

# **Hastings Prince Edward Public Health Board of Health Meeting**

Information Items

**Wednesday, February 1, 2023**

## **Listing of Information Items**

### **Board of Health Meeting – February 1, 2023**

1. Windsor-Essex County Health Unit - Letter to S. Jones, Minister of Health re inclusion of language interpretation and translation services in the Healthy Smiles Ontario fee guide dated October 28, 2022
2. Peterborough Public Health - Letter to M. Fullerton, Minister of MCCSS re HBHC and infant toddler development program (ITDP) funding dated November 24, 2022
3. Sudbury & Districts Public Health - Letter to Directors of Education and local school boards re physical literacy for healthy active children dated December 30, 2022
4. Association of Local Public Health Agencies (aLPHa) - Letter to Partners in Public Health re *Public Health Matters* - Public Health Fall Vaccine Success dated January 12, 2023

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*The above information items can be found on the Hastings Prince Edward Public Health's website through the link in the Agenda Package or by going to our website at [hpePublicHealth.ca](http://hpePublicHealth.ca).*

October 28, 2022

The Honorable Sylvia Jones  
Minister of Health and Deputy Premier  
777 Bay Street, 5<sup>th</sup> Floor  
Toronto, ON M7A 1E9

Dear Minister Jones:

On October 20, 2022, the Windsor-Essex County Board of Health passed the following Resolution regarding the **Inclusion of Language Interpretation and Translation Services to the Healthy Smiles Ontario (HSO) Fee Guide**. WECHU's resolution as outlined below recognizes that oral health is important to overall health and well-being. Access to prevention and treatment-based dental care is recognized as a basic human right for children and youth. Given the emergence of remote/virtual translation supports in recent years, this mechanism serves as an effective way to reduce barriers for children and youth access to oral health treatment. The Windsor-Essex County Board of Health therefore recommends the province of Ontario include billing options for translation and interpretation services in the Health Smiles Ontario Fee Guide.

**Windsor-Essex County Health Unit Board of Health**  
**RECOMMENDATION/RESOLUTION REPORT**  
**Inclusion of Language Interpretation and Translation Services to the**  
**Healthy Smiles Ontario Fee Guide**  
**October 20, 2022**

**ISSUE/PURPOSE**

The *Healthy Smiles Ontario* (HSO) program is a publically-funded dental care program for children and youth 17 years old and under which provides free preventive, routine, and emergency dental services to those who can not otherwise afford it. The *Healthy Smiles Ontario Schedule of Dental Services and Fees for Dentist Providers (HSO Fee Guide)* is an administrative tool distributed to dentists, so that they can provide services to clients in the HSO program and bill for these services.

Although limited English language skills have been identified as a key barrier to preventive dental health care utilization (Mehra, Costanian, Khanna, et al, 2019), language interpretation and translation services are not included in the HSO Fee Guide. Almost a quarter (22%) of Windsor and Essex County's population is comprised of immigrants or refugees ('newcomers') (Statistics Canada, 2016), with 14% of residents most often speaking a language outside of English at home (Statistics Canada, 2021).

The impact of language as a barrier to accessing dental care may be reduced by having access to language interpretation and translation services (Reza, Amin, Srgo et al., 2016). As community dentists are not required to accept HSO as a form of payment, this can already be a significant barrier to accessing services. In Windsor and Essex County, patients have been turned away due to an inability to access translation services. This is understandable, as a patient or guardian needs to be able to provide consent and understand what is involved in treatment. Changes to the funding for HSO, by covering the costs associated with remote interpretation services

(i.e., interpretation services that are accessible from a phone, mobile device, or computer) would remove one more of the existing barriers to service.

## BACKGROUND

Oral health is important to overall health and well-being for children and youth. Poor dental health can lead to negative health and social outcomes for young people, and is important to many aspects of a child's development (Rowan-Legg, 2013). One significant oral health concern in children is early childhood caries (ECC) which is decay involving the primary teeth in children younger than 6 years of age. Ethnicity and newcomer status are considered risk factors for ECC with evidence demonstrating that children of recent immigrants and refugees have higher rates of caries and lower rates of preventative dental visits, compared to Canadian-born children (Reza, Amin, Srgo et al., 2016). Newcomer families may lack knowledge about publicly funded dental programs, lack dental health insurance, and have poor oral hygiene, which together can increase the risk and prevalence of oral health issues (Salami, Olukotun, Vastani, et al. 2022). Newcomers may also frequently face other social, cultural, economic, and language barriers to preventive dental health care utilization (Mehra, Costanian, Khanna, et al, 2019). Specifically, limited English skills have been associated with less use of dental care services, as well as challenges with communication with healthcare providers. Language issues may also interact with other known barriers to dental care for newcomers, such as household income and parental education (Reza, Amin, Srgo et al., 2016).

