

Appendix III: Chart on Results of the 14 Community Public Health Services (WCA) Projects

ACTIVITIES ACCOMPLISHED	RESOURCES PRODUCED
COUNCIL FOR ANGLOPHONE MAGDALEN ISLANDERS (CAMI)	
<u>“A FAMILY AFFAIR!” When history repeats itself:</u>	
<p><u>History:</u> The generational transmission prevention program “A Family Affair!” was developed by Master’s student, Line Caron in 2003 and was produced by the Régie régionale de la santé et des services sociaux de la Côte-Nord in Baie-comeau and has been translated to English.</p> <p>The “A Family Affair!” program is organized and promoted within the ESC of the Magdalen Islands by which documents are translated, publicity is distributed and a tentative start date is confirmed.</p> <p>A coordinator was hire to support the CSSS des Iles in the organization, promotion & execution of the “Family Affair” program. The program consists of seven two-hour workshops animated by a CSSS Social Worker with support from a Coordinator employed by CAMI. These workshops were held bi-weekly. The purpose of the project was to introduce the concept of families with functioning difficulties to deal with their present day implications through the support of a bilingual intervener. We achieved our goals for execution of the project as well as providing support to the CSSS des Iles intervener. We were able to encourage six individuals to deal with childhood difficulties in a group session with the support of a bilingual health professional.</p> <p>As the CSSS des Iles intervener did not feel comfortable animating the group in English, it required the assistance of the WCA Coordinator in the carrying out of the workshops. The participants completed an evaluation form after the completion of the seven workshops: the participants would prefer the workshops every week instead of bi-weekly. It was an opportunity of the participants to deal with emotional issues with the support of a health professional. Since we are a small community, it was difficult to recruit additional individuals as confidentially was a concern and people are less comfortable to express their feelings in a group session</p> <p>These workshops allowed the participants to seek help and not to be ashamed of their family circumstances. It provided an impression that they are not alone and have a new approach in asking for assistance. Also, it created a partnership with the Anglophone community and the CSSS des Iles’ bilingual intervener. This pilot project serves as the first step of determining the lack of services available to the English-speaking community as this program already existed in the Francophone community. The health professionals (and decision makers) are now aware that programs such as this is needed in the Anglophone community.</p> <p><u>RESULT(S) ACHIEVED:</u> Six family affair sessions were carried out. At the end of the sessions participants left feeling better about themselves and their situation and realized that they are not alone. They now have a new outlook on life and realize that it’s OK to ask for help. A post-test was completed by the participants. <u>Comments:</u> This program really opened my eyes and now I can give my kids the help they need and not be ashamed of asking for help. <u>General comments:</u> It was very interesting</p>	<ul style="list-style-type: none"> - Family Affair program - Program Presentation

COMMITTEE FOR ANGLOPHONE SOCIAL ACTION (CASA)

The goals set in the WCA project included determining what the communities of Hopetown, Shigawake and Port Daniel wanted in increased information and services about health care; creating a relationship with the CSSS Baie-des-Chaleurs and then delivering the health sessions. CASA’s goal was to deliver 4 separate health sessions during the program.

CASA’s WCA Coordinator, was successful in determining the needs through an intensive door-to-door, email and public presentations campaign about the project and the need for input. This information was presented to a representative of the CSSSBDC. She identified that the CSSSBDC had, to date, not been successful at reaching the Anglophone population in these communities. She was willing to share the resources of the CSSSBDC with CASA to deliver the identified health sessions. CASA had access to the Community Nurse and also the Community Nutritionist. A nutritionist stagier student from the University of Montreal, also participated in the health sessions. All three CSSSBDC staff are bilingual.

CASA was able to deliver 3 health sessions including one on Germs & Infections, and 2 on Nutrition & Reading Food Labels. The 4th health session on Diabetes had to be re-scheduled but will be delivered at a later date. Attendance at the session averaged between 10 and 20. This is a significant accomplishment as getting the community members to follow-through and attend these types of sessions has been one of the greatest barriers. The feedback from the sessions was very positive and there is still considerable interest in additional sessions on a variety of topics.

