Present were: Chair S. Strickland, L. Armstrong, J. Brewer, T. Cowan, D. Craig*, R. Deutschmann*, J. Haalboom*, B. Halloran, R. Kelterborn, G. Lorentz, C. Millar*, J. Mitchell, K. Seiling, J. Wideman* and C. Zehr

Members absent: T. Galloway

MOTION TO RECONVENE INTO OPEN SESSION

MOVED by J. Brewer
SECONDED by L. Armstrong

THAT the meeting reconvene into Open Session.

CARRIED

DECLARATIONS OF PECUNIARY INTEREST UNDER THE MUNICIPAL CONFLICT OF INTEREST ACT

None declared

PRESENTATIONS

a) Dr. Fred Mather made brief comments about Report SS-11-015, Sunnyside Home Annual Medical Director's Report 2010, stating that provincial legislation requires the annual report.

* C. Millar joined the meeting at 1:15 p.m.
* D. Craig and J. Haalboom left the meeting 1:15 p.m.

Chair Strickland commended Sunnyside Home staff for the progressive partnership with the school pharmacy and the broader community.

The report was received for information.

b) Lynda Kohler, Brenda Lewis and Denise Squire, Woolwich Community Health Centre, addressed the Committee Re: Community Needs and Capacity Assessment Project. A copy of their presentation is appended to the original minutes.

D. Squire, Executive Director, acknowledged the attendance of the Board in the audience and provided an overview of the Centre and its 12-member Board. She highlighted the primary care model and the purpose of the community assessment.

* D. Craig rejoined the meeting at 1:18 p.m.
L. Kohler, Program Coordinator, provided highlights of the community assessment, including the study process and the key determinants of health and related implications. She advised that the complete assessment report is available on the organization’s website and that the research involved 1000 households and 24 focus groups over a one-year period.

* R. Deutschmann joined the meeting at 1:20 p.m.
* J. Haalboom rejoined the meeting at 1:22 p.m.
* J. Wideman joined the meeting at 1:24 p.m.

L. Kohler summarized the key determinants of health, including access to programs and services; satisfaction with the environment; rural lifestyles; injury prevention and personal health practices.

L. Kohler stated that the organization’s strategic priorities are developed based on the report findings and that copies of the report have been shared with community agencies.

REPORTS – Public Health

a) PH-11-015, Food Safety Training Certification Program – Conestoga College Collaboration

Dr. Liana Nolan, Commissioner/Medical Officer of Health, made introductory comments and introduced Chris Komorowski, Manager, Food Safety, Recreational Water and Cambridge & Area Team and Lindsay Ogg, Public Health Inspector, who summarized the highlights of the proposed program and provided 2010 statistics of the current program.

C. Komorowski responded to Committee questions about campus location for the program and the anticipated date for an update report on the collaborative program. He stated that the program will be offered at any of the campuses, depending on the demand, and that a report will come back to Committee in September 2012, a year after the college will have run the program on its own.

MOVED by J. Brewer
SECONDED by R. Kelterborn

THAT the Regional Municipality of Waterloo enter into an agreement with Conestoga College Institute of Technology and Training (“Conestoga College”) for the delivery of Food Safety Training Certification programs effective May 1st, 2011 with such agreement to be to the satisfaction of the Regional Solicitor, as outlined in report PH-11-015, dated April 12, 2011.

CARRIED

b) PH-11-016, Healthy Babies Healthy Children Program Changes Update

Andrea Reist, Director, Child & Family Health, summarized the report, indicating that the changes will be in place by January 2012. She stated that programs for vulnerable children will be enhanced, while some components of the program, currently available to all families, will be eliminated.

* J. Wideman and D. Craig left the meeting at 1:46 p.m.
Councillors expressed their disappointment that some of the support programs are being eliminated.

Received for information.

REPORTS – Social Services

a) SS-11-016, One Time Funding for Equipment for Sunnyside Home Resident and Staff Safety

Mike Schuster, Commissioner, Social Services, responded to a Committee inquiry about the timing of the report and he provided details about the provincially-set timelines for the funding allocation.

MOVED by J. Brewer
SECONDED by B. Haalboom

THAT the Regional Municipality of Waterloo increase the 2011 operating budget for Seniors’ Services by $59,606 gross and $0 net Regional Levy, as outlined in report SS-11-016, dated April 12, 2011.

