

**WINDSOR-ESSEX COUNTY HEALTH UNIT  
AGENDA**

**REGULAR BOARD MEETING**

*Windsor Site*

*Location: 1005 Ouellette Avenue, Windsor, ON  
(519-258-2146)*

**\*\*4 P.M.\*\***

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**2011 September 15**  
*(Estimated Time)*

	<u>Page</u>
1.0 Call to Order	
2.0 Moment of Reflection	
3.0 Agenda Approval	
4.0 Announcements of Conflicts of Interest	
5.0 Formal Introduction of Dr. Gary Kirk, Associate Medical Officer of Health (Acting) (5 min)	
6.0 Adoption of Minutes (5 min)	
6.1 Regular Board Meeting: 2011 June 16	1
7.0 Consent Agenda: (5 min.)	
a) Report Number 2011-R021-CORP-0915-GAH from Dr. Heimann, Medical Officer of Health dated September 15, 2011; Medical Officer of Health Report to the Board of Directors	4
b) Report Number 2011-R022-CORP-0915-GMK from Dr. Kirk, Associate Medical Officer of Health (Acting) dated September 15, 2011; Associate Medical Officer of Health (Acting) Report to the Board of Directors	8
c) Report Number 2011-R023-HPROT-0915-GAH from Dr. Heimann, Medical Officer of Health dated September 15, 2011; Health Protection Division Report to the Board of Directors	9
d) Report Number 2011-R024-HPROM-0915-LH from Liz Haugh, Director, Health Promotion dated September 15, 2011; Health Promotion Division Report to the Board of Directors	12
e) Report Number 2011-R025-CORP-0915-SK from Sharon Kelly, Director, Corporate Services dated September 15, 2011; Corporate Services Division Report to the Board of Directors	19
f) Report Number 2011-R026-HR-0915-NS from Nancy Smith, Director, Human Resources dated September 15, 2011; Human Resources Report to the Board of Directors	24

Moved by

Seconded by

THAT the reports listed on the Consent Agenda for September 15, 2011 as items 7a) to 7f) be received.

8.0 Reports and Questions

9.0 Business Arising

9.1 OCCHA Presentation (5 min.)

9.2 Recognition of Contributions—B. Allison and M. Holdsworth (5 min.)

9.3 Bank Signatories (5 min.)

10.0 Media Coverage –Circulated

11.0 Correspondence

11.1 Circulation

12.0 New Business

12.1 Strategic Planning Initiative (5 min.)

12.2 Staff Updates Presentation (5 min.)

12.3 Organization Chart (5 min.)

13.0 Committee of the Whole (20 min)

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14.0 Next Meeting: At the Call of the Chair or 2011 October 20 (Windsor)

15.0 Adjournment

# WINDSOR-ESSEX COUNTY HEALTH UNIT MINUTES REGULAR BOARD MEETING 2011 June 16

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Minutes of the Regular Board meeting held on Thursday, 2011 June 16.

**Board Members Present:**

Mr. Mark Carrick	Mr. Gary McNamara
Ms. Eleanor Groh	Mr. Rob Modestino
Mr. Bill Marra	Ms. Tamara Stomp

**Board Member Regrets:**

Ms. Joanne Gignac	Ms. Lynda Monik
Mr. Al Maghnieh	Mr. Hilary Payne
Mr. Richard Meloche	

**Administration Present:**

Dr. G. Allen Heimann	Ms. Nancy Smith
Ms. Liz Haugh	Ms. Rosanne St. Denis (Recorder)
Ms. Sharon Kelly	

**Guests:**

Mr. Mike Wills, Legal Counsel, McTague Law Firm  
Mr. Mike Janisse, Manager, Communication Resources Department, WECHU

- 1.0 The meeting was formally called to order at 4:08 p.m. by the Chair, Mr. Gary McNamara.
- 2.0 Moment of Reflection conducted by the Chair.
- 3.0 **Agenda Approval**—Approval of agenda not recorded.
- 4.0 **Announcements of Conflicts of Interest**—None noted.
- 5.0 **Board Election—Executive Position, Treasurer**

The Chair opened the floor for nominations for the position of Treasurer. A nomination was received for Mr. Rob Modestino, moved by Ms. Eleanor Groh and supported by Mr. Mark Carrick. The floor was opened to further nominations. There being none nominations were declared closed. Mr. Rob Modestino accepted the position of Treasurer by acclamation.

## **6.0 Adoption of Minutes**

### **6.1 Regular Board Meeting – 2011 May 19**

It was moved  
**that the minutes of 2011 May 19 be received as read.**

Moved by	Ms. Eleanor Groh
Seconded by	Mr. Rob Modestino
	<b>CARRIED</b>

## **7.0 Consent Agenda**

It was moved  
**that the reports listed on the Consent Agenda for 2011 June 16 as items 7a) to 7e) be received.**

Moved by	Mr. Rob Modestino
Seconded by	Ms. Tamara Stomp
	<b>CARRIED</b>

## **8.0 REPORTS AND QUESTIONS—None**

## **9.0 BUSINESS ARISING**

### **9.1 WECHU Bylaws**

No update.

### **9.2 alpha Annual Conference**

The conference focus was accountability. The proposed accountability agreements were reviewed. It was announced that compliance indicators will be developed with both performance and compliance indicator reporting to commence in 2012. The accountability agreement will be received once the 2012 budget is announced. The Ministry is requesting the accountability agreement be signed by September 2011.

Dr. Heimann highlighted L. Haugh's receipt of alpha's Distinguished Service award for her public health leadership, her work, and devotion to public health at the local and provincial levels.

All resolutions were passed by the alpha board including one requesting more Healthy Smiles Ontario funding.

## **10.0 MEDIA COVERAGE—Circulated**

**11.0 CORRESPONDENCE**

**11.1 Circulation**

**12.0 NEW BUSINESS**

**12.1 Healthy Smiles Ontario Launch-June 16**

The ribbon cutting ceremony and program launch were well attended by various dignitaries to include good media coverage.

