



Hamilton

## INFORMATION REPORT

<b>TO:</b>	Mayor and Members Board of Health
<b>COMMITTEE DATE:</b>	May 22, 2014
<b>SUBJECT/REPORT NO:</b>	Accountability Agreement Indicators 2013 Year-End Results - BOH14013 (City Wide)
<b>WARD(S) AFFECTED:</b>	City Wide
<b>PREPARED BY:</b>	Jennifer Hohol (905) 546-2424, Ext. 6004
<b>SUBMITTED BY:</b>	Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services Department
<b>SIGNATURE:</b>	<i>Bendo Acting Dept Head for Dr. Richardson</i>

**Council Direction:**

Not Applicable

**Information:**

### 2013 Year-End Performance

In March 2014, Hamilton Public Health Services (PHS) received a summary table from the Ministry of Health and Long-Term Care (MOHLTC) outlining their 2013 year-end performance with the Accountability Agreement indicators. All public health units in Ontario are required to report on the same set of indicators under a Public Health Accountability Agreement. The 2013 year-end performance summary table for PHS is provided in Appendix A.

PHS performed well at 2013 year-end by reaching provincial set targets for the following indicators:

- % of confirmed gonorrhoea cases where initiation of follow-up occurred within two business days;
- % of confirmed Invasive Group A Streptococcal Disease (iGAS) cases where initiation of follow-up occurred on the same day as receipt of lab confirmation of a positive case;

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*OUR Vision: To be the best place in Canada to raise a child, promote innovation, engage citizens and provide diverse economic opportunities.*

*OUR Mission: WE provide quality public service that contribute to a healthy, safe and prosperous community, in a sustainable manner.*

*OUR Values: Accountability, Cost Consciousness, Equity, Excellence, Honesty, Innovation, Leadership, Respect and Teamwork.*

- % of school-aged children who have completed immunizations for Meningococcus; and
- % of tobacco vendors in compliance with youth access legislation at the time of last inspection.

A provincial performance summary of all 36 public health units in Ontario can be found in Appendix B. PHS met or exceeded the provincial average in five of the seven indicators where provincial data was provided.

Further improvements are needed to reach targets for the following three indicators:

- % of high-risk food premises inspected once every 4 months while in operation;
- % of Class A pools inspected while in operation; and
- Baby-Friendly Initiative Status.

### **Performance Gaps**

#### **Food Safety**

At 2013 year-end, PHS had inspected 88.7% of high-risk food premises once every four months while in operation. The performance target for this indicator was 100%. This performance gap occurred between May and August 2013 when PHS experienced unscheduled staff absences and an increase in urgent special event activities. Other high-risk areas also had increases in inspection demand which precluded the reallocation of Public Health Inspector (PHI) resources to support the Food Safety team.

An analysis of the 2013 high-risk food premise inspection rates shows 97% completion from January to April, 88% from May to August, and 99% from September to December. All high-risk food premises that did not receive an inspection in the second cycle received two of three required inspections in 2013.

#### **Action Plan**

The following strategies have been or will be implemented to meet future food premise inspection targets:

- Weekly monitoring of high and moderate risk food inspections have begun, replacing monthly monitoring.
- A plan was developed to temporarily reallocate PHI resources on a weekly to monthly basis to support Food Safety inspections from within Food Safety, as well as other PHI teams.
- A review of re-inspection operational standards will occur in May 2014.

- An increase in the number of PHIs available for the summer months may be achieved by managing vacation approvals within all PHI teams and setting minimum required staffing levels.
- Temporary PHI positions may be used to increase staff at the beginning of the second high-risk inspection cycle to offset other vacancies in the program while remaining within the approved budget.

### ***Class A Pools***

At 2013 year-end, PHS inspected 95.7% of Class A pools in operation. The performance target for this indicator was 100%. PHS inspected 34 of 36 year round pools and all 11 seasonal pools. As identified in Report BOH13042 on November 18, 2013, the two outstanding pools did receive inspection; however, not within the January 1<sup>st</sup> to March 31<sup>st</sup> period defined by the MOHLTC. All 36 pools were inspected in each of the three remaining periods in 2013.

### ***Baby Friendly Initiative (BFI)***

In 2011, the MOHLTC proposed the BFI target for PHS be set at "Advanced". In a report to the MOHLTC in January 2012, PHS projected attainment of "Intermediate" status. The request to revise the BFI target was made to accommodate the time required to complete an in-depth, high quality Infant Feeding Study and to secure approval of corporate policies. Although the MOHLTC indicated that revisions to the BFI status were accepted, the subsequent Accountability Agreement did not reflect this change. As a result, the 2012 BFI target was set at "Advanced" with target progression to "Significant progress within Advanced" in 2013.

PHS staff continue to address all BFI components thoroughly to ensure the greatest possible positive impact on breastfeeding rates in Hamilton. "Advanced" BFI status was achieved in 2013 through the submission of required documentation and a request for a pre-assessment. PHS is waiting for the Breastfeeding Committee for Canada to provide dates for a pre-assessment and site visit to allow achievement of "Significant Progress within Advanced" and then "Designation" status.

### **Next Steps**

PHS is currently working with the MOHLTC to develop targets for the 2014 Accountability Agreement indicators. Proposed targets for health protection and promotion performance indicators can be found in Appendix C and D respectively. Targets will be included in the renewal of the Accountability Agreement and will be brought to the Board of Health for approval.

