



**GENERAL PROGRAMS
AND
RELATED SERVICES
2019**

SUPPORTED BY THE
ONTARIO PUBLIC HEALTH STANDARDS,
PROTOCOLS, AND GUIDELINES
(Requirements for Programs, Services, and Accountability)

*Included:
General Programs
Small Drinking Water Systems
Vector Borne Diseases (education and surveillance and control and
prevention)*



General Programs

2019 Budget & Realities and Priorities

Realities

Southwestern Public Health's 2019 Budget takes into account several considerations related to the current reality of its enhanced provincial mandate, its development as a new organization, and of its community needs. Those considerations are:

- ✓ mandated implementation of enhanced Ontario Public Health Standards and Accountability Requirements,
- ✓ Currently, Ontario's public health system delivers value for money, ensuring people remain healthy, are able to return to health, and contribute fully to their communities. Studies have concluded that:
 - every \$1 spent on immunizing children with the measles-mumps-rubella vaccine saves \$16 in health care costs (Canadian Immunization Guide);
 - every \$1 spent on mental health and addictions saves \$7 in health costs and \$30 dollars in lost productivity and social costs (Every Door Is The Right Door: Towards a Ten Year Mental Health and Addictions Strategy);
 - Every \$1 invested in tobacco prevention programs saves up to \$20 in future health care costs (Building on our Gains, Taking Action Now: Ontario's Tobacco Control Strategy for 2011-2016); and
 - Every \$1 spent on early childhood development and health care saves up to \$9 in future spending on health, social and justice services (The Chief Public Health Officer's Report on the State of Public Health in Canada, 2009).
- ✓ creation of a new Strategic Plan for Southwestern Public Health,
- ✓ provincial, municipal, and public demands of public health services, including for example, work on opioid crisis prevention, assistance with addressing local social determinant of health issues such as poverty, transportation, housing and healthy communities and continued public access to home visiting support, immunization, sexual health services and smoking cessation supports.
- ✓ continued development of a new organization, its culture, its program and service delivery, and its advocacy voice,
- ✓ at minimum, a "frozen" level of Ministry funding based on the existing provincial funding formula (therefore a public health funding reduction),

Realities (continued)

- ✓ an emphasis on transparency, accountability, and reporting resulting in frequent collection of greater amounts of data, enhanced performance targets, and communication of such,
- ✓ an emphasis on risk management resulting in the need for continued support for the identification, mitigation, monitoring and reporting of risks,
- ✓ the speed with which a public health response is expected to meet Ministry protocols and mitigate risk, and
- ✓ the need for even more collaboration and integration with community partners.

Priorities

In general, Southwestern Public Health will:

- ✓ provide leadership that is both required and valued in the areas of prevention, promotion, and protection of health,
- ✓ continue to be a voice of confidence for health-related matters in the community,
- ✓ continue to identify efficiencies in its program and service delivery to avoid duplication and to enhance effectiveness,
- ✓ continue to offer comprehensive programs and services using accessible and relevant delivery methods for the communities it serves,
- ✓ continue to value partnerships and collaborative efforts with other agencies and groups,
- ✓ strive for compliance with the Ontario Public Health Standards regarding general programs and related services as established by the Ministry of Health and Long-Term Care (MOHLTC) and the Ministry of Children and Youth Services (MCYS),
- ✓ achieve compliance with the Accountability Standards established by the MOHLTC,
- ✓ strive to meet the performance targets established by the MOHLTC as outlined in the Accountability Agreement between MOHLTC and SWPH, and
- ✓ continue to monitor health needs in Oxford County, the City of St. Thomas and the County of Elgin, evaluating public health programs and services and implementing continuous quality improvement to better design future programs and services.

Population Health Status Highlights

This summary highlights key health issues in the Southwestern Public Health region. The following areas of focus were considered when formulating the new Southwestern Public Health budget.

Health equity

- Almost one-quarter (24.2%) of people living in the SWPH region had less than a high school education, and this rate is higher than Ontario (17.5%).

Mental health

- A higher proportion of women in the SWPH region reported concerns about depression during pregnancy (13.6%) and a history of postpartum depression during pregnancy (5.4%) than in Ontario (7.5% and 2.1%, respectively).

Chronic disease

- The rate of hospitalizations due to cardiovascular diseases was higher in the SWPH region than in Ontario between 2013 and 2017.

Substance use

- From 2015 to 2016, there were higher proportions of adults who were current smokers (daily and occasional) (23.0% versus 18.0%), daily smokers (16.8% versus 12.9%) and former smokers (29.4% versus 24.0%) in the SWPH region compared to Ontario.

Injuries

- Compared to Ontario, people living in the SWPH region had over 2x the rate of unintentional injuries and 1.5x the rate of motor vehicle collisions attributable to alcohol.
- The rates of emergency department visits for neurotrauma (including traumatic brain injuries, concussions and spinal cord injuries) were higher in the SWPH region compared to Ontario over the last five years (2013 to 2017).

Population Health Status Highlights

Physical activity and healthy weights

- Youth in Elgin St. Thomas spent less time travelling in active ways (91.6 minutes) in the last seven days compared to both Oxford County (351.5 minutes) and Ontario (227 minutes).

Infectious diseases

- The incidence rate of pertussis (whooping cough) in the SWPH region was higher than Ontario from 2013 to 2016 combined.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

CHRONIC DISEASE PREVENTION AND WELL-BEING

CHRONIC DISEASE PREVENTION AND WELL-BEING	
Program Name	2019 Budget
Healthy Communities	327,688
Healthy Eating Behaviours	196,676
Physical Activity & Sedentary Behaviour	158,031
Substance Prevention	125,725
Suicide Risk & Mental Health Promotion	49,076
Healthy Menu Choices Act Enforcement	26,889
Total	884,085

Chronic Disease Prevention and Well-Being Highlights:

1) Healthy Communities

- a) Staff will be developing a new position statement on the built environment with municipalities/community partners. Reviewing and responding to zoning bylaw amendments, subdivision plans and official plans as appropriate. Provide local data to inform revisions to official plans and participate in steering committees where possible.
- b) Collaborate with local developers to offer a forum for developers and municipal planners/officials. Recruit developer partners from the Creating Connections project to speak at this event and share the successes, with the goal to expand the concept (private/public sector partnership) to other development areas within Oxford and Elgin County.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

