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The Regional Municipality of Durham Information Report

From:	Commissioner & Medical Officer of Health	
Report:	#2024-INFO-70	
Date:	October 25, 2024	

Subject:

Program Reports

Recommendation:

Receive for information

Report:

1. Purpose

1.1 To provide an update on Durham Region Health Department (DRHD) programs and services.

2. Highlights

- 2.1 DRHD reports for July September 2024 include the following key highlights:
 - a. Health Analytics, Policy & Research Health Analytics Information Products;
 - Health Protection Emergency Management, Food Safety, Healthy Environments, Part 8 Ontario *Building Code* (Sewage Systems) and Safe Water updates;
 - c. Healthy Families Durham Health Connection Line, Healthy Babies Healthy Children, Healthy Families and Infant & Child Development updates;
 - d. Healthy Living Healthy Living, Oral Health and *Smoke-Free Ontario Act,* 2017 updates;
 - e. Infectious Diseases Immunization and Infectious Diseases Prevention & Control updates; and

- f. Paramedic Services Administration, Community Paramedicine, Logistics, Operations and Quality & Development updates.
- 2.2 Boards of health are required to "superintend, provide or ensure the provision of the health programs and services required by the [Health Protection and Promotion] Act and the regulations to the persons who reside in the health unit served by the board" (section 4, clause a, HPPA). In addition, medical officers of health are required to "[report] directly to the board of health on issues relating to public health concerns and to public health programs and services under this or any other Act" (sub-section 67.(1), HPPA). Accordingly, the Health Information Update is a component of DRHD's 'Accountability Framework', which also may include program and other reports, Health Plans, Quality Enhancement Plans, Durham Health Check-Ups, business plans and budgets; provincial performance indicators and targets, monitoring, compliance audits and assessments; RDPS certification; and accreditation by Accreditation Canada.

3. Relationship to Strategic Plan

- 3.1 This report and the program updates included align with the following strategic goals and priorities in the Durham Region Strategic Plan:
 - a. Goal 1 Environmental Sustainability:
 - 1.4 Demonstrate leadership in sustainability and addressing climate change.
 - b. Goal 2 Community Vitality:
 - 2.2 Enhance community safety and well-being.
 - 2.3 Influence the social determinants of health to improve outcomes for vulnerable populations.
 - 2.4 Support a high quality of life for all through human services delivery.
 - c. Goal 5 Service Excellence:
 - 5.1 Optimize resources and partnerships to deliver exceptional quality services and value.
 - 5.2 Collaborate for seamless service experience.
 - 5.3 Demonstrate commitment to continuous quality improvement and communicating results.

4. Conclusion

4.1 Program Reports are provided to update Regional Council (DRHD's board of health) on public health programs and activities as a component of DRHD's Accountability Framework.

5. Attachment

Program Reports for the period July – September

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM Commissioner & Medical Officer of Health

ABBREVIATIONS

- ACP Advanced Care Paramedic
- ASST Active and Sustainable School Travel
- CCC Childcare Centres
- CP Community Paramedicine
- DC Durham College
- DCDSB Durham Catholic District School Board
- DDSB Durham District School Board
- DHCL Durham Health Connection Line
- DoPHS Diseases of Public Health Significance
- DRHD Durham Region Health Department
- DRPS Durham Regional Police Service
- ECCC Environment and Climate Change Canada
- EDU Ministry of Education
- FV Family Visitors
- HART Health Analytics & Research Team
- HBHC Healthy Babies Healthy Children
- HCP Healthcare Provider
- HPD Health Protection Division
- HPPA Health Protection and Promotion Act
- HSO Healthy Smiles Ontario
- IPAC Infection Prevention & Control
- ISPA Immunization of School Pupils Act
- KI Potassium lodide
- LD Lyme Disease
- LH Lakeridge Health
- LTCH Long-Term Care Homes

- MECP Ministry of the Environment, Conservation and Parks
- MOH Ontario Ministry of Health
- OAGO Office of the Auditor General of Ontario
- OBC Ontario Building Code
- OHD Oral Health Division
- OPHS Ontario Public Health Standards: Requirements for Programs, Services, and Accountability
- OSDCP Ontario Seniors Dental Care Program
- OSDUHS Ontario Student Drug Use and Health Survey
- PCOP Primary Care Outreach Program
- PCP Primary Care Paramedic
- PHD Population Health Division
- PHI Public Health Inspectors
- PHN Public Health Nurse
- PHU Public Health Units
- PSS Personal Service Settings
- RDPS Region of Durham Paramedic Services
- RH Retirement Homes
- RRFSS Rapid Risk Factor Surveillance System
- SFOA Smoke-Free Ontario Act, 2017
- STBBI Sexually Transmitted and Blood Borne Infection
- STP School Travel Plan
- TEO Tobacco Enforcement Officers
- WNV West Nile Virus



Health Analytics Information Products

In September, HART released a report titled <u>Young Adults in Durham Region: Healthy</u> <u>Living Behaviours of Young Adults Ages 18 to 24 in Durham Region.</u> The report is focused on healthy living behaviours among young adults. It includes overall measures of health and wellbeing, community belonging, and consumption of alcohol, nicotine, and cannabis.

