



# Annual Report 2019



## BOARD OF HEALTH

The Southwestern Public Health Board of Health is comprised of municipal appointees and provincially appointed Order in Council positions. The Board is accountable to the Ontario Ministry of Health and the communities of Oxford County, Elgin County and City of St. Thomas to ensure we deliver quality, responsive programs and services under the Ontario Public Health Standards as regulated by the Ontario Health Promotion and Protection Act.



**Larry Martin**  
Board Chair



**Joe Preston**  
Vice Chair



**Lori Baldwin-Sands**



**Grant Jones**



**Tom Marks**



**David Mayberry**



**Stephen Molnar**



**Lee Rowden**



**Sandra Talbot**



**Cynthia St. John**  
Chief Executive Officer



**Dr. Joyce Lock**  
Medical Officer of Health

### County of Elgin

Grant Jones  
Tom Marks

### City of St. Thomas

Joe Preston  
Lori Baldwin-Sands

### County of Oxford

Larry Martin  
David Mayberry  
Stephen Molnar  
Sandra Talbot

### Order in Council

Lee Rowden

## MESSAGE FROM THE BOARD CHAIR

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The Board of Health has had an exceptionally busy year continuing to govern our newly merged organization. While much of our work has been focused on developing SWPH, we have also used our collective voice to promote public health principles in our work locally, provincially, and federally. In 2019, the Board decided to support necessary investments under the Southwestern Public Health merger. These investments were used to establish a strong voice in rural health care, with cross-county integration for programs, staffing, training, and service delivery. We also found efficiencies in this process. From a fiscal perspective, SWPH was able to return more than one million dollars to municipalities.

As a Board, we held positions in favour of health promotion in key areas in our region. We advocated against the expansion of retail outlets selling alcohol, citing the negative health consequences of increased alcohol availability and its disproportionate impact on vulnerable populations. We also stated our position to endorse municipal water fluoridation, advocate for smoke-free housing, and support system level interventions to achieve built environments that enable healthy lifestyles in rural communities. In 2019, we addressed health concerns around smoking and vaping by advocating for outdoor smoke-free spaces, recommending against e-cigarette use as a smoking cessation tool, and through the expansion of our nicotine replacement therapy with community partners.

One of the most significant achievements in 2019 was the realization of a new Seniors Dental Care Program – an entirely new program funded in part by the Ministry of Health to provide basic dental care to eligible low-income seniors. We were pleased to be among the first to deliver this program in Ontario in co-operation with community partners across our region.

Our fiduciary responsibilities were also an area of focus. As a Board, we provided strategic oversight of the organization, we developed a risk management framework to meet our risk management oversight obligations going forward, and we regularly reviewed and approved the fiscal picture for our new organization making careful effort to ensure fiscal responsibility was a key driver of our decisions. While the future of local public health delivery is in a state of uncertainty given public health modernization, the Board is committed to continuing to be a voice for small urban, large rural public health delivery in our communities.



**Larry Martin, Board Chair**

## MESSAGE FROM THE CHIEF EXECUTIVE OFFICER

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In May, Southwestern Public Health (SWPH) celebrated a milestone: its first anniversary as a single entity serving the public health needs of Oxford County, Elgin County, and the City of St. Thomas. Still in our organizational “youth”, we have worked at warp speed to begin realizing the vision of the merger of Oxford County Public Health and Elgin St. Thomas Public Health one year ago.

A new organization requires a new mission, a new vision, and new values. These core components of our identity were developed through a robust strategic planning process involving partners, community members, and our staff. The resulting statements, as seen on page 9, along with the new five-year strategic plan detailed on page 10 of this report, steer our service provision, shape our decision-making, and guide the use of our resources.

We also affirmed with a CEO statement that quality is an integral component of Southwestern Public Health’s program and service delivery. Our commitment to providing the very best public health programs and services to our clients and partners guides everything that we do. Our community can hold us accountable for providing public health that:

- reflects local population issues, the best available evidence, new public health knowledge, and the local context;
- reflects effective partnerships with government, community agencies, clients, academic partners, and other appropriate organizations;
- uses a variety of communication modalities to ensure effective communications; and
- makes use of outcome data to inform continuous improvement.

In the fall, SWPH released a leadership philosophy meant as an internal guidepost for the employees of Southwestern Public Health. It affirms that in this organization leadership is not only possible for, but required of each team member, regardless of role or experience. As a community, you should observe this philosophy in action in the attitudes and behaviours of each team member you interact with.

