



North Bay Parry Sound District Health Unit

Annual Report 2014

myhealthunit.ca



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Where's WALDO?

Public Health has a lot in common with Waldo. We're always in the picture, but often not easy to spot. Nevertheless, we are there.

- When you are at home and take a drink of water... public health is helping to make it safe, free of infection and harmful chemicals. We promote the addition of fluoride in many municipal water systems, which helps protect you and your family from cavities.
- When you have something to eat... public health is working to ensure it is high quality, healthy

food. We promote healthy food choices, provide education, and work with decision makers to develop appropriate public health policies. Public health helps to ensure it is free from infection and harmful chemicals.

- When you decide to have a baby... public health is there every step of the journey. We provide prenatal and parenting classes, genetic testing and counseling, support breast feeding and proper nutrition, immunizations, promote awareness and treatment of post-partum mood disorders, follow-up with every mom after delivery, inspect daycare centres, and help with infection prevention and control measures.
- When you see people out for a walk, bicycling, or running... public health is behind the scenes collaborating with community planners to ensure the built environment supports active, safe, and healthy living in the design of neighbourhoods, subdivisions, parks, and playgrounds.
- When you get into your car... public health has advocated over many years for safer design, seat belt legislation, infant and toddler car seats, smoke-free legislation while children are onboard, lower exhaust emissions, alcohol limits, prohibiting cell phone use and texting, and safer speed limits.
- When you participate in sports or are a spectator... public health

supports, promotes, and sponsors many events to encourage healthy lifestyles and active living. We helped to ensure sports fields, parks, and playgrounds are smoke-free for you and your children. Public health collaborates with legislators, professional organizations, coaches, and acute care practitioners to make sports safer by advocating for equipment standards, educating, and promoting awareness, such as concussion protocols.

- When you eat in a restaurant... public health helps to prevent food-borne illness and outbreaks of infectious disease through inspections, education, and training of food handlers. We advocate for menu labelling legislation so that consumers can make healthy choices when eating out or shopping in supermarkets.
- When you swim at a public pool, spa, or beach... public health inspections help to identify harmful organisms and implement measures to keep you safe from infectious diseases.
- When you go to a personal service setting such as a barbershop, hairdresser, or tattoo parlour... public health helps protect you from blood-borne infections through regular inspections and education.
- When you drop your children off at school... public health is there providing many services. This includes immunizations

and assessments, dental screening and treatment, supporting healthy eating and active living, training food handlers and inspecting food premises, preventing injuries and substance abuse, monitoring infectious diseases and managing outbreaks, providing sexual health counselling, education, and treatment, and enforcing the Smoke-Free Ontario Act.

- When you drive by your municipal office... public health is working with officials on health related policies, pandemic planning, and emergency preparedness protocols.
- When you go on a trip to an exciting exotic destination... public health provides a travel clinic to help you stay healthy by offering counselling, education, and appropriate immunizations, which may be mandatory in some countries.
- When you visit the hospital or your doctor... public health works collaboratively with health care professionals by providing vaccines, tracking reportable diseases, sending important alerts, assisting with infection prevention and control measures and outbreak management, inspecting food premises and training food handlers, and enforcing the Smoke-Free Ontario Act.

Public Health does all of this and more. So, where's Waldo? Everywhere!





Land Acquired for New North Bay Office Space

With the support of our Board of Health and the municipalities we serve, the Health Unit has purchased land upon which we will build a new office space to house North Bay staff and services. We have engaged the services of a number of experts for this project to ensure success and fiscal responsibility.

One building will increase clinic space and enable clients to access services from one location. It will also improve efficiencies through reducing building maintenance and infrastructure costs, time spent walking between locations, increasing collaboration, resource sharing, and improving staff morale.



2014-2018 Strategic Plan

The Health Unit was pleased to announce the release of its [Strategic Plan 2014-18](#) on August 8, 2014. We used local level data, as well as information from a survey of over 400 regional stakeholders including Health Unit staff, Board of Health members, clients, and community partners to inform the selection of four strategic priorities:

1. Foster Healthy Behaviours in Children and Youth
2. Promote Healthy Aging in Adults
3. Expand Reach
4. Strengthen the Health Unit's Organizational Supports

Our priorities align with provincial priorities and complement work required by the Ministry of Health and Long-Term Care's Ontario Public Health Standards, Organizational Standards, and Public Health Funding and Accountability Agreement Performance Indicators. Furthermore, they build on accomplishments from our 2011-13 strategic plan priorities.





Provincial Public Health Performance Indicator Results

We are required to report our Public Health Funding and Accountability Agreement Indicators to the Ministry of Health and Long-Term Care each year. The Ministry sets the targets for these indicators, that measure the delivery of select public health services.

Indicator Targets Met

Reached Intermediate category for Implementation of NutriSTEP® Preschool Screen (Target is to reach Intermediate category)

Designated Baby-Friendly Initiative Status (Target is to be Designated)

100% of seasonal tobacco retailers inspected for compliance with section 3 of the Smoke-Free Ontario Act (Target is 100%)

100% of high-risk food premises inspected once every 4 months while in operation (Target is 100%)

100% of moderate-risk food premises inspected once every 6 months while in operation (Target is 94%)

100% of Class A pools inspected while in operation (Target is 100%)

100% of personal services settings inspected annually (Target is 100%)

96.9% of tobacco vendors in compliance with youth access legislation at the time of last inspection (Target is 90%)

Targets Not Met

98.8% of tobacco retailers inspected once per year for compliance with display, handling, and promotion sections of the Smoke-Free Ontario Act (Target is 100%)

97.0% of non-seasonal tobacco retailers inspected for compliance with section 3 of the Smoke-Free Ontario Act (Target is 100%)

87.5% of secondary schools inspected once per year for compliance with section 10 of the Smoke-Free Ontario Act (Target is 100%)

No Targets Set

100% of confirmed gonorrhea cases where follow-up started within two business days

100% of confirmed iGAS cases where follow-up started on the same day lab confirmation of a positive case received

100% of refrigerators storing publicly-funded vaccines received a completed routine annual cold chain inspection

93.3% of public spas inspected while in operation

93.9% of salmonellosis cases where one or more risk factor(s) was entered into integrated Public Health Information System (iPHIS)

100% of high-risk Small Drinking Water Systems inspections completed for those that are due for re-inspection

100% of suspected rabies exposures reported with investigation started within one day of when we were notified





Positive Parenting in Our District

In October 2014, we published the report [Positive Parenting in the North Bay Parry Sound District Health Unit Region](#). It looked at the parenting services and supports for parents of children 0 to 18 years of age in our district. We also wanted to find out if there was a comprehensive approach to positive parenting in place in our district and if there were any gaps in service. With the support of local parents and community partners, we highlighted our community's strengths, potential gaps in services, and identified ways to improve the services and supports we provide to parents and families.

