/2fpvdmpr>!

Monitoring the trends shows there is a reason to be concerned about the incidence of legionellosis. Considering that these are only the reported cases, there is a very strong likelihood that individuals with milder forms of the illness may have attributed it to a cold or flu and may not have even sought treatment. There is also the strong possibility that many who did have legionellosis were either not tested or not tested for legionellosis even if they did seek medical attention as its symptoms are similar to those of other types of

. . . *Continued on Page 3*

## What's Up With Legionella continued. . . .

pneumonia and standard antibiotic treatments may be effective against milder infections. Indeed, it is estimated that the burden of Legionnaires' disease is underreported by as much as 8- to 10-fold.

In Canada, in the Summer of 2021, outbreaks were reported in Montreal (10 cases, 2 fatalities) in Moncton, NB (8 cases, 1 fatality) - each outbreak was the second within a few years for both cities. Click here for information on Moncton: <https://tinyurl.com/uy5exk3u>; and here for information on Montreal: <https://tinyurl.com/2z56mk38>

Legionellosis outbreaks have been traced to many types of sources such as cooling towers and other 'wet' building mechanical systems, spa/hydrotherapy pools, showers, decorative water features, power washing, wastewater treatment facilities, milling operations, automotive windshield wash solutions, and others. For outbreaks where a source of infection is identified, poorly managed cooling towers are often identified as the source of infection. This is the reason why, in the United Kingdom in 1992, a cooling tower registry was implemented. In Canada, the only jurisdictions with a similar registry are the City of Hamilton, ON, the Province of Quebec, and the City of Vancouver (additionally, Quebec and Vancouver require monthly Legionella testing).

Such regulations to register and monitor cooling towers have been strongly recommended by health experts. With a registry, when there is an outbreak and a suspected exposure area is identified, it is much faster to identify and remediate the cooling tower(s) which may have contributed to the outbreak. Rapid identification of Legionella sources also reduces the chances of more vulnerable people from being exposed and infected. Monitoring is a proactive measure that helps equipment owners verify the effectiveness of their maintenance programs. Simply put though, to prevent illnesses from occurring, building owners need to ensure that they are assessing and controlling risks.

In late 2019, the City of Vancouver, working with Vancouver Coastal Health, approached the Environmental Operators Certification Program with the potential of working together to develop and launch a new certification, the Building Water Systems (BWS) certification.

The new BWS certification comprises of an entry-level short course introduction to water system basics (water sources, primary and secondary treatment, distribution networks), waterborne illness, Building Water System components and operational risks, responsible persons, cross-connection control, water quality parameters (physical, chemical and microbiological) and standards, their analysis and monitoring, sample collection and documentation (Chain of Custody), interpretation of test results, remediation processes, security, personal safety, record keeping, and other administrative procedures.

The City of Vancouver, Vancouver Coastal Health, and the Environmental Operators Certification Program (EOCP) worked collaboratively, and the new BWS certification was launched at the EOCP's annual conference in September 2020 – the first certification of its kind in North America. The certification requires experience related pre-requisites, completion of an accredited course, an exam, and subsequently payment of dues and completion of professional development.

It is expected that there will be more Canadian jurisdictions implementing cooling tower registries and/or mandatory training and certification of those who maintain building water systems. This disease is preventable, and there are options available to significantly reduce the number of cases.



Hello Environmental Public Health Professionals. We seem to get closer and closer to our more routine public health days and then step away again. The ongoing battle continues and, as always, we commend all Environmental Public Health Professionals for continuing the battle and making immense impacts on this pandemic. As we continue to see blips of the light at the end of the tunnel, make sure to take a look at the BC Branch's water training opportunities to help shake off the rust on those other core programs! On page 10, you'll see an outline of professional development hour worthy content!

This Edition we take an opportunity to get to know the President and CEO of the Environmental Operators Certification Program. Thank you to Kalpna Solanki for her ongoing support of the BC Page newsletter and her fantastic Giardia' Corner interview, below!



**Kalpna Solanki — President and CEO, EOCP**

**Q1: What school did you go to for the ENVH program? What year did you graduate?**

A1: You're totally trying to find out how old I am, but here goes: I graduated from BCIT in 1989 (Direct Entry Program).

