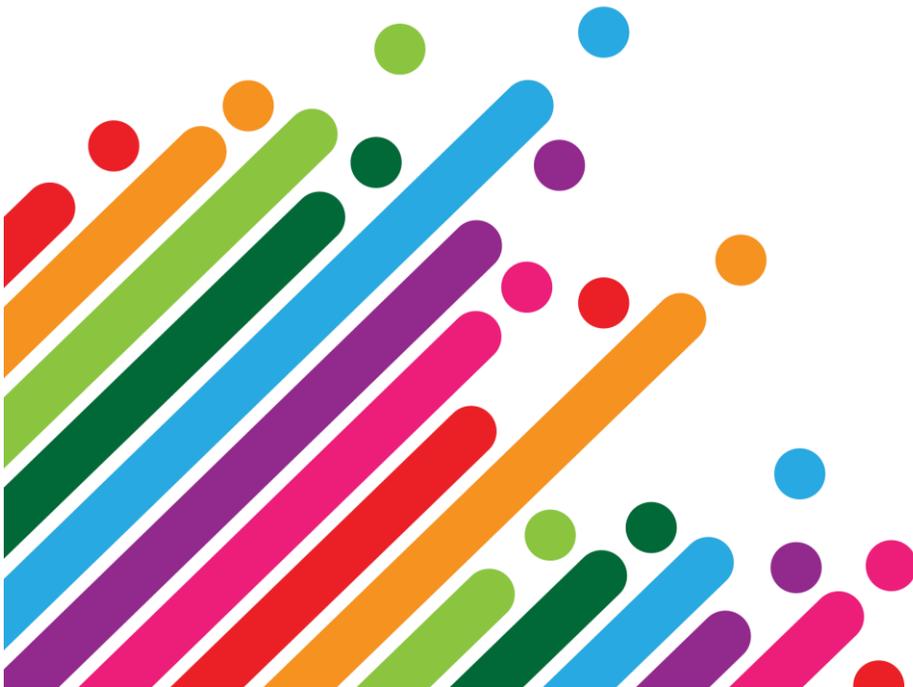




# PROTECTING OUR COMMUNITY'S HEALTH

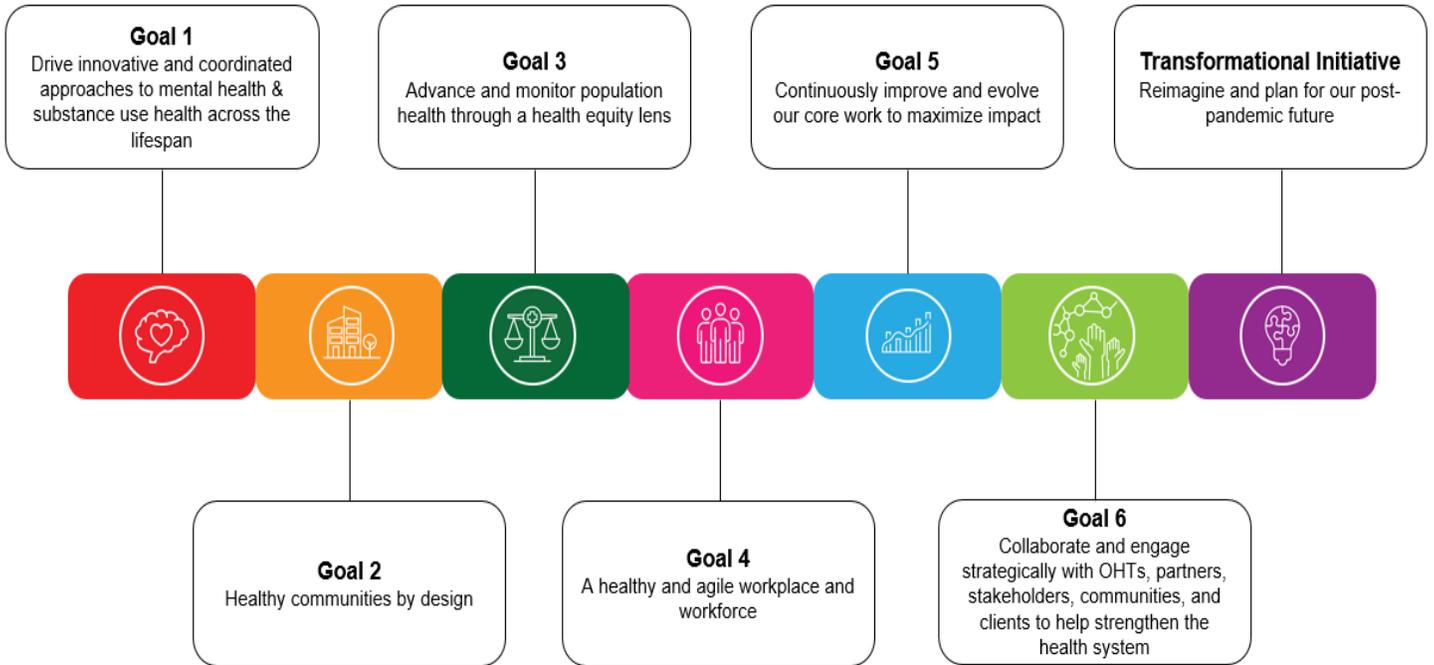
Ottawa Public Health's 2019-2022  
Strategy: 2022 Quarter 4 Progress Update