The report stimulated a community conversation about positive parenting. Community partners who were passionate about parenting came together to continue the conversation. Working groups in Nipissing and Parry Sound districts met regularly to address the gaps identified in the report. They will be developing a plan for a comprehensive approach to positive parenting for families.

As a result, we decided to implement the parenting program, [Triple P – Positive Parenting Program®](#). Other Health Units and communities in Ontario, as well as around the world, offer this evidence-based program. We look forward to working with community partners so that we can better meet the needs of parents and families in Nipissing and Parry Sound districts.



“The quality of parenting a child receives is considered the strongest potentially modifiable risk factor that contributes to the development of behavioral and emotional problems in children”.

Centre of Excellence for Early Childhood Development & Strategic Knowledge Cluster on ECD. (2008). Parental skills synthesis. Retrieved from Encyclopedia for Early Childhood Development website: <http://www.child-encyclopedia.com/pages>

Healthy Babies Healthy Children program

Our Healthy Babies Healthy Children (HBHC) program had a very busy year! Our staff continued to provide home visiting, breastfeeding support, prenatal support, and parenting workshops across the district.

Our prenatal program had 466 women enter the program, up from 109 the previous year. In our district, 932 families agreed to take part in the HBHC screening. After we screened the families with new babies, we identified 859 that were "with risk". We successfully contacted 535 families and offered them the HBHC program. We also had 37 families with children 6 months to 6 years referred to our HBHC program.

Public Health nurses offered support to breastfeeding families in North Bay, Verner, Parry Sound, and Burk's Falls. This included visits to individuals, community groups, and Early Years Centres. We also trained three new volunteers for the Breastfeeding Peer Support group.

As well, we continued to encourage primary health care providers to do Enhanced 18-month Well-Baby visits with their patients. Overall, it was a very successful and busy year for us.

HBHC Statistics

219 families received the home visiting program in 2014

1,986 home visits HBHC conducted, a 17% increase from previous year

386 clients at Ontario Early Years Nipissing received Breastfeeding Support

93 clients received Breastfeeding Support at Marshall Park Public School

252 clients received Breastfeeding Consultations at North Bay Regional Health Centre Clinic



Healthy Hands in Schools



We developed the Healthy Hands Hand Hygiene Resource Kit for elementary schools in 2013. This kit teaches students about the importance of proper hand hygiene. This is with the goal that it will help reduce the spread of germs and improve absenteeism rates.

Staff in the Communicable Disease Control program worked with eight Nipissing University/Canadore College 3rd year Bachelor of Science Nursing students throughout the year. The nursing students went to 17 schools and taught lessons from the Healthy Hands Hand Hygiene Resource Kit to 2,050 students.



We look forward to continuing this collaboration in 2015.

New immunization requirements for school-aged children

17,091 school-aged students affected by new immunization requirements

New immunization requirements for Ontario students came into effect on July 1, 2014. These changes to the Immunization of School Pupils Act are expected to improve the health and safety of Ontario's schoolchildren.

The updates included:

- Changing tetanus, diphtheria, poliomyelitis, measles, mumps, and rubella vaccine doses and intervals. This will align with the Ontario immunization schedule.
- Added immunizations against Pertussis (whooping cough), Varicella (Chicken Pox – for children born in 2010 or later), and Meningococcal disease.

To be sure parents, physicians, school boards, and principals were aware of the changes and reporting requirements, we provided information in a variety of ways:

- Developed a poster that was put on our website and school boards' websites
- Provided school boards with information they could provide to parents

- Sent out news release and gave seven media interviews
- Sent all parents with affidavits on file, information about the changes and the revised documents they would need for an affidavit

While we had a significant increase in calls from parents asking about their child's immunizations, we were happy to answer their questions. We will also integrate the changes to the immunization requirements into our annual immunization record assessment for school-aged children. This takes place in late winter and early spring.



Planning Identifies Barriers to Healthy School Travel

We know that active travel to school is beneficial to children's health. However, in our district, less than 20% of children are walking or biking to school. And, that decreases each year!

Our Healthy Schools and Families team worked with two North Bay schools to reverse this sedentary trend. A School Travel Planning process started with parent volunteers, who had an interest in making their schools more walk- and bike-friendly.

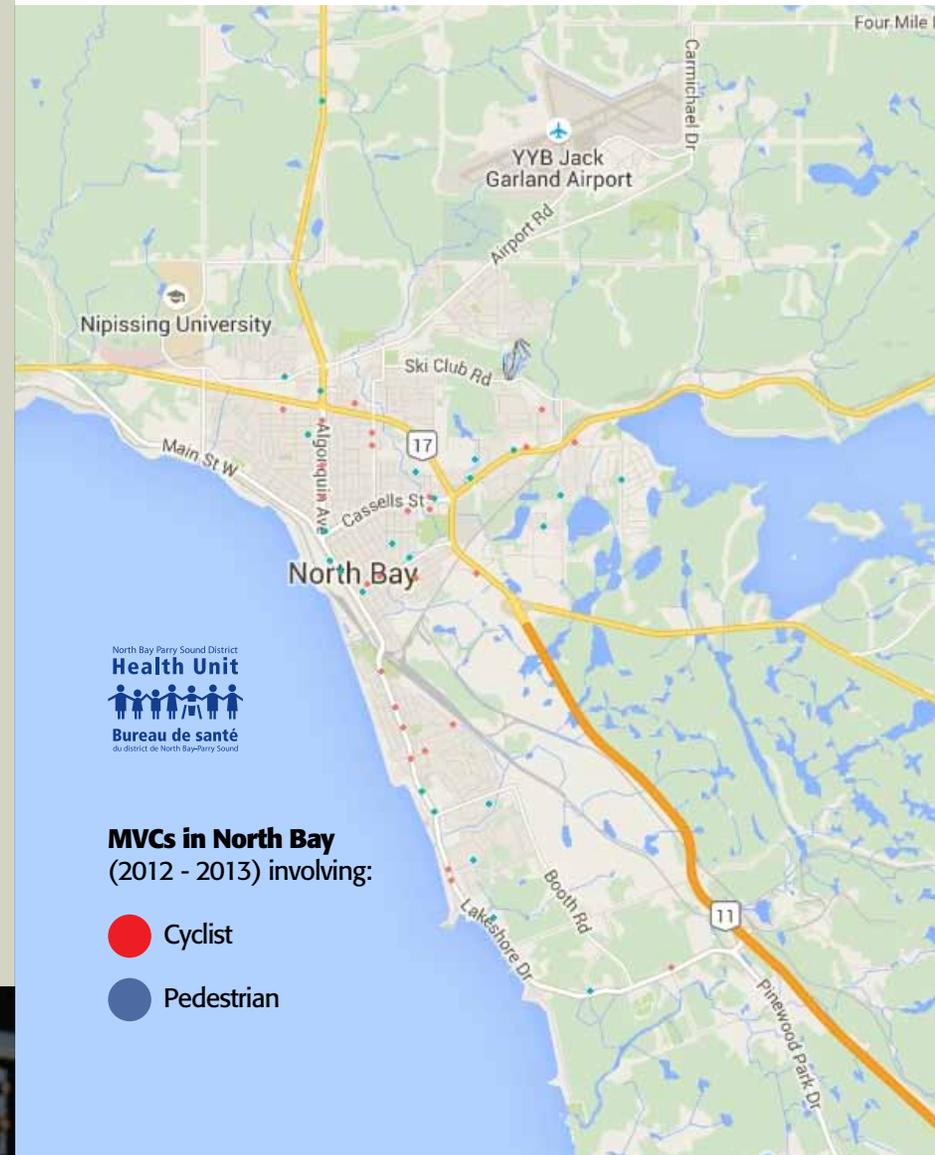
We asked families about their current school transportation behaviours and what prevented their children from being active on the way to school. We also gathered local road safety information. This identified where motor vehicle collisions (MVC) with pedestrians and cyclists occurred in North Bay. It also determined which schools' walking routes were in higher-risk zones.

