

## **Annual Report**

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## Letter from the Medical Officer of Health

Throughout 2018, change has been the only constant. At the beginning of the year, the new Ontario Public Health Standards came into effect with multiple changes to regulations, protocols, and guidelines throughout many public health programs, as well as the advent of a new Annual Service Plan and Accountability Agreement.

The current government is committed to healthcare reform in an effort to improve primary care access and ending hallway medicine.

The Health Unit's North Bay office moved into its new building reuniting staff under one roof for the first time in years.

There were many unknowns and challenges to overcome in 2018. More than ever, adaptation and innovation were fundamental to successfully navigating change and responding to local needs. The following are examples of such efforts that turned obstacles into opportunities:

- In February 2018, the new oral health clinic for eligible adults with limited or no access to dental care opened at the Health Unit. This clinic provides preventive, routine, and emergency dental treatment for those who otherwise could not afford oral health care.
- For the first time the Health Unit opened its teaching kitchen in the new facility providing many community groups and residents with food literacy, skills and food safety training opportunities. Equally important, creating a sense of community and social well-being with a shared food experience.

- The Northern Fruit and Vegetable Program was launched with the primary goal of improving the likeability of vegetables and fruits among kids, since we know the majority of Canadian children and youth aren't getting enough.
- In an effort to continue to build on established relationships and engage in new ones, an Indigenous Engagement Coordinator position was created. The goal is to build capacity of our staff to engage with Indigenous communities in meaningful ways.
- Youth engagement continued to be a priority with an inventive For Youth-by-Youth anti-vaping campaign as well as a very successful youthled mental health conference "Be Well".
- Adapting to a reduction in the number of needles being returned to the Health Unit's needle exchange program an innovative needle exchange buy-back campaign was piloted in November and December of 2018. This trial yielded a significant increase in the number of needles



Dr. Jim Chirico

returned and helped to establish important trust among clientele and staff.

- The Healthy Living team facilitated the implementation of the Parry Sound drug strategy group who was tasked with addressing the complex issues surrounding substance use through a public health harm reduction lens.
- The Health Unit has been mandated with the responsibility of Infection Prevention and Control lapse investigations when complaints are received from the public. A collaborative model was instituted by Environmental Health and Communicable Disease Control teams to ensure an effective and efficient response to protect the health and safety of the public.
- Smoke-Free Ontario changes came into effect necessitating revisions and updates to policies, procedures and enforcement.
- The historic legalization of cannabis took place on October 17, 2018 with significant public health implications with respect to education, awareness, health risks, harm reduction initiatives, and enforcement. The following highlight some of the Health Unit's endeavors:
  - Community cannabis survey.
  - Comprehensive social media campaign.
  - Provided information & resources to youth, parents, schools in order to prevent use and reduce harms.
  - Participated in cannabis forums in the community as well as schools.

- An important breastfeeding campaign called "Normalize It" was launched within the district to support moms who wish to breastfeed in public and feel more supported.
- The Nipissing Parry Sound Public Health Atlas was developed and posted on the Health Unit's website. The Atlas provides information about the populations in the Nipissing and Parry Sound districts, including population counts, language, housing, income, family living arrangements, and more. This important and relevant data helps communities and partners make decisions based on the best available evidence.
- As a result of a coordinated collaboration among multiple Health Unit programs and community partners, the spread of a potentially fatal disease in infants was averted when a pertussis outbreak emerged.

These are but a few highlights of the work public health has undertaken over the past year. It exemplifies the passion among staff to realize our vision of a healthy life for everyone in our communities. I invite you to read the entire report to give you a better understanding of why the Health Unit truly is your lifetime partner in healthy living.

Dr. Jim Chirico Medical Officer of Health / Executive Director North Bay Parry Sound District Health Unit

### **Board of Health**

In 2018, the Board of Health elected Nancy Jacko as Chairperson and Mike Poeta as Vice-Chairperson. The Board's Finance and Property Committee elected Don Brisbane as Chairperson and Heather Busch as Vice-Chairperson. The Board's Personnel Policy, Labour/Employee Relations Committee elected Stuart Kidd as Chairperson and John D'Agostino as Vice-Chairperson. Municipal elections occurred on October 22, 2018. This will see a turnover in a number of Board of Health members for the 2019-2022 term.

#### 2018 Board of Health Members

Date Appointed/Term Ended

NIPISSING DISTRICT						
Central Appointees	Mac Bain	Municipal Appointee	2015 to November 14, 2018			
	Dave Butti	Citizen Appointee	2014 to November 14, 2018			
	Nancy Jacko	Citizen Appointee	2014 to November 14, 2018			
	Stuart Kidd	Citizen Appointee	2014 to November 14, 2018			
	Tanya Vrebosch	Municipal Appointee	2014 to November 14, 2018			
Eastern Appointee	Chris Jull	Municipal Appointee	2014 to November 14, 2018			
Western Appointee	Guy Fortier	Municipal Appointee	2014 to November 14, 2018			
PARRY SOUND DISTRI	ст					
North East Appointee	Heather Busch	Municipal Appointee	2014 to November 14, 2018			
Western Appointee	Don Brisbane	Citizen Appointee	2014 to November 14, 2018			
South East Appointee	Les Blackwell	Municipal Appointee	2015 to November 14, 2018			
PROVINCIAL APPOINTEES						
	John D'Agostino	Public Appointee	2016 to present			
	Gary Guenther	Public Appointee	2017 to present			
	Mike Poeta	Public Appointee	2017 to present			

