

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2014 May 15

SUMMARY INFORMATION REPORT FOR MAY 2014

Recommendation

It is recommended that Report No. 035-14 re Information Summary Report for May 2014 be received for information.

Key Points

- The Ministry of Children & Youth Services has reappointed MLHU as a Provincial Centre of Education. The Health Unit will continue to provide training to staff across the province for programs like Healthy Babies, Healthy Children.
- MLHU has built a strong partnership with the London Abused Women's Centre, and participated in a recent LAWC event with great success.
- The new Healthy Child Development – Integrated Services for Children Information System will create efficiencies in data entry.
- Ontario Healthy Schools Coalition Conference, co-hosted by the Health Unit and the Ontario Healthy Schools Coalition, included over 415 delegates from across Canada and beyond.
- The Health Unit is currently prioritizing Public Health Nurse services to schools, which will assist in ensuring that schools received services that are matched to their various levels of needs.
- Public Health Ontario funded a Locally Driven Collaborative Project with a focus on Food Literacy. The summary and technical reports have been completed and are ready for dissemination.
- The *Skin Cancer Prevention Act* came into effect on May 1, 2014. The Health Unit is educating tanning bed operators of their obligations under the law.

Background

This report provides a summary of information from a number of Health Unit programs. Appendices provide further details, and additional information is available on request.

Family Health Services (FHS)

1. Ministry of Children & Youth Services (MYCS) – Centre of Education - Since 2011, the Health Unit has been selected by MCYS as the Provincial Centre of Education for the Healthy Babies Healthy Children (HBHC) Program. In 2014, 10 education projects have been identified by MCYS. The education projects will be used province-wide for the training and certification of Public Health Nurses (PHN's) to use Nurse Child Assessment Satellite Training (NCAST) assessment tools, which are required for PHN's to use in their work with families in the HBHC Program. The funding (\$81,000) specifically supports salary costs for PHN time, editing costs for French Translated resources and the purchase and distribution of resources. Further information including a summary of the funding is provided in [Appendix A](#).
2. London Abused Women's Centre (LAWC)- FHS has had a relationship with the London Abused Women's Centre (LAWC) for many years. Over the past two years this relationship has strengthened and grown, due in part to the death of a colleague, Sonia El Birani, who was murdered by her husband

on April 11, 2012. To honour Sonia, Health Unit staff members have participated in a variety of LAWC activities including putting purple lights on 50 King Street and attending the Lighting of the Tree at Victoria Park in November. Staff members have also participated in fundraising events for LAWC such as Purple Day in the fall and the Downtown 5km Run in the spring. Most recently on April 18, twenty-five staff members formed “Team Sonia” and registered to participate in the Downtown 5km Run. ([Appendix B](#)). As well, MLHU staff entered children in the Kiddie Trot and Dr. Christopher Mackie participated in the 1km CEO run ([Appendix B](#)). Team Sonia raised over \$1,500 in donations which was the most money raised by a non-corporate team, and Dr. Mackie won the CEO run. LAWC is planning on naming this 5 KM walk in memory of Sonia in 2015.

3. Healthy Child Development – Integrated Services for Children Information System (HCD-ISCIS) - MCYS supports children and youth to reach their full developmental potential through a number of MLHU delivered programs. These programs include HBHC, Preschool Speech and Language (PSL), Infant Hearing (IHP), and Blind Low-Vision (BLV). The programs provide screening, assessment, and intervention services under the Healthy Child Development (HCD) umbrella. Until now, these four programs have used two separate databases to document the interactions with children and families receiving services. In May 2014 the databases will be linked to form one new HCD-ISCIS information system and will be phased in across the province. It will consolidate the existing applications, HBHC-ISCIS and PSL-ISCIS to improve capacity to enter and analyze data on outcome measurement tools, service types, and risk factors. The new system has the ability to share demographic and family data amongst all four programs in order that data which were previously entered twice for all newborns in Ontario will now only be entered once. [Appendix C](#) addresses a number of frequently asked questions regarding this consolidated electronic child record.
4. Ontario Healthy Schools Coalition Conference - The Ontario Healthy Schools Coalition partnered with Physical and Health Education Canada and the Health Unit to host the 13th annual conference “Coming Together: Supporting the Whole Child”. The conference was held April 9 and 10 at the Hilton Hotel in London. Over 415 people attended including parents, teachers, school administrators, ministry officials, students, public health, police and community agencies. It featured over 40 breakout sessions and six keynote speakers. Presentations ([Appendix D](#)) focused on whole child health topics ranging from influence of social media, caring relationships, healthy eating, positive mental health and physical literacy. Family Health Services staff members were key planners of the conference. In addition, several sessions were led by staff, and opening remarks were delivered by Dr. Mackie. Significant positive feedback has been received by the committee. An evaluation will be completed to advise the Ontario Healthy Schools Coalition Executive regarding future endeavors.
5. Prioritizing Public Health Nurse Services to Schools - Over the past year, the Child and Youth Program team underwent a significant process in order to prioritize PHN services to schools in Middlesex-London. Although schools will continue to have access to services of PHNs, some schools now receive more dedicated and focused PHN time. The assessment was completed for all 160 schools. One component of prioritizing process was the School Engagement Assessment Tool ([Appendix E](#)). To complete this tool PHNs met with Principals to determine the readiness, need and capacity for engaging in a healthy schools approach. In addition community profile data, other services in the school, EDI scores and so on were assessed. Schools were ranked to allow for more focused care and ultimately stronger outcomes for our children and youth. School Board Partners were engaged in the process and highly supportive of the goals and processes to ascertain the most effective use of nurses in school communities.

Environmental Health and Chronic Disease Preventions Services (EHCDPS)

1. Locally Driving Collaborative Project – Food Literacy Summary - Declining food skills in the general population has been identified as an obstacle to healthy eating. Limited opportunities to develop food skills and prepare healthy food puts socially disadvantaged groups at higher dietary risk. Designing food literacy programs to reach at-risk groups and support successful change requires more knowledge about how these groups currently think about food preparation. The LDCP Food Literacy research results provide an analysis of rich qualitative data about the meaning of food skills and food literacy among

high-risk youth, young families, and pregnant women in Ontario. Insights from this research can inform both policy development and public health, school-based, and community programming. The Summary Report ([Appendix F](#)) and [Full Technical Report](#) are available online.

2. Skin Cancer Prevention Act Increases Protection for Youth - The [Skin Cancer Prevention Act](#), which came into effect on May 1, prohibits the sale and marketing of tanning services and ultraviolet light treatments to anyone under 18 years of age and requires operators to request identification from anyone who appears to be under 25 years of age (see www.healthunit.com for more information). An example of promotional material from [The Burning Truth](#) initiative of the Centers for Disease Control and Prevention is attached as [Appendix G](#). Operators are required to post health warning and age identification signs advising customers of the health risks associated with tanning bed use, and must register as an operator with the Health Unit. The Health Unit has been educating operators of their obligations under the law and will be launching a social marketing campaign with the message that there is no safe way to tan, whether in the sun or with artificial sources such as tanning lamps, booths or beds.

This report was prepared by Ms. Diane Bewick, Director, Family Health Services and FHS Staff, and Mr. Wally Adams, Director, Environmental Health and Chronic Disease Preventions Services and EHCDPS staff.



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