



Medical Officer of Health Report to the Board

Tuesday, February 25th, 2025

HEALTH PROMOTION

Renfrew County and District Drug Strategy

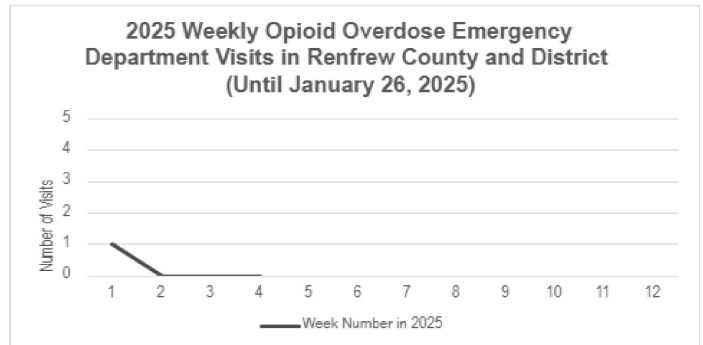
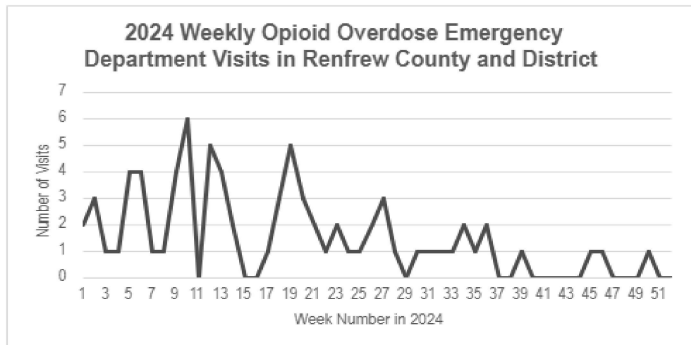
At the January Renfrew County and District Drug Strategy (RCDDS) steering committee meeting the prevention and treatment pillar reports were presented and the priorities that were recommended by the respective working groups were approved as submitted. The fourth and final pillar report from the Community Safety Working Group will be provided to the steering committee for their consideration during the February meeting.

The community engagement survey will remain open until the end of the month and at the time of submitting this report there were over 150 responses.

A draft strategy, including results of the community engagement survey will be presented to the steering committee in March for their approval, which will reaffirm the priorities and allow the working groups to move to the implementation phase.

RCDDS Substance Use Harms Indicators:

As of February 7, 2025, there were no suspect drug-related deaths in Renfrew County and District (RCD) in 2025 and there was 1 ED visit related to opioids by RCD residents. This continues the decreasing trend in ED visits that were experienced as 2024 progressed.



Ontario Naloxone Program (ONP)

Between October and December of 2024, RCDHU Harm Reduction staff members distributed 335 naloxone kits, and trained 186 individuals to use these kits (compared to 143 kits distributed and 7 trained in 2023). This substantial increase is a result of successful community engagement through the initiation of the RCDHU outreach program.

Syphilis Point-of-care Rapid Testing and Immediate Treatment Evaluation (SPRITE)/Outreach

RCDHU is partnering with the Warming Centre to bring services to the Centre on a weekly basis. Every Wednesday, Outreach nurses provide services in the form of SPRITE testing for syphilis, HIV and Hepatitis C, harm reduction supplies, naloxone kits and training, and safer sex supplies, along with connecting clients to other community organizations and RCDHU services. The first scheduled visit to the Warming Centre was on January 15th. RCDHU Outreach nurses tested 10 individuals under the SPRITE program in the first 2 weeks of attendance.

As of January 27, 2025, RCDHU Outreach nurses have completed 82 tests for syphilis, HIV and Hepatitis C in 14 locations across RCD since August 20, 2024. Many of these individuals are part of underserved communities and may not have had access to testing otherwise.

Eating Disorders Ontario – Prevention (EDO-P): Follow-up to January Report

Eating Disorders Ontario – Prevention (EDO-P) is a new, Ontario Ministry of Health-funded program focused on reducing eating disorders through education, early intervention, and community-based prevention. EDO-P delivers evidence-based school programs, professional training, and public awareness initiatives to promote positive body image and healthy relationships with food.

According to the *Ontario Student Drug Use and Health Survey (2024)*, in 2021, out of youth in grades 7 to 12:

- 56% reported being preoccupied with their weight or body shape; known precursors to disordered eating
- 40% had engaged in binge-eating in the past month
- 53% had experienced weight-based bullying

Canada-wide, between 30-34% of girls and 23-25% of boys report disordered eating symptoms (which include food restriction, binge eating, and other weight control methods). Disordered eating places youth at risk for eating disorders.

The two main goals of EDO-P are to:

1. Build local capacity for the delivery of evidence-based promotion of a positive relationship with food and body and eating disorder prevention.
2. Develop and implement a provincial strategy for the prevention of eating disorders that is comprehensive and sensitive to the Ontario context (including a variety of regional and ethno-cultural considerations across the province).

As part of this work, EDO-P provides Foundational Training for Adult Influencers (any adult who interacts with children and youth, such as teachers, parents, healthcare providers and other professionals) which is designed to promote inclusive and evidence-informed health promotion strategies and weight bias awareness.

