



**2021 BUDGET
FOR
GENERAL PROGRAMS**

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



General Programs

2021 Budget & Realities and Priorities

STRATEGIC VISION, MISSION, AND VALUES



VISION

Healthy people
in vibrant
communities.

MISSION

Leading the way in
protecting and promoting
the health of all people in
our communities, resulting
in better health.

VALUES

Evidence
Collaboration
Accountability
Quality
Equity
Forward-thinking

Realities

Southwestern Public Health's 2021 Budget takes into account several considerations related to the current reality of its provincial mandate, its continued development as a new organization, its uncertain future at the local level due to possible public health amalgamations, the ongoing COVID-19 pandemic and its leadership response, and the current and future needs of its communities. These considerations are:

- ✓ a leadership role in the response to the COVID-19 pandemic, with a focus on case identification and management, contact tracing, infection prevention and control, and providing evidence-based information to agencies as they implement public health guidance
- ✓ the need to deliver public health programs and services in new ways to protect the health and safety of our staff, our clients, and our communities
- ✓ mandated delivery of Ontario Public Health Standards and Accountability Requirements
- ✓ consideration of the demonstrated value for money offered by Ontario's public health system. Specifically, 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).
- ✓ continued implementation of the Strategic Plan for Southwestern Public Health (SWPH) recognizing the need for flexibility given current pandemic
- ✓ provincial, municipal, and public demands of public health services, including for example, mass vaccination clinics with a COVID-19 vaccine, work towards opioid crisis prevention, assistance with addressing local health equity concerns such as poverty, education, housing and community belongingness, studying

Realities (continued)

the impacts of the global pandemic on health outcomes, and continued access to home visiting support, immunization, sexual health services, etc.

- ✓ continued development of the new organization, its culture, its program and service delivery framework, and its advocacy voice
- ✓ flexibility to scale up the pandemic response as required based upon the trajectory of the pandemic
- ✓ increased staffing to support both regular program and service delivery at the same time as required pandemic leadership response
- ✓ a continued emphasis on transparency, accountability, and reporting resulting in frequent collection of greater amounts of data, performance targets, and communication of such
- ✓ a continued emphasis on risk management resulting in the need for continued support for the prompt and proactive identification, mitigation, monitoring and reporting of risks
- ✓ the speed with which a public health response is expected to meet Ministry protocols and to mitigate risk
- ✓ the continued need for even more collaboration and integration with community and health system partners (i.e. primary care, education, etc.)

Future Focused

In order to achieve its vision of Healthy People in Vibrant Communities, SWPH must have its eye on the future both near and far. SWPH considered what is on the horizon when it completed its 2021 planning.

- ✓ Contain the spread of COVID-19
- ✓ Economic challenges
- ✓ Future emergency readiness
- ✓ Physical, emotional, and mental health implications of global pandemic
- ✓ Public health program and service delivery models (i.e., virtual delivery)
- ✓ Individual and Community impact of public health prevention, promotion, and protection
- ✓ Sustained momentum to achieve outcomes
- ✓ Workforce recruitment and retention

Priorities

Southwestern Public Health will:

- ✓ focus on its 1st strategic direction of working with partners and community members to reduce health and social inequities, making measurable improvements in population health
- ✓ focus on our 2nd strategic direction of working with partners and community members to transform systems to improve population health
- ✓ focus on our 3rd strategic direction to build an organizational culture of innovation and leadership that supports excellence in public health programs and services
- ✓ provide leadership that is required and valued in the areas of prevention, promotion, and protection of health
- ✓ continue to be a credible, reliable, and trusted voice 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 and Accountability Standards for general programs and related services as established by the Ministry of Health (MOH) and the Ministry of Children, Community and Social Services (MCCSS)
- ✓ strive to meet the performance targets established by the Ministry of Health as outlined in the Accountability Agreement between the Ministry and SWPH
- ✓ continue to monitor population health status and needs in Oxford County, the City of St. Thomas and the County of Elgin, to evaluate public health programs and services and to engage in continuous quality improvement to improve the safety, efficiency, client-centredness, responsiveness, effectiveness and timeliness of SWPH 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 2021 SWPH budget.

COVID-19 and the impact of pandemic public health measures

- a) As of November 6th, 2020, there have been a total of 367 cases of COVID-19 across the Southwestern Public Health region.
- b) Cases of COVID-19 have been coming in surges for this region. Since March 2020, there have been periods of high case activity, typically lasting about 2 months, followed by a month or so of lower-case activity before cases started to surge again. To date each surge in cases has been higher than the previous surge.
- c) The Call Center receives about 1500-1800 calls a month on average. Common topics include questions and support for COVID-19 testing, test results and questions and support with changes to public health measures, restrictions and guidelines.

Health equity and social determinants of health

- a) We could prevent 122 deaths in Elgin County and the City of St. Thomas and 73 deaths in Oxford County over a 2-year period if everyone were able to meet their basic material needs like enough income, safe and affordable housing and at least secondary school education.
- b) 12.4% of people in our region – or almost 25,000 residents – live in low income, but many more people struggle to make ends meet.
- c) 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's (17.5%).

Mental health

- a) 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

- a) The leading cause of death in the SWPH region between 2008 and 2012 was ischemic heart disease.
- b) The rate of hospitalizations due to cardiovascular diseases was higher in the SWPH region than in Ontario between 2013 and 2017.

