



MEDICAL OFFICERS OF HEALTH

Dr. Charles Gardner
(Medical Officer of Health)

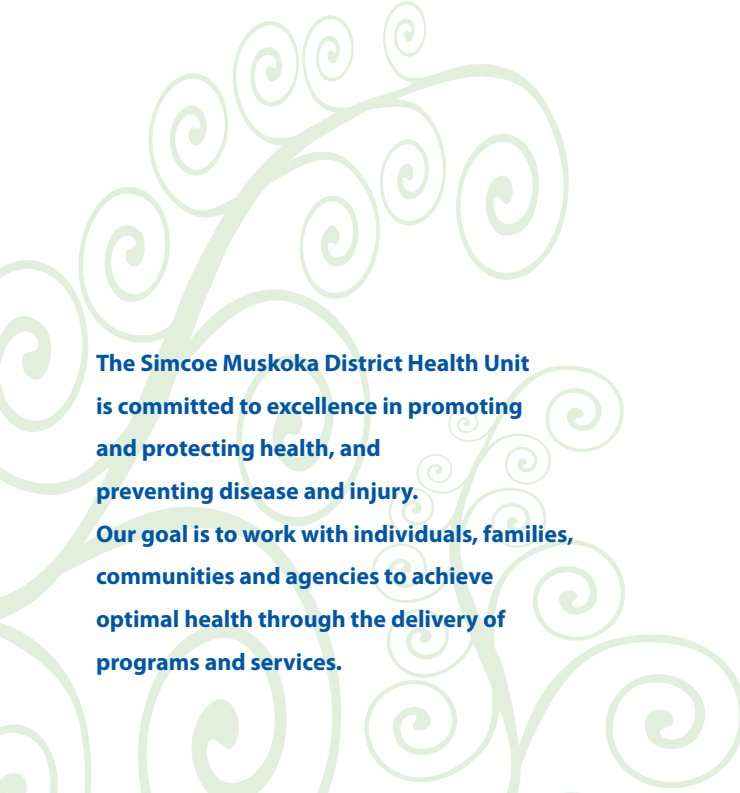
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Dr. Jim Pfaff (Associate MOH)
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**The Simcoe Muskoka District Health Unit
is committed to excellence in promoting
and protecting health, and
preventing disease and injury.**

**Our goal is to work with individuals, families,
communities and agencies to achieve
optimal health through the delivery of
programs and services.**

Medical Officer of Health Message

Since our last *Health@Simcoe Muskoka* report, we experienced the second wave of the H1N1 influenza pandemic. For six weeks in November and December we deployed 90 per cent of our staff to provide community vaccination clinics. Health unit staff threw themselves into the response to H1N1 with energy and enthusiasm, embracing the opportunity to work in new and different ways with their colleagues, community partners and the public. Many other health care professionals and agencies also provided vaccination against H1N1 influenza, resulting in over one-third of our population being vaccinated. I commend all involved, including the municipalities and volunteers who assisted us.

In the past year, significant progress was also made in promoting municipal planning for health-enabling community design. A new tool created for municipal planners, due to be released in Spring 2010, includes recommended policy statements to address key health issues impacted by the built environment.

In 2009, the Ministry of Health and Long-Term Care (MOHLTC) released its *Initial Report on Public Health*, an initial step towards the development of a public health performance management system. Our own health unit's experience with peer review through the accreditation process and the development of a Balanced Scorecard to measure progress towards our strategic outcomes certainly positions our agency well for the next step in the provincial accountability process.

Looking to the year ahead, the health unit is proceeding with a multi-year plan to renew our offices to be more energy-efficient, and accessible for clients travelling on foot, by bicycle or by public transportation. Our new public health clinic at 80 Bradford Street, in downtown Barrie is the first of many infrastructure projects on the horizon.

And finally, we are preparing along with many other community agencies to respond to the G8 Summit which is scheduled to take place in Deerhurst Resort, Muskoka at the end of June. The year 2010 promises to be as eventful as 2009.

