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Strategic Plan & Directions

▶ Vision

Everyone has the opportunity for health and well-being.

Mission

Wellington-Dufferin-Guelph Public Health uses an innovative approach to deliver evidence-informed programs and services to meet the distincitve needs of our communities.

▶ Mandate

The Province of Ontario mandates Wellington-Dufferin-Guelph Public Health to provide programs and services that prevent disease, protect health and promote the well-being of individuals.

Values

- Advocacy: Public Health advocates for policies and strategies that improve the health and well-being of people where they live, learn and play.
- Engagement: Public Health builds and maintains meaningful relationships with clients and stakeholders for the well-being of the communities we serve.
- **Excellence**: Public Health is committed to the delivery of high quality, evidence-informed programs and services.
- Respect: Public Health is dedicated to providing an inclusive environment that respects diversity.
- Transparency: Public Health is accountable and fiscally responsible to staff, communities and partners.

2016-2020 Strategic Plan

Wellington-Dufferin-Guelph Public Health helps people stay well. As an essential part of the healthcare system, we are committed to the health and well-being of the communities we serve. Our Strategic Plan establishes priorities, guides decision-making, aligns resources and inspires staff.

Strategic Directions

Our strategic directions provide the framework for our day-to-day work. We have selected four priorities that will transform our vision, mission, mandate and values into action.

Health Equity

We will provide programs and services that integrate health equity principles to reduce or eliminate health differences between population groups.

Organizational Capacity

We will improve our capacity to effectively deliver public health programs and services.

Service Centred Approach

We are committed to providing excellent service to anyone interacting with Public Health.

► Building Healthy Communities

We will work with communities to support the health and well-being of everyone.



2019 Board of Health Members

George Bridge (Chair)

Councillor, County of Wellington; Mayor, Town of Minto Representing County of Wellington

Allan Alls

Councillor, County of Wellington; Mayor, Town of Erin Representing County of Wellington

Chris White (Secretary-Treasurer)

Councillor, County of Wellington; Mayor, Township of Guelph-Eramosa Representing County of Wellington

Christine Billings

Councillor, City of Guelph Representing City of Guelph

June Hofland

Councillor, City of Guelph Representing City of Guelph

Rodrigo Goller

Councillor, City of Guelph Representing City of Guelph

Guy Gardhouse

Councillor, County of Dufferin; Mayor, Township of East Garafraxa Representing County of Dufferin

Nancy MacDonald (Vice-Chair)

Provincial Appointee
Representing County of Wellington

Ralph Manktelow

County of Dufferin Citizen Appointee Representing County of Dufferin

Dr. Nicola Mercer (Ex-Officio Member)

WDG Public Health, MOH & CEO Representing WDG Public Health

Lambert Otten

Provincial Appointee
Representing County of Wellington

Message from Dr. Mercer

Medical Officer of Health & CEO

As Medical Officer of Health and CEO of Wellington-Dufferin-Guelph Public Health, I am pleased to share our 2019 Community Report. It seems strange to try and look back on 2019 without the impact of COVID-19 colouring everything. Even though our focus has shifted dramatically in 2020 to the global COVID-19 pandemic, 2019 was an active and exciting year for WDG Public Health in ensuring residents had the information and programs to stay well.

Today, much of the work of Public Health has been dedicated to our community response to COVID-19. Public Health is using its website and social media platforms to get accurate information to community partners, members of the public and the media. At the same time, most staff have been redeployed to manage outbreaks and to undertake the very necessary steps of managing positive cases in our area and tracing contacts of cases to ensure we can slow the transmission of the virus.



Dr. Nicola Mercer
Credit: Guelph Mercury Tribune

Much of the vital work we were doing in 2019 carries on as essential services in 2020. Providing necessary vaccines, inspecting food vendors and public service settings, managing outbreaks of other diseases in long-term care and retirement homes, investigating if someone has been exposed to rabies or working to keep individuals safe from West Nile virus and Lyme disease are all examples of essential Pubic Health activities that are continuing during the COVID-19 pandemic.

You will find information about all these activities in the 2019 Community Report. It also includes highlights of many other activities, that have been deferred in 2020 because of COVID-19 and that we look forward to resuming when the pandemic is over.

Public Health is an integral part of the local health care system and no matter what unexpected future events may occur which impact the health or wellbeing of our communities, we will continue to work together with our Ontario Health Team partners, municipal governments and broader community organizations to benefit every individual who lives or visits Wellington County, Dufferin County or the City of Guelph. This pandemic has shown that together we are strong, organized and we can make a difference in the health of our community.

Message from George Bridge

Chair of the Board of Health

As Chair of the Board of Health for Wellington-Dufferin-Guelph Public Health, I can honestly say 2020 has been an eventful year as we face the global COVID-19 pandemic in our communities. The work we are doing today to combat the spread of the virus is based on a solid foundation of community partnerships. These partnerships are not new. You can see them reflected throughout the work of Public Health in 2019.

With the challenges facing all of us in 2020, Public Health remains focussed on improving the lives of residents in communities throughout Wellington, Dufferin and Guelph. This work is informed by unique local data that reflects the health realities of each of the communities in our urban/rural mix. This focus on local needs is essential to our fight against COVID-19 and all the other services provided through the hard work and commitment of the staff at WDG Public Health.