CARRIED

b) SS-11-018, Youth Housing Stability Pilot Programs

M. Schuster provided an overview of the report and made brief comments about the outcome of the pilot programs.

* J. Wideman rejoined the meeting at 1:54 p.m.

MOVED by C. Zehr
SECONDED by T. Cowan

THAT the Regional Municipality of Waterloo extend the Emergency Shelter Program Agreement with Reaching Our Outdoor Friends (ROOF) for 10 beds for May 1 to December 31, 2011;

AND THAT the Regional Municipality of Waterloo extend the Domiciliary Hostel Program Agreement with Argus Residence for Young People for 5 beds for June 17 to December 31, 2011, as outlined in the report SS-11-018, dated April 12, 2011.

CARRIED

c) SS-11-019, Provincial Homelessness Business Case

M. Schuster made brief comments about the annual report.

MOVED by L. Armstrong
SECONDED by T. Cowan

THAT the Regional Municipality of Waterloo approve the attached “Provincial Homelessness Business Case to Support Additional 2011 Funding” as part of the 2011 budget submission to the Province’s Ministry of Community and Social Services, as outlined in Report SS-11-019, dated April 12, 2011.

CARRIED
REPORTS – Planning, Housing & Community Services

a) P-11-037, Volunteer Programs at Region of Waterloo Museums – 2010

Received for information.

b) P-11-040, Thirteenth Annual Report of the Kissing Bridge Trailway Advisory Board

Councillor Cowan invited Committee members to the ‘Spring on the Trail’ fundraising event being held on May 14, 2011; the event passport was distributed to all Councillors.

Chair Strickland recognized the Board for their successful management of the trailway.

Received for information.

INTERDEPARTMENTAL REPORTS

a) P-11-018/F-11-008, Updated Building Condition Audit and Capital Reserve Analysis for Community Housing Providers

Deb Schlichter, Director, Housing, provided an overview of the report. She stated the need to make senior levels of government aware of the urgent funding gaps, as identified in the recent audits.

Councillor Zehr stated that the Region’s position is aligned with the Federation of Canadian Municipalities (FCM) and he suggested that the recommendation be amended to include FCM in the distribution of the report. The Committee was in agreement with the amendment.

MOVED by C. Zehr
SECONDED by B. Halloran

THAT the Regional Municipality of Waterloo take the following actions regarding Community Housing capital reserve requirements, as outlined in Report P-11-018/F-11-008, dated April 12, 2011:

a) Renew the urgent request to the Province of Ontario and Canada Housing and Mortgage Corporation to provide adequate and sustainable funding to Community Housing Providers in Waterloo Region, as described in Report P-11-018/F-11-008; and

b) Forward a copy of this report to MPs and MPPs representing Waterloo Region, the Ministry of Municipal Affairs and Housing, the Ministry of Public Renewal and Infrastructure, the Chair of Canada Mortgage and Housing Corporation, the Association of Municipalities of Ontario (AMO), the Federation of Canadian Municipalities, and all Community Housing Providers in Waterloo Region.

CARRIED, as Amended

INFORMATION/CORRESPONDENCE

a) Ministry of Education Re: Implementation of the New Full Day Early Learning Kindergarten Initiative

M. Schuster made brief comments and recommended staff for establishing a collaborative relationship with the ministry and local school boards.
Received for information.

b) Children’s Services Invitation for the Waterloo Region Early Years System Plan Information Forum on May 13, 2011

M. Schuster encouraged Regional Councillors to attend the Information Forum.

Received for information.

c) Ontario Association of Non-Profit Homes and Services for Seniors Newsletter: Making Seniors a National Priority

Received for information.

d) Memo: Free Tax Clinics at Employment Resource Areas

M. Schuster acknowledged the partnership with Opportunities Waterloo Region.

Received for information.

e) Memo: Stress-Disease Connection Conference

Received for information.

f) Memo: Ontario Works Caseload – March 2011

In response to a Committee inquiry about comparative statistics related to the current caseload and the current local unemployment rate, M. Schuster advised that the increase in caseload is potentially a result of the exhaustion of Employment Insurance benefits and the seasonal trends. He advised that staff anticipate caseload reductions in April and May, depending on the local economy.

In response to an inquiry about available comparative data based on population, M. Schuster advised that information about beneficiaries (total members within a household) is available provincially and could be incorporated into a staff report about local data compared with other municipalities of a similar size.

Received for information.

g) Memo: 2011 Secondary School Suspension Update

Received for information.

OTHER BUSINESS

a) Council Enquiries and Requests for Information Tracking List was received for information.