Then School Travel Planning committees did a school walkabout to look at pedestrian and cyclist infrastructure. They highlighted features that could be barriers to active school travel - such as traffic, potholes, discontinuous sidewalks, and lack of a crossing guard. With the information from parents about problematic intersections, we conducted a traffic study at key intersections during peak hours. We used a GoPro time-lapse video recording and conducted a traffic count.

The data collected reinforced that parents had legitimate safety concerns. There were inconsistent crossing guard services, discontinuous sidewalks, fast-moving traffic at key crossings with poor signage, and snow banks that impeded the view of motorists and pedestrians.

We took these findings to our School Travel Planning partners, including the City of North Bay Planning Services, and the Nipissing Parry Sound Transportation Consortium. Working together, we created an innovative action plan that addressed the safety concerns that parents identified.

We plan to have more School Travel Planning committees across the district in 2015 and 2016!



Healthy Smiles Ontario Dental Clinic

Good oral health is important to a child's overall health. However, for some families in our community dental care may not be affordable.

The provincial government launched the Healthy Smiles Ontario program in October 2010. This program provides dental services for children and youth 17 years of age and under, who do not have access to any form of dental coverage and meet the financial eligibility criteria. It is part of the Ontario Poverty Reduction Strategy.

With funding from Healthy Smiles Ontario, we opened our dental clinic in June 2011. It's been a very busy place! We had 119 new children accepted into the Healthy Smiles Ontario program in 2014. Our dentist, registered dental hygienists, and certified dental assistants level II have provided a range of dental services to children.

In 2014, we provided 6,983 services to 807 children who attended the dental clinic. This included:

- topical fluoride treatments, pit & fissure sealants, scaling, and oral hygiene instruction
- exams and x-rays
- fillings
- tooth extractions, pulpotomies, and root canals

Going to the dentist can be a scary experience for some children and their parents. We work very hard to help families feel welcome. We also want children to be comfortable and have a positive experience when they visit our dental office.



Oral Health Statistics

Dental Clinic

807 children seen at the dental clinic for preventive and treatment services

- 185 were Healthy Smiles Ontario children
- 175 were Children in Need of Treatment children
- 134 were Ontario Disability Support Program children
- 237 were Ontario Works children
- 74 were Non-insured Health Benefits for First Nations children
- 2 were children from Children's Aid Society

2,088 appointments at the Dental Clinic last year

- 86% attended their appointments with our dentist
- 85% attended their appointment(s) with our dental hygienist

Dental Screenings

2,942 children screened in area schools (Jan-Dec)

145 children screened at a Health Unit screening clinic

205 children (6.6% of all children screened) identified with urgent dental needs

137 children referred by dentists to treat dental emergencies



Adventures in Cooking Part 2

We provided food skills training for staff working with children in North Bay and Parry Sound. This allowed them to present a five-lesson cooking skills program called Adventures In Cooking 2 for children aged 8 to 12.

We trained 19 staff, representing 14 different community organizations and First Nation Wellness Centres. The number of staff we trained has doubled since 2011.

Participants reviewed leadership tips and food skills by preparing child-friendly recipes in an inspected kitchen. They practiced slicing and dicing at the coleslaw prep station. They gained experience cooking on an induction hot plate as they made a red lentil, tomato and carrot soup. They also mastered the steps to make a cheese sauce from scratch for a classic mac and cheese dish. To wrap up, everyone sat down for some good eats and a lively discussion about working with kids in the kitchen.



Bringing a Food Charter to North Bay and Parry Sound

- 18 people took part in Parry Sound's Food Charter meeting
- 15 community leaders in North Bay learned about Food Charters
- 42 people attended meeting to develop Food Charter in North Bay

A food charter is a vision statement that defines what a community wants their local or regional food system to look like. This charter becomes a reference document. Municipal decision makers can then use it to design and direct policies that improve the well-being of their community.

On November 5, a group in Parry Sound met. Lauren Baker led their discussion to set priorities for a food charter. Lauren is a Food Policy Specialist with the Toronto Food Policy Council and a member of Toronto Public Health's Food Strategy Team. The group had representatives from the Town of Parry Sound, Wasauksing First Nation, Parry Sound District Social Services Administration Board, Georgian Bay Biosphere Reserve, and several local producers. Parry Sound drafted a Food Charter to share with their community.

Dr. Wayne Roberts spoke with two different groups in North Bay on November 19, about what food can do for the city, and what the city can do for food. He is a well-known Canadian food policy analyst and writer. The mayor, local producers, representatives from the City of North Bay, two school boards, North Bay Regional Health Centre, and several other organizations gathered in the morning to

share their views on our local food system. That same afternoon, 42 representatives from Ontario Ministry of Agriculture, Food and Rural Affairs (OMAFRA), Canadore College, the Gathering Place, Community Living, United Way, YMCA, Nipissing First Nations, and many others discussed developing a Food Charter with Dr. Roberts. After the sessions, we surveyed residents to find out more details about what they wanted to see in a food charter.

We have received valuable feedback at every stage so far. There has also been a lot of interest shown in a future Food Policy Council. In 2015, we will continue to move forward with Food Charters.

"It's an incredible idea when you think you're trying to attract individuals to your community and create a synergy for our citizens to lead a healthy active lifestyle. If we can be known as the healthiest city in Northern Ontario, it's quite a branding achievement."