**13.0 COMMITTEE OF THE WHOLE**

It was moved  
**that the Board move into Committee of the Whole at 4:30 p.m.**

Moved by Ms. Eleanor Groh  
Seconded by Mr. Rob Modestino  
**CARRIED**

It was moved  
**that the Board rise from Committee of the Whole at 5:56 p.m.**

Moved by Mr. Rob Modestino  
Seconded by Mr. Bill Marra  
**CARRIED**

**14.0 NEXT MEETING - At the Call of the Chair or 2011 September 15 (Windsor). At the September Board meeting the Health Unit will be looking to organize a presentation to Mr. Bill Allison and Mr. Mike Holdsworth to acknowledge their contributions to the Board. Board members were invited to the staff barbecue on June 28 from noon to 1:30 p.m.**

**15.0 ADJOURNMENT**

It was moved  
**that the regular portion of the meeting of the Board adjourn at 6:07 p.m.**

Moved by Mr. Rob Modestino  
Seconded by Mr. Mark Carrick  
**CARRIED**

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Recording Secretary

**SUBMITTED BY:**

**APPROVED BY:**

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Medical Officer of Health  
Board Secretary

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Chairperson

/rs

**Report Number 2011-R021-CORP-0915-GAH**

**REPORT OF THE MEDICAL OFFICER OF HEALTH  
AND  
CHIEF EXECUTIVE OFFICER  
TO THE CHAIRPERSON AND MEMBERS OF THE BOARD OF THE  
WINDSOR-ESSEX COUNTY HEALTH UNIT**

**2011 September 15**

I am very pleased to report that our new Associate Medical Officer of Health (Acting), Dr. Gary Kirk, began work on August 15. For his first year Dr. Kirk will have the title of 'Acting' Associate Medical Officer of Health while he completes his probationary licensure period as required by the College of Physicians and Surgeons of Ontario. Dr. Kirk will have all the authority and responsibilities of an Associate Medical Officer of Health with the exception that he will not legally be able to sign orders under the Health Protection and Promotion Act.

During the summer a request for proposal for a strategic planning initiative was sent to three consultants. The proposals were received and a consultant has been selected. Dr. Brent Moloughney and Ms. Jacqueline Schach of BWM Health Consultants will be providing assistance in the conduct of a strategic planning initiative. Dr. Kirk will be the lead contact with the consultants as well as chairing the steering committee. Dr. Kirk and I will be having our first teleconference with the consultants on September 12. Dr. Kirk will have a more detailed report at the upcoming board meeting.

For the last several weeks Dr. Kirk has been undergoing primarily his internal orientation to the Health Unit. Although he has been introduced to the community and the media through a media release and has had the opportunity to do a number of interviews, in September I will begin introducing him to our community partners and community organizations.

The Town Hall meeting with staff was conducted on June 17. I would like to thank all the members of the board who were able to attend. The meeting provided excellent discussion with good participation from staff. The concerns and suggestions made by staff both at the Town Hall meeting and a prior Board-Management-Union meeting have been addressed throughout the summer and reviewed with the Executive Committee.

In August the 2011 budget was received along with the new accountability agreement. The budget will be reviewed as a separate agenda item. The accountability agreement contains 14 indicators. A copy of the indicators are attached to this report. The indicators are scheduled to be tracked for three years. The first year (2011) will establish a baseline which will be tracked over the next two years.

The Heat Alert Response System (HARS) which was launched on June 8 operated throughout the summer for the first time. We issued a total of 11 Alerts: 9 each Level One Alerts when the temperature reached 40<sup>+</sup> degrees of humidex and 2 each Level Two Alerts when the temperature reached 45<sup>+</sup> degrees of humidex. I continue to work with Karina Richters who is managing the Climate Change Adaption Initiative for the City of Windsor to participate in a Vulnerability and Risk Assessment workshop.

The West Nile Virus program continued for 2011. The larviciding program began on June 13 along with the surveillance program. So far this year two human cases of West Nile virus have been reported; one through screening of blood donations by the Canadian Blood Services and a second clinical

admission to hospital. Both individuals were males in their 50s with no significant history of travel. Eleven positive mosquito pools have been found (two in LaSalle, one in Amherstburg, one in Lakeshore, one in Essex, and six in Windsor). The program will continue into September until falling temperatures and decreasing daylight bring the 2011 season to an end.

My staff and I have continued to work on the bedbug program noted in my previous report. We have completed an agreement with Citizen Advocacy who will provide intake and screening for the program which is designed to focus on remediation of residences for those individuals who are most vulnerable. It is expected that the program will be launched in mid to late September with a media release.

I would like to take this opportunity to welcome board members back after what I hope was a pleasant and safe summer.

Respectfully submitted,

G. Allen Heimann, MD, MHSc  
Medical Officer of Health

GAH:rs

Attachment: Performance Indicators

<b>Table A: Performance Indicators Based on Program Standards<sup>3</sup></b>				
<b>INDICATOR</b>	<b>Baseline</b>	<b>Performance Target<sup>1</sup></b>		
		<b>2011<sup>2</sup></b>	<b>2012</b>	<b>2013</b>
% of high risk food premises inspected once every 4 months while in operation	TBD	Establish Baseline		
Proportion of pools and public spas by class inspected while in operation	TBD	Establish Baseline		
% of completed SDWS inspections, of those that are high risk, that are due for re-inspection	TBD	Establish Baseline		
Time between health unit notification of Gonorrhoea and initiation of follow up	TBD	Establish Baseline		
Time between health unit notification of an i-GAS case and initiation of follow up	TBD	Establish Baseline		
% of known high risk personal services settings inspected annually	TBD	Establish Baseline		
% of vaccine wasted by vaccine type (HPV, influenza, pneumococcal, and DPT) that are stored/ administered by the PHU	TBD	Establish Baseline		
% completion of reports related to vaccine wastage by vaccine type (HPV, influenza, pneumococcal, and DPT)	TBD	Establish Baseline		

<b>Table A: Performance Indicators Based on Program Standards<sup>3</sup></b>				
<b>INDICATOR</b>	<b>BOH Baseline</b>	<b>Performance Target<sup>1</sup></b>		
		<b>2011<sup>2</sup></b>	<b>2012</b>	<b>2013</b>
% of school-aged children who have completed immunizations for Hepatitis B, HPV and meningococcus	TBD	Establish Baseline		
% of youth (ages 12 - 19) who have never smoked a whole cigarette	TBD	Establish Baseline		
% tobacco vendor compliance with legislation by infraction type	TBD	Establish Baseline		
Fail-related emergency department visits by age group (age groups TBD)	TBD	Establish Baseline		
% of population that exceeds Low-Risk Drinking Guidelines	TBD	Establish Baseline		
Baby Friendly Initiative Status	TBD	Establish Baseline		

**Notes:**

- 1) Performance Corridors for each Performance Target are identified below the Performance Target in brackets.
- 2) BOH Baselines will be established for each Performance Indicator during Funding Year 2011, where possible. Reporting on Performance Targets will begin in Funding Year 2012.
- 3) Reporting on Organizational Standards and other items will begin in Funding Year 2012.