The Board of Health is made up of appointed community

George Bridge

members, municipal councillors and mayors who provide

financial oversight and ensure that the resources, facilities and

staff are available to provide the many commitments that legislation requires WDG Public Health
to deliver to residents. The work of my board colleagues is driven by a shared commitment to
the well-being of our constituents and neighbours.

Public Health's role is different from most other healthcare providers. By protecting the health of individuals, families and communities, and by promoting healthy behaviours, all residents can live healthier lives regardless of their circumstances.

Public Health professionals have been doing this work in local communities for almost a century. By understanding our local histories we can make the best decisions about the future.

This report reflects this commitment through the programs and services delivered in 2019 and will continue to inform our role as a local Board of Health as we face the new challenges ahead.



Dr. Matthew Tenenbaum Appointed Associate Medical Officer of Health

In January 2019, Christine Elliot, Deputy Premier and Minister of Health, confirmed the appointment of Dr. Matthew Tenenbaum as Associate Medical Officer of Health for Wellington-Dufferin-Guelph Public Health.

Ensuring continuity of care in local communities is key to preventing disease and injury and will help the overall health system perform better by helping people stay well.

WDG Public Health will be better able to meet the needs of the growing communities in our area with the addition of Dr. Tenenbaum, who will have the authority to assume the medical responsibilities of the Medical Officer of Health should Dr. Nicola Mercer be unavailable.

Prior to joining Public Health, Dr. Tenenbaum worked for several years as a family physician in Hamilton. He recently completed his residency in Public Health and Preventive Medicine at McMaster University, during which he spent time at several health units in southern Ontario, including WDG Public Health.

"The work of Public Health is so diverse. From harm reduction services and public clinics to supporting local parents and children, from inspections of food establishments and tattoo studios to working with local municipalities this work is particularly exciting and fulfilling," said Dr. Matthew Tenenbaum. "I am so thankful for the warm welcome I have received from everyone here and I look forward to working with all the programs to ensure our clients and local residents benefit from all we do."



Dr. Matthew Tenenbaum

Funding

The 2019 total operating budget for Wellington-Dufferin-Guelph (WDG) Public Health was \$27,597,773. \$27,597,773

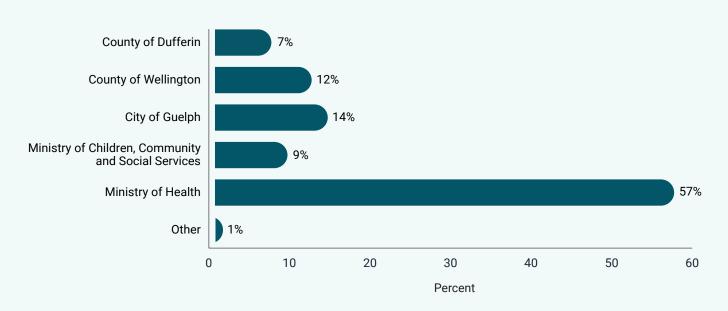
Total Operating Budget

Public Health receives funding from multiple sources:

- The Province of Ontario provides funding through the Ministry of Health and the Ministry of Children, Community and Social Services. In 2019, the Province of Ontario provided funding for 66 percent of the total operating budget.
- The municipalities of Wellington, Dufferin and Guelph provide funding based on the population of each municipality relative to the total population of the region. Population numbers are determined by the most recent Census. In 2019, the County of Wellington contributed 12 percent of the total operating budget, the County of Dufferin contributed 7 percent and the City of Guelph contributed 14 percent.

As a publicly funded organization, Wellington-Dufferin-Guelph Public Health reports under the accounting standards of the Public Sector Accounting Board (PSAB). The financial statements are subject to an audit by an external audit firm as outlined in *The Municipal Act*. The full audited financial statements for the year can be found at wdgpublichealth.ca.

2019 WDG Public Health Funding Sources





Restoring Smiles to Seniors Through Dedicated New Dental Care Program

Introducing the Ontario Seniors Dental Care Program

Oral health care options are limited for low-income families. Yet, oral health is just as important a contributer to overall physical and mental health or social well-being in adults as it is in children. WDG Public Health is dedicated to providing oral health care to seniors.

With oral health being an important determinant of health across the lifespan, Wellington-Dufferin-Guelph Public Health has launched an innovative program providing preventative and restorative services to older adults through the new Ontario Seniors Dental Care Program.

According to data from the Canadian Community Health Survey, only 31% of Wellington-Dufferin-Guelph residents age 65 years or older have access to dental insurance.



About the Program

After receiving \$869,100 through OSDCP, WDG Public Health is dedicated to providing services to older adults, in addition to those offered to children through the Healthy Smiles Ontario program (page 26).

The program supports more equitable access to oral health care for older adults in the WDG region and leverages lessons learned from the Healthy Smiles Ontario program. The OSDCP program also provides oral health promotion, education, and system navigation services to eligible seniors.

Examinations and preventative (hygiene) services are delivered at WDGPH offices in Guelph (at the Chancellors Way location) and Orangeville using registered dental hygienists. Restorative dental care services are delivered by dentists working at the Guelph and Orangeville offices.

