# 2017 Annual Report



**Haldimand-Norfolk Health and Social Services Divison** 





**General Manager Health and Social** Services

### **Marlene** Miranda

Once again 2017 has proven to be a busy year with significant change across Haldimand and Norfolk Health and Social Services (HNHSS). The system is changing with transformation and modernization with a focus on integration. With this focus of integration and improved service mandates comes the need to look both internally and to our partners to find inefficiencies and break down some of the "silos" that exist, not just within the Division but within the corporation, partners and the community. In order to find those inefficiencies and to increase accountability, HNHSS has embarked on continuous quality improvement tools and methodologies. Throughout 2017, the organizational structures continue to be considered and realigned to support ministerial and local mandates.

In January, we welcomed Susan Taylor, Director of Public Health, and in June we welcomed Chimere Okoronkwo, Director of Quality, Planning, Performance and Accountability (QPAP) to lead our newly developed QPAP Department. Both come with years of leadership experience across several health sectors.

Staff continue on the journey of cultural renewal with the vision of "Working Together, Growing Together and Succeeding Together".

### Thank you to staff, volunteers and community partners.

Many achievements were realized in 2017 with some highlights showcased throughout this annual report.

Consistently each year the commitment and dedication of our staff, partners and volunteers never cease to amaze.

As 2018 unfolds, we continue to implement the current mandates as we await the outcome of the provincial and municipal elections.

Thank you for the opportunity to serve our communities for another year.



**Acting Medical** Officer of Health Dr. Malcolm Lock

2017 was a very busy year for the Haldimand-Norfolk Health Unit (HNHU). One of the major developments that occurred during this year is the modernisation of the Ontario Public Health Standards, which were last set in 2008. This has required a complete review of every program and service that the HNHU provides. The overarching principles considered by the Ministry of Health and Long-Term Care (MOHLTC) in these initiatives include their minimal expectations and accountabilities from Boards of Health, these are derived from the Patients First Act, which puts the patient at the centre of their health plan.

Integration of services with local partnerships and alliances to decrease duplications, are both supported and encouraged. For the first time, Boards of Health will be tasked with analysing local population data, establish local needs and incorporating this data to tailor-make programming, to effectively address identified needs. All of this is to be accomplished through the lens of health equity.

Rural communities have long been known to suffer from inequities by virtue of their very geographically dispersed nature. Economy of size has always favoured larger urban centres to act as hubs for secondary and tertiary health care. This centralization has resulted in significant dissociation and consequent inequities between these two populations, particularly when one compares health outcomes in association with the social determinants of health.

I am very excited and encouraged by these new Ontario Public Health Standards, a position that I believe is shared by all our staff. This will require a lot of additional work and internal reorganization, but I am confident that the community, in the long term, is going to greatly benefit from our efforts. This process I feel is a positive step towards levelling some of the aforementioned inequities. I look forward with anticipation to working with our staff in operationalizing these activities, but more so to seeing the positive impact on community health equity that I believe will be effected.

# Health and Social Services **Advisory Committee 2017**



**Haldimand Representatives** Councillor Bernie Corbett Councillor Tony Dalimonte (Chair) Councillor Fred Morison



**Norfolk Representatives** Councillor Doug Drains
Councillor Harold Sonnenberg Councillor John Wells (Vice Chair)



Director **Public Health**  **Susan** Taylor

The past year was one of learning for the HNHU. The release of modernized Ontario Public Health Standards, in combination with the implementation of the Patients First Act and the advice of the Ontario Health Minister's Expert Panel on Public Health converged to create conditions for transformational change. Staff were challenged to respond to changing needs in a way that allows public health to be integrated within a system of health services: organizes public health to best support integration; and engages health units to deliver services in partnership with other sectors.

Given the magnitude of these changes, the HNHU embarked on Healthy Public Health: Creating a Quality Culture Together. Initiated in the spring of 2017, this has evolved into an ongoing, shared effort to engage and align all members of staff, regardless of role or functional team. By providing the foundational knowledge and skills to engage in co-designing services, there has been a collective effort to meet our mandate in this rapidly changing environment

New areas of service emerged in 2017. The Harm Reduction Expansion Program was launched in response to the national opioid crisis, and provided resources to Health Units to create an infrastructure for the distribution of life-saving medication to counteract overdoses. At the same time, the HNHU joined other organizations to form the Haldimand-Norfolk Sub-Region Anchor Table, and contributed to the identification of collective priorities of enhanced cultural safety; integrated and coordinated care through Health Links; and improved access to mental health and addictions services.