## Table of Contents

2022 Strategic Goals and Transformational Initiative.....	3
Goal 1 – Drive innovative approaches to mental health and substance use health across the lifespan – Status, Highlights and Achievements.....	4
Goal 2 - Healthy communities by design - Status, Highlights and Achievements .....	8
Goal 3 – Advance and monitor population health through a health equity lens - Status, Highlights and Achievements .....	11
Goal 4 – A healthy and agile workplace and workforce - Status, Highlights and Achievements .....	15
Goal 5 - Continuously improve and evolve our core work to maximize impact - Status, Highlights and Achievements .....	18
Goal 6 - Collaborate and engage strategically with OHTs, partners, stakeholders, communities, and clients to help strengthen the health system – Status, Highlights and Achievements .....	20
Transformational Initiative - Reimagine and plan for our post-pandemic future – Highlights and Achievements .....	22

# 2022 Strategic Goals and Transformational Initiative





## Goal 1 – Drive innovative approaches to mental health and substance use health across the lifespan – Status, Highlights and Achievements

### Quarterly Status

Q1 2022

Q2 2022

Q3 2022

Q4 2022

### Highlights

#### Mental health literacy and stigma reduction

- Advancing progress in reducing stigma and increasing mental health literacy by offering trainings that expand knowledge on subjects such as person-first language, resilience, positive coping strategies, and community resources, reaching 418 intermediaries and community leaders. Intermediaries reached in these trainings include leaders in the South Asian community, ACB communities, and OPH employees to build capacity internally.

#### Foster resilient communities

- Reduced harms caused by psychologically unsafe work environments through trainings, consultations and expertise on the National Standard for Psychological Health and Safety in the Workplace, reaching 237 people.
- Continued to work with school boards on the development and implementation of Youth Connections Ottawa programs to help reduce the harms experienced by youth that have been worsened because of pandemic restrictions.
- Provided training to 30 faith leaders on crisis response, suicide prevention and intervention, and connection to community services to support community members.
- Continued to ensure equitable and safe access to mental health, addictions and substance use health (MHASUH) information, resources, and services, including social services, through the Neighbourhood Health and Wellness Hubs in identified priority neighbourhoods, in collaboration with partners.
- Provided training to employees working in the Hubs on how to connect people to services and resources to increase access to MHASUH supports when OPH is not present. 103 intermediaries and service providers reached.



- There were 367 meaningful interactions with people at the Neighbourhood Health and Wellness Hubs, including consulting with people in their own language to connect them to services and resources.

### **Healthy Growth and Development**

- Supported the well-being of new families through interventions from the Healthy Growth and Development (HGD) program. HGD completed 1,851 postpartum screens in Q4, representing roughly 90.6% of Ottawa births. Of those screened, approximately 21% of parents identified with a current or history of mental health illness. HGD continues to screen clients with an In-Depth-Assessment for Post-Partum Mood Disorder (PPMD) using the Edinburgh Postnatal Depression Scale (EPDS). In Q4, approximately 85% of clients were screened using the EPDS and about 20% of clients screened positive. Clients with positive EPDS continue to be followed and supported by the Healthy Babies Healthy Children (HBHC) program, upon their consent. HGD staff supported families to achieve optimal parental mental health by providing screening, assessment, and client-centered interventions during home visits.
- HGD staff are completing the Infant and Early Mental Health online training series offered by the Infant and Early Mental Health Promotion (IEMHP) at the Hospital for Sick Children. This web-based series provides insight into the foundational science of infant and early mental health, the importance of promotion and prevention policies and strategies, evidence-based interventions, and treatment approaches that staff can apply in their daily practice with families to promote infant and early mental health.
- HGD staff also had access to three training sessions on trauma and violence-informed care from PHN-Prep (McMaster University).

### **Suicide prevention and life promotion**

- Reduced the risk of suicide through life promotion and suicide prevention initiatives including offering safeTALK trainings to 54 people and registering 11 faith leaders to the online suicide prevention training, START.
- Resumed safeTALK training through the learning centre for all City of Ottawa employees.
- Continued to support youth at risk of suicide through evidence by peer-support training. Continued to further the reach of this program through the development of a decision tree with the Royal Ottawa's outpatient youth group and continued discussions with CHEO for the staff to know when and how to access the peer support training for youth.

### **Stigma reduction and substance use health promotion, including reducing harms**

- Decreased the harmful impacts of stigma and promoted substance use health through a new co-location agreement with the Community Addictions Peer Support Association (CAPSA). The first quarter of this agreement has seen many advancements, including participating in the "From stigma to dignity" international conference, advancing the capacity building trainings to reduce stigma and promote substance use health through the piloting of CAPSA e-modules and providing trainings, including to OPH employees, reaching over 60 people. An important focus that resulted from the trainings provided to OPH employees is to understand and incorporate the impact of stigma in African, Caribbean, Black communities and Southeast Asian communities.

