Item 4.1, GIC Meeting February 17, 2017



Public Health Services General Issues Committee February 17, 2017



Healthy Birth Weights

- Lead initiative to transform local health care services to better serve pregnant and parenting youth
- Identified and collaborated with youth leaders to build solutions: ٠
 - Parenting resources •
 - Smoking cessation material

Drug & Substance Misuse

- Improving services to vulnerable clients with addictions ٠
 - S Considering feasibility of supervised injection sites through engagement with Hamilton community
 - S Expanded Naloxone program and advocated to Province for additional harm reduction resources
 - Introduced distribution of safe inhalation kits
- Making healthy choices easier •
 - S Banned visual display/promotion of drug paraphernalia in convenience stores



Food Strategy

- Collaborative effort of Public Health Services, Community & Emergency Services, Planning & Economic Development, Public Works and community partners
- Hamilton Food Strategy: A Healthy, Sustainable, and Just Food System informed by input from over 2,700 citizens and community stakeholders
- Endorsement of strategy by Board of Health

Healthy Kids Community Challenge

- Collaborative effort lead by Public Health Services involving multiple City departments, Councillors and community partners to promote healthy lifestyles for children living in Wards 6, 7, 8
- Unique provincial funding for targeted initiatives and evaluation
 - Theme 1 Run. Jump. Play. Every Day
 - Theme 2 Water Does Wonders



Poverty Reduction Strategy

- Goal to implement initiatives to achieve a measurable impact in the Hamilton community, building on existing municipal role and programs
- Worked with community leaders to build a picture of the poverty reduction system in Hamilton
- Identified service gaps and opportunities
- Developed alternatives for consideration at future GIC
- Groundwork for development of a broader Municipal Poverty Reduction Strategy



Health System Integration

- Patients First Act passed
 - Lays out explicit role for MOH/PHS and BOH in planning health care
 - Board of Health to provide advice on development of LHIN integrated health service plan
 - Established coordinating committee with LHIN
- Improving health and health & social service integration for clients
 - HHS, SJH, LHIN, primary care, City
 - Hamilton Family Health Team Planning in Dundas
 - Community hubs
 - Providing data for initiatives



Racoon Rabies

- Collaboration with Animal Services, Ministry of Natural Resources & Forestry, public health units and veterinary community
- Responded to 200 positive animals locally
- Followed-up 1500 calls to ensure appropriate care after rabies exposure
- Outreach with at risk populations, veterinary community and general public through media and new health promotion campaign

Syrian Newcomer Response

- Worked with lead settlement agency and health sector partners to support health sector readiness for newcomers
- Coordinated individual health assessments for newcomers to identify care
 needs and connect to primary care services for ongoing support
- Provided coordinated vaccinations, dental screening and registration of newcomer children to Healthy Smiles Ontario dental programs



Performance Metrics

2016 Health Promotion Accountability Agreement Performance Indicators

		2016				
#	Indicator	Reporting Period	Target	Performance*		
1.4	% of tobacco vendors in compliance with youth access legislation at the time of last inspection	January 1, 2016 - December 31, 2016	≥90%	96.9% (369/381)		
1.5	% of secondary schools inspected once per year for compliance with section 10 of the SFOA	January 1, 2016 - December 31, 2016	100.0%	96.4% (27/28)		
1.6	% of tobacco retailers inspected twice per year for compliance with section 3 of the SFOA	January 1, 2016 - December 31, 2016	100.0%	96.8% (360/372)		
1.7	% of tobacco retailers inspected once per year for compliance with display, handling and promotion sections of the SFOA	January 1, 2016 - December 31, 2016	100.0%	98.7% (381/386)		
1.8	Oral Health Assessment and Surveillance: % of all JK, SK and Grade	2015/16 Schools	100.0%	100.0% (133/133)		
1.0	2 students screened in all publicly funded schools	2015/16 Students	100.0%	100.0% (14199/14199)		
1.9	Implementation status of NutriSTEP® Preschool Screen	January 1, 2016 - December 31, 2016	Advanced	Advanced		
1.10	Baby-Friendly Initiative (BFI) Status	January 1, 2016 - December 31, 2016	Designated	Designated		