Dr. Charles Gardner
Medical Officer of Health



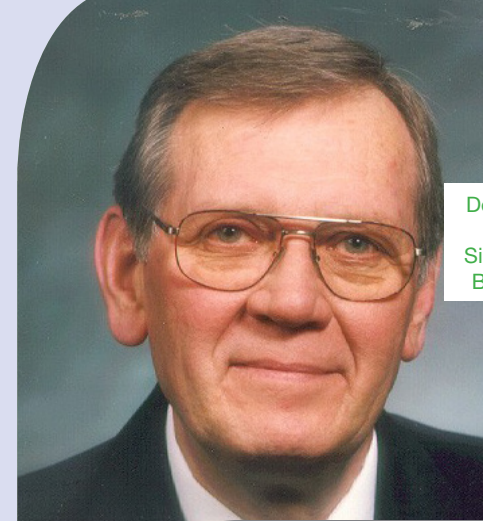
From the Board of Health Chair

Through both waves of the H1N1 influenza pandemic, our communities benefited from wide-ranging cooperation among hospitals, school boards, health care agencies, churches, provincial and municipal governments and the public health unit. The vaccination of more than one-third of the local population in under six weeks was a remarkable accomplishment, but one that is not unique in public health. In fact, during my decade with the Simcoe Muskoka Board of Health, collaboration has been key to the success of the agency's programs and services.

In recent years there has been innovative work in partnership with municipal planners to incorporate the principles of community design that benefit people's health. Health unit staff now liaise directly with family health teams and community health centres to promote access to health unit services and provide preventive information.

This year I am excited to see the new provincial Healthy Communities initiative take shape. Healthy Communities takes a holistic approach to well-being. The initiative will build upon the strong foundations created by our local heart health and substance abuse prevention coalitions, combining those activities along with youth engagement and mental health promotion.

These collaborations are vital, since public health units are not the sole protectors of the public's health. Everything in a community, from the corner store to Town Hall, impacts people's health and as a result, maintaining health must be a shared responsibility of the whole community. With our successes in collaborative work I truly believe we are proving that working together, across the boundaries of mandate or municipality, can make a real difference in responding to emerging health issues and building complete, healthy communities.



Dennis Roughley
Chair,
Simcoe Muskoka
Board of Health

The Year in Numbers



AGENCY

Total calls to *Your health Connection* phone lines..... 25,272*

Total calls from news media542

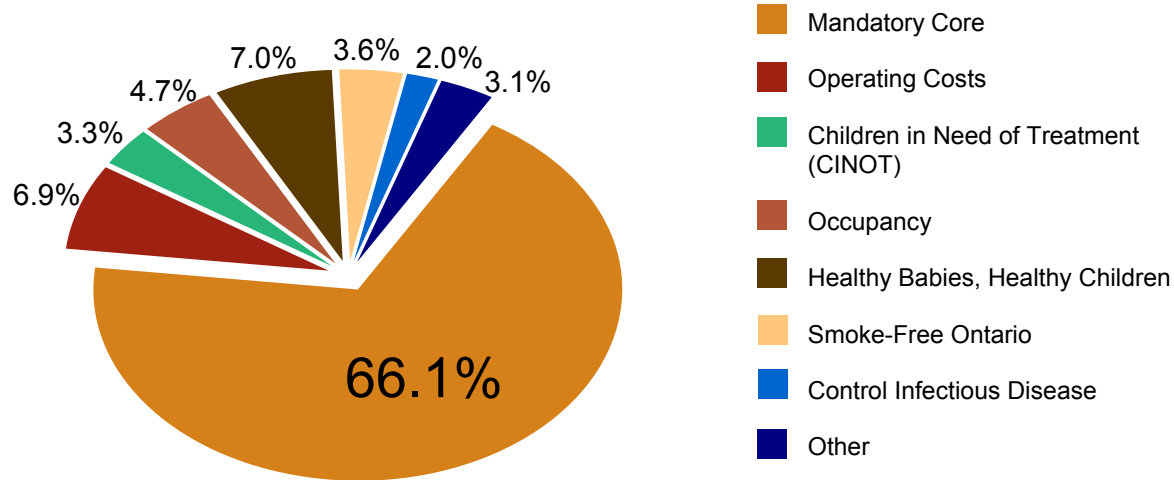
Municipal planning documents reviewed for healthy community design principles.....7

Meetings, presentations with municipalities or strategic partners regarding healthy community design65

* *Your health Connection* statistics this year are based on calls answered by *Your health Connection* staff and do not reflect all incoming calls to the health unit. Call volumes were, overall, lower than previous years because of reduced levels of services during the six-week H1N1 vaccine period.

