
REPORT OF 2012 FOUNDATIONAL STANDARD ACTIVITIES

A Report from the Leeds, Grenville & Lanark District Health Unit



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REPORT OF 2012 FOUNDATIONAL STANDARD ACTIVITIES

Our Vision: *Healthy people in healthy communities*

Our Mission: *We work with the community to enhance, promote and protect health*

Our Values: *Integrity, Respect, Caring, Accountability, Fairness and Excellence*

Introduction

This report summarizes the foundational standard activities of the Leeds, Grenville & Lanark District Health Unit for 2012. This includes activities related to assessment & surveillance, research, knowledge exchange and evaluation. 2012 was a year of change and rebuilding for the Health Unit with its new organizational structure. Moving forward, the work of the foundational standard will continue to provide a solid foundation for delivering high quality public health services.

For more information about any of the activities listed in this report, you may contact the individual listed as the contact person or the Department's Director/Manager.

Legend

CHP	<i>Community Health Protection</i>
FS PHN	<i>Foundational Standard Public Health Nurse</i>
HCP	<i>Healthy Communities Partnership</i>
HLD	<i>Healthy Living and Development</i>
LGBT	<i>Lesbian, Gay, Bisexual and Transgender</i>
LGL	<i>Leeds, Grenville & Lanark</i>
PHI	<i>Public Health Inspector</i>
PHN	<i>Public Health Nurse</i>
PHO	<i>Public Health Ontario</i>

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

HLD Meeting Evaluation

Investigators

HLD Management Team, Foundational Standard PHN

Health Unit Contact Person, Position Title:

Julie Bolton, RN, PHN

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Summary

Background/Rationale: Following the Health Unit's organizational review, staff from several different departments were combined into the new HLD. HLD held a staff meeting in February with 84 staff attending and wished to evaluate staff satisfaction with the meetings and preferences and suggestions for future HLD meetings.

Methods: An electronic evaluation was sent to HLD staff following the meeting and a total of 46 evaluations were completed (55% response rate).

Results: HLD staff rated the majority of agenda items as 'useful' and the majority of HLD staff rated the meeting as either 'good' or 'excellent.' Staff also provided suggestions for future meeting topics and format (half day instead of full day).

Conclusions/Significance: The feedback from HLD staff is useful as the new department develops its processes and meeting structure.

Project Status

Evaluation complete, results shared with HLD management and staff.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Municipal Drug Strategy Evaluation

Investigators

Municipal Drug Strategy Committee, FS PHN

Health Unit Contact Person, Position Title:

Bonnie Schnittker, RN, PHN

Public Health Nurse

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Summary

Background/Rationale: The Municipal Drug Strategy Coalition for Lanark County and the Town of Smiths Falls promotes a four-pillar approach to tackle alcohol and other substance use issues. The Coalition hosted a networking day in February with a focus on treatment. A total of 54 people attended the event.

Methods: An electronic Fluid Survey was sent to attendees following the event and a total of 23 evaluations were completed (42.5% response rate).

Results: The majority of participants (91%) felt that the day met their needs and also felt that the day met its objectives. All respondents reported that the session provided education and networking opportunities for service providers. They also reported the information received at the event would help to assist them when dealing with issues related to alcohol and substance misuse/abuse.

Conclusions/Significance: The results were shared with the Coalition and it was recommended that the Coalition consider the results when planning future events.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Municipal Drug Strategy – Needs Assessment

Investigators

Municipal Drug Strategy Committee, FS PHN

Health Unit Contact Person, Position Title:

Bonnie Schnittker, RN, PHN

Public Health Nurse,

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Summary

Background/Rationale: The Municipal Drug Strategy Coalition for Lanark County and the Town of Smiths Falls promotes a four-pillar approach to tackle alcohol and other substance use issues. The Coalition conducted a needs assessment survey with its membership to help gather information to inform and assist with future service delivery and planning.

Methods: An electronic survey was distributed by email via Fluid Surveys to a total of 57 members. 29 completed surveys were received, for a 51% response rate.

Results: Respondents were asked to select all of the options they would be interested in learning more about or would like to have access to. They indicated they would like to learn more about the following: prevention activities (93%), harm reduction (79%), effective methods or activities (76%), factors linked to alcohol and substance use (76%) and changing attitudes (69%). The majority of respondents (76%) were interested in attending education or training sessions in the evening or on Saturday mornings; as well Wednesday (31%) and Thursday (27%) evenings were reported as being the best times.

Conclusions/Significance: The results were shared with the Coalition and used to plan events and workshops during 2012.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Gardening Workshop Evaluation**Investigators**

Food Matters Coalition, FS PHN

Health Unit Contact Person, Position Title:

Carole Chang, R.D., M.Sc.

Public Health Nutritionist

Brockville Office

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Summary

Background/Rationale: The Food Matters Coalition, LLG Healthy Communities Partnership and the Health Unit hosted a gardening workshop in March 2012. The target audience for the workshop was the general public, with specific emphasis on promoting the workshop to people living with low income.

Methods: A hard copy evaluation form was completed by attendees. A total of 78 individuals attended, and 74 evaluations were completed, resulting in a response rate of 95%.

Results: The majority of participants rated the usefulness of the workshop as good or excellent, and provided additional comments that the sessions were useful, presenters were knowledgeable and that they learned something new. Almost all of the respondents reported that the gardening 101 presentation was good (24.3%) or excellent (70.3%). The majority of respondents also rated organic gardening and from seed to table presentations as good or excellent. Almost all of the respondents (98.5%) reported that they learned something new from a presentation at the workshop and reported they will try to grow vegetables at home after attending this workshop.

