

Public Health Services Program Outcome Indicator Results for 2019, 2020 and 2021



Denotes program was on-hold due to redeployment of staff to COVID-19 emergency response.

Program Outcome Indicator	2019 Target	2019 Result	2020 Result	2021 Result	Comments
Chronic Disease Prevention and Well-Being Program Standard					
% of elementary and secondary schools with a School Travel Plan ⁱ	75%	80% (119/149) ⁱⁱ	Ⓜ	Ⓜ	Target met in 2019. No progress made in 2020 and 2021 due to COVID.
% of elementary schools and secondary schools with a school travel plan that have active transportation policies ⁱ	50%	25% (30/119) ⁱⁱ	Ⓜ	Ⓜ	Target unmet in 2019; impacted by labour disputes in schools in 2019/2020 school year. No progress made in 2020 and 2021 due to COVID.
% of Ontario Seniors Dental Care Program (OSDCP) clients who cancelled/did not show up to clinic appointment ⁱ	N/A	N/A	4.1% (41/1010)	3.9% (88/2275)	From March 2020, due to dental college restrictions related to COVID-19, only emergency/urgent clients were seen in the clinic and very few cancelled.
% of eligible clients enrolled in OSDCP who accessed the clinic service ⁱ	N/A	N/A	94.4% (865/916)	96.2% (2185/2272)	From March 2020, due to dental college requirements related to COVID-19, only emergency/urgent clients were seen in the clinic. Implemented required infection prevention and control measures in Q3/Q4 2020, which increased the number of clients that could be seen.
% of OSDCP clients who received preventive Services ⁱ	N/A	N/A	2.6% (26/1010)	Ⓜ	No preventive services provided after March 2020 due staff redeployment to the COVID-19 and dental college restrictions related to COVID-19.

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Food Safety Program Standard					
% of food premises that change from moderate-risk to high-risk based on annual risk categorization assessment ⁱⁱⁱ	N/A	4.3% (70/1615)	0.3% (4/1370)	0% (0/1504)	Risk assessments are done once per year and continued throughout the pandemic.
% of food premises that change from high-risk to moderate-risk based on annual risk categorization assessment ⁱⁱⁱ	N/A	14.9% (94/631)	0.5% (3/562)	0% (0/605)	Risk assessments are done once per year and continued throughout the pandemic.
% of Salmonella and E. Coli food-borne outbreaks investigated for which a probable source was identified ⁱⁱⁱ	N/A	0%	0%	0%	There were no Salmonella or E. Coli food-borne outbreaks investigated in 2019, 2020 or 2021.
Incidence of reportable foodborne illness cases for Salmonella ⁱⁱⁱ	N/A	67	38	40	Case incidence is trending downwards since 2019. Health seeking behaviors is generally low for mild to moderate gastrointestinal symptoms, leading to an underestimation of true disease burden. The COVID-19 pandemic may have decreased health seeking further due to restrictions or attributing symptoms to a COVID infection. Salmonellosis is commonly linked to frozen raw breaded chicken products; on April 1, 2019 the CFIA introduced new control measures for manufacturers to address the risks associated with these products.

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Incidence of reportable foodborne illness cases for Campylobacter ⁱⁱⁱ	N/A	64	47	80	Case incidence is trending upwards since 2019. Lower incidence in 2020 may be due to COVID-19 pandemic impacts on testing and reporting. Public Health Inspectors have noticed an increase in severity of disease for those diagnosed with campylobacter.
Incidence of reportable foodborne illness cases for E. Coli ⁱⁱⁱ	N/A	3	0	10	Case incidence is trending upwards since 2019.
Healthy Environments Program Standard					
% of assigned milestones completed from the Air Quality Task Force Action Plan 2019 ⁱ	20%	28.6% (4/14)	Ⓜ	Ⓜ	Target met in 2019. No progress made in 2020 and 2021 due to COVID-19.
% of assigned milestones completed from the Bay Area Climate Change Partnership project ^t	100%	83.3% (5/6)	100% (6/6)	-	Target met by end of 2020.
% of radon kits distributed to the public ⁱ	100%	44.4% (444/1,000)	Ⓜ	Ⓜ	Target unmet in 2019. Distribution was part of the Radon Prevalence Study. To increase participation/uptake, another campaign was planned from Q2 2020. No progress made in 2020 and 2021 due to COVID-19.