2009 Budget

Total Budget \$31.6 Million



The Year in Numbers



PREVENTING DISEASE & INJURY

Disease/outbreak investigations conducted1,221

Reportable diseases confirmed after investigations.....857

H1N1 flu vaccine administered at public health clinics.....60,642

H1N1 vaccine distributed to other vaccine delivery agents110,205

Seasonal flu vaccine administered by health unit8,305

Seasonal flu vaccine distributed to other vaccine delivery agents.....115,430

Total other vaccines administered in schools and clinics27,204

Students screened in schools through oral health program25,152

Teens receiving urgent dental care through expanded CINOT program.....255

Funding provided for urgent dental care to teens through expanded CINOT program\$134,000

Performance measurement—maintaining accountability

When the four-year strategic plan was introduced in 2007, the health unit made a commitment to measure and communicate progress towards strategic outcomes. The agency chose the balanced scorecard as the measurement tool because it captures financial measures as well as other less tangible measures including:

- ✂ **Health Determinants & Health Status:** Looks at rates of disease and the prevalence of health behaviours and behavioural risk factors. While these measures may be influenced by many factors in addition to health unit programming, they are key drivers of agency priorities.
- ✂ **Community Engagement:** Measures the uptake of health unit programs and services in the community and the attitudes and perceptions of the community about these programs and services.
- ✂ **Resources & Services:** Measures the health unit's capacity to deliver mandated and locally needed public health services. Included in this quadrant are financial measures such as service cost per client; indicators such as wait lists; and the breadth and depth of skills in the workforce.
- ✂ **Integration & Responsiveness:** Measures the health unit's ability to build key relationships internally and externally in order to respond quickly to changing needs and emerging issues. Measures related to emergency response capacity and staff growth and learning are captured in this quadrant.

The agency scorecard has been built from the bottom up—engaging health unit programs in the development of initiative specific scorecards and then rolling these indicators into a picture of agency performance related to our strategic plan. Target for release of the scorecard is later this year.



Maintaining accountability

Maintaining our current status as an accredited health unit is another way in which the health unit demonstrates a commitment to quality and continuous improvement. For over a decade, the health unit has participated in this voluntary review process designed to assess health unit performance against peer-set standards. The process includes periodic on-site surveys along with annual performance reporting. Using the results of the accreditation survey conducted in 2006, the health unit has worked over the past four years to build on organizational strengths and address identified weaknesses. Preparations are under way for the on-site survey scheduled for late fall 2010.

BALANCED SCORECARD



PREVENTING DISEASE & INJURY

Inspections at day nurseries and personal service settings515

Inspections at workplaces or public spaces.....8

Portion of known personal service settings that were inspected..... 39%

Car seats inspected at clinics.....473

Sexual health clinic/counselling/drop-in appointments to teens under 18.....1,978

Families receiving a postpartum phone contact after hospital discharge.....3,812

Home visits by Public Health Nurses and/or Family Home Visitors.....4,026

H1N1 and the lessons learned

Influenza was an all-consuming obligation for the health unit through 2009 and into 2010.

For the public there was some reassurance, in that the H1N1 virus was producing primarily mild illness with a mortality rate well below seasonal flu averages. Still, as a new strain of influenza, it spread rapidly. It was well out of synch with past outbreaks of seasonal flu, striking first in May with the second wave peaking in mid-October. It also struck hardest among young children, generating high levels of school absenteeism and parental anxiety during its peak.

An accurate total of people who became ill will never be known. However, during its peak, doctors reported influenza-like illness to the health unit at a rate seven times that of a normal year. Demand was high for the H1N1 vaccine, which became available locally on October 26 through family physicians and for hospital health care workers, and on November 3 at health unit vaccination clinics.

Overall, the health unit's response lasted eight months. Roughly 90 per cent of staff was redeployed to support the six weeks of vaccination clinics, during which many of the health unit's standard services could not be offered. The health unit's website was redesigned to give the public easy access to the information they needed; new sections were also added to provide health care professionals with the latest protocols and directives. More staff were added to the *Your health Connection* phone lines and hours were extended to deal with a ten-fold increase in calls.



H1N1 and the lessons learned

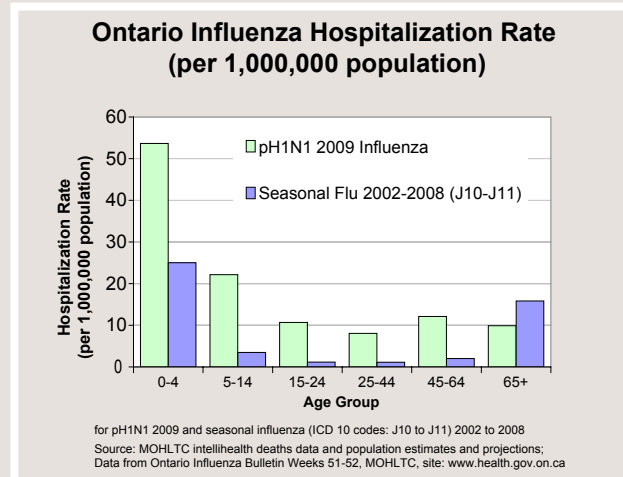
At the peak of the second H1N1 wave, demand on Barrie's Royal Victoria Hospital emergency services prompted the creation of an assessment centre in a nearby church, with a variety of health care partners contributing. The centre operated for two weeks in November, effectively relieving some of the pressure on the hospital.

