To: Mayor and Members
   Board of Health

From: Elizabeth Richardson, MD, MHSc, FRCPC
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Date: September 10, 2007

Re: School Services Program Update BOH07043 (City Wide)

Council Direction:

This report is provided in keeping with the Board of Health policy on communication between the Medical Officer of Health and the Board of Health, as outlined in Report PH06038.

Overview of Program Activities

Public Health Services provides a wide range of health programming for 213 schools (176 elementary and 37 secondary) with the goal of promoting and protecting health and preventing illness and injury for school-aged children and youth and their families.

In recent years, the School Program has increasingly emphasized a Health Promoting School approach. The purpose of the Health Promoting School approach is to build health knowledge, skills and behaviours in the cognitive, emotional, social and behavioural domains and to enhance educational outcomes. Public Health Nurses work with Health Action Teams, comprised of parents, students and school staff.

In 2007-2008, sixty-seven (67) schools in Hamilton will be utilizing the Health Promoting School service delivery model. The selection of schools is based on the schools’ ratings on social determinants of health, HWCDSB/HWDSB ranking of schools, and capacity and readiness. The most important criteria in terms of implementation and sustainability are support and commitment from the school principal and all members of the school community, as this model is a whole school approach.

The Health Promoting School model uses a comprehensive, four-pronged approach which includes: instruction, health and support services, supportive social environments, and healthy physical environments. This approach has been proven to be effective in changing health behaviours and has been endorsed by the World Health Organization, Health Canada, and the European Network of Health Promoting Schools. The Health
Promoting School model builds relationships and fosters health and learning not only in the students but in the larger community by working with the entire school, parents and the community.

A wide range of services are provided to schools by various areas within Public Health Services, including those outlined below. Elementary Health Promoting Schools receive a dedicated half day of Public Health Nurse time and secondary schools receive two half days per week, and the PHN works with the Health Action Team on health promotion strategies for the school. All other schools can access services, health information and resources from the resource centre by calling the direct School Program phone line or visiting the Teacher Website. New this year, teachers will be able to register on-line for growth and development classroom education sessions (Grades 7-9).

**Teacher Website (www.hamilton.ca/teacher)**
This website provides electronic access for teachers and principals to up-to-date, reliable health information and curriculum support material. The website also has an interactive feature which allows teachers to ask childrens' health-related questions, register for services and kits and fact sheets for use in classrooms.

**Healthy Kids Newsletter**
This health information resource is provided to all elementary school teachers four or five times per year. It includes information on a wide variety of health topics, and material ready for inclusion in newsletters sent home to parents by schools.

**Incredible Years Parenting Program and Parents’ Corners Groups**
The Incredible Years is a no charge, 12 week, group program provided to 30-40 parents/year to increase parenting knowledge, skills and confidence. In addition Parents’ Corner drop-in sessions were attended by 674 parents during the last school year. Parenting groups are offered in the lowest income areas of Hamilton.

**Peer Support and Health Promotion Groups for Children and Youth (promoting healthy eating, physical activity, prevention of tobacco and substance abuse)**
These groups promote healthy eating, physical activity and prevention of tobacco and substance abuse. Each year, approximately 4,000 youth in Grades 6-9 participate in these groups.

**Children in Need of Treatment (CINOT) Program and Dental Indices Survey (DIS)**
As per provincial protocol, children in JK through grade 8 are screened to determine the need for referral for diagnosis and follow up of dental problems. The CINOT program offers financial support to those children with dental needs who would otherwise not be able to access care due to financial hardship and lack of insurance coverage. The D.I.S. results are used to establish the priority of schools and levels in screening in the subsequent year.

**Bug Busters Head Lice Clinics**
Approximately 1,500 individuals from low income families access screening, information, and low cost medicated shampoo and combs for head lice each year.
Families can also access information to obtain medical care, dental care, food, housing, low cost clothing, and bike helmets are also provided as needed.

National Child Day
This annual community-wide education campaign reached about 2,500 Hamiltonians in 2006. Activities were offered throughout Hamilton by: community partners (e.g. Art Gallery activities and free admission to some exhibits, Dofasco), City of Hamilton sites (e.g. free use of recreational facilities) and churches. Advertising for the event occurred through the use of media (print, radio, and T.V spots), schools, website, and other agencies in Hamilton.