NEXT MEETING – Tuesday, May 3, 2011
ADJOURN

MOVED by J. Haalboom
SECONDED by R. Deutschmann

THAT the meeting adjourn at 2:09 p.m.

CARRIED

COMMITTEE CHAIR, S. Strickland

COMMITTEE CLERK, S. Natolochny
Woolwich Community Health Centre
Community Assessment

Presentation to Region of Waterloo, Community Services Committee
April 12, 2011

Brenda Leis, Board Chair
Denise Squire, Executive Director
Lynda Kohler, Program Coordinator
About WCHC

• One of 75+ in Ontario
• WCHC opened in 1989 – sites in St. Jacobs, Linwood, Wellesley village
• Catchment area includes the rural Townships of Woolwich and Wellesley, as well as parts of Wilmot Township and Perth County
• What makes CHCs different from other primary health care models, like fee-for-service and FHTs?:
  – Non-profit, community (board)-governed, all staff (including physicians) are employees
  – CHCs tailor programs/services and develop partnerships to meet unique health needs of their community through inter-disciplinary primary health care, illness prevention and health promotion programs and services
• Essential for CHC to understand its community – hence WCHC’s Community Assessment every 5 years; integral to our Board and staff as part of our continuous strategic planning cycle
Study Process

• Steering committee
• Background data was collected
• Written survey developed and mailed
• Focus groups and interviews conducted
• Data analysed
• Report written and reviewed
Key Determinants of Health and Implications

1. Health Literacy
2. Poverty and Social Support Programs
3. Access to Programs and Services
4. Environment and Transportation
5. Rural Lifestyles and Injury Prevention
6. Personal Health Practices
Health Literacy

Study Findings:

- The rate of those who have inadequate health literacy skills is 60% nationally.
- Some population groups have lower levels of literacy i.e. Low German Speaking Mennonites from Mexico (LGSMM), seniors.

Implications:

- Health literacy is a concern when providing health information i.e. brochures, public messaging and presentations, in developing systems to access programs and services, etc.
- There are more literacy demands for those with chronic conditions to self-manage and for seniors/caregivers navigating the health system and accessing support services.
- Need for literacy initiatives to support the LGSMM.
Education attainment – a strong indicator of literacy among adults

Educational Attainment - Less than Highschool, 2006

Percent of population with less than a highschool diploma
- 10.6 - 17.4%
- 17.5 - 27.6%
- 27.7 - 38.2%
- 38.3 - 52.2%
- 52.3 - 95.6%

Source: Statistics Canada, 2006 Census, E01 305 Semi-Detached Profile, processed August 2008
Map created by Ontario Early Years Centre Data Analysts Coordinator, August 2009
Poverty and Social Support Programs

Study Findings:

- Those who are most affected by poverty are the working poor, those on disability benefits and some seniors on a fixed income (i.e. the LGSMM are often “working poor”)

- Increase in the number of low income families with children 18 years and younger in Wellesley Township living in poverty

Implications:

- Ongoing awareness and linking families with social support programs

- Support for local food banks i.e. Woolwich Community Services

- Continue to develop affordable housing options
Where Low Income Families Live

Households Spending More Than 30% of Income on Shelter Costs, 2006

Percent of households spending more than 30% of income on shelter costs:
- 0 - 8.3%
- 8.31 - 13.3%
- 13.31 - 16.7%
- 16.71 - 20%
- 20.1 - 42.9%

Map created by Ontario Early Years Centre Data Analysis Coordinator, August 2006
Access to Programs and Services

Study Findings:
• Overall a high satisfaction with the range of programs and services in the rural community but some gaps noted i.e. recreation for youth
• Rural residents may not be aware of all programs and services available in the region i.e. seniors, LGSMM
• Transportation was often noted as a barrier

Implications:
• The CAPC Rural Outreach Workers play an important role to link low income families with regional programs and other supports
• Outreach to the rural communities may reach more isolated families with greater barriers to accessing programs and services i.e. Child Health Fairs, Healthy Smiles Ontario
Satisfaction with the Environment

Study Findings:

– Many residents rate their satisfaction with the environment high and also rate the quality of their drinking water as high

– The most significant concern for the environment is the growth pressures in the upcoming years

Implications:

– The Well Water Testing program is valued by rural residents.