## **Public Health Snapshot**

**4,570** individual dental screenings at area schools and Health Unit locations in our district.

**1,177** children received dental care through the Health Unit's Healthy Smiles Ontario program.

**7,390** vaccinations administered at the Health Unit offices.

**3,520** vaccinations administered during the annual grade seven school clinics.

**7,927** private water samples submitted by homeowners.

**407** animal bite reports investigated.

**51** human acquired ticks submitted for testing.

**819** retail food premises inspected.

**6,730** client visits to our sexual health clinics.

#### 79 confirmed outbreaks.

- 34 enteric outbreaks in longterm care home/hospital.
- 43 respiratory outbreaks in long-term care home/hospital.
- 2 community outbreaks.

**550** confirmed cases of diseases of public health significance.

**227** individuals received breastfeeding education.

**76** people attended Triple P Parenting Program seminars.

**1,490** infant/child feeding consults.

**535** Quit Clinic appointments were held in 2018.

**21** youth volunteer placements held at the Health Unit.

## Welcome to YOUR new Health Unit

(Strategic Priority 4, Aim 1)

2018 was a monumental year for the North Bay office of the North Bay Parry Sound District Health Unit. On May 14, 2018 the new facility opened to the public.

Every detail was designed with clients and the community in mind. The downtown location was chosen to allow ease of access to services and programs by clients. The Health Unit is now within walking distance for many clients, it is accessible by the Kate Pace Way (North Bay's bike path), by city transportation, and has plenty of visitor parking.

The Health Unit has created a safer and positive environment for everyone, with all gender washrooms open to the public and water stations for anyone to fill up their water bottles. The new family-friendly room is a community space for anyone in the area who needs a place to change or feed their child. The addition of a teaching kitchen has reduced barriers to education related to nutrition, food skills, and safety for both clients and community partners.

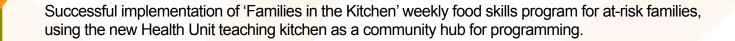
The amalgamation of our three North Bay offices to one location has reduced barriers to service and created a collaborative environment for staff and clients alike. Clients accessing services from one of our clinics may now be referred to another service all in the same visit and within the same building. The North Bay office of the Health Unit will continue to capitalize on the new opportunities that amalgamation has created, which will result in better service and public health for our community as a whole.

Mitchell Jensen Architects designed the building, which won the 2018 WoodWorks!



### Completion of the 2014-2018 Strategic Plan

The end of 2018 saw the successful completion of the 2014-2018 Strategic Plan. Eighty-five percent of outcomes across the four priority areas were completed with the remaining 15% projected to be completed this year. In addition to the strategic priority stories featured throughout this report, additional highlights include:



Increased understanding of food purchasing behaviours of grade 9-12 students through implementation of 'Healthy Food Zones' student survey.

Organizational positive spaces practices put in place such as all gender washrooms.

Framework created to guide how the Health Unit assesses, engages, participates and evaluates partnerships to ensure alignment with organizational mandate and strategic priorities.

A final report on the 2014-2018 Strategic Plan will be available on the Health Unit website on April 30, 2019.

### Atlas

(Strategic Priority 4, Aim 3)

In August, the Health Unit launched the Nipissing Parry Sound Public Health Atlas, an interactive dashboard displaying select regions (e.g., municipalities, unorganized areas, First Nation reserves) within the Health Unit's district. The dashboard utilizes line graphs to show trends over time, and bar graphs to compare cities or other areas of interest. The Atlas includes the option to sort by relevant indicators collected from the census, including the percentage of the population living in low-income households, language spoken at home, and population counts by age and sex. Counts and percentages can be compared to geographies nearby, or the province or districts as a whole. The Health Unit continues to work to have more analyzed data available by smaller levels of geography (e.g., neighbourhoods), and add measures for more data as available.

The availability of local-level data to support evidence-based decisionmaking was not only a 2014-2018 strategic priority, but was required by staff and community partners, to have relevant data for evidence-based decisions.

## Sharing Information to Promote Healthy Living for All

(Strategic Priority 4, Aim 4)

The Health Unit, in collaboration with four other health units across the province and McMaster University, has been working on a two-year project to address issues surrounding the dissemination of community health material to organizations who would benefit from the information to better serve their clients. This project, which aligns with the Health Unit's 2014-2018 strategic priorities, recognizes that public health has the ability to access and analyze a lot of data, however, there are at times a gap in knowledge transfer. The project resulted in the development of a guide describing how public health agencies, across the province, can share useful information with other service agencies in their community. While public health must follow strict ethical regulations about personal information, there is data about communities and neighborhoods, which could help community organizations provide better services, especially to those in greater need.

Currently the guide's dissemination process is in review and is expected to be implemented in the spring of 2019.



## Health Equity

(Strategic Priority 4, Aim 2)

The Health Unit is striving for a region where everyone can achieve their best possible health, making it essential to reduce barriers faced by people in the community.