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Healthy Growth and Development Program Standard					
% of available breastfeeding support appointments that are accessed	N/A	83.6% (838/1002)	89% (154/174)	81% (146/181)	In 2019, breastfeeding support was provided solely through face-to-face appointments. In 2020 shifted to rate of completion instead of rate of available visits due to staff redeployment to the COVID-19 emergency response, which limited # available visits. Home visits suspended during COVID, shifted to virtual scheduled visits.
# of Breastfeeding Support "Significant Interactions" (By interaction type) ⁱ	N/A	468 phone calls, 122 emails	1169 phone calls, 609 emails, 138 consults/other communications	922 phone calls, 454 emails, 68 consults/other communications	Main intervention in 2019 was face to face home visiting. Due to staff redeployment to COVID-19 emergency response in 2020 and 2021, 1:1 breastfeeding support shifted to telephone and email only.
% of pregnant women in Hamilton who registered for PHS prenatal class out of the total number of women who gave birth ⁱ	N/A	7.3% (417/5740)	25.7% (1433/ 5585)	26.6% (1571/ 5910)	Face to face prenatal classes were suspended in 2020 due to COVID-19. Delivery of prenatal education was solely through online prenatal education program throughout 2020 and 2021.
% of client participants with any increased knowledge, skills and/or confidence on all session objectives following group sessions ⁱ	90%	93.6% (1,031/1,101)	Ⓜ	Ⓜ	Target met in 2019. No progress made in 2020 and 2021 due to COVID-19.
% of pregnant women screened out of the total # of residents who gave birth in Hamilton ⁱ	15%	11% (557/5091)	12% (605/4884)	17.5% (894/5116)	Target unmet in 2019 and 2020, met in 2021.

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% of clients confirmed as high risk who were referred to blended home visiting ⁱ	90%	100% (573/573)	100% (468/468)	100% (434/434)	Target met in 2019, 2020 and 2021.
% of clients who complete the full 2+ year program (Nurse Family Partnership) ⁱ	40%	45% (20/44 clients enrolled in 2017)	45% (23/51 clients enrolled in 2018)	43% (18/42 clients enrolled in 2019)	Target met in 2019, 2020 and 2021.
# of CPNP/Prenatal Nutrition program new client registrations ⁱ	N/A	298	203	281	CPNP suspended in person groups in March 2020, moved to individual phone contacts only and mailouts of educational materials and program incentives including grocery gift cards.
# of Health Connections Phone Line calls completed ⁱ	N/A	–	2777 calls (1069 for breastfeeding support)	2086 calls (863 for breastfeeding support)	
Immunization Program Standard					
% of 7-year olds whose vaccinations are up-to-date for all Immunization of School Pupils Act (ISPA) designated diseases ⁱⁱⁱ	N/A	86.4% ⁱⁱ	N/A	N/A	Data not released by Public Health Ontario (PHO) for 2019/2020 and 2020/2021 school years.
% of 17-year olds whose vaccinations are up-to-date for all Immunization of School Pupils Act (ISPA) designated diseases ⁱⁱⁱ	N/A	66.4% ⁱⁱ	N/A	N/A	Data not released by Public Health Ontario (PHO) for 2019/2020 and 2020/2021 school years.
% of grade 7 students whose vaccinations are up-to-date for hepatitis B (12 and 13-year olds) ⁱⁱⁱ	N/A	70.3% ⁱⁱ	14.3% ⁱⁱ	21.9% ⁱⁱ	Vaccination coverage is trending downwards. As a result of the COVID-19 pandemic, there has been limited public health capacity

