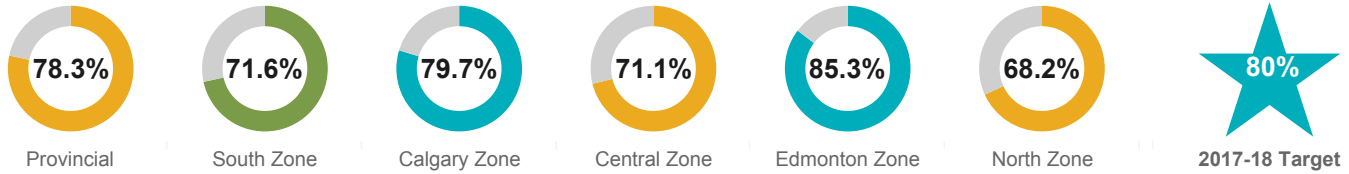


The higher the percentage, the better. A high rate of immunization for a population reduces the incidence of vaccine preventable childhood diseases, and controls outbreaks. Immunizations protect children and adults from a number of preventable diseases, some of which can result in fatal or produce permanent disabilities.

### Legend

- ★ Target achieved
- Improvement
- ▲ Stable than prior period ≤3%
- Area requires additional focus

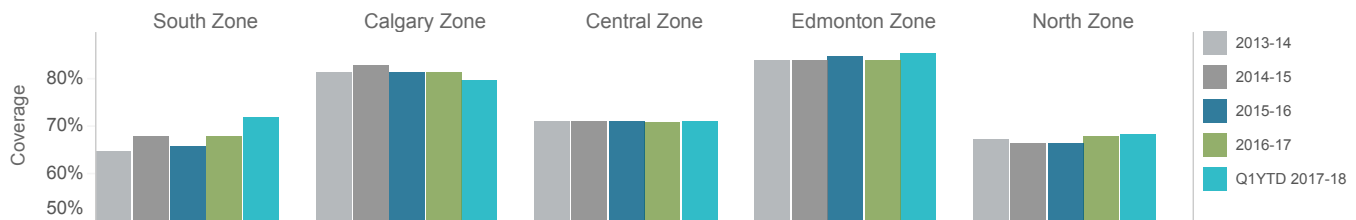
### DTPP-Hib Childhood Immunization Rate, Q1YTD 2017-18



### DTPP-Hib Childhood Immunization Rate

Zone Name	2013-14	2014-15	2015-16	2016-17	Q1YTD 2016-17	Q1YTD 2017-18	Trend	2017-18 Target
<b>Provincial</b>	<b>77.6%</b>	<b>78.3%</b>	<b>78.0%</b>	<b>78.3%</b>	<b>78.7%</b>	<b>78.3%</b>	▲	<b>80%</b>
South Zone	64.6%	67.9%	65.7%	67.8%	65.9%	71.6%	■	80%
Calgary Zone	81.4%	82.6%	81.5%	81.4%	82.3%	79.7%	★	80%
Central Zone	71.1%	71.1%	70.9%	70.6%	71.8%	71.1%	▲	80%
Edmonton Zone	84.0%	84.0%	84.6%	84.0%	84.4%	85.3%	★	80%
North Zone	67.2%	66.6%	66.5%	67.7%	68.5%	68.2%	▲	80%

### DTPP-Hib Childhood Immunization Rate by Zone and Fiscal Year



### Total Eligible Population

Zone Name	2013-14	2014-15	2015-16	2016-17	Q1YTD 2016-17	Q1YTD 2017-18
<b>Provincial</b>	<b>51,613</b>	<b>53,206</b>	<b>54,267</b>	<b>55,138</b>	<b>14,002</b>	<b>14,366</b>
South Zone	4,061	4,179	4,104	4,157	1,082	1,163
Calgary Zone	18,360	19,031	19,602	20,424	5,102	5,268
Central Zone	6,427	6,495	6,240	5,833	1,578	1,557
Edmonton Zone	15,695	16,229	16,870	17,578	4,354	4,477
North Zone	7,070	7,272	7,451	7,146	1,886	1,901

Source: AHS Public Health Surveillance Database, as of July 26, 2017

**Objective 8: Focus on health promotion and disease and injury prevention.**

**WHY THIS IS IMPORTANT**

Working collaboratively with Alberta Health (AH) and other community agencies, AHS will continue to improve and protect the health of Albertans through a variety of strategies in areas of public health including reducing risk factors for cancer, substance use and communicable diseases, and increasing immunization rates.