Key trends among Durham Region young adults include:

- About half (53 per cent) rated their general health as excellent or very good, continuing a slow decline from 62 per cent in 2021.
- Some (29 per cent) rated their mental health as excellent or good, representing a concerning decrease from 41 per cent in 2018 (prior to the COVID-19 pandemic).
- Almost three quarters (72 per cent) rated their sense of belonging to their local community as very or somewhat strong, continuing a long-term trend of slow decline.
- Alcohol is the most commonly consumed substance among young adults in Durham Region, followed by nicotine (vaping/e-cigarettes, or smoking tobacco) and cannabis.
- Almost 80 per cent reported drinking alcohol, almost half (49 per cent) used cannabis, 37 per cent vaped nicotine, and only three per cent smoked cigarettes.
- Prevalence of drinking and using cannabis or vaping nicotine is the highest among young adults compared to any other age group in Durham Region.

This report presents data collected through the RRFSS, which is an ongoing public health telephone survey.

HART maintains the <u>Durham Region Outbreak Status Report</u>, a tool that provides transparency on respiratory and enteric outbreaks in institutional settings including

hospitals, LTCH and RH. It is updated on weekday afternoons, excluding statutory holidays.

This summer, the outbreak status report moved from a static webpage to a dashboard with interactive filtering features. The change in format is part of a larger initiative to modernize data exchange with partners to manage and prevent outbreaks. These data are also used by hospitals, LTCH, and RH to inform decisions for the timing of patient or resident transfers.



Durham Region Outbreak Status Report

Updated October 08, 2024

Active Durham Region Outbreaks in Institutional Settings

Under the *Health Promotion and Protection Act*, Durham Region Health Department is required to respond to reports of suspected and confirmed outbreaks of gastroenteritis and respiratory illness in institutional settings. The Health Department helps places such as hospitals, long-term care homes and retirement homes manage and prevent outbreaks.

Name of Facility	Type of Facility	Address	Units Affected	Type of Outbreak	Causative Organism	Declared Date	Outbreak Classification
AgeCare Samac	Long Term Care Home	451 Woodmount Drive Oshawa L1G 8E3	Mclaughlin Bay	Respiratory	COVID-19	02-Oct-24	Confirmed
AgeCare Samac	Long Term Care Home	451 Woodmount Drive Oshawa L1G 8E3	Lynde Creek	Respiratory	Parainfluenza Virus	03-Oct-24	Confirmed
Aspira Douglas Crossing	Retirement Home	6 Douglas Road Uxbridge L9P 1S9	6th Floor	Respiratory	COVID-19	07-Oct-24	Confirmed
Bay Ridges	Long Term Care Home	900 Sandy Beach Road Pickering L1W 1Z4	Mitchell Park Unit	Respiratory	COVID-19	24-Sep-24	Confirmed
Bay Ridges	Long Term Care Home	900 Sandy Beach Road Pickering L1W 1Z4	Sandy Beach	Respiratory	Enterovirus	25-Sep-24	Confirmed
Extendicare Oshawa	Long Term Care Home	82 Park Road North Oshawa L1J 4L1	Facility Wide	Respiratory	COVID-19	28-Sep-24	Confirmed
Fairview Lodge	Long Term Care Home	632 Dundas Street West Whitby L1N 5S3	Marigold Lane	Respiratory	Respiratory Infection Unspecified	08-Oct-24	Confirmed
Glen Hill Terrace	Long Term Care Home	80 Glen Hill Drive South Whitby L1N 0M7	3-South	Respiratory	COVID-19	23-Sep-24	Confirmed
Harmony Hill	Retirement Home	1335 Benson Street Oshawa L1K 0W6	Orchard	Respiratory	COVID-19	05-Oct-24	Confirmed
Lakeridge Gardens	Long Term Care Home	680 Harwood Avenue South Ajax L1S 2J4	3W	Respiratory	COVID-19	04-Oct-24	Confirmed
Ontario Shores	Hospital	700 Gordon Street	Geriatric	Respiratory	Respiratory	07-Oct-24	Confirmed

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM Commissioner & Medical Officer of Health



Emergency Management

The <u>Emergency Management Guideline, 2024</u> highlights the importance of developing and conducting emergency exercises. These activities help staff stay prepared and ready to handle emergencies effectively. In August, HPD ran a respiratory planning exercise to help DRHD prepare for the expected respiratory surge in the fall. The planning exercise was built on key lessons learned and supported readiness for future outbreaks. DRHD shared a summary of the exercise with the MOH.

