

*Building healthy
communities together...*



Grey Bruce Health Unit • Annual Report 2010



What does it take to make

The Institute for Clinical Evaluative Sciences published a report in 2009 looking at the places around the world with the highest levels of health. The report gives five approaches to guide us as we work together for a healthier future for all of Grey Bruce.

1. Population health starts with responsible individuals and groups making deliberate and sustained effort to improve the overall health and well-being. The effort must be driven by a guiding health imperative which is the compass direction for every health strategy.

My vision is for Grey Bruce to be the healthiest jurisdiction in the province! It is invigorating to see communities across the two counties working to make health the goal. Play in Bruce Grey, Grey Bruce Healthy Communities partnerships, Grey Bruce Integrated Health Coalition, Grey Bruce Crystal Meth Task Force and Grey Bruce Health Network are some of the groups dedicated to this common goal.

2. The best strategies for improving population health and health related behaviours arise during the tenure of strong political leaders.

Grey Bruce is very fortunate to have local municipal and county leaders committed and willing to invest in building healthier communities. I applaud our local leaders' strong sense of purpose. The province is also providing direction in their efforts to renew the public health system in Ontario.



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a healthy community?

3. Government needs to gain a better understanding of societal attitudes toward health to be able to shape their policies to encourage healthy choices.

Let's inform our representatives of our wishes. Let's talk about bike lanes, clean water, local food, second-hand smoke bylaws, youth engagement, walk-able communities, equality and more!

4. A broad based "whole government" approach to health.

Ministries of the Environment, Education, Children and Youth, Health and Long-Term Care, Health Promotion and Sport, Natural Resources and all the accompanying agencies need to work towards our common goal of well-being.

5. Leading jurisdictions act promptly - they are the first to implement interventions.

Grey and Bruce Counties were among the first in Ontario to enact second-hand smoke bylaws and continue to be leaders in many community development initiatives. Let's continue to engage our children, neighbours, organizations and elected officials in making decisions that help us be healthy!

Together we build healthy communities!



alPHa Distinguished Service Award



Dr. Hazel Lynn receives alPHa 2010 Distinguished Service Award from Council of Ontario Medical Officers of Health Chair, Dr. Paul Roumeliotis.

Healthy Communities Connections

Building Community Capacity

Over 200 participants from both the public and private sector came together in May for the Healthy Communities Conference *Creating Community Capacity through Awareness Building and Partnership* hosted by the Grey Bruce Health Unit, the City of Owen Sound, Town of the Blue Mountains, Municipality of Meaford, Bruce Grey Catholic District School Board and Bluewater District School Board. The keynote address by the Honourable Margaret Best, Minister of Health Promotion, highlighted the need for individuals, organizations, communities and governments to work together to create a culture of health.

The strategic campaign “I want to be part of a healthy community...” was rolled out to coincide with the municipal elections. The goal was to engage residents on the importance of healthy communities. Each municipal candidate received an election information package. Public Health’s Facebook page *Grey Bruce Gets Healthy* was launched in conjunction with the campaign.

Following the elections, municipal leaders received the orientation package, *Municipalities Influencing Health – Together, we build healthy communities*. The material offers a variety of ideas on municipal and Public Health cooperation through planning, policy development and programs. Public Health Community Teams ensure ongoing discussion with municipalities to move these ideas forward. Municipal council presentations took place in Chatsworth, Georgian Bluffs, Meaford, Arran-Elderslie, Huron-Kinloss and Kincardine. Public Health staff participated in the Town of Hanover’s strategic planning process.

Building on the success of linking with local municipalities, an upper tier alignment with the County of Grey was formed. Topics identified for collaboration include GIS mapping; active and alternative transportation; development of a best practices checklists based on rural needs; tobacco-free outdoor spaces; and development of a Food Charter.