- Decreased the impacts of stigma and associated harms for people who use substances along the spectrum of use, with a focus on youth and young adults, reaching over 200 people. Presentations and events were held with different groups including the Boys and Girls Club, the University of Ottawa, Carleton University and a national event for World Mental Health Day at the Royal. In addition to providing in person knowledge exchange, social media was leveraged through the development and promotion of a Party Safer football video created with players from the University of Ottawa and Carleton University, reaching almost 40,000 people.
- Provided evidence-based feedback and recommendations to Health Canada to amend cannabis legislation to prevent unintentional cannabis overdoses in children, prevent the appeal of cannabis products to youth and to protect the health and safety of our diverse community through the Federal Cannabis Consultation submission. OPH's recommendations were endorsed by 14 Public Health Units across Ontario.

### **Advancing overdose prevention and harm reduction**

- Advanced efforts to decrease and respond to overdoses in the construction industry, which has been disproportionately impacted by the overdose crisis. This was done by providing knowledge exchange resources and information at the annual construction symposium, in collaboration with local pharmacy partners, reaching over 600 people. Knowledge was shared on stigma reduction, substance use health, naloxone administration and carrying a kit, as well as the new legislation requiring employers to provide naloxone in high-risk workplaces.
- Contributed to overdose death prevention through close collaboration with pharmacy partners that provide naloxone training and dispensing, reaching 2,056 people with 91% being dispensed a naloxone kit.
- Advanced the evaluation of the safer supply pilot program, in collaboration with Safer Supply Ottawa. This program looks at ways to address the toxic unregulated drug supply. The evaluation report, which includes data from April 1 to July 31, 2022, had many key findings including:
  - 70% (280/400) of participant from the Safer Opioid Supply program reported a decrease or complete discontinuation of their fentanyl use.
  - 81% of participants previously reporting a history of overdose stated they had not experienced an overdose event this period.
  - Additionally, participants reported an improvement in their mental health, housing status and a decrease in criminal behaviour.
- Developed resources that were shared with Ottawa Police Services, the Coroner's office, the Overdose Prevention and Response Taskforce and other partners on Ottawa's unregulated drug supply and the increase of benzodiazepines. This initiative also included a social media campaign, the development of a new webpage and several resources that focused on the effects of benzodiazepines, the fact that naloxone does not work against them, and the risk of them being used to facilitate sexual violence.
- The Harm Reduction and Sexual Health unit has fully transitioned to a collaborative health record system to enhance client care, and employees' experiences, make processes more efficient and effective, and facilitate generation of data to inform our work.

- Continued to collaborate with Ottawa Paramedic and Ottawa Police Services through the Overdose Prevention and Response Taskforce to increase access to overdose prevention and community naloxone distribution through first responders.

### **Collaborating across the health and social system to improve access to care**

- Continued to address the mental health, substance use health and community issues identified in Lowertown and the Byward Market by developing a tool for local business to identify and connect community members who need mental health, addictions and social services supports. OPH worked with the City of Ottawa's Community and Social Services Department to ensure that business owners received this tool. The reception has been positive and has led to additional training opportunities within the business community.
- Advanced the development of a new or an enhanced Mental Health, Addictions and Substance Use Health crisis response unit by working with the Guiding Council, a group that is responsible for the development of the response unit and is accountable to the GM Community and Social Services who reports to City Council under the Community and Safety Wellbeing Plan: Mental Health and Wellbeing pillar. In Q4, OPH supported the community consultation process by facilitating and coordinating consultations with Somali community members and other racialized communities. The results of these consultations will be incorporated into a business case for solutions to improve the mental health crisis responses in Ottawa.
- Contributed to improving the mental health and well-being of children and youth by collaborating on the development of the Ontario Provincial Report titled Let's Put our Heads Together.
- Advanced the work of the Ottawa West Four Rivers Ontario Health Team by providing relevant evidence and data to the Mental Health, Addictions and Substance Use Health Action Team to advance their proposed urgent care model.
- Continued the development of the mental health, addictions and substance use health community dashboard by finalizing data sharing with supervised consumption site partners and advancing data sharing agreements with system navigation partners. Partners included Sandy Hill Community Health Centre, Somerset West Community Health Centre, Ottawa Inner City Health, AccessMHA, 1Call1Click and ConnexOntario.
- Reduced harms related to nicotine and gambling by providing leadership at the related collaborative community networks as they develop their action plans into 2023.

### **Challenges**

- There continues to be an unprecedented number of overdoses and overdose deaths in the community. OPH and partners, such as first responders and overdose prevention groups, continue to work to prevent and respond to these increases, including through service development and with joint public service announcements to inform and advise residents.
- Experiencing internal staffing pressures which contributes to challenges in meeting the growing community needs.



