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Winter 2004-5**2004 Winter**

ONTARIO BRANCH NEWS

Public Health Inspectors - A Profession with Two Roles

Of all of the law enforcement professions that are out there, the Public Health Inspector's is amongst the most unique. Not only are the members of this profession Law Enforcement Officers, but PHIs have another facet to their job which is as important, if not more so, than their role as a LEO - they are entrusted to safeguard the public's health. That may sound a little bit grandiose but it is meant quite seriously. First and foremost, the PHI is there to ensure that the water we drink or swim in, the restaurants where we eat at, the pets we keep in our homes and the people with whom we deal with are all healthy and safe - from a disease or contamination point of view. I've noticed over the years, though, that the "dual nature" to the PHI's job hasn't really been emphasized or clarified. As such, there are a few interesting things that I would like mention.

Firstly, a PHI's power of inspection - they are extremely potent. A police officer doing their job needs a warrant for almost everything that they want to do when it comes to entering a premise that they have strong suspicions about unless they are in "hot pursuit" and, even then, they are subject to questions inside the courtroom about whether or not there was time to get a warrant. In contrast to this, a PHI can enter into any restaurant unannounced and simply walk into the kitchen just to see what's happening. Or, request a water sample, ask to see a rabies vaccination, etc. all based upon a complaint or not, as the case may be. Do you realize that most police officers would love to have the powers of inspection that a PHI exercises on a daily basis? To make it even more frustrating for the police, keep in mind that after that unannounced inspection in which the PHI gathered evidence that would support charges based upon the Food Premises Regulation, they left the restaurant owner with a copy of an Inspection Report and told them that they would return to check up on the situation and, if things aren't to their liking, they would be charged! Don't you think that a police officer would do just about anything to be able to walk into a suspected crack house without a warrant whenever they felt like and see what's going on and then return to follow up?

This leads to the second most important issue when it comes to the job of a PHI and it is intimately related to their power of inspection. Given this ability for inspections in order to safeguard the public, the public's degree of trust in a PHI may actually exceed that granted to a police officer. And, with this greater level of trust, there is a greater degree of responsibility to the public. PHIs have been given the legal authority, in essence, to breach what could be viewed as rights under the Canadian Charter of Rights and Freedoms for privacy and security from government intervention in order to protect the citizens in the community that they serve. That's very heady stuff, indeed, from a prosecutor's point of view and it should be as equally impressive to you as a PHI.

This is why, in my opinion, the PHI has a greater onus on them to ensure that they fulfil both aspects of their position to the best of their abilities. Also, though, they need to know when to act in one role or the other as circumstances dictate. Under the Health Protection and Promotion Act, the PHI is able to do things that do not involve laying a charge. The function of keeping all of us safe is separate and distinct from the role that a PHI

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Submissions Criteria:

- All topics must be relevant to the Public Health Inspection Field.
- Articles must be submitted either on computer disk or by e-mail in MS Word (written articles will not be accepted)
- Articles submitted should be approximately 150 words (Feature Articles a maximum of 500 words).
- Feature Articles will be determined by the OBN Editorial Team.
- Graphics or pictures submitted must be included with the submission must be a resolution of 150 - 300 dpi.
- Articles must be submitted by the deadlines outlined below and on the OBN web site

Article Submission Deadlines 2005:

Spring Issue -	February 14, 2005
Summer Issue -	May 16, 2005
Fall Issue -	August 15, 2005
Winter Issue -	November 14, 2005

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PRESIDENT'S REPORT

November 2004

On behalf of the CIPHI (Ontario Branch) Inc. I extend our warm wishes to Claudia Kurzac on her recent appointment as CIPHI National President.

I am pleased to report that our recent Branch educational conference was a tremendous success. The Branch had partnered with the Haliburton, Kawartha, Pine Ridge District Health Unit for the 65th annual CIPHI (Ontario Branch) Educational Conference (Plagues of the 21st Century) from October 4-6, 2004 in Haliburton, ON. Our gratitude to the conference chair Anne Alexander and the entire conference planning committee. The educational agenda was excellent and the conference venue and social events superb. Well done!

In addition, conference sites are confirmed up to 2007. Toronto Public Health will host a joint national/provincial conference in 2005. Regional Niagara Public Health Department was approved by the Branch Executive to host the 2006 CIPHI (Ontario Branch) Inc. education conference and Sudbury & District Health Unit was approved for 2007. Thank you to our future host conference sites.

The CIPHI recently announced the launch of Environmental Public Health Week 2005. This initiative was established in 2003 with the aims of recognizing the work of certified public health inspectors in Canada and improving the promotion of the profession to the general public and our private/public sector partners. Environmental Public Health Week was created with the intention of being an annual event and the dates corresponding with the incorporation date of the Institute. The 2005 edition of CIPHI Environmental Public Health Week is set for January 3-9, 2005. The Branch encourages public health agencies in Ontario to recognize the week through advertising the event locally and planning other PHI promotional or recruitment activities during the designated week period.

Over the last period CIPHI (Ontario Branch) Advocacy occurred within each division of the Branch (refer to division reports). On November 2/04 I attended a public meeting of the MOE advisory council on drinking water quality and testing standards. The advisory council was appointed by the Ontario Minister of the Environment and in response to operator complaints regarding the content and implementation of O. Reg. 170/03. I delivered a presentation to the advisory council (report attached). In the presentation the Branch advocated for an enhanced role for Public Health Units and Public Health Inspectors as designated enforcement agents (non-municipal systems) under 170/03.

Recently the CIPHI released a position statement on Canada's Public Health Protection System: The Need for a National Strategy to Revitalize Frontline Environmental Public Health (EPH) Services. The position statement highlights shortcomings of the existing EPH system and provides principles on which the EPH system (National/Provincial) may be strengthened.

On July 21, 2004 the much anticipated report of the Haines Meat Inspection Review was released ([HYPER-LINK "http://www.attorneygeneral.jus.gov.on.ca" www.attorneygeneral.jus.gov.on.ca](http://www.attorneygeneral.jus.gov.on.ca)).

As background, in 2003 the Honourable Roland J. Haines (Haines Review) was appointed by the newly elected

provincial government to review the meat regulatory and inspection regimes, including free standing meat processors, in Ontario. The BSE emergency in Canada along with the Aylmer Meats investigation in Ontario were likely precipitating factors to this review. The

CIPHI (Ontario Branch) Inc. arranged a private meeting with the Haines Review Counsel on March 1, 2004. In addition, the Branch along with other Public Health stakeholder agencies in Ontario participated in a public presentation to the Haines Review Counsel on March 31, 2004. A position statement drafted by the Branch (Safety of Ontario's Food Supply and Ontario's Food Inspection System) served as the supporting principles upon which we based our comments to the Haines Review.

In his report the Honourable Roland J. Haines provided 113 recommendations relating to the improvement of the meat (food) inspection system in Ontario. The recommendations apply to the Ministry of Health and Long Term Care, Ontario Ministry of Agriculture and Food (OMAF), Ontario Health Units and public health inspectors.

One recommendation of the Haines Review of specific significance to public health inspectors and CIPHI in Ontario and Canada is # 67:

"I recommend that the Ministry of Health and Long-Term Care develop and implement a plan for the continuing education and training of public health inspectors across the province addressing meat safety and the regulatory standards for food premises."

