

ANNUAL REPORT 2010





Annual Report 2010



TABLE OF CONTENTS

PAGE

3	Word from Mr. Al Edmondson
4-5	Word from Dr. Graham Pollett
6-13	Oral Health, Communicable Disease and Sexual Health Services
14-23	Environmental Health and Chronic Disease Prevention Services
24-32	Family Health Services
33	Emergency Preparedness
34	Communications
35	Human Resources and Labour Relations Services (HRLRS)
36	Information Technology
37	Financials

2010 MIDDLESEX-LONDON BOARD OF HEALTH

Back row (left to right): Mr. Vance Blackmore, Ms. Doreen McLinchey, Mr. John Balmer, Mr. Al Edmondson (Chair), Mr. Walter Lonc (Vice-Chair), Mr. Mark Studenny

Front row (left to right): Dr. Francine Lortie-Monette, Ms. Patricia Coderre, Mr. Tom McLaughlin, Rev. Susan Eagle, Ms. Viola Poletes Montgomery



A word from Mr. Al Edmondson, Chair Middlesex-London Board of Health 2010 MLHU Annual Report

Whether you're aware of it or not, the Middlesex-London Health Unit is an important part of our community. The nurse in your child's school, the Family Home Visitors who help families get the best start in life, the Public Health Inspectors who make sure food premises are operated in accordance with the Health Protection and Promotion Act, the Immunization Nurses who administer vaccine and the staff at the 50 King Street Dental Clinic; these are but a few of the many members of the Health Unit team, and they are all dedicated to the cause of public health.

As the chair of the Middlesex-London Board of Health, it is my pleasure to provide you with this overview of the work, the activities and the many accomplishments of our staff and volunteers in 2010.

The role of the Board of Health is to provide and ensure the delivery of quality public health programs and services to the residents of the County of Middlesex and the City of London. Our Board is made up of five Provincial Representatives, three County Council Representatives and three City Representatives; two who are elected City Councillors and one who is a Community Appointee.

In the following pages, you will learn a lot about the Health Unit's structure, the make up of its Service Areas and how our staff carries out our mission to promote wellness, prevent disease and injury, and protect the public's health through the delivery of public health programs, services and research.

In many ways 2010 was a year of transition. We emerged from the intensity of the H1N1 Influenza Pandemic, then reflected upon and considered our processes and our work as part of Accreditation, and later in the year, initiated the development of our vision for the future.

As Chair of the Board of Health, I can assure you that I, along with my fellow board members, will continue to ensure that the decisions we make and the work we do maintain our goal of making our communities healthier places in which to live.

Sincerely,

Mr. Al Edmondson
Chair, Middlesex-London Board of Health



A Word from Dr. Graham Pollett, Medical Officer of Health



Left to right: Nancy Rae, Joan Carrothers, the Hon. Deb Matthews, Minister of Health and Long-Term Care, Dr. Bryna Warshawsky, Dr. Graham Pollett, Dr. Suman Dhir, Jody Taggart, Dr. Neil Farrell

When the calendar turned from 2009 to 2010, the Middlesex-London Health Unit was just emerging from the H1N1 influenza pandemic and our staff was already looking forward to the new challenges and opportunities that lay ahead.

I believe that 2010 will be remembered as the year when we took a close look at the work we do, and how we need to plan and adapt to meet our communities' future needs.

One of the most involved undertakings of the year was our participation in the Ontario Council on Community Health's accreditation review process. The project required gathering the information, supporting

documents and evidence that demonstrates the depth of the work we do and how we do it. It was a tremendous undertaking, diligently carried out by our staff members. I am pleased to say that our Health Unit was granted an unconditional three-year

award, the highest recognition available to a local public health body in Ontario.

While the accreditation process was a look back at our work, an in-depth strategic

planning process was needed to look ahead to our future. We consulted with our staff, with our partners, and importantly with our clients to get a better sense of how it was felt the Health Unit could improve the services and programs it provides. The plan we began to develop in 2010, continues to be refined as we chart a three-year plan and a 10-year vision for our agency's future.

These two ambitious projects serve well as a backdrop for many of the developments that occurred and the work that was done across our Service Areas in 2010. We underwent significant structural change, merging the Communicable Diseases and Sexual Health Services team with our Dental Services team; and creating new Service Areas for Finance, Human Resources and Information Technology. The administration of the Research Education Evaluation and Development (REED) Services Area was transferred to the Ontario Agency for Health Protection and Promotion. This resulted in us reviewing how we will address those functions in the future.

While there were challenges in 2010, there were also highlights. We were joined by Ontario's Health Minister, the Honourable Deb Matthews for the launch of the Healthy Smiles Ontario program, and by the Minister of Health Promotion and Sport, the Honourable Margaret Best, for the introduction of amendments to the Smoke Free Ontario Act, which outlawed flavoured cigarillos. In both instances our community was the starting point for these important public health initiatives. We also launched significant new resources of our own in 2010, including the DineSafe Middlesex-London program which lets residents know the inspection status of their favourite eating establishments, and Adventures in Sex City, the popular online game that promotes safer sex. In addition we released the final report of the Pottersburg Creek Area PCB Blood Survey to the community and we served alongside our community partners as a member of the Child and Youth Network to promote literacy, physical activity and healthy eating, while striving to reduce poverty.

These are just a few of the many accomplishments detailed in this Annual Report.

It has been a busy year; a year of challenges, changes, successes and celebrations. Our hope is that the following pages will inform you about the many ways this Health Unit works to improve the health of those who live in London and Middlesex County.

Sincerely,

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



Oral Health, Communicable Disease and Sexual Health Services

In the summer of 2010, Dental Health Services and Communicable Diseases and Sexual Health Services were merged to create a new Service Area called Oral Health, Communicable Diseases and Sexual Health Services.

This new Service Area combines the wide range of Health Unit programs and services that the two former groups provided. As part of its work, this Service Area of dedicated public health professionals operates the MLHU's Immunization Clinics, provides Dental Preventive and Treatment Services to low-income families at the 50 King Dental Clinic, manages outbreaks of infectious illness, and offers a range of services through *The Clinic*, the Health Unit's sexual health and family planning clinic.

Education and health promotion strategies are also used to raise awareness about the importance of vaccination and sexual health issues, to prevent the spread of diseases and to promote and raise awareness of the importance of oral health and oral health programs available to residents who meet eligibility requirements.



Oral Health, Communicable Disease and Sexual Health Services

This Service Area includes the Clinic Team, the Infectious Diseases Control Team, the Oral Health Team, the Sexual Health Promotion Team and the Vaccine Preventable Diseases Team.

Working with local physicians and hospitals, *Oral Health, Communicable Diseases and Sexual Health Services* monitors the community for the development of infectious diseases and ensures that the vaccinations of school-aged children and teens, as well as those in child care centres are up-to-date.

Staff members also inspect food premises in hospitals, long-term care and retirement homes, and child care centres and monitor infection control practices in Personal Service Settings, which include barber shops, tattoo parlours, spas and manicure and pedicure salons.

Oral Health staff members provide services to many low-income families through programs including the Children in Need of Treatment (CINOT) program, and the new Healthy Smiles Ontario Program announced in London in the fall of 2010.

Following are some of Oral Health, Communicable Diseases and Sexual Health Services achievements, activities and highlights for 2010.

Infectious Disease Control Team

The innovative work of the Infectious Disease Control Team was recognized in 2010. The team designed and implemented a new electronic database to support tuberculosis clinic scheduling and documentation of client/contact monitoring. This innovation was profiled in a poster presentation that was part of the Lung Association's biennial conference in Toronto and generated interest from other public health units and agencies.

Public Health Inspectors with the Infectious Disease Control Team conduct routine inspections to assess food handling and infection control practices at many facilities across the Middlesex-London community; these include: food premises at hospitals, long-term care and retirement homes, child care facilities, and personal service settings (hairdressers, barber shops, nail salons, tattoo parlours, spas, etc...). The handling of vaccines at hospitals, long term

care facilities and retirement homes is also assessed by this Team.