The Health Unit recognizes that to improve the overall health of everyone in our district, there are some services that need to adapt to better reach those who may have barriers to service. The Health Unit has been working to improve staff's ability to better understand, identify, and take action on those unfair and avoidable factors that can result in poorer health for members of the community.

Part of the Health Unit's work involves reviewing information available on the obstacles faced by people living across the district and using the information towards creating better ways to meet the needs of people facing these barriers. The committee is also working to develop policies to ensure that all of our work considers these challenges.

# Talking Together to Improve Health

Since 2017, the Health Unit has been part of a research project, through Public Health Ontario's Locally Driven Collaborative Project, called Talking Together to Improve Health. The goal of the project is to develop mutually beneficial and respectful principles and practices of engagement between First Nation communities and local public health agencies in northeastern Ontario. The research includes five other public health units, academic researchers, and First Nation community representatives. Guidance is provided throughout the process by the Indigenous Circle advisors.

The project has been broken into five phases, including a literature review, a survey of public health units, developing the key information, meeting with First Nation communities and sharing the outcomes and recommendations. Reports and findings from the research will be shared in 2019.

Applying the findings will lay the foundation for long term, mutually beneficial and respectful relationships with First Nation communities and are an important step in working towards improving opportunities for health for all.



### **Providing Services to Rural Communities**

#### (Strategic Priority 3, Aim 1)

The Health Unit values the uniqueness of populations living rurally and understands the importance of creating meaningful, trusting relationships. The Health Unit strives to learn about the people we serve and approach them in a culturally sensitive, genuine manner.

One of the Health Unit's 2014-2018 strategic priorities was to expand reach to those people living in rural settings. The Health Unit has been developing a relationship with a nearby community who we previously had minimal interaction with. Cultivating this relationship helped to reduce the spread of Pertussis. While nurturing relationships remains an ongoing process, the Health Unit's Vaccine Preventable Diseases program has been able to review many of the community members' vaccination status, to implement additional vaccine clinics and will now begin working to introduce additional Health Unit services.

### Pertussis (Whooping Cough) Outbreak

Pertussis is a highly contagious respiratory disease caused by bacteria and is known for uncontrollable, violent coughing, which often makes it hard to breathe. After coughing fits, someone with pertussis often needs to take deep breaths, which result in a "whooping" sound. Pertussis can affect people of all ages, but can be very serious for babies, susceptible pregnant women, and elderly people. Cases of pertussis and vulnerable contacts were identified by the Health Unit over the year and public health strategies were implemented to limit the spread of this disease. Public health interventions included community outreach, immunization, health teaching, and consultation regarding treatment. The Health Unit identified 36 cases: 51 people who were in close contact with the cases, 30 of those were high risk. Fourteen people were immunized to prevent future infections. The Health Unit is greatful for the support received during this outbreak from the Powassan & Area Family Health Team who facilitated the provision of preventative medication for 40 others.

# Communicable Disease Investigations

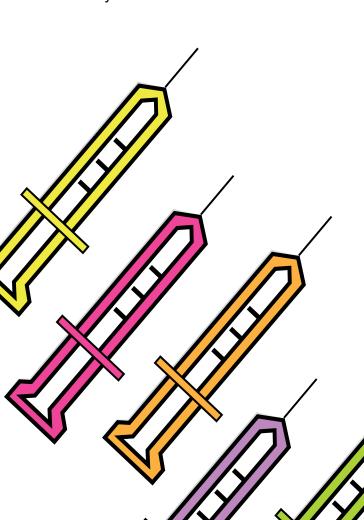
The Health Unit received reports of communicable disease.

These included, but were not limited to:

Tuberculosis Hepatitis C Meningitis Influenza Pertussis Salmonellosis

## Vaccination Statistics

1,678 influenza vaccines administered by the Health Unit Oct. – Dec. 31.



16,274

student immunization records assessed for compliance with Immunization of School Pupils Act.

3,520

vaccinations administered during the annual grade 7 school clinics.

**b** community influenza clinics offered in the fall. 7,390

vaccines administered in Health Unit offices.

11,163 influenza vaccines administered by 32 pharmacies.

## Adult Oral Health

Oral health is an important part of our overall health and can affect our self-esteem, social relationships, and how we eat and speak. Pain and infection, which may arise from oral diseases, can affect employability, work attendance, performance, and learning potential. Medical conditions such as diabetes, respiratory diseases, and cardiovascular issues can also be affected by poor oral health.

In February 2018, the new Adult Dental Clinic, for eligible adults with limited or no access to dental care, opened at the Health Unit's North Bay office. The clinic provided preventive, routine, and emergency dental treatment to 561 clients. Attendance at the clinic was high, with 89% attendance rate. The need for this clinic was evident as 68% of clients presented with one or more areas of untreated tooth decay, 62% with dental pain and 18% with a dental abscess. By the end of the year, there was a five-month waiting list for an appointment. When asked in a survey, "What has coming to this clinic meant to you?" clients' responses included:

"Everything! The pain I have endured has been unbearable and now I see a pain free future."

"It meant a great deal! I thought there was no one to help me when I couldn't afford dental care. Amazing. Thank you!"

"To live again/so happy I am almost crying. Thank you."

