

**OPHA's Response to the MOHLTC's  
Proposed Amendments to the  
Regulations Made Under the Health  
Protection and Promotion Act (HPPA)**

*Submitted November 8, 2017*



## Overview

On behalf of the Ontario Public Health Association (OPHA), this submission is written in response to changes being put forward by the Ministry of Health and Long-term Care (MOHLTC) to regulations under the *Health Protection and Promotion Act* (HPPA). OPHA is a non-partisan, non-profit member based organization that brings together a broad spectrum of groups and individuals concerned about people's health. OPHA's members include the various disciplines working at all levels in Ontario's public health units as well as representatives from the voluntary, academic and private sector, other parts of the health care system, students and individuals. OPHA works to strengthen the impact of people who are active in public and community health through the work of our workgroups that gather expertise from across Ontario to tackle focused public health issues.

OPHA welcomes the opportunity to provide feedback on the proposed changes, especially those relating Regulation #566 on Qualifications of Boards of Health staff as these were unexpected by our members and colleagues and generated significant concern. We thus valued the opportunity for additional communication from Assistant Deputy Minister Roselle Martino and dialogue with members of her team to learn more about context that necessitated these changes. As a result, we sought feedback from our membership and constituent societies around the segments of the HPPA regulations under review. Summarized below is OPHA's feedback on these proposed changes, our rationale and recommendations in lieu of the proposed amendments.

### ***Summary of Position Stance:***

#### ***Regulation 428/05 - Public Spas and Regulation 565 – Public Pools:***

**OPHA supports** the ministry's endeavour to update the regulations under HPPA and is particularly pleased to see changes in section *Regulation 428/05 - Public Spas and Regulation 565 – Public Pools* that are in line with OPHA's Environmental Health Workgroup's past position statements and [resolution](#) on the need to update regulations related to recreational water facilities, like splash pads and wading pools. Our workgroups and constituent societies offer much expertise relevant to these proposed changes, and as such would welcome the opportunity to further contribute in relation to these updated requirements.

#### ***Regulation 566 – Qualifications of Boards of Health Staff:***

**OPHA does not support** the proposed removal of existing public health professional qualification requirements for business administrations, public health inspectors, public health dentists, hygienists, and public health nutritionists, as proposed under *Regulation 566 – Qualifications of Boards of Health Staff*. While it is recognized that updates may be required to this section of the HPPA, removing the requirements altogether are cause for alarm.

***Rationale for contested changes to HPPA:***

Changes under *Regulation 566* by far generated the most feedback from our individual and constituent society members. Much of the feedback we received highlighted concerns about the need to preserve the credibility and scope of practice of qualified public health professionals. Understanding that many of our members are working in an environment of ongoing change to public health systems, they do not agree with having such critical requirements left solely to the public health standards and accountability agreements and provided strong arguments for the need to see these firmly reside within the regulations under the HPPA. As an example, several practitioners identified to us instances where less qualified professionals were hired to do equivalent work as a regulated professional in a public health unit. Registered Dietitians and Public Health Inspection professionals were identified as particularly vulnerable to such arising trends. We received a number of detailed letters from our members, outlining the stringent and high standards they must maintain through their respective regulatory bodies. Thus, in the very least, OPHA believes that the regulations under the HPPA should, regardless of future updates, continue to be the vehicle that ensures the province's public health system protects people by stating at a minimum the necessity for members in good standing of their provincial regulatory bodies with the body for each professional group named.

Many of our members recognize that while the intention of these changes is not to dilute the credibility of public health, in times when financial constraints may arise, and not forgetting the recent publication of an Expert Panel report on the *Public Health within an Integrated Health System* that proposed a more business-like model separating the powers of CEO and Medical Officer of Health, members are concerned that the hiring of non-regulated professionals may creep into cost-saving initiatives.

Some of the feedback we received acknowledged that updating regulation #566 under the HPPA could have some benefits. Some of our members noted the value of Boards of Health being able to operate with more autonomy in hiring Board of Health staff, especially since several of the qualifications in the Act are currently outdated. In some instances, health units are required to contact the MOHLTC to demonstrate equivalency and seek approval, which is not an optimal hiring practice.

