

Reproductive Health

7. The board of health shall provide all the components of the Healthy Babies Healthy Children Program in accordance with the Healthy Babies Healthy Children Protocol, 2008 (or as current) (Ministry of Children and Youth Services).

Child Health

9. The board of health shall provide all the components of the Healthy Babies Healthy Children Program in accordance with the Healthy Babies Healthy Children Protocol, 2008 (or as current) (Ministry of Children and Youth Services).
10. The board of health shall conduct oral screening in accordance with the Oral Health Assessment and Surveillance Protocol, 2008 (or as current).
11. The board of health shall facilitate access and support for families to complete screening tools to monitor their child's health and development, and provide a contact for families to discuss results and arrange follow-up.
12. The board of health shall provide the Children in Need of Treatment (CINOT) Program in accordance with the Children in Need of Treatment (CINOT) Program Protocol, 2008 (or as current). For CINOT-eligible children, the board of health shall provide referrals to oral health care providers and monitor the action taken.
13. The board of health shall provide or ensure the provision of the essential clinical preventive oral health services at least annually in accordance with the Preventive Oral Health Services Protocol, 2008 (or as current).

Infectious Diseases Prevention and Control

7. The board of health shall ensure that the medical officer of health or designate is available on a 24/7 basis to receive reports of and respond to infectious diseases of public health importance in accordance with the Health Protection and Promotion Act; the Mandatory Blood Testing Act; the Exposure of Emergency Service Workers to Infectious Diseases Protocol, 2008 (or as current); the Infectious Diseases Protocol, 2008 (or as current); the Institutional/Facility Outbreak Prevention and Control Protocol, 2008 (or as current); and the Public Health Emergency Preparedness Protocol, 2008 (or as current).
8. The board of health shall provide public health management of cases and outbreaks to minimize the public health risk in accordance with the Infectious Diseases Protocol, 2008 (or as current); the Institutional/Facility Outbreak Prevention and Control Protocol, 2008 (or as current); and provincial and national protocols on best practices.
9. The board of health shall ensure that the medical officer of health or designate receives reports of complaints regarding infection prevention and control practices and responds and/or refers to appropriate regulatory bodies in accordance with applicable provincial legislation and in accordance with the Infection Prevention and Control Practices Complaint Protocol, 2008 (or as current).
10. The board of health shall ensure that the medical officer of health or designate receives reports of and responds to complaints regarding infection prevention and control practices in settings for which no regulatory bodies exist, particularly personal services settings. This shall be done in accordance with the Infection Prevention and Control in Personal Services Settings Protocol, 2008 (or as current) and the Infection Prevention and Control Practices Complaint Protocol, 2008 (or as current).
11. The board of health shall respond to local, provincial/territorial, federal and international changes in disease epidemiology by adapting programs and services.
12. The board of health shall supplement provincial efforts in managing risk communications to the appropriate stakeholders on identified risks associated with infectious diseases of public health importance based on local epidemiology and epidemiological information.
13. The board of health shall communicate in a timely and comprehensive manner with all relevant health care providers and other partners about urgent and emerging infectious disease issues.

Rabies Prevention and Control

6. The board of health shall annually remind those individuals specified in the Health Protection and Promotion Act of their duty to report suspected rabies exposure.
7. The board of health shall ensure that the medical officer of health or designate is available on a 24/7 basis to receive reports of and respond to suspected rabies exposures in accordance with the Health Protection and Promotion Act; the Public Health Emergency Preparedness Protocol, 2008 (or as current); and the Rabies Prevention and Control Protocol, 2008 (or as current).
8. The board of health shall address the prevention and control of rabies threats as per a local Rabies Contingency Plan, as outlined in the Rabies Prevention and Control Protocol, 2008 (or as current).

Tuberculosis Prevention and Control

5. The board of health shall facilitate timely identification of active cases of TB and referrals of persons with inactive TB through immigration medical surveillance in accordance with the Tuberculosis Prevention and Control Protocol, 2008 (or as current).
6. The board of health shall provide management of cases to minimize the public health risk in accordance with the Tuberculosis Prevention and Control Protocol, 2008 (or as current).
7. The board of health shall provide or ensure access to TB medication at no cost to clients or providers.
8. The board of health shall provide or ensure the provision of the identification, assessment, and public health management of contacts of active cases in accordance with the Tuberculosis Prevention and Control Protocol, 2008 (or as current).
9. The board of health shall provide or ensure the provision of the identification and effective public health management of individuals with LTBI in accordance with the Tuberculosis Prevention and Control Protocol, 2008 (or as current), with a particular focus on people at highest risk of progression to active TB.
10. The board of health shall respond to local, provincial/territorial, federal, and international changes in disease epidemiology by adapting programs and services.

