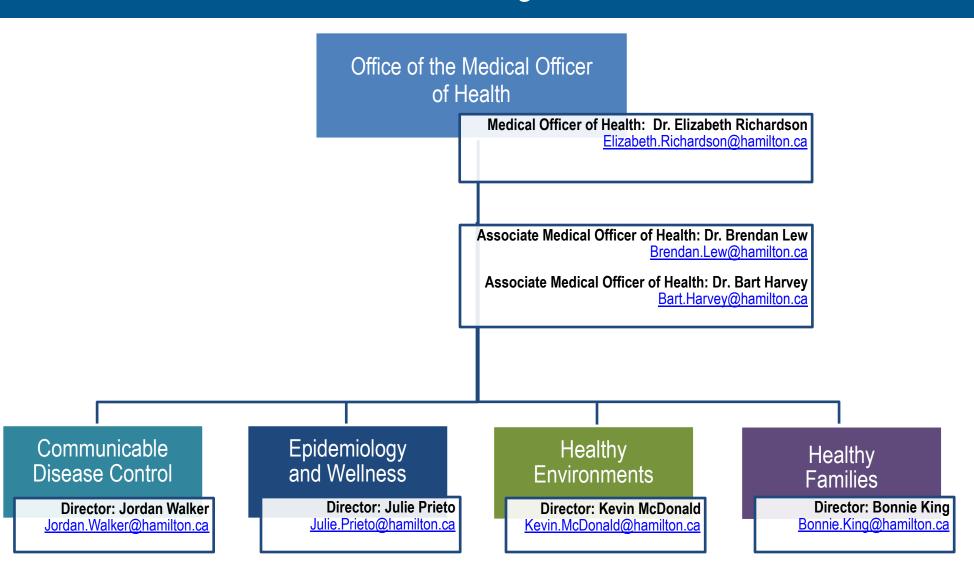
Public Health Services Organizational Structure



Communicable Disease Control Division

Emergency Response Program

- Ensure organizational readiness to respond, mitigate risks, and recover from significant threats to public health or disruptions to Public Health Services by:
 - Developing and maintaining emergency response plans based on local risk assessments incorporating lessons learned from previous emergency response activations
 - Leading training, simulations, and coordination to enhance preparedness
 - Integrating emergency management into business continuity plans
 - Ensuring 24/7 readiness to respond to urgent issues of public health significance and continuity of critical public health services during emergencies

Infection Prevention & Control and Outbreak Management Program

- Control the spread of infectious diseases in the community by:
 - Managing respiratory and enteric outbreaks in high-risk congregate settings (e.g., long-term care homes, retirement homes, child care centres)
 - Inspecting personal services settings and child care centres for infection control best practices.
 - Investigating infection prevention and control complaints
 - Providing education and health promotion to support effective infection prevention and control (IPAC) practices in community and congregate settings
 - Managing cases, contacts and outbreaks of enteric diseases of public health significance (e.g. Salmonellosis, E. coli)

Infectious Disease Program

- Prevent and reduce the spread, morbidity, and mortality of infectious diseases by:
 - Managing cases, contacts, and outbreaks of diseases of public health significance (e.g., tuberculosis, measles, Syphilis)
 - Promoting healthy sexual behaviours and delivering sexual health and harm reduction services for populations with barriers to accessing healthcare
 - Communication and health promotion to community and health care providers on infectious disease trends, risk factors, and prevention strategies

Communicable Disease Control Division

Community Vaccination & School Clinics Program

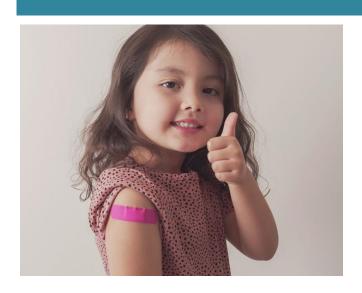
- Reduce the burden of vaccine preventable diseases by:
 - Enhancing vaccine knowledge and confidence through health promotion and providing advice on immunization to the public, health care providers, and organizations
 - Collaborating with community partners to provide immunizations to eligible individuals
 - Administrating Grade 7 schoolbased vaccines (meningococcal, hepatitis B and human papillomavirus (HPV)
 - Administering catch-up clinics in community-based settings for those behind on vaccinations, with focus on populations with barriers to accessing healthcare
 - Administering COVID-19 and influenza vaccines in community clinics, with focus on populations with barriers to accessing healthcare

Vaccine Inventory Management Program

- Ensure the effective management of publicly funded vaccines to minimize wastage, promote safety, and maintain efficacy by:
 - Supplying vaccines to health care providers with proper storage, handling, and distribution practices
 - Conducting storage inspections and cold chain management to preserve vaccine efficacy
 - Supporting health care professionals and community partners in managing vaccine inventories
 - Monitoring and assessing adverse events following immunizations
 - Reviewing immunization records for students, communication to parents and students of overdue vaccinations and enforcement as required under the Immunization of School Pupils Act