**Report Number 2011-R022-CORP-0915-GMK**

**REPORT OF  
THE ASSOCIATE MEDICAL OFFICER OF HEALTH (ACTING)**

**2011 September 15**

**Highlight: *Strategic Planning Process***

The consultant firm for the health unit's strategic planning has been chosen. It is BWM Health Consultants Inc., represented by Dr. Brent Moloughney and Ms. Jacqueline Schach. Between Dr. Moloughney and Ms. Schach, BWM has many years of experience in public health strategic planning at the national, provincial, and local levels. They come highly recommended.

It is anticipated that an initial pre-planning conversation with BWM will have occurred by the time of the September Board meeting; more details will be presented there. The entire strategic planning process will occur between September and December 2011. A final report to the Board should occur in early 2012.

**Report Number 2011-R023-HPROT-0915-GAH**

**HEALTH PROTECTION DIVISION**

**Report to the Board of Directors**

*2011 September 15*

**VACCINE PREVENTABLE/COMMUNICABLE DISEASE DEPARTMENTS**

(Manager, Line Lauzon)

**Vaccine Preventable**

The Vaccine Distribution team has been assisting health care professionals with the interpretation of the new *Publicly Funded Immunization Schedules for Ontario, August 2011*, which included three new vaccines--Rotavirus; Adult Tetanus Diphtheria and Pertusis; Measles, Mumps, Rubella, and Varicella. This increases the number of free vaccines to 14 and protects individuals against 17 diseases.

The VPD team held 29 in-house vaccine clinics which resulted in the administration of 886 vaccines. They visited 75 day cares and provided staff with a review of the immunization requirements under the Day Nursery's Act.

We are starting the school year extremely well with over 85 % of the 7,192 JK and SK students registered on the Ministry's immunization database and up to date on their immunization. The public health nurses have been contacting the parents of students who have not been immunized or who are incomplete in their immunization. In the next few weeks 17,000 consents forms will be distributed to student who are eligible for the School Based Immunization Program, Grade 8 Girls Human Papillomavirus (HPV) vaccine, and Grade 7 Hepatitis B and Meningococcal vaccine.

**Communicable Disease**

We have confirmed our first human case of WNV and are awaiting pending laboratory results on two more. During July and August the team investigated 95 cases of confirmed or probable reportable diseases similar to the summer of 2010. The top two reported diseases were enteric, 47 campylobacter cases and 14 salmonella.

**Tuberculosis**

This year we have had five cases of active TB; 3 pulmonary and 2 non-pulmonary. Only one TB case remains on Directly Observed Therapy. A group of Bhutanese immigrants arrived in late August and received TB screening. Two of the ten clients are been investigated for active TB.

## **HEALTH INSPECTION DEPARTMENT**

(Manager, Rob Lyons)

### **Safe Food Counts**

To date a total of 2,075 facilities have been rated in Windsor-Essex County. Their ratings are as follows:

5 Star Facilities	1867
4 Star Facilities	174
3 Star Facilities	25
2 Star Facilities	6
1 Star Facilities	3

**Ninety-seven percent of facilities continue to be 5 or 4 star**

### **Rabies**

As of September 1, 2011 there were 356 animal bite cases investigated in the City of Windsor, 193 cases investigated in the County. Of these, 26 have resulted in a recommendation for rabies post exposure prophylaxis due to the circumstances of the case (animal unable to be located or quarantined).

### **2011 Beach Season**

During beach season the Windsor-Essex County Health Unit has been testing the water at 10 public beaches to ensure they are safe for public swimming. Once a week Public Health Inspectors take water samples to check E. coli levels and every Friday the Health Unit's website is updated with the results. To date only two beaches have been ordered closed throughout the summer for a period of only one week each.

### **Fairs and Festivals**

Public Health Inspectors have attended several events throughout Windsor-Essex. Inspections will continue throughout the month of August and into September.

### **West Nile Virus**

The West Nile Virus program was in full swing over the summer months. Mosquito pool testing was conducted throughout Windsor and Essex County. To date 11 pools have tested positive in Windsor and Essex County. The third round of larvaciding was completed this season in August.

## **CLINICAL SERVICES DEPARTMENT**

(Manager, Nichole Fisher)

The Sexual Health Clinic has recently become a 'Rainbow Health' designated healthcare provider. The Rainbow Health Ontario Provider Directory features listings of programs and services as well as

individual service providers that have expressed a commitment to providing competent and welcoming care to LGBT (lesbian, gay, bisexual, and transgender) people in Ontario. It is designed to facilitate and improve access to LGBT health and social services in Ontario by providing a central source of information (<http://www.rainbowhealthontario.ca/lgbtHealth/find.cfm>). The Clinical Services team will be working with the Comprehensive School Health team this school year to provide the Sexually Transmitted Infections (STI) portion of the health teaching in elementary and high schools that request a presentation. The nurses in the clinic also continue to provide ongoing teaching for the Windsor Police New Recruit Division on Blood Borne Infections, as well as a comprehensive STI presentation for the John Howard Society for first time offender “Johns” that have solicited a prostitute. The clinic continues to attend the AIDS Committee of Windsor Wednesday drop-in clinic to provide STI testing. Even though each month varies in participants who wish to be tested, we have identified positive clients that we may not have seen at our clinic.

The Travel Immunization Clinic continues to be full for appointments each week and appointments can be accommodated at this time of the year with a wait time of 3-4 weeks. We average 24-30 patients per week. We also average 17 clients per month requesting Yellow Fever vaccine.

