

#### **CONTINUING PROFESSIONAL DEVELOPMENT SYMPOSIUM 2013**

## PRACTICE, EVIDENCE AND RESEARCH:

## Public Health Physicians' Perspectives

Sunday, June 9, 2013 9:30 – 15:30 Room 203 Ottawa Convention Centre 55 Colonel By Drive Ottawa, Ontario

## Introduction

The Public Health Physicians of Canada (PHPC) is pleased to present a series of 13 high quality talks by public health physician leaders from across Canada. Your colleagues will share evidence, experience and insight on issues ranging from public health practice and training to health equity. This session is certain to provoke thoughtful exchanges and debate.

## **General Scope**

This session will engage public health and preventive medicine specialists and public health physicians in sharing, responding to and discussing key public health issues. The role of public health physicians, and contexts in which they practice, will be emphasized throughout.

## **Symposium Objectives**

- Identify and discuss current and emerging public health issues from a public health physician perspective;
- 2. Explore the role of public health physicians in implementing innovative approaches in response to these issues; and,
- 3. Identify key resources for future reference and continued learning.

## **Who Should Attend**

This symposium will be of interest to Public Health and Preventive Medicine Specialists, Public Health and Preventive Medicine Residents, and Public Health Physicians.

## **Accreditation**

This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada for 5 credits. This program has been reviewed and approved by the University of Ottawa, Office of Continuing Medical Education.

## **Event Schedule**

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## **Registration Fees**

Physician (Full Fee)	\$150 CAD
Resident Rate	\$100 CAD
Presenter Rate	\$100 CAD

## Registration

To register, please go directly to the Canadian Public Health Association Conference Website at either of the following links\*, depending on membership status:

**CPHA Member Registration:** 

https://share.cpha.ca/ei/cm.esp?id=17&start=eiscript&cd=45008&pageid=LOGIN

Non-Member of CPHA Registration:

https://share.cpha.ca/ei/getdemo.ei?id=48&s= 0UC0V41AQ

### **Cancellation**

Cancellations may result in the loss of registration fees. Any partial refunds will be issued only at the discretion of PHPC and may be subject to a cancellation fee.

PHPC reserves the right to cancel continuing professional development events. Registrants will be notified at the earliest possible date in the event of a cancellation. PHPC will not be liable for any loss, damage, or other expense that such cancellations may cause.

## **Accommodation and Travel**

Blocks of rooms have been reserved for CPHA delegates at the Westin Ottawa and Novotel Ottawa. Please make your hotel reservation by contacting the hotel directly and referring to the appropriate CPHA Group Code available at the CPHA Conference website here:

http://www.cpha.ca/en/conferences/conf2013/travel.aspx

Special discounts with Air Canada, Porter, WestJet and VIA Rail are available to CPHA Conference delegates. Details are available on the above mentioned webpage.

<sup>\*</sup> Presenters for this session should contact the PHPC Secretariat at <a href="mailto:phpc@cpha.ca">phpc@cpha.ca</a> for a separate registration link.

## Why Public Health should reconsider its alignment with the community food security movement

9:30-9:45

Lynn McIntyre is currently Professor and CIHR Chair in Gender and Health in the Department of Community Health Sciences, Faculty of Medicine, University of Calgary, Alberta, Canada.

Dr. McIntyre holds both a medical degree and master's degree in Community Health and Epidemiology from the University of Toronto. She is also a Fellow of the Royal College of Physicians of Canada in Public Health and Preventive Medicine

#### **Objectives**

By the end of this discussion, participants will be able to:

- Consider the unintentional harm that may be occurring from public health alignment with community food security initiatives;
- Reflect upon how public health could advocate more critically for measures that would structurally reduce household food insecurity; and,
- Develop arguments and strategies that could shift public health's current community work related to food security to a more upstream approach.

## **Health and Education Impacts of Student Nutrition Programs**

9:45-10:00

Dr. David McKeown is Medical Officer of Health for the City of Toronto and Executive Officer of the Toronto Board of Health. He leads Toronto Public Health, Canada's largest local public health agency, which provide public health programs and services for 2.7 million residents. He is a physician specialist who has worked in the public health field for more than 25 years. Dr. McKeown has also served as Medical Officer of Health for East York, the City of Toronto prior to amalgamation, and the Region of Peel. He is an Adjunct Professor in the Dalla Lana School of Public Health at the University of Toronto. As Toronto's

Disclosure: Speakers have been requested to disclose to the audience, any real or apparent conflict(s) of interest that may have a direct bearing on the subject matter of this program.

Medical Officer of Health, he has been an outspoken advocate for healthy public policy and the reduction of health inequities.

