



BOARD REPORT

Friday, October 23, 2015



Medical Officer of Health

REPORT TO THE BOARD

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Injury

Injury is the leading cause of death for Canadian children as well as the number one killer of Canadian adults under age 45. Injuries are not “accidents”, they are predictable and preventable events that are most often within our control.

In Grey and Bruce counties, injuries are the fourth leading cause of death. Ninety percent of these injuries can be anticipated and avoided.

Injury is not often recognized as a crisis; rather it is viewed in society as a normal and acceptable occurrence. To turn round this attitude, we need to consider injury as a controllable disease that can be studied, quantified and reduced with the appropriate interventions. For example, between 1970 and 2009, the number of road fatalities in Canada for all ages decreased by 58%. Many strategies contributed to improving the safety on our roads: the legislation and enforcement of car restraints for adults and children; the legislation and enforcement of impaired driving regulations, better roads, speed reduction measures ; and, more recently legislation regarding distracted driving.

Other causes of injury-related deaths such as drowning, fire/ flame /suffocation, falls and poisoning have decreased with the attention that has been given to the causes and remedies.

Unfortunately, intentional injury statistics have not decreased over the same time frame. This includes suicide rates, which have risen alarmingly in the youth and young adult group. The Grey Bruce Health Unit has invested significant time and attention to the areas of injury prevention in the community and particularly in promoting mental health for our young people through our school programs. Our partnership with schools and other related agencies resulted in the development of a significant resource for assisting the public and professionals at <http://www.wecaregreybruce.ca/adults.php>

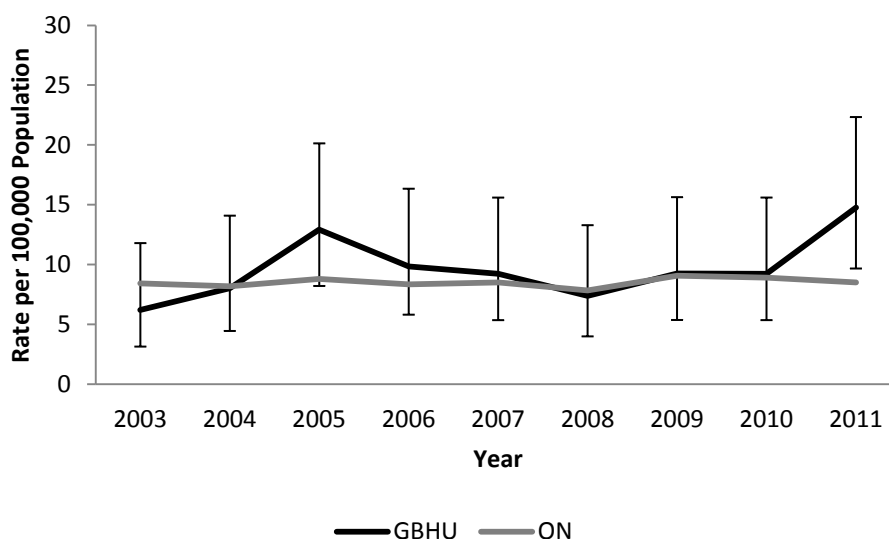
For further information, visit the Your Health: healthy schools, injury prevention, and health stats sections on our website at www.publichealthgreybruce.on.ca .

Hazel Lynn

2015 Update: Suicide and Self-harm in Grey Bruce

In Grey Bruce in 2011, 24 people died as a result of suicide. Each year since 2003, more than 1000 Ontarians have taken their own lives, and an average of 16 of those these deaths each year are of Grey Bruce residents. Intentional self-harm usually begins and is most common among youth and young adults, and suicide is one of the top causes of death in these groups in Canada, after unintentional injuries.¹

Figure 1. Rate of Suicide Deaths per 100,000 Population, Ontario and Grey Bruce^{2,3}



The 2011 crude suicide rate in Grey Bruce is nearly double that of Ontario, at 14.8 deaths per 100,000 population compared to 7.8 deaths per 100,000 population. This figure is a high relative to previous years' rates.

Males are more than three times as likely to die from a suicide attempt as females, since males tend to use more lethal means. Locally, the relative risk of suffering a suicide fatality for males is 3.85 compared to females (2011 rate). At the provincial level, males are 2.81 times as likely to suffer a suicide fatality as females.