Seniors are eligible to receive services under the OSDCP if they:

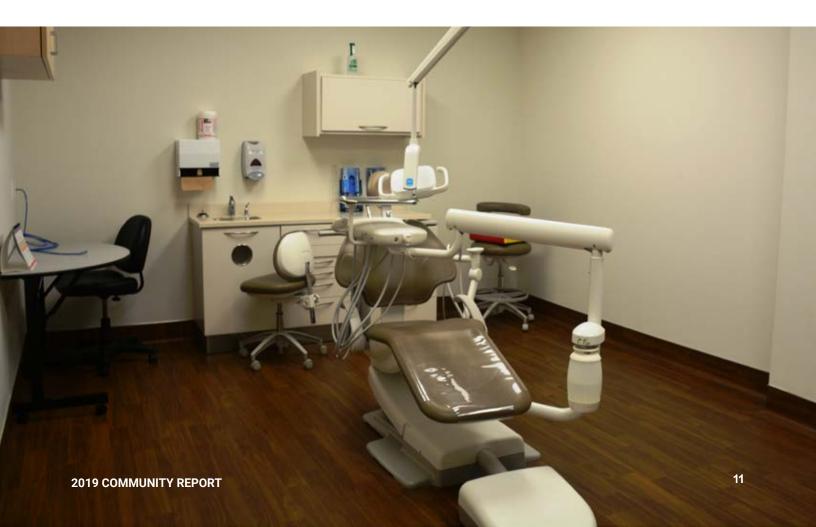
- Are 65 years of age or older;
- Are residents of Ontario;
- Meet Ministry-specified income eligibility thresholds (less than \$19,300 after tax for single seniors, or less than \$32,300 combined after tax for senior couples); and
- Have no access to any private or public dental benefits (including through the Ontario Disability Support Program or Ontario Works).

Eligibility is managed by the Ministry.

The OSDCP delivers a "basket" of dental care services based on a schedule developed by the Ministry. These services include:

- Examinations/assessments:
- Preventive services, including polishing, fluoride, sealants and scaling;
- Restorative services, such as temporary fillings, permanent fillings and crowns;
- Radiographs;
- Oral surgery, to remove teeth or abnormal tissue;
- Anaesthesia;
- Endodontic services (e.g. root canals) to treat oral infections and pain;
- Periodontal services to treat gum disease and other conditions; and
- Prosthodontic services, including manufacture and fitting of dentures, with a 10% client copayment.

Specialist services (including oral surgery, prosthodontic, endodontic, and periodontic services) will be delivered by community partners on a referral basis.



Cannabis Education

WDG Public Health led an education and awareness campaign based on survey data about local cannabis use. Building upon federal and provincial campaigns, the education and awareness activities that WDG Public Health is involved with hopes to increase our understanding of cannabis through public education to support youth and adults to make informed decisions.

Key Cannabis facts shared in 2019

- 1. Cannabis retail stores that limit youth access to cannabis may not reduce cannabis use among youth. Well-regulated and managed retail stores can make it difficult for youth to purchase cannabis legally; however:
 - In jurisdictions with retail cannabis stores, such as Washington State, underage youth report that they are still able to purchase cannabis at retail stores.
 - Youth can access cannabis by stealing it from adults who have legally purchased it, or when those adults choose to share the cannabis with youth.
 - Robust black markets continue to exist in places like Colorado and Washington State.
 - In general, greater retail access to alcohol and tobacco increases their use among youth, and we would expect the same to apply for cannabis.
- **2.** Edible cannabis products carry a different set of risks than smoked or vaped cannabis. Edibles are now permitted for sale under the *Cannabis Act*, however their risks may not be as well understood. These include:
 - A greater risk of cannabis intoxication, since there is a risk of consuming too much before the effects of edibles begin to be felt (which can take up to two hours).
 - A risk of accidental ingestion, particularly for children, since many of these products look similar to snack foods.
 - Less risk to the lungs than smoked cannabis, since ingesting an edible avoids exposure to the toxic chemicals present in cannabis smoke.
- **3.** There are risks of cannabis exposure in utero or during the early years. As cannabis use becomes more normalized, steps will need to be taken to protect children because:
 - Cannabis use during pregnancy may increase the risk of low birth weight and developmental problems, and there is no amount of cannabis use that is known to be safe during pregnancy.
 - When parents keep cannabis in the home, children may be exposed to second-hand cannabis smoke or may be poisoned by accidentally consuming cannabis.

 Impairment from cannabis use can interfere with a parent's judgment, decision-making, and ability to respond to their child's needs.

4. Youth are also a key population of concern. This is because:

- Canadian survey data show that youth are about twice as likely to have used cannabis in the previous three months than older adults.
- Brain development continues until about the age of 25, and cannabis use can disrupt this process.
- Youth who use cannabis are more likely to develop an addiction or experience cognitive impairment as a consequence.
- Youth are at greater risk of being involved in a car accident in which cannabis use was a contributing factor.

5. Mixing cannabis with alcohol or tobacco can lead to harmful and unpredictable consequences. We know that:

- Consuming alcohol before cannabis leads to increased levels of THC in the blood, which can exacerbate cannabis-related symptoms.
- Alcohol and cannabis both cause impairment, and their simultaneous use may increase the likelihood of impaired driving and the risk of collision.
- People who use cannabis alongside nicotine-containing tobacco products are at greater risk of cannabis dependence and use both substances more frequently than people who consume one substance at a time.