Local residents were, for the most part, highly complimentary of the way in which H1N1 was handled. An effective response would not have been possible without the dedication and support of all those who played a role, including the news media, health unit staff, municipalities, family physicians, emergency services and hospitals.

Lessons learned, and what comes next

Through the winter and spring of 2010, staff and community partners have been engaged in an extensive evaluation of the H1N1 experience and response. The evaluation will be used to update the health unit's pandemic plan and that of the regional Simcoe Muskoka Health Sector Emergency Planning Committee.

However, the most immediate post-H1N1 goal of the Health Unit was simply to return to normal and resume all the services on which our communities rely.



While milder than feared, H1N1 influenza was out of synch with past outbreaks of flu and struck hardest among young children.

The Year in Numbers



PROTECTING HEALTH

Tobacco vendor inspections.....	1,106
Tobacco inspections of workplaces, public spaces.....	1,449
Beach postings.....	28
Beach closures	2
Boil water orders	5
Orders against pools and spas.....	27
Inspections of small drinking water systems (June - Dec. 2009)	192
Food handler training course certificates issued.....	1,051
Food premise inspections.....	5,590
Animal bite investigations	991
Pets vaccinated at low cost clinics in 23 communities	4,990
Adult mosquitoes collected in West Nile virus surveillance	8,604
Portion of mosquito pools testing positive for WNV	0%
Air quality alert days - Barrie, 2009	26
Air quality alert days - Dorset, 2009	31

Environmental health hazards

The *2008 Public Health Standards* call on health units to stay on top of emerging scientific evidence on environmental health hazards; catalogue and monitor potential hazards; and prevent and manage identified hazards. Work with community partners includes an obligation to increase public awareness and promote policy development.

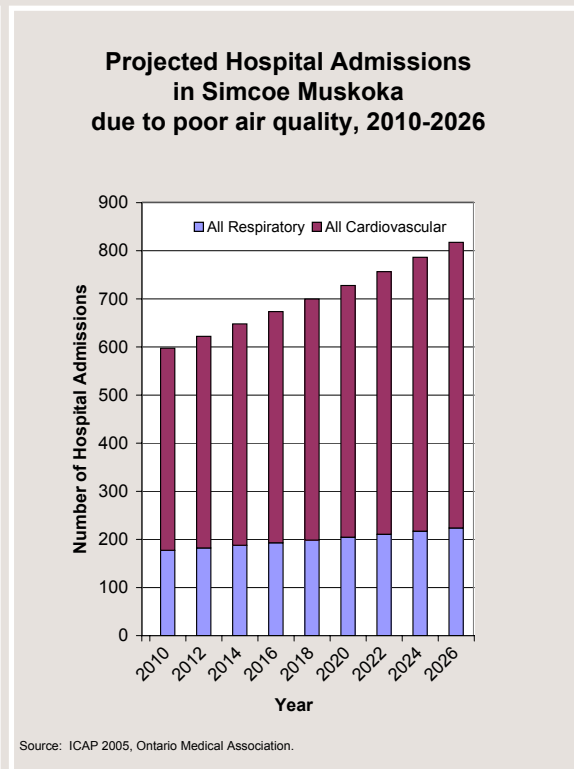
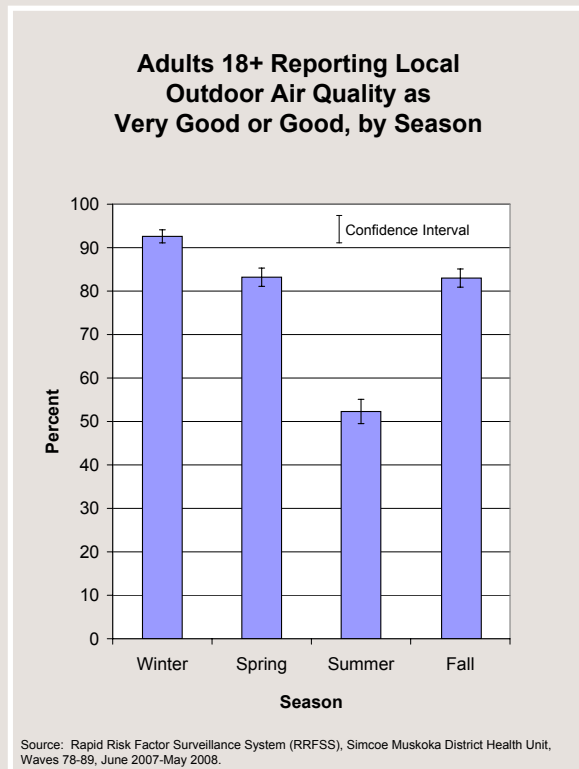
Expanded duties related to environmental health hazards are being phased in as part of the Simcoe Muskoka District Health Unit's strategic plan.