*Final data not yet validated

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Performance Metrics

			2016			
#	Indicator	Reporting Period	Target	Performance*		
2.4	% of high-risk Small Drinking Water Systems (SDWS) inspections completed for those that are due for re-inspection	January 1, 2016 - December 31, 2016	100.0%	100.0% (1/1)		
3.2	% of suspected rabies exposures reported with investigation initiated within one day of public health unit notification	January 1, 2016 - December 31, 2016	100.0%	99.9% (1507/1508)		
3.5	% of salmonellosis cases where one or more risk factor(s) other than "Unknown" was entered into iPHIS	January 1, 2016 - December 31, 2016	90.0%	87.5% (84/96)		
4.2	% of influenza vaccine wasted that is stored/administered by the public health unit	September 1, 2015 - August 31, 2016	3.0%	5.7%		
4.3	% of refrigerators storing publicly funded vaccines that have received a completed routine annual cold chain inspection	January 1, 2016 - December 31, 2016	100.0%	100.0% (463/463)		

* Final data not yet validated



Performance Metrics

2016 Health Protection Accountability Agreement Monitoring Indicators

#	Indicator	2014	2015	2016*
2.1	% of high-risk food premises inspected once every 4 months while in operation	98.5%	97.4%	99.1%
2.1		(810/822)	(809/831)	(891/899)
2.2	% of moderate-risk food premises inspected once every 6 months while in operation	95.1%	97.6%	93.2%
2.2	s of moderate risk lood premises inspected once every o months while in operation	(986/1037)	(1023/1048)	(1115/1196)
2.3	% of Class A pools inspected while in operation	100.0%	100.0%	100.0%
		(48/48)	(49/49)	(50/50)
2.5	% of public spas inspected while in operation	100.0%	100.0%	100.0%
		(29/29)	(30/30)	(28/28)
3.1	% of personal service settings inspected annually	99.9% (714/715)	99.9%	99.6%
			(724/726)	(732/735)
3.3	% of confirmed gonorrhea cases where initiation of follow-up occurred within two	100.0%	98.9%	97.0%
	business days	(195/195)	(188/190)	(331/343)
3.4	% of confirmed invasive Group A Streptococcal Disease cases where initiation of	100.0%	96.8%	100.0%
5.4	follow-up occurred on the same day as receipt of lab confirmation of a positive case	(26/26)	(30/31)	(24/24)
4.1	% of HPV vaccine wasted that is stored/administered by the public health unit	N/A	0.8%	4.3%
4.4	% of school agod children who have completed immunizations for honotitic D	78.7%	73.0%	68.7%
4.4	% of school-aged children who have completed immunizations for hepatitis B	(4704/5978)	(4136/5669)	(3963/5768)
4.4	% of school aged children who have completed immunizations for UDV	59.5%	56.2%	57.2%
4.4	% of school-aged children who have completed immunizations for HPV	(1618/2719)	(1563/2782)	(1061/1856)
4.4	% of school-aged children who have completed immunizations for meningococcus	85.0%	80.6%	76.9%
4.4		(5077/5975)	(4567/5669)	(4433/5768)

*Final data not yet validated

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Poverty Reduction Strategy

- Complete reporting back on plan stemming from May motion
- Begin to build comprehensive Municipal Poverty Reduction Strategy

Opioid Response Plan

Coordinate collective efforts related to drug and substance misuse in the community with community partners

Improve City Services for Vulnerable Populations

- Early years
- Mental health & addictions
- Poverty



Health and Health & Social Service Integration

- Continue work with community partners to improve services, address health inequities and improve outcomes
- Priority areas for PHS:
 - Providing data for planning & decision making
 - Early years
 - Poverty
 - Mental health & addictions



2017 Initiatives

Public Health System Changes

- Implementing new OPHS standards
- Public health role with LHIN planning
- Provincial local public health restructuring

People & Performance Plan

- Leadership Profile implementation
- Improving performance monitoring
- Improving performance accountability and development
- Skill development
- Workplace culture



Continuous Improvement

Vaccine & Preventable Disease

- Implemented new vaccines
 - HPV expansion to boys
 - Shingles vaccine
- Reallocated departmental resources to address provincial expectations for Vaccine program and remain within departmental budget

