



*Algoma*  
**PUBLIC HEALTH**  
Santé publique Algoma

**MEDICAL OFFICER OF HEALTH/CHIEF EXECUTIVE OFFICER  
BOARD REPORT**

**June 2016**

**Prepared by Tony Hanlon Ph.D., CEO and Dr. Penny Sutcliffe, MOH**



Elliot Lake Mayor Marchisella and MPP Michael Mantha for Algoma-Manitoulin joined APH Board Chair Lee Mason in cutting the ribbon at the official grand opening of the new Elliot Lake office on May 25<sup>th</sup>, 2016.

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## **APH AT-A-GLANCE**

On June 8, 2016 all staff participated in our **Annual Staff Day**. District offices were closed and staff travelled to Sault Ste. Marie. This year's main speaker Cindy Pinkus, LL.B. addressed the topic of varying characteristics of a multi-generational workforce. The goal was to better understand the differences in expectations and lifestyles across the generations so that we can communicate and work together more effectively. The Leadership Management Team met with Ms. Pinkus later in the afternoon after her morning and early afternoon presentations to all staff to discuss managing a multi-generational employee group.

An update on the APH Strategic plan was also presented and Long Service Awards were also presented to 49 staff ranging from 5 to 35 years of public health service!

In response to the needs of local food banks and soup kitchens across the district, APH staff organized a food drive from May 30-June 3. A total of 290 items were collected and \$160.00 was donated on behalf of Algoma Public Health.

Algoma Public Health will be hosting a STOP on the Road workshop in Sault Ste. Marie June 27<sup>th</sup> for clients who are interested in quitting smoking. The workshop includes a one hour educational session facilitated by TEACH trained staff as well as 5 weeks of Nicotine Replacement Therapy, free of charge. We will also be launching a marketing initiative to support our Smoking Reduction Campaign (5% over 5years) that involves social media and radio ads. We will be tracking the effectiveness of this initiative.

## PROGRAM HIGHLIGHTS

### **CHILD HEALTH**

**Director:** Laurie Zeppa

**Manager:** Hannele Dionisi

**Topic:** Young Parents Connection

**This report addresses** Child Health requirement #4 of the Ontario Public Health Standards (2014)

Requirement #4: The board of health shall work with community partners, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies and the creation or enhancement of supportive environments to address: Positive parenting; Breastfeeding; Healthy family dynamics; Healthy eating, healthy weights, and physical activity; Growth and development; and Oral health

**This report addresses** the following Strategic Directions:

- Improve Health Equity
- Collaboration Effectively

Algoma Public Health would like to acknowledge 10 successful years of a community based partnership program in Sault Ste. Marie. The Young Parents Connection (YPC) is a teen parenting program that began in 2006 in order to address identified gaps in prenatal and parenting programs for young people.

A key factor in the ongoing success of this program is the collaboration of the consistent partners including Ontario Works, YMCA, Red Cross, Children's Aid Society, Child Care Algoma/Best Start Hub, Pregnancy Centre, Algoma District School Board, Women and Crisis and Algoma Public Health. The program is funded through a combination of financial and in-kind supports. The program's success has been highlighted throughout the years at various provincial conferences.

Young Parents Connection's target population includes Ontario Works Learning Earning and Parenting participants (LEAP) and all teens up to and including the age of 25 years that are pregnant and/or have a child. YPC assists participants with completing the parenting component of the LEAP program. The outcomes of this program align with the Ontario Public Health Standards, Child Health mandates and strategic directions of Algoma Public Health. The program is well attended with an average of 25-30 participants per week.

YPC program calendar year runs September through November and January until the end of April. Each week the young parents have the opportunity to participate in the following programs; Prenatal, After the Birth, Toddler, Fatherhood, and LEAP Community Kitchens. Throughout the calendar year, special group presentations are offered for all parents such as Triple P Positive Parenting, healthy relationships, oral health, and smoking cessation. Every week a meal is provided along with child minding and transportation home.

Moving forward, the Young Parents Connection will be relocating its program from YMCA to Algoma Public Health in the fall of 2016. The change in venue will allow for improved internal referral process, advancing the delivery of the programs, provide a welcoming environment with additional space and provide participants with a connection to Sault College and promote positive steps in engaging the young parents to continue their studies in post-secondary education.