Population Health Status Highlights

Substance use

- a) 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.
- b) The proportion of smoke-free homes was lower in the SWPH region compared to Ontario (85.7% versus 89.6%).
- c) Rates of impaired driving charges from alcohol and/or drugs were higher than Ontario in parts of Oxford County (South-West Oxford and Zorra Townships) and the City of St. Thomas from 2013 to 2017.

Injuries

- a) Compared to Ontario, people living in the SWPH region had over 2 times the rate of unintentional injuries and 1.5 times the rate of motor vehicle collisions attributable to alcohol.
- b) 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).
- c) The rates of emergency department visits and hospitalizations for falls, transportation accidents and being struck by or against an object were higher in the SWPH region compared to Ontario over the last five years (2013 to 2017).

Sexually transmitted infections

- a) Although the incidence rates in our region for the most common sexually transmitted infections, chlamydia and gonorrhea, have remained relatively stable over time, the rates are increasing in those 20-24 years of age more specifically. The crude incidence rate of gonorrhea in 20-24 years of age is 44.8 cases per 100,000 population.

Food safety

- a) Campylobacteriosis remains the most common food-borne illness in our region, with 280 cases in the last 5 years.

Air quality

- a) In the SWPH region, 88% of days in 2017 had an Air Quality Health Index rating of Low Risk.

Population Health Status Highlights

Vaccine preventable diseases

- a) The incidence rate of pertussis (whooping cough) in the SWPH region (8.3 cases per 100,000 population) was higher than Ontario (2.5 cases per 100,000 population) from 2013 to 2016 combined.

Physical activity

- a) Only 54.1% of adults (18 years and older) met or exceeded the Canadian Physical Activity guidelines of 150 minutes of moderate- to vigorous-intensity aerobic physical activity per week.
- b) A lower proportion of adults in the SWPH region (63.7%) were considered active or moderately active compared to Ontario (69.3%) and a higher proportion of adults in the SWPH region (36.4%) were considered somewhat active or sedentary compared to Ontario (30.7%).

Oral health

- a) From 2013 to 2014, about 60% of seniors living in the SWPH region reported that they visited a dentist in the past year. A similar proportion reported that they usually visit a dentist at least once a year for a checkup.
- b) Over one-third (36%) of seniors reported that they do not have insurance for dental expenses.
- c) From 2013 to 2017, the rate of day surgeries for cavities decreased as age increased. The rate was highest among children aged 0 to 6 years compared to the older age groups and the rate among children aged 7 to 13 years was higher than children aged 14 to 17 years.

2021 General Program Budgets

FOOD SAFETY

FOOD SAFETY		
Program Name	2020 Budget	2021 Budget
Food Safety-Education, Promotion & Inspection *	487,151	431,380
Enhanced Food Safety	50,000	50,000
Total	537,151	481,380

* Note: dollar differences between 2020 and 2021 do not necessarily reflect a decrease in programming or staffing. Sometimes it is a reallocation and sometimes it is a different person with a different salary than who was charged to that program last year.

Food Safety Highlights:

1) Food Safety – Education, Promotion & Inspection

The goal of the Food Safety Program is to reduce the burden of food-borne illnesses. To meet this goal several interventions are applied including the inspection of public facilities that prepare and serve food; training of food handlers; education of the public about safe food-handling practices and principles; timely and effective detection of food-borne pathogens and response to community outbreaks.

- a) Offer food handler training to owners and operators of food premises.
- b) Complete 100% of all high-risk routine food premises inspections and prioritize the inspection of food premises designated as moderate-risk based on the relative extent of the risk presented by the operation (e.g. compliance history).
- c) 100% disclosure of inspection results and enforcement activities on HealthInspect Southwestern and onsite at food premises' locations.
- d) Implement a locally driven food safety campaign for the public that: i) provides food safety tips via social media; and, ii) informs the public about the Health Inspect disclosure campaign.

2021 General Program Budgets

HEALTHY ENVIRONMENTS

HEALTHY ENVIRONMENTS		
Program Name	2020 Budget	2021 Budget
Climate Change Program	105,684	104,540
Health Hazard Investigation & Response	332,501	324,271
Total	438,185	428,811

Healthy Environments Highlights:

This program aims to reduce public exposure to health hazards and promote the development of healthy built and natural environments that support health and mitigate existing and emerging risks, including those of a changing climate.

1) Climate Change Program

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

2) Health Hazard Investigation and Response

- a) A focus on safe housing issues related to mould, safe water and sanitation using a built environment lens. This focus includes developing and maintaining partnerships with stakeholders such as housing corporations.
- b) Implementation of the Radon Awareness Campaign
- c) Completing routine migrant farm housing inspections at or above the required inspection frequency to minimize potential impacts of injury or illness. This year the inspections will include incorporating a COVID-19 defensive culture to ensure farmers and workers are equipped to mitigate the risk associated with COVID-19.

2021 General Program Budgets

HEALTHY GROWTH AND DEVELOPMENT

HEALTHY GROWTH AND DEVELOPMENT		
Program Name	2020 Budget	2021 Budget
Reproductive Health/Healthy Pregnancies	355,564	357,295
Breastfeeding	291,109	294,067
Parenting *	524,856	429,533
Total	1,171,529	1,080,894

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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. SWPH aims to achieve this through several coordinated approaches, including prenatal education, resource sharing and early identification of risk factors. It is anticipated that over 750 individuals will take part, and benefit from, prenatal education in 2021. All expectant families have the opportunity to access free on-line prenatal education from SWPH.