Communicable Disease Control Division

Work in Action



An example¹ of outbreak management:

Pat, a Public Health Nurse, received a phone call from the Public Health Ontario Laboratory reporting a confirmed measles case. Pat gathered information on the client and lab results and then called the ordering physician and the case's parents to ensure they were aware of the diagnosis and gathered further information. A.J. is a 4-year-old with one documented dose of Measles, Mumps, and Rubella vaccine, and has a history of recent travel to England. The Public Health Nurse provided A.J.'s parents with Measles education regarding the required period of isolation for A.J., the importance of contact management, infection prevention and control measures required should A.J. require further medical attention.

Pat collected a list of contacts and exposure settings as well as the dates and times A.J. was at these settings. A.J. doesn't attend daycare but did attend a birthday party on the day of rash onset. 15 children ages four to six years, 26 adults and some siblings attended the birthday party at a local children's play centre. Pat was informed four adults attending are pregnant and five siblings are under the age of one year. All of these persons require contact tracing to determine their immunization status and whether they are at risk for measles. Individuals who are susceptible can be administered post-exposure prophylaxis, Measles, Mumps, and Rubella vaccine or immunoglobulin (Ig), but there is a limited window of time after exposure in which this will be effective protecting against infection from that exposure.

Given the urgent need for follow-up and the number of contacts, the Program Manager mobilized the response by requesting additional Public Health Nurse support from other Public Health Services programs and engaged the Vaccine Program to mobilize a measles post-exposure prophylaxis clinic.

Susceptible individuals were recommended to have Measles, Mumps, and Rubella vaccine organized the same day with the Vaccine Program, and post exposure prophylaxis vaccine clinic information was provided. As a result, nine appointments were booked into the post exposure prophylaxis vaccine clinic, and doses were administered by two nurses between 2 pm and 8 pm. Of these nine contacts, six received their second Measles, Mumps, and Rubella vaccine and three received their first dose.

This swift response ensured that no further measles cases were reported in Hamilton related to this exposure.

¹ This story has been developed to provide examples of the types of services Public Health Services provides. It is not based on a real client.

Epidemiology & Wellness Division

Alcohol, Drugs & Gambling Services and Mental Health Street Outreach Program

- Deliver integrated, inclusive, and accessible services to individuals in Hamilton facing mental health, addictions, and homelessness challenges, including:
 - Assessment
 - Counselling
 - Case management
 - Outreach
 - Harm reduction initiatives
 - Health education
 - On-site services with community partners

Data Management Program

- Ensure business operations and service delivery comply with legislated privacy, security, and records and information management requirements by:
 - Maintaining policies, procedures, and records retention processes to safeguard information
 - Delivering high quality information systems, software, and technology to support secure and efficient operations
 - Providing centralized facilities management and reception services to streamline organizational support

Epidemiology & Evaluation Program

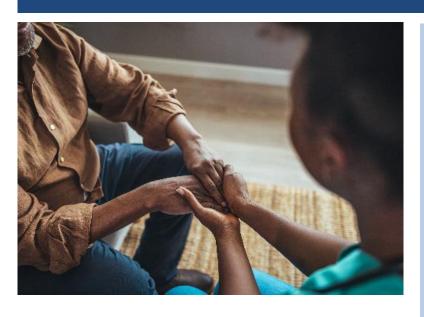
- Improve understanding of population health outcomes and inequities in Hamilton by:
 - Analyzing population health data, behaviours, and service use to identify emerging trends
 - Using surveillance data to guide evidence-informed public health practices, program planning, and priority setting
 - Sharing reports, dashboards, and visualizations to raise awareness of population health trends and inequities with community partners and the public

Mental Well-Being & Substance Use Program

- Reduce the burden and harms associated with substance use and promote community mental health and well-being by delivering interventions such as:
 - Developing and promoting policies that support healthier relationships with substances
 - Educating the public on the risks associated with substance use and safer substance use
 - Promoting supportive environments to prevent substance use
 - Providing systems coordination for a communitywide approach to substance use in Hamilton

Epidemiology & Wellness Division

Work in Action





An example² of addressing complex needs of unhoused residents:

A.K. first connected with Public Health Services' Mental Health and Street Outreach Program for support with housing. He was 65 years old, a newcomer and had language barriers that made the housing process difficult to work through. An Outreach Worker from Public Health Services worked with him to connect him to housing and settlement supports.

Through several interactions A.K.'s trust in his Outreach Worker grew and he also confided feeling isolated and down, which was made worse by some ongoing health issues. He admitted to going to the casino where he could easily be around people, and although he wasn't interested in gambling support at that time, he did indicate that wanted more social support. His Outreach Worker met with him and a Public Health Nurse on the team, who had a conversation with him and recommended supports and activities for his health issues. They connected him with City of Hamilton recreation programs and seniors social programming and helped him find a family doctor.

