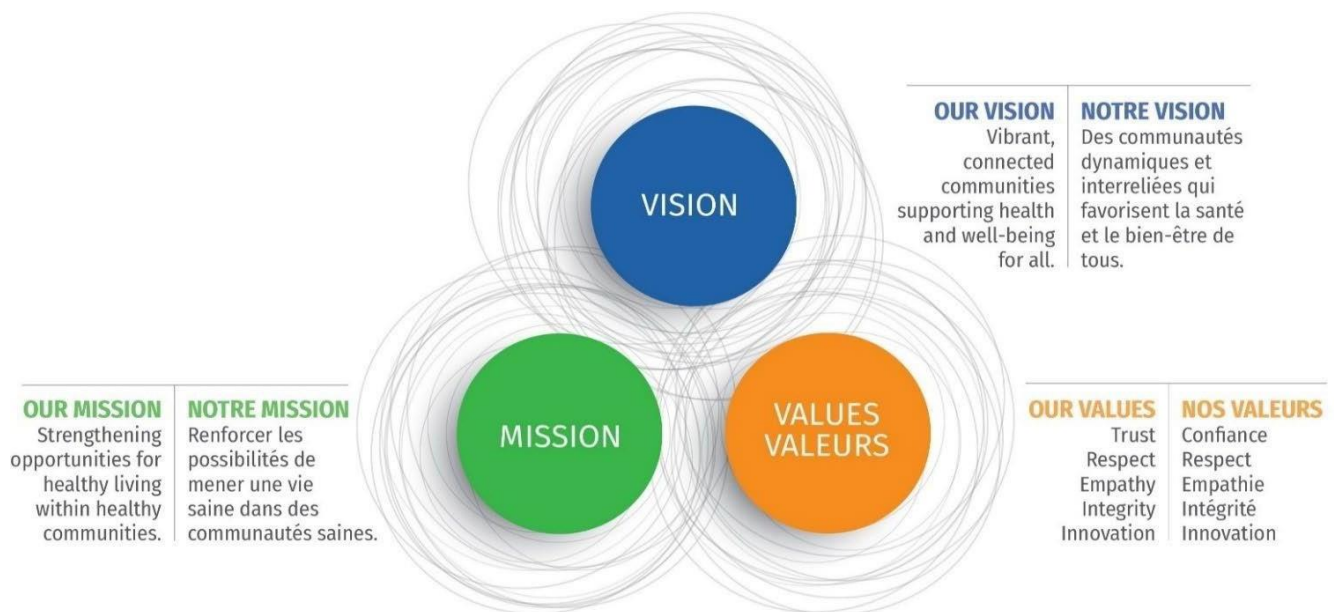


## Medical Officer of Health/Chief Executive Officer Report to the Board of Health



**We Are Public Health - Nous sommes la santé publique**  
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Prepared by Dr. Lianne Catton, MOH/CEO  
May 23, 2024 BOH Meeting

# General Report

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## 1. Board of Health (BOH)

### ***Strengthening Public Health***

In August 2023, the Ontario government announced that the province would be moving forward with a strategy to strengthen Ontario's public health sector. The Strengthening Public Health Strategy aims to optimize capacity, stability, and sustainability in the public health sector. The initiatives under the Strengthening Public Health strategy in the province continue.

*Ontario Public Health Standards (OPHS) Review:* Draft guidelines/protocols are to be shared shortly. An information session is booked for next week and we expect a survey for each health unit to complete to share feedback with the Ministry. It has been noted that there may not be a notable decrease in the expectations of the standards, which may create challenges and will require careful consideration in providing feedback.

*Supporting Voluntary Mergers:* There continues to be work and discussions regarding Ministry financial support for voluntary mergers, with three sets of health units who submitted the merger application to the Ministry April 2<sup>nd</sup>. In addition to the other five health units moving forward with mergers, the Boards of Health for Brant County Health Unit, and Haldimand-Norfolk Health Unit have announced their intent to move forward with a merger. Of the 8 mergers recommended in the 2006 Capacity Review Committee paper (which included a PHU representative), 2 moved forward before COVID-19, and now 4 groups including PHU-THU are taking important steps to strengthen public health by merging.

As we hear for other health units not merging, it is important to remember that each context is different; and the reasons for not moving forward is individual to each health unit and in many cases this announcement may have started the first ever consideration of potential mergers. This is very different from the PHU-THU context, where a merger has been recognized as critical for some time and was reinforced with lived experience during the COVID-19 pandemic.

*Public Health Funding Review:* While details have not been shared the north continues to be optimistic for the opportunity to review the funding strategy for public health, particularly for large geographic regions with low population density facing unique health inequities, historical trauma, significant gaps in opportunities and services to achieve optimal health outcomes, and an already poorer health status compared to the rest of Ontario in many indicators.

There will be further details and updates regarding the PHU-THU merger work as a separate item in the BOH agenda.

### ***Ministry Reporting***

Work has begun on the 2023 Annual Report and Attestation, due at the end of June. This annual reporting tool requires Board of Health to provide a year end summary report of program achievements and finances and identify any major changes in program planning activities due to local events and demonstrate compliance with programmatic and financial requirements from January 1, 2023 to December 31, 2023.

