



2009 ANNUAL REPORT



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A WORD FROM DR. GRAHAM POLLETT

ASK ANYONE WHO WORKS IN THE PUBLIC HEALTH SECTOR TO REFLECT ON THEIR WORK IN 2009 AND THEY WILL NO DOUBT MENTION H1N1. THE NEW INFLUENZA STRAIN DOMINATED HEADLINES AND NEWS STORIES AROUND THE GLOBE EVEN BEFORE IT WAS DECLARED A PANDEMIC BY THE WORLD HEALTH ORGANIZATION ON JUNE 11TH.

LOCAL RESPONSE

Certainly, the local response to the H1N1 influenza pandemic presented a number of challenges for the Middlesex-London Health Unit, including the identified priority groups, as well as the availability and distribution of vaccine. Now that it's complete, it's interesting to look back on the vaccination campaign and consider some of its more notable facts:

- More than 100 community immunization clinics held at 31 different locations
- Over 100,000 H1N1 vaccinations given to people in every eligible age group.
- Approximately 56,000 doses of vaccine distributed to hospitals, long-term care facilities, and family physicians.
- Wide circulation of 14 Community Updates to keep residents and healthcare providers informed.
- On-going communication of clinic wait times to the public through the use of Twitter.

VOLUNTEER EFFORTS

Staff, and a core of volunteers who donated more than 4,100 hours of their time, worked tirelessly to make the response to this illness as smooth as possible. I am grateful for their many contributions.

WHILE H1N1 GARNERED A SIGNIFICANT AMOUNT OF ATTENTION IN 2009, THE MIDDLESEX-LONDON HEALTH UNIT WAS ALSO BUSY IN A NUMBER OF OTHER AREAS.

THE TECHNOLOGICAL FRONT

On the technological front, we made the Health Unit and Health Unit programs more accessible on the Internet by launching live Internet streaming of Board of Health Meetings in January. In April we created a new On-line Immunization Form which allows parents and caregivers to update their child's immunization records from home. Then in the fall, we launched a new on-line game called Adventures in Sex City, which educates teens and young adults about sexual health and sexually transmitted infections.

IN THE SPOTLIGHT

There were a number of other initiatives and activities in 2009 that kept public health issues in the spotlight. From the Violence in Hockey Symposium we hosted in February, which brought together a broad-based group to address

the implications for women and children that arise from the violence that mars our national winter sport, to the Pottersburg Creek PCB blood survey in the spring; from the Public Health in Action Symposium entitled Breaking the Cycle: Ontario's Poverty Reduction Strategy held in June, to the Annual Conference for the Ontario Branch of the Canadian Institute of Public Health Inspectors we hosted in October, to our Prev-OH dental care program for youth in low income families, Health Unit staff have worked diligently on public health issues that matter to this community.

AN INFORMATIVE REPORT

I hope you find this annual report both interesting and informative as it highlights the work undertaken by Health Unit staff throughout 2009.



IN 2010 AND BEYOND

We will continue in our mission to promote wellness, prevent disease and injury and protect the public's health through the delivery of public health programs and services.

Graham L. Pollett MD, MHSc,
 FRCPC, FACPM
 Medical Officer of Health

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MUCH OF THE FOCUS OF THE MIDDLESEX-LONDON HEALTH UNIT IN 2009 WAS TAKEN UP WITH THE RESPONSE TO PANDEMIC H1N1 INFLUENZA.

PANDEMIC H1N1 INFLUENZA IN MIDDLESEX-LONDON

IN TOTAL, THERE WERE 224 LABORATORY-CONFIRMED CASES OF PANDEMIC H1N1 INFLUENZA IDENTIFIED IN OUR COMMUNITY, AND A FURTHER 167 INFLUENZA A CASES THAT WERE QUITE LIKELY TO HAVE BEEN THE PANDEMIC H1N1 STRAIN.

IN PERSPECTIVE

It is important to note, however, that the figures outlined above represent a huge underestimation of the actual number of people in Middlesex-London who became ill with H1N1 influenza. The Pandemic required a large-scale coordinated response from the Health Unit.

EFFECTIVE RESPONSE

As the situation developed, and in order to respond effectively to the growing challenges posed by the pandemic, the Health Unit had to create and implement a number of new initiatives. A surveillance plan was put in place to monitor the extent of Pandemic H1N1 influenza in the community.

A communications strategy designed to convey accurate and timely local information to the public and to health professionals through regular updates was also put in place. In order to answer and respond to many of the questions that arose in the early stages of the H1N1 pandemic, the Health Unit held six community information sessions. Three information sessions were also held for health care providers. Perhaps the biggest challenge of the entire local response was planning for and implementing mass community immunization clinics and distributing the Pandemic H1N1 influenza vaccine to community health care providers.

REACHING OUT

Health Unit staff also recognized the need to reach out to specific populations in the community as part of the response to H1N1. Among these populations were schools, child care centres, university and colleges, First Nations Communities and homeless shelters.

MASS IMMUNIZATION

The campaign to immunize the community against H1N1 was a major undertaking. Between October 13, 2009 and January 29, 2010, the Health Unit administered 105,287 doses of Pandemic H1N1 influenza vaccine and a further 21,274 doses of seasonal influenza vaccine. These doses were given at 116 mass community clinics, the Middlesex-London Health Unit's walk-in immunization clinics, high risk settings, and even in clients' homes. In addition, 65,869 doses of pandemic H1N1 influenza vaccine were distributed to community health care providers to provide to their patients and staff members.

STATISTICS

Here are some additional statistics related to the Health Unit's involvement in the response to the H1N1 pandemic:

- 825 staff and volunteers worked almost 5,300 shifts at the Pandemic H1N1 influenza vaccination clinics;
- 25 updates for the community were widely distributed via email and were posted on the Health Unit's web site;
- 55 updates for health care providers were distributed via email and fax and posted on the Health Unit website;
- 24 media releases issued, which generated approximately 356 media reports about Pandemic H1N1 influenza;
- 284,004 hits to the Health Unit website between late-September 2009 and January 29, 2010;
- 393 Tweets sent using Twitter between October 19, 2009 and January 29, 2010;
- Total cost of the H1N1 campaign: \$1,925,147.