## Goal 2 – Healthy communities by design - Status, Highlights and Achievements

Quarterly Status			
Q1 2022	Q2 2022	Q3 2022	Q4 2022
<b>Highlights</b>			
<b>Response to COVID-19 and Other Respiratory Illnesses</b>			
<p>Ottawa Public Health (OPH) continued to adapt to the evolving COVID-19 situation and ensured that timely and accurate information was available for residents in Ottawa. Building on the need to remain adaptable and nimble, our risk mitigation communications pivoted to include other respiratory viruses in the fall – namely Influenza and Respiratory Syncytial Virus (RSV). Through our influenza campaign, weekly snapshot, earned media, multilingual resources, and other communications tactics, OPH encouraged residents to use layers of protection to minimize the transmission of respiratory illnesses. This included the promotion of the influenza vaccine, COVID-19 boosters, masking, staying home when sick, safer gatherings, and proper hand hygiene. As levels of COVID-19 and other viruses began to rise quickly, OPH worked with schools, childcare, and health care system partners to inform residents, including parents and caregivers, about where and when to seek care for respiratory illnesses.</p> <p>OPH and the City of Ottawa continued vaccination efforts, operating community clinics, neighbourhood hubs, pop-ups and mobile clinics in priority neighbourhoods and high-risk settings across Ottawa. Q4 continued to focus on the administration of COVID-19 boosters, including the administration of the new bivalent vaccine to eligible populations. In addition to COVID-19 vaccinations, Q4 saw the continued administration of school required vaccines under Ontario’s <i>Immunization of School Pupils Act</i> and the recommended school-based vaccines (Hepatitis-B and HPV) as well as the administration of influenza vaccines in OPH clinics.</p> <p>In healthcare and congregate settings, where the risk of exposure and severe outcomes of COVID-19 are high, OPH continued to help prevent, identify, and manage outbreaks. The resurgence of other respiratory illnesses, including Influenza and RSV, made for a more complex start to the 2022-2023 respiratory outbreak season, with multi-agent outbreaks occurring at many facilities. In collaboration with the Champlain Regional IPAC Hub, prevention activities in high-risk settings included pre-emptive site visits and infection prevention and control (IPAC) education through community of practice education sessions. In Q4, OPH responded to 376 outbreaks, including 172 COVID-19, 37 enteric, 19 Influenza, and 147 unspecified respiratory outbreaks. OPH continued to work with key stakeholders, including acute care partners, Champlain Regional IPAC Hub, and Home and Community Care Support Services Champlain (HCCSS), and the City of Ottawa’s Community Paramedics and Community and Social Services Department to monitor, assess and strengthen the local response to outbreaks in high-risk settings to support the health and safety of people at greatest risk of severe illness. Further work with the Congregate Living Task Force provided key stakeholders with opportunities to seek feasible and realistic applications of IPAC Provincial guidance and Ministry directives.</p> <p>To support the return to school after two years of pandemic disruptions, the School Health Team focused on improving, promoting, and protecting students’ health and well-being by providing schools with wrap around</p>			

support with a school-nursing assignment based on a neighborhood strategy. This gives schools access to an assigned nurse and a team of nurses who work in their school's neighborhood. The school focused nurses also support school health programming as per the Ontario Public Health's Standards, including 'immunization catch-up clinics and dental screening. Public Health Nurses also provide programming, services, and resources on health topics, including but not limited to, mental health, substance use health, sexual health, healthy eating, and active living.

### **Supporting Communities**

Continued to work closely with community partners and stakeholders to increase and improve access to public health programs and services. Some key examples of the work completed in Q4 include:

- Operating Neighbourhood Health and Wellness Hubs across the city, with most of these located in fifth quintile neighbourhoods. Quintile 5 indicates a neighbourhood with the lowest socioeconomic advantage when the population is divided into five groups based on levels of advantage according to the Ottawa Neighbourhood Study's index of socioeconomic status). Services were expanded to include routine childhood vaccines at all 15 hubs and hubs are staffed with the diversity of employees that is reflective of the specific neighbourhoods.
- Hosting mobile clinics in aging-in-place buildings, places of worship, shelters, community organizations, and at special events.
- Distributing rapid antigen test kits and promoting access to treatment in high priority neighbourhoods during outreach and community events.
- Targeting outreach and engagement related to COVID-19, influenza, and routine vaccines alongside community partners, including attending community events.
- Providing multilingual information and resources via popular platforms such as Facebook, WhatsApp and Telegram as well as printed resources and flyers during outreach.

### **Built Environment and Climate Change**

Ottawa Public Health engaged in several knowledge translation activities to promote research, awareness and education of public health interventions to advance healthy built environments and climate change adaptation and mitigation. This included providing a keynote address at the Quebec "Vivre en Ville" conference on Healthy and Inclusive Communities. OPH staff also participated on a discussion panel at the Ottawa Architecture week on "Re-Claiming Normal: Connecting post-pandemic". In addition, OPH engaged with Queen's School of Urban and Regional Planning; staff delivered a guest lecture on healthy community planning at Queen's School of Urban and Regional Planning, and students carried out a project research course to translate City of Ottawa Official Plan policies into potential healthy urban design elements, including reviewing Ottawa's Urban Design guidelines. Furthermore, OPH participated on an advisory panel for a research project lead by the Public Health Agency of Canada on "Exploring where Canadians work and live and their association with active transportation." Ottawa Public Health also continued working with Planning, Real Estate and Economic Development to support translation of health-promoting Official Plan policies into the future new zoning by-law.

## Challenges

The challenge of catching up with routine vaccination, particularly vaccines provided in childhood and youth outside of schools, requires a long-term strategy with partners such as primary care, Ontario Health, Ontario Health Teams, and the Ministry of Health to ensure a sustained level of protection within the community from highly preventable deaths and severe disease outcomes that carry lifelong impacts.



