EXECUTIVE SUMMARY:

The “Public Health Services Annual Report to the Community” fulfils a public health accreditation requirement to communicate about public health programs and services to the community at large. This report provides the context for the attached “Public Health Services Annual Report to the Community”.

BACKGROUND:

The Board of Health is committed to dissemination about the health of the community and the programs and activities of the Board that are directed toward health promotion, health protection and disease prevention. The preparation and dissemination of the “Public Health Services Annual Report to the Community” also fulfils a public health services accreditation requirement of the Ontario Council of Community Health Accreditation that the governing body disseminates an annual report on public health programs.
The objectives of the attached “Public Health Report to the Community” are to:

- promote the role of public health professionals and the services that they provide to community agencies and residents of Hamilton
- showcase the hard work of public health practitioners and the impact of programs and services on the community
- keep the community informed and up-to-date on current public health initiatives
- meet the accreditation standards of the Ontario Council of Community Health Accreditation (OCCHA)
- highlight the Board of Health goals for 2008

The report attempts to engage our partners and stakeholders and responds to the question: How are we making a difference in our community? The vignettes illustrate real people in real situations. They also illustrate the range of our partnerships with community agencies. The report demonstrates how Public Health Services has supported, connected and empowered these individuals and agencies. The statistics demonstrate the diverse range and scope of the impact many of the services we provide.

The target audiences for this report are our community partners and stakeholders including: Board of Health, MPPs, MPs, Ministry representatives, boards of education, Non-Governmental Organizations, community partners, business representatives and associations, and City departments.

The report will also be posted on the City of Hamilton, Public Health Services website and translated into French.

**ANALYSIS/RATIONALE:**

The publication of an annual report of public health programs is a requirement of the Ontario Council of Community Health Accreditation.

A majority of Ontario public health units use similar means in which to communicate with their communities on an annual basis.

We have received feedback from our community partners that they welcome ongoing information about public health programs and services. This is a method to provide that ongoing communication.

**ALTERNATIVES FOR CONSIDERATION:**

N/A
FINANCIAL/STAFFING/LEGAL IMPLICATIONS:

The report was developed and written by staff within Public Health Services and stories were written by inspired community members. The production and distribution cost of this report is $8,000.00.

POLICIES AFFECTING PROPOSAL:

N/A

RELEVANT CONSULTATION:

The Mayor’s office was consulted on the Mayor’s contribution.

Legal Services was consulted on the development of client consent forms for permission to release personal health information and images in the stories. Consent forms were signed by all those identified in the annual report.

CITY STRATEGIC COMMITMENT:

By evaluating the “Triple Bottom Line”, (community, environment, and economic implications) we can make choices that create value across all three bottom lines, moving us closer to our vision for a sustainable community, and Provincial interests.

Community Well-Being is enhanced. ⇒ Yes ☒ No

Environmental Well-Being is enhanced. ⇒ Yes ☒ No

Economic Well-Being is enhanced. ⇒ Yes ☒ No

Does the option you are recommending create value across all three bottom lines?

⇒ Yes ☒ No

Do the options you are recommending make Hamilton a City of choice for high performance public servants? ☒ Yes ⇒ No

This report demonstrates the commitment of Hamilton Public Health Services staff to making the city of Hamilton a healthy community is which to live, work and play.
General Contact Numbers

Alcohol Drug and Gambling Program 905-546-3606
Child and Adolescent Services 905-570-8888
Dental Clinic 905-546-2424 x3789
Environmental Health Inspection Duty Line 905-546-3570
Health Connections 905-546-3550
Community Mental Health Program 905-528-0683
Nutrition and Physical Activity Promotion 905-546-3630
Reportable Diseases Line 905-546-2063
Safe Water Program 905-540-2189
STD and Sexual Health Hotline 905-528-5894
Tobacco Hotline 905-540-5566
Tuberculosis (TB) Information and Reporting 905-546-2424 x6636
Vaccine Information Line 905-540-5250
West Nile Virus Information 905-546-3575
Workplace Health 905-546-2424 x3065

For clinic locations and information and for all other inquiries please visit our website:
www.hamilton.ca/publichealth

City of Hamilton Information Line:
905-546-CITY

Mailing Address
Office of the Medical Officer of Health
1 Hughson St. N 4th floor
Hamilton, ON L8R 3L5
It is my pleasure to present the 2007 Public Health Services Report to the Community. As Mayor and chair of the City’s Board of Health, I want to acknowledge that the health and well-being of all residents in our community is a top priority. This report provides a snapshot of the many accomplishments of the City’s Public Health Services over the past year, while maintaining our commitment to open and transparent communication with the public.

