2019 Standards Activity Reports as of December 31, 2019							
Program Data							
1.0. Chronic Disease Prevention and W	/ell-Being						
L.1. Menu labelling: number and percentage of new regul	·	n 2019					
Number of newly opened/identified regulated food service Number of new regulated food service premises that have		gion during 2010	11				
Percentage of new regulated food service premises inspec	, ,	Bron drillig 2019	91.7%				
I.2. Menu labelling: number and percentage of 2018 prer	nises that were re-inspected at least or	ne time in 2019					
Jumber of premises identified in 2018 and had been ident	ified as requiring a re-inspection that re	ceived at least one re-inspection in 2019	3				
otal number of premises identified in 2018			690				
Percentage of 2018 premises that were re-inspected at lea	st one time in 2019		0.4%				
Total number of inspected premises (new and re-inspected)	n 2019 that the inspectors in the board of a 2019 that the inspectors in the board of a 2019 that the board of a 2019 that the board of a 2019 that resulted in an inspection in 2019	of health deemed not in compliance and for which charges were laid all compliance and not in compliance, charges laid [(a) + (b) + (c)]	1				
Fotal number of complaints received in 2019			1				
Percentage of complaints that resulted in an inspection in	2019		100.0%				
2.0. Food Safety							
2.1. Number of year-round food premises	3,352						
2.2 Number of seasonal food premises	268						
.3. Number of year-round high-risk food premises	724						
.4. Number of year-round moderate-risk food premises	1,650						
		717					
2.5. Number of re-inspections for year-round food premis	ies	717					

2.7.	Number	of tickets	issued i	per section	number

Number of Tickets	Section Number						
1	6						

Total Number of Tickets

2.8. Number of summons issued per section number

Number of Summons	Section Number	Number of Summons	Section Number	Number of Summons	Section Number	Number of Summons	Section Number
0							
Total Number of Summons							

2.9. Number of written section 13 orders issued under the Health Promotion and Protection Act (HPPA)

For each section 13 order, describe the action taken (e.g. closure) and the reason (e.g., no potable water, power outage) for the written order

- 2 failed to provide hot water under pressure (Section 7(3)(b))
- 1 Failed to provide a handwashing station (Section 7(3)(c))

3.0. Healthy Environments

3.1. What actions were taken by the board of health to mitigate heat and cold health impacts?

Actions taken by Hamilton Public Health Services to mitigate health impacts due to hot weather in 2019:

- Educated the public and promoted actions to take to reduce risk of heat-related illness (HRI) through media interviews, website information (www.hamilton.ca/heat), and dissemination of promotional materials through community partner agencies and groups;
- Reviewed and provided comments on the 'City of Hamilton Heat Response Plan';
- Utilized Emergency Response Management Services (ERMS) to inform local stakeholders of 'Heat Warning', or 'Extreme Heat Warning' using criteria of the provincial Heat Warning Information System;
- Performed epidemiologic analysis of local community to assess geographic distribution of populations that are vulnerable to health;
- · Analyzed local EMS response data to reports of distress due to HRI in order to identify geographic areas of high-risk;
- · Liaised with both community agency staff, as well as City community services staff during heat events to identify any need to manage community risk of HRI;
- 2019 Heat warnings and/or extreme heat warnings = 3 events, totaling 9 days

Actions taken by Hamilton Public Health Services to mitigate health impacts due to cold weather in 2019:

- Led and facilitated stakeholder meetings of the Hamilton Community Cold Response Committee;
- Performed needs assessment with community stakeholders to identify community needs for "warm places" to promote to vulnerable populations to visit when cold alert is active;
- · Performed media interviews promoting actions people can take to stay warm to avoid frost bite and/or hypothermia;
- Cold Alerts for 2019 = 4 events, totaling 20 days

4.0. Immunization

4.1. Number of school immunization clinics held by the board of health for the grade 7 school-based program including hepatitis B (HBV), meningococcal and human papillomavirus (HPV) vaccines

4.2. Number and type of catch-up clinical services held by the board of health for students in grades 8 to 12 for HBV, meningococcal and HPV vaccinations

268

440

Access Point	Count	Comments
Catch-up clinic at a school (no routine school-based provided)	21	
Routine school-based clinic (catch-up vaccinations are also provided)	207	
Catch-up clinic at public health unit office location (specific clinic for school-based program)	38	

Access Point	Yes/No	Comments
Appointments for catch-up school-based immunizations at public health unit office location	Yes	
Doses provided to healthcare providers upon request	Yes	908 doses provided to healthcare providers upon request
Other (please specify)	No	