## Goal 3 – Advance and monitor population health through a health equity lens - Status, Highlights and Achievements

Quarterly Status			
Q1 2022	Q2 2022	Q3 2022	Q4 2022
<b>Highlights</b>			
<p><b>Reconcili-ACTION</b></p> <p>Guided by principles of reconciliation as outlined in the <a href="#">OPH Reconcili-ACTION Plan</a>, the following are a few activities that took place in Q4:</p> <p><b>RESPECT – Awareness and understanding</b></p> <ul style="list-style-type: none"> <li>Indigenous Cultural Safety (ICS) Training - OPH continues to encourage and promote ICS learning opportunities for all employees. Q4 initiatives included: 46 employees joined two (2) facilitated sessions focused on anti-Indigenous racism; six (6) employees attended a symposium on <a href="#">Finding Common Ground on Inuit Wellness</a>; 18 employees attended Wabano’s knowledge forum on <a href="#">Reclaiming Our Spaces</a>; and a total of 51 employees registered for two (2) online training courses (i.e. San’yas’ <a href="#">Ontario Core Health</a>; Indigenous Primary Health Care Council’s <a href="#">Foundations of ICS</a>). In addition, comprehensive lists of diverse ICS learning opportunities were developed and shared with Board of Health members, and all OPH employees to align with Individual Development Plans in 2023.</li> <li>Communications – Content for an internal <a href="#">Reconciliation at OPH</a> webpage was developed to provide OPH employees with easy access to key reconciliation and Indigenous health-related resources and reports; a list of important dates/Indigenous commemorative events was developed and shared with the OPH Communications team to help raise internal and public awareness; and OPH also continued to facilitate translation of identified resources into Inuktitut and Cree.</li> </ul> <p><b>RELATIONSHIP – Listen, learn, act</b></p> <ul style="list-style-type: none"> <li>Indigenous youth engagement – OPH collaborated with the City’s Indigenous Relations Branch and a local First Nation Elder to coordinate an inaugural talking circle intended to encourage First Nations, Inuit and Métis youth to share their ideas and perspectives about reconciliation. With the initial conversation captured by a graphic facilitator, there is a plan to build on the success of this initiative on a bi-annual basis in 2023.</li> <li>Knowledge exchange – As requested, OPH shared lessons learned related to engagement with urban Indigenous communities through various external public health agencies and networks (e.g. Public Health Indigenous Engagement Network; SDOH PHN Community of Practice; Indigenous Cancer Care Network).</li> </ul> <p><b>RECIPROCITY – Collaboration</b></p> <ul style="list-style-type: none"> <li>Funding agreement – A multi-year funding agreement (2022-2025) was created with the Ottawa Aboriginal Coalition (OAC) to facilitate health system transformation through coordinated, integrated,</li> </ul>			

collaborative, holistic and locally relevant action to address urban Indigenous health and wellness priorities in Ottawa. Examples of new and ongoing initiatives include highlighting and addressing Indigenous-specific racism in the health care system; and supporting the Indigenous Women's Safety Table, Indigenous Mental Wellbeing Strategy, OAC COVID Research, and Indigenous-specific Housing and Homelessness Strategy.

- Immunization services – OPH continues to partner with Wabano Centre for Aboriginal Health and the Akausivik Inuit Family Health Team (AIFHT) to support accessible, community-based immunization services for First Nations, Inuit and Métis community members at these locations.
- Collaborative case management (CCM) – Meetings took place with OPH internal partners and leadership at AIFHT to discuss opportunities and logistics required to improve CCM services related to infectious diseases and sexual health. OPH and AIFHT have agreed to co-create a process that will facilitate culturally safe follow up for Inuit in Ottawa.

#### REFLECTION – *Sharing lessons learned*

- OPH Reconcili-ACTION Network – A meeting took place in October to initiate a re-imagine/re-ignite conversation. The Network was originally created as a community of practice to facilitate connections and knowledge exchange with Indigenous service organizations and within OPH in order to provide culturally safe services for First Nations, Inuit and Métis community members. Members were encouraged to offer suggestions to enhance employee engagement and meaningful opportunities for Reconcili-ACTION (e.g. moving beyond ICST to experiential learning), including sharing input related to the implementation of the Reconcili-ACTION evaluation framework and performance measures for 2023. A follow up meeting to continue the discussion is being planned in Q1 (2023).
- Knowledge exchange – The Reconcili-ACTION team continues to receive and respond to multiple requests from OPH and City employees for an Indigenous lens/perspective on various topics. Examples in Q4 include: meaningful land acknowledgements; policy development; client satisfaction surveys; OPH Strategy; terminology. The Reconciliation at OPH internal webpage will be launched in January 2023 - it is expected to facilitate timely access to related information.

#### **Anti-Racism / Anti-Oppression**

- Policy: The Clients Rights and Responsibilities policy and Posters
  - 2 sessions were facilitated to present an overview of the Clients' Rights and Responsibilities policy and posters and to share an implementation guide and resources.
  - The implementation guide was developed to support teams to implement the policy and to develop escalation procedures for their service areas. It provides the languages and key messages to appropriately respond to inappropriate behaviours and comments of discriminatory nature.
  - Posters have been translated in Arabic, Somali and Mandarin and more community languages such as Spanish, Pashto and Urdu are being requested.
  - Some teams have reached out to the Anti-racism team seeking more support with the development of their escalation procedures.