In addition to the internal work of growing a new organization and aligning programs between regions, we also spent a significant amount of time with public health and other health system partners contributing to the provincial dialogue about a modernized public health model that would see the amalgamation of 34 public health units into 10 by April 1, 2020. At the end of 2019, we await next steps in this conversation but we are confident that our recent experience with amalgamation and strong voice as a mid-sized rural public health unit will serve the communities of Oxford, Elgin, and St. Thomas well.

We thank residents, municipal partners, and community health and service providers for their many contributions to the growth and development of Southwestern Public Health over the past year and look forward to our further work toward a healthier, more vibrant community for all.



**Cynthia St. John, Chief Executive Officer**

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## MESSAGE FROM THE MEDICAL OFFICER OF HEALTH

Public health uses an evidence-based approach to provide equitable access to public health services. Evidence is our compass, and our goal is to ensure that the work of our epidemiologists and the data from health system partners drives our work forward.

Public health promotes fair and equitable care through deep and diverse partnerships with municipalities, primary care providers, schools, and community social agencies. These partnerships are critical as they allow us to consider and factor in the social determinants of health into our program delivery. More than 12% of people in our region struggle to make ends meet due to low income, and almost one-quarter of residents have less than high school education. How do we ensure that the risks of lower education or lower income are mitigated by public health measures, so that their health outcomes aren't affected by these factors? According to our 2018 Health Status Report, if everyone in our region could access basic material needs, such as income, housing, and education, we could prevent 122 deaths in Elgin-St. Thomas and 73 deaths in Oxford over a two-year period. We bring such data forward to doctor's offices, hospitals, and municipal offices across the region to help inform funding decisions, health regulations, and care practices so that it meets the critical priorities in our local communities.

Primary care is one of our valued partners. Our local primary care teams are the first point-of-contact most local residents have with the health care system. We ensure they have needed public health information at their fingertips to make informed care decisions. In 2019, we looked at how we could apply findings from Peel Public Health to better communicate with physicians in hopes of influencing practice. A total of 176 papers, three systematic overviews, and eight systematic reviews were included in Peel's review. The purpose was to provide new research on the effectiveness of existing public health interventions, determine if other methods could influence behaviour changes in clinical practices, and to provide recommendations to support public health measures by physicians. Just as we all are influenced by various means, physicians too have nuances we need to recognize to be more effective in influencing change. As physicians, we are inundated with information, education, and research that informs our clinical practices; yet, there is always an opportunity to streamline how that information is presented to ensure it is accepted quickly and efficiently across an entire public health region. We will continue to delve into this topic in 2020.

This was a pivotal year for Southwestern Public Health. As our first full year as a new organization, it proved to be a year of learning, growth, and relationship-building with primary care providers, hospitals, and the developing Ontario Health Teams to ensure we are most effectively integrated into the fabric of the local health care system. Trust and transparency with our key stakeholders in the health system will deliver the equitable health care that our communities deserve.

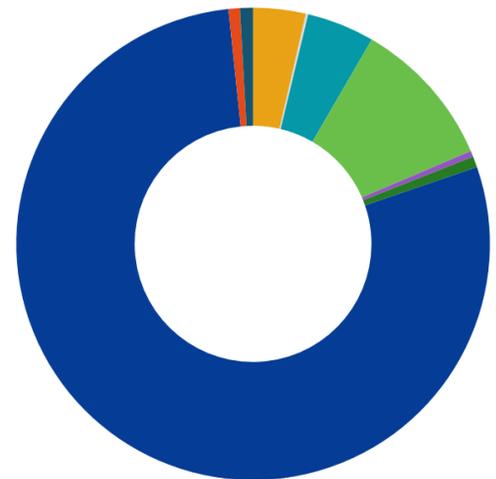
Together, we will lead the way in protecting the health of all people in Oxford County, Elgin County, and the City of St. Thomas.