Conclusions/Significance: The results were shared with the planning group, and were used to plan additional fall workshops.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Healthy Communities Partnership Food Choices Evaluation**Investigators**

HCP; FS PHN

Health Unit Contact Person, Position Title:

Lois Dewey, RN, PHN

Smiths Falls Office

lois.dewey@healthunit.org**Summary**

Background/Rationale: In 2009, the Ontario Ministry of Health Promotion and Sport created the Healthy Communities Ontario initiative to help enhance the health and well-being of communities through inter-sectoral collaboration, partnerships and community engagement. The vision of the Healthy Communities Partnership is "Healthy people in Lanark, Leeds & Grenville, who live, learn, work and play in healthy communities." The partnership works towards this vision by:

- Identifying priorities for policy development
- Supporting partnerships through training, networking and collaboration
- Assisting in collaborative grant application

Methods: The HCP surveyed users of recreation venues about food choices available at these venues and their purchasing habits. Surveys were completed in hard copy at recreation venues across Leeds, Grenville and Lanark counties and electronically using Fluid Survey.

Results: A total of 194 surveys were completed. The majority of respondents (65.8%) indicated that they purchase food from recreation facilities, however the majority (66.2%) of those who purchase food from recreation facilities reported that they do this rarely (less than twice a month). The top rated food items purchased from recreation facilities were soft drinks (23.3%) and fries (18.4%); the least purchased were nachos (2.8%) and sandwiches (2.8%). Taste (35.5%) was the most selected factor that influences respondent's choice to purchase foods followed by nutrition (25.1%), convenience (22.4%) and cost (17%). When asked if they would purchase healthier foods if they were available, the majority of respondents (56.4%) reported they would purchase healthier food options if they were available. 32.4% were unsure if they would purchase healthier food choices and lastly, 11.2% would not purchase them. Respondents indicated which foods they would purchase if they were available at the recreation facility. The top choices were, fruit (fresh or cups) (12.4%), 100% fruit juice (10.4%) and yogurt (9.7%).

Conclusions/Significance: There appears to be support for providing healthier options at recreation facilities. These results were shared with the HCP and are being considered for future planning.

Project Status**Evaluation Complete.**

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Oral Health Summit Evaluation**Investigators**

Oral Health Team, FS PHN

Health Unit Contact Person, Position Title:

Rebecca Shams, BSc, RDH

Brockville Office

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Summary

Background/Rationale: The Leeds, Grenville & Lanark Healthy Smiles Ontario Steering Committee held an Oral Health Summit in April 2012, to explore models of building sustainable oral health programs in local health organizations

Methods: The event was attended by 19 health care professionals. A total of 12 evaluations were completed and returned. The response rate for this survey was 63%.

Results: The majority of respondents (91.7%) indicated that the summit met its stated objectives and 80% reported that they would be able to take concrete strategies back to their organization regarding oral health programs and models. All respondents (100%) reported they felt the Summit was an appropriate and safe place to share ideas and the majority of respondents (83.3%) reported the organization of the day was appropriate. The remaining (16.7%) reported they did not find the organization of the day appropriate. They provided additional comments recommending restricting presentations to allotted time and that too much time was spent on the introduction. The overall experience at the Oral Health Summit was rated as excellent (75%) or good (25%).

Conclusions/Significance: The results were shared with the steering committee and it was recommended that the results were considered when planning future activities.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Healthy Choices Evaluation

Investigators

PHN, FS PHN

Health Unit Contact Person, Position Title:

Kelly Munroe, Public Health Nurse, RN PHN

Smiths Falls Office

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Summary

Background/Rationale: Healthy Choices is a program for students in grades seven and eight that is delivered by a Public Health Nurse. During the winter and spring of 2012, Healthy Choices sessions were delivered at five local schools.

Methods: Students were asked to complete a one-page evaluation of the program assessing how useful the program was, if the program resulted in any self-reported behavior change, and if students recommended any changes to the program. A total of 227 surveys were completed, with four of the schools completing the surveys as soon as the program was finished, and one school completing the surveys four-months after the program was finished.

Results: Over two-thirds of students felt that the Healthy Choices sessions were useful, and close to half agreed that they learned about things that were important to them. Close to three-quarters of students agreed that they would recommend the program to other teens. The statements that most students rated as occurring 'more often' since taking part in Healthy Choices were "I am aware of the consequences of drugs, alcohol and smoking" (71.8%), followed by "I think about how to stay safer while still having a good time" (65.2%). The statement that the fewest students rated as occurring 'more often' since taking part in Healthy Choices was "I am comfortable talking to my parents when I am stressed or need help" (28.6%).

Conclusions/Significance: The results were shared with the Public Health Nurses delivering the Healthy Choices program. Changes to the evaluations format are being made for future sessions.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Fluoride Varnish Evaluation**Investigators**

Oral Health Team, FS PHN

Health Unit Contact Person, Position Title:

Stephanie Brazeau, CDA II

Brockville Office

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Summary

Background/Rationale: The Oral Health Department has been working in collaboration with Public Health Nurses (PHN) on a Fluoride Varnish Program. The PHN involved with the families completes a risk assessment and consent process. If eligible, fluoride varnish is applied by the PHN during home visits to a maximum of 4 applications. The Oral Health Department evaluated how the process is working for the PHN's involved.

Methods: A total of nine participating PHN's were sent the electronic survey and six responses were received with a response rate of 67%.

Results: All respondents indicated that they had attended the fluoride varnish training. Attendees rated the length of the training session, the breadth of materials, and the PowerPoint presentation as good or excellent. Respondents agreed with many aspects of the program and the majority (67%) reported that they feel HBHC Nurses are best suited to implement the program however, the remainder feel that other disciplines could be trained to implement the program.

Conclusions/Significance: The results were shared with the Oral Health staff, and it was recommended that the results were considered when making decisions about the fluoride varnish program.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Hospital Kits Evaluation

Investigators

Oral Health Team, FS PHN

Health Unit Contact Person, Position Title:

Stephanie Brazeau, CDA II

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Summary

Background/Rationale: The Oral Health Department has been distributing hospital kits which consist of an Early Childhood Tooth Decay information card and finger cot (infant toothbrush) to post-natal mothers in Leeds, Grenville and Lanark. The Public Health Nurses distribute these packages to hospitals where they are then distributed to new mothers. Staff in the Oral Health Department wanted to evaluate if distributing these resources in the hospital is the best method for distribution, or if an alternative method would be more effective.

