



# Best in Class: Peel employees embrace a culture of

# LEARNING

## What's Inside

CPD: Everybody's business

Create it and they will come

This program really works!

Two solitudes no longer

Synergies with healthy sexuality

A passion and a purpose

Photo above: Julie Atkinson, Michael Dubinski,  
April Redor and Naomi Higenbottam

## Franca Ursitti: Finding the spice in risk-taking

**F**ranca Ursitti isn't frightened of risk-taking; in fact, she welcomes it. The thoughtful research policy analyst in Environmental Health welcomes challenges not just for their emotional charge but their tangible benefits as well. "Risk-taking requires you to break down tasks systematically and develop your own systems and processes to manage the tasks, which builds self-confidence," she says. In her view, it also sends management a positive message about how you work and what you're willing to take on.

Take your cue from Franca.  
Don't wait to try something new.

A willingness to embrace change and challenge has undoubtedly added a touch of spice to Franca's career. "Yes, I admit I go looking for it," she says, recalling a performance appraisal meeting when she had expressed an interest in stretching herself and taking on new challenges.

That wish, combined with five years of solid project management experience in Environmental Health, made Franca the ideal candidate when the call went out from senior management for support during the H1N1 crisis. Her manager didn't hesitate to put her name forward.

Franca felt privileged to be able to work on a project of such a size and scope. She was excited to have been chosen, but realized that moving to an entirely different part of the public health business would definitely qualify as a stretch experience.

"I knew I would need to quickly gain a high level of understanding of the business of communicable disease," she says, "I had to push myself and prove to myself that I could do it."

Franca credits a timely performance appraisal meeting for giving her the opportunity to help during H1N1. But for someone as eager to stretch her wings as Franca, she doesn't hesitate to act if the right learning opportunity presents itself. "I'll definitely ask if I can pursue it," she says.



### What is this thing called Workforce Development?

We develop our workforce by creating an organization and a culture that assesses and plans for its workforce needs, utilizes excellent human resource practices and promotes and sustains learning and development.

# Continuing Professional Development: Everybody's business

**T**here were many issues under discussion during the development of our 10-year Strategic Plan, but on one we were all in agreement – the necessity of continuing to support workforce development. There are several reasons for this – first, it ensures that Peel stays competitive in the search for new employees and second, that our existing staff stay engaged in their careers through the development of their own skills and knowledge.

We all know that the days when someone could graduate, find a job and do the same thing for 35 years are long gone. So, all the more reason for helping our staff stay up to date as needs, knowledge and technologies change.

But, beyond that, we want to see a workplace that supports the professional development of our employees over an entire career. From an organizational point of view, this gives us an opportunity to develop future managers and specialists, and just as importantly, it gives staff the freedom and the confidence to grow their own careers.

Continued professional development is a partnership, involving employees, the employer, professional associations and academia. Professional growth is for everyone, regardless of discipline or seniority.

While working at the Public Health Agency of Canada, I was involved in a number of initiatives aimed at strengthening the public health workforce across Canada. This was done in response to the weaknesses exposed by SARS and other outbreaks. Today, it is heartening to see some of those initiatives now making a difference on the frontlines with employees having access to part-time and distance-learning masters degrees and online courses like Skills Enhancement for Public Health.



Bev Bryant is responsible for ensuring that we continue to move forward in developing our workforce. She is passionate about giving all staff – from public health inspectors to public health nurses, from administrative assistants to analysts, from directors to dietitians – the tools they need to do their jobs to the best of their ability.

In this first Annual Update, you will see some of the professional development activities our staff are currently engaged in; an overview of the model we developed following a literature review; and a look at some of the partnerships we are developing with universities around training, research and knowledge translation.

In the coming months and years, you'll hear much more as we continue to document the exciting development of our workforce. It's a process we can all participate in and feel proud of. It's also a vital step along the journey toward achieving our vision for Peel Public Health – to be the Best in Class.

*David L. Mowat*

## Did You Know?

Over 100 Peel Public Health employees participated in our 2009 Conference at Home!



Continued professional development is a win-win partnership between the employee and the employer.

## Mark Pajot

### finds a bridge between public health and academia

Continuing education isn't just about expanding what you know. It can also be about expanding who you know. Just ask Mark Pajot, research and policy analyst with Environmental Health. He recently completed his Masters in Environmental Studies at York University and those studies have opened a few unexpected doors.



The research-based program at York takes a creative approach to the master's degree: it encourages exploration by giving students the flexibility to take ownership of their studies and pursue their own research interests.

Mark chose to focus his studies on climate change from a health perspective. In the first of several interesting projects, he participated in an adaptation study with leading environmental researcher Dr. Quentin Chiotti. He later became involved in a research project with Health Canada's climate change office under Dr. Peter Berry, assessing Canadians' perceptions of health impacts from climate change.

"I have learned that there is significant interest in the academic world in collaborating with public health practitioners," says Mark. He is hoping to maintain his connections with academia and find synergies in their various areas of practice.

"My managers were very supportive of my taking my master's, and I'm grateful for that," he says. Together with his supervisor, they developed a schedule so he could continue working while pursuing his studies.

In addition to his position as a research and policy analyst, Mark also serves as co-lead of a research group at the University of Toronto's Centre for Urban Health Initiatives called Environmental Health Justice in the City.

In addition to his master's degree, Mark holds a BSc in Health Promotion.



# Workforce Development: Where we are, where we're going

**Bev Bryant, Manager, Education and Research,** talks about her vision for workforce development

**Q** Does workforce development happen from the ground up or from the top down?

**A** It's a little of both. Peel Public Health is, at its core, a service organization and is governed by provincial standards. We now have core competencies for public health in Canada and our staff must develop knowledge in these central categories.

These guidelines should not, however, stifle curiosity. Staff must be free to explore their own professional interests and take on new challenges. We want to nurture that curiosity and make sure that we have support systems in place to move them along, including improved library services and new training opportunities.

The responsibility for workplace development is really a shared one.

**Q** What is the vision for workforce development in Peel Public Health?

**Peel Public Health has an amazing diversity of occupations and roles, as well as a multi-generational and multi-ethnic make up. Our challenge is to pull all of these people and roles together to perform as one complex service.**

**A** We're serving a population that is rapidly evolving and has complex needs. The tools we have at our disposal to serve them are becoming more sophisticated.

