

BOARD OF HEALTH *Quarterly Report*

ACTIVITIES OF THE LEEDS, GRENVILLE & LANARK DISTRICT HEALTH UNIT

March - May 2005

Report on the Year 2004 by the Medical Officer of Health

*Adapted from a speech at the Board of Health Annual General Meeting, January 20, 2005
by Charles Gardner, MD, CCFP, MHSc, FRCPC, Medical Officer of Health,
Leeds Grenville & Lanark District Health Unit*

I would like to start by welcoming everyone, and by thanking you for being with us for our Annual General Meeting. This is our time to reflect on the year that has passed, on the challenges, successes and lessons learned.

In many ways, the year 2004 marked the beginning of renewal in public health in Ontario. The SARS outbreak of 2003 prompted a profound scrutiny of public health and a tremendous increase in our public visibility. In June 2004, the provincial government released "Operation Health Protection", a three-year plan to renew public health, based on the recommendations of the reports of the Expert Panel on SARS (the Walker report) and the Campbell Commission. Their recommendations include:

- a review of the capacity of public health units and the Public Health Branch,
- a revision of the Mandatory Programs
- increasing the proportion of funding to public health units from the province to 75% by 2007
- increasing the authority of the Chief Medical Officer of Health (including having her or him report directly to the legislative assembly)
- the creation of a provincial Health Protection and Promotion Agency, and a Provincial Infectious Disease Advisory Committee (PIDAC)
- the creation of Regional Infection Control Networks throughout the province
- increasing infection control personnel in health care facilities.

By year-end, the province commenced its plan with the creation of PIDAC, increasing the powers of the Chief MOH within the *Health Protection and Promotion Act*, and increasing its funding to the health units to 55% in 2005. In 2004, the federal government also commenced the creation of the Public Health Agency of Canada and appointed a Chief Public Health Officer. In the past week, the province announced the commencement of the public health capacity review. These are the kinds of sweeping changes that only occur once in a lifetime.

It has been very exciting to be a part of this change. I had the privilege of writing, on behalf of the Council of Ontario Medical Officers of Health, a submission for the Expert Panel on SARS on the topic: Regional Infection Control Networks,

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and our health unit has been active in developing such networks based out of Kingston and Ottawa. Within our district, we built on our experience with pandemic influenza planning and SARS, and worked with health care facilities to strengthen infection control measures. I am honoured to be a member of the Surveillance Subcommittee of the newly created PIDAC.

Our mission as the health unit for Leeds Grenville and Lanark is to “work with the community to protect, promote and enhance health through the identification of issues and the development of quality preventative health programs and services”. The focus of the past year included a number of child health issues. To commence the year, Fraser Mustard, the guest speaker at our last AGM, challenged us to address the wellbeing of the very young in our society as the wisest of investments. Our efforts to do so have included our Early Child Development programs, such as the Fetal Alcohol Spectrum Disorder prevention awareness activities, the initiation of a support program for mothers with Postpartum Depression, and our ongoing work within the community coalition Every Kid in Our Community (building assets for children).

The annual report of the Chief Medical Officer of Health called for action to address childhood obesity. Earlier in the year, the Board of Health supported the report of the public health dieticians of Ontario on this topic entitled A Call to Action. As a health unit, our actions on this front in the past year included working with the Upper Canada District School Board and other partners to include our high

school cafeterias in the Eat Smart! Program, ensuring food safety and healthy food choices for our students. We continue working with our school boards on health promoting policies in schools.

Starting in September, the province commenced the rollout of three new vaccines, coming into full fruition with the beginning of this year. These vaccines serve to protect our children from meningococcal C meningitis, pneumococcal disease, and varicella (chickenpox). As a health unit, we continue to work through this transition to supply these vaccines to the physicians of our district and to vaccinate children in our clinics and schools. In the years to come, these new vaccines will prevent many serious cases of these diseases.

Late in the year, the province tabled the *Smoke-Free Ontario Act*. This legislation will serve to protect our children and ourselves from tobacco smoke by prohibiting smoking in all indoor public places and workplaces. Our Board of Health supported this concept with its approval of our Tobacco Strategic Plan in 2001. The province also announced enhanced tobacco prevention education and enforcement activities for health units. With our Tobacco Strategic Plan, and our past tobacco bylaw campaigns, we are in a better position to respond to these program requirements.

In August, raccoon rabies was discovered to be present in our district, despite a one-year hiatus in positive animal tests. Our response included the education of children in the schools in the affected areas.