In addition to inspections, Public Health Inspectors and Public Health Nurses from the Infectious Disease Control team were involved in supporting facility staff in the management of:

- 80 outbreaks in long-term care homes and retirement homes (47 involving respiratory symptoms, 31 involving diarrhea and vomiting, two with both respiratory and gastrointestinal symptoms);
- 33 gastrointestinal outbreaks in child care centres;
- 42 outbreaks in hospitals (27 involving respiratory symptoms and 15 involving gastrointestinal symptoms).

The team was also involved in the follow-up of more than 600 individuals after the Health Unit received a complaint about an unlicensed dental care provider. Clients of this provider were contacted by telephone and/or letter and informed of the need to be tested for possible blood-borne infections. Staff from Family Health Services and several community partners assisted with this effort.

Key Infectious Disease Control statistics for 2010

- 57 routine food safety inspections and five re-inspections conducted at 15 hospital-associated food premises;
- 134 routine food safety inspections and two re-inspections at 20 long term care homes and 25 retirement homes;
- 268 inspections and seven re-inspections conducted at 108 child care centres;
- 519 routine inspections and 18 re-inspections of 597 personal service settings;
- 39 inspections of vaccine refrigerators and five re-inspections performed in long term care and retirement homes; a further 13 vaccine refrigerator inspections conducted in hospital pharmacies.

Dr. Neil Farrell (left) and the Hon. Deb Matthews, Minister of Health and Long-Term Care, at the announcement of the *Healthy Smiles Ontario* program.

Oral Health Team

In March 2010, Dental Director Dr. Neil Farrell retired after 34 years of public health service, forever leaving his imprint not only on the Health Unit but also on the residents and dental community of Middlesex-London and on dental public health in Ontario.

In early October, Ontario Health Minister Deb Matthews used the MLHU as the launch site for Healthy Smiles Ontario, a new province-wide program that provides free dental care for children and youth (17 years of age and under) who come from low-income families. By November 1st the program was fully operational and, by December 1st, dental staff had seen 75 new Healthy Smiles Ontario clients.

In addition to implementing the Healthy Smiles Ontario program, the Oral Health Team continued its regular programs and services throughout the year including:

- Providing oral health assessments to 17,195 students in all elementary schools, and, on request, at the 50 King Dental Clinic. The assessments are used to gather oral health data, identify children needing intervention and assist families in finding care. As a result of these assessments, 1,858 children and youth were noted for further follow-up. Through the Children In Need Of Treatment (CINOT) and CINOT Adolescent programs, \$512,328.74 was paid to cover the costs of necessary treatment for 869 children and youth who met age, financial and dental needs criteria;



Oral Health, Communicable Disease and Sexual Health Services

- Provided direct dental treatment at the Health Unit's 50 King Street Dental Clinic during 2,411 client visits covered by the CINOT program, Ontario Works and Healthy Smiles Ontario;
- Provided professional dental cleanings, as well as applications of topical fluoride and sealants and other services to 493 clients between zero and 17 years of age from low income families;
- Provided professional dental cleanings to 110 adults on Ontario Works for reduced fees. This service is performed by Registered Dental Hygienists and is not a service that is covered by Ontario Works benefits;
- Delivered oral health promotion presentations to 621 classes in 131 elementary schools. In addition, eight presentations were made at post-secondary institutions;
- Provided 1,347 children and youth with individual oral hygiene instruction during small group sessions held at schools or at the 50 King Dental Clinic.

Oral Health Team staff also:

- Made 42 community presentations to 852 attendees;
- Participated in 11 health fairs;
- Provided oral health information to the parents and caregivers of 610 children three and four years of age, as part of the Thames Valley Neighbourhood Early Learning Program (TVNELP) school readiness program.

Sexual Health Services

The Health Unit's Sexual Health Team launched its web-based Adventures in Sex City game in February 2010. This sexual health promotion game provides education about sexually transmitted infections. It was created in collaboration with a local business, Mind Your Mind, and local youth in 2009. The launch generated significant media attention from local, provincial, national and international news outlets. Within days of Adventures in Sex City's launch, and thanks to further attention on popular Internet websites, visits to the Health Unit's on-line game reached into the tens of thousand per day.

In the fall of 2010, Sexual Health staff administered a client satisfaction survey to

clients of *The Clinic*, the Health Unit's sexual health and family planning clinic. The survey sought information about how service could be improved. As a result of the survey, adjustments were made to decrease waiting times at the busiest clinics.

Key Sexual Health Clinic statistics 2010 include

- 7,154 visits to the Family Planning Clinic at 50 King Street, London (or to other Health Unit Family Planning clinics);
- 7,706 visits to the Sexually Transmitted Infection Clinic at 50 King Street;
- 978 visits to the Sexual Health Clinic at the Kenwick Mall in Strathroy;
- 29 clients seen at a pilot drop-in clinic at the Southdale Housing Complex between September and December 2010.

Key Sexual Health Promotion statistics for 2010 include

- 182 community presentations, 25 classroom presentations, 8 Clinic tours and team participation in 26 health fairs;
- 103 presentations to men and women in the Elgin Middlesex Detention Centre and to youth in the Youth Criminal Justice Centres;
- Worked in partnership with staff of St. Joseph's Health Care, and the Health Unit's Family Health Promotion and Young Adult teams, to offer a health promotion program about teen pregnancy called Having a Baby Day. Presentations were made to 505 students. Of significant note is that 2010 marked the first year that secondary school students from Middlesex County participated in this program;
- Collaborated with the AIDS Committee of London (now HIV/AIDS Regional Connection) to provide five classroom presentations entitled HIV 101. As a result of these presentations, 41 students became interested in promoting HIV information in their schools. These students attended an HIV Education Day in November, which resulted in two school presentations before the end of 2010.



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Sexual Health Services launched The Clinic's STI Testing campaign as well as Adventures in Sex City in 2010.



Vaccine Preventable Diseases

The US Centres for Disease Control has called vaccination one of the ten greatest public health achievements of the 20th century. Promoting immunizations and undertaking vaccination operations for the Middlesex-London Health Unit is the responsibility of the Vaccine Preventable Diseases (VPD) Team.

The scope of the work undertaken by the VPD Team is wide ranging and it reaches a significant proportion of the Middlesex-London population.

The Team operates the Health Unit's Immunization Clinics at 50 King Street in London and at the Kenwick Mall in Strathroy.

Oral Health, Communicable Disease and Sexual Health Services

Vaccine Preventable Diseases

The downtown London clinic is open Mondays, Wednesdays and Fridays from 9:00 a.m. to 4:00 p.m., with extended hours until 7:00 p.m. on the first and third Wednesday of the month; the Strathroy clinic is open on the first Tuesday of the month from 3:30 p.m. to 7:30 p.m.

In addition to its work at the Health Unit's Immunization Clinics, the Vaccine Preventable Diseases Team has the lead role in planning and carrying out the annual seasonal flu immunization campaign, including the community-based clinics held at various locations across the Middlesex-London area. The Health Unit is also the distribution point for vaccines which are provided at local physician's offices, workplaces, hospitals and long-term care homes. The influenza season typically begins in the late fall and continues through the winter into early spring, therefore spanning two calendar years. In early 2010, the team was still vaccinating against the H1N1 Pandemic strain of influenza, but by the end of the year, the focus was on the H3N2 influenza strain which first appeared at a long-term care facility in September.

By December, the number of flu cases in Ontario was climbing steadily, much as they were in Middlesex-London.

In 2010, Public Health Nurses from the VPD team took part in health fairs that were held at London Life and Fanshawe College, as well as five prenatal health fairs where they answered questions about immunization and provided written material and resources.