6. Cannabis is often used to self-medicate or to cope with mental health problems. This is a complex issue that may cause harm because:

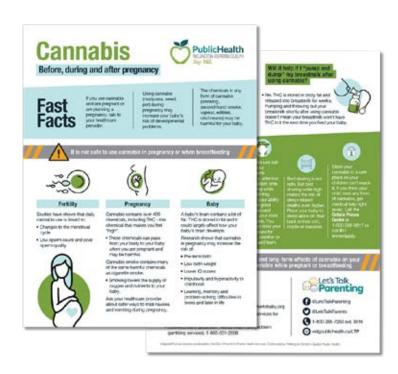
- There is a lack of strong clinical evidence supporting the use of cannabis for mental health problems.
- Different cannabis products contain different amounts of THC and CBD and, unlike a medication, many of these products are not available in standardized dosages or regimens.
- Using cannabis as a coping mechanism can lead to addiction and may worsen the underlying mental health problem.

WDG Public Health's role

WDG Public Health is not opposed to legal cannabis. However, since the impact of legalization on communities and individual users are not yet fully known, we feel it's important to take a precautionary approach to try and minimize health and social problems.

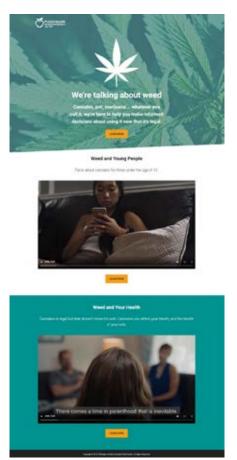
To that end, we have:

- Conducted a local Cannabis Survey to understand knowledge, patterns of use, and intentions.
- Held a "Talking About Weed" campaign and created a website in order to provide harm reduction messages and public resources to anyone searching for more information.
- Participated in government consultations about cannabis policy to ensure that the public health perspective is part of policy development.
- Worked with municipalities to help them respond to the legalization of cannabis, so they can ensure cannabis is sold and used in as responsible a way as possible.
- Worked with other partners (e.g. school boards) to help reach youth so they can make informed decisions about use and are aware of the health risks.
- Ensured to keep abreast of latest evidence in the field so we can apply best practices to all its activities and information regarding cannabis use.



Top: Cannabis and Pregnancy factsheet.

Right: talkingaboutweed.ca website.



Lack of Health and the Role of Public Health

Health, or the lack of it, can be influenced by personal circumstances. These opportunities are not simply random but are often based on patterns in our society that can deny someone their good health and create greater health care costs for the wider society. Having less opportunity for things like gainful employment, education opportunities, secure housing or a community of support has consequences for a person's physical and mental health. There are many studies demonstrating that people with lower income are more likely to experience poorer health.

The Health Disparities Task Group which advised federal, provincial and territorial governments found that approximately 20% of total health spending in Canada is attributable to income disparity. People living in poverty are more likely to have poor health outcomes including: higher rates of chronic disease, mental health challenges, housing instability and food insecurity. Some population groups are disproportionately impacted by poverty, such as children, older adults, immigrants and Indigenous populations.

Considering income inequality and other socioeconomic factors prevalent in our society is critical to the work of public health. The Wellington-Dufferin-Guelph Public Health Analytics Team has developed online interactive reports to visualize local data. These reports can be accessed at wdgpublichealth.ca/data and can be used to explore poverty and other social determinants of health in our communities.

WDG Public Health also supports the work of the Guelph Wellington Poverty Elimination Task Force which collaborates with community partners to take local action and advocate

for system and policy change to address the root causes of poverty.

To have a sustainable healthcare system we have to reduce the demands on our current system by ensuring residents have the means to live healthier lives in safer communities. That means understanding how income inequity impacts health and informs all aspects of the public health mandate, including disease or injury prevention.



An online interactive report displaying local data, developed by the WDG Public Health Analytics team.

Public Health Evaluates Guelph's Overdose Prevention Site

WDG Public Health completed an evaluation of Guelph's Overdose Prevention Site (OPS), during which clients and staff members were asked about strengths and challenges, positive or negative outcomes for clients, and if the OPS was effective at keeping those who use substances safe. The OPS offers people who use drugs a safe space to use them with medical assistance standing by.

The eleven-month evaluation identified strengths including: the welcoming and safe environment, accessibility to harm reduction supplies and education, on-site medical care and the ability to receive referrals to other services such as housing, health care and addictions treatment.

Challenges were also identified, including space and privacy concerns, hours of operation, wait times, limited staff, and some limitations on referrals.

The evaluation looked at operations from May 2018 through to March 2019 and involved interviewing 51 clients and 14 staff. The site has transitioned to the new provincial model of Consumption and Treatment Services which provides a safe and legal space to use drugs with on-site nursing and peer support, harm reduction supplies and referrals to other services. During the evaluation period, the service had 4,085 visits from 401 individuals.

One client said as part of the evaluation: "If I had used [drugs] somewhere else, I would be dead."





Unique Clients

2 401

Repeat Clients 43%

STRENGTHS

- · Friendly, caring and helpful staff
- Accessible location
- · Welcoming, safe environment
- · Access to harm reduction supplies and education
- · On-site medical care
- Referrals to other services (e.g., housing, healthcare, treatment)



- · Small space
- Privacy concerns
- · Hours of operation
- · Wait times
- · Limited staff time and coverage
- Limitations of some services to accept referrals



IMPACTS

85%

of interviewed clients said the OPS is important to their overall health. 88%

of interviewed clients said the OPS is important to their overall safety.

A section of the Overdose Prevention Site evaluation infographic.