<http://www.publichealthgreybruce.on.ca/HealthyCommunities/Index.htm>



Dr. Hazel Lynn with Minister of Health Promotion, Margaret Best and Owen Sound City Manager, Jim Harrold

Active Transportation

The Board of Health resolution 2010-13, *Building Healthy Communities Together: Active and Alternative Transportation to Support Healthy Living in Grey Bruce*, urges municipalities to adopt active and alternative transportation as guiding principles in land use planning. Decision makers are asked to ensure policy pays special attention to access and equity.

Lack of transportation is identified as a major barrier to youth participation across Grey Bruce. With the goal of increasing opportunities for youth to use active transportation, the Heart & Stroke Foundation provided a \$5,000 grant for a travel routes mapping project. Youth will collect local data using GPS units and report back to participating municipalities.

Obesity

The *PLAY in Bruce Grey* initiative supports physical activity projects. The Municipality of Arran-Elderslie acts as the host agency under the direction of the steering committee representing the 17 partnering municipalities. The *PLAY* coordinator works with the municipalities to tailor action plans specific to each community. The *PLAY* model is recognized as a best practice by Physical Activity Resource Centre (PARC).



Bill Murdoch, MPP Bruce-Grey-Owen Sound, Cathy Smart, *PLAY* in Bruce Grey Coordinator and Ron Oswald, Mayor of Arran-Elderslie accept a cheque from Liz Chalmers of the Ontario Trillium Foundation.

Workplace

The *Your Health Matters* cancer prevention and screening program was piloted to health care providers at Grey Bruce Health Services and presented to 70 staff at the Bluewater District School Board. The program aims to increase awareness of risk factors for cancer, identifies local screening services and looks to motivate participants toward healthy behaviour.



<http://www.controlcancer.ca/yhm/>

Working with Community Partners

Supporting Local Producers

On November 15, over 30 area producers attended *Supporting Local Producers*, a one day workshop to look at having competitively priced local food available in area markets and restaurants while ensuring smaller local producers can remain viable. Hosted by FarmStart, the Ecological Farmers Association of Ontario, Grey Bruce Local Food Project and the Grey Bruce Health Unit, sessions included an introduction to direct marketing; the basics of marketing and branding; pricing and promotion; and using social media. A Public Health Inspector addressed food safety and regulatory requirements.

Grey Bruce Local Food Project

Public Health provides office space for the *Grey Bruce Local Food Project*. Jointly funded by Grey and Bruce Counties, the project aims to improve the viability of the farm sector by linking food producers and processors with end users including consumers, restaurants and institutional kitchens. The project provides information on the local food system including an inventory of local food businesses. Coordinators assist farmers and processors with production and processing practices, regulatory oversight and direct marketing. Public Health partnered in a summer-long media campaign in support of farmers' markets.

Held in November, the second *Grey Bruce Food Summit* addressed developing an efficient system for the distribution of local food. Public Health presented the new Healthy Communities initiative, particularly linking local food's role in Healthy Communities.

Addressing Poverty and Inequities

Bridges Out of Poverty

Bridges out of Poverty training offers the structures, ideas and tools a community needs to prevent and lessen poverty. Presented to over 160 staff and community partners, the program helps employers, community organizations, social-service agencies and individuals address poverty in a comprehensive way. Based on work by Dr. Ruby Payne, the training highlights the importance of aligning programs and services to increase job retention rates, build resources, and support those moving out of poverty.

The Cost of Eating Well in Grey Bruce

The *2010 Nutritious Food Basket Survey* identified that it cost \$166.64 per week (\$721.55 per month) to feed a reference family of four (two parents, two children) in Grey Bruce. These results were shared at the October community round table on food, *A Step in the Right Direction*. Over 35 participants from a variety of backgrounds came together to consider issues related to food accessibility and security.

<http://www.publichealthgreybruce.on.ca/HealthyCommunities/>



Tobacco Cessation



The Ottawa Hospital Model was introduced to the local hospitals. This is a best practice systematic approach to identifying tobacco users, providing a brief intervention, offering pharmacotherapy for patients while in hospital and referring patients to Smokers Helpline for follow-up counselling when discharged.

Public Health is now part of the Smokers' Helpline Fax Referral program. Staff faxes a client referral to Smokers' Helpline who will call the client within three working days. Evaluation of the Helpline shows that 60 per cent of clients reached by the fax referral would not have called Smokers' Helpline on their own.

