Our Services

Day-to-day work to support a Healthy & Safe Community

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
CHRC	ONIC DISEASE PREVENTION & WI	ELL-BEIN	G			
OBJE	CTIVE: Increase the Use of Active	and Sus	tainable Transportatio	on		
P1	% of elementary schools and secondary schools with a school travel plan that have active transportation policies	50%			39.3% (42/107)	Target unmet. Reported by school year (2018/2019 most recent available). PHS staff continue to work with school administration to promote the adoption of active transportation policies. Additional schools anticipated to adopt policies once labour disputes are resolved.
	SAFETY					
OBJE	CTIVE: Reduce Non-Compliance	with Onta	rio Food Premises Re	gulation		
P2	% of special events inspected as a result of a completed risk assessment	14%	21.5% (26/121)	11.5% (18/156)	15.9% (44/277)	Target met. Target is set based on historical values.
P3	% of year-round High-risk and Moderate-risk food premises requiring re-inspections due to food safety concerns	<20%			26.7% (552/2,066)	Target unmet. Re-inspection rate fluctuates year to year depending on environmental factors and observations of critical food safety hazards observed by Public Health Inspectors. Education and enforcement activities will continue to reduce health hazards within food premises. Note: results represent unique food premises, which can be inspected multiple times a year. Target is set based on historical values.
	NDATIONAL					
OBJE	CTIVE: To Increase Overall Prepa	redness a	and the Ability to Resp	oond to Emergencies	within Public Health	Services
P4	% of short-term corrective actions completed after an exercise or emergency activation within 12 months of identification	100%	87.5% (14/16)	93.8% (15/16)	93.8% (15/16)	Target unmet. The outstanding corrective action is development of a Mass Vaccination Plan. Anticipate completion in Q1 2020.
P5	% of long-term corrective actions completed after an exercise or emergency activation within 24 months of identification	100%	0% (0/0)	100% (1/1)	100% (1/1)	Target met.

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
HEAL	THY ENVIRONMENTS					
OBJE	CTIVE: Improve Coordination in C	Sovernan	ce to Address Climate	Change		
P6	% of assigned milestones completed from the Air Quality Task Force Action Plan 2019	20%			28.6% (4/14)	Target met. Target set based on the complexity of the milestones.
P7	% of assigned milestones completed from the Bay Area Climate Change Partnership project	100%			83.3% (5/6)	Target unmet. The outstanding milestone was to assist the Bay Area Climate Change Office in securing additional funding to hire two full-time staff. This will be completed in 2020.
OBJE	CTIVE: To Increase Awareness of	Radon a	s a Health Hazard			
P8	% of radon kits distributed to the public	100%			44.4% (444/1,000)	Target unmet. Distribution was part of the Radon Prevalence Study. To increase participation/uptake, another campaign will be implemented in Q2 2020.
HEAL	THY GROWTH & DEVELOPMENT					
OBJE	CTIVE: Improve Access to Breast	feeding S	Services			
P9	% of available breastfeeding support appointments that are accessed	N/A			83.6% (838/1,002)	In 2019, breastfeeding support was provided solely through face-to-face appointments. To increase access, virtual visits will be initiated in Q1 2020. Of the appointments that were not accessed (16%), approximately half were cancelled or no shows.
OBJE	CTIVE: Improve Access to Home	Visiting S	Services for Persons w	rith Greater Social and	Systemic Barriers	
P10	% of "high risk" clients who accessed services	90%	_		84.0% (450/536)	Target unmet. Reasons for not accessing home visits include: client moved, not found, refused, and service no longer appropriate.
P11	% of pregnant women screened for high risk who were offered a home visit	15%	10.6% (292/2,747)	11.1% (264/2,374)	10.9% (556/5,121)	Target unmet. Screenings only being completed by Fontbonne clinic and midwives. Strategies are being implemented to increase screening.