Potassium Iodide Tablet Program

September marked DRHD's third and final KI communication campaign this year. The campaign aimed to encourage residents to get their supply of KI tablets and increase awareness of their availability. A media release and a series of social media posts were rolled out over four weeks. Additionally, an article was featured in the Wee Care newsletter, specifically promoting KI tablets to childcare centres in Durham Region.

KI tablets were restocked at all designated pharmacies within Durham Region.

Food Safety

Staff worked diligently to complete food safety inspections as per the <u>Food Safety</u> <u>Protocol, 2019</u>. Between July and September, staff completed **589** high-risk inspections, **701** moderate-risk inspections, and **196** low-risk inspections. Staff also completed **226** re-inspections, and **34** inspections/re-inspections were generated by complaints. Staff is on track to complete 100 per cent of required inspections in the last round for all high-, moderate-, and low-risk inspections. Staff achieved 100 per cent completion of high-risk premises.

Staff processed **93** new special events and farmers' market co-ordinator applications and had **196** new special event vendor applications. Staff inspected **15** special events that were deemed higher-risk and **11** farmers' markets using the risk assessment tool and updated special events procedure. Staff responded to **578** questions about food safety on the DHCL line, out of **1,586** total calls.

A vlog on home canning was filmed in April to address the increased number of inquiries about safe canning processes. The completed vlog was uploaded to YouTube in August and has been viewed **223** times during the six-week period that it was available.

Continuing to return to health promotion activities, PHIs attended **three** fall fairs in September (including Port Perry, Orono, and Uxbridge) and participated in a total of **seven** days of health promotion and public health advocacy.

Healthy Environments

Climate Change and Health in Durham Region

As part of DRHD's mandate under the <u>Healthy Environments and Climate Change</u> <u>Guideline, 2018</u>, DRHD conducts health vulnerability assessments related to climate change. In August and September, DRHD released its first two reports in a special series titled Climate Change and Health in Durham Region, available at <u>durham.ca/ClimateAndHealth</u>.

The first report, titled <u>Understanding the Local Health Impacts of Climate Change</u>, was released in August and is an essential background primer that explores:

- Current and future health impacts of climate hazards.
- Key factors for assessing climate vulnerability.
- Why some people face greater health risks than others from the impacts of climate change.

The report emphasizes the importance of an equity-focused approach when assessing and addressing climate vulnerabilities and identifies local environmental and community features that can affect health.

The second report in the series, titled <u>Assessing the Impact of Extreme Heat</u>, was released in September. It explores current and future health impacts of extreme heat in Durham Region with a special focus on health equity and prioritizing those who may be worst affected and least protected.

Both reports were promoted through a news release, social media, and a broad communications campaign. Key findings will also be shared through presentations to Regional departments, committees, and local community partners.

Heat Warning & Information System

This summer was slightly cooler than originally forecasted by ECCC. **Four** heat warnings and **one** extended heat warning were issued with a total of **11** days of heat warning criteria being met.

Heat warnings are issued when the forecast conditions include a daytime high of 31°C and overnight temperatures of 20°C or greater, or with humidex values of at least 40 for two or more consecutive days. Advanced notice of heat warnings is shared with over 500 community partners such as recreation centres, LTCH, school boards and other agencies serving at-risk populations so they can activate heat response plans to minimize heat exposure. Warnings are shared with the public through DRHD's website and social media platforms. Staff also updated DRHD's extreme heat webpage and a <u>Heat Hacks for Keeping Cool</u> infographic to provide at-home tips for residents without access to cool spaces.

Part 8 Ontario Building Code (Sewage Systems)

From July to September 2024, the HPD conducted the following activities related to Part 8 of the OBC: received **78** building permit applications for sewage systems, processed **18** building addition applications and reviewed **44** planning applications, investigated **six** complaints related to private sewage systems and issued **one** Order to comply, conducted **162** inspections related to sewage system building permits and installations, attended or provided comments for **12** pre-consultation meetings and responded to questions from the public and sewage system installers regarding sewage systems and planning applications.

The 2024 Lake Simcoe Maintenance Inspection program continued in July and there were **61** inspections completed in Brock, **87** inspections completed in Uxbridge, and **92** in Scugog.

Safe Water

Bathing Beach Monitoring Program

In accordance with the <u>Operational Approaches for Recreational Water Guideline, 2018</u>, and the <u>Recreation Water Protocol, 2019</u>, from June to August, HPD assessed environmental conditions and collected water samples each week from Durham's **14** public beaches. This program ensures beaches are safe for swimming. Beach posting results were uploaded each week to DRHD's <u>Beaches webpage</u>, <u>Check & Go</u> <u>Disclosure Portal</u>, and shared via DRHD's social media channels. The program included monitoring for bacteriological contamination, blue-green algae, and other potential hazards. Staff issued **46** beach postings, along with **one** advisory for blue-green algae. DRHD is responsible for responding to reports of blue-green algae beyond the regular beach monitoring season, as needed.

