

2015 Annual Report

Message from the Medical Officer of Health

The Leeds, Grenville & Lanark District Health Unit is pleased to share this report with the community. It illustrates our performance in meeting the Ministry of Health and Long-Term Care Accountability Agreement Indicators for Public Health Programs, and highlights a few of the programs under each of the four Health Goals of the Health Unit Strategic Plan.

All of our programs and services are carried out in collaboration with our partners. So this report is really about a healthy community in action. A healthy community is connected to its people, and uses its resources well to create supportive environments, adopt healthy policies, encourage community action, enhance individual knowledge and skills, and reorient health services to promote and protect health and prevent health problems. (Ottawa Charter on Health Promotion, WHO 1986)

A healthy community also cares for all of its members and works hard to ensure that all residents have the same opportunity for health regardless of their personal attributes or circumstances, e.g., people who live in poverty, are gay, lesbian, bisexual, transsexual or queer, or are differently abled. This guides the work we do with our partners to promote health equity.

More needs to be done so let's continue together on our journey to create healthy communities for healthy people.

Paula Stewart MD, FRCPC
Medical Officer of Health



Mission Statement:

To promote and protect the health of people who live, learn, work and play in Leeds, Grenville and Lanark through public health leadership, services, communication and community collaboration.

Community Vision Statement:

Healthy people in healthy communities.

Organizational Vision Statement:

Organizational Excellence.

Values

Achievement of both the community and organizational visions will be enabled by the following value statements to guide the behaviour of all Health Unit staff:

Integrity:

To act ethically, honestly, and reliably.

Respect:

To interact with professionalism and sincerity, with our diverse community.

Caring:

To serve with compassion, dedication and empathy.

Accountability:

To accept responsibility for our decisions and actions.

Fairness:

To challenge injustice and inequity, by acting with courage and reason.

Quality:

To strive for excellence through continuous learning and improvement.

Client-Centred Service:

To deliver responsive, accessible, and effective programs and services, in collaboration with our community.

Healthy Workplace Environment:

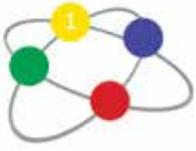
To create an organizational culture that supports professional growth, while maintaining a healthy balance between work and personal life.

www.healthunit.org 1-800-660-5853

Accountability Agreement Indicators

Each year the Ministry of Health and Long-Term Care sets performance indicators as part of the Public Health Funding and Accountability Agreement. The Health Unit reports on these Accountability Agreement indicators to the Ministry midway through the year and at the end of the year, and provides details in variance reports when an indicator is not met. The Ministry develops new indicators based on ministry priorities, current health unit performance, the availability of new indicators, and feedback from health units.

Number	Indicator	2015 Results			2016 Target
		Reporting Period	Target	Performance	
2.4	% of high-risk Small Drinking Water Systems (SDWS) inspections completed for those that are due for re-inspection	January 1, 2015 - December 31, 2015	100%	94.7%	100%
3.2	% of suspected rabies exposures reported with investigation initiated within one day of public health unit notification	January 1, 2015 - December 31, 2015	100%	98.8%	100%
3.5	% of salmonellosis cases where one or more risk factor(s) other than "Unknown" was entered into iPHIS	January 1, 2015 - December 31, 2015	90%	100%	90%
4.2	% of influenza vaccine wasted that is stored/administered by the public health unit	September 1, 2014 - August 31, 2015	5%	2.3%	5%
4.3	% of refrigerators storing publicly funded vaccines that have received a completed routine annual cold chain inspection	January 1, 2015 - December 31, 2015	100%	100%	100%
1.4	% of tobacco vendors in compliance with youth access legislation at the time of last inspection	January 1, 2015 - December 31, 2015	≥90%	93.5%	≥90%
1.5	% of secondary schools inspected once per year for compliance with Section 10 of the Smoke-Free Ontario Act (SFOA)	January 1, 2015 - December 31, 2015	100%	100%	100%
1.6	% tobacco retailers inspected for compliance with Section 3 of the Smoke-Free Ontario Act (SFOA): NON- SEASONAL	January 1, 2015 - December 31, 2015	100%	100%	100%
1.6	% tobacco retailers inspected for compliance with section 3 of the Smoke-Free Ontario Act (SFOA): SEASONAL	January 1, 2015 - December 31, 2015	100%	100%	100%
1.7	% tobacco retailers inspected for compliance with display, handling and promotion sections of the Smoke-Free Ontario Act (SFOA)	January 1, 2015 - December 31, 2015	100%	100%	100%
1.8	Oral Health Assessment and Surveillance: % of schools screened	July 1, 2014 - June 30, 2015	100%	100%	100%
1.8	Oral Health Assessment and Surveillance: % of all JK, SK and Grade 2 students screened in all publicly funded schools	July 1, 2014 - June 30, 2015	100%	95.9%	100%
1.9	Implementation status of NutriSTEP® Preschool Screen	January 1, 2015 - December 31, 2015	Intermediate	Intermediate	Intermediate
1.10	Baby-Friendly Initiative (BFI) Status <small>‡ Pre-Assessment site visit is completed by 2015 year-end. *Pre-Assessment site visit is completed by 2016 year-end.</small>	January 1, 2015 - December 31, 2015	Advanced ‡	Advanced	Advanced.