Methods: To answer the evaluation questions, focus groups were held with new parents at Baby Talk groups and Good Food for a Healthy Baby groups across the Tri-County. Nine focus group sessions were completed with a total of 50 participants. During the focus groups the Oral Health Staff reviewed the hospital kits with participants and then asked them to take part in a discussion around the timing and distribution of the packages.

Results: About half of participants remembered receiving the resource. The majority of responses indicated that receiving the resource at the hospital or time of birth was too overwhelming. Suggestions for alternative ways to distribute the resource included: providing the resource prenatally or at one – two months of age. Other suggestions were made to have Health Care Providers distribute the resource at the child's first medical appointment or vaccination appointment. Comments provided indicated when the resource is received at the time of birth the information tends to get lost and other needs such as establishing routines and successful breastfeeding take priority. The majority of responses indicated receiving the resource from their Health Care Provider would be the best method followed by prenatal classes. Other suggestions included, mailing the packages, providing them at home visits and at Baby Talk.

Conclusions/Significance: These results were shared and received by the Oral Health Team. It was recommended that the oral health team take the results into consideration when planning future changes to the distribution of these kits.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Mental Health and Wellbeing of Students in LGL**Investigators**

School Health Coordinator, Epidemiologist

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

Brockville Office

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Summary

Background/Rationale: This surveillance report on student mental health and wellbeing contains data from both primary (Gr. 7-8) and secondary (Gr. 9-12) schools situated in Leeds, Grenville and Lanark counties (LGL). The data was gathered in May of 2009 from a total of 16 randomly selected schools (872 students). This report summarizes current mental and physical health and risk behaviour indicators and compares them to Ontario's overall student population.

Methods: The report contains analysis of the 12-month period prior to the survey as well as from the beginning of the school year (September). Data is presented overall, by sex, school type (primary vs. secondary) and grade where numbers of respondents permit. A more comprehensive analysis of Ontario-wide student mental health and wellbeing can be found in the 2009 Ontario Student Drug Use & Health Survey (OSDUHS) report.

Results: Highlights from the report include:

- 92.8% of students felt close to the people in their schools.
- 86.5% rated their physical health as being "good to excellent"
- 27.8% of students self-reported being overweight or obese
- 72.0% of students had seen a health care professional about their physical health
- 35.3% of students report being bullied
- 46.2% of students report some type of gambling activity

Conclusions/Significance: This report has been shared with Health Unit staff and community partners.

Project Status

Report Complete and posted to external Health Unit website.

Dental-Related Emergency Department Visits

Investigators

Epidemiologist, Dr. Mike Hamilton

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

Brockville Office

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Summary

Background/Rationale: The original goal of this project was to determine the reasons why LGL residents are accessing dental care in the hospital emergency department (ED) setting and which hospitals LGL residents are accessing for this care. The project hopes to also inform us of the costs for this type of emergency dental treatment. The project has grown to also assess variables associated with the type of patient interactions with the hospital EDs (e.g. procedures undertaken, medications given, date and time of visit)

Methods: Dental-related emergency department visit data is being accessed via the Ministry of Health IntelliHealth database. The data download includes variables describing patient age, sex, reason for ED visit (ICD-10 code), procedures undertaken, time and date of visit, and possible medications administered. Year-over-year trends, prevalence rates, graphs and charts are being produced.

Results: No results currently available as full analysis of the data is not yet complete.

Conclusions/Significance: This exploratory study hopes to inform our dental teams on how patients are accessing emergency dental care outside of normal treatment avenues and what the costs of these treatments are for our hospitals.

Project Status

Ongoing

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Daycare Providers Summer Student Evaluation Report

Investigators

Public Health Nutritionist, FS PHN

Health Unit Contact Person, Position Title:

Dianne Oickle, MSc, RD, Public Health Nutritionist

Brockville Office

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Summary

Background/Rationale: In the summer of 2012, the Health Promotion Summer Students from the Leeds, Grenville & Lanark District Health Unit went to daycares across the tri-county to promote physical activity and provide related resources. The goals of this program included; to incorporate physical activity into programming at daycares and day camps and to incorporate physical activity into daily life of children and families. The daycares visited by the Health Promotion Summer Students were surveyed in October 2012 about the resources provided during their presentation.

Methods: A total of ten surveys were faxed to daycare providers and five were completed and faxed back to the Health Unit – a response rate of 50%.

Results: Daycare providers recalled some of the messages from the students' presentation at their daycare, and indicated that they had used the resources that were provided and that they had incorporated resources into their activities.

Conclusions/Significance: The results were shared with the Healthy Living and Development team, and it was recommended that surveys were completed at the same time as the presentation in the future.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Teachers' Summer Student Evaluation Report**Investigators**

Public Health Nutritionist, FS PHN

Health Unit Contact Person, Position Title:

Dianne Oickle, MSc, RD, Public Health Nutritionist

Brockville Office

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Summary

Background/Rationale: The Health Promotion Summer Students from the Leeds, Grenville & Lanark District Health Unit went to elementary schools across the tri-county to promote physical activity and provide related resources. The goals of this program included; to incorporate physical activity into teaching activities and into daily life of children and families.

Methods: Participating teachers were sent an email containing a link to the online survey. A total of 14 evaluations were completed using the Fluid Survey tool.

Results: Respondents did not report ordering any of the resources referred to by the summer health promotion students. Respondents noted that they found the OPHEA resources helpful and provided specific suggestions of items or support that would be helpful, including activity suggestions, music and equipment. Respondents provided positive feedback about the session with the summer students, but indicated that the evaluation should be sent immediately after the session rather than several months after the session.

