



Region of Waterloo Public Health **2003 Annual Report**

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Health Determinants Planning and Evaluation
June, 2004

Message from the Medical Officer of Health:

In 2003 Public Health continued to work towards our goal of building healthy and supportive communities. We achieve this goal by protecting the health of the community, promoting healthy lifestyles, preventing and minimizing risks to health, increasing our community's capacity to deal with conditions that affect their health, and by providing timely and appropriate ambulance services.

In 2003 we focused on reaching more citizens in our community.

For example, our early child development, communicable disease and immunization activities reached many immigrant newcomer families, and we continued to support Opportunities 2000 - a poverty reduction initiative. We are also serving a growing and aging community and have been expanding services to meet increased demand. For example, in Emergency Medical Services we continue to respond to more emergency calls each year.

In order to see the progress of our efforts, we made a commitment to enhance our monitoring of the health of our community. One of our new initiatives included the production of the Healthy Communities Report-a snapshot of the health of Waterloo Region. We also joined 22 other health units in Ontario in the on-going collection of health behaviour information through the Rapid Risk Factor Surveillance System.

2003 was also a year in which we faced SARS, highlighting the fact that new and emerging diseases have become an important priority in Public Health. West Nile virus is also a relatively new disease in North America, one which we are still learning about. These emerging diseases have challenged public health to evaluate its role in the prevention of, and preparedness for, new diseases as we move into the future. We have risen to these challenges in collaboration with local health care and municipal partners. At this time the public health system is under review at the federal and provincial level and we anticipate a refocusing of the public health system as a result of these reviews in the future.

Liana Nolan, Commissioner/Medical Officer of Health



Region of Waterloo
PUBLIC HEALTH

To provide and enforce strong, effective policies that ensure responsible and sustainable growth which recognizes the varying needs of our urban and rural citizens and communities, while creating and supporting a climate that encourages progressive economic prosperity.

To have an effective and efficient government that is responsive to the needs of the communities and individuals it serves.

To provide appropriate health and social services, environmental and cultural services for our residents and to ensure our community is the healthiest and safest in Canada.

To ensure that we spend wisely the dollars with which we are entrusted and to maximize their use for those we serve by maintaining a strong financial and organizational foundation.

TO BUILD HEALTHY AND SUPPORTIVE COMMUNITIES

Central Resources

To ensure efficient and effective administrative systems, financial management, human relations, marketing and communications, records management and information services within the PH department.

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To provide community access to information resources which support Public Health Programs and Services.

To facilitate compliance with the requirements of the Municipal Freedom of Information and Protection of Privacy Act, 1989.

To provide departmental reception and customer service functions in person and by phone.

To increase community awareness and knowledge of Public Health Programs and Services through effective marketing and public relations.

Environmental Health/Lifestyle Resources

To prevent and minimize risk factors by changing the conditions that impact on the health of the community.

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To reduce the incidence of foodborne illness.

To reduce morbidity and mortality associated with infectious diseases in health care institutions, daycare centres and personal service settings.

To reduce the incidence of injuries caused by bicycle and motor vehicle crashes, childhood injuries, improper use of child restraints, substance use/abuse and falls in the elderly.

To reduce premature mortality and morbidity from preventable chronic diseases.

To reduce adverse outcomes resulting from infectious diseases and environmental contaminants related to water quality, air quality, contaminated sites and rabies.

Family & Community Resources

To increase the proportion of children and youth reaching their developmental potential.

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To decrease the proportion of infants, children and youth who experience violence directed toward them.

To increase the proportion of parents of children and youth engaged in positive parenting.

To increase proportion of infants being breast-fed at 6 months or longer.

To increase the proportion of parents, infants, children and youth who practice risk management behaviours.

To increase the proportion of infants, children and youth with reduced exposure to hazardous substances in their environment.

Communicable Diseases / Dental / Sexuality Resources

To reduce and manage health risk to the individual and community through the responsive provision of specialized clinical services, clinical practice leadership and community outreach.

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To reduce the incidence of and complications from sexually transmitted diseases, including HIV/AIDS.

To reduce the prevalence of dental disease.

To reduce the incidence of vaccine preventable disease.

To reduce the incidence of tuberculosis.

To reduce the prevalence of communicable disease in the population.

To promote healthy sexuality.

To support healthy pregnancies.

Emergency Medical Services

To decrease premature morbidity and mortality where possible, by providing timely and medically appropriate out-of-hospital care and transportation.

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To increase emergency response time compliance as per the Council approved target.

To increase the proportion of Advanced Care Paramedics on staff.

To ensure the attendance of an Advanced Care Paramedic on every emergency call.

To minimize medication errors and any subsequent adverse patient outcomes.

To minimize the incidence of critical vehicle and/or equipment failures and their effect on call outcome.

Health Determinants, Planning & Evaluation

To increase the collective capacity of staff and citizens to develop policies and programs which address the social, economic and environmental conditions that affect public health.

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To increase access to safe, nutritious food, grown in a sustainable way.

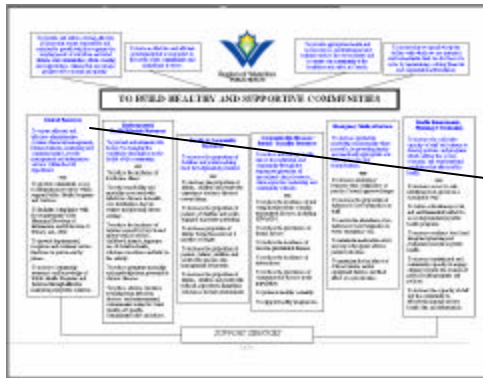
To reduce educational, social and environmental barriers to accessing mandatory public health programs.

