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Jun 7 · 50 tweets · [adamadonaldson/status/1666502511333711873](https://twitter.com/adamadonaldson/status/1666502511333711873)

Coming up at 2 pm, it's this month's Board of Health meeting. This is what's coming up on the agenda:



**MEETING PREVIEW: Board of Health Meeting for June 7, 2023**

June's Wellington-Dufferin-Guelph Board of Health meeting will be data driven. Not that the decisions of the board are not usually data driven, but data will be the focus on this month'...

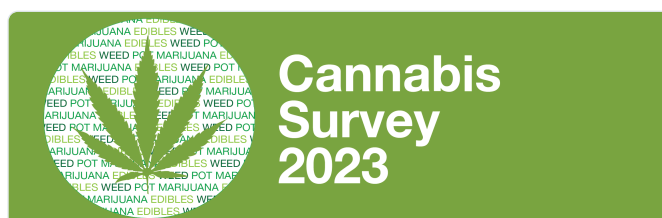
<https://guelphpolitico.ca/2023/06/02/meeting-preview-board-of-health-meeting-for-june-...>

Chair Bridge has called the meeting to order.

No Disclosure(s) of Pecuniary Interest.

Minutes approved.

First up is Dr. Mercer with the Medical Officer of Health meeting. First things first, Mercer directs peers to the PH's cannabis survey:



**Cannabis Survey 2023**

Tell us what you think about cannabis for a chance to win one of five \$100 gift cards. October 2023 will mark five years since the non-medical use of cannabis became legal in Canada and whether you h...

<https://wdgpublichealth.ca/cannabis-survey>

Next, ticks? What's the deal? Mercer notes that climate change is resulting certain insect populations (incl. mosquitos) experiencing less "over-winter mortality". Longer, warmer summers are also helping enhance the life cycle of those bugs.

First report of a black-legged tick was 2011, and there were 10 reports that year. PH no longer takes tick reports because there are just too many. Adult ticks had two active season, early spring, and late summer. The issue though is the nymphs, which are active now till Sept.

Gotta do those tick checks! Where light coloured clothing that makes ticks easier to see, bathe the kids when they come indoors, stay out of the long grass, and don't just rip them off if you see one, grab it by the end and lift it straight up.

Lyme disease is an issue, but there are 3 others spread by ticks too and they will soon be considered diseases of public interest.

Last, air quality. PH actually put out a notice about this today:

<https://wdgpublichealth.ca/alerts/special-air-quality-statement-effect-southern-ontario-due-wildfire-smoke-take-precautions>

When there's a wild fire, the fine particulates are overwhelming the two other considerations of air quality. The scale only goes up to 10+, but Mercer notes that not everyone has the same risk to air quality: seniors, kids, pregnant people among the more risky.

Air quality risk right now in Guelph is 7, but it's expected to go down to 6. Mercer notes that it changes over the day, and seems to be more mild in the evening and overnight hours. Be careful while being physically strenuous, or if you have chronic health conditions.

Mercer notes that this is something new that we're dealing with since we have relative good air quality most of the time. We might have to expect that these season concerns around air quality caused by wild fires will continue.

Mercer advises to check yourself, and check on people you know with respiratory issues. Also, you can wear an N95 mask outside with air quality index is high.

(Tweeter note: Did this yesterday and it worked.)

Member Anderson notes that emergency services were inundated with 9-1-1 calls yesterday because people smelled the smoke and thought there was a fire nearby.

Member Gardhouse asks about other kinds of ticks. Mercer says that other ticks can carry diseases, and they are around, but the immediate concern is that black legged tick.

Also, in response to Cllr Busuttil's question, do not bring PH your ticks. There are online resources that can help you identify the type of tick you found.

Cllr Caton asks if there's a maximum exposure for people outside with an N95. Mercer says there's a lot of variation in the air quality index, even topography. You have to go by your own symptoms, and you also have to be aware of your indoor air quality too.

One item on the consent agenda, Emergency Preparedness (January 2020 – June 2023). It's approved. Basically it covers lessons learned about preparedness post-COVID.

Next, a presentation: Public Health Innovations in Analytics. Dr. Justin Angevaere, a Data Scientist in Health Analytics, and Julian Martalog, Manager of Health Analytics will present.