**AHS PERFORMANCE MEASURE: Childhood immunization**

**Childhood immunization** is defined as the percentage of children by two years of age who have received the required immunization for Diphtheria/ Tetanus/ acellular Pertussis, Polio, Hib (DTPP-Hib) and Measles/ Mumps/ Rubella (MMR).

**UNDERSTANDING THE MEASURES**

A high rate of immunization for a population reduces the incidence of vaccine preventable childhood diseases, and controls outbreaks. Immunizations protect children and adults from a number of preventable diseases, some of which can result in fatal or produce permanent disabilities.

**HOW WE ARE DOING**

Provincial rates for childhood immunization (both DTPP-Hib and MMR) have remained stable from the same period as last year, but remain below 2017-18 targets. The higher the percentage the better.

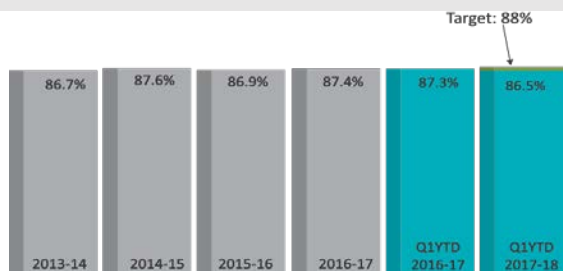
**Childhood immunization: DTPP-Hib**

Quarterly Comparison ▲ Stable than prior period ≤3%



**Childhood immunization: MMR**

Quarterly Comparison ▲ Stable than prior period ≤3%



**WHAT WE ARE DOING**

AHS continues to raise awareness in geographical areas where immunization rates are low, including working with Alberta Health and First Nations Inuit Health Branch (FNIHB) to harmonize childhood immunization between Indigenous communities and non-Indigenous communities.

In addition to childhood immunization, AHS supports work in other areas of health promotion and disease/ injury prevention.

Disease outbreaks are coordinated and managed in accordance with standards and guidelines. AHS and AH are working with the zones to ensure a consistent approach to outbreak reporting, notification and management.

Debriefings with sites that experience outbreaks and staff feedback help inform annual revisions to AHS Department Standard Operating Procedures and Outbreak Guidelines. In Q1, some of the communicable disease outbreaks managed were for infectious gastroenteritis, influenza-like illness, mumps and pertussis.

The 2016-2020 Alberta Sexually Transmitted Blood-Borne Infections (STBBI) Operational Strategy and Action Plan began development in spring 2016, engaging over 350 stakeholders including First Nations’ communities and Metis settlements. Five work streams have been established to develop recommendations.

AHS helps to protect the public by mitigating risks and hazards in the natural and built environment including food, air, and water through the development and implementation of health promotion strategies and interventions. Work continues to finalize a plan to align Alberta Agriculture and Forestry’s and AHS’ inspection programs overseeing meat facilities continues.

AHS’ Provincial Addiction Prevention program provides consultation, facilitation, planning support, and resource development to reduce risk factors and increase protective factors important to prevent addiction. Updates for Q1 include:

- Supported 33 funded community coalitions across the province to implement promotion and prevention activities.
- Four engagement sessions with youth, and service providers who work with youth in Alberta have been conducted to provide input for future development of the Help4me website.
- Work continues on the development of the AHS Harm Reduction Policy.

The Drug Treatment Funding Program in partnership with AHS develops capacity to increase access to sustainable, evidence-informed early intervention treatment services for children and youth in Alberta with addiction and/or mental health concerns. The InRoads curriculum refresh revision and enhancement project is underway, including the development of training modules.