## **Appendices**

Appendix A to Report BOH14013 – Hamilton Public Health Services Performance Summary Table

Appendix B to Report BOH14013 – 2013 Year-End Provincial Summary

Appendix C to Report BOH14013 – 2014 Accountability Agreement Indicators Health Protection Targets

Appendix D to Report BOH14013 – 2014 Accountability Agreement Indicators Health Promotion Targets

Accountability Agreement Performance Indicators		AA INDICATOR PERFORMANCE SUMMARY TABLE CITY OF HAMILTON Date: April 28, 2014											
		Baseline			2012				2013 Target	2013			
		Reporting Period	Performance	2012 Target	2012 Mid-Year (Jan-June)		2012 Year End (Jan- Dec)			2013 Mid-Year (Jan-June)		2013 Year End (Jan - Dec)	
					Reporting Period	Performance	Reporting Period	Performance		Reporting Period	Performance	Reporting Period	Performance
1	% of high-risk food premises inspected once every 4 months while in operation	2010	71%	100%	January 1, 2012 - April 30, 2012	95%	January 1, 2012 - December 31, 2012	98%	100.0%	January 1, 2013 - April 30, 2013	97.1%	January 1, 2013 - December 31, 2013	88.7%
2	% of Class A pools inspected while in operation	2010	17%	≥ 75%	January 1, 2012 - June 30, 2012	100% *	January 1, 2012 - December 31, 2012	98%	100.0%	January 1, 2013 - June 30, 2013	94.4% *	January 1, 2013 - December 31, 2013	95.7%
3	% of high-risk Small Drinking Water Systems (SDWS) assessments completed for those that are due for re-assessment	Unavailable	CBE	100%	January 1, 2012 - June 30, 2012	N/A	January 1, 2012 - December 31, 2012	N/A	100.0%	N/A	N/A	January 1, 2013 - December 31, 2013	N/A
4	% of confirmed gonorrhea cases where initiation of follow-up occurred within 2 business days	2010	CBE	100%	January 1, 2012 - June 30, 2012	99%	January 1, 2012 - December 31, 2012	99%	100.0%	January 1, 2013 - June 30, 2013	100.0%	January 1, 2013 - December 31, 2013	100.0%
5	% of confirmed Invasive Group A Streptococcal Disease (IGAS) cases where initiation of follow-up occurred on the same day as receipt of lab confirmation of a positive case	2010	CBE	100%	January 1, 2012 - June 30, 2012	100%	January 1, 2012 - December 31, 2012	97%	100.0%	January 1, 2013 - June 30, 2013	100.0%	January 1, 2013 - December 31, 2013	100.0%
6	DEFERRED: % of known high risk personal services settings inspected annually	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
7a	% of vaccine wasted by vaccine type that are stored/administered by the public health unit (HPV)	2010	0.5%	Maintain or improve current wastage rate	January 1, 2012 - June 30, 2012	5.1%	January 1, 2012 - December 31, 2012	3.9%	Maintain or improve current wastage rate †	N/A	N/A	January 1, 2013 - December 31, 2013	0.7%
7b	% of vaccine wasted by vaccine type that are stored/administered by the public health unit (Influenza)	2010	2.3%	Maintain or improve current wastage rate	N/A	N/A	January 1, 2012 - December 31, 2012	CBE	Maintain or improve current wastage rate †	N/A	N/A	January 1, 2013 - December 31, 2013	2.4%
8	DEFERRED: % completion of reports related to vaccine wastage by vaccine type that are stored/administered by other health care providers	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
9a	% of school-aged children who have completed immunizations for (Hepatitis B)	2009/10 School Year	74.7%	Maintain or improve current coverage rate	N/A	N/A	2011/12 School Year	CBE	N/A	N/A	N/A	2012/13 School Year	N/A
9b	% of school-aged children who have completed immunizations for (HPV)	2009/10 School Year	55.2%	Maintain or improve current coverage rate	N/A	N/A	2011/12 School Year	CBE	N/A	N/A	N/A	2012/13 School Year	N/A
9c	% of school-aged children who have completed immunizations for (Meningococcus)	2009/10 School Year	88.1%	Maintain or improve current coverage rate	N/A	N/A	2011/12 School Year	89.0%	90.0%	N/A	N/A	2012/2013 school year (As of June 30, 2013)	90.8%
10	% of youth (ages 12 - 18) who have never smoked a whole cigarette	2009 + 2010	86.6%	N/A	N/A	N/A	2011 + 2012 DSO	81.7%	88.3%	N/A	N/A	2012 + 2013	DP
11	% of tobacco vendors in compliance with youth access legislation at the time of last inspection	2011	79.0%	≥ 90%	January 1, 2012 - June 30, 2012	87.0%	January 1, 2012 - December 31, 2012	96.1%	≥ 90%	January 1, 2013 - June 30, 2013	94.7%	January 1, 2013 - December 31, 2013	94.4%
12	Fall-related emergency visits in older adults aged 65 +	2009	5639	N/A	N/A	N/A	January 1, 2011 - December 31, 2011 DSO	5867	Maintain or improve current rate	N/A	N/A	January 1, 2012 - December 31, 2012	DP
13	% of population (19+) that exceeds the Low-Risk Drinking Guidelines	2009 + 2010	28.3%	N/A	N/A	N/A	2011 + 2012 DSO	33.0%	27.1%	N/A	N/A	2013 UR	UR
14	Baby-Friendly Initiative (BFI) Status	2011	Intermediate	Advanced	January 1, 2012 - June 30, 2012	Intermediate	January 1, 2012 - December 31, 2012	Intermediate	Significant progress within Advanced	January 1, 2013 - June 30, 2013	Intermediate	January 1, 2013 - December 31, 2013	Advanced

\* Note that mid-year results for indicator #2 only include year-round pools therefore excluding seasonal pools.

† "current wastage rate" or "current coverage rate" refers to the baseline rate.

#### Legend

CBE Cannot Be Established; for the reporting period data were available but results could not be established.

DP Data Pending; final data are not ready for release but will be made available at a later date.

DSO Data Sharing Only.

N/A Not Applicable; for the reporting period there were no data/ no report required.

NR No Report; the public health unit did not submit a report or data by the end of the reporting period.

UR Under Review due to changes to CCHS alcohol module. Further communications to follow.