Sexual Health Network
This community network provides growth and development booklets for 25,000 parents of school-aged children in Grades 5-8 and the “I’m Worth the Wait” media campaign. In 2007 the annual parent conference for parents was attended by 476 parents.

IDEAs Program
IDEAs (Informed Decision Empowering Adolescents) assists in the development of decision making skills for middle school students, through the use of secondary school student peer mentors. 12 elementary schools receive the program. 13 peer mentors are involved from 8 high schools. Approximately 4,000 youth in Grade 7-8 participate annually.

Public Health School Asthma Pilot Project
The purpose of this 100% provincially funded project is to work towards “asthma friendly” schools for elementary school-aged children. Asthma friendly schools have processes in place to identify and manage students with asthma, ensure easy access to medication, reduce asthma triggers, and collaborate with families, health care professionals and school personnel.

Healthy Living Hamilton School Awards and Recognition Program
Supported by the Healthy Living Hamilton Coalition, these awards promote school participation in a range of programs addressing physical activity and healthy eating. In 2006-7, 17,000 students in 47 elementary schools participated.

Tobacco Use Prevention
The Tobacco Control Program provides schools with support regarding the Smoke Free Ontario Act, and support in the follow-up of violations, through the Tobacco Hotline, and an opportunity for local high schools to be awarded tobacco control programming grants of up to $1,000/school annually via the provincial Smoke-Free Ontario Strategy and to participate in the Teen Tobacco Summit. The program employs 21 youth Peer Leaders on a part-time basis to work closely with middle and high school students and youth in the community towards curbing the incidence of tobacco use among youth.

Early Childhood Health Promotion
Family Health staff provide a variety of screening clinics (e.g. multidisciplinary clinics at OEYC sites, car seat clinics) and presentations on various topics (e.g. growth and development, nutrition, home safety at OEYC and Parent Link), as well as consultation and referral for younger elementary students and their families.
Child and Adolescent Services
Therapists from this program go into schools upon request to provide single session consultation and counselling to children and youth and their parents.

Infectious Diseases and Immunization
Staff conduct screening of children’s immunization records and followup to ensure up-to-date vaccination; promote and provide Hepatitis B vaccine to eligible school-aged children; consult regarding reportable and communicable diseases; respond to outbreaks; and provide community flu clinics at some high schools.

Food Safety
Public Health Inspectors provide school nutrition program guidelines and inspections, food handler certification programs for high school students, hand washing information packages for elementary schools and safe food handling presentations for high schools.

Mandate and Standards
The Mandatory Health Programs and Services Guidelines require health prevention, promotion and protection services to be provided to children and families, working with schools and Boards of Education. The School Program addresses standards under each of the following mandatory programs:
- Chronic Disease Prevention
- Child Health
- Injury Prevention including Substance Abuse Prevention
- Sexual Health
- Reproductive Health
- Sexually Transmitted diseases including HIV/AIDS, and
- Equal Access.

These services are cost shared except for Asthma and part of the Tobacco Control Program, which are 100% provincially funded.

Resources: Budget and Staffing

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<th>Source</th>
<th>Budget Gross</th>
<th>Budget Net</th>
<th>FTE</th>
<th># Staff</th>
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How are we doing?

i) Impact on health of Hamiltonians

In Hamilton, health promoting schools have demonstrated improvements in promoting the health of children and their families. Numerous elementary and secondary schools have implemented anti-bullying, physical activity, tobacco use prevention, nutrition promotion and other health promotion programs. For example, one health promoting school has shown a 50% decrease in discipline issues related to the implementation of the school health action plan for anti-bullying and creating supporting schools. The principal stated that “students, parents, teachers and the community are now working together and that makes for improvement”. At another high need elementary school numerous improvements have been achieved, such as a parents’ cooking club, access to recreation for children from low income families, a breakfast program, a clothing closet for needy students, a parent’s sewing club, etc.

