

Corporate Communications Annual Report

2018

Introduction

Corporate Communications (“Communications”) encompasses communications, library and reception functions. Communications:

- Leads the Agency’s compliance with the Communication components of the Ontario Public Health Foundational Standard of Effective Public Health Practice in the area of Research, Knowledge Exchange, and Communication¹
- Operationalizes the Standard’s Transparency Framework goal to “Promote awareness, understanding, and public confidence in Ontario’s public health system” by informing the public how the Board of Health is protecting and promoting individual and community health and responding to local community needs
- Upholds the Wellington-Dufferin-Guelph Public Health (WDGPH) brand across all audiences and media (traditional and social)
- Works closely with program areas to ensure the Program Standards around communication are met
- Ensures the Agency maintains transparency and client-focus
- Leads communications and issues management activities when the Agency is in Incident Management or other emergency communications
- Maintains a Strategic Communications Plan and an Emergency Communications Plan

Communications ensures WDPGH:

- Uses communications strategies that reflect local need
- Uses a variety of communication modalities to ensure effective communication

- Is transparent, sharing ongoing public health improvements with the public and community partners
- Makes the public and community partners aware that inspection results are available on our website and on CheckBeforeYouChoose.ca

Communications invites members of the public to engage with our work. When we connect with our audiences and provide responsive, timely client service, they know where to turn—and put their trust—when a new threat or issue arises.

To that end, Communications:

- Maintains a current, responsive website and blog to share information about Agency services, program changes and timely health information
- Supports in-person events through advertising/promotion and speech writing
- Maintains relationships with local, regional and national media outlets
- Is active on social media where audiences participate (e.g., Twitter, Facebook, Google My Business, LinkedIn and Instagram)

Additional services provided by Communications include:

- Communication strategy/campaign development, implementation and evaluation
- Graphic design and print production
- Video production (in-house and working with external vendors)
- Writing and editing
- Digital (website/social media) strategy and management
- Emergency response communications
- Reception
- Library services

Highlights of 2018 Communications Initiatives

Some of the key Communications initiatives of public importance and impact in 2018 are summarized below.

Emergency Response

In 2018, Communications participated in several Incident Management System (IMS) responses, including the Tuberculosis outbreak and influenza response. The team also plays a key role in communicating local health-related opioid alerts.

Influenza Response

In February 2018, after receiving reports of two flu-related deaths of children who attended the same school, WDGPH initiated the Incident Management System (IMS) to open drop-in flu clinics in response to public concern. Communications supported the IMS event by ensuring the public knew the two deaths were not related even though the children attended the same school, that flu was active throughout the community and that the best protection against the flu was to get the flu shot at one of WDGPH's IMS clinics or a local pharmacy or health care provider.

WDGPH received significant media coverage on local, regional and national newspapers, radio stations and television networks. Eventually, this flu event became national news through an interview with Dr. Mercer for The Globe and Mail and coverage on CTV, CBC and Global television. In total, there were over 16 million impressions for the flu and flu clinic messages from local, regional and national mass media sources.

Social media (Facebook and Twitter) played a key role in informing residents about the flu clinics and answering concerned parents' questions. The week of coverage culminated in a Facebook Live event where Dr. Mercer and Dr. Tenenbaum answered questions live from the public over Facebook. This event reached 3,700 unique viewers (those who stayed for over 10 seconds). Viewers sent over 80 questions, and questions not answered during the event were answered by Dr. Tenenbaum the next day. Throughout the flu event, WDGPH received 304 messages through Facebook; had 200 individuals sign up to follow us on Facebook and received 1,441 link clicks to the WDGPH website.

This event highlights the importance of using social media platforms to inform the public, counter rumours and motivate them to action (come to a flu shot clinic) and help build an

understanding about a health threat in the community. Additional details are included in the [Flu IMS Communications Report, BH.01.APR0418.R11](#).

Local Response to Opioid Crisis

WDGPH has joined community partners to respond to the opioid crisis at the local level. Services we provide include harm reduction, surveillance, research and a web-based hub of information about local opioid resources. WDGPH also plays a pivotal role in activating community health alerts about overdoses and adverse effects. Communications works closely with the Health Analytics team and the Healthy Communities and Public Policy (HCPP) team to ensure information is made available to the community in a timely fashion.