You Can Make It Happen targeted health professionals to provide resources for tobacco cessation and to remind them of the influence they have on patients quitting. In September, Public Health, in partnership with the Mental Health Wellness Committee, brought together 35 health care professionals to learn more about providing cessation intervention to their clients and about the community resources that are available.

Public Health partnered with the Centre for Addiction and Mental Health to provide *STOP on the Road*, a group counselling session and five weeks of free nicotine replacement therapy to 130 smokers in Grey Bruce.

The *Driven to Quit Challenge* attracted 501 smokers in Grey Bruce; a 38% increase from 2009.

<http://www.publichealthgreybruce.on.ca/Tobacco/Quitting/>

Substance Misuse

Current Priority Issues Regarding Substance Misuse in Grey Bruce and Strategic Directions for Moving Forward provides a picture of the critical issues in Grey Bruce. The report reviews evidence-based prevention and harm reduction strategies. Recommendations include to:

- Continue a collaborative approach, while adopting the new Healthy Communities framework, to strengthen the network of partners working on substance misuse.
- Address the impact of alcohol consumption on injuries and chronic disease and support the development of a culture where moderation is the goal.
- Enhance evidence-based interventions for people at risk of harm from substance misuse.
- Work towards developing a long-term drug strategy that uses a comprehensive approach of Enforcement, Harm Reduction, Prevention and Education, and Treatment.



Crystal Meth

With Public Health as a partner, the Grey Bruce Crystal Meth Task Force leads a coordinated strategy to reduce crystal methamphetamine production, sale and use.

Over 300 first responders and others who routinely enter homes in the course of their work attended a public safety and drug awareness session. Participants were trained to recognize drugs and drug use, drug labs and the dangers they create.

The Town of Hanover enacted *The Grow House and Clandestine Laboratory Abatement By-Law*. This allows the municipality to recover the cost of emergency personnel and other public sector staff attending these illegal operations, as well as for remediation of buildings to ensure the health and safety of future occupants and neighbouring properties.

Alcohol

The alcohol problem remains significant in Grey Bruce. Recognizing that solutions lie in changing the culture of drinking, over 75 community leaders came together for the

forum *The Culture and Impact of Alcohol Use in Grey and Bruce*. It was identified that all segments of the community including parents, business owners, educators, health, social services and politicians have a role to play in changing the culture and impact of alcohol use.

Seventeen participants from nine area golf courses took part in an Alcohol Policy Development workshop addressing risks, liabilities and enforcing an alcohol risk management policy for customers and staff.

<http://www.publichealthgreybruce.on.ca/Injury/AlcoholDrugs/>

Youth Engagement

The Ministry of Health Promotion and Sport provided \$32,000 bridge funding following the suspension of the Youth Action Alliance program and prior to the launch of the new youth engagement framework. The Public Health Community Teams assisted in linking youth initiatives to the funding. Fifteen grants from \$1,000 to \$4,000 were issued to community groups, municipalities, schools and organizations to support youth-centered health promotion activities.

Mid-year, the Ministry introduced a revamped youth engagement initiative including funding for a new staff position. The Grey Bruce Youth Health Councils were set up with two students in each high school designated as Youth Health Liaisons responsible for rolling out monthly health campaigns. A workshop engaged Grade 7/8 students in the writing, directing and editing of videos focussing on health. The videos will be shown on the www.targetyouth.ca website.



http://www.publichealthgreybruce.on.ca/40_Dev_Assets/

Falls Prevention

The *Grey Bruce Falls Prevention and Intervention Program* addresses the needs of seniors at various risk levels of falling. The project is funded by the Southwest Local Health Integration Network under the *Aging at Home Strategy*.

There are five main components to the program: Comprehensive Falls Assessment, Multi-factorial Assessment, Home Support Exercise Program, 6-point self-screen and the Community Action Plan in which the Age Friendly Community concepts are used to address the community factors that play a role in falls prevention.