### **Objectives**

By the end of this discussion, participants will be able to:

 Participants will understand the evidence for health and educational impacts of student nutrition programs and their potential role in achieving public health objectives.

## Public Health and Primary Care

# <u>Primary Care and Public Health during Pandemic H1N1: Key lessons and next steps</u>

10:10-10:25

Dr. Ricketts is a public health physician, with a Masters degree in Health Sciences and FRCPC in Public Health. Dr. Ricketts' professional career has been focused on the development of public health surveillance systems and the development of public health policy. She developed the Canadian federal scientific policy underlying the management of blood safety for prion diseases and the Canadian CJD surveillance system. Dr. Ricketts worked for five years at the WHO where she was responsible for global programs and recommendations regarding prion diseases. In 2004, Dr. Ricketts changed her career path to begin working in PH policy as pertains to the health care system, first as the most senior medical officer in the First Nations and Inuit Health Branch in Health Canada, then as the Director General/A for the Office of Public Health Practice within the Public Health Agency of Canada. Dr. Ricketts is currently the Director of the Public Health Group in the Canadian Medical Association where she is responsible for public health policy development for the Association.

#### **Objectives**

By the end of this session, participants will:

- Understand the importance of including PC practice in all phases of pandemic planning;
- Have a framework for understanding the gaps in pandemic planning for the PC community and developing an action plan;
- Learn how to integrate PC and achieve PH objectives in pandemic planning; and,

 Participate in and contribute to a discussion of essential 'next steps', which will be used by the authors to inform the final report.

# <u>PHAC HIV Screening and Testing Guide: Key recommendations and role of public health physicians</u>

10:25-10:40

Dr. Gervais obtained his MD and a certification in family medicine from Université de Sherbrooke, Québec. After experiencing clinical practice, he completed his training in Public Health and Preventive Medicine at Université Laval, Québec City. He joined Health Canada in 1997 and the Public Health Agency of Canada in 2004. As medical expert in public health, his primary responsibility is to provide advice and recommendations on prevention of sexually transmitted and bloodborne infections. He also offers his expertise in public health to federal and provincial committees.

#### **Objectives**

By the end of this session, participants will be able to:

- Identify the key recommendations of the guide;
- Explore how to support the implementation of these recommendations; and,
- Use key resources for future reference (e.g. quick reference guide).

## Public Health Practice and Training

## **Development of Public Health Protocols in Nova Scotia**

11:00-11:15

Dr. Robert Strang is the Chief Public Health Officer and Chief Medical Officer of Health for the Province of Nova Scotia. He completed his medical degree (1990), family practice residency (1992) and Community Medicine Residency (1997) at the University of British Columbia. He was an Associate Medical Officer of Health in British Columbia from 1997-1999. In 1999, he moved to Halifax to become Medical Officer of Health for Capital District Health Authority. In January 2007 he became Acting Deputy Chief Medical Officer of Health for the province. Dr. Strang was appointed Nova Scotia's first Chief Public Health Officer in August, 2007.

Dr. Brent Moloughney is a specialist in public health and preventive medicine who has worked at regional, provincial and federal public health system levels.

For the past 14 years, Dr. Moloughney has been providing consulting expertise to a range of governmental, academic, and professional association clients. Many of his projects have focused on the design and functioning of public health systems and organizations. He was the project consultant for the 2003 CIHR report on the *Future of Public Health in Canada: Developing a Public Health System for the 21*<sup>st</sup> *Century,* as well as the subsequent 2005 FPT report *Improving Public Health System Infrastructure in Canada*. He has subsequently conducted independent reviews of provincial/territorial public health systems in Nova Scotia, Saskatchewan, Nunavut, and Alberta. In recent years, he has become increasingly involved in the design of public health systems to meet the needs of First Nations communities. Several additional projects have focused on public health workforce development, as well as strategies to address a wide range of public health issues.

#### **Objectives**

By the end of this session, participants will be able to:

- Understand the rationale for, and content of, PH protocols being developed in Nova Scotia; and,
- Consider the implications of effective 21st century PH practice for their own work and for PH work within their jurisdiction.

## <u>Overdose Prevention Training Programs Including Take Home Naloxone (THN)</u> <u>Lessons Learned from BC</u>

11:15-11:30

Jane was a family physician in the UK. She trained as a Public Health and Preventive Medicine (PHPM) specialist at UBC and field epidemiologist with Health Canada.

Jane works half time at UBC in School of Population and Public Health; she was program director for UBC PHPM residency (2001-07) and currently teaches public health to the second year medical student and is director of UBC MPH practicum.

Working at Vancouver Coast Health in Communicable Disease Control she developed an interest in illegal drug use epidemiology, hepatitis C and vulnerable populations. Jane joined BCCDC as Physician Epidemiology in 2003 and co-chairs the BC harm reduction strategies and services committee. She led the introduction of the BC overdose prevention and take-home-naloxone program in August 2012. Jane is also the Chair of the Royal College PHPM Specialty committee.