COMMUNICABLE DISEASES & SEXUAL HEALTH SERVICES

COMMUNICABLE DISEASES AND SEXUAL HEALTH SERVICES WERE HEAVILY INVOLVED IN THE LOCAL RESPONSE TO THE H1N1 PANDEMIC HIGHLIGHTED ON PAGES 5-6 OF THIS ANNUAL REPORT. BELOW IS AN OVERVIEW OF THE OTHER WORK DONE BY COMMUNICABLE DISEASES AND SEXUAL HEALTH SERVICES IN 2009.

COMMUNICABLE DISEASES & SEXUAL HEALTH SERVICES

is the Service Area that operates the Health Unit's Immunization Clinics, as well as clinics that provide sexual health and family planning services to the community. Education and health promotion campaigns about sexual health issues are also provided. Working with local physicians and hospitals, this Service Area monitors the community for infectious diseases and ensures that the vaccinations of students and children in schools and childcare centres across the region are up-to-date.

Staff members also inspect long-term care facilities, child care centres and personal service settings, which include barber shops, tattoo parlours, spas, and manicure and pedicure salons. Communicable Diseases and Sexual Health Services includes the Infectious Diseases Control Team, the Vaccine Preventable Diseases Team and The Clinic and Sexual Health Promotions Teams.

RE-USE OF RAZOR BLADES

In 2009, the Infectious Diseases Control team undertook an initiative to prevent the re-use of razor blades in 30 London-area barber shops after a complaint was received from a member of the public. In an effort to raise awareness about this situation, a media release was issued advising members of the public to consult with their health care providers regarding the need for blood testing if they believed they were exposed to re-used razor blades.

CAMPUS-BASED MUMPS VACCINATION CAMPAIGN

In response to outbreaks of mumps in students at post-secondary institutions in several Canadian communities, a campaign to vaccinate university and college students with a second dose of mumps-containing vaccine was initiated. The local effort was part of an Ontario-wide campaign to ensure this age group was sufficiently protected against mumps. A total of 1,343 students were vaccinated at two clinics held at The University of Western Ontario and one clinic held at Fanshawe College.

NEW VACCINE DISTRIBUTION PROCESS

Staff with Communicable Diseases and Sexual Health Services modified the process that ensures that vaccines distributed to health care providers are maintained at the appropriate temperatures.

Under the revised process, health care providers are required to fax temperature logs from their refrigerators to the Health Unit before publicly funded vaccines are provided to them.

SEXUAL HEALTH SERVICES YOUTH ENGAGEMENT STRATEGY

Working with Mind Your Mind (a local organization with expertise in targeting health messages to reach youth) and a group of local youth, Health Unit staff created a new web-based game to help communicate important sexual health information. The game, called *Adventures in Sex City*, provides educational information about sexually transmitted infections (STIs) in an effort to promote optimal sexual health. The youths who were involved in the development of *Adventures in Sex City* also assisted in the creation of two new sexual health promotion posters about STIs and STI testing.

UPDATING OF IMMUNIZATION RECORDS

In 2009, the Vaccine Preventable Diseases Team undertook a campaign to raise awareness about the responsibility of parents and guardians to inform the Health Unit about their child's immunization status. To help spread the message, refrigerator magnets were sent home with students across the region. An on-line immunization form was also launched, allowing parents and guardians to inform the Health Unit of changes to their child's immunization status securely over the Internet. Staff members who work on the Vaccine Preventable Diseases team reviewed the immunization records of 71,177 students resulting in 289 secondary school students and 424 elementary school students being temporarily suspended from school. The team also reviewed the immunization records of 6,091 children enrolled in 113 child care centres.

THE CLINIC

The Sexual Health Clinic continued to see large volumes of clients in 2009 and instituted refinements to their new computer system, which tracks laboratory tests and maintains an accurate inventory of contraceptives that are provided for sale at reduced prices.

BELOW ARE SOME KEY STATISTICS FROM 2009

Inspections

- 19 routine food safety inspections in hospitals;
- 118 routine food safety inspections and five re-inspections at 18 long term care homes and 23 retirement homes;
- 272 routine inspections and 13 re-inspections at 19 before and after school programs and 113 child care centres;
- 394 routine inspections and 29 re-inspections at 386 personal service settings, representing 60% of the personal service settings in Middlesex-London;
- 241 cold chain inspections to ensure that vaccines are handled appropriately including 198 at physicians' offices, nine at hospitals, and 34 at long term care homes and retirement homes.

Outbreak management

- 67 outbreaks in long-term care facilities, including retirement homes (40 involving respiratory symptoms, 25 involving diarrhea and vomiting, two with respiratory, diarrhea and vomiting symptoms);
- 43 outbreaks in child care

centres (six involving respiratory symptoms, 36 involving diarrhea and vomiting and one with respiratory, diarrhea and vomiting symptoms);

- 44 outbreaks in hospitals (26 involving respiratory symptoms, 16 involving diarrhea and vomiting, and two with respiratory, diarrhea and vomiting symptoms).

Follow-up of sexually transmitted infections (STIs)

- 18 cases of HIV
- 1,310 cases of chlamydia
- 211 cases of gonorrhea
- 11 cases of primary and secondary syphilis and 46 other cases of syphilis

Follow-up of communicable diseases

- One case of West Nile Virus
- 64 cases of salmonella
- 115 cases of campylobacter
- 12 cases of E. coli O157:H7
- 15 cases of invasive Group A Streptococcus
- Five cases of invasive meningococcal disease
- Nine cases of active tuberculosis

- Four cases of whooping cough (pertussis)
- Two cases of hepatitis A

Sexual Health Clinics, providing counseling, testing and treatment during

- 6,920 visits to the Birth Control clinic at 50 King Street, London
- 8,381 visits to the Sexually Transmitted Infection clinics at 50 King Street, London
- 1,000 visits at the sexual health clinic at the Kenwick Mall, Strathroy
- 47 clients seen at a pilot drop-in clinic at the Central library.

Immunization Clinics

- Vaccinated the majority of the 3,708 Grade 7 students (74%) who have had the new meningococcal vaccine which provides protection against four types of meningococcal disease (A, C, Y, W135);
- Vaccinated the majority of the 4,830 Grade 7 students (95%) who had at least one dose of hepatitis B vaccine;
- Vaccinated the majority of the 1,130 Grade 8 girls (45% percent of Grade 8 girls) who had at least two doses of the

human papillomavirus vaccine to prevent cervical cancer and genital warts.