- 132 clients received a Comprehensive Assessment and follow-up.
- 226 clients received Home Support Exercise Program.
- 670 clients screened in the Multi-factorial Assessment pilot study at Grey Bruce Health Services, Warton; 3 per cent referred to CCAC.
- 7,965 copies of the 6 Warning Signs of Falls self-screening tool distributed.
- 5 Age Friendly Community Audits undertaken with results presented at 2010 Healthy Communities Conference.



http://www.publichealthgreybruce.on.ca/Injury/Older-Adults/Finding_Balance/



Reproductive Health

Public Health offers a range of prenatal programs to support families in understanding preconception health, healthy pregnancy and preparing for parenting; 443 expecting parents accessed these services in 2010.

<http://www.publichealthgreybruce.on.ca/Family/Preconception/>

Child Health

There were 2,126 visits to Healthy Babies Centres and Healthy Beginnings groups across Grey Bruce in 2010.

Consultations support families to monitor and address their child's health and growth. In 2010, 749 telephone, email and drop-in sessions were provided at the request of parents. In partnership with the Children's Aid, group programs were presented to 63 professionals and 316 parents, including a 12-week series for parents at risk.

<http://www.publichealthgreybruce.on.ca/Family/>

Healthy Babies Healthy Children

Healthy Babies Healthy Children offers prevention and early intervention to families with children 0-6 years. Almost all families in Grey Bruce who had babies received a follow-up phone call from a Public Health Nurse. Calls address any questions and concerns from the family and offer information on home visiting, access to services and other child and family topics. Of the 1275 families screened for potential risk factors, 299 shows at risk for one or more of issues such as isolation, low income, low education, etc.

In 2010, 148 families entered the Health Babies Healthy Children post-partum home visiting program to receive ongoing support from a team of Public Health Nurses, Parent Support Workers as well as other services, as required.

<http://www.publichealthgreybruce.on.ca/family/HBHC/Index.htm>

Let's Grow

Let's Grow brings together agencies working with children aged 0-6 to offer a seamless system of services for children and families.

More than one in four children in Ontario enters Grade 1 significantly behind their peers. Let's Grow partners come together in local schools each fall to offer growth and development screening of three-year-olds through the Let's Learn Kindergarten Registrations. Universal screening helps ensure that children have access to assistance and intervention to support early learning. More than 900 children attended registrations in 2010, resulting in over 50 referrals to programs and services designed to enhance the child's school readiness.

<http://www.publichealthgreybruce.on.ca/Family/LetsGrow.htm>

Oral Health Services



Public Health screened 7,166 children at elementary schools for dental decay. Screening also identifies children in need of coaching in oral hygiene, requiring fluoride treatment and/or referral to a dentist for treatment.

Of the children screened in schools, 857 were eligible for the *Children in Need of Treatment (CINOT)* program covering the cost of basic dental treatment for children 0-12 years whose families could not otherwise afford the service. In 2009, CINOT expanded include those 13-17 years whose families met income eligibility. In 2010, 84 youth received services under the expanded delivery plan. An additional 468 children were screened at the parent's request; of those, 329 children or 70% were eligible for CINOT.

Individual oral health training was given to 146 children and in 27 group education sessions. No-cost Public Health preventive clinics offering scaling, polishing, sealants and fluoride treatments opened in Owen Sound, Markdale and Walkerton. The new clinics provided services to 383 clients in addition to over 200 topical fluoride/varnishes given to children in the schools.

In October 2010, the province launched *Healthy Smiles Ontario (HSO)*. Offered through Public Health, the program provides a range of preventative and restorative dental services to children up to age 17 who meet family income eligibility.

<http://www.publichealthgreybruce.on.ca/Dental/>

Vaccine Preventable Diseases

Public Health inspected 128 facilities in Grey Bruce that store publicly funded vaccine. Vaccine must be kept at constant temperatures to maintain strength and viability and to prevent waste and exposure. As a result of enhanced education and surveillance, rates for vaccine wastage were down significantly from 87 incidents in 2009 to 58 in 2010.