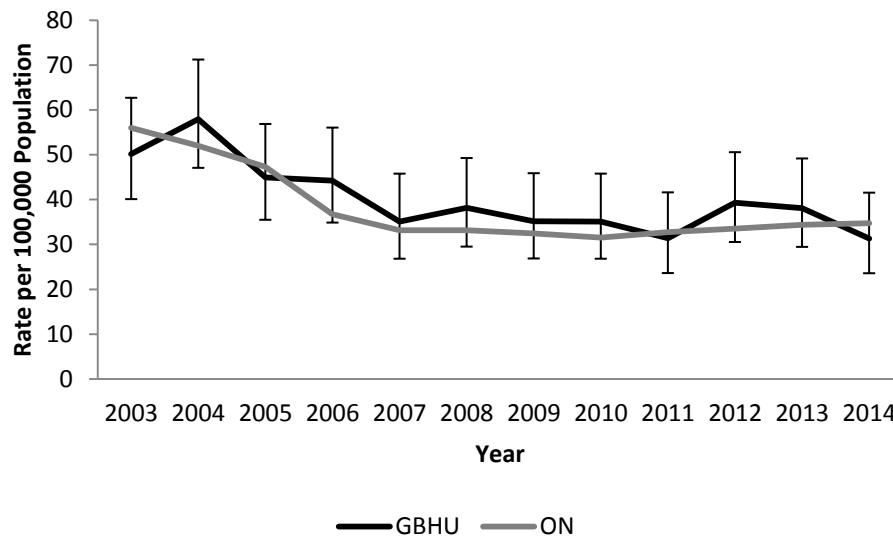
¹ Office of the Chief Public Health Officer of Canada, "The Chief Public Health Officer's Report on the State of Public Health in Canada: 2011, Youth and Young Adults—Life in Transition" (Public Health Agency of Canada, 2011).

² Numerator: Ontario Mortality Data 1986–2011, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015.

³ Denominator: Population Estimates 1986–2013, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015.

In Grey Bruce, there are about 51 patients admitted to hospital for self harm in 2014. In Ontario, intentional self-harm caused the hospitalization of 4700 patients that year, which represents a 31% drop in the count since the 2003. The local crude rate of 31 hospitalizations per 100,000 population is not significantly different than the provincial rate and roughly follows the same downward trend.

Figure 2. Rate of Patients Hospitalized for Intentional Self-harm per 100,000 Population, Ontario and Grey Bruce^{4,5}



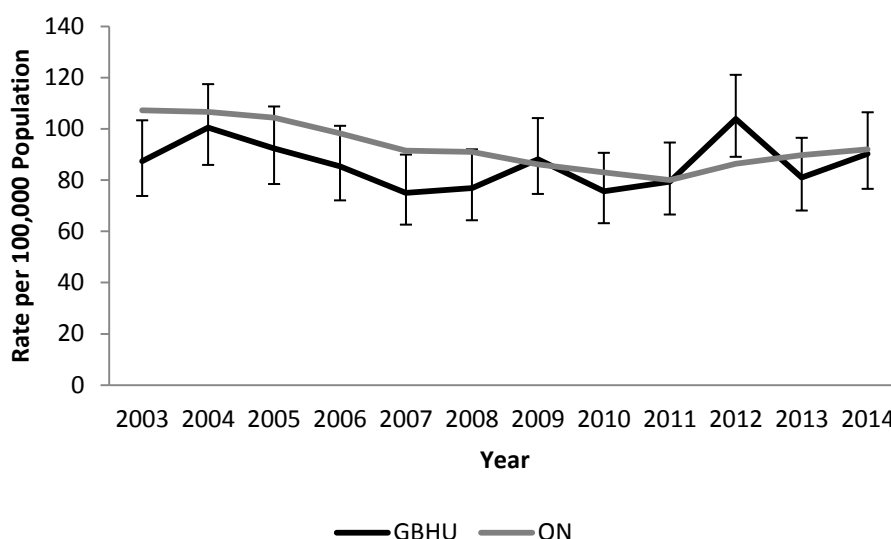
Females are about one and a half times as likely as males to be hospitalized for self-harm (provincial RR F:M = 1.56).

⁴ Numerator: Inpatient Discharge Database 1996–2015, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015,

⁵ Denominator: Population Estimates 1986–2013, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015.

Locally, 147 patients visited an emergency department for self-harm related injuries in 2014. The rate of patients visiting an emergency department for self-harm related injuries was almost identical in Ontario and Grey Bruce in 2014, at 90 (GBHU) and 92 (ON) per 100,000 population.

Figure 3. Rate of Patients Visiting the Emergency Department for Intentional Self-harm per 100,000 Population, Ontario and Grey Bruce^{6,7}



Females in Grey Bruce are 65% more likely than males to visit an emergency department for self-harm related injuries. In Ontario, they are 71% more likely than males to visit an emergency department for self-harm related injuries.

⁶ Numerator: Ambulatory Emergency External Cause 1996–2015, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015.

⁷ Denominator: Population Estimates 1986–2013, Ontario Ministry of Health and Long-term Care, IntelliHEALTH Ontario, Extracted 16 October 2015.

Program Report OCTOBER 2015



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We work with the Grey Bruce community to protect and promote health.

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Record Year for Influenza Vaccine

Last year set new records for the number of people receiving influenza immunizations. Vaccines administered during the 2014/15 flu season were at the highest levels since the Universal Influenza Immunization Program (UIIP) was launched in the fall of 2000. Ontario's UIIP was the first of its kind in the world offering universal influenza immunization to all residents, as part of the government's commitment to protect and promote the health of Ontarians.