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% of grade 7 students whose vaccinations are up-to-date for meningococcal (12 and 13-year olds) ⁱⁱⁱ	N/A	86.5% ⁱⁱ	79.8% ⁱⁱ	19.1% ⁱⁱ	to deliver school-based immunization programs, as well as to enter and assess immunization records. Immunization coverage estimates for the 2019-20 and 2020-21 school years are substantially lower than in previous school years.
% of grade 7 students whose vaccinations are up-to-date for HPV (12 and 13-year olds) ⁱⁱⁱ	N/A	61.2% ⁱⁱ	1.2% ⁱⁱ	0.5% ⁱⁱ	
Infectious and Communicable Disease Prevention and Control Program Standard					
Incidence rate of Hepatitis C ⁱⁱⁱ	N/A	35.9	21.4	23.9	The hepatitis C incidence rate is trending downwards. Hepatitis C disproportionately affects persons who inject drugs. Although services for provision of harm reduction supplies continued throughout the pandemic, access to testing for this at-risk population decreased during the pandemic. Decrease in testing could have contributed to a lower incidence rate of hepatitis C.
Incidence rate of Gonorrhea ⁱⁱⁱ	N/A	86.0	80.6	88.9	Incidence rate of Gonorrhea infections is stable with a slight increase in 2021 compared to 2019. Due to staff redeployment to the COVID 19 emergency response, HPHS closed several of their sexual health clinics. However, many local organizations continued to offer in person and barrier free care.

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Incidence rate of Syphilis ⁱⁱⁱ	N/A	17.4	26.7	40.2	The syphilis incidence rate is trending upwards. Rates of infectious syphilis have increased in both males and females and is highest among individuals aged 30 to 39 years old. The general increase in syphilis rates could be attributed to many factors such as: a decrease in sexual health promotion campaigns during the COVID-19 response, a lack of awareness of this emerging disease by the general population, and widespread uptake of HIV PrEP.
# and % of active respiratory Tuberculosis (TB) cases that complete recommended treatment ⁱⁱⁱ	N/A	Case Count = 6 % = 100%	Case Count = 4 % = 100%	Case Count = 3 % = 100%	Percentage of TB cases completing treatment within the report year is high and stable. Due to low case counts, interpret with caution. Active TB cases are followed by case managers for the duration of treatment. In 2020 Hamilton Public Health implemented Video Directly Observed Therapy (DOT) for active TB cases. Implementation has been overall successful and well received by clients.
Safe Water Program Standard					
% of Class A pools with no critical infractions ⁱⁱⁱ	N/A	39.13% (18/46)	63.04% (29/46)	47.83% (22/46)	Most critical infractions are due to seasonal pre-opening inspections and infractions must be corrected prior to opening for the season.

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% of Class B pools with no critical infractions ⁱⁱⁱ	N/A	56.25% (36/ 64)	25.37% (17/ 67)	26.87% (18/67)	Most critical infractions are due to seasonal pre-opening inspections and infractions must be corrected prior to opening for the season.
% of spas with no critical infractions ⁱⁱⁱ	N/A	23.53% (4/17)	50.00% (9/18)	77.78% (14/18)	Education and resources provided by inspectors to operators may have improved inspection outcomes.
% of wading pools with no critical infractions ⁱⁱⁱ	N/A	100% (6/6)	40% (2/5)	100% (5/5)	Critical infractions in 2020 were due to construction upgrades and infractions were corrected prior opening.
% of splash pads with no critical infractions ⁱⁱⁱ	N/A	100% (62/62)	100% (66/66)	100% (64/64)	
School Health Program Standard					
% of high-risk schools where portable preventive dental services were delivered in school ⁱ	43%	66.7% (4/6) ⁱⁱ	Ⓜ	Ⓜ	Target met for 2019. No progress made in 2020 and 2021 due to COVID-19.
% of JK, SK and grade 2 students who received an oral health assessment in all publicly funded schools ⁱ	89%	61.4% (9385/ 15292) ⁱⁱ	Ⓜ	Ⓜ	Target unmet for 2019; measure based on school year 2019/2020 and program paused in March 2020 due to COVID-19. No progress made in 2020 and 2021 due to COVID-19.