Public Health distributed 1,567 orders of vaccine worth over \$3 million to health care providers across Grey Bruce. Public clinics gave immunization and travel related vaccines to 2,300 Grey Bruce residents. As well, 350 travel packages were compiled with recommendations for travel vaccines.

Over 5,000 doses of influenza vaccine were given through 12 community clinics. Public Health provided another 53,000 doses of influenza vaccine to doctors, family health teams and health care providers across Grey Bruce.

School-based clinics immunize students at specific grade levels. In the Grade 7 group, 79 per cent of students received the Meningococcal C vaccine and 76 per cent Hepatitis B. Human papillomavirus (HPV) immunization rates for Grade 8 females were 61 per cent; down 10 per cent from 2009.

Over 25,300 immunization records for students in daycare, elementary and high schools are assessed and maintained by Public Health. School suspension notices for elementary school children were not administered in 2010 due to H1N1 activities. However, 44 secondary school students were suspended for incomplete and/or overdue immunizations.

<http://www.publichealthgreybruce.on.ca/Immunization/>



Infectious Diseases Prevention and Control

Investigations were undertaken in 255 cases of reportable diseases to determine the source of illness, prevent spread and to provide consultation and resources. Local data is reported promptly to the province in order to identify clusters, increases in disease and multi-jurisdictional involvement.

There were 27 enteric and respiratory outbreaks confirmed, managed and recommendations provided for future infection control. Nineteen outbreaks occurred in long-term care facilities, four in daycares, three in the community and one in a hospital setting. Influenza surveillance data is reported weekly to the Ministry of Health and Long-Term Care. Schools report to Public Health whenever student absenteeism is 10 per cent or greater.

There were 162 inspections and six re-inspections of daycares, hospitals, long-term care facilities, retirement homes, funeral homes, homes for special care, group homes and personal service settings including tattoo parlours.

Public Health hosted an educational day in partnership with Huronia Practitioners of Infection Control (HUPIC) with 67 health care participants and 22 vendors taking part.

Designated Officer training was held for 45 emergency service agencies. Emergency service workers are notified in the event they may have been exposed to an infectious disease to ensure appropriate action is taken.

<http://www.publichealthgreybruce.on.ca/Communicable/>



Sexual Health

Sexual Health Clinics are located in two community sites and ten high schools across Grey Bruce. A new clinic opened at an Owen Sound high school in 2010 and additional sites are planned. School clinics address access to services for students in a setting supportive to dealing with issues related to healthy sexuality.

Providing contraception, counselling and testing is a mandate of the Grey Bruce Health Unit. Low cost contraception services are a key strategy supporting a reduced risk of an unintended pregnancy. Clinics also provide sexually transmitted infection counselling, testing, treatment and follow up.

In 2010:

- 7,789 client contacts at all sexual health clinics.
- 4,132 clients came to the clinic for birth control medication.
- 1,607 people were provided with condoms.
- 87 clients were given the emergency contraceptive pill.
- 691 pregnancy tests, both urine and serum, were provided with 78 positive tests and 613 negative (every intervention allows nurses to support risk prevention).

Referrals for positive pregnancy tests were made to family physicians, clinic doctors, local obstetricians/gynaecologists, other clinics, midwives and the Healthy Babies Healthy Children program.

<http://www.publichealthgreybruce.on.ca/Sexual/>



Sexually Transmitted Infections

Investigations and consultations were provided for 325 reportable infections including Chlamydia, Gonorrhoea, Syphilis and HIV. Chlamydia remains the most commonly reported sexually transmitted infection (STI) in Grey Bruce with 311 positive cases locally. Follow-up treatment to all positive cases and contacts is important to reduce the spread of infection.

Education is an essential strategy to lower infection rates. Community and school-based clinics promote reducing the risks of STI through instruction, prevention and condom use. Additionally, 25 agencies and community sites in Grey Bruce receive condoms for their at-risk clients free of charge. Condoms are provided in every needle exchange kit.