I believe this recommendation #67 of the Haines review is astute and reflects a long-standing concern shared most certified public health inspectors. Specifically, the current lack of a legislated requirement for the maintenance of professional standards (continuing education) is a barrier to the credibility of Environmental Public Health professionals. In consideration of the recommendation I believe the institute should promote dialogue with our members around the concept of pursuing a legislated professionalism.

The issue of implementing a form of mandatory continuing education for public health inspectors has been a subject for debate within the Institute for years. I believe most certified Public Health Inspectors in Canada support the concept of mandatory continuing education. It is appreciated that any meaningful proposed mandatory continuing education for Public Health Inspectors should occur within the context of legislated professionalism and has a national perspective.

I have recently spoken on this issue with Andre Kapuscinski (Senior Policy Analyst) with the Ontario Ministry of Health and Long-Term Care. Andre advises he will arrange a face to face meeting with stakeholders in the near future to facilitate more thorough discussions regarding recommendation # 67. In addition, CIPHI National President (Claudia Kurzac) was contacted and advised of the Haines Report and specifically recommendation #67.

The CIPHI (Ontario Branch) recognizes the importance of mandatory continuing education for certified public health inspectors in Ontario. With the assistance and support of all key stakeholders we are optimistic a satisfactory solution to resolve recommendation # 67(Haines Report) will be found.

At the Branch AGM on October 5, 2004 we announced our new executive committee. Cathy Egan, Adam Grant, Brad Colpitts, Suzie Shaw and I each return for a second term on Council. Etrick Blackburn is welcomed as a new member on Council. Our gratitude to Rosemarie Arndt who leaves Council following a decade of service to the CIPHI (Ontario Branch) Inc.

Respectfully Submitted,

Michael Duncan,
President CIPHI Ontario Branch Inc.

Comments to the Advisory Council on Drinking Water Quality and Testing Standards

November 2, 2004

Lindsay Library, 190 Kent Street West

Lindsay, ON

Introduction

On behalf of the Canadian Institute of Public Health Inspectors (Ontario Branch) Inc. (CIPHI-ON BR) I would like to express our gratitude to the Minister of the Environment and her appointed Advisory Council for providing us the opportunity to comment on Ontario Regulation 170/03.

My name is Michael Duncan and currently hold the position of President of the Canadian Institute of Public Health Inspectors (Ontario Branch). I have served the Institute as food safety chair (1998-2002) and I am entering my third year (2003-present) as President. I am currently employed as a Public Health Inspector at a Public Health Unit in Ontario.

Background-CIPHI

The Canadian Institute of Public Health Inspectors (CIPHI) is the professional association for Public Health Inspectors in Canada. The CIPHI works to protect the health of all Canadians, advance the sanitary/environmental sciences and enhance the field of Public Health Inspection. CIPHI (ON BR) is a constituent society of the Ontario Public Health Association (OPHA) and has been active in advocating for sound public health policy in the province for many years with government departments and a wide variety of stakeholders.

The CIPHI through its Board of Certification (BOC) certifies Public Health Inspectors in Canada. The Certificate in Public Health Inspection (Canada) is recognized by the departments of health and other agencies in Canada as evidence of satisfactory training. In Canada, Certified Public Health Inspectors are employed with ministries of health, environment, and agriculture within the public sector and within corporate offices in the private sector.

One component of certification is the candidate's successful completion of an environmental health degree from one of five BOC approved Environmental Health training institutions. The Environmental Health Degree provides candidates with the theoretical training applicable to the environmental public health field. Curriculum content spans the environmental public health field.

In Ontario, approximately 800 Certified Public Health Inspectors are employed with Public Health Units through the Ontario Ministry of Health and Long-Term Care. The Health Protection and Promotion Act, R..R.. O. 1990, Regulation 566 Amended to O.Reg. 630/00 (Qualifications of Boards of Health Staff) specifies the requirements for employment as a Public Health Inspector and requires the candidate be the holder of a certificate granted by the BOC of the CIPHI.

I will organize my presentation today regarding O. Reg. 170/03 into two general categories:

1. Technical Issues
2. Implementation Issues

1. Technical Issues

In my preamble, one stated purpose of the Institute is to advocate on Environmental Public Health issues which impact the communities in which we live and work in Ontario and Canada. Prior to the enacting of O. Reg.

170/03 the CIPHI (ON BR) had a long history of advocating to the government of Ontario regarding the necessity for the implementation and enforcement of regulatory standards which apply to the operation and maintenance of drinking water systems (large and small) serving the public.

Before O. Reg. 170 was enacted in 2003, the province had no prescriptive regulatory standards to guide the operation and maintenance of most drinking water systems (large and small) serving the public. The types of water systems I am referring to include facilities like restaurants, resorts and community centers. In this era, operators of these drinking water supplies and local environmental public health professionals (Public Health Units) often relied on prudent public health practices or adverse events to guide their maintenance and operational activities.

The CIPHI (ON BR) recognized that this absence of regulatory standards for many non-municipal drinking water systems was a threat to the public's health in Ontario. In reviewing past CIPHI (ON BR) advocacy, the government of Ontario was advised on numerous occasions of the potential for public health hazard posed by the absence of regulatory standards for drinking water systems (large and small) serving the public.

For example, from 1999 (Sept. 8)-2000 (Feb. 1) the CIPHI (ON BR) Healthy Environments Division, through letter correspondence, advised the Ontario Minister of the Environment regarding shortcomings in the regulatory oversight and monitoring of drinking water systems in Ontario. Specifically the CIPHI (ON BR) revealed shortcomings within the drinking water inspection system as follows:

lack of routine reporting of water results from public drinking water systems to local Health Units
no routine government monitoring (inspection, sampling) of drinking water systems

Despite the concerns identified, successive Ministers of the Environment responded that it was the owner of the drinking water system, small or large, falling under the Ontario Water Resources Act (OWRA) to ensure the quality of water delivered to the consumer. The Ministers also advised that depending on the source of the water and the community size, inspections of some water systems were routinely completed while the others were completed only on an "as request" basis or where there are known concerns.

The CIPHI (ON BR) continued to send letter correspondence (April 4, 2000 and July 14, 2000) to the Minister of the Environment and requested follow-up on the matters (above). Both letters were not responded to. The Walkerton Tragedy occurred in May of 2000.

In light of this history of the CIPHI (ON BR) in advocating for sound public policy regarding the regulatory oversight of drinking water systems in Ontario, it should come as no surprise that the CIPHI (ON BR) is supportive of O. Reg. 170/03 in providing for uniform regulatory standards for drinking water systems (large and small) which serve the public.

The CIPHI (ON BR) is unable to support efforts of the Minister-MOE to amend maintenance or operational requirements of O. Reg. 170/03 unless it is demonstrated that the proposed amendments do not negatively impact public health. We encourage the Advisory Council to consult with the CIPHI (ON BR) regarding specific technical revisions planned to O. Reg. 170/03 that will provide practical improvements to the legislation while still protecting public health.

2. Implementation Issues

There appears currently only sufficient human resource capacity within the Ontario Ministry of the Environment to provide for the routine inspection and monitoring of municipal water supplies in Ontario. With O. Reg. 170/03 applying to other non-municipal drinking-water systems, increased human resource capacity for enforcement is necessary.