During 2007, City Council approved a new vision statement for the City Of Hamilton: “To be the best city in Canada to raise a child, promote innovation, engage citizens and provide diverse economic opportunities.” This corporate vision is clearly supported by the Strategic Plan 2007-2010 adopted by Public Health Services.

Last year I made a personal commitment to work with our Medical Officer of Health and our community partners to address the issue of childhood obesity and to face the challenges of the environmental health of our local landscape and the effects on air quality. I am pleased that goals within the new Strategic Plan for Public Health Services relate directly to these issues.

Much of the work of Public Health Services is done in the background, yet the results are very visible within our community. They advocate for healthy lifestyle choices and prevention of chronic diseases. They also have programs to support safe food, and provide support to parents and young children.

They cannot do it alone. I would like to encourage all of us to make wise choices on our health. It is only by doing this that we will be able to achieve overall health in our community. After all, it is only through cooperation, collaboration and concensus that can succeed as a community. I also want to commend the efforts of all Public Health Services staff who work tirelessly to ensure that all residents of Hamilton have a healthy environment in which to live, work, and play.

Sincerely,
Fred Eisenberger
Mayor – City of Hamilton
Helping Families

Mental Health/Outreach Team - Client story

Claire, aged 18, was referred to the Mental Health/Outreach Team by a youth serving agency in 2006. Claire had decided to move out of her family home for a variety of reasons and needed assistance. An Outreach Worker started to work with Claire around her housing, but it became evident that Claire had many issues with which she needed support. After a couple of months of staying with friends and renting a room, Claire decided to move out of town to live with a family member. The Outreach Worker assisted Claire in making the arrangements so it would be an easy transition for her. Claire returned to Hamilton about 6 months later and because she had built a relationship with outreach staff she felt comfortable to call and request help.

When she first returned, Claire stayed in shelters and with friends for a few months. Finding an apartment for her was difficult. She had been diagnosed with bipolar disorder, had suicidal thoughts and was not taking her prescribed medications. Her health issues needed attention before a housing search could be started. During this time, Claire met her partner Kerry. Claire was able to live at Kerry's mother's apartment, but this did not last long. Eventually, they were both asked to leave and became homeless.

Finding accommodation for Claire and Kerry was very challenging for a variety of reasons. They wanted to stay together and had few options in terms of emergency housing. Kerry had never been homeless and did not want Claire to leave her side. They found a spot on the mountain brow of the financial district, which became their home from April to July. Outreach staff visited them and stayed connected. During cold or wet weather conditions they would stay with friends. Every time the Outreach Worker met with Claire and Kerry, other pressing issues needed to be addressed, such as food, showers, health appointments and medications.

To be able to comprehensively assist Claire and Kerry, the Outreach Worker sought the assistance of partner agencies to help with the housing issue. This partnership assisted Claire and Kerry in finding a suitable apartment, which they moved into in mid-summer.

It is now December, and with the help of several social service agencies and friends, Claire and Kerry take great pride in having a beautifully furnished small apartment. Both attend school, and although Claire has a high school diploma, she wants to upgrade so she can attend college. She continues to take medication for her bi-polar disorder and is ready to join a mood disorders group. She is in the process of applying for ODSP, but is still interested in part time work. Kerry is now willing to look into her symptoms of depression and to seek treatment. Kerry's brother completed suicide a few weeks ago. Together they are working through this tragedy with lots of support from family and professionals. In 2008 they plan on participating in a youth group to reduce the stigma of depression and suicide. They are together and supporting one another on life’s journey.

City of Hamilton Public Health Nurses

Shelley Thorsen and Lindsay Buffet save the day.

As first time parents, we arrived home from the hospital with our newborn daughter, completely overwhelmed. Our physician recommended contacting Health Connections for assistance with breastfeeding and caring for our child.