Respectfully submitted,

G. Allen Heimann, MD, MHSc  
Medical Officer of Health

**Report Number 2011-R024-HPROM-0915-LH****HEALTH PROMOTION DIVISION****Report to the Board of Directors*****2011 September 15*****FAMILY HEALTH DEPARTMENT****Child Repro Health**

(Manager, Debbie Silvester)

*Intake Statistics for June 1 – August 31, 2011:*

	<b>June</b>	<b>July</b>	<b>August</b>
Total Interactions	92	135	158
#1 reason	Breastfeeding (25)	Breastfeeding (23)	Breastfeeding (27)
#2 reason	Health Babies Health Children (13)	Health Babies Health Children (20)	Health Babies Health Children (24)
#3 reason	Health Eating (10)	Growth & Development (16)	Growth & Development (19)
#4 reason	Growth & Development (9)	Healthy Pregnancy (12)	Healthy Pregnancy (20)

**Prenatal Programming in July, August, and September:**

*In-class program (5 week series):* In July and August two series ran in Windsor and one ran in Leamington. In September there are two series running in Windsor and one running in Leamington.

*On-line program:* As of the end of August, 78 women have signed up for the online prenatal program.

*Building Blocks for Better Babies (13 week series):* The programs run weekly at two locations in Windsor and at one location in Leamington. The current 13 week series started the week of September 6, 2011. PHNs continue to distribute prenatal vitamins to the BBBB clients. We have given out approximately 200 bottles so far this year. In July Jameison™ donated an additional 504 bottles of prenatal vitamins.

*Prenatal Education Survey:* In June, the Health Unit's RED committee approved the survey recommending only minor changes. We plan to conduct the survey in October or November.

**Parenting Programming in July, August, and September:**

*Just For Moms & Babies (6 week series):* In July and August, one series ran in Windsor and one ran in Belle River. In September two series are running in Windsor and one series is running in Leamington.

*Ontario Early Years Centres, Parent and Family Literacy Centres, and Drop-In Centres:* Staff is currently booking NutriSTEP and Developmental screening clinics with the centres for September and October. Most of the centres were closed over the summer. Eleven clinics were held in June, one in July, and one in August.

## **Food Security/Priority Populations**

Thelma Maxwell was the successful applicant for the new priority population nursing position on our team. She will be starting on the team on September 12, 2011. Thelma will be working closely with Neil MacKenzie and his nutrition team, along with community partners to address food security in our community.

## **Healthy Babies/Healthy Children Program (HB/HC)**

(Managers, Beth Kinnaird-Iler and Debbie Silvester)

### Ministry Research Concludes

As you are aware, Windsor HBHC, along with eight other health units has been part of a Ministry initiated research project looking to validate a more comprehensive screening tool. Windsor Regional Hospital (WRH) staff and HBHC PHNs have played an integral role in the project and thanks to a well coordinated effort all required data has been forwarded to the Ministry and we are back to our usual screening procedures. Preliminary project results will be available soon with a final report anticipated early 2012.

It is the hope that an enhanced HBHC screening tool will enable referring agencies such as WRH to more accurately identify families at risk, thereby enabling more focused intervention to families most in need. The Ministry's desire for HBHC services to focus more attention on high-risk families has garnered criticism among public health professionals. There is ongoing concern that attending to the high-risk families as a priority population will result in dilution of universal aspects of the program.

### Staffing Update

The PHN group has enjoyed a very stable staff for many years. This has resulted in a group of highly experienced nurses working in the community with young families. However, change is imminent! As the team bids farewell to 4 nurses, it also welcomes 4 new nurses beginning on September 12. In addition to the ongoing program work, the nurses, family home visitors, and clerks will be working hard to orientate the new staff and integrate them into the HBHC team. We welcome our new team members and look forward to sharing all the exciting components of the HBHC program!

## **CHRONIC DISEASE AND INJURY PREVENTION**

(Manager, Kristy McBeth)

### **Injury Prevention**

#### Falls Prevention Locally Driven Collaborative Project (LDCCP)

WECHU has committed to participating as a collaborating organization in a locally driven collaborative project through *Public Health Ontario*. The proposed project topic is *Engaging Community-Based Organizations in Fall Prevention for Older Adults: Moving from Research to Action*. The total amount requested for this project is \$100,000. The project will be supported by and coordinated from the School of Nursing Research Support Services (SNRSS) at McMaster University under the supervision of Dr. Maureen Markle-Reid. The SNRSS will assume primary responsibility for coordinating and implementing the project in collaboration with the other eleven organizations (10 Ontario Public Health Units and the Ontario Neurotrauma Foundation) partnering in this research. The grant proposal was submitted to Public Health Ontario on August 31, 2011. If accepted, the two-year project will begin in the fall of 2011.

## **Physical Activity**

### Zoomers in Motion

On September 11, 2011 (Grandparent's Day), WECHU will assist with the Zoomers in Motion workshop at Devonshire Mall. The goal of this initiative is to educate adults aged 55+ on how to reduce some of the barriers that they may face when being physically active and living healthier lifestyles. This will be done through live interactive physical activity and injury prevention demonstrations. Bike and pedestrian safety, line dancing, falls prevention, urban poling, yoga, belly dancing, and zumba are just some of the demonstrations scheduled that day. Health and local programming information and promotional resources including foot grippers will also be available. This project is funded through a \$50,000 Healthy Communities Fund grant through the Ministry of Health Promotion and Sport to the Centre for Seniors in Windsor. There are seventeen community partners working together for this project.

### Go For Health-Active Communities Summit

Over the past year, the Go For Health (GFH) Government Sector has been supporting the County of Essex to gain the support of local municipalities to adopt the County Wide Active Transportation (CWAT) master plan. Currently, 90% of the municipalities have adopted this master plan in principle and are now looking toward funding options. To further assist in this process, Go For Health, the County of Essex, and Share the Road Cycling Coalition have partnered to bring the Active Communities Summit on October 3, 2011 to the Transportation Museum in Essex. The Summit will host guest speaker Mayor Dave Cieslewicz, Mayor of Madison, Wisconsin (2003 – 2011). Mr. Cieslewicz led the City of Madison to become a Platinum level Bicycle Friendly Community. The summit will also feature expert speakers on the current status of Essex County's CWATS master plan, creative funding approaches for active transportation, and discussion on how communities can successfully influence their culture, economy, and built environment by implementing active transportation strategies.

## **Tobacco Enforcement**

Between June – September 2011, Tobacco Enforcement Officers (TEOs) issued twenty one Provincial Offence Notices. Nineteen were for selling tobacco to a minor; one was for smoking tobacco in an enclosed workplace; and one was for a proprietor allowing a person smoking or holding lit tobacco to remain in an enclosed public place.