### ***Infrastructure***

Preliminary work is underway to address the HVAC and boiler system at the Timmins main office. Need for space, as well as ensuring effective and efficient space for staff and clients, remains a priority and continues to highlight the need for a new building in Timmins.

In April 2024, a total of 1130 individuals visited the main PHU building in Timmins and 161 individuals presented to reception to at the Timcor site. While noting there may have been extra visits due to ISPA enforcement, and the teams' ongoing additional availability to support parents requiring immunizations or in ensuring a valid exemption process has been completed as suspension letters were distributed this month.

Individuals come to the offices for various reasons such as:

- Access PHU programs and services (sexual health, immunizations, dental services, breastfeeding support, harm reduction, septic and water, etc.)
- Collect information (e.g. immunization records) or supplies (e.g. water bottles for sampling)
- Deliver mail and supplies
- Collect mail and packages
- Pick-up or return vaccines from health care providers and facilities

## **2. Ministry of Health Engagement/Leadership Roles**

Continued involvement at many tables includes the Council of Medical Officer of Health (COMOH) Section meeting was held on April 17, 2024; COMOH Executive meeting May 7<sup>th</sup>, the Public Health Leadership Table (PHLT) on April 17; the Association of Local Public Health Agencies (alPHa) Board meeting on February 15<sup>th</sup>; and the Northern MOH group continues to meet monthly as a group, as well as monthly with the northern Associate Chief Medical Officers of Health from the Office of the Chief Medical Officer of Health (OCMOH).

## **Knowledge and Strategic Services**

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### **1. Population Health Assessment and Surveillance**

The epidemiologist completed 2 epidemiology requests for service in April. The epidemiologist continued to provide weekly Integrated Respiratory Surveillance Report during this month but will pause until September 2024, as April 30<sup>th</sup> marks the end of the respiratory illness season. The epidemiologist reports monthly on infectious diseases locally in comparison to the province, sharing important trends that inform communications to health care providers, and community members as appropriate.

### **2. Research and Evaluation**

The managers of Environmental Health and Foundational Standards participated in a key informant interview as part of the “Identifying enabling supports and structures that will strengthen response to future disruption” research project. The Porcupine Health Unit has participated in the project’s advisory committee since the Fall of 2022.

### **3. Staff Development**

Foundations provided staff training:

- Health Communicator Role
- Indigenous Health Terminology
- Land Acknowledgment
- Priority Populations
- Population Health Assessment

A total of 35 staff attended these sessions.

Members of the team also are available for staff consultations to support planning, implementation and evaluation of

public health programs and services. In April 2024, 8 consultations occurred with the communication staff, 2 with the program planning specialist and 2 with the health equity nurse.

## 4. Communications

The Porcupine Health Unit's presence on social media channels promotes health messages and health unit programs and services.

Each channel targets a different population segment:

- Facebook – adults
- Instagram – high school students
- X (formerly known as Twitter) – workplaces

In April, 118 Facebook posts (French and English), 12 Instagram posts and 2 X posts were shared on the health unit's social media channels.

As of May, the PHU will no longer use X (formerly known as Twitter) as a social media platform.

- Since the change to X, there is no oversight to the social media channel which means X is not monitoring for racist, harmful, or incorrect comments or content.
- Racist, incorrect, and harmful comments or content are not being addressed by X – there is no way to remove them or their authors if we identify any.
- PHU currently uses X to share media releases to local media and at times, health messaging to workplaces. The media receives an email with the media release so X is not needed.
- PHU rarely posts content to X targeting workplaces. We can reach them through PHU Partners.

The PHU published a media release for the Immunization School Pupils Act Enforcement which resulted in a media interview. A media request was also completed for the Harm Reduction: Opioid Related Deaths for a total of 2 completed media requests.

## Corporate Services

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### 1. Human Resources

#### ***Professional Development & Health and Safety***

We continue with N95 mask fit testing, reinforcing our commitment to a safe and prepared work environment.

#### ***Recruitment***

Since the last Board of Health meeting, there has been one full-time permanent Public Health Nurse hired and the resignation of one permanent full-time Health Promoter both in the Timmins office.

#### ***Staffing Summary - Vacancies***

As of May 13, 2024, there were opportunities available for individuals looking to join the team, after careful assessment of program needs and risks as per the 2024 budget briefing note.

The PHU is currently seeking:

- Six Public Health Nurses
- Three Administrative Assistants
- One Human Resources Manager
- Two Summer Students – Environmental Health

## 2. Information Technology (IT)

For the period of April 15th to May 13th, a total of 74 IT tickets were submitted and resolved.

The IT department has several projects that are currently underway and continue to be ongoing.

**Active Directory Cleanup:** Working on the maintenance and clean up of Active Directory users and accounts and streamlining policies.

**Complaint Database:** Developing a Complaint Database for PHU working in conjunction with the Privacy Officer.

**Microsoft Review:** Working in conjunction with Microsoft to review Hardware and Software to ensure licensing compliance as well as explore where efficiencies and savings can be found with new software and or cloud hosted services.

**Security System:** Worked has commenced on the installation of a modernized security camera system that will add additional surveillance cameras to increase monitoring inside and outside of the main Timmins building.

**Telephone System:** Work has started on reviewing our telecom expenses and current services. This project will in turn look at opportunities for modernization and cost efficiencies. IT will be exploring options for a Unified Communications product that can be centrally managed, scalable, and meet all regulatory requirements as well as support physical and softphone features so that employees can be onsite or work remotely.