It is particularly important that we have an innovative and responsive workforce to provide better service to the Peel community. In order to continue to meet the needs of this population and, when possible, anticipate them, we are nurturing a highly adaptive learning culture at Peel Public



Lyndsay Kawamoto, Coordinator, Education and Research and Bev Bryant, Manager, Education and Research

Health. We envision a culture that is more responsive, promotes and rewards risk-taking and is open to new ideas. This is ultimately how we will achieve improved health outcomes.

**Q** What is the main challenge faced by Peel Public Health's workforce?

**A** Peel Region Public Health has an amazing diversity of occupations and roles, as well as a multi-generational and multi-ethnic make up. Our challenge is to pull all of these people and roles, and the competencies within these roles, together to perform as one complex service. The goal is to reach coordinated outcomes that best serve the health of our community, while at the same time encouraging creativity and adaptability in the group as a whole.

**Q** What has been the response to new workforce development initiatives?

**A** Word on the street is that people are keen. They're interested in taking on new challenges. Many have questions and the truth is we don't have all the answers just now. My best advice is to stay engaged, keep your eyes and ears open and look forward to some exciting times ahead!



Good human resource management makes for fruitful and engaging career paths.

## Peel Public Health Conference Presentations

Name	Conference	Presentation
Yvonne Andrade	OPHA Toronto	Implementing the Baby Friendly Initiative in a Public Health Setting
Julie Atkinson	Canadian Public Health Association June 2009 Conference	Lay Health Educator Breast Screening Project
Bev Bryant	3rd National Community Health Nurses Conference Calgary	An Evidence-Based Mass Media Campaign: Formula NO Thanks
Kathleen Dooling	National Specialty Society for Community Medicine	Evidence-Informed Public Health Policy: Is there a role for the NSSCM?
Anne Fenwick	3rd International FASD Conference, March 14, 2009	Setting Up A Virtual Diagnostic Team: Starting From Scratch
Anne Fenwick	CPHA Conference June 10, 2009	An Evidence-Based Mass Media Campaign: Formula No Thanks
Sue Fernane and Adele Lane	National Community Health Nurse Interest Group, June 2009, Calgary Alberta and OPHA November 2009	Promoting Evidence-Informed Decision Making at the Local Level: The Case of a Knowledge Broker Mentorship Project
Paresh Gandhi	Peel Conference at home	Doda: Street Drugs in Peel Region
Marco Ghassemi	CPHA, OPHA, 2009 Health Promotion Ontario Annual conf.	Developing Pan-Canadian Health Promoter Competencies
Beata Hilliard	Metamorphosis Conference – Practical Approaches for Nutritional Solutions Nov. 20, 2009	Safe Food Handling Techniques
Teresa Ho	The Canadian Evaluation Society Annual Conference	The CDIP Program Planning and Evaluation Initiative
Sabrina Merali	Ontario Women's Health Network Conference – OPHA	Keys to Women's Health; Addressing Health Inequities through Women Health Circles
David Mowat	University of Toronto, March 2, 2009	Good governance for local environment and health decision-making
David Mowat	Annual Conference, Faculty of Public Health (UK)	A Journey Towards Evidence-Based Decision Making
David Mowat	North American Primary Care Research Group	A Systematic Realistic Review of Community-Based Health Research Partnerships – A Work in Progress (Poster)
Alexis Silverman, Natalie Hiltz	CHICA – Canada 2009	Introducing Routine Practice and Infection Prevention and Control to Police Officers in a Large Municipal Service.
Domenic Storti	Sex Tech conference, San Francisco, March 2009	Hard to Spell, Easy To Catch: A Sexual Health Social Marketing Campaign
Debbie Valickis, Nancy Hall, Kim Baker	Annual Ontario Palliative Care Association and Hospice Association of Ontario conference 2009	"Bugs at the End of Life"
Cathy Vance and Lori Levere	INFACT Oct. 22, 2009	Toronto Breastfeeding: Making the Connection

# The **MODEL** that tells our story

by Bev Bryant

## "A picture tells a thousand words"

is the way I feel about this model – in fact, it's the way I feel about life. When done well, visuals make everything easier to understand. Workforce Development was a relatively new concept when I started digging in to this work a few months ago. After consulting with Dr. Ivy Bourgeault and her colleagues from the University of Ottawa, I soon realized that a model was the best place to start.

The benefits of having a model are many. If done well, models make a complicated or complex concept easier to understand; they show connections and relationships; and they help us to develop a common terminology around the subject.

This model does all of those things; I invite you to explore it. There are several key elements at play when we think about workforce development in public health – there is the planning for the staff we need, the policies and procedures that govern human resources, and of course, training and capacity development. Then there's the outside world – institutions