Seniors Oral Health

- Reviewed and revised approach based on pilot, seniors health needs and literature to impact broadest number of seniors possible
- Collaboration with personal support worker programs to provide education
 on seniors oral health and approaches for care
- Community outreach to low income, high need seniors
- Improving oral health in LTC: implementing best practices
- Increased clinic service for seniors including prevention & treatment
 - Invested in serving additional 1400 seniors per year



Continuous Improvement

Prenatal Screening

- Prenatal screening rates below provincial service target (1,250 women/yr)
- Established partnerships with community healthcare professionals and agencies to improve screening rates
- Achieved 20% increase in prenatal screens received from community partners (231 in 2015 to 297 in 2016)

Prenatal Class Delivery

- Decline in uptake of in-person prenatal education classes, increase in cancellations and evening classes below maximum capacity
- Reduced adult evening series from 48 to 37 per year
- Cancelled 9 series during year due to low registration
- Maintained service at all sites to interested residents across the City while running fewer classes closer to maximum capacity
- Redirected staff resources to meet the vaccine preventable disease requirements



Continuous Improvement

Client Privacy

- Implemented additional privacy safeguards in keeping with evolving legislative and policy requirements from province, and evolution of privacy requirements of the Commissioner
- Increased reporting of privacy issues allowing for:
 - More timely response
 - Improved mitigation of organizational risk
 - Ensuring notification of affected parties
 - Identification of additional areas for improvement

Performance Accountability & Development

- Ensured same jobs had same job description and performance expectations across department
- Aligned roles and competencies with core and strategic work of the City and Public Health as they evolve
- Implemented all City competency areas as well as PH technical competencies



2017 Continuous Improvement Plans

Program Reviews

- School program
- Vaccine preventable disease program

Lean Process Improvements

• Two processes per year

PAD Implementation

- Consistency in assessment
- Alignment of goals with City/PHS strategy



2017 Challenges

Provincial Budget Pressures

- Province continued with adjusted share based funding model for provincial grants to local public health agencies
- Actual share of funding granted to PHS continues to decrease and remains slightly underfunded
 - 26 of 36 public health units with actual share above model share
 - 10 of 36 public health units, inc. Hamilton, with actual share below model share
- Any new funding sources have been on a time limited basis for program implementation and not sustained to support ongoing service delivery

Year	Ар	proved Grant (at 75%)		Model Share (%)	Share Difference (%)	Model Share Status (%)	Total
2015 (original)	\$	23,456,900	4.08%	4.11%	0.03%	99.24%	\$ 575,210,900
2015 (updated) ¹	\$	22,616,867	4.07%	4.11%	0.04%	98.95%	\$ 555,592,503
2016	\$	22,650,700	4.04%	4.11%	0.08%	98.12%	\$ 561,150,300

(1) 2015 mandatory programs funding includes adjustments for dental integration.



2017 Challenges

Emerging Infectious Diseases

- Rabies
- Chikungunya

Modernization of the Ontario Public Health Standards

- Service delivery expectations continue to increase within requirements of existing standards
- Unknown changes to service delivery requirements following modernization of standards
- Province developing new accountability framework

Health System Technology

- Require health system technology to support integrated health care
- Panorama, public health electronic medical record systems (OSCAR)



2017 Challenges

Potential for restructuring of local public health

 Advisory group to give confidential recommendations to Minister by June

Emerging role of public health in health system still being defined

- Unclear what implementation of Patient's First will look like
- Includes roles for both MOH/PHS and BOH with the LHIN

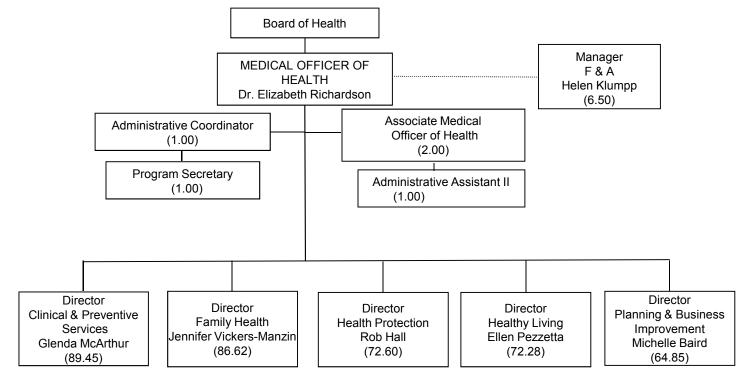
Competing Priorities

- How to use limited resources to satisfy all stakeholders, eg
 - resources to generate and use data for program and system needs assessment, planning and monitoring
 - Services for individuals vis-à-vis population level strategies