## **CHRONIC DISEASE PREVENTION AND WORKPLACE WELLNESS**

(Manager, Neil MacKenzie)

### **City of Windsor Workplace Wellness Program**

#### Mental Health Initiative – Healthy Minds Matter

The Windsor Workplace Wellness Working Committee organized a week-long series of workshops and demonstrations in relation to the Mental Health Initiative offered to City employees during the months of April – July 2011. In total, 210 employees attended these workshops/demonstrations. Feedback was positive and there were many requests for the Wellness Program to offer more sessions in the future that are related to health and wellness.

### W.E. Can Quit Smoking Cessation Program

The City of Windsor Workplace Wellness Program will once again look at being a partner for the W-E Can Quit Project for Phase 2. We are planning to launch the program for City employees and their dependents in October 2011.

### Blood Drive Event

The Wellness Program is planning to host a blood drive initiative in late October for City of Windsor employees. The Working Committee is working in partnership with the Canadian Blood Services to help host this event.

## **Nutrition**

### Losing Weight the Healthy Way (LWTHW)

The Public Health Dietitian led LWTHW classes return this fall. The 10-week series of 2-hour classes begins Monday, October 3, 2011 in Windsor. Registration information, including posters and flyers advertizing the program, was sent to physicians, nurse practitioners, dietitians, and libraries. Interested participants are encouraged to register online at [www.wechealthunit.org](http://www.wechealthunit.org) or call 519-258-2146 x 3100.

### Go For Health (GFH)

GFH has identified the media as an important partner in sharing local human interest stories to generate excitement and support for local health policy initiatives. The GFH coalition is currently working with its nearly 40 community partners to generate stories to share with the media. To accomplish this, both hard copies and on-line versions of "Share Your Health Success Story" forms have been developed and distributed. These forms can be easily completed. Once completed they are returned to the GFH support staff for processing to the media and inclusion on the GFH website.

## **CCI Workplace Wellness Program (Windsor-Essex)**

### Employee Family Day Open House

On Saturday, August 6, 2011 an estimated 14,000 Chrysler employees, retirees, and their families attended an Employee Family Day Open House at Windsor Assembly Plant. Health Unit staff were invited to take part in the event by hosting a "Family Fun Boulevard". Many fun and interactive health learning activities were offered for participants of all ages. In support of the current wellness topic 'Oral Health', members of the Health Unit's Oral Health Team distributed over 1,600 dental kits (i.e., toothbrush, toothpaste and floss) to participants at the event.

### Working Toward Wellness Healthy Workplace Awards

The Windsor Assembly Plant and three other local Chrysler worksites have qualified for a Platinum Award for their efforts in promoting and supporting the health of their employees, retirees, and their family members.

### 9th Annual Health and Wellness Day for CAW Retirees in Windsor

On June 15, 2011 approximately 250 retirees attended this annual wellness event. In total, nearly 640 health screenings took place. Feedback from participants was very positive, both for the community agencies providing the services as well as for the retirees who attended. New this year was the opportunity for male retirees to consult with an oncology nurse to discuss risk factors and symptoms as well as management of an enlarged prostate. A total of 32 men had a consultation and 26 vouchers for a free PSA test were provided.

## **COMPREHENSIVE SCHOOL HEALTH DEPARTMENT**

(Manager, Theresa Marentette)

### **Nutrition**

#### Food and Beverage Policy

Nurses and the nutritionist have been working on several projects to support schools as they implement the new Food and Beverage Policy (PPM150) this year. Curriculum-based resources are being compiled and will be posted on the Health Unit's website. A pamphlet on healthy fundraising is near completion and fact sheets on preparing healthy lunches and healthy alternatives to student rewards are being developed. As well, information on the new policy will be highlighted in our 'Apple Seeds' newsletter which provides schools with information and messages to insert into their school newsletters. The Health Unit will continue to promote 'Nutrition Tools for Schools' in elementary schools, a nutrition resource that promotes an environment for healthy eating. The CSH nutritionist is currently assisting school boards with their food vendor agreements by reviewing food items to ensure compliance with the new Ministry of Education policy.

#### Eat Smart!® School Program

The Nutrition Resource Centre will be engaging in a strategic planning process based on the current priorities of the Ministry of Health Promotion and Sport and therefore will be on hiatus for this school year. We currently have 20 secondary schools that participate in this program. There will be a continued effort to support healthy eating and policy development in schools.

### **Tobacco**

The CSH public health nurse whose lead role is tobacco use prevention will be attending RNAO's Chronic Disease Management Institute this month. She will also be providing support to RNAO by manning a booth about implementing best practice guidelines in an organization.

### **Sexual Health**

A new online registration process was implemented for grade 8 and grade 9 teachers to register for in-class sexual health workshops. Curriculum based resources are available for grade 7 teachers to assist in teaching the healthy living strand of the grade 7 Health and Physical Activity curriculum. Resources will be available on the Health Unit website as well as in hard copy for teachers to borrow.

### **Substance Misuse Prevention**

#### Health Communities Project Grant

The Windsor Essex Drug Strategy Implementation Group is working with its community partners, including a school nurse to implement a peer-led project in each secondary school (Windsor-Essex Catholic District School Board). Each secondary school will have a community partner liaison with the peer group and Campus Minister to design and implement a project for the Grade 9 students entering secondary school. The project, titled "This is ME in Grade Nine", will focus on substance misuse prevention and mental health issues over the upcoming 2011/12 school year.

**Other**Anaphylaxis and Auto-Injector E Learning

The Health Unit will launch its new online training course this month for principals and teachers. The training will require participants to complete the modules and test section and provide a return demonstration of the use of an auto-injector. The return demonstration will be arranged by principals with their school nurse. The CSH department would like to thank the Communication Resources Department for all their hard work and coordination of this project.