Our Health Unit website is an essential communication tool that is being constantly modified. Since October, it includes a calendar of the program activities that we conduct in the schools of the Upper Canada District School Board, posted for the benefit of students, parents, teachers and health unit staff. In the fall, we also posted our newly updated Community Health Status Report to provide our communities with information on our health needs.

The Haines Report made many recommendations to improve food safety in the province. The Board of Health supported this report, and in keeping with this, we initiated an enhancement to our Food Handler Training Course with the inclusion of a Home Study program. The year also saw ongoing progress on drinking water safety legislative requirements. As a health unit, we responded to water safety concerns, including the issuing of a boilwater advisory in Gananoque in September.

As a health unit we are on a journey to understand and implement the principles of continuous quality improvement. We have been guided by the Strategic Plan of the Board of Health since 2001. This Plan has included, as a priority, that we determine and pursue sufficient resources to meet our mandate, always with the requirement for the efficient use of these resources. We had the unique challenge of developing budgets for two years, specifically for 2004 and 2005.

Our Strategic Plan has served us well as a roadmap. The future of public health is dynamic, very hopeful, but

still profoundly unpredictable. Our relationship with the Local Health Integration Networks is an example of the unknown. In September, at the commencement of the review and revision of our Strategic Plan, we had the pleasure and the privilege to hear Andy Papadopoulos, former Executive Director of the Association of Local Public Health Agencies, speak to us. At that time, Andy expressed the view that this is the best of times to do strategic planning. With faith in those words, we have continued on with this task, which we intend to complete in the present year.

I wish to take this moment to commend the staff of the Health Unit for your excellent, intelligent, imaginative and often inspiring service to the wellbeing of our communities. To the Board, I thank you for your guidance and for taking on the challenging and very serious responsibility of public health. And to our partners and clients, I say that we look forward to working with you to protect and promote health in the year to come.

Over 650 Households Participated in "Medicine Clean Out"

*Submitted by Lois Dewey, RN, BScN, IBCLC,
Public Health Nurse, Early Years Injury Prevention*

People take medications for a variety of ailments. Those same medications can cause injury or even death when taken at the wrong time or by the wrong person.

Misuse of medication affects everyone. Not only are medications responsible for almost all cases of poisoning hospitalizations among children less than 10 years of age, (National Trauma Registry Bulletin- April 2002) they are also the cause of 25% of hospital admissions for the elderly and 23% of all nursing home admissions as well. (Ontario Drug Awareness Partnership, September 10, 2002).

For the month of **November**, the Leeds, Grenville and Lanark District Health Unit joined forces with local pharmacies to deliver the 3rd Annual 'Medicine Clean Out' campaign. Our goal was to reduce the risk of injury from unsafe medication use and storage, and to promote safe disposal of unused, not needed, and expired medications.

The "Medicine Clean Out" campaign had three main messages:

1. Expired, left over or unlabelled medicine can be dangerous.
(Always complete the full prescription of antibiotics.)
2. Medicine is a hazardous waste... Don't flush it... Don't throw it out.
3. Proper disposal of medicine protects your family and the environment.

This was the third "Medicine Clean Out" campaign coordinated by the Health Unit in collaboration with the local pharmacies. The first year, 2002, there were 21 pharmacies which took part, collecting medications from 265 households. The rate of participating pharmacies as well as the number of medicines collected has increased dramatically over the past three years. By 2004, out of 33 eligible pharmacies, 29 participated in the campaign. Several pharmacies declined due to fear of a dramatic increase in disposal costs. This year medicines were collected from 650 households.

Almost all pharmacies in Leeds, Grenville and Lanark now accept medicines for disposal over the entire year.

The focus of the 2005 campaign will change slightly to reflect this service and to remind residents to take advantage of this opportunity to keep medicines cleaned out.

Could You Turn Off Your TV For A Week? Take The Challenge...

Submitted by Danielle Shewfelt, BNSc, RN, Public Health Nurse

Television has become a large part of our lives. While at times television can be educational, it also creates some problems when it takes the place of physical activity or social interaction. Children over the age of 2 spend on average, 21 hours per week watching television. This startling statistic does not include the amount of time spent using the computer or playing video games (*Statistics Canada 2002*). All of this sedentary activity in combination with unhealthy eating habits leads to an increase in the rates of obesity putting children and youth at greater risk for developing chronic diseases. Children are not the only ones who are less physically active. Half of all adults in Ontario are considered to be inactive. This decrease in physical activity combined with an increase in portion sizes and poor food choices leads to higher obesity rates among adults as well, putting them at risk for developing a number of chronic diseases (*Healthy weights, healthy lives, 2004*).