2017 Preliminary Tax Operating Budget Public Health Services

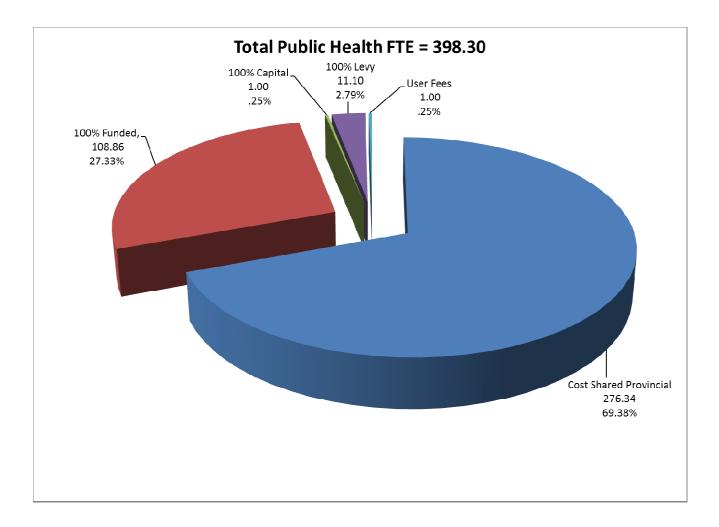




Complement (FTE)	Management	Other	Total	Staff to Mgmt Ratio
2016	35.50	369.50	405.00	10.41:1
2017	35.50	362.80	398.30	10.22:1
Change	0.00	(6.70)	(6.70)	

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Hamilton FTE Complement by Funding Source



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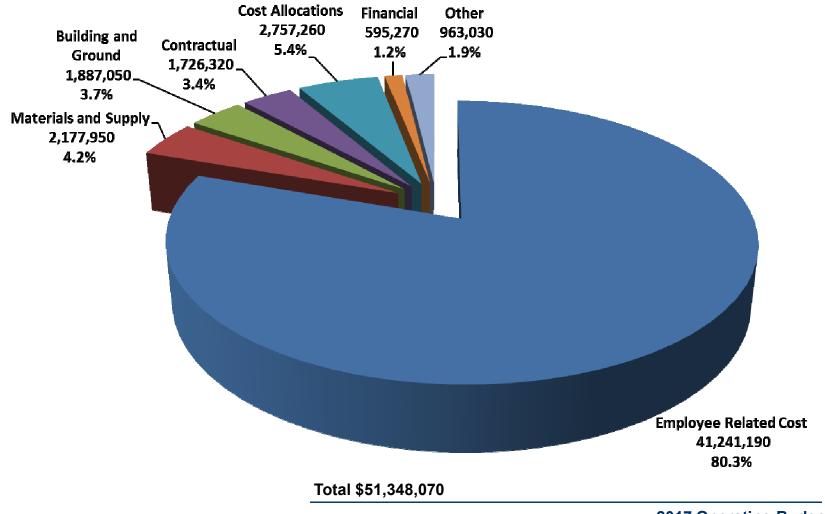
Vacancies

Division	Vacant FTE at 12/31/16 *
Clinical & Preventive Services	1.7
Family Health	2.2
Healthy Living	1.5
Planning & Business Improvement	3.0
Public Health Services Total	8.4