2) Breastfeeding

- a) Approximately 2,100 babies are born annually in the SWPH region. All new parents can request services from a Public Health Nurse, including an infant feeding assessment and support: on site, by telephone or in the home. SWPH anticipates serving over 800 parents and their children and we will interact with over 1000 parents via the Health Unit's website and social media channels.

2021 General Program Budgets

HEALTHY GROWTH AND DEVELOPMENT

Healthy Growth and Development Highlights (continued):

3) Parenting

- a) Information regarding a variety of parenting topics is provided to parents at the time of birth. Many parents choose to receive age-paced information electronically to support them in their caregiving roles. SWPH parenting and food literacy programs are implemented in collaboration with community partners and target families with young children experiencing parenting challenges. These programs are effective in supporting the adoption of developmentally appropriate parenting practices, including food skills, leading to improved life-long health outcomes. SWPH is prepared to enroll up to 100 caregivers in its parenting programs, which are 4 to 6 weeks in duration. Nurses provide group or one-on-one support to parents experiencing mental health challenges during pregnancy and parenting to help them find the support they need.

2021 General Program Budgets

IMMUNIZATION

IMMUNIZATION		
Program Name	2020 Budget	2021 Budget
Immunization Monitoring & Surveillance	42,195	47,984
Vaccine Administration	90,913	84,923
Community Based Immunization Outreach	33,750	34,185
Vaccine Management	106,291	112,926
Total	273,149	280,017

Immunization Highlights:

- 1) **Immunization Monitoring & Surveillance**
 - a) Monitoring and communicating about vaccine safety are priorities for all Ontario public health units. In Ontario, health care professionals are required to report adverse events following immunizations (AEFIs) to their local 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. Staff investigate AEFIs and provide support in the form of recommendations to immunizers, individuals and their families. All AEFIs and other vaccine safety concerns are reported to the Ministry of Health through a provincial surveillance database.

2021 General Program Budgets

IMMUNIZATION

Immunization Highlights (continued):

2) Vaccine Administration

- a) Nurses 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 year to allow students to “catch up” on immunizations. 2021 will provide an opportunity for SWPH to capitalize on the current pandemic by promoting the importance of immunizations in eliminating vaccine preventable diseases. In the event public and private schools are closed due to COVID – 19 outbreaks, vaccine preventable disease staff have contingency plans in place to offer community-based immunization clinics (to replace school-based immunization clinics). In addition, a program plan has been created for mass immunization of COVID 19 vaccine in our community for 2021 (assuming the availability of a COVID vaccine for mass distribution). It is anticipated that significant funding will be required to store and distribute the vaccine and staff large numbers of clinics in our community.

3) Community Based Immunization Outreach

- a) A community influenza clinic is held at each SWPH site to ensure access for clients who are not eligible to receive the flu vaccine at a pharmacy (those under 5 years of age) and/or clients who may not have a primary care provider. Smaller, more targeted clinics are held for clients who may be vulnerable to the complications of influenza and lack regular access to primary care. This would include the underhoused and clients struggling with mental illness and drug addiction. Influenza clinics are also offered to specific communities who may not normally immunize such as the Low German-speaking community and the Amish community. SWPH has planned for increased uptake of the influenza vaccine due to COVID – 19.

2021 General Program Budgets

IMMUNIZATION

Immunization Highlights (continued):

4) Vaccine Management

- a) Wastage of vaccine due to mishandling is an expensive and unnecessary loss of assets. A robust program of cold chain preventative maintenance, including inspections and investigations of cold chain breaks of both refrigerated systems at SWPH and in community partners' locations, helps to lessen vaccine wastage. SWPH is responsible for monitoring over 150 fridges located in pharmacies, health care provider offices and institutions which hold publicly funded vaccines. Routine compliance and education inspections are completed annually.

2021 General Program Budgets

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL		
Program Name	2020 Budget	2021 Budget
Infectious & Communicable Disease Prevention & Control	1,126,601	1,128,205
Tuberculosis Prevention & Control	55,022	57,423
Rabies Prevention & Control	187,023	182,247
Needle Exchange Program	60,900	60,900
Vector-Borne Diseases Program	154,683	153,532
Sexual Health *	798,691	933,906
Total	2,382,920	2,516,214

* Note: dollar differences between 2020 and 2021 do not necessarily reflect a decrease in programming or staffing. Sometimes it is a reallocation and sometimes it is a different person with a different salary than who was charged to that program last year.

Infectious and Communicable Diseases Prevention and Control Highlights:

- 1) **Infectious & Communicable Disease Prevention & Control**
 - a) To prevent outbreaks and to minimize adverse effects of an outbreak, SWPH staff respond to reports of diseases of public health significance and provide direction to health care providers and patients to minimize the spread of these diseases to others. SWPH investigates approximately 38 non-COVID-19 outbreaks in long-term care and retirement homes yearly and more than a dozen outbreaks in child-care centres and the community.
 - b) COVID 19 outbreaks, case and contact follow-up will continue to be managed over the next 12 months.