Due to the collaboration and partnership between CASA and the CSSSBDC, the CPHS (WCA) workshops were a huge success and reached 52 members of the ESC. Feedback was encouraging and there is a great interest and openness to participating in future workshops. The workshops not only increased access to information and an improved knowledge base for The ESC, but began the process of building a trusting relationship where none existed before. The workshops allowed for a personal connection between the ESC and the personnel of the CSSS. The ESC has had a positive experience with bilingual personnel, which is a first for many and they now feel more comfortable accessing services through the CSSSBDC.

Questionnaire

COASTERS

A tobacco phone-survey was carried out. In order to garner a true portrait of the amount of tobacco consumption on the Lower North Shore, a phone survey was necessary. The phone-survey was completed the second week in March 2010 and currently is being compiled into report for: 1607 residents were contacted, however; only 922 residents agreed to participate in the survey. Of those surveys completed, 475 residents were smokers.

It provides a clear picture of the amount of smokers on the Lower North Shore, who and where an awareness campaign should be focused on, and also furnishes the with valuable statistics on which communities they need to concentrate their intervention strategies on.

The survey was, by all intents and purposes a success; nevertheless it must be taken into consideration, on the Lower North Shore in particular, the dates in which the survey is to be conducted. In order to receive a good response, it must be considered to conduct the survey in the fall or winter months as these are the times in which the residents of the Coast are at home (a large amount of residents have left the Coast in the spring and summer months to obtain employment).

Survey

ACTIVITIES ACCOMPLISHED	RESOURCES PRODUCED
COMMUNITY LEARNING CENTRE (CLC)	
<p>This project was a continuation of 08/09 activities designed to integrate the healthy schools approach into schools. The grant was used to encourage CLCs to make partnerships with NPIs and other health partners.</p> <p>CLCs established innovative and successful programs that promoted healthy living habits and safe and healthy behavior, in many cases in partnership with local health stakeholders like the CSSS or school nurse.</p> <p>We learned that a relatively small amount of money could spark great community activities that positively impact the health of youth and adults. Most notably there were activities that teach healthy eating habits and the importance of exercise.</p> <p>Our work facilitated 14 Community Learning Centres across the province to develop successful programs that supported healthy living habits. In many cases, the whole community was involved, community resources were utilized and knowledge was built in areas of nutrition. On a concrete level, I have gotten feedback that students now look at the food labels and ask whether it is healthy. Students ate fruit they never had before.</p>	
EAST ISLAND MONTREAL (REISA)	
<p><u>DRUG PREVENTION AND AWARENESS IN SCHOOLS:</u></p> <p>The success of the program in the last two years has influenced schools that were resisting to the implementation of the program and in denial about drug problems the program reached out parents within most English speaking communities within the NPI networks Partnership with and institution for the education of parents while maximizing the role of the CLC, schools administrators have become aware of the efficiency of a drug prevention program and are requesting it from REISA. School administrators have become aware of the efficiency of a drug prevention program and requesting it from REISA. Teachers want to be equipped for the drug situation in their schools and learn how to deal with it. REISA's consultant was asked to share the tools she developed with the School board guidance and substance abuse counsellors from the Outaouais Some schools are aware of the potential of drug use among the student population and are taking steps to encounter it by hiring Substance abuse counselors and experts. Other schools have requested from REISA a yearly follow up in their schools</p>	<p>Brochures</p> <p>Drug information program</p>

ENGLISH NETWORK RESOURCES IN COMMUNITY HEALTH (ENRICH)

The CPHS (WCA) project included three components each with their own goals and outcomes:

Component #1 – As the initial LES has been modified to better suit the delivery of this program. The original LES consists of ten 75-minute periods and is now adapted to be delivered in 3 or 5 periods.

Component #2 –Recruiting the optimal number of participants and had 100% participation in all of the sessions. A partnership between the English-speaking community and the local food bank has been established and continues to develop. The opportunity for sustainability is excellent as all partners are engaged in seeking new funding to continue this project. In addition, the CSSS Papineau will assist in the writing of project applications to potential funders.