<http://www.publichealthgreybruce.on.ca/Sexual/>

Needle Exchange

GB Works needle exchange program reduces the risk associated with intravenous drug use including the spread of diseases such as HIV and hepatitis. In Ontario, needle exchange programs are mandatory in areas where injection drug use is a recognized problem.

There are four *GB Works* needle exchange sites in Grey Bruce: Hanover, Walkerton and two in Owen Sound. The number of participants and new clients has increased consistently since the start of the program in 2007. At each exchange, clients meet with trained staff to discuss the importance of their health and safe injection practices. Intervention can include referral to other health and social service programs.

| | 2008 | 2009 | 2010 |
|----------------------------|--------|--------|--------|
| Exchanges | 194 | 268 | 532 |
| New clients | 24 | 51 | 65 |
| Client ratio - male/female | 152/42 | 208/60 | 437/95 |
| Average age of NEP clients | 40 | 35 | 32 |
| Needles distributed | 30,191 | 26,279 | 31,140 |
| Needles returned | 24,406 | 15,875 | 20,810 |

http://www.publichealthgreybruce.on.ca/sexual/Teaching/Confidential_Clinical_Services.htm

Safe Water

Communal Drinking Water Systems

The Grey Bruce Health Unit responded to 139 Adverse Water Incidents from the Ministry of Environment Spills Action Centre; down slightly from 162 reports in 2009. This represents a long-term downward trend attributed to mandatory operator training and enhanced surveillance.

Small Drinking Water Systems

This was the second year of the three year phase-in of the new Small Drinking Water Systems under authority of the Ministry of Health and Long-Term Care. An electronic risk categorisation tool (RCat) was rolled out and Public Health Inspectors conducted risk assessments and issued associated directives on 250 of the approximately 800 systems in Grey Bruce.

Private Drinking Water Supplies

The Ministry of Health and Long-Term Care offers Ontario residents free testing of their private water systems for E. coli and total coliforms. Public Health supports this initiative by offering advice and consultations. Residents typically will seek advice following reports of an adverse sample. Staff responded to 428 enquiries, on par with the 424 received in 2009.

Beach Sampling

From June to September, eight public beaches in Grey Bruce were sampled according to the provincially mandated *Beach Monitoring Program*. Each beach was sampled approximately 14 times with a total of about 700 individual samples taken. There were 13 beach postings mainly due to the weather patterns that saw a number of storms with short periods of heavy rain.



Pools, Spas and Wading Pools

Due to the risk of infectious disease and injury, public facilities are inspected regularly by Public Health; 302 routine inspections and re-inspections were conducted in 2010.

<http://www.publichealthgreybruce.on.ca/Water/>



Health Hazard Prevention and Management



Wind Turbines

Staff and the Medical Officer of Health consulted with relevant experts, agencies, local residents and politicians to gather information about potential adverse health and psycho-social impacts associated with industrial wind farms. This consultation resulted in a report from the Medical Officer of Health and a subsequent resolution from the Board of Health (January 21, 2011) asking the government of Ontario to conduct further research on potential impacts.

Bed bugs

Although not a health hazard as strictly defined in the *Health Protection and Promotion Act*, bed bugs create significant distress for those living with an infestation. As in most other parts of the province, reports of bedbug infestations and requests for advice and information increased in Grey Bruce. Public Health provided one-on-one consultation with tenants and landlords, offered print and web-based resources and responded to media inquiries.

<http://www.publichealthgreybruce.on.ca/Hazard/>

Vector Borne Disease

A public education campaign, physician notices and active surveillance conducted by Public Health resulted in an increase in tick submissions from two in 2009 to 16 in 2010. Of the submissions, three were identified as *Ixodes scapularis*, the type known to carry the bacteria that causes Lyme disease. Further analysis by the National Microbiology Laboratory in Winnipeg confirmed all were free of the Lyme disease bacteria.

http://www.publichealthgreybruce.on.ca/communicable/factsheets/Lyme_Disease.htm



Rabies



There were 540 animal bites/scratches to humans reported across Grey Bruce with 30 people receiving post-exposure rabies treatment.