The FAST (Flexible, Accessible, Scalable, Timely) Overdose Alert Platform

Alerts allow for a quicker and appropriate response

In response to local substance use patterns in the community, such as drugs tainted with fentanyl, the FAST (Flexible, Accessible, Scalable, Timely) Overdose Alert Platform was created. Collecting real-time data about opioid-related overdoses and incidents, Alerts allow agencies, people who use substances, EMS and other stakeholders to respond quickly and appropriately.

The alerts are shared through email, social media and hard copy to reach stakeholders (including the media, partners, the public) as quickly as possible. Through social media, the alerts reach thousands of residents within minutes. Traditional media outlets also pick up and share the alerts. Feedback from local partners has been positive; the Alerts can spark conversations about safer use and opportunities to reduce harm.

Through community involvement, overdose patterns can be discussed, shared and evaluated to ensure an accurate understanding of local patterns.

The pilot system was originally launched in Guelph in August of 2018 and has continued to operate since. In partnership with the Dufferin Drug Strategy, WDG Public Health is extending

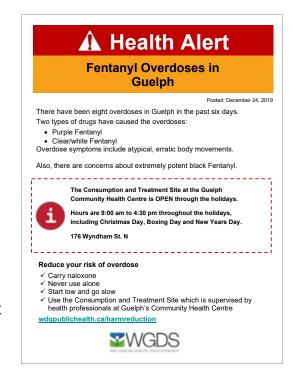
the FAST System into Dufferin County, which will allow better coverage of the Wellington-Dufferin-Guelph service area to make sure that all of our communities are well equipped to understand and tackle substance use challenges.

How does it work?

FAST is driven by our community partners who work in organizations that deliver services like harm reduction, community health, shelter, addictions treatment and emergency response. Including WDG Public Health, twelve partners are involved.

When an incident occurs:

- 1. Partners fill out an online form. That information is analyzed by Health Analytics staff to understand current patterns.
- 2. The information is aggregated and shared with partners on a weekly and quarterly basis.



An example Health Alert.

3. To determine if an Alert is warranted, we work directly with our partners to identify emerging patterns and determine if the community should be notified.

Safeguarding Against Infection

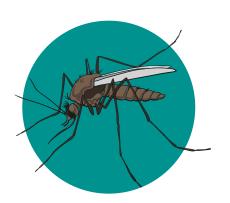
WDG Public Health works 365 days of the year to reduce the public's exposure to potential infections and limit the transmission of disease in the community. Public Health inspectors and nurses are working to keep the public safe from vaccine preventable diseases, rabies and other infectious diseases.

All inspection reports are publicly available at checkbeforeyouchoose.ca.

All infection control complaints are investigated and identified infection control lapses are publicly posted at wdgpublichealth.ca.

In 2019 Infectious and Communicable Disease Prevention and Control Program investigated:

- 708 cases of reportable diseases (enteric, respiratory, influenza and vector borne i.e. Lyme disease or West Nile Virus).
- 122 outbreaks of respiratory or enteric disease in long-term care facilities or retirement homes.
- 422 personal service settings (tattoo, hair, nail salons etc.).



Reportable Diseases 708 Cases



Respiratory or Enteric Disease
122 Outbreaks



Personal Service Settings 422 Investigations

The Vector Borne Disease Prevention Program treated 25,969 catch basins with larvicide to reduce the mosquito population and the threat to West Nile virus.

337 ticks were submitted to WDG Public Health, 166 Blacklegged ticks were identified and three of those carried the virus that could infect someone with Lyme disease.

The Rabies Program investigated 763 potential rabies exposures and submitted 79 animals for testing while seeing 118 people treated for post-exposure treatment for rabies through risk assessment and consultations with healthcare professionals.

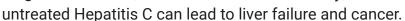
Preventing and Treating Sexually Transmitted Infections and Blood-Borne Infections

Sexually transmitted and blood-borne infection rates generally continue to rise across Wellington-Dufferin-Guelph but are less than provincial rates.

Wellington-Dufferin-Guelph Public Health works with community partners to provide and support prevention measures, testing and treatment for sexually transmitted and blood-borne infections. Public Health distributes free condoms, offers counseling on safe sex practice and distributes unused drug-using equipment (e.g. needles, cookers) to help reduce the spread of these infections.

Without proper treatment, undiagnosed sexually transmitted and blood-borne infections can lead to significant medical issues.

For instance, untreated chlamydia or gonorrhea infections can lead to pelvic inflammatory disease, infertility, ectopic pregnancy, and chronic pelvic pain in women and testicular infection in men. Untreated syphilis can lead to cardiovascular, organ and/or neurological issues (e.g. dementia) and can be transmitted to an unborn child during pregnancy. HIV can lead to immune suppression and acquired immune deficiency syndrome (AIDS). Hepatitis B can lead to cirrhosis of the liver, end-stage liver disease, and/or liver cancer. Similarly,





The Community Health Van.