A special thanks to Low Income People Involvement of Nipissing (LIPI), District of Nipissing Social Services Administration Board (DNSSAB) and North Bay Oral Surgery for supporting this program. Together we are working to provide equitable access to dental care and to improve the health of adults in our communities who have challenges accessing dental services.

### Adult Stats

- 561 clients were treated at the Adult Dental Clinic.
- 147 adults in receipt of Ontario Works for a total of 316 appointments.
- 144 adults with the Ontario Disability Support Program for a total of 334 appointments.
- 262 low wage income earners who met the Health Unit eligibility for a total of 660 appointments.
- 6 adults accessed Non-Insured Health Benefits for First Nations for a total of 11 appointments.
- 2 adults accessed Interim Federal Health Plan benefits for resettled refugees for a total of 2 appointments.

## Healthy Smiles Ontario

Good oral health is important for a child's self-esteem, sense of well-being and overall health. Together with parents, the Health Unit is working to improve the health of children in our communities. Healthy Smiles Ontario (HSO) is a free dental program that provides preventive, routine, and emergency dental services for eligible children and youth 17 years and under from low-income households.

In 2018:

1,177

children received dental care through the Health Unit's HSO program for a total of 2,143 appointments.

# 4,696

individual dental screenings at area schools, Health Unit, and community agencies.

## Sexual Health

Sexual health is about healthy behaviours and attitudes towards sex, respecting others, understanding consent, and much more. The Health Unit's Sexual Health program provides testing and treatment to help prevent sexually transmitted infections, provides contraceptives, including emergency contraception at cost, and provides pregnancy testing and education about the available options if they or their partner becomes pregnant.

### 6,730 client visits

to our sexual health clinics.

- 77% presented as female.
- 23% presented as male.
- Approximately 78% of clients were seen in our North Bay office.
- 9% in designated secondary schools across our district.
- 11% in our Parry Sound office.
- less than 1% in our Burk's Falls office and satellite clinics.

The total number of cases of reportable sexually transmitted infections (STIs) increased in 2018, which is consistent with trends across Ontario.

- 442 cases of chlamydia (an increase of 17%).
- 42 cases of gonorrhea (an increase of 35%).
- 6 cases of syphilis and HIV.

The Sexual Health program is working closely with the Ministry of Health and Long-Term Care to assess why chlamydia and gonorrhea rates continue to increase, and to determine how best to address this issue.

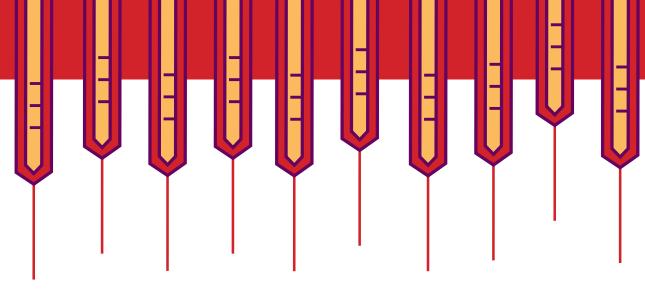
### Harm Reduction

In collaboration with community partners, the Health Unit provides harm reduction services, such as our needle exchange program, to clients throughout the community. Evidence\* shows that these services are effective at reducing serious infections (such as hepatitis C and HIV) in people who use drugs, help to build relationships with clients, connect clients to other Health Unit and community programs, and decrease the number of used needles found in the community.

- 1,439 needle exchange visits, where clients had access to new needles and other injection drug supplies, safer inhalation kits, safer smoking kits, and naloxone kits.
- **68%** of clients identified as male.

\* Best Practice Recommendations for Canadian Harm Reduction Programs that Provide Service to People Who Use Drugs and are at Rick for HIV, HCV, and other Harms: Part 1(Rep.). (n.d.). retrevied from https://www.catie.ca/ga-pdf.php?file=sites/ default/files/BestPracticeRecommendations\_ HarmReductionProgramsCanada\_Part1\_ August\_15\_2013.pdf

\* Best Practice Recommendations 2 for Canadian Harm Reduction Programs that Provide Services to People Who Use Drugs and are at Risk for HIV, HCV, and Other Harms: Part 2 (Rep.). (n.d.). Retrieved from https://www.catie.ca/sites/default/ files/bestpractice-harmreduction-part2.pdf



### **Sharps Buy Back**

The Sharps Buy Back campaign launched in November, as part of the Health Unit's harm reduction strategy, and was extended into December. due to the campaign's success. The purpose of the campaign was to encourage individuals to come to our new North Bay office, while also spreading awareness about how to properly pick up sharps. The campaign targeted the Health Unit's current needle exchange clients and individuals in the community who might benefit from needle exchange services. During the campaign, the Health Unit provided a \$5 grocery gift card for every 100 used sharps (e.g. needles or syringes) brought to the North Bay office.

During the Sharps Buy Back Campaign, the Health Unit received **39,281** used sharps, averaging **19,640** sharps each month, a large increase from previous months. In the six months leading up to the campaign, the Health Unit received an average of 3,985 returned used sharps per month. This represents a nearly five-fold increase in the number of needles returned, during the campaign.