To increase evidence based and integrated planning and evaluation relevant to public health.

To increase institutional and community capacity to engage citizens towards the creation of public health programs and policies.

To increase the capacity of staff and the community to effectively manage and use health data and information.

SUPPORT SERVICES



Central Resources

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Central Resources

Resource Centre

Education and Skills Development

Collection reached:

- Over 6,000 teaching kits, books, videos, posters and pamphlets for a variety of age groups.
- Main topics included: nutrition and healthy eating; food safety; prenatal, child and youth health; parenting; cancer prevention; dental health; Sexually Transmitted Disease prevention; and community development.

Services provided to clients:

- Lent 4,727 teaching kits, books, videos and posters
- Responded to 4,752 requests for information about resources
- Distributed 135,784 pamphlets on various health promotion themes
- Placed 199 orders for resources on behalf of the department
- Centrally managed Audiovisual (AV) resources for staff
- Answered over 1,000 questions related to AV
- Provided 47 AV training sessions

Accessibility of resources:

- Provided access to information resources supporting Public Health programs, services and initiatives to anyone who lives, works or goes to school in Waterloo Region
- Partnered with Waterloo Regional Library to allow public to borrow through rural township libraries <http://www.rwl.library.on.ca/index.html>
- The Resource Centre's catalogue can be searched at the Public Health website:

Supported Public Health programs, services and initiatives by working with staff to increase their effective and strategic use of professional information resources:

- Conducted 31 literatures searches for managers in support of evidence-based public health
 - Provided 19 training sessions for staff teams on effective information search strategies
 - Distributed 3,242 table of contents alerts from journals to staff
 - Located and obtained 267 journal articles for staff through external partnerships
 - Distributed 1,081 journal articles to staff from the Resource Centre collection
 - Provided 37 new staff orientations to Resource Centre services
 - Managed paper and electronic journal subscriptions on behalf of the department
- <http://www.region.waterloo.on.ca/ph>, choose Resources then Resource Centre.



Environmental Health/Lifestyle Resources

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Environmental Health/Lifestyle Resources

Air Quality

Monitoring / Surveillance

- Announced 5 smog alerts covering 12 days

Cancer Prevention

Communication

- Focused cancer prevention efforts on skin cancer, cervical cancer and breast health
- Actively promoted the Ontario Breast Screening Program
- Worked with health care providers to promote cervical screening
- Active in Cancer Prevention / Screening programs, Sun Safety Awareness and Artificial Tanning Awareness Initiatives throughout the year

Education and Skills Development

- Disseminated over 6000 resources on cancer prevention and early detection of cancer
- Provided 38 community presentations and displays
- Provided 64 phone / email consultations with the public

Networking

- Held 32 meetings with community partners
- Provided 252 professional consultations

Food Safety

Monitoring / Surveillance / Enforcement

- Completed 1496 high risk (eg. full service restaurant or hospital kitchen), 1753 medium risk (eg. fast food, take out) and 521 low risk (eg. convenience store) inspections
- Upheld food safety in food premises, 12 tickets were issued and 3 premises were closed in the region. Tickets are issued for continued non

compliance. Premises are closed if the public safety is immediately compromised eg. lack of refrigeration, potable water, sewage back up

- Continuous reporting of incidence of food borne illness. Staff followed up with 100% of these reports within 24 hours of receiving the information

Communication

- Conducted 26 media interviews pertaining to food safety issues.

Education and Skills Development

- Provided food safety information to all regional schools in both the public and Catholic school boards regarding safe food handling
- Offered 4 displays and education sessions on food safety information in the community
- Certified Public Health Inspectors delivered the Food Safety Certification training course; 598 participants were certified, a 35% increase over 2002

Health Hazards

Monitoring / Surveillance / Enforcement

- Issued 116 septic permits

Heart Health

Networking

- The Together for Health coalition (funded by the Ministry of Health and Long Term Care)
- Continued to be active with more than 40 community action meetings and 14 joint initiatives.
- Worked with 44 individual partners and 23 partner organizations
- Received 500 in-kind volunteer hours and 862 in-kind community partner staff hours

Education and Skills Development

- Delivered 28 presentations to a total of 1020 attendees
- Distributed 2,700 Together for Health resources in the community through workshops, displays and other initiatives

Infection Control

Monitoring / Surveillance / Enforcement

- Inspections included food safety, hand washing, environmental sanitation laundry and diaper areas, toys etc.
Frequency of inspection is determined by a risk assessment categorizing premises as high risk, medium risk and low risk. This is determined by population (eg. immune compromised, very young, very old), type of foods served (eg. meats, eggs, dairy and food preparation steps) and history of compliance
- Completed 117 high risk, 37 medium risk and 21 low risk child care inspections
- Completed 19 high risk, 28 medium risk and 18 low risk residential facility inspections
- Completed 7 high risk hospital inspections
- Completed 74 high risk and 8 medium risk long term care inspections
- Completed 99 inspections of personal service settings eg. beauty salons, tattoo, esthetician, manicurist, pedicurist, ear piercing
- Received notification of enteric outbreaks (eg. Vomiting, diarrhea, abdominal cramps and nausea) throughout the year, specifically in health care institutions and child care centres
- Responded to all (89) enteric outbreaks within a 24 hour period

Communication

- Conducted 21 media interviews
- Implemented Big Shot Challenge Initiative which seeks to increase Influenza vaccination rates to over 90% in Long Term Care Facilities staff

- Repeated the promotion of influenza vaccinations to long-term care facility staff. Facilities in the region achieved an 88% influenza immunization rate in long-term care facility staff and 94% in residents
- Introduced exciting new campaign called “Do Bugs Need Drugs”, an initiative that promotes the wise use of antibiotics