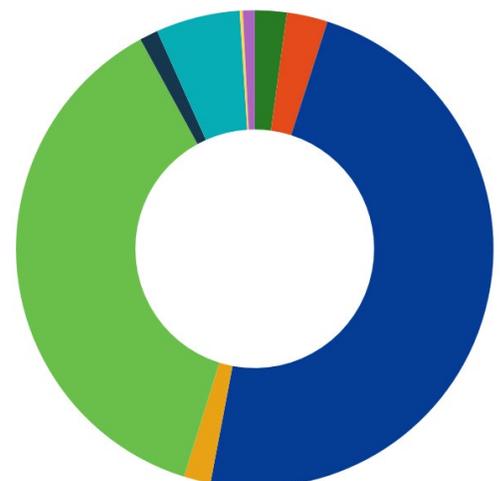
***Dr. Joyce Lock, Medical Officer of Health***

# FINANCIALS

REVENUE			
City of St. Thomas	\$	731,307	
Clinics	\$	33,302	
County of Elgin	\$	941,063	
County of Oxford	\$	2,083,687	
Interest	\$	82,034	
Other fees and recoveries	\$	153,333	
Province of Ontario	\$	16,035,724	
Public Health Agency of Canada	\$	159,326	
Student Nutrition	\$	180,046	
<b>TOTAL REVENUES</b>	<b>\$</b>	<b>20,399,822</b>	



EXPENSES			
Administrative Expenses	\$	426,803	
Amortization	\$	548,503	
Cost Shared Program Expenditures	\$	9,496,382	
Equipment	\$	359,070	
Other Programs and One Time Expenditures	\$	7,365,157	
Program Supplies	\$	245,213	
Rent and Utility Services	\$	1,127,129	
Small Drinking Water Systems Program	\$	40,933	
Vector Borne Diseases Program	\$	157,588	
<b>TOTAL EXPENSES</b>	<b>\$</b>	<b>19,766,778</b>	



[2019 Audited Financial Statements](#)



## PUBLIC HEALTH MODERNIZATION

Southwestern Public Health was pleased to consult on the Ministry of Health’s review of modernization for the public health sector. Our organization was in a unique position to provide insights from our own recent merger and we provided input on the benefits and challenges of amalgamations, shared in the spirit of assisting the Ministry with deciding what changes are needed in the system.

### Priority: Maintain strength of public health



Local presence that supports deep and diverse partnerships with municipalities, schools, community and social agencies; engagement with community leaders; for example, the Community Leaders’ Cabinet and Healthy Communities Partnership



Comprehensive models of care delivery ranging from disease prevention (e.g. safe water) to health protection (e.g. vaccination) to health promotion (e.g. walkability)



Legislative authority under the HPPA that supports ability to protect and promote the health of the public



Access to support of Public Health Ontario for clinical decision-making, evidence-informed decision-making, coordination of response to public health outbreaks, laboratory services



Programs and services that meet a range of local client needs be they individuals, families, communities, priority populations, the system. Cradle to grave programs and services that support communities (e.g. the environment) and people to be healthier



Programs and services that focus more resources on areas of greater need and groups of people who face the greatest challenges getting what they need to be healthy



Programs and services that always include interventions that will support the community to be healthier

**Priority: Maintain public health's connection to the health sector**

- While public health is not about the care of sick people, it needs to maintain and strengthen its connections with other sectors to achieve optimal health and wellbeing for all

**Priority: Establish Clear Boundaries for Leadership and Governance**

- Any Health Unit mergers be based in part on consideration of shared core attributes that they share (e.g. rural/urban/mixed)
- 100,000 – 500,000 population is ideal to achieve optimal public health performance
- Multimillion-dollar agencies require both a CEO position and a MOH position given they perform different functions and they require different competencies and qualifications
- Autonomous boards of health are optimal for governance allowing the Health Unit's sole focus to be on public health priorities
- "Pay for Say" – Contributing municipalities are represented within the boards of health based on their municipal levy percentage
- If a different model is chosen by the Ministry that doesn't have "pay for say," consider a new funding model that has public health 100% provincially-funded



## VISION, MISSION, VALUES

Following the formation of Southwestern Public Health (SWPH) in May 2018, the Board of Health began a robust strategic planning process involving partners, community members and staff. Bold new vision and mission statements, and a declaration of our organizational values resulted. These statements steer our service provision, shape our decision making and guide the use of our resources.



### VISION

Healthy people  
in vibrant  
communities.

### MISSION

Leading the way in  
protecting and promoting  
the health of all people in  
our communities, resulting  
in better health.

### VALUES

Evidence  
Collaboration  
Accountability  
Quality  
Equity  
Forward-thinking



## STRATEGIC PLAN

Our five-year strategic plan will direct our work through 2024 as a roadmap for our partnership, and organization structure to support the work.



### STRATEGIC DIRECTION 1

With partners and community members, reduce health and social inequities, making measurable improvements in population health.

#### GOALS

Local drivers of population health are understood and addressed.

Client needs are met through integration with community partners.

Action proportionate to need ensures equitable access to public health programs and services.