The campaign created the opportunity to build and strengthen therapeutic relationships between Health Unit staff and clients. The campaign encouraged new individuals to visit our Health Unit and learn about our services. It also enabled staff to refer many clients to other services within the organization such as the Oral Health program, Vaccine Preventable Diseases, the Quit Clinic, and Sexual Health program. Many clients expressed gratitude for the gift cards and told staff that they would be used to purchase their basic needs like food and hygiene products.

### **Naloxone Program**

In an effort to combat the increasing number of overdose deaths in Ontario, the Ministry of Health and Long-Term Care implemented the Ontario Naloxone Program in 2017. Through this program, the Health Unit is able to distribute naloxone kits to people who use drugs, their friends, and their families, as well as to community partners to help prevent overdose deaths in our community. Naloxone kits were provided across our district as follows:

- 291 to community agencies.
- **138** to fire departments.
- 59 to police services.
- 51 to clients who use opioids.
- 70 to people reporting to be a friend or family member of someone who uses opioids.

### Cannabis

Prior to the legalization of cannabis in October, the Health Unit created a comprehensive social media campaign focused on dispelling myths related to cannabis and aimed to inform the public about ways to reduce harm associated with cannabis use. Canada's Lower-Risk Cannabis Use Guidelines were used throughout the campaign.

Staff from the Health Unit coordinated and attended several cannabis information sessions, including parent's nights and panel sessions, to provide information and resources to members of the public.

The largest session was the Cannabis Forum, a partnership between the Health Unit, Ontario Provincial Police, North Bay Police, and a pharmacist, held in North Bay. The session was designed to allow members of the public to ask questions about cannabis and receive information to help navigate laws and health outcomes, concerning cannabis use. Beyond sessions, the Health Unit provided resources to parents, schools, and other youth-serving agencies with the aim of preventing use and reducing cannabis-related harms among youth. This included promoting the Cannabis Talk Kit on social media and providing free resources at reception and on the Health Unit website.

To better understand our community's knowledge, behaviours, and attitudes related to cannabis, the Health Unit conducted a Community Cannabis Survey. The survey asked the public questions about their previous use, their understanding of harm reduction strategies related to cannabis, and driving while impaired. This survey will serve as a benchmark for understanding cannabis in our community following legalization. Survey results are expected to be released in early 2019.

## Hand Hygiene

Hand washing, when done correctly, is the single most effective way to prevent the spread of illness. Hand hygiene education provided to children has the potential to considerably decrease the amount of times that they are absent because of illness.

The Health Unit partnered with third year Nipissing University and Canadore College collaborative Bachelor of Science in Nursing students to offer hand hygiene education sessions to students in elementary schools across the Health Unit district. A total of 20 schools participated with over 1,700 students learning about germs, how they are spread, and how to protect themselves and others by properly washing their hands. The Health Unit also offered hand hygiene education sessions to child care centres, longterm care homes and retirement homes.

A total of 254 children from seven child care centres and a total of 132 residents and staff from four long-term care homes and retirement homes participated in hand hygiene education sessions.



# For Youth by Youth Anti-Vaping

DO YOU

**KNOW THE** 

LONG-TERM

**EFFECTS OF** 

Neither do the

For what we do know, visit

www.myhealthunit.ca/vaping

**VAPING?** 

experts!

**TO STOP VAPING** 

The Health Unit runs a Youth Volunteer Program where students aged 13 to 17 years learn about public health and create public health campaigns. One campaign specifically focused on addressing the rise in e-cigarette use among youth. The goal of the project

was to inform other youth, in the Health Unit's district, about the potential health risks of vaping.

Youth volunteers discussed vaping trends and looked at research regarding the health effects of vaping. The volunteers learned how to plan and run a health communication campaign, discussed effective ways to reach youth, and created key messages for their campaign. The campaign consisted of five social media posts, a video, two posters, a fact sheet, and a set of trivia questions.

Volunteers also planned and set-up a booth at a local youth conference. Be Well, where they shared information with youth through a trivia game, as well as the posters and fact sheets.

The posters are still being used by high schools in our district, and have been requested by other health units. The campaign helped lay a foundation for youth engagement work on this emerging public health issue.



## For Youth by Youth Be Well

Expectations of youth are high; balancing school, extra-curricular activities, home life and maintaining a job can be difficult, and can impact overall mental well-being. According to the Ontario Student Drug Use and Health Survey (OSDUHS), one in every five students in our region report their mental or emotional health as either fair or poor\*.

In the spring, ten Health Unit youth volunteers planned and hosted the

Be Well Conference, a youth-led mental health event. Approximately 75 students and 15 community partners from the North Bay area attended.

Collaboration was a key focus of conference planning. Youth volunteers worked closely with community partners to develop and deliver workshops that promoted healthy choices by providing trusted information in a youth-friendly format. Stigma, healthy relationships, social media and leadership are all examples of topics covered throughout the conference. Youth Volunteers worked closely with a Health Unit Community Health Promoter to make decisions related to logistics, branding, and conference activities.

The conference was a success students left better informed on ways to deal with stress in their life and that they are not alone.