To that end, Communications worked with Health Analytics to design an alert to be distributed directly to community partners via email and shared through website and social media channels to reach at-risk populations when needed. In 2018, the alert was deployed three times: on July 17, August 3 and October 17, driving people to the website wdgpublichealth.ca/harmreduction and generating massive interest and engagement on social media.

Specifically, these alerts reached nearly 25,000 people through our Facebook and Twitter accounts; were shared/re-tweeted 153 times (across geographical jurisdictions) and were clicked on 1,473 times.

The high levels of engagement on these posts show Public Health is not only spreading awareness about possible risks in the community, but also reaching the audience with evidence-based information about reducing harm.

Campaigns

Communications specialists plan, implement and evaluate communications campaigns in close partnership with staff from program areas. In 2018, the team developed and implemented strategies to:

- Recruit participants for research studies (Women's Health Study phase 1 and 2)
- Recruit participants for online surveys, including the Well Water Survey, Cannabis Survey, Childhood Experiences Survey and Neighbourhood Design Survey
- Raise awareness of health issues, including alcohol- and cannabis-related harms and local rabies threats

- Encourage attendance at events, including radon information nights, rabies clinics, a drop-in HIV testing event and flu shot clinics

Last Call: Alcohol Stories Campaign

The year began with the *Last Call: Alcohol Stories* campaign, a partnership between the Wellington Guelph Drug Strategy and WDGPH. Communications helped create, edit and share 10 videos in which community members were interviewed about the impact of alcohol in their lives and jobs. By the end of January 2018, the campaign had reached over 300,000 online impressions (views), over 1,000 social media engagements and 2,400 website views. In a follow-up survey, more than 50 percent of those who said they saw the campaign said it increased their knowledge and 60 percent said they took some action after seeing it. This innovative campaign set a new standard for success within the Agency.

Talking About Weed Cannabis Awareness Campaign

Cannabis became legal for non-medical adult use in Canada on October 17, 2018. The HCPP team received a grant to fund a youth engagement and public awareness campaign about cannabis use and young people. Communications was responsible for creating and dovetailing a second arm of the video campaign to engage an adult audience. The goals of this combined strategy were to:

- Increase local awareness and understanding of the health impacts of cannabis use
- Highlight resources available to individuals and families within Guelph/Wellington/Dufferin related to cannabis use/misuse
- Establish Public Health as the local authority on health issues relating to cannabis use

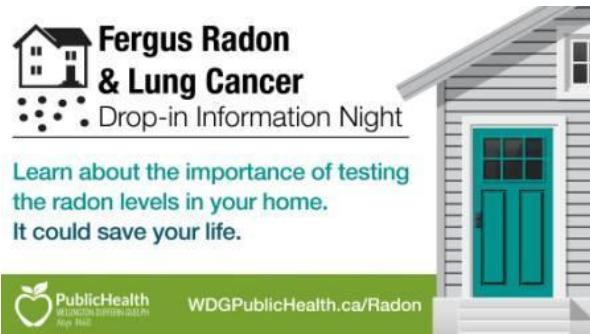
Communications and HCPP collaborated on the creation of key messages, video scripts and website content to support the campaign videos. In total, seven videos were produced with a cohesive look and feel; four for a youth audience and three for an adult audience. The video approach was determined with input from youth focus groups and community partners.

The videos launched ahead of legalization on YouTube, on the website TalkingAboutWeed.ca and on Cineplex movie screens in Guelph and Orangeville. The campaign resulted in 17 dedicated stories through traditional media (newspaper, radio, broadcast), generating 869,166 media impressions. The video advertisements generated 289,109 impressions at Cineplex; 107,354 impressions through YouTube/Google ads; 102,603 impressions through

Facebook/Instagram ads and 94,125 impressions through Intrigue Media screens in Guelph. There were also 3,328 website page views over the course of the three-month campaign.

Radon Information Night Events in Guelph, Fergus and Orangeville

Communications supported the Health Protection team by developing a strategy to encourage the public to attend one of three radon information sessions in Orangeville, Guelph and Fergus. Advertisements were placed with local radio stations and newspapers and Facebook ads were used to reach adults across Wellington, Dufferin and Guelph. Attendance increased from the 2017 sessions and included 224 people in Guelph; 57 in Orangeville; and 38 in Fergus. Over half of attendees purchased a radon test kit.