Drinking Water

On August 1, the OAGO requested additional information from all local PHU as part of its continued investigation into non-municipal drinking water, including small drinking water systems and private well water. The audit request asked questions about short-term rentals, PHI certification processes, small drinking water systems operator training,

and drinking water advisories. HPD staff completed the OAGO request by the August deadline.

DRHD continues to promote HPD's free private well water testing services through social media and the <u>Private Wells webpage</u>. Messaging includes information on free well water testing, interpretation of sample results, information on where residents can pick up and drop off water samples, and other related topics. In response to recent inquiries, DRHD strengthened the well water testing communication strategy. HPD staff is working on a paid promotion strategy to boost the reach of its social media posts.

In September, HPD staff attended an information session on the Provincial Groundwater Monitoring Network Program and Exceedance Protocol. This session was delivered by the MECP and was intended for all Ontario PHU. The information session discussed the program and protocol, which uses wells run by the MECP to monitor provincial groundwater supplies. The wells are used to:

- Track the state of ambient groundwater quality and quantity through monitoring hourly groundwater levels in approximately 480 wells across Ontario.
- Identify trends over time and correlations with key factors that influence groundwater conditions.

Recreational Water

HPD completed all mandatory recreational water inspections as required by the MOH in accordance with the <u>Recreational Water Protocol</u>, 2019. To date, HPD has completed **467** routine recreational water inspections and issued **43** Section 13 Orders under the <u>HPPA</u> to close the facility due to the presence of health hazards.

Respectfully submitted,

Original signed by

Anthony Di Pietro Director, Health Protection Division



Durham Health Connection Line

DHCL provides access to public health information to the community. PHNs provide assessment, health education, counselling, and referrals to community services for residents or those looking for services in Durham Region. Inquiries are addressed on the telephone or through email. From July to September, DHCL responded to **3,153** inquiries.

Healthy Babies Healthy Children

Approximately 60 per cent of Ontario families have risk factors that can negatively impact healthy development in children. These risk factors include but are not limited to financial instability, lack of social supports, being new to the country, depression, anxiety or other mental illness, substance use/misuse, involvement with child protective services and lack of a primary HCP. According to the BORN Information System, more than 16 per cent of families in Ontario have greater than five risk factors. Without intervention for these families, these children are at risk for poor attachment, emotional and behavioural challenges, and eventually physical and mental health issues.

The HBHC program is a voluntary home visiting program to support families with identified risk factors from the prenatal period up until school entry. PHNs and FV work in partnership with at-risk families to provide supportive intervention, and to identify and address goals to promote optimal child development and positive parenting.

The first step in referral to the HBHC program is screening. Families may self-refer for screening by a PHN or can be screened by their HCP. As part of the HBHC program, PHNs provide support to HCPs at local hospitals and midwifery practices to complete the HBHC screen with their patients. PHNs visit hospitals two to three times per week to promote and support screening and to raise awareness among new parents of DRHD services available to them as they transition home with their new baby. HBHC managers also meet bi-monthly with LH managers to facilitate communication and collaboration with the aim of increasing screening rates.

Between July 1 and September 30, PHNs made **54** visits to local hospitals and midwifery practices. Screening was administered to **908** families and of those, **504** (**56 per cent**) screened with risk for compromised parenting and/or child development. PHNs were able to reach **316** (**63** per cent) of the with-risk clients by telephone to offer an in-depth assessment at home. Staff sent a mailout to those not reached by phone inviting them to call back. Of those clients reached by phone, **151** (**48 per cent**) clients, and of those, **95** (**79 per cent**) were confirmed with risk and offered referral to the blended home visiting program. Between July 1 and September 30, there were **259** families actively participating in the blended home visiting program, of which **42** were newly enrolled.

Healthy Families

Pregnancy can be a time when expectant families are motivated to improve their overall health. With the health of the baby in mind, many expectant families search for credible information on having a healthy pregnancy. The Society of Obstetricians and Gynaecologists of Canada encourages expectant families to take prenatal classes. DRHD launched free online prenatal classes in 2019 to promote access to evidence-based health information during pregnancy. From July to September, **305** new users accessed the classes. Prenatal classes have recently been updated and are now available in **seven** additional languages including: Arabic, Chinese, French, German, Japanese, Portuguese and Spanish.

The classes cover many key prenatal health education topics such as preterm labour, nutrition and exercise, substance use, mental health, intimate partner violence, caring for a newborn, how to get a good start with breastfeeding, and newborn safety. To promote the online prenatal classes this year, DRHD made **five** social media posts on DRHD platforms. Community partners also helped to promote the online prenatal classes to priority populations.