#### **Objectives**

By the end of this session, participants will:

- Be able to describe the evidence regarding THN and be aware of current situation;
- Explore ways of supporting implementation of the program in their local region; and,
- Identify opportunities to advocate for THN at the provincial/national level.

# **Graduate Requirements for PHPM Residency Programs: Advice from the field** 11:30-11:45

Fran Scott MD CCFP FRCPC MSc is a community medicine specialist who trained at McMaster and is currently as Associate Professor at the Dalla Lana School of Public Health. She is the Program Director for the Public Health and Preventive Medicine residency program and the Course Director for Determinants of Community Health in undergraduate medicine; both at UoT. She has many years of experience in local public health practice and research in Hamilton, Niagara and Toronto.

Dr, Julie Emili is a Program Director for the PHPM Program at McMaster University. She is also the Associate Medical Officer of Health for the City of Hamilton, and a part-time family physician.

### **Objectives**

By the end of this session, participants will be able to:

- Understand the Royal College expectations for graduate courses in PHPM programs;
- Understand the variety of means residents/programs have to achieve this requirement and gaps;
- Provided feedback on what graduate course should be required/elective;
- Provided feedback on how to apply academic course work in residency rotations; and,
- Discuss potential role for PHPC in national coordination of graduate courses.

## The Role of the PHPM Physician in Ensuring an Equity Lens in Infectious Disease Control

12:45-13:00

Dr. Tannenbaum is Head of Health Protection at the Montreal Public Health Department. Although she has been working primarily in the area of the area of infectious disease control since 1991, she has also held the position of Deputy Director of the Health Department. In that position she was involved the development of the regional public health action plan for 2010-2015, in which the two priority areas are preventing chronic diseases and reducing social inequalities in health.

Dr. Tannenbaum completed a residency in Family Medicine at McGill University and in Preventive Medicine from the University of Massachusetts. She has a Masters of Public Health degree from the University of Massachusetts and a Masters of Management (International Masters of Health Leadership) from McGill University. She has a faculty position at McGill University and the University of Montreal., where she is involved in teaching medical students and residents.

#### **Objectives**

By the end of this session, participants will be able to:

- Understand the challenges facing public health departments in applying an equity lens to infectious disease control;
- Be aware of the importance of detailed local data in understanding gaps in inequality and the challenges in obtaining that data in one jurisdiction;
- Identify several factors that may explain gaps in vaccination coverage in Montreal; and,
- Identify approaches that public health workers can apply to reduce those gaps.

## Ontario's Health Equity Impact Assessment (HEIA) 2.0 Tool

13:00-13:15

Ingrid Tyler is a public health physician at Public Health Ontario (PHO), assistant professor at the Dalla Lana School of Public Health, University of Toronto, and associate course director, Determinants of Community Health Course, Faculty of Medicine, University of Toronto.

Since 2009, Ingrid has been working on PHO's equity mandate, including activities across the spectrum of knowledge generation, knowledge synthesis,

knowledge exchange and capacity building. Her activities include developing tools, training, research, and reviews to support integration of equity considerations with local, provincial and national partners. Ingrid is also involved in health systems research, including the development of measures for the impact of knowledge organizations in health and evaluating equity planning tools.

#### **Objectives**

By the end of this session, participants will be able to:

- Understand the contents, application and potential outcomes of the Health Equity Impact Assessment 2.0 tool in the public health organization setting; and,
- Appreciate implementation strategies for the HEIA 2.0 tool at planning, program and organizational levels.

### **Promoting Health Equity in Health Care Systems**

13:15-13:30

Dr. Kryzanowski is a Deputy Medical Health Officer for the Saskatoon Health Region. She received her medical degree from Queen's University, a Master of Science degree in Community Health Sciences from the University of Calgary, and is a fellow of the Royal College of Physicians and Surgeons of Canada with certification in the specialty of Public Health and Preventive Medicine. She is a member of the Public Health Physicians of Canada and the Canadian Public Health Association.

In the Saskatoon Health Region, Dr. Kryzanowski is the MHO responsible for the Communicable Disease Control, Health Promotion and Healthy Families departments. She has a strong interest in promoting health equity within public health and across the health region.

### **Objectives**

By the end of this session, participants will be able to:

- Describe the unique role of the health care system in addressing health inequities;
- Understand how to assess and use health equity information to improve health care quality; and,
- Consider strategies for evaluating and developing workforce health equity competencies.

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#### **Transparency as a Public Health Intervention**

13:50-14:05

For more information on this presenter, please see Dr. David McKeown's biography on page 4.