CHRONIC DISEASE PREVENTION AND WELL-BEING

Chronic Disease Prevention and Well-Being Highlights (continued):

2) Healthy Eating Behaviours

- a) You're the Chef is a structured food literacy program that utilizes a 'train-the-trainer' model. Dietitians from SWPH train community members to offer food skills training to children/youth and high-risk adults. Once trained, the community members receive access to an online portal with a wealth of resources and recipes.
- b) Facilitating healthy eating behaviours reduces the risk of serious health problems, such as diabetes, heart disease and asthma. Key aspects of this work include assessing children's typical food choices, eating behaviours, as well as physical activity and growth patterns. We also build on partnerships and strengthen community capacity to support vulnerable populations and develop the skills and confidence necessary to prepare healthy and tasty recipes safely.

3) Physical Activity and Sedentary Behaviours

- a) Active Elgin, Elgin St. Thomas' Sport Recreation and Leisure website, has been around for years. It is time to evaluate the website and determine if it is meeting the users needs. Those learnings will be used to work with Oxford partners to evaluate interest and need to expand and incorporate Oxford data.
- b) Research shows lifestyle patterns set before the age of five predict obesity and health outcomes in later childhood and through adulthood. Physical literacy is the concept of teaching those fundamental movement skills in the early years. This year we will be targeting our most vulnerable families through the Healthy Babies Healthy Children Program and partnering with EarlyON.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

CHRONIC DISEASE PREVENTION AND WELL-BEING

Chronic Disease Prevention and Well-Being Highlights (continued):

4) Substance Prevention

- a) Strengthening Families Program is considered best practice and is evidence informed. It focuses on improving parenting skills, communication and family cohesiveness for families with children ages 6-12. We will be partnering with many community agencies to offer the program for the first time in Oxford, Elgin, and St. Thomas.
- b) Iceland had one of the highest rates of substance use among youth. Over the course of 20 years they now have the lowest rates of substance use. This was achieved through a collaboration between policy makers, behavioral scientists, field-based practitioners and community residents in Iceland. Iceland's model focused on: policy changes, parenting, recreational opportunities and decreasing access to drugs. The model has been adapted by countries around the world with success. This year we will explore the feasibility of bringing the model to Oxford, Elgin and St. Thomas.

5) Suicide Risk and Mental Health Promotion

- a) Weight-based stigmatization, the most common form of bullying reported by students age 13 to 19, is associated with depression, anxiety, low self-esteem, body dissatisfaction, suicidal ideation, poor academic performance, lower physical activity, maladaptive eating behaviors, and avoidance of health care (Ministry of Health and Long Term Care, 2018). Weight stigma is pervasive and exists in healthcare settings, education, employment, interpersonal relationships and the media. This year we will work on a comprehensive strategy to address this stigma internally within SWPH and externally with partners.

6) Healthy Menu Choices Act Enforcement

- a) Inspect all new premises and reinspect within one year of opening. All premises non-compliant on initial inspection in 2017 will be re-inspected until compliance is achieved.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

FOOD SAFETY

FOOD SAFETY	
Program Name	2019 Budget
Food Safety - Education, Promotion & Inspection	505,600
Total	505,600

Food Safety Highlights:

1) Food Safety – Education, Promotion & Inspection

The goal of the program is to reduce the burden of food-borne illnesses via the inspection of public facilities that prepare and serve food, training of food handlers and public education of safe food-handling practices and principles, timely and effective detection of food-borne pathogens and response to community outbreaks.

- a) Food handler training offered to owners and operators of food premises.
- b) Complete 100% of all routine food premises inspections.
- c) Disclosure of inspection results and enforcement activities on HealthInspect Southwestern and onsite at food premises locations.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

HEALTHY ENVIRONMENTS

HEALTHY ENVIRONMENTS	
Program Name	2019 Budget
Climate Change Program	110,354
Health Hazard Investigation & Response	325,221
Total	435,575

Healthy Environments Highlights:

The goal of this program is to reduce exposure to health hazards and promote the development of healthy built and natural environments that support health and mitigate existing and emerging risks, including the impacts of a changing climate.

1) Climate Change Program

- a) Initiation of climate change vulnerability assessment.
- b) Activation of Heat Alert Response System (HARS).

2) Health Hazard Investigation and Response

- a) Focus on safe housing issues related to mould, safe water and sanitation from a built environment lens. This includes developing and maintaining partnerships with stakeholders such as housing corporations.
- b) Increased outdoor air quality activities by SWPH including working with stakeholders to develop policies on outdoor wood burning.
- c) Continue to monitor the air quality in Beachville as part of the Beachville Area Air Quality Assessment.
- d) Implementation of the Radon Awareness project.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

HEALTHY GROWTH AND DEVELOPMENT

HEALTHY GROWTH AND DEVELOPMENT	
Program Name	2019 Budget
Reproductive Health/Healthy Pregnancies	351,257
Breastfeeding	290,578
Parenting	413,040
Total	1,054,875

Healthy Growth and Development Highlights:

1) Reproductive Health/Healthy Pregnancies

- a) The goal of this program is to achieve optimal preconception, pregnancy, newborn and family health. We aim to achieve this through a number of coordinated approaches, including prenatal education and resource sharing, early identification of risk factors, and through partnerships and collaboration.