# **2013 Year-End Provincial Summary Public Health Accountability Agreement Health Protection Indicators**

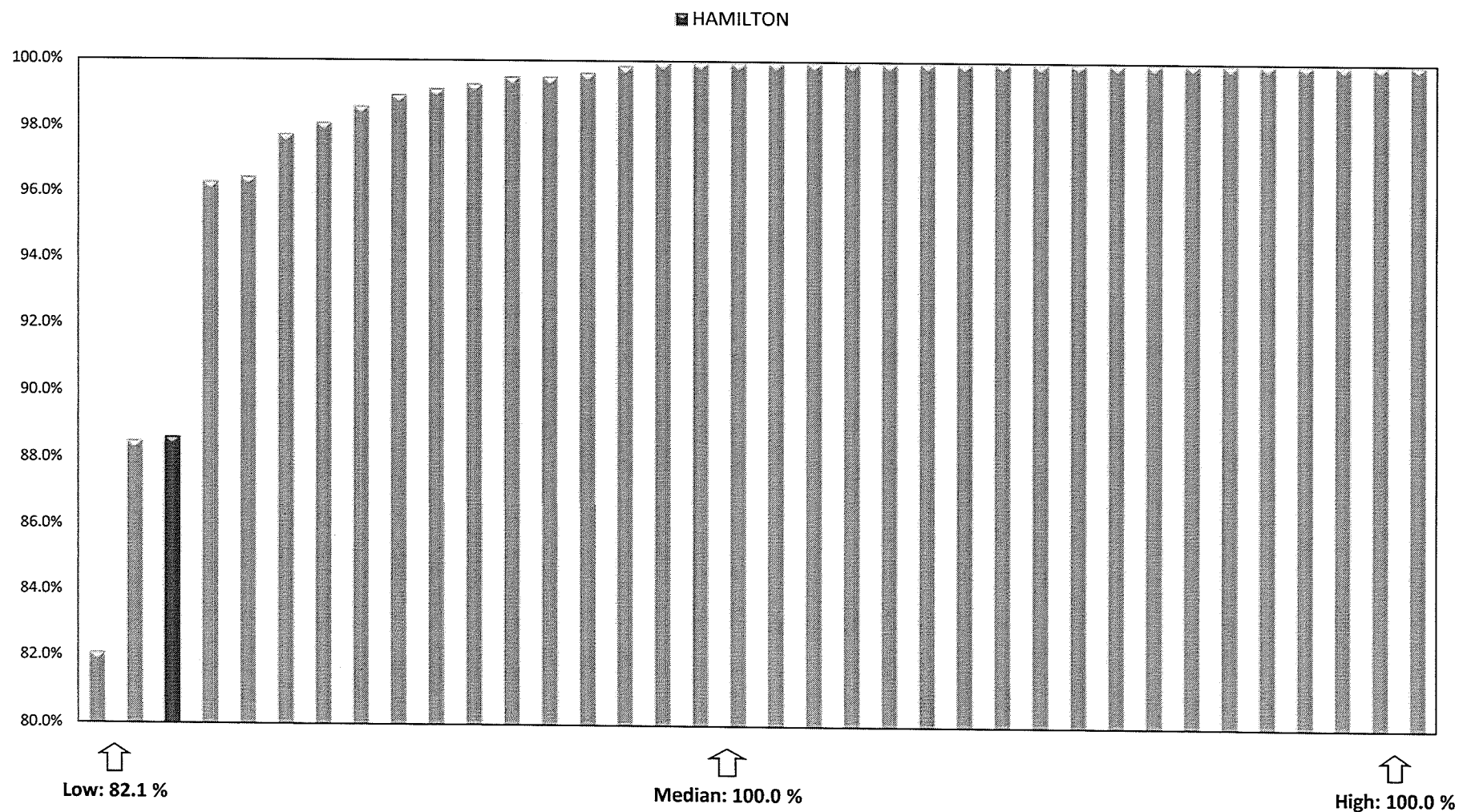
Ministry of Health and Long-Term Care

(Developed for Hamilton Health Unit on May 1, 2014)