The CIPHI (ON BR) suggests the government of Ontario consider increasing the human resource capacity of the drinking water inspection system in a manner which avoids duplication of service and utilizes existing expertise within the public health system. Certified Public Health Inspectors employed at Public Health Units in Ontario have historically been at the forefront of food and water inspection in the province. Public Health Inspectors should be designated as enforcement agents for non-municipal drinking-water systems under O. Reg. 170/03. We believe that adequate resourcing (funding) of Public Health Units which builds upon their existing human resource infrastructure to facilitate enforcement of O. Reg. 170/03 is more cost effective solution than creating a separate parallel inspection agency through the MOE.

Furthermore, the use of Public Health Inspectors (Health Units) in Ontario to carry out enforcement of non-municipal systems under O. Reg. 170/03 avoids duplication of inspection service provided by provincial ministries(Environment/Health). For example, Health Units are currently mandated to inspect a wide range of public facilities in Ontario. Many of the public facilities inspected by Heath Units possess non-municipal drinking-water systems regulated under 170/03. The O. Reg. 562(Food Premises) requires that a food premises provide a supply of potable water. Food premises currently inspected by Public Health Inspectors (Health Units) under O. Reg. 562 and requiring potable water may include facilities such as restaurants, community centres and churches. The potential for two government inspectors entering a public premise seems a duplication of service and inefficient. Again we suggest a cost effective way to increase the human resource capacity of the drinking water inspection system and reduce the potential for duplication of service requires a greater utilization of Public Health Inspectors (Health Units) as enforcement agents under Ont. Reg.170/03.

In summary, The CIPHI (Ontario Branch) Inc. believes the Government of Ontario must ensure that the Province's drinking water supply remains among the safest in the world. An essential requirement for a safe drinking water supply in Ontario is a strong and effective water inspection system.

Sincerely,

Michael Duncan, B.Sc., C.P.H.I. (C)
President, Canadian Institute of Public Health Inspectors (Ontario Branch) Inc.

PAST PRESIDENT'S REPORT

November 2004

Board of Certification

The most recent exam occurred in October 2004. The results of the exam are as follows;

There were 93 Candidates of these 67 passed a 72.0% pass rate. 26 (27.9% failure rate) failed – 8 failed their entire BOC, 4 reports only, 10 orals only, 2 failed their orals and required additional training and 2 failed their orals and one report. There were also 2 candidates that withdrew their application.

At the Board of Certification meeting on November 5, 2004 the existing board said goodbye to two longstanding members who have both contributed a great deal of their experience, knowledge and time in building the BOC to what it is today. Congratulations to Bernie Chrisp, BOC Chair as he moves on to new challenges and hopefully he is looking forward to having some additional spare time to enjoy the things in life he loves most. A congratulation also goes to Al Raven! Al spent many years developing the foreign student evaluation process, and has done a great job, and he has also contributed to the overall development of the BOC process! Best wishes to both Bernie and Al and on behalf of the Ontario Branch member's. Thank you for your hard work and dedication that you have shared to improve the profession of the Canadian Institute of Public Health Inspectors.

The new chair for the board was announced. That person is Ann Thomas from British Columbia. Congratulations Ann! There are two new sitting members also, they are, Mark Durkee and Suzanne Shaw.

2005 Joint CIPHI Ontario Branch/National Conference

Information can now be obtained at the following web sites; HYPERLINK <http://www.ciphi.on.ca> www.ciphi.on.ca , HYPERLINK <http://www.ciphi.ca> www.ciphi.ca , and HYPERLINK <http://www.toronto.ca> www.toronto.ca For additional information or questions interested parties can contact the conference planning committee at HYPERLINK <mailto:ciphi2005@toronto.ca> ciphi2005@toronto.ca

Communications

I continue to receive numerous calls from various people asking about 'how to become a certified PHI', what requirements are needed and what schools offer the course. Questions were answered and people were directed to Ryerson and/or the Board of Certification for further information.

Respectfully submitted by,

Suzanne Lychowyd-Shaw
Past President CIPHI Ontario Branch

COMMUNICABLE DISEASE DIVISION

November 2004

The CD Committee met on October 25, 2004 to discuss strategic directions for the upcoming year and beyond.

In this significant time of change for public health, the group discussed areas for advocacy as well as projects to meet the needs of members and fulfill public health mandates.

The following activities were identified as short term and long term projects:

Short-Term Projects

- Annual CD Conference
- Participation in the MOHLTC's Mandatory Health Programs and Services Guideline Review

Long Term Projects

- Participate in Ryerson curriculum review for courses pertaining to communicable disease, infection control and epidemiology
- Development of infection control resources including:
 - Handwashing poster
 - Development of infection control curriculum for early childhood education courses
 - Development of infection control curriculum for personal care worker programs
 - Development of infection control curriculum for personal service setting workers

The group discussed the possibility of inviting other CIPHI members to participate in projects as they begin to be implemented. Any interested people can contact one of the committee members to volunteer. Active solicitation will be done as necessary.

Current Committee Membership:

Rosemarie Arndt (Chatham-Kent Public Health Services), Alicia Lowe (Toronto Public Health), Brenda Miller (Region of Waterloo Public Health), Francine Paquette (Oxford Board of Health), Laura Farrell (Huron County Health Unit), Lucie Imbiscuso (Wellington-Dufferin Guelph Health Unit), Tatiana Troubatcheva (Regional Municipality of Halton Health Department), and Cathy Egan (Middlesex-London Health Unit).

Respectfully submitted,

Cathy Egan

Communicable Disease Division Councillor

November 17, 2004

Dr. Sheela Basrur
Chief Medical Officer of Health
Hepburn Block, 11th Floor, 80 Grosvenor Street
Toronto, ON
M7A 1R3

Dear Dr. Basrur:

I represent the Canadian Institute of Public Health Inspector's Communicable Disease Division. We are a group of dedicated public health inspectors who work in infection control and communicable disease control in various health units across Ontario. The mandate of our group is to facilitate information pertaining to infectious diseases and their management to our members and the public, and to advocate for positive change in public health with respect to communicable disease.

Our group has participated in projects such as the review of your Ministry's Personal Services Setting Protocol, and review of the course content for Health Canada's Skill Enhancement Training Program.

We would like to offer our services to participate on the review of the Mandatory Health Programs and Services Guidelines, or provide assistance on any other projects that the Ministry of Health and Long Term Care is engaging in with respect to communicable disease management and control.

Please contact me for further information or to request our assistance.

Sincerely,

Cathy Egan, CPHI(C), MBA, CIC
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November 17, 2004

Andy Papadapolous
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Ryerson University
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Dear Andy:

I represent the Canadian Institute of Public Health Inspector's Communicable Disease Division. We are a group of dedicated public health inspectors who work in infection control and communicable disease control in various health units across Ontario. The mandate of our group is to facilitate information pertaining to infectious diseases and their management to our members and the public, and to advocate for positive change in public health with respect to communicable disease.

Our group has participated in projects such as the review of your Ministry of Health and Long Term Care's Personal Services Setting Protocol, and the review of the course content for Health Canada's Skill Enhancement Training Program.

At the last Advisory Council meeting where I represented CIPHI, the need to review curriculum for the School of Occupational and Public Health was discussed. Our committee would like to offer our services to participate on the review of course curriculum in the areas of infection control, communicable disease management and control, and epidemiology.