Education and Skills Development

- Hosted 4 infection control forums - for child care providers, residential facilities operators and 2 for long-term care providers; current information on outbreak management, specimen collections, infection control management and available public health services
- Other education included: 113 puppet shows on handwashing to children in child care facilities, 14 presentations and in-services and 9 community displays

Injury Prevention

Communication

- Initiated / responded to 11 media contacts

Education and Skills Development

- Held 38 educational sessions / workshops with 3,000 participants
- Organized 23 special events and two informational campaigns
- Responded to 330 public inquiries
- Made 22 referrals to community supports

Networking

- Organized over 120 meetings and 13 joint initiatives with community partners

Resource Development

- Developed 10 new resources for programs on bicycle safety and helmet usage, car seat clinics, falls prevention, substance abuse, and Active and Safe Routes to School
- Distributed more than 8,000 materials

Nutrition

Communication

- Conducted nutrition campaigns including: Ask a Dietitian, Eat Smart! and Discover Healthy Eating
- Had 60 media contacts through newspaper, TV, radio and newsletters

Education and Skills Development

- Distributed 62,000 nutrition-related resources, 865 Healthy Eating kits and 40,000 Eat Smart! Dining Guides
- Provided 121 professional and public consults

Resource Development

- Held Eat Smart poster contest for elementary students - 288 posters submitted

Physical Activity

Communication

- Physical activity initiatives focused on children; included TV Turnoff Week and Winter Active programs delivered in elementary schools

Education and Skills Development

- Delivered 28 presentations, workshops, health fairs, and contests
- Distributed more than 11,000 physical activity resources in the community

Resource Development

- Developed 10 educational materials for physical activity programs

Public Places Smoking

Monitoring / Surveillance / Enforcement

- Smoking By-law achieved a compliance rate exceeding 99%
- Municipal Tobacco Law Enforcement Officers performed 2,242 inspections
- 18 patrons charged with smoking in a public place

- 3 proprietors charged for failing to ensure compliance with the smoking by-law
- 9 proprietors convicted for failing to ensure compliance with smoking by-law (3 charges are still in the courts)
- Issued 8 prohibition orders for 2 year terms against convicted proprietors

Rabies Control

Monitoring / Surveillance / Enforcement

- Carried out 872 rabies control investigations
- Sent 57 animals for testing
- Issued vaccines to 64 potentially exposed humans
- One animal tested positive for rabies (bat)
- Issued 12 warning letters to cat and dog owners who did not have their pets vaccinated

Resource Development

- Designed and distributed 30,000 copies of rabies pamphlet

Smoking Cessation and Tobacco Use

Prevention

Communication

- Involved in World No Tobacco Day, Breathing Space, Lungs are for Life Workshops, and National Non Smoking Week
- Had 49 media contacts

Education and Skills Development

- Provided 168 public and professional consults
- Distributed over 15,000 resources on smoking cessation through the Public Health Resource Centre, Prenatal Health Fairs, the Race Against Drugs program activities and other initiatives

Resource Development

- Developed 25 new smoking cessation promotional and educational materials

Environmental Health / Lifestyle
Resources
Continued

Tobacco Control Act

Monitoring / Surveillance / Enforcement

- Conducted 387 routine inspections of tobacco retailers (100% of target)
- Completed 104 enforcement checks and 193 compliance checks; 98% (290) of retailers were in compliance
- Performed 31 surveillance checks with no charges laid
- Observed 85 students and several members of the public smoking on school property - warnings were issued to some individuals
- Based on "three strikes policy," 2 students were charged with smoking on school property

- Distributed 50,000 brochures ("Fight the Bite") to individuals/businesses/golf courses/garden centres, etc. (educational material)

Education and Skill Development

- Received 3,373 calls on region's WNV hotline

Water Quality

Monitoring / Surveillance / Enforcement

- Conducted 462 pool inspections
- Private well samples for May – December 2003 revealed - 61 unsafe to drink, 379 significant evidence of contamination, and 994 no significant evidence of contamination
- Issued 18 Boil Water Advisories - 3 municipal (1 was precautionary), 15 private

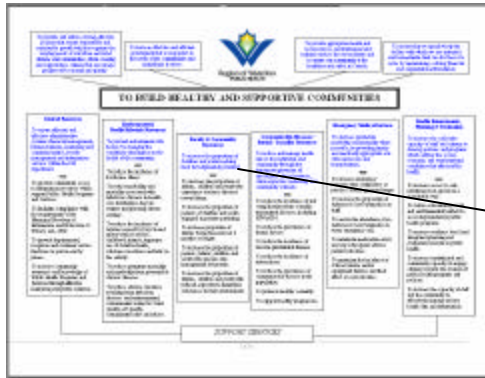
West Nile virus:

Monitoring / Surveillance / Enforcement

- Submitted 34 crows for West Nile virus (WNV) testing - 24 tested negative, 5 positive birds for WNV, 4 were not suitable for testing
- Out of 7,581 mosquitoes tested (150 pools), one positive adult mosquito pool found in region
- Larvicided 27,000 catch basins and 8 temporary standing water sites throughout region for WNV

Communication

- Distributed 180,600 postcard mailers ("Fight the Bite") to every household in the region (educational material)



Family & Community Resources

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To increase the proportion of infants, children and youth with reduced exposure to hazardous substances in their environment.