\* North Bay Parry Sound District Health Unit Planning & Evaluation Services. (2017). Mental health among students in grades 7 to 12 in the NBPSDHU region. Retrieved from https://www.myhealthunit.ca/en/community-data-reports/resources/Reports-Statistics--Geographic-Profiles/well-being-and-mental-health/MHcare-gr7to12-NBPSDHU-region-2014-15-Nov-23-2017.pdf on January 17, 2019.



# The Northern Fruit and Vegetable Program Kicked off in 2018!

The Health Unit administered the Northern Fruit and Vegetable Program (NFVP), in partnership with the Ministry of Health and Long-Term Care and the Ontario Fruit and Vegetable Growers' Association, to **11,464** students in **61** elementary and intermediate schools throughout the Health Unit's district. The NFVP provided two servings of fruit and vegetables each week, from February to June, to students at participating schools.

Research has shown that Canadian children are not getting enough servings of fruits and vegetables. NFVP helps to fill that gap while working to improve the likeability of fruits and vegetables. Educators have found the program to have positive results.

The program not only provided the fruits and vegetables to students, but educators were provided additional resources for classroom activities based on the fruit and vegetables provided.

	N	FVP				
No	rthern Fr	uit & Vegetable Program				
	2018 Menu*					
	Week February 12 No Delivery Fel	Product Grape Tomatoes, Pineapple Chunks pruary 19 - 23				
YA	February 26 March 5 No Delivery Ma	Carrot Sticks,Whole Apples Celery Sticks, Hummus Dip, Dried Cherries				
	March 19 March 26 No Delivery Ap	Broccoli Florets, Dip, Cantaloupe Chunks Carrot Sticks, Mixed Fruit Chunks				
	April 9 No Delivery April 23	Celery Sticks, Hummus Dip, Apple Sauce				
12	April 30 May 7	Mini Cucumbers, Apple Slices Grape Tomatoes, Honeydew Melon Chunks				
-1/-	May 14 Broccoli Florets, Dip, Apple Sauce Cups   No Delivery May 21 - 25					
1/2	May 28 June 4 June 11 June 18	Mini Cucumbers, Apple Slices Celery Sticks, Hummus Dip, Pineapple Chunks Carrot Sticks, Apple Sauce Cups Mini Cucumbers, Whole Strawberries				
	5	*May be subject to change Revised April 2018				
ST.		Horth Ray Young Ober Health Un the alth Un the alth Line Bureau de san de decid de turch Bue Perry St				

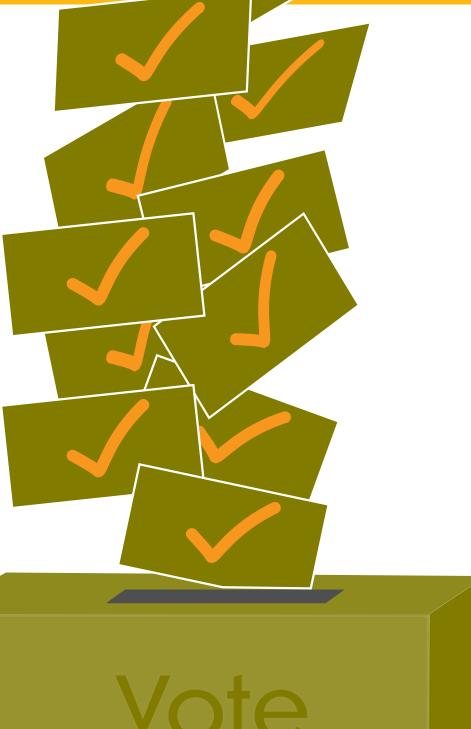
"The children at my school have decided to really embrace this program. I have never seen so many kids eating broccoli at nine in the morning," said one educator.

## We're Voting for Food

In April 2018, the Health Unit partnered with the Nipissing Area Food Roundtable to host We're Voting for Food. The event, which had roughly 50 individuals in attendance, was focused on emphasizing the importance of income solutions to address food insecurity and informed decision making when voting. Food insecurity affects one in seven households in the Nipissing and Parry Sound districts.

The event encouraged MPP candidates to share their party's position and strategies to reduce food insecurity. Two MPP candidates attended and one sent a statement. Social service leaders from the Health Unit, the Low Income People Involvement of Nipissing, and the District of Nipissing Social Services Administration Board also spoke about the impact of food insecurity locally and the need for change.

The Health Unit continues to advocate for income measures, like increased social assistance and minimum wage rates, to reduce food insecurity in Ontario.



## **Student Placements**

Effective post secondary student placements contribute to the development of a strong public health workforce, which helps the Health Unit to achieve a vision of a healthy life for everyone in the community.

The Health Unit supported 23 student placements throughout 2018. The students were enrolled in nursing, social work, dietetic internships, master of kinesiology, and physical health education programs. The Health Unit also worked with Nipissing University and Canadore College's collaborative Bachelor of Science in Nursing program to support the education of third year nursing students with specific health promotion projects. Projects focused on falls prevention for the Indigenous population and hand hygiene education in schools across our district.

The Health Unit values the contribution that students make to public health and wish them the very best in their future careers.



## Normalize it!

In 2015, a Health Unit survey found that 51% of local mothers did not feel comfortable breastfeeding in public. This can negatively impact the duration of breastfeeding for mothers who are trying to reach their breastfeeding goals, while still getting out to do daily living activities.