The impact of language, as a barrier to dental health care may be reduced by having access to language interpretation and translation services (Reza, Amin, Srgo et al., 2016). It has been suggested that both dental visits and other oral health promotion efforts for newcomer families would be more impactful if public health organizations and private dental offices, could have access to interpreting services (Amin, Elyasi, Schroth, et al., 2014). Given the important role that parents and caregivers can play in a child's oral health, any efforts to improve the oral health literacy of newcomer families, could be considered an important support for those seeking access to services through the HSO program. .

Expansion of public dental programs such as Healthy Smiles Ontario to priority populations has been identified as a key goal of the Windsor-Essex County Health Unit (WECHU). Given the growing urgent need and increase in dental decay among vulnerable children in Windsor-Essex (WECHU, 2018) and recognizing the existing barriers to access to care, the WECHU recommends that fees associated with language interpretation and translation services be included in publicly funded dental programs, such as the Healthy Smiles Ontario program.

## PROPOSED MOTION

**Whereas**, oral health is important to overall health and well-being. Access to preventive and treatment-based dental care is recognized as a basic human right for children and youth; and

**Whereas**, in Ontario, while many groups of children continue to have elevated rates of early childhood caries, specific groups of children are disproportionately affected, including those that are newcomers; and

**Whereas**, the publically funded *Healthy Smiles Ontario* dental program is intended to reduce overall inequity in access to preventative and affordable dental care for all young people under the age of 18, who do not have access to dental insurance or any other government programs; and

**Whereas**, the Windsor Essex County Health Unit recognizes the diversity of its residents, in that newcomers make up almost a quarter of the population in its jurisdiction and the important role that the HSO program plays in helping vulnerable children access preventative and emergency dental care; and

**Whereas**, numerous studies and research reports have indicated the urgent need to transform the current oral care health system, including providing equitable access to newcomers by addressing language obstacles;

**Now therefore be it resolved** that the Windsor-Essex County Board of Health recommends the province of Ontario include billing options for translation and interpretation services in the *Healthy Smiles Ontario Fee Guide*; and

**FURTHER THAT**, while there is a variety of modalities of interpretation, it is *remote interpretation services*, accessible 24/7 from a phone, mobile device, or computer, that should be considered as a useful and affordable option; and

**FURTHER THAT** this resolution be shared with the Ontario Minister of Health, the Chief Medical Officer of Health, the Association of Public Health Agencies, Ontario Boards of Health, the Essex County Dental Society, the Ontario Association of Public Health Dentistry, the Ontario Dental Association and local municipalities and stakeholders.

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#### References

- Amin, M., Elyasi, M., Schroth, R., Azarpazhooh, A., Compton, S., Keenan, L., et al. (2014). Improving the oral health of young children of newcomer families: a forum for community members, researchers, and policy-makers. *Journal of the Canadian Dental Association*. Retrieved from <https://jcda.ca/article/e64>
- Mehra, V.M., Costanian, C., Khanna, S. & Tamin, H. (2019). Dental care use by immigrant Canadians in Ontario: a cross-sectional analysis of the 2014 Canadian Community Health Survey (CCHS). *BMC Oral Health* **19**, 78. Retrieved from <https://doi.org/10.1186/s12903-019-0773-x>
- Reza, M., Amin, M. S., Sgro, A., Abdelaziz, A., Ito, D., Main, P., & Azarpazhooh, A. (2016). Oral health status of immigrant and refugee children in North America: A scoping review. *Journal of the Canadian Dental Association*, *82*(g3), 1488-2159. Retrieved from <https://jcda.ca/g3>
- Rowan-Legg, A. (2013, January 11). Oral health care for children - a call for action. *Paediatric Child Health*, 37-43.
- Salami, B., Olukotun, M., Vastani, M., Amodu, O., Tetreault, B., Obegu, P. O., Plaquin, J., & Sanni, O. (2022). Immigrant child health in Canada: a scoping review. *BMJ global health*, *7*(4), e008189. Retrieved from <https://doi.org/10.1136/bmjgh-2021-008189>
- Statistics Canada. (2017). Focus on Geography Series, 2016 Census. Retrieved from <https://www12.statcan.gc.ca/census-recensement/2016/as-sa/fogs-spg/Facts-cma-eng.cfm?LANG=Eng&GK=CMA&GC=559&TOPIC=7>
- Statistics Canada. (2021). Census Profile, 2021 Census of Population. Retrieved from <https://www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/details/page.cfm?Lang=E&SearchText=Essex&DGUIDlist=2021A00033537&GENDERlist=1,2,3&STATISTIClist=1&HEADERlist=0>
- Windsor Essex County Health Unit. (2018). Oral Health Report 2018 Update. Retrieved from <https://www.wechu.org/resources/oral-health-report-2018>