Component #3 – The Healthy minds healthy bodies program has been implemented in 2 rural high schools. Both high schools have also obtained support from their CSSS and Québec en forme for the ongoing delivery of this program. As well, school board staff attended the FRIENDS training session. This program is now integrated into an existing school board program called TRIBES and delivered in all schools.

Phone calls with the group Equilibre, an organization that promotes healthy body image.

Equilibre are aware of the DVD and will use it as a resource for English training sessions of the Healthy Body, Healthy Minds program and will also post it on their website.

The LES (Learning and Evaluation Situation) will be posted on the CLC Community Based Learning Section where teachers will have access to the materials. Although the term of project has ended efforts are ongoing with LEARN to explore options for broader dissemination. For example, LEARN’s consultant will be presenting the LES (Learning and Evaluation Situation) at a provincial Science and Technology Fair for teachers in July 2010.

Partnerships were either established or strengthened with the English-speaking community, CSSS, the school board, LEARN and community organizations for the promotion of healthy lifestyles that targeted youth and seniors.

General information on the Collective Kitchen

Food for Thought – Teacher Evaluation Document (LEARN)

MEGANTIC ENGLISH-SPEAKING COMMUNITY DEVELOPMENT CORPORATION (MCDC)

1. Keeping our community informed:

- a) The committee was created and met in August to review the concept of the calendar, to identify health issues, pictures and aphorisms. The committee was comprised of 5 persons: two MCDC staff and three community members.
- b) Public partners were informed and consulted about our project at the May “Partners in Health” meeting, which they wholeheartedly supported. We reviewed the Event Calendar that was given to us by CLSC Frontenac and also reviewed the main national awareness campaigns to align our priorities with theirs and benefit from their national advertising campaigns to reinforce our message. Because there are no national awareness campaigns in July and August, we added two health subjects that we believe are of great interest to our community.
- c) The calendar was sent to the printer in October and has been distributed throughout the community
- d) At the February 2010 Community Forum participants were unanimous in their praises for the calendar. They are happy with the format and the content.

Calendar
Down Home News

2. Discovering new and healthy foods:

- a) Meetings took place with the nutritionist at our local CLSC, regarding the details of our planned food tasting buffet. It was decided that we would combine this activity with an activity planned under the NPI – an information session on nutrition for seniors and that the MCDC Health Coordinator and the Public Health Coordinator was hosted jointly. The nutritionist agreed to be present to provide answers to various questions..
- b) Discussions took place with the school as an offshoot of our work on the Walk to Vancouver. They committed to working with us on this project as we did during the Defi 5/30 last March.
- c) MCDC staff worked on a menu in partnership with and with the approval of the CLSC nutritionist and then contacted a caterer and arranged for it to be prepared. We developed a booklet of healthy recipes and the caterer agreed to provide all who attended with recipes for the dishes that were served at the noon meal.
- d) IGA St Pierre provided us with bilingual 5/30 Health Challenge Kits and Smoothie Guides for all participants.
- e) A special notice entitled “Who Said There’s no Free Lunch” was prepared and circulated through the community targeting our age 55+ members; an ad was placed in the Down Home News for March. Seniors were contacted personally by phone. We also used the CBC Public Announcement Service. The booklet entitled “Eating Well, Growing Old Healthy” (available on the Quebec Government website) was printed and distributed to all seniors in attendance on the 31st.
- f) Each participant received a kit which contained the above mentioned booklets and brochures together with a copy of a booklet of 20 smoothie recipes, the Canada Food Guide, a fridge magnet showing portion sizes, Inspired (a publication from IGA on good food), two handouts entitled” Healthy Snacks ideas” and” Healthier choices at the restaurant” and finally a booklet of Recipes. In total, we had 35 participants who were all very happy to be there. In consultation with the school it was decided that, as part of the Breakfast Program, we would arrange a taste testing session and provide all students with freshly made smoothies at 7:30 am on March 25th. Some 120 students participated enthusiastically! A great success. Recipe booklets were passed out to the older students
- g) At the end of the taste testing and nutritional lunch of March 31st, participants were asked to complete a questionnaire. The results clearly demonstrated that participants enjoyed their experience, enjoyed the food and each other company. They were very happy with the handouts and expressed the wish that more luncheons like that be offered in the future.