**Q2: Where have you worked and what roles have you been in throughout your career?**

A2: Because I completed the Direct Entry Program, I needed a full six-month practicum and completed this at the Burnaby Health Department (this was of course all before regionalization). I started in Food, then moved to Environmental Management, and became the very first female member of that team! Subsequently, I moved to the Human Resources Department, completed my MBA at SFU, and then worked in the City Manager's office at the City of Burnaby. I also ran a couple of businesses, and currently work as the President and CEO at the Environmental Operators Certification Program. In my current role, I feel like I have 'landed' – it makes use of my Bachelor of Science, my Environmental Health Diploma, as well as my Masters in Business Administration.



**...Continued on Page 5**

**Q3: What is one of the most memorable moments or situations in your career so far?**

A3: Ooof, dare I go there?! YES! So, years ago, I worked with a student, we shall refer to him only by the first initial of his first name, 'G'. This was in Richmond, so anyone who worked there around the same time knows exactly who I am talking about. This was all of course before the 'Me Too' movement and I suspect this would not entirely be acceptable now. But I digress. When we worked there, the vehicle we had to use was a City of Richmond truck. It was manual, and I did not know how to drive manual. But 'G' did, so he drove. The first thing he would do as soon as we got into the truck was whip off his shirt because he wanted to tan, and he would try to keep his left arm out as much as possible because that seriously needed tanning apparently. Anyway, one day after we had just headed out, he stopped and said "that's it, I've had enough, I need to tan my other side, you're going to learn how to drive a manual" ....and that is how I learned to drive a manual. During our time in Richmond, he managed to get the truck stuck twice (!) on the dykes necessitating a tow truck each time, and rumour has it he wrecked an expensive piece of equipment in the lab at BCIT by turning the burner up, waaay up, instead of down. Anyway, 'G', wherever you are, "thank-you" for 'encouraging' me to drive a manual, because I now have a 6-speed convertible that I can drive because of you, and I can get a full-on tan 😊

**Q4: How does your role, with EOCP, support Operators in understanding their role in protecting public health?**

A4: Since I started working at the EOCP, we have been focusing on increasing the level of collaboration between the EOCP, the Ministry of Health, and the Health Authorities. The EOCP oversees facility classification and Operator certification, but does not have the authority to enforce compliance. Working together, we have developed a Communication Process so that EOCP can monitor non-compliance issues at facilities, and work with the Health Authorities to help the facilities/Operators achieve compliance. This is all in the public interest and promoting this, the importance of us working together, has been helpful for Operators as well as DWOs.

**Q5: What do you see as the biggest challenge faced in the world of Environmental Public Health?**

A5: To some extent the challenge faced by EHOs is similar to that faced by Operators. What they do is preventative, and the work is unrecognized and unappreciated. In my opinion, more work needs to be done to spread the word on the impact of the work of EHOs.

**For Fun:**

1. What is one of your favorite quotes?

- It's from Arnold Schwarzenegger that I used for the opening of the EOCP conference:
  - i. Trust yourself
  - ii. Break some rules
  - iii. Don't be afraid to fail
  - iv. Ignore the naysayers
  - v. Work like hell
  - vi. Give something back



2. If you could learn to do anything, what would it be?
  - Learn how to fly a helicopter.
3. When was the last time you had an amazing meal?
  - I'm a foodie so I have amazing meals all the time! But, if I had to pick a meal at a restaurant that was amazing, it would be the Miso-glazed Sablefish at either Joe Fortes or Cardero's in Vancouver.
4. What is something you learned in the last week?
  - That the fastest pit time in F1, is around 2.09 seconds, imagine!

### Which Would You Rather?

**Read on a Kindle or paperback book?**

Paper, always, unless going on a long trip where carting a lot of books would be difficult

**Go skiing or snowshoeing?**

Skiing, downhill, Cypress.

**Read the book or watch the movie?**

Both, book first, then the movie...and then usually complain about how the movie did not do the book justice!