We would be pleased to discuss this resolution with you and thank you for your consideration.

Sincerely,



Gary McNamara  
Chair, Board of Health



Dr. Kenneth Blanchette  
Chief Executive Officer

c: Sylvia Jones, Minister of Health, Ministry of Health  
Dr. Kieran Moore, Chief Medical Officer of Health, Ministry of Health  
Association of Local Public Health Agencies – Loretta Ryan  
Association of Municipalities of Ontario  
Ontario Association of Public Health Dentistry  
Ontario Boards of Health  
WECHU Board of Health  
Corporation of the City of Windsor – Clerk's office  
Corporation of the County of Essex – Clerk's office

November 24, 2022

Hon. Merrilee Fullerton  
Ministry of Children, Community and Social Services  
[MinisterMCCSS@ontario.ca](mailto:MinisterMCCSS@ontario.ca)

Dear Minister Fullerton:

**Re: Healthy Babies Healthy Children (HBHC) and Infant Toddler Development Program (ITDP) Funding**

The HBHC and ITDP programs are vital public health programs supporting the most high-risk families in our community. Peterborough Public Health (PPH) remains committed to providing this service to the residents of Curve Lake and Hiawatha First Nations and the County and City of Peterborough, however, are requesting a review of base funding for both programs by the Ministry of Children, Community and Social Services (MCCSS). The review of base funding is being requested so that these programs are able to continue to meet the growing complex needs of our community.

At its meeting on November 9, 2022 the Board of Health passed the following motion:

*"The Board of Health for Peterborough Public Health will write to the Minister of Children, Community and Social Services that:*

- the Healthy Babies, Healthy Children and Infant and Toddler Development Programs remain 100% funded by the Ministry; and,*
- that they assess base funding and grant sufficient annual increases to board of health budgets to keep pace with financial costs associated with the demands from client families, partner agencies, and the community;"*

Provincial base funding for the HBHC and ITDP programs has not seen increases since 2015 and 2002 respectively. To allow for inflationary increases, PPH has been forced to institute a reduction in staffing and further reductions are possible. PPH is concerned that the current base funding is insufficient to fully implement the delivery of both of these critical programs with increases such as collective agreement commitments to steps on salary grids, travel costs, and operational and administrative costs.

Positive early childhood experiences are fundamental to the developing brain. It is well documented that the experiences of children early in life have an impact on adult health outcomes. HBHC and ITDP are programs that promote positive child development and help mitigate the risk of adverse childhood experiences and resulting health impacts.

Due to chronic underfunding of the HBHC and ITDP programs, fewer families are being served. Staff have less capacity for promotion of the program, education and support to community partner agencies (hospital, primary care, etc.). This results in fewer referrals and missed opportunities for assessment and intervention for families at risk. Without an increase in funding the HBHC and ITDP programs cannot provide the

therapeutic interventions that enhance child development nor target the key indicators that promote healthy growth and development.

On behalf of the Board of Health for PPH, I am respectfully requesting your commitment to carefully review base-funding needs for the Healthy Babies, Healthy Children and Infant Toddler Development programs.