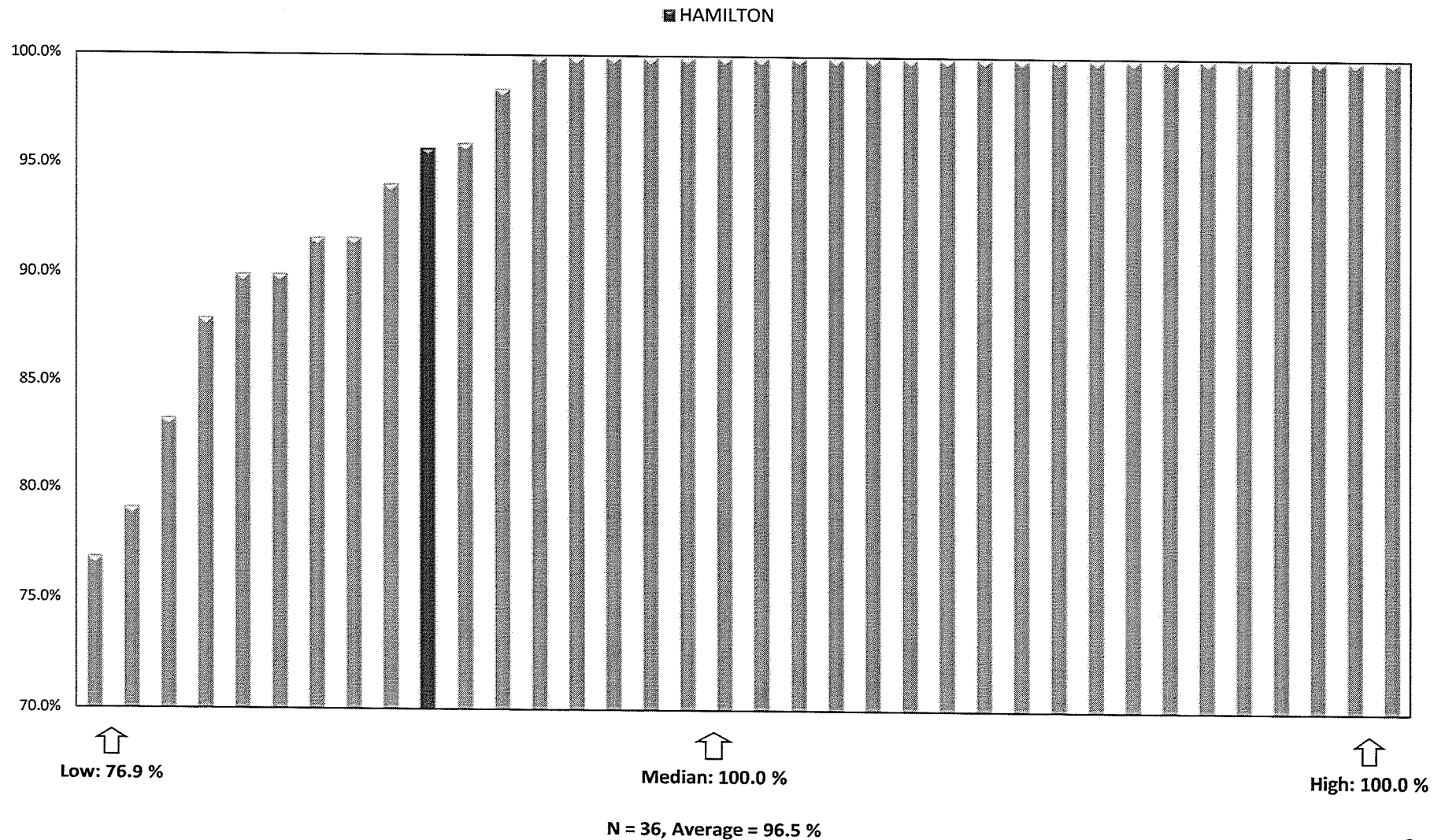
Background document for Board of Health information only.  
Not for broader circulation.



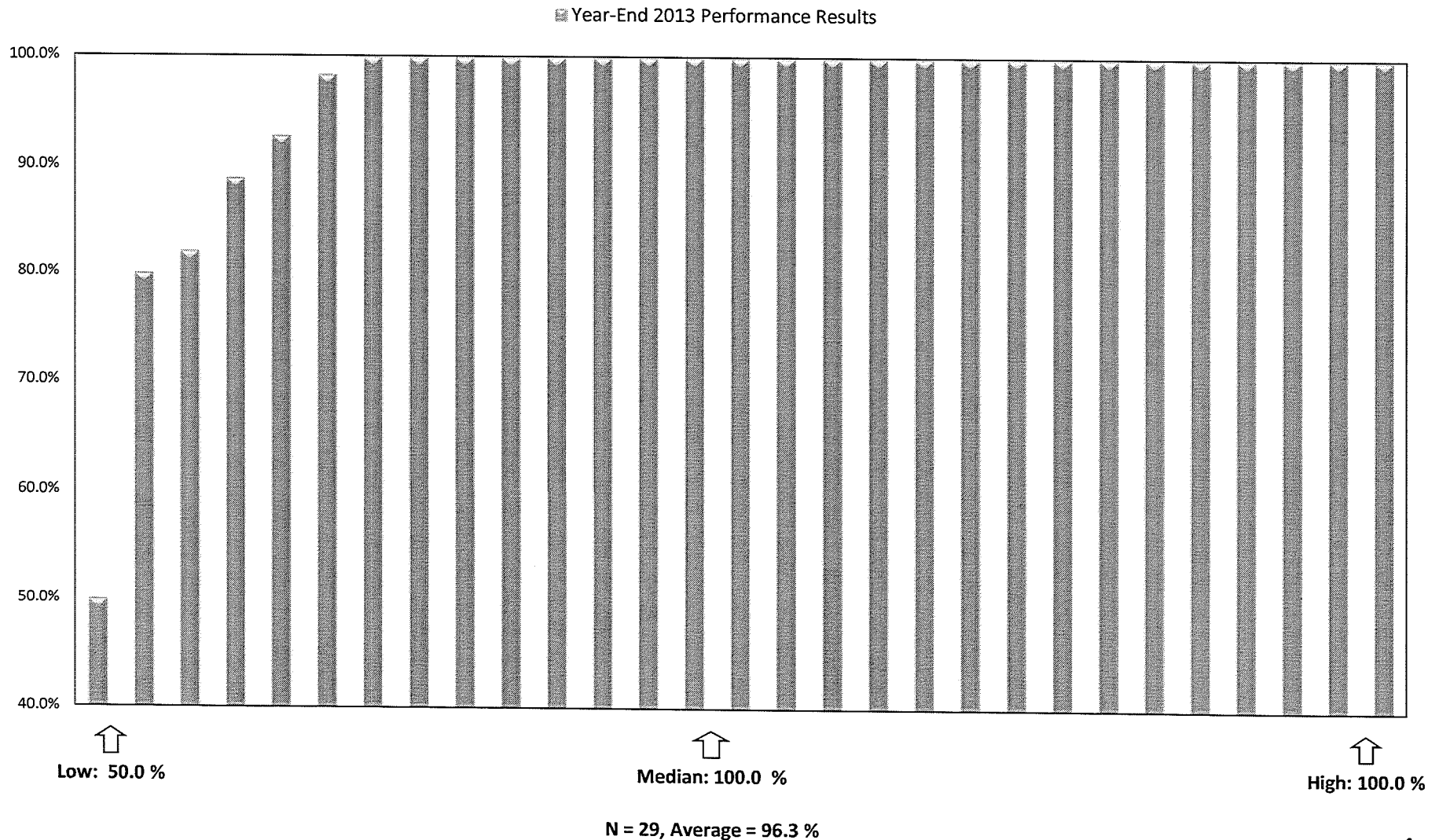
# 1. % of high-risk food premises inspected once every 4 months while in operation (Results)