3. “Bouge bien, bouffe bien” (BBBB)

- a) Our coordinator, had numerous telephone contacts with the regional BBBB coordinator at CSSS Thetford. We were informed that priority had been given to smaller villages where no sporting facilities or activities are available, which is not the case of Thetford Mines. The initial focus in the Fall was on the 1-5 age groups and in areas they are considered “economically disadvantaged i.e. Disraeli and Coleraine. We worked through the school to determine if there were any members of the community that we serve that lived in this area. There are none.
- b) Two major activities are taking place that involve students from ASJ and St Pats. The first, classes to become life guards offered in partnership with the “Société de Sauvetage” Quebec. At least 4 students from our English language school are participating. The second consists of extracurricular activities of soccer and basketball taking place on the weekend. Participation in these activities is excellent- 28 students in soccer and 18 in basketball. This represents the highest level of participation of all the schools in the area.
- c) There has not been a subsequent meeting since the meeting on Dec 7th mentioned in the last report. We will continue to be present to ensure that our local school will be made aware of programs as they come on line so that the youth from our ESC will be involved and served by this program.

4. Insuring continuity:

- a) Telephone contacts have been made with a number of the public health coordinators in Chaudière-Appalaches during the last few months. Also as follow up to a conversation with the deputy director of Public Health for the Chaudière Appalaches, he will be attending the next Access Committee to address the matter of communicating with our community on public health matters.
- b) Monthly health capsules continue to be included in all our monthly newsletters. January-“Exercising to keep your body and mind healthy”; February-Stroke warning signs”; “March-Nutrition Month”; “Cancer Prevention in April” (see attached copies).
- c) The “Walk to Vancouver” project wrapped up officially on February 11th. All of the school students spent the afternoon on Olympic related activities. It started with an assembly in the gym at 1:30 –each grade, representing each of the participating countries filed into the gym greeted by cheers and applause. After a series of remarks and the presentation of participation prizes sponsored by MCDC we also presented a plaque to the principal, the president of the student’s council and members of the Coordinating committee for the Walk. The students spent the rest of the day out-of doors participating in Olympic style physical activities. The project was not only successful in involving the students but over 30 community members contributed in excess of 3,500 kilometers to the cause! We are enclosing pictures that were taken at the school.
- d) The “Walk for the Cure” activity took place as planned last October. A great success! 20 community members participated and through this activity, MCDC raised \$2080 for cancer research.
- e) The gathering of data to formulate the telephone chain is complete. We are aiming for a final launching date of the chain for late April. The chain consists of 10 groupings broken down by the communities that we serve and into small enough entities so that no one person has to call too many individuals. We have attached a preliminary outline.

TOWNSHIPPERS - ESTRIE/MONTÉRÉGIE

Townshippers’ project was to produce a third play in the We Can Act Trilogy. The social theatre cabaret was a means to get across a message about services and how to become engaged in your community in an interesting, engaging and non-threatening way. The play was produced and toured for one week in our two regions. Townshippers worked with their partners to promote the play and according to feed-back forms the audience appreciated the entertainment and responded to the message.

Project went very well. Good turn-out although we were limited in the number of weeks that we could choose to present the play. We could have collaborated more with partners and presented the play at other events that were already scheduled so that we could have had larger audiences and reached a variety of audiences. Goals were ultimately achieved although the audience numbers were lower than anticipated since our presentations took place during the height of the furor of the H1N1 season and we heard from individuals who were avoiding crowds.

Collaboration with our partners has increased. Townshippers’ received better visibility