*Mayor Al McDonald,
interview with CTV at Food
Charter Visioning Session
November 19, 2014*

Grow a Row

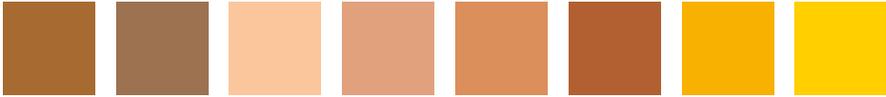
In the spring of 2014, Grow a Row was launched in North Bay. Grow a Row runs in many communities across Canada. It connects those who grow food in their backyard, with those who have limited access to fresh produce.

Despite a late start and poor growing season, Grow a Row registered 24 participants. However, many other community members grew an extra row of vegetables in their garden. Once harvested, they shared their

vegetables with the Gathering Place Soup Kitchen or the North Bay Food Bank. In total, 1,000 lbs. of fresh, local produce was donated over the course of the season. That was 10 times more than we had intended!

The North Bay Area Community Garden Coalition worked with the Gathering Place, Greening Nipissing, and the North Bay Parry Sound District Health Unit to implement Grow a Row. In 2015, we plan to expand its reach into other towns in the area.





Bring Back the Tradition of Healthy Eating

- The Ontario rates of type 2 diabetes in Aboriginal people are 3 times higher than non-Aboriginal populations.

B. Shah, et al., "Diabetes and First Nations people," in Diabetes in Ontario: An ICES Practice Atlas, eds. Jan E. Hux, et al. Toronto: Institute for Clinical Evaluative Sciences, 2003, p. 13.235

The Health Unit wrapped up five years of the diabetes prevention project, funded 100% by the Ministry of Health and Long-Term Care. Our overall goal was to prevent the onset of diabetes. To achieve this, we increased awareness and offered training programs for healthy eating and physical activity.

We distributed large colour magnets for physical activity and healthy eating to compliment the northeast regional marketing campaign, "Bring Back the Tradition of Healthy Living". Our basic messages remained constant: Eat Right, Drink Water, and Be Active. The campaign ran on APTN, CTV, Anishinabek News, and Wawatay News.

We worked with six First Nations, two Friendship Centres, one Métis Office, and the Madadjiwan Economic Development Corporation. They selected training opportunities and projects that fit into their schedules and interests.

This year, train-the-trainer community kitchens were held for Food Preservation Canning, Soup Making and Quick and Easy Breakfast/Lunches. The Good Food Box, a wholesale group-buying club, operated at five sites. It provided about 158 families with fresh vegetables and fruit every month. We provide food and physical activity newsletters that were distributed and was often reproduced in Band Newsletters. This went to about 500 households monthly. Small fitness equipment was purchased for all sites. Six sites took part in an incentive prize program to increase physical activity. Additionally, six sites received snowshoes and had groups going out for winter exercise.

BRING BACK THE TRADITION OF HEALTHY LIVING

Healthy eating can help reduce our risk of developing **diabetes**.

Diabetes is not part of our traditions but a healthy balanced diet is. Eating vegetables, fruits, and lean meats can help keep us healthy and diabetes free.

Eat Right, Drink Water + Get Active.

For more information contact your local health unit.



North Bay Gets Active

It was a busy year for the newly formed North Bay Gets Active Partnership Project. Many partners worked together to help the City of North Bay become a more active community. The project succeeded by organizing a pedometer lending program; a free speaker series; an interactive website categorized for kids, youth, adults, older adults, and accessible recreation; and providing physical activity passes for all grade 5 and 9 students within the City of North Bay.

The goal of the 22 local organizations is to develop a streamlined approach to promote healthy active living programs available within the City of North Bay and to decrease the barriers to participation.

A Steering Committee of key community partners worked with the four sub-committees. The Steering Committee met every two months, while the marketing and branding, funding, school connections, and evaluation sub-committees had monthly meetings. We held a strategic planning session in September and developed a 2-year action plan. As well, we secured a North Bay Gets Active logo and website (www.northbaygetsactive.ca). With these, the community now has a one-stop trusted source for physical activity information and support.

Although the Health Unit brought this opportunity to the community table, many organizations have worked tirelessly to get this initiative off the ground. This includes the YMCA of North Bay, City of North Bay, Nipissing University, Canadore College, Heart and Stroke Foundation, Indian Friendship Centre, Near North District School Board, Parachute, and Sport North Bay to name a few.

The North Bay Gets Active project will ultimately improve physical activity opportunities for children, youth, families, older adults, and people with disabilities.



"North Bay Gets Active is exactly what our City and community members need to get more active! We need to bring together our physical activity resources and help support people to access them and participate to be as active as possible."

*Ian Kilgour,
City of North Bay's Parks
and Recreation Director,
Strategic Planning session on
Wednesday, September 22,
2014*

Tanning Beds

The Health Unit welcomed the Ontario Skin Cancer Prevention Act (Tanning Beds) on May 1, 2014. This meant youth under 18 years of age would not be allowed to use ultraviolet light treatments for tanning. Public Health Inspectors identified 16 businesses with tanning beds within our Health Unit district. They received a visit by our Public Health Inspectors. The operators of the tanning beds were informed of the regulatory requirements and provided with signage. Our inspectors are required to investigate any public complaints related to tanning beds. However, we received no public complaints about tanning beds in 2014.

The Ontario Skin Cancer Prevention Act (Tanning Beds) prohibits persons under 18 years of age from using UV tanning equipment in this facility.

Proof of age will be required for individuals who appear to be less than 25 years old before using UV tanning equipment.