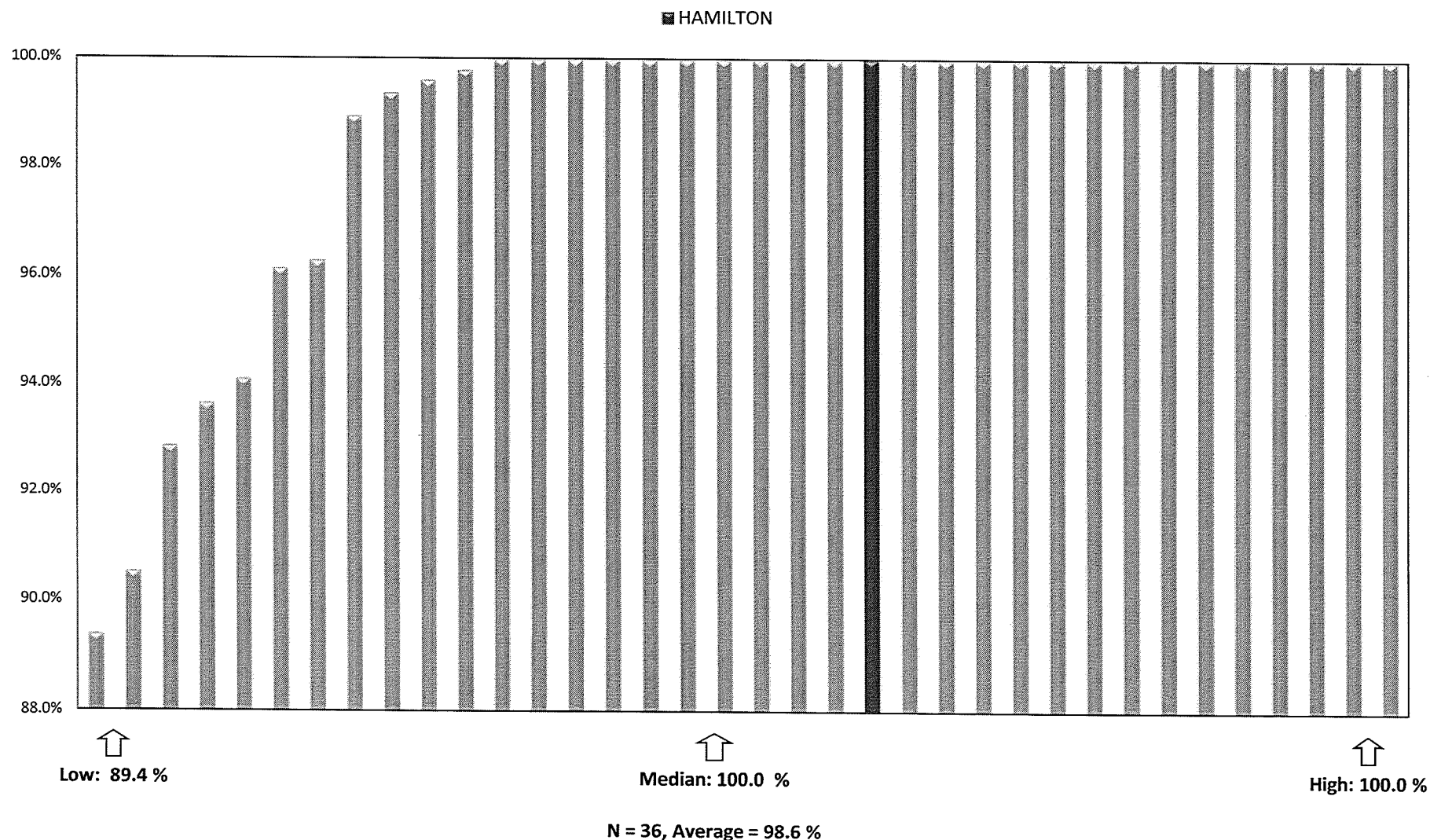
## 2. % of Class A pools inspected while in operation (Results)