Sincerely,

***Original signed by***

Councillor Kathryn Wilson  
Acting Chair, Board of Health

/ag

cc: Local MPPs  
Association of Local Public Health Agencies  
Ontario Boards of Health

December 30, 2022

VIA ELECTRONIC MAIL

Directors of Education, Local School Boards  
Sports and Recreation Organizations  
Early Learning Centres

Dear Recipient:

**Re: Physical Literacy for Healthy Active Children**

At its meeting on October 20, 2022, the Board of Health carried the following resolution #29-22:

*WHEREAS being physically active every day helps children and youth perform better in school, learn new skills, build strong muscles, improve blood pressure and aerobic fitness, strengthen bones and reduce the risk of depression<sup>i</sup>; and*

*WHEREAS the implementation of stay-at-home orders, closures of schools, and indoor and outdoor spaces to mitigate the spread of COVID-19 is the reduction of physical activity levels in all age groups<sup>ii</sup>; the percentage of youth meeting the Canadian physical activity recommendations for children and youth fell from 50.8% in 2018 to 37.2% in 2020<sup>iii</sup>; and*

*WHEREAS the Government of Canada's national policy document Common Vision for Increasing Physical Activity and Reducing Sedentary Living in Canada: Let's Get Moving identifies physical literacy as the foundation for an active lifestyle<sup>iv</sup>. Studies show that children who have high physical literacy scores are more likely to meet national physical activity or sedentary behaviour guidelines<sup>v</sup>; and*

*WHEREAS physically literate individuals have been shown to have the motivation, confidence, physical competence,*

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f: 705.867.0474

**Espanola**

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[phsd.ca](http://phsd.ca)



*knowledge and understanding to value and take responsibility for engaging in physical activities for life<sup>vi</sup> and these skills help them make healthy, active choices that are both beneficial to and respectful of their whole self, others, and their environment<sup>vii</sup>; and*

*WHEREAS the school community offers one of the best opportunities to improve the quality of sport and physical activity participation for children and youth; and*

*WHEREAS the Ontario Public Health Standards require that: “community partners have the knowledge of and increased capacity to act on the factors associated with the prevention of chronic diseases and promotion of wellbeing, including healthy living behaviours, healthy public policy, and creating supportive environments.”<sup>viii</sup> This includes knowledge of the importance and impact of physical literacy on increasing physical activity participation thereby reducing the risk of chronic disease;*

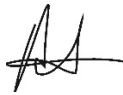
*THEREFORE BE IT RESOLVED THAT the Board of Health for Public Health Sudbury & Districts encourage all area school boards, sport and recreation organizations, and early learning centres to work to improve physical activity levels among children and youth across Sudbury and districts, including through collaboration with Sport for Life Society, Active Sudbury and Public Health Sudbury & Districts, agencies that provide comprehensive physical literacy training to teachers, coaches, recreation providers and early childhood educators; and*

*FURTHER THAT a copy of this motion be shared with the Sport for Life Society, Active Sudbury, local members of Provincial Parliament, all Ontario Boards of Health, and area school boards, early learning centres and sport and recreation organizations.*

As we look ahead to increase physical activity and to decrease sedentary behaviours in the population; the need for improving physical literacy is greater than ever before. It is crucial that we embrace physical literacy as a catalyst for children and youth to be active and healthy. We know that *it takes a village to raise a child* and the collaboration of multiple sectors to embed physical literacy development in plans, programs, and policies. Therefore the Board of Health for Sudbury & Districts encourages all area school boards, sport and recreation organizations, and early learning centres across Sudbury and districts to work to

improve physical activity levels among children and youth through collaboration with agencies that provide comprehensive physical literacy programming, including the Sport for Life Society, Active Sudbury and Public Health Sudbury & Districts.

Sincerely,



Penny Sutcliffe, MD, MHSc, FRCPC  
Medical Officer of Health and Chief Executive Officer

cc: Dr. Kieran Moore, Chief Medical Officer of Health  
Loretta Ryan, Association of Local Public Health Agencies  
France G linas, Member of Provincial Parliament, Nickel Belt  
Jamie West, Member of Provincial Parliament, Sudbury  
Michael Mantha, Member of Provincial Parliament, Algoma-Manitoulin  
All Ontario Boards of Health  
Constituent Municipalities

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<sup>i</sup> Centre for Disease Control and Prevention. Healthy Benefits of Physical Activity for Children (2021). Taken from: <https://www.cdc.gov/physicalactivity/basics/adults/health-benefits-of-physical-activity-for-children.html>

<sup>ii</sup> Science Table. The Impact of Physical Activity on mental Health Outcomes during the COVID-19 Pandemic. (2022) taken from : [The Impact of Physical Activity on Mental Health Outcomes during the COVID-19 Pandemic - Ontario COVID-19 Science Advisory Table \(covid19-sciencetable.ca\)](https://www.scientable.ca/covid19-science-table/)