In order to help combat the rising rates of physical inactivity and poor eating habits the Leeds, Grenville and Lanark District Health Unit has been inviting schools to participate in the "TV Turn Off Challenge" for the past 5 years. Students, teachers and their families have been encouraged to turn off their screens (TV, computer and video games) for a full week, replacing this sedentary time with physical activ-

ity and healthy eating. Students were given log sheets to help them keep track of their physical activity and healthy eating behaviors during the week. Tips, games and a variety of other resources were provided to teachers and families to help introduce students to new and exciting activities. This year we have 20 schools registered to participate.

Previous years of success with our schools have led us to expand this challenge to include the community and local workplaces. We will have physical activity and healthy eating information available on the Health Unit website www.healthunit.org in order to assist the community in participating in this year's challenge. Workplaces, Parents and families are encouraged to look through the materials posted on our website and use the helpful tips to make this challenge fun for the whole family.

The TV Turnoff Challenge will be taking place Monday April 4 to Sunday April 10, 2005.

For more information on this challenge or for other physical activity information please contact:

Danielle Shewfelt, BNSc, RN,
Public Health Nurse
Health Promotion Department
(613) 256-1203



Sources:

Healthy Weights, Healthy Lives. 2004 Chief Medical Officer of Health Report. http://www.health.gov.on.ca/english/public/pub/ministry_reports/cmoh04_report/cmoh_04.html. Accessed December 2004.

Statistics Canada. Television Viewing. 2002. The Daily. November 21 2003.

Go the Healthy Way... Eat Well, Live Well, and Feel Great!

Submitted by Dianne Oickle, MSc, RD, Public Health Nutritionist

The theme for Nutrition Month 2005 is targeted at adults to promote the importance of healthy eating, active living, and feeling good about yourself. The theme, "Go the Healthy Way... Eat Well, Live Well, and Feel Great!" reinforces that healthy lifestyles are important to achieving and maintaining a healthy weight as a way to prevent chronic disease. A number of activities were planned for March to promote the Nutrition Month theme.

Media

A media campaign was used to promote Nutrition Month throughout the tri-county. A press kit containing a press release and nutrition articles was sent to 16 local media contacts. Four newspaper articles were written and printed in several newspapers throughout the tri-county. Radio and television interviews helped promote the nutrition month messages to various audiences.

Staff Education

Various methods of communication were used to raise staff awareness about the theme of Nutrition Month, including paycheque stuffers, weekly e-mails of nutrition month articles, and poster and fact sheet promotion in each office.

Newsletters

Articles highlighting the theme of Nutrition Month were distributed in several newsletters, including Health Matters, Health Briefs, Parent-Child Guidebook, and Physician's newsletter.

Website

The Health Unit website featured an announcement on the main page indicating that March is Nutrition Month, with a link to the nutrition section of the website. Viewers were able to read information on various nutrition topics and link to the website for Dietitians of Canada.

Health Unit Office Displays

Each office featured a Nutrition Month display with posters and fact sheets promoting various nutrition topics. Handouts were also available for Health Unit clients.

General Resource Distribution

Several Health Unit fact sheets were reproduced and mailed to senior's organizations and fitness centres in Leeds, Grenville, and Lanark for display and distribution to their clients.

There has been considerable interest from the community in the Nutrition Month theme, as well as requests from various groups for Health Unit resources to promote Nutrition Month within their organization.

Children's Product Safety

Submitted by Lois Dewey, RN, BScN, IBCLC,
Public Health Nurse, Early Years Injury Prevention

A campaign was conducted during November 2004 to improve the safety of our children's home environment.

This campaign included:

- working with municipalities to ensure accessible, safe disposal of unsafe children's products
- a media campaign
- presentations to parenting groups
- information provided to stores selling second hand items
- inserts provided for newsletters to workplaces and schools
- information provided through our web site

Twenty two municipalities were invited to participate in our campaign to ensure the safety of our children by offering free disposal of unsafe children's products, either on a continuing basis or as a special one week amnesty. They were also asked to ensure that any waste management sites not permit children's products to be deposited in the 'reuse' area, but rather go directly to landfill for destruction. Eight municipalities participated this year with an additional five planning to offer these services next year, for a total of 13 out

of 22 municipalities participating.