2) Breastfeeding

- a) Breastfeeding is the normal method of infant feeding, with exclusive breastfeeding being recommended for the first 6 months of life, followed by the introduction of iron rich solid foods. Despite these recommendations, breastfeeding rates are dropping significantly as babies get older. We promote breastfeeding through education and information sharing and through breastfeeding-specific, practical and problem-solving support.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

HEALTHY GROWTH AND DEVELOPMENT

Healthy Growth and Development Highlights (continued):

3) Parenting

- a) Parenting programs are effective in changing developmentally appropriate parenting practices, modifying attitudes and beliefs, and improving caregiver relationships with the children they are responsible for. The *Nobody's Perfect* and *Triple P* programs are being offered in collaboration with community partners, promoting child growth and development and positive parenting.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

IMMUNIZATION

IMMUNIZATION	
Program Name	2019 Budget
Immunization Monitoring & Surveillance	91,929
Vaccine Administration	102,907
Community Based Immunization Outreach (excluding vaccine administration)	39,131
Vaccine Management	63,794
Total	297,761

Immunization Highlights:

1) Immunization Monitoring & Surveillance

- a) Monitoring and communicating about vaccine safety are priorities for Public Health Units. In Ontario, health care professionals are required to report adverse events following immunizations (AEFIs) to their local Public Health Unit. An AEFI is an unwanted or unexpected health effect that happens after someone receives a vaccine, which may or may not be caused by the vaccine. The Medical Officer of Health, together with Public Health Nurses investigate AEFIs and provide support to immunizers, individuals and their families. All AEFIs and other vaccine safety concerns are reported to the MOHLTC a provincial surveillance database.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

IMMUNIZATION

Immunization Highlights (continued):

2) Vaccine Administration

- a) The Public Health Nurses on our school-based Immunization team visit schools throughout Oxford County, Elgin County and the City of St. Thomas providing vaccines to eligible Grade 7 students to protect against serious diseases including Hepatitis B, Human Papillomavirus (HPV) and Meningococcal Disease. The goal of the program is to reduce or eliminate the burden of vaccine preventable diseases through immunization. High school clinics are offered each fall to allow students to “catch up” on immunizations.

3) Community Based Immunization Outreach

- a) Despite broader and easier access to influenza vaccine through primary health care providers, pharmacies and public health, some members of the community remain vulnerable to the effects of influenza and are unable to obtain a flu shot at partner sites. This may be due to a lack of a primary health care provider, age (vaccine not available at pharmacies to those under 5), transportation, or other factors. SWPH will ensure the availability of influenza vaccine by holding small, targeted clinics for those vulnerable to the complications of influenza.

4) Vaccine Management

- a) Wastage of vaccine due to mishandling is an expensive and unnecessary loss of provincially-funded products. A robust program of cold chain preventative maintenance, including inspections, and investigations of cold chain breaks of both refrigerated systems at SWPH and community partners is an important component of this program.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL	
Program Name	2019 Budget
Infectious & Communicable Disease Prevention & Control	518,225
Tuberculosis Prevention & Control	58,246
Rabies Prevention & Control	181,313
Sexual Health	921,148
Total	1,678,932

Infectious and Communicable Diseases Prevention and Control Highlights:

- 1) **Infectious & Communicable Disease Prevention & Control**
 - a) While vaccination is the most effective strategy to prevent outbreaks of diseases such as measles and rubella, there are people in SWPH who remain vulnerable to these diseases, due to health status or immunization refusal. In addition, many communicable diseases cannot be prevented through vaccination. People who become sick with these diseases risk transmitting the disease to others and starting an outbreak. To prevent outbreaks and to minimize adverse effects of an outbreak, SWPH staff monitor for these illnesses and provide direction to health care providers and patients about how to minimize the spread of these diseases to others.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

Infectious and Communicable Diseases Prevention and Control Highlights (continued):

2) Tuberculosis Prevention Control

- a) Identification and treatment of latent Tuberculosis (TB) infection is a key strategy to prevent the development of cases of active TB - a very contagious disease which can lead to disability and death. SWPH receives positive results of TB skin testing and follows up with the patient and their health care provider to ensure the best outcome is achieved.

3) Rabies Prevention & Control

- a) Although the numbers of rabies-infected animals in Ontario has decreased substantially over the past twenty years, rabies remains a concern because it is a fatal disease with no cure. SWPH follows up on every report of an animal bite. Animals who bite humans are assessed for rabies either through direct testing or by demonstration of survival 10 days after the bite occurred. If rabies cannot be reliably ruled out, SWPH provides post-exposure vaccine to the person(s) who were exposed. The risk of rabies is reduced in animals who are properly vaccinated and SWPH enforces provincial legislation that requires domestic animals to be immunized against rabies. This program requires close working relationships with area health care providers, animal control, police and local veterinarians.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

Infectious and Communicable Diseases Prevention and Control Highlights (continued):

4) Sexual Health

- a) The main objective of the Sexual Health Program is to reduce the burden of communicable diseases – including Chlamydia, Gonorrhea and other infectious diseases of public health importance - through timely testing, evidence-informed treatment, community outreach and client and health care provider education.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SAFE WATER

SAFE WATER	
Program Name	2019 Budget
Water Program	234,317
Total	234,317

Safe Water Highlights:

1) Water Program

The goals of the safe water program is to prevent or reduce the burden of water-borne illnesses related to drinking water and to prevent or reduce the burden of water-borne illnesses and injuries related to recreational water use via timely and effective detection, identification, and response to drinking water contaminants and illnesses, public awareness of potential risk of illnesses and injuries related to recreational water facilities and public beach use, and the training and education of owners/operators of public and private drinking water systems and recreational water facilities.

a) Drinking water

- ✓ Maintain inspection related activities associated with regulated drinking water systems. This includes enforcement activities, responsiveness to adverse drinking water advisories and monitoring of items that may result in issuance of health information advisories.
- ✓ Provision of drinking water system risk assessments and drinking water advisories on the SWPH disclosure website.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SAFE WATER

Safe Water Highlights (continued):

- b) Recreational water
 - ✓ Enhance the knowledge of operators of recreational water facilities
 - ✓ Complete 100% of all routine recreational water facility inspections
 - ✓ Assessment of beach water quality.
 - ✓ Disclosure of inspection results on SWPH disclosure website and onsite at applicable recreational water locations.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SCHOOL HEALTH

SCHOOL HEALTH	
Program Name	2019 Budget
Oral Health Assessment & Surveillance	240,430
Vision Screening Program	140,018
Immunization for Children in Schools & Licensed Child Care Settings	1,079,718
Comprehensive School Health	963,200
Total	2,423,366

School Health Highlights:

1) Oral Health School Screening & Surveillance

- a) Oral health screening is available to all children and youth ages 0 to 17. SWPH's Oral Health Services offer school-based oral health screening and surveillance to all elementary schools in Oxford County, Elgin County and the City of St. Thomas. Students requiring urgent dental care or preventative dental services are identified and referred for further treatment. Provincial funding for eligible children and youth is through the Healthy Smiles Ontario program for families that cannot afford to pay for oral health treatment needs.