Please contact me for further information or to request our assistance.

Sincerely,

Cathy Egan, CPHI(C), MBA,CIC
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COMMUNICATIONS DIVISION

November 2004

Ontario Branch News

The Fall 2004 edition of the Ontario Branch News (OBN) is at the printer at the time this report was written (November 18, 2004). It will be mailed out in the next couple of weeks. The executive continues to move towards providing the OBN in an electronic format.

The biggest challenge the OBN editorial team faces is getting interesting material for each issue. We need input from the membership. Too many editions of the OBN feature articles and stories from Amanda and me. I am sure that the membership is tired of hearing from us. I am begging all Ontario Branch members to submit stories and articles to us! Pieces do not need to be fancy or technical. If you have been involved in something interesting in your daily work, share it with your colleges. If you have a particular interest, research it and help to keep the membership informed. Please send all materials to:

HYPERLINK “mailto:sarah.wilson@region.york.on.ca” sarah.wilson@region.york.on.ca

The Ontario Branch Website

The Ontario Branch website (HYPERLINK “http://www.ciphi.on.ca” www.ciphi.on.ca) traffic has been about the same volume each quarter this year. There have been no significant increases or decreases in the number of visitors to the site or the number of pages viewed month to month throughout 2004.

The main visitors to the site are people using computers at Ontario Health Units. 44% of the traffic to the site is from Canadian computers. The next largest group of visitors falls into the category of US Commercial. People are being directed to the site mainly through search engines (i.e. google, sympatico) and other organizations websites (opha, asphio).

Respectfully submitted by

Sarah Wilson
Communications Councillor Ontario Branch

FOOD SAFETY DIVISION

November 2004

Highlights of the Interagency Council on Food Safety meeting of October 20, 2004 included presentations/reviews from both CFIA and OMAF on where they are with “On Farm Food Safety”, a summary of the Haines Report from OMAF, a review of the status of various MOU’s and reviews of several baseline studies conducted by OMAF on Veal Hormones, Fermented Sausage, Un-ripened Cheese and Aquaculture Vet Drugs. The next meeting is on December 8, 2004 in Toronto.

A “stakeholders” meeting to consult on the recent amendments to the Food Premises Regulations called by the PHB of the MOHLTC was attended. The focus was to explain and review the requirements for time and temperature conditions for raw fish that were invoked in late August. Discussion focused on finfish, although the regulation just deals with fish; all fish, without distinction. Many, although not all, industry representatives expressed concern about the lack of consultation prior to the regulatory changes and questioned the new requirements from a public health point of view and were concerned about the impact on quality that the freezing would create, even though as much as ninety percent of all sushi fish is frozen well before reaching retailers as a matter of logistical imperative.

A sub-group was formed to explore concerns and suggestions further. Our committee delegates who attended this meeting held on October 16, 2004 have reported that little, if any, progress was forthcoming. Obviously, there is some confusion at the ministry level about where these regulatory features are, their interpretation and where they may be going. Our members may want to take this into account when contemplating enforcement of these particular features and seek guidance from the Public Health Branch. We shall continue with this process from the scientific standpoint that these requirements are warranted or an alternative process that produces an equivalent outcome in terms of food safety.

A committee delegate attended a recent presentation by CFIA on Food/Product Recall that was part of the Guelph Food Safety Seminar Series. The presentation reviewed the different classes of recall, how they are verified and who is responsible. The Office of Food Safety and Recall at CFIA in Ottawa makes the final decision and in partnership with Health Canada, are responsible for the classification of the recall. Further information is available at [HYPERLINK “http://www.inspection.gc.ca”](http://www.inspection.gc.ca) www.inspection.gc.ca or through the regional Recall Coordinator.

Respectfully Submitted;

Brad Colpitts, CPHI (C)
Food Safety Division Councillor

November 16, 2004.

c/o 607 Royal Fern Street
Waterloo, Ontario
N2P 2V5

Chief Medical Officer of Health and Assistant Deputy Minister
Ministry of Health and Long-Term Care Hepburn Block
11th Floor, 80 Grosvenor Street
Toronto, ON M7A 1R3

Re: Mandatory Food Handler Training

Dear Dr. Basrur;

The Canadian Institute of Public Health Inspectors, (Ontario Branch Inc.), is participating in “stakeholder” discussions with the Public Health Branch regarding proposed amendments to the Food Premises Regulations respecting mandatory food handler training. At the last stakeholder meeting on August 26, 2004, the PHB representative stated that the position of the Branch was that, amongst other things, Health Units and Public Health Inspectors would be required to proctor the exams administered by private companies delivering mandatory food safety training in order to ensure the content and process of the courses met the minimum standards.

Without covering the considerable detail about the other features generally agreed to at that point, this would have allowed health units, public educational institutions and private industry to deliver food handler training that would be mandatory when appropriate changes are made to the Food Premises Regulations.

This letter is to emphasize that this feature of proctoring by health units/phi’s is essential in order to provide some realistic oversight of private industry in the delivery of this important service. The food service industry has long been regulated in the interests of public health. This proposal is in keeping with the regulated functions of the industry. If oversight of this function is not adequately provided for by way of this regulation, this will be a regulation in name only with no effective means of ensuring that it will do what it is intended to. Surely the principal of “due diligence” demands some effective method of monitoring to ensure that the intent of the regulation is achieved.

Our concern is that private industry has consistently fought any effective mechanism that provides for regulatory oversight of this activity on their part and may succeed in its’ ongoing lobbying efforts in this respect. We are not confident that our voice on this issue will be successful in advocating for this with the PHB. We are seeking your assurance that this feature will be maintained in the final regulation.

A response at your earliest convenience will be appreciated.

Sincerely;

Brad Colpitts CPHI(C)
Ontario Branch Executive
Food Safety

c. The Honourable George Smitherman, Minister of Health and Long-Term Care
Mike Duncan, President, Canadian Institute of Public Health Inspectors (Ontario Branch Inc.)
Siobhan Kearns-Shannon, President, Association of Supervisors of Public Health Inspectors of Ontario,

November 16, 2004

c/o 607 Royal Fern Street
Waterloo, Ontario
N2P 2V5

Dr. Pete Sarsfield
Medical Officer of Health
Northwestern Health Unit
21 Wolsley Street
Kenora, Ontario
P9N 3W7

Re: Award to Northwestern Health Unit for Action on Tobacco

Dear Dr. Sarsfield;

It is my pleasure to belatedly inform you that Northwestern Health Unit was awarded a plaque by the Canadian Institute of Public Health Inspectors (Ontario Branch Inc.) at our recent annual general meeting in Haliburton, October 4, 2004.

The award is in recognition of the efforts of the board and staff, particularly yourself and the public health inspectors, in fighting to eradicate tobacco smoke from public facilities covered by the Health Promotion and Protection Act. Declaring tobacco to be a toxic substance under Section 13 and making orders for it to be prohibited showed tremendous leadership and courage on this important public health issue. There is no doubt that this action and the aftermath that is still being played out will result in further success in the fight against tobacco.

We trust that this token of our appreciation will provide some compensation for these outstanding efforts and will serve to alert the wider public to them in the ongoing battle against tobacco as you display it in a prominent location.