In 2014/15, Public Health distributed 53,560 doses of influenza vaccine to health care providers, long-term care homes and health care settings. Public health administered 250 doses of influenza vaccine; considerably lower than previous years and reflecting the increased availability of flu vaccine through other health care providers including pharmacies. Additionally, 40 pharmacies in Grey Bruce administered 13,283 doses of influenza vaccine. Local data suggests that residents are increasingly getting their annual flu shots from pharmacies; 8.2% in 2013 vs. 30% in 2014 (Grey Bruce Health Unit. 2015. *Immunization in Grey Bruce*).

The 2015/16 immunization campaign in Grey Bruce will build on the successes of last year and continue to stress the importance of getting the flu shot to protect yourself, your family and the community from the influenza virus. The focus of this year's campaign will emphasize the importance of children getting a flu shot. A new quadrivalent vaccine product is available for children. The quadrivalent vaccine, which protects against four strains of influenza virus, is recommended for children aged six months to less



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than 17 years. Young children are more susceptible to serious complications from the flu, such as pneumonia, infection and dehydration.

The role of Public Health has changed. No longer are we a primary provider for administering the influenza vaccine. We now support others in the community who have, more appropriately, taken on that role. This support includes providing educational materials about the variety of vaccine products available and ensuring timely and consistent access to vaccine. Public Health still retains its fundamental role in influenza surveillance and outbreak management, as required.

This year, Public Health will host one influenza community immunization clinic , 3:00-6:00 p.m., Tuesday, November 3, at the health unit.

2015 Beach Management Report

Beach water quality in 2015 was predominantly affected by weather. A number of days of high wind and wave action were noted along with several limited duration, heavy rainfall events. High wind and waves during one week resulted in samples not being taken at two beaches and required the re-scheduling of sampling days on two other occasions. Contrasted with the extremes of very poor results in 2014 and unusually good results in 2013, respectively, water quality was about average in 2015. Results were similar to 2012. We will continue to monitor long-term results looking to identify any developing trends.

On one occasion sample results exceeded the Canadian Recreational Water Quality Guideline single-sample limit of 400cfu per 100ml of *E. coli*. There were seven occasions for results exceeding of the Canadian Recreational Water Quality Guideline geometric mean limit of 200cfu per 100ml of *E. coli*. Each event was short lived with follow up sample results returning to low levels. The single-sample is intended to alert beach management officials to any immediate water quality issues, whereas the geometric mean limit will alert management to chronic contamination problems. Northwinds Beach in the Town of the Blue Mountains, with an average of 107cfu per 100ml, was the only beach with an annual mean of over 100cfu per 100ml.



The Grey Bruce Health Unit posted three beaches during the season – Kelso Beach in Owen Sound, Port Elgin Main Beach and Port Elgin Gobles Grove in Saugeen Shores. Beach postings were carried out following a risk assessment looking at sample results, environmental conditions and public use that determined there may be an increased risk to the public.

We continue to stress to beach goers to avoid beach water use for 24 to 48 hours after heavy rains or if there is high turbidity in the water – particularly if you cannot see your feet at about waist depth. Rain water run-off flushes contaminants into the water and high wave action can stir up bacteria present in the silt or sediment.

Gonorrhea Campaign

To address the rise in gonorrhea rates, we undertook a three-month communication campaign focusing on social network and media sites. Ten messages were developed and featured on the Grey Bruce Health Unit Facebook page as well as ad purchases and message 'pushes' on social media sites. All campaign messages incorporated the consistent branding of "Gonorrhea...Get tested. It's as easy as peeing in a cup". Additional posters, post cards, business cards and slide shows were developed for promotion at local events (e.g. Georgian College orientation) and distributed to health care providers. The sexually transmitted infections (STI) section on the website was updated to make it easier to use by individuals seeking more information and for those directed to the site from the campaign. In addition, a professional resources section was developed to include up-to-date STI Guidelines on testing and treatment in primary care and links to online training modules for gonorrhea.



Project C-Butts

In partnership with the Aaron Roote Youth Centre and Saugeen Health Clinic, the Grey Bruce Health Unit worked with the youth in the Saugeen Right to Play: Youth Leadership program to assist the group in taking action to address the environmental impacts of cigarette butts. The Youth Leadership program is made up of Grade 7/8 students from the Saugeen First Nation.

Following several cigarette butt clean up events and a band council presentation, the youth took the message of the environmental impact of cigarette butt litter to the Sauble Beach tourist population in mid-August. Calling their team the *C-Butts*, the youth hosted an event on the south end of Sauble Beach demonstrating to the general public about the dangers cigarette butt litter pose to animals, land and water. Cigarette butts take approximately 15 years to degrade in the environment. The youth engaged with both adults and youth handing out beach balls and Frisbees with environmental messages specifically focusing on cigarette butt litter. Signs were posted at all public washrooms along the beach as well as at the two south beach gate entrances. Each sign had a specific message about the dangers of cigarette butt litter.

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Following Labour Day, the signs were moved to Band buildings within Saugeen First Nation to continue to promote the message of the environmental impacts of cigarette butt litter.