**Travel by sailboat or cruise ship?**

Sailboat (preferably over 50')

## News from VCH



Congratulations to VCH for their 2021 Innovation Award from EOCP for their joint venture with the City of Vancouver with the Legionella Prevention Program. Specific kudos to Arne Faremo who was noted as the lead for VCH.



Dear CIPHI Members,

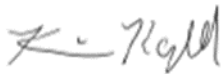
As we celebrate Environmental Public Health Week 2021 next week, the CIPHI National Executive Council would like to commend and congratulate you for your tireless commitment to keeping the public healthy and safe, especially during the challenging circumstances of the past year. The pandemic continued to challenge us and highlight the importance of our work, while many parts of the country were also faced with unprecedented environmental impacts of climate change. In addition to regular responsibilities, Public Health Inspectors and Environmental Health Officers put their extensive training, knowledge, and experience into action to respond to wildfires, floods, extreme weather events, and droughts impacting drinking water systems.

The work of environmental public health professionals touches on so many facets of the public's life: the air they breathe, the food they eat, the water they drink, and the homes and communities in which they live. The environment encompasses every part of a person's life, and your work helps to make sure every part of your community is healthy and safe. The work that you choose to do is challenging, and often under-appreciated by the public.

This year, in addition to focusing our advocacy efforts to bring awareness to the public, we would also like to see CIPHI Members recognize their peers and colleagues: take a moment this week to post on social media recognizing the work of your colleagues, or send a direct email letting a colleague know that their work is appreciated. As a CIPHI Member, you know better than anyone how valuable the work is that you do, and as such, that recognition of your peers is even more valuable.

Thank you for your ongoing commitment to the profession, and to protecting the health of all Canadians. We are proud to be able to represent CIPHI nationally.

Sincerely,

A handwritten signature in black ink, appearing to read "K. Kapell".

Kevin Kapell, CPHI(C)  
President

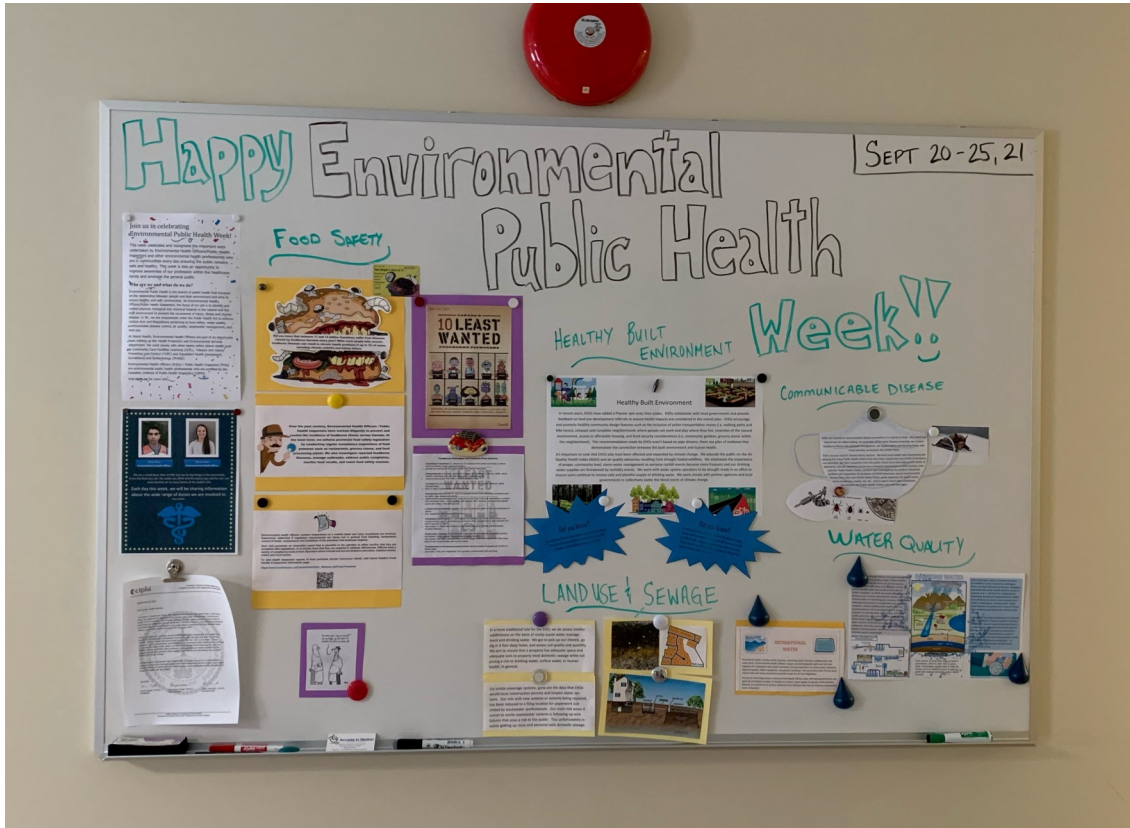
A handwritten signature in black ink, appearing to read "Kari Engele-Carter".