Of the 39 confirmed animal rabies cases reported in Ontario, 10 were in Grey Bruce. All cases were skunks; eight were in Southgate and two in Georgian Bluffs. There was no human exposure associated with any of the cases. The Ministry of Natural Resources conducted a combination of hand and aerial vaccine baiting in those areas following each positive report.

Information on the skunk rabies in their area and ways to protect themselves and their pets was distributed to 3,500 residents of Southgate through the annual municipal mail-out.

The Grey Bruce Health Unit partnered with the Canadian Food Inspection Agency to develop a *Rabies Protocol for Veterinarians*. The protocol assists vet clinics with decisions on reporting and with discussing possible cases or exposures with staff and clients.

<http://www.publichealthgreybruce.on.ca/Rabies/>

Tobacco Enforcement

Tobacco Enforcement and Education Officers responded to 245 smoking related complaints.

| Nature of Complaint | Number |
|--|--------|
| Smoking in enclosed workplace or public place | 88 |
| Tobacco vendor related | 15 |
| Smoking on school property | 20 |
| Other (multi-unit dwelling, retail signs, contraband, Ministry of Revenue referrals, supply to underage) | 122 |

Eleven young offenders accessed the Informal Diversion Program in lieu of a formal court charge.

There were 403 tobacco retail checks with test shoppers undertaken with the 196 tobacco retailers in Grey Bruce. These checks resulted in 23 sales to minors with an overall 94 per cent compliance rate for tobacco retailers. There were 141 warnings issued and 56 charges under the *Smoke-Free Ontario Act*. Thirty-one charges went to court resulting in 20 convictions, 4 dismissals and 7 adjournments.

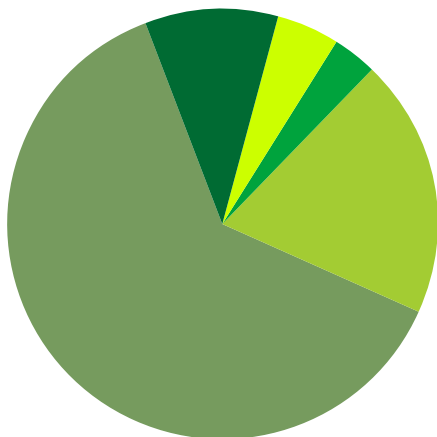
<http://www.publichealthgreybruce.on.ca/Tobacco/Index.htm>



Environment

Activities included comments to municipal planning applications across Grey Bruce and review of on-site sewage treatment system applications under the *Ontario Building Code* in six municipalities. Staff were also actively engaged in septic re-inspection in Huron-Kinloss and with the Technical Review Committee of the local Drinking Water Source Protection program.

<http://www.publichealthgreybruce.on.ca/Sewage/>



- 13 (3%) Niagara Escarpment
- 19 (5%) Building Alterations
- 39 (9%) Compliance Requests
- 76 (19%) Municipal Planning
- 243 (60%) Sewage Permits



2010 Environment Program Activities

| Municipality | On-Site Sewage Permits | Planning Comments |
|--------------------------|------------------------|-------------------|
| Arran-Elderslie | n/a | 8 |
| Blue Mountains | n/a | 9 |
| Georgian Bluffs | 60 | 58 |
| Huron-Kinloss | 72 | 17 |
| Kincardine | 29 | 32 |
| Meaford | 40 | 28 |
| Northern Bruce Peninsula | 95 | 18 |
| Owen Sound | n/a | 2 |
| South Bruce Peninsula | n/a | 19 |
| Saugeen Shores | 35 | 20 |
| Brockton | n/a | 0 |
| Chatsworth | n/a | 1 |
| Grey Highlands | n/a | 4 |
| Hanover | n/a | 2 |
| South Bruce | n/a | 1 |
| Southgate | n/a | 2 |
| West Grey | n/a | 4 |
| Total | 333 | 225 |



Emergency Preparedness



The *Grey Bruce Health Unit Pandemic Influenza Contingency Plan* was reviewed in light of lessons learned from the H1N1 pandemic. Up-dates were started to the *Emergency Response Plan* to incorporate the *Pandemic Plan* into the document.