The VPD team also works with several target populations in the region, including the Cross Cultural Learner Centre, to provide vaccinations to refugees, and with the school boards, to provide school-based hepatitis B and meningococcal vaccines to students in grade seven and HPV vaccinations to girls in grade eight.

The VPD Team was also involved in the creation of a three-part HPV information video that is available on the Health Unit's website. The video was promoted in a letter to parents and students and through a media release in September. The video was created so that parents and guardians could access information about the HPV vaccine and the HPV vaccination program at any

time, in the comfort of their own homes. In addition, a two-week Facebook advertising campaign was used to direct teens and their parents to the Health Unit's videos and website for more information about HPV.

Under the Immunization of School Pupils Act, the Health Unit actively follows up and verifies the immunization status of all elementary and secondary students in Middlesex-London. In 2010, the immunization records of 71,177 students were reviewed and 419 elementary school students were suspended because of missing vaccinations or vaccination records. A number of secondary school students were also notified that their immunization was not current, but were not suspended as staffing resources had been reallocated to the pandemic H1N1 response.

The VPD team is also responsible for organizing large immunization clinics in the event an infectious disease arises, which requires this type of response.

Immunization Clinic highlights for 2010

- 487 immunizations given to members of refugee populations (conducted in partnership with the Cross Cultural Learner Centre);
- Three immunization clinics held in response to potential Hepatitis A exposures;
- School-based immunization clinics for Grade Seven and Eight students, resulting in:
 - 78.5% of 2009-2010 Grade Seven students completing the two-dose series of hepatitis B vaccine;
 - 67% of 2010-2011 Grade Seven students receiving their first dose of hepatitis B vaccine;
 - 75.5% of Grade Seven students receiving the meningococcal vaccine (which protects against four types of meningococcal disease (A, C, Y, W135));
 - 46% of 2009-2010 Grade Eight females completed the three-dose series of HPV vaccine (which protects against cervical cancers and genital warts);
 - 52% of 2010-2011 Grade Eight females receiving their first two doses of HPV vaccine.

Influenza Vaccination highlights for 2010

- From January to April 2010, 1,445 doses of the H1N1 vaccine were given at community and Health Unit immunization clinics; during this time, 1,111 doses of seasonal vaccine were also administered.
- From October to December 2010, 13,479 doses of seasonal influenza vaccine were administered through community-based influenza immunization clinics; an additional 1,804 doses of the seasonal flu vaccine were given at the Health Unit's downtown London and Strathroy clinics, while a further 215 doses were provided at shelters and subsidized housing units.
- 99,180 doses of flu vaccine were sent to local physicians' offices;
- 10,050 doses of flu vaccine were sent to workplaces across the region;
- 8,890 doses of flu vaccine were sent to hospitals; and
- 8,360 doses of flu vaccine were sent to local long-term care homes.

Key statistics on reportable diseases follow-up for 2010

- 1,348 cases of chlamydia
- 247 cases of hepatitis C
- 171 cases of gonorrhoea
- 137 cases of *Campylobacter* enteritis
- 74 cases of salmonellosis
- 37 cases of influenza
- 27 cases of HIV
- 21 cases of invasive Group A *Streptococcus*
- 10 cases of primary and secondary syphilis and 17 other cases of syphilis
- 9 cases of *E. coli* O157:H7
- 5 cases of hepatitis A
- 5 cases of mumps
- 2 cases of listeriosis
- 2 cases of whooping cough [pertussis]

Environmental Health and Chronic Disease Prevention Services

Environmental Health and Chronic Disease and Injury Prevention Services is a Service Area in which Public Health Nurses, Public Health Dietitians, Health Promoters, Public Health Inspectors, and Tobacco Enforcement Officers use their collective expertise to ensure the safety of our food, our water, and the environments in which we live, work and play, and to promote programs aimed at preventing chronic disease and improving our overall health.

Among their many roles, the teams that make up this Service Area are responsible for the inspection of food premises and small drinking water systems across the Middlesex-London area and the enforcement of the Smoke Free Ontario Act; they raise awareness about cancer and injury prevention; they promote child safety, healthier eating, and physical activity; and they conduct Vector-Borne Disease surveillance and investigate and eliminate health hazards. The following is an overview of Environmental Health and Chronic Disease Prevention Services' accomplishments and activities in 2010.



Environmental Health and Chronic Disease Prevention Services

Chronic Disease and Injury Prevention

The second phase of the Health Unit's *BeCause* campaign was launched in the spring of 2010. The awareness campaign, developed in partnership with the London Health Sciences Centre, underscores that injuries are predictable and preventable. Using imagery and messages that draw a link between behaviours and the injuries that can result from those actions, the *BeCause* campaign raises awareness and increases knowledge about how to prevent injuries. For the spring of 2010, the campaign message focused on the proper use of

safety equipment. Using an image suggesting the consequences of improperly wearing a bicycle helmet, the message reached hundreds of thousands of people through the use of billboard, transit shelter, cinema, newspaper and core media advertising in London and Middlesex County. The initial phase of the *BeCause* campaign, first launched in 2009 and featuring a message about distracted driving, was re-launched in November to discourage texting and the use of hand-held devices while behind the wheel.

In addition to the *BeCause* campaign, staff who work on the *Be Safe Be Seen* campaign distributed reflective armbands and their *Share the Road* brochure in an effort to increase the public's awareness of safety while using public roads for cycling, walking or driving.

In November, 143 student leaders and staff advisors representing 26 Thames Valley schools attended the annual *SafeGrad* workshop. The goal is to reduce the harm caused by alcohol and/or drug misuse. Through the annual workshop & the www.safegrad.com website, *SafeGrad's* mission is to equip high school students with information, skills, peer

support and community support to plan safer celebrations - not just for their grad or prom, but throughout the year.

Middlesex-London In Motion

In 2010, the Chronic Disease and Injury Prevention Team played a key role in the continued development and growth of the *Middlesex-London In Motion* strategy.

Launched in 2008, *Middlesex-London In Motion* is a community-based physical activity and health promotion initiative that encourages all individuals to make physical

activity part of their daily lives. The four key components of this comprehensive approach are: building partnerships; building community awareness; targeted community strategies and measuring success.

In 2010, *Middlesex-London In Motion* launched a year long awareness campaign, which included participation in community events, and the distribution of educational materials to community partners in Middlesex County and the City of London. A communications campaign designed to raise awareness of *In Motion* among young families, adults and older adults was also launched. The campaign included billboard, transit shelter and bus advertising, as well as posters and bookmarks. Through the use of consistent branding and sustained advertising, the ongoing goal is to increase awareness and recognition of the *In Motion* initiative. By working with other MLHU Service Areas and program staff to create a supportive environment and through the development of new programs, resources and strategies, the Chronic Disease and Injury Prevention team will continue to build support for *In Motion*.

This work is very important as local evidence suggests that the level of physical activity among Middlesex-London residents and their consumption of healthier foods are areas that need to be improved. The *Middlesex-London In Motion* strategy is one component of a much broader public health plan to address these needs. Through *In Motion* and in partnership with other community agencies and programs, staff with the Chronic Disease and Injury Prevention Team will continue to work towards improving the community's overall health and reducing the incidence of chronic diseases.

