



Hamilton

Item 7.2



# Ontario Public Health Standards Modernization - Implementation Update

Board of Health - July 13, 2017

# Public Health *Transformation*



# Provincial Public Health Modernization: Why?

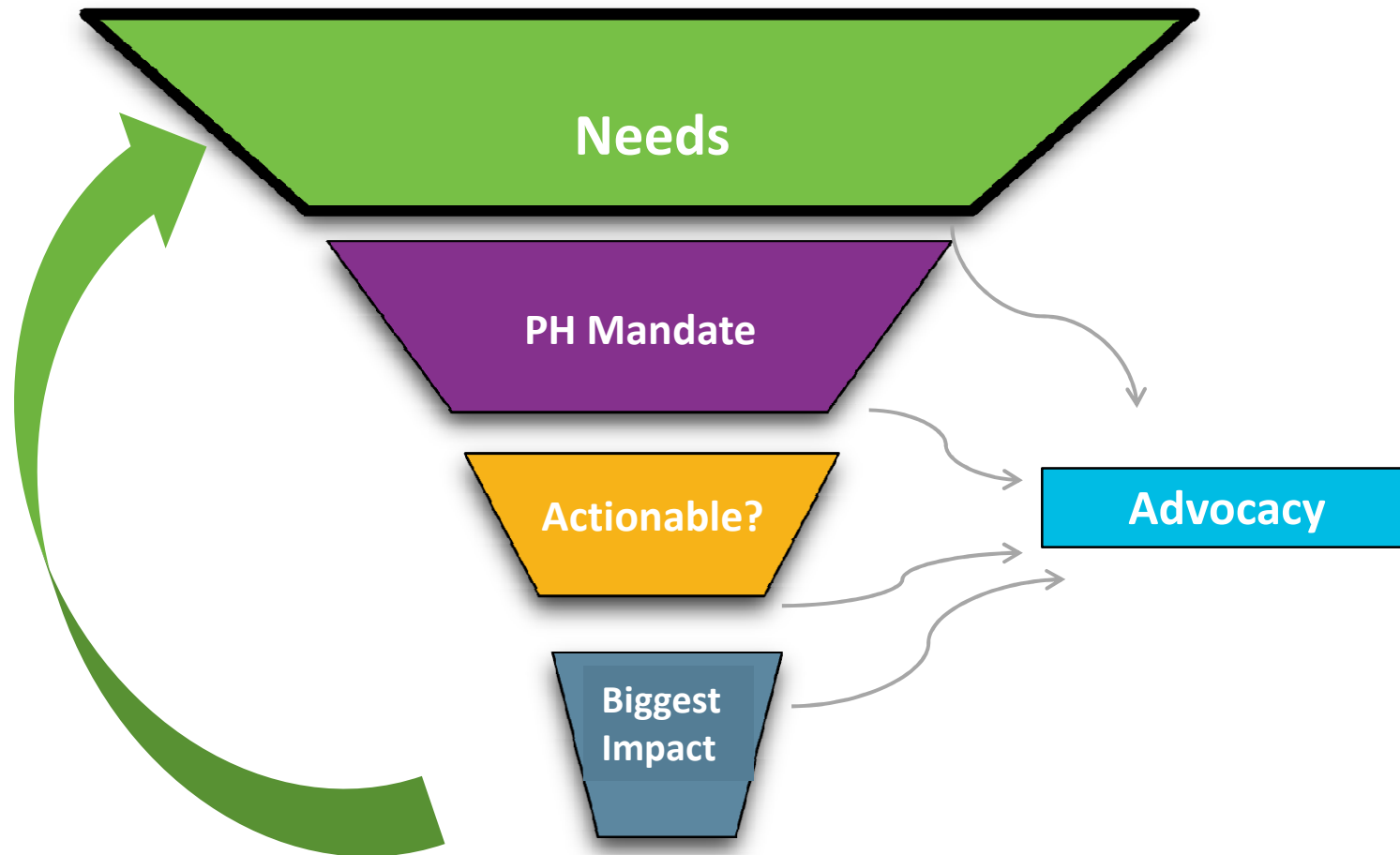
- To improve PH responsiveness to emerging evidence and Ontario's priority issues
- To better connect PH to broader health care system, and ensure public health knowledge and expertise is a consistent part of health system planning
- To demonstrate the contribution and value of PH



# New Standards: Balancing Standardization & Variability



# An Opportunity to Comprehensively Review Programs & Services



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Collective  
Ownership

Steadfast  
Integrity

Courageous  
Change

Sensational  
Service

Engaged  
Empowered  
Employees



# DUNDAS

by the numbers

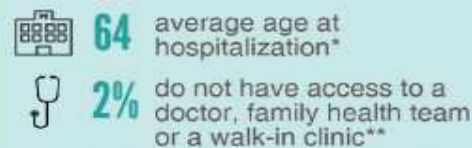
\* ↑ than city rate  
\*\* ↓ than city rate  
~ same as city rate