Conclusions/Significance: The results were shared with the Healthy Living and Development team, and it was recommended that surveys were completed at the same time as the presentation in the future.

Project Status

Evaluation Complete.

HEALTHY LIVING & DEVELOPMENT DEPARTMENT

Prenatal Situational Assessment

Investigators

Reproductive Health OPHS Lead, Child Health OPHS Lead, Manager QIS

Health Unit Contact Person, Position Title:

Kim Marshall, RN PHN

Gananoque Office

kim.marshall@healthunit.org

Summary

Background/Rationale: Staff responsible for delivering the reproductive health and child health programs wished to complete a situational assessment to understand clients' needs for prenatal and post-natal support.

Methods: Surveys were designed for expectant parents and new parents. These surveys ask questions about the type of information that clients would like to receive, and how they would prefer to receive information. The surveys for expectant parents are completed at pre-natal classes and during Larson screening phone calls. The surveys for new parents are completed at Baby Talk groups and during HBHC 48-hour phone calls.

Project Status

Evaluation in progress, results available in 2013.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Vaccine Primer Schedule

Investigators

CHP Department; FS PHN

Health Unit Contact Person, Position Title:

Julie Bolton, RN PHN

Brockville Office

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Summary

Background/Rationale: Presentations on the new vaccination schedule and vaccine information were provided to Health Care Providers on December 6th & 7th, 2011. These sessions took place in both Brockville and Smiths Falls.

Methods: The presentations were attended by 31 people and a total of 23 evaluations were returned, with a response rate of 74%.

Results: All respondents indicated that the event met their needs and the majority of respondents felt that the event's objectives were met 'to a great extent.' Respondents provided numerous suggestions for future events.

Conclusions/Significance: The results were shared with staff in the CHP department and it was recommended that the results were considered when planning future events.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Food Handlers' Training: Fall 2011**Investigators**

CHP Department, FS PHN

Health Unit Contact Person, Position Title:

Teresa Clow, PHI, Senior PHI

Smiths Falls Office

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Summary

Background/Rationale: During the Fall-Winter of 2011, the Health Protection Department held 9 Food Courses throughout Leeds, Grenville and Lanark. After completing the Food Course, participants wrote a standardized exam and become recognized as "Certified Food Handlers" if they passed the exam.

Methods: Participants were asked to complete a paper evaluation form at the end of the course, and a total of 282 completed evaluation forms were received.

Results: The majority of respondents felt that all topics were covered clearly. When asked if the way materials were presented met their learning style, the majority rated this as good or excellent. Respondents were also asked about their learning style and over half of the respondents (55.1%) indicated they learn through doing things. The remainder of respondents indicated they learn best through seeing it (33.3%) and hearing it (11.1%). When asked about the factors that influenced their decision to participate in the course, 'no cost' was cited by 50.3%, required training by employer was cited by 46.8% and the location was cited by 41.4%.

Conclusions/Significance The results of the food handler training provide useful information for planning future food handler courses. The results have been shared with staff in CHP and it was recommended that they are reviewed when planning future courses.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Sexual Health Clinic Pop-Up Survey

Investigators

Sexual Health Team, FS PHN

Health Unit Contact Person, Position Title:

Julie Bolton, RN PHN

Brockville Office

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Summary

Background/Rationale: The Department of Clinical Services launched an evaluation of their website www.areyousafe.ca in July 2011. When visitors accessed this site they were given the option to complete a brief pop up survey. The survey asked questions designed to gather more information about how they learned of the website and ways the site could be improved. No personal information was collected and respondents would not be contacted.

Methods: A total of 21 surveys were completed using Fluid Surveys between July 2011 and January 2012. In addition to online surveys being conducted, Public Health staff working at the Sexual Health Clinics tracked how clients heard about the clinics. A total of 96 clients provided this information.

Results: The majority of respondents (57.0%) indicated they found out about the www.areyousafe.ca website by an Internet search. Specific information about the number of hits to the website and the pages visited were provided as well. The top reported ways that clients who attended the Health Unit clinics heard about them were through their friends/family (68.7%) and PHN's in schools (58.0%). Over half of the respondents (67.0%) indicated they were looking for information on sexually transmitted infections (STI's). Information on pap smears was the next highest reported response with 29.0%.

Conclusions/Significance: The evaluation of the www.areyousafe.ca website provided useful information for staff working in the sexual health programs. The results were shared with staff and it was recommended that the results were used for planning.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Bed Bugs Session Evaluation

Investigators

CHP Department, FS PHN

Health Unit Contact Person, Position Title:

Julie Bolton, RN PHN

Brockville Office

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Summary

Background/Rationale: A bed bugs community information session, hosted by the Health Unit, was held on March 7th and 8th 2012 in Smiths Falls and Brockville. Participants came together to learn how to identify, prevent and protect against bed bugs as well as what to do if you experience an infestation. Information on landlord and tenant rights related to bed bugs was also provided. The sessions targeted a variety of groups including, social services, long term care and home care providers, group homes, boarding schools or camps, hospitality groups, moving and storage companies, real estate companies, volunteer organizations, second hand stores, property owners and landlords.

Methods: Participants were asked to complete an evaluation at the end of the session and a total of 68 evaluations were returned.

Results: Almost all respondents reported that the sessions provided them with the necessary information to prevent, identify and control bed bugs. The majority also indicated they now have more information on community partners and local agencies to better deal with bed bugs. Most respondents (38.1%) did not know if there was a change in the level of bed bug infestations in their service area over the last year and the majority of respondents (84.6%) had not had to access bed bug control services in the last year.