- ✂ **Research:** The Environmental Health Hazard team is gathering research on a wide range of issues, from mercury and pesticides to flame retardants. An extensive literature review is under way about human exposure to plastics in order to respond to concerns raised by the public.
- ✂ **Air quality:** Vehicle idling reduction promotions have involved media campaigns, school-based projects and advocacy to establish idling bylaws and policies for municipal fleets. The health unit is a partner in Greater Toronto Area's Clean Air Partnership which is working on awareness and policy change related to green energy, green procurement, climate change and air quality.
- ✂ **Climate change:** More frequent extreme weather events have prompted a review of existing weather safety practices. A background report related to extreme heat and cold is nearing completion. Climate extremes are also being factored into the planning for the G8 summit this summer.
- ✂ **Day care settings:** A pilot project will help day care operators reduce children's exposure to health hazards while they are in care.



Environmental health hazards

✳ **Internally:** A sustainable business practices proposal was adopted as a guidance tool by health unit management in 2009, with the expectation that these principles will be integrated into agency operations.



Research into public perception of air quality and illness caused by poor air quality reflect the need for public health efforts to reduce risk.



PROMOTING HEALTH

Presentations on sexual health delivered to teens53

Child and family contacts through drop-ins, Triple P seminars, Roots of Empathy Program821

Children screened at Let's Grow Screening Centres across Simcoe and Muskoka...160

People attending 11 falls prevention workshops in 2009425

Family contacts through 49 Getting Ready for Baby series.....1,029

Family contacts at Canadian Prenatal Nutrition Programs meetings.....4,095

Portion of health unit staff participating in Pedometer Challenge in fall 2009 40%

Schools participating in Healthy Schools program at year-end 2009.....10

A coalition of health promotions

For more than a decade, two partnership programs in public health—heart health and substance abuse prevention—recorded significant successes in promoting health and changing behaviour. Behind the success of these programs was the strong sense of responsibility to the home community that grew from the local-partnership formula. This year these programs are being replaced by an umbrella initiative called Healthy Communities Ontario. The new program's mandate is broader in scope, encompassing the risk factors that lead to chronic diseases and injury as well as focusing on youth engagement and mental health.

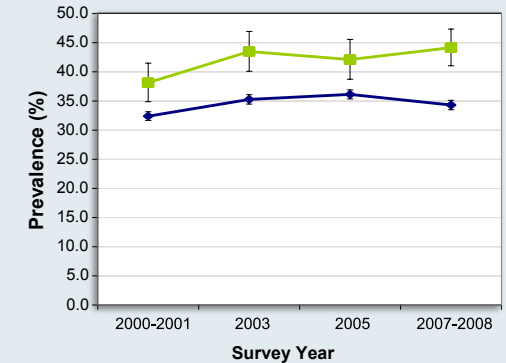
Overview of a decade of successes

Substance misuse prevention – The provincial FOCUS program for alcohol and substance misuse prevention began with five pilot projects in 1991, and concludes its mandate with 22 sites in the province, including the Simcoe County *Think Clear* and Muskoka *RISK* projects.

Dozens of health promotion initiatives have emerged from the Muskoka and Simcoe regions, with as many as 90 partners participating in some. One campaign—the *Trouble in Paradise* promotion—drew international attention for its innovative approach to changing people's attitudes toward the misuse of drugs and alcohol while using recreational vehicles. The programs have also facilitated *SmartServe* and *Safer Bars* training sessions and the creation of alcohol policies for municipalities, bars, restaurants and golf courses.