Sexual Health Promotion Initiatives

- Participated in 123 community presentations, six health fairs, 18 classroom presentations, 16 Clinic tours;
- 28 presentations in correctional institutions including sessions at the Elgin Middlesex Detention Centre to enhance services for women at the Centre or about to leave the Centre;
- Reached 480 students through presentations at St. Joseph's Hospital about the implications of having a baby, called "Having a Baby Day", in partnership with St. Joseph's Health Care, the Family Health Promotion Team and the Young Adult Team;
- Collaborated with the London District Catholic School Board to provide presentations and interactive activities to 240 students at a World AIDS Day initiative on December 1, 2009.



DENTAL SERVICES

NEW CLINICAL PREVENTIVE PROGRAM

In 2009, Dental Services created a new clinical preventive program called Prev-OH, geared to youth between the ages of birth and 17, from low-income families. This “no fee” preventive program has provided dental screenings, professional cleanings, the application of topical fluoride and sealants to 491 clients since its inception in February of 2009.

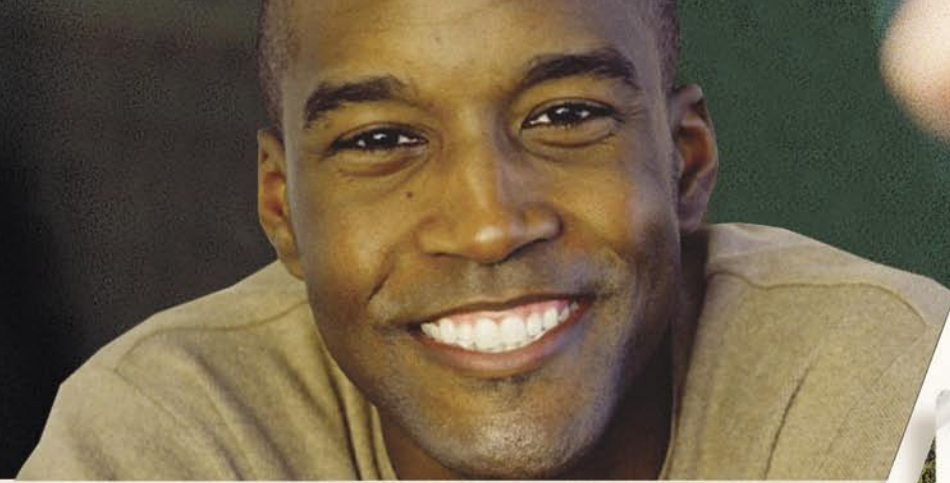
In addition to the provision of this new preventive program for those from birth to the age of 17, the Health Unit's Registered Dental Hygienists, working at the 50 King Dental Clinic provided reduced-fee dental cleanings to 228 adults receiving Ontario Works benefits. This service is not covered by Ontario Works.

The Health Unit's 50 King Dental Clinic also saw 2,704 clients in 2009 and provided direct dental treatment to children of low-income families covered by the Children in Need of Treatment (CINOT) program or Ontario Works (OW).

DENTAL SCREENING AND ASSESSMENT

The Dental Services Team provided dental screening services and oral health assessments to 17,937 students across all elementary schools in Middlesex-London and also on request at the 50 King Dental Clinic.

The purpose of this work is to gather oral health data, identify children who need dental care and, further, to assist families in finding the care they need. Through this process Dental Health Staff identified 1,962 children and youth who needed care. For 17-year olds who were screened and who met the financial and dental needs criteria, Dental Services provided payment of \$597,586 for the necessary treatment through the CINOT and CINOT expansion program.



APRIL IS “ORAL HEALTH MONTH”

April is *Oral Health Month* and in 2009, Dental Services, in collaboration and partnership with the London and District Dental Society (LDDS), started an oral health awareness campaign called *Top Gums*.

The goals of this campaign were to increase awareness of the importance of healthy gums, to underscore the relation between “gum health” and overall general health, to outline the signs and symptoms of gum disease and how to attain and maintain a healthy mouth.



GOOD ORAL HEALTH

Dental Staff also continued to promote good oral health through presentations to 640 classes at 126 elementary schools in the region.

In addition to these classroom presentations, 1,297 students with identified dental needs received individual oral hygiene care instruction during one of 952 small group sessions held at the school or at the 50 King Dental Clinic.



ENVIRONMENTAL HEALTH

ALCOHOL LIABILITY AND RISK MANAGEMENT WORKSHOP FOR GOLF COURSES

On May 6th a workshop on Alcohol Liability and Risk Management was held for golf course owners and staff in London to educate them on the realities and risks of serving alcohol. This workshop was led by Middlesex-London Health Unit in collaboration with public health staff from Lambton, Elgin-St. Thomas, Oxford County and Chatham-Kent. The workshop was attended by 123 participants representing 40 golf courses, including 17 of the 29 courses in the Middlesex-London region. In recent years, courts have held individuals and establishments responsible for the conduct of others related to the service and availability of alcohol. Along with the increased legal implications, there has also been concern regarding the potential for alcohol-related injuries to patrons and the greater public. Risk minimization strategies were presented, including the importance of creating policies that are consistently enforced as an effective way of preventing civil law-suits and harmful events.

COLD WEATHER ALERTS

The Medical Officer of Health issued five Cold Weather Alerts in January, 2009. These alerts amounted to a total of 14 days when temperatures dropped below minus-15 degrees Celsius. This was a significant increase over the number of cold weather alerts issued in previous years. Day care facilities, local school boards, private schools, and long term care facilities were all advised of these alerts, in an effort to help them plan outdoor activities for their clients. Notifications were also issued to local shelter and outreach organizations to heighten their awareness and preparedness for the possibility of increased demand on their services. Examples of the response to these alerts include adjustment to meals provided at shelters and warming centres being made available by the City of London through London CARES.

LOCAL SAFE KIDS WEEK 2009 ACTIVITIES

The Health Unit was an active partner of Safe Kids Week in 2009. Activities included: "Product Round-Up" events at White Oaks Mall and Mount Brydges. As well, 33,000 Home Safe Home educational brochures were distributed to parents and caregivers.

ENVIRONMENTAL HEALTH AND CHRONIC DISEASE PREVENTION SERVICES

is a Service Area where Public Health Inspectors, Public Health Nurses, Public Health Dietitians, Health Promoters and Tobacco Enforcement Officers use their collective expertise to ensure the safety of food and water in Middlesex-London and promote programs to improve overall health. Among their many roles, this team is responsible for the inspection of food premises and small drinking water systems across the region and the enforcement of the *Smoke-Free Ontario Act*; they raise awareness about cancer prevention, child safety and healthier eating; they conduct West Nile Virus surveillance and promote physical activity. The following is an overview of this team's many activities in 2009.