OPHA acts as a collaborative voice for a number of constituent societies representing multiple professions that are vital to effective public health work (see *Appendix* for more details). Of these professions, some are notably absent from qualification requirements under *Regulation 566* of the HPPA. OPHA encourages that any future endeavors to update requirements come as a result of collaboration and consultation with our constituent societies, as well as others, to integrate the qualifications of professional groups such as epidemiologists, health promotion specialists and physical activity promotion professionals into modernized requirements.

Despite the feedback that updates are needed to the HPPA for sections pertaining to *Regulation 566*, OPHA recommends the proposal to eliminate qualification requirements under this regulation be withdrawn at this time. The proposal by the MOHLTC to include qualifications under the enforceable Standards for Public Health Programs and Services (SPHPS) received mixed feedback and insufficient support from our members given the backbone proposal to completely remove qualification

requirements from HPPA regulations. OPHA believes that the current status of the SPHPS (draft under revision) and accountability agreements (being drafted) supersedes the ability to support such vehicles for qualification requirements in place of regulation under the HPPA.

***Recommendations:***

1. OPHA recommends the ministry's proposal to removal qualification requirements under *Regulation 566* be withdrawn at this time. We strongly urge that the MOHLTC instead *update* HPPA qualification requirements by working with constituent societies and respective regulatory Bodies to define modern qualification requirements. Should the ministry's preference persist for the removal of qualification requirements under *Regulation 566*, OPHA strongly recommends the MOHLTC to do so only after having released the proposed substitutions in the public health standards and accountability agreements. In this order, public health professionals may have more information as a basis to better assess the proposed changes. OPHA and its constituent societies would welcome the opportunity to work with the government in drafting requirements within the standards and accountability agreements.
2. OPHA recommends that future updates to the requirements for Board of Health staff include professionals not currently listed that are essential to public health.
3. OPHA supports the proposed changes to *Regulation 428/05 - Public Spas and Regulation 565 – Public Pools* and would welcome the opportunity to put forward expertise from our individual and constituent society members who have made a number of advances in proposing updated regulations.

As these changes affect a significant number of our members, we urge the government to consider this feedback and recommendations that have been synthesized from our concerned stakeholders in response to these proposed changes. While some of the amendments were encouraging, such as those related to recreational water facilities, like splash pads and wading pools; other proposed changes under Regulation #566 were of grave concern given the timing and absence of more detailed information.

We remain assured to hear that the ministry is interested in working with constituent societies and stakeholders to arrive at wording in the public health standards where qualifications will be updated and defined, and look forward to this as a first step in modernizing staff qualification requirements for Boards of Health. However, OPHA does not support removal of these qualifications in the HPPA regulations at this time.

Thank you for the opportunity to provide feedback on the proposed changes. We remain committed to a collaborative approach in working with the government to define the high standards for public health.

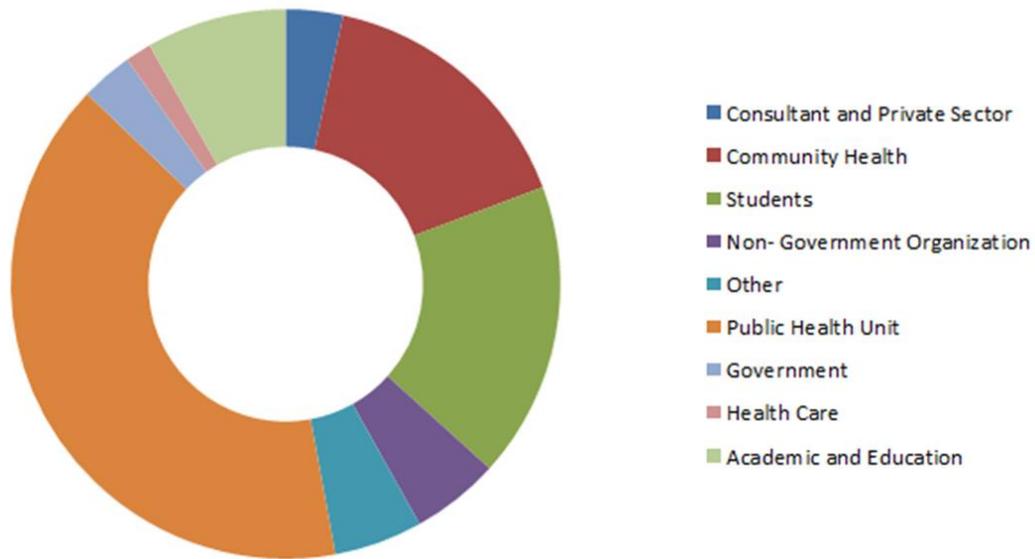
***The Ontario Public Health Association***