Family & Community Resources

Family Health

Breastfeeding Support

Communication

- Developed breastfeeding week campaign
- Distributed about 1250 breastfeeding posters
- Made 8 media contacts, including 7 press releases on breastfeeding information, 1 appearance on local TV
- Submitted 3 articles for Physician's Update Newsletter, and 1 Community Health Report in September 2003
- Breastfeeding promotion featured on 119 bus ads

Education and Skills Development

- Provided 4,035 breast feeding support nursing assessment and information visits to sites (eg. Clinics at regional hospitals, family physicians, home visiting)
- Had breastfeeding display at 3 prenatal fairs
- Provided 2 breastfeeding presentations – 1 to community, 1 to health professionals
- Had 7 Public Health Nurses (PHN) attend trainings on general breastfeeding
- Provided 3 interest-based breastfeeding knowledge and skills development workshops for Public Health Nurses and Family Visitors – with a total attendance of 55
- Sent 4 PHN's to a 3-day breastfeeding course
- Distributed 374 physician tools "The Crying Infant"

Policy Planning Development and Advocacy

- Assisted community groups in increasing the number of breastfeeding locations in the community. Now have sites at Public Health (2), malls (2) and Kitchener City Hall
- Assisted in development and implementation of Breastfeeding Buddies peer support program

Equal Access

- Developed Cultures Behaviours and Customs, Understanding and Communicating with Culturally Diverse Families – resource binder providing information to support service providers working with families from diverse cultures
- Services available in 28 languages to families participating in the Family Health Program
- Developed a protocol (with community partners) for working with the Low German Speaking Mennonites from Mexico
- Healthy Babies Healthy Children brochure and marketing materials made available in 11 languages
- Nipissing (child developmental) screening tool made available in English and 2 other languages
- Focused two of the Child Health Fairs on reaching ethnocultural families
- Distributed 19 car seats to 17 families in need involved in the Healthy Babies Healthy Children program

Healthy Babies Healthy Children (HBHC) Clinical Services

- Offered 3601 prenatal screens and 4775 postpartum screens (completed from birth to 6 weeks) and 133 early identification screenings (completed after 6 weeks) to identify high risk families requiring support and referral
- Public Health Nurses contacted 3842 families within 48 hours and another 444 families after 48 hours of hospital discharge
- Conducted in-depth assessment with 352 families - 98% (345) were referred to the HBHC Public Health Nurse / lay home visiting

program; this program offers healthy child development support

Communication

- Communicated HBHC in Cambridge, Kitchener and Waterloo Leisure Guide(s). Also had a listing in the New Parent Resource Guide.
- Distributed information in: Ontario Health Report to Taxpayers (government report) - Spring (April) 2003; Synergy (Alliance for Children and Youth Newsletter) – article on 18-month Well-baby check-up HBHC Campaign; Physician’s Update(s) – January and July 2003 – articles; Health In Action - 1st Quarter – article; Family Health Website - updated general information; E-Health Unit website features 18-month Well-baby Check-up Campaign information - campaign info
- Posted interior bus ads - 114 ads for year-round HBHC Advertising; 114 ads for 18-month Well-baby Check-up Campaign; Read, Sing, Play HBHC Early Identification Campaign

Education and Skills Development

- Public Health Nurse postpartum visits were accepted by 2072 families
- Home visiting program saw 562 high risk families; 462 families received Public Health Nurse services and 181 received other professional services
- Delivered 7914 home visits to the high risk families
- Held 7 HBHC orientation / training sessions for community partners
- Staff trained, established and implemented the Integrated Service for Children Information System (ISCIS), a new version of the database
- HBHC display at 18 events attended by 2962 people

Policy Planning Development and Advocacy

- Developed Family Visitor Practice Guidelines, Prenatal to Age Three. These guidelines are a

resource for Healthy Babies Healthy Children (HBHC) Family Visitor program

- Signed a three year Service Agreement with Waterloo Family and Children's Services outlining collaborative implementation of the HBHC program for families where children have been identified as being in need of protection, adoptive families and foster parents
- Signed a three year Service Agreement with St. Monica Place for the collaborative implementation of the HBHC Program for young mothers living at St. Monica and Monica Ainslie Place

Healthy Child Development

Clinical Services

- Completed developmental screening for 248 children under the age of six from 200 families at Child Health Fairs

Communication

- Wrote two “Ask a Dietitian” columns in local newspaper
- Had nutrition display at 2 prenatal health fairs and 5 child health fairs
- Distributed hundreds of nutrition pamphlets at health fairs

Education and Skills Development

- Responded to 7027 calls (eg. parenting, growth and development , breastfeeding) to the Healthy Children Information Line (HCIL)
- Provided 303 nutrition phone consultations, of which 208 were from HCIL
- Distributed nutrition pamphlets to 68 HCIL clients
- Completed nutrition presentations – 8 to public, 2 to childcare providers
- Provided 119 nutrition consultations with staff
- Public Health Nurses provided services (eg. screening, assessment, health teaching, referral to appropriate services and immunization) to support families with children 0 - 6 years of age

Family & Community Resources

Continued

Family & Community Resources

Continued

at five community-based centres in the townships of Wilmot, Wellesley, Woolwich and North Dumfries; held 35 half-day sessions and had 480 clients participate

- Collaborated with 25 community agencies, Public Health programs and Social Services programs to hold 5 Child Health Fairs across Waterloo Region; had immediate referral and screening was available for speech-language, vision and dental issues
- Community agencies provided information booths on car seat safety, child care, parenting programs and the Early Years Centres
- Provided one-on-one instruction on the safe use and installation of the car seats.
- Distributed 7000 brochures on various topics, 5400 magnets featuring the Healthy Children Information Line phone number and 350 bibs designed with the slogan “Healthy Babies Healthy Children ... reaching new heights” in addition to other resources at health fairs
- Trained 137 health care professionals in the use of the Routine Universal Comprehensive Screening (RUCS) Protocol; asking all women (over 12 years of age) about current and previous abuse during routine health assessments
- For the first time four professionals working in violence prevention volunteered to be RUCS Protocol trainers (3 from community agencies - 1 urban, 2 townships and an individual / couples / family therapist)

Policy Planning Development and Advocacy

- Identified 4 policy areas relating to Family Health – World Health Organization code on formula samples, Special Diet process, Loaning of Food Mills, Referral Process to Nutritionist,
- Offered a free 60 hour Skill Development Workshop to the community to support community members in developing home visiting skills and increasing employment capacity

- Workshop topics included: parenting, attachment, child growth and development, nutrition, child safety, working with immigrant families, engaging hard to reach families, personal safety and relationship building; had 35 participants

Parent Education

Education and Skills Development

Staff referred to parenting programs offered by agencies across the region. Also collaborated with K-W Counselling on BabyFAST and Nobody’s Perfect; our funding supported the delivery of these programs.