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments	
OBJE	CTIVE: Improve Access to Nurse	_	artnership Services fo	r Persons with Greate	r Social and Systemic	Barriers	
P12	% of clients who complete the full 2+ year program (graduation rate)	40%			45.5% (20/44)	Target met.	
P13	% of clients who stop participating in program (attrition rate)	N/A			21.1% (26/123)	Attrition reasons include loss of contact, refused program, moved, and baby adopted or apprehended.	
OBJE	CTIVE: Increase Awareness of He	althy Gro	wth and Development	principles			
P14	% of client participants with increased knowledge, skills and confidence on all session objectives following group sessions (i.e., child health education, reproductive health education)	90%			93.6% (1,031/1,101)	Target met.	
IMMU	NIZATION						
OBJE	CTIVE: Prevent Serious Illness Re	esulting f	rom Vaccine Preventa	ble Diseases			
P15	% of grade 7 students who have completed immunizations for hepatitis B	75% (by 2025)			71.2% (4,236/5,946)		
P16	% of grade 7 students who have completed immunizations for Human Papilloma Virus	65% (by 2025)			61.5% (3,659/5,946)	Trending towards 2025 target. Reported by school year (2018/2019 most recent available).	
P17	% of grade 7 students who have completed immunizations for meningococcus	90% (by 2025)	_		89.1% (5,297/5,946)		
OBJE	CTIVE: Increase Community Base	ed Immun	ization Outreach				
P18	School suspension rates due to non-compliance with Immunization of School Pupils Act legislation	N/A			4.8% (3,365/70,000)	Reported by school year (2018/2019 most recent available). Denominator is an estimate of students enrolled.	

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments	
OBJE	CTIVE: Improve Vaccine Manager	nent Prac	ctices				
P19	% of flu vaccine doses wasted	<5%			7.5% (8,093/108,385)	Target unmet due to late return of flu vaccine from community health care professionals (HCP). The program has been monitoring and reducing HCP' flu vaccine orders to decrease wastage.	
P20	% of publicly funded vaccine doses wasted	<5%			5.1% (16,840/327,335)	Target unmet due to an extended power outage in the community that resulted in a significant amount of vaccine wastage fro community HCP' as well as community fridge maintenance issues. Efforts to reduce wastage were implemented, including closer monitoring of community HCP' orders and improved internal processes.	
INFEC	TIOUS & COMMUNICABLE DISE	ASES PR	EVENTION AND CONT	ROL			
OBJE	CTIVE: Improve Outbreak Manage	ement wit	hin Long Term Care F	acilities (LTCFs)			
P21	% of LTCFs outbreaks with a high* respiratory outbreak duration *Note: Definition based on historical numbers.	N/A	11.4% (4/35)	21.4% (3/14)	14.3% (7/49)	This is likely due to seasonal trends and variability in the denominator. Further, early seasonal pathogens tend to have a longer incubation period such as metapneumovirus and rhinovirus.	
P22	% of LTCFs outbreaks with a high* gastroenteritis outbreak duration *Note: Definition based on historical numbers.	N/A	0% (0/14)	0% (0/2)	0% (0/16)	N/A	
OBJE	CTIVE: Increase Testing and App	ropriate 1	reatment of Sexually	Transmitted Infections	S		
P23	% of confirmed gonorrhea cases who received first line treatment (includes both Azithromycin and Ceftriaxone)	85%	79.8% (170/213)	72.0% (201/ 279)	75.4% (371/492)	Target unmet. PHS continues to promote use of first line treatment by physicians and clients.	
P24	% of confirmed Human Immunodeficiency Virus cases where follow up was completed within 2 months	75%	87.5% (14/16)	88.9% (8/9)	88.0% (22/25)	Target met.	