This year, an evaluation report was completed for the online prenatal classes held during the period of 2019 to 2023. The evaluation results indicated that all classes were effective in improving confidence, knowledge, and awareness. Key highlights from the evaluation report showed that before taking the class, only **29** per cent of respondents reported that they could tell if their baby was breastfeeding well. After the class, this percentage significantly increased to **99** per cent. Confidence in giving birth rose from **45** per cent prior to taking the class to **85** per cent afterwards. Participants reported improvement in their confidence to follow the recommended prenatal nutrition and exercise guidelines from **70** per cent before the class to **94** per cent after the class. Respondents' confidence in caring for their new baby when they arrive at home also saw a substantial increase after attending the class from **44** per cent to **92** per cent. Comments from the evaluation indicated that participants appreciated the online option to learn at their own pace and that the classes address equity and access issues such

as transportation, language barriers, medical concerns, and inability to attend in person due to scheduling conflicts. Offering free online prenatal classes to residents facilitates access to evidence-based prenatal information and promotes healthy behaviours during pregnancy.

Infant & Child Development

The ICD program is a voluntary service that partners with families to promote the healthy growth and development of children between the ages of birth to school entry and who have a developmental concern. Local residents can self-refer to the program or be referred by a service provider. ICD consultants partner with families to plan developmental intervention goals and establish ways to achieve these goals within the child's routines using a family-centered, strengths-based approach.

Between July to September, the ICD program offered service to approximately **456** children and provided approximately **951** appointments to support modeling, parent coaching, and family education.

Respectfully submitted,

Original signed by

Kavine Thangaraj Director, Population Health Division Chief Nursing Officer



Healthy Living

Active Sustainable School Travel (ASST)

The Canadian <u>24-Hour Movement Guidelines</u> for children and youth ages five to 17 recommends at least 60 minutes of moderate to vigorous physical activity per day. Despite these recommendations, 2024 data from Participaction reported only **39 per cent** of children and youth (aged five to 17) in Canada met the recommended amount of daily physical activity. According to local data from <u>OSDUHS</u>, in 2017 only **36 per cent** of local elementary school students used active transportation to get to school, further limiting their opportunities to achieve physical activity recommendations. Furthermore, in Durham Region, **49 per cent** of secondary school students travel to school by car, either as a driver or passenger.

DRHD promotes ASST to encourage school-aged children and youth to meet daily physical activity goals. ASST promotion activities also aim to reduce traffic congestion to create safer and healthier school zones. Reducing the number of cars in school zones improves safety and reduces pollution, which is associated with risks of lung disease, cardiovascular diseases, and may also adversely impact cognitive development.

As part of a health education strategy, DRHD developed and promoted a <u>Let's Walk and</u> <u>Wheel Resource</u> to all **231** schools in Durham (**186** elementary schools, **42** secondary schools, and **3 private schools**). This resource promotes the benefits of active travel and provides practical ideas for how school communities can incorporate it in their Comprehensive School Health plans.

In collaboration with the Region's Planning, Economic Development & Tourism Department, DRHD supported **five** elementary schools in implementing a new active school travel plan as part of the School Travel Planning Project. This project brings together schools and community partners to address transportation problems and increase active modes of travel. Community partners included representatives from the

DDSB, DCDSB, regional and municipal planning and economic development departments, and DRPS. Community partners participated in school community walkabouts to assess safety, traffic patterns, and school environmental factors with the aim of improving traffic volume and students' safety. DRHD continues to promote and support ASST initiatives in all school communities in collaboration with community partners.

Additionally, DRHD promoted Winter Walk Day, Bike to School Week, and International Walk to School Month, incorporating provincial resources from <u>Ontario Active School</u> <u>Travel</u>. Other strategies to promote ASST also included **12** social media posts that were published on all DRHD platforms. These social media posts resulted in **360** engagements and **26,780** impressions.

Oral Health

For 2024, OHD noted the following achievements, demonstrating a commitment to improving oral health outcomes and delivering exceptional services to the community.

Comprehensive Dental Services: OHD served over **4,402** unique clients. The DRHD Dental Clinic provided services to **534** HSO clients and **3,587** OSDCP clients through **5,489** appointments. Delivery of dental care services in Durham Region's four LTCH is on hold at this time, but it is anticipated that this will resume in early 2025. The Brock Community Health Centre project has been postponed until spring 2025, but preparations have been started with various partners.

Dental Benefits Claims: OHD processed **987** dental benefit claims between July and September, amounting to **\$224,917** in fees paid. These efforts facilitate the smooth provision of dental care and ensure financial support for those in need.

Dental Estimates: OHD received **490** estimates and entered **328** that were eligible to be processed for approval.

Dental Care Needs: OHD identified **2,196** children with urgent dental needs and **2,334** children with non-urgent dental needs.

Denture Lab: Denturists delivered over 235 services in the Dental Clinic's denture lab.