**Windows 11 Deployment:** All PHU Laptop systems have been upgraded to Windows 11.

**Hardware Updates:** IT continues to upgrade aged hardware where possible. All offices now have network switches and wi-fi access points updated. The next pieces of hardware that will need to be replaced are the Firewalls as they have reached End of Life and support will expire in October.

**Timcor Building:** Work continues installing a Fibre Internet Connection which is a redundancy measure to ensure that should there be a connection issue with the Point to Point that currently provides internet and phone services to the building that the interruption will be minimal.

**Sage 300 AccPac:** This is the financial software that is currently being used and requires an update prior to July. As part of this required update, exploring options for an updated server/hosting option.

**Printer Efficiencies:** IT is working on a plan for implementing efficiencies by reducing the printer footprint with PHU. This will include removal of printers, replacing aged and inefficient printers and overall scaling back the number of printers.

**Cell Phone Review:** Reviewing PHU cell phones and mobile hot spot hardware to support current needs for operations and reviewing if there are cell phones that are no longer required. Many of the current cell phones are outdated and cannot run current secure operating systems.

**Policies:** Three policies have been developed/updated: Acceptable Use of Artificial Intelligence, Email Use, and Internet Use. Two policies continue to be worked on: IT Disaster Recover and IT Incident Response.

The IT team has also recently conducted and completed all Spring Site visits to all PHU sites and continues to participate in ongoing discussions on merger planning and activities.

### ***Access to Information Requests***

Clients who want a copy of the health unit record must submit their request in writing. The Porcupine Health Unit complies with relevant privacy legislation to complete the requests received within 30 days. These requests are reported to the Information and Privacy Commissioner of Ontario on an annual basis. In April, no requests for client records were received. One other FOI request was received.

Requests for information from third parties with client consent are received frequently but do not need to be reported to the Information Commissioner of Ontario. Requests are most often received from the Cochrane Temiskaming Resource Centre and the Office of the Children's Lawyer.

## **Vaccine Preventable Diseases and COVID-19 Response Program**

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### **1. Vaccine Preventable Diseases (VPD)**

#### ***Routine Immunization***

Each PHU office offered routine immunization clinics, focusing on the delivery of vaccines to the general population.

Clients Served: The total number of clients served across all PHU offices in routine VPD clinics amounts to 332.

Vaccine Administered: A total of 574 vaccines were administered in these clinics.

During the month of February, each PHU office offered routine immunization clinics, focusing on the delivery of vaccines to the general population. The total number of clients seen across all branch offices in routine VPD clinics was 289, with a total of 431 vaccines administered in these clinics.

#### ***Travel Vaccine Clinics***

As the final step in no longer providing travel clinics, which are not required as per the public health standards in 2018, and as determined early in the pandemic, the PHU will be ending its Yellow Fever Vaccine Center designation. Vaccine can be accessed through Shoppers drug mart in Timmins as part of their travel vaccine clinics.

#### ***School Vaccine Program and the Immunization of School Pupils Act (ISPA)***

Twelve vaccine clinics were hosted at schools across the region as part of the Grade 7 school-based vaccine program, offering the second round of the Grade 7 vaccine series.

The PHU immunization team continues to focus awareness on the Immunization of School Pupils Act (ISPA). Efforts to raise awareness included social media campaigns, school e-blasts, and a media release reiterating the act's enforcement for the 2023-2024 academic year. The enforcement of ISPA was temporarily paused in March 2020 due to the COVID-19 pandemic.

As per ISPA, R.S.O.1990, it is mandatory for all Ontario students to be up to date with their vaccinations or have a valid exemption on file to attend in-person classes. Ongoing throughout the school year, the team reviewed immunization records, contacting families of students with incomplete records through mailed letters and three phone calls, one of which was made after business hours to accommodate working families. Vaccinations continued at school-based clinics and through in-office appointments.

In January 2024, over 2000 Suspension Prevention Packages were mailed to help families comply with ISPA before the April suspension date. These efforts were reinforced by the PHU's ongoing collaboration with schools, parents, and

guardians to facilitate immunization compliance, including booking appointments, updating records, and guiding through the exemption process.

As of April 1, 2024, over 320 students remained on the potential suspension list for failing to meet ISPA requirements. A final notice was sent on April 12, and official suspension notices followed on April 26, with suspensions beginning on April 30. The PHU maintained close communication with the Directors of Education (DOE), superintendents and school principals to ensure the smooth implementation of ISPA; while remaining available to support families through the process.

On April 30, 2024, suspension commenced for students with outstanding ISPA requirements. Students and families were informed they must meet the requirements of ISPA to have their suspensions rescinded. The PHU ensured availability of nursing staff at all PHU offices to handle walk-ins for immunization or exemption support. A full-day walk-in clinic in Timmins on April 30 and May 1 facilitated urgent access to immunization services, operating through lunch hours and evenings to minimize educational disruption.

Despite the suspension of approximately 166 students on April 30, the PHU and school staff worked tirelessly in the months and days leading up to the suspension to assist families in meeting ISPA requirements and prevent suspension. The PHU continues to meet families where they are, supporting them either to receive their vaccines or to complete an exemption process, ensuring all students can comply with ISPA regulations and return to school.