## **COMMUNITY MENTAL HEALTH**

**Director: Laurie Zeppa,**

**Manager, Community Mental Health Program: Jan Metheany**

**Topic:** Housing as a Determinant of Health

**This report addresses** the following requirements of the Ontario Public Health Standards (2014) or Program Guidelines/ Deliverables: MOHLTC- Supportive Housing

**This report addresses** the following Strategic Directions: Improve Health Equity

Housing a Social Determinant of Mental Health

In 1986, the World Health Organization's Ottawa Charter for Health Promotion recognized shelter as a basic prerequisite for health, but it is only recently that researchers have focused on housing as an important determinant of health for all – more plainly, it has big impacts on health. The determinant of health goes beyond just having housing but rather has been attributed to three major dimensions of housing. The material dimension includes the condition of a home, its state of repair, plumbing, electricity, safe drinking water, insulation, fire prevention, heating, flooring, furnishings, and exposure to physical, biological or chemical contaminants such as pests, allergens and mold.

The Meaningful dimensions of housing refer to one's sense of belonging and control and safety in one's own home. These meaningful dimensions provide surface for the expression of self-identity, and represent permanence, stability and continuity in everyday life. Spatial dimensions of housing refer to a home and its immediate environment, for example, the proximity of a home to services, schools, public recreation, health services and employment. This dimension is particularly important when considering the remoteness of communities in Northern Ontario. An example of the importance of the interplay of all three dimensions of housing on both physical and mental health, we need only to look at many of our First Nations Communities in Northern Ontario, which often fall short across all three of these housing dimensions, and the impacts on community health have been identified.

Housing has also become central in policy and programs to help people living with mental illness, or people with addictions, to lead stable lives. Housing that is too costly leads people to spend less on food and nutrition and recreation; worries about rent or eviction or neighbors can lead to high stress; unstable housing – or worse, homelessness – puts all the rest of life on an unstable footing. In addition, decades of international research has demonstrated that recovery from mental illness and addictions cannot happen if people do not have adequate housing. For the reasons noted above, a number of National and Provincial advisory panels working toward better mental health outcomes have focused on building improved safe, affordable and supportive housing options. For example, housing and homelessness form one of four main pillars in the government's Poverty Reduction Strategy. The Strategy emphasizes stable, affordable housing to meet the needs of homeless people with mental health issues or addictions and is promoting the use of "housing first" approaches. Housing first models highlight the need for ensuring housing first before an individual is able to address other psychosocial issues which may have created barriers to securing and maintaining housing in their past. In addition, Ontario's Mental Health and Addictions Strategy also acknowledges housing as one of the main elements in healthy and inclusive communities, which fosters better mental health; it recognizes the importance of providing housing options for people in shelters and hospitals, and includes housing with supports in its action steps. Local Health Integration Networks (LHINs) are also increasingly realizing the importance of housing.

Algoma Public Health's Community Mental Health Support Services (APH-CMHSS) has been providing several mental health and addiction housing support programs since 2001. Currently the program is providing rent subsidy to approximately 130 individuals living with mental health or addiction issues throughout the district. Additionally, 73 individuals are receiving special housing supports within their homes. The program also offers a semi-supported group home, Elgin place (SSM), and a new semi-supported group home is scheduled to open in August 2016, assisting another 6 individuals (SSM). This is certainly a time of opportunity for building a strengthened mental health & addiction supportive housing continuum locally, and APH-CMHSS continues to play a very active role in collaborating with many community partners and key stakeholders in planning, establishing, implementing, and supporting social & supportive housing initiatives throughout the district.

## **ENVIRONMENTAL HEALTH**

**Director:** *Sherri Cleaves*

**Manager:** *Jonathon Bouma,*

**Topic:** Food Safety Program

**This report addresses** Environmental Health Program Standard Food Safety Requirement # 3 of the Ontario Public Health Standard.

Requirement #3: The board of health shall report Food Safety Program data elements in accordance with the Food Safety Protocol, 2008 (or as current).

**This report addresses** the following Strategic Directions: Be accountable

The Food Safety Protocol requires health units to focus on the following items:

- 1) Surveillance and inspection of food premises;
- 2) Epidemiological analyses of surveillance data;
- 3) Food handler training and certification; and

Have timely response to:

- a) Reports of food -borne illnesses or outbreaks;
- b) Unsafe food-handling practices, food recalls, adulteration and consumer complaints; and
- c) Food-related issues arising from floods, fires, power outages or other situations that may affect food safety.

High risk food premises are defined as those that handle hazardous foods and have numerous steps in preparation, they are required to be inspected three times per calendar year. Medium risk food premises have limited menus and less processing and are inspected two times per year. Low risk premises usually have limited food handling and are inspected once per year.