**ORAL HEALTH DEPARTMENT**

(Manager, Rosemary J. Arsenault, RDH)

**TOTALS FOR THE MONTH OF JULY 2011**

July 2011	SCHOOL SCREENING		WINDSOR CLINIC				ESSEX CLINIC				LEAMINGTON CLINIC			
	# of Schools Completed	# of Students Screened	# of Children Screened	# NEW TO CINOT	# Of Sealants Placed at Clinic	# of Fluorides Completed	# of Children Screened	# NEW TO CINOT	# of Sealants Placed at Clinic	# of Fluorides Completed	# of Children Screened	# NEW TO CINOT	# Of Sealants Placed at Clinic	# of Fluorides Completed
<b>CINOT</b>	<b>0</b>	<b>0</b>	<b>172</b>	<b>75</b>	<b>12</b>	<b>29</b>	<b>27</b>	<b>9</b>	<b>0</b>	<b>10</b>	<b>127</b>	<b>43</b>	<b>7</b>	<b>77</b>
<b>CINOT Expansion</b>	<b>0</b>	<b>0</b>	<b>34</b>	<b>13</b>	<b>1</b>	<b>6</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>15</b>	<b>3</b>	<b>0</b>	<b>7</b>
<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>206</b>	<b>88</b>	<b>13</b>	<b>35</b>	<b>32</b>	<b>12</b>	<b>0</b>	<b>10</b>	<b>142</b>	<b>46</b>	<b>7</b>	<b>84</b>

**Healthy Smiles Ontario:**

# Of New Applicants: 32

# Of Cards Issued: 64

# of Fluorides Provided by Health Unit: 0

We have continued to operate our preventive clinics in the Windsor, Essex, and Leamington Health Unit sites throughout July and August. Staff have been travelling to all sites to cover for vacationing team members.

We are experiencing an increasing number of clients requesting our services for both the CINOT and Healthy Smiles Ontario (HSO) programs, and we continue to enrol more clients with their HSO cards.

We plan to spend the month of September with training modules to help implement the Ministry mandate of paperless collection of data in both schools and screening clinics.

Also, our HSO clinics will be operational beginning in September with hygienists and a part-time dentist in the Windsor and Leamington Health Unit sites.

## **EPIDEMIOLOGY DEPARTMENT**

(Manager, Ali Artaman)

### **Department activities include:**

- Ongoing communication with the IT and program departments of the Health Unit re: access to and requests for health data;
- Coordinating internal and external meetings related to compilation of information and select data for WEC Environmental Health Report;
- Ongoing extraction and analyses of data for WEC Reproductive Health Report; held regular group meetings with Family Health Department for review of the indicators analyzed; coordinated internal meetings on planning for *WEC Chronic Disease Report*;
- Reviewing statistical methods of comparative morbidity and mortality data analyses; communicated with epidemiologists in other health units re: analytic methodologies and data programming related to health status reports, time trend, and complex survey analyses
- Attended monthly meeting of Windsor-Essex County Smart Community Action Team
- Participated in teleconferences of the Ontario Council on Community Health Accreditation (OCCHA); had e-mail communication and/or participated in teleconferences of the following working groups of the Canadian Alliance for Risk Factor Surveillance (CARRFS): Environmental Scan; Symposium Planning, and the World Alliance for Risk Factor Surveillance (WARFS) Conference Local Organizing and International Scientific committees
- Epidemiology team members had e-mail communication and/or participated in teleconferences of the following working groups of the Association of Public Health Epidemiologists in Ontario (APHEO): Cancer Surveillance for Public Health, Small Rural and Northern Health Units, Reproductive Health Core Indicators, and GIS; Environmental Health Officer participated in meetings of Great Lakes Public Health Network and Windsor-Essex County Environment Committee
- Epidemiology team participated in a number of educational Webinars related to public health
- Regular communication between (Spatial) Data Analyst and GIS labs at the University of Western Ontario and Cancer Care Ontario

Respectfully submitted,

Liz Haugh  
Director, Health Promotion

**Report Number 2011-R025-CORP-0915-SK**

**CORPORATE SERVICES DIVISION**

**Report to the Board of Directors**

*2011 September 15*

**FINANCE DEPARTMENT**

(Accounting Manager, Jen Gretes)

The Ministry of Health has finally reviewed our annual financial settlements for the years 2006, 2007, 2008 and 2009. We are responding to their questions and have put the 2010 settlements on hold until the prior years are reconciled and approved by the Ministry.

The May, June, and July financial statements are included in this report.

All expense categories over 58% spent at the end of July have been reviewed and commentary is as follows:

*Assoc & Mem Fees* - timing of purchase – in line with expenditures of prior year

*Office Equipment Rental* – timing of payments – quarterly – will monitor

*Publications* – small budget – can be absorbed by other budget lines if over at year end.

*Promotional* – small budget – can be absorbed by other budget lines if over at year end.

*Prof Fees* – legal fees – do not expect expenses to exceed budget

*Rent* – August monthly payment issued in July so cheque is received by beginning of month

*Taxes* – timing of payment of tax demands – will monitor

*Insurance* – one payment for entire year, no other charges to be incurred and awaiting credits from change in deductibles

*Telephone* – overage – will monitor

*Postage & Freight* – will monitor – overage is minimal

*Parking* – August payment made at end of July so cheque is received by beginning of month

*Offset Revenue* – mainly vaccine revenue and dependent on timing of vaccine campaigns

*One-time Request* – received Ministry approval, new telephone system installed August, 2011.

*West Nile Virus* – program now started – third round of larviciding recommended – municipalities have been advised of possible budget overage and that they may have to pick up the costs in excess of Ministry approval.

Expenditures Less Than Planned:

*Salaries* – Clinical services is the only department on budget, all others below planned spending

*Benefits* – related to salaries under spent

*Prof Development* – expenses planned for last quarter

*Program Supplies* – waited to incur expenses until 1X approval for new telephone system was received – several IT expenditures planned for last quarter of year

*Purchased Services* – Strategic planning approved for fall

Township of Pelee has paid the amounts owing from prior years and has requested quarterly demands for current year cash flow.

## **INFORMATION TECHNOLOGY DEPARTMENT**

(Manager, Fernando Bayuga Jr.)

### **July Update**

To provide a more effective path to a server failure the System Support team has continued virtualizing physical servers into our virtual server infrastructure. Each virtual server is now getting a daily snapshot (full back-up image) that is backed up first via disk-to-disk and secondly to a back-up tape. This will provide a fast recovery in the event of a server failure. The back-up image can be transported to another physical host within minutes and reinitialized.

Working with the Communication Resources Department, the teams are looking for a new solution for the corporate intranet. A test server was created with a product called Drupal. It is PHP based and since some staff have good experience in this programming language, it will facilitate custom development that could meet our organizational needs.