## 1. COVID-19 Response

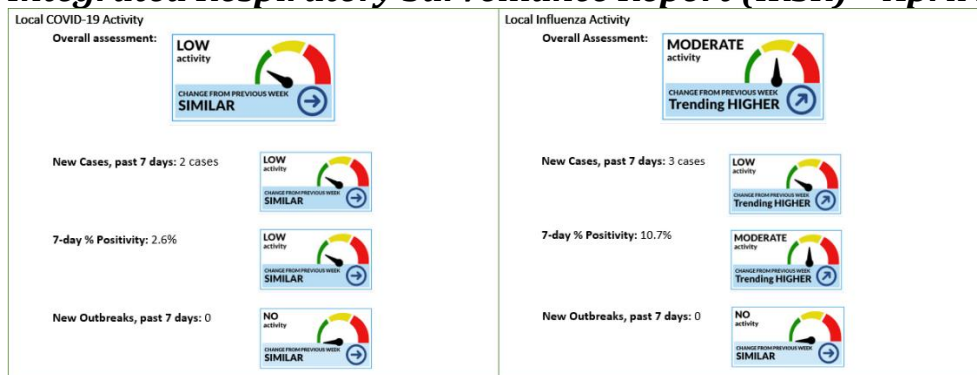
The Ministry of Health updated its COVID-19 vaccine recommendations for Spring 2024 to focus on high-risk residents who had not been vaccinated against COVID-19 in the previous six months. In addition, individuals aged 5 years and older who had not received a booster dose since September 1, 2022, were recommended to receive a booster dose if it had been at least 6 months since their last dose or confirmed COVID-19 infection. Recommendations for other individuals who are not high-risk and have already received a booster since September 1, 2022, will be available closer to Fall 2024.

### ***Vaccine Administered***

A total of 132 COVID-19 vaccines were administered in these PHU clinics.

## 2. Local COVID-19 and Influenza Activity

### ***Integrated Respiratory Surveillance Report (IRSR) – April 28 – May 4, 2024***



- Overall COVID-19 activity for surveillance week 18 (Apr. 28 – May 4) was low, similar to the previous week.
- Influenza activity in week 18 was moderate, trending higher than the previous week.

- Provincially, COVID-19 activity was low, similar to the previous week and influenza activity was low, lower than the previous week.
- Local % positivity data was not available for all respiratory viruses.
- Provincially, Enterovirus/Rhinovirus had the highest % positivity, followed by COVID-19 and then parainfluenza.

### ***Interpretation of Local COVID-19 and Influenza activity:***

#### ***COVID-19***

- In week 18, there were 2 new cases, indicating a low level of activity, similar to the previous week.
- The 7-day % positivity was 2.6%, indicating a low level of activity, similar to the previous week.
- There were no new outbreaks, similar to the previous week.

#### ***Influenza***

- In week 18, there were 3 new cases, indicating a low level of activity, trending higher than the previous week.
- The 7-day % positivity was 10.7%, indicating a moderate level of activity, trending higher than the previous week.
- There were no new outbreaks, similar to the previous week.

## **Health Promotion**

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### **1. Chronic Disease and Injury Prevention (CDIP)**

#### ***Concussions***

The Mennonite population in the PHU region continues to experience growth, and the PHN from the Matheson office has been strengthening ties with their community members and leaders. In April, the nurse was invited to deliver public health messages on safe cycling at a Mennonite school.

The Brain Waves concussion awareness program was successfully offered at École Catholique André-Cary in Kapuskasing, facilitated by the local public health nurse. In Timmins, positive feedback has been received from Northern College, including BScN students and professors, as well as from students, teachers, and principals at the schools where the program was offered. Planning is underway to implement the program again across the region for the 2024-2025 school year, aiming to further expand its reach and impact on concussion safety education. In Timmins, the same model will be used for the 2024-2025 school year, where the PHN in injury prevention provides a "train the trainer" day to BScN students from Northern College, who then deliver the program to students in schools.

As the warmer summer months approach, the need for enhanced awareness about cycling and concussion safety becomes increasingly important. To address this, a social media blitz focusing on cycling safety has been launched. Additionally, the PHU has received requests to partner in upcoming bike rodeos and plans are underway to actively participate.

#### ***Accidental Poisonings in Children***

Upon request, a presentation on child accidental poisonings was offered at the EarlyOn in Kapuskasing by a local public health nurse.

#### ***Falls in Older Adults***

The newly trained StandUp! instructors are eager to begin offering classes. The PHU is currently collaborating with community partners to secure a suitable location for these exercise classes. Ongoing discussions and meetings are taking place to evaluate potential locations, with the goal of commencing classes at the earliest convenience and in a



location accessible to those wishing to attend.

### ***UV Exposure***

A preliminary application to pilot a sunscreen dispenser project has been submitted to the Save Your Skin Foundation (SYSF). To initiate the pilot project, the PHU has been advocating for the placement of sunscreen dispensers in Timmins and in two branch communities, based on a review of local needs and the identification of priority populations including those experiencing homelessness, individuals living with substance use, and children and/or adults from lower socioeconomic families. Importantly, the pilot project includes sunscreen supply at no cost to the municipality for two summers (2024 and 2025). Strategic placement of the dispensers is essential to ensure accessibility for these groups, and to facilitate easy maintenance, refilling, and overnight indoor storage. To move forward, the next step of the process will be to engage municipalities and confirm partnerships to assume responsibility for the dispensers.