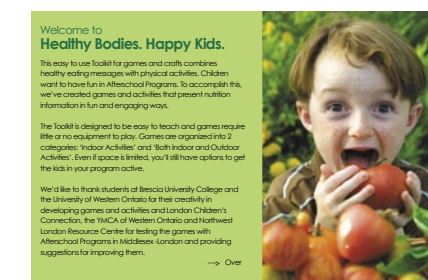
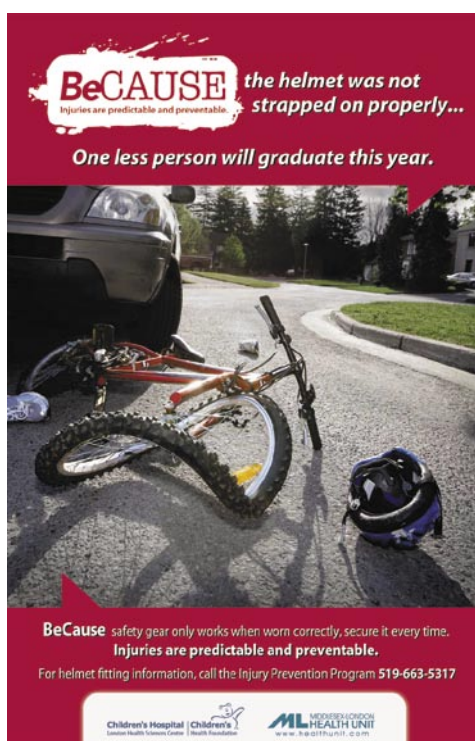
Healthy Communities Partnership

In 2010, Ontario's Ministry of Health Promotion and Sport (MHPS) launched the Healthy Communities Framework, a new and integrated approach to improving the health of Ontarians, and called for the province's public health units to act as lead local agencies. Part of this local leadership role is to engage and mobilize the more than 80 community stakeholder groups to take action on the framework's six main priority areas: physical activity, healthy eating, injury prevention,

substance and alcohol misuse, tobacco use and mental health promotion.

Staff members from the Chronic Disease and Injury Prevention Team hosted a meeting in November 2010, to introduce the Healthy Communities Partnership Framework to community partners and to develop a plan for potential future initiatives. Initial work also began on the development of a comprehensive community profile for Middlesex-London; including demographic information, health status data and an inventory of current programs and policies that have an impact on health and well-being.

The aim of the Middlesex-London Healthy Communities Partnership is to support existing local healthy public policy efforts and to identify, develop and initiate action plans for additional policy initiatives.



Environmental Health and Chronic Disease Prevention Services



Small Drinking Water System at the Stoneridge Conference Centre Well.

Drinking Water Safety – Lake Huron Water Pipeline break and Denfield Boil Water Advisory

In late March, a Boil Water Advisory was issued for the small community of Denfield, after a rupture in the main pipeline, which delivers drinking water from the Grand Bend water treatment plant to the City of London, and several municipalities in between.

The rupture caused a reduction in water pressure in the pipeline which triggered a number of alarms. Communities with reservoirs experienced no immediate change in their water delivery. But, in Denfield, which relies entirely upon the pressure in the pipeline for its water pressure,

the drinking water system had insufficient pressure to push the water supply out of residents' taps. There was a risk that water that sat in the distribution system could become contaminated.

Because this water would start flowing from the taps once the pressure was restored, the Health Unit made the decision to issue the Boil Water Advisory. The advisory was quickly delivered by Middlesex Centre municipal staff, along with a case of bottled water, to each of the 70 residences connected to the Denfield drinking water system.

Within a day, the pipeline was fully repaired and the Boil Water Advisory for Denfield was lifted

once the pressure had been restored and tests confirmed the water was safe.

Drinking Water Safety - Lifting of the Drinking Water Advisory (Nitrates) in Mount Brydges

In mid-December, the water system in the community of Mount Brydges was connected to the Lake Huron water supply, bringing to an end the Drinking Water Advisory that had been in place since May, 2007.

The Drinking Water Advisory was originally issued because of fluctuating levels of nitrates in the well water system that had been in place. The Advisory was necessary because infants under the age of six months who consume water with elevated nitrate levels may develop a medical condition known as *methemoglobinemia* or "blue baby syndrome".

Once Mount Brydges was connected to the Lake Huron Primary Water Supply System, the levels of nitrates were no longer a problem.

Food Safety – DineSafe Middlesex-London

The DineSafe Middlesex-London program was launched using a phased-in approach in 2010. On February 18th, the Health Unit launched the Food Premises Inspection Disclosure website. The website allows users to browse inspection reports for food establishments across the Middlesex-London area. The inventory of inspection reports can be searched by any combination of location, first letter or keywords. Inspection report information is presented as either a summary of the number of infractions observed, or a more detailed listing of the types of infractions observed for up to ten previous inspection or re-inspection reports.

Another feature of the website is the Recent Enforcement Actions page, which lists any tickets or summons issued by Public Health Inspectors, as well as closure orders issued and other notable enforcement actions taken.

The website also includes: a section that describes how to use the website; a description of the Food Premises Inspection process, which details the role of the Public Health Inspector; a glossary that defines key terms used throughout the website; a copy of the Health Protection and Promotion Act and the Food Premises Regulation; and a link to the Health Unit's Food Safety Training web page for those wishing to register or obtain more information about becoming a Certified Food Handler.

The DineSafe London program received further support on June 14th, when London City Council approved the *Food Premises Inspection and Mandatory Food Handler Certification By-law*. The By-law came into effect on October 1st, and required all food premises in London to display MLHU Food Premises Inspection Summary signs in a conspicuous location at food premises. Within weeks, the green, yellow or red posters became key signs customers look for to find out a given establishment's inspection status. The next phase of the By-law will come into effect on October 1st, 2010. By then, food premises must have at least one certified food handler on duty at all times.



Environmental Health and Chronic Disease Prevention Services

PCB Blood Survey Final Report

The clean-up of what was Canada's largest PCB storage facility progressed in 2010. The site in London's east end held thousands of tons of soil contaminated with polychlorinated biphenyls, or PCBs, a group of well-known organic contaminants. The contaminated soil was from the area around the former Westinghouse plant on Huron Street as well as from Pottersburg Creek and the Walker Drain. In 2009, and as part of its involvement in the remediation of the storage facility, the Health Unit, in collaboration with researchers from McMaster University, undertook its PCB Blood Survey. The survey was designed to study the level of PCBs in the blood of people who lived near or played in Pottersburg Creek and the Walker Drain, and of those who worked at the former Westinghouse plant. In late February, the Health Unit released the findings of its PCB Blood Survey at a public meeting at London's Clarke Road Secondary School.

The three major findings of the PCB Blood Survey were:

- As a group, those who live or lived near the Walker Drain and Pottersburg Creek, do not have PCB levels different from those of the reference population (that is, people who live elsewhere in London, who did not have contact with the creek or drain, and had not worked with PCBs at Westinghouse).
- As a group, those who played in and around Pottersburg Creek and the Walker Drain, do not have PCB levels different from those of the reference population.



- As a group, those who worked at the Westinghouse plant, particularly those who worked with PCB fluids, have PCB levels significantly higher than the reference population.

The approximately \$475,000 cost of the PCB Blood Survey was entirely funded by the Ministry of Health and Long-Term Care. The release of the PCB Blood Survey Report fulfilled the Health Unit's commitment to complete PCB blood testing for concerned residents who live or lived near Pottersburg Creek and the Walker Drain, those who used the Creek for recreational purposes and former Westinghouse employees.

Amendments to the Smoke Free Ontario Act

The Honourable Margaret Best, Ontario's Minister of Health Promotion, announced amendments to the Smoke Free Ontario Act on June 29th during a media event at the South London Community Centre. The amendments, which came into effect on July 1st, prohibited the sale and distribution of flavoured cigarillos, while also restricting the sale of menthol and unflavoured cigarillos to packages of at least 20, the same as cigarettes.

Prior to these amendments, cigarillos with flavours like pina colada, grape, and chocolate were sold in brightly coloured packages at convenience stores; sometimes for less than two dollars. By adding flavours, using brightly-coloured wrapping and selling them in small packages, the cigarillos were being marketed to youth.

Under the Smoke Free Ontario Act amendments announced in 2010, the maximum fine for the sale of improperly packaged cigarillos and flavoured cigarillos ranges from \$2,000 to \$50,000; while the maximum corporate fines range from \$100,000 to \$300,000.

