



# INFORMATION REPORT

<b>TO:</b>	Mayor and Members Board of Health
<b>COMMITTEE DATE:</b>	July 13, 2017
<b>SUBJECT/REPORT NO:</b>	Ontario Public Health Standards Modernization - Implementation Update BOH17010(b) (City Wide)
<b>WARD(S) AFFECTED:</b>	City Wide
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## Council Direction:

On March 20, 2017, report BOH17010 Ontario Public Health Standards Modernization was brought forward to the Board of Health (BOH) to introduce the new Ontario Standards for Public Health Programs and Services (Standards). This report (BOH17010(b)) provides an overview of the implementation plan for the BOH to successfully move into compliance with the Standards.

## Information:

In February 2017, the new Standards were released by the Ministry of Health and Long-Term Care (MOHLTC). The Standards direct the delivery of mandatory public health programs and services by public health units, and replace the Ontario Public Health Standards (2008).

The new Standards give the Board of Health an opportunity to review and revise its programs in a comprehensive manner, to ensure they meet our community's needs, are based on evidence that the actions taken will make a meaningful difference, are aligned with public health's mandate and the City strategic plan, and, have the greatest impact possible.

Public Health Services (PHS) will actively engage with the BOH to ensure board compliance with the new Standards. To move into compliance, the BOH may need to make trade-offs related to expectations within the Standards. PHS has a plan in place

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to support the BOH in making these decisions and will put forward service delivery recommendations within the existing budget wherever possible, with pressures clearly identified. A new Annual Service Plan and Budget document is required to capture all public health programs and services, the cost to deliver these services, and the evidence used to determine these service delivery decisions. The Annual Service Plan and Budget will be submitted to the MOHLTC on March 2, 2018.

### **Standards for Public Health Programs and Services**

The Standards will become effective as of January 1, 2018. An overview of the Standards was presented to the BOH in March 2017 (BOH17010). Formal consultation of PHS staff and the BOH was conducted to collect feedback to inform a letter responding to the Standards sent to the MOHLTC in April (BOH17010(a)). Many changes have been made within the Standards to encourage a population health approach to public health program and service delivery. A population health approach works to address the health of the whole population, with a special focus on those at greater risk of poor health. The overarching goals of a population health approach are to maintain and improve the health of the entire population and to reduce inequities in health status between population groups.

The BOH is accountable for the delivery of public health programs and services as described in the Standards. This includes a contribution to improve local population health outcomes. The new Standards balance the need for standardization across the province in some program areas (eg. health protection), and the need to tailor local programs to respond to local needs, priorities and contexts (eg. health promotion). It is expected that the BOH will use evidence to inform decisions on local public health program and service delivery where there is opportunity within the Standards to do so.

Evidence to make a decision to deliver or change public health programming can come from a variety of areas including:

- Community health issues and local context through population health data and health status reports,
- Research and reviews from academic literature relevant to public health or performance data from current PHS programs,
- Community and political preferences and actions such as past BOH direction, interests of the community, or City of Hamilton priorities, and
- Public health financial, human and material resources.

Using evidence in decision making is not a new practice for staff and the BOH. However the extent of use has been evolving and the requirement to demonstrate use to our Provincial funders has become more extensive.

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As part of the plan to come into compliance with the Standards, PHS staff will collect and analyse all sources of available evidence to support the BOH in decision making. This evidence will be summarized and presented to the BOH for consideration in making decisions on public health program and service delivery that will achieve desired population health outcomes.

### **Accountability Framework and Organizational Requirements**

The MOHLTC has developed a Public Health Accountability Framework (Appendix A) to ensure the BOH has the necessary foundations within the four domains of program and service delivery, financial management, governance and public health practice to successfully implement the Standards. The Accountability Framework incorporates monitoring and reporting, continuous quality improvement, performance improvement, financial management, and compliance expectations in order to hold the BOH accountable for the work it oversees, how it is done, and the results achieved. As in previous years, a Ministry-Board of Health Accountability Agreement will be in place to establish key operational and funding requirements and act as a formal agreement of compliance with the Standards. In addition, the BOH will be required to submit to the MOHLTC several planning and reporting documents.