These are the five areas covered in this presentation:

## Overview

- **Data Governance**
- **Artificial Intelligence**
- **Open-source**
- **COVID-19 Vaccination Emails**
- **Dashboard Renewal**

Data Governance means knowing the limitations of data and how best to manage the data received. No data set has perfect quality, but they have to understand the metrics and limitations.

A.I. The unit is looking for ways to use A.I. to improve productivity by using ChatGPT and open sources tools. They looked at some early use cases and what the potential boundaries might be, like feeding personal info into the chatbot. The human eye is still important.

Open source work. The unit has to be understandably cautious with how much they share because they are dealing with medical information.

COVID-19 vaccine emails. Public health set emails to people to remind them that it was time to get a booster, and then they sent a second email, which PH found to have a negligible impact.

Lastly, dashboard renewal. The dashboards are key to sharing local health data, and given the popularity of the COVID-19 dash they're looking at making updates. This fall, COVID-19 will be integrated onto a dash with other respiratory illnesses.

Caton asks about ChatGPT and its potential tendency for inaccuracy. Martalog says they're encouraging staff to test it out right now as they evaluate the best use of the tool, if there is a best use, but there are aware of the potential liabilities.

Motion to receive the report passes.

Next, 2023 – The Modern Enterprise. Mercer notes this is about how the unit is managing the risk in terms of technology. It covers the new data centre, the upgrade to the medical info system, and they too looked at the use of A.I. and ChatGPT.

Goller asks how the chatbot is going to be monitored for the quality of interaction. Chief Information Security Officer Emerson Rajaram says that they will train it and then monitor the interaction as its rolled out. Mercer adds that this will not be public facing.

Essentially, the chatbot will supplant something like a call centre, you can ask it basic information, and it can direct you to establish parameters, and it can help you immediately book an appointment as opposed to doing a call back.

Motion to receive the report approved.

Next, the Healthy Babies Healthy Children Program. It was one of those programs that was paused during COVID that's now coming back. It's 100% funded by the Ministry of Health though Mercer notes that there haven't been many increases.

Demand for HBHC has only increased. This has required Public Health to find new innovations and efficiencies like streamlining documentation efforts, using more text messaging to reduce "phone tag" and using a hybrid of in-person and virtual engagement.

Public Health will continue to move forward with efficiency seeking efforts and will re-establish more community partnerships.

Motion to receive the report approved.

Next, the Injury Surveillance and Prevention Report. Mercer says this is especially important since many areas of this region are farming communities, which accidents are known to happen, but injuries are also preventable.

Martalog, who's presenting again, notes that injuries are the leading cause of death for people under 35.

He notes that the rate of injury slowly increased every year leading up to the pandemic, when it understandably went down briefly. This is understandable when you account for the aging population, especially fall style injuries, the chance for which increase as you get older.

Farm injuries back up a relatively small portion of total injuries overall, but because of the large rural areas in Wellington County it makes up a significant portion of what this health unit deals with injury-wise.

Martalog notes that there are a lot of injuries that are not reported. People only go to the hospital or see a doctor if it's serious, but there are lots of injuries that are small and people don't seek out medical attention. There's some gaps in the big picture.

Busuttil asks about this information informs planning. Mercer says one of the challenges is having people that want to use the data, it can take a long time to get people to change their mind if the data says a bike route is safe and a parent believes it's unsafe.

Goller asks about fall prevention in Guelph, any agencies working on that? Mercer says there are different organizations that tackle a piece of this - school safety, active transportation - but there may not be an org looking at the big picture.

Motion to receive the report approved.

Next, the 2022 Community Report. And you can read the full report for yourself here:

<https://wdgpublichealth.ca/sites/default/files/wdgph-community-report-2022-final.pdf>

Chuck Ferguson, Communications Manager, says that they don't usually talk about the report at the board, but what's the board to know that it's more than a PR document. He notes that the comms staff is not ready to walk out the door and leave the board in the hands of ChatGPT.

We're now watching a little slide show. Not sure if there's supposed to be no sound.



Bridge suggests that the report get sent to all the councils and members to more awareness about the work of Public Health out there.

Motion to receive the report as information approved.

No committee reports. No closed motion.

Motion to approve the minutes from last month's closed session approved.

That's a wrap for this meeting. The next public health meeting is not until September so...