Smoke Free Movies

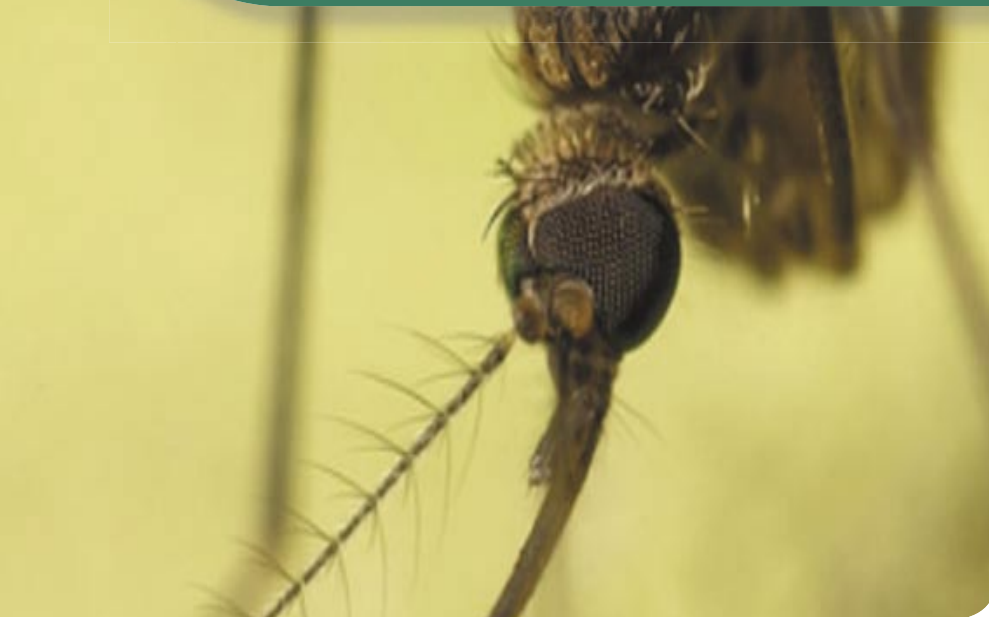
In late-November, youth involved in the Health Unit's tobacco control effort participated in the fourth annual Smoke-Free Ontario ACTION Week. The message was clear: "Stop smoking in movies!" In addition to concentrating on the effort to have tobacco use disappear from the silver screen, ACTION week aimed to raise awareness about how depictions of on-screen smoking prompt youth to take up the habit. The issue was detailed in *Tobacco Vector*, a research paper published in August 2010 on behalf of Physicians for a Smoke-Free Canada. Research suggests 44 percent of the estimated 300,000 Canadian teens who smoke first lit up because they saw a character smoking in a film.

ACTION week activities in London and Middlesex County included:

- A Tobacco in Hollywood trivia contest for Grade Five to Grade Eight elementary school classes.
- Opportunities for \$300 grants to high schools which developed school-specific programs aimed at educating students about tobacco use in movies.
- An interactive booth near Rainbow Cinemas at London's Citi Plaza organized by MLHU Youth Engagement Students. The booth included postcards for the public to sign, calling on the Ontario Film Review Board to take action.
- Mini-projects at The University of Western Ontario by the campus group "Butt Out!", including a movie night at Essex Hall.
- A poster contest at 11 London neighbourhood after-school program sites, which taught young people about why movies targeting youth should be tobacco-free



Environmental Health and Chronic Disease Prevention Services



Vector-Borne Disease

The objectives of the VBD Program are to educate the public, reduce standing water, decrease larval mosquito habitats and ultimately eliminate the transmission and amplification of Vector-Borne Diseases to humans. The control of vector mosquito populations and being alert to the local arrival of ticks capable of carrying Lyme Disease are key components of this program. In 2010, the Health Unit hired a new service provider, the Canadian Centre for Mosquito Management Inc. (CCMM), to assist with mosquito control in catch basins and standing water locations throughout Middlesex County. The following is a breakdown of Vector-Borne Diseases of concern to the Health Unit:

West Nile Virus is transmitted to humans through the bite of an infected mosquito. Most people don't become ill, a small proportion of those bitten by an infected mosquito can develop mild symptoms and in a few severe cases can develop West Nile Encephalitis, a serious neurological condition causing acute inflammation of the brain.

Eastern Equine Encephalitis (EEE) is also transmitted through the bite of an infected mosquito. Although the incidence of EEE in Canada has historically been low, activity in 2009 in Ontario, Quebec and Nova Scotia prompted Ontario's Ministry of Health and Long-Term Care to require further testing of adult mosquitoes for the disease. As a result, there were two confirmed

EEE-positive mosquito pools and two confirmed equine cases in Ontario – none of which were in the Middlesex-London area. However, the presence of mosquito species in Middlesex-London, which are capable of carrying EEE indicates that continued monitoring is necessary to identify the prevalence of these vector species and to reduce the risk of EEE to local populations.

Lyme Disease (LD) is the most common tick-borne illness in North America, transmitted to humans through the bite of an infected black-legged tick, also known as a deer tick. While



black-legged ticks have not yet been found in Middlesex-London, these insects often feed on migratory bird and can be easily transported anywhere in the province. This year, the MLHU saw an increased number of tick submissions from the public and based on these concerns performed tick dragging to monitor for the arrival of LD-carrying ticks in Middlesex-London.

West Nile Virus, Lyme Disease and the encephalitic symptoms caused by EEE are now classified as both Reportable Diseases and Communicable Diseases under the Health Protection and Promotion Act. There were no positive human cases of West Nile Virus or EEE reported in 2010, however three Lyme Disease-positive human cases were reported among residents who had acquired it from travel outside of Middlesex-London.

Key Vector-Borne Disease Statistics for 2010

- 43 ticks submitted for testing to the MLHU. Two were black-legged ticks acquired outside of Middlesex-London, one of which was acquired at Turkey Point, Ontario, and tested positive for Lyme Disease;
- Three human cases of Lyme Disease reported in Middlesex-London; two cases were acquired from travel outside of Canada and one case was acquired from travel to eastern Ontario;
- 13 dead birds submitted for WNV testing; five crows confirmed positive for WNV (two of these crows enabled the Health Unit to confirm the presence of WNV in North London);
- Two WNV-positive mosquito pools identified in London.
- 827 larvicide treatments performed at 227 sites monitored by the MLHU and CCMM.
- Approximately 35,000 catch basins were treated with larvicide three times over the course of the season.
- Approximately 1,100 catch basins located in parks, hospital grounds, parks and other municipal properties treated with larvicide over the course of the season.



Family Health Services

As the largest of the Health Unit's Service Areas, Family Health Services draws on the expertise, skills and experience of its multi-disciplinary staff to deliver a wide range of services to young families and children across the entire Middlesex-London area.

The staff members who make up Family Health Services' seven teams and the tykeTALK/Infant Hearing/Blind Low Vision program, work directly with families, community partners and other agencies 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 highlights and achievements of the Home Visiting Teams, the Young Families Team, the Child Health Team, the Young Adult Team, the Family Health Promotion Team, tykeTALK, the Infant Hearing Program (IHP) and the Blind Low Vision Early Intervention Program (BLV Program).



Family Health Services



Home Visiting Teams

Home Visiting Services are provided to families who are identified as needing ongoing health teaching, support and intervention over an extended period of time for problems that may compromise healthy child development.

Dividing their work along geographic lines, the Public Health Nurses and Family Home Visitors who make up the West, Central and East Home Visiting Teams work with families who are expecting a child, or who have children up to age six. Team members work with the families where they live, promoting the physical, cognitive, communicative and psychosocial development of their children. Many of these families live in shelters, single-parent homes and/

or low-income neighbourhoods, where transportation, education and limited parenting skills can significantly influence family health and wellbeing. Families benefit from the teams' one-to-one approach that emphasizes teaching, support and service coordination. These families 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*, which are held at the Limberlost Housing Complex as well as at family and women's shelters in the community. In 2010 a social worker was added to the Family Health Services staff, enabling the Service Area to enhance its ability to address housing and finance issues, immigration and settlement challenges, and matters involving

employment and education. Through the addition of the social worker, Family Health Services was able to provide these services to 46 local families.