Our online staff directory is under development. It will now be associated with the Human Resource staff database. This will allow for more current information to be displayed in the directory. Emergency contact information will be visible for authenticated users. Managers will readily be able to search for their staff or print reports for staff listings.

### **August Update**

The new phone system has been implemented across each site. The auto attendant script has been modified to direct callers more effectively. All staff received formal training on the features available in the new system. Mobile staff are able to login to the phones in any office which allows their extensions to follow them to the desk they are working. Several reporting features will be available that will help us better serve our clients. Soon all fax lines will be routed through the new system and a considerable amount of savings for long distance and Bell phone contracts will be realized.

The Barracuda Web Filter was switched to active mode in August. Policy-based browsing is now being enforced. Many non-work related websites are no longer available. Any staff wishing to access a specific blocked website must submit a Request for Access Form.

## **FACILITIES/SUPPORT DEPARTMENT**

(Manager, Deb Gemmell)

July and August were filled with moving, cleaning, and painting for my maintenance team. We were pleased to have approximately 90% of the 4<sup>th</sup> floor Corporate Services and Human Resources offices revamped prior to Dr. Kirk's arrival. The new meeting room on 4<sup>th</sup> is now equipped with a phone, computer, and LCD projector making it versatile for any type of meeting. The HR team is set up in their new area and we have only a few new cabinets to install in the reception area to complete 4<sup>th</sup> floor.

Nearly all offices within 3<sup>rd</sup> Floor Corporate Services have received a fresh coat of paint, carpets cleaned, and have undergone much reorganization, including the relocation of Central Office. Thanks to my maintenance team for their hard work over these past two months.

The landscaping at the front of our Windsor site was completed over the summer, but we are still awaiting the trimming of the dead branches in the trees around the building.

With the adoption of the new Retention Policy, a major clean-up took place at our off-site storage facility in August. This allowed for reorganization and new-found storage space for items on site to be housed at our off-site facility.

Our quarterly Joint Health & Safety meeting between our Windsor and County Committees is scheduled for Friday, September 16<sup>th</sup>. I have been contacted by a Workwell Evaluator to set up a time to carry out her assessment of the Health Unit later this fall.

## **COMMUNICATIONS RESOURCES DEPARTMENT**

(Manager, Mike Janisse)

During the months of June, July, and August 2011, the Communications Resources Department (CRD) continued to review departmental operations, workflows, and processes to better meet the Ontario Public Health Organizational Standards.

Some key projects we were involved in over the summer included:

On June 8, CRD with the City of Windsor launched the region's new Heat Alert and Response System (HARS), Stay Cool Windsor-Essex. The kick-off event took place at the John Atkinson Memorial Community Centre Splash Pad where many dignitaries and media attended. This project was developed in partnership with the City of Windsor and County of Essex with funding from Health Canada.

CRD has also been monitoring weather forecasts throughout the summer and sending out media releases and emails to staff and confirmed subscribers of the [www.staycoolwindsor-essex.com](http://www.staycoolwindsor-essex.com) distribution list whenever Dr. Heimann issues a heat alert. We also update [www.wehealthunit.org](http://www.wehealthunit.org) regularly to keep Windsor-Essex County residents informed when heat alerts are issued.

On June 16, CRD helped organize a ribbon cutting event for the grand opening of the Healthy Smiles Ontario Leamington Dental Clinic. Many dignitaries were on hand to help launch the clinic, along with media outlets from Essex and Leamington.

As part of the Town Hall meeting on June 17, CRD developed a survey that allowed staff to ask questions anonymously to the Board of Health. CRD analyzed the data and created a final report that included staff feedback, questions, opinions, and feelings. The report was shared with everyone in the organization prior to the meeting.

In early July, CRD started working on a staff needs assessment survey that relates to professional training and development opportunities. This was done to help address an organizational need found by Western Management Consultants. The survey was launched on September 6 and will run until September 16.

On July 29, the two CRD graphic designers that work out of the Essex office were moved into the same office. The move was done to facilitate team dynamics and build team chemistry.

On August 8, CRD launched the weekly update emails to staff. As part of an overall internal communications strategy to keep staff informed, CRD created stylized template email that is sent out each week that focuses on three main stories that link to more information on our intranet. Each email has unique content that may include new staff, tips, events, initiatives, media releases, and more.

On August 23, CRD wrote a media release announcing Dr. Kirk's arrival to the organization. Dr. Kirk was interviewed by CBC Radio, AM800 CKLW, and the Windsor Star. His arrival was also mentioned on CBC-TV.

The department also implemented some information technology changes over the summer months to enhance departmental efficiencies. The changes have allowed staff to work more closely on projects. We continue to move forward towards a unified project management system that will allow us to work more efficiently with each Health Unit department.

#### Day-to-Day Activities

- June 2011 was busier in every statistical category when compared to June 2010. However, when you compare June 2011 to the 2010 average, we were busier with Express Jobs, but slightly below average for Communication Reviews and print requests of over and under 500 copies.

	June 2011	June 2010	2010 Average
Express Jobs	109	55	79
Communication Reviews	36	30	37
Print Jobs < 500	48	44	51
Print Jobs > 500	3	0	4

- July 2011 was busier in the statistical category Express Jobs and print job requests of more than 500 copies, but not in Communication Reviews and print job requests of less than 500 copies, when compared to July 2010. When you compare the July 2011 to the 2010 average, we were only busier with print job requests of over 500 copies.

	July 2011	July 2010	2010 Average
Express Jobs	61	49	79
Communication Reviews	35	46	37
Print Jobs < 500	21	25	51
Print Jobs > 500	16	3	4

- August 2011 was busier in every statistical category with the exception of print job requests of less than 500 copies, when compared to August 2010. However, when you compare August 2011 to the 2010 average, we were consistently busier with Express Jobs and Communication Reviews.

	August 2011	August 2010	2010 Average
Express Jobs	104	84	79
Communication Reviews	53	39	37
Print Jobs < 500	47	55	51
Print Jobs > 500	3	2	4

#### Website Activity

- A *visit* is defined as a period of interaction between a browser and a particular website. There were 41 505 visits to [www.wehealthunit.org](http://www.wehealthunit.org) during the months of June, July, and August. June had a 7.61% increase in visits from the previous month of May. July had a 25.4% increase in visits from the previous month of June, while August had a 0.25% increase in visits from the previous month of July.