2021 General Program Budgets

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 notification of TB skin test results that are positive and follows up with the client and their health care provider to ensure the best outcome is achieved. An average of one case of active TB disease is reported to SWPH per year.

For these cases, intensive case follow-up is provided for approximately 6 months per case, including Direct-Observed-Therapy (DOT). This is a required standard of public health care where a SWPH staff member witnesses the patient taking their medication on a daily basis for a defined time period.

3) Rabies Prevention & Control

- a) Although the number 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 must follow up every report of an animal bite involving humans. Animals who bite humans are assessed for rabies either through direct testing or by assessing animal health for a 10-day period following the bite. If rabies cannot be reliably ruled out, SWPH makes a post-exposure vaccine available to the person(s) who were exposed. The risk of rabies is reduced in animals who are 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.

2021 General Program Budgets

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

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

4) Needle Exchange Program

- a) The Needle Exchange Program is part of Ontario's harm reduction program and provides sterile, single use drug use equipment to help prevent the spread of HIV, Hepatitis C and Hepatitis B. Prevention is key as the cost of intervention for blood borne infections is significantly high and contributes to economic losses, increased health care costs and demands on social services. Equipment will be distributed through a variety of locations including the main office sites, satellite sites operated by community partners and through mobile outreach. Supporting clients with additional service referrals and connections to other service providers is also part of this program.

5) Infectious Disease Prevention & Control

- a) Public health staff with specialty training in Infection Prevention and Control (IPAC) respond to complaints from the public 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, SWPH takes 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 occurs. Ontario health units are mandated to post any confirmed lapses in infection prevention and control on their websites. SWPH routinely inspects 307 personal service settings premises which provide esthetics, tattooing and hairdressing services. Annual internal audits of all clinical services, education of staff and flagging of potential issues are funded and conducted through this program.

2021 General Program Budgets

INFECTIOUS AND COMMUNICABLE DISEASES PREVENTION AND CONTROL

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

6) Vector Borne Diseases Education and Surveillance

- a) Program activities include development and distribution of educational materials that promote public awareness of the need to protect against West Nile virus and Lyme disease, (i.e. informational pamphlets on personal protection, distribution of tick keys.)

Control and Surveillance

- a) For WNV:
 - ✓ based on a risk assessment, 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.
 - ✓ onsite identification of tick species.
 - ✓ submission of deer ticks to the National Microbiology Lab for testing.

7) Sexual Health

- a) The main objective of the Sexual Health Program is to reduce the burden of sexually-transmitted 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. The sexual health clinics at SWPH provide testing for sexually transmitted infections and contraception services to high risk priority populations that experience barriers to accessing/using other health care providers' services. We anticipate more than 2600 client visits in our Sexual Health Clinics this year.

2021 General Program Budgets

SAFE WATER

SAFE WATER		
Program Name	2020 Budget	2021 Budget
Water Program	259,682	247,400
Enhanced Safe Water	31,000	31,000
Total	290,682	278,400

Safe Water Highlights:

1) Water Program

This program's goals are to prevent or reduce the burden of water-borne illnesses related to drinking water and prevent or reduce the burden of water-borne illnesses and injuries related to recreational water use. The goals are achieved through several public health activities, including timely and effective detection of and response to drinking water contaminants and illnesses, public education regarding the potential risk of illnesses and injuries related to the use of recreational water facilities and public beaches, 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. These include enforcement activities, adverse drinking water advisories and monitoring of items that may result in the issuance of health information advisories.
- ✓ perform drinking water system risk assessments and post drinking water advisories on the SWPH disclosure website.
- ✓ pre-opening, routine and re-inspections of small drinking water system inspections.
- ✓ conducting risk assessments of small drinking water systems.

2021 General Program Budgets

SAFE WATER

Safe Water Highlights (continued):

- b) Recreational water
 - ✓ enhance the knowledge of operators of recreational water facilities.
 - ✓ Complete a minimum of 75% 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.

2021 General Program Budgets

SCHOOL HEALTH

SCHOOL HEALTH		
Program Name	2020 Budget	2021 Budget
Oral Health Assessment & Surveillance	216,157	217,366
Vision Screening Program	206,089	208,513
Immunization for Children in Schools & Licensed Child Care Settings *	976,931	886,165
Comprehensive School Health	903,884	892,935
Healthy Smiles Ontario	1,008,100	1,008,100
Total	3,311,161	3,213,080

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School Health Highlights:

1) Oral Health School Screening & Surveillance

- a) Oral health screening is available to all children and youth ages 0 to 17. This includes offering school-based oral health screening and surveillance to all elementary schools. Students identified with need for urgent dental care or preventative dental services are referred for treatment. Provincial funding for oral health treatment for eligible children and youth is through the Healthy Smiles Ontario program for families that cannot afford to pay for oral health treatment needs. In the event public and/or private schools are closed due to COVID – 19 outbreaks, the oral health team have contingency plans in place to offer community-based oral health screenings (to replace school-based oral health screening and surveillance).