Sincerely;

Brad Colpitts CPHI(C)
Executive Member

c. Chair, Board of Health, Northwestern Health Unit
Mike Duncan, President, Canadian Institute of Public Health Inspectors (Ontario Branch Inc.)

November 16, 2004

c/o 607 Royal Fern Street
Waterloo, Ontario
N2P 2V5

Office of the Chief Medical Officer of Health and Assistant Deputy Minister
Ministry of Health and Long-Term Care
Hepburn Block
11th Floor
80 Grosvenor Street
Toronto, Ontario
M7A 1R3

Re: Award to the Public Health Branch for Judicial Review of Health Services Review Board Ruling

Dear Dr. Basrur;

It is with great pleasure that I am informing you that the enclosed plaque was awarded to the Public Health Branch at the Annual General Meeting of the Canadian Institute of Public Health Inspectors (Ontario Branch Inc.) on October 4, 2004.

It is in recognition of the judicial review that was ordered earlier this year of the HSRB ruling against North-western Health Unit actions in deeming tobacco smoke to be a hazardous substance under section 13 of the Health Protection and Promotion Act and the subsequent orders for remedies.

The judicial review is significant in the public health fight against tobacco and should ensure that the powers of public health inspectors and medical health officers are not eroded.

While the review and decision have not been concluded at this time, we are confident that the court will find Northwestern's exercise of power to have been consistent with the intent of the HPPA.

We are cognisant that governments do not always act in the best interests of public health. We can think of a time that this outcome would not have occurred. Our membership appreciates the work of you; your staff and the Minister for these actions on this significant public health issue and trust that the public will be reminded of it when they encounter this plaque.

Sincerely;

Brad Colpitts CPHI(C)
Ontario Branch Executive

c. The Honourable George Smitherman, Minister of Health and Long-Term Care
Mike Duncan, President, CIPHI (Ontario Branch Inc.)

HEALTHY ENVIRONMENTS DIVISION

November 2004

Why I am a CIPHI councillor in the Environmental Health Division?

Since the day I graduated from Ryerson University in 1995, it has been an interest of mine to fully understand the operation of my chosen vocation governing body. In October 2002, I volunteered to be on CIPHI Board of Certification as an Examiner and have found the experience to be very rewarding and fulfilling. I have made several contacts and have drawn on the knowledge of my fellow colleagues from other Health Units. I have always encouraged individuals to be an active member and to promote CIPHI. However, lately my fellow PHIs, and also the general public, have asked what has or will the institute do for them and why should they be members? These questions seem quite simple; however, they are very difficult to respond to when you do not have an answer. In early October 2004, I was notified that I was acclaimed to the position of councillor. In my capacity as the Healthy Environments Division Councillor, I hope to answer, even if only in part, the above questions. In addition, this division is a multi-faceted area covering issues related to Drinking Water Safety and Testing, Waste Water and Effluent Disposal, Air Quality, Migrant Farm Workers Accommodation Standard, and Environmental Tobacco Smoke.

Currently, “safe drinking water” is a hot topic and probably will be for generations to come. The Minister of the Environment has appointed an Advisory Council to collect comments and provide feedback on O. Reg. 170/03: Drinking Water and Testing Standards. I was unable to attend the Advisory Council’s public meeting held in Thunder Bay, Ontario on November 1, 2004.

On November 2, 2004, Mike Duncan, President of CIPHI (Ontario Branch), made a presentation to the Advisory Council in Lindsay, Ontario. His presentation strongly denounced the efforts of the Minister-MOE to “amend maintenance or operational requirements of O. Reg. 170/03 unless it is demonstrated that the proposed amendments do not negatively impact public health”. His presentation also “encourages the Advisory Council to consult with CIPHI (ON BR) regarding specific technical revisions planned to O. Reg. 170/03 that will provide practical improvements to the legislation while still protecting public health”.

Fran Gelder, the outgoing councillor for Healthy Environments, has been able to attend the MOE, Health Unit Working Group (HUWG) Meeting on October 20, and Nov. 19, 2004 to contribute to discussions relating to technical amendments covering sampling, testing and treatment. Also discussed were potential amendments to requirements and alternatives to for engineering of these systems. A further meeting is scheduled for December 13, 2004 to discuss potential roles for Health Units and Public Health Inspectors in implementation. Some perspective has been shared on the potential for and enhanced role for public health inspectors in the assessment, compliance monitoring and enforcement related to small drinking water systems, in that PHIs possess the educational background, the inspection, education, promotion and enforcement skills needed for this work that when combined with their presence within the community are likely candidates for a key role. For the sake of continuity, Fran has offered to attend the third and final meeting of the HUWG in December.

Letters and correspondence from OPHA and ASPHIO are very encouraging regarding drinking water.

Mike and Fran must be commended on their efforts in advocating on behalf of CIPHI.

A request for ongoing representation to the Core Advisory Group (CAG) for the Canadian Council of Ministers of the Environment has been submitted to CIPHI national as this is a federal initiative into enhanced standards of Municipal Waste Water Management. Some Ontario Branch support could be provided where travel barriers may prohibit participation.

Respectfully Submitted By:

Etrick Blackburn
Healthy Environments Division Councillor

HEALTH PROMOTION AND PROFESSIONAL DEVELOPMENT DIVISION

November 2004

Environmental Health Week 2005

Environmental Public Health Week was created with the intention of being an annual event and the dates corresponding with the incorporation date of the Institute. The 2005 edition of CIPHI Environmental Public Health Week is set for January 3-9, 2005.

Bilingual posters have been mailed to all Provincial Health Unit Directors and we are requesting your assistance in launching Environmental Public Health Week. The posters are intended for Health Unit Staff to post at prominent locations within your Public Health Unit buildings and the numerous other public or private locations (i.e. theatres, malls, hospitals, municipal building, etc.) within your communities.

The NEW CIPHI Promotional portfolio was also mailed to the Directors of all Health Units. The portfolios and inserts provide an overview of the CIPHI and certification process. The portfolios may be used as a component of your public health inspector recruitment campaigns at schools/colleges, recruitment/job fairs, trade shows and media events. We are currently looking into ordering extra copies, these will be made available to all health units on a cost recovery basis.

Don't forget the CIPHI display unit is available for promotional events you can book it by calling 705 522-9200 ext.240 or by emailing me at [HYPERLINK "mailto:moultonb@sdhu.com"](mailto:moultonb@sdhu.com) moultonb@sdhu.com

Respectfully submitted,

Robert Moulton
Health Promotion and Professional Development Division Councillor

MEMBERSHIP DIVISION

November 2004

PHI Database

The database is complete and the slow task of entering data has begun. All historical membership data is being entered. We can now effectively track members, manage an email list, create contact directories, identify accurate years of membership and flag long standing members (i.e. 25 and 50 year members).

PHI Salary Survey

I would like to invite members to submit changes to me via email at [HYPERLINK "mailto:salarysurvey@ciphi.ca"](mailto:salarysurvey@ciphi.ca)salarysurvey@ciphi.ca. Please provide the following information:

- Starting wage at the start of your current contract
- Top wage at the end of your current contract
- Date range of the current contract
- Number of FTE PHI's for your health region
- Number of PHIs retiring in the next 5 years
- Number of PHIs retiring in the next 10 years

PHI Telephone Directory

A new directory will be published in 2005. I plan on contacting all health units early in the New Year to verify all PHIs working for their health region. This will be the first attempt at creating the directory using the database.