Healthy Growth & Development

Accountability Agreement Indicator:

Baby-Friendly Initiative (BFI) Status

Breastfeeding Committee of Canada (<http://breastfeedingcanada.ca/BFI.aspx>)

What is the Baby Friendly Initiative (BFI)?

- International effort launched by the World Health Organization (WHO) and UNICEF in 1991.
- BFI requires that all families regardless of feeding method are supported to feed their children in a safe and nurturing way.
- Acknowledges that families need to be supported to make informed feeding decisions without the influence of formula marketing.
- Respects the informed decision of the mother, regardless of infant feeding method.
- BFI does not discriminate against women who formula feed their babies.

In Canada, Baby-Friendly designation can be awarded when a health care organization meets the following steps:

- A written breastfeeding policy that is routinely communicated to the Board of Health, staff and volunteers.
- Train all health care providers in the knowledge and skills necessary to implement the breastfeeding policy.
- Inform pregnant women and their families about the benefits and management of breastfeeding.
- Support mothers to establish & maintain exclusive breastfeeding to 6 months.
- Encourage sustained breastfeeding beyond six months with appropriate introduction of complementary foods.
- Provide a welcoming atmosphere for breastfeeding families.
- Promote collaboration between health care providers, breastfeeding support groups and the local community.

Why has the Health Unit Engaged in the BFI Journey?

- Fits with Goal #1 of the Health Unit's Strategic Plan – Healthy Infant/Children/Youth Growth & Development.
- Creates supportive environments that improve breastfeeding outcomes and increases supports in the tri-county.
- Aligns with the Child Health and Reproductive Health Ontario Public Health Standards.
- BFI is a Public Health Accountability Indicator.

Next Steps

The Health Unit is presently working at completing Category 3 - Advanced Work. We will continue to work toward reaching Category 4 - BFI Designation.

Promote, Protect, & Support Breastfeeding through the Baby-Friendly Initiative

- ☺ We welcome ALL families.
- ☺ We help families to make informed decisions around feeding their baby.
- ☺ We recommend exclusive breastfeeding for the first 6 months of life.
- ☺ We recommend that breastfeeding continue for up to 2 years and beyond with the addition of iron-rich solid foods when baby is 6 months old.
- ☺ Our staff receive training to support breastfeeding families.
- ☺ We welcome mothers to breastfeed anywhere, anytime.
- ☺ We support our staff in the continuation of breastfeeding upon their return from parental leave.
- ☺ We work with our community partners to provide a consistent approach to breastfeeding support in Leeds, Grenville & Lanark.

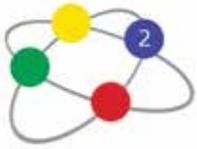
BFI

The Health Unit made significant progress towards achieving BFI designation in 2015

Workshops were held for healthcare providers and community partners

Breastfeeding clinics were initiated in Brockville, Smiths Falls and Perth





Healthy Living

Accountability Agreement Indicator:

% of refrigerators storing publicly funded vaccines that have received a completed routine annual cold chain inspection.

Current immunization is one of the outcomes in the Health Unit's Healthy Living goal. A critical component of ensuring vaccine safety and efficacy is making sure that vaccines are properly stored and handled, and that education is provided to individuals responsible for storing vaccines in settings such as physician's offices and pharmacies. Maintaining vaccines in the required temperature range of +2°C to +8°C from the time of manufacture until the vaccines are administered to individuals is referred to as the "cold chain." A "cold chain incident" occurs when vaccine is exposed to a temperature outside the required temperature range of +2°C to +8°C for any period of time and the potency of the vaccine is potentially compromised.