Oral Health Education and Promotion: OHD visited **10** daycare facilities. Staff provided dental screening to **235** children and oral health education to **355** children.

Social Media Engagement: To reach a wider audience, OHD effectively utilized social media platforms to promote oral health information and program updates. OHD reached **149,777** individuals, achieved **183,632** impressions and **3,854** engagements on Facebook, Instagram, and X (formerly known as Twitter).

These accomplishments reflect OHD's dedication to improving oral health outcomes and its commitment to education and collaboration. By leveraging resources effectively, DRHD continues to make a positive impact on the oral health of residents.

Smoke-Free Ontario Act, 2017

TEO continued to conduct youth test shopping inspections on vendors that sell tobacco and vapour products. Operators and owners of stores selling these products can be charged with selling or supplying tobacco or vapour products to a person who is less than 19 years old. Two or more tobacco related convictions may lead to an Automatic Prohibition, issued by the MOH, where the vendor is prohibited from selling tobacco products for a minimum of six months.

TEO respond to all complaints received with respect to smoking or vaping in all enclosed workplaces and other prohibited areas included in the <u>SFOA</u> and the Durham Region <u>Smoking and Vaping By-law #28-2019</u>. These areas include multi-unit dwellings, schools, hospitals, outdoor recreation playground areas, hookah lounges, etc.

From July to September, TEO conducted **166** youth test shopper inspections for vapour products and **10** display and promotion inspections. In total, **11** charges were issued for supplying vapour products to minors under the SFOA and **10** charges were issued for stores selling improperly packaged vapour products. TEO continue to observe non-compliance with stores selling high levels of nicotine in vapour products and flavours, resulting in **two** seizures of these products at store locations.

TEO conducted **347** youth test shopper inspections for tobacco products and **25** compliance inspections for display and promotion for tobacco retailers. In total, TEO issued **11** charges for tobacco related offences.

TEO conducted **17** inspections in enclosed workplaces and other prohibited areas.

TEO respond to complaints regarding students vaping on school property. From July to September, TEO investigated **12** complaints, issued **one** warning letter, and served **one** charge to a student vaping on school property.

DRHD's Smoke-Free Enforcement Coordinator and the TEO are working with DDSB and DCDSB in collaboration with PHD to support the implementation of <u>Policy/Program</u> <u>Memorandum 128</u> with respect to enforcement relating to electronic cigarettes, recreational cannabis, and tobacco in schools. Joint visits will be scheduled to provide information and support to all local secondary schools.

Specialty vape stores and tobacconist stores continue to operate in Durham Region. As of September 30, there are 70 registered specialty vape stores and four tobacconist stores.

2024 Q3 Program Reports – DRHD

Respectfully submitted,

Original signed by

Anthony Di Pietro Director, Health Protection Division

Original signed by

Maryam Pezeshki Director, Oral Health Division

Original signed by

Kavine Thangaraj Director, Population Health Division Chief Nursing Officer



Immunization

In accordance with the OPHS, DRHD promotes and provides provincially funded immunization programs and services to eligible persons, including underserved and priority populations, to reduce or eliminate the burden of vaccine preventable diseases.

DRHD is required to enforce ISPA and assess the immunization status of students attending schools in Durham. The purpose of ISPA is to increase protection of students attending public and private schools in Ontario against the following diseases: diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, meningococcal and varicella. Parents/guardians are required to follow the provincial <u>Publicly Funded</u> <u>Immunization Schedule</u> to ensure their children are up to date on immunizations. If students are unable to be immunized or parents/guardians choose to exempt their children from required immunizations, a medical exemption or statement of conscience or religious belief form must be filed with the DRHD.

For the 2023 to 2024 school year, ISPA was enforced with elementary students in Grades 2, 5 and 6 and all secondary students. DRHD sent first notices to all elementary and secondary students which explained ISPA and the role of the parent/guardian in complying with it. DRHD sent second notices and suspension orders to elementary students in Grades 2, 5 and 6 and all secondary students who remained overdue for ISPA required vaccines. A total of **45,675** first notices were sent to elementary and secondary students. Second notices and suspension orders were sent to **6,308** elementary students in Grades 2, 5 and 6 and **10,885** secondary students.

As a result of ISPA enforcement, **1,520** secondary students were suspended as they remained overdue for vaccines with **1,425** secondary students returning to school prior to the end of the suspension period. For elementary schools, **857** students were suspended with **831** elementary students returning to school prior to the end of the suspension period.

Infectious Diseases Prevention & Control

Childcare Centres

From July to September, HPD completed **163** inspections in CCC, **45** childcare environmental inspections and **117** childcare kitchen inspections.

In July, DRHD launched a survey to CCC regarding staff knowledge of the childcare IPAC online learning course. The survey is still open to encourage more responses and will close soon. The childcare IPAC course will be updated with the addition of pretest questions to evaluate the knowledge gained and the effectiveness of the course.

