



Northern Health Physicians Partners in Wellness

Public Health Newsletter for Northern Health Physicians
Volume 14. Number 1. January 2018 • Page 1 of 3

2017: Year in Review

Volume 13:		
Month/link	Issue	Topic
January	1	(No regular issue) New Year Greeting and 2017 Year in Review
February	2	Influenza activity has increased sharply in BC; Influenza update; Update on Opioid Overdoses; Call for Community Champions; Research Project: Physical Activity-Barriers and facilitators in Northern Primary Care Practice
March	3	Reminder-Research Project: Physical Activity-barriers and Facilitators in Northern Primary Care Practice; Influenza update; Naloxone update: Training resources and scope of practice for nurses and allied health professionals; Mumps refresher
April	4	Pediatric Nutrition Guidelines for Health Professionals; Influenza update; Medical Assistance in Dying (MAID) Conference June 2017
May	5	NH Antimicrobial Stewardship (AMS) program; Physicians can stock free STI meds; Opioid use disorder: New treatment guidelines
June	6	Rabies in BC; Medical Health Officers-Who are we and what do we do?
July	7	Cyclospora Outbreak in BC; Library Services; Truth and Reconciliation Commission: Calls to Action relating to Health
August	-	No issue
September	8	Ticks, Lyme Disease and Tick Paralysis; Expanded eligibility for HPV Vaccination; The Truth and Reconciliation Commission: Calls to Action specific to Child Welfare
October	9	Special Issue on Influenza: 2017-2018 season—what you need to know, including: Immunization campaign start date; Vaccine ordering, distribution and storage; Eligibility; Recommended Vaccine Dosage by Age; Vaccines and Recommended Usage; Egg allergies/Oculo-Respiratory Syndrome; Pneumococcal Vaccine ; Reporting Requirements; Adverse reactions following Immunization; Vaccine Administered; Influenza testing and treatment; References; Additional Resources; Influenza Control Program Policy for Health Care Workers and, Community Vaccine Provider Influenza Vaccine Order Form
November	10	Introducing New Northeast Medical Health Officer, Dr. Jong Kim; Update on Syphilis Testing via PCR; World Antibiotic Awareness Week; Senior Falls are Preventable; The Truth and Reconciliation Commission: 5 Calls to Action relating to Language and Culture and 17 calls relating to Justice
December	11	Cannabis Legalization and Regulation; Counselling your patients about non-medical cannabis use; Cannabis use for medical purposes; Influenza update; The Truth and Reconciliation Commission: Calls to Action relating to Justice

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Notable Quotable



Back issues of NH Physicians, Partners in Wellness newsletters and bulletins are located on the NH Physicians website:
<http://physicians.northernhealth.ca/physicianResources/PublicHealth.asp>



Northwest

Atlin, Dease Lake, Houston, Hazelton, Masset, Kitimat, Port Clements, Prince Rupert, Smithers, Stewart, Terrace, the Village of Queen Charlotte

Northern Interior

Burns Lake, Fort St. James, Fraser Lake, Granisle, Mackenzie, McBride, Prince George, Quesnel, Valemount, Vanderhoof

Northeast

Chetwynd, Dawson Creek, Hudson's Hope, Fort Nelson, Fort St. John, Tumbler Ridge

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After hours calls to UHNBC Switchboard 250-565-2000 and ask for MHO on-call



northern health
the northern way of caring

Outbreak of invasive meningococcus W-135 in the Okanagan area

Invasive meningococcal disease serogroup W has been on the increase in BC, with 15 cases in 2017. The historical average was less than 2 cases per year. No cases have occurred in Northern Health.

Cases have been concentrated in the Okanagan Health Service Delivery Area, which has led to an outbreak being declared in that area. Most cases in the Okanagan have occurred in 15 to 19 year olds.

As a result, for the duration of this outbreak, **publicly funded quadrivalent meningococcal vaccine is being offered to all 15-19 year olds who:**

- **reside in the Okanagan HSDA (including for school), or**
- **are planning to visit the Okanagan HSDA for at least three weeks.**

The Okanagan HSDA includes Kelowna, Princeton, Keremeos, Osoyoos, Oliver, Penticton, Summerland, Peachland, Vernon, Coldstream, Lumby, Armstrong, Enderby, and other smaller communities.

Most eligible individuals will be vaccinated in the Okanagan, but a few may seek vaccine elsewhere, such as in Northern Health primary care settings. **Any individuals meeting the above eligibility criteria can be referred to your local Interprofessional Team for immunization.**

BC is only in its second year of a public quadrivalent meningococcal immunization program, offered in grade 9. Most grade 10 students (age 15-16) have therefore been immunized, but the rest of the 15-19 year old cohort generally has not.

Outside the universal grade 9 program, quadrivalent meningococcal vaccine is covered in BC only for individuals at high risk, including specific at-risk population segments determined in the context of an outbreak, as above. Other individuals who wish to reduce their risk of meningococcal disease may seek privately funded meningococcal vaccine, which is available through some community pharmacies.