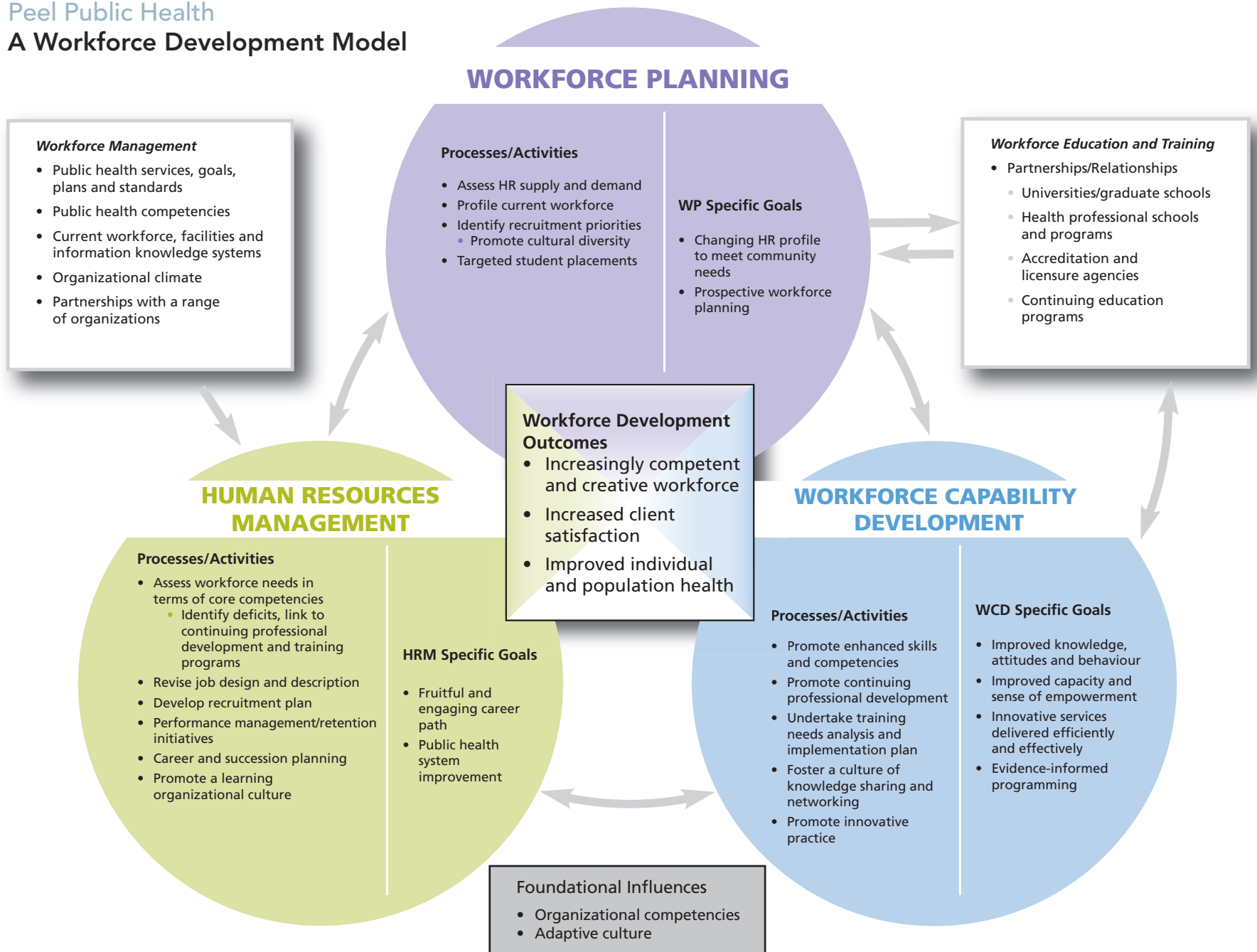


where we go for training, and those that govern our actions and hold us accountable. Holding it all up is an organization that is nimble, adaptable and committed to the process of workforce development.

Peel's Model for Workforce Development is the jumping off point for our work in this area. When all the elements are fine-tuned and working in harmony, we should see an increasingly skilled and innovative workforce. That's what I'm counting on!

Stay tuned for many more visuals depicting our progress in the months ahead.

## Peel Public Health A Workforce Development Model



Peel Public Health has a reputation across Ontario as being a leader and an innovator. Many of our programs receive a significant amount of attention provincially and nationally. We want to build on this.



Ninder Thind and Rani Virdee



## Peel Public Health Library Services Let me help you with that!

**A**nnie Kakooza wants you to ask, “How can the library help me with this?” Referred to as “The Library” by many, Annie assists staff with their research – sometimes with as little as a nudge to point them in the right direction. But she also offers what she calls a complete “handholding session,” in which she guides staff through every step of the process.

### What’s New in the Library?

Peel Public Health recently worked with a consultant, Jessie McGowan, on a needs assessment of our library and its services. Their recommendations led to the following improvements:

- The library joined a consortium of libraries from other public health units, hospitals and health facilities, thereby increasing access to a greater volume of relevant databases and full-text articles.
- The library now has access to databases using the OVID virtual interface – an interface that many Peel Public Health staff are familiar with and prefer.
- Library staff will be growing to keep up with the requirements associated with evidence-informed research and a more reference service-oriented approach.
- Lyndsay Kawamoto will be working part-time with Annie as Library Coordinator.
- The library will be increasing access to its services via an improved web presence and more opportunities for consultation at the early stages of program planning.



Annie, Jessie and Lyndsay

### Annie and Lyndsay can help you by providing:

- Access to unique resources and targeted search strategies to ensure better and more relevant results
- More “push” activities that send you the information you need and want
- Consultation on getting that question just right
- Training opportunities on OVID, other databases and refined searching

**So, keep asking the question: How can the library help me with this?**

## Did You Know?

*There are many ways to grow. The library has books and resources pertaining to personal growth, such as **7 Habits of Highly Effective People** and **Who Stole My Cheese?** Annie will gladly take you on a guided tour of useful, interesting...and some unexpected resources.*

## Create it and they will come

With a greater demand for EIDM and corresponding requirement for research and library use, there is a new necessity to improve our library resources. “We also know that if you make the resources better, demand for them will go up,” says Annie. She sees this cyclical growth as something that will continue for the foreseeable future and is proud to be an ambassador for the program. “Talking up the services provided by the Health Services Library is what I do naturally,” she says. “Now, I’m excited by the prospect of raising the profile of the library as an invaluable partner for researchers and a central hub for all public health-related information.”

## Working the kinks out!

In theory most of us love the idea of the greater efficiencies presented by new software. Where we hesitate is in making the investment of time required to learn how to use it.

Wouldn’t it be great to have someone get in there and do the “grunt work” for us? This year, an enthusiastic group of 10 volunteers from across Peel Public Health took the learning plunge for us, offering to assess the merits of a new online research tool called RefWorks.

The software is designed to help researchers gather, manage, store and share all types of information. More specifically, it tracks references, puts them into the correct format for endnotes, footnotes or a bibliography, and can even make an evidence table that summarizes research findings. Peel Public Health purchased 10 software licences for the pilot project.



RefWorks (left to right): Sheila Datta, Melanie Gillespie, Sue Fernane, Julie Stratton

The group decided that the most efficient way to tackle the challenge was through a combination of self-directed learning and peer-led study. Since the software was new to everyone, each student was keen to share their learnings as the pilot got underway. They worked through each new lesson on their own using the online training modules offered by RefWorks, and after each session, the team regrouped to review the module and brainstorm on how to integrate the new learning into their work.