In August, a meeting was held with EDU to clarify DRHD's role regarding referral complaints and inspection requests of licensed CCC and licensed home CCC. Clarity was provided on the collaboration between DRHD and EDU.

Diseases of Public Health Significance

In accordance with the OPHS and <u>O. Reg. 135/18: Designation of Diseases</u>, HPD is responsible for the management of cases and contacts of DoPHS.

From July to September, **273** DoPHS were reported to HPD. The number of reported cases per DoPHS type is listed in descending order: LD (**94**), campylobacter (**57**), salmonellosis (**34**), influenza (**16**), giardiasis (**14**), cyclosporiasis (**11**), cryptosporidiosis (**eight**), legionella (**five**), amebiasis (**three**), carbapenemase-producing enterobacteriaceae (**three**), listeriosis (**three**), anaplasmosis (**two**), shigellosis (**two**), WNV (**two**), yersiniosis (**two**), blastomycosis (**one**), botulism (**one**), paratyphoid fever (**one**), Q fever (**one**), typhoid fever (**one**), and verotoxin producing *E. coli* (**one**).

Infection Prevention and Control Lapses

From July to September, staff investigated **15** IPAC lapses. Of those investigations, **seven** were confirmed IPAC lapses and were posted, with **five** for PSS and **two** for health facilities. **Six out of seven** of DRHD's clinics were audited with minor or no IPAC issues.

Outbreak Summary

Outbreaks are investigated in accordance with the OPHS.

From July to September, staff investigated **99** outbreaks. Of these, **68** were COVID-19 outbreaks (**25** LTCH, **27** RH, **nine** hospitals, and **seven** congregate living settings). The other **31** outbreaks were respiratory (**19**) and enteric (**12**). The number of respiratory outbreaks by type of facility is: **10** in LTCH, **four** in RH, **two** in hospitals, **two** group homes, **one** shelter. The number of enteric outbreaks by type of facility is: **11** enteric in CCC and **one** in LTCH. Some confirmed causative agents identified included: coronavirus (non-COVID-19), enterovirus, influenza A, metapneumovirus, norovirus, parainfluenza, rhinovirus, respiratory syncytial virus, and rotavirus.

Personal Services Settings

From July to September, **185** inspections were completed in PSS. For PSS, common infractions included improper cleaning and disinfection, single-use items not discarded after use, items not stored and maintained in a clean and sanitary condition, and not preparing and using the approved disinfectants appropriately. New devices and services being offered continue to involve more staff resources. DRHD issued **one** charge for repeat violations of the PSS regulation. There were **four** Section 13 orders issued under the <u>HPPA</u> for no water and no dedicated handwashing and reprocessing sinks at the facility and unapproved devices found at the facility.

<u>The Beyond Glam Newsletter Fall/Winter 2024</u> was sent to PSS owners and operators in September. The newsletter focused on trending services, current events, and common issues within the PSS community.

Rabies Prevention and Control

From July to September, DRHD investigated **522** animal bite reports, which is an increase from **439** reports investigated for the same time period in 2023. DRHD also provided **77** residents with anti-rabies treatment, an increase from **69** for this period in 2023. DRHD submitted **20** animals involved in a human exposure for testing and **four** were positive for rabies, all in bats. **Two** other bats tested by other agencies with no human exposure also tested positive. Due to so many positive bats and the recent human case of rabies in Brant County, increased social media posts were delivered this summer to educate the public and to encourage reporting when a human is exposed.

Two charges were issued to animal owners for failing to immunize their pet against rabies, pursuant to the <u>Reg. 567: Rabies Immunization</u>.

The Monday Night Project

In August, DRHD joined the Monday Night Project, a program spearheaded by Durham Region's Social Services Department and DRPS. Nursing support is provided bi-weekly through this community partnership which aims to create a safe space for women who have experienced or are at-risk of sex trafficking. Most women who attend on a regular basis are unsheltered and experience multiple barriers to accessing supports and services. Community partners come together at a location in downtown Oshawa to support clients. PHNs offer safe sex counseling, education, HIV and pregnancy point-of-care testing, contraceptives, vaccine administration, STBBI testing and treatment. Since August 12, PHNs have supported **eight** clients with STBBI testing, vaccination, counseling, education and contraception distribution.

Vector-Borne Diseases

The WNV prevention and control program began its seasonal activities in May and concluded in September. The program included weekly surveillance of potential breeding sites for WNV vector mosquitoes, which yielded **5,886** site visits resulting in **684** larvicide treatments. The first round of scheduled roadside catch basin larviciding

occurred on June 14 and the fourth and final round on August 27. A total of **258,427** roadside catch basin treatments were administered. In addition, **93** private back yard catch basins and **440** catch basins on Regionally owned properties were treated. DRHD investigated **37** complaints of stagnant water on private property and **14** treatments were required. The adult mosquito trapping activity has resulted in **31,016** mosquitoes being captured, **240** pools of mosquitoes tested, and the identification of **13** positive mosquito trap sites in Ajax, Clarington, Oshawa, Pickering and Whitby. So far this year, there have been **two** human cases of WNV reported to DRHD compared to **11** cases at this time last year.