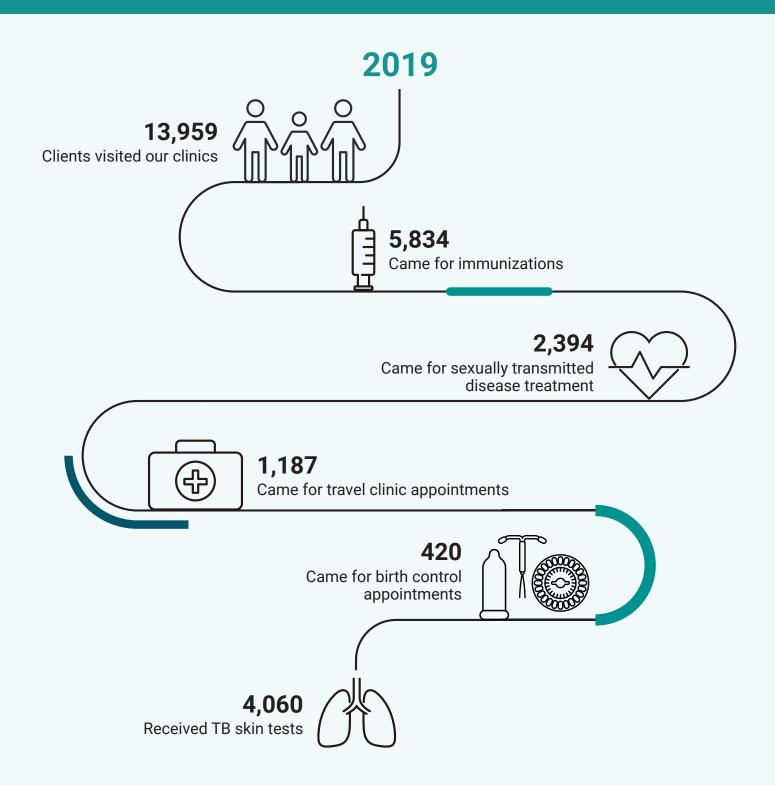
While most people in WDG who test positive for a sexually transmitted or blood-borne infection are tested by their local health care practitioner, there are approximately 18% that are tested positive for chlamydia or gonorrhea by a public health nurse.

WDG Public health offers testing opportunities at convenient locations for people who may be at greater risk for infection through sexual activities or drug use. Testing sites are located at ARCH (HIV/AIDs Resources & Community Health), on a Community Van, at Hope House, Wyndham Resource Centre and Shelldale Community Centre.

Special testing clinics are set up throughout the year at sites such as the University of Guelph and special events like World Hepatitis Day. On-site testing at all offices is available for anyone, including people who may be uncomfortable seeking testing/treatment from their primary care provider.

A public health nurse follows up with all people who test positive for a sexually transmitted and blood-borne infection to ensure proper treatment measures and partner contact tracing is completed so that other people who might be infected can be treated.

Public Health has clinics for members of the public in Guelph, Fergus and Orangeville.



Influenza: No Debate - Get Your Shot!

According to Canada's National Advisory Committee on Immunization (NACI), 12,200 influenza related hospitalizations occur on average in Canada each year. This data will vary from year to year depending on the severity of the influenza season and uptake of immunization. NACI reports approximately 3,500 deaths related to influenza on average each year in Canada with the highest mortality rate typically occurring among adults 65 years of age and older.

Influenza vaccines are offered free of charge each year to all individuals six months of age and older who live, work or go to school in Ontario. WDG Public Health promotes uptake of influenza vaccine by:

- Distributing influenza vaccine to local healthcare providers and facilities as soon as possible each fall.
- Monitoring pharmacies for storage and transportation compliance (known as the cold chain) to ensure vaccines are always at the appropriate temperature to avoid vaccine wastage.
- Disseminating information to local healthcare providers, including pharmacists, about product availability, eligibility and vaccine requirements.
- Promoting influenza vaccine to healthcare workers and monitoring rates of influenza immunization for this group.

59,891 doses of flu vaccine where distributed by WDG Public Health to local health care providers, pharmacists, hospitals and long-term care homes.

Wellington-Dufferin-Guelph Public Health nurses administered 4,842 doses of influenza vaccine products via in-house flu clinics and appointments. This is an increase of 1,457 doses from last season. 1,299 of the doses administered at WDG Public Health offices were high-dose trivalent vaccine for those 65 years of age or older.

In addition, local pharmacies ordered 34,190 doses of flu vaccine. The number of doses administered by pharmacies is greater every year as community members continue to readily access quadrivalent influenza vaccine from their pharmacist.

Overall, a total of 94,081 doses of influenza vaccine were distributed in Wellington and Dufferin counties and the city of Guelph. This is an increase of 4,654 doses from last year.



Supporting Healthy Families

In collaboration with community partners, Wellington-Dufferin-Guelph Public Health supports individuals and families to live as healthy and safe as possible through the Healthy Families program covering the following program areas: Healthy Babies, Healthy Children (HBHC); breastfeeding clinics; Let's Talk Parenting; and in-person prenatal classes.

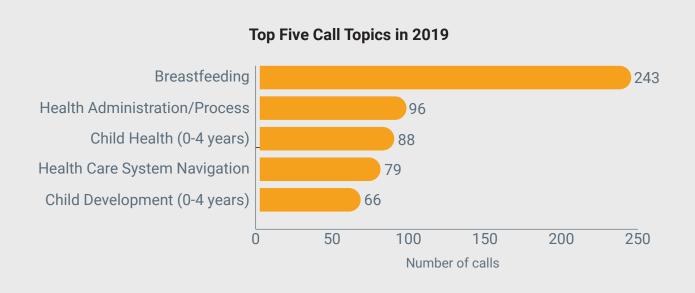
The Healthy Babies Healthy Children program supports families during the prenatal period, birth and up to the transition to school age. In 2019, WDG Public Health nurses within the HBHC program provided 2,559 home visits. The Blended Home Visiting program, which includes a nurse and a family visitor, provided 2,089 home visits

Breastfeeding support is provided as a free service by public health nurses by phone, through the Let's Talk Parenting line, or through one of our breastfeeding clinics. Nurses provide comprehensive breastfeeding assessment and plan of care for families experiencing infant feeding challenges. Throughout 2019 breastfeeding clinics where offered throughout the region in five locations which received 1,133 initial and subsequent visits.

