

INFORMATION REPORT

то:	Mayor and Members Board of Health
COMMITTEE DATE:	October 17, 2016
SUBJECT/REPORT NO:	Public Health Services Department Operational Work Plan Update (BOH16049) (City Wide)
WARD(S) AFFECTED:	City Wide
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SIGNATURE:	

Council Direction:

Not Applicable

Information:

Each year, the Public Health Services (PHS) Department Leadership Team (DLT) engages in a business planning exercise to develop the Department Operational Work Plan (DOWP) which sets department priorities for the upcoming year. The PHS DOWP is presented annually to Council during the City of Hamilton budget process. As a result of the recent Board of Health Self-Evaluation Survey (BOH16033), a need was identified to bring the PHS DOWP to the Board of Health (BOH) outside of budget discussions. This report provides an overview of the 2016 PHS DOWP mid-year progress. A 2016 PHS DOWP year-end review will be presented to the BOH in December 2016.

2016 PUBLIC HEALTH SERVICES PRIORITIES

The PHS DOWP identifies priority areas within the department that receive increased focus to ensure the right conditions for success are created. In 2016, PHS has identified four department priorities that are outlined below.

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Health System Integration

With the changing health care landscape in Ontario, particularly the proposed Patients First Act, health system integration is a priority for PHS in 2016. Patients First is focused on health and health care system transformation to improve access to care, patient experience, effectiveness and containment of healthcare costs. In particular for PHS, Patients First provides an opportunity to address population health and integrate the social determinants of health into the broader health system. In order to influence and implement changes occurring at the system level, this priority supports health system planning and decision-making.

In 2016, it was important for PHS to build relationships with McMaster University following the move of public health staff into a shared office space at the David Braley Health Science Centre (DBHSC). A number of successful events were held between McMaster University and PHS staff to build social capital, including facilitated discussions for staff at all levels to identify and deepen collaboration (i.e., the celebration of one-year at DBHSC and the first joint rounds in public health and primary PHS also continues to strengthen relationships with partners and uphold care). communication with staff and the BOH to engage in consultation on the Patients First response as well as the modernization of the Ontario Public Health Standards and Ontario Public Health Organizational Standards. A steering committee has been established for collaboration with both Medical Officer of Health and Local Health Integration Network (LHIN) representation from across the Hamilton Niagara Haldimand Brant (HNHB) LHIN. In addition, definitions on population health and health equity were proposed and agreed upon across the HNHB LHIN and education has begun with healthcare partners in the Hamilton community.

Hamilton Food Strategy

A lack of a coordinated approach across departments and the community with respect to food issues initially drove collaborative efforts on the development of a Hamilton Food Strategy between PHS, Community & Emergency Services, Planning & Economic Development, Public Works and community partners. Much success on the Hamilton Food Strategy was seen in 2015 with strong community support to continue this work as a priority for PHS in 2016.

In 2016, following successful community engagement, revisions were made to the Hamilton Food Strategy with feedback and input from the City of Hamilton Senior Leadership Team. The goals and recommendations within the Hamilton Food Strategy were brought forward and endorsed by the BOH in August 2016 (Report BOH13001(d)) with work in this priority now shifting to focus on implementation.

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Poverty Action Strategy

The Poverty Action Strategy has become a priority for PHS as a result of a motion approved by the General Issues Committee (GIC) on May 4, 2016. Poverty, as measured by low income, exists in all Hamilton postal codes, ranging from 5% to 46%¹. Despite investment in people and neighbourhoods, 19.1% of Hamiltonians live below the Low Income Cut-off and 22% of all Hamilton children live in poverty¹. Creating a population health approach to address poverty in the City of Hamilton is essential to the work of PHS. In addition, the Poverty Action Strategy has been identified as a PHS priority as it is a collaborative initiative with Community & Emergency Services and community partners.

A Poverty Reduction Steering Committee has been established made up of members from PHS, Community & Emergency Services and key community partners. Initial engagement with community poverty reduction networks has begun to open discussion on the direction of the strategy. Further consultation with Councillors will continue to support development of the Poverty Action Strategy planned to go forward to GIC in early 2017.