2) Vision Screening Program

- a) As of September 2018, the new Ontario Public Health Standards require local Public Health Units to ensure all children in Senior Kindergarten in all schools (including private and public) to have their vision screened using three tests: an autorefractor test, a stereoacuity test and a visual acuity test. SWPH has approximately 2400 Senior Kindergarten students living in our geography every school year.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SCHOOL HEALTH

School Health Highlights (continued):

3) Immunization for Children in Schools & Licensed Child Care Settings

- a) In accordance with the Child Care and Early Years Act (CCEYA) and the Immunization of School Pupils Act (ISPA), the school-based Immunization Team, consisting of Public Health Nurses and Program Assistants, complete annual record reviews of thousands of immunization records to assess the immunization status of children in licensed child cares and registered schools. The goal is to reduce or eliminate the burden of vaccine preventable diseases through immunization. This is accomplished by ensuring students are up-to-date with Ontario's Publicly Funded Immunization Schedule (this includes administering vaccinations).
- b) Public Health Nurses offer immunization clinics in all publicly funded and private schools in our area. School-based vaccination clinics ensures students have access to the required mandatory vaccines within the Immunization of School Pupils Act.

4) Comprehensive School Health

- a) In partnership and collaboration with local School Boards and schools, our School Health team of Public Health Nurses work diligently with stakeholders to improve and achieve the optimal health of school-aged children and youth. Our School Health team supports and aids in the implementation of many different programs including (but not limited to) mental health and wellness promoting initiatives like the Healthy Relationships Plus Program in partnership with Western University's Centre and the implementation of Active and Safe Routes to School planning in partnership with Western University's Human Environments Analysis Laboratory (HEAL) to achieve positive outcomes for students and schools alike.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SUBSTANCE USE AND INJURY PREVENTION

SUBSTANCE USE AND INJURY PREVENTION	
Program Name	2019 Budget
Substance Use	133,864
Road Safety	94,041
Falls Prevention	121,706
Total	349,611

Substance Use and Injury Prevention Highlights:

1) Substance Use

- a) Oxford County Community Drug and Alcohol Strategy is approaching completion and will formally be shared with the community in early 2019. Over the course of 2019, SWPH will be working with the community partners to work on the activities set out through the DPRA consultants report.
- b) Elgin Community Drug and Alcohol Strategy development is underway and SWPH will be a member of the Steering Committee and at least one of the pillar working groups.

2) Road Safety

- a) Public Health Ontario data shows that for over 10 years, emergency department visits for injuries related to motor vehicle collisions is significantly higher in Oxford County compared to the Ontario average. Vision Zero is a road safety strategy that includes the 3 E's of injury prevention (education, enforcement, and engineering). Work is currently underway to determine local support and readiness to create a comprehensive response to the local road safety issues.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SUBSTANCE USE AND INJURY PREVENTION

Substance Use and Injury Prevention Highlights (continued):

3) Falls Prevention

- a) Explore the feasibility of starting the Lonely No More program which reduces social isolation and prevents falls in older adults across Oxford, Elgin and St. Thomas.
- b) Continue to convene the Elgin St Thomas Age Friendly Advisory Group to exchange knowledge, track progress and collaborate to create system change.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

FOUNDATIONAL STANDARDS

FOUNDATIONAL STANDARDS	
Program Name	2019 Budget
Foundational Standards	626,732
Total	626,732

Foundational Standards Highlights:

Foundational Standards supports programs and services to meet overarching requirements of the Ontario Public Health Standards as they pertain to:

- ✓ Population health assessment and surveillance
- ✓ Health equity
- ✓ Effective public health practice, which includes program planning, evaluation, and evidence-informed decision making; research and knowledge exchange and quality and transparency
- ✓ Emergency management

The above-mentioned standards include work in the following:

- a) Perform population health surveillance.
- b) Further the development of the Health Status Report by including detailed information specific to programs and services to better support evidence-based planning and evaluation.
- c) Support for program and service planning by front-line staff including training, skill-building and guiding staff throughout the process.
- d) Support staff to incorporate evidence into their programs, services, and practices by leading the Knowledge Broker Working Group.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

FOUNDATIONAL STANDARDS

Foundational Standards Highlights (continued):

- e) Program evaluation work by leading complex organization level evaluations and supporting all staff to conduct evaluations of their work to ensure client/stakeholder value.
- f) Externally focused health equity initiatives including ones focused on poverty, housing, transportation, built environment, cultural safety (with emphasis on Indigenous training) and mental health.
- g) Build capacity of front-line staff regarding incorporation of health equity principles and practices into programs and services.
- h) Continue to build our internal capacity to respond to public health emergencies including the creation of SWPH emergency response and continuity of operations' plans.
- i) Provide public health input into the emergency planning activities and exercises of municipal partners.
- j) Support the evolution of continuous quality improvement by leading the Quality Committee and Nursing Practice Council.
- k) Develop a Continuous Quality Improvement framework for SWPH.
- l) Complete evidence-informed quality improvement training to all staff.
- m) Support development of policies, procedures and practices that reflect continuous quality improvement principles.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SUPPORTING COSTS

SUPPORTING COSTS	
Program Name	2019 Budget
Salaries	1,305,110
Benefits	412,474
Facilities	1,265,553
Office Management	218,000
Corporate Services	992,667
Board of Health	38,700
Total^①	4,232,504
① Costs include costs for general, related services, and 100% provincially funded budgets	

Supporting Costs Highlights:

- 1) Public health is expected to achieve compliance with the standards outlined in the Accountability Framework in the areas of program and service delivery, fiduciary requirements, good governance and management practices, and public health practice.