Respectfully submitted by,

**Adam Grant
Membership Division Councillor**

Scenic Setting Proves a Success For CIPHI Ontario Conference

Locusts didn't rain down from the sky, but modern-day plagues were the hot topics for Public Health Inspectors gathered recently in beautiful Haliburton County.

Approximately 200 delegates attended the Canadian Institute of Public Health Inspectors' (Ontario Branch) 65th Annual Educational Conference to hear a stellar lineup of experts discuss Plagues of the 21st Century. The successful event – which ran October 4-6, 2004 in Haliburton, Ontario – was hosted by the Haliburton, Kawartha, Pine Ridge District Health Unit.

“I think the conference was a good mix of learning and socializing for everyone,” says Anne Alexander, Director of Environmental Health with the HKPR District Health Unit.

The planning committee for the conference settled on the theme of the scientific explanation of the Ten Plagues of Egypt.

“Many of these ‘plagues’ – while no longer called such – have modern day equivalents that still impact public health,” notes Alexander. “Based on our feedback, I think it was very well received.”

Conference delegates also took part in several social events, including a dance, the usual golf tournament, karaoke, a bus tour to view the spectacular fall colours in Haliburton County, and a late-night bonfire. Alexander notes the bonfire was a hit, “especially with the unofficial entertainment provided by one of our northern colleagues.”

On behalf of CIPHI, conference organizers donated a total of \$2,000 to food banks in Haliburton County. As well, a substantial sum of money from the conference proceeds was returned to the Ontario Branch of CIPHI.

As an ongoing professional development tool and further fundraiser for CIPHI Ontario, organizers are producing a DVD that feature highlights of the 65th Annual Educational Conference, including footage of the social events. The DVD will be available for sale shortly.

Alexander says organizing the CIPHI conference in Haliburton was “an exhausting, but very exciting experience” for everyone involved.

“It's a credit to the planning committee to organize a conference that will be remembered for a very long time,” she says. “I call that a total team effort.”

Public Health Inspectors with the HKPR District Health Unit present cheques to Haliburton County food bank representatives on behalf of CIPHI. The cheques of \$1,000 each are part of the proceeds raised from the recent CIPHI Ontario educational conference held this fall in Haliburton. From left, Mary Hicks and Barb Walford-Jones of the Minden Food Bank accept the cheque from HKPR Public Health Inspectors Tom Reddering, Dale McCrea, Brad Colpitts, Shaun Crawley and Jessica Comeau.



Canadian Institute Public Health Inspectors

65th Annual Conference Report

Introduction

In the fall of 2003 the Haliburton, Kawartha, Pine Ridge District Health Unit agreed to host the 65th Annual CIPHI Conference which would be held in the fall of 2004. A planning committee was struck consisting of representatives from all three Counties. Each member of the committee listed possible venues within their own county for this function. Although we had several Hotels and Resorts within the area, the most suitable venue was felt to be the Delta Pinestone Resort in Haliburton, which was the only one which could accommodate the numbers that we required.

In mid November a meeting was arranged with the Manger of the Delta Pinestone Resort and a proposed contract was discussed which included the use of the rooms, equipment, delegate room and meal costs, and a golf tournament, with the final contract being signed in February 2004.

Agenda

A meeting of all the members of the planning committee was held in the Haliburton office to discuss the theme of the conference. After considering what was new within environmental health program issues it soon became evident that while programs were changing, the same old basic issues existed. On reflecting on previous conferences within the last few years we decided that most of these issues had been dealt with many times, so we definitely had to approach these issues with a slightly different perspective and think outside the box so to speak. This train of thought led us to look back in time and think about the major public health issues throughout history, events like Typhoid Mary and the Broad Street pump, the Black plague etc., were all environmental health issues even back as far as the Ten Plagues of Egypt. Some members of the committee had seen the documentary on the scientific explanation of the Ten Plagues of Egypt done by Dr. John S. Marr, and Curtis Malloy, medical Epidemiologists from the New York City Department of Health which had been shown on one of the PBS stations. It was decided this would be our starting point as many of these Plagues had modern day equivalents, although they were no longer referred to as plagues.

The scientific explanation given for each plague by Malloy and Curtis was discussed, and a list of the modern day equivalents was developed for each of them. The committee then set about deciding which one of these topics had not already been covered in recent years with the view to establishing an agenda. The criteria for inclusion in the agenda was that the topic must not only be relevant to the work, but also must provide a new perspective on the topic. Once the topics had been decided, prospective speakers were identified and approached in regards to availability.

Because of the distance between home offices of the planning committee members, a great deal of productive meeting time was being lost in face to face meetings, as it took up to two-and a half hours each way in travel time for some members to attend meetings. Because of this factor most meetings were held by teleconference and updates were provided by e-mail in order to maximize our use of time.

Registration Packages

The registration packages were designed and produced in-house by the communications department to the point of being print ready, and then sent out for printing. This enabled us to keep printing costs to a minimum. In order to cut postage costs, an electronic version of the package was then sent to the CIPHI Ont. Branch, and National websites for posting.

Based on the CIPHI Inspector directory, lists serves were established for each Health Unit and an electronic notice was sent to each inspector with a link to the Haliburton, Kawartha, Pine Ridge Health Unit and CIPHI websites so that they could obtain the electronic version of the registration package. Members of CIPHI who were not listed as being associated with a Health Unit on the CIPHI membership list were sent a hard copy of the Registration package by mail. The Medical Officer of Health, Directors of Inspection/Environment as well as Communicable Disease for each Health Unit were also sent hard copies.

Registration

Registration was slow until approximately three weeks prior to the event, with the bulk of delegates registering within the ten days. This added a challenge in ordering sufficient materials for delegate packages and providing the Resort with numbers for meals etc. Several people did not pre-register, but turned up at the conference on the first day, or on the day they wished to attend. One of the biggest frustrations encountered, I am sure by every conference committee, is keeping track of registration numbers.

Several Health Units submitted only the names of the delegates attending, then faxed revision's 2-3 times daily. One Health Unit made revisions to their list of delegates approximately nine times. The revisions ranged from substitution of staff, to the number of days they would be attending, then changing some back again. In many cases the e-mail or faxed list of names was the only registration received. In hindsight, a definite cut off date for registration may have been helpful. However, in reality this probably would not have made much difference.

Attendance

The number of people attending the conference over the three-day period was approximately 194 delegates, and 227 people when you include the exhibitors and speakers

Monday	Tuesday	Wednesday
181	188	141

Registration Types

Full Registration	2 Day Registration	1 Day Registration
139	15	40

Evaluations

Facility

Poor	Fair	Good	Very Good	Excellent	No Response
0	0	6	39	34	4

One individual rated the facility as better than excellent

Meals

Poor	Fair	Good	Very Good	Excellent	No Response
	3	6	38	29	3

On the most part evaluations were very positive with a fairly even distribution of which session was liked best. No particular session had the dubious honour of being identified as the session least liked.