* Permanent FTE

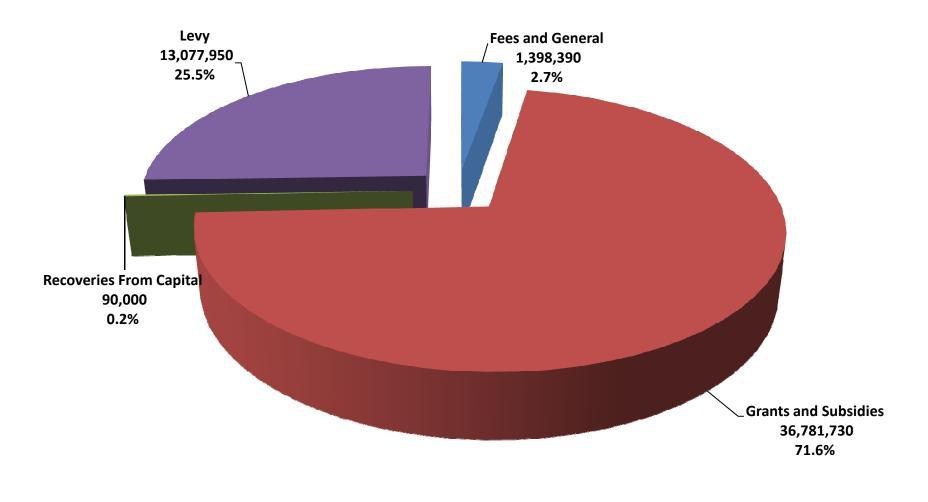


2017 Gross Expenditures



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Total \$51,348,070

Hamilton Mandatory Services - \$43M gross/\$9M net (Approximate)

Service	Subservices	
Foundation Standards	Evidence-Informed Practice & Evaluation	
	Determinants of Health	
	Surveillance & Health Status Monitoring	
Chronic Disease and Injury	Chronic Disease Prevention	
Prevention	Prevention of Injury & Substance Misuse	
Environmental Health	Food Safety	
	Health Hazard Prevention & Management	
	Safe Water	
	Air Quality	
	Climate Change	
Family Health	Child Health	
	Reproductive Health	
Infectious Diseases	Vaccine Preventable Diseases	
	Vector Borne Disease Prevention & Control	
	Infectious Disease Prevention & Control	
	TB Prevention & Control	
	Sexual Health and Sexually Transmitted Infection	
Public Health Emergency Preparedness		

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Non-Mandatory Services – \$9M gross/\$4M net (Approximate)

Service	Subservices
Foundation Standards	Community Nurse Navigator
Chronic Disease and Injury	Adult Dental Treatment
Prevention	Mental Health & Addictions
Environmental Health	Residential Care Facility Inspection
	Air Quality Monitoring
Family Health	Child & Adolescent Services

Hamilton

2017 Net Operating Budget by Division

Public Health Services

	2016 Restated	2016 Projected	2017 Preliminary	2017 Prelimina 2016 Restate	-
	Budget	Actual	Budget	\$	%
Medical Officer of Health	5,924,060	5,959,030	6,168,050	243,990	4.1%
Clinical & Preventive Services	6,001,900	5,801,070	5,804,330	(197,570)	(3.3)%
Family Health	4,198,490	4,180,050	4,288,210	89,720	2.1%
Health Protection	7,148,430	6,932,930	7,192,450	44,020	0.6%
HealthyLiving	7,057,840	7,002,610	7,191,510	133,670	1.9%
Planning & Business Improvement	4,919,280	5,027,210	5,084,090	164,810	3.4%
Mandatory Public Health Subsidy	(22,860,150)	(22,650,700)	(22,650,700)	209,450	0.9%
NET LEVY	12,389,850	12,252,200	13,077,950	688,100	5.6%



2017 Budget Drivers Highlights

Employee related costs	\$723,600
Indirect cost allocations	88,870
Facility costs	77,830
IT Software upgrade and maintenance	75,610
Insurance (Risk Mgmt) recovery	(31,530)
User Fee revenues	(63,610)
NEP Provincial subsidy	(70,100)