LONDON IDLING CONTROL BYLAW AMENDMENTS

In June, 2009, London City Council amended the Idling Control Bylaw to allow a maximum idling time of two consecutive minutes, a reduction from the original five-minute maximum. It is expected the amount of unnecessary vehicle emissions will be reduced as a result of the new maximum time limit. Health Unit staff will continue to work with London municipal staff and other partners to address air quality issues that can have negative health impacts on the community.

MEASURING THE COST OF BASIC NEEDS

One of the most important social determinants of health is an individual's economic status. Poverty reduction is the best medicine for the prevention of a number of chronic diseases including heart disease, diabetes, and depression. The 2009 basic needs survey included 67 food items, the costs of which were collected from 14 grocery stores in Middlesex and London. The cost of basic needs was selected to reflect the cost of food, shelter, clothing, transportation, and personal care items. The introduction of the Ontario Child Benefit (OCB) in 2007 to phase-in over five years and the National Child Benefit Supplement are steps towards the eradication of child poverty. While such financial assistance has certainly helped families with children under the age of 18, it has still not addressed the needs of couples or singles without children who are in need of financial assistance to meet their basic needs. Even with the increase of funds for children, the combined provincial and federal child benefits are still lower than the estimated amount required for raising a child in Ontario. Although these initial steps to improve child benefits are commendable, more needs to be done to alleviate food insecurity in Middlesex-London for all those in need of financial assistance. The amount of funding provided by social assistance for Basic Needs and Shelter Allowance is inadequate to meet the basic needs of individuals and families.

PAUSE TO PLAY CAMPAIGN

The ninth annual *Pause to Play* campaign was held from April 27- May 3rd, encouraging families to become aware of the



time they spend viewing screens (TV, computer, video games, etc.) and to reduce that time, replacing it with physical activity. There were 115 of the 151 elementary schools in Middlesex-London that registered to participate in the campaign, a five-percent increase over participation in 2008. Nearly 36,000 school-aged children received a log sheet with community event information. Participants in non-registered schools or home-schooled children and youth were able to download the log sheets and event information in both English and French from the MLHU and Healthy Living web sites.

PCB BLOOD SURVEY AND DECOMMISSIONING OF PCB WASTE SITE

As part of the project to remediate a former PCB storage facility in London, Health Unit staff coordinated a PCB Blood Survey to determine the amount of the chemical in the blood of certain groups of individuals. Blood samples were collected from those who lived nearby, those who worked with the chemicals and a local reference group. Samples were submitted for analysis to the Centres for Disease Control Laboratory in Atlanta, Georgia. The analysis and reporting of individual results to participants and a public report summarizing the results of the survey is expected to be released in early 2010. Health Unit representatives were also part of the PCB Decommissioning Community Liaison Group. Staff worked in partnership with the Ministry of the Environment and the firm undertaking the decommissioning of the site.

PUBLIC AND PRIVATE SWIMMING POOL SAFETY

In 2009, a Coroner's Inquest was held into the death of a six-year old boy who had died at a local public swimming pool in the summer of 2006. Health Unit staff who testified at the inquest made a number of recommendations in the areas of emergency response planning, orientation for community groups using pools for special events, improved user admission standards and the number of lifeguards on duty. In an effort to encourage safer private pools and prevent drowning, the Middlesex-London Health Unit introduced information that local municipalities can use to strengthen existing bylaws. The Board of Health recommended the City of London and the municipalities of Middlesex County review local bylaws and consider current best practices. Working with the City of London and the Southwestern Ontario Pool and Hot Tub Council of Canada, Health Unit staff members have begun work on an educational campaign to promote safer private pools that emphasizes layers of safety precautions and the importance of adult supervision of children.

TOBACCO CONTROL

The Tobacco Control Team works to enforce the Smoke-Free Ontario Act by conducting inspections of vendors to ensure they are complying with the legislation. Working with youth and through the Southwest Tobacco Control Area Network (Southwest TCAN), the team also raises awareness of the marketing tactics used to entice young people to smoke and encourages them to stay tobacco-free.

ENVIRONMENTAL HEALTH

Continued...

TOBACCO CONTROL HIGHLIGHTS FOR 2009 INCLUDE:

- A total of 3,175 inspections conducted;
- 750 inspections at schools, resulting in 88 charges;
- 184 charges issued for smoking in prohibited places;
- 1,281 workplace inspections (including workplace vehicles), resulting in 66 charges;
- 237 inspections conducted at public places (including bars, restaurants and patios), resulting in eight charges;
- 71 inspections conducted at hospitals with no charges laid;
- 1,402 inspections conducted at 397 tobacco vendors, resulting in 77 charges (66 for selling tobacco to minors, eight for tobacco product display and promotion violations);
- 35 Warnings issued as of September 10, 2009;
- 29 Education Sessions about the Smoke-Free Ontario Act held in schools;
- 443 Education Sessions about the Smoke-Free Ontario Act held in workplaces;
- Investigated 144 complaints.
- Presentations on Smoke-Free Ontario Act given to London Police Services (included information regarding the Smoking In Motor Vehicles with Children Present legislation)

VECTOR-BORNE DISEASE SURVEILLANCE AND CONTROL

In 2009, the Health Unit continued its Vector-Borne Disease (VBD) surveillance and control program, which includes larval mosquito surveillance and identification, larviciding, adult mosquito trapping, dead bird collection, human surveillance, source reduction, public education, response to public inquiries, tick surveillance and research into alternative treatment methods. Approximately 17.71 hectares of water in Middlesex-London were treated using a biological larvicide. This larvicide was also used to treat some 33,000 catch basins in three evenly spaced rounds of treatment throughout the season, to ensure optimal control when mosquito populations are at their highest. The VBD team also performed 710 treatments at 144 standing water sites. There was a single probable human case of West Nile Virus (WNV) acquired in Middlesex-London; however, there were no WNV-positive mosquito pools identified in the region.



The Health Unit also submitted 17 ticks for Lyme Disease (LD) testing, none of which were reported positive. There was one positive human case of LD reported in Middlesex-London; however it was determined that the case was travel-related and that the disease was acquired near Turkey Point.