The collaborative learning environment kept the team motivated as they tested the features of the software and worked through the kinks. And we’re the lucky ones – as a result of their efforts, we now have 75 licences of RefWorks, making the software much more widely available throughout the organization.

**To learn more about RefWorks, and how to apply it to your own research challenges, contact Lyndsay Kawamoto at extension 2844.**



## Research Workshop with Susan Jack "a breath of fresh air"

The dozen or so Peel Public Health employees who attended Dr. Susan Jack's seminar on Qualitative Health Research came away with glowing reports. They had different reasons for attending – some merely wanted to develop an understanding of the value of qualitative research, while others were looking for more practical and applied benefits. "I was impressed to learn that qualitative research is methodologically sound," says Sharon DaCosta, health promotion officer in Family Health. "It's a wonderful tool for doing program evaluation."

Dr. Jack is an associate professor of nursing at McMaster University and this was her first opportunity to teach this course to Peel employees. After the week-long McMaster EIDM course, there was an identified need within Peel Public Health for a more intensive session on qualitative methods. Susan is a recognized expert in the area and brings passion and extensive knowledge to the subject matter.

Using an interactive teaching style, she structured the course around the benefits and complexities of informing public health through qualitative research.

Mark Pajot, research and policy analyst with Environmental Health, reflected that the course was a wonderful examination of paradigms and how they are viewed in public health. "The material has very useful applications to our work," he says, summing up the day as "a great breath of fresh air."



## Forming new connections at Evidence-Informed Decision Making (EIDM) Workshop

The EIDM workshop at McMaster University, facilitated by **Dr. Maureen Dobbins**, was attended by 17 Peel Public Health employees. Participants from each division came together in June to participate in this intensive exposure to the process of evidence-informed decision making and in particular, critical appraisal of research literature. The participants learned how to find, critically appraise and make sense of research evidence. Armed with that skill, they'll be in a better position to put knowledge into practice when making decisions about program development and policy-making.

The workshop delivered even more than expected, as employees benefited from spending time with colleagues from other divisions. **Adele Lane**, manager with Healthy Sexuality (*photo below*), and Claudine Bennett, research and policy analyst in Family Health, are now in regular communication. "The course material was very beneficial," says Adele, "but the unexpected bonus was meeting other staff from within public health. Those kinds of connections are useful long after the workshop is over."



*Did You Know?*

**Adele Lane** is a certified Group Fitness Instructor Specialist with Can-Fit Pro. In December 2009, Adele received certification to teach Resist-a-Ball Training and has been certified to teach Bosu Training and Cardio Kick-box.

### Peel Public Health Staff Educational Updates for 2009

Degree	Institution	Number of Staff
<b>Masters Degrees – Completed in 2009</b>		
Masters in Environmental Studies	York University	2
Masters in Nursing	University of Toronto	1
<b>Masters Degrees – Currently Enrolled</b>		
Masters of Public Health	University of Waterloo	6
Masters of Science in Nursing	York University	2
Masters of Science in Nursing/Education	University of Phoenix	1
Masters of Nursing	University of Toronto	3
Masters in Public Health, Health Promotion Program	Dalla Lana School of Public Health, University of Toronto	1
Masters of Science in Community Health	University of Toronto	1
Masters of Public Health	London School of Hygiene and Tropical Medicine – University of London, England	1
Masters of Education	OISE, University of Toronto	1
Masters in Environmental Studies	York University	1
<b>Baccalaureate – Enrolled</b>		
Art and Art History	Sheridan, University of Toronto	1

In 2009, Peel Public Health staff received the following certifications:

- Health Services Management Certificate training at Ryerson (Enrolled)
- Health Services and Policy Research from Ontario Training Centre in Health Services and Policy Research
- Organization Development and Change Management from Canadian Organization Development Institute
- Counselling Skills at Centennial College (Enrolled)
- Non-violent Crisis Intervention (CMHA)
- Concurrent Disorders Training (CMHA)
- Motivational Interviewing (CMHA)
- Business Communication from Sheridan
- Certified in Infection Control
- Leadership and Management Certificate Program through McMaster University (Enrolled)
- Community Health Nurse Certification (see story, page 8)

#### PHAC Courses catching on at Peel

Over a dozen employees expanded their knowledge of basic epidemiology by taking online skills enhancement courses through the Public Health Agency of Canada. Online learning has become a popular mode of continuous professional development for a growing number of Peel employees. For more information visit [www.phac-aspc.gc.ca/sehs-acss/index-eng.php](http://www.phac-aspc.gc.ca/sehs-acss/index-eng.php)



## Sharing real-world evidence with Diane Finegood

In the real world, things don't always go according to plan. But on the upside, there is always an opportunity for learning. That was the theme of Simon Fraser researcher Diane Finegood's seminar delivered to over 75 Peel Public Health employees on the importance of incorporating "real-world" evidence into our practice. In truth, according to Dr. Finegood, valuable day-to-day learning is grounded more in our struggles and missteps than in our successes. She reminded the participants that only by sharing our stories with others can we as an organization better evaluate what works and what doesn't work in the field.

Dr. Finegood is promoting the practice on a large scale in her role as executive director of the CAPTURE Project (Canadian Platform To increase Usage of Real-world Evidence) – an initiative to build a web-based platform that captures what's going on in the field across Canada. The collective experience supports the evaluation of chronic disease prevention programs and increases the understanding of what interventions work, for whom and in what contexts.

The seminar has inspired some attendees from Peel Public Health to establish new "communities of learning" in their divisions to facilitate the process of incorporating real-world evidence into their program evaluation.

*Did You Know?*

*We have over 25 different job descriptions within Peel Public Health.*

## Learning from our mistakes



After attending a seminar on the use of "real-world" evidence with researcher Diane Finegood, program planning and evaluation team members **Teresa Ho** and **Bhavna Sivanand** saw the potential of integrating the day-to-day learnings of frontline staff into their workforce development plans, particularly the struggles and challenges encountered, to improve program effectiveness. However, in order to put their idea into practice, they had to find a way to encourage staff to come forward and share their experiences without fear of being labelled a failure. Their solution? Regular program dialogues within the division. While the program is still in gestation, Teresa and Bhavna are excited by its potential.