Moving into 2018, the HNHU has continued to engage with internal and external partners to understand the best way to implement the new standards in programs by optimizing efficiency, effectiveness, equity, person-centredness, timeliness and safety.



Director **Social Services** and Housing

# Heidy Van Dyk-Ellis

As the movement continues to make services more holistic, person-centred and responsive, and to make service systems easier to navigate, more attention is being paid to human services integration. Human services integration means that services are coordinated and accessed through one centralized access point. People can connect with multiple services in one location, and only need to tell their life story to one person, one time to get the services they need. Currently, in Ontario, the scope of human services integration includes the following: income security (ie: Ontario Works or the Ontario Disability Support Program), employment, child care, housing, and homelessness prevention.

The Social Services and Housing Department began to more intentionally explore human services integration in May 2015 with a two year pilot project to amalgamate the Social Services and Social Housing Divisions. Since that time, many examples of people working together across teams to support vulnerable community members have occurred. Ontario Works and Housing team members have worked together to prevent evictions and keep people stably housed. Children's Services and Employment team members have worked together to support people in accessing affordable licensed child care so that they can remain employed. These are just a couple of broad examples of the amazing and creative work that happens in the Social Services and Housing Department every day. I am pleased that Norfolk County has decided to permanently amalgamate the Social Services and Housing Department and that I have the privilege to be a part of this team. In the next year we will continue to identify and explore opportunities for further human services integration to better support the people who use our services.



Director Quality, Planning, **Acountability and Performance** 

**Chimere** Okoronkwo

As part of the plan to institute a culture of quality and accountability, a new Department of Quality, Planning, Accountability, and Performance (QPAP) was carved out of the other Departments within the Health and Social Services Division. This Department supports the other Departments with the planning of programs and services, monitoring and reporting on the performance of these programs and services, and ensuring continuous improvement to programs and services delivered. This Department has an epidemiologist, data analyst, two priority population nurses, health planner, communications, customer service representatives and an emergency planner.

In 2017, QPAP was deeply involved in the response to the hydrogen sulphide (H2S) gas well leaks, and continues to remain involved in the ongoing monitoring. The team was also involved in a number of community initiatives geared towards poverty eradication and addressing health inequities. QPAP also supported the Public Health Department with its operational planning process as well as its Healthy Public Health Initiatives. QPAP played a key role in the review and identification of opportunities for improvements and efficiency gains in the case management processes within Social Services. As the different aspects of the 2016 census were released, the team was able to update our population indices to reflect our current status. QPAP continues to work with the other Departments to develop and implement a Performance Management Framework which will include publicly disclosing different indicators.

The Department continues to look for new ways to showcase the accomplishments of our programs and services while ensuring that the programs and services are effective and efficient.

# **Employment**

**322** 



clients obtained employment



242



clients accessed Career Coach services as a result of finding employment

967



clients attended various Life Skills workshops and Employment Information Sessions

# **Children's Services**



497

children supported with fee subsidy



**280** 

child care spaces added between Haldimand and Norfolk. Two new School Age Programs at Norfolk County schools, and three new School Age Programs at Haldimand County schools.



# **Good News!**

Partnered with Mississaugas of the New Credit First Nation to host our 4th Annual Summer Celebration with 440 people in attendance including children and staff from 12 daycares and the Ontario Early Years Centres. Implemented a system wide child care fee reduction to increase affordability and reduce parent fees across Haldimand and Norfolk.