– The ROW Water Quality Program has high participation and Woolwich Healthy Communities Clean Waterways Group have provided support for farmers to protect water supply.
Satisfaction with the Environment - Transportation

Study Findings:

– Transportation continues to be a concern especially by seniors, youth and low income families.
– Seniors value the Kiwanis Transit program and rural volunteer driving programs
– The GRT route to Elmira was well known by residents living in Woolwich Township and used primarily for shopping followed by work and lastly school.
– The Breslau community expressed their desire to have a GRT route into the village

Implications:

– The GRT is valued by Woolwich residents. Focus group participants would encourage route changes along with service extending into the evening.
Rural Lifestyles

Study Findings:

– Farming sustainability is challenging and farmers continue to report high levels of stress

– “Buy Local” initiatives were reported to be highly valued by local farmers and residents

– Residents are concerned with increased traffic and increased risk of car crashes or roadway incidents with newcomers being unfamiliar with slow moving vehicles on roadways i.e. buggies and farm tractors

Implications:

– Continuation of “buy local” initiatives benefit the local farmer as well as the local economy while providing a safe and nutritious supply of fruits and vegetables

– Education on road safety
Rural Lifestyles - Injury Prevention

Study Findings:

- Farm injuries continue to be a concern among the farming population especially among children 0-5 years and seniors.
- Farmers are aging and working well into their retirement years.

Implication:

- Farm safety education is important to educate children i.e. farm safety day, partnering with public health to visit local parochial schools, Waterloo Rural Women annual farm safety day.
Personal Health Practices

Study Findings:

– 50% of the population are overweight or obese, many are inactive
– Eating 5-10 servings of fruits and vegetables is met by only 37% of the population surveyed (CFG recommendations have increased)
– People are generally more active than those in the Region of Waterloo
– The greatest barriers to improving health behaviours are motivation and lack of time
– Some populations struggle with other health behaviours such as: dental practices and smoking

Implications:

– Promoting self-management and personal behaviour change
– Environmental supports to support behaviour change
Health Status

Study Findings:

• People rate their health higher than the rate in the Region of Waterloo

• Similar rates of mortality for top 4 causes of death as the Region (cancers, ischemic heart disease, cerebrovascular diseases, respiratory diseases,)

• Increase in self-reported rates of chronic illness as people age and especially among those age 65 and older

• Higher rates of depression, anxiety and eating disorders in younger age groups

• Increased self reported rate of chronic illness among lower income groups
Self Reported Health Status

Health Conditions that Increase with Decreased Income

- Hypertension
- Stroke
- Diabetes
- Heart Disease
- Sleep Problem
- Osteoporosis

% within income group with health condition:
- 0-$19,999
- $20,000-39,999
- $40,000-59,999
- $60,000-79,999
- $80,000 and over

Every One Matters.
Key Themes in the Community

• Chronic Disease Prevention & Management
• Mental Health and Well-Being
• Community Strengths and Vitality
Chronic Disease

Study Findings:

- The pace of life prevents many from making healthier lifestyle choices
- Rate of hypertension, diabetes and arthritis are high and increasing

Implications:

- Education and support to improve health behaviours and for self-management
- Environmental supports for behaviour change i.e. walkable communities, healthy choices
- Build partnerships to increase access to chronic disease prevention, education and management programs
Mental Health and Well-Being

Study Findings:

– Community involvement, social connections, strong family relationships support mental wellness

– Pace of life, stress, restrictive cultures, bullying, etc. were reported to contribute to poor mental health

– Overall self reported level of stress is high

– Women report higher levels of stress as compared to men

– Family/relationship was the highest source of stress

Implications:

– Develop partnerships to increase mental health support

– Work with youth to identify supports to reduce anxiety and depression

Every One Matters.
Community Strengths and Vitality

Study Findings:

- Community services and resources
- Very high participation rate
- Volunteerism rate is high
- People feel that their contributions matter
- High level of trust and sense of belonging

Implications:

- Ongoing support for community organizations and recreation associations
- Volunteer recognition
- Support seniors to remain in the community
Linking Findings

To Mandate of WCHC and our current strategic priorities re:

- Populations affected by key determinants of health that present barriers to access
- Chronic Disease Prevention and Management
- Mental Health and Addictions

...and by informing our advocacy efforts, development of partnerships, securing of resources, and enhancement of organizational capacity support those priorities

To Mandates of other health and human services organizations that serve same communities/populations – by sharing report widely, highlighting findings relevant to our different partners, and encouraging use of report
Conclusion

• The report is available on our website at: www.wchc.on.ca

• Questions?

• Thank you!