Conclusions/Significance: The results from the Bed Bug sessions were shared with staff in CHP. It was recommended that the results be considered when planning future activities related to bed bugs.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Bug Busters Meeting Evaluation

Investigators

CHP Department, FS PHN

Health Unit Contact Person, Position Title:

Julie Bolton, RN PHN

Brockville Office

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Summary

Background/Rationale: On Thursday February 9th 2012 a Bug Buster's in-service was held for health care/service providers on the psychosocial effects of MRSA.

Methods: The session was attended by eight people from six different health care facilities and five evaluations were returned. The response rate was 62.5%.

Results: All respondents felt that the event met their needs and the majority felt that it met its objectives. The majority of respondents reported learning something new from the agenda items either to some extent or to a great extent and the majority provided an overall positive rating of the event.

Conclusions/Significance: The results were shared with staff in CHP and it was recommended that the results are considered when planning future Bug Buster meetings.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

LGBT Presentation Evaluation**Investigators**

CHP Nursing Student, Manager QIS

Health Unit Contact Person, Position Title:

Katie Jackson, Manager QIS

Brockville Office

katie.jackson@healthunit.org

Summary

Background/Rationale: A fourth-year nursing student completed a project on the issues and needs of Lesbian, Gay, Bisexual and Transgender (LGBT) individuals and the Health Unit's approach to working with this population.

Methods: Following a presentation to staff, a survey was distributed for staff to complete. A total of 17 surveys were completed.

Results: The majority of staff either agreed or strongly agreed that the content was organized and easy to follow, that there was adequate time for questions and that the presenter was knowledgeable and managed the time well. Next, staff were asked if there was anything from the presentation that they could apply to their everyday practice; 94.1% of staff indicated that they could apply something from the presentation to their everyday practice. Staff were asked to indicate which actions they would support in their workplace and were most supportive of using gender neutral language, but were generally supportive of all proposed actions

Conclusions/Significance: The results of the evaluation suggest that the LGBT presentation was well-received by staff and that staff felt they could apply the information from the presentation to their everyday work. Staff were supportive of several actions in their workplace, in particular using gender neutral language. Staff indicated that the presentation made them more conscious of LGBT people issues, and that it reaffirmed why this is an important issue. It was recommended that these results were reviewed and shared with staff.

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

iPHIS 2011 Annual Data

Investigators

CHP Department, HISS

Health Unit Contact Person, Position Title:

Wanda Goodridge, HISS

Brockville Office

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Summary

Background/Rationale: iPHIS stands for Integrated Public Health Information System. It is the database used by public health units to report information on cases of reportable diseases to the MOHLTC.

Methods: The Health Information and Standards Specialist prepares quarterly and annual summaries of iPHIS data. These reports contain iPHIS confirmed case counts (number and proportion of reportable disease incidence by aetiological agent and subtype). The reports are shared with staff in the CHP department and used for program planning purposes.

Project Status

Data analysis for 2011 complete; 2012 analysis to be completed in 2013.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Sexually Transmitted & Blood Borne Infections in LGL 2000-2010

Investigators

Epidemiologist

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

Brockville Office

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Summary

Background/Rationale: This report summarizes the statistics and trends for new cases of specific Sexually Transmitted and Blood Borne Infections (STI) in the jurisdiction of the Leeds, Grenville & Lanark District Health Unit (LGL) during the 2000 to 2010 time frame. The objective of this report is to act as a reference document for policy makers, program planners, health educators, researchers, and others who are concerned with the public health implications of these diseases. The format of the report is meant to be practical and useable. Where possible, the data has been stratified by sex and age group to allow for greater richness of comparison between demographic groups

Methods: This report utilizes iPHIS data.

Results: Highlights from the report include:

- Chlamydia, Hepatitis C and Gonorrhoea are the three sexually transmitted infections with the highest incidences in LGL in 2010.
- The trend for the incidences of Chlamydia, Hepatitis C and Gonorrhoea have been increasing in LGL between 2000 and 2010.
- The trend for the incidence of Hepatitis B has been downward between 2000 and 2010.

Conclusions/Significance: This report has been shared with Health Unit staff and community partners.

Project Status

Report Complete and posted to external Health Unit website.

COMMUNITY HEALTH PROTECTION

PHN Immunization In-Service Evaluation

Investigators

Nursing Practice Coordinator, Manager QIS

Health Unit Contact Person, Position Title:

Lucia Taggart, RN, PHN

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Summary

Background/Rationale: On September 7th the Health Unit held an in-service for all Public Health Nurses (PHN) who are not currently involved with school-based immunization clinics. The purpose of this in-service was to provide PHNs with information about setting up a clinic, proper disposal of clinic supplies, and data management. The in-service consisted of an AV presentation, as well as small group information sessions and interactive practice stations.

Methods: A total of 40 PHNs attended and 9 PHNs completed an electronic survey that was distributed by email after the in-service resulting in a response rate of less than 25%.

Results: The majority of PHNs who responded reported learning something new to “some extent” or to “a great extent” for the agenda items. In particular, PHNs reported learning something new about maintaining the cold chain, distinguishing between anaphylaxis and fainting, the consent process, and the steps to set up and take down a school-based immunization clinic. The agenda item that the least number of PHNs reported learning something new from was providing evidence-based information and resources to clients regarding immunization and vaccines.

Conclusions/Significance:

Project Status

Evaluation Complete.

COMMUNITY HEALTH PROTECTION DEPARTMENT

Flu Kick-Off 2012

Investigators

Infection Control Nurse, FS PHN

Health Unit Contact Person, Position Title:

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Summary

Background/Rationale: The Health Unit holds an annual Flu Kick-Off event each fall. Healthcare professionals are invited to attend and receive information about influenza immunization and other relevant issues.

Methods: A total of 84 healthcare professionals attended, and 56 attendees completed feedback forms to evaluate this event (66.7% response rate)

Results: Almost all participants indicated that the event met their needs, and many positive comments about the event were also provided. The majority of participants felt that the event met its objectives 'to a great extent', particularly education around the positive deviance approach to managing infections. The majority of participants reported learning something new from the Flu Kick-Off. Participants also provided feedback about educational material they would like to receive, and provided suggestions for future events.