Southwestern Public Health General Programs 2019 Cost-Shared Budget

SUPPORTING COSTS

Supporting Costs Highlights (continued):

- 2) Requirements include compliance with Accountability Agreements, delivery of all mandated programs and services, quarterly and annual financial reporting, asset inventory maintenance, effective procurement practices, policies and procedures, board of health orientation and development, developing and maintaining strategies in the areas of communications, human resources, risk management, and research and evaluation, and stakeholder engagement. This involves leadership and support in the areas of finance, human resources, communications, office management, and committees/working groups to support program delivery and compliance. This also includes building and rental costs of three facilities, office equipment, information technology including hardware/software licenses, training and development, insurance, audit services, legal costs, and Board of Health costs.



Southwestern Public Health General Programs 2019 Cost-Shared Budget

2019 Budget	
Total General Programs	12,723,358



Related Services

2019

Budget and Highlights

*Included:
Small Drinking Water Systems
Vector Borne Diseases*

Southwestern Public Health 2019 Cost-Shared Budget Small Drinking Water Systems

SMALL DRINKING WATER SYSTEMS	
Program Name	2019 Budget
Small Drinking Water Systems	40,933
Total	40,933

Small Drinking Water Systems Highlights:

1) Small Drinking Water Systems

The goal of this program is to prevent or reduce the burden of water-borne illnesses related to drinking water by ensuring owners/operators of small drinking water systems operate in a safe and sanitary manner.

- a) Continue pre-opening, routine and re-inspections of small drinking water system inspections.
- b) Continue conducting risk assessments of small drinking water systems.

Southwestern Public Health 2019 Cost-Shared Budget Vector Borne Diseases

VECTOR BORNE DISEASES	
Program Name	2019 Budget
Vector Borne Disease Program	159,467
Total	159,467

Vector Borne Diseases Highlights:

1) Education and Surveillance

- a) Development and distribution of educational materials that promote awareness to the public for protecting themselves against West Nile virus (WNV) and Lyme disease.
- b) Provision of presentations to community groups by request and target camp grounds, parks etc. and outdoor events for distribution of educational materials (i.e. pamphlets and tick keys).

2) Control and Surveillance

- a) For WNV:
 - larviciding of public catch basins and trapping of adult mosquitoes for control and prevention respectively.
 - follow-up on standing water complaints and larval dipping from complaint-based information.
- b) For Lyme disease:
 - passive tick surveillance.
 - submission of deer ticks to the National Microbiology Lab for testing.

Southwestern Public Health General Programs and Related Services' Budgets Summary 2019 Cost-Shared Budgets

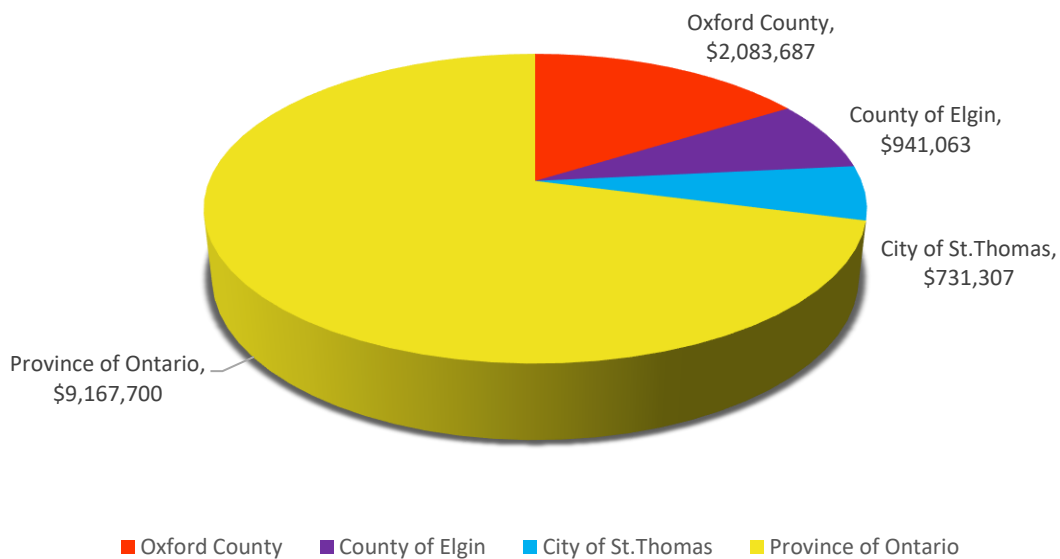
GENERAL PROGRAMS AND SERVICES	
2019 Budget	
Oxford County	2,055,894
County of Elgin	928,511
City of St.Thomas	721,553
Province of Ontario	9,017,400
Total	12,723,358

SMALL DRINKING WATER SYSTEMS	
2019 Budget	
Oxford County	5,677
County of Elgin	2,564
City of St.Thomas	1,992
Province of Ontario	30,700
Total	40,933

Southwestern Public Health General Programs and Related Services' Budgets Summary 2019 Cost-Shared Budgets

VECTOR BORNE DISEASES	
2019 Budget	
Oxford County	22,116
County of Elgin	9,988
City of St.Thomas	7,762
Province of Ontario	119,600
Total	159,467

SUMMARY OF 2019 COST-SHARED BUDGET





100% Provincially Funded Programs

2019

Budget and Highlights

Included:

Smoke Free Ontario

Healthy Smiles Ontario

Pre and Post Natal Nurse Practitioner Program

Healthy Babies Healthy Children

Harm Reduction

Infectious Diseases Control

Infection Prevention and Control

Enhanced Food Safety

Enhanced Safe Water

Needle Exchange Program

Social Determinants of Health Initiative

Chief Nursing Officer

Medical Officer of Health Compensation Initiative

Southwestern Public Health 2019 Budget – 100% Provincially Funded Smoke Free Ontario

SMOKE FREE ONTARIO	
Account Name	2019 Budget
Tobacco Control Coordination	200,000
Protection and Enforcement	278,500
Youth Tobacco Use Prevention	160,000
E-Cigarette Enforcement	28,100
Prosecution	17,400
Total	684,000

Smoke Free Ontario Highlights:

1) Tobacco Control Coordination

- a) Create more opportunities for smokers to access cessation services through a comprehensive strategy including coordination of a local Community of Practice with community agencies offering cessation, physician referrals to STOP Workshops, hospital-based cessation interventions and ensuring internal staff are trained in Brief Contact Intervention.