<sup>iii</sup> Statistics Canada. The unequal impact of the COVID-19 pandemic on the physical activity habits of Canadians. (2022) Taken from: <https://www150.statcan.gc.ca/n1/pub/82-003-x/2022005/article/00003-eng.htm>

<sup>iv</sup> Government of Canada. A common Vision for increasing physical activity and reducing sedentary living in Canada: Let's Get Moving. (2018) Taken from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/lets-get-moving.html>

<sup>v</sup> Tremblay MS, Longmuir PE, Barnes JD, Belanger K, Anderson KD, Bruner B, Copeland JL, Delisle Nystr m C, Gregg MJ, Hall N, Kolen AM, Lane KN, Law B, MacDonald DJ, Martin LJ, Saunders TJ, Sheehan D, Stone MR, Woodruff SJ. Physical literacy levels of Canadian children aged 8-12 years: Descriptive and normative results from the RBC Learn to Play-CAPL project. BMC Public Health. 2018;18(Suppl 2):1036.

<sup>vi</sup> The International Physical Literacy Association, May 2014. Taken from: <https://physicalliteracy.ca/physical-literacy/>

vii Government of Ontario HEALTH AND PHYSICAL EDUCATION, 2019 | The Ontario Curriculum, Grades 1–8. 2019 taken from: <https://preview-assets-us-01.kc-usercontent.com/fbd574c4-da36-0066-a0c5-849ffb2de96e/db4cea83-51a1-458d-838a-4c31be56bc35/2019-health-physical-education-elem-PUBLIC.pdf>

viii Government of Ontario. (June, 2021) Ontario Public Health Standards: requirements for Programs, Services and Accountability. Taken from: [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/)

alPHA's members are  
the public health  
units in Ontario.

**alPHA Sections:**

Boards of Health  
Section

Council of Ontario  
Medical Officers of  
Health (COMOH)

**Affiliate  
Organizations:**

Association of Ontario  
Public Health Business  
Administrators

Association of  
Public Health  
Epidemiologists  
in Ontario

Association of  
Supervisors of Public  
Health Inspectors of  
Ontario

Health Promotion  
Ontario

Ontario Association of  
Public Health Dentistry

Ontario Association of  
Public Health Nursing  
Leaders

Ontario Dietitians in  
Public Health

January 12, 2023

Dear Partners in Public Health,

**Re. Public Health Matters – Public Health Fall Vaccine Success**

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The Association of Local Public Health Agencies (alPHA) is pleased to provide you with our new [Public Health Matters infographic](#), that highlights important public health programs and services that promote well-being, prevent disease, and protect population health throughout the Province of Ontario. This edition focuses on the success of local public health campaigns in the past year to increase coverage against a range of vaccine preventable diseases, including COVID-19, mPox, influenza, and those included in routine childhood immunizations.

These campaigns to increase vaccine protection among all Ontarians entailed extraordinary efforts by the public health leadership in all 34 of our local public health units throughout the year, from continuing the massive operation to get COVID-19 shots into arms to this fall's Universal Influenza Immunization Program (UIIP) and student immunization and catch-up programs.

Through data-driven activities, amplified messaging, integrated services and community outreach, local public health played a key role in promoting, increasing access to, and delivering these critical protections against disease throughout the province.

We hope you find this resource useful, and we look forward to continuing to work with decision makers and community partners alike to foster a strong, sustainable, resilient, and locally based public health system in Ontario. As Ontario's front-line and pre-eminent public health experts, our members look forward to opportunities to share this expertise and we look forward to an invitation to discuss this with you further. To schedule a meeting, please have your staff contact Loretta Ryan, Executive Director, alPHA, at [loretta@alphaweb.org](mailto:loretta@alphaweb.org) or 416-595-0006 x 222.

Respectfully,



Trudy Sachowski  
President

The Association of Local Public Health Agencies (alPHA) is a not-for-profit organization that provides leadership to the boards of health and public health units in Ontario. alPHA advises and lends expertise to members on the governance, administration, and management of health units. The Association also collaborates with governments and other health organizations, advocating for a strong, effective, and efficient public health system in the province. Through policy analysis, discussion, collaboration, and advocacy, alPHA's members and staff act to promote public health policies that form a strong foundation for the improvement of health promotion and protection, disease prevention and surveillance services in all of Ontario's communities.