In an effort to reduce barriers to continued breastfeeding, the Health Unit launched the Normalize It campaign during National Breastfeeding Week. The goal of the campaign was to normalize breastfeeding by changing perception of breastfeeding in public and encouraging a supportive environment in our community for nursing mothers. Four life size cutouts of mothers breastfeeding their children were rotated throughout 24 locations, including colleges, community centres and private businesses, across the Health Unit's district over a two week period. A corresponding Facebook contest invited mothers to take photos of the cutouts spotted in the community or of themselves breastfeeding and send them to the Health Unit. These images were shared on Facebook and the three images with the most 'likes' won. The campaign had great visibility within the Health Unit's district, with nine media stories over the campaign period. The imagery and tag Normalize It will continue to be used throughout 2019 in other breastfeeding friendly material to extend the message throughout all breastfeeding promotion and activities.

#### **Photoshoot**

• **11** mothers and babies participated in the photoshoot cutouts.

### **Cutouts locations**

- 10 in North Bay.
- 1 in Sturgeon Falls.
- 10 in East Parry Sound.
- 3 in West Parry Sound.

### Social media contest

- 27 contest participants.
- 380 total comments on album.
- **1,979** total likes on album.
- 3,624 combined likes on photos.
- 78 total album shares.
- Total reach of 14,325.
- **171** new followers during the contest's time period.

## Changes to Regulations, Protocols, and Guidelines

In 2018, the Health Unit witnessed multiple changes to regulations, protocols, and guidelines. The new regulations came in effect on July 1, 2018 and included; the Food Premises Regulation 493/17, Public Pools 494/17, Recreational Camps 503/17, Camps in Unorganized Territory 502/17, Personal Service Settings 136/18, Rabies Immunization 497/17, and Smoke-Free Ontario Act, 2017 (and its related Regulation). The changes impact/affect individuals and/ or owners/operators in the way they conduct their businesses.

Some of the guidelines introduced include:

- Healthy Environments and Climate Change Guideline, released on March 20, 2018.
- Management of Avian Chlamydiosis in Birds Guideline, Management of Avian Influenza or Novel Influenza in Birds or Animals Guideline and Management of Echinococcus Multilocularis Infections in Animals Guideline.

- Management of Potential Rabies Exposures Guideline.
- Operational Approaches for Food Safety Guideline.
- Operational Approaches for Recreational Water Guideline, released on February 5, 2018.
- Personal Service Settings Guideline.
- Small Drinking Water Systems Risk Assessment Guideline.

Protocols and guidelines outline ways of implementing the Ministry of Health and Long-Term Care (MOHLTC) Ontario Public Health Standards (OPHS). The Health Unit's Public Health Inspectors (PHIs) and Tobacco Enforcement Officers (TEOs) utilized a progressive enforcement approach to ensure compliance, in our district.

The PHIs and TEOs took the opportunity to educate organizations about the updates to the regulations, protocols and guidelines during their routine inspections. It is only after education, should an organization refuse to be compliant, that they would receive a warning followed by charges.

#### **Smoke-Free Ontario Act, 2017**

The Smoke-Free Ontario Act, 2017 came into effect on October 17, 2018. The Smoke-Free Ontario Act, 2006 was specific to tobacco products only, where the new Smoke-Free Ontario Act, 2017 now includes cannabis and electronic cigarettes. These changes required organizations to update their no-smoking signs in their work places, such as entrances, exits, work vehicles, and washrooms.

The Health Unit created a campaign to promote the updates, specifically to inform employers in the Nipissing and Parry Sound districts about the new Smoke-Free Ontario Act, 2017 adhesive signs that are available free at the Health Unit, and to increase awareness of the changes made to the Smoke-Free Ontario Act, 2017, in regards to the legalization of cannabis.

The campaign resulted in over **1,500** adhesive signs picked up and roughly, **15** packages compiled for the Chamber of Commerce, municipalities, and businesses within our district.

### Safe Water

#### **Drinking Water**

7,927 drinking water samples submissions from private homes were submitted to Public Health Laboratories for detection of bacteria presence. Approximately 20% of the private water samples tested showed presence of Total Coliform and around 3% indicated the presence of E. coli.

The Health Unit worked with individuals who wished to consult with Public Health Inspectors after receiving their water results. The consulted individuals were provided information including potential causes and ways to resolve the identified issue.

#### **Public Beaches**

Throughout the summer of 2018, Public Health Inspectors conducted surveillance of 61 public beaches. 1,405 water samples were collected, both weekly and monthly depending on the water quality at each beach. Harmful Algal Blooms (HAB) were detected at lakes across the district including:

Callander Bay	Ottawa River
Deer Lake	Pickerel Lake
Lake Bernard	Rankin Lake
Lake Nosbonsing	Roberts Lake
Lake Talon	Three Mile La
Lynx Lake	Tilden Lake

The Health Unit made the public aware through a number of communications channels including news releases and social media posts. Data from public beach collection contribute to the Great Lakes water management.

Lake



## **2018 Inspections**

#### **Inspection of Retail Food Premises**

• 819 retail food premises inspected and 216 re-inspections.

### Responding to Complaints at Retail Food Premises

• 86 food program complaints investigated.