Over time, A.K. was housed and built his own circle of support and found other activities to help reduce the isolation he felt. As he felt more secure, A.K. also showed interest in speaking to someone about his gambling, and he reached out to his Public Health Nurse, who suggested consulting a social worker at Public Health Services Alcohol, Drug & Gambling Services with whom A.K. developed a plan to reduce his gambling.

Establishing and building this trusting relationship over time allowed Public Health Services to connect A.K. with multiple services in the community to address and overcome the complex challenges he was facing.

² The name and details in this story have been changed to protect confidentiality.

Healthy Environments Division

Chronic Disease Prevention Program

- Reduce the incidence and burden of chronic disease by:
 - Promoting active transportation through healthy public policy
 - Reducing sedentary behaviour in workplaces and schools
- Increasing accessibility and availability of healthy foods
- Increasing food literacy

Food & Water Safety Program

- Reduce the risk of food-borne illnesses by:
 - Inspecting food premises, festivals, and special events
 - Investigating food safetyrelated complaints
 - Training and educating food handlers and the public on safe food handling practices
- Prevent or reduce the burden of water-borne illnesses by:
 - Inspecting small drinking water systems
 - Inspecting recreational water facilities
 - Monitoring beach water quality
 - Completing annual mandatory and complaint-based inspections

Health Hazards & Vector Borne Diseases Program

- Promote healthy built and natural environments by:
 - Reducing exposure to environmental health hazards and mitigating risks
 - Promoting health evidence related to air pollutant exposure
 - Addressing climate impacts on environmental health risks
- Reduce the burden of vector-borne diseases by:
 - Monitoring and implementing control related to West Nile Virus
 - Investigating rabies cases
 - Conducting surveillance of Ticks for Lyme Disease and other vector-borne diseases as they emerge

Tobacco Control Program

- Prevent initiation of smoking or vaping, and help those who smoke or vape quit by:
 - Implementing prevention campaigns
 - Providing cessation counselling and supports
 - Training health care and social service providers
- Protect individuals from exposure to second-hand smoke and vape by:
 - Increasing awareness of and enforcing existing bylaws
 - Inspecting hospitals and schools
 - Investigating complaints
- Enforce the Smoke-Free Ontario Act by:
 - Conducting inspections related to youth access, and product display & promotion
 - Investigating complaints

Healthy Environments Division

Work in Action



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An example of creating healthy, safe environments for children

In conversation with the Principal of Strathcona Elementary School, the school's Public Health Nurse identified safety issues for children at school drop off and pick up times due to unsafe driving behaviours.

Public Health Services worked with staff in the City's Planning Department to collaborate with the Hamilton Wentworth District School Board and the Strathcona School community to conduct a study to understand whether simple interventions could improve health, well-being, and safety for the children of this school.

In spring 2024, Public Health Services led the School Street feasibility study, which opens a stretch of roadway in front of the school to pedestrians, while closing it to vehicles for drop-off. Public Health Services worked with the School Board to engage with parents, caregivers and the broader community in the months leading up to implementation to ensure buy-in in the project's success.

There was an overwhelming positive response and acceptance of the School Street among the Strathcona school community, including staff, students, families, and residents once they had the opportunity to experience it. Through discussions and written feedback, individuals described the increased enjoyment they had meeting with other families, watching their children playing with one another, and the joy students had in going to school. Additionally, families acknowledged the positive impact the School Street project had on feeling safer and improving the air quality at the school entrance.

In Strathcona, the piloting of School Streets resulted in decreased traffic, increased perceived safety, and potentially increased active travel to school. These positive outcomes demonstrated the potential for long-term implementation and scaling up to other schools in Hamilton. Giving space back to children and their families is a key step in increasing the health, well-being, and safety of our community.

Healthy Families Division

Child & Adolescent Services

- Improve the mental health of infants, children, youth, and their families by increasing access to mental health services, especially among priority populations, and by:
 - Providing free mental health counselling for children, youth, and their families
 - Offering walk-in single session counselling
 - Implementing Moodwalks an evidencebased walking program for youth experiencing low mood and anxiety
 - Collaborating with health and social service providers to develop mental health care pathways

Dental & Vision Screening Program

- Improve oral health among children by:
 - Conducting oral health screenings for elementary school students
 - Implementing Healthy Smiles Ontario including preventive, routine and emergency services for children and youth from lowincome households
 - Providing education and outreach regarding the importance of good oral health
- Ensure the provision of vision screening in schools for Senior Kindergarten students
- Improve oral health among <u>adults and seniors</u> experiencing low-income by:
 - Providing preventive, restorative and emergency dental services
 - Providing support with oral health service navigation
 - Implementing the Ontario Seniors Dental
 Care Program in partnership with Community
 Health Centres