The Let's Talk Parenting line is free and confidential telephone support from a public health nurse covering a range of topics about pregnancy, parenting and child health from prenatal

period to age six. Referrals are made to various programs and community resources are provided.

The number of parent calls to the phone line for 2019 was 858. There were 622 referrals and recommendations made on various topics.



In 2019, the in-person prenatal program was in a year of transition as it transitioned to an online-only format. In 2019, 285 attended the classes. The online prenatal program allows participants to receive information about healthy pregnancy, labour, birth, early parenting and breastfeeding. It can be completed at the client's own pace and in the comfort of their home.

The Immunization of School Pupils Act (ISPA)

The ISPA requires that all students provide their Medical Officer of Health with proof of immunization against designated diseases.

Public health units are required to assess immunization records and notify those with incomplete immunization records. This requirement is to protect schools and the wider community from disease outbreaks.

Students without a complete immunization record or a valid exemption may be suspended from school until the required records are provided to Public Health. If there are cases of a vaccine-preventable disease in a local school, those with missing immunizations can be excluded from attending class for their own protection.



Each school and licensed childcare centre is linked with a public health nurse for a direct point of contact for records assessment and suspension. The vaccine-preventable disease team maintains the live-answer intake line where anyone can access immediate support from a public health nurse. Successful communication with school boards, school staff, licensed childcare providers, healthcare providers, and the public, remains a key focus in the successful completion of ISPA related activities.

Suspension is the last resort WDG Public Health utilizes when assessing and updating student records. In cases where students were suspended for more than a week, Public Health Nurses followed up with the school's principal and the student's family to implement a plan to help these students update their records and return to school as soon as possible.

In December 2018 and January 2019, 5,419 letters were distributed to students/parents/guardians informing them that WDG Public Health did not have complete immunization records. The notices included the student's overdue vaccinations and instructions for submitting records, clinic availability, and a deadline for submission. WDG Public Health provided immunization clinics in secondary schools to provide students with access to immunization services.

From November 1, 2018 to April 30, 2019, public health nurses provided 3,407 required immunizations to children under 18 years of age.

Children's Oral Health Is a Top Priority

Supporting Children's Smiles Through Wellington-Dufferin-Guelph

A smile is an important part of a person's appearance. Children in particular need to have their smiles maintained in order to experience overall well-being.

Tooth decay is a common issue facing children in Wellington-Dufferin-Guelph, with almost half having experienced it by the second grade. Tooth decay can weaken teeth and cause health issues if left untreated.

Infection, pain, abscesses, poor nutritional status, and gastrointestinal disorders are common issues that may arise. Not treating tooth decay in children can affect the growth of their adult teeth, and even the performance of children in school as well as negatively impact their sense

of self-esteem.

In the same vein, gum disease, an infection and breakdown of the gum tissue and bone that hold teeth in place, can lead to tooth loss and has been associated with other serious health problems including respiratory infections, cardiovascular disease, and diabetes, as well as pre-term and low-birth weight babies.

WDG Public Health aims to offset these negative consequences by ensuring children and youth have



access to suitable oral health care, including those who are experiencing financial barriers to receiving care.

Barriers to Low-Income Families' Access to Oral Health Care

Not having publicly funded oral health care means that vulnerable groups (such as low-income families, refugees and immigrants, Indigenous people, and people living in remote and rural areas) experience substantial barriers. Only two thirds of WDG residents have dental insurance, making oral health and access to dental care important issues that WDG Public Health addresses through programs such as Healthy Smiles Ontario.

The Healthy Smiles Ontario program includes regular visits to the dentist and covers the costs of treatment including:

- check-ups
- cleaning
- fillings (for a cavity)
- x-rays
- scaling
- tooth extraction
- urgent or emergency dental care (including treatment of a child's toothache or tooth pain)



Enter Healthy Smiles Ontario

WDG Public Health provides free dental care for children up to the age of 17 from qualifying families through the provincial Healthy Smiles Ontario (HSO) program.

Recognizing the need for children to have access to care for their oral health and overall well-being, in November 2018, WDG Public Health recruited a dentist to provide basic dental care to children and youth enrolled in the Healthy Smiles Ontario program out of the Chancellors Way location for a single day during the week. The service expansion supports equitable access to dental care for children and youth from low-income households in the community.

Growing Healthy Smiles Ontario

Now, the dental clinic operates at full capacity. There also is now a public health dental hygienist on board in addition to the in-house dentist. This effectively allows for children and youth to be seen for both routine and urgent dental care support.

Enrolling in the program is done online or through the mail, although some children (for example, those who are on disability supports) are automatically enrolled.



Testing Private Well Water

Research in communities across
Ontario has demonstrated that while
well water testing rates are low (only
about 25% of private wells are tested
each year) contamination rates are not.
34% of wells tested on farm properties
in Ontario tested positive for evidence
of bacterial contamination. The risk of
enteric (intestinal) illness from private
wells is 5 times greater than from water
from municipal supplies.