4.3. Number of HBV, meningococcal and HPV vaccine doses administered to students (reporting period September 1, 2019 to August 31, 2020)

Number of doses of HBV vaccine administered to students in grades 7 to 8 for the reporting period

8,288

Number of doses of meningococcal vaccine administered to students in grades 7 to 12 for the reporting period

6,036

Number of doses of HPV vaccine administered to eligible female students in grades 7 to 12 for the reporting period

8,828

4.4. Number and percentage of premises that store publicly funded vaccine that received their routine annual inspection as per the vaccine storage and handling requirements

Number of premises that store publicly funded vaccine in operation in the public health unit jurisdiction as of Dec 31st with completed routine cold chain inspection

Number of refrigerators in operation in the public health unit jurisdiction as of Dec 31st with completed routine cold chain inspection

450

Number of refrigerators in operation in the public health unit jurisdiction as of Dec 31st

450

Percentage of premises that store publicly funded vaccine with completed cold chain inspection

100.0%

5.0. Infectious and Communicable Diseases Prevention and Control

5.2. Percentage of infection prevention and control (IPAC) complaints investigated that resulted in a lapse by sector (e.g. PSS, dental offices, laboratories, physician offices)and total

	Sector	Number of IPAC Lapses	Percentage by Sector	
Perso	onal Service Settings		0.0%	
Dental Offices			0.0%	
	Laboratories		0.0%	
	Physician Offices	1	100.0%	
Oth	ner (please specify)		0.0%	
Oth	ner (please specify)		0.0%	
Oth	ner (please specify)		0.0%	
	Total	1	100.0%	

Number of IPAC lapses investigated from a complaint where IPAC lapses were Total number of complaints Percentage of IPAC complaints investigated that resulted in a lapse	dentified	1 64 1.6%				
Board of health comments (as needed)						
5.3. Number of verbal and written infection prevention and control (IPAC) rel	ated section 13 health hazard orders issu	ued under theHealth Protection and Pron	notion Act (HPPA)			
5.4. Percentage of reported confirmed sexually transmitted and blood-borne Hepatitis C, Gonorrhea, and Syphilis	infection (STBBI) cases where treatment	and follow-upwere conducted according	to the <i>Infectious Dis</i>	seases Protocol, 2018 (or as current), for each of		
	Number of reported cases where follow- up has been listed as closed, follow-up complete according to the protocol	Total number of reported cases	Percentage			
Hepatitis C	157	205	76.6%			
Gonorrhea	472	492	95.9%			
Syphilis	57	58	98.3%			
Total	686	755	90.9%			
Challenges (e.g. priority populations challenging to follow-up with) and other co	omments.					
Hep C cases among certain priority populations have proven difficult to reach, (43.8%) or underhoused/homelessness (37.5%).	45 of the 157 (29%) closed cases were los	t to follow up. 68.8% of the confirmed He	p C cases that were lo	ost to follow-up had risk factors related to drug use		
5.7. Number of catch basins treated with larvicide per round In addition to the number of catch basins treated with larvicide per round, the larvicide per round.	40,231 poard of health to also indicate how many	rounds done				
There were 3 rounds done for whole year.						
5.8. Number of mosquito traps set per week In addition to the number of mosquito traps set per week the board of health to report on the number of weeks of surveillance conducted						
17 weeks of surveillance conducted, from Jun 11, 2019 to Oct 03, 2019.						
5.9. Number of cases of acquired drug-resistance for tuberculosis (TB) among Board of health comments (as needed)	active TB cases	unknown				

Active TB cases are screened for culture and sensitives at the beginning of treatment only. The city of Hamilton treated 2 cases with TB resistance in 2019, 1 resistant to Isoniazid and 1 resistant to Pyrazinamide. These 2 cases did not have a history of previous TB treatment and successfully completed TB treatment in 2019.