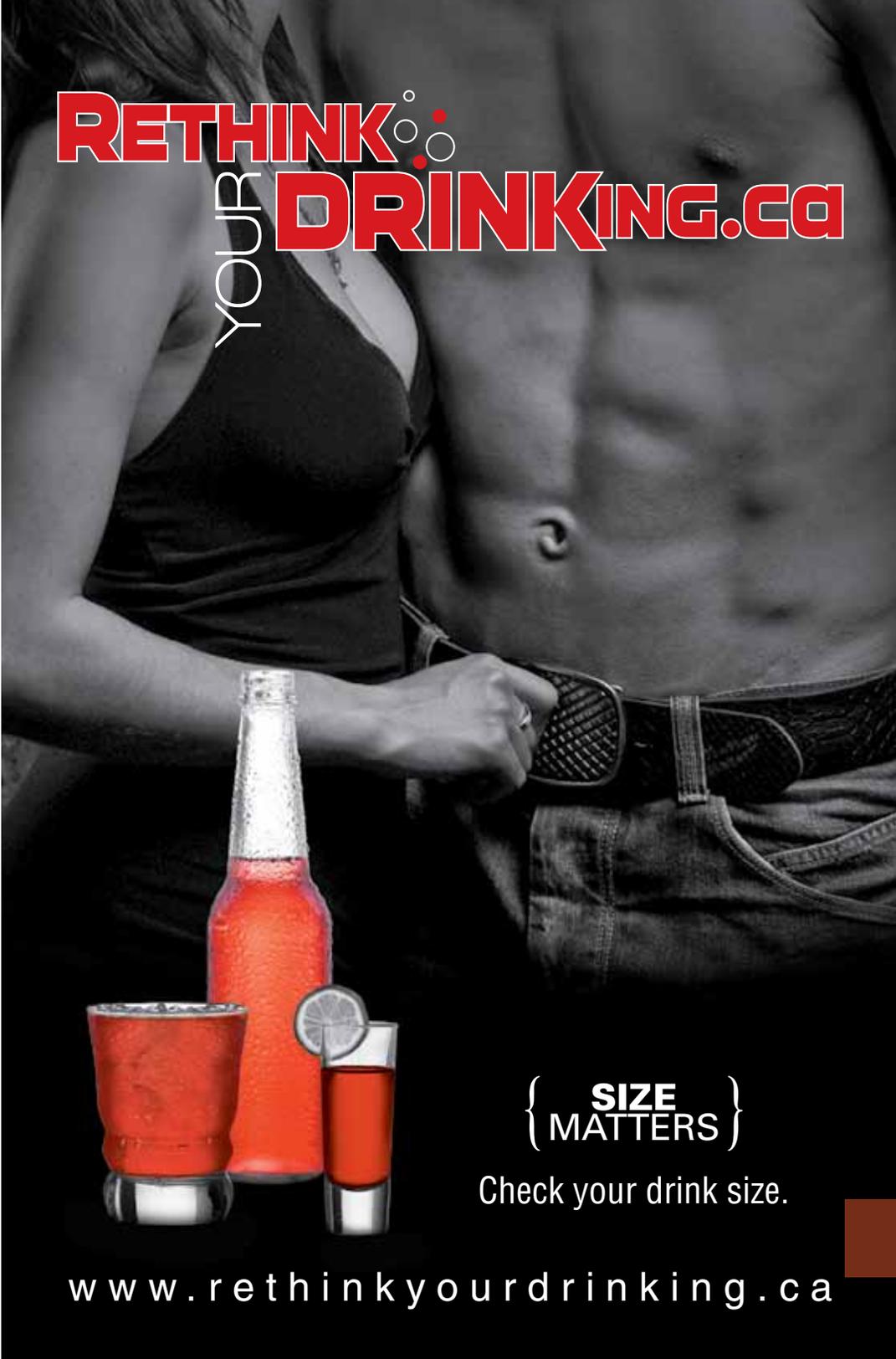


Rethink Your Drinking campaign

This year marked significant work on the Rethink Your Drinking campaign at Canadore College and Nipissing University in North Bay. As a result, we now have four themed posters for the campaign: **Size Matters, Protection Matters, Sex Matters, and Playing Matters**

We are extremely thankful for the support of four Nipissing University nursing students. They enthusiastically helped test the posters with the students on campus. With this valuable feedback, we determined the most appropriate messaging for our target audience.

During the fall, we launched the "Size Matters" theme on campus. Community health promoters informed students about Canada's Low-Risk Alcohol Drinking Guidelines. Students also took part in the pour challenge to learn about the size of standard drinks and wore fatal vision goggles to experience the impairment of different blood alcohol content levels. To build relationships, we met with various Canadore and Nipissing departments to talk about alcohol use on campus and in our community. We are looking forward to continuing activities and working with our partners in the years to come.



RETHINK: YOUR DRINKING.ca

{ **SIZE**
MATTERS }

Check your drink size.

www.rethinkyourdrinking.ca



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Environmental Health Statistics

Food Premises

- 862 retail food premises inspected
- 268 re-inspections conducted of retail food premises
- 1,446.60 kg of unfit food discarded
- 9 tickets issued to retail food premise operators
- 8 food premises closed in 2014
- 102 complaints against food premises investigated
- 352 food handlers trained and certified

Community Events

- 730 community event applications reviewed
- 74 inspections of community special events

Drinking Water

- 178 adverse drinking water reports investigated
- 67 boil water advisories issued
- 20 drinking water advisories issued
- 48 risk assessments of small drinking water system completed

Recreational Water

- 40 public pools inspected
- 15 public spas inspected
- 2 public wading pools inspected
- 19 municipal bathing beaches monitored
- 390 water samples from beaches collected

Animal Bites

- 406 animal bite reports investigated
- 79 mandatory vaccination letters issued to animal owners
- 25 people received rabies Post-Exposure Prophylaxis (PEP)

Facility Inspections

- 27 children's recreational camps inspected
- 32 group homes inspected
- 46 Licensed Day Nurseries inspected
- 168 Personal Service Establishments inspected

Vector-Borne

- 94 traps set for adult mosquitoes
- 13 human acquired ticks submitted for testing

Improving Sexual Health Practices

The Sexual Health team added a Nurse Practitioner to The Clinic's multidisciplinary health care team. We wanted to enhance the existing health care services offered at the Sexual Health clinic and provide greater sexual health services to the residents of the North Bay Parry Sound district.

The Nurse Practitioner decreased the demand for clients requiring an appointment with the Sexual Health physician. This established a more efficient approach to client care, wait times, follow-up, and continuity of care.

The Nurse Practitioner provided primary sexual health care services including clinical, counselling, and referral services. The Nurse Practitioner's practice heavily emphasized health promotion and disease prevention.

With over 800 patient visits over the year and 800 consultations, the Nurse Practitioner was a great benefit to the Sexual Health program.



Sexual Health

12 busloads of Nipissing University students stopped at the Health Unit for the "Frosh Amazing Race"

8,916 Sexual Health Clinic visits

Outreach clinics:

8 in Sturgeon Falls

22 in Mattawa

2 in Burk's Falls

856 visits at clinics in Secondary Schools

98 clients accessed Enhanced Secondary School Services

382 cases of Chlamydia reported

14 cases of Gonorrhoea reported

3 cases of HIV reported

2 cases of Syphilis reported

430 treatments for Sexually Transmitted Infections provided through the Sexual Health Clinic

70,804 condoms distributed:

14,143 by The Clinic

2,068 by Community Information Services

4,293 in school Sexual Health clinics

50,400 by Needle Exchange Sites

Needle Exchange Program:

168,908 Needles provided

112,732 Needles returned

181 Safer Inhalation Kits provided

2,880 visitors to Northern Points Needle Exchange sites

Blue Flag Beach

We congratulate Waubuno beach, Parry Sound, for being granted Blue Flag status. Blue Flag is awarded to beaches with high standards for water quality, safety, and environmental management. It is an internationally recognized certification.