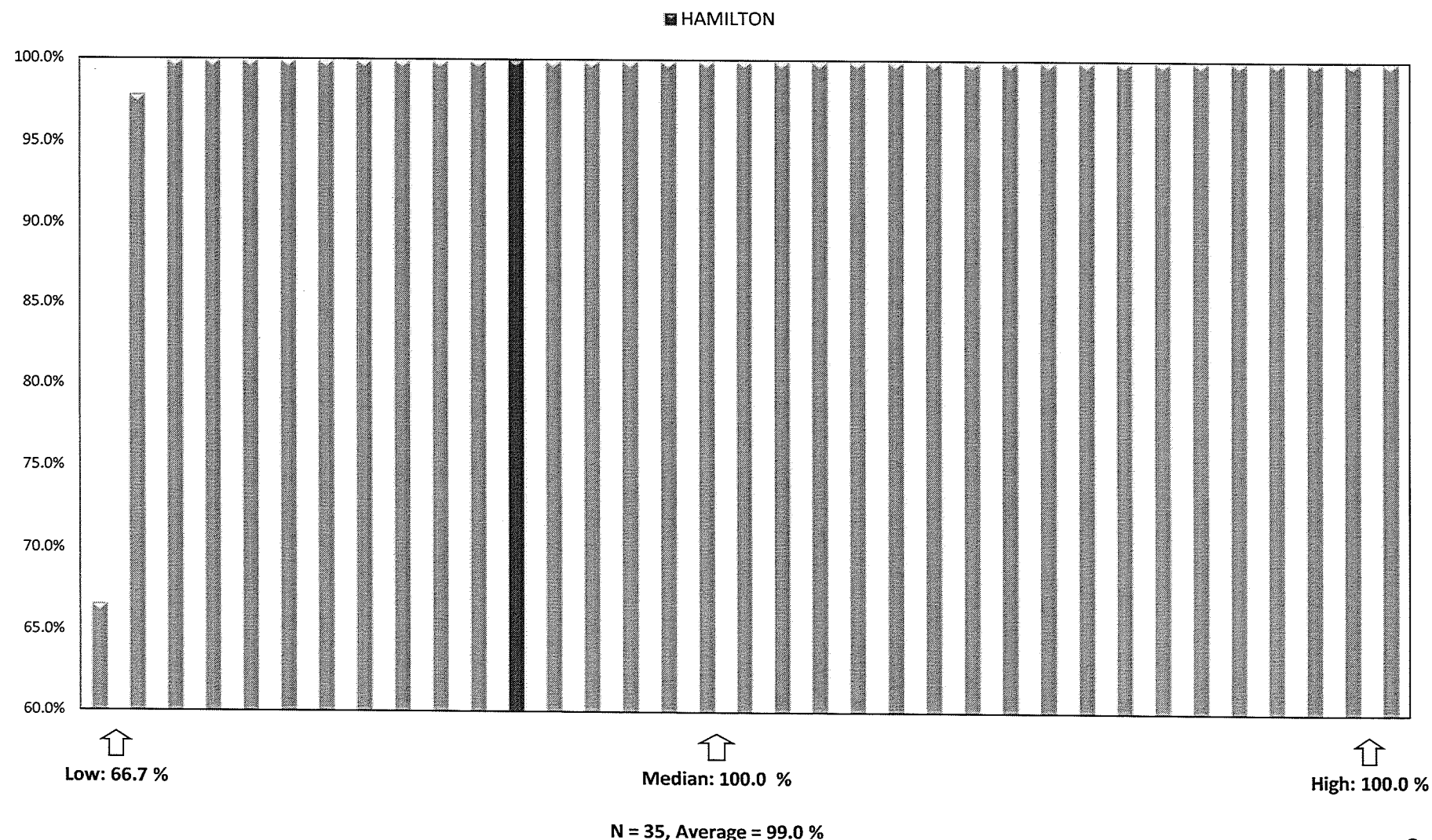
### 3. % of high-risk Small Drinking Water Systems (SDWS) assessments completed for those that are due for re-assessment (Results) (N/A for Hamilton)



## 4. % of confirmed gonorrhea cases where initiation of follow-up occurred within 2 business days (Results)

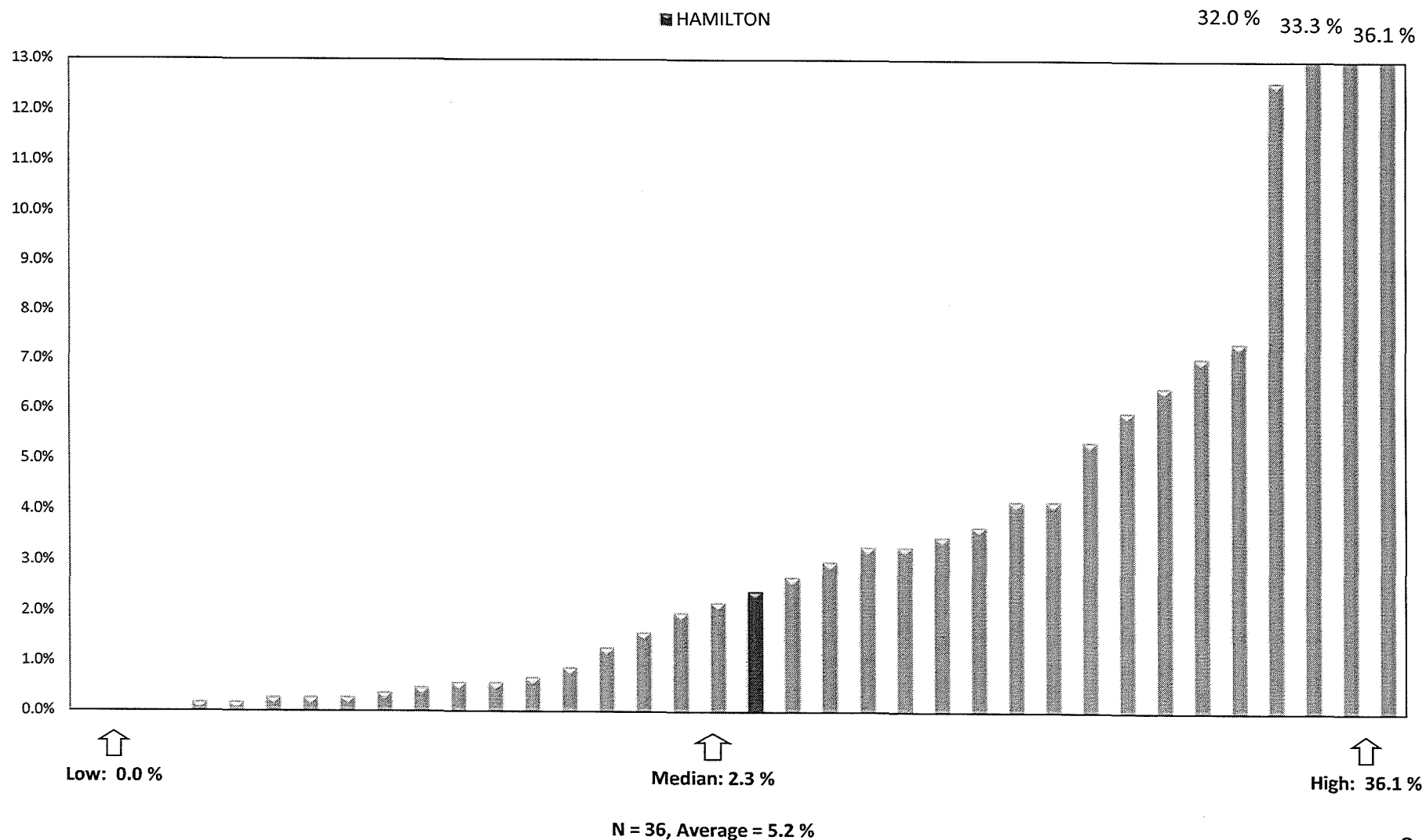


## 5. % of confirmed Invasive Group A Streptococcal Disease (iGAS) cases where initiation of follow-up occurred on the same day as receipt of lab confirmation of a positive case (Results)