Sexual Health, Sexually Transmitted Infections, and Blood-borne Infections (including HIV)

7. The board of health shall provide clinical services for priority populations to address contraception, comprehensive pregnancy counselling, sexually transmitted infections, and blood-borne infections. For further information, refer to the Sexual Health Clinic Services Manual, 2002 (or as current).
8. The board of health shall ensure that the medical officer of health or designate receives reports of sexually transmitted infections and blood-borne infections and responds in accordance with the Health Protection and Promotion Act and the Sexual Health and Sexually Transmitted Infections Prevention and Control Protocol, 2008 (or as current).
9. The board of health shall provide or ensure access to provincially funded drugs for the treatment of sexually transmitted infections, at no cost to clients, in accordance with the Sexual Health and Sexually Transmitted Infections Prevention and Control Protocol, 2008 (or as current).
10. The board of health shall communicate and coordinate care with health care providers to achieve a comprehensive and consistent approach to the management of sexually transmitted infections and blood-borne infections.
11. The board of health shall engage community partners and priority populations in the planning, development, and implementation of harm reduction programming.
12. The board of health shall ensure access to a variety of harm reduction program delivery models which shall include the provision of sterile needles and syringes and may include other evidence-informed harm reduction strategies in response to local surveillance.

Vaccine Preventable Diseases

7. The board of health shall promote and provide provincially funded immunization programs to any eligible person in the health unit, including:
 - Board of health-based clinics;
 - School-based clinics (including but not limited to hepatitis B and meningococcal immunization);
 - Community-based clinics; and
 - Outreach clinics to priority populations.
8. The board of health shall, as part of the Public Health Emergency Preparedness Program Standard, have a contingency plan to deploy board of health staff capable of providing vaccine preventable disease outbreak management and control such as mass immunization in the event of a community outbreak.
9. The board of health shall provide or ensure the availability of travel health clinics.

Food Safety

6. The board of health shall ensure that the medical officer of health or designate is available on a 24/7 basis to receive reports of and respond to:
 - Suspected and confirmed food-borne illnesses or outbreaks;
 - Unsafe food handling practices, food recalls, adulteration, and consumer complaints; and
 - Food-related issues arising from floods, fires, power outages, or other situations that may affect food safety in accordance with the Health Protection and Promotion Act; the Food Safety Protocol, 2008 (or as current); the Infectious Diseases Protocol, 2008 (or as current); and the Public Health Emergency Preparedness Protocol, 2008 (or as current).
7. The board of health shall inspect food premises and provide all the components of the Food Safety Program within food premises as defined by the Health Protection and Promotion Act and in accordance with the Food Premises Regulation (O. Reg. 562); the Food Safety Protocol, 2008 (or as current); and all other applicable Acts.

Safe Water

10. The board of health shall ensure that the medical officer of health or designate is available on a 24/7 basis to receive reports of and respond to:
 - Adverse events related to safe water, such as reports of adverse drinking water on drinking-water systems governed under the Health Protection and Promotion Act or the Safe Drinking Water Act;
 - Reports of water-borne illnesses or outbreaks;
 - Safe water issues arising from floods, fires, power outages, or other situations that may affect water safety; and
 - Safe water issues relating to recreational water use including public beaches in accordance with the Health Protection and Promotion Act; the Beach Management Protocol, 2008 (or as current); the Drinking Water Protocol, 2008 (or as current); the Infectious Diseases Protocol, 2008 (or as current); the Public Health Emergency Preparedness Protocol, 2008 (or as current); and the Recreational Water Protocol, 2008 (or as current).
11. The board of health shall provide all the components of the Safe Water Program in accordance with all applicable statutes and regulations, and the Drinking Water Protocol, 2008 (or as current) to protect the public from exposure to unsafe drinking water.
12. The board of health shall inform the public about unsafe drinking water conditions and provide the necessary information to respond appropriately in accordance with the Drinking Water Protocol, 2008 (or as current).
13. The board of health shall reduce risks of public beach use by implementing a beach management program in accordance with the Beach Management Protocol, 2008 (or as current).
14. The board of health shall reduce the risks of recreational water facility use by implementing a management program in accordance with the Recreational Water Protocol, 2008 (or as current).

Health Hazard Prevention and Management

5. The board of health shall ensure that the medical officer of health or designate is available on a 24/7 basis to respond to and manage health hazards in accordance with the Health Protection and Promotion Act; the Identification, Investigation and Management of Health Hazards Protocol, 2008 (or as current); the Public Health Emergency Preparedness Protocol, 2008 (or as current); and the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).
6. The board of health shall inspect and assess facilities where there is an elevated risk of illness associated with exposures that are known or suspected to be associated with health hazards in accordance with the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).
7. The board of health shall implement control measures to prevent or reduce exposure to health hazards in accordance with the Identification, Investigation and Management of Health Hazards Protocol, 2008 (or as current) and the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).
8. The board of health shall develop a local vector-borne management strategy based on surveillance data and emerging trends in accordance with the Infectious Diseases Protocol, 2008 (or as current).
9. The board of health shall maintain systems to support timely and comprehensive communication with all relevant health care and other community partners about identified health hazard risks.