Kari Engele-Carter, CPHI(C)  
Past-President

A handwritten signature in black ink, appearing to read "Casey Neathway".

Casey Neathway, CPHI(C)  
President-Elect

## Island Health—Parksville Office



Environmental Health Officers, Shuja Awan and Stacey Sowa, put a display up at Oceanside Health Centre in Parksville in an effort to educate other Island Health departments about the role of the EHO.



Stay tuned for the CIPHI National Fall Virtual Education Series

Click on the pic (left) to open the promo video!





# CIPHI BC Seminar Series

Registration is available on Eventbrite: <http://ciphibc.eventbrite.ca>

<b>Date and Time</b>	<b>Description</b>	<b>Presenter</b>
October 27, 2021 9am-10am	<a href="#"><u>Groundwater Tag, Licensing, and Well Decommissioning</u></a>	Leia Fougere and Johanna Wick, Ministry of Environment
November 10, 2021 9am-10am	<a href="#"><u>Online Help Centre for BC Small Water Systems</u></a>	Interior Health Drinking Water Systems Program
November 24, 2021 9am-10am	<a href="#"><u>Finding Flow: How Interpersonal Connection Can Improve Drinking Water Systems</u></a>	Cory Smith, Certified Plumber Water Pumphouse & Trades, City of Prince George
December 8, 2021 9am-10am	<a href="#"><u>BC Drinking Water Treatment Guidance Document</u></a>	Sabrina Diemert, P. Eng. Ph.D. Drinking Water / Wastewater Engineer, Ministry of Health
December 16, 2021 11:30am	CIPHI AGM	



## Disasters that moved us: how can we protect the health and well-being of Indigenous evacuees?

By: Angela Eykelbosh, Environmental Health and Knowledge Translation Scientist, NCCEH-BCCDC

The summer of 2021 has once again driven home the urgency of climate change and its impact on extreme heat, decreased precipitation, dry forests, and the risk of catastrophic wildfires. This year's [unprecedented fire season](#) required numerous communities to prepare for and in some cases execute evacuation orders, lasting for days or weeks. Sadly, June 30<sup>th</sup> 2021 also brought significant loss of property and loss of life in the community of [Lytton](#), parts of which remain under evacuation order due to onsite hazards.

Among the many communities affected by seasonal fires in BC, Indigenous communities are at a [disproportionate risk of disruption and harm](#). This may be due to geographic factors like remoteness and reliance on local ecosystems for socio-cultural, economic, and spiritual well-being. Indigenous communities are also coping with the legacies of colonialism, which have created pre-existing psychosocial and health inequities. This knowledge led the National Collaborating Centres for Public Health (NCCPH), of which the NCCEH is a member, to embark on a collaborative project looking at the public health impacts of disasters on Indigenous communities. We were particularly interested in what happens *after* the disaster, when individuals or whole communities must be evacuated from their homes for prolonged periods of time.

The [Long-term Evacuees Project](#), funded by the Public Health Agency of Canada and conducted by NCCPH, began in 2017. Initial work included key informant interviews, academic and grey literature review, and an environmental scan of government websites. This set the stage for a community-based research project looking at two recent disasters affecting Indigenous communities. Led by Indigenous researchers using culturally safe research practices, the project generated two distinct case studies looking at the [Ashcroft Indian Band](#) and their experience after the Elephant Hill Fire in 2017, as well as the [Siksika Nation](#)'s experience of the Bow River flood in 2013. The cases studies demonstrated that although evacuation was necessary to protect lives, prolonged displacement from the land and disconnection from communities, families, and services created their own public health harms that have been largely unaddressed.