The Health Unit is required to complete annual inspections of all refrigerators storing publicly funded vaccine. This work is completed by a Registered Practical Nurse (RPN) or a Public Health Nurse (PHN) and, in 2015, 175 refrigerators were inspected. This includes inspection of all the vaccines fridges in Long Term Care Facilities and all the Pharmacies that store Flu vaccines for the Universal Influenza Immunization Program (UIIP).

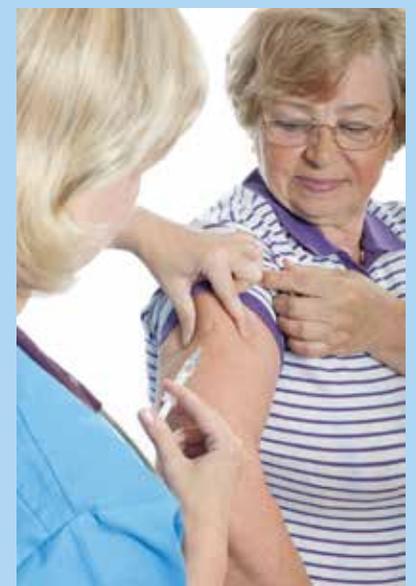
During an inspection, the RPN/PHN ensures that:

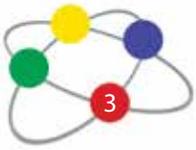
- **Digital temperature monitoring devices are in place on refrigerators.**
- **Digital temperature monitoring devices are checked twice daily and the temperature is documented upon arrival and before office closing to ensure refrigerator temperatures remain between +2°C and +8°C.**
- **Vaccine Storage and Handling Guidelines and materials are available and easily accessible.**

As well, the RPN/PHN provides education to health care providers that vaccines are perishable, must be refrigerated immediately upon receipt, must be transported under required cold chain conditions, and must be transported in properly labelled insulated containers. The Health Unit also informs health care providers to report vaccine that has been exposed to a cold chain incident within 24 hours to the Health Unit, and provides ongoing education about vaccine ordering, storage and cold chain management. To help deliver this education, the Health Unit has developed an E-Learning Module for those who store, transport and administer publicly funded vaccine. This allows health care providers to complete cold chain education at their convenience.

100%
or 175 fridges were inspected for devices in place and that temperature logs are being kept

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Health Equity

Three important concepts that help to shape the Health Unit's work are health equity, health inequities, and the social determinants of health.

Health Equity:

Everyone should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background.

Health Inequities:

There are avoidable differences in health between groups that are caused by our living conditions (jobs, housing, neighborhoods, etc). Not all members of our communities have the same opportunities to be healthy.

Social Determinants of Health:

The conditions in which people grow, live, work and age have a powerful influence on health. Inequalities in these conditions lead to inequalities in health.

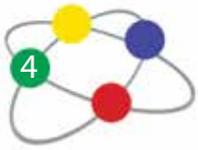
The Health Unit has a Health Equity Coordinator who participates in local initiatives addressing health equity. As well, the Health Unit has an epidemiologist who analyzes and reports on the health of residents in Leeds, Grenville and Lanark. The epidemiologist's analysis and reports examine how the social determinants of health influence residents' health and help to plan Health Unit programs.

Shaping our Work

The Health Unit examines how the social determinants of health influence residents' health and that helps to plan our programs.

Advocacy for members in our communities to have the same opportunities to be healthy is part of our role.





Healthy Environment

Accountability Agreement Indicator:

% of high-risk food premises inspected once every 4 months while in operation

One of the outcomes of the Healthy Environment goal in the Health Unit's strategic plan is that residents live in an environment with healthy food.

Public Health Inspectors are required to inspect high-risk food premises once every 4 months while in operation and in 2015, 244 high-risk food premises were inspected throughout Leeds, Grenville and Lanark. During an inspection, Public Health Inspectors assess the risk of food safety practices, determine compliance with regulation, and provide consultation and education on food handling practices. Public Health Inspectors promote the identification of hazardous food items and processes, and identify critical control points for these items and processes.

The risk category for a food premise is determined by considering the following criteria:

- characteristics of the population served,
- the amount of handling and preparation of food involved,
- if the premises has been involved in a food-borne illness, or is noncompliant on a regular basis.