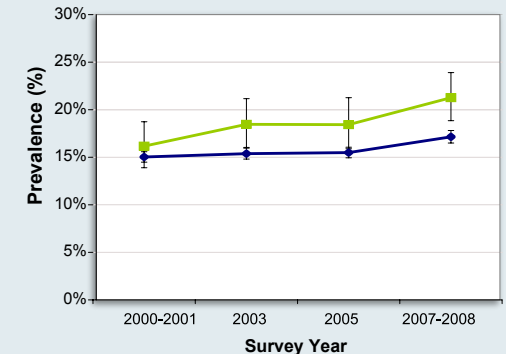
RISK and *Think Clear* are well known for their work with elementary and secondary schools.

Adult (20+ years) Heavy Drinking (5+ drinks on one occasion) past 12 months, Simcoe Muskoka & Ontario



— Simcoe Muskoka — Ontario [Confidence Interval

Prevalence of Obesity (BMI 30+) among Adults (18+) Simcoe Muskoka & Ontario



Data Source: Canadian Community Health Survey (CCHS), Cycle 1.1 (2000-2001), Cycle 2.1 (2003), Cycle 3.1 (2005) & Cycle 4.1 (2007-2008) Ontario Share File; Statistics Canada.

After a decade of promotion, awareness of heart health and substance misuse has grown, yet indicators show healthy lifestyle targets have not been met.

A coalition of health promotions

Heart health programs – Heart health initiatives have roots that stretch back to 1990 in Simcoe County with the *Whole Hearted Program*. By 1998 heart health programs were in place in every health unit in Ontario, including Muskoka’s *Take Heart* and Simcoe’s *Good for Life*.

The thrust of the programs has evolved over the years, beginning with awareness campaigns, moving to development of behaviour change strategies and later advocating for policy change. All stages focused on lifestyle factors such as healthy eating, physical activity and weight management.

Awareness campaigns involved such projects as travelling road shows with interactive presentations. Behaviour change was supported with contests like the *Active Family Challenge* and *No TV Month*, which encouraged families to adopt new physically active lifestyles. With school boards the health unit has supported changes in cafeteria food policies. Work with municipalities introduced the concept of “active transportation” into municipal official plans and walkable communities in transportation master plans.

While the sun is setting on the heart health and FOCUS projects, the foundation they have established gives the new Healthy Communities a solid footing.



PROMOTING HEALTH

Participants from Simcoe Muskoka in Driven to Quit Challenge2,219

Portion of all Ontario registrations for Driven to Quit from Simcoe Muskoka 10%

Students participating in tobacco use prevention, cessation, protection activities in the 2008-2009 school year20,400

Students attending drug awareness events.....4,874

Nutritious Food Basket Survey estimate of weekly cost of healthy foods for family of four (Muskoka).....\$166.17

(Simcoe)\$163.34

Strategic initiatives

A four-year strategic plan initiated in 2007 continues to guide agency decisions and resource allocation to address changing needs in our communities.

Built environment: A new resource for municipalities provides suggested Official Plan policy statements and implementation activities to assist them in creating healthy and complete communities.

The health unit also made submissions to the County of Simcoe transportation master plan, District of Muskoka active transportation strategy discussion paper, several municipal official plans, and presented to many other area municipalities and townships.

Health unit infrastructure: The health unit is proceeding with a multi-year plan to renew our offices to be more energy efficient and accessible for clients travelling on foot, by bicycle or by public transportation—and to be close to clients who most need our services. In Barrie, a new public health clinic opened at 80 Bradford Street late in 2009. All Barrie immunization, oral health and sexual health clinics are now offered from this new clinic. Drawing from the sustainable business practices proposal, the new space was designed with several energy conservation measures including

- ✂ low flush toilets
- ✂ motion lights where appropriate
- ✂ fully equipped staff kitchen to encourage waste-free lunches and snack breaks
- ✂ staff shower to support active options for travel to work
- ✂ downtown location accessible for staff and clients via public transit, walking or cycling