Upon request, a presentation on sun safety was offered at the EarlyOn in Matheson by a local public health nurse.

### ***Healthy Eating***

A public health dietician from the PHU has successfully completed the "You are the Chef" training and has initiated collaborative discussions with Northeastern Ontario Family and Child Services (NEOFACS). Together, they are planning a session through the Brighter Futures program, which will involve both staff and families. The ten weekly sessions are scheduled to run in the fall of 2024 from September 10th to October 14th. Planning is currently underway with all partners involved to ensure a successful implementation of the program.

### ***Coalitions***

In April, the PHU participated in several important coalition meetings, including the Stay on Your Feet Operational Committee, the Cycling Committee, the Ontario Injury Prevention Practitioner's Network, and the Heads Together Concussion Coalition

### ***Oral Seniors Dental Care Program (OSDCP)***

In April a total of 82 claims were processed and paid.

### ***Healthy Smiles Ontario***

Throughout the month, the dental team provided service to 49 children for preventative services and/or dental screenings in the Dental Clinic. Out of the 49 children seen, 15 children had dental decay and were enrolled on the Emergency and Essential Services Stream of Healthy Smiles Ontario (HSO).

During a PD Day in April, the dental teams in Timmins and Kapuskasing offered walk-in clinics for dental screening; one child presented and was screened.

### ***Health Promotions***

April is recognized as Oral Health Month. Communities across the region were engaged to raise awareness through a children's colour contest, targeted social media posts and a library display promoting PHU dental services. Additionally, engaging staff surveys were shared with staff internally via email throughout the month.

Sample Oral Health Month Social Media Post:



## April is Oral Health Month!

Good oral health boosts your general health, well-being, and your quality of life. Did you know? Dental disease not only causes pain and infection, it can affect:

- your sleep;
- how and what you eat;
- your self-confidence; and
- your personal and professional relationships.

For more information on oral health visit the Canadian Dental Association website, [https://www.cda-adc.ca/en/oral\\_health/index.asp](https://www.cda-adc.ca/en/oral_health/index.asp)

## 2. Healthy Growth and Development (HGD)

### ***Staff Vacancies***

Currently, the HGD program has one vacancy for a full-time temporary PHN. The position has been posted and interviews are underway.

### ***Staff Training***

Four Healthy Growth and Development staff members attended CAPSA's training titled "Stigma Ends with Me". This evidenced-based, 2-hour training, focused on biases and perspectives towards people who use substances. Staff gained valuable insights into the negative effects of stigma and how this impacts everyone.

One Healthy Growth and Development staff member attended the Public Health Ontario "2SLGBTQIA+ Families unique Perinatal Mental Health Concerns" webinar.

### ***Partnerships***

The Healthy Families team was invited to the Taykwa Tagamou Nation 2024 Indigenous Midwifery Gathering: a three-day gathering discussing the importance of midwifery in the indigenous culture and the effects of colonization on the perinatal phase. A key message from the gathering was "honoring Indigenous knowledge in birthing can be a liberating and healing practice".

During the month of April, the Healthy Families program led four educational sessions in partnership with EarlyON sites in four different communities (Hearst – French, Iroquois Falls, Cochrane, and Timmins). Topics included: Introduction to Solids; Safe Sleep, and Car Seat Safety. In total there were 33 participants.

During the month of April, the Healthy Families team in partnership with the EarlyON and Brighter Futures programs continued to plan and promote the hybrid prenatal series starting on May 2nd, 2024. The hybrid series provides clients with the opportunity to attend their local EarlyON site or attend the classes virtually. The in-person Porcupine Health Unit presenter for this first hybrid series is located at the Timmins EarlyON – NEOFACS site, with the intent of rotating the host community for future series. Public Health Nurses from each community with an EarlyON program attends the meet and

greet to meet clients in their community and discuss other services available. Attending their local EarlyON centres provides clients with the opportunity to make social connections with other expecting families and become familiar and comfortable with important resources available for their family in their community. 29 pregnant people registered for the series, and registrations are accepted throughout the series.

**Reports**

During the month of April, the Canadian Prenatal Nutrition Program (CPNP) Annual Reporting Tool (April 2023 –March 2024) was completed and submitted to the Public Health Agency of Canada. Important highlights include an increase in the number of individuals screened for CPNP and number of participants in the program as well as new partnerships were established with local organizations in Moosonee.

**1:1 Services**

	2022	2023	2024 – Q1
number of infant feeding assessments completed	260	461	124
number of in-person infant feeding support visits (clinic and home visits)	72	88	21
number of Clients screened for Canadian Prenatal Nutrition Program	67	84	28
number of clients participating in 1:1 CPNP program	21	31	21

Source: PHU internal databases pulled 2024-04-10.

**3. Healthy Babies Healthy Children (HBHC)**

**Staff Vacancies**

Currently, the HBHC program has one vacancy for a full-time permanent PHN. The position has been posted and interviews have taken place. The program was able to fill a Family Home Visitor (temp leave) vacancy in Kapuskasing.