Across Canada similar results are being published. One successful Health Promoting School Project in Nova Scotia, currently funded by Health Canada, is the Annapolis Valley Health Promoting School Project (AVHPSP) entitled “Making the Healthy Choice the Easy Choice”. Research to date shows that the students in the project are making healthy food and physical activity choices more often, when compared to other students in Nova Scotia. “Rates of overweight and obesity among students from schools that are part of the AVHPSP were significantly lower (17.9 overweight; 4.1 % obese) than rates among students from schools without a nutrition program (32.8% overweight; 9.9% obese) (Veugelers and Fitzgerald, 2005).

ii) Comparison to peer communities

In 2006 we surveyed six of the larger, more progressive health units in Ontario. They are also implementing a comprehensive school health program. In terms of the number of schools that have implemented comprehensive school health, Hamilton was a leader at 31% of all schools while the other five health units ranged from 1% -22%. Hamilton has made high and moderate need schools their top priority for the health promoting school approach. Within the Hamilton-Wentworth Catholic District School Board (HWCSDB) 100% of high need schools are implementing the health promoting school model. Within the Hamilton Wentworth District School Board (HWDSB), currently 72% of the high and moderate need elementary schools and 100% of secondary schools are implementing the health promoting school model. In 2007-8, 100% of all HWDSB high need schools elementary and secondary schools will be implementing the health promoting school model. In the French Public and Catholic School Boards, three of the five schools (60%) are health promoting schools.

This success can be attributed to the excellent long standing strategic collaboration with the HWDSB, the HWCSDB, the French Boards and private schools. Intersectoral collaboration is a critical success factor to implementing health promoting schools and is
lacking in many of the comparator health units. Hamilton is allocating the majority of staff time within the School Program to implementing the health promoting school model, which is evidenced-based and viewed as best practice. School Boards appreciate the link between health and education - healthy students learn better, stay in school longer, and have fewer behavioural problems at school.

**Emerging Issues and Opportunities**

**1. School Program Review**

A review of the School Program was completed in 2007 as part of a new Public Health Services evaluation approach. The goal of the review was to ensure that services offered within the School Program are optimally aligned with available evidence regarding best practices, community needs, provincial and municipal mandates, and stakeholder preferences. The review also contributes to the City’s goal of spending wisely and investing strategically, and supports Vision 2020 goals of personal health and well-being, community well-being and capacity building and education.

There were two phases to the program review: Phase 1- the review of the service delivery model, and Phase 2 – the review of specific School Program services.

Based on the results of Phase 1, the Health Promoting School Model will be continued and expanded. In order to support this, staff will be realigned into elementary and secondary school teams effective September 2007, rather than the previous geographic team approach. Phase 2 outcomes led to the realignment of staff time to allow an increased emphasis on the Health Promoting School model and increased efficiency in the delivery of some services, such as registration for some services via the teacher website, and enhancement of the teacher website content.

These changes allowed the reallocation of Public Health Nurse time to serve twelve, new high and moderate need schools in Hamilton to assist them to become Health Promoting Schools during 2007/08. This will contribute positively to the strategies of the Poverty Roundtable, the City and Public Health Strategic Plans to support people in need with care and improve the health and well-being of children, youth and their families in Hamilton.

**2. School Health Environment Survey (SHES)**

The SHES is available to help schools assess how well they support healthy eating and physical activity in their schools. This has been developed by the Sudbury Public Health Research, Education and Development (PHRED Program) and the Centre for Behavioural Research and Evaluation at the University of Waterloo with the Ministry of Health Promotion. This work supports Ontario’s Action Plan for Healthy Eating, Healthy Living (HEAL) and the Hamilton Obesity Strategy. Hamilton’s School Program Public Health nurses are recruiting and encouraging schools to participate in the survey, supporting their involvement, and will provide post survey feedback. This valuable data will help schools to improve efforts promoting children’s physical activity and healthy eating.
3. Improving Access to Services

The School Program is continuing to improve efficiency in service delivery and improve teacher access to Public Health School Program Services. This is being accomplished through increased use of electronic communication including the enhanced Teacher Website, phone, email etc. The Teacher Website service will be expanded to secondary schools in 2007-8 and will support health promoting schools in a more comprehensive manner.

4. Ministries of Education and Health Promotion Support Health Promoting Schools

In December 2006 the Ministries of Education and Health Promotion introduced a Healthy Schools Recognition Program. This program supports the health promoting school approach in Hamilton by providing an opportunity for Hamilton schools to be recognized for their efforts. The goal of this recognition program is for participants to create the healthiest school possible.

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