In 2010, the Family Home Visiting teams also reinforced the *Period of PURPLE Crying* messages with parents of newborns. Supported by an informative website, the goal of the national *Period of PURPLE Crying* campaign is to let future parents, friends and family members know that it is normal for babies to cry. The teams also provided parents with consistent information and raised awareness about safe sleep practices for infants.

A new initiative, Post Birth Community Site Visits, was piloted between April and December, 2010. The goal was to provide an effective and efficient service to healthy post-partum families and to create the opportunity for a visit with a public health nurse in the community. By the end of 2010, 231 families had visited one of the six sites chosen for the pilot project, and had been assessed by a Public Health Nurse. A client satisfaction survey indicated more than 90% of

families who visited one of the sites were satisfied or very satisfied with their visit. The pilot will continue in 2011.

In addition to the activities noted above, a Public Health Nurse provided care and services to 333 clients and their families who were receiving temporary housing support in shelters and drop-in centres across the Middlesex-London region. This service was available weekly at Rotholme Women's & Family Services, the three locations of Women's Community House, Zhaawanong Shelter, Women's Rural Resource Centre and the Salvation Army Centre of Hope. As a result of this Shelter Services program, 73 families were referred to the Healthy Babies Healthy Children (HBHC) program where more intense family and parenting support was provided.

Public health nursing services were also provided to 649 residents of the Limberlost Housing Complex in northwest London. As a result of this direct access to services, 206 infants or children and 103 families were referred to the HBHC program.



Key statistics for 2010

- 4,765 live births in Middlesex County and London;
- 1,852 pregnant women screened prenatally, 451 of whom (24%) were identified as individuals who would benefit from health teaching and support;
- 113 pregnant women visited and assessed by a Public Health Nurse;
- 2,482 (52%) of births in 2010 were assessed through telephone interviews and offered follow-up visits. Of the total of births in Middlesex-London in 2010, 1,683 (36%) were identified as having the potential for being at risk;
- Of the 1,683 births identified as being potentially at risk, 1,287 of the families were followed-up for further assessment;
- 363 families accessed home visiting services;
- and 5,510 home visits were completed.



Young Families Team

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

- **Well Baby/Child and Breastfeeding Clinics** are offered at 16 locations across Middlesex-London and are held at various times, Mondays through Saturdays. In 2010, 755 clinics were held, providing services to more than 6,000 clients.
- **The Health Connection** is the Health Unit's telephone counselling service staffed by Public Health Nurses. Calls are taken weekdays from 8:30

a.m. to 4:30 p.m. In 2010, The Health Connection responded to calls from more than 2,300 clients.

- **The Infant Line** is the after-hours telephone counselling service for parents with infants 0-1 years of age staffed by Public Health Nurses. More than 1,700 families called The Infant Line in 2010.
- **Family Health Clinics**, are where families with children 0-6 years of age and high school students who do not have a family doctor can access the services of a Nurse Practitioner, Public Health Nurses and other health care providers. More than 1,300 clients received care and support at one of the five local Family Health Clinic locations.

- **Physician Outreach** is an evolving initiative through which Public Health Nurses visit family physician offices and primary care providers to increase awareness of the programs and services offered by the Middlesex-London Health Unit and other community resources and initiatives. The offices of 370 physicians and primary care providers were visited in 2010.

- **Early Identification of Growth and Development.** Middlesex-London was chosen as a pilot site for the new provincial *Enhanced 18-Month Physician Visit*. Planning is under way to address local resources in this area to meet the requirements of this initiative.

Child Health Team

The Child Health Team works collaboratively with community partners to create safe and healthy school environments, promote health and wellness, and prevent disease and injury among children between three and 14 of age. The Child Health Team promotes a comprehensive school health approach in all elementary schools in London & Middlesex County. A new interactive program called Healthy Living Rocks, was introduced in 2010. This new

program increases awareness and knowledge about healthy eating, physical activity, and injury prevention among Grade Four, Five and Six students. In 2010, 78 schools received Healthy Living Champions Awards, with more than half of these schools attending the awards celebration. As well, 81 schools in London and Middlesex County had Healthy School (or alternative) committees, with 902 students, 108 parents and 162 school staff members involved in promoting health and creating healthy, safe school environments.

In May 2010, the Child Health Team joined the Young Adult Team and several community partners to host the 9th Annual Ontario Healthy Schools Coalition Forum entitled: *School Connectedness: How We Can All Make a Difference*. More than 200 people from across Ontario took part in this two day event. The purpose of the forum was to provide stakeholders with the knowledge and skills to enhance school connectedness and improve student achievement and health outcomes.

Young Adult Team

The Young Adult Team works diligently towards its goal of improving the lives of youth in Middlesex-London through a variety of strategies that include healthy schools, youth engagement, advocacy, building supportive environments and collaborating with community partners. The Young Adult Team continued to work with the London Youth Council in 2010 and has engaged many youth leaders to work with their peers on the development of action plans aimed at improving youth health and social issues.

In 2010, members of the team also partnered with Western Area Youth Services (WAYS), Craigwood Youth Services, Anago Resources Inc. and staff from the Health Unit's Chronic Disease and Injury Prevention Team to create best practice guidelines for nutrition at area group homes. This cutting-edge work will set the stage for other group homes to adopt these guidelines.

In addition, the Young Adult Team also partnered with the South London Neighbourhood Resource Centre (SLNRC) to offer Understanding Your Teen parenting sessions for Arabic-speaking parents.

Key statistics for 2010

- 1,335 presentations made in schools, reaching 29,471 participants;
- 1,198 nursing consultations with students, parents, and school staff;
- 572 dietitian consultations;
- 28 peer training workshops;
- 13 parenting sessions attended by more than 100 participants;
- Vision screening provided to 4,162 Junior- and Senior-Kindergarten pupils;
- Participation in Early Identification and Transition to School Sessions at 47 schools across London and Middlesex County.
- Recognition of 10 schools that had achieved either five or 10 years of having a Healthy School Committee.



Family Health Services

The program has been developed to assist parents who are new to Canada learn about parenting styles, teen growth and development, values and beliefs, and communication skills, all within the context of bi-cultural parenting.

As noted above, members of the Young Adult Team partnered with the Child Health Team and community stakeholders to host the 9th Annual Ontario Healthy Schools Coalition Forum in May, 2010.

Family Health Promotion Team

The Family Health Promotion Team provides support and services in many areas including general 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.

The Family Health Promotion team works in collaboration with other Family Health Services and Health Unit teams and community partners to develop resources, and/or extend the reach of services and programs to wider segments of the population using strategies like social marketing, community development, coalition work, organizational change, and policy development and advocacy.

In May 2010, members of the Family Health Promotion team joined other Health Unit staff in hosting the Pregnancy Related Issues in the Management of Addictions, or PRIMA, Workshop. Facilitated by members of the PRIMA Project team from Montreal and Toronto, the workshop provided 70 health care professionals with an opportunity to increase their knowledge about problematic substance use during pregnancy, including communication strategies and screening techniques for working with women during the perinatal period.