## This PROGRAM really works!

Over the years, teams in the Chronic Disease and Injury Prevention (CDIP) division had developed a practice of always coming up with something new when they needed a method for planning and evaluating programs. This inconsistency posed challenges to division-wide strategic planning and to conducting quality assessment of program outcomes. Something had to change.

In 2006, a program planning and evaluation (PPE) group was assembled to conduct an internal program audit. Comprising PHNs, HPOs and project specialists, the PPE team set out to:

- Clarify standards for performance measures
- Improve how they set indicators for both process and outcome measures
- Assign accountability for activities and achievement of standards
- Develop a process for tracking and reporting on performance measures and
- Ensure performance measurement results are used to improve process and achieve objectives

In its primary goals, the project was a roaring success: the team succeeded in creating a new program planning and evaluation initiative that would increase divisional capacity in program development and improve the quality of programs and service delivered by the division.

As they worked on the project, the team realized that the new program had some unexpected – and equally productive – outcomes. The project took on a life of its own, becoming a dynamic workforce development process in which staff identify their own needs and participate in the solutions. Subgroups within the unit contribute training ideas and tools and develop their own curriculum.

They didn't plan it that way, but the streamlined planning and evaluation initiative had also become a vital training tool that is fun and engaging for everyone. Best of all, the model is highly adaptable and can be used by other units within Peel Public Health.

How one Peel Public Health division set a new standard for planning and evaluation – and found a training tool in the process



Members of the PPE team

## Solitudes no longer: Research and practice come together at Peel

Evidence-informed decision making is one of the strategic directions identified in our 10-year Strategic Plan. Increasingly, we are tapping into the existing body of research in order to find the evidence that helps us make better decisions. Where does that knowledge come from? It is based on the empirical evidence published by researchers in various fields of interest.

This research enhances our ability to determine which services are of the greatest value to the public and the best ways to deliver those services. The time and energy we devote to data acquisition and evaluation is going to help Peel Public Health maintain its reputation as one of the leading public health units in Canada.

But there is more to it than that. In the past, research and practice were two solitudes. Research did not often find its way into practice and there was little contact between researchers and practitioners. This is changing rapidly as practitioners enhance their ability to assess and utilize research, and as researchers connect with "knowledge users" as part of their research planning and grant application processes.

When it all comes together, we can achieve "evidence-based practice" and "practice-based evidence." But this can only happen if practitioners are willing to get involved. We must engage with academia in research and knowledge translation projects and then report the outcomes. This investment of our time and energy is essential, not just for our own health practice but for effective and responsive delivery of care and service to our clients.

We must also share with the next generation. Future public health practitioners benefit from the kind of learning they can get only by contact with practitioners. Contact with students energizes our work environments and helps keep us current with the latest theories and debates.

Research is not our mandate, but it is a critical activity in the creation of effective programs, in the evaluation of those programs and as a means of promoting the application of new knowledge to practice. As we move forward, research is the foundation of expanding the scope of public health practice to best address the increasingly diverse and complex health needs of the citizens of Peel.

## Learning smarter together: Nurses create an online community of support

When Leah Baan, Karen Burd and Linda Hatch, public health nurses in Healthy Babies Healthy Children, decided to pursue their Community Health Nurse Certification in 2009, they knew they could count on the support of colleagues Elizabeth Walker and Nicole Labrie. The two nurses had taken the course the year before and were prepared to share their class notes and study plans.



Leah Baan and Karen Burd

The group was surprised to discover another avenue of support – this one from students they met online through the Canadian Nurses Association website. They soon set up a cross-Canada study group that included a PHN in Brantford with a Communicable Disease background, a professor of nursing from North Bay and three RNs from Newfoundland, who became known as the Gander Girls! It was the perfect meeting of the minds, as those with experience in Home Care complemented the skills and knowledge of those working in public health. "The course had its challenges," says Karen, "but as a team we were able to break down the complex subject matter and by applying our unique areas of expertise, make it understandable to each other."

As they prepared themselves for the section of the certification exam on disaster and pandemic planning, the nurses didn't imagine they would soon be putting the knowledge into practice on the frontlines of H1N1. "We were incredibly prepared for H1N1 in terms of the consent process and the competencies on immunization," says Leah.

All three are now certified, but aren't resting on their laurels. "We highly recommend that nurses pursue this certification," says Linda. "And to get the next group started, we're offering to share our study notes and support them in whatever ways they need!"



Staff from Family Health, Dental Team and Communicable Disease

### Research and Knowledge Translation Projects 2009

Title	Description	Key Contact at Peel Public Health
CIHR Grant Assessing chronic disease prevention capacity in Canadian public health systems	Studies longitudinal patterns and determinants of chronic disease prevention capacity.	Dr. Raisa Deber, Dr. David Mowat and numerous partners
CIHR Grant (April 2009) Approaches to Accountability: Implications of Goals, Governance, Services, and Sub-sectors	An interdisciplinary team, working in partnership with policy makers across sub-sectors, will clarify best practices to achieve accountability under various circumstances.	Dr. David Mowat
CIHR Grant (Oct. 2009) - Partnerships for Health System Improvement (PHSI)	PHSI is designed to study the impact of a Knowledge Transfer and Exchange strategy on organizational knowledge, capacity and behaviour for EIDM.	Dr. Maureen Dobbins, Dr. Megan Ward and other partners
Coalition Linking Action & Science for Prevention (CLASP)	See Page 10 for details.	Peyun Kok and Bhavna Sivanand
EXTRA Fellowship (2008 – 2010) Tools and Processes for Evidence-Informed Decision Making	The EXTRA fellowship builds capacity in health system leaders to bring evidence into organizational processes. This two year fellowship builds and tests tools for EIDM.	Dr. Megan Ward



Jatinder Diwan, Maureen Horn, Marlene Bloomfield, Malincia Barnett and Elizabeth Hernandez