- Strategic Planning Meetings:
  - The Health Equity Diversity and Inclusion (HEDI) service area held a strategic planning session facilitated by Dr Ariff Kachra of Strat-ology Consulting. The goals were to:
    - Identify a set of DEI values that are key to transforming OPH's DEI context,
    - Outline a detailed, practical, and implementable cross-enterprise journey for OPH that will allow it to aspire to higher levels of diversity, equity, and inclusion,
    - Identify key resources that need to be strengthened, such as leadership, staff, structure, systems, and organizational culture, to support OPH in its DEI journey, and
    - Provide high-level insights into designing an implementation plan and measuring DEI progress.
    - A draft strategic plan has been developed and presented to the HEDI leadership team as well as SLT
- Partnership opportunities:
  - We have been invited by Montfort Hospital's *Comité contre le racisme et pour l'équité, la diversité et l'inclusion* (CRÉDI) to share our journey to embed anti-racism and health equity in our work and to share best practices. Montfort hospital is interested in embarking on the same journey as OPH and their anti-racism and EDI committee sought to gain some insights as to the best ways of approaching this work.

### **Sociodemographic Data (SDD)**

- OPH, in partnership with Peel Public Health and the Upstream Lab, were successful in their application for funding from Public Health Ontario's Locally Driven Collaborative Project (LDCP) program. The research project titled, *Lessons learned from the collection of sociodemographic data (SDD) during the COVID-19 pandemic*, aims to document the experiences of public health units in the collection of SDD during the pandemic, including racial identity data, and to identify a set of recommendations for scaling SDD collection beyond COVID-19.
- Work continued to onboard non-COVID-19 OPH programs/teams to initiate SDD collection.
- An OPH Policy for the collection, use and disclosure of SDD, developed over the course of 2022, was endorsed by senior leadership. Rollout of the policy will take place in 2023, including supports for staff.

### **Community Engagement Team (CET)**

- OPH worked with the Community and Social Services Department (CSSD) to provide helmets ahead of the winter sledding season. Utilizing head injury funding and community partnerships, the group was able to provide these helmets to children with the greatest need.
- Through its partnership with the Advancing Vaccine Acceptance (AVA) project, OPH engaged more than 70 participants from the Pentecotiste El Shaddai Church.

## Challenges

### **Reconcili-ACTION**

Human resource and capacity issues continue to present challenges. This was heightened in late Q3 when one of our team colleagues accepted a job opportunity with the City's Indigenous Relations Branch. In addition, multiple competing priorities continue to impede OPH from advancing Reconcili-ACTION as expected.

### **Anti-Racism / Anti-Oppression**

Workload volume and capacity remain an ongoing challenge for the Anti-Racism team. This is increasing the risk of burn out and presents a challenge to advancing this work.

### **Sociodemographic Data (SDD)**

Establishing the conditions for successful and safe SDD collection and use continues to require OPH to build awareness internally and externally and to increase staff comfort to ask for this information from clients. OPH continues to better understand challenges and barriers to collecting SDD and continues to develop additional supports to overcome these challenges and barriers.

### **Community Engagement Team (CET)**

Transitioning the Community Engagement's focus from COVID-19 to other OPH service areas is a moderate challenge. The reimagine and transitional phases the organization is going through poses some limits on developing this work. Multilingual communication at OPH continues to largely be supported by CET staff, this significantly contributes to the workload of some CET staff, while also creating delays in the output of said products.



## Goal 4 – A healthy and agile workplace and workforce - Status, Highlights and Achievements

Quarterly Status			
Q1 2022	Q2 2022	Q3 2022	Q4 2022
<b>Highlights</b>			
<b>Wellness Initiatives</b>			
<ul style="list-style-type: none"> <li>• To help inform OPH’s 2023-2027 Wellness@Work (W@W) Action Plan, the W@W committee launched a Wellness Pulse Check survey in Q4, with an 80% response rate from temporary and permanent employees.</li> <li>• The OPH-wide results were shared through various channels, as was a breakdown of data by Service Area.</li> <li>• Key OPH-wide findings included:               <ul style="list-style-type: none"> <li>○ Almost 70% of respondents indicated that their work environment is positive or very positive with over half of respondents describing their work environment as: respectful, collaborative, supportive and positive.</li> <li>○ Overall, 64% of employees feel supported to a great extent or very great extent by the person they report to. Employees who meet more frequently with the person they report to rate their work environment as more positive.</li> <li>○ Almost 50% of respondents noted that their work demands were about right</li> <li>○ More than 70% of respondents noted that they take their allotted breaks often or most of the time.</li> <li>○ About 20% of respondents are extremely or very concerned about their mental health and 20% are not able to balance life-work (not at all or to a slight extent).</li> </ul> </li> <li>• The W@W committee will use this data, as well as the data collected from the Insight sessions with employees to inform the next W@W Action Plan.</li> <li>• The W@W committee held another self-care pursuit in October. There were 25 teams and a total of 248 employees who participated.</li> </ul>			
<b>Equity, Diversity, and Inclusion</b>			
<ul style="list-style-type: none"> <li>• Anti-racism training               <ul style="list-style-type: none"> <li>○ 2 anti-racism education sessions were facilitated.</li> <li>○ <u>For all employees:</u> 1 session (2-hour long) that covered an overview of the <i>Key Concepts in Anti-racism Education</i>. Learning outcomes: To develop a more critical understanding of:</li> </ul> </li> </ul>			