We contacted Health Connections and spoke with Public Health Nurse Lindsay Buffet. Our conversation put our minds at ease and made us feel that we were not alone. Lindsay's empathy and professionalism were sincerely appreciated. She expressed concern for our well-being and took action by scheduling a home visit with Public Health Nurse Shelley Thorsen later that afternoon.

We were immediately relieved upon meeting Shelley. Her warm personality made us feel comfortable. She conveyed information tailored to meet our needs, in a compassionate and non-judgmental manner. She restored our confidence as parents and helped us make informative choices for our child.

We are grateful to the City of Hamilton for providing this service and employing exceptional staff. We highly recommend this service to those adjusting to parenthood.

Mike & Mary-Lou

Nurse Family Partnership

This past year saw a lot of preparations for the launch in 2008 of a pilot program called the Nurse Family Partnership. The program will be a first for Canada.

David Olds and his colleagues developed and implemented a nurse home-visiting program for poor, first-time mothers in a high-risk area of Albany, New York, beginning in 1977. This program, called the Nurse Family Partnership (NFP), begins in 2008.

Three separate trials of the NFP program conducted in 1978, 1990 and 1994 showed that the program improves pregnancy outcomes, improves the health and development of the child’s life.

The importance of employing nurses in serving families during pregnancy and the early years of the child’s life.

Three separate trials of the NFP program conducted in 1978, 1990 and 1994 showed that the program improves pregnancy outcomes, improves the health and development of young children and helps parents create a positive course for themselves. In 1996, Olds and his colleagues began to share the NFP program with local communities in the U.S.A. The program is currently provided in more than 290 counties and 25 states. The NFP is now spreading internationally with sites in Great Britain, the Netherlands, Germany, and Australia. The City of Hamilton Public Health Services is renowned to be the first Canadian site with 5 PHNs plus a backup participating in an 18 month feasibility study. The PHNs have already received their first two levels of training and will start working with families in 2008.
Helping the Community

Public Health Dental Services for Families at Ontario Early Years Centres

Many low income families do not have dental insurance. Cultural and language issues compound the financial barriers that many clients face. The Public Health Services, School Dental Program and the Family Health Program in collaboration with Ontario Early Years Centres, (OYEY) and Affiliated Services for Children and Youth have made efforts to improve access to dental treatment for vulnerable groups throughout Hamilton. Services provided by the program include: early identification, providing information about Public Health Services and education to promote good oral health. Public Health Services Dental Hygienists visit various OYEY sites to provide no charge dental screenings for children. Dental Hygienists also provide individual and group oral health education sessions.

Lorraine Bothen, OYEY Early Years Facilitator, Sanford Neighborhood Site stated, “A terrific partnership has developed between Public Health Services School Dental Hygienists and the OYEY’s “. The OYEY’s host workshops for families with young children (birth to 7 years). Parents learn how to take care of their children’s teeth and how to improve their own oral health. Many families have benefited from this service. Translators are available to assist families who are not English speaking. This provides a positive first experience for many families to receive oral dental health information and care. OYEY families have expressed appreciation for the friendly, knowledgeable advice and care provided by the Dental Hygienists. Children receive their own toothbrush and a timer so they can time themselves when brushing their teeth. Families feel comfortable to ask questions in this supportive environment. This service provides a positive experience for families and supports ongoing good oral health practices.

Engaging Youth Leaders in Community Partnerships

This year the Hamilton Drug and Alcohol Awareness Committee (HDAAC) supported its first ever youth engagement project. Members of HDAAC facilitated young people in the development of a community presentation focused on the consequences of underage drinking and illicit drug use. This opportunity allowed young people to express their personal stories related to substance use and encouraged and challenged youth participants to make positive life choices and take control of their future.