**Staff Training**

One staff member attended a 2-day in-person ASIST (Applied Suicide Intervention Skills Training). ASIST training provides skill-building and increased awareness for suicide first aid interventions. Six HBHC staff members attended CAPSA’s training titled “Stigma Ends with Me”. This evidenced-based, 2-hour training, focused on biases and perspectives towards people who use substances. Staff gained valuable insights into the negative effects of stigma and how this impacts everyone.

**Partnerships**

The HBHC program provided preceptorship to a third-year nursing student from Northern College with observation of postpartum services offered by Porcupine Health Unit.

**Wait List**

As of May 8, 2024, in Timmins, the Healthy Babies, Healthy Children home visiting program is currently at capacity and in a wait list period. Clients placed on the waitlist are being screened using the Healthy Babies, Healthy Children screening tool to ensure eligibility for services and to gather information about risk factors for triage. All waitlisted clients receive monthly calls from a public health nurse to assess child and parent well-being and to identify needs for other community supports while they are on the waitlist. At this time, the approximate wait time for initiation of services is 4-8 weeks. Initiation of services for wait listed clients is prioritized based on the following considerations: time spent on the wait list, number and type of risk factors which would impact the child’s optimal growth and development, and the presence of health inequities for the family. Factors contributing to the need for a wait list in Timmins include volume of clients being

referred for services and current public health nurse vacancies (position is posted). Including all PHU communities, we currently have 45 families on our HBHC home visiting service. Based on need, families are supported with either weekly or bi-weekly visits by the Public Health Nurse or the Family Home Visitor. The funding for this program continues to be challenging as it has not seen increases in years, and has been flagged by many health units including the PHU as an important upstream program to support healthy communities.

### ***Home Visiting Services***

	<b>2022</b>	<b>2023</b>	<b>2024 – Q1</b>
number of Individuals Screened (Total - Prenatal): HBHC	11	25	5
number of Individuals Screened (Total - Postpartum): HBHC	502	548	144
number of Individuals Screened (Total - Early Childhood): HBHC	24	27	8
number of Individuals Confirmed with Risk (Total): HBHC	387	436	128
number of Families Served (Total - with Two or More Home Visits): HBHC	70	66	16
number of Individuals who Received an In-Depth Assessment: HBHC	63	67	45

*Source: ISCIS Reporting Sub-System. Monitoring Report 5.0 pulled 2024-04-10.*

## **4. School Health**

### ***Substance Use Prevention***

In April 2024, the Substance Use Prevention and Schools teams in collaboration with sister programs at Timiskaming Health Unit met with all four shared schoolboards to discuss data reports received from Planet Youth. Surveys completed in November of 2023 gave insight into several domains including sleep, substance use, screentime, and relationships with peers and adults. Each school board received specific reports from data collected in their respective high schools. PHU and THU will continue to collaborate with all schools and their boards to implement community-driven initiatives that are informed by this timely local data.

### ***School Dental Screenings***

The dental team completed dental screenings in 1 school, where 102 students were screened, and 4 students were identified with dental decay (4% decay rate). Out of these cases, 0 cases were deemed urgent for requiring immediate attention.

### ***Vision Screening***

The dental team visited 6 schools to conduct vision screenings, during which a total of 114 children were screened. Following these screenings, 63 children were referred to an optometrist for a comprehensive eye exam.

### ***Fluoride Varnish Program***

The dental team visited childcare facilities and schools to implement the Fluoride Varnish Program. One childcare facility was visited across the PHU region, and 2 preschool children (0-4 years of age) received a FV application. The team also visited 11 schools where 223 students (JK and SK) received a FV application.

# Harm Reduction and Opioid Response

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## ***Harm Reduction Program Team Overview***

The Porcupine Health Unit’s Harm Reduction Program consists of team members working collectively to meet the increasing community needs related to essential harm reduction services. Individually bringing a unique perspective to harm reduction, each member fulfills a key role on the team.

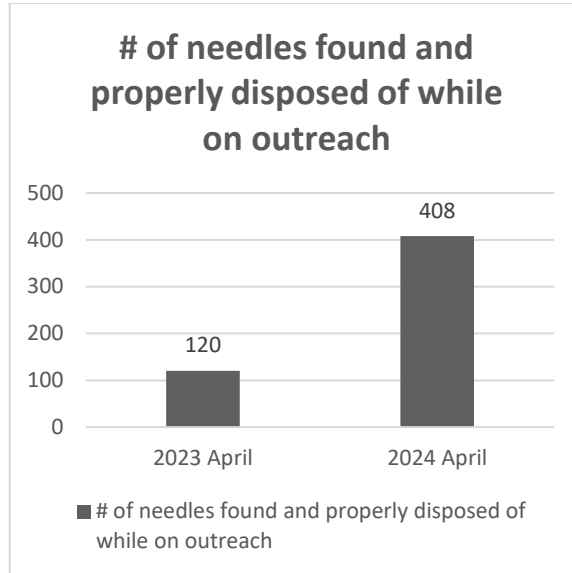
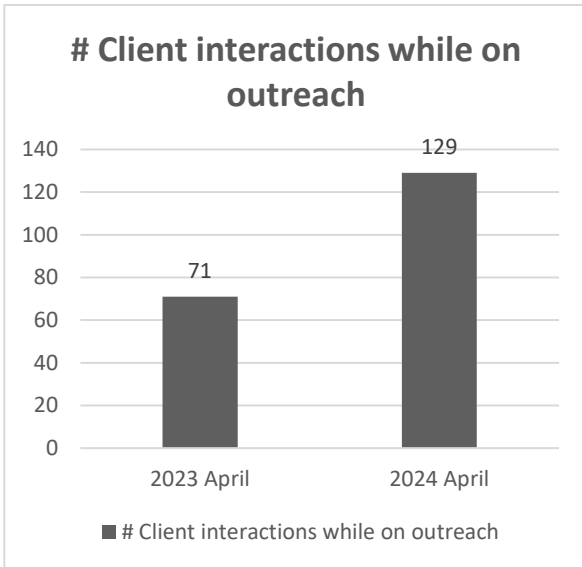
## ***Community Needle Disposal Bins***