Conclusions/Significance: Participants appear satisfied with the 2012 Flu Kick-Off and have provided constructive feedback for future events. The results were shared with the infection control team, and it was recommended that the results be considered when planning future events.

Project Status

Evaluation Complete.

QUALITY, INFORMATION & STANDARDS DEPARTMENT

Health Equity Results/Assessment**Investigators**

Health Equity Coordinator

Health Unit Contact Person, Position Title:

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Summary

Background/Rationale: In March 2011, the Ministry of Health and Long-Term Care (MOHLTC) provided funding to create two new Public Health Nurse (PHN) positions in each health unit across Ontario. The expectation for these Public Health Nurses is to help reduce health inequities and to enhance supports that address program and service needs of priority populations. This includes populations impacted most negatively by the determinants of health. To help guide the work of these nurses, a situational assessment was used to identify what is currently happening in the organization with regards to priority populations and the determinants of health, and to propose recommendations to the Senior Management committee.

Methods: The objectives of the situational assessment were to:

- Identify current Health Unit programs and services that address priority populations
- Identify community partner programs and services that address priority populations
- Identify gaps in service delivery
- Provide recommendations to Senior Management Committee

Results: *The completion of the situational assessment resulted in two recommendations being made:*

1. It is recommended that LGLDHU take a broad approach to embed health equity into its culture and practices.
2. It is recommended that the LGLDHU reconsider the roles and responsibilities of the priority population PHNS to support a broad approach to health equity, as recommended above.

Conclusions/Significance: The results of the situational assessment were shared with Senior Management and with all staff. Several health equity initiatives have taken place since the situational assessment was completed, including embedding health equity in the Health Unit's strategic plan.

Project Status

Situational Assessment Complete.

QUALITY, INFORMATION & STANDARDS DEPARTMENT

Core Competencies Public Health Nurse Assessment**Investigators**

Staff Development Coordinator

Health Unit Contact Person, Position Title:

Erin McLean, PHN, Staff Development Coordinator

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Summary

Background/Rationale: The Health Unit in conjunction with the Staff Development Coordinator is moving forward with a new Performance Management Toolkit from OPHA. This toolkit focuses on setting expectations for core competency levels that Public Health Staff are expected to maintain. This becomes the focus of performance appraisal. The first step in this process is setting the expectations for competency levels.

Methods: A fluid survey concentrating on the core competency statements was created for Public Health Nurses. They were asked to review each of the statements and identify if they felt the expectation was too low, too high or reasonable. They were also given the opportunity to express any strong concerns that they may have with each competency.

Results: A total of 30 PHNs completed the survey. The majority of respondents indicated that each core competency statement was a reasonable expectation. Several additional comments were provided for each of the statements with suggestions and concerns.

Conclusions/Significance: The results validated the initial competency levels that were selected.

Project Status

Evaluation Complete. A pilot Core Competencies Performance Management project is currently underway with a group of PHNs.

QUALITY, INFORMATION & STANDARDS DEPARTMENT

All Staff Day Evaluation

Investigators

Staff Development Coordinator, FS PHN

Health Unit Contact Person, Position Title:

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Summary

Background/Rationale: The annual Health Unit staff retreat "All Staff Day" was held on April 27th 2012 at Camp Merrywood. This year's theme was "we belong together".

Methods: A total of 132 staff members attended the daylong event and 89 electronic evaluations were completed; the response rate for this survey was 64%.

Results: The annual Health Unit "All Staff Day" was rated overall as excellent (48%) to good (42%) by the majority of respondents. Respondents provided many comments and suggestions for ways to improve this day in the future.

Conclusions/Significance: The results were shared with the organizing committee and will be used when planning future all staff days.

Project Status

Evaluation Complete.

PARTNERSHIPS

Healthy Hearts Healthy Minds Mentoring Survey

Investigators

School Health Coordinator, FS PHN

Health Unit Contact Person, Position Title:

Tawnya Boileau, PHN

School Health Coordinator

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Summary

Background/Rationale: The healthy development of every child is improved by positive, nurturing mentoring relationships. Effective mentoring relationships can build on the factors that help a child become more secure in themselves and increase their ability to cope and handle themselves. Big Brothers, Big Sisters surveyed their partner agencies for feedback on the Healthy Hearts Healthy Minds mentoring project.

Methods: A total of 30 surveys were distributed and 9 completed surveys were returned. The response rate was 30%. Due to the low number of surveys completed the results were interpreted with caution.

Results: All of the respondents (100%) were aware of the Healthy Hearts Healthy Minds mentoring program from Big Brothers, Big Sisters and the majority of respondents (66.7%) reported that they currently have a partnership agreement with Big Brothers, Big Sisters. All of the respondents (100%) reported they had received an information package on mentoring from Big Brothers, Big Sisters and that they found this information useful. A little over half of respondents (55.6%) reported that they had identified new potential mentors and over half of respondents (57.1%) reported they have referred mentors to Big Brothers, Big Sisters.

Conclusions/Significance: The results were shared with Big Brothers, Big Sisters.

Project Status

Evaluation Complete.

PARTNERSHIPS

Deprivation Index & Food Deserts in LGL

Investigators

Epidemiologist, Dietetic Intern, Dieticians

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

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Summary

Background/Rationale: Access to nutritious food is a contributing factor to health and is an important public health concern. Socially deprived communities and neighbourhoods with poor access to healthy food have been described as *food deserts*. To identify areas as *food desert* many different indicators and methods have been used that do not reflect the rural nature of Leeds Grenville and Lanark. The goals of this project were: 1) To assess if there are areas in LGL that exceed a 20-minute drive time to food retailers (retailers that continually supply the 4 food groups); 2) To identify if gaps in access to food retailers correlate with areas of high deprivation; 3) To determine if health unit staff perceive a use for food access maps in their work.