## Appendix

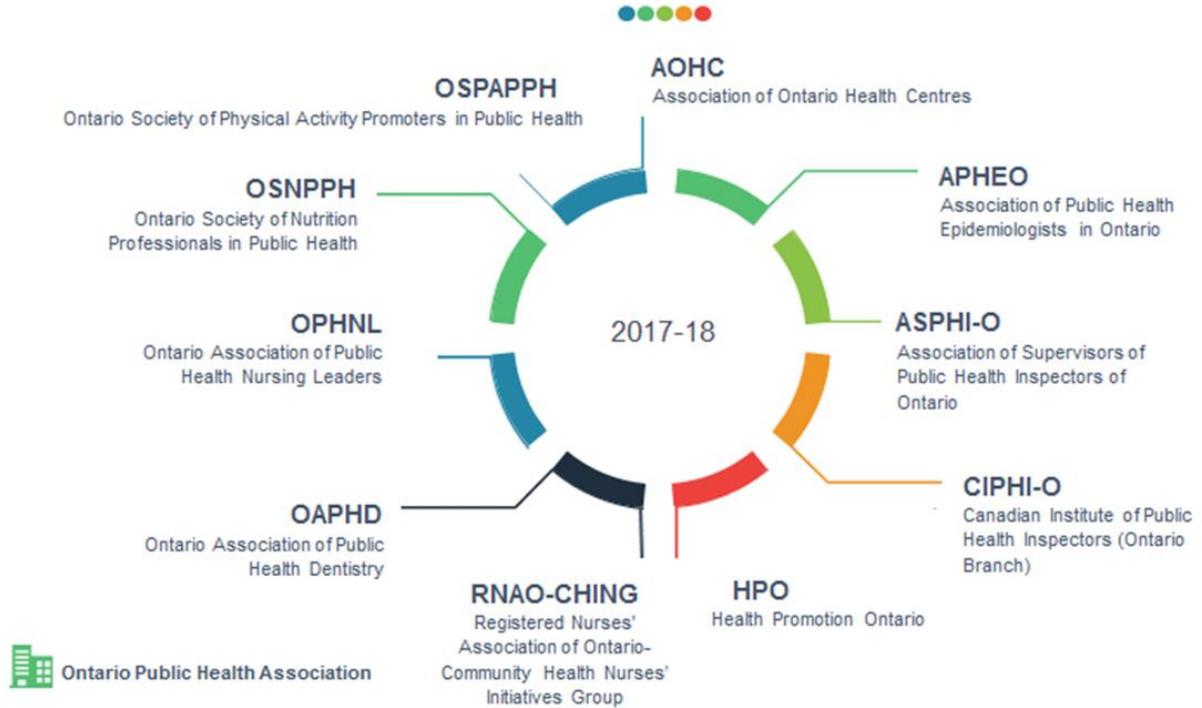
### About OPHA

Created in 1949, the Ontario Public Health Association (OPHA) is a non-partisan, non-profit organization that brings together a broad spectrum of groups and individuals concerned about the health and wellbeing of Ontarians. OPHA’s members come from various backgrounds and sectors - from the various disciplines in public health, health care, academic, non-profit to the private sector. They are united by OPHA’s mission of providing leadership on issues affecting the public’s health and strengthening the impact of people who are active in public and community health throughout Ontario. This mission is achieved through professional development, information and analysis on issues affecting community and public health, access to multidisciplinary networks, advocacy on healthy public policy, and the provision of expertise and consultation.

### Where Our Members Work



## OPHA's 10 Constituent Societies



## OPHA Member Workgroups and Task Groups