Strategic initiatives

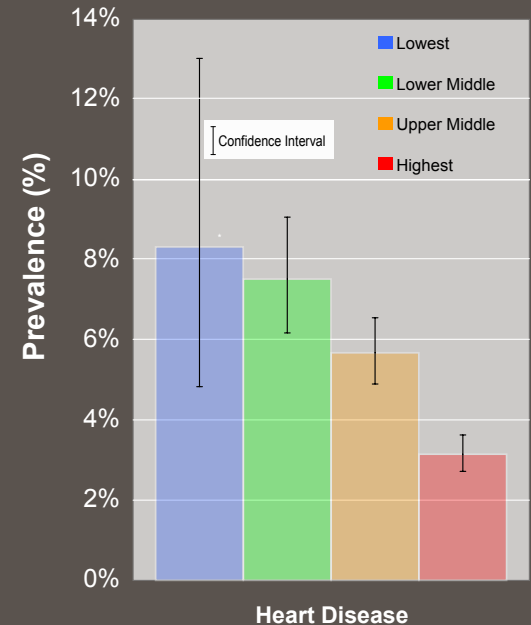
- ✂ capacity to support teleconferencing
- ✂ bike racks provided by landlord
- ✂ programmable thermostats
- ✂ multiple light switches.

The sexual health clinic was relocated in Bracebridge to be nearer the primary client base. Huntsville's office underwent some minor renovations to provide newly offered sexual health clinic services.

Social determinants of health: The strategic plan set 2009 as the year to begin focusing on the health impact of poverty, access to education, adequate housing and other factors. Presentations on the concept of broad social determinants of health were made to staff of hospitals and other health partners. Response to H1N1 influenza and resource constraints have slowed the implementation of planned activities. Nonetheless, the health unit is committed to working in partnership in a variety of community initiatives and collaborations that have social determinants as their focus.

Healthy Schools: Since 2007, the healthy schools project has gained momentum. Now, 10 schools are working closely with designated Healthy Schools public health nurses to look at strengths and issues in each school. The public health nurses work with students, school administrators and community partners to address identified health-related needs to benefit student health and learning.

Prevalence of Heart Disease
by Income Level
Ontario, 2007-2008



Data Source: Canadian Community Health Survey (CCHS), Cycle 4.1 (2007-2008) Ontario Share File; Statistics Canada. *interpret with caution. High variability.

Income is a major social determinant of health, exerting its influence on a wide variety of chronic conditions.

Youth group called for end of tobacco marketing gimmicks

Efforts by a local group of teens paid off in 2009 when an amendment to the federal Tobacco Act included prohibiting the flavoring in cigarillos, cigarettes and blunt wraps took effect. *article 4*, an anti-tobacco advocacy group of youth with the health unit, launched a campaign in March to push the Canadian government to ban flavoured tobacco products and stop the tobacco industry from creating new products aimed at teens.

Mumps vaccination campaign rolled out

A vaccination campaign to protect local college students against mumps rolled out in Simcoe Muskoka in January. Vaccine “catch up” clinics were organized at five campuses across the region. Young adults were at risk of developing mumps because they might not have received a second dose of mumps vaccine recommended for full protection and because they lived and socialized in close proximity to one another.

Children’s dental health among worst in province

A report released in February revealed more than half of local children aged seven and nine have tooth decay, the dental health of local children ranks in the bottom third in the province and preventable oral health problems exist in residents of all ages in Simcoe Muskoka. *Focus on HealthSTATS: Oral Health in Simcoe and Muskoka* based its findings on comparisons with other health units in the province and pointed to a number of factors that contributed to poor oral health in the region including a lack of community fluoridated water, low income and a lack of dental coverage.

Dental care funding increased for low-income families

Expansion of the Children in Need of Treatment (CINOT) program came into effect on Jan. 1. The program, which provides financial support for low-income families who can’t afford urgent dental care for their children, became available to children up to their 18th birthday, an increase from the previous age limit of 13. The province provided an additional \$520,000 to the Simcoe Muskoka District Health Unit to support the expansion.

Flood conditions prompt caution

High water levels in April prompted the Simcoe Muskoka District Health Unit to caution residents with private wells to be aware that flooding conditions could make their water supply unsafe. Residents were reminded to use bottled water for drinking, making infant formula and juices, cooking, making ice, washing fruits and vegetables or brushing teeth, or to boil their well water rapidly for at least one minute before use until they were able to test their well water.

Active Family Challenge!

Good for Life community partners challenged families to get up and get active during the month of May when businesses and organizations in the community offered many fun, free activities to try out, with the chance to win great prizes. *Good for Life* recognizes that physical activity is an important key in reducing adults’ and children’s risk of chronic disease, such as type 2 diabetes, heart disease, stroke and some types of cancer.



Fluoride debate in Tottenham

A New Tecumseth councillor brought forward a motion in late March to amend the certificate of approval for the town of Tottenham's drinking water, effectively ending community water fluoridation. The health unit responded with presentations about the safety of water fluoridation and the benefits for preventing tooth decay. Council opted not to pursue the issue.