Comments offered on the evaluation forms fell into three main categories

General critiques -

- criticism about coordination of events
- how taping of speakers was being done
- the lack of communication around donations to the food bank, although it was noted twice in the registration package.
- one individual commented that they did not enjoy the long walk from their room to the main building where events were being held.
- how sessions were more of a summary, and not plague like enough
- about how presentations were made to speakers after sessions
- Evaluation form itself
- One individual did not appreciate planning committee chairperson's comments in regards to the suggestion of a bi-annual conference.
- more fruit at meals and breaks
- one person stated they would have liked hot water for tea at breaks (I presume they meant boiling water?)
- One individual gave a very a detailed critique of what could and should have been done differently, however, commented that overall the conference was quite enjoyable.
- One individual would have liked a CD of all presentations to be given at the start of conference.!!!

Positive Comments - most participants were very positive in their evaluation of :

- speakers
- facility
- meals
- liked name tags being issued with hotel registration
- liked delivery of delegate packages to rooms
- liked baskets and gifts

Additional Comments - very few

- More directional signs for day registrants as to where things were located
- one person indicated that they would have liked to be able to give more specific feedback

- another stated that they would have liked better direction from MOH& LTC re; pandemic planning
- One person also wanted to give exhibitors a forum to discuss their products and services

DVD Production

Sessions which were held in the ballroom during the course of the conference were video taped in order to produce a DVD of the highlights of the conference, which will also include some footage of the social events. This DVD will be made available for sale within the next few weeks, with the proceeds going to CIPHI Ont. Branch.

Donations

A donation of a \$1,000.00 each has been to both the Haliburton and Minden Food Banks on behalf of the CIPHI Ont. Branch. (photograph sent to Sarah Wilson for branch newsletter)

Budget

A conscious effort was made to minimize expenses where possible, without compromising the quality of the event. Anything that could be made or assembled by the committee was done to keep costs down (e.g., table centers and gift baskets). Purchases of any materials required were made at wholesale outlets or dollar stores.

Revenue included

Sponsors
 Exhibitors
 Registration
 (Executive Registration fees
 \$3,100.00 paid from cash advance)
 Golf
 Auction /Draws

Sub Total \$82,340.49
 (includes \$5,000.00 Float)
After deductions
Balance left \$41,000.00

Expenses included

Speakers
 Speakers Travel
 Speaker Gifts
 Postage
 Printing
 Afternoon Nutrition Breaks
 Accommodation for speakers
 Bus Trip
 Bonfire
 Entertainment
 Donations to Food Bank
 Golf Tournament
Sub Total \$34,435.80
 + **Balance of cash advance** \$1,800.00 to return to CIPHI
 + DVD Production start up \$2,100.00
 + \$ 2,034.75 reserve for future inservice
 + \$969.95 Planning Committee dinner and gift

Grand Total \$41,340.50

Monies submitted to CIPHI:

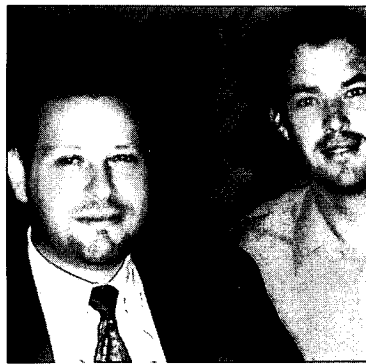
From Conference \$41,000.00
Remainder of cash advance \$ 1,800.00
Grand Total of 42,800.00

Respectfully Submitted by

Anne Alexander **Conference Chair**

GO WITH ANNUAL CONFERENCE





plays inside a courtroom as a LEO and the two are not mutually exclusive. In fact, the basics of being a LEO are applicable to and support the PHI function.

For example, a PHI does an inspection of a restaurant under the authority of the HPPA using the Food Premises Reg to guide them in what to look for. They see a number of serious infractions and, as they believe that the situation is bad enough, they ultimately seize food for destruction and issue an Order to close down the restaurant. This Order can be appealed, though, and the PHI responsible has to be able to substantiate or defend their action. How do they do this? By note-taking! The Inspection Report, in this situation, is equivalent to a police officer's notebook. It has to contain enough information about the seriousness of the infractions to show that the Order was warranted (no pun intended.) If it doesn't, the Order may be quashed and your employer may be open to civil liability - which would not be good for your career!

Now those same notes can also form the basis for a conviction at trial but, just like the Order, if the information isn't there to "back up" the charges, then they may be dismissed. The responsibility for getting enough information is solely on the shoulders of the PHI and it is this basic element of a LEO that plays across both roles of the PHI - the ability to take notes that are detailed enough to "back you up" after the fact because once you've finished your inspection and left the restaurant, there isn't any going back.

Well, in the LEO role, at least, going back may present a problem. If you were to realize after a follow-up inspection that you were going to charge that restaurant and that there was something in there that you should have looked at more closely and perhaps seized for evidence, you could still go back and seize/destroy that food item in the role of a PHI in order to safeguard the public BUT you could not use anything that you saw, seized or destroyed on that return visit as evidence in your LEO role unless you had a warrant. This is due to the fact that you knew that charges were going to be laid and your powers of inspection ceased to operate. That puts you in the same place as a police officer and you would need a warrant to go back and gather more evidence.

This is often a tricky point so it bears being stressed. The PHI can conduct an unannounced inspection, see infractions and then advise the restaurant owner that they'll be back after a specified period of time to check up on the progress made. That follow-up inspection does NOT require a warrant. But, after the follow-up has been completed, you've decided to lay charges and you've left the restaurant, you DO need a warrant if you decide to go back in to gather more evidence to support those charges.

However, if you've done your follow-up, decided to lay charges and left the premise but you want to go back to seize a food item as it is a potential health hazard, you can do that without a warrant so long as you don't refer to that during the trial to support the charges.

This is the very nature of that 'dual role' - safeguarding the public from a health hazard vs. being a LEO.

Let's get back to that note-taking issue because, from a prosecutor's point of view, it is very important. Having said that, it isn't the end all and be all for a LEO or a PHI. In fact, it may be a waste of time if it's not done properly. What it needs to make it an effective tool is a little something extra and that extra bit can be summed up simply - know your law! If you don't truly understand the law that you are enforcing then all the note-taking in the world isn't really going to help.

What I mean by this is that a PHI has to understand the basic elements of a charge under the Act or Reg that they are enforcing so that they can record enough information to sufficiently describe the problem defined by the law. In that way, when it comes to an appeal hearing of an Order or to testifying in court, you can "support" your actions. For example, if the Food Premises Reg specifies that food must be kept at a specific temperature, then it's important for the PHI to record any information that shows that this wasn't being done during their inspection and how this was determined. To simply say "It wasn't hot enough" or "It wasn't cold enough" wouldn't cut it during the appeal of an Order or in the courtroom. You'd have to describe what you did in order to come to that conclusion - observed the temperature reading on the equipment in the premise and checked it against your thermometer, for example. Please, don't misunderstand this example or dismiss it as being trite. It may sound simple but the principle does have broader application to more serious matters.

Remember the dual role that I spoke of? Hopefully you can see what I mean by that phrase by now. The seizure or destruction of food because it poses an immediate health risk or the issuance of an Order to close a food premise are examples of "protecting the public's health" while the laying of charges and testifying in court are examples of the LEO side of things. The two roles can be independent of each other as doing one does not necessarily imply doing the other but they can also be intimately intertwined.