BabyFAST

- opportunity for young mothers with their baby and another adult support (eg. friend, relative, baby’s grandmother) to develop new skills
- Offered 2 cycles of 9 meetings each, with 22 participating families
- Public Health Nurse served on the supporting team at each Baby FAST session

Nobody’s Perfect

- Supportive program for parents with young children
- Offered 7 cycles of 6 meetings each, with 57 participating families.

Youth Health

Healthy Youth Development

Education and Skills Development

- Provided Curriculum Support at 3 Puberty Teacher Training Workshops, total of 54 teachers participating in these workshops
- Provided Puberty Questions and Answer Sessions at 18 Elementary schools, to approximately 920 students
- Collaborated with community stakeholders on half-day “Gambling Forum: Strategies to Promote Change” held on May 13, 2003; was attended by 29 participants from community, education, social services, counseling services, police services and academia

- Resulted in organization of the “Waterloo Region Action Group on Gambling Issues”

Violence Prevention

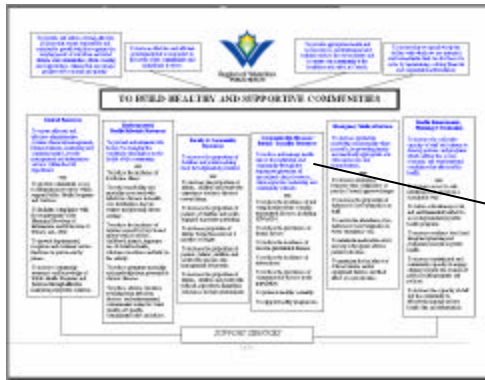
Education and Skills Development

- Offered the second phase of Bullying Prevention to 8 new elementary schools with a population of approximately 2,250 students
- Implemented Teen Esteem Program in 10 Public Senior schools, worked with 180 female students from Grades 7 and 8 on building self esteem

Policy Planning Development and Advocacy & Resource Development

Developed, in partnership with both Boards of Education, “Imagine...A School Without Bullying: A School Climate Approach to Bullying Prevention”; this is a comprehensive resource manual to guide and assists schools to address bullying.

Family & Community Resources
Continued



Communicable Diseases / Dental / Sexuality Resources

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To reduce the prevalence of dental disease.

To reduce the incidence of vaccine preventable disease.

To reduce the incidence of tuberculosis.

To reduce the prevalence of communicable disease in the population.

To promote healthy sexuality.

To support healthy pregnancies.

Communicable Diseases / Dental / Sexuality Resources

AIDS / STD

Monitoring / Surveillance

- In 2003, 9 new HIV cases were reported, an increase from 5 cases reported in 2002
- Chlamydia cases rose 7%, to 738 cases reported in 2003
- The occurrence of gonorrhoea and syphilis continued within the guidelines issued by the Ontario Ministry of Health and Long term Care

Clinical Services

- STD clinic attendance continued its rise with 2800 client visits, up 13% from 2002. STD clinics operate 9.5 hours per week at 3 different sites within Waterloo region.
- 3,000 consultations occurred with physicians, agencies, schools and clients to manage cases of reportable STDs in Waterloo region

Education and Skills Development

- In 2003, 1,400 gross or 200,000 condoms and 23,000 clean syringes and needles were distributed free of charge to support harm reduction strategies to reduce the transmission of STDs including HIV and other blood borne infections
- Staff and students from 12 local secondary schools, one senior public school and a church youth group attended an AIDS Awareness Week workshop. Afterwards they planned activities included assemblies with guest speakers and fund raising activities for the local AIDS service organization.

Communicable Disease Control

Monitoring / Surveillance

As a result of the global impact of SARS:

- Surveillance for respiratory illness continued in Ontario and in Waterloo Region
- During the SARS emergency in Ontario, 75 persons with possible SARS symptoms were reported and subsequently followed up with by the Communicable Disease staff
- An additional 75 persons reported visiting possible exposure sites for SARS in the GTA, requiring quarantine and active monitoring by staff for between 1 to 10 days.

Respiratory outbreaks:

- Fifty (50) respiratory outbreaks in acute and long term care facilities were investigated

Tuberculosis:

- 26 possible cases of Tuberculosis were reported and investigated, with 17 cases being confirmed
- 154 persons were identified under the Immigration Medical Surveillance program for Tuberculosis follow up in Waterloo Region (Immigration Canada forwards information to Health Canada for follow up if immigrants have a chest X-ray that looks like there may have been a past Tuberculosis infection)
- These persons are required to: report to public health in the area that they are residing within 30 days of entering the country; and required to see a physician for further examination.
- Persons may not follow up with public health as they are not residing in the area named upon entering Canada or if they were identified late in the year. They may not follow up with a physician immediately if they do not have a

Communicable Diseases/ Dental/ Sexuality Resources

Continued

physician or do not have medical coverage (for many, OHIP is not available for the first 3 months after entering the country).