FOOD PREMISES INSPECTION PROGRAM

The Food Premises Inspection Program makes up a large portion of the work carried out by the Public Health Inspectors on the Environmental Health Team. In 2009, staff conducted 3,422 compliance inspections and 520 re-inspections at commercial and retail food premises in order to ensure that food premises meet the requirements of the Ontario Food Premises Regulation. As well, over 450 inspections of food vendors were conducted over the course of 23 special events that took place, mainly between May and October, in London and Middlesex County. As a result of non-compliance with the Ontario Food Premises Regulation, Public Health Inspectors issued 19 Provincial Offence Notices (Tickets) and nine Orders to Close, due to the existence of an immediate health hazard in the food premises. Food had to be seized and discarded on 75 occasions due to unsafe conditions. During 2009, staff from Environmental Health taught Food Handler Certification Courses for adult learners and high school students, in addition to administering the examinations for students who took the food handler education courses taught through the London Training Centre. In total, the Health Unit issued 2,107 Food Handler Certificates in 2009.





THE FAMILY HEALTH SERVICES TEAM

HOME VISITING TEAMS

The Public Health Nurses and Family Home Visitors who make up this team work with expectant parents and families of children up to the age of six, to promote the physical, cognitive, communicative and psycho-social development of children. This work is mainly done through home visits to families with young children. In 2009, staff completed the Universal Screening and Assessment of many families at the prenatal, postpartum and/or early childhood stages.

SOME HIGHLIGHTS INCLUDE:

- There were 4,720 live births in Middlesex County and London.
- 2,727 pregnant women were screened and 532 (19.5%) were identified as benefiting from targeted health teaching and support.
- Following the births, 3,893 families were screened through phone interviews and offered home visits (representing 82.5% of live births). Through these interviews and visits, staff identified 1,090 (28%) families as being at high risk.
- Public health nurses visited 1,859 families after the birth of their child.
- Family Home Visitors and Public Health Nurses made a further 5,326 home visits to more than 400 families considered at high risk.

Among the factors considered in determining if families are at high risk are whether they live in shelters or low-income neighbourhoods or if they are single parent homes. These factors and others can lead to challenges in the areas of transportation, education or parenting skills, which can have an impact on family health and wellbeing. The *Home Visiting Program* offers one-to-one health teaching, support and coordination of available services. Clients of the *Home Visiting Program* also benefit from learning life skills through the *Smart Start for Babies Canada Prenatal Nutrition Program*, the *Bethesda Program for Pregnant Teens*, and the *Ask-a-Nurse Clinics* held at the Limberlost Housing Complex and family and women's shelters in the region. In 2009, the addition of a social worker enhanced the Health Unit's ability to provide support in the areas of housing and financial issues, immigration and settlement challenges, and employment and educational attainment.

Further, the messages of the *Period of Purple Crying* campaign were integrated into professional practice, making all new parents aware of the dangers of Shaken Baby Syndrome. As well, there was more consistency in education about safe sleep practices for infants.

FAMILY HEALTH SERVICES

is a multi-disciplinary Service Area made up of seven key teams which provide a wide range of support services to families across the Middlesex-London region, and in some cases, beyond this area.

Staff members work directly with families and community partners to assess needs, address concerns and provide direct support in family homes, schools and through a variety of outreach services.

The following is an overview of the teams who make up Family Health Services and the work they undertook in 2009.



YOUNG FAMILIES TEAM

The Young Families Team provides awareness, education and support services to families of young children birth to four-years old. Services are provided to families by Public Health Nurses and a Nurse Practitioner through the following programs, services and activities:

- *Breastfeeding and Well Baby & Child Clinics*: 767 clinics served over 5,000 clients;
- *The Health Connection* (Public Health Nurse telephone counseling service) received 3,170 calls;
- *The InfantLine* (After-hours Public Health Nurse availability) received 2,159 calls;
- Parenting groups (123 sessions) with 712 participants;
- *Family Health Clinics* (1,000 clients seen for healthcare);
- Early identification and growth and development initiatives.

The Young Families Team is also actively involved in many collaborative community partnerships, resulting in increased accessibility to services across the London and Middlesex County region. These services were provided to 14,789 families in 2009. Through its participation in many community events including health fairs and developmental screening sessions, the Young Families Team was able to reach an additional 800 families.

CHILD HEALTH TEAM

The Child Health Team works collaboratively with community partners to create safe and healthy school environments and to promote health and wellness and prevent disease and injury among children between three and 14 years old. The Child Health Team promotes a comprehensive school health approach in all elementary schools in London & Middlesex County. In 2009, 76 schools received *Healthy Living Champions Awards*, because of the involvement of 900 students, 131 parents, 65 community members, and 151 school staff in promoting health and healthy, safe school environments.

OTHER 2009 HIGHLIGHTS INCLUDE:

- Presentations made to 29,300 participants in schools;
- 1,200 nursing consultations with students, parents and school staff;
- 225 dietitian consultations;
- Anaphylaxis training provided to 3,700 participants;
- 11 peer training workshops;
- 15 parenting sessions, attended by approximately 250 participants.
- Vision screening provided to approximately 4,100 Junior- and Senior-Kindergarten students; and
- Participation in *Early Identification and Transition to School* sessions at 44 schools across Middlesex County.





THE FAMILY HEALTH SERVICES TEAM

YOUNG ADULT TEAM

The Young Adult Team uses a youth-centered health promotion approach through youth engagement and the creation of healthy supportive environments to improve the lives of youth in Middlesex-London. To achieve this, the team works to develop healthy policy, advocates for youth and collaborates with community partners and secondary schools. Youth engagement strategies include Healthy School Committees, health fairs and the creation of the *Youth Create Healthy Communities* initiative, a partnership with London Youth Council. Priority youth are supported through *Teen Prenatal* classes, *Young Mom's Groups*, and activities at centres for street involved youth, group homes and those involved with the criminal justice system. The team also facilitated 90 tobacco-free activities, held 30 teaching sessions, counseled 1,894 youth and referred 705 youth to other health and social service agencies. Additionally parents and educators were provided educational activities focused on the health of teens.

FAMILY HEALTH PROMOTION TEAM

The Family Health Promotion Team provides support and services in many areas, including: reproductive health, prenatal health, Fetal Alcohol Spectrum Disorder, perinatal mood disorder, breastfeeding promotion, parenting support, nutrition, child passenger safety, workplace health, and issues related to equal access and health equity.

HIGHLIGHTS FOR 2009 INCLUDE:

- Prenatal Health Fairs: Five prenatal fairs were held in London and Middlesex County (three at the Western Fair Grounds, one at the N'Amerind Friendship Centre and one in Lucan). Total attendance was 1,822. The London fairs included 26 health education displays, 18 community exhibits, and 20 business exhibits.
- Prenatal Education: 93 series of five classes were held in 15 different sites across Middlesex-London. A total of 1,755 people registered for these classes, including 798 support persons (husbands, partners or other support persons).