Methods: Geographic Information Systems (GIS) based Euclidean and drive time distance measures were used and compared to measure accessibility to 75 food retailers in and around LGL. A 20-minute drive time (analogous to 16km) from each food retailer was used to determine the shortest path a person would have to travel to a food retailer. Overlays of the Deprivation Index, Euclidean distance, and drive time to food retailers were analysed to determine if gaps in coverage correlate with areas of high deprivation.

Results: Gaps in access to food retailers were determined to exist using Euclidean and drive time analysis measures. Gaps associated with neighbourhood deprivation were more prevalent in the southeast portion of the United Counties of Leeds and Grenville and the southeast and northeast portion of Lanark County.

Conclusions/Significance: This exploratory study demonstrated an improved method to measure spatial access to food retailers in rural areas. Results may enhance LGL Health Unit staff's awareness of the accessibility to food in LGL. Future studies should include multiple measures of access to better outline the correlation between *food deserts* and deprivation. As well, more robust statistical measures of spatial correlation should be explored.

Project Status

Complete

PARTNERSHIPS

PHO Locally Driven Collaborative Project: A Provincial Assessment of Parenting Styles in Ontario

Investigators

Epidemiologist, LDCP Collaborating Health Units

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

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Summary

Background/Rationale: According to the Ontario Public Health Standards (2008) child health standard, the goal of public health programming is to enable all children to attain and sustain optimal health and developmental potential. More specifically, the Standards highlight the need to assess positive parenting in terms of monitoring trends at the population level. The purpose of this project is to address the data gap that currently exists with regards to the Ontario Public Health Standards need for parenting style data across the province. The aim of this project is:

1. to review existing parenting research on parenting style completed by Ontario health units
2. to review existing parenting style tools and resources in the literature
3. to develop a tool which will assess parenting styles among parents of children under 18 years of age on three main criteria: communicating, monitoring children's behaviour, and nurturing (relationship-building)
4. to develop and implement a data collection strategy of parenting styles at the Ontario local and provincial levels
5. to compare the results of the parenting style module for Ontario to a similar parenting style questionnaire used in Triple P with parents over the same time frame.

Methods: The design of this project will incorporate a cross-sectional data collection method in which a one-time telephone survey will be administered to the public to collect information on parenting styles. The rapid risk factor surveillance system (RRFSS) will be the medium used for collecting this data. RRFSS is a telephone survey used to gather surveillance data, to monitor public opinion on key public health issues and to collect information on emerging issues of importance to public health. The survey will use computer-assisted telephone interviewing (CATI) technology, with sampling based on random digit dialing. Interviews are conducted by the Institute for Social Research (ISR) at York University. This project will also include a comparison of results to a parenting style questionnaire that has been validated, *the Parenting Scale*, with a population of parents in Niagara over the course of the same period.

The proposed indicators are:

1. % of parents (18+) of children (under 12) who are defined as parenting in the authoritarian, authoritative, and permissive parenting style
2. % of mothers (18+) of children (under 12) who are defined as parenting in the authoritarian, authoritative, and permissive parenting style
3. % of fathers (18+) of children (under 12) who are defined as parenting in the authoritarian, authoritative, and permissive parenting style

Results: The expected outcomes of this proposed project will include:

1. A parenting style module developed and available to health units to opt into for future years
2. A provincial and local picture of parenting styles
3. A gap addressed with regards to the OPHS data that is currently available to health units in Ontario
4. Health units across Ontario will have the opportunity to use the results of this proposed study to tailor their existing programming for parents and develop new tools , resources and media campaigns (including social marketing) to assist parents with being the best parent they can be. Health units will also have a better understanding where to allocate resources as needed.
5. Dissemination of findings from the parenting style.

Conclusions/Significance: Parenting styles impact parenting behaviour. If a parent chooses to adopt and practice parenting behaviours that are indicative of a balanced style of parenting, they will be successful in managing their child's behaviour, developing a loving relationship with their child and have the skills to communicate in a positive and open way. This will make any parent more confident in their role. Studies support that when parents are aware of the profound effect their actions have on their children, they are often prepared to modify their approaches.

According to the Ontario Public Health Standards (2008) child health standard, the goal of public health programming is to enable all children to attain and sustain optimal health and developmental potential. More specifically, the Standards highlight the need to assess positive parenting in terms of monitoring trends at the population level. Currently, the recent report 'Data gaps in public health indicators in Ontario', identified there is a data gap with respect to parenting style. Currently there is no local or provincial picture as to how parents are parenting, there is a lack of data assessing parenting relationships and parental behavior. Most parenting data collected in the past focused on the number of parents attending workshops and how best to support and offer workshops for parents. The results of this proposed project will close the gap on parenting styles data and help public health units tailor their parenting programs. It will also provide health units with a benchmark or baseline to determine parenting styles in their community. This in turn will assist with allocation of resources (i.e., budget, staffing).

Project Status

Ongoing

PARTNERSHIPS

PHO Locally Driven Collaborative Project: e-Prenatals Evaluation

Investigators

Reproductive Health OPHS Lead, Manager QIS

Health Unit Contact Person, Position Title:

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Summary

Background/Rationale: The purpose of this research is to compare the effectiveness of public health prenatal education programs in terms of knowledge and behaviour change related to healthy pregnancies, preparation for parenthood and breastfeeding. The Health Unit will participate in this project as a recruitment site for participants.

Methods: This research project will involve recruiting primiparous mothers from health units for both online and in-person prenatal classes and will survey them pre and post prenatal classes. The research will be looking at the change in knowledge and behaviour for all prenatal education, as well as a comparison between online and in-person. In addition this research will also be asking questions related to learning preferences and comparing these between in-person and online programs

Project Status

Evaluation project approved and funded by PHO. Recruitment to begin in 2013.