In 2014, only 25 beaches in Canada received Blue Flag status. Our Public Health Inspectors assisted by collecting the water samples at Waubuno beach. We are proud to work with the Town of Parry Sound and Georgian Bay Biosphere

Reserve to achieve Blue Flag status. Congratulations to all of those who worked so hard to reach this goal.



Private Water

Diseases from drinking water are common in Ontario. But they can be prevented. We provided water sample test kits for homeowners on private water supplies. This allows them to test their water regularly for bacteria. In 2014, we had 9,187 private water samples submitted to the laboratory for analysis. After homeowners received their results, our Public Health Inspectors helped homeowners interpret the results. As well, we provided advice to homeowners so that they could have safe drinking water.



S.C.R.E.E.N. - Seniors in the Community Risk Evaluation for Eating and Nutrition in Mattawa

SCREEN is a tool used to identify nutrition-related problems before they become more serious or difficult to reverse. We know that 42% of falls can be related to nutrition and dehydration issues and 34% of seniors are at nutritional risk. Early identification of nutrition problems helps us link at-risk seniors to appropriate services before disability or illness occurs. This enables them to be healthier and live independently.

We trained 11 people from the Alzheimer's Society, North Bay Regional Health Centre, and third-year nursing students from Canadore College/Nipissing University on the use of the SCREEN tool.

The town of Mattawa was our first choice to offer the SCREEN program pilot. In the fall, 32 adults over 60 years of age received the nutrition presentation and completed the questionnaire. As an incentive, we offered a grocery store gift card as thanks for completing the survey.

The Healthy Living team Nutrition Program and the Stay On Your Feet Nipissing Coalition supported this initiative. In the future, we plan to recruit more seniors to take part in this project.



Emergency Management Exercises in Parry Sound

In Ontario, all municipalities and health units should conduct annual emergency management training and exercises. This year, the communities in East and West Parry Sound District chose Pandemic Influenza as the theme for their training and exercise.

Our Emergency Preparedness Manager worked with the Municipality of Magnetawan and the Town of Parry Sound. With the Community Emergency Management Coordinators from the two host municipalities and the Office of the Fire Marshall and Emergency Management, we developed a training agenda and facilitated each day. The pandemic exercise was well received by the mayors, councillors, and municipal staff who attended.

Community Influenza Clinics

- **24 community clinics** were provided across the district
- **5,258 doses of influenza vaccine** administered by Health Unit staff in 2014 including 4,219 at our community clinics
- **39,960 doses of influenza vaccine** provided to health care providers in our district
- **22 pharmacies** provided influenza vaccine across the district

In 2014, we started our clinics earlier in October. We did this due to feedback from the community and low attendance at clinics the previous year. This resulted in higher attendance at our community influenza clinics. We were able to get the "snowbirds" from our district in for their flu vaccines at these clinics as well. Wait times at clinics were short, with clients waiting no more than 15 -20 minutes to receive their vaccine.

We also decided to offer Flumist® to children aged 2 years to 5 years of age. This was due to evidence that it was the most effective vaccine for this age group. However, Flumist® was not publicly funded and parents would have to pay for



this vaccine. Another problem was that it was not available until mid-November. As a result of this delay, parents with children in this age group were not interested. We will be investigating the feasibility of making flu mist available at our 2015 clinics.

The supply of influenza vaccine was limited in early October due to over a million doses of influenza vaccine not meeting quality standards. This limited the amount of vaccine healthcare providers got during the first two weeks of October. However, after the middle of October, there were no restrictions on the amount of vaccine.



Your community is here to help.

Municipal Alcohol Policies (MAPs)

9 municipalities/townships attended a Municipal Alcohol Policy workshop - 12 participants

2 municipalities completed MAPs
Three municipalities/townships asked us for help with their Municipal Alcohol Policies (MAPs).

The Township of Armour worked over the summer to update their MAP and a Public Health Nurse reviewed it. Changes were completed and Armour council adopted the MAP in October of 2014. Callander requested feedback on their MAP in August 2014. We suggested some minor changes and their council also adopted their MAP.

Both the Township of Armour and the Municipality of Callander received signage for their licensed establishments. It included Standard Drinks, Low Risk Alcohol Drinking Guidelines, Sandy's Law, no alcohol beyond this point, and others. We did not complete the consultation with the third township in 2014.

Mobilizing Community Wellness and Safety

HUB Statistics

164 acutely elevated risk situations involved the Hub

291 individuals received assistance

56% of the situations involved children

26% involved domestic violence

79% of the situations involved a mental health risk factor

Community Mobilization North Bay, or Gateway Hub, is a partnership between the Health Unit and many other community agencies. The goal is to increase community wellness and safety.

The Hub provides a forum for agencies to gather twice weekly to identify situations where people and/or families are at increased levels of risk. Methods to address the risk are planned by the involved agencies. Services are then offered in a timely manner before the situation escalates.

Identifying risk factors determines the level of risk for individuals and families. It also helps establish the agency supports required. Risk factors have included drug and alcohol use, chronic gambling, criminal involvement, violence in the home, missing school, and no access to appropriate housing. On average, more than six risk factors contributed to each high-risk situation.

Between December 2013 and December 2014, the Hub was involved in 164 situations of acutely elevated risk, and partners assisted 291 individuals in our community. In nearly half (46%) of the situations, a suspected mental health problem was a contributing factor. Children were involved in over half (56%) of the situations and domestic violence in over a quarter (26%).

A few of the partners at The Hub are: the North Bay Police Service, the District of Nipissing Social Services Administration Board, the Indian Friendship Center, the North Bay Regional Health Centre - Crisis Intervention program, Hands TheFamilyHelpNetwork.ca, school boards, Children's Aid Society, and the Crisis Center. A Public Health Nurse from the Health Unit attended the Hub's twice-weekly meetings. The Health Unit also provided staff to support ongoing evaluation and reporting.



Clinical Information Services

Clinical Information worked to improve our clients' capacity to access, understand, and act on information for health and well-being. We also collected information about local health-related issues and provided information and interventions to address local needs.

We had an increased number of requests over the previous year. We attributed many of these to gaps in community resources and services and a lack of primary care providers. Our data showed:

- 36% increase in requests related to mental health/stress
- 50% increase in inquiries implicated by social economic status
- 21% increase dealing with symptoms
- 28% increase involving senior supports
- 25% increase in communicable disease control inquiries

There was a 20% increase in inquiries related to finding a family physician or nurse practitioner. These requests required a disproportionate amount of time to address heightened distress related to complex situations. We had to work with those dependent on narcotics for pain control and those who required full medical examinations to receive Ontario Disability Support Program (ODSP). As well, this lack of comprehensive health care is a concern when we face rising rates of obesity and diabetes among children and young adults and increased need for chronic disease management for our aging population.