The Family Health Promotion Team employs a variety of health promotion strategies including skill development, development of health information resources, communication campaigns and community development. The team works in collaboration with other Family Health Services and Middlesex-London Health Unit teams and many community partners.

- Child Passenger Safety: Staff participated in 20 car seat clinics in London and four in Middlesex County, at which 548 car seats were checked. Spanish and Arabic language interpretation was available at two of the clinics.
- Launch of the *Greatparenting.ca* website (providing information for parents of children across all stages of development).
- Working with other Middlesex-London Health Unit teams to increase our capacity, and with community partners to increase community coordination in providing "preparation for parenting" and "positive parenting" programs and services.

tykeTALK

The tykeTALK program provides early identification and intervention services to children from birth to school age, who have difficulties and/or delays in acquiring speech and language and/or swallowing skills. These services are provided to the entire Thames Valley region, which includes the Middlesex-London, Oxford County and Elgin County regions.

HIGHLIGHTS FOR 2009 INCLUDE:

- 1,166 new referrals were received, of these, 64% were made by parents or caregivers;
- 38% of children referred were under the age of 24 months;
- The average age of referrals was 32 months;
- Services were delivered at 13 sites across the region; these sites are located in neighbourhoods close to where people live, work and play;
- Average wait for services from time of referral: six weeks;
- 1,106 new children were assessed; and
- A total of 3,056 children received services through tykeTALK.

INFANT HEARING PROGRAM (IHP)

Staff members who work with the IHP screen the hearing of all babies at birth. IHP staff members identify those babies who have permanent hearing loss and provide the necessary supports and services including family support, audiological services and communication development until the child is ready to enter school. This program covers the entire Thames Valley region (Middlesex-London, Oxford, Elgin), as well as Huron, Perth, Grey, Bruce, and Lambton Counties.

HIGHLIGHTS FOR 2009 INCLUDE:

- 9,657 (88%) of babies born in the region received hearing screening in the hospital or community;
- 40 children were identified as having a hearing loss and received follow-up support and service

BLIND LOW VISION EARLY INTERVENTION PROGRAM (BLV PROGRAM)

Like the IHP, the BLV program provides specialized support and services to children between birth to school age living in the Thames



Valley region (Middlesex-London, Oxford, Elgin), as well as Huron, Perth, Grey, Bruce, and Lambton Counties, who have been diagnosed as blind or having low vision

HIGHLIGHTS FOR 2009 INCLUDE:

- 38 children referred to the BLV program;
- Average age of referral was 28 months;
- 105 children received services through the BLV program.



RESEARCH EDUCATION EVALUATION AND DEVELOPMENT (REED) SERVICES

IN PERSPECTIVE

REED Services coordinated 167 placements for postsecondary students in health related disciplines, including 18 graduate students. In addition to this, Health Unit staff taught 92 postsecondary classes, reaching an audience of over 7,000 future health care professionals.

PARTNERSHIPS

In partnership with The University of Western Ontario (UWO), REED Services successfully piloted an innovative new program designed to encourage inter-professional learning among students studying health care. In recognition of its work done with UWO, the Middlesex-London Health Unit was nominated by the Arthur Labatt Family School of Nursing for providing nursing students with exemplary learning opportunities and, further, received the Agency Recognition Award from the Council of Ontario University Programs in Nursing.

EVALUATING EFFORTS

As part of its evaluation work, REED Services staff completed five project evaluations and produced reports on a variety of topics including a *Community Advocacy Plan for Physical Activity and Healthy Eating in the Medway Planning District*, *Violence in Hockey-Women's Perspectives* and *Drug Awareness Day*, which targeted elementary students.

Staff also conducted an evaluation of the Middlesex-London Health Unit's (MLHU) H1N1 Campaign. The evaluation plan was designed to assess what worked well, what did not work and what could have been done differently.

(REED) SERVICES

Using the best possible evidence, Research Education Evaluation and Development (REED) Services continued to create tools and resources that assist Health Unit staff to plan and develop programs and services for the community. This team also provided coordinated learning experiences for post-secondary students. These activities were achieved through the service's key areas of applied research, epidemiology, library services, program evaluation and post-secondary student education.

Over the course of the year, staff from REED Services responded to 655 reference questions, completed 220 literature searches and delivered 1,963 documents to support front-line staff and managers in their decision making and assisted them in the delivery of quality services to the community.

ANALYTICS

Through the use of *Google Analytics*, REED Services staff undertook evaluations that assessed the usefulness and client satisfaction with MLHU program websites including www.greatparenting.ca; www.healthylivinginfo.ca and www.getitonlondon.com. Google Analytics provided real-time data which provided program staff with useful information that helped improve the websites.

BUDGET CONSIDERATION

Due to capped budgets, the five Public Health Research, Education Development (PHRED) Program sites in Ontario, including the Middlesex-London Health Unit's site, have been in a state of transition for a number of years. With the program's deficit continuing to increase at the MLHU site, the Board of Health determined at its September 2009 meeting that the Middlesex-London site will cease operations on May 14, 2010.

The PHRED functions of applied public health research, knowledge exchange and workforce development are expected to

transition to the Ontario Agency for Health Protection and Promotion early in 2011.

REED SERVICES HIGHLIGHTS FOR 2009

- Developed a draft provincial evaluation plan for the pilot phase of the new Ontario Childhood Healthy Weights Surveillance System, which if funded, will monitor the heights and weights of grade 2 students in Ontario.
- Responded to 134 staff requests for data analysis support including consultations, locating statistical information, mapping, database development and modifying existing databases, data analysis and data entry training.
- REED Services supported the Health Unit's continued participation in the Rapid Risk Factor Surveillance System (RRFSS), an important source of local data. Each month a total of 100 residents in the county and city participate in telephone interviews about important public health issues.
- Analysis using RRFSS data from 12 health units including the MLHU was initiated to look at waist circumference as an important population predictor of health risk. Similarly, analysis of RRFSS data involving seven health units including the MLHU is underway about awareness of key messages related to healthy eating and physical activity.
- Provided project coordination and methodological expertise to The Pottersburg PCB Blood Survey Team.
- Worked closely with Environmental Health, Chronic Disease and Injury Prevention Services to produce health status reports focusing on cardiovascular disease risk factors and unintentional injuries.
- Published 11 manuscripts in peer-reviewed journals; four research reports and a book chapter;
- REED staff presented at local, provincial and national conferences to promote the use of research and evaluation findings in practice and policy.





