### Annual Service Plan & Budget: Substance Use and Injury

# A. Community Need and Priorities

Population data guiding our programs and services indicate that:

# Tobacco use continues to be a problem

- 24.4% of population in LGL reported currently smoking cigarettes -- 37.8% within the lowest income group compared to 15.5% within the highest income group.
- The highest proportion of individuals smoking is in the 25-44 year age group (33.2%) and the 45-64 year age group (28.9%).
- A higher proportion of individuals living in urban settings reported being a current cigarette smoker than those in rural settings (28.2% vs. 20.0%).

# Alcohol use exceeds low risk drinking guidelines

- 8.6% of adult population reported exceeding the Low Risk Drinking Guidelines.
- Reports of exceeding low risk drinking guidelines were more common among men than women, among individuals in younger age groups, and among those living in rural rather than urban settings. Cannabis use is common
- -23% of overall population in LGL reported using marijuana in the past 12 months; highest proportion (48.1%) in 12-24 year age group compared to other ages (15.9%-20.0%) Injury is common
- -19.5% of overall population reported being injured in the past 12 months
- -36.5% reported being injured due to a fall in the past 12 months; higher proportion of those 65+ year (62.3%) and 12-24 year age group (45.5%) than other age groups
- Increasing trend for ambulatory visits to hospital for injury due to falls between 2003 and 2014

### B. Key Partners/Stakeholders:

All of our programs and services are provided in collaboration with external Partners including: Prevention of smoking and smoking cessation and adherence to the SFO ACT

- police services/boards
- Ministry of Finance inspector, Federal Tobacco Inspectors
- Hospitals, Community Health Centres, Family Health Teams, Pharmacists, Physicians
- Social services
- COPD community of practice group
- Schools

# <u>Promotion of healthy substance use and prevention of problematic use</u>

- Lanark County Mental Health, Lanark Leeds Grenville Addictions and Mental Health, Children's Mental Health of Leeds Grenville, Open Doors Lanark County Children's Mental Health
- Interval House
- Municipal (elected and staff, e.g., bylaw)
- Youth Centres and Services, Connect Youth
- Schools
- HARS (Aids)
- Justice and Probation services
- Ontario Works
- Community Health Centres

# **Prevention of Injuries**

- Brockville Cycling Advisory Committee
- Falls prevention groups (Providence Care, Victoria Order of Nurses, Community Primary Health Care, NeuroTrauma Foundation, Mills Community support)
- Queens University
- Champlain, Southeast LHINs
- United Way

Programs and Description	Interventions	Intervention Description	Objectives	Indicators of success
Program 1 Electronic Cigarettes Act Protection and Enforcement	Intervention 1 - Inspections  Intervention 2 - Education Campaign to general public	<ul> <li>Conduct mandatory youth access inspections</li> <li>Conduct complaint-based inspections</li> <li>Conduct compliance inspections</li> <li>Provide information via media, social media to increase awareness of electronic cigarettes their benefits and risk.</li> </ul>	E-cigarette vendors are in compliance with the Electronic Cigarette Act, 2015. Youth have reduced access to tobacco products and e-cigarettes.	-# of inspections -% of inspections completed  # radio and print materials # of postings and reach of posts # of social media shares
	Intervention 3 – Training to PHU staff	Participate in training and information sessions provided by Ministry and TCANs		# staff attending training sessions
	Intervention 4 – Database Maintenance	Maintain list of all electronic cigarette vendors in LGL and input into TIS		# of vendors in data base
Program 2 SFO Prosecution	Intervention 1 - Legal Consultation and prosecution	Consult with lawyer and provide evidence in court for prosecutions	Tobacco vendors and other organizations that are subject to the Smoke-Free Ontario Act are in compliance with the Act.	# (%) convictions

Program 3 SFO Protection and Enforcement	Intervention 1 – Staff Education Intervention 2 – Collaborative Enforcement activities Intervention 3 - Inspections	<ul> <li>Participate in training to keep up to date with ministry mandates and to meet regional needs</li> <li>Participate in joint sessions with police, by-law, Ministry of Finance, Fire Prevention officer etc. to improve collaboration on enforcement opportunities and issues</li> <li>Conduct mandatory youth access inspections: non- seasonal vendors</li> <li>Conduct mandatory inspections – seasonal vendors</li> <li>Conduct mandatory annual tobacco vendor display and promotion inspections</li> <li>Conduct mandatory annual inspections of schools</li> <li>Conduct inspections of controlled smoking areas</li> <li>Conduct complaint-based inspections for bars and restaurants</li> <li>Conduct complaint- based inspections of hospitals</li> <li>Conduct complaint- based inspections of workplaces and public spaces</li> </ul>	Tobacco vendors and other organizations that are subject to the Smoke-Free Ontario Act are in compliance with the Act.  Youth have reduced access to tobacco products and ecigarettes.	-# training sessions  -# of joint enforcement sessions -# of joint inspections  -# of inspections by site -% of inspections
	Intervention 4 – Tobacco Information System - Database maintenance	<ul> <li>Synchronize TIS data within 24 hrs of inspection</li> <li>Conduct data verification for TIS data</li> <li>Maintain vendor database</li> <li>Maintain inspector database</li> <li>Record percent of inspectors with foundations training</li> </ul>	Tobacco vendors and other organizations that are subject to the Smoke-Free Ontario Act are in compliance with the Act.	% compliance with reporting