Clinical Information also continued to do significant work in tobacco cessation interventions. We assessed these clients and linked them to internal and external services and resources. We also used harm reduction strategies to work with those at high risk and using drugs.

Find, Treat, Cure Tuberculosis

Our goal is to reduce the burden of Tuberculosis (TB). The Communicable Disease Control program continued to work with community partners and health care providers to plan to manage TB effectively.

A total of 199 health care providers received two resources we developed: A Tuberculin Skin Test (TST) Desk Reference and Guidelines for Management of Positive TSTs. We offered nine TB education sessions for health care providers in rural areas. We also distributed revised Tuberculosis Standards to 35 health care providers in remote areas.

Staff from our program continued to provide consultations for the management and control of tuberculosis cases within various settings. As well, we provided and ensured access to TB medications at no cost to clients and providers.

TB is curable. It is important to find, treat, and cure everyone who gets ill with TB.





Protection from Second-Hand Smoke

We worked with non-profit housing providers to protect our residents from second-hand smoke. A Community Health Promoter contacted 20 providers about their smoke-free policies and offered our assistance. Three already had smoke-free policies for their buildings, while 10 more were interested in further information. As a result, one provider moved towards adopting a smoke-free policy.

The Ministry of Health and Long-Term Care announced new changes to the Smoke-Free Ontario Act on November 7. Starting January 1, 2015, it will be illegal to smoke on patios, playgrounds, and outdoor sports fields. As a result, we received signage and provided municipalities with information and next steps about the new changes.



Quit Smoking Support

We continue to help our community quit smoking through our Quit Clinic, STOP on the Road workshops, and Brief Cessation Counselling.

In our Quit Clinic, we supported 140 people to quit smoking. This was an 11.25% increase over the previous year. During 455 appointments, we provided counselling and Nicotine Replacement Therapies. This included 919 boxes of patches, 39 Thrive™ lozenges, 119 mini lozenges, 36 mouth sprays, 53 inhalers, 114 packs of 4 mg. gum, and 140 of 2 mg. gum. An evaluation of our Quit Clinics in 2013 was completed and the data showed:

21% did not have a primary health care provider

15.3% were Aboriginal

20.2% were Francophone

56.5% were diagnosed with depression, bipolar, anxiety, or schizophrenia

81% had an annual after-tax household income of less than \$30,000

We also offered seven STOP on the Road workshops. Three workshops were held in North Bay and 43 people attended. We had 7 people in Sturgeon Falls, 36 in Sundridge and 13 who attended in Mattawa. All participants received a one-hour educational presentation and five weeks of the nicotine patch. The Centre for Addiction and Mental Health were to contact participants at five weeks and six months for follow-up.

Staff in two programs also received training to start Brief Cessation Counselling with Health Unit clients. If the evaluation determines that the program is successful, we will implement across the Health Unit.

Tobacco Enforcement

Tobacco Vendors

- 52 public complaints against tobacco vendors investigated
- 159 tobacco vendors inspected to ensure compliance with Smoke Free Ontario Act (SFOA) display/promotion requirements
- 33 warnings issued to tobacco vendors about display and promotion under SFOA
- 152 compliance checks completed at tobacco vendors for youth access under the SFOA
- 48 warnings issued to tobacco vendors about youth access under the SFOA
- 15 tickets issued to tobacco vendors related to youth access under the SFOA
- 7 trials attended for tobacco vendors not compliant with youth access under SFOA

Workplaces/Public Places

- 49 public complaints against workplace/public places under the Smoke Free Ontario Act investigated
- 727 workplaces/public places inspected to ensure compliance with Smoke Free Ontario Act
- 114 warnings issued to workplaces/public places under the SFOA
- 6 tickets issued to workplaces/public places not compliant with SFOA

Municipal Tobacco Bylaws

- 67 warnings issued to individuals in non-compliance with municipal tobacco bylaws
- 7 complaints investigated under municipal tobacco bylaws

Distribution of Safer Inhalation Kits

In July, the Ontario Harm Reduction Program began funding provincial safer inhalation supplies to harm reduction programs throughout Ontario. The AIDS and Hepatitis C Programs at the Ministry of Health and Long-Term Care also supported this funding.

Crack cocaine smoking has increased across Ontario and is a public health concern. The distribution of safer smoking supplies helps decrease the transmission of HIV, Hepatitis C, and other communicable diseases among people who smoke crack cocaine. By providing safer smoking supplies, we can help reduce the harm associated with smoking crack cocaine and it gives us an opportunity to connect people to health and social services.

Our local Northern Points Exchange Harm Reduction Program began distributing safer smoking supplies at all four sites in October. The AIDS Committee of North Bay and Area have distributed safer smoking supplies at their site since 2010, as a self-funded pilot project.

By providing a safe, non-judgmental environment and building trusting relationships with clients, we can then use these opportunities to counsel clients and facilitate drug abstinence when they are ready.



“The provision of kits for safer inhalation allows PHUs to make contact with people who do not inject, to provide education about the risks of hepatitis C, and other health problems; encourage testing for hepatitis C and other blood-borne infections and STIs; and provide condoms and counselling about safer sex practices. Establishing trusting relationships with users of crack and methamphetamines can also allow for services and referrals to be provided, addressing other determinants of health and health care needs, including addiction treatment for those who want to undertake it”

*Provincial Infectious Diseases Advisory Committee on Communicable Diseases.
Recommendations for the Public Health Response to Hepatitis C in Ontario (July 2014).*



Staffing, Recruitment and Student Placements

37 job postings
61 student placements
20 job shadowing experiences

The Health Unit coordinated a number of student placements and job shadowing experiences. We worked with our Nursing Practice Manager, managers and staff, as well as educational institutions. This collaboration helped students have meaningful and effective placements during their time at the Health Unit.

These placements included:

Nursing
Environmental health
Dietetics
Dental
Health promotion
Master of public health
Medical students



Mentoring Public Health Nurses

To help nurses develop competencies in public health nursing, we provided a Public Health Nursing Mentorship program to new and existing nurses at the Health Unit. This program provides an orientation to public health nursing in Ontario, using a Transition to Public Health Nursing Toolkit. The Association of Nursing Directors and Supervisors in Official Health Agencies developed the Toolkit.

Many health units use this toolkit for their mentorship programs. We had 10 nurses participate in the program in 2014 and now have 28 mentors at the Health Unit. It has increased our organizational effectiveness and fostered critical inquiry and continuous quality improvement. It also helps retain public health nurses.