CORPORATE SERVICES

EMERGENCY PREPAREDNESS 2009

COMMUNICATING PREPAREDNESS

Emergency Preparedness created two new brochures in 2009: Emergency Preparedness and Animal Care in Emergencies. These brochures, as well as the updated *Flooding, Emergency Kits, and Community Emergency Response Volunteers* brochures, and *The Unique Grief Reactions of a Victim* booklet, were also all made available in large print format and Braille.

The extensive training provided to the volunteers of the CERV program proved to be an invaluable asset during the H1N1 campaign, when they assisted Health Unit staff at community immunization clinics and also during Middlesex County's annual emergency exercise, where they set up the Evacuation Centre.

Emergency Preparedness also played a key role in the installation of Automatic External Defibrillators (AEDs) at each of the Health Unit's three locations.

As was the case for many MLHU teams in 2009, Emergency Preparedness was involved in the local response to the H1N1 Pandemic. As part of the effort, the team took the lead in "fit-testing" Health Unit staff, CERV team volunteers and many external groups to ensure that the N-95 mask properly fit those who might need to use it.

The Health Unit is an integral partner when it comes to emergency planning in the municipalities of Middlesex County and the City of London and works closely in the development, creation and maintenance of these plans. Through Emergency Preparedness, the Health Unit is represented at the municipal level on planning and exercise design teams and committees including the Community Emergency Managers Committee, the Joint Emergency Services Operations Advisory Group, local Conservation Authorities, the Western Interministerial Council and Fanshawe College's Emergency Management Advisory Committee.

As part of the Health Unit's Corporate Services, Emergency Preparedness raises awareness about how to prepare for the unexpected through the creation of printed resources, development of emergency response infrastructure, committee work and the training of Community Emergency Response Volunteers (CERV). In collaboration with community partners, Emergency Preparedness created new Personal Hygiene Care Kits and Breastfeeding Mother's Kits that will be available in Evacuation Centres, should they be required.

As well, special kits used to transport hazardous materials were developed and donated to the three area police services. Wallet cards, which provide Exposure Prevention Information for Emergency Responders were also introduced. Emergency Preparedness also updated the MLHU's Emergency Response Plan to reflect changes in legislation and practices.

COMMUNICATIONS

IT IS THE ROLE OF THE COMMUNICATIONS DEPARTMENT TO GENERATE AWARENESS OF THE HEALTH UNIT'S PROGRAMS AND SERVICES THROUGH A COMBINATION OF MEDIA RELATIONS, ADVERTISING, MARKETING AND THE MLHU WEBSITE.

LOOKING BACK ON 2009

During 2009 there were 1,728 media reports noting the involvement and activities of the Health Unit in the community, a significant increase over 2008.

The increase in media coverage in 2009 can be traced to several major stories that received considerable attention from reporters and news editors across the region and beyond. The top story of 2009 was Pandemic (H1N1) influenza, which accounted for roughly 46% of all MLHU media coverage. Other issues of interest to the media were the *Violence in Hockey Symposium*, held in February, tobacco-related stories, extreme weather alerts, vector-borne diseases and matters related to communicable diseases such as meningococcal disease, mumps and E.coli.

HUMAN RESOURCES

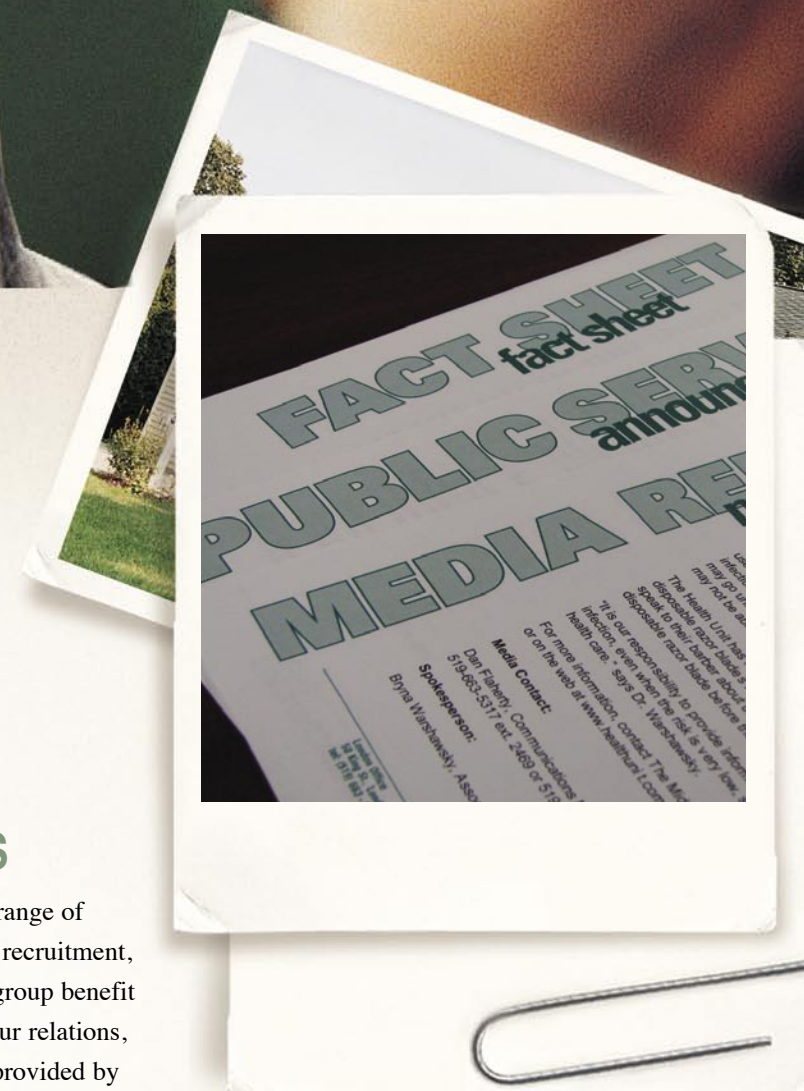
In addition to the wide range of typical services such as recruitment, orientation, pension & group benefit plans, employee & labour relations, and volunteer services provided by Human Resources, in the fall of 2009 we hired over 100 contract Registered Nurses and 50 contract Registered Practical Nurses for the H1N1 campaign.