Program 4 SFO	Intervention 1 –	•	Attend TCAN meetings and share information		# communiques
<b>Tobacco Control</b>	Participate in TCAN		among community partners	Youth have reduced access to	
Coordination	meetings	•	Participate in TCAN advocacy initiatives	tobacco products and e-	
	Intervention 2 – Information and	•	Public information and education using media, social media, website, presentations to	cigarettes.	# media releases # hits on website
	Education	•	interested groups Training sessions to health care providers.	Tobacco vendors and other organizations that are subject to the Smoke-Free Ontario Act are in compliance with the Act.	# training sessions for service providers

Program 5 SFO Youth Tobacco Use Prevention	Intervention 1 – Tobacco Free (TF) policy development	Recruit and work with community partners to develop tobacco free policies within region	Youth have reduced access to tobacco products and ecigarettes.	-# of consultations -# sites working towards TF policy development
	Intervention 2 – Education on emerging products	Work with youth to increase accurate knowledge among youth and young adults regarding harm of emerging products	Community partners, policy-makers, and the public, including priority populations, are meaningfully engaged in the planning, implementation, development and evaluation of programs and services for preventing injuries, and substance use and harm reduction.	-# youth and young adults engaged in education work
			There is an increased adoption of healthy living behaviours and personal skills among populations targeted through program interventions for preventing injuries, substance use and reducing harms associated with substance use.	
Program 6 – SFO Comprehensive Tobacco Control	Intervention 1 - Cessation	<ul> <li>Promote provincial and regional cessation activities to LGL residents through media and social media</li> <li>Provide smoking cessation sessions to priority residents with NRT</li> <li>Train staff to provide smoking cessation counselling</li> </ul>	Residents have an increased awareness of smoking cessation services and activities There is an increase in the number of residents participating in smoking cessation activities	# media releases # hits on website # people participating in smoking cessation sessions # quit attempts # of staff trained

Program 7 – Information Education on Substance Use	Intervention 1 – Cannabis	<ul> <li>Promote Canada's Lower Risk Cannabis Use Guidelines through presentations, community events, radio, print and social media</li> <li>Support legislation requirements as directed</li> </ul>	There is a reduction in population health inequities related to injuries and substance use.  Community partners are	-# of presentations -# community events -# radio and print materials -# of postings -reach of posts -# of social media shares
	Intervention 2 – Opioids	See Infectious and Communicable Disease Prevention and Control Standard for details  Naloxone distribution and training Harm Reduction Community Engagement	aware of healthy behaviours associated with the prevention of injuries, including healthy living behaviours, healthy public policy and creating supportive environments.  There is increased public awareness of the impact of risk and protective factors associated with injuries and substance use.  There is an increased adoption	-# of individuals who have received naloxone training -# of community organizations who have received training -# and type of community partners engaged in community response plan -# of community partners completing data entry into the Ontario Harm Reduction database -# partners trained to use Overdose Reporting Tool
	Intervention 3 – Alcohol	Promote Canada's Alcohol Low Risk Drinking Guidelines through presentations, community events, radio, print and social media	of healthy living behaviours and personal skills among populations targeted through program interventions for preventing injuries, preventing substance use, and reducing harms associated with substance use.	-# of presentations -# community events -# radio and print materials -# of postings -reach of posts -# of social media shares

Program 8 – Community Consultation and Collaboration – Substance Use	Intervention 1 – Municipal Drug Strategy (e.g., alcohol, cannabis, opioids)	<ul> <li>Work with municipalities to implement their Municipal Drug Strategies.</li> <li>Promote awareness of risks using substances (e.g., alcohol, cannabis, opioids)</li> <li>Provide opportunities to share information, education opportunities and resources.</li> <li>Provide policy-building and capacity-building opportunities that address specific needs and concerns within the local region.</li> <li>Seek support and develop linkages to professional and provincial organizations.</li> </ul>	Community partners, policy makers and the public, including priority populations, are meaningfully engaged in the planning, implementation, development and evaluation of programs and services for preventing injuries and substance use, and harm reduction.	# municipalities involved in municipal drug strategies # of networking events # of educational events # of advocacy opportunities # of new policies
Program 9– Information and Education on Injury Prevention	Intervention 1 – Falls Prevention	Promote awareness of falls prevention in older adults through presentations, community events, ,radio, print and social media	There is an increased adoption of healthy living behaviours and personal skills among populations targeted through program interventions for preventing injuries, preventing substance use, and reducing	-# of presentations -# community events -# radio and print materials -# of postings -reach of posts -# of social media shares
	Intervention 2 – Road Safety	Promote awareness of road safety through presentations, community events, radio, print, social media and signage	harms associated with substance use.	-# of presentations -# community events -# radio and print materials -# of postings -reach of posts -# of social media shares -# new road sign
Program 10 – Community Consultation and Collaboration – Injury Prevention	Intervention 1 – Falls Prevention	-Work with LHINs (Southeast and Champlain) and community partners on the LHIN fall prevention program including education and fall prevention services for older adults	There is an increased adoption of healthy living behaviours and personal skills among populations targeted through program interventions for preventing injuries, preventing substance use, and reducing harms associated with substance use.	-# collaborative interventions by type