Posters

ACTIVITIES ACCOMPLISHED	RESOURCES PRODUCED
VISION GASPÉ PERCÉ NOW	
<p>Some of the activities were carried out; changes were made to the project during the year resulting from the ED leaving the organization. 3 staff members were involved with activities relating to seniors and youth.</p> <p>We carried out our goals by including partners from the CLSC, L'escalpe, CJE, MDJ, and the schools. We found out the penetration rates for services by English-speaking youth.</p> <p>3 mental health workshops were held with 3-5 participants at each workshop</p> <p>Fall prevention program: Completed, 12 participants from the 3 surrounding communities are registered and began participation in the program for 12 weeks.</p> <p>Family Policy – Ville de Gaspé & Ville de Percé: one meeting in each municipality took place</p> <p>Vision will continue to monitor implementation of the family policy for both towns.</p>	<p>Booklet “Services Available for Seniors of the Gaspé-Percé Area”</p>
VOICE OF ENGLISH-SPEAKING QUEBEC (VEQ)	
<p><u>Develop a working document / consultation form :</u></p> <p>The final version of the consultation form has been developed and distributed to partners of the English-speaking community and of the Francophone majority prior to the English-speaking community public health forum. During the Forum, a document presenting the vision, the objectives and the working approach of the Partnership Table was presented, discussed and approved by the partners of both linguistic communities. This document will serve as the foundation to develop and implement projects and initiatives that respond to the public health needs and priorities of our English-speaking community</p> <p><u>Recruit community organizations and members to participate in the consultation process and the English-speaking community’s public health forum</u></p> <p>Representatives from St. Patrick’s Parish, Anglican Diocese, Jeffery Hale – St. Brigid’s, Central Quebec School Board, Citadel Foundation, Morrin Centre, St. Lawrence College, Jeffery Hale Community Partners and VEQ participated in the presentation of the objectives of the project in November 2009. As for the English-speaking community public health forum, representatives from the <i>Direction régionale de santé publique</i>, the Central Quebec School Board, the Champlain St. Lawrence College, the <i>Centre jeunesse de Québec – Institut universitaire</i>, the Community Learning Center – Quebec High School, the <i>Agence de la santé et des services sociaux de la Capitale-Nationale</i>, the Jeffery Hale Community Partners, the Jeffery Hale Hospital – Saint Brigid’s and the Voice of English-speaking Québec participated in this important initiative. The partners agreed at that time to meet on a bi-annual basis to maintain the dialogue with regard to public health priorities of our community. Other community partners, such as the City of Valcartier, City of Shannon and the Valcartier Family Centre will be invited to participate in future meetings of the Partnership Table.</p> <p><u>Organize one Winds of Change workshop in September and one in March</u></p> <p>A total of 24 newcomers participated in the workshops and more than 80% of the surveyed participants mentioned that the workshop was useful for helping in their integration process into a new culture and for networking with other newcomers. As for the March 2010 workshop, a total of 15 newcomers participated and 63% of the survey respondents rated the workshop as very useful and 25% as useful in their integration process</p>	

ACTIVITIES ACCOMPLISHED**RESOURCES PRODUCED****Consult key community stakeholders from both linguistic communities and organize a community public health forum**

The combination of the consultation process and the public health forum allowed our community to identify priorities and to better position ourselves to develop and implement projects and initiatives that respond to the needs of our community. The direct result of the Forum was to facilitate the dialogue among the various partners from both linguistic communities that are concerned with the promotion of public health in the English-speaking community. As mentioned above, the partners also agreed to meet on a bi-annual basis to continue exchanging about projects and initiatives linked to the health sector. Consequently, the long-term result of the forum will be to facilitate the development and implementation of initiatives that are directly linked with the identified English-speaking community's public health priorities.

Publicize workshops and recruit participants

Both editions of the Winds of Change workshop (September 2009 and March 2010) were publicized in the Quebec Chronicle-Telegraph and on CBC Radio One. Many partners of the English-speaking community such as Jeffery Hale Community Partners and the Valcartier Family Centre also assisted us by recruiting participants through their respective networks. VEQ also used its website and newcomer database to send e-invitations to numerous newcomers familiar with our regular newcomer activities. A total of 26 newcomers confirmed their presence at the September workshop and 11 at the March one

4-KORNERS

2 Survey's for home caregivers, and initial distribution began and data was collected, annotating the different needs from each region.

Coordinated 6 mini-information sessions as caveat to discuss the issues relating to issues surrounding home care givers. (Security, Finances, Safety, Respite & Burnout).

Home Caregiver "survival" kit was created, with on-line resources, helpful tips on how to handle situations, help lines, links to websites, and access to provincial programs. This kit was distributed on a pilot basis to determine it's effectiveness and allow for suggestions for a larger distribution through hospitals.