#### Education of Employees and Owners/ Operators of Retail Food Premises

- 20 food handler certification courses offered.
- 127 exams proctored.
- 98% food handlers certified.

### Inspection and Consultation with Organizers of Community Food Events

- 626 special event applications reviewed.
- 40 inspections of community special events.

#### Implement corrective Measures at Regulated Water Systems to Ensure Safe Drinking Water

- 58 boil water advisories.
- 21 drinking water advisories.

### **Inspection of Public Pools and Spas**

- 118 inspections were completed on 43 Class A & B public pools and 30 re-inspections.
- 37 inspections completed on 12 public spas and 12 re-inspections.
- 8 inspections completed on 2 public wading pools.
- 9 inspections were completed on 5 splash pads.

### **Investigation of Animal Exposure Incidents**

• 407 animal bites reports investigated.

#### **Promote the Rabies Vaccination to Animals**

• 51 mandatory vaccination letters issued to animal owner.

### Inspection of Facilities to Prevent Infectious Diseases and Hazards

- 29 children's recreational camps inspected and 2 re-inspections.
- 30 group homes inspected.
- 1 active treatment centre inspected.
- 1 correctional institution inspected.
- 1 home for special care inspected.
- 70 Licensed child care centres inspected and 5 re-inspections.
- 193 personal service establishments inspected and 4 re-inspections.

#### **Vector Borne Disease Surveillance**

• 51 human acquired ticks submitted for testing.

### **Education to Tobacco Vendors**

· 385 educational visits.

#### **Inspect Tobacco Vendors**

• 128 tobacco vendors inspected and 8 re-inspections.

## Inspect Workplace/Public Places under the Smoke-Free Ontario Act

- 1,031 inspections of workplaces/public places and 58 re-inspections.
- 98 warnings issued.
- 3 tickets issued to non-compliant workplaces/public places.

## 2018 Health Unit Published Reports

2016/17 Influenza summary (February 2018)

Enhanced 18-month well-baby visits (July 2018)

Tobacco use during pregnancy (October 2018)

Reasons for provision of liquids other than breastmilk (November 2018)

Confidence and breast milk provision (October 2018)

Intended duration of breast milk provision (October 2018)

Solid food provision to infants in the NBPSDHU region (January 2018)

Infant oral health (February 2018)

Opioid-related morbidity & mortality (July 2018)

School climate among students in grades 7 to 12 in the NBPSDHU region (February 2018)

Sleep among students in grades 7 to 12 in the NBPSDHU region (January 2018)

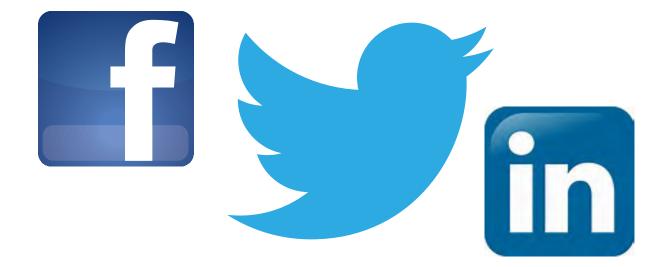
Violence among students in grades 7 to 12 in the NBPSDHU region (July 2018)

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## Communications

Over the past year, the Communications department:

- Refreshed the layout of the Health Unit's website and made it mobile friendly. Since inception the site has had 30,975 visits from 20,749 unique visitors resulting in 84,623 page views.
- Issued 25 news releases, and were featured in over 150 stories.
- Grew our Facebook presence with **1,169,335** overall impressions with the average post reaching **1,793** people.
- Grew our Twitter presence with 90,454 overall impressions.
- Ran a campaign to promote the Health Unit resulting **15,357** impressions on Facebook **13,135** impressions on Twitter.



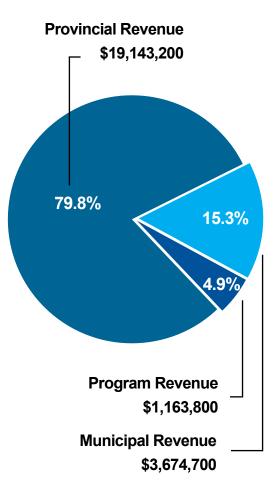
## 2018 Unaudited Expenditures by Program & Service

#### **Program & Service**

Dollars (\$)

Occupancy & Information Technology	2,815,800.00
Food/Water/Rabies/Other Environmental Hazards	2,175,900.00
Reproductive & Child Health, Healthy Babies	2,108,500.00
Organizational Supports	2,104,600.00
Chronic Disease/Injury Prevention/Substance Use	2,016,900.00
Sexual Health	1,682,100.00
Dental Services	1,678,800.00
Vaccine Preventable Disease	1,421,400.00
Communicable & Infectious Disease Control	1,235,700.00
Research & Quality Assurance	904,300.00
Building & Land	852,100.00
Office of the Medical Officer of Health	464,300.00
Smoking and Tobacco	449,800.00
Genetics	280,200.00
Communications & Community Information Office	261,400.00
Vector Borne Disease	169,500.00
Emergency Preparedness	127,800.00

### **Total Revenue 2018:**



**Total Expenditures** 

20,749,100.00