- By the end of 2003, 38% of these persons had completed an initial medical exam. This percentage is similar to previous years.

West Nile virus – human cases:

- Surveillance was increased with 78 possible cases and one confirmed case reported

Clinical Services

- Responded to over 12,500 calls from professionals and the public on the infectious disease information and reporting lines
- International Travel Clinic saw 4,451 people for immunization and preventive medications despite impact of SARS on world travel

Dental

Clinical Services

In the 2002/2003 school year:

- 30,499 school children had dental screening in schools for urgent and preventive dental needs
- Multiple screening methods identified 1,914 children in need of dental assistance
- 84% of the families responded to the request for interventions
- Of this number, 49% had dental coverage and 683 (36%) requested assistance under the Children Need of Treatment (CINOT) Program
- Of this number, 660 (98%) initiated treatment and 580 (85%) completed.

CINOT provides free dental treatment to children up to age 13 with urgent dental needs who do not have dental insurance or the ability to pay for dental care.

The Regional Dental Clinic services: children 12 – 18 years of age not covered by the CINOT program and without other insurance, and emergency adults. In 2003 the dental clinic had:

- 965 children in Regional Children's clinic

- 2830 treatment appointments (approximately 3 appointments per child)
- 234 emergency adults in adult clinic
- 509 treatment appointments (approximately 2 appointments per adult)

Reproductive Health

Monitoring / Surveillance

Low Birth Weight

- Low Birth weight rate was 5.6% for general population and 6.8% among teens

Education and Skills Development

Prenatal Classes

- Adolescent prenatal classes had an attendance of 140, an increase of 30% in comparison to 2002

Prenatal Health Fairs

- Held 3 prenatal health fairs; 1,800 participants attended
- 25% of participants were planning a pregnancy

Prenatal Nutrition Program

- Operated prenatal nutrition program out of five community sites - program aimed at financially disadvantaged or socially isolated pregnant women, including adolescents and new Canadians
- Made 2,500 pre and post natal contacts
- Sites had average attendance of 120 per week

Sexual Health

Monitoring / Surveillance

Adolescent pregnancy

- Adolescent pregnancy rate was 30.0 / 1,000 adolescents, a decrease from 39.2 / 1,000 in 2002

Clinical Services

- Approximately 2,300 clinic visits took place in the on site sexual health clinic

- 1,500 counselling contacts took place on site and 2,900 in the public high schools

Education and Skills Development

- 1,700 contacts were made in educational community sessions (eg. Growing Bodies, Open Minds)

Research and Evaluation

- Girl Time, a healthy sexuality program for grade 7, 8 girls was implemented and evaluated.

Resource Development

- Developed resource material in partnership with the community and schools and was distributed (eg. Abstinence pamphlet, Sexuality and the Developmentally Disabled, Making a personal safer sex plan, Healthy Relationships)

Vaccine Preventable Diseases

Clinical Services

Confirmed numbers - Day Care Coverage

- Approximately 5223* children are in day care centres. The total number of day care centres is 116.
- On average, Public Health has the required information related to immunization status for the majority of children in day care (85%)
- On average, Public Health does not have immunization status information for the remaining 15% of children in day care

** The 5223 total reflects the number of records actually received. On average, that number is probably 15% higher.*

Enforcement of Immunization of School Pupils Act

- 23,553 Pupils in Grades 2, 3, 4 and 5
- 3,000 pupils at risk of suspension in Jan 2004
- 170 of pupils suspended on March 25th, 2004
- 22,892 (97.22%) complete for DPT / Polio (Diphtheria, Pertussis, Tetanus) and MMR (Measles, Mumps, Rubella) by April 2004

Hepatitis B prevention

Confirmed eligibility and refusals - Universal School Immunization Program of Grade 7 / 8 students

- 6319 students in the region were eligible for Hepatitis B immunization
- 314 refusals occurred, usually for religious or philosophical reasons
- (90%) received 1st dose in Grade 7
- 5177 (81%) received 2nd dose in Grade 7
- 66% coverage in Parochial schools

** Factors contributing to discrepancies in numbers, eg. consent received but child refuses, not notified vaccine given elsewhere, child receives only one shot, families move, same child entered twice under different names, rely on information sent from the schools*

Influenza prevention 2003-2004 season:

- Approximately 141,068 (30%) people immunized
- 24,289 immunized in workplace sites, including Long Term Care (LTC) facilities
- 22,299 (compared to 15, 225 in 2002-2003) immunized by Public Health
- 94,480 doses of vaccine distributed to family physicians
- 88% of staff immunized in LTC Centres
- 94% of residents immunized in LTC Centres

Public Health Immunization Clinics

- Given at Waterloo and Cambridge sites 1188 immunizations
- Given at outreach sites (rural and new immigrants) 400 immunizations
 - Numbers do not include Travel, Sexual Health / AIDS – STD or Influenza Clinics
- Responded to 8,968 calls to the Vaccine Information Line
 - 1,147 (average) calls per month since September 2003
 - 445 (average) calls per month prior to September 2003
- Recorded 39% increase in calls to the Infoline between September 2003 - April 2004

Communicable Diseases/ Dental/ Sexuality Resources

Continued

Communicable Diseases/ Dental/
Sexuality Resources

Continued

Physician visits:

- Completed 169 (includes group practices) visits which were to monitor the safe storage of publicly- funded vaccines
- In 40% of the visits identified incorrect vaccine storage, or failure to follow documentation procedures
- Identified vaccine wastage of \$123,029
- Recorded \$36,132.68 wastage after Power outage
- Identified 3 (75% of hospitals) of hospitals with incorrect vaccine storage
- Recorded a total of \$3,746.68 in vaccine wastage



Emergency Medical Services

To decrease premature morbidity and mortality where possible, by providing timely and medically appropriate out-of-hospital care and transportation.

