

Board of Health

Monthly Report - October 23, 2003

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CONTACT US:

We welcome your
comments and
suggestions for the
Board Report at:

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ERIN – *More Than Just A Network*

Submitted by Rebecca Kavanagh, Public Health Nurse

The Eastern Region Injury Network (ERIN) began as a result of a strategic planning exercise by stakeholders in 2001. The goal of this group was to formalize the process of regional planning and information sharing in order to improve coordination and collaboration of injury prevention programs.



ERIN's organizational structure is made up of a Coordinating Committee and many sub-committees. The Coordinating Committee has representation from the 6 Health Units in Eastern Ontario, Ministry of Transportation, Plan-it Safe Program of CHEO, Safe Communities Foundation, and the PARTY Program of the Ottawa Hospital. This group meets regularly and sets out an action plan for the year. There is also a broader listserv membership made up of injury prevention stakeholders across the region representing their individual communities. Over the last two years ERIN has achieved a number of objectives:

- **Visual Identity:** Developed and launched ERIN logo.
- **Partnership Recruitment:** Continue to attract new members to the Coordinating Committee and the broader listserv.
- **Sustainability:** Member's satisfaction for the network was measured using the University of Wisconsin Cooperative Extension tool for evaluating collaborations. The results indicate overwhelmingly that current partners are very satisfied with their participation on ERIN.
- **Professional Development/Networking Day:** ERIN Education Day / Substance Abuse Networking Day in Ottawa on June 20th. The forty participants were from the health units of the Eastern Ontario Region and other community agencies involved in injury and substance abuse prevention. The Health Communication Unit provided a workshop on policy development.
- **Regional Activity 2002:** Medication Round-up Campaign: Across the Eastern Region in the fall of 2002, ERIN encouraged seniors and the parents of small children to 'round-up' their medicine, with a public awareness campaign about medication safety. The emphasis was on safe disposal of medications by returning

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them to participating area pharmacies. This project was unique in that injury practitioners from across Eastern Ontario presented local campaigns with a unified regional look and message. A full report documenting planning and implementation, including outcome measures is available for review.

- **Early Years Networking Day:** ERIN Coordinating partners sponsored and facilitated a networking day for Eastern Region staff working on the Early Child Development Injury and Family Abuse Prevention Initiative.

ERIN will continue to fulfill its vision over the next two years by building on the strength of the broader network and continuing to support educational/networking and collaborative opportunities.

Severe Acute Respiratory Syndrome (SARS)

Submitted by Dr. Charles Gardner, Medical Officer of Health

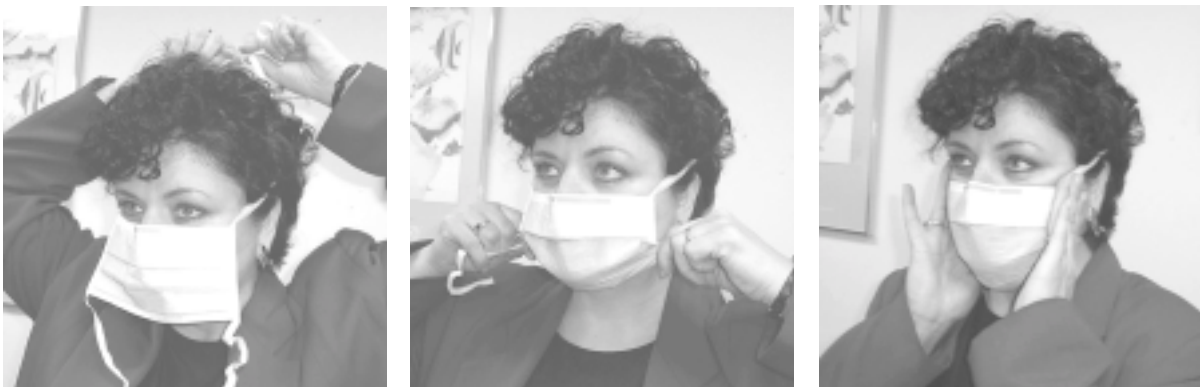
The last cases of SARS in the outbreaks around the world occurred in June. Since this time there was one reported case in Singapore on September 9th in a laboratory researcher. No cases of transmission have been reported from this case, and the origin of infection is under investigation.

In Canada there are three commissions on SARS. The Naylor Commission is national in scope and its report is expected to be released soon. Dr. Naylor has presented publicly on the general findings, including at a conference on Medical Emergencies and the Law which I attended on September 16th. In his presentation Dr. Naylor acknowledged that it was the public health measures of isolation, quarantine and infection control that brought the SARS outbreaks to an end. He also observed that the system was pushed to the limit and possibly would not have been able to manage a second concurrent emergency or an influenza pandemic. There is a need to increase public health resources at the federal, provincial and local levels, and to enhance communication, and coordination. The recommendations will call

for the creation of a Canadian Public Health Centre akin to the Centres for Disease Control and Prevention in the USA, and a Canadian Chief Public Health Officer. The other two SARS commissions, namely the Walker Commission and the Campbell Commission are provincial in scope and are continuing to receive public submissions.

The province will release a Febrile Respiratory Disease protocol calling for ongoing enhanced surveillance and infection control activities for acute care hospitals and health units. The health units of the province will be provided with 100% provincial funding committed for six months for these activities.

As a health unit we have continued our preparations for SARS and other emerging respiratory diseases. On September 23rd we presented to the health care facilities of the tricounty on SARS, and influenza preparations. We are presently reviewing and revising our Pandemic Influenza Plan with our community partners.



3 Photos from Health Unit's Mask Wearing guide published in April 2003

West Nile Virus Update

Submitted by Dr. Charles Gardner, Medical Officer of Health

The number of cases of West Nile virus in Canada (739) and the United States (4666) has already exceeded the total for the year 2002 (409 confirmed and probable case, and 4156 confirmed cases respectively). The bulk of these cases have occurred in western locations that did not have cases last year.

The most recent count in Ontario is 57 confirmed and probable cases (compared to 390 last year). Cases are continuing to occur and the risk of transmission will continue until after the mosquito season. In eastern Ontario small numbers of cases have occurred in the Ottawa, Kingston and Renfrew County.

As a health unit we have conducted the activities of our West Nile virus plan. This includes surveillance for the virus in birds and mosquitoes as well as for human cases. To date we have had 4 birds test positive, with no increases in dead bird sightings, and no positive tests for the virus in mosquitoes. No human cases have been reported in our district. We continue with public education and raising awareness regarding personal protective measures. Our mosquito larviciding program has been conducted with an extension to include smaller communities.

We are evaluating our West Nile virus activities and we will be reporting on the findings to the Board of Health as well as to our West Nile Virus Stakeholders Advisory Committee and to our communities at large. These findings will assist us in our planning for next year.



Plowing Match

*Submitted by Brent Dagleish,
Director of Health Promotion*

The Health Unit participated in the International Plowing Match held from September 17-21 in Carleton Place. Public health inspectors were onsite prior to and during the event monitoring food and water safety. As well, Health Unit services were promoted using an interactive display in the Lanark County tent. Many people visited the display and received information regarding our programs and services. We would like to congratulate Lanark County for a well organized and successful event.



Health Unit Booth at the 2003 Plowing Match