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
OBJE	□ CTIVE: To Improve Compliance w				on and Control Stand	ards
P25	% of tick habitats visited for active surveillance (i.e., tick dragging)	N/A	_	_	1.5% (8/547)	Despite low percentage, PHS is still 100% compliant with the provincial active tick dragging recommendations.
P26	% of water sites referred to contractor	N/A	16.0% (60/376)	14.9% (56/376)	30.9% (116/376)	N/A
SAFE	WATER					
OBJE	CTIVE: Reduce Non-Compliance	with Guid	elines and Laws that	Govern Water Safety		
P27	% of inspections among high- risk and moderate-risk water premises that resulted in an infraction	N/A	38.5% (100/260)	32.4% (95/293)	35.3% (195/553)	N/A
P28	% of recreational water premises requiring re-inspections due to water safety concerns	<20%	12.0% (13/108)	8.4% (12/143)	14.6% (21/144)	Target met. Increased compliance requiring fewer re-inspection.
SCHO	OL HEALTH					
OBJE	CTIVE: Increase Capacity to Addr	ess Healt	h Related Topics amo	ong Targeted Schools		
P29	% of targeted schools who use their "School Improvement Plan" to monitor the impact of public health support	50%			28.0% (14/50)	Target based on 2019/2020 school year. Anticipate full school year data for 2020 Mid-Year PHS Performance Report. Targeted schools are those with the highest level of need determined by higher rates of health events and social determinants within the student population.
SCHO	OL HEALTH – ORAL HEALTH					
OBJE	CTIVE: Increase the Uptake of Pre	eventive [Dental Services			
P31	% of high-risk schools where portable preventive services were delivered in school	43%			28.6% (4/14)	Reflects 2019/2020 school year to date. Two more clinics are scheduled to take place between January-June 2020. The number of school clinics per year is based on PHS capacity which is 6 clinics for the 2019/2020 school year.
P32	% of Junior Kindergarten, Senior Kindergarten, and Grade 2 students who received an oral health assessment in all publicly funded schools	89%			88.1% (15,738/17,856)	Target unmet. Oral health assessment completions are based on student attendance that day and parental consent for dental screening. Strategies to increase parental engagement are being investigated.

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments	
OBJE	CTIVE: Increase Access to Denta	Care am	ong Children				
P33	% of Healthy Smiles Ontario clients who cancelled/did not show up to clinic appointment	<20%	23.6% (230/974)	17.3% (178/1,028)	19.5% (391/2,002)	Target met.	
SUBS	TANCE USE & INJURY PREVENT	ION					
OBJE	CTIVE: Increase Community Supp	oorts to R	educe Harms Related	to Substance Use			
P34	% of partner organizations who are satisfied with the Hamilton Drug Strategy	90%			89.0% (65/73)	Target unmet. The Hamilton Drug Strategy partner satisfaction survey is completed annually. The Hamilton Drug Strategy continues to improve its methods of engagement (i.e., format of workgroup meetings, increasing diversity within the group).	
OBJE	CTIVE: Increase Access to Harm	Reduction	n Supplies and Service	es			
P35	% of eligible external stakeholders providing naloxone through the Ontario Naloxone Program	40%			41.9% (13/31)	Target met. PHS continues to work with stakeholders to increase the number of stakeholders providing naloxone.	
P36	% of needle exchange van service requests that were responded to	100%	83.3% (2,132/2,558)	86.2% (1,707/1,980)	84.6% (3,839/4,538)	Target unmet. Call volume demand for van services continues to exceed capacity. PHS is conducting a service delivery review to provide recommendations for service delivery to this target population.	
OBJE	CTIVE: Increase Harm Reduction	Practices					
P37	% of needles distributed that are returned to the harm reduction program	58%	33.7% (214,397/635,440)	63.5% (323,652/509,640)	47.0% (538,049/1,145,080)	Target unmet. Data incomplete as some external partner agencies have not reported their Q4, 2019 numbers. PHS continues to promote needle exchange within the community, including the addition of community disposal bins and health promotion.	