Of note was the awarding of the FASD One (Ontario Network of Expertise) Community Award for 2010 to the Fetal Alcohol Spectrum Disorder Elgin Middlesex London Network (FASD E.L.M.O. Network), chaired by a Public Health Nurse from the Family Health Promotion Team. The award was presented in recognition of the Network's leadership and the substantial contribution it has made

Key statistics for 2010

- 140 healthy school activities implemented, involving 16,360 students and staff at local secondary schools;
- 1,964 students counseled and 650 referrals made to partner health and social agencies;
- 1,164 secondary school staff consulted and 40 referrals made to community partners;
- 299 small group sessions attended by 5,010 youth facilitated; focused on various youth-related health issues;
- 8 series of teen prenatal sessions, attended by 118 young parents.

to FASD awareness in Ontario. As part of its work, the Network collaborated with the Thames Valley District School Board (TVDSB) and the Southwest Ontario Aboriginal Health Access Centre (SOAHAC) to perform a Needs Assessment/Gap Analysis for Southwest Ontario to assist in planning and funding for local diagnostic services. The FASD E.L.M.O. Network has more than 40 members representing 18 community agencies, individuals, and service providers in the Thames Valley area.

Key highlights for 2010

- Prenatal Fairs: seven Prenatal Fairs were held in London and Middlesex County in 2010 (three at the Western Fairgrounds, two at the N'Amerind Friendship Centre, one in Lucan and one in Strathroy). Total attendance at Prenatal Fairs was 1,761. The London fairs featured 28 health education displays, 20 community exhibits, and 20 business exhibits.
- Prenatal Education: 88 series of 5 classes were held at 14 different sites across Middlesex-London. A total of 1,650 people registered for these classes, including 815 support persons (husbands, partners or other support persons).
- Child Passenger Safety: staff participated in 24 car seat clinics held in London and six more clinics held in the County. In 2010, two clinics geared to specific languages were held, one session in Spanish and the other for Arabic-speaking participants. In all, 890 car seats were checked, an increase of 300 over the total number of seats checked in 2009.
- Positive Parenting: the Family Health Promotion Team led the process of adopting the Triple P: Positive Parenting Program in coordination with several other Health Unit teams, community partners and other Ontario health units.
- Parenting Your Teen videos: the team developed a series of video modules on parenting teens to be made widely accessible through the MLHU website and YouTube.
- Local Food Project: the team launched a successful gardening/food-preservation program for recent Spanish-speaking immigrants in 2010. Twenty families participated in the program, which provided garden plots, seeds, access to tools and the support of a master gardener and food preparation and preservation support from a Public Health Dietitian.
- Developed a culturally-tailored parenting teens program in partnership with the Muslim Family Resource Centre.



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 Middlesex-London, Oxford County and Elgin County.

2010 Key statistics for the tykeTALK Program

- 1,162 new referrals were received, of these 59% were made by parents or caregivers;
- 34% of the children referred were under the age of 24 months;
- Services were delivered at 96 sites across the region; these sites are located in neighbourhoods close to where people live, work and play
- The average wait for services from time of referral was 6 weeks
- 1,016 new children were assessed;
- 2,896 children received services through tykeTALK.

Infant Hearing Program (IHP)

Staff who work with the IHP screen the hearing of all babies at birth, identifying those with permanent hearing loss and providing the necessary supports and services, including family support, audiological services and communication development up until the child is ready to enter school. Like tykeTALK, the program covers the entire Thames Valley region (Middlesex-London, Oxford County and Elgin County), as well as Huron, Perth, Grey, Bruce, and Lambton counties.

Key statistics for Infant Hearing Program

- 10,965 (79%) of babies born in the region had their hearing screened in the hospital or in the community;
- 40 new children were identified as having a permanent hearing loss;
- 95 children received follow-up support and services.

Blind Low Vision Early Intervention Program (BLV Program)

Like the IHP, the BLV Program provides specialized support and services to children from birth to school age, who have been diagnosed as blind or having low vision, who live in the Thames Valley region (Middlesex-London, Oxford, Elgin), as well as Huron, Perth, Grey, Bruce, and Lambton counties.

2010 Key statistics for Blind Low Vision Intervention Program

- 27 new children referred to the BLV Program;
- Average age of referral was 27 months;
- 109 children received services through the BLV Program

In 2010, Emergency Preparedness committed to conducting an emergency exercise each month. These activities included conducting a test of the duress alarm system; completing the installation and testing of a new public address system at the MLHU's 50 King Street office; completing a month-long Emergency Colour Code awareness campaign and coordinating a simulated emergency exercise for Health Unit staff, community partners and volunteers alike. This exercise encouraged the use of the internationally recognized *Incident Management System* and allowed the 75 participants to find solutions to five different public health-based emergency scenarios.

The Health Unit's Emergency Response Plan was revised and updated so as to be compliant with the Canadian Standards Association (CSA), Standard Z1600-08 Emergency Management and Business Continuity Programs as well as the Emergency Management Accreditation Program (USA). A reference manual containing the Emergency Response Plan is distributed to staff in hard copy form, as well as on CD; it is also available to the public on the Health Unit's website at www.healthunit.com.

The Community Emergency Response Volunteer (CERV) Program was revamped in 2010, drawing on lessons learned and skills endorsed by the similarly named American CERT program sponsored by the US Department of Homeland Security. Recruitment for the MLHU's fourth CERV team, Delta, resulted in another 15 interested citizens starting their CERV training in September. The addition of this team brought the Health Unit's number of active CERV team members to 50. The MLHU's three other CERV teams, Alpha, Bravo and Charlie, are completing the provincially sanctioned Basic Emergency Management (BEM) Course, which gives participants a broader perspective on the crisis and the emergency management training that most first responders are required to have.

Emergency Preparedness continues to be an integral emergency planning partner along with the municipalities of Middlesex County and the City of London. Emergency Preparedness is also involved in planning emergency exercises held in the county and city, at the federal ministries level and in supporting the Emergency Management Program at Fanshawe College.



Communications

The Health Unit's Communications Department generates awareness of the MLHU's many programs and services through a combination of media relations, advertising, marketing and online strategies.

In 2010, there were 1,188 media reports in London and Middlesex County media outlets, including television, radio and newspapers, noting the Health Unit's involvement and activities in the community.

Although the coverage was spread widely across the Health Unit's Service Areas, there were some stories that received greater media attention.

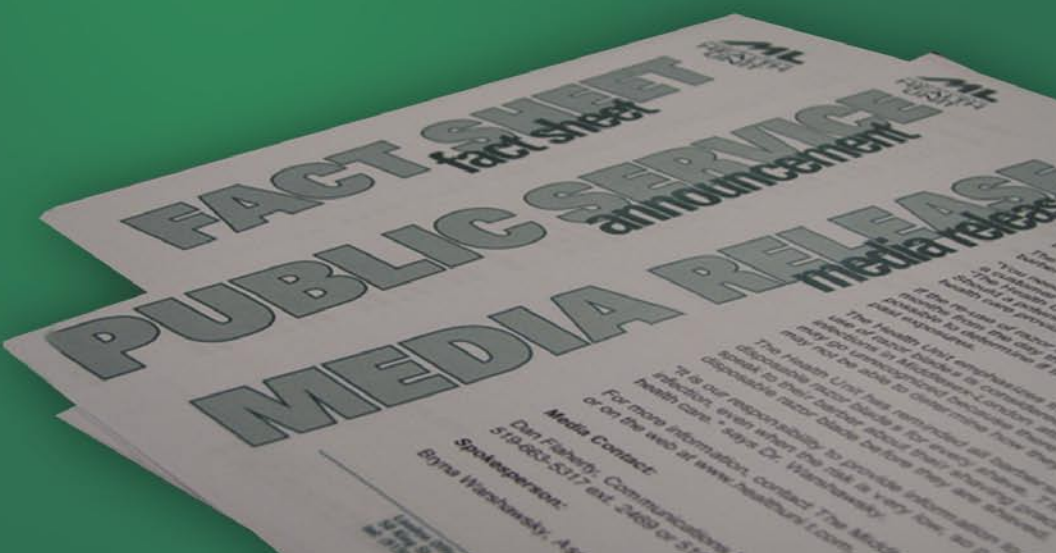
The attention paid to the February launch of the Health Unit's online sexual health video game *Adventures in Sex City* exceeded all expectations; in the fact the full extent of the coverage is difficult to measure. After the local media had reported the story, it was picked up by several international news services and was featured on several popular Internet websites. A significant amount of interest in the online game also came as a result of the

MLHU website's address being shared by Facebook users, social media websites and Internet bloggers around the world. Media coverage of the on-line game extended across Canada and into the United States in markets that include Ottawa, Winnipeg, Vancouver, Washington D.C., New Jersey and Dallas-Fort Worth, Texas.