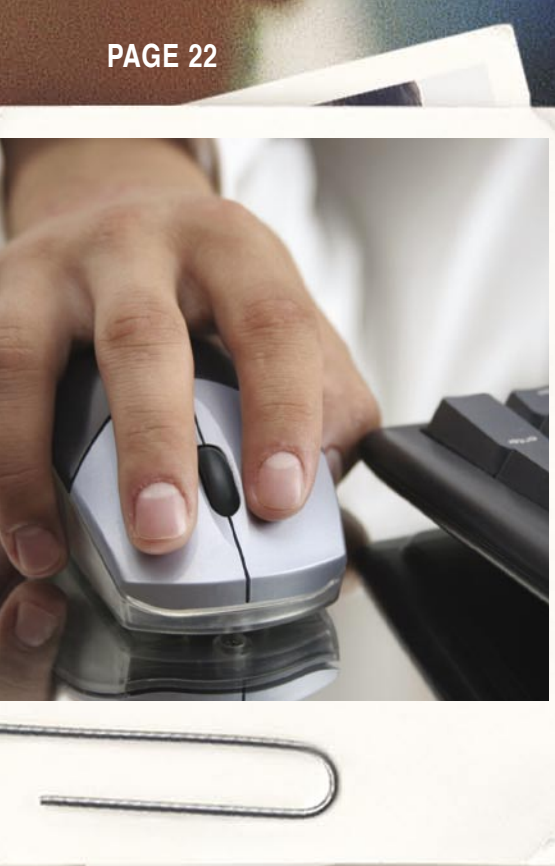
VOLUNTEER EFFORTS

Volunteers continue to play a key role in programs and services offered by the Middlesex-London Health Unit. In addition to their regular volunteer assignments, at *Well Baby/Breastfeeding Clinics*, as Community Emergency Response Volunteers, or working in elementary schools providing vision screening to

kindergarten students, the volunteers were pressed into additional service assisting at H1N1 immunization clinics.

During this immunization campaign alone, 350 volunteers worked at 112 clinics, filled 850 shifts and worked over 4000 hours.

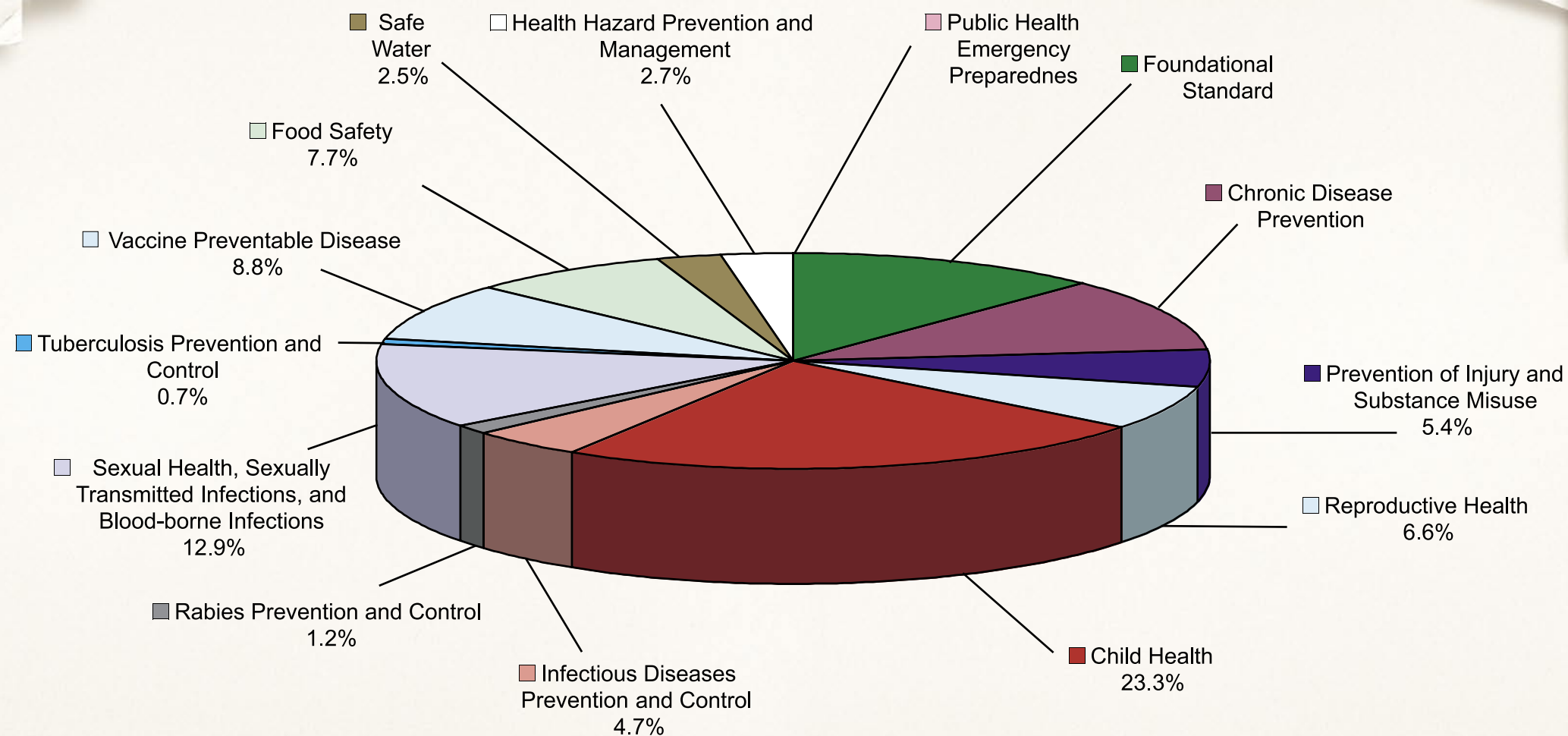




FINANCIALS



2009 Cost-Shared Public Health Programs



PROGRAMS FUNDED BY THE MUNICIPAL AND PROVINCIAL GOVERNMENT

Sources of Funding		
Province of Ontario	\$14,820,176	69.04%
City of London	\$5,582,214	26.01%
County of Middlesex	\$1,063,279	4.95%
	<u>\$21,465,669</u>	

IN 2010 AND BEYOND

We will continue in our mission to promote wellness, prevent disease and injury and protect the public's health through the delivery of public health programs and services.