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To increase emergency response time compliance as per the Council approved target.

To increase the proportion of Advanced Care Paramedics on staff.

To ensure the attendance of an Advanced Care Paramedic on every emergency call.

To minimize medication errors and any subsequent adverse patient outcomes.

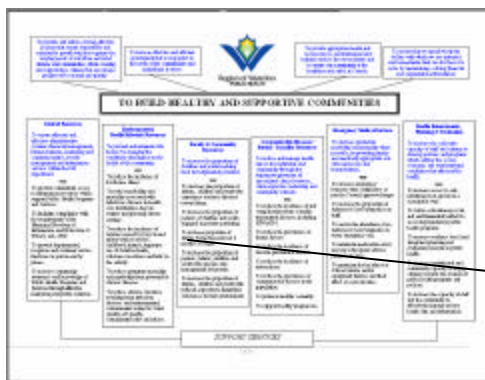
To minimize the incidence of critical vehicle and/or equipment failures and their effect on call outcome.

Emergency Medical Services

Clinic Services

Delivery of ambulance services:

- Recorded 44,150 calls for ambulances, including 25,917 (59%) emergency calls, 16,782 (38%) standby calls where we help provide coverage when another ambulance is busy in local or neighbouring areas and 1,451 (3%) patient transfer calls where a person is transported between facilities
- Regional Council set an Emergency Response Time target of reaching emergency calls in 9 minutes; 65.9% of emergency calls were reached within 9 minutes, 90% of all emergency calls were reached in 12 minutes and 59 seconds or less
- The number of emergency calls increased 13.1% 2003 over 2002
- Relocated Waterloo Station and the constructed new facility in St. Jacobs
- Emergency Medical Services operated 20 vehicles from 7 stations
- Almost 13,000 hours of new ambulance coverage were added
- Fifteen new paramedic positions were added
- Of the service's 116 paramedics, 66 were Primary Care Paramedics while 50 had the additional training and skill sets required of Advanced Care Paramedics
- Advanced Care Paramedics responded to 98.8% of all Cardiac Arrest calls during the year



Health Determinants, Planning & Evaluation

To increase the collective capacity of staff and citizens to develop policies and programs which address the social, economic and environmental conditions that affect public health.

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To increase access to safe, nutritious food, grown in a sustainable way.

To reduce educational, social and environmental barriers to accessing mandatory public health programs.

To increase evidence based and integrated planning and evaluation relevant to public health.

To increase institutional and community capacity to engage citizens towards the creation of public health programs and policies.

To increase the capacity of staff and the community to effectively manage and use health data and information.

Health Determinants, Planning & Evaluation

Food Systems

Networking and Communication

Foodlink Waterloo Region (incorporated January 2002)

- Two Year report published
- Delivered 24 Foodlink Friday email broadcasts
- Developed Foodlink Waterloo Region website
- Printed and distributed 40,000 Buy Local Buy Fresh Maps
- Media strategy launched

Education and Skills Development

Community Gardens

- Held 4 community garden workshops
- Held "Planting the Seeds of Community" special event

Cultural influences of ethnicity on food choices

- Developed 21 ethnocultural food fact sheets
- Held a staff training session with approximately 30 participants. Twelve public health staff reported significant increase in understanding of ethnic food traditions and 5 reported plans to incorporate information into programming

Ontario Public Health Association (OPHA) Food Biotechnology Work Group

- Developed 5 fact sheets on public health issues and food biotechnology and posted on OPHA website. Counted 516 hits to OPHA website and responded to 28 follow up requests

Urban Agriculture

- Held 6 urban agriculture workshops

Policy Planning Development and Advocacy

Fish Consumption Policy

- Completed a position paper on fish consumption (with respect to Methylmercury

content) by pregnant women, women on childbearing age, and young children

Ontario Public Health Food Security (OPHA) Work Group

- developed a Foodnet website. The web site links organizations involved in food security in Ontario and allows them to share information on food security programs, policy and research initiatives, community action and advocacy efforts.

Research and Evaluation

Ethnic Food Store Research

- Surveyed 22 ethnic food stores in Waterloo Region concerning local produce and food product purchasing

Food Access Report

- The report estimates the cost of a healthy diet purchased at grocery and convenience stores in Waterloo Region;
- Identifies urban areas with limited access to grocery stores and other food outlets
- increases understanding of how food costs relate to other costs of living

Growing Food and the Economy: Economic Impact Study of the Agricultural and Food-Related Sectors in Waterloo Region

- Found that the food production, processing, distribution, and retail components of the local food system generate \$2.7 billion in annual sales and supports over 26,000 food related jobs in Waterloo Region
- Study was supported by HRDC funding
- Launched report at Waterloo Farm Festival in October, 2003

Internal Food Guidelines Working Group

Health Determinants, Planning & Evaluation

Continued

- formed in April 2003 to develop guidelines for Public Health that will encourage the availability of healthier food choices
- The first of two surveys was carried out to determine staff support for adding healthy food options by on-site food providers, in vending machines and at meetings

Literature Review on Link between Food and Air Quality

- literature review completed

Institutional Food Purchasing Project

- Report on the feasibility of purchasing local produce in two Regional institutions

Citizen Engagement

Education and Skills Development

Community Nutrition Worker Program

- 12 training sessions held and 14 Community Nutrition Workers certified

From the Ground Up

- Trained 14 citizens in facilitation
- Held conference for 50 community members on policy advocacy
- Raised additional \$11,4000 in funding