WDG Public Health is taking active steps to support owners of the 31,000 private residential wells in our region thorough the Water WISE program. Launched in 2019 with a Well Water Survey, the WISE



program will launch a new web-based portal in 2020 designed to make water testing faster, safer and more reliable for residents.

WISE will automatically inform the well owner and Wellington-Dufferin-Guelph Public Health staff of the results and of adverse test results so that a Public Health Inspector can follow up with the resident to help them understand their result and determine a solution to address the bacterial contamination.

Radon

Radon gas is the leading cause of lung cancer in non-smokers. While radon is present in all homes, an estimated 15% of them have unsafe levels of the gas. Household radon levels are determined by testing. WDG Public Health recommends the use of approved long-term radon detectors for three months to determine the level of radon in homes.

In 2019, WDG Public Health offered Radon and Lung Cancer information sessions to the public in Fergus, Orangeville and Guelph. The sessions featured Q&As with radon experts, as well as opportunities for members of the public to purchase radon test kits at a discount.



Radon testing kit (left). An estimated 15% of homes have unsafe levels of radon.



Climate Change and Health Vulnerability Assessment Update

A funding proposal was jointly submitted to Health Canada by Wellington-Dufferin-Guelph Public Health and the Region of Waterloo Public Health and Emergency Services to conduct a Climate Change and Health Vulnerability and Adaptation Assessment within the respective geographies of each health unit. In January of 2019, the joint submission was selected by Health Canada and awarded a \$300,000 grant, to be administered by WDG Public Health over three years.

ICLEI Canada will carry out the vulnerability and adaptation assessment in consultation with both health units, City of Guelph, Wellington County, Dufferin County, City of Orangeville, Public Health Agency of Canada, Health Canada, Wellington-Waterloo LHIN, Region of Waterloo, Grand River Conservation Authority and the University of Waterloo Interdisciplinary Centre on Climate Change.

Climate change is predicted to impact the health of Canadians, with the level of risk varying across the country.

How climate change will impact your health:

- 1. Local impacts to the 23 municipalities that comprise the study area have not been thoroughly investigated but, provincially, Ontarians can expect to experience extreme temperatures, extreme storms, floods, wildfires and poor air quality.
- 2. In the study area of Wellington-Dufferin-Guelph-Waterloo the predicted changes in climate include a sharp rise in the number of heat waves with an associated increase in heat related illnesses, increase in skin cancers and eye diseases such as cataracts from increased UV radiation exposure and conditions that are increasingly favourable for the expansion of vector-borne disease.
- 3. Local climate projections indicate temperatures will rise both in terms of the magnitude of events, such as predicted hottest day temperatures to increase between 2-8°C from current observed levels.
- 4. The number of days with a temperature greater than 30°C is predicted to increase from the current 5-10 days each year to between 15-75 days a year depending on the climate model used.
- 5. Local evidence and climate projections provide information to highlight the importance of the effects of climate change on local populations. Now and in the future, well-planned adaptation measures have the potential to reduce the predicted health impacts of climate change over the next few decades.
- 6. The Public Health climate change vulnerability assessment will provide an in-depth review of local climate projections, current and projected health risks and impacts related to climate change. The assessment will identify vulnerable populations most at risk to these impacts in our communities. This work will inform adaptation planning, identify and prioritize adaptive local policies and programs which will strengthen resiliency to climate change.



Giving Back

Wellington-Dufferin-Guelph Public Health volunteering in the community in 2019

In September, the Health Analytics team took part in a half-day 'give back' to the Guelph Humane Society. The team took part in some Fall tidy-up on the trails, dog playing compound and package preparation for the adoption coordinator. A great time was had by all and the day ended with Mike Whyte nearly adopting Freddie. Please check out



The Health Analytics team at the Guelph Humane Society (left) and Mike with Freddie.

the Guelph Humane's website for animals ready for adoption.

In December, members of the Human Resources and Finance team spent some time volunteering with the Adopt-a-Family program. They spent the morning wrapping presents and stuffing gift bags.

Also in December, the Healthy Growth and Development team volunteered with the Souper Heroes program at The SEED for their "give back" day. The team prepared hundreds of soup starter packages that are available for purchase at markets, stores and pop-up events in Guelph. All proceeds support community food programs.

The Oral Health team prepared and donated a dinner for the Royal City Church community meal and few clients from the community health van. The Royal City Church provides community meals in a safe and loving environment for anyone who is in need. The meals are served Monday to Saturday evenings with approximately 85-100 people at each meal.



The Human Resources and Finance team with the Adopt-a Family program.



On Sept 26, the Health
Promotion team visited Everdale
Farm. They toured the farm
and harvested 130 pounds of
tomatoes and cured 500 pounds
of onions. A farm lunch was
enjoyed by all and a portion of
the food harvested was donated
to local food programs.

The Health
Promotion team
at Everdale Farm.





The Wee Talk team at the Guelph Humane Society.

On November 4, the Wee Talk team went to the Guelph Humane Society for their "give back" day. After a tour of the facility, the team assisted in completing thank you cards and took on the important task of socializing the animals. A great time was had and only one or two cars needed to be inspected for animals prior to leaving. Be sure to check out the Guelph Humane Society for a list of animals currently available for adoption.



The Healthy Growth and Development team volunteering with Souper Heroes (far left). The Oral Health team preparing dinner for the Royal City Church community meal.

