



BOARD REPORT

Friday April 16, 2010

PROGRAM REPORT

APRIL 2010



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We work with the Grey Bruce community to protect and promote health.

HEALTHY COMMUNITY DEVELOPMENT

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HEALTHY COMMUNITY DEVELOPMENT

Celebrate Foods From Field To Table

Public Health raises awareness of the freshness and nutrient content of local, Ontario and Canadian grown and produced foods. These foods are harvested ripe and ready to eat; reducing the loss of nutrients that occur when products ripen in warehouses or supermarkets. In addition, money spent at local markets stays in the area benefitting our economy and supporting local farms and farming families.

Support for food source awareness includes:

- Seasonal fruits and vegetables, serving suggestions and recipes are highlighted in monthly newsletters distributed to over 1,200 families in their *Good Food Box*.
- Food coordinators for *Community Kitchens* and *Healthy Beginnings* programs plan menu ideas around locally available food choices.
- The nutrition component of the *Food Handlers Training Course* emphasizes the benefits of choosing local, Ontario and Canadian products.
- April 2010, *Nutrition Month* activities focus on the theme of choosing local, Ontario and Canadian products.



Bridge Funding For Youth Engagement

The Ministry of Health Promotion has provided \$33,127 in funding to the Grey Bruce Health Unit as an interim measure to bridge local youth initiatives, such as the former Youth Action Alliance, and the new provincial youth engagement framework that will be announced in early 2010. The funding is intended to support health promotion initiatives and will be used locally to provide *Youth Engagement Grants*. These grants of up to \$4,000 are intended to motivate and create opportunities for youth engagement/action on health or community identified priority issues.



Eligible health promotion activities must focus on at least two of the following risk factors: tobacco use and exposure; physical activity; sport and recreation; healthy eating; mental health promotion; alcohol/other drug use; injury prevention; or, other issues, risk factors or protective factors identified by a community as important to youth health and development. Funded projects will be youth-driven, community-based and emphasize partnerships between youth and adults.

First Nation Participation In Drinking Water Source Protection Planning

Funding is now available to assist local First Nation bands to effectively participate in the Drinking Water Source Protection Planning process.

First Nation bands have the opportunity to participate as members of a Source Protection Committee (SPC). The number of First Nation seats on a SPC is determined by the size of the SPC area and the number allotted committee seats assigned to the specific SPC area by the Ministry of the Environment. Locally both the Chippewas of Saugeen and Chippewas of Nawash Unceded First Nation have been invited to participate as active committee members. Each band will be able to appoint one representative.

As full committee members, both First Nation communities will be provided an equal opportunity to review and comment on the draft terms of reference, draft assessment reports and source protection plans. Band Councils may voluntarily submit a separate resolution to the Minister of the Environment requesting an existing or planned drinking water system serving a reserve to be protected under the Clean Water Act First Nations Capacity Funding Grants (FNCFG).

Both First Nation groups are invited to apply for FNCFG. The objective of FNCFG is to promote the effective participation of First Nations in the Drinking Water Source Protection Planning processes. Activities that are eligible for funding include: research into the source protection planning process for municipal drinking water systems relating to traditional native lands; consultation with elders in the community; funding for a community member to sit on the SPC; securing technical support for consultants or technical staff from the native community to work with the review of the assessment report and source protection plan; review of assessment reports and source protection plans to determine potential impacts to aboriginal and treaty rights; coordination of community input into the assessment reports and source protection plans, including holding community meetings and other activities related to facilitating events.

CLIENT SERVICES

Support For Outbreak Management In Facilities

Public Health provides frontline support for outbreak management through consultation, investigation, education, training and resources. Newly revised best practice resources have been issued by the Provincial Infectious Diseases Advisory Committee (PIDAC). This can be accessed by contacting the Regional Infection Control Network (RICN). The RICN also offers consultation, training and education on infection prevention and control as well as outbreak management, as required.

Assistance from an Infection Control Resource Team (ICRT) is available through the Ontario Agency for Health Promotion and Protection (OAHPP). The ICRT provide specialized expertise and, when necessary, on-site outbreak management support to the facility and the Public Health Unit involved in an outbreak. Should additional assistance be considered, the local Medical Officer of Health (MOH) must notify the Chief Medical Officer of Health (CMOH) who will consult with the local MOH and the OAHPP to determine if the local resource capacity is maximized and if any additional specialized expertise is needed. Upon completion of their assessment and analysis, the ICRT will debrief the facility's outbreak management team and a report, with recommendations, will be provided to the team as well as the CMOH.

An Infection Control Resource Team was recently deployed to a local acute care facility. The final report is pending, however the assessment, analysis and debriefing were very positive and the processes seen as helpful.



Early Child Development Services

“More than one in four children enters Grade 1 significantly behind their peers.” states Dr. Charles Pascal in his provincial report on early learning, *With Our Best Future in Mind* (2009).

Public Health supports infant and child screening at key developmental stages including during pregnancy, at birth and at school entry. Screening resources are provided directly to parents at select intervals. Additionally, consultation with health and social services providers is available all through the early years through parenting support centres.

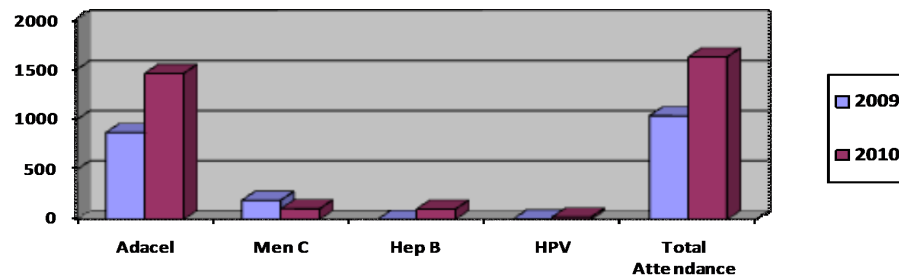
This comprehensive approach to early identification is further enhanced as physicians and healthcare providers include standardized screening at the routine 18 month toddler visit. Public Health works with physicians and other key partners to ensure an integrated approach focusing on early identification and intervention in order to determine school readiness.



2010 Secondary School Clinics

Immunization clinics were held in 13 secondary schools across Grey Bruce throughout February and March. Public Health administered 1,730 vaccinations; 610 more injections than in 2009, immunizing an additional 589 students.

Comparison Table: 2009 vs. 2010 Secondary School Immunization Rates



Mandatory and recommended vaccines are provided at these clinics. Mandatory vaccines include: tetanus, diphtheria, measles, mumps, rubella and polio. The recommended vaccines include: pertussis, h Hepatitis B, Meningococcal C and the HPV vaccine for Grade 9 girls who did not finish their series in elementary school. More students took advantage of the Hepatitis B catch-up program this year. Fewer students received the Meningococcal C due to this being the fifth year of this vaccine being offered to secondary students.

Students who have not received their required immunizations, or have failed to report their immunizations to Public Health, or have not filed an exemption form by March 31, 2010, will get a suspension notice in the mail. These students have until April 27, 2010, to receive the mandatory immunizations and/or report the same to Public Health or file their exemption. Failure to do so will result in suspension from school.