5.11. Number of rabies exposures investigated, broken down by species/category of animal and type of exposure (e.g., bite, other, or, occult bat)

	Bite exposures	Other exposures	Occult bat exposures	Total number of Investigations
Dog	879	49	n/a	928
Cat	296	89	n/a	385
Bat	18	45	86	149
Livestock	6	0	n/a	6
Wildlife	28	70	n/a	98
Rodent	26	0	n/a	26
Other (please specify)	39	0	n/a	39
Other (please specify)				
Other (please specify)				

Board of health comments (as needed)

Other species included above: Squirrel, Rabbit, Hedgehog, Monkey, Kangaroo

5.12. Rabies vaccination status data for all dogs, cats, ferrets, horses, cattle and sheep investigated following reported human exposures (i.e., vaccinatedor unvaccinated, exempt or unknown)

	Vaccinated	Unvaccinated	Exempt from vaccination	Unknown status	Total number of Investigations
Dog	553	112	84	195	944
Cat	182	123	29	63	397
Ferret	0	0	0	0	
Horse	4	0	0	0	4
Cattle	0	0	0	0	
Sheep	0	0	0	0	

5.14. Board of health activities related to Latent TB Infections (LTBI)

What actions is the board of health undertaking to initiate and complete LTBI treatment?

Public Health Nurses (PHNs) receive reports of Latent TB Infections identified through Immigration Medical Surveillance (IMS) or other TB screening method. All reports received are reviewed, risk assessed to identify those at high risk of TB activation.

All high risk individuals receive health teaching promoting the initiation of Latent TB Infection (LTBI) treatment. Referrals to the local TB clinic are facilitated for all high risk clients.

Clients who are placed on treatment for LTBI are routinely monitored by PHNs. Clients are assessed regarding current treatment status, side effects, compliance with medications and bloodwork and if applicable will promote continuation and completion of treatment. If the client is not reached, a letter is sent to the client's home. Individuals that complete treatment are provided with a letter documenting their treatment.

PHNs facilitate medication delivery to some clients on LTBI treatment who face significant barriers to improving compliance and facilitating treatment completion.

As part of World TB Day Health Promotion Campaign, our program used social media platforms to promote identification and treatment of Latent TB infection.

6.0. Safe Water								
6.1. Recreational water: number of C	lass A (seasonal and	year-round) pools						
			Seasonal	12				
			Year-round	34				
			Total	46				
6.2. Recreational water: number of C	lass B (seasonal and	year-round) pools						
			Seasonal	39				
			Year-round	34				
			Total	73				
6.3. Recreational water: number of C	lass C facilities		77					
	,							
6.4. Recreational water: number of s	pas (seasonal and ye	ear-round)	Seasonal	5				
			Year-round	15				
			Total	20				
			Total	20				
6.5. Recreational water: number of re	e-inspections for Clas	ss A, B, C and spas						
	·	•	Class A	2				
			Class B	27				
			Class C	1				
			Spas	8				
			Total	38				
6.6. Recreational water: number of re	ecreational water co	mplaints that trigge	ered an investigation	/inspection			38	
6.7. Recreational water: number of ti	ckets issued by secti	on number						
	Number of Tickets	Section Number	Number of Tickets	Section Number	Number of Tickets	Section Number	Number of Tickets	Section Number
	0							
	Ü							
						Total Numi	er of Tickets Issued	
6.8. Recreational Water: Number of s	summons issued by s	section number						
	Number of Summons	Section Number	Number of Summons	Section Number	Number of Summons	Section Number	Number of Summons	Section Number
	0							
						Total N	umber of Summons	

6.9. Drinking water: percentage of adverse water quality incidents (AWQIs) that had an initial response by the board of health within 24 ho					
Number of AWQIs followed up within 24 hours	91				
Total number of AWQIs	91				
Percentage of AWQIs that had an initial response by the board of health within 24 hours	100.0%				

6.10. Drinking water: number of written section 13 orders under the Health Protection and Promotion Act

7.0. School Health

7.1. Narrative Statement – Oral Health

List all clinics that were used in the reporting period for the provision of clinical service delivery to Healthy Smiles Ontario (HSO) clients as per the HSO Schedule of Services and Fees (i.e. service schedule)

Clinic Name	Clinic Location	Clinic Type	Types of activities/treatment provided	Clinic hours of operation
City of Hamilton Clinic #1	247 Centennial Parkway North	PHU Preventive Clinic	Screenings, case management, preventive services	Hours of operation 8:30am-4:30pm (appointments booked 8:45am- 3:30pm) Tuesdays, one Friday per month
City of Hamilton Clinic #2	891 Upper James St	PHU Preventive Clinic	Screenings, case management, preventive services	Hours of operation 8:30am-4:30pm (appointments booked 8:45am- 3:30pm) Thursdays, most Fridays
City of Hamilton Clinic #3	110 King St West	PHU Dental Clinic	Screenings, case management, preventive services, restorative services, emergency dental services	Hours of operation 8:30am-4:30pm (appointments booked 8:45am- 4:15pm) Monday-Friday
City of Hamilton Clinic #4	N/A	Portable/Mobile Clinics	preventive services	Provided 4 portable PHU preventive services school clinics in 2019 for a total of 15.5 days from 9am-3pm. Provided 1 portable PHU preventive services clinic in one community partner location in 2019 for a total of 3 days from 9am-3pm. Total of 18.5 portable clinic days.