In 2015, Public Health Inspectors conducted 1158 **inspections** of food premises across the district. In 2015 the following number of inspections and compliance rates were attained:

High Risk Premises had 436 inspections conducted resulting in a 97% compliance rate;  
Medium Risk Premises had 385 inspections conducted resulting in a 93% compliance rate;  
Low risk Premises had 234 inspections conducted resulting in a 92% compliance rate.

APH also completed 103 **seasonal inspections** in these various categories. Seasonal inspections are done on premises that are closed during part of the year such as lodges, fly in camps and ski hills.

A significant amount of work is also focused on reviewing and approving **temporary food premise applications**. Inspection of the larger venues such as the Mill Market and Passport to Unity are done to ensure that food being offered at these events is sourced, prepared and served following safe food handling practices.

**Food handler training** and certification is a priority to educate those who will be in direct contact with the public to do it safely. APH hosted 27 training sessions and certified 556 food handlers in 2015.

**Food recalls** are conducted with provincial and federal partners to respond to emerging issues such as the large Listeria outbreak in 2015/16.

**Promotion** and education regarding food safety is achieved through media campaigns and use of billboards to promote our website: *Dining Out then Check us Out*. We also promote videos and Facebook messages with seasonal food safety messages such as cooking turkey properly to correct internal temperature at Thanksgiving.

### **INFANT CHILD DEVELOPMENT AND PRESCHOOL SPEECH AND LANGUAGE PROGRAM**

**Director: Sherri Cleaves**

**Manager: Leslie Wright**

**Topic:** Psychological Assessment

**This report addresses** Child Health Requirement #8 of the Ontario Public Health Standards.

Requirement #8: the board of health shall provide, in collaboration with community partners, outreach to priority populations to link them to information, programs and services.

**This report addresses** the following Strategic Directions: Collaborate Effectively

Since 2012 Dr. Yolanda Korneluk has been coming to Sault Ste. Marie to provide assessments to children to determine if the child meets the diagnostic criteria for a developmental disability, such as Autism or Intellectual Disability. Access to diagnostic assessments is essential in order to ensure that children are able to receive appropriate interventions and support.

Dr. Korneluk works for Emerging Minds in Ottawa. Emerging Minds provides assessment and intervention services for children with autism and other developmental and learning challenges. She comes to Sault Ste. Marie about four times per year for two weeks at a time to assess children in Algoma from our Infant Child Development and occasionally our Preschool Speech and Language Programs.

She is a registered member of the College of Psychologists of Ontario and uses various standardized tests to assess cognitive skills and adaptive functioning in order to evaluate symptomology and to provide recommendations for treatment. She assesses approximately 60 children per year from the Algoma District.

It is through the generosity of Community Living Algoma (CLA) we are able to provide this service. During her time in SSM Dr. Korneluk will assess clients from both APH and CLA and CLA pays for her services. APH provides the venue and the assistance of a Parent Child Advisor to help with scheduling and support.

This service is a tremendous help to our clients as some agencies will not accept clients unless they have a diagnosis which will delay intervention. We support the collaboration with Dr. Korneluk and CLA so the children in Algoma can access community services that specialize in providing services to children with Autism Spectrum Disorder or other developmental needs.

## **PARTNERSHIPS**

Dr. Sutcliffe, M.D. and Dr. Hanlon, Ph.D. attended the annual alPha conference on June 5-7, 2016 in Toronto. The main topics included the annual business meeting and election of alPha board of directors, passing of resolutions (Change to Quorum in alpha Constitution, Amending ALPha Resolution Submission Guidelines, Supporting Public Health with Federal, Provincial Municipal Infrastructure Programs, Legislation to Enforce Infection Prevention and Control practices within Invasive Personal Service Settings and Funding Healthy Children program at 100%), and partnering with LHINs as well as updates from the Minister, CMOH and ADM. Dr. Penny Sutcliffe has been elected the new Chair for the Council of Ontario Medical Officer of Health (COMOH) for the 2016/2017. COMOH is a committee of the Association of Local Public Health Agencies (alPha) Congratulations!

The APH Leadership Team participated in a two day Leadership Development Workshop sponsored by SAH which focused on developing and maintaining financial acumen across an organization. Dr. Hanlon and Justin Pino also delivered a presentation overviewing public health and APH programs and services. We greatly appreciate SAH inviting us to participate in their LDI program as it is not only cost effective professional development but creates opportunities for networking with our hospital colleagues.

Respectfully submitted,  
Tony Hanon, Ph.D., CEO and Dr. Alex Hukowich, Associate MOH