Youth Action Alliance shuts down

The contracts for all provincial Youth Action Alliances concluded without renewal by the Ontario government in August, effectively cancelling opportunities to continue their work. In Simcoe Muskoka this meant the loss of *article 4*. The team of youths worked on peer-targeted tobacco awareness campaigns for five years. "I feel like a proud parent," Kara Thomson-Ryczko, youth advisor for *article 4* said. "These teens designed a whole range of grass roots programs to influence the community and politicians. And they learned a valuable lesson along the way: their voices do matter."

Kids are unpredictable, injuries don't have to be

With injuries a main cause of hospital visits for local children, the health unit reached out to parents and caregivers with some simple steps to prevent those injuries from occurring such as: watching children closely; creating safer places for children to play away from traffic; checking playground equipment before children play and maintaining outdoor play equipment at home. Fall-related injuries are the number one reason for children aged five to nine years to be treated at hospital emergency departments and they are the second leading cause of brain injuries for children. Playground equipment was responsible for more injuries than any other type of fall.

Film gets nod as best in student media contest

A total of 50 entries were submitted by youth from a dozen schools in Simcoe Muskoka to the sixth annual Youth Stomp Out Tobacco media project, which aims to raise awareness of manipulative marketing tactics used by the tobacco industry to recruit youth smokers. Four students from Holy Trinity High School in Bradford were the winners.

Celebrating Women campaign seeks to reduce women's cancers

Hair salons in Simcoe Muskoka teamed up with the health unit to raise awareness of the importance of screening during the Celebrating Women campaign in May by providing gift bags with information about screening for breast, cervical and colorectal cancer, three of the most prevalent preventable cancers among women. Regular cancer screening saves lives, and is one part of a strategy to prevent cancer, which also includes maintaining a healthy lifestyle. Deaths from all cancers in Simcoe and Muskoka are above the provincial average.

Health unit recognized as healthy workplace

The health unit was one of 12 employers in the region recognized by the Simcoe County Workplace Wellness Network for their efforts in establishing and promoting programs to create a work environment that fosters healthy behaviours and employee well-being. This is the fourth year the health unit has received honours for its efforts through the Healthy Workplace Recognition Awards.



Residents eager to see walking, cycling opportunities increase

A survey conducted by the health unit revealed in August that more than 70 per cent of respondents want more chances to walk to meet their daily needs. Respondents felt desirable communities were those that had sidewalks and pathways connected to their homes, their schools, and to stores and other places in their community. Infrastructure that makes it possible to walk to work, school, shopping or to run errands on a daily basis allows people to become more physically active and healthier as a result. Daily physical activity helps to maintain a healthy body weight and reduces the risk for illnesses like heart disease, colon cancer and Type 2 Diabetes.

Eastern equine encephalitis virus identified in Southwest Muskoka

Mosquito pools in Wahta Mohawk Territory tested positive for Eastern equine encephalitis virus in October, prompting the health unit to conduct additional mosquito surveillance in surrounding municipalities to provide a better understanding of possible viral activity. Because the virus is spread by the bite of an infected mosquito, the health unit issued a reminder to people in the area to take precautions against mosquito bites. While Eastern equine encephalitis is responsible for about six human cases of illness per year in the United States, there has never been a reported human case of the disease in Ontario.

Hand hygiene resources offered on website

Workplaces and organizations looking for resources on handwashing and preventing H1N1 flu virus were offered a variety of materials they could order and download on the health unit's website. The resources on handwashing on the website were a one-stop shop for those partners interested in reinforcing the message in their own setting. Materials included a handwashing decal, tip sheet and poster and were offered in both English and French.

Barrie tries car-free experiment

The City of Barrie, with support from the health unit, declared a stretch of its Lakeshore Drive car free on Sunday, Aug. 30 in a bid to encourage more pedestrian and cyclist transportation. While the day was rainy, there was still an enthusiastic reception from city residents.

Health unit unveils green report

A report released to the board of health in 2009 revealed that the health unit could reduce its carbon dioxide output by as much as 81 metric tonnes a year. The Environmentally Sustainable Business Practices document outlined best practices to reduce energy and fuel consumption, water use and waste production as well as change purchasing policies. The measures range from simple tasks such as adjusting computer printers' default settings so pages print on both sides, to reducing staff mileage through car pooling and teleconferencing. The report provides guidance for the health unit to demonstrate environmental leadership. It was made available to community partners as well.