Peer Health Worker

- Provided 10 training sessions and certified 9 Peer Health Workers
- 6 peer program advisory committee meetings held
- Coordinated delivery of 32 peer programs with 360 participants

Policy Planning Development and Advocacy

Multi-Sectoral community processes supporting the Determinants of Health

- Launched 5 new initiatives
- Sponsored 10 projects / events

- Submitted 10 funding proposals – including Community Coalition on Immigrant and Refugee Concerns applying for Heritage Canada funding for ethno-cultural school project and RENT (Renters Educating and Networking Together) receiving United Way of KW funding for Tenant Manual

Opportunities 2000

- Completed initial planning for youth poverty prevention project
- Completed research on sustainable livelihoods approach in Waterloo Region
- Completed evaluation of the Opportunities 2000 initiative 2002-2003

Epidemiology

Research and Evaluation

Information Transfer

- Responded to 183 data requests internal and external to Public Health
- Conducted 15 staff training events focusing on statistical and data collection methods

Integrated Services of Child Information System (ISCIS)

- Followed-up changes to ISCIS system (used for collecting information about the Healthy Babies, Healthy Children program) with report, "Methodological Analysis of the ISCIS Data Gathering Process"; outlines improvements and ongoing challenges with assuring quality data

Kitchener-Metropolitan Area Survey (KMAS) 2003

- Partnered with the University of Waterloo as co-researchers in the Kitchener-Waterloo Metropolitan Area Survey
- Public Health designed three modules including questions about pesticides, smoking in the workplace and local food
- Results for all three modules were analyzed and presented to the Regional Community Services Committee

Health Determinants, Planning & Evaluation

Continued

RRFSS (Rapid Risk Factor Surveillance System)

- In September 2003 became one of 23 public health units in the RRFSS initiative, an on-going telephone survey administered by the Institute for Social Research, at York University
- Each month, 100 adults (aged 18 years and older) in each health unit area are randomly selected and complete the RRFSS survey
- RRFSS is flexible at gathering information on identified information needs, health behaviours and risk factors. It provides current, local health information to support program planning and evaluation, to advocate for public policy development and to improve community awareness

Planning and Evaluation

Access and Equity

- Coordinated Access and Equity Steering Group, planning and resource development
- Translated Peer Health Programs brochure into Amharic
- Initiated planning to expand focus of Peer Programs to vulnerable populations
- Added Access and Equity considerations to Research and Evaluation Approval Process
- Initiated regular meetings between Public Health staff and Newcomers Services of the K-W YMCA to improve newcomers' access to Public Health programs

Education and Skills Development

- Held 2 staff training sessions on Access and Equity (attended by 20 participants) and "Where Can I Find the Data I Need For...?" (attended by 21 participants)
- Developed three Quick Guides (Developing Work Plans; Survey Design; Participant Observation; Document Evaluation) to assist staff in research and evaluation activities

Research and Evaluation

Monitoring

- Monitored research and evaluation activities across Public Health. These include projects that Public Health Staff either lead and community projects where Public Health participates
- In 2003, Public Health initiated 26 studies and completed 23 (not including on-going evaluation projects) :

2003 Public Health Research Projects (Initiated and/or Completed in 2003):

- Flu Clinic Patient Survey – Completed
- Resource Centre User Survey – Completed
- Early Years Centres survey – Completed
- Rural Health Study - Completed
- Growing Food and Economy Study- Completed
- Waterloo Region Flu Physician Survey - Completed
- Take Five – Completed
- Making Use of Immigrant Skills - Completed
- Puberty Resource Binder Evaluation – Completed
- Heart Health Resource Follow up Survey - Completed
- Anti-Idling Survey- Completed
- North Dumries Health Survey- Completed
- Smog Alert Response Plan Evaluation- Completed
- The impact of introducing RUCS into PHN practice
- Ethnic Food Purchasing Project - Completed
- Grade Six healthy Program Lesson and Eat Smart- Completed
- High School Heart Health Campaign- Completed

Health Determinants, Planning & Evaluation

Continued

- Child Care Centre Feedback and Information Needs - Completed
- "Real Boys" Program (Pilot Project)
- Teen Esteem Impact Evaluation
- Point of purchase program in supermarkets- Completed
- K-W Metropolitan Survey- Completed
- Background Characteristics/Birth Outcomes (ISCIS2)- Completed
- Healthy Community Report - Completed
- Internal Food Availability- Employee Survey
- Needs Assessment for Translation of EMS Aid to Capacity form- Completed
- Rapid Risk Factor Surveillance System
- Recruitment Strategy Survey
- OP2000 Evaluation - Completed
- Smog Alert Response Plan- Evaluation Phase 2
- Bullying Prevention Teacher Training Sessions- Completed
- Breast-feeding Buddies Evaluation Study
- Urban Pesticide Use
- Reasons Model for the Pregnant smoking population
- Looked at general health, equity, education, and liveability, prosperity, conviviality and sustainability in the region; to be used as a baseline to which similar data can be compared in the future

Rural Health Study

- Completed study of factors affecting the health of rural residents of Waterloo Region
- Concerns expressed included: stress from variety of factors, importance of preserving rural way of life, effect of urban sprawl, rural provision of health and social services, lack of affordable housing (including rental housing), having rural voice in government (especially in policy making)

Studies (other than Food System related) conducted by Planning and Evaluation:

Needs Assessment for Translation of EMS Aid to Capacity form

- Surveyed the languages most needing translation of resources in Waterloo Region, includes: Amharic (Ethiopia), Arabic, Chinese, Farsi, Gujarati, Hindi, Portuguese, Punjabi, Romanian, Serbian / Croatian / Bosnian, Spanish, Urdu, Vietnamese

Healthy Communities Report

- Completed report providing snapshot of the health of Waterloo Region