Multipronged Rabies Awareness Strategy

After a decade-long absence, raccoon rabies is back in our local area. Communications worked proactively and reactively with the Health Protection division to raise awareness about the seriousness of rabies, encourage pet owners to vaccinate their pets, respond to a local event in which a rabid bat was found, promote rabies clinics and communicate about bait drops. The awareness video and additional information are available at WDGPublicHealth.ca/rabies.

Client Service

Communications ensures excellent client service through the Reception function, electronic and hard copy comment cards and through social media.

Electronic Comment Cards

In July, Communications launched an electronic comment card using Qualtrics, an online survey platform that allows for the collection of confidential, anonymous responses. The form is linked from the Contact Us web page and is routinely shared on the homepage and through social media to keep it top-of-mind. In 2018, 16 electronic comment cards were completed by individuals who had accessed services at one of our locations. Of the respondents who provided a rating, five were satisfied with services received and one was not satisfied.

Hard Copy Comment Cards

A total of 108 hard copy comment cards were received in 2018 (comparable to the 114 received in 2017). Of these, 90.7 percent of respondents said they were either Satisfied or Very Satisfied with their experience at WDGPH, and four requested follow-up. These results are similar to 2017, when 93 percent of respondents indicated they were satisfied.

Traditional Media

Communications distributed 18 media releases in 2018, the same number as 2017.

In 2018, coverage from traditional media outlets (print and online newspapers, television and radio) included:

- 172 stories about WDGPH
- 50 additional mentions of WDGPH
- 10.4 million estimated print impressions (up from 6.5 million in 2017)
- 3.5 million estimated digital impressions (website/app; up from 2 million in 2017)
- 56 interviews
- 71 quotes used from media releases

Impressions refer to how many people potentially read, view or listen to the media coverage, and are the standard way of measuring the reach of a message through mass media.

Spokespeople

Dr. Mercer was the primary voice of WDGPH in the media in 2018, being quoted in nearly 40 percent of all media stories mentioning the Agency.

Dr. Mercer was interviewed by local, regional and national outlets seven times this past winter in response to two local flu-related deaths. Additionally, she was quoted 64 times from news releases and twice from Board of Health meetings. Quotations were included on the topics of heat, cannabis, rabies, flu, West Nile virus, well water testing and student immunizations.

Social Media

Communications monitors trends in how people access health information and adjusts strategies to ensure we continue to reach and engage with target audiences in their preferred way. According to [Canada's Internet Factbook 2018](#), 39 percent of Canadians watch movies/TV/videos online, while 61 percent engage on social media and 55 percent access news/current events online.²

According to a Ryerson University Social Media Lab report [The State of Social Media in Canada 2017](#), the most popular social media platforms are Facebook (used by 84 percent of online Canadians), YouTube (59 percent), LinkedIn (46 percent), Twitter (42 percent) and Instagram (37 percent).³

To address the changing environment and consumer preference for visual media through images and video, Communications:

- Piloted Facebook Live to allow viewers to ask questions directly to, and get answers from, the Medical Officer of Health
- Launched an Instagram account to share visual content
- Created video content to complement campaigns (e.g., rabies prevention video)
- Developed modern infographics and fact sheets for program areas to share

In addition to reaching local audiences through WDGPH Facebook, Twitter, YouTube, Instagram, LinkedIn and Google Business accounts, Communications manages advertisements through digital and social media. Advertisements purchased through Google (which owns YouTube) and Facebook (which owns Instagram) are shown through ‘audience networks’, meaning they are also displayed on websites/apps visited by those who do not have YouTube or Facebook accounts.

Engagement refers to a user interacting with our content. Engagements include replies, retweets/shares, comments and likes. It does not include clicks

Engagement Through Social Media

Engagement refers to a user interacting with our content. Engagements include replies, retweets/shares, comments and likes. It does not include clicks.