2017 Preliminary Tax Operating Budget Medical Officer of Health

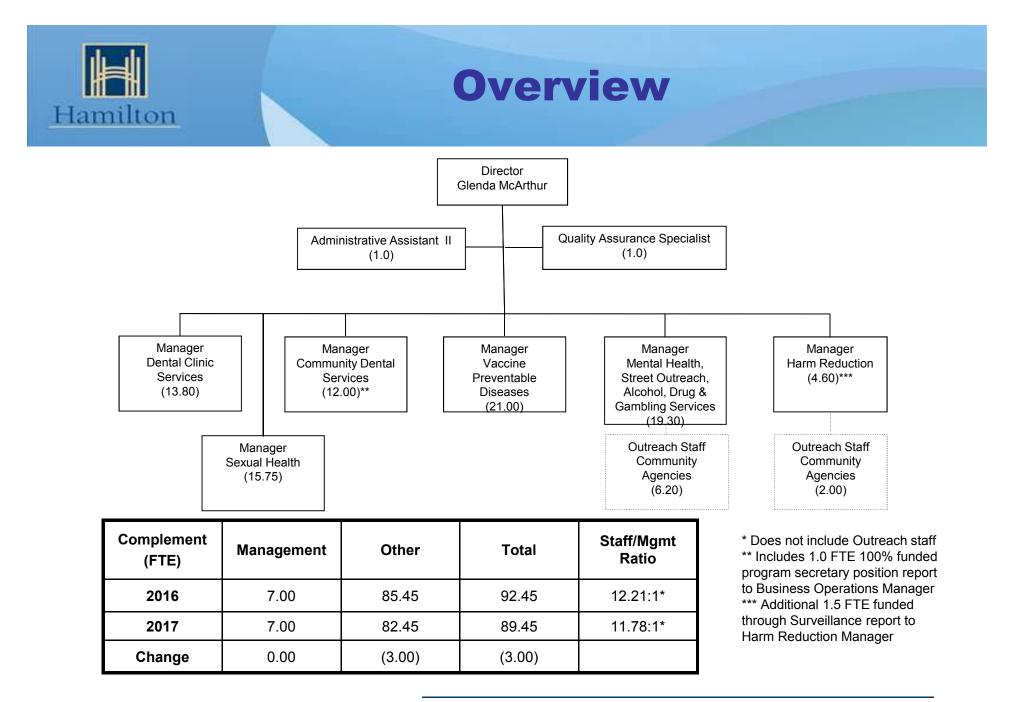
Hamilton 2017 Net Operating Budget by Section

Medical Officer of Health

	2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Preliminary vs. 2016 Restated \$%	
Medical Officer of Health	5,924,060	5,959,030	6,168,050	243,990	4.1%
NET LEVY	5,924,060	5,959,030	6,168,050	243,990	4.1%



2017 Preliminary Tax Operating Budget Clinical & Preventive Services



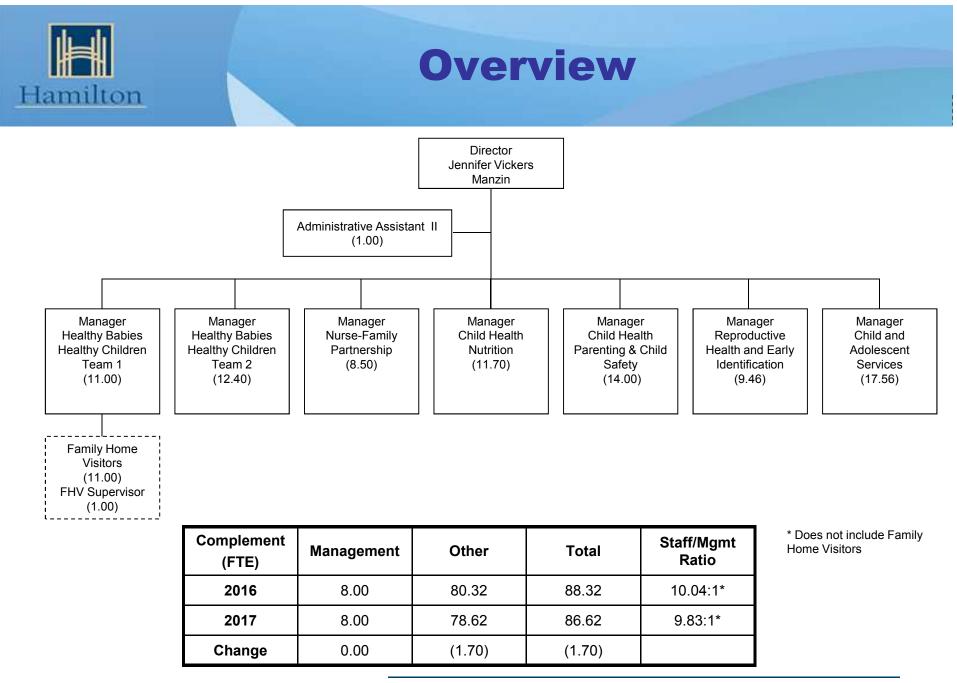
Hamilton 2017 Net Operating Budget by Section