After the inspection is completed, areas of noncompliance are discussed with the operator and staff, and strategies for correction are determined. Corrections may be made during the inspection. Education of staff on food safety issues during the course of the inspection is also carried out by the inspector, in an effort to attain long term compliance. Where infractions are identified, and the issue cannot be corrected by the end of the inspection, a date for re-inspection may be set, and charges for infractions may be laid. In cases where a health hazard exists, the establishment may be closed.

The inspection report indicates the conditions observed on the day of inspection. Reports show noncompliant issues and the comments made by the inspector. The Health Unit is mandated by the Ministry of Health and Long Term Care to provide a process for the public to access information from food premises compliance inspection reports upon request.

The Health Unit's new program, Insight, is making it easier to share food premises compliance inspection reports. Check out our website for current reports for all inspected food premises in Leeds, Grenville and Lanark Counties.

100%
or 244 high-risk food premises were inspected every 4 months.

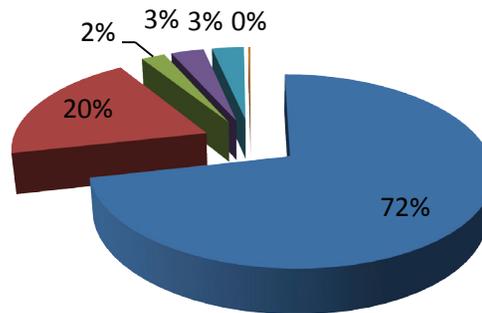
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Health Unit Financial Report

2015 Sources of Funding

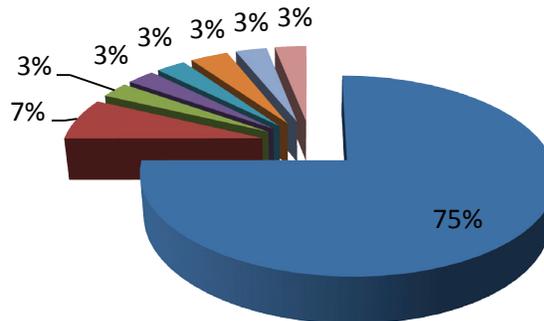
- Provincial Government
- Municipal Levies
- Miscellaneous
- Ontario Works Dental Program
- Land Control Program fees
- Interest Earned



Of the total expenditures of \$ 15,013,741, \$ 12,097,866 or 80.57 % goes towards Salaries & Benefits.

2015 Expenditures

- General Public Health Programs
- Healthy Babies Healthy Children
- Healthy Smiles Ontario
- Smoke Free Ontario
- Infectious Disease
- Preschool Language
- Land Control Program
- Ontario Works Dental Program



Organizational Goals

The Health Unit's ability to meet the Accountability Agreement indicators and the outcomes in the Moving Upstream strategic plan relies on strong leadership and productive staff.

The Health Unit's strategic plan outlines six organizational goals which are based on Excellence Canada's six quality drivers, and promote continuous quality improvement and organizational excellence:

- Leadership driver – effective, responsive leadership team.
- Planning driver – public health planning and practice that responds efficiently and effectively to current and evolving conditions.
- Client driver – clients and community satisfied with and engaged in programs and services.
- People driver – workplace that supports wellness and strengthens the capacity of our workforce.
- Process driver – consistent, effective management of key organizational processes.
- Partner driver – increased community capacity through strategically aligned collaborative partnerships.

The province has also developed Organizational Standards for Ontario Public Health Units, which include activities that will assist boards of health in developing strong governance and management practices.

The Health Unit has included the activities from the Organizational Standards when developing the organizational goals, and has been regularly reporting on progress with strategies to meet the Organizational Standards to the Board of Health.



Visit our website: www.healthunit.org

Email us at: contact@healthunit.org

Call the Health ACTION Line:

1-800-660-5853

Connect with us on social media:

[LGLHealthunit](#), [areyousafe](#), [LGLbeaches](#)



It's our people that make the difference...

Health Unit staff are efficient, approachable and passionate about public health. Most people have heard of Public Health Nurses and Public Health Inspectors, but there are many other health professionals who deliver public health services in Leeds, Grenville and Lanark.

Other health professionals include: Registered Dietitians, Registered Dental Hygienists and Certified Dental Assistants, Speech Language Pathologists, Registered Nurses and Registered Practical Nurses.

A variety of other professionals support our programs and services, including people with training in administration, statistics, evaluation, communications, graphic design, information technology, finance, human resources and quality improvement.

Our staff are required to have degrees or diplomas in their field and are supported with continued education and professional development.