Table 1: Key Metrics for WDGPH Social Media Channels

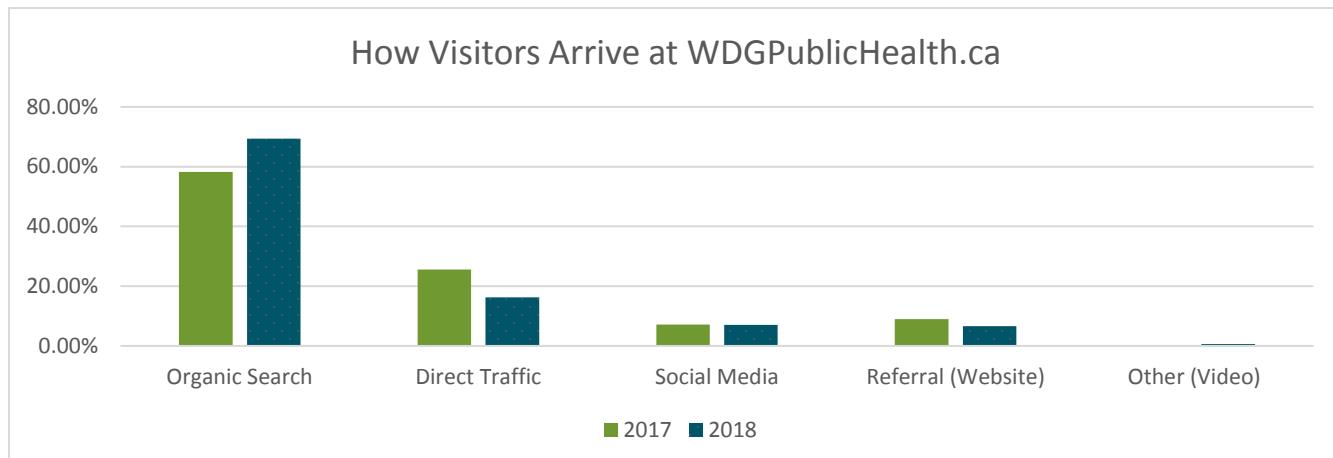
Channel	Fans/Followers (change from 2017)	Number of posts (change from 2017)	Organic (unpaid) impressions (change from 2017)	Engagements (change from 2017)
Facebook	1,209 (+121%)	753 (+29%)	413,725 (+5%)	5,066 (+52%)
Twitter	3,799 (+10%)	884 (+13%)	616,747 (+45%)	5,509 (+40%)
LinkedIn	767 (+32%)	22 (+29%)	14,208 (+17%)	551 (+164%)
Instagram	656 (n/a)	91 (n/a)	20,898 (n/a)	1,252 (n/a)

Websites

This year marks the first full year of website data collection since the redevelopment of WDGPublicHealth.ca in early 2017. In 2018, the website averaged 10,407 users per month, or a total of 124,890 yearly users, representing a year-over-year increase of about 35.5 percent. During the February flu event, website traffic peaked at about 2,340 users per day, or more than six times the regular number of visitors. Over the course of the year, about 7.5 percent of the yearly website traffic (or about 9,300 visits) can be attributed to the flu event.

While the total number of website visits increased from 2017 to 2018, these number of visits to the site has decreased from 2016 levels. This downward trend could be the result of our redeveloped website no longer counting staff visits, or it could reflect potential visitors connecting with Public Health through other means (e.g., social media, Google Business pages). This trend will be monitored to judge any overall impact on Public Health touchpoints.

Table 2: How Visitors Arrive at WDGPublicHealth.ca



There were some notable changes in how visitors arrived at the WDGPublicHealth.ca website in 2018; notably a higher proportion of referrals from search engines (most often Google, up to 69.4 percent in 2018 from 58.2 percent in 2017) and a corresponding decrease in direct traffic (when someone types in the website address, down to 16.2 percent from 25.6 percent in 2017). Traffic from social media stayed about the same at 7 percent and referrals from other websites (including Check Before You Choose and the Ministry of Health and Long-term Care) declined from 9 percent to 6.6 percent. “Other” (video) referrals contributed to website traffic for the first time, referring 0.6 percent of visits.

Devices Used to Access the Website

From 2017 to 2018 there was an increase in the proportion of website visitors using a mobile device to access the site, from 38.9 percent to 45.7 percent. Desktop visitors decreased from 54.1 percent to 48.4 percent and tablet visitors decreased slightly from 6.8 percent to 6 percent. Of note, nearly half of mobile visitors used an iPhone.