2) Protection and Enforcement

- a) Staff will complete regular vendor education and the required inspections inclusive of a minimum of 2 youth access inspections for tobacco, 1 display and promotion inspection for tobacco.
- b) Support the creation of additional smoke-free Multi Unit Dwellings, smoke-free public places and proactive inspections of workplaces, sports fields etc.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Smoke Free Ontario

Smoke Free Ontario Highlights (continued):

3) Youth Tobacco Use Prevention

- a) Community engagement, events and social media targeting those groups such as young adult males, alternative youth ages 13-18 and LGBT+ who are more likely to smoke or be a part of social groups with higher rates of smoking.

4) E-Cigarette Enforcement

- a) Staff will complete regular vendor education and the required inspections inclusive of a minimum of 1 display and promotion inspection for e-cigarettes, 1 youth access inspection for e-cigarettes for each vendor.

5) Prosecution

- a) Staff will apply a compliance strategy that employs a balance of education, inspection and progressive enforcement, including the prosecution of those in non-compliance with the Smoke-Free Ontario Act. “Progressive enforcement” means the use of warnings and graduated charging options to reflect the frequency and severity of the level of non-compliance.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Healthy Smiles Ontario

HEALTHY SMILES ONTARIO	
Program Name	2019 Budget
Healthy Smiles Ontario	1,008,100
Total	1,008,100

Healthy Smiles Ontario Highlights:

1) Healthy Smiles Ontario

- a) This program provides preventative, routine, and emergency dental services for eligible children and youth 17 years old and under from low-income households.
- b) SWPH’s Oral Health team facilitates enrollment to the appropriate HSO streams (HSO-Core, HSO-Emergency and Essential Services, and HSO-Preventative) and delivers routine preventative dental services for eligible children in our various clinical locations (Woodstock, St. Thomas, Aylmer, and Tillsonburg).
- c) SWPH’s Oral Health team delivers oral health outreach services at many venues throughout Oxford County, Elgin County and the City of St. Thomas. These services include provision of preventative fluoride varnish services through a mobile bus to locations including visits to supportive housing complexes to reduce the barriers of access for families in need. Fluoride varnish programs are also offered in many licensed childcare settings throughout our geography.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Pre and Post Natal Nurse Practitioner Program

Pre and Post Natal Nurse Practitioner Program	
Program Name	2019 Budget
Pre and Post Natal Nurse Practitioner Program	139,000
Total	139,000

Pre and Post Natal Nurse Practitioner Program Highlights:

- 1) **Pre and Post Natal Nurse Practitioner Program**
 - a) Delivered in partnership with a local family health team, the Prenatal and Postnatal Nurse Practitioner Program serves a population that includes German Mennonite families, low income families living below the poverty line, as well as families with a higher than average number of children. Clients enjoy the full benefit of a multi-disciplinary primary care team for comprehensive medical treatment.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Healthy Babies Healthy Children

HEALTHY BABIES HEALTHY CHILDREN	
Program Name	2019 Budget
Healthy Babies Healthy Children	1,653,539
Total	1,653,539

Healthy Babies Healthy Children Highlights:

1) Healthy Babies Healthy Children

- a) The Healthy Babies Healthy Children Program helps families with children up to age six get a healthy start in life. This is accomplished through screening and assessments - to help identify any risks that could affect a child's healthy development - referrals to community programs and services, and by providing information and supports for parents. The range of available supports include home visiting by a public health nurse and a trained lay home visitor for families with a child at risk.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Harm Reduction

HARM REDUCTION	
Program Name	2019 Budget
Harm Reduction	300,000
Total	300,000

Harm Reduction Highlights:

1) Harm Reduction

- a) Engage local needle exchange clients to determine their level of satisfaction with overall experience, staff interactions, and access to supplies.
- b) Work with people with lived experience and community partners to increase access to Naloxone across the community.
- c) Continue to share timely information with community partners via the Opioid monitoring dashboard which includes information about what we are hearing “on the ground” and statistics on opioid prescribing, naloxone distribution, paramedic calls, opioid overdose and drug-related emergency department visits, hospital admissions and opioid-related deaths.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Infectious Diseases Control

INFECTIOUS DISEASES CONTROL	
Prgoram Name	2019 Budget
Infectious Diseases Control	389,000
Total	389,000

Infectious Diseases Control Highlights:

1) Infectious Diseases Control

- a) Public health staff with specialty training in Infection Prevention and Control (IPAC) respond to complaints or internal disease investigations implicating community health care sites in the transmission of blood-borne infections. Sites may include dental offices, surgical and non-surgical cosmetic services and settings that provide personal services such as manicures and pedicures. IPAC is also assessed while investigating outbreaks of infectious diseases at hospitals and long-term care homes, as appropriate use of IPAC practices reduces the incidence of and the length of outbreaks in closed facilities. Where possible, we take a preventive approach, to ensure that any 'lapses' in infection prevention and control that could lead to disease transmission are identified and addressed before a problem occurred. We are mandated to post any confirmed lapses in infection prevention and control on the public health unit website.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Infection Prevention and Control

INFECTION PREVENTION AND CONTROL	
Program Name	2019 Budget
Infection Prevention & Control	180,200
Total	180,200

Infection Prevention & Control Highlights:

- 1) Infection Prevention & Control
 - a) Infection Prevention and Control (IPAC) practices must be in place internally at SWPH. Annual internal audits of all clinical services, education of staff and flagging of potential issues are funded and conducted through this program.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Enhanced Food Safety

ENHANCED FOOD SAFETY	
Program Name	2019 Budget
Enhanced Food Safety	50,000
Total	50,000

Enhanced Food Safety Highlights:

1) Enhanced Food Safety

The goal of the enhanced food safety program is to prevent or reduce the burden of food-borne illnesses.

- a) Continue compliance with food inspection mandates. i.e. provision of Food Handler education and 100% completion of food premises inspections.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Enhanced Safe Water

ENHANCED SAFE WATER	
Program Name	2019 Budget
Enhanced Safe Water	31,000
Total	31,000

Enhanced Safe Water Highlights:

1) **Enhanced Safe Water**

The goal of this program is to prevent or reduce the burden of water-borne illnesses related to drinking water and recreational water use.