Healthy Growth & Development Program

- Enable all maternal, newborn, child, youth and families to attain and sustain optimal lifelong health and developmental potential by:
 - Providing in-home support by public health nurses for:
 - pregnant people and parents with children from birth to school entry (Healthy Babies Health Children program)
 - young parents experiencing financial and/or social challenges (Nurse-Family Partnership program)
 - Developing and implementing the infant and early years mental health pathway to provide timely access to screening, assessment, and referral
 - Providing coordinated supports for families to increase access to municipal-led services
 - Providing support to pregnant people and parents via the Health Connections phone line
 - Providing prenatal and parenting education

Healthy Families Division

Health Promotion Program

- Support evidence-informed programming and effective service provision by:
 - Planning, implementing and evaluating comprehensive health promotion strategies
 - Strengthening community action to collaboratively address local priorities
 - Supporting the integration of services across the Healthy Families Divisions to improve efficiency and decreasing barriers for clients accessing services

Planning & Competency Development Program

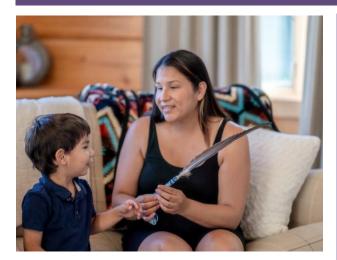
- Provide high quality support to enhance organizational effectiveness, efficiency, and impact of programs and services, including:
 - Strategic and operational planning support (e.g., Annual Service Plan & Budget, risk management planning, priority setting)
 - Performance measurement and continuous improvement (e.g., Annual Performance Report, Ministry reports, compliance assessments)
 - Policy analysis and integration
 - Staff competency development
 - Evidence-informed decision-making and knowledge integration support
 - Health systems integration (e.g., Primary Care Strategy, collaboration with the Greater Hamilton Health Network)
 - Work with programs and priority populations to improve public health practice and embed principles of health equity, anti-racism and anti-Indigenous racism into our work

School Program

- Achieve optimal health of school-aged children and youth through partnership and collaboration with school boards and schools by offering:
 - Universal services for all school boards:
 - Consultation with a Public Health Nurse, Registered Dietitian, Physical Activity Specialist or Health Promotion Specialist
 - · Access to electronic health resources
 - Targeted services for priority school communities that are most disproportionately impacted by the social determinants of health:
 - Public Health Nurse support (up to one day per week)
 - · School health assessments
 - Development and implementation of comprehensive health action plans to support mental health and other identified health priorities
 - Support with the Healthy Schools Certification process

Healthy Families Division

Work in Action





An example³ of supporting families as they grow:

A first-time mother called into the Health Connections phone line seeking parenting support for her 6-month-old baby girl, Sophie, and to find out more information about accessing daycare. The Public Health Nurse who answered her call was able to further explore her needs and concerns and informed her that she was eligible for the Healthy Babies Healthy Children program, which is a program that offers long-term home visiting with families anytime between pregnancy up to school entry. The Public Health Nurse offered a home visit to which the client consented. At the initial home visit, the Public Health Nurse learned that the client was a single parent receiving Ontario Works and determined that she was eligible for the Coordinated Supports for Families program, which offers coordinated visits with her OW worker and Public Health Nurse, referrals to Child Care Subsidy and Recreation Assistance Program, and a free Presto pass. Throughout her nine months of home visits, the client was able to achieve her established goals, which included strengthening her parenting skills, healthy growth and development for her baby, connection to community resources, and securing a subsidized daycare placement, which ultimately increased her confidence as a parent and improved the well-being of her family.

As Sophie grew and started school, the family met the school's Public Health Nurse and participated in school-wide health promotion activities. While in Kindergarten, a Public Health Services Registered Dental Hygienist performed a dental screening, identifying an urgent dental need. The Dental Hygienist was able to support the family, learning that the Sophie's mother was aware of the dental issue, but unable to pay for her child's treatment. This created a challenging situation for the family as it increased family stress levels and Sophie's dental pain was impacting her ability to concentrate in school. The Public Health Services Dental Hygienist enrolled her in the Healthy Smiles Ontario dental program to receive free dental care. Sophie was able to have the dental issue fixed at no cost. While also at school, she engaged with a Public Health Nurse and other school staff on school-wide health promotion initiatives to support healthy and safe school community.

In her teenage years, Sophie struggled with anxiety. The Public Health Nurse recommended she visit Public Health Services' Child and Adolescent Services walk-in clinic, which provides free mental health support for children and youth. The next day, she had a counselling session where they developed a plan to begin to address her mental health concerns.

Public Health Services was able to work with this family over time to provide coordinated support to address the many opportunities to improve the health and wellbeing of this child in the crucial early years of life.

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