To ensure long-term planning, the BOH must have a strategic plan for public health programs and services that establishes strategic priorities over three to five years. As per the organizational requirements, the strategic plan is to be informed through engagement with PHS staff, the Hamilton community and strategic partners.

The priorities identified within the public health strategic plan will guide annual service delivery which will be documented in the new Annual Service Plan and Budget. The Annual Service Plan and Budget will include:

- Demographic and community information demonstrating local needs and priorities,
- Summary of program delivery plans that demonstrate consideration of local needs for all program areas,
- Additional details describing the data and evidence that validates program activities within the standards of Chronic Disease, Injury and Substance Misuse, Healthy Growth and Development and School Health,
- BOH Membership List,
- Budget submissions by program,
- Risk Management Report, and
- Stakeholder Engagement Plan.

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The BOH will also be expected to submit an Annual Report to the MOHLTC at year-end that will include:

- A year-end settlement report,
- Year-end reports on performance indicators,
- Attestations on organizational requirements, and
- A narrative report on delivery of quality programs and services, good governance and management and public health practice.

In addition, regular reporting on program and financial performance will continue through quarterly performance reports. The MOHLTC will use a range of approaches to assess BOH compliance with the organizational requirements within the Accountability Framework including routine BOH audits, narrative reports, indicators and other metrics.

The Standards and Accountability Framework will become effective on January 1, 2018. To finish reporting for 2017, an Annual Public Report on activities and budget will be completed. For the first reporting cycle moving forward, the new Annual Service Plan and Budget will be submitted to the MOHLTC on March 2, 2018. Quarterly program and financial reports will begin from Q1 to Q3 2018 with the first Annual Report due in Q1 2019. The MOHLTC recognizes that it will take time to adapt to the requirements within the Standards and Accountability Framework. At full implementation, the reporting cycle will begin with the submission of the Annual Service Plan and Budget to the MOHLTC prior to the beginning of the program year. PHS will work to ensure the alignment of MOHLTC reporting processes and timelines where possible with new City of Hamilton processes including multi-year business plans and budgets.

### **Implementation Plan**

Work groups have been established to review the Standards and all organizational requirements to support the BOH in becoming compliant. Work groups consist of the following PHS staff:

- An evidence lead to collect and analyze evidence,
- Managers and staff within program areas to review evidence and apply public health knowledge and expertise, and,
- A senior management lead to provide oversight and alignment between standards.

Each work group will review their assigned standard to understand service delivery requirements. The evidence lead will collect and analyze data that describes the current health of the community, identifies priority populations and establishes local need. This evidence will be presented to the BOH in September. Using this evidence, PHS will then engage with the BOH, staff, community and strategic partners to further

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understand the public health needs in Hamilton. The results of the consultation will be used to establish public health priorities.

PHS staff will also engage the BOH in the development of a risk management plan. This discussion will provide the BOH with an opportunity to bring awareness to known issues that may be creating a risk to the public's health or to the stability of the organization. As a result of this discussion, the BOH will be able to ensure appropriate action is being taken to mitigate risk.

With public health priorities and a risk management plan in place, work groups will review the best available evidence for effective public health interventions that meet the requirements of the Standards, address the public health priorities and achieve desired health outcomes. Through evidence review, manager and staff leads will apply public health knowledge and expertise to make recommendations for PHS program and service delivery in 2018. The senior management lead will provide oversight and ensure consistency in the review. The PHS Department Leadership Team will review all work group recommendations to put forward an Annual Service Plan and Budget that, where possible, stays within the existing department budget. Resource allocation to support service recommendations will be based on a set of criteria which will be brought forward to the BOH in a future report.

Any pressures in keeping within the existing budget will be clearly identified for consideration by the BOH. All service recommendations will be captured through the Annual Service Plan and Budget which will come forward for approval in February 2018. Throughout implementation, PHS is committed to continued engagement and communication with the BOH, the community and strategic partners to successfully meet the public health needs of the community and come into compliance with the Standards.

### **Appendices Attached**

Appendix A to BOH17010(b) – Public Health Accountability Agreement and Organizational Requirements