- a) Continue compliance with inspection related activities for recreational water.
- b) Continue compliance with regulated drinking water risk assessments and inspection activities.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Needle Exchange Program

NEEDLE EXCHANGE PROGRAM	
Program Name	2019 Budget
Needle Exchange Program	60,900
Total	60,900

Needle Exchange Program Highlights:

- 1) Needle Exchange Program
 - a) The Needle Exchange Program is part of Ontario’s harm reduction program and provides sterile, single use equipment to help prevent the spread of HIV, Hepatitis C and Hepatitis B. Equipment is distributed and collected at various fixed and mobile sites in the health unit region.

Southwestern Public Health 2019 Budget – 100% Provincially Funded Social Determinants of Health Initiative

SOCIAL DETERMINANTS OF HEALTH INITIATIVE	
Program Name	2019 Budget
Social Determinants of Health Initiative	361,000
Total	361,000

Social Determinants of Health Initiative Highlights:

- 1) Social Determinants of Health Initiative
 - a) Continue externally focused health equity initiatives including ones focused on poverty, housing, transportation, built environment, cultural safety (with emphasis on Indigenous training) and mental health
 - b) Continue to build capacity of front-line staff regarding incorporation of health equity principles and practices into programs and services

Southwestern Public Health 2019 Budget – 100% Provincially Funded Chief Nursing Officer

CHIEF NURSING OFFICER	
Program Name	2019 Budget
Chief Nursing Officer	243,000
Total	243,000

Chief Nursing Officer Highlights:

1) Chief Nursing Officer (CNO)

The CNO reports directly to the Chief Executive Officer as a member of the Senior Leadership Team and is responsible for high-level oversight of nursing activities at Southwestern Public Health. In this capacity, the CNO is responsible for the following:

- a) Chairing the Nursing Practice Council with its focus on knowledge development, student orientation and preceptorship, and best practices
- b) Coordinating student placements in partnership with human resources
- c) Actively participating in Ontario Public Health Nursing Leadership initiatives including co-chairing the Working Group on RN Prescribing
- d) Supervising continuous quality improvement program development

Southwestern Public Health 2019 Budget – 100% Provincially Funded Medical Officer of Health Compensation Initiative

MEDICAL OFFICER OF HEALTH (MOH)	
Program Name	2019 Budget
Medical Officer of Health	122,000
Total	122,000

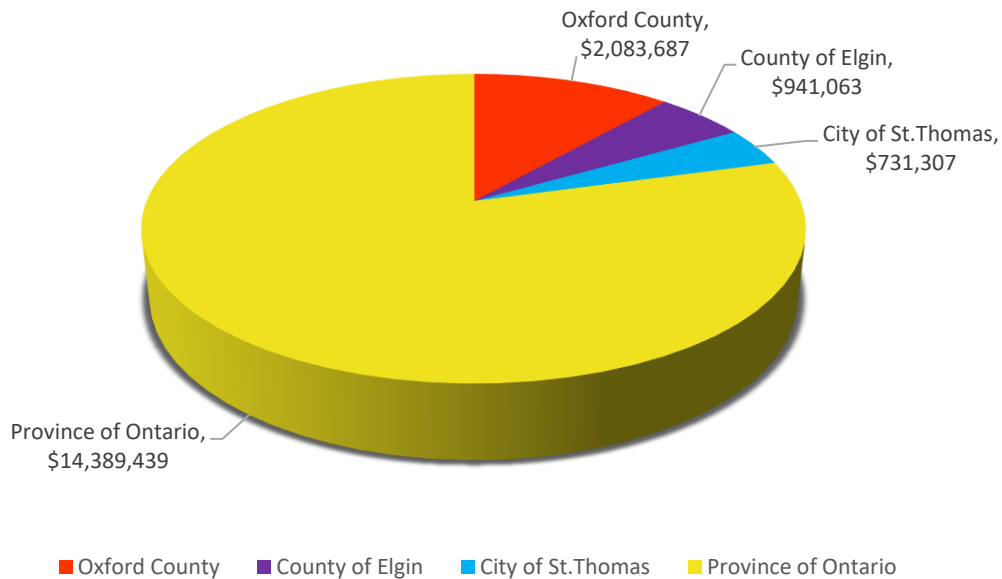
Medical Officer of Health Compensation Initiative Highlights:

- 1) Medical Officer of Health (MOH)
 - a) The Province provides Boards of Health with a portion of funding towards the salary cost of eligible MOH positions.

Southwestern Public Health 2019 Budget Cost Summary

2019 Budget	
Total cost of all budgets	18,145,496

2019 COST SUMMARY OF ALL BUDGETS





One-Time Funding Request 100% Provincially Funded

2019 Budget and Highlights

*Included:
Merger Phase II
Electronic Medical Record (EMR)
Public Health Inspector Practicum Program*

One-Time Funding Request 100% Provincially Funded

Project Title: Merger Phase II Highlights

MERGER PHASE II	
Program Name	2019 Budget
Merger Phase II	700,000
Total	700,000

Merger Phase II Highlights:

- 1) The one-time financial request will support SWPH in the ongoing implementation and sustainability of the recent merger. A full implementation was anticipated to take approximately 18 months.
- 2) The merger was effective May 1, 2018 and there continues to be many initiatives that are still ongoing and initiatives that are just starting that will commence late in 2019 and early 2020 that require financial support to be successful.
- 3) The request will be necessary for continued planning and implementation related to the governance, operations and service delivery between the two health unit locations.
- 4) This request will provide the necessary resources to focus on engagement, sustainability, employee relations and success of the merger of SWPH.

One-Time Funding Request 100% Provincially Funded

Project Title: Electronic Medical Record Highlights

ELECTRONIC MEDICAL RECORD	
Program Name	2019 Budget
Electronic Medical Record	861,591
Total	861,591

In summary, a **multi-year funding request** would be as follows:

Year One - **\$861,591**

Year Two - **\$441,325**

Year Three - **\$441,325**

Annual Base Increase (Year Four onwards) - **\$109,800/year**

Electronic Medical Record (EMR) Highlights:

- 1) SWPH is requesting Ministry funding to support the acquisition and implementation of an EMR for most of its programs and services. Transitioning to a uniform EMR across different programs and services enables Southwestern Public Health to:
 - a) Optimize information and record management, ensuring continuity of care for clients;
 - b) Modernize service delivery;
 - c) Evaluate program and service quality (using data that is readily available and more amenable to statistical analysis), thereby improving transparency and accountability in accordance with the Ontario Public Health Foundational Standards;
 - d) Eliminate inefficiencies associated with the need to support several program/service-specific documentation practices/systems; and
 - e) Contribute to a culture of quality and continuous improvement in accordance with the Ontario Public Health Foundational Standards.