- The different types of racism
- The process of socialization and its impact on behaviors and actions
- Prejudice and stereotypes and how they manifest
- Microaggressions: what they are and how to prevent them
- Unconscious / Implicit bias and the impact that has on our human interactions
- White privilege and institutional power
- Our role and ways to apply anti-racism to our work
- For supervisors and managers: 1 session (3-hour long) that covered the *Key Concepts in Anti-racism Education* and included 1 hour that covered *'The role of privilege in relation to public health ethics and practice'* and a scenario to help Supervisors and Managers identify incidents of racism and discrimination. Learning outcomes for this training include:
  - Understanding the role of privilege in relation to public health ethics and practice
  - Understanding allyship and its role in public health
  - Developing the competencies to identify microaggressions and forms of discrimination and ways to address them
- Indigenous, Black and racialized staff check-ins:
  - 2 sessions were facilitated with 33 employees in attendance.
  - Evaluation is demonstrating the need for these sessions and how it is connected to wellness at work.
- The Anti-racism/Anti-Oppression (ARAO) Community of Practice (CoP)
  - A call of interest for the ARAO Community of Practice was launched in December.
  - 35 employees applied to join the CoP. This shows a great deal of interest and momentum from diverse teams.
  - A co-chair has been selected to act alongside a member of the anti-racism team.
  - An SLT member has also been onboarded to support the CoP.
  - The first CoP meeting will occur the week of January 23, 2023.

### **Leave and Overtime Hours**

- Overtime hours have reduced since January 2022 and are now tracking at approximately the same rate as pre-COVID-19.
- Employee vacation leave hours have even exceeded prior years.

## Challenges

### **Anti-Racism / Anti-Oppression**

Workload volume and capacity remains an ongoing challenge for the Anti-Racism team. This is increasing the risk of burn out and presents a challenge to advancing this work.

### **Leave and Overtime Hours**

Total sick leave hours continue to increase and year-to-date figures, up to the end of December 2022, are higher than in previous years (2018-2021).



**Goal 5 - Continuously improve and evolve our core work to maximize impact - Status, Highlights and Achievements**

<b>Quarterly Status</b>			
<b>Q1 2022</b>	<b>Q2 2022</b>	<b>Q3 2022</b>	<b>Q4 2022</b>

**Highlights**

**Electronic Public Health Records (EPHR)**

Work continued to build a departmental EPHR with the following key activities:

- The successful launch of a clinical practice solution for Sexual Health and Harm Reduction Services (SHHRS). To support the launch, service reductions were put in place and close to 80 staff received detailed training on the system and re-engineered processes. A forum for support and issues tracking and resolution and quality assurance (QA) processes were established. The remainder of the quarter focused on stabilization.
- The soft launch of a stakeholder tracking and ticketing system took place for a limited number of users in the Community Operations and the Legislative Agenda and Strategic Engagement programs. Work continued to help inform and refine the system for a broader launch in 2023.
- Procurement efforts were finalized with a signed contract to implement a dental clinical practice solution at OPH’s four dental clinics.
- In coordination with the Ministry of Health (MOH), reporting and investigation of all adverse events following immunization (AEFI) of all diseases of public health significance (DOPHS) were transitioned to the provincial case and contact management system (CCM).
- OPH maintained engagement in MOH-led forums for the expansion of CCM for all DOPHS. This included input into a provincial systems discovery exercise that will help inform all business needs for the system.

*Socio-Demographic Data*

- Ongoing discussions with OPH teams to prepare for the development and roll out of the Electronic Public Health Records (EPHR) to ensure the inclusion of standard minimum SDD as part of public health practice, specifically during Q4 in Sexual Health and Harm Reduction Services.

**Best Practice Spotlight Organization (BPSO)**

- OPH continues to pursue its quality improvement endeavor as part of the Registered Nurses’ Association of Ontario’s (RNAO) Best Practice Spotlight Organizations (BPSO) initiative. Through its healthy growth and development (HGD) program, OPH continues its efforts to boost collaboration and joint projects with Ottawa East BPSO-Ottawa Health Team partners. As part of these efforts, HGD conducted a review of their practice to inform and enrich current policies and procedures. OPH continued to implement a

universal assessment of all Healthy Babies Healthy Children clients using the Edinburgh Postnatal Depression Scale (EPDS) for early identification of clients with possible postpartum depression.

- OPH is finalizing the last details for its collaborative efforts with the Montfort hospital for managing OPH's clients with positive EPDS screening who do not currently have a family physician. To support these efforts, the Ottawa East BPSO-OHT partners successfully submitted a joint application for the RNAO's advanced clinical practice fellowship program, which will provide initial funding to cover physician, administrative and other related costs. The Postpartum Mental Health Wellness clinic is expected to launch in Q1 2023.

## Challenges

### **Electronic Public Health Records (EPHR)**

- The need for a high level of program engagement, coupled with competing program priorities, has presented challenges for overall EPHR project work.
- There is an increased need for support from City of Ottawa Corporate shared services, however they face their own internal pressures and priorities.