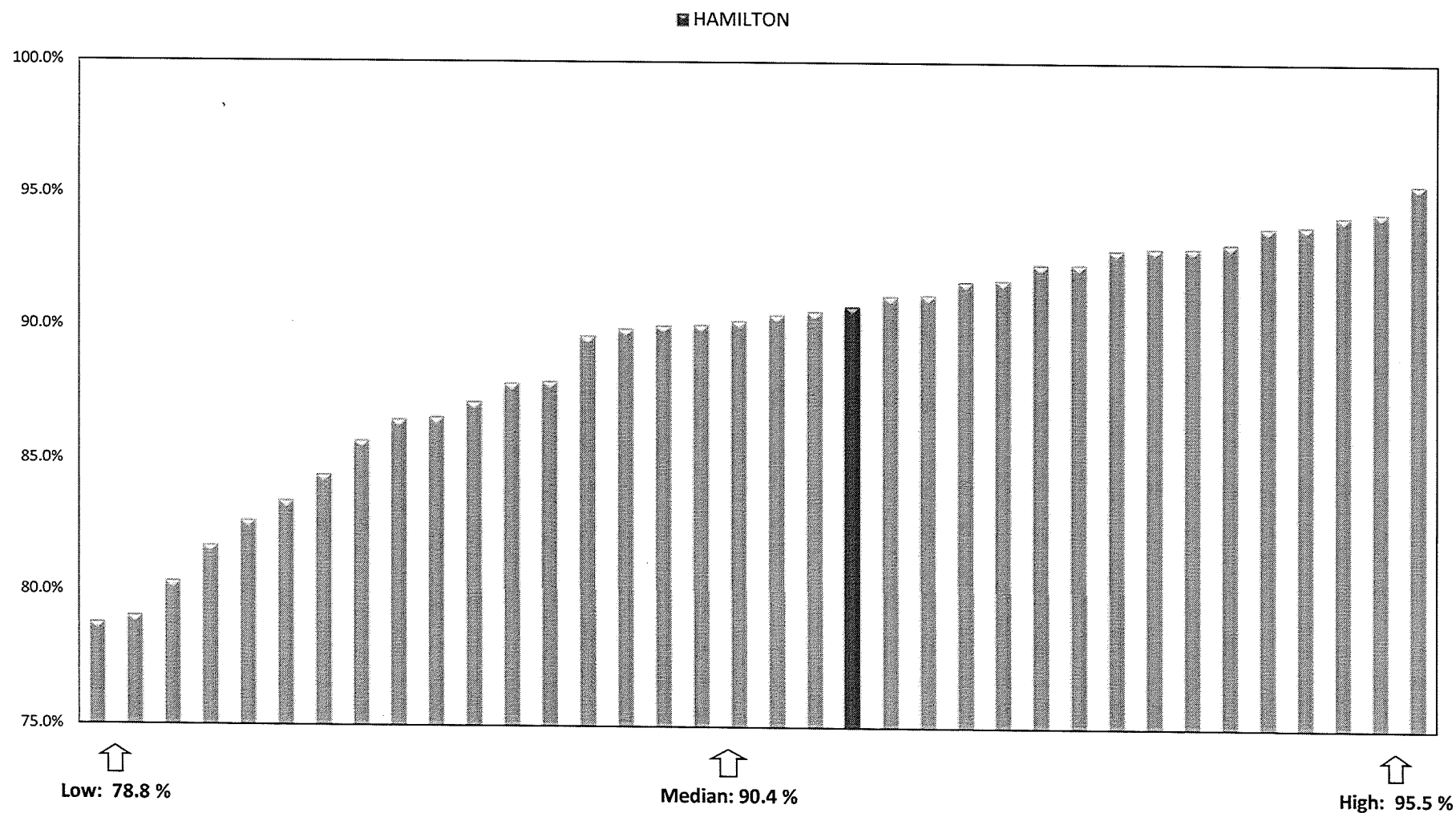


 HAMILTON

## 7b. % of vaccine wasted by vaccine type that are stored/administered by the public health unit (Influenza) (Results)



## 9c. % of school-aged children who have completed immunizations for (Meningococcus) (Results)



**If you have any questions,  
please contact  
[PHUIndicators@Ontario.ca](mailto:PHUIndicators@Ontario.ca)**

**2014 Public Health Funding and Accountability Agreement Target Setting**  
**Health Protection Performance Indicators\***  
**CITY OF HAMILTON**