# **Social Housing**

- \$1,254,575 IAH-E (Investment in Affordable Housing -Extension) and \$802,480 SIF (Social Infastructure Fund) awarded towards an Affordable Housing Development in Dunnville for the construction of 14 units for seniors.
- In 2017 we received additional SIF funding that was applied towards the development of affordable rental housing in Dunnville.
- Housing Services started the preparation process for the first Haldimand and Norfolk homeless enumeration. The methodology selected for the process was a Registry Week in which detailed surveys will be completed with individuals indicating they are homeless. Using the Registry Week methodology will enable Housing Services to meeting provincial requirements as well as gather specific data in order to better serve and offer programming that directly reflects the challenges facing those in our community. It will also create a starting point for which future enumerations can be measured in order to determine if any system changes are successful or require further modifications. The enumeration process was kicked off by a community planning session in which members of the community, partner agencies and staff gathered together to start discussion in regards to the enumeration process within Haldimand and Norfolk.
- Completion of 23 / 25 Social Housing Improvement Program (SHIP) funded capital projects in existing social housing community locations.
- Continued successful uptake in the provincial pilot project Survivors of Domestic Violence Portable Housing Benefit.





# **Health Unit**

### **ENVIRONMENTAL HEALTH**



98.2%

of suspected rabies exposures investigated within one day of public health notification

### INFECTIOUS DISEASE



90.8%

of 7 or 8 year old students in compliance with immunization or ISPA

### INFECTIOUS DISEASE



**88**%

of 16 or 17 year old students in compliance with immunization or ISPA

### **ENVIRONMENTAL HEALTH**



98.5%

of high-risk food premises inspected once every 4 months while in operation

### ORAL HEALTH



4,694

child dental screenings

### COMMUNITY HEALTH



723

Smoke-Free Ontario Act inspections completed

### COMMUNITY HEALTH



109

residents received cessation support through Quit Clinics and STOP studies

### MATERNAL AND CHILD HEALTH



1,080

mothers and fathers were provided healthy growth information and support at the Well Baby Drop-Ins.

### MATERNAL AND CHILD HEALTH



1,898

visits provided to families participating in the Healthy Babies Healthy Children Program

# **Public Health Story**

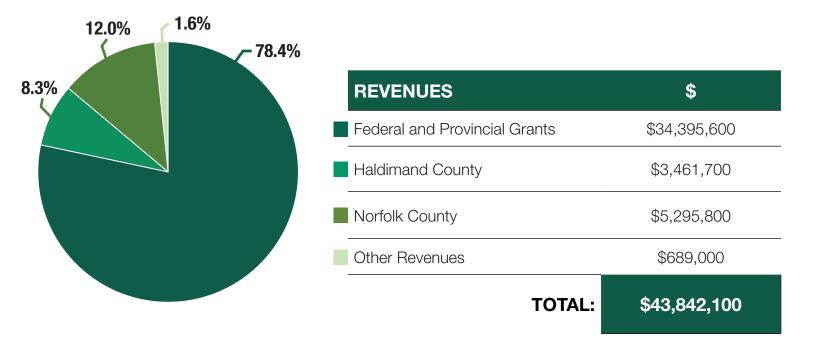
**School Health** 

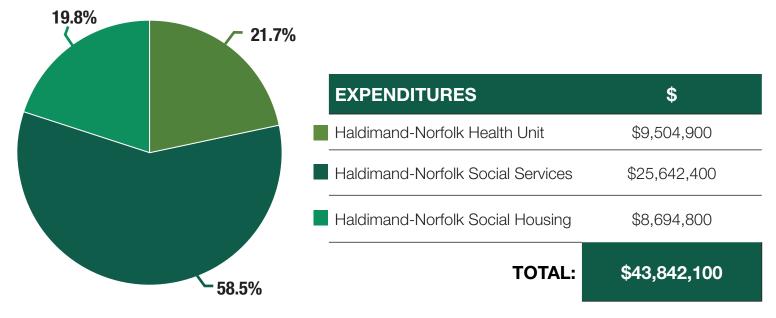
The Ontario Physical and Health Education Association (OPHEA) Healthy School Certification celebrates schools for taking action on topics such as physical activity, mental health, and healthy eating. St. Frances Cabrini School in Delhi worked toward gold certification in 2017.

The School Health team helped guide and support the school through the process of planning and implementing a range of comprehensive activities that promoted well-being in the school community.

St. Frances' Healthy School Committee chose mental health as their priority topic. The committee, consisting of students, staff, parents and members of the School Health team, created a variety of initiatives to promote positive mental health at the school.







Simcoe: 519.426.6170 or 519.582.3579 or 905.318.6623 **Caledonia**: 905.318.6623 **Dunnville**: 905.318.6623 **Info**@hnhss.ca • www.hnhss.ca