2021 General Program Budgets

SCHOOL HEALTH

School Health Highlights (continued):

2) Vision Screening Program

- a) The vision program protocol requires local public health units to ensure all children in Senior Kindergarten in all schools (including private and public) have been offered vision screening using three tests: an autorefractor test, a stereoacuity test and a visual acuity test. Staff, working with the school boards and private schools, provide vision screening for eligible and consenting children. SWPH has approximately 2400 Senior Kindergarten students living in its geography every school year. The goal of this program is to identify potential visual abnormalities and refer students for appropriate follow up, thus providing the best opportunity for them to learn in school. In the event public and/or private schools are closed due to COVID – 19 outbreaks, vision screening staff have contingency plans in place to offer community-based visual health screenings (to replace school-based vision screening and surveillance).

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

- a) This program includes completion of 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 or targeted exclusion. This is accomplished by ensuring student records are up to date with Ontario's Publicly Funded Immunization Schedule.
- b) Staff offer immunization clinics in all publicly funded and private schools in SWPH's jurisdiction. School-based vaccination clinics ensure students have easier access to the vaccines required by the Immunization of School Pupils Act (ISPA). In the event public and/or private schools are closed due to COVID – 19 outbreaks, vaccine preventable disease staff have contingency plans in place to offer community-based immunization clinics (to replace school-based immunization clinics).

2021 General Program Budgets

SCHOOL HEALTH

School Health Highlights (continued):

4) Comprehensive School Health

In partnership and collaboration with local school boards and private schools, staff work to achieve the optimal health of school-aged children and youth. Traditionally, the staff team supports 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 Active and Safe Routes to School in partnership with Western University's Human Environments Analysis Laboratory (HEAL). In addition to delivering the mandated School Health Protocol requirements, SWPH received additional 100% provincial funding for the recruitment of an additional 9.0FTE PHNs to help focus on providing COVID – 19 supports to local schools and the school community. infection prevention and control (IPAC) guidance, screening and surveillance and case and contact management. The goal is to build a COVID – 19 defensive culture in each school and across our school communities. The additional nursing supports will provide SWPH's entire school health team with the required nursing human resources to deliver both comprehensive school health programming and focus on reducing/eliminating COVID risk in schools.

5) Healthy Smiles Ontario (HSO)

- a) This program provides preventative, routine, and emergency dental services for eligible children and youth 17 years of age and under from low-income households.

Staff delivers routine preventative dental services for eligible children in various clinical locations and facilitates enrollment to the appropriate HSO streams (HSO-Core, HSO-Emergency and Essential Services, and HSO-Preventative).

- b) Staff delivers oral health outreach services at many locations. These services include provision of preventative fluoride varnish services through a mobile bus to various locations including supportive housing complexes to reduce access barriers for families in need. Fluoride varnish programs are also offered in many licensed childcare settings throughout SWPH's region.

2021 General Program Budgets

SUBSTANCE USE AND INJURY PREVENTION

SUBSTANCE USE AND INJURY PREVENTION		
Program Name	2020 Budget	2021 Budget
Substance Use	130,467	125,352
Harm Reduction Program Enhancement *	300,000	326,999
Smoke Free Ontario	684,000	689,484
Road Safety	71,052	69,243
Falls Prevention	119,568	121,610
Total	1,305,087	1,332,688

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Substance Use and Injury Prevention Highlights:

1) Substance Use

- a) Staff will be working with its community partners on the activities set out in the Oxford County Community Drug and Alcohol Strategy, including a sharps management community engagement strategy. SWPH is also a member of the Elgin Community Drug and Alcohol Strategy and is supporting its ongoing development.
- b) Staff will be delivering the recommendations noted in our Alcohol Position Statement, including working in partnership with other public health units across the Province and area municipalities to identify local strategies that will help decrease the harmful effects of alcohol consumption.

2021 General Program Budgets

SUBSTANCE USE AND INJURY PREVENTION

Substance Use and Injury Prevention Highlights (continued):

2) Harm Reduction

- a) SWPH will engage clients of its needle exchange services to determine their level of satisfaction with overall experience, staff interactions, and access to supplies.
- b) The aim of the Ontario Naloxone Distribution program is to work with people with lived experience and to work with community partners to increase access to naloxone across the community. In collaboration with stakeholders and partners, staff will explore strategies for expanding naloxone access based on need. The number of naloxone kits distributed through SWPH has increased significantly over the last year and it is estimated that there is potential for more than 1000 kits to be distributed at needle exchange programs and through community partners in 2021.
- c) The Harm Reduction Program will continue to share timely information with community partners via the Opioid Monitoring Dashboard which includes information about what staff are hearing “on the ground” as well as statistics on opioid prescribing, naloxone distribution, paramedic calls, opioid overdose and drug-related emergency department visits, hospital admissions and opioid-related deaths.
- d) A local overdose response plan will be developed for SWPH.
- e) Staff will be collaborating with municipalities to provide an effective network of sharps disposal initiatives throughout SWPH’s region. SWPH will track the number of sharps retrieved, compare quantities of sharps per area, and continually assess potential locations for sharps bins. A health education strategy will also be used to promote information about safe disposal.
- f) Staff will work on enhancing harm reduction efforts in the community through advocacy and strategic planning for the adoption of safe supply, consumption and treatment services, health education, and stigma reduction in the region.