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% of Healthy Smiles Ontario (HSO) clients who cancelled/did not show up to clinic appointment ⁱ	<20%	19.5% (391/2,002)	17.4% (81/466)	8.5% (28/30)	Target met for 2019, 2020 and 2021. Preventive clinics closed April 2020, due COVID-19 (staff redeployment and dental college restrictions). Only emergency and urgent treatment services provided at HPHS downtown dental clinic. Enrollment continued so HSO clients could see a dentist in the community.
% of SK students who received a vision health assessment (screening) in all publicly funded schools ⁱ	N/A	99.3% (3044/ 3064) ⁱⁱ	Ⓜ	Ⓜ	No progress made in 2020 and 2021 due to COVID-19.
% of students who did not pass the screening tests and require a full Comprehensive Eye Examination after vision screening ⁱ	N/A	61.5% (3044/ 4951) ⁱⁱ	Ⓜ	Ⓜ	No progress made in 2020 and 2021 due to COVID-19.
Substance Use and Injury Prevention Program Standard					
% of partner organizations who are satisfied with the Hamilton Drug Strategy ⁱ	90%	89.0% (65/73)	Ⓜ	Ⓜ	Target unmet in 2019. The Hamilton Drug Strategy partner satisfaction survey was scheduled to be completed annually. No progress made in 2020 and 2021 due to COVID-19.

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% of eligible external stakeholders providing naloxone through the Ontario Naloxone Program (ONP) ⁱ	40%	41.9% (13/31)	54.8% (17/31)	61.2% (19/31)	Target met in 2019, 2020 and 2021. PHS is the administrator of the ONP in Hamilton. PHS works with the Ministry to onboard eligible organizations. Eligibility is based on ministry-defined criteria.
% of Needle Exchange Van service requests that were responded to ⁱ	100%	84.6% (3,839/4,538)	86.4% (4053/4690)	90.1% (3120/3464)	Target unmet. Call volume demand for van services during the evening shift continues to exceed capacity and in addition the Van experienced service interruptions in 2020 and 2021 as a result of COVID-19.
% of needles distributed that are returned to the harm reduction program ⁱ	58%	47.0% (538,049/ 1,145,080)	62.5% (650,718/ 1,040,258)	89.46% (796,077/ 889,836)	Target unmet in 2019. Target met in 2020 and 2021. PHS continues to promote needle exchange within the community, including the addition of community disposal bins and health promotion.
# of needles given out in Harm Reduction Program ⁱ	N/A	1,386,411	1,040,258	889,836	Decrease in 2020 and 2021 due to impact of COVID-19 pandemic with decrease in service provider hours and public availability, in addition to local shift in preference to inhalation as method of administration over injection.

Program Outcome Indicator	2019 Target	2019 Result	2020 Result	2021 Result	Comments
% of tobacco retailers in compliance with display, handling and promotion sections of the Smoke-Free Ontario Act (SFOA, 2017) at time of last inspection ⁱ	N/A	96.5% (110/114)	⊞	⊞	No progress made in 2020 and 2021 due to COVID-19.
% of vapour product retailers in compliance display, handling and promotion sections of the Smoke-Free Ontario Act (SFOA, 2017) at time of last inspection ⁱ	97%	95.0% (286/301)	⊞	⊞	Target unmet in 2019. Vapour product retailers may have been non-compliant due to learning curve of new legislation (SFOA, 2017). PHS re-inspects those retailers that are non-compliant. No progress made in 2020 and 2021 due to COVID-19.
% of tobacco vendors in compliance with youth access legislation at the time of last inspection ⁱ	90%	90.3% (650/720)	⊞	⊞	Target met in 2019. No progress made in 2020 and 2021 due to COVID-19.
% of vapour product vendors in compliance with youth access legislation at the time of last inspection ⁱ	90%	89.2% (290/325)	⊞	⊞	Target unmet in 2019. Vapour product retailers may be non-compliant due to learning curve of new legislation (SFOA, 2017). PHS re-inspects those retailers that are non-compliant. No progress made in 2020 and 2021 due to COVID-19.
% of targeted schools that received a presentation on injury prevention ⁱ	100%	35.1% (13/37)	⊞	⊞	Target Unmet in 2019. This may have been impacted by the work to rule situation schools experienced in Q3/Q4 of 2019. No progress made in 2020 and 2021 due to COVID-19.

Program Outcome Indicator	2019 Target	2019 Result	2020 Result	2021 Result	Comments
Percent of injury prevention Age Friendly Plan recommendations completed with partners in the Age Friendly Collaborative Governance Committee and its working groups ⁱ	100%	100% (3/3)	Ⓜ	Ⓜ	Target met in 2019. No progress made in 2020 and 2021 due to COVID-19.

ⁱ Locally defined indicator.

ⁱⁱ Represents school year of September to June, rather than calendar year.

ⁱⁱⁱ Ministry defined indicator.