Paresh Gandhi, Jelena Grmusa, Susana Ostrowski and Michael Argana



Tania Vrbaneck

In **2009**, our staff contributed to public health practice by participating in the following committees:

- Association of Public Health Epidemiologists of Ontario and the Canadian Society for Epidemiology and Biostatistics Scientific Sub-Committee
- Association of Public Health Epidemiologists of Ontario's Core Indicators Reproductive Health Sub-Group
- Association of Public Health Epidemiologists of Ontario's Strategic Planning Work Group
- BLIERS (Base Level Industrial Emissions Requirements), Electricity sub-group, as part of Environment Canada's Comprehensive Air Management System
- Bramalea Community Centre Health Council
- Communicable Disease Surveillance Network back in 2003
- Community and Hospital Infection Control Association (CHICA)
- Community Health Nurses' Interest Group (CHNIG)
- Community Medicine Residency, U of T
- Health Professionals, Interventions, Information and Training Group, Extreme Weather Initiative, Health Canada
- Health Promotion Ontario (HPO)
- Ministry of Environment Interagency Working Group on Air Quality
- NCCMT Board
- Needle Exchange Program
- Ontario Agency for Health Protection and Promotion
- Ontario Drug Awareness Partnership (ODAP)
- Ontario Health Promotion Conference Planning Committee
- Ontario Healthy Workplace Coalition
- Ontario Public Health Association/ Association of Local Public Health Authorities Workgroup on the Social Determinants of Health
- Ontario Regional Safer Bars Committee
- Ontario Society for Nutrition Professionals in Public Health
- OPHA Environmental Health Workgroup
- Provincial Maternal-Newborn Breastfeeding Services and Support Work Group
- Public Health Agency of Canada's Health Promotion Network
- Public Health Human Resources Task Group of the Federal/Provincial/Territorial Public Health Network
- Rapid Risk Factor Surveillance System (RRFSS) Central East Regional Group
- Rapid Risk Factor Surveillance System (RRFSS) Workshop Planning Group
- Registered Nurses' Association of Ontario
- Resource Integration Committee
- Tuberculosis Committee of the Ontario Lung Association
- United Way Peel Region Chinese Advisory Council

Louise Aubin



## Making a fresh start

**S**hirley Cheng was initially discouraged when she learned on arriving in Canada in 2000 that her credentials from West China University of Medical Science weren't recognized in the Canadian workforce. "It was a difficult thing to discover that I wouldn't be able to practice my chosen profession here," she says. "For a little while I didn't know what to do."



Fortunately, that feeling didn't last for long. Shirley applied and was accepted as a health outreach worker with Peel Public Health. Eager to keep expanding her opportunities, in 2007, Shirley enrolled in the Masters in Public Health (MPH) program at the University of Waterloo. The program is a good fit because it recognizes Shirley's Chinese credentials and also allows the working mother to study online.

Even with her extensive health background, being back in school has had its challenges, including adjusting to a new language and culture. "The Social, Culture and Behavioural Public Health course was the most difficult because it presented a very different way of thinking than what I was used to in China," she says.

In her characteristically determined way, Shirley is confronting the challenges with gusto. She is taking English courses and is upgrading her writing and speaking skills through a Bridging Women course at York University. She still finds time to volunteer on the United Way Chinese Committee and with Cross Culture, a program that hosts new immigrants.

It all wouldn't be possible, the ambitious student says, without the support of her Peel colleagues and the fact that Peel encourages professional development. "Being back in school has boosted my practical knowledge of how public health works in Canada," she says, "and has given me more confidence in my daily work life."

Shirley's fresh start has a rosy future as she looks forward to graduating from the MPH program. "I hope to graduate with my Masters in Public Health in 2011, and then hopefully qualify for a new position with the Region!"

### Research and Knowledge Translation Projects 2009

Title	Description	Key Contact at Peel Public Health
Low Birth Weight and Still Birth Assessment	Working with St. Michael's Hospital, we are developing growth curves to identify the relationship between ethnicity and low birth weight.	Julie Stratton
Maternal Risk Perception study	With the University of Ottawa, we are investigating new mothers' perceptions of environmental health risks to their children.	Louise Aubin
National Community Health Nursing Study (Nursing Health Services Research Unit and others)	Investigates demographics of CHNs, enablers and barriers to practice at full scope of competencies and optimal organizational attributes.	Dr. David Mowat
Needs Assessment for Program Development for Newcomer Parents in Peel	The Alcohol, Drugs and Addictions Team (ADAT) assessed the needs of newcomer parents to learn about the prevalence and circumstances of drug and alcohol use among their children and youth.	Elizabeth Amorim
OUT-TB Web	See Page 10 for details.	Dr. Kathleen Dooling, Monali Varia, Jewrenia Walsh
Peel Data Zones	We are working with McMaster University, McMaster Institute of Environment and Health to develop data zones for Peel.	Julie Stratton
Peel Public Health Infectious Disease Simulation	See Page 10 for details.	Dr. Eileen de Villa, Monali Varia

## Preventing the spread of TB

Peel Public Health is participating in a pilot project with the Ontario Agency for Health Protection and Promotion, Infonaut and Toronto Public Health on the development of a web-based tuberculosis surveillance and communication tool called OUT-TB. The GIS-based tool uses laboratory and case data to identify identical strains of TB cases in other jurisdictions in Ontario in order to identify transmission patterns. The goal is to ultimately prevent new cases of TB infection.

Participating in the project from Peel are Dr. Eileen de Villa, Associate Medical Officer of Health, Monali Varia, Manager, Communicable Disease, Jewrenia Walsh, Supervisor, TB Control and Dr. Kathleen Dooling, Associate Medical Officer of Health.

## Tracking infectious disease across space and time

After SARS and H1N1, it's not surprising that researchers and public health officials are intent on finding a way to plan more effectively for infectious disease outbreaks. Peel Public Health is partnering in the development of an exciting web-based tool that will allow users to visualize the spread of an outbreak across space and time. Because it is built on the underlying geography of Peel, it will allow for more accurate simulation of outbreak events and the ability to test the effects of immunization or quarantine. While the pilot model is designed for seasonal and pandemic influenza, the application can be modified for other infectious disease outbreaks.