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
OBJE	CTIVE: Improve Collaboration wit	h Commu	ınity Partners to Preve	ent Injuries		
P38	% of injury prevention Age Friendly Plan recommendations completed with partners in the Age Friendly Collaborative Governance Committee and its working groups	100%			100% (3/3)	Target met.
OBJE	CTIVE: Increase Awareness of Inj	jury Preve	ention			
P39	% of targeted schools that received a presentation on injury prevention and safety	100%			35.1% (13/37)	Target unmet. Will continue to promote presentations to remaining schools. Labour disruption will likely impact school requests for presentations as this initiative is voluntary and there will be fewer teaching days for academic subjects.
OBJE	CTIVE: Increase Compliance with	Laws tha	nt Govern Smoking			
P40	% of vapour product retailers in compliance display, handling and promotion sections of the Smoke-Free Ontario Act (SFOA, 2017) at time of last inspection	97%	89.8% (88/98)	97.5% (198/203)	95.0% (286/301)	Target unmet. Vapour product retailers may be non-compliant due to learning curve of new legislation (SFOA, 2017) and delay of Ministry online training. PHS
P41	% of vapour product vendors in compliance with youth access legislation at the time of last inspection	90%	89.0% (121/136)	89.4% (169/189)	89.2% (290/325)	re-inspects those retailers that are non-compliant.
P42	% of tobacco vendors in compliance with youth access legislation at the time of last inspection	90%	88.9% (320/360)	91.7% (330/360)	90.3% (650/720)	Target met.
OBJE	CTIVE: Increase Access to Cessa	tion Serv	ices for Priority Popul	ations		
P43	# of smokers have attended at a Tobacco Cessation Clinic at least once after registering	N/A	333	168	501	Data collection tool being updated to collect number of registrants to change measure to percentage.

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
NON-I	MANDATED PUBLIC HEALTH SER	RVICES				
OBJE	CTIVE: Improve Client Perception	of Care	with Alcohol Drugs an	d Gambling Services		
P44	% of clients satisfied with services	N/A			87.7% (50/57)	N/A
OBJE	CTIVE: Improve Quality of Alcoho	ol Drugs a	and Gambling Services	S		
P45	% of eligible clients with completed "Global Appraisal of Individual Need Quick3 Motivational Interviewing" assessments	N/A			50% (108/216)	N/A
OBJE	CTIVE: Improve Access to Dental	Care am	ong Adults			
P46	% of adult dental services clients who were turned away at point of care (e.g., Bus)	<10%	16.1% (356/2,208)	11.7% (226/1,937)	14.0% (582/4,145)	Target unmet. Dental Health Bus served a record number of people (n=2,085) in 2019 by operating five days per week. There is still room for improvement and continuous quality improvement (CQI) activities are currently underway to reduce people turned away.
P47	% of adult dental services clients who cancelled/did not show up to clinic appointment	10%	10.3% (227/2,208)	9.9% (192/1,937)	10.1% (419/4,145)	Target met.
P48	% of eligible clients enrolled in adult dental services who accessed the clinic service	85%	84.7% (1261/1,488)	86.0% (1,176/1,368)	85.7% (2,447/2,856)	Target met.
OBJE	CTIVE: Increase Uptake of Prever	ntative De	ental Services among A	Adults		
P49	% of adult dental services clients who received preventive services	30%	25.7% (568/2,208)	25.9% (502/1,937)	25.8% (1,070/4,145)	Target unmet. Changes to the approach are being investigated to increase preventative services. Note: denominator includes those accessing the Dental Health Bus.
OBJE	CTIVE: Increase Positive Outcom	es amon	g Children and Youth			
P50	% of brief clients and/or parents who report positive outcomes after receiving services	report positive outcomes 100%	<u>Client</u> 89.6% (155/173)	94.7% (54/57)	90.9% (209/230)	Target unmet. Preliminary Data. Reflects Ministry of Children and Youth reporting year/fiscal year (April-March). Anticipate
			Parent 86.1% (179/208)	84.7% (61/72)	85.7% (240/280)	full year data for 2020 Mid-Year PHS Performance Report.