2021 General Program Budgets

SUBSTANCE USE AND INJURY PREVENTION

Substance Use and Injury Prevention Highlights (continued):

3) Smoke Free Ontario

- a) Promoting quit attempts among priority populations and providing tobacco/vaping cessation training and resources for the public and partners including pharmacists, Canadian Mental Health Association, Family Health Teams, Community Health Centres, hospitals, and schools.
- b) Staff will strive for 100% completion of regular vendor education and the required inspections inclusive of a minimum of 1 youth access inspection for each e-cigarette vendor and 1 display and promotion inspection for e-cigarettes.
- c) Work with partners including landlords, property managers, social housing providers, workplaces, school boards, and municipalities to create and or update policies and bylaws to reduce second-hand smoke and vapour exposure. In addition, provide education and awareness of the Smoke-Free Ontario Act and associated fines to partners and the public.
- d) Support for the creation of additional smoke-free Multi Unit Dwellings, smoke-free public places and proactive inspections of workplaces, sports fields etc.
- e) Community engagement activities, 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.
- f) Application of 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.

2021 General Program Budgets

SUBSTANCE USE AND INJURY PREVENTION

Substance Use and Injury Prevention Highlights (continued):

4) Road Safety

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

5) Falls Prevention

- a) Continue to collaborate with Oxford County partners to provide falls prevention education and falls risk assessment for older adults and offer best practice strategies and resources to decrease the risks.
- b) Continue to convene the Elgin St Thomas Age Friendly Advisory Group to exchange knowledge, track progress and collaborate to create system change. Explore the expansion of the Social Prescribing Program in Elgin and Oxford Counties to reduce loneliness and isolation in seniors.

2021 General Program Budgets

FOUNDATIONAL STANDARDS

FOUNDATIONAL STANDARDS		
Program Name	2020 Budget	2021 Budget
Emergency Management	50,300	63,181
Effective Public Health Practice	302,182	317,329
Healthy Equity (CNO, SDOH)	603,800	604,000
Population Health Assessment	270,849	268,900
Total	1,227,131	1,253,411

Foundational Standards Highlights:

1) Foundational Standards

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) Performing ongoing population health surveillance.
- b) Continuing to provide detailed information specific to programs and services to better support evidence-based planning and evaluation including analyses from latest Ontario Student Drug Use and Mental Health Survey.
- c) Supporting program and service planning by front-line staff including training, skill-building and guiding staff throughout the process.

2021 General Program Budgets

FOUNDATIONAL STANDARDS

Foundational Standards Highlights (continued):

- d) Supporting staff to incorporate evidence into their programs, services, and practices and to move from knowledge to action through leadership and consultation .
- e) Leading the development and implementation of the Southwestern Public Health program planning database to better support program and service planning across the Health Unit.
- f) Leading complex organizational level evaluations of Southwestern Public Health's COVID-19 response.
- g) Continuing to build capacity of front-line staff to incorporate health equity principles and practices into programs and services as opportunities present.
- h) Continuing to build SWPH's internal capacity to respond to public health emergencies including training, internal drills and tabletop exercises as appropriate.
- i) Supporting the emergency planning activities and exercises of municipal partners as able.
- j) Supporting the ongoing development of policies, procedures and practices that reflect continuous quality improvement principles.
- k) Continuing to manage SWPH's privacy legislation adherence.
- l) Continuing to build SWPH's capacity to incorporate ethical considerations into public health decision making.

2021 General Program Budgets

FOUNDATIONAL STANDARDS

Foundational Standards Highlights (continued):

2) 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 SWPH. In this capacity, the CNO is responsible for the following:

- a) Actively participating in Ontario Public Health Nursing Leadership initiatives that address public health modernization, onboarding of school health nurses in response to Ministry funding opportunities.
- b) Consulting on nursing practice issues as they arise and contributing to the development of practices found on evidence.
- c) Coordinating nursing student placements in partnership with human resources.
- d) Supervising continuous quality improvement program development with a continued focus on documentation.

3) Social Determinants of Health Initiative

- a) Sustaining focused health equity initiatives within a COVID-19 context with a particular focus on housing and the public health impacts of COVID-19 interventions in 2021.
- b) Continuing to build the internal capacity of front-line staff to incorporate health equity principles and practices into their programs and services.

2021 General Program Budgets

CHRONIC DISEASE PREVENTION AND WELL-BEING

CHRONIC DISEASE PREVENTION AND WELL-BEING		
Program Name	2020 Budget	2021 Budget
Built Environment	315,115	327,892
Healthy Eating Behaviours	198,295	199,660
Physical Activity & Sedentary Behaviour	108,629	96,637
Substance Prevention	108,827	118,578
Suicide Risk & Mental Health Promotion *	53,168	23,910
Healthy Menu Choices Act Enforcement	24,100	7,725
Total	808,134	774,402

* Note: dollar differences between 2020 and 2021 do not necessarily reflect a decrease in programming or staffing. Sometimes it is a reallocation and sometimes it is a different person with a different salary than who was charged to that program last year.

Chronic Disease Prevention and Well-Being Highlights:

1) Healthy Communities

- a) In 2021, staff will provide population health data and evidence informed suggestions for municipalities to consider in the review of their official plans. We will convene the Healthy Communities Partnership to facilitate knowledge translation, to provide letters of support and to seek out potential funding opportunities to advance healthier public policies.