The media campaign included newspaper articles, radio spots, and a television interview.

Thirteen presentations were given at parenting groups. These included: Brockville (2), Prescott (2), Kemptonville (1), Gananoque (1), Almonte (1), Carleton Place (2), Perth (1), Smiths Falls (3).

Thirty-one stores offering second hand items for sale received information on children's products safety and the Hazardous Products Act.

One hundred and three workplaces and 78 schools received information on how to check the safety of children's products and how to dispose of unsafe children's products safely.

Information on children's product safety and disposal was updated or added to our website.

The plan for 2005 includes lobbying municipalities to participate in this initiative, assist municipalities through advertising of their efforts in regard to children's product safety and offering education sessions for parents.

Great numbers enter the Ontario Quit Smoking 2005 Contest

Submitted by: Yves Decoste RN BScN, Tobacco Coordinator and a member of the Quit Smoking Contest Planning Team

This year's commitment to quit smoking has again proven to be one of the biggest challenges to face. Province wide, 19,009 smokers registered for the annual contest funded in part by Health Canada. The 19,009 entrants is an increase from the 16,500 of the 2004 contest. Locally our numbers also increased to 337 participants from the 290 who participated in last year's contest.

In partnership with the Tri-Health Team a grant from the Ontario Tobacco-free Network was secured in the amount of \$4,000 dollars to develop a media strategy to promote the Contest. Several other new initiatives to promote the contest may have lead to the increased participation numbers in our area this year. We used billboard advertising for the first time to promote this project on top of the media strategies of the past. We had mall displays in both Brockville and Smiths Falls where the grand prize for the contest, a 2005 Ford Mustang was the main attraction. The contest brochure was also included in the cheques mailed out in early January by Leeds & Grenville and Lanark Counties Social Services.

A coalition of local Health Units of which the Leeds Grenville and Lanark District Health Unit is a member, form the Quit Smoking Contest Planning Team. Prizes for the last two years of this 3-year project has been provided through a grant from Pfizer Consumer Health Care division. A one year follow-up of our 2002 Contest showed a 31.4 % quit rate for the year and an added bonus of delayed relapse for at

least 5 months of another 31.3% of respondents. The "spontaneous" smoking cessation rate for Ontarians is 9.2%.

The Quit Smoking Contest provides a link between the intention to quit smoking and a cessation attempt. This

year the contest registration started in December 2004 and closed January 31st 2005. Smokers are asked to make a quit plan, register and quit smoking for the entire month of February to be eligible for prizes.

Colorectal Cancer Screening Project

Submitted by Melinda Billett, BScH, BScN, RN, Public Health Nurse, Colorectal Screening Project Coordinator

Since April 2004, the Leeds, Grenville and Lanark District Health Unit worked with Cancer Care Ontario on the Ontario FOBT Project. This project was a pilot study to investigate two approaches to promoting screening for colorectal cancer using the Fecal Occult Blood Test (FOBT). The strategies compared were promotion through primary health care physicians and through public health. The study proposed to include 220,000 patients from the primary care physician group and 220,000 clients from six public health units. The project targeted asymptomatic average-risk men and women ages 50 to 75.

In Leeds, Grenville and Lanark, the Health Unit promoted the screening program through many avenues. Physicians and nurse practitioners were a major part of the promotion campaign. 4775 patient information packages were distributed to primary health care providers' offices.

Coffee Breaks were sponsored by the project in conjunction with occupational health nurses for area industries and organizations. A large media campaign including radio and print ads and displays at banks, flu clinics, libraries

and other venues were components of the campaign. Community education presentations to the target group were also completed. Over 12,000 patient information packages were distributed throughout the community and as of January 2005, 504 patients in Leeds, Grenville and Lanark completed the FOBT.

Participating in the Colorectal Screening Project has been an excellent opportunity for the Health Unit. The Health Promotion Department as well as the entire organization will benefit from the media coverage and innovative strategies that were implemented to promote colorectal screening to the community.

The project officially ended February 28, 2005. The information collected from this study will help the Ontario Ministry of Health and Long Term Care plan for a provincial screening program for colorectal cancer. Although the pilot project is officially ending at the Health Unit, the project will continue for Cancer Care Ontario. Project updates, reports, and educational materials will be available from Cancer Care Ontario at www.cancercare.on.ca