

Wellington-Dufferin-Guelph Public Health
MINUTES OF BOARD OF HEALTH
Wednesday May 7, 2025

The Board of Health of Wellington-Dufferin-Guelph Public Health Unit met at 2:00 p.m. at the GUELPH office.

Members in attendance were: George Bridge (Chair), Erin Caton, Ralph Manktelow, Guy Gardhouse, David Anderson, Duncan Bull, Campbell Cork, and Chris White.

Member(s) with regrets: Sandra Starr, Rodrigo Goller, and Steve Cavell.

Ex-officio member(s) in attendance: Dr. Mercer, Medical Officer of Health & CEO.

Staff members in attendance were: Chris Beveridge, Dr. Matthew Tenenbaum, Rita Isley, David Kingma, Kyle Wilson, April Pollington, Emerson Rajaram, Patryk Wardach, Karen Mulvey, Brian Herman, Camille Loucks, Dana Galehdari, Gabriel Agunsoye, Conor Barrett, Katrina Arellano, Shelby Leenders, Justin Angevaare, Lyndsey Dossett, Danny Williamson, Mike Whyte, Chuck Ferguson, Anna Vanderlaan, Blair Hodgson, Phil Wong, Shelley Nuhn, and Laura Kelly (Recording Secretary).

Guests in attendance were: Joanne Shuttleworth (MEDIA), Adam Donaldson (MEDIA), Taylor Pace (MEDIA), Karen Chattillon (PUBLIC).

1.0 Call to Order

1.1 Land Acknowledgement

Chair G. Bridge called the meeting to order at 2:00 p.m., and Dr. Mercer read the WDGPB Land Acknowledgement in full.

2.0 Disclosure(s) of Pecuniary Interest

There are no disclosures of pecuniary interest declared at this time.

3.0 Approval of Minutes

MOTION: “To approve the Minutes of April 2, 2025 as presented.”

Moved: D. Anderson
Seconded: L. Busuttil

CARRIED

4.0 MOH/CEO Verbal Report

MOH/CEO Verbal Report:

Dr. Mercer provided an update as follows:

- As of May 7, there have been 1,140 reported measles cases in Ontario since the outbreak began, including 101 hospitalizations and 31 cases among pregnant individuals. 75% of the cases are children, with the majority being young children, most of whom are unvaccinated or partially vaccinated. While the Wellington-Dufferin-Guelph (WDG) region is not among the highest in the province for case numbers, the situation is still evolving.
- Vaccination efforts remain proactive, with reminder letters sent to parents of 4, 5, and 6-year-olds whose records indicate that their children have received 2 doses of measles vaccine.
- In Junior Kindergarten, at age 4, 65.5% have received two doses, with an increase to 81% in Grade 1, at age 6. Variations in these numbers may be attributed to factors such as underreporting.
- To effectively curb the spread, a vaccination rate of at least 95% is needed. Currently, Grade 12 students in WDG have reached a 95% vaccination rate. However, 6.5% of the WDG school age population have an exemption on file, primarily due to personal beliefs.
- Measles poses significant risks, particularly when contracted at a young age, with numerous serious side effects. It is important to recognize measles symptoms. Individuals with rashes should consult their doctor for an assessment.
- The measles vaccine is now available for infants aged 6–12 months. Parents are encouraged to consult their primary care providers about receiving an early measles dose.
- For those with children aged 6 months or older, vaccination is recommended. For those over 12 months with only one dose, a second dose is encouraged after at least 4 weeks.
- An important reminder was provided that individuals born after 1970 are eligible for a second dose of the vaccine if they have not received one already.
- Individuals concerned about exposure to measles should confirm their vaccination status. Those born before 1970 are likely to have had measles, while others should check their vaccination records or consult a healthcare provider about serology and the possibility of receiving a dose.
- A Board member requested clarification on the accuracy of case numbers. The reported numbers are considered underestimates as many families do not seek medical attention or do not admit to other families' members being ill. Due to these factors, it is difficult to ascertain an exact number of cases.

5.0 Presentation(s)

Clearing the Air: Protecting Youth From the Harms of Tobacco and Vaping

P. Wong presented in conjunction with Board of Health report BH.01.MAY0725.R11 - (see 8.0 BOH Report(s) for summary).

M. Whyte and J. Angevaere presented in conjunction with Board of Health report BH.01.MAY0725.R12 - (see 8.0 BOH Report(s) for summary).

6.0 Business Arising

- None.

7.0 Consent Agenda

- **BH.01.MAY0725.C07 – Health Protection 2025 First Quarter Performance Indicator Summary**

MOTION: “To receive the Consent Agenda item(s) which have been given due consideration, for information.”