Clinical & Preventive Services

-	2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Preliminary vs. 2016 Restated \$%	
Administration - Clinical & Preventive Services	369,050	258,280	401,830	32,780	8.9%
Vaccine Preventable Disease Program	1,976,340	2,005,540	1,992,610	16,270	0.8%
Dental Services	1,487,440	1,276,770	1,228,940	(258,500)	(17.4)%
Mental Health & Addictions	15,000	15,000	15,000	0	0.0%
Sexual Health & Harm Reduction	2,154,070	2,245,480	2,165,950	11,880	0.6%
NET LEVY	6,001,900	5,801,070	5,804,330	(197,570)	(3.3)%



2017 Preliminary Tax Operating Budget Family Health



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2017 Net Operating Budget by Section

Family Health

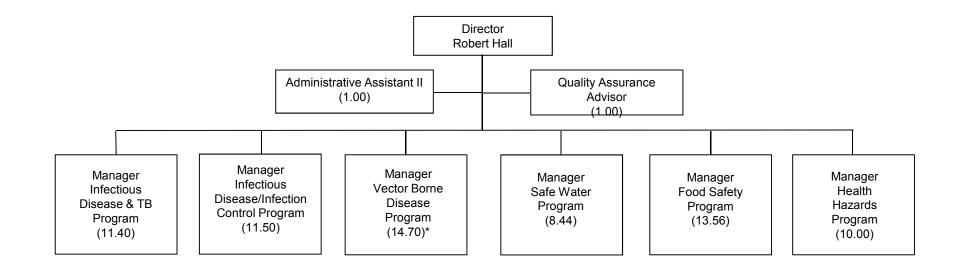
Hamilton

	2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Preliminary vs. 2016 Restated \$%	
Child & Reproductive Health	3,588,610	3,579,220	3,679,550	90,940	2.5%
Administration - Family Health	254,310	252,440	254,160	(150)	(0.1)%
Child Health - HBHC	355,570	348,390	354,500	(1,070)	(0.3)%
NET LEVY	4,198,490	4,180,050	4,288,210	89,720	2.1%



2017 Preliminary Tax Operating Budget Health Protection





Complement (FTE)	Management	Other	Total	Staff/Mgmt Ratio
2016	7.00	67.60	74.60	9.66:1
2017	7.00	65.60	72.60	9.37:1
Change	0.00	(2.00)	(2.00)	

* Includes 0.6 FTE other funded program secretary position that reports to Business Operations Manager

2017 Net Operating Budget by Section

Health Protection

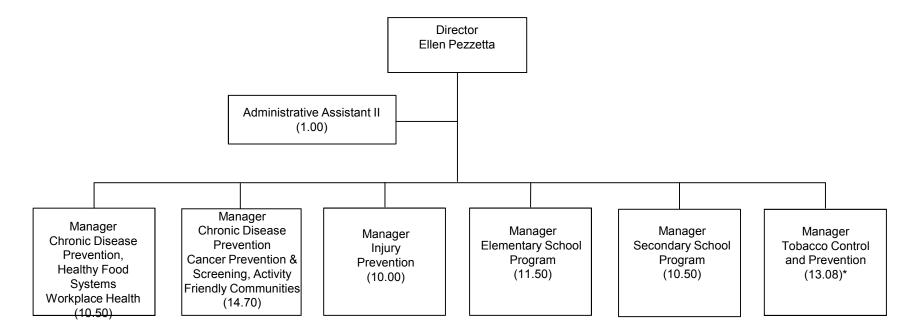
Hamilton

	2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Prelimina 2016 Resta \$	
Administration - Health Protection	593,430	575,650	599,420	5,990	1.0%
Environmental Health	3,778,560	3,710,830	3,821,960	43,400	1.1%
TB/Infectious Disease Control	2,334,290	2,219,030	2,379,040	44,750	1.9%
Residential Care Facilities	144,740	151,380	118,910	(25,830)	(17.8)%
Vector-Borne Diseases	297,410	276,040	273,110	(24,300)	(8.2)%
NET LEVY	7,148,430	6,932,930	7,192,450	44,020	0.6%