### STRATEGIC DIRECTION 2

Work with partners and community members to transform systems to improve population health.

#### GOALS

Shared knowledge, resources and support increased efficiencies in local health and human services.

Effective communication with system partners heightens awareness of the role of public health in the continuum of care.

System transformation results from recognition of public health's role in improving population health.

### STRATEGIC DIRECTION 3

Build an organizational culture of innovation and leadership that supports excellence in public health programs and services.

#### GOALS

Flexible local public health programs and services are delivered by well supported staff.

Staff have the skills to plan and implement responsive local public health programs and services that demonstrate value.

Accountability to funders and the community is achieved through a purposeful organizational culture of innovation and leadership.





## LEADERSHIP PHILOSOPHY

Our leadership philosophy is an internal guidepost for the employees of Southwestern Public Health (SWPH), but it also sets the expectation for what attitudes and behaviour you should encounter when you work with us.

At SWPH, leadership is possible for and required of each of us, regardless of role or experience.

Because we believe in everyone's leadership potential, we will contribute to a culture that focuses on growing leadership skills and practices.

As leaders, we bring forward the best in ourselves and others and champion public health principles with passion, purpose, and professionalism.



### At SWPH, leadership is...

- Approaching work and relationships with openness and embracing opportunities to grow understanding and respect
- Sharing information, resources, and opportunities with each other to demonstrate our commitment to success.
- Ensuring transparency by appropriately sharing our thoughts and feelings.
- Acting with integrity, humility, honest and professionalism.
- Challenging the status quo to deliver client-centred and quality driven public health work.
- Embracing continuous learning and professional growth particularly in the areas of self-awareness, self-management, and relationship management.
- Seeking and offering feedback that focuses on continuous growth and improvement.
- Behaving in a manner that reflects Southwestern Public Health's vision, mission, and values by being accountable to our clients, partners, and each other.
- Inspiring, supporting and celebrating individual and collective successes to foster a positive and engaged work environment.
- When we all act as leaders in these ways, we will be stronger together and offer our best to our clients, partners, communities, and each other.



# PROGRAM ACTIVITIES

## HEALTHY GROWTH AND DEVELOPMENT



**2,563**  
live births



**2,484**  
post-partum  
screens completed



**6,500**  
nursing and parent support  
visits to families

## TOBACCO ENFORCEMENT

**98.73%** of tobacco retailer displays/promotions in the SWPH region were inspected by Tobacco Enforcement staff.

**98.44%** of tobacco retailers in the SWPH region were in compliance with the Smoke Free Ontario Act sales to minors prohibitions.

**93.85%** of e-cigarette retailers inspected in the SWPH region were inspected by Tobacco Enforcement staff.

**97.41%** of e-cigarette retailers inspected in the SWPH region were in compliance with the Smoke-Free Ontario Act sales to minors prohibitions.

## NEEDLE EXCHANGE

**4,241** client interactions through the **needle exchange program**.



## SCHOOL-BASED ORAL HEALTH SCREENING

**6,753** student assessments in the 2018-2019 school year.



**39.5%** of students screened **required dental hygiene preventative services** (cleaning, fluoride, oral hygiene education).

**6.4%** of students screened **required emergency and/or essential dental needs**.

## SMOKING CESSATION

**13** partnership agreements signed, including 9 pharmacies, for the provision of smoking cessation services.

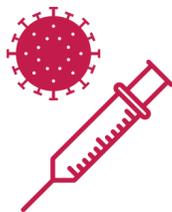


**15** STOP workshops were run by SWPH in partnership with CAMH between January and October 2019.

**96** participants completed the STOP workshops, with 88% making a serious quit attempt and 50% remaining smoke-free at 5 weeks afterwards.

## INFECTIOUS DISEASES

**1,070** flu doses administered by SWPH staff during the 2019-2020 flu season



## VACCINE PREVENTABLE DISEASES

In the 2018-19 school year, SWPH provided a total of:

**8,049** school-based immunizations

**120** grade 7 school immunization clinics

**5,264** vaccination records flagged as not up-to-date (16.4%) of 32,028 records examined

## ENVIRONMENTAL HEALTH

**2,209** Food premises inspections completed

**36** Licensed childcare inspections completed

**276** Personal Service Setting inspections completed

**225** Migrant farm inspections completed

**211** Pool & spa inspections completed

**419** Animal bite reports investigated

**195** Mosquito traps set in the community

**100%** Newly opened regulated food premises inspected



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