**Total: 7**

Name of Disposal Bin	Status
<b>Timmins</b>	
169 Pine Street South	Active
27 Cedar Street South	Active
36 Pine Street South	Active
320 Second Avenue	Active
Fifth Avenue and Tamarack Street. Parking lot beside St-Matthew’s church.	Active
<b>Schumacher</b>	
Intersection of Battochio Street and Father Costello Drive	Active
<b>South Porcupine</b>	
76 Main Street (post office)	Active
<b>Total number of active disposal bins</b>	<b>7</b>

## ***Outreach Services (street&mobile)***

Outreach Hours, available in Timmins ONLY				
	2023 April		2024 April	
	number of times on outreach	number of hours	number of times on outreach	number of hours
<b>Totals</b>	<b>28</b>	<b>26</b>	<b>43</b>	<b>44.75</b>



**Context:**

When comparing the increase in outreach activities for April 2023 to April 2024, capacity of team is a considerable factor. For April 2024, the outreach team responded to a call regarding a medium sized sharps container found in the community. Based on what the needle capacity of the size of the sharp’s container, it was estimated that it contained 400 needles. These totals are included in the total number of needles distributed for the month of April 2024 as well as in the estimated total number of needles returned (see above).

***Needle Exchange Program, April 2024 (Harm Reduction Supply Distribution Sites)***

There are 17 active needle exchange access points, across Porcupine Health Unit area, noting that some agencies/organizations that are considered a needle exchange program are under the same memorandum of agreement with multiple sites. Some sites distribute to their clients only and are not listed publicly. There is 1 agency in the process of becoming a site, completed their training agency and staff training in April.

***Naloxone Program Distribution, April 2024***

The Porcupine Health Unit continues to prioritize and lead Naloxone Distribution Programing across the vast geographical areas. Currently, there are 39 active naloxone distribution sites, with some sites offering distribution at multiple locations.

**Naloxone Program Distribution:**

- 788 Naloxone kits distributed.
- 313 refill doses distributed.
- 210 individuals trained to administer naloxone by distribution sites.

**Naloxone Distribution Program**

- 3 naloxone distribution program training sessions with organizations/agencies completed.

***Public Education – Awareness***

The Porcupine Health Unit prioritizes requests for community engagement and awareness for naloxone training, proper needle handling and disposal, and general harm reduction education. The PHU team is also supporting various community clean-up events with training and supplies for proper needle disposal.

**Naloxone Training:**

- 1 community naloxone training presentation was completed in Timmins.
- 1 community naloxone training presentation was completed in a branch community.

#### Community Events:

1 community event attended in a branch community where naloxone training and distribution occurred.

#### Proper Needle Handling Training:

1 virtual proper needle handling and disposal training session completed in April. This session was led by the infectious diseases team; however, a member of the harm reduction team was present to address any questions/concerns pertaining to harm reduction.

### ***Opioid Emergency Response Surveillance***

The Porcupine Health Unit coordinates the Opioid Emergency Response Task Force for enhanced surveillance on community trends and reports. Weekly and stat reports are submitted to the Porcupine Health Unit from key partners. Based on the available information, task force members collectively decide on potential next steps on how to address the potential concerns circulating in communities across the Porcupine Health Unit geographical area.

#### ALERT System (April 2024)

Most recent ALERT demobilized on April 2, 2024

## **Infectious Diseases**

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### **1. Control of Infectious Diseases (CID)**

#### ***Surveillance and Epidemiological Analysis***

As part of surveillance monitoring, a monthly surveillance report is compiled by the Epidemiologist at the Porcupine Health Unit (PHU). A summary of the analysis of the crude data for cases reported between January 1 to April 30, 2024, indicates that the Porcupine Health Unit has higher rates of cases per 100,000 than the province and/or other Northern health units for the following diseases:

Disease	PHU Rate	Other Northern Health Unit Rate*	Ontario Rate
Latent Tuberculosis (LTBI)	45.7	20.7	13.5
Active Tuberculosis (TB)	6.9	1.0	1.7
Pneumococcal disease, invasive (IPD)	13.7	11.3	4.5
Chlamydia	137.0	100.7	72.6
Hepatitis C	25.1	18.5	6.3
Syphilis (all types)	18.3	21.1	10.4

\* Algoma Public Health, Timiskaming Health Unit, Public Health Sudbury and District, North Bay Parry Sound District Health Unit, Thunder Bay Health Unit, Northwestern Health Unit

Note: All rates are crude, include data between January 1 and April 30, 2024, and are per 100,000. Because rates are not age standardized, specific rate comparisons are for internal use.