Number of	portab	e equipment sets
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7.2 Number and percentage of students screened who were found to have clinical need for preventive services (i.e., clinically eligible for HSO- Preventative Services Only (HSO-PSO))

Total number of students screened by the board of health in the most recently completed school year excluding the number of children who were absent, excluded from screening by their parents/legal guardians or who refuse to be screened

Number of students screened by the board of health as clinically eligible for HSO-PSO in the most recently completed school year

4,907

16,682

Percentage of students screened who were found to have clinical need for preventive services	29.4%	
7.3 Number and percentage of students screened who were found to have emergency and/or essential needs requiring immediate clinical treatment (i.e.,		O, Emergency and Essential Services Stream (HSO-EESS
Number of students screened by the board of health as clinically eligible for HSO-EESS in the most recently completed school year	1,389	
Total number of students screened by the board of health in the most recently completed school year excluding the number of children who were absent, excluded from screening by their parents/legal guardians or who refuse to be screened	16,682	
Percentage of students screened who were found to have emergency and/or essential needs requiring immediate clinical treatment	8.3%	
7.4 Number and percentage of students screened and found to be clinically and financially eligible for HSO- Preventative Services (HSO-PSO) who were the	en enrolled in HSO-PSO	
Number of students screened by the board of health as clinically and financially eligible for HSO-PSO in the most recently completed school year and subsequently enrolled in HSO-PSO	290	
Total number of students screened by the board of health in the most recently completed school year excluding the number of children who were absent, excluded from screening by their parents/legal guardians or who refuse to be screened	16,682	
Percentage of students screened and found to be clinically and financially eligible for HSO-PSO, who were then enrolled in HSO-PSO	1.7%	
Board of health comments (as needed)		
Glossary explanation for this indicator indicates that this data refers to children enrolled in PSO as a result of being screened in school. Our data collection do or a clinic screening. This denominator reflects both.	es not permit us to sepa	rate those enrolled in PSO as a result of a school screening
7.5 Number and percentage of students screened and found to be clinically and financially eligible for HSO- Emergency and Essential Services Stream (HSO Number of students screened by the board of health as clinically and financially eligible for HSO-EESS in the most recently completed school year and subsequently enrolled in HSO-EESS	0-EESS) who were then e	enrolled in HSO-EESS
Total number of students screened by the board of health in the most recently completed school year excluding the number of children who were absent, excluded from screening by their parents/legal guardians or who refuse to be screened	16,682	
Percentage of students screened and found to be clinically and financially eligible for HSO-EESS, who were then enrolled in HSO-EESS	1.8%	
7.6 Number and percentage of children screened and enrolled by the board of health in the HSO- Emergency and Essential Services Stream (HSO-EESS) wh	o have initiated treatmo	ent within 16 weeks of enrolment
Total number of HSO-EESS enrolled clients who have initiated treatment within 16 weeks of enrolment	N/A	
Total number of clients identified through screening to meet program, clinical and financial requirements, and subsequently enrolled in HSO-EESS	296	
Percentage of children screened and enrolled by the board of health in the HSO-EESS who have initiated treatment within 16 weeks of enrolment	N/A	
Board of health comments (as needed)		
We are unable to provide a number for this numerator. The glossary explanation for 7.6 indicates that this data refers to children enrolled in EESS as a result of being screened in school. Our data collection does not with those identified and enrolled into EESS through our clinics. We are also unable to separate the previously mentioned data from the treatment initiated of already enrolled in EESS outside of our PHU (e.g. Ontario Works).	•	

7.7 Number and percentage of students whose parent/guardian received at least one notice/request for immunization information under the Immunization of School Pupils Act (ISPA) assessment process

Number of students whose parents/guardians received at least one Request for Information notice by the board of health in the reporting period

18,728 88,191

21.2%

Total number of students assessed by the board of health in the reporting period Percentage of students whose parents/guardians received at least one notice

7.8 Number and percentage of students suspended under the Immunization of School Pupils Act (ISPA)

Number of students suspended in the reporting period	3,385
Total number of students assessed by the board of health in the reporting period	88,191
Percentage of students suspended	3.8%