Other Website Trends

Other notable website trends include:

- Homepage views were down by almost 7 percent; a finding consistent with more visitors arriving via search engine (that would take them directly to the page of interest).
- Overall time spent per page decreased by 3.6 percent (consistent with trends in scanning online content and users’ decreasing attention spans).
- Views of the Careers page increased by 91 percent to 21,212.

- Views of the Healthcare Providers landing page decreased by 12.5 percent to 3,122 views.
- Views of the Contact Us form increased by 102 percent, to 5,813 views.

Interactive Reports Website

The Interactive Reports website (<https://bi.wdgpublichealth.ca>) was created and launched by the Health Analytics team on June 25, 2018. Communications created the user-friendly web address **WDGPublicHealth.ca/data** and provided input on the language and copy used on the site and helped publicize the site after it was launched. Note that staff visits are captured in the analytics for this site.

- From launch to the end of the year there were 9,153 page views.
- The average time spent on a page was 1 minute 29 seconds.

WeeTalk.net Website

The WeeTalk.net Speech and Language website received 13,357 page views in 2018. In 2019, the content from this site will be moved inside the WDGPublicHealth.ca domain.

Check Before You Choose

Due to a problem with Google Analytics integration, statistics were not collected for this site in 2018.

Stay Well WDG Blog

Blogging enables the Agency to share stories that illustrate our impact in the community and invites people to engage with our brand in a natural, conversational way. It can also amplify our collective voice to ensure our healthy-living information is present in the local dialogue. Blog entries are posted weekly on the website and sent by email to 669 subscribers. The average time on the page for blogs is 2 minutes 19 seconds, with many entries over 4 minutes—much higher than the average web page view time of 1 minute 20 seconds. This indicates visitors are reading (not just skimming) the content, and that blogs provide an opportunity to delve deeper into public health issues.

Of the posts written in 2018, the most-read were:

- “[What happens after a dog bite](#)” (1,615 views)
- “[Childhood experiences shape who you are today: tell us about yours](#)” (965 views)
- “[Public Health wants your input to prepare for cannabis legalization](#)” (796 views)

Blogs live on the website for three years after being published, and the most popular posts are not necessarily the newest. A post from 2016 entitled “What happens when you can’t afford dental care” was the most-read post in 2018, with 7,296 views.

Library

The librarian supports the third Foundational Standard, “Effective Public Health Practice”, specifically the first section, “Program Planning, Evaluation, and Evidence-Informed Decision-Making” by assisting public health professionals to find, organize and use information to support evidence-based research, programs and services.¹

In 2018, the librarian sourced 651 journal articles for staff (203 from other libraries), created a topic-specific Physician Advisories library for internal use and represented the Division/team on the Research and Ethics Committee, Healthy Workplace Committee and Job Evaluation Committee.

The librarian provided literature searches and support for the Community Health, Health Protection, and Family Health divisions on topics such as:

- Social determinants of health and birth outcomes
- Measures for assessing parenting skills
- Targeting multiple risk factors to reduce chronic disease
- Using CBT to treat anxiety and depression in a home visiting setting
- Community design features that encourage healthy lifestyle choices
- Best practices in Street Nursing
- Strategies to encourage compliance to complete hep C treatment
- Distributing NRT through harm reduction programs

- Incentives for public health surveys
- Climate change and vector-born diseases

References

1. Ontario. Ministry of Health and Long-Term Care. Ontario Public Health Standards: Requirements for Programs, Services, and Accountability. [Internet]. 2018 [cited 2019 Mar. 11]. Available from:
http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Ontario_Public_Health_Standards_2018_en.pdf
2. Canadian Internet Registration Authority (CIRA) Research. Canada's Internet Factbook 2018. [Internet]. 2018 [cited 2019 Mar 12]. Available from:
<https://cira.ca/factbook/canada%E2%80%99s-internet-factbook-2018>
3. Gruzd A, Jacobson J, Mai P, Dubois E. The State of Social Media in Canada 2017. [Internet]. Ryerson University Social Media Lab 2018 [cited 2019 Mar 12]. Available from: <https://socialmedialab.ca/2018/02/25/state-of-social-media-in-canada>