2017 Preliminary Tax Operating Budget Healthy Living





Complement (FTE)	Management	Other	Total	Staff/Mgt Ratio	*
2016	7.00	65.28	72.28	9.33:1	
2017	7.00	65.28	72.28	9.33:1	
Change	0.00	0.00	0.00		

Includes 1.5 FTE 100% funded program secretary positions that report to Business Operations Manager

2017 Net Operating Budget by Section

Healthy Living

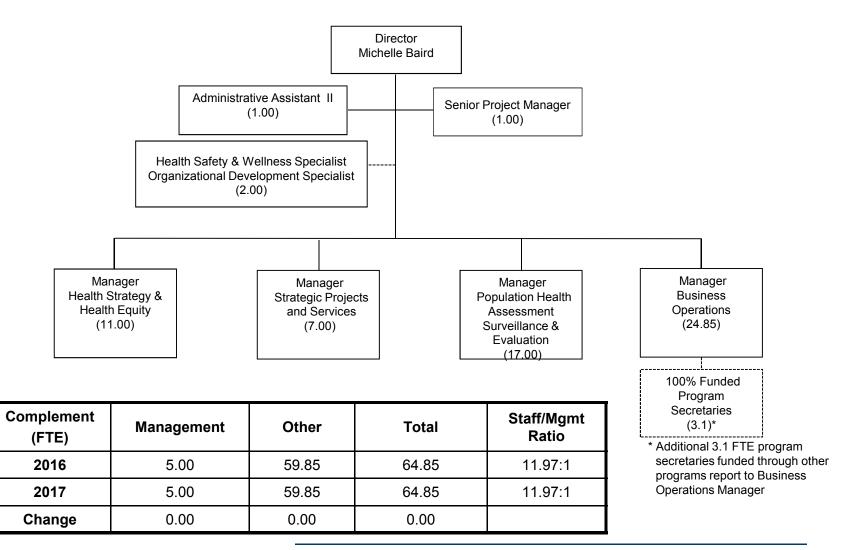
Hamilton

	2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Preliminary vs. 2016 Restated \$%	
Administration - Healthy Living	377,310	383,940	395,700	18,390	4.9%
Chronic Disease Prevention	2,756,140	2,742,770	2,810,260	54,120	2.0%
Injury Prevention	997,320	903,280	1,006,020	8,700	0.9%
Child Health - School Health	2,442,690	2,488,230	2,486,960	44,270	1.8%
Tobacco Programs	484,380	484,390	492,580	8,200	1.7%
NET LEVY	7,057,840	7,002,610	7,191,510	133,670	1.9%



2017 Preliminary Tax Operating Budget Planning & Business Improvement





Hamilton 2017 Net Operating Budget by Section

Planning & Business Improvement

2016 Restated Budget	2016 Projected Actual	2017 Preliminary Budget	2017 Preliminary vs. 2016 Restated \$%	
2,508,350	2,494,510	2,604,130	95,780	3.8%
1,498,700	1,504,720	1,526,180	27,480	1.8%
808,310	983,170	809,350	1,040	0.1%
98,600	39,150	136,530	37,930	38.5%
5,320	5,660	7,900	2,580	48.5%
4,919,280	5,027,210	5,084,090	164,810	3.4%
	Restated Budget 2,508,350 1,498,700 808,310 98,600 5,320	Restated Budget Projected Actual 2,508,350 2,494,510 1,498,700 1,504,720 808,310 983,170 98,600 39,150 5,320 5,660	Restated BudgetProjected ActualPreliminary Budget2,508,3502,494,5102,604,1301,498,7001,504,7201,526,180808,310983,170809,35098,60039,150136,5305,3205,6607,900	Restated Budget Projected Actual Preliminary Budget 2016 Resta \$ 2,508,350 2,494,510 2,604,130 95,780 1,498,700 1,504,720 1,526,180 27,480 808,310 983,170 809,350 1,040 98,600 39,150 136,530 37,930 5,320 5,660 7,900 2,580



Thank you

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