The experiences generously shared by community members were thematically analyzed and used to further develop a summary document analyzing the ways in which public health practitioners can act to minimize the impacts of displacement. This summary document, entitled [Health and Social Impacts of Long-term Evacuation Due to Natural Disasters in First Nations Communities: A Summary of Lessons for Public Health](#), highlights 10 best practices that will help to support Indigenous communities through such crises.

Evacuations affecting both Indigenous and non-Indigenous communities will figure prominently in our future. The impacts of mass displacement **must** be minimized... or suffered. Currently, the Long-term Evacuees Project is looking to disseminate the resources described above to ensure that they inform future practice. We are also inviting feedback from knowledge users, including public health practitioners and Indigenous community members and leadership, to identify opportunities for improving our public health response during evacuation and recovery. It is hoped that this will lead to emergency response planning that addresses the social and health needs of Indigenous communities during evacuation and supports them through recovery and re-settlement.



BC Centre for Disease Control



National Collaborating Centre  
for Environmental Health

Centre de collaboration nationale  
en santé environnementale

## Calling all photographers!! Re: New CIPHI website

The CIPHI Advocacy Committee is looking for photo submissions of CIPHI members and EPHPs in action to be posted and displayed on the upcoming re-designed and new CIPHI website.

In particular, we are interested in photos that capture the diversity of our role/profession. Photos might highlight one of the various field sites and communities you work with. We also welcome photos that document how the COVID-19 pandemic has impacted your regular role.

We are asking CIPHI members to look through their digital photo albums and send their favourite photos to [stephanie@bethechange.org](mailto:stephanie@bethechange.org). Where possible, health units should arrange to send a CIPHI member photographer out for the day to visit all team members and capture their EPHP work. Please try to send high-resolution photos (at least 300 pixels per inch (ppi)). We prefer photos to be taken with a DSLR camera (not a phone). But if you are taking photos with a phone, photos taken with a newer phone camera, e.g. iPhone Pro, is preferred.

Please note the photo submission deadline is **November 16th, 2021**.

Thank you in advance for participating in this initiative and we look forward to representing EPHPs across Canada on our upcoming site.

- The CIPHI Advocacy Committee



**YOU KNOW WHAT  
REALLY GRINDS  
MY GEARS . . .**

“When companies sell ‘cleaners’ as ‘sanitizers’ and then you get to have the battle with an operator about active ingredients and that the salesperson doesn’t actually know better”

Please submit your “heard it a thousand time before one-liners” that you hear in the field over and over and your EPHP pet peeves to [bcpageeditor@ciphi.bc.ca](mailto:bcpageeditor@ciphi.bc.ca). Let’s all share in the hilariously annoying joys of our environmental public health experiences.

## In Memoriam—Peter Bell



Peter was born on June 7<sup>th</sup>, 1942 and raised in Victoria, B.C., the only child of Alexander Bell and Shirley “Mildred” Bell. In his youth, Peter enjoyed surveying in the wilds of British Columbia. It was his Uncle Norman who inspired him to pursue a career in Environmental Health. Peter was awarded his CPHI (C) in 1963. He met Marion when they were at a party in Fort St. John and he knew he would marry her the moment he first time he saw her. Peter finally worked up the courage to propose with the help of some homemade rhubarb wine – a fact he always cited with a sparkle in his eye and a wry smile across his lips. It is a testament to their love that, even after 55 years of marriage, one could always find clumps of rhubarb in his patch of the garden. He was a loving father to his two girls, Shirley and Diana. He achieved a 50 percent success rate in raising them to be devoted CFL fans and a 100 percent success rate in getting them to be appreciative of statistics.