One-Time Funding Request 100% Provincially Funded

Project Title: Electronic Medical Record Highlights

Electronic Medical Record Highlights (continued):

- 2) EMR requirements will include a focus on inter-operability and linkages to existing provincial systems to facilitate information exchange for optimal client service.
- 3) According to Canada Health Infoway (n.d.), the use of EMRs benefits clients, health care professionals, health care agencies and the health system in general. Recognized benefits associated with EMR use include the following:
 - a) Improved communication between clients and health care professionals, positively impacting client safety and trust as well as improved health outcomes;
 - b) Improved communication between different health care professionals resulting in safer, more effective client care;
 - c) Improved efficiencies in workflow.
- 4) SWPH hopes to recognize similar benefits at the community and population health client level once the EMR is used to support these programs and services.
- 5) The anticipated implementation is planned as a multi-year project with the first year devoted to procurement, installation, small scale implementation on the Infectious and Communicable Diseases Prevention and Control Team. and initial roll-out. The services impacted would include reportable disease follow-up, tuberculosis case management, and sexual health clinical services. After a preliminary evaluation, the project would expand to include, potentially, outbreak management, reproductive health, vision health, potentially oral health, school health, and substance use and injury prevention.

One-Time Funding Request 100% Provincially Funded

Project Title: Electronic Medical Record Highlights

Electronic Medical Record Highlights (continued):

- 6) Implementing an EMR in 2019-2020 would allow SWPH to participate in a collaborative purchasing solution with several other health units that may be pursuing one-time Ministry funding for this purpose. Collaborative purchasing sets the stage for sharing of policies, processes, tools and best practices and reducing implementation timelines/costs. This approach aligns with the Committee of Medical Officers of Health (COMOH) EMR Working Group (of which Southwestern Public Health is an active member) recommendations that public health agencies work together to procure and adopt systems that meet requirements and ensure inter-operability with provincial assets.
- 7) A deployed EMR will support the broad achievement of outcomes across health unit programs by providing a set of tools, structures, processes and priorities that will:
 - a) Permit measurement and improvement of programs and services
 - b) Permit measurement and tracking of client, community, community partner and stakeholder experiences and outcomes to inform transparency and accountability, and
 - c) Facilitate collection of data that will permit an examination of variances from performance expectations culminating in remediation efforts.
- 8) An EMR also allows the collection of socio-demographic data of clients for the purpose of health equity analysis and improved service outreach and delivery. This is particularly beneficial for Southwestern Public Health because some identified population groups like Low German-speaking Mennonites cannot be identified using traditional methods like the Statistics Canada long-form census.

One-Time Funding Request 100% Provincially Funded

Project Title: Electronic Medical Record Highlights

Electronic Medical Record Highlights (continued):

- 9) Beneficial outcomes for clients include improved access to their personal health information, better care quality, and more consistency of service delivery across health unit settings. Greater operational efficiencies will arise from the ability to instantly access client records across program locations regardless of the point of service.
- 10) Having a standardized and inter-operable EMR, with links to provincial databases like Panorama and the Oral Health Information System, will eliminate the need to re-key results into the system. This will free up staff time and lessen the risk of data entry errors. It will also allow records of public health care to be included in the client's overall Ontario electronic health records, resulting in improved, coordinated and efficient care across all layers of the health care system.
- 11) SWPH hopes to build an EMR that fully supports its programs and services, with few exceptions. This would entail examining software functionality and introducing applications that accommodate health equity and health promotion work.

One-Time Funding Request 100% Provincially Funded

Project Title: Public Health Inspector Practicum Program

PUBLIC HEALTH INSPECTOR PRACTICUM PROGRAM	
Program Name	2019 Budget
Public Health Inspector Practicum Program	18,325
Total	18,325

Public Health Inspector Practicum Program Highlights:

- 1) To provide a practicum for two students who are enrolled or who already have a degree in a program of instruction approved by the Canadian Institute of Public Health Inspectors (CIPHI) Board of Certification (BOC).
- 2) In order to be eligible to sit the Examination to obtain the Certificate in Public Health Inspection (Canada), every candidate must satisfactorily complete a twelve (12) week minimum practicum in the basic inspection programs.
- 3) This practicum must be coordinated by a qualified person who holds the CPHI(C) at the supervisory level of the agency where the practicum is to take place. Upon successfully completing the practicum, the student will be able to sit the BOC exam. Southwestern Public Health has staffing who can coach and mentor student PHI candidates in preparation for their BOC exam for the duration of the 12-week practicum.



Base Funding Increase 100% Provincially Funded

2019 Budget and Highlights

*Included:
Needle Exchange Program*

Base Funding Increase 100% Provincially Funded

Project Title: Needle Exchange Program Highlights

NEEDLE EXCHANGE PROGRAM	
Program Name	2019 Budget
Needle Exchange Program	89,895
Total	89,895

Needle Exchange Program Highlights:

- 1) The demand for sterile harm reduction equipment and disposal of used equipment continues to increase. In 2018 there was an increase in supplies distributed from 2017. It is anticipated that this increase in the need for sterile supplies to prevent the transmission of HIV and HEP C infections will continue. To increase access to sterile syringes for people who inject drugs, Southwestern Public Health has collaborated with Regional HIV/AIDS Connection and Addiction Services of Thames Valley to establish mobile outreach for distribution and collection of harm reduction supplies. To increase return and disposal of used syringes, 5 new community disposal kiosks will be installed by March 31, 2019. A community sharps disposal strategy is planned for 2019 with the goal of increasing the rate of syringe returns. Increasing access to harm reduction services continues to be a priority for the government as a result of the opioid crisis.