Not only was this project a huge success, it sparked a new focus for HDAAC. The newly formed youth sub-committee has begun planning for 2008 activities. Here’s what the youth-subcommittee had to say about their experience working on the project:

“I now have a better understanding of how to prevent substance abuse in our community.” (Parm, 21 – Volunteer, Hamilton Drug & Alcohol Awareness Committee)

“My experience working with public health and other community agencies with the Hamilton Drug and Alcohol Awareness Committee has really provided me with a lot more insight and information. Working on this year’s Drug and Alcohol Awareness event was an extremely positive experience and I am going to continue to work on this issue in my community.” (Gersonn, 22 – Volunteer, Hamilton Drug and Alcohol Awareness Committee)

“We worked on this project really impacted me. It felt great and I want to do it again. Working on a committee to help prevent kids from doing drugs was really important and I had no idea that I could use my knowledge and experience to help others.” (Dan, 24 – Volunteer, Hamilton Drug and Alcohol Awareness Committee)

What does it take to foster skill development for women from the South Asian community? Roodaba Seema has to hop on the HSR to meet women in their community and help them navigate transportation and health services in Hamilton.

Roodaba Seema emigrated from Pakistan and adopted Hamilton as her home. Her desire to help women of diverse communities, led her to work as a Women’s Health Educator with the City of Hamilton Public Health Services. Roodaba Seema is passionate in her role of assisting women to navigate the Canadian health care system and maintain health.

Roodaba Seema arranges health talks in community settings, such as the Riverdale Community Centre. The talks are given in Hindi, Punjabi, or Urdu so that women have access to culturally appropriate and language specific health information. These sessions promote cancer screening, healthy lifestyle choices, friendships, and facilitates learning about other health services.

Educational sessions facilitated by Roodaba Seema create a snowball effect beginning with one woman coming to an educational session, she tells others, and brings more women. As a result, a woman contacts Roodaba Seema for assistance to book an appointment for either a mammogram or Pap test and accompanies the woman in need of language and cultural support.

In the recent collaboration with Woman Alive!, Roodaba Seema provides interpretation during yoga and aqua fit classes to increase physical activity within her community. As a result, some women are becoming more actively involved in the community by pursuing job opportunities, furthering their education and a few are training to be certified fitness instructors. Ultimately this translates into more skills, more opportunities, and enhanced community capacity.

Roodaba Seema Alvi is one of four Women’s Health Educators working within the City of Hamilton Public Health Services, Healthy Living Division. The Women’s Health Educator Program has reached hundreds of immigrant women in 2007.

Statistics:

• Promoted mental health through 68 Youth Net Hamilton focus groups with 632 youth participants

• Reached 23378 elementary and secondary students from 415 schools with substance abuse prevention education

• 373 grade 7 and 8 students from 114 schools participated in an interactive workshop to educate students about the harms and consequences associated with drug and alcohol use

• 1207 students in grades 9 to 12 participated in the 2007 Hamilton Student Drug Use Survey

• Women’s Health Educators delivered 62 presentations to approximately 700 individuals from the Arabic, Chinese, South Asian & Vietnamese communities on chronic disease prevention and cancer screening and provided cultural and linguistic support to 128 women for cancer screening appointments

• 44 Community Food Advisors with 23 newly trained CEAs provide presentations, demonstrations and displays about safe & nutritious selection, preparation and storage of food

• 331 women registered for Woman Alive! program

• 25 new workplaces registered for the Healthy Workplace Innovation Series

• Hamilton Walks built a stronger foundation for physical activity opportunities by facilitating connections among over 40 groups/organizations who promote walking and/or active modes of transportation in Hamilton

• Distributed 95,000 new Canada’s Food Guides

• Feel the Power Feel Fit Girls Campaign was delivered in 16 Hamilton high schools, reaching 1272 female students

• Distributed 2500 Hamilton Partners for Healthy Weights posters to community agencies and organizations across Hamilton

• Reached more people in the underserved communities through expanded chronic disease prevention messages delivered by Women’s Health Educators and through Woman Alive series expanded to 5 sites in 2007

• Provided dental services through 3,432 client visits to the Upper Ottawa dental clinic, and 1,533 visits to the Community Health Bus

To learn more about the Hamilton Drug and Alcohol Awareness Committee visit www.ruware.ca
Protecting Hamilton

A Story of Hope

As a Karen Refugee, Hope fled persecution as part of a minority ethnic group from Burma, now known as Myanmar. She had spent the last 11 years living in the jungles and refugee camps of Thailand. In November of 2006 she arrived in Hamilton along with her mother and two brothers. They were some of the more than 800 Karen Refugees accepted into Canadian cities.