His career took him and Marion to many parts of the province, including Squamish, Prince Rupert, and Powell River. They spent what free time they had boating and exploring the breathtaking coastline of B.C. In 1977 they settled in the Bates Beach area of Courtenay – back when the Comox Valley had a single traffic light and an Eaton’s department store. Although he quickly rose to become a Chief EHO, his heart was always in the field. After 35 years of service, if he wasn’t on the golf course or the pickleball court, he couldn’t resist walking by vacant land and waxing poetic about soil types and percolation rates.

John Gibb indicated “I remember Peter as a very engaging raconteur. It seemed that he always had an interesting story to tell about his days boating up and down the BC coast and especially the Desolation Sound area. He was very generous in sharing his hard earned knowledge about the best and most secluded “gunkholes” where a novice like me could spend the night in relative safety especially if a big storm was brewing. Peter was a good ally to have with you when confrontations and disputes were a distinct possibility. His gentle manner and peaceful demeanor had a calming effect on even the most angry members of the public. Peter was a progressive thinker when it came to the various roles that PHIs/EHOs should embrace. Peter was one of the first Chief PHIs that encouraged his staff to take an active role in the new Community Care Facilities Licensing Program which I was attempting to get off of the ground throughout British Columbia. A few times when I needed an encouraging word (aka a shoulder to cry on metaphorically speaking), Peter could be counted on to provide a ray of sunshine when things looked on the dark side” .

A perpetual “soul-searcher”, Peter had a lifelong affinity for spiritual matters and energy healing. Late in life he embraced this calling, connecting with other soul-searchers and helping those in need. The gift of these experiences enabled him to approach his final few difficult months with extraordinary humour and grace.

Peter passed away on **July 5, 2020** shortly after being diagnosed with Multiple Myeloma. He is dearly missed by his beloved wife Marion and daughters Shirley and Diana.

Tim Roark, BC Branch Historian



# In Memoriam—Brian Patrick Halley



Brian passed peacefully away at his home in Williams Lake, BC., on May 3<sup>rd</sup> 2021. He was born in St. John's, Newfoundland on March 15, 1951. He was predeceased by his father and mother, John and Margaret. Leaving to mourn with fond memories his brothers and sisters; John, Noreen (Charlie) Parsons, Liam & Penny, Eileen (Robert) Collingwood, Patrice & John Harris, Peter, Brenda & Susan Green, many nieces and nephews, and friends in both BC and NL. A thank you from the family to the caring staff of Cariboo Hospital in Williams Lake, and a special thank you to Nurse Connie Rollins for her exceptional care.

Brian graduated from Memorial University in St. John's with a Certificate in Occupational Health & Safety and worked in St. Anthony as a Medical Attendant. Several years later, Brian attended Ryerson University in Toronto and graduated in 1991 with his B.A.A. in Environmental Health and received his CPHI(C) shortly thereafter. Brian then had the choice of employment in New Brunswick or BC so chose Beautiful BC. He enjoyed living in BC for over 25 years, working as a Health Inspector with the Caribou Health Unit in Williams Lake for several years before transferring to the Lower Mainland where he worked with the Fraser Health Authority in Coquitlam, Maple Ridge, and Abbotsford. Brian was very concerned with the welfare of his colleagues and was a highly respected Shop Steward with the BC Government Employees Union. A good friend and colleague, Lorena McKay, said Brian loved to tell jokes even though he may have told them more than once before. He was a very kind person who wanted to help you in any way he could.

Hi Sister Patrice indicated Brian dearly enjoyed his visits home with his family and friends. Newfoundland was always near and dear to Brian and he shared stories of the great times with friends and at work.

Brian retired from the Fraser Health Authority in September 2013 and not too long after moved back to his old stomping ground of Williams Lake. He was very proud of the fact that had finally purchased his own home in William's Lake after years of being a renter.

Cremation took place in Williams Lake, as per Brian's wishes, and his ashes were returned to St. John's. A memorial service and interment for Brian will be announced at a later date.

Rest in Peace our dear Brother, Uncle and Friend.

In lieu of flowers, a donation to a charity of one's choice in Brian's memory would be appreciated.