Staff took part in separate emergency exercises with Grey and Bruce Counties. Both were enhanced exercises, using shared scenarios, running concurrently with lower tier participation. In addition, Public Health attended individual municipal exercises and maintains involvement with Emergency Planning at the municipal and county levels.

http://www.publichealthgreybruce.on.ca/Emergency_Response/



Food Safety



Food premise inspections switched to the *HealthSpace* data management system on July 1, 2010. Details relating to violations and observations are entered at the time of inspection and a report generated onsite for the owner of the food premise.

Approximately 1,790 visits, including inspections and re-inspections, were conducted at food facilities throughout Grey Bruce. One order under the *Health Protection and Promotion Act* was issued to temporarily close a food establishment due to failure to comply with the *Food Premises Regulation*.

There were 11 two-day *Food Safety Certification* courses offered at various venues across Grey Bruce with 158 participants getting their certification. The self study *In Good Hands* course continues to be popular with 143 participants receiving qualifications. The number of participants in this online program has doubled every year since its inception in 2008.

<http://www.publichealthgreybruce.on.ca/FoodSafety/>

2010 Financial Information and Board of Health

| 2010 Budget | |
|--------------------------------------|---------------------|
| General Funding | \$10,164,363 |
| General Funding - 1X Capital | \$65,520 |
| Healthy Babies, Healthy Children | \$1,002,221 |
| Smoke-Free Ontario 100% | \$380,537 |
| Environment | \$335,203 |
| Small Drinking Water Systems | \$275,400 |
| Vector Borne Diseases | \$272,407 |
| Healthy Smiles Ontario - 1 x Capitol | \$258,339 |
| Healthy Smiles Ontario - Operating | \$116,369 |
| Infection Control | \$198,565 |
| Infection Control Nurse | \$82,400 |
| Grey Bruce Falls Prevention | \$127,000 |
| CINOT Expansion | \$94,643 |
| Health Canada | \$82,353 |
| FOCUS / Heart Health | \$51,135 |
| Healthy Communities | \$22,500 |
| Other Grant Programs | \$18,888 |
| Total | \$13,547,843 |



Board of Health 2010

Back row left to right: Arlene Wright, Warden, County of Grey; Erin Meneray, Executive Assistant; June Van Bastelaar, Provincial Appointee; Dr. Hazel Lynn, Medical Officer of Health; Gary Levine, Provincial Appointee; Kevin Eccles, County of Grey

Front row left to right: Larry Kraemer, Vice Chair, Bruce County; Bob Pringle, Chair, County of Grey; Dwight Burley, County of Grey; Milt McIver, Bruce County; Joan Tod, Director of Finance

Absent: Mike Smith, Warden, Bruce County; Judy Willson Cross-Board Member

| 2010 Funding Sources | | |
|---------------------------------|---------------------|----------------|
| Municipalities | \$2,649,234 | 19.55% |
| Provincial Cost Shared Programs | \$7,947,700 | 58.66% |
| Provincial 100% Programs | \$1,004,708 | 7.42% |
| Federal 100% Programs | \$82,353 | 0.61% |
| Healthy Babies Healthy Children | \$1,002,221 | 7.40% |
| Smoke-Free Ontario | \$380,537 | 2.81% |
| Environment | \$335,203 | 2.47% |
| Other | \$145,887 | 1.08% |
| Total | \$13,547,843 | 100.00% |

Our Mission

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

Our Vision

is working together for a healthier future for all.

Core Values

*Respectful Relationships – with the people we serve, our partners
and each other.*

Accountability – evaluate and use resources effectively.

*Partnership - with individuals, families, organizations and
communities to promote and protect health.*

Professionalism - uphold standards of practice and professional ethics.

*Positive Attitude - an affirmative outlook that supports others to
learn, adapt and develop.*



519-376-9420

1-800-263-3456

Online at www.publichealthgreybruce.on.ca

Facebook at: Grey Bruce Gets Healthy