## Goal 6 - Collaborate and engage strategically with OHTs, partners, stakeholders, communities, and clients to help strengthen the health system – Status, Highlights and Achievements

Status			
Q1 2022	Q2 2022	Q3 2022	Q4 2022
<b>Highlights</b> <ul style="list-style-type: none"> <li>In collaboration with City and Community partners, the Neighbourhood Health and Wellness Hubs have expanded to 15 locations across the city to continue delivering integrated services closer to where people live.</li> <li>The most popular topic of inquiries received via the Ottawa Public Health Information Centre was immunization-related and collaboration across internal OPH teams and with partners, such as Kids Come First Health Team and East Ottawa Kids COVID Care Clinic, were utilized to link clients with local services to reduce barriers and promote vaccine uptake. The Vaccine Booking Line supported call-backs for clients eligible for their 2nd dose of MPox vaccine, to encourage vaccine uptake and ensure vaccine availability all while minimizing barriers to care. In Q4 2022, 4,681 clients were reached, and 1,684 appointments were booked. The team worked closely with the internal immunization team to identify vaccine appointment needs and provide client feedback, for example it was identified that some clinic locations were a barrier and as a result more clinics were released in strategic locations, which allowed for greater vaccine uptake.</li> <li>Pursuant to OPH's and the Board of Health's commitment to ensure that the health unit's leadership is reflective of the community it serves, the Health Equity, Diversity and Inclusion team, the Community Operations team and the Legislative Affairs &amp; Strategic Engagement team worked together to reach out to key partners to raise awareness about the opportunity to serve as public members on the Ottawa Board of Health. Upon the City launching the recruitment campaign in early December, an email was sent to more than 80 partner organizations to provide them with information about the Board's structure and role, the recruitment opportunity, eligibility, and the application process and to encourage them to apply and/or to share information about this opportunity with their staff, partners and other networks. This initial email was followed up through personal outreach from key staff members to their respective contacts within these partner organizations.</li> <li>OPH participated in a media event in November, led by Public Health Agency of Canada and Health Canada, with Health Minister Jean-Yves Duclos and Ottawa West-Nepean Member of Parliament Anita Vandenberg, at an OPH clinic to promote childhood vaccination. The aim of this partnership with Health Canada and the Public Health Agency of Canada was to promote childhood vaccinations to prevent the spread of respiratory viruses in our community and, particularly, among young children.</li> </ul>			

## **Ontario Health Teams:**

- In October, the Council of Medical Officers of Health's re-initiated its work group on Ontario Health Teams (OHTs), which is a new way of organizing and delivering health care by bringing together providers from all sectors of the health system into one collaborative team that works with patients in their local communities. The work group is co-chaired by Dr. Etches and Dr. Elizabeth Richardson, MOH in Hamilton, and includes representatives from 17 public health units. The group aims to identify promising practices for successful collaboration among public health, OHTs and Ontario Health, the provincial agency charged with health planning; specifically, the work group is looking for opportunities to improve the health outcomes of the population by improving equity and access.
- Ottawa Health Team (OHT-ESO): A Performance Measurement work group was launched in Q4 and is chaired by OPH; in addition to developing a performance indicator framework, there is interest in exploring a common set of sociodemographic data questions that could be used by OHT-ESO partners; OPH's work with other public health units in this regard is helping to inform these discussions.
- Ottawa East OHT: In December, members of the Ottawa East OHT and the Prescott Russell in development Team announced their alliance to form the Archipel OHT. Archipel is now comprised of more than 80 partners. Archipel's mandate is to better respond to citizens' needs by optimizing the planning, coordination, and delivery of services in both official languages.
- Ottawa West Four Rivers OHT: Work continues to advance a Mental Health, Addictions and Substance Use Health action plan, focused on navigation and urgent care. OPH supported the development of the proposed urgent care model by providing relevant evidence and data. Partner fora were hosted in November to discuss gaps and successes in diabetes care and to generate ideas for change going forward.
- Kids Come First OHT: A funding proposal for increasing access to routine childhood vaccinations was submitted to the province.

## **Challenges**

### **Ontario Health Teams:**

- Capacity for OPH to be present at all OHT tables is an ongoing operational challenge.



## Transformational Initiative - Reimagine and plan for our post-pandemic future – Highlights and Achievements

### Highlights

A report to close out the current Strategic Plan, Protecting Our Community's Health (2019-2022), and to update the Board on key accomplishments and developments, was presented in November 2022. As OPH plans for the future, an internal Strategy Planning team was created to start the development of a new Strategy for the next term of Board of Health (2023-2026). The resulting strategic plan will create a four-year vision to guide decision-making and to orient the delivery of public health programs and services to promote and protect the health and wellbeing of all people in Ottawa.

The current draft has been developed with the following inputs:

- Engagement with partners, Board of Health and OPH's workforce in 2021 and 2022, as part of OPH Recovery Planning.
- An environmental scan.
- Facilitated strategic discussions in Q4 2022 with the Senior Leadership Team, Public Health Medicine Unit, and a small group of OPH staff representing equity-deserving populations.

OPH considered the outcomes of this engagement and environmental scan to develop a draft Strategy 2023-2027. Through further engagement, OPH's internal Strategy Planning team will continue to validate, refine, and scope specific activities to achieve the goals, identify measures, and ensure resources are aligned to make our best recommendations to the Board of Health.

Key consultation activities planned for 2023 include the following:

- Engagement with partners and OPH's workforce is planned for February and March 2023 to seek feedback on the draft.
- Facilitating a Board of Health Strategy retreat to discuss and refine the draft Strategy. Further consultations with Board members may be held, as appropriate, prior to finalization of the Strategy.

It is anticipated that the new Strategy will be presented to the Board of Health for approval at its June 2023 meeting.