Patrice Harris (Sister)  
Tim Roark, BC Branch Historian



## In Memoriam—Dennis Wahoski



It is with saddened hearts that we announce the passing of Dennis Wahoski on July 25, 2021, from this earth to his eternal home! Dennis was born in Minnedosa, Manitoba, on May 6, 1943, the oldest of 7 children – 5 brothers – Ron, Jerry, Richard, Mark and Darcy and an only sister, Joy.

Dennis' strong work ethic, from being raised on a farm, served him well in a variety of jobs he held – a cook's assistant on the DEW line, sinking shafts in potash mines in Saskatchewan and 30 years with the Federal Government as an Environmental Health Officer which took him through the National Parks, as far as Banff and Lake Louise and working with local First Nations and developments on their lands.

It was in Saskatchewan that Dennis met his wife, Eva Margaret Peters and they were married in St. Paul's Cathedral in Saskatoon on September 14, 1968. Dennis and Eva shared their love for each other by adopting 4 children – Danielle in 1976; Nathan in 1978 and Lynette and Clayton in 1988. Dennis was a loving and devoted father and enjoyed being involved in his children's activities.

Dennis was also a devoted grandfather of 7 – Logan, Linden, Dylan, Aylah and Oliver, William and Faye, all of which live in Salmon Arm and who visited him on a regular basis.

A strong faith and church life was always important to Dennis and he was a faithful and devoted member of St. Joseph's Catholic Church in Salmon Arm. His faith, and the love and support of the community, helped him through very difficult times in his life, including the death of his daughter, Danielle, in 1985 and his stroke in 2001.

Dennis was a kind and gentle man, generous with his time and talents as he participated in various groups – Knights of Columbus, choir – he loved music – Eucharistic Minister, Cursillo and Pro-life to name a few.

Dennis was predeceased by his parents, Albert and Mary, daughter, Danielle, sister, Joy, brother, Darcy and nephew, Christopher. He is survived by his wife of 53 years Eva and children – Nathan (Stephanie), Lynette (Jason) and Clayton, all 7 grandchildren and numerous nieces and nephews. Our dearest Dennis, our lives will never be the same and we will miss you terribly. We will carry your love in our hearts forever, until we meet again and our circle will once again be complete.

Tim Roark  
Branch Historian

## A Message from a Friend

Dennis was a pioneer in Environmental Health within Health Canada's First Nations Health program. In the early years he found himself trying to manage water and sewer requirements for many development projects in the South Okanagan (Trailer Parks, Subdivisions, Malls, Hotels, Water Parks). This was a huge challenge because there was no legislation that covered such developments. Dennis needed to work this through on his own being creative and flexible. He became Health Canada's guru for this portfolio and a "go to" for other EHO's, including myself, who would later encounter similar challenges.

When I arrived in Kamloops in 1982 Dennis and I became close working allies and personal friends. With little experience in field work Dennis offered needed mentor ship. He was a wise, dedicated, reliable and generous man whose work ethic was second to none. He will be missed.

Ian McLean

**Keep up to date on the latest news at the BC Branch website:**

[www.ciphi.bc.ca](http://www.ciphi.bc.ca)

The page also contains information on membership, conferences, career opportunities, documents, and much more. Check it out regularly.

**Did you know the BC Branch is on Facebook and Twitter?**



Click on the icon to find the BC Branch on Facebook and *Like* the page.



Click on the icon and *Follow* the BC Branch on Twitter.



*CIPHI's BC Branch is seeking out additional council members to add to their team. Participating in Branch activities provides networking opportunities with members from across the province, a chance to build on communication and leadership skills, and is a fulfilling way to give back to the profession!*

*Contact president@ciphi.bc.ca or one of the existing counselors (Page 16) if you are interested or seeking additional information.*

# BC Branch Executive 2021

www.ciphi.bc.ca

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The objective of this newsletter is to keep the members of the BC Branch and other colleagues informed of the local and national events that are of interest and importance to them.

The views, comments, or positions of the BC Page are those of the Editorial Team or the author and do not necessarily reflect those of either the BC Branch or the Canadian Institute of Public Health Inspectors.

The Editorial Team reserves the right to edit material submitted, solicited or unsolicited, for brevity, clarity, and grammatical accuracy.

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