Our Nursing Practice Manager worked with other Northern Ontario Health Units to update the Transition to Public Health Nursing Toolkit in the spring. In October, the Chief Nursing Officer from Algoma Public Health and our Nursing Practice Manager presented the updated toolkit to the Association of Nursing Directors and Supervisors in Official Health Agencies. We presented our unique mentorship program at a Provincial Conference in April 2014.

Professional Development

The Health Unit continues to offer opportunities for staff to upgrade their skills and learn about key activities relevant to public health.

We provided all staff with information about Postpartum Mood Disorder Strategy, Changes to the Immunization of Schools Pupils Act, Fostering a Respectful Workplace, and Weight Bias in the Delivery of Health Care.

We provided two **Orientation Sessions** for new employees. Staff interested in mentoring students were provided with **Preceptorship Training** and many staff participated in an **Incident Management System (IMS)** for Public Health Workshop. Management also took part in a **Bringing LEADS to Life Workshop**.

We also organized refresher training for:

NAV portal – Human Resources and Finance System, **Quality Assurance Portal**, **Cardiopulmonary Resuscitation (CPR)**

Preparing for Ebola

Ebola virus disease became a concern in 2014. As a result, both the Emergency Preparedness Manager and Occupational Health and Safety (OH&S) in collaboration with the Communicable Diseases Control team focused on Ebola Preparedness.

Occupational Health & Safety

OH&S developed Guidelines for Ebola Preparedness and Response. This helped staff understand the transmission of Ebola, assessment, control, training, and reporting requirements. It also included detailed checklists for donning/doffing personal protective equipment. We also provided Personal Protective Equipment Refresher Training for Ebola for relevant staff.

Emergency Preparedness

The Health Unit is required to hold annual training and exercises to ensure the Health Unit is prepared for emergencies. On November 24, the annual exercise tested the Health Unit's Ebola preparedness. The scenario provided multiple opportunities to discuss and provide feedback about how prepared we are to monitor and respond to a potential Ebola outbreak locally. Key staff attended the exercise from Communicable Disease Control and communications, Executive Directors, and the Medical Officer of Health. The successful exercise demonstrated our preparedness to respond to Ebola Virus Disease.

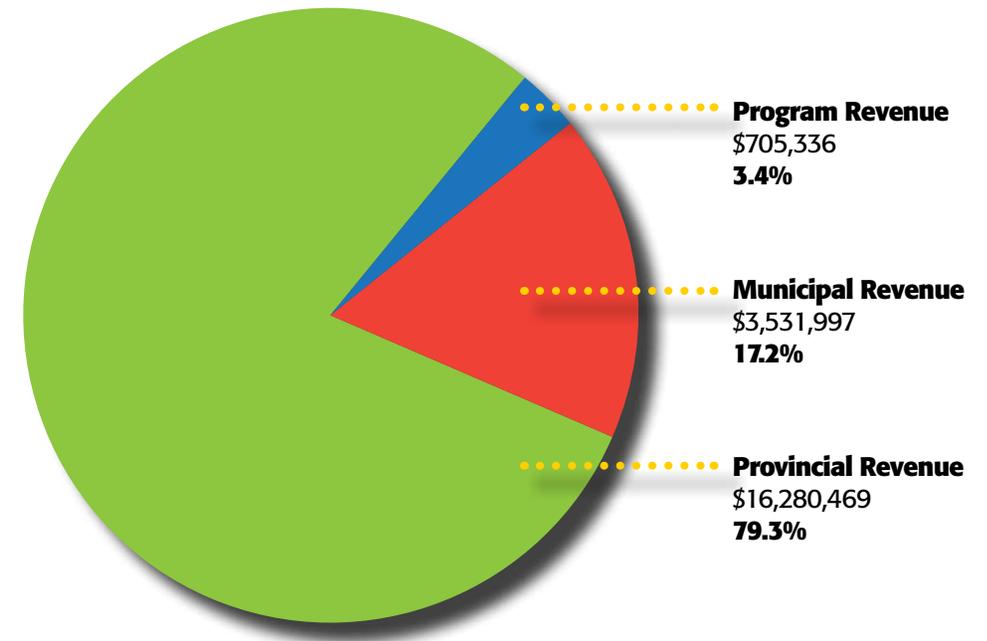




Expenditures by Program & Service 2014

Program & Service	Dollars (\$)
Chronic Disease & Injury Prevention	2,823,900.00
Organizational Supports	2,274,900.00
Food/Water/Rabies/Other Environmental Hazards	2,128,900.00
Building & Information Technology	2,405,600.00
Dental Services	1,609,100.00
Sexual Health	1,530,200.00
Vaccine Preventable Disease	1,446,100.00
Reproductive & Child Health, Healthy Babies	1,323,900.00
Communicable & Infectious Disease Control	1,132,500.00
Research & Quality Assurance	939,000.00
Office of the Medical Officer of Health	529,000.00
Smoking and Tobacco	424,200.00
Genetics	413,800.00
Communications & Community Information Office	317,800.00
Vector Borne Disease	164,100.00
Emergency Preparedness	130,800.00
Building & Land	584,400.00
Total Expenses	20,178,200.00

Total Revenue 2014



North Bay, West and East Nipissing, and Mattawa

- Provided support to 147 clients at North Bay breastfeeding clinics
- Provided 6 Community Flu Clinics in North Bay, 3 in West Nipissing, and 3 east of North Bay
- Provided STOP on the Road quit smoking workshops to 43 in North Bay, 7 in Sturgeon Falls, and 13 in Mattawa
- Provided S.C.R.E.E.N. program in Mattawa
- Provided Parenting Workshops to 39 people
- Supported Food Charter workshop in North Bay
- 4,063 private water samples submitted to North Bay office

West Parry Sound

- Provided 6 Community Flu Clinics
- Provided 13 clients with breastfeeding support
- Participated in Emergency Management Exercises
- Supported the development of Parry Sound Food Charter
- 8 parents attended West Parry Sound Parenting Workshops
- 3,545 private water samples submitted to Parry Sound office

East Parry Sound

- Provided 6 Community Flu Clinics
- Provided STOP quit smoking workshop to 36 people
- Provided Parenting Workshops to 20 people
- Provided 14 clients with breastfeeding support
- 1,579 private water samples submitted to Burk's Falls office

Our Service Area

There are 36 separate health units in Ontario and we are one of 7 health units in northern Ontario. We cover over 17,000 km² and are located in the southern part of northeastern Ontario. Our area includes most of Nipissing District and all of Parry Sound District. We have 31 municipalities, 4 unorganized areas, and 8 First Nation Reserves within our district.



Sources: Esri, HERE, DeLorme, USGS, Intermap, increment P Corp., NRCAN, Esri, Japan, METI, Esri China (Hong Kong), Esri (Thailand), TomTom, MapmyIndia, © OpenStreetMap contributors, and the GIS User Community