There is one other thing, though, that I want to stress. The LEO role, laying charges and testifying in

court, may be ranked second in importance to the safeguarding of the public's health but it is a secondary role only by a hairs breadth. In some instances, the laying of a charge and the penalties imposed by the courts may be the only things that brings the point home for some people - "What you're doing won't be tolerated anymore." In some instances, it is what can lead to the operator of a food premise, for example, to finally change their ways or get out of the business altogether. On this point, I am speaking from personal experience and although I can say with all honesty that I am not proud of this, I can say with equal honesty that I am not ashamed of it either. It was my job to ensure that the PHI's role of safeguarding the public was brought to its ultimate conclusion for those who wouldn't listen to the PHI's recommendations and concerns.

This, I hope, will bring home the point that the PHI must be like the clenched fist inside of the velvet glove – able to deal with people respectfully and tactfully but willing and able to resort to the courts to help enforce the law for those cases that require it.

Mark A.J. McDonnell
Prosecutor, The Regional Municipality of York

MESSAGE BOARD

Congratulations to those who celebrated 25 years as a member of the Canadian Institute of Public Health Inspectors during 2004:

- | | | |
|----------------------|--------------------------|--------------------------|
| 1. Jim Tak-Ming Chan | 2. Ronald James Hartnett | 3. Andrew Davidson White |
| 4. Anthony C. Wong | 5. Timothy David Worton | 6. Jerry Joseph Zalewski |
| 7. Judy de Grosbois | 8. Robin Gailbraith | |

Congratulations to those Health Units who achieved 100% CIPHI membership among their inspection staff:

Haldimand-Norfolk Health Unit • Regional Niagara Public Health Department • North Bay & District Health Unit • County of Oxford Department of Public Health and Emergency Services • Bruce-Grey Owen Sound Health Unit • Eastern Ontario Health Unit • Kingston, Frontenac and Lennox & Addington Health Unit • Muskoka Parry Sound Health Unit • Thunder Bay District Health Unit

CELEBRATING YOUR 25TH YEAR AS A CIPHI MEMBER??

Please contact Adam Grant (Membership Services) if you are celebrating your 25th year as a CIPHI member.

REMINDER TO ALL THOSE WHO PAY FOR THEIR MEMBERSHIP BY PAYROLL DEDUCTION!!

Although payroll deduction means that you don't need to send a cheque to the National office, you still need to complete the 2005 Membership/Renewal Application form. If you receive a letter reminding you about renewing your membership, it is an indication that your name is not appearing on the membership list. Please contact Peter Heywood (Secretary-Treasurer) or Adam Grant (Membership Services) if you have any questions.

MOVING??

Please contact the National office at [HYPERLINK http://www.ciphi.ca](http://www.ciphi.ca) www.ciphi.ca with your new contact information to ensure you continue to receive the Ontario Branch News and the Environmental Health Review.

RESOURCES ORDER FORM

Agency:	Name:	Telephone:
Address:	City:	Postal Code:
Date:	Courier/Account Number:	

Resource	Price	Quantity	Cost
Communicable Disease			
Communicable Disease Fact Sheets are available on our website at www.ciphi.on.ca	FREE	Unlimited	\$0.00
Rabies Poster 11 X 17	\$0.75		
Infection Control			
Handwash sign (Generic)	\$0.75		
Tattooing and Body Piercing Inspection Guide	\$25.00		
Food Safety			
Safe Food Handling Brochure	\$0.75		
Water Quality			
Drinking Water Safety (pad of 100)	\$9.00		
Water Quality (pad of 100/2 sides)	\$14.00		
Wells (pad of 100/2 sides)	\$14.00		
Public Health Inspector Promotional Materials			
Public Health Inspector Brochure	\$1.15		
2003 Public Health Inspector Directory	\$2.00		
Public Health Inspector Display	FREE	Call to reserve	
		TOTAL:	\$

Please send orders to: Region of Waterloo Public Health
 c/o Peter Heywood 99 Regina Street South, 3rd Floor Waterloo, Ontario, N2J 4V3
 pheymood@region.waterloo.on.ca Phone: (519) 883-2008 Extension 5186 Fax: (519) 883-2226



Membership/Renewal Application Form 2005

I hereby make application for Membership (see list below) in the Canadian Institute of Public Health Inspectors. This application implies that membership is to continue until resignation is tendered, or until membership is discontinued under the conditions contained in the By-laws of the Institute. **(Complete sections with a " * " only, unless information has changed.)**

* Name: _____ * Date of Birth: _____
Surname First Middle Day Month Year

Home Address: _____
Street City Province Postal Code

Phone #: _____ / _____ E-mail address: _____
Area Code

Work Phone #: _____ / _____ Fax #: _____ / _____ E-mail address: _____
Area Code Area Code

Present Employer: _____
Agency Street Address

Employer Address: _____
City/Town Province Postal Code

C.P.H.I.(C) Certificate #: _____ Year Issued: _____ How many years have you been a member of CIPHI? _____ *

Code of Ethics - As a Member of the Canadian Institute of Public Health Inspectors, I acknowledge:

That I have an obligation to the sciences and arts for the advancement of public health. I will uphold the standards of my profession, continually search for truths, and disseminate my findings; and I will strive to keep myself fully informed of the developments in the field of Public Health.

That I have an obligation to the public whose trust I hold and I will endeavour, to the best of my ability, to guard their interests honestly and wisely. I will be loyal to the government division or industry by which I am retained.

That the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

That being loyal to my profession, I will uphold the constitution and By-laws of the Canadian Institute of Public Health Inspectors and will, at all times, conduct myself in a manner worthy of my profession.

My signature hereon constitutes a realization of my personal responsibility to actively discharge these obligations.

* Signature: _____ * Date: _____

* Please check the type of membership you require:
 Regular Student \$30.00 Retired \$30.00 Fraternal \$90.00 International \$75.00

* Please circle branch you wish to belong to below: (Note: Province in which you reside unless you live in Northwest Territories, Nunavut, Yukon or outside Canada)

*** Note that GST is no longer being charged.**

British Columbia	Alberta	Saskatchewan	Manitoba	Ontario	Quebec	New Brunswick	Nova Scotia/PEI	Nfld/ Labrador
\$145.00	\$125.00	\$115.00	\$125.00	\$125.00	\$75.00	\$100.00	\$100.00	\$100.00

(Includes Registration)

- * Payment is made by:
- Cheque
 - Money Order
 - Employer (cheque attached)
 - Payroll Deduction
 - Spousal (2 PHIs/home)

- send forms together & deduct \$30 for one person, only one E.H.R. subscription will be received.

Credit Card: Visa or MasterCard
 Number on Card: _____
 Expiry Date: ____ / ____
 Name on Card: _____
 Signature: _____

Please make cheques payable to C.I.P.H.I. and forward your application by postal service to:
C.I.P.H.I., PO Box 75264 - 15180 North Bluff RD, White Rock BC V4B 5L4 Canada
 Fax: 604-543-0936 or Phone: 604-543-0935 (Toll free: 1-888-245-8180)



ONTARIO BRANCH NEWS

In the next issue of the Ontario
Branch News....

- *Electronic OBN*

If there is anything that you
*would like to see in the OBN let us know. Contact the
editorial team at: sarah.wilson@region.york.on.ca*

Please Visit

the new CIPHI Ontario Branch website.
Find out about the latest branch news and
events. Take a peek at the job postings.

Take advantage of the resources. Post
information that you would like other pub-
lic health inspectors across Ontario to see.

www.ciphi.on.ca

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Spring 2005!



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