In developing their training, Eating Disorders Ontario partnered with the Children's Hospital of Eastern Ontario (CHEO) and applied the results of a recent consultation CHEO had conducted with parents, caregivers, and patients on their experience, preferred language, etc.

HEALTH PROTECTION

Immunization

Immunization of School Pupils Act (ISPA):

RCDHU's clinical services team is conducting its annual immunization surveillance for students across Renfrew County and District, as required under the [Immunization of School Pupils Act, R.S.O. 1990 \(ISPA\)](#). All students attending school in Ontario are required to be immunized or have a valid exemption for the following vaccine-preventable diseases: tetanus, diphtheria, pertussis, poliomyelitis, measles, mumps, rubella, meningococcal disease, and varicella (for those born after January 1, 2010).

As of February 11, 2025, all 11 ISPA High School Clinics were completed. As of January 27, 2025, the number of students not meeting immunization requirements decreased by an additional 310 students since the last MOH report. Since the beginning of immunization surveillance work, the number of students not meeting requirements has decreased by about 28%.

As a next step, second notice and suspension orders will be sent to students born in 2007 and 2017 (7 years old and 17 years old) who have not met the ISPA immunization requirements. At this time, 363 second notices and suspensions orders are set to be sent this month. Orders for suspension will only become effective if immunizations or a valid exemption are not reported to RCDHU before March 26, 2025.

Staff are working closely with schools, families, and healthcare providers to support them with resources needed for students to meet the ISPA immunization requirements. Community-based catch-up immunization clinics are planned to occur throughout RCD until April 2025. Students can also be vaccinated through their healthcare provider and report their immunizations back to RCDHU, preferably through the online [Immunization Connect Ontario tool \(ICON\)](#) or via fax, mail, or email.

COVID-19 and Influenza Vaccine:

Both vaccines remain accessible through participating pharmacies, some primary care providers, and RCDHU booked appointments. As of February 11, 2025, RCDHU has administered 3804 doses of COVID-19 vaccine, and as January 31, 2025, 3761 doses of influenza vaccine via mass community-based clinics, in-home vaccination services, and mobile vaccination services to retirement homes and congregate care settings.

Respiratory Syncytial Virus (RSV) Vaccine:

- [Older Adult High-Risk Program](#)

As of February 11, 2025, 737 doses of RSV vaccine were administered to eligible individuals through community clinics and mobile clinics to 11 retirement homes throughout RCD. RSV vaccine remains available for eligible individuals through their healthcare provider or by booking an appointment at an RCDHU clinic. RCDHU continues to work with eligible partners to promote and dispense the RSV vaccine.

- [Infant and High-Risk Children Program](#)

As of February 11, 2025, 56 doses of nirsevimab (Beyfortus) have been administered by RCDHU,

130 doses have been dispensed to Pembroke Regional hospital and 387 doses to health care providers. RCDHU continues to promote and offer nirsevimab at all routine immunization clinics in RCD throughout the RSV season for eligible infants.

Emergency Preparedness and Response

RCDHU issued one extreme cold warning media release in the month of January, which was shared with partners and media outlets. Protective health messaging was also shared on social media and RCDHU's website.

Infectious Diseases

Since week 51 (December 15-21, 2024), there has been an average of two new outbreaks per week. COVID-19 accounted for ~29 % of outbreaks; however, there have been no COVID-19 outbreaks reported in the last 4 weeks. RSV accounted for ~43 % of outbreaks and flu ~29% of outbreaks, with 75% flu outbreaks beginning in the last three weeks. There have been two gastrointestinal outbreaks reported in the same time period.

COVID-19 test percent positivity has been declining and is the lowest it has been since June 2024. RSV test percent positivity is beginning to decline. Influenza percent positivity has been increasing with the most recent week showing very high levels and the highest we have seen this season.

Respiratory illness-related hospital bed occupancy has remained at very high levels for several weeks, with influenza accounting for a much higher proportion of hospitalizations in recent weeks. Emergency department visits related to respiratory illness have remained at very high levels for the past 16 weeks; however, visits have declined slowly over the last 3 weeks.

The rate of influenza cases in RCD this season is higher than the province (79.4 per 100000 population in RCD vs 28.9 per 100000 in Ontario). RCD has already seen more influenza cases this respiratory season than all the 2023/2024 respiratory season, and the number of influenza cases reported this season is the highest of the last ten years. Influenza activity across the province is expected to continue increasing over the next two weeks.

RCDHU's communications team continues to provide messaging through social media and the RCDHU website on measures to prevent the spread of respiratory illnesses. [Weekly respiratory illness updates](#) are provided on 6 key local indicators. RCDHU also continues to provide influenza vaccine to the public and supports organizations with outbreak management and infection prevention and control. It is essential to continue respiratory illness prevention measures, including:

- Getting vaccinated against the flu, COVID-19, and RSV as soon as eligible
- Staying home when sick and wearing a mask in public as appropriate
- Being particularly mindful to avoid visiting vulnerable settings when having symptoms of respiratory illness, including retirement homes, long-term care homes, and hospitals

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