Moved:

C. White

Seconded:

L. Busuttil

CARRIED

8.0 BOH Report(s)

BH.01.MAY0725.R11 – Clearing the Air: Protecting Youth From the Harms of Tobacco and Vaping

Dr. Mercer introduced and P. Wong presented on screen and reviewed the contents of BOH Report BH.01.MAY0725.R11– as follows:

- WDG Public Health is making measurable progress in reducing youth access to tobacco and vape products through data-driven enforcement, education, and collaboration.
- The decline in illegal product seizures and increased enforcement activity through youth test shopping demonstrate the effectiveness of these efforts.
- WDG Public Health adopts an equity-informed approach, recognizing that nicotine use is influenced by broader social and structural factors beyond individual choice.
- This ensures all youth, regardless of background, have access to the information, support, and opportunities needed for healthier choices.
- Initiatives such as *Clear Choices* provide credible education for students and equip schools and families with tools for timely intervention.
- In response to the rapidly changing nicotine landscape, WDG Public Health is adopting innovative strategies and reimagining workflows to maximize impact with limited resources.
- These adaptive approaches are essential for sustaining momentum and ensuring long-term success.

MOTION: “That the Board of Health receive BOH Report BH.01.MAY0725.R11 – Clearing the Air: Protecting Youth From the Harms of Tobacco and Vaping as presented for information.”

Moved:

D. Bull

Seconded:

D. Anderson

CARRIED

BH.01.MAY0725.R12 – Innovative Public Health with AI and Automation

Dr. Mercer introduced and M. Whyte and J. Angevaere presented on screen and reviewed the contents of BOH Report BH.01.MAY0124.R17 – as follows:

- WDGPH's investment in AI and automation reflects a strategic approach to modernizing public health services.
- While many public health units are still building the infrastructure for innovation, WDGPH has already established the necessary technical and organizational foundations.
- As the public health system moves toward digital transformation, WDGPH is well-positioned to adapt to change and contribute meaningfully to strengthening public health across Ontario.
- Efforts are underway to increase the use of AI within the organization, with a focus on reinforcing best practices and supporting the implementation of new AI technologies.
- Responsible use of AI is a priority, ensuring that it enhances operational efficiency while adhering to ethical standards.
- The potential of AI to enhance language capabilities and accessibility for a broader audience was discussed, with a future goal of integrating live interpreter services during phone calls. Current AI efforts, such as automating ISPA letter production, have already demonstrated time and cost savings.
- In response to a question regarding monetization of AI services it was identified that the first goal is to encourage broader AI adoption despite potential resistance given the varied skills and infrastructure with regards to technological advancements such as AI among other public health units. If longer term support is required, then that would have to be a different conversation on how to financially support AI technologies within their agency.

**MOTION: “That the Board of Health receive BOH Report
BH.01.MAY0725.R12 – Innovative Public Health with AI and
Automation as presented, for information.”**

Moved: C. White
Seconded: R. Manktelow

CARRIED

BH.01.MAY0725.R13 – Online Prenatal and New Parent Program

Dr. Mercer introduced and A. Vanderlaan presented on screen and reviewed the contents of BOH Report BH.01.MAY0725.R13 – as follows:

- WDG Public Health's Online Pregnancy and New Parent Program offers free, evidence-based information to support healthy pregnancies and positive outcomes for both parent and baby.
- Despite the benefits of prenatal education, provincial participation rates remain low. In response, WDG Public Health launched a communications campaign in 2024 to increase awareness and program participation.
- The use of geotargeted advertisements and engaging content resulted in a 91% increase in program registrations from 2022 to 2024. The campaign effectively reached priority groups, including individuals under 25 and those in their first trimester.

- WDG Public Health will continue to promote the program, leveraging the success of the 2024 campaign, with the goal of increasing prenatal education participation to support positive maternal and newborn health outcomes.

MOTION: “That the Board of Health receive BOH Report BH.01.MAY0725.R13 – Online Prenatal and New Parent Program as presented, for information.”

Moved: D. Bull

Seconded: L. Busuttill

CARRIED

BH.01.MAY0725.R14 – Children’s Health: Reducing Risk Factors and Building Resiliency

Dr. Mercer introduced and L. Dossett presented on screen and reviewed the contents of BOH Report BH.01.MAY0725.R14 – as follows:

- Understanding risk and protective factors in youth is essential for promoting their well-being and future success.
- Risk factors, such as substance use, low self-esteem, and negative peer influences, increase the likelihood of harmful behaviors and mental health challenges.
- Protective factors, including family support, a positive school environment, and engagement in extracurricular activities, help build resilience and encourage positive development.
- Communities, schools, and families play a key role in supporting youth by fostering supportive relationships, creating safe environments, and providing opportunities for growth.
- Investing in protective factors reduces risks, empowers young people to reach their full potential, and encourages positive contributions to society.
- A question was raised regarding the need to revisit the older static report which provided a detailed account of the social determinants of health within our community. K. Wilson responded, acknowledging that if the report is helpful to produce it again for the community. He additionally mentioned that many interactive reports remain on our website in the interim.