List of Seniors' service organizations in the Laurentians has been created, and will continue to be added to as involvement and interest increases.

Met with representatives from all 7 CSSS's in the Laurentians and revised initial outline of the project, responses have been considered in revising the work plan.

Dedicated News Section for home givers in collaboration with local Monthly bulletins.

Drafted a home care givers bulletin.

Corrections were made to draft info sheet/package Organizations and Service clubs have been sent a draft "Info sheet" regarding services which are available to care givers in English.

Home care givers survey
Pamphlet (Telephone – Reassurance – Program for Seniors in the M.R.C. of Deux-Montagnes
Needs questionnaire

ACTIVITIES ACCOMPLISHED	RESOURCES PRODUCED
<p>Produced a Draft work plan for presentation to groups and individuals in each CSSS area. The ultimate goal remains the same, however the application varies with each CSSS region</p> <p>Held 22 meetings with groups or individuals. A larger one in March was cancelled as individual situations prohibit the possibility of a meeting of this nature until logistics with other transit and volunteer organizations can be coordinated.</p> <p>Held 8 meetings with CSSS and sent out proposals for upcoming activities or sessions</p> <p>Secured commitments from CLSC's for use of space, distribution of information, aid in revising the plan, and attendance by a bi-lingual representative at any public meeting.</p> <p>Survey for Home caregivers produced and sent out on an individual basis. Statistics are still being gathered.</p>	
AGAPE	
<p>Agape offered a program on good healthy eating habits, accompanied by food tasting sessions and information from the Health Canada Food Guide. We prepared a menu and submitted it to a nutritionist for approval. The document was distributed to all our Seniors. Our goals were to reach as many Seniors as possible and we set out to find them through Community groups, churches, synagogues and Seniors autonomous quarters in Laval. We set up meetings with different groups and followed up on their progress. It was a very successful project enjoyed by all. We reached approximately 650 Seniors.</p>	
NEIGHBOURS REGIONAL ASSOCIATION ROUYN-NORANDA	
<p>Streetworker: hired a streetworker and partnered with our local Parrainage Civique. Over the last year our streetworker has assisted only 3 Anglophones. It is difficult for us to assess if this is a success or failure. Do the results mean: a) we did not do a good enough job locating the ESC at risk or b) the ESC does not fall within the target group.</p> <p>Translations/Action Plan on Signage:</p> <ul style="list-style-type: none"> • Translation of Client Guide to our long term facility; Emergency Care Pamphlet; Guide to Hospitalization besides minor letters were performed • Our efforts to develop an action plan to assure the translation of some signage was delayed by the creation of the "English volet" of the "Projet Clinique" at our local CSSS. It was determined that English signage would have to be studied by this new committee <p>We are not taking this "delay" as a non-success, but are using it to assure our continue work and involvement on this important issue.</p> <p>Further to the material being produced in English – this dimension of the project has allowed us to "friendly up" with different health care professionals. We have been able to offer them support and guidance while they attempt to provide services in English. We have developed new partnerships which we believe will generate results for the ES.</p> <p>Invite English second language health care students to participate in the Tele-Health Sessions</p>	

ACTIVITIES ACCOMPLISHED	RESOURCES PRODUCED
NORTH SHORE COMMUNITY ASSOCIATION (NSCA)	
<p>Produced and distributed 1000 bilingual pamphlets on the Côte Nord Regional Access Program. Held strategic meetings with Agency liaison personnel for Access program; discussions on building strategies and actions towards improving access to services in English on the North Shore.</p> <p>Researched and compiled information on services targeted for senior population. Produced a final report on community health guide for seniors of the North Shore.</p> <p>Partners involved: Regional Health Agency, 6 CSSS's, community organizations (within the Agency's PSOC) local English Schools, and community members.</p> <p>Achieve their set objectives; strengthened their partnership with regional agency and built 2 new partnerships with CSSS, assisted on revision of project proposal aimed at improving access to Health and Social Services on the North Shore</p>	<p>Brochures "ACCESS to Health and Social Services in English on the North Shore</p>