Hope and her family were given enhanced screening for tuberculosis (TB). The refugee camp, Mae La Oon, where Hope’s family had lived had high rates of TB. Soon after arrival, Public Health Nurses worked closely with the newcomers. In many cases, the nurses were not just the first healthcare workers the newcomers met but the first Canadians. The Public Health Nurses provided more than just the enhanced TB screening, often providing counseling to clients on a variety of health and social issues.

With her excellent English skills learned at school in the refugee camp, Hope became an interpreter and helped bridge the language barrier for her fellow refugees. She enjoyed working alongside the Public Health Nurses so much that she has been inspired to become a nurse herself. Earlier this year she graduated from High School and plans to attend Mohawk College this Fall in the nursing program.

Infectious Disease Program
• 93 total number of outbreaks
• 1,114 total number of cases investigated
• 915 calls to Disease Intake Line
• 135 calls handled after-hours

Tobacco Enforcement
• 1278 inspections of workplaces and public places
• 556 tobacco vendor display inspections
• 1,204 youth access and enforcement checks

Public Health Hazards
• 1,173 complaints
• 218 inquiries

Rabies
• 1,720 human exposure investigations
• 167 people received vaccination
• 214 animals tested
• 5 animals that tested positive (all bats)

West Nile Virus
• 141 standing water complaints investigated
• 533 surface water treatments
• 2,901 monitoring visits
• 38,000 catchbasins checked four times per year
• 893 dead birds reported
• 189 dead birds picked up
• 40 dead birds tested for West Nile Virus (6 positive, 36 negative)

Sexual Health
• 4,023 clients seen at 4 clinic locations
• 289 PAP tests
• 939 STI exams
• 1,557 contraception visits
• 184 treatments for genital warts
• 174 pregnancy tests
• 114 emergency contraceptives
• 798 clients seen at Well Women Clinics
• 353 anonymous HIV tests performed
• 250,416 condoms distributed
• 1,528 calls received by the Sexual health Information Line

Food Safety Program
• 760 individuals certified as Safe Food Handlers
• 5,322 routine inspections of food premises
• 1,183 additional re-inspections to ensure corrective action taken

Safe Water Program
• 765 samples taken
• 30 beach closures (14 at Bayfront)

Tuberculosis Control Program
• 38 active cases
• 716 inactive cases

Vaccine Preventable Diseases Program
• 21,658 immunizations at community flu clinics
• 383,645 doses of all vaccines distributed to physician’s offices

Immunization Program
• 1,063 people immunized by public health services staff
• 10,603 doses of hepatitis B, 5,434 doses of meningococcal C, and 1,509 doses of HPV vaccines completed at school-based clinics
• 7,703 letters sent to parents requesting information on immunizations, 607 students suspended for incomplete records

Sexually Transmitted Diseases
• 1,054 reported cases of Chlamydia
• 196 reported cases of gonorrhea
• 26 reported cases of HIV/AIDS
• 51 reported cases of infectious and non-infectious syphilis

Van Needle Exchange
• 217,000 clean needles were distributed with 192,000 collected
2008 Aspirations for Hamilton Public Health Services

- Continue implementation for the PHS Strategic Plan
- Develop and implement a strategic communications plan for PHS
- Develop an action plan and policies to respond to new “human health based air quality criteria” from the Ministry of the Environment
- Implement transfer of the new Small Drinking Water System Program
- Implement web-based disclosure system for food premise inspections
- Develop a tracking system to measure illness, injury rates and other indicators specific to Public Health emergencies
- Continue development and implementation of PHS emergency and pandemic plans
- Train 22 new volunteers for the Community Food Advisors program to expand reach
- Implement the Nurse Family Partnership Feasibility Study

Prospective Challenges for Hamilton Public Health Services

- Changing provincial government organizational structure: Ministry of Health Promotion has created additional new funding and reporting relationships.
- Changes in funding formula and environment: The provincial/Municipal ratio has varied; lack of increases for 100% provincially funded programs.
- Outcomes based reporting: Requires new approaches to program and service management, economic evaluation and planning.
- New provincially-mandated IT systems: Introduction of information management systems without commensurate funding enhancements has resulted in increased workload in order to meet provincial expectations.
- Ongoing debate about where best to invest Public Health resources: population wide programs or high risk groups.