For further information, please see:

Interior Health – Meningococcal Outbreak (Okanagan) <https://www.interiorhealth.ca/YourEnvironment/CommunicableDiseaseControl/Pages/Meningococcal-Outbreak.aspx>

HealthLinkBC – Meningococcal Quadrivalent Vaccines <https://www.healthlinkbc.ca/healthlinkbc-files/meningococcal-quadrivalent-vaccines>
BCCDC Communicable Disease Control Manual – Immunization, Part 4: Biological Products <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/immunization/biological-products>

Submitted by: Dr. Andrew Gray, Northern Interior Medical Health Officer

NH Antimicrobial Stewardship Program Update

According to the Canadian Institute for Health Information- “In 2015, more than 25 million courses of anti biotics were prescribed in the country, the equivalent of almost 1 prescription for every Canadian age 20 to 69... antibiotics are prescribed more frequently in Canada than in other Organization for Economic Co-operation and Development (OECD) countries”

We all know that the use and misuse of antibiotics leads to increases in resistance and unnecessary use can be harmful to our patients. The answer? = Antimicrobial Stewardship!! Our NH prescribers now have easy access to information about the NH Antimicrobial Stewardship Program and how to access resources created and promoted by the program. How do you find this great new resource? By going to the [NH physicians website](#) and looking under Physician Resources; [Antimicrobial Stewardship](#) is at the top of the list! What will you find here? You will find a variety of items such as order sets, clinical practice standards, empiric prescribing tools, the NH Antibigram as well as other recommended online resources such as the new FREE online [Bugs and Drugs website](#).

For more information contact the program coordinator Alicia Rahier at 250-565-5956 or via email alicia.rahier@northernhealth.ca

Submitted by: Alicia Rahier, Antimicrobial Stewardship Program Coordinator



The Truth and Reconciliation Commission

The Truth and Reconciliation Commission's report was released in December 2015. The report details 94 Calls to Action (recommendations) for Canadians to redress the legacy of residential schools (Actions 1-42) and advance the process of reconciliation (Actions 43-94). This newsletter series will walk through the 94 Calls to Action to support Northern physicians and other providers to learn about the legacies and take actions towards reconciliation in their practices, relationships, and communities.

The categories to redress the legacy of residential schools include; child welfare, education, language and culture, health, and justice. This issue we highlight 10 Reconciliation Calls to Action. Others will be shared in upcoming newsletters.

To learn more about the Truth and Reconciliation Commission and the Calls to Action, visit <http://nctr.ca/>

Canadian governments, UN Declaration on the Rights of Indigenous People

43. We call upon federal, provincial, and territorial, and municipal governments to fully adopt and implement the United Nations Declaration on the Rights of Indigenous Peoples as the framework for reconciliation.
44. We call upon the Government of Canada to develop a national action plan, strategies, and other concrete measures to achieve the goals of the United Nations Declaration on the Rights of Indigenous Peoples.

Royal Proclamation and Covenant of Reconciliation

45. We call upon the government of Canada, on behalf of all Canadians, to jointly develop with Aboriginal peoples a Royal Proclamation of Reconciliation to be issued by the Crown.
46. We call upon the parties to the Indian Residential Schools Settlement Agreement to develop and sign a Covenant of Reconciliation that would identify principles for working collaboratively to advance reconciliation in Canadian society, and that would include, but not be limited to...
47. We call upon federal, provincial, territorial, and municipal governments to repudiate concepts used to justify European sovereignty over Indigenous peoples and lands, such as the Doctrine of Discovery and terra nullius, and to reform those laws, government policies, and litigation strategies that continue to rely on such concepts.

Settlement Agreement Parties and the United Nations Declaration on the Rights of Indigenous Peoples

48. We call upon the church parties to the Settlement Agreement, and all other faith groups and interfaith social justice groups in Canada who have not already done so, to formally adopt and comply with the principles, norms, and standards of the United Nations Declaration on the Rights of Indigenous Peoples as a framework for reconciliation. This would include, but not be limited to, the following commitments...
49. We call upon religious denominations and faith groups who have not already done so to repudiate concepts used to justify European sovereignty over Indigenous lands and peoples, such as the Doctrine of Discovery and terra nullius.

Equity for Aboriginal People in the Legal System

50. In keeping with the United Nations Declaration on the Rights of Indigenous Peoples, we call upon the federal government in collaboration with Aboriginal organizations, to fund the establishment of Indigenous law institutes for the development, use, and understanding of Indigenous laws and access to justice in accordance with the unique cultures of Aboriginal peoples in Canada.
51. We call upon the Government of Canada, as an obligation of its fiduciary responsibility, to develop a policy of transparency by publishing legal opinions it develops and upon which it acts or intends to act, in regard to the scope and extent of Aboriginal and Treaty Rights
52. We call upon the Government of Canada, provincial and territorial governments, and the courts to adopt the following legal principles...

Submitted by:

Dr. Sandra Allison Chief Medical Health Officer

