



Board Report

Friday, February 22, 2019



PROGRAM REPORT JANUARY 2019

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Working with the Grey Bruce communities to protect and promote health

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School Health

The Ontario Public Health Standards (2018) require Boards of Health to provide programs and services that contribute to optimal health of school-age children and youth through partnerships and collaborations with local school boards and schools.

Schools are important settings for health promotion. Healthy students are better learners and better-educated individuals are healthier, making health and education interdependent (School Health Guideline, 2018). With this as a guiding principle, the school health team works closely with partners to offer a variety of programs, supports and services.

At the Board level, Public Health collaborates with both Bluewater Board and Bruce Grey Catholic Board to offer the Youth Mental Health Champions Project. This program trains and assists peer youth mentors in 19 designated schools to promote mental well-being.

Public Health supports Roots of Empathy in elementary classrooms. This program of infants, accompanied by a parent and a facilitator, regularly attending the classroom raises levels of empathy in students, resulting in more respectful and caring relationships and less bullying and aggression. Seventeen classrooms in Grey Bruce are participating.

Recognizing the value of physical activity to learning, Public Health provides Spirit in Motion training to seven schools in the Bruce Grey Catholic District Board. Grade 6 students receive leadership, communication, conflict resolution and healthy living training. Those students provide a recess program of physical activity and well-being to primary students from JK to Grade 4.

Public Health is creating curriculum supports for classroom teachers on topics covering healthy sexuality, substance use including cannabis, physical activity and healthy eating. The supports will supplement the current curriculum with local stats, interactive activities and ideas for student/school advocacy.

At the community level, Public Health supports local youth coalitions, youth-friendly initiatives and Youth Mental Health Committees such as We Care. These activities

support healthy environments, increase engagement and offer education and supports for youth.

Preventing Falls in Older Adults

Every day in Grey Bruce, on average, 24 older adults have a fall needing treatment in an emergency room. Of those, two or three people are hospitalized due to their fall (GBHU, 2014). Falls affect more than just the individual. The burden to the health care system is apparent in both the frequency of falls needing treatment and in that hospital stays are 10 days longer for a fall than for any other cause (Health Canada, 2017).

Income, housing, medications, gait issues, vision and alcohol are among the variety of factors contributing to a fall. As such, there is no single key to prevention. Taking a systematic approach to addressing this issue, the Grey Bruce Health Unit has teamed up with 20 partners to develop, implement and evaluate a coordinated action plan. The 2018 highlights include:

Health Care Provider Training

- 108 Personal Support Worker (PSW), Practical Nurse (PN), Registered Nurse (RN) students at Georgian College and an additional 14 PSWs at Fanshawe College, Clinton Centre, trained in fall prevention as a core competency.
- Nine staff from Chippewas of Nawash Health Care Centre trained in the Tiered Home Exercise Program.
- 44 housekeeping staff from Grey Bruce Home and Community Support Services trained in the 4-hour fall prevention course.
- 55 fall prevention exercise class leaders trained at the VON annual education session.

Supporting Partnerships

- The *Stay On Your Feet* program was adapted for Elders living on reserve. Staff provide assessments and teach the in-home exercise program.
- In collaboration with Indigenous leaders, the Grey Bruce Indigenous Fall Prevention strategy was presented at the National Fall Prevention Conference in Newfoundland in June 2018.
- The Grey Bruce Council on Aging and the Fall Prevention strategy support municipalities to achieve an Age-Friendly Community designation.

Working Directly with Older Adults

- Fall prevention resources shared with over 1625 community members through presentations, health fairs and family health teams.
- Fall Prevention Month displays shared with the 37 libraries in Grey and Bruce Counties.

Policy Development

- As a recognized leader in fall prevention, we participate in a provincial Think Tank to identify next steps in creating a system-based approach and a subsequent action plan to address the strain on the health care system due to falls.



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Prevention and Management of Vector-Borne Diseases

In accordance with the Ontario Public Health Standards Infectious Diseases Protocol, 2018, the Grey Bruce Health Unit vector-borne diseases management strategy is based on a local risk assessment and other scientific evidence in respect to prevention and control measures. The strategy is flexible and intended to adapt to changes in surveillance data and emerging trends. In 2019, vector surveillance for both mosquito and tick populations will continue. There is a focus on West Nile Virus (WNV) and Lyme disease, although other emerging risks are also monitored.

Mosquito Surveillance

West Nile Virus (WNV) is transmitted through the bite of an infected mosquito. Of individuals infected with WNV, approximately 80% show no symptoms. Most of those that do show symptoms experience a mild self-resolving flu-like illness. Less than 1% of those infected with WNV experience severe illness involving the central nervous system.

In 2018, the Grey Bruce Health Unit conducted a comprehensive mosquito trapping and testing program. Regular trapping took place in 15 municipalities. The program expanded from previous years because of an increase in both human cases of WNV, and positive mosquito pools across the province in the previous year. In 2018, only one mosquito pool tested positive for WNV in Grey Bruce and three human cases were reported. These levels do not reflect a significant upward trend but warrant further monitoring.

Eastern Equine Encephalitis (EEE) is also transmitted through the bite of an infected mosquito. However, unlike WNV, a significantly larger proportion of people infected with EEE develop life-threatening symptoms and serious, chronic outcomes. EEE activity in Ontario is currently sporadic with only a few equine cases identified each year. In addition to laboratory testing for WNV, the contract lab also tested for EEE on appropriate mosquito specimens. No positive pools for EEE were identified in 2018 in Grey Bruce.

In 2019, mosquito trapping will expand to all 17 municipalities but with significantly reduced sampling frequency. Trapping will continue to target WNV mosquito species and EEE testing will continue on appropriate species. A less frequent sampling program will reduce the travel required to change traps and the lab costs associated with testing but still provide widespread monitoring. In addition to surveillance, an enhanced communication program on prevention and reducing personal risk will target key locations or groups, such as schools, recreational camps, parks, etc.

Tick Surveillance

In Ontario, health units support passive tick surveillance (e.g., tick identification and submission, and human case management). Black-legged ticks are the focus, as the bite from an infected tick carrying the bacteria *Borrelia burgdorferi*, may cause Lyme disease. Early symptoms of Lyme disease may include fever, headache, muscle and joint pain, fatigue and an expanding red rash. If untreated, infection can lead to serious chronic adverse health outcomes. In 2018, two human cases of Lyme disease were reported in Grey Bruce.

Health care providers and the Grey Bruce Health Unit submit ticks found on humans for identification and, if found to be black-legged, further bacteria testing. In 2018, the Grey Bruce Health Unit continued to work with the Grey Bruce Veterinary Association to obtain ticks taken from animals throughout the region. Species identification from this surveillance confirms the widespread presence of black-legged ticks. In 2019, veterinary surveillance will change to report laboratory confirmed cases of Lyme disease in animals. This will provide a better understanding of the prevalence of infected ticks and the risk to human health. It will also provide data for determining locations for tick dragging.

In addition to passive surveillance, active surveillance by tick dragging will be carried out in 2019. Tick dragging attempts to isolate vector species in areas that have been identified as higher risk (e.g., where positive ticks or cases have been found). The ongoing presence of ticks at various times of the year confirms the existence of a sustained breeding population. Tick dragging will take place in the spring and fall at a small number of selected locations.



Mosquito Trap



Tick Dragging