- *Unique visitors* are the number of unduplicated (counted only once) visitors to the website. During the months of June, July, and August there were 32 221 unique visitors. June had a 6.48% increase in absolute unique visitors from the month of May. July had a 19.15% increase in absolute unique visitors from the month of June, while August had a 3.65% increase in absolute unique visitors from the month of July.
- A *pageview* is an instance of a particular webpage being loaded by a browser. The ten most popular pageviews for the WECHU website during the month of June, July, and August 2011 were:
  1. WECHU Home Page
  2. How a Mother May Feel Physically After Childbirth
  3. Careers
  4. Beach Testing
  5. A to Z Topics
  6. Contact Us
  7. Beach Water Testing Results
  8. Beaches
  9. About Us
  10. Hours and Locations

Respectfully submitted,

Sharon Kelly  
Director, Corporate Services

**Report Number 2011-R026-HR-0915-NS**

**HUMAN RESOURCES DIVISION**  
**Report to the Board of Directors**  
*2011 September 15*

**POSTINGS/VACANCIES, RECRUITMENT****June – August Postings:**

Pstg#	<u>Position</u>
77 –	PHN HBHC Up to 1 year
78 –	HR Generalist FT
79 –	Administrative Assistant, Corporate Services FT
80 –	Payroll Clerk FT
81 –	Genetics Clerk FT
82 –	PHN HBHC FT - RETRACTED
83 –	PHN Priority Population Family Health FT
84 –	PHN Priority Population CSH FT
85 –	PHN VP x3 FT
86 –	PHN HBHC FT
87 –	Housekeeping/Maintenance Students x3 Temp.
88 –	PHN Clinic Up to 1 year
89 –	Manager HBHC FT
90 –	Manager CSH FT
91 –	Clinical Services Clerk Up to 1 year
92 –	Accounting Clerk FT
93 –	Oral Health Clerk FT
94 –	PHN CSH FT
95 –	PHN HBHC FT
96 –	IDD Clerk FT - DEEMED REDUNDANT
97 –	PHN HBHC FT
98 –	PHN VP up to 1 year - RETRACTED
99 –	CSH Clerk FT
100 –	PHN VP up to 1 year
101 –	IRIS Clerk FT
102 –	VPD Clerk FT - RETRACTED
103 –	IDD Clerk FT - RETRACTED
104 –	IRIS Clerk FT
105 –	PHN VP 8 months
106 –	PHN HBHC FT
107 –	Clinical Services Clerk Up to 1 year

**June – August Hires/Transfers:**

78 –	Jodi Wade – HR Generalist, transfer from Payroll Clerk
79 –	Janette Forsyth – Admin. Assistant, Corp. Services, transfer from Accounting Clerk
80 –	Vicki Boivin – Payroll Clerk, transfer from IDD
81 –	Theresa Sarkis – Genetics Clerk, transfer from IRIS Clerk

**June – August Hires/Transfers (Continued):**

- 83 – Thelma Maxwell – PHN Priority Population Family Health, transfer from CSH
- 84 – Dawnice Kavanaugh – PHN Priority Population CSH, transfer from HBHC
- 85 – Lora Prokopetz, Vicky DeLuca, and Kendra Neufeld-Stephens – PHNs VP, transfer from TB redundancy
- 86 – Danielle Preece – PHN HBHC, transfer from VP
- 87 – Tyler Raymont, Joel Archer, and Stephen Gemmell – House/Maint. Students, new hires
- 88 – Sherry Wright-Palcit – PHN Clinic Up to 1 year, transfer from VP
- 89 – Cathy Bennett – Manager HBHC, new hire starting September 19
- 90 – Jane Reiha – Manager CSH, new hire starting September 19
- 91 – Emily Durance – Clinic Clerk, transfer from contract
- 93 – Laura Durance – Dental Clerk, transfer from IRIS Clerk
- 94 – Therese Taiariol – PHN CSH, transfer from HBHC
- 95 – Amanda Ryall – PHN HBHC, new hire
- 97 – Mercedes Phalavong – PHN HBHC, transfer from VP contract
- 101 – Simone O’Neil – IRIS Clerk, transfer from contract
- 104 – Emily Durance – IRIS Clerk, transfer from Clinic
- 106 – Alison Chapman – PHN HBHC, transfer from VP contract
- 107 – Emily Durance – Clinic Clerk, transfer from IRIS

**June – August Resignations/Exits:**

Angela Pillon – maternity leave from Clinical Services  
 Carol Gifford – retired from HBHC Department  
 Roberta Wellman – retired from Dental Department  
 Cindy Vanier – maternity leave from Clinical Services

Now that our new HR team has settled nicely into our office space on 4<sup>th</sup> floor, we have been very busy working to accommodate all the changes that have transpired from the reorganizing and restructuring of departments. My team has been able to post 30 job positions since the first week in June and has successfully filled 21 of those positions to date. Aside from recruiting, my team has been working on developing, streamlining, and implementing processes within the department in order to deliver the best services possible to our health unit staff. They have received Info:HR training (HR electronic tracking system) and will now be able to utilize all aspects of the program to track and create reports on pertinent information about staff. In addition, they have opened up the lines of communication with HUMAT regarding staff hires, transfers, and exits and have streamlined the recruiting process.

**STAFF COLLECTIVE AGREEMENTS****ONA Contract Talks**

Mr. George King is contacting Ms. Marg Marcotte to set up dates for negotiations.

**CUPE Contract Talks**

Mr. George King and I met with the CUPE Ministry of Labour Conciliator on June 13. Sharon Kelly has forwarded the documents to CUPE explaining the zero percent wage issue from the Province.

**Grievances**

Meetings were held to discuss the three Professional Responsibility Complaints pertaining to workload issues that have been filed by ONA. Subsequent meetings have been scheduled.

## **HUMAN RESOURCES UPDATE**

### **Committees**

Senior Management Team – We met on a weekly basis to conduct regular business.

Management/Leadership Training – Additional training dates have been set for September 8 and 9, as well as November 2 and 3.

CUPE Labour/Management Committee – The next meeting will be held on September 13, 2011.

ONA Nurse/Management Committee – The next meeting is on September 16, 2011.

Respectfully submitted,

Nancy Smith  
Director, Human Resources