#### ***Sexually Transmitted and Bloodborne Infections (STBBI)***

From January 1 to April 30, 2024, there were 166 cases of STBBI. Cases included chlamydia, hepatitis C, syphilis, and gonorrhoea infections. The analysis indicates that 65.1% of STBBI cases are among those 20 to 34 years of age, and

62.5% of chlamydia cases and 57.8% of all STBBI cases were among females. During this time, 53.0% of cases were from Timmins and 11.4% were from Kapuskasing.

### ***Measles***

In response to the increase in measles cases in Ontario this year, the Infectious Diseases (ID) team routinely updates health care providers on the local and provincial measles case counts and emerging trends, best practice documents, importance of vaccination, and the requirement of reporting suspected and confirmed cases to local public health. The Porcupine Health Unit encouraged local health care providers to ensure patients are up to date with measles vaccinations, especially for people that are travelling and people at greater risk of complications. The COVID-19 pandemic impacted all vaccine preventable disease vaccination coverage rates across the lifespan, including measles. Measles is a serious illness but is preventable. The measles vaccine is 99 percent effective in preventing measles after two doses. During the month of April, five Facebook posts were shared with the public on ensuring vaccinations are up to date for measles, on knowing the signs and symptoms of measles and what to do if you have symptoms and/or have been exposed to a case.

### ***Tuberculosis and Latent Tuberculosis Infections***

From January 1 to April 30, 2024, 40 cases of LTBI and 6 cases of active TB were reported. The analysis indicates that 66.7% of active TB cases were among males and ranged in age from less than 1 year to 66 years. During this time, 83.3% of active TB cases were from First Nations communities. The majority of LTBI cases were from First Nations communities (67.5%) and 25.0% were from Timmins.

### ***Proper Needle Handling and Disposal Training***

The Infectious Disease (ID) team at the Porcupine Health Unit (PHU) offered four virtual Proper Needle Handling and Disposal Training opportunities for the general public. During the sessions, the ID team provided training on how to properly pick up needles, how to minimize the risk of needle stick injuries, and how to properly dispose of needles. In April, eight participants received the training. To coincide with spring clean up activities, three Facebook messages were posted to the PHU Facebook page. The posts directed the general public to the PHU website where they can find education on how to properly pick up needles and information about the upcoming training.

### ***Infection Prevention and Control (IPAC) Hub***

The IPAC Hub team hosted a Community of Practice meeting on April 24th. These meetings are offered to all infection control practitioners (ICPs) and health care providers at congregate living settings and hospitals. Community of Practice meetings provide the opportunity for the IPAC Hub team to share new or updated guidance from Public Health Ontario as well as any updates or information with congregate living settings. To facilitate peer-to-peer learning, time is scheduled in the meeting agenda for facilities to share knowledge. In April, a presentation that focused on Invasive Group A Streptococcus disease (iGAS) was provided to attendees in response to a provincial increase in cases in 2023-2024. In addition, the IPAC Hub shared the Ministry of Health's new guidance on Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, for long-term care homes, retirements homes, and other congregate settings. This document is intended to be used as an operational guide for local public health unit's investigating suspect and confirmed outbreaks in congregate care settings with outbreak management and case and contact follow up for respiratory and enteric infections. In addition, a memo from the Ministry of Long-Term Care with information about the province's Spring COVID-19 Vaccine Campaign was sent to IPAC leads in Long-Term Care Homes. The Spring COVID-19 Campaign focuses on increasing vaccination rates amongst staff and residents of Long-Term Care Homes.

In April, the IPAC Hub team promoted an upcoming Point of Care Risk Assessment (PCRA) training opportunity available for staff working in congregate living settings. The sessions will be facilitated virtually by the health unit on four different occasions in May.



The IPAC Hub team continues to participate in outbreak management meetings with a Public Health Inspector from the Environmental Health program to provide IPAC support and offer IPAC expertise to facilities experiencing outbreaks.

## **Environmental Health**

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### **1. HPPA Compliance Inspections Update**

The Environmental Health department has been working towards completing all the required compliance inspections according to the requirements set out in the Ontario Public Health Standards. The current status is below:

- High-risk food premises: 100% complete in first term (January – May)
- Recreational water premises: 100% complete in first quarter (January - April)

Ongoing inspections in areas such as personal service settings, childcare centres, low-risk food premises, and fly in remote camps are also being completed.

### ***Emergency Management – Kashechewan Spring Flooding Response***

The Environmental Health team worked with partners while three PHU communities, Timmins, Kapuskasing, and Val Rita, who hosted community members from Kashechewan First Nations. This event is an annual evacuation due to the risk of flooding during spring break up in the James Bay and Hudson Bay area.

The PHU's response included:

- Attending health care partners meetings hosted by Indigenous Services Canada (ISC),
- Attending local health care partners meetings,
- Attending the Indigenous Emergency Operations Centre (IEOC) meetings,
- Performing inspections of food premises to ensure compliance with regulations,
- Remaining a point of contact for other public health programs and services as needed,
- Inspected their mobile primary care facility to assist with infection prevention and control guidance.

The Harm Reduction and Infectious Diseases team also provided services to this response group through offers for assistance and communicable disease management.

Respectfully submitted,

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Medical Officer of Health/Chief Executive Officer