2) Healthy Eating Behaviours

- a) Use the Nutritious Food Basket (NFB) survey tool to monitor the cost and affordability of healthy eating within the SWPH region. Local NFB data will support local and provincial work in educating stakeholders and the population on the impacts of food insecurity in the SWPH region, including advocacy for poverty reduction and income inequality.

2021 General Program Budgets

CHRONIC DISEASE PREVENTION AND WELL-BEING

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

- b) The Food for All committee, Ontario Dietitians in Public Health Food System Workgroup and the Elgin St. Thomas Coalition to End Poverty will engage in multisectoral collaboration with community leaders and partners to collaborate on the implementation and delivery of programs/initiatives/policies to support sustainable food systems and advocate for Health Equity related policies with advocacy related to poverty and income..
- c) Initiatives such as the Good Food Box, Elgin Gleaners and the Food Access Guides increase access to nutritious food within the SWPH region. Support, evaluate, monitor and expand existing food access programs within the SWPH region. Assess community needs to develop at least 1 new food access initiative within the SWPH region.

3) Substance Prevention

- a) Working with partners, including school boards, community organizations, and workplaces to denormalize legal substances, implement substance policies, and increase awareness of health risks. In addition, highlight protective factors caregivers can apply in their everyday life to prevent or delay substance use in youth.
- b) To participate, collaborate and work on local community initiatives and priorities to delay and prevent substance use by using locally relevant data, strategies and activities.

4) Suicide Risk and Mental Health Promotion

- a) A situational assessment will be completed in Q1 2021 to determine where our efforts should be focused. Mental Health Promotion is a foundational component of public health and the community we serve. Our interventions will reduce the stigma of mental health and increase resident and community stakeholder knowledge of the factors that promote positive mental wellness in our workplace.

2021 General Program Budgets

CHRONIC DISEASE PREVENTION AND WELL-BEING

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

5) Healthy Menu Choices Act Enforcement

- a) SWPH will inspect all new premises within one year of opening. All premises that are non-compliant on initial inspection will be re-inspected until compliance is achieved.

6) Physical Activity and Sedentary Behaviours

- a) Public health will work with its regional and local partners to deliver the Act-i-Pass Program. The Program provides free recreation programs to grade 5 students in the Thames Valley District and London District Catholic School Boards.
- b) SWPH will continue to encourage physical activity and reduce sedentary behaviour among adults by promoting the use of new trails, by targeting workplaces and by integrating messages about how to easily meet the new 24-hour movement guidelines.

2021 General Program Budgets

SUPPORTING COSTS

SUPPORTING COSTS		
Program Name	2020 Budget	2021 Budget
Salaries	1,471,086	1,834,891
Benefits	529,823	755,558
Facilities	1,361,455	1,384,045
Office Management	194,782	229,930
Corporate Services	859,050	951,422
Board of Health	35,700	31,200
Total①	4,451,896	5,187,047
① Costs include costs for general 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.
- 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; updating of 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 governance, board and committees, policy development, accountability and target monitoring, finance, information technology, human resources, communications, office management, and staff committees/working groups to support program delivery and compliance. This also includes oversight of 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.

2021 General Program Budgets

SUPPORTING COSTS

Supporting Costs Highlights (continued):

- 3) Due to program and services evolution, this area includes increases in staffing support to programs and services, in the areas of emergency preparedness, information technology (includes electronic privacy matters and implementation of new virtual and electronic service delivery methods), communications coordination and additional administrative support.
- 4) SWPH commenced collective agreement negotiations with the Canadian Union of Public Employees (CUPE) which began mid way through 2020. Negotiation of a consolidated collective agreement between the parties is anticipated to extend into 2021 with potential settlement and retroactivity of monetary proposals.

2021 General Program Budgets

	2020 Budget	2021 Budget
Total General Programs	16,230,957	16,840,025



100% Provincially Funded Programs

2021

Budget and Highlights

Included:

*Ontario Seniors' Dental Care Program
Pre and Post Natal Nurse Practitioner Program
Healthy Babies Healthy Children
Medical Officer of Health Compensation Initiative
Covid-19: School Focused Nurses Initiative*

2021 Budget – 100% Provincially Funded Ontario Seniors’ Dental Care Program

Ontario Seniors' Dental Care Program		
Program Name	2020 Budget	2021 Budget
Ontario Seniors' Dental Care Program	901,300	901,300
Total	901,300	901,300

Ontario Seniors’ Dental Care Program Highlights:

The revised Oral Health Protocol, 2019 includes the new Ontario Seniors’ Dental Care Program (OSDCP) as a core element of the revised Protocol.

- a) The Ontario Seniors’ Dental Care Program’s goal is to support awareness of, access to, and utilization of the program to ensure eligible seniors ages 65 + are out of dental-related pain and increasing their overall quality of life.
- b) SWPH’s program activities include promotion of the program, system navigation, increasing awareness of the program among community partners, providing oral health clinical treatment (preventive and restorative procedures in accordance with the program’s Service Schedule), and the establishment of a dental home.
- c) SWPH Oral Health Team staff also utilize referral networks and pathways in order to assist eligible seniors and their families in securing appropriate healthcare as needed.
- d) Oral health clinics will continue in operation, providing COVID-19 Ministry directives allow.