# PUBLIC HEALTH MATTERS

## PUBLIC HEALTH FALL VACCINE SUCCESS

WINTER 2023

**Local public health units increased vaccine coverage and provided vital protection against disease for residents across Ontario.** The leadership provided by Ontario's local public health agencies on an unprecedented number of vaccine campaigns aimed at increasing vaccine uptake. This fall, dedicated staff in Ontario's 34 local public health units intensified vaccine activities to combat the fall respiratory virus surge and other emerging public health issues.

### LOCAL PUBLIC HEALTH PREPARED FOR, COORDINATED, AND DELIVERED 7 VACCINE CAMPAIGNS

- COVID-19: pediatric, 5-17 booster, and bivalent
- Routine: influenza and student immunization and catch-up program
- Outbreak response: mpox & meningococcal C
- Promoted routine vaccines

### MORE CLINICS, INCREASED CAPACITY, BROADER OUTREACH, EXTRAORDINARY RESULTS

Ontario's 34 public health units led Ontario's vaccination campaigns with a focus on increased access, data-driven action, integrated services, and amplified messages.

#### FALL 2022 VACCINATION BY THE NUMBERS



**1,100+**

Fixed site clinics\*



**2,000+**

Mobile clinics\*



**700+**

Influenza clinics



**1,000+**

Student  
Immunization and  
catch-up clinics



**400+**

Mpox  
clinics



**3,000+**

Homebound  
vaccinations

\* co-administration of multiple vaccines

### COMMUNICATION AND PUBLIC EDUCATION ABOUT VACCINE CAMPAIGNS



**3,300+**

Social  
media posts



**4,500,000+**

Social media  
engagement and  
impressions



**700+**

Media releases,  
responses, and  
interviews



Population  
Health  
Assessment



Health  
Equity



Effective Public  
Health Practice



Emergency  
Management



Chronic Disease  
Prevention and  
Well-Being



Food  
Safety



Healthy  
Environments

# PUBLIC HEALTH MATTERS

## PUBLIC HEALTH FALL VACCINE SUCCESS

WINTER 2023



### ACCESS INCREASED

- Local public health unit leaders partnered with municipalities to run mobile vaccination buses. The buses aimed to decrease barriers to vaccination, and services were offered at locations where people attend regularly (such as malls, grocery stores, local events, and parks), in remote locations, to at-risk communities, and in other underserved areas.
- Local public health unit leaders worked closely with Indigenous communities. For example, a local public health unit created and shared biweekly communication packages with local First Nations, urban Indigenous community groups and Métis partners to foster open communication, prompt sharing of public health guidance, and updates on vaccines.



### DATA-DRIVEN ACTIVITIES

- Staff in Ontario's 34 local public health units used data to optimize vaccine coverage. This is exemplified through a local public health unit who used equity indicators to identify their highest priority neighbourhoods to target outreach and support. This geographically mapped information was posted publicly on a COVID-19 dashboard and used internally for health system planning. Vaccine strategies were employed, using mobile clinics, fixed sites, and organization partnerships (such as Ontario Health Teams and community clinics) in order to increase vaccination.



### INTEGRATED SERVICES AND COMMUNITY OUTREACH

- Local public health integrated services to have the greatest impact. For example, a local public health unit established 15 hubs throughout their community, offering services like dental screenings, mental health, addictions and substance use supports, and COVID-19, flu and routine immunizations.
- Local public health partnered with community agencies to enhance vaccine outreach and worked to help get residents vaccinated against COVID-19. In one local public health unit, this included the operation of Vaccine Engagement Teams comprised of over 150 health, community, and faith-based organizations and more than 700 community ambassadors reflecting the community's diversity.



### AMPLIFIED MESSAGES

- Local public health employed traditional media tactics (such as news releases, media events, and social media) in addition to unique targeted local tactics. One example of this work is demonstrated by a local public health unit who worked with hospital partners to create a commercial that highlighted actions needed to reduce strain on hospital systems resulting from respiratory illnesses. The commercial plays before every movie at the local cinema, at hockey home games, and on local television.



Population  
Health  
Assessment



Health  
Equity



Effective Public  
Health Practice



Emergency  
Management



Chronic Disease  
Prevention and  
Well-Being



Food  
Safety



Healthy  
Environments