#	Indicator Name	Baseline		2014 Target		Comments, if applicable
		Baseline Period	Baseline	Proposed Target	Response (Y/N)	
2.1	% of high-risk food premises inspected once every 4 months while in operation	2013 year-end	88.7%	<b>98.4%</b>		Target is set based on provincial average of 98.4%. 2013 Negative Performance Variance Report was completed and submitted with action plans developed to meet proposed target. Contact for Follow-up: Richard MacDonald, Program Manager, 905-546-2424 x5818, Richard.MacDonald@hamilton.ca.
2.2	% of moderate-risk food premises inspected once every 6 months while in operation	2013 new	86.7%	<b>90.0%</b>		Target is set based on provincial average of 89.3%. Action plans have been developed to support Food Safety in successfully reaching the proposed target. Continuous improvements to the action plan will allow for progressive increase of this target in future years. Contact for Follow-up: Richard MacDonald, Program Manager, 905-546-2424 x5818, Richard.MacDonald@hamilton.ca
2.3	% of Class A pools inspected while in operation	2013 year-end	95.7%	<b>98.0%</b>		Trending towards 100%. Targeting 98% in the event of unforeseen circumstances arising in which we are unable to achieve 100%. Contact for Follow-up: Eric Mathews, Program Manager, 905-546-2424 x2186, Eric.Mathews@hamilton.ca
3.1	% of personal services settings inspected annually	2013 new	87.6%	<b>95.0%</b>		Based on historical average in Hamilton. This target exceeds 2013 benchmark and provincial average of 84.4%. Trending towards 100%. Contact for Follow-up: Jordan Walker, Program Manager, 905-546-2424 x7365, Jordan.Walker@hamilton.ca
4.3	% of refrigerators storing publicly funded vaccines that have received a completed routine annual cold chain inspection	2013 new	100.0%	<b>100.0%</b>		Based on historical average in Hamilton. Contact for Follow-up: Kim Dias, Program Manager, 905-546-2424 x7115, Kim.Dias@hamilton.ca
				<b>Proposed 2014/15</b>	<b>Proposed 2015/16</b>	
4.1	% of HPV vaccine wasted that is stored/administered by the PHU	2012/13 new	1.8%	<b>1.7%</b>	<b>1.6%</b>	Based on three year Hamilton average. Proposed targets are set to show progressive improvements from year to year. Contact for Follow-up: Kim Dias, Program Manager, 905-546-2424 x7115, Kim.Dias@hamilton.ca
4.2	% of influenza vaccine wasted that is stored/administered by the PHU	2012/13 new	5.0%	<b>4.0%</b>	<b>3.0%</b>	Based on limited historical Hamilton data. The proposed target adheres to the OPHS Vaccine Storage and Handling Protocol, 2010 which states that wastage rates should not exceed 5% for any one product. Proposed targets are set to show progressive improvements from year to year. Contact for Follow-up: Kim Dias, Program Manager, 905-546-2424 x7115, Kim.Dias@hamilton.ca

**NOTES:**

\* The rabies indicator will not have a target for 2014 while baselines are being established.

Where "2013 year-end" is indicated as baseline year, the baseline data used is the most recent indicator data as collected in the 2013 year-end data reporting process.

Where "2013 new" and "2012/13 new" are indicated as baseline year, the baseline data used is the data recently provided by HUs in the baseline data reporting process for new indicators.

## CITY OF HAMILTON

#	Indicator name	Baseline			Target			Comments, if applicable	Contact for Follow-up (Name, Job Title, Phone #, Email)
		Baseline period	Baseline	PHU Accepts (Y/N)	Target Period	Ministry Proposed Target	PHU Accepts (Y/N)		
1.1.	% of population (19+) that exceeds the Low-Risk Alcohol Drinking Guidelines	2013+2014			2016			Note: Baselines/targets to be set Fall 2015. This indicator is currently under review.	
1.2.	Fall-related emergency visits in older adults aged 65+	2013			2016			Note: Baselines/targets to be set Fall 2014	
1.3.	% of youth (ages 12-18) who have never smoked a whole cigarette	2012+2013			2016			Note: Baselines/targets to be set Fall 2014	
1.4.	% of tobacco vendors in compliance with youth access legislation at the time of last inspection	2013	94.4%	Y	2014	≥90%	Y		Kevin McDonald, Program Manager, 905-546-2424 x1984, Kevin.McDonald@hamilton.ca
1.5.	% of secondary schools inspected once per year for compliance with section 10 of the SFOA	2014			2015	100%		Note: Baselines to be set Winter 2015	
1.6.	% of tobacco retailers inspected twice per year for compliance with section 3 of the SFOA	2013	87.6%	Y	2014	100%	Y	These figures represent total eligible premises inspected fully twice in the reporting period. They do not account for ineligible premises due to logistics or closure. Target is accepted based on controlling for in-year ineligible and seasonal vendor premises (which result in a variance).	Kevin McDonald, Program Manager, 905-546-2424 x1984, Kevin.McDonald@hamilton.ca
1.7.	% of tobacco retailers inspected once per year for compliance with display, handling and promotion sections of the SFOA	2013	92.1%	Y	2014	100%	Y	These figures represent total eligible premises inspected once in the reporting period. Target is accepted based on controlling for in-year ineligible vendor premises (which result in a variance).	Kevin McDonald, Program Manager, 905-546-2424 x1984, Kevin.McDonald@hamilton.ca
1.8.	Oral Health Assessment and Surveillance: % of all JK, SK and Grade 2 students screened in all publicly funded schools	2013-2014 school year			2014	100%		Note: Baselines to be set Fall 2014	
1.9.	Implementation status of NutriSTEP® Preschool Screen	2013	Preliminary	Y	2014	Intermediate	Y	We have set a goal to successfully complete all work within the preliminary category by 2014 year-end and will begin to work within the intermediate stage continuing into 2015. Following conversation with the Ministry, we are of the understanding that upon successful completion of all components within the preliminary category combined with components already completed within the intermediate category that we would be considered successful in achieving intermediate status.	Tammy McIlroy, Program Manager, 905-546-2424 x1593, Tammy.McIlroy@hamilton.ca
1.10	Baby-Friendly Initiative (BFI) Status	2013	Advanced	Y	2014	Designated	Y	Success for designated status will be dependent on BCC assessor availability for both the pre-assessment and designation site visits.	Tammy McIlroy, Program Manager, 905-546-2424 x1593, Tammy.McIlroy@hamilton.ca
		<b>Baseline/Target Sign-off by MOH (Name):</b> <b>Baseline/Target Sign-off on (MM-DD-YY):</b>						Dr. Elizabeth Richardson 04-25-14	