#### **Objectives**

By the end of this session, participants will be able to:

 Participants will understand the role that transparency initiatives can play in public health, the evidence for their effectiveness, and identify other opportunities for implementation of this approach.

## Pandemic Controversies: How to maintain trust in public health

14:05-14:20

Dr. Gully was Senior Medical Advisor to the Deputy Minister of Health Canada until the beginning of 2013. He was the federal representative on the Public Health Network Council and was the Canadian representative on the Executive Board of the World Health Organization. Prior to September 2009 he was Deputy Coordinator for the United Nations System Influenza Coordination office and from 2006 until 2009 was Senior Advisor to the Assistant Director General, Health Security and Environment (HSE) at WHO

From 2004 until 2006, Dr Gully was deputy chief public health officer for Canada in the Public Health Agency of Canada and had worked in Health Canada from 1990. Prior to 1990, Dr Gully worked in public health at the local and regional level in Canada and the UK.

### **Objectives**

By the end of this session, participants will be able to:

- Prompt re-examine influenza pandemic preparedness plans;
- Prompt discussion with public health colleagues about applicability of current pandemic preparedness plans and the consideration of public and political trust; and,
- Become aware of international aspects of pandemic preparedness and response, which might be relevant to Canadian public health practice.

### Potential and Pitfalls of PHPM Physicians in a Political Environment

14:40-15:10

Dr. Kettner was raised in the north end of Winnipeg and obtained his medical degree at the University of Manitoba, graduating in 1976. After two years of work in emergency medicine, he undertook his first residency program, obtaining his general surgery specialty certificate in 1984 (University of Manitoba). Following that, he obtained a Masters of Science in Epidemiology at the University of London School of Hygiene and Topical Medicine in 1986. He obtained his Community Medicine specialty certificate (University of Manitoba) in 1991.

Since then, he has worked as a Medical Officer of Health, first in rural and northern Manitoba and then in Winnipeg before his appointment as the Provincial Chief Medical Officer of Health in September 1999 and as Manitoba's first Chief Provincial Public Health Officer in July, 2007.

He is assistant professor in the Departments of Community Health Sciences and Surgery at the University of Manitoba, Faculty of Medicine and a part time urgent care and emergency physician.

He and his wife, Charlotte Johnson, live in Winnipeg. They have six children and three grandchildren.

### **Objectives**

By the end of this session, participants will be able to:

- Add to the knowledge base of experiences of colleagues in public health practice;
- Learn an approach to resolving ethical, legal, and professional conflicts in public health practice;
- Develop one's process of critical thinking with respect to conflicts of interest in government-employed public health practice; and,
- Use the learnings of this session to increase potential and reduce pitfalls in government-employed public health practice.

Summary and Evaluation

## **Planning Committee**

## PHPC Continuing Professional Development Committee 2012-2013

#### Dr. Barry Pakes (Chair)

Program Director, Global Health Education Initiative University of Toronto

#### Dr. Terry-Nan Tannenbaum (Chair)

Deputy Director of Public Health Montreal Health and Social Services Agency

#### Dr. Sandra Allison

Medical Officer of Health Western Regional Health Authority Manitoba Health

#### Dr. Robert Gervais

Public Health Medical Advisor Centre for Communicable Diseases and Infection Control Public Health Agency of Canada

#### Dr. Richard Gould

Medical Officer of Health Annapolis Valley, South West, South Shore, Capital Health District Health Authorities

#### Dr. Gayane Hovhannisyan

Resident, PGY4
Public Health and Preventive Medicine
McMaster University

#### **Dr. Fran Scott**

Director, Public Health and Preventive Medicine Residency Program Associate Professor, Public Health Sciences University of Toronto

#### Dr. Chris Sikora

Lead Medical Officer of Health Alberta Health Services – Edmonton Zone

#### Dr. Susan Stock

Medical Advisor and Researcher Institut national de santé publique du Québec (Quebec Public Health Institute)

Clinical professor, Department of Social and Preventive Medicine, University of Montreal

## **Symposium Events**

## Public Health Physicians of Canada Annual General Meeting

Sunday June 9, 2013 4:00 – 6:00 pm Ottawa Convention Centre Room 201

# **Public Health Physicians of Canada Annual Society Dinner**

Sidedoor Contemporary Kitchen and Bar 18b York Street, Byward Market, Ottawa

\* A Walking Tour to the restaurant will leave the Convention Centre after 6:00 pm. Details will be announced.

## Measuring the Impact of Knowledge Organizations in Health

PHPC Collaborator Session at the Canadian Public Health Association Conference\*

Tuesday, June 11, 1:45-3:15

\* Registration (daily or full) for CPHA's conference is required to attend Measuring the Impact of Knowledge Organizations in Health