

**MINUTES  
TORONTO/EAST YORK LOCAL HEALTH COMMITTEE**

**Tuesday, October 24, 2006**

**277 Victoria St. 5<sup>th</sup> floor, room 504**

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<b>PRESENT:</b>	Fiona Nelson (Chair) Aldo Gatti Lino Grima Brian Parris Yuen Hing Tse Erinn Leckie (Minutes)	Jim Armstrong Marvin Greenberg Jeanne Jabanoski Roman Polochansky Evadne Wilkinson
<b>GUEST:</b>	Maria Herrera	Cathy Turl
<b>REGRETS:</b>	Liz Janzen Nuzhath Leedham	Mary Kruk

1.0 MINUTES

Jim Armstrong moved the adoption of the minutes of September 12, 2006, seconded by Aldo Gatti, all in favour – carried.

2.0 Local Health Committee Evaluation

Maria Herrera and Cathy Turl attended the meeting to engage members in the Local Health Committee evaluation process. They advised that responses would be collected from LHCs, Chairs, Directors, CHOs and BOH Councillors. Findings will be presented at a joint meeting to be held in the new year. It was requested that findings be shared with the committee in advance of the joint meeting.

It was confirmed that comments from the group would be recorded anonymously. The questionnaire will also be e-mailed or mailed to members should they have comments to add following the group discussion.

The group was requested to provide their input on the following:

***Terms of Reference***

Group comments:

- Well balanced in terms of multi-sectoral/cultural representation – it was recommended that “new immigrants” be added to the perspectives listing under “composition”

- Wish for opportunity to have LHC point of view shared with Toronto Public Health staff
- Policy excellent, practice the problem – are we really making a difference?
- Relationship with Board of Health needs to be strengthened in order to know the impact in the community – the “feedback loop” is missing
- Questions raised regarding establishing formal linkages with Community Councils and LHINs
- There was consensus to add a sunset clause regarding length of time a member may serve on an LHC
- Other suggestions: post agendas, minutes, meeting notices on the internet; invite potential recruits to meetings; hold meetings in community spaces especially for localized issues

### ***Membership and Participation***

Group comments:

- Feeling of participating, contributing, representing industry and neighbourhood
- Becoming informed on issues and involved in politics
- Fantastic meeting attendance – a good indication of benefits to members
- Opportunity to meet others
- Staying connected to issues via group, Board of Health, etc.
- Democratic engagement
- Ongoing education/learning process (e.g. determinants of health)
- Venue to bring forward issues, advocating issues that impact well-being of community
- Support/rally for public health
- Suggestion to add a clause requiring that members send their regrets if they are unable to attend meetings

### ***Orientation and Development***

Group comments:

- Orientation was good
- Would be helpful to include in the manual an overview of public health initiatives
- When consulted by the Board of Health, LHCs need access to all of the information
- Need more clarity regarding Board of Health/LHC relationship – how does the Board view role of LHCs?

### ***Planning and Implementation***

Group comments:

- Good discussions on child poverty, violence, generators, dental issues, etc.
- Need a formal mechanism for LHCs to receive feedback
- Need agenda setting direction from Toronto Public Health
- Need clarification on LHC role as a “working” or an “advancing the issue” committee – if “working” there may be resource implications
- LHCs could generate ideas for the Board of Health e.g. bring forward new issues
- Networking role of LHC
- Generator issue was a good illustration of what the committee could work on
- Good multi-sectoral group
- LHC was well served by Toronto Public Health staff

### ***Group Process***

Group comments:

- Toronto East York LHC lucky to have a “spirit of congeniality”
- Norm of serious but congenial discussion – worth identifying as a strategy
- Group enthusiasm and positive feeling
- No single issue members
- Members experienced on group process (most have served on other committees)
- Good teamwork (a key factor) but having a good Chair who is a Board of Health member also key
- Group searched for common ground

### ***Last Question***

Group comments:

- Suggestion for collaboration with other LHCs

#### 3.0 Other Business

Nothing reported.

#### 4.0 NEXT MEETING

TBD