DRHD continues to promote <u>eTick.ca</u> which is a free online service where professionals identify ticks using photographs sent in by members of the public. Durham Region residents can have ticks identified by submitting a photo to this website.

This year, a total of **123** human tick-borne diseases have been probable or confirmed involving residents, including **120** LD and **three** anaplasmosis cases. This is up from **103** reported at this time last year. Communication was distributed to partners throughout the season, including regular media releases, a variety of social media messages on various platforms, and a weekly summary report of WNV mosquito testing posted on <u>durham.ca/westnile.</u>

DRHD provided **292** tick awareness signs to municipalities and community partners to be installed at the entrances of public outdoor recreation spaces. The sign advises members of the public to keep safe when outdoors and includes a QR code linking to <u>durham.ca/ticks</u> for more information.



Respectfully submitted,

Original signed by

Kavine Thangaraj Director, Population Health Division Chief Nursing Officer

Original signed by

Anthony Di Pietro Director, Health Protection Division



Administration

From July to October, some administration activities included:

- Completed the second phase of hiring for a full-time Program Assistant position.
- Provided staff with developmental opportunities in Community Paramedicine, External Violence Against Paramedics, Continuing Medical Education and inhouse continuing education.

Community Paramedicine

In September, RDPS launched a LTCH and diagnostic testing project where four Community Paramedics support select LTCH with diagnostic testing services to prevent unnecessary transports to the Emergency Department for diagnostics.

RDPS is expanding its relief pool for the CP team. Staff is completing ongoing education with McMaster University and DC.

RDPS continues to operate monthly <u>CP@clinics</u> to provide older adults with chronic disease prevention services. The clinic dates and locations are listed below:

- 155 King Street East, Oshawa (first Wednesday of every month)
- 1880 Valley Farm Road (second Tuesday of every month)
- 1890 Valley Farm Road (third Thursday of every month)

RDPS's full-time CP team continues to book **two** initial visits per day and responds to an average of **three** exacerbations per day preventing 911 utilization. Services include follow-up visits, phone calls, wellness checks, congestive heart failure IV Lasix calls from LH, and responding to remote patient monitoring alerts. The team currently has **120** patients on remote patient monitoring, which helps the team catch an exacerbation of congestive heart failure, chronic obstructive pulmonary disease, or diabetes before it occurs. The PCOP team has been supporting opioid withdrawal management with the addition of oral Suboxone. Staff will complete the Clinical Opioid Withdrawal Score, then connect with an addictions physician to administer Suboxone.

Logistics

RDPS deployed **three** new and fully upfitted Chevy Tahoe command vehicles as replacements in the fleet. The vehicles included upgrades to the emergency lighting and sound package, decal package, and interior storage design.

RDPS purchased and started receiving new Stryker Power-LOADs and stretchers as part of the 2024 capital purchase. Existing equipment nearing the end of its operational cycle will be removed from service and replaced with newly commissioned units.

RDPS received and is currently commissioning **two** ambulances from Demers Ambulances, as part of the 2023 capital purchase. The ambulances are being delivered on a staggered schedule, with **five** more ambulances scheduled for delivery before the end of 2024.

Operations

RDPS performed the following operational activities from July to September:

- Onboarded two Acting Superintendents Joseph Barrett and Brock Bodashefsky.
- Assembled a working group to develop a deployment plan for the new Medical Priority Dispatch System to prioritize call response more accurately.
- Put **16** newly certified ACP on the road.
- Completed the selection process for **16** students to go through ACP training in September.
- Engaged in the bargaining process with CUPE 1764.
- Completed *Personal Health Information Protection Act* training with Superintendents, as provided by DRHD's Privacy and Security team.

Quality & Development

RDPS finalized planning for an in-house training program called External Violence against Paramedics, which will be delivered this fall. The purpose is to help prevent violence against paramedics.

In addition, staff performed the following quality and development activities:

- Completed Ambulance Call Report reviews on all new probationary employees.
- Conducted three-month probationary reviews with 47 employees.
- Facilitated Return to Practice education for **seven** paramedics returning from extended Leaves of Absence.
- Developed educational content for the Fall 2024 Central East session.

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- Attended **28** community outreach events.
- Successfully recruited **one** temporary Quality & Development Facilitator.
- Monitored field placement for **15** PCP students from DC.
- Rostered over **106** clients with Home and Community Care for the Palliative Treat and Refer program.

Respectfully submitted,

Original signed by

Troy Cheseboro Chief/Director