MOTION: “That the Board of Health receive BOH Report BH.01.MAY0725.R14 – Children’s Health: Reducing Risk Factors and Building Resiliency as presented, for information.”

Moved: E. Caton

Seconded: D. Anderson

CARRIED

BH.01.MAY0725.R15 – Corporate Communications Annual Report 2024

Dr. Mercer introduced and C. Ferguson presented on screen and reviewed the contents of BOH Report BH.01.MAY0124.R18 – as follows:

- In 2024, Communications focused on strengthening the sharing of public health information with the community by enhancing media, online platforms, and the website as engaging forums for information and interaction.

- Communications provided timely updates, collaborated closely with internal teams, and responded to evolving public health needs.
- As the Agency moves forward with the 2024–2028 Strategic Plan, Communications will continue to support the mission of “Health and well-being for all” by offering clear and inclusive messaging, while adapting strategies to connect with and engage even more individuals in the community.

MOTION: “That the Board of Health receive BOH Report BH.01.MAY0725.R15 – Corporate Communications Annual Report 2024 as presented, for information.”

Moved: G. Gardhouse
Seconded: C. Cork

CARRIED

9.0 Committee (Verbal) Report(s)

Finance + Audit Committee Report:

Chris White, Secretary Treasurer, assumed the Chair and read the following motions:

MOTION: “That the Finance + Audit Committee makes recommendation to the Board of Health to receive and approve Finance + Audit Committee Report BH.04.MAY0725.R04 – Draft Audited Financial Statements, as presented, for information.”

Moved: L. Busuttil
Seconded: D. Anderson

CARRIED

MOTION: “That the Finance + Audit Committee makes recommendation to the Board of Health to receive Finance + Audit Committee Report BH.04.MAY0725.R05 – Compliance Report: Stewardship of Management Operations, as presented, for information.”

Moved: L. Busuttil
Seconded: D. Bull

CARRIED

C. White relinquished the Chair to G. Bridge, BOH Chair.

Finance + Audit Committee Report

- See Closed Session at #12

Human Resources Committee Report:

- NONE.

Executive Committee Report:

- NONE.

11.0 Correspondence

- NONE.

Media and Public attendees were asked to leave the meeting, at this time, as this Board of Health meeting contains a "Closed Session" section which falls under the exemptions pursuant to Section 239 of the *Municipal Act*. Please note that this session is **not** open to members of the public or the press.

(2:59) The Open Session portion of the meeting ended, and everyone left the meeting room.

12.0 CLOSED SESSION

- To approve the Closed Session minutes of April 2, 2025 [labour relations or employee negotiations and personal matters about an identifiable individual, including BOH employees].
- To receive Closed Session Finance + Audit Committee Report BH.04.MAY0725.R06 - 2025 Insurance Renewal: Liability and Cyber [the security of the property of the BOH].

MOTION: "To move into Closed Session to approve the Closed Session Minutes of April 2, 2025 [labour relations or employee negotiations and personal matters about an identifiable individual, including BOH employees]; and to receive Closed Session Finance + Audit Committee Report BH.04.MAY0725.R06 – 2025 Insurance Renewal: Liability and Cyber [the security of the property of the BOH]."

Moved:

D. Anderson

Seconded:

D. Bull

CARRIED

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MINUTES OF THE BOARD OF HEALTH
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CLOSED SESSION

Members in attendance were: George Bridge (Chair), Guy Gardhouse, Ralph Manktelow, Erin Caton, David Anderson, Linda Busuttil, Duncan Bull, Campbell Cork, and Chris White.

Member(s) with regrets were: Sandra Starr, Rodrigo Goller, and Steve Cavell.

Ex-officio member(s) in attendance were: Dr. Mercer, Medical Officer of Health & CEO.

Staff member(s) in attendance were: Rita Isley, David Kingma, Kyle Wilson, Phil Wong, Dr. Matthew Tenenbaum, Brian Herman, and Laura Kelly (Recording Secretary).

Guest(s) in attendance were: NONE.

CLOSED SESSION MINUTES TO BE PROVIDED UNDER SEPARATE COVER.

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(3:59) Returned to Open Session.

Motions to be brought into Open Session:

MOTION: “That the Board of Health approve the Closed Session Minutes of April 2, 2025, as presented.”

MOTION: “That the Finance + Audit Committee makes recommendation to the Board of Health to receive Finance + Audit Committee Report BH.04.MAY0725.R06 – 2025 Insurance Renewal: Liability and Cyber, as presented, for information.”

MOTION: “To ratify the Closed Session decisions of the May 7, 2025 Board of Health meeting.”

Moved:	D. Anderson	
Seconded:	L. Busuttil	CARRIED

13.0 Adjournment

The meeting was adjourned at 4:01 p.m.

MOTION: “To adjourn the meeting.”

Moved:	C. White	
Seconded:	L. Busuttil	CARRIED

APPROVED this 4th day of June, 2025.

Board of Health Chair

Medical Officer of Health, CEO