Public Health Services Culture

In 2014, PHS conducted a Denison culture survey to determine the current state of organizational culture within the department. Through these survey results, it was recognized that there was room for improvements to be made to the PHS department culture. In addition, culture has become a corporate priority within the City of Hamilton further supporting this work as a priority for PHS.

In 2016, a PHS Culture Action Team (CAT) was established with members from all divisions and roles within the department. This team identified three areas of focus for culture improvements which included: 1) trust, 2) communication, and 3) staff involvement. Monthly dialogue has been established between CAT and the PHS DLT to allow for engagement and open communication with senior leaders. Following an initial culture launch by PHS in 2015, CAT held a culture-focused event in June 2016, which was well attended and received by PHS staff. A one-year review is currently underway to evaluate PHS actions, structures and processes for addressing culture to date and to make recommendations in moving forward to advance positive culture within the department.

PRIORITIES SHIFTING TO STEADY STATE

In order to sustain achievements and make room for new priorities, priority work must successfully become operational. The following initiatives on the 2016 PHS DOWP are focused on creating the necessary transition plans to support ongoing operational work within these areas in 2017.

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Privacy, Records, and Information Management

As a health service provider, PHS has extensive information management demands to meet regulatory and system funder requirements. In particular, privacy practices regarding personal information and personal health information are provincially legislated and require mandatory compliance. Privacy compliance gaps at PHS were identified through internal experience and an external consultant report making the development of a privacy program and information management framework a priority for PHS.

In 2016, a Privacy, Security and Information Management Steering Committee was established with representation from across the department. Four core privacy policies addressing confidentiality, breach incident management, disclosure and safeguarding of personal health information were approved and posted for staff along with the automation of the privacy breach reporting process. Training for staff will be a focus within this initiative to support day-to-day privacy practices. In addition, an information management governance framework has been developed with a focus on implementation of an electronic medical records system and file management of electronic records currently stored on shared drives.

Healthy Kids Community Challenge

Hamilton was successful in its bid to become one of 45 communities in Ontario to participate in the Healthy Kids Community Challenge funded by the Ministry of Health and Long-Term Care (MOHLTC) aimed at promoting physical activity and healthy eating to reduce childhood obesity. This initiative became a priority for PHS in 2015 as it involves multiple City of Hamilton departments, Councillors and 22 community partners working together to promote healthy children 12 years and under living on the Hamilton Mountain (Wards 6, 7, and 8). In addition, this initiative provides a unique opportunity for local data collection and evaluation.

In early 2016, the first Healthy Kids Community Challenge theme, "*Run. Jump. Play. Every Day.*" was implemented. More than 125 individuals were in attendance at the Sleigh and Play kickoff event followed by over 20 supporting initiatives organized within the community to support this theme. The action plan for the second theme, "Water Does Wonders", was submitted to the MOHLTC in July 2016. A detailed progress update on this priority was presented to the BOH in June 2016 (Report BOH14007(b)).

Healthy Birth Weights

In 2011, data showed that low birth weight rates varied across the Hamilton community with higher instances in neighbourhoods that also had higher rates of smoking, teen pregnancy, and low income². The Healthy Birth Weights initiative became a priority for PHS building on cross-sector partnerships through the Healthy Birth Weight Coalition made up of 50 members from 30 organizations within the Hamilton community. Since

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2013, the Healthy Birth Weights initiative has had much success working with health and community partners to strengthen the system of supports for pregnant and parenting youth.

In 2016, the focus of this initiative has been on developing a transition plan to operationalize this work within PHS and community partners. In addition, ongoing monitoring and continuous improvement efforts are being put into place to sustain success.

References

- 1. The Rich and the Rest of Us (2013). Social Planning and Research Council Hamilton.
- 2. Better Outcomes Registry & Network (BORN) Information System (2007-2011). Extracted: November, 2012.