**Dr. Eileen de Villa**, Associate Medical Officer of Health (photo below) and **Monali Varia**, Acting Manager, Communicable Disease (photo above), are Peel representatives



on the project team. Partners include the Ontario Agency for Health Protection & Promotion, University of Waterloo, Kingston Frontenac Lennox and Addington Public Health, Queen's University Public Health Informatics, Infonaut Inc. and GeoConnections.

## A research niche in urban planning and health

As a master's student in environmental studies at York University, **Peyun Kok** developed an interest in how urban planning affects our health. To her surprise, she soon discovered that there was no real interest in the topic in the planning world. By chance, she attended a conference where Dr. David Mowat was speaking and suddenly realized that it isn't the planners who are interested in the subject, but the health department! She felt compelled to approach Dr. Mowat, and their conversation led to Peyun securing a student placement at the Region of Peel in 2009.

During her placement period, there was growing talk in public health about the CLASP project – Coalitions Linking Action & Science for Prevention – an interprovincial research initiative of the Canadian Partnership Against Cancer. The CLASP project is the first program dedicated to integrating cancer prevention with other chronic disease prevention strategies. (CLASP funding supports more than 30 organizations working in a coalition to link the lessons learned from science with the lessons learned from practice and policy, building upon what is already being planned and put in place for primary and secondary prevention.)

It was the ideal opportunity for Peyun to further pursue the research subject that excited her most. With funding from CLASP, she was able to secure a long-term contract as a project specialist with the Region and become the project lead on a CLASP research project.

The goal of the Peel project is to develop, scale up and share tools to address the relationship between our health and the way we have organized our physical living and working environments. Peyun speculates that the outcome may be a set of policies or even a health index that acts as a checklist for planners to use in judging whether or not urban planning is actually promoting health. The program could yield promising results for health policy in Peel – and for Peyun, she still marvels at her good fortune of being in the right place at the right time!



## Family Health creates synergies with Healthy Sexuality

In her pursuit of a Masters of Public Health at the University of Waterloo, **Sharon DaCosta**, a health promotion officer in Family Health, completed a program evaluation course and was given an assignment to create a program evaluation plan. Through a combination of good fortune and adept networking skills, Sharon and her workgroup soon found themselves knocking on the door of the Healthy Sexuality program at Peel Public Health.



She met with Adele Lane and Vanessa Secan of our Healthy Sexuality section of the Communicable Disease Division to find out more about the group and what they needed to achieve. Together they created a logic model and evaluation plan that will be used to inform future work. "There was a wonderful synergy between their work plan and my continuing education assignment," says Sharon. "I feel incredibly lucky that it happened this way."

Sharon sees a direct correlation between the 10-year Strategic Plan and her growing understanding of population health theory and practice. "When I look at my course work, it's like seeing the translation of the theoretical platform into action," she says.

Sharon has completed six of the 10 courses required for her masters and she isn't slowing down. She credits her ability to balance work and study time with being able to take courses online. "You must constantly work at it and pay attention to where you're at so as not to be overloaded," she says and adds with a smile, "And open communications with supervisors has also been a huge help!"

### Did You Know?

Marie Baltazar participated in the PHAC Skills Enhancement program in 2009 as a facilitator. In 2009 she facilitated a winter session for Basic Epidemiological Concepts and spring and fall sessions for Measurement of Health Status.



## Finding passion and purpose in adult education



**P**adi Meighoo, public health nurse with the Healthy Babies Healthy Children program knew she wanted to pursue higher education, but was unsure in what discipline. After getting her bachelor's degree in nursing, Padi started studying for her masters degree in nursing, but

she didn't feel a connection to the program. The experience did, however, help her develop more self-awareness about her skills and career aspirations.

Last year she began working on her Masters of Education at the Ontario Institute for Studies in Education at the University of

Toronto. She believes that adult learning needs to be personally meaningful, and says the program is helping her find her passion and her purpose.

"As a result of this program, my interactions with clients are much richer, and I'm learning to be more appreciative of where others are coming from," she says. The principles of adult education have taught Padi the importance of presenting information that is tailored to the client's individual needs. "Now, I'm always asking, is this meeting the client's expectations and how can I make it better?" she says.

Having the support of her family has given Padi the confidence to stay grounded in both her studies and her job. Her own positive experience with higher learning isn't one she plans to keep to herself. "I'll be taking my children to my convocation to set the example so they can picture themselves doing it as well."

"Student placements are a win-win proposition. For the student, it's an opportunity to gain invaluable hands-on experience. For Peel Public Health, having a student in our midst re-energizes the team, introduces us to new ideas, and gives us a better shot at hiring the best candidates after graduation."

Bev Bryant

### Student Placement

Host	Educational Institution	Numb.	Position/Team	Supervisor
Chronic Disease & Injury Prevention	University of Waterloo	3	Health Promotion	Linda Pope
		1	Dietitian	Michael Dubinski
Communicable Disease	McMaster University	1	Vaccine Management	Isabelle Mogck
		1	University of Toronto	Monali Varia
Environmental Health	Ryerson University	10	Vector Borne Disease	Paul Proctor
		7	Public Health Inspection	Danny Martin
		1	University of Toronto	Liz Haydu
Family Health	McMaster University/ York University	4	Nursing	Angela Garrison, Tracy Sauder, Claudine Bennett
				MOH/AMOH
Office of the MOH	University of Toronto, McMaster University	4	Community Medicine	MOH/AMOH
		1	Medical Student	MOH/AMOH
	York University	2	International Medical Graduate	MOH/AMOH
		1	Health Promotion	Inge Roosendaal

## Lifelong learning comes full circle

**E**nvironmental health manager Paula Dall'Osto knows a thing or two about educational upgrading. In her 31 years with Peel Public Health, she has seen standards continuously evolve, and her career has



evolved with them. She completed her degree and a certificate in Occupational Health and Safety, earned a Health Certificate at McMaster, completed a number of PHAC courses and has started on her masters degree.

Today, Paula is applying her passion for learning to a new undertaking. She's heading up the implementation of the new Canadian Institute of Public Health

Inspectors (CIPHI) core competencies.