PARTNERSHIPS

Geo-simulation tools for simulating spatial-temporal spread patterns and evaluating health outcomes of communicable diseases

Investigators

Epidemiologist, Queen's University Department of Geography, Queen's University Department of Family and Emergency Medicine

Health Unit Contact Person, Position Title:

John Cunningham, Epidemiologist

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Summary

Background/Rationale: Communicable diseases are major threats to public health and the economy. Accurately modelling and predicting the outcome of disease spread across time and space is a key challenge for public health intervention. In this project geo-simulation tools for disease spread (GSTDS) that plausibly model and predict the dynamics of the disease spread across a large territory, taking into account the characteristics of the agent-host-environment interactions are being developed. The successful development of such a decision system and geo-simulation tools requires mathematical and environmental modelling of the behaviour rules of the interacting individual hosts, high quality data obtained through a large scale surveillance, and faithful interpretation and analysis of the data. The system created in this research will help government organizations and industries develop better strategies and policies to prevent and manage the potential outbreak of communicable diseases.

This project will address the question of using mathematical models and spatial simulation techniques to describe and predict the disease spread. The key questions that will be addressed include:

- a) What are the potential spreading patterns of a virus across space and time, given the potential sources of the virus and considering animal/human movements?
- b) What are the relationships between virus spread and environmental and climate conditions?
- c) Which segments of the population (communities) are more vulnerable to the pandemic?
- d) Which (parts of) cities/regions should have priority for public health interventions such as vaccinations or isolation and quarantine enforcement in order to serve as effective epidemiological "firebreaks" for the region?

Methods: The study will develop robust disease spread protocols by combining mathematical, statistical, vector network, raster surface, and agent-based models to simulate multi-level transmission and impact of disease spread. The focus will be on four emerging diseases of current interest to public health, representing different modes of transmission including West Nile Virus (WNV), Lyme disease, avian influenza (bird flu) and potential pandemic influenza. Protocols for transmission dynamics of disease will be developed, taking into account the following different routes of agent spread: host to environment, environment to human, host to host, and human to human. Agent-based computational models and deterministic compartmental patchy models will be used to simulate different spatiotemporal deterministic and/or random behaviours of agents, their host and their various environmental interactions which occur across inter-city, regional, and national transportation networks and the landscape at different scales.

Conclusions/Significance: The framework and tools developed in this project are expected to be an important component of our national capacity to deal with major disease outbreaks in the future. Due to their capability in simulating the spreading patterns and evaluating the effectiveness of human interventions, the tools and decision support systems are expected to be critical to developing effective strategies for responding to future pandemics or other deadly communicable disease outbreaks in Canada, and thus for reducing the human and economic costs associated with such events. This will also provide for effective planning of human and healthcare resources.

Project Status
Ongoing

PARTNERSHIPS

PHO Locally Driven Collaborative Project – Embedding a Strengths-Based Approach in Public Health Practice

Investigators

School Health Coordinator

Health Unit Contact Person, Position Title:

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Summary

Background/Rationale: This locally driven and collaborative research project funded by Public Health Ontario has been a joint effort between Resiliency Initiatives and the six participating Public Health Units (Oxford County Public Health & Emergency Services- Project Lead, Huron County Health Unit, Perth District Health Unit, Leeds, Grenville & Lanark District Health Unit, Thunder Bay District Health Unit and Niagara Region Public Health). Public Health Units participating in this particular project explored how to embed a strengths-based approach in our practice.

Interest in strengths-based practice as a way to enhance the positive development of individuals has increased significantly as Public Health practitioners shift their attention from the prevention of specific problems to a more positive, holistic view on individual development. Interventions have moved increasingly toward creating a coordinated sequence of positive experiences and providing key developmental supports and opportunities. Rather than the traditional perspective of engaging a person with a problem orientation and risk focus, a strengths-based approach seeks to understand and develop the strengths and capabilities that can transform the lives of people in positive ways (Alvord & Grados, 2005; Barton, 2005; Benson, Leffert, Scales, & Blyth, 1998).

Intuitively, the idea of focusing on the strengths of a person is considered to be a respectful and meaningful starting point in supporting positive change. While many health practitioners agree with the idea of working from a strengths-based perspective, few have been thoroughly trained or given the support to work from an underlying set of values, principles and philosophy of strengths-based practice (Rapp & Goscha, 2006). In response to this challenge, the research project explored:

1. The capacity (knowledge, skills, beliefs, resources) among public health staff (and their organization) to implement a strengths-based approach in their practice.
2. The essential steps towards integrating a strengths-based culture for professional practice.
3. The implications for organizational capacity and leadership support required to effectively integrate strengths-based practice in collaboration with community partners.

Methods: This study used a mixed methods design utilizing quantitative (pre-interim-post standardized questionnaires) and qualitative (pre-post focus groups and expert interviews) protocols with public health staff from four participating Public Health Units in Ontario. The intervention involved an introduction to strengths-based concepts and practice that all participants received with 75 participants involved in the interim and post evaluation protocols. Responses on the questionnaires and focus/interviews were analyzed using conventional quantitative and qualitative content analysis.

Results: The initial pre-results indicated that a majority of Public Health Staff (95%) agree with and intuitively embrace the concepts of strengths-based practice, but only 25% felt prepared and 59% somewhat prepared for strengths-based practice and 69% feeling unsupported by their Public Health Units to be able to practice. The post-results revealed a slight increase with 32% feeling prepared and 61% somewhat prepared to practice from this perspective and 68% still feeling unsupported.

Conclusions/Significance: Results indicated a strong receptiveness and desire to be trained in a strengths-based approach to Public Health Care practice. A clear disconnect was reported in feeling supported by their current Public Health Units policy and practice protocols. The focus groups and expert interviews explored and summarized what specific training might be required, essential steps required to implement and what organizational/leadership changes might be required to effectively support the integration of a strengths-based practice.

Project Status

Project Complete. Final report to be submitted to PHO by 2013.