2021 Budget – 100% Provincially Funded Pre and Post Natal Nurse Practitioner Program

Pre and Post Natal Nurse Practitioner Program		
Program Name	2020 Budget	2021 Budget
Pre and Post Natal Nurse Practitioner Program	139,000	139,000
Total	139,000	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 Low German-speaking 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. Approximately 750 patients are seen annually through this program.

2021 Budget – 100% Provincially Funded Healthy Babies Healthy Children

HEALTHY BABIES HEALTHY CHILDREN		
Program Name	2020 Budget	2021 Budget
Healthy Babies Healthy Children	1,653,539	1,653,539
Total	1,653,539	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, through referrals to community programs and services, and by providing information and supports for parents. The range of available supports includes home visiting by a Public Health Nurse and a trained lay home visitor for families with a child at risk. Approximately 4,800 home visits are completed annually to support families in achieving their goals for healthy child growth and development in the SWPH region.

2021 Budget – 100% Provincially Funded Medical Officer of Health Compensation Initiative

MEDICAL OFFICER OF HEALTH (MOH)		
Program Name	2020 Budget	2021 Budget
Medical Officer of Health	157,617	169,576
Total	157,617	169,576

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 medical officer of health positions.

2021 Budget – 100% Provincially Funded Covid-19: School Focused Nurses Initiative

COVID-19: SCHOOL FOCUSED NURSES INITIATIVE		
Program Name	2020 Budget	2021 Budget
School Focused Nurses Initiative		904,500
Total	-	904,500

COVID-19: School Focused Nurses Initiative Highlights:

1) School Focused Nurses

- a) The province provides Boards of Health with 100% dedicated funding for school-focused nurses in public health units to provide rapid-response support to schools and boards in facilitating public health and preventive measures, including screening, testing and mitigation strategies.
- b) SWPH received up to 9 FTE nursing equivalents to support the existing 6.5FTE nurses currently on the school health team. In total, SWPH has 15.5FTE public health nurses dedicated to delivering both the School Health Protocol mandate and meeting the expectations of the province with respect to managing COVID in the school community.
- c) Funding for this initiative, at this time, is for the school year of 2020-2021 but SWPH predicts this funding will be extended for a second school year.

2021 General Program & 100% Provincially Funded Budgets

TOTAL COST OF ALL BUDGETS		
Program Name	2020 Budget	2021 Budget
Total cost of all budgets	19,082,413	20,607,940
Total	19,082,413	20,607,940



One-Time Funding Request 100% Provincially Funded

2021 Budget and Highlights

Included:
Public Health Inspector Practicum Program
Needle Exchange Program
Covid-19 Specific Costs

One-Time Funding Request 100% Provincially Funded

Project Title: Public Health Inspector Practicum Program

PUBLIC HEALTH INSPECTOR PRACTICUM PROGRAM		
Program Name	2020 Budget	2021 Budget
Public Health Inspector Practicum Program	10,000	10,000
Total	10,000	10,000

Public Health Inspector Practicum Program Highlights:

- a) To provide a practicum for one student who is enrolled or who already has a degree in a program of instruction approved by the Canadian Institute of Public Health Inspectors (CIPHI) Board of Certification (BOC).
- b) 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.
- c) 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. SWPH has staff who can coach and mentor student PHI candidates in preparation for their BOC exam for the duration of the 12-week practicum.

One-Time Funding Request

100% Provincially Funded

Project Title: Needle Exchange Program Highlights

NEEDLE EXCHANGE PROGRAM		
Program Name	2020 Budget	2021 Budget
Needle Exchange Program	19,100	19,100
Total	19,100	19,100

Needle Exchange Program Highlights:

- a) Due in part to the ongoing opioid crisis, demand for sterile harm reduction equipment is on the rise in SWPH's region. It is important that SWPH continues to meet this growing demand in order to prevent the transmission of HIV, Hepatitis B and Hepatitis C infections.
- b) As part of this strategy, SWPH is collaborating with Regional HIV/AIDS Connection and Addiction Services of Thames Valley to facilitate the distribution and collection of harm reduction supplies via a mobile outreach program. Additionally, the implementation of a community sharps disposal strategy is planned for 2021, with the goal of increasing the rate of syringe returns. To support this, several new community disposal kiosks will be installed in 2021.

One-Time Funding Request 100% Provincially Funded

Project Title: COVID-19 Specific Costs

COVID-19 Specific Costs		
Program Name	2020 Budget	2021 Budget
Covid-19 Specific Costs	-	2,195,900
Total	-	2,195,900

COVID-19 Specific Costs:

- a) To reduce the incidence rate of COVID 19, Southwestern Public Health will require additional staffing to run mass immunization clinics to immunize eligible people in vulnerable populations with COVID019 vaccine. Public health will work in collaboration with community partners to coordinate distribution and to administer COVID-19 vaccine. The number of clinics, venues, and COVID 19 vaccine parameters will determine how this immunization program will be implemented. The storage and distribution of the vaccine will play a key role in the management of the clinics to maintain the standardization of the identified product.
 - Part of the distribution and administration of the vaccine includes the need for public health nurses, registered practical nurses, supervisory support, clerical support, information technology support.
- b) In order to maintain existing or slightly elevated needs with respect to COVID-19 response, case and contact management, additional resources including public health nurses, health promoter, public health inspector, managerial support, and clerical support is needed.
- c) Building a COVID-19 defensive culture with an IPAC focus; including education, training, and building a community of practice.