Paula connected with Learning and Development to work through a training needs assessment and development plan for her division. Staff will be surveyed to assess where additional core competency training is required. The resulting training plan will ensure that Public Health Inspectors at Peel are continuously upgrading their skills, something Paula clearly believes in!

## Did You Know?

Peel Public Health employees completed over 1250 courses in 2009

## Working together to support learning and development

by Judy Zon, Manager, Learning and Development



**T**he Learning and Development team is proud to salute the achievements of Peel Public Health in its learning endeavours. As providers of corporate learning programs, we support core skill development through a variety of formal and informal programs including classroom training, learning networks, mentoring and tuition assistance. In addition we provide consulting advice and customized programs.

While the Learning and Development unit plays a critical role in supporting learning, overall success can be attributed to the department actively embracing learning as a shared responsibility. Managers and supervisors are expected to assist staff with growth and development and employees assume responsibility for their own learning.

The Region has recognized the clear connection between employee engagement, leadership and learning and how they contribute to organizational success. Continuing our journey towards becoming a "learning organization" is part of our Common Purpose and more important than ever before.

### Top 15 Learning and Development Training Courses

Rank	Course	Attendees
1.	EIM Training	155
2.	Effective Communication	38
3.	Project Management 101 – Corporate Project Management	37
4.	Become a Career Activist	27
5.	Effective Presentations	27
6.	Virtual Library	27
7.	Minute Taking	26
8.	PowerPoint Level 1	26
9.	How to Prepare for an Interview	25
10.	Dealing with Difficult People	23
11.	Excel Level 1	23
12.	Excel Level 2	23
13.	First Aid	22
14.	Steer Your Career	20
15.	Fleet Orientation	17



# LEARNING begins with the right leader

**"I'm a systematic, big picture person and what I'm interested in is what keeps people healthy"**

**Na-Koshie Lamptey** has public health in her blood. Both of her parents are health professionals – her mother is a doctor and her father is a dentist. When she was growing up, dinner table conversation revolved around politics and public health.

A native of Toronto, Na-Koshie obtained her undergraduate degree and then a Masters in Public Health at American universities. She returned to Toronto to study medicine at U of T and after completing medical school, knew that her true calling was to become a public health physician.

Na-Koshie is spending the final stage of her public health residency doing a rotation in senior management at Peel Public Health.

Her first public health rotation was in Communicable Disease Control, an experience that was busy and engaging. What impressed the young physician was being able to watch Dr. Mowat lead the team and manage large and complex situations. It was his leadership style that brought her back to Peel.

"He sets the broad directions and then lets his staff take risks, be creative and find their own path," she says. The result, she feels, is an environment that encourages honest dialogue and fresh ideas.

Her proudest moment at Peel took place during the H1N1 crisis. Na-Koshie was asked to help manage the team coordinating vaccine distribution to community physicians, hospitals and facilities, and to oversee the health surveillance information used to direct decision-making around Peel Public Health's management of the incident.

"Without question, this was the most significant learning I've done so far because it was about managing a team, managing rapidly changing information and trying to make decisions in a climate of uncertainty," she says. She credits Dr. Mowat for putting her into this new and challenging situation. "It's typical of his style to give the trainee the responsibility necessary to develop skills and learn, rather than put them in a corner and give them low-risk tasks. I'm very grateful for that."



When you give people the opportunity to think, experiment and play a little bit, they will have greater capacity as professionals in the long run.

Na-Koshie Lamptey

## Our workforce at a glance

by Bev Bryant

As we were preparing to launch the library review, I realized I needed more information about our divisions and our staff. The profile that emerged has proven very useful, not just in designing the survey, but in giving us a sense of our staff at a glance. This snapshot, brief as it is, underlines the challenge of workforce development – a process that will take time, commitment and the involvement of as many people as possible!

Here's a glimpse of what I found:

- We have a huge variety of job descriptions
- The divisions are not the same; each has evolved with its own unique mix of personnel
- It takes many people, with many different skill sets to make this business of public health work



### Educators in our midst!

Isabelle Mogck is a clinical lecturer at McMaster in the School of Nursing. She regularly serves as an academic liaison for nursing students at Peel Health and also teaches in the Health Care Leadership and Management Certificate Program.

## A Snapshot of Our Complex Workforce\*

as of November 2009

Job Titles	Chronic Disease and Injury Prevention	Family Health	Environmental Health	Communicable Disease	Office of the MOH	Totals
MOH					1	1
Director\AMOH	1	1	1	1	3	7
Manager	5	4	3	4	2	18
Supervisors	15	16	9	16		56
Administrative Support	23	20	9	53	5	110
Public Health Nurses	59	102		67		228
Public Health Inspector			62			62
Health Promotion Officers	24	2	3	6		35
Family Visitors		25				25
Project Specialist and Research and Policy Analysts)	6	3	4	6	1	20
Dental Hygienist	10					10
Registered Nurses		1		11		12
Data coordinator			1	6	2	9
Family Resource Worker	9					9
Community Develop. Worker	4	2		3		9
Registered Dietician	8	1				9
Nutritionist	5	0				5
Health Outreach Worker				5		5
Health Analyst			1	3	2	6
Dental Educator	8					8
Dental Case Aide	7					7
Epidemiologist					3	3
	184	176	93	170	19	656

\*Many divisions employ casual staff who are not listed here.

## Share Your Story!

We will soon be collecting stories and information for the NEXT Workforce Update!

Let us know about your experiences in continuing education or your workforce development initiatives in 2010.

Email Bev and Lyndsay at [ZZG-EducationandResearch@peelregion.ca](mailto:ZZG-EducationandResearch@peelregion.ca).

## NIPS&RIPS

NEW INITIATIVES IN PROGRAMMING RESEARCH IN PROGRESS

### Calling all presenters!

Don't hide your light under a bushel. If you're involved in a new initiative or research project, we want to give you an opportunity to talk about it. The team is encouraging presenters to share their work in progress at a monthly learning and development session. For more information or an application please email [ZZG-EducationandResearch@peelregion.ca](mailto:ZZG-EducationandResearch@peelregion.ca). Step up – your moment in the spotlight has arrived!