Another important story was the launch of the Health Unit's *DineSafe Middlesex-London* program. In February, the program's Food Inspection Disclosure website (www.dinesafemiddlesexlondon.ca) was launched, followed in September by the public education sessions which introduced the program, then by the roll-out of the new *City of London Food Premises By-Law* and the posting of green, yellow or red inspection status signs on October 1st.

There was also significant media attention given to the 2010 seasonal influenza campaign. There were several stories about an early flu outbreak at a local long-term care facility in September and more followed through the fall and winter; stories about the seasonal influenza vaccine and the community immunization clinics.

The extreme temperature and weather alerts (Heat Alerts and Cold Weather Alerts) issued by the Health Unit in 2010 also received widespread coverage in 2010. Radio reports were the main source of information about the MLHU, citing the Health Unit 579 times; followed by 238 television news stories, print media with 228 stories, and talk shows, which had guests from the Health Unit on their programs 45 times.



Human Resources and Labour Relations Services (HRLRS)

Human Resources and Labour Relations staff members continue to provide a wide range of services within the Middlesex-London Health Unit. An important part of their work involves recruiting and orienting new employees to the agency, administering group benefit and pension plans, interpreting policies and collective agreements, and providing reception and volunteer services for the Health Unit.

In 2010, the Librarian and the Student Education Coordinator joined Human Resources and Labour Relations when it became a new Service Area. These positions complement and enhance the support that HRLRS provides to all staff across Health Unit. Hundreds of hours of library searches are conducted each year for staff. Post-secondary students in several professional fields gain valuable practical experience through a variety of placements with staff in every Service Area.

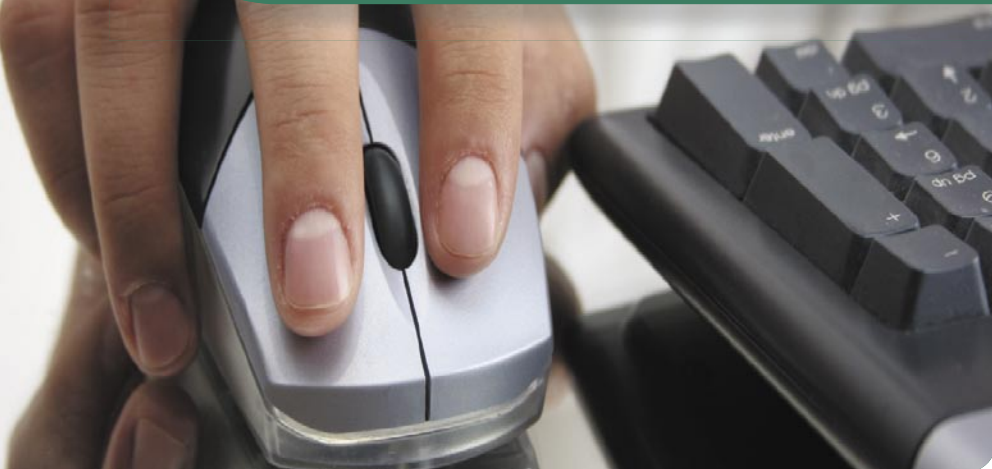
Volunteer Services is one of the more visible aspects of the team's work. Whether helping newcomers to London at a community Flu Clinic,

distributing information to a young expecting couple at a Prenatal Health Fair, or engaging clients to complete a survey, in many ways, volunteers are often the face of the Health Unit. Their generous donation of time each year is key to the Health Unit's ability to meet the needs of the community. In 2010, MLHU volunteers logged nearly 5,000 hours in the service of Public Health in Middlesex-London.

This work included:

- 1,620 hours logged by CERV (Community Emergency Response Volunteer) team members;
- 1,170 hours logged by volunteers from Hutton House;
- 696 volunteer hours at community Influenza Immunization Clinics;
- Approximately 500 hours logged by volunteers from St. Leonards House;
- Approximately 200 hours volunteered at Well Baby Clinics;
- 177 volunteer hours spent building binders, stuffing envelopes and more;
- 96 volunteer hours spent assisting with the MLHU's Client Survey;
- 56 volunteer hours helping at Prenatal Health Fairs.

Information Technology



In 2010, an operational review of the former Information Services (IS) department was undertaken. A major outcome of the review was restructuring the department to form the new Information Technology (IT) Service Area. More than just a renaming from IS to IT, Information Technology leadership now directly participates as a member of the Health Unit's upper-management team providing a better opportunity to ensure that IT is aligned with the MLHU's strategic goals and to identify opportunities where technology can help accomplish them. From an operational perspective, IT delivers and supports the Health Unit's network infrastructure and the software applications staff use to deliver MLHU programs and services to clients in the community. IT supports approximately 400 staff members and computer systems at the Health Unit's three offices, as

well as mobile applications and remote connectivity. A core component of any IT division is its Helpdesk. The MLHU Helpdesk addresses an average of 260 support requests each month; timely resolution of these requests allows MLHU staff to continue providing programs and services to clients in an effective way. While the majority of IT's operational role is to serve internal MLHU staff members, in 2010, IT also had direct involvement with some applications that were specific to other MLHU Service Areas, including:

- The installation and configuration of a digital imaging system for the Health Unit's Dental Clinic, located at 50 King Street in London. When taking x-rays, rather than using traditional film, a digital image is recorded and immediately retrieved and read on a computer monitor, right in

the patient's examination room. Not only does this eliminate the need for film, the approach has the added health benefit of requiring a lower intensity x-ray beam than what is required for traditional film.

- IT assisted in the integration and automation of the MLHU's Food Premises Inspection Disclosure System; providing regular, timely updates to the DineSafe website and ensuring the community has access to the most current inspection data available.
- Building on an initiative from 2009, IT worked with the Communications Department to implement new technologies in an effort to continually improve the Internet webcasting of Board of Health meetings.
- IT and Family Health Services initiated the review of, and search for, a replacement for the Health Unit's current resource lending system. This system manages and tracks the many educational and informational resources available to both MLHU staff and to members of the community. The replacement system will ensure even better use and management of these important resources.

Financials

EXPENDITURES	2010
Public Health Programs:	
Chronic Disease Prevention	\$ 2,593,909
Prevention of Injury and Substance Misuse	1,229,797
Reproductive Health	1,493,330
Child Health	7,498,583
Infectious Diseases Prevention and Control	2,252,200
Rabies Prevention and Control	275,225
Sexual Health, Sexually Transmitted Infections and Blood-borne Infections	2,276,295
Tuberculosis Prevention and Control	167,011
Vaccine Preventable Disease	2,173,857
Food Safety	1,750,362
Safe Water	647,809
Health Hazard Prevention and Management	627,832
Public Health Emergency Preparedness	39,599
Vector-Borne Diseases	615,956
Dental Programs	1,207,139
Smoke Free Ontario	1,039,764
Foundational Standard	2,493,197
tykeTALK	1,516,734
Infant Hearing & Screening Program	858,961
Blind Low Vision	158,702
Total Public Health Programs	\$ 30,916,262

REVENUES	2010
Sources of Funding:	
Province of Ontario	\$ 23,383,762
Government of Canada	157,430
City of London	6,195,059
County of Middlesex	1,180,011
Total Sources of Funding	\$ 30,916,262

MIDDLESEX-LONDON BOARD OF HEALTH FUNDING SOURCES