#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments
P51	% of Counselling and Therapy (C&T) clients with improved positive outcomes	N/A		90.3% (28/31)		Preliminary data. Implementation of Mental Health Questionnaire for Children & Youth in process. Reflects Ministry of Children and Youth reporting year/ fiscal year (April-March).
OBJE	CTIVE: Increase Prompt Respons	iveness t	o Children and Youth	Mental Health Needs		
P52	Average service duration	Brief 42 days		16.5 days		
		<u>C&T</u> 180 days		31.7 days		Preliminary data. Working through continuous improvement related to client information system in order to report year
P53	Average wait time for clients receiving services	Brief 7 days	_	1.0 days		totals. Reflects Ministry of Children and Youth reporting year/ fiscal year (April-March).
F33		C&T 90 days		4.4 days		

Our Resources & Service Delivery
Embed ways of working across the organization that improves our business

ALL F	ALL PUBLIC HEALTH SERVICES DIVISIONS								
#	Measure	Target	Q1-Q2 Results	Q3-Q4 Results	2019 Total	Comments			
OBJE	OBJECTIVE: Improve Service Delivery								
P54	% of programs managers who reported undertaking at least one CQI engagement	100%			94.4% (17/18)	Target unmet. PHS continues to engage in CQI initiatives.			

Monitoring Measures

щ	Magazira	Year					
#	Measure	2016	2017	2018	2019		
FOOD	SAFETY						
M1	# of special food events in the City of Hamilton inspected as a result of risk assessment	56	44	47	44		
M2	# of food handler certificates distributed	2,572	2,390	1,607	1,671		
М3	# of red signs posted outside of restaurants in the City of Hamilton	25	23	50	39		
M4	# of food premise inspections	5,351	6,141	6,536	6,762		
M5	# of food safety complaints received	249	214	523	528		
HEAL	THY ENVIRONMENTS						
M6	# of heat alerts issued in the City of Hamilton	9	2	6	3		
M7	# of cold alerts issued in the City of Hamilton	8	4	5	5		
M8	# of personal service settings inspections completed	1,015	1,020	967	1,002		
M9	# of residential care facility inspections completed	615	551	550	419		
M10	# of other types of inspections (e.g., funeral homes) completed	246	275	282	260		
M11	# of health hazards complaints received	1,638	1,429	1,468	1,374		
INFEC	TIOUS & COMMUNICABLE DISEASES PREVENTION AND CONTI	ROL					
M12	# of confirmed cases of mandatory reportable diseases - Respiratory or Direct Contact	1,477	1,241	1,842	1,602		
M13	# of confirmed cases of mandatory reportable diseases - Enteric, Foodborne & Waterborne	260	269	318	299		
M14	# of confirmed cases of mandatory reportable diseases - Vector borne and Zoonotic diseases	13	19	14	15		
M15	# of confirmed cases of mandatory reportable diseases - Sexually Transmitted & blood borne infections	2,215	2,374	2,638	2,972		
M16	# of confirmed cases of mandatory reportable diseases - Others	30	35	15	24		
M17	# of confirmed outbreaks reported to public health: - community	6	5	1	4		
M18	# of confirmed outbreaks reported to public health: - institutional	80	125	143	128		
M19	# of mammalian bites reported to public health: animal bites	1,508	1,543	1,502	1,629		
M20	# of ticks submitted to public health	296	892	567	843		
M21	# of vector borne disease related complaints received	109	126	133	102		
M22	# of Infection Prevention and Control (IPAC) lapses		3	2	1		

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.,	M	Year				
#	Measure	2016	2017	2018	2019	
M23	# of day care inspections completed	608	534	528	515	
M24	# of infection control related complaints received	64	86	112	87	
SAFE	WATER					
M25	# of safe water inspections completed	884	884	797	772	
M26	# of safe water complaints received	37	13	51	38	
SUBS	TANCE USE & INJURY					
M27	# of SFOA (tobacco) inspections completed	1,465	1,271	1,390	1,178	
M28	# of SFOA (e-cigarette) inspections completed	544	427	299	627	
M29	# of SFOA (tobacco) complaints received	274	213	218	157	
M30	# of SFOA (e-cigarette) complaints received	17	8	16	10	
M31	# of SFOA (cannabis) complaints received				37	
M32	# of By-law 11-080 Prohibiting Smoking within City Owned Parks and Recreation Property complaints received	28	25	28	68	
M33	# of tickets issues in violation of by-law 11-080 Prohibiting Smoking within City Owned Parks and Recreation Property	73	60	25	64	