## What do we know about Dundas residents?



## What do we know about the health of Dundas residents?

### People in Dundas are hospitalized at an older age



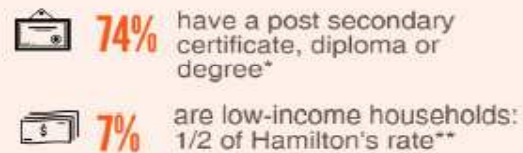
### People in Dundas go to the Emergency Department for:

1. Injuries (29%)\*
2. General signs and symptoms (19%)\*\*
3. Respiratory disease (10%)~

### Dundas residents are less ethnically diverse



### Dundas residents have these opportunities:



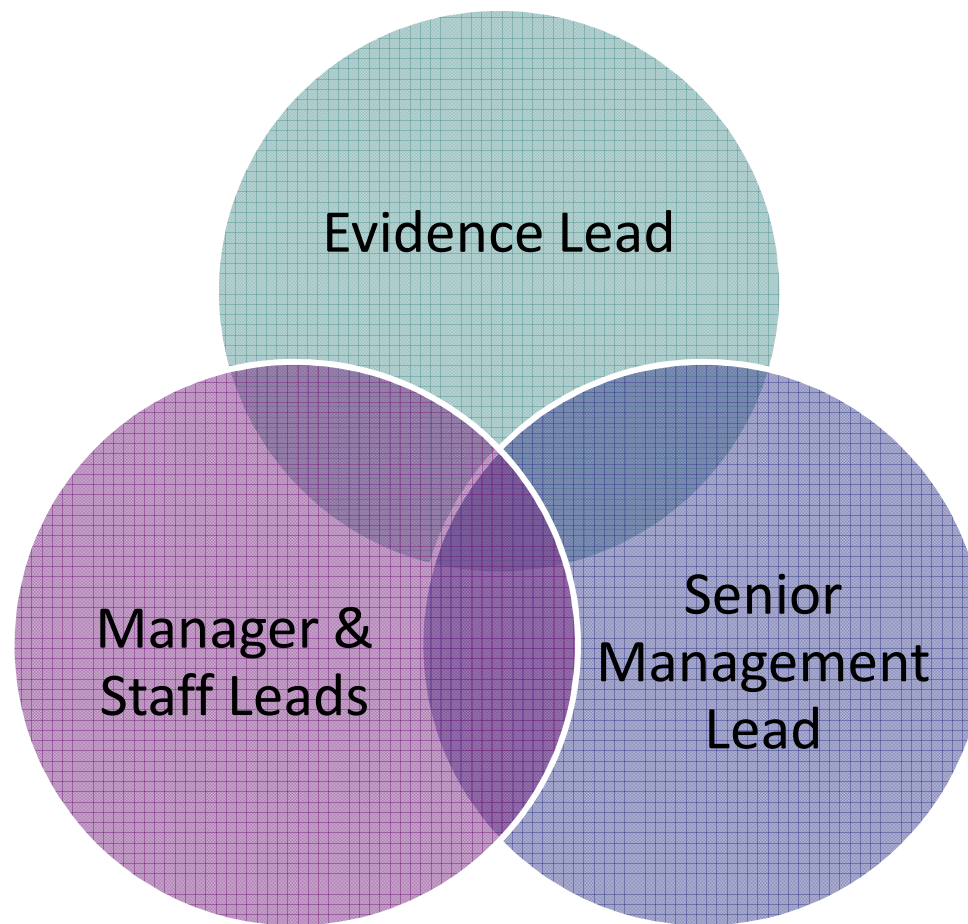
### Causes of death in Dundas include:

1. Heart disease (28%)~
2. Cancer (24%)\*\*
3. Nervous system (10%)\*
4. Respiratory disease (9%)~

### People in Dundas experience death at a later age

**81** average age at death\*

# Staff Standards Review Teams



**There will be more to do than  
there is money.**

8



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# What will change?

- May need to change some programs or service levels
- Will need to demonstrate how decisions were made
- Will need to show how programs and services will improve population health outcomes
- Will need to do and demonstrate the process year over year


# Staff Impacts

- Development and implementation of a new framework for assessing needs
- Development and implementation of a new framework for measuring program performance
- Significant investment of time in revising program plans
  - Especially in the areas of Chronic Diseases, School Health and Healthy Growth & Development
- Concern about changes and impacts



# Accountability Framework & Organizational Requirements

The Accountability Framework is composed of four Domains:				
Domain	Delivery of Programs and Services	Fiduciary Requirements	Good Governance and Management Practices	Public Health Practice
Objectives of Domain	Boards of health will be held accountable for the delivery of public health programs and services and achieving program outcomes in accordance with ministry published standards, protocols, and guidelines.	Boards of health will be held accountable for using ministry funding efficiently for its intended purpose.	Boards of health will be held accountable for executing good governance practices to ensure effective functioning of boards of health and management of public health units.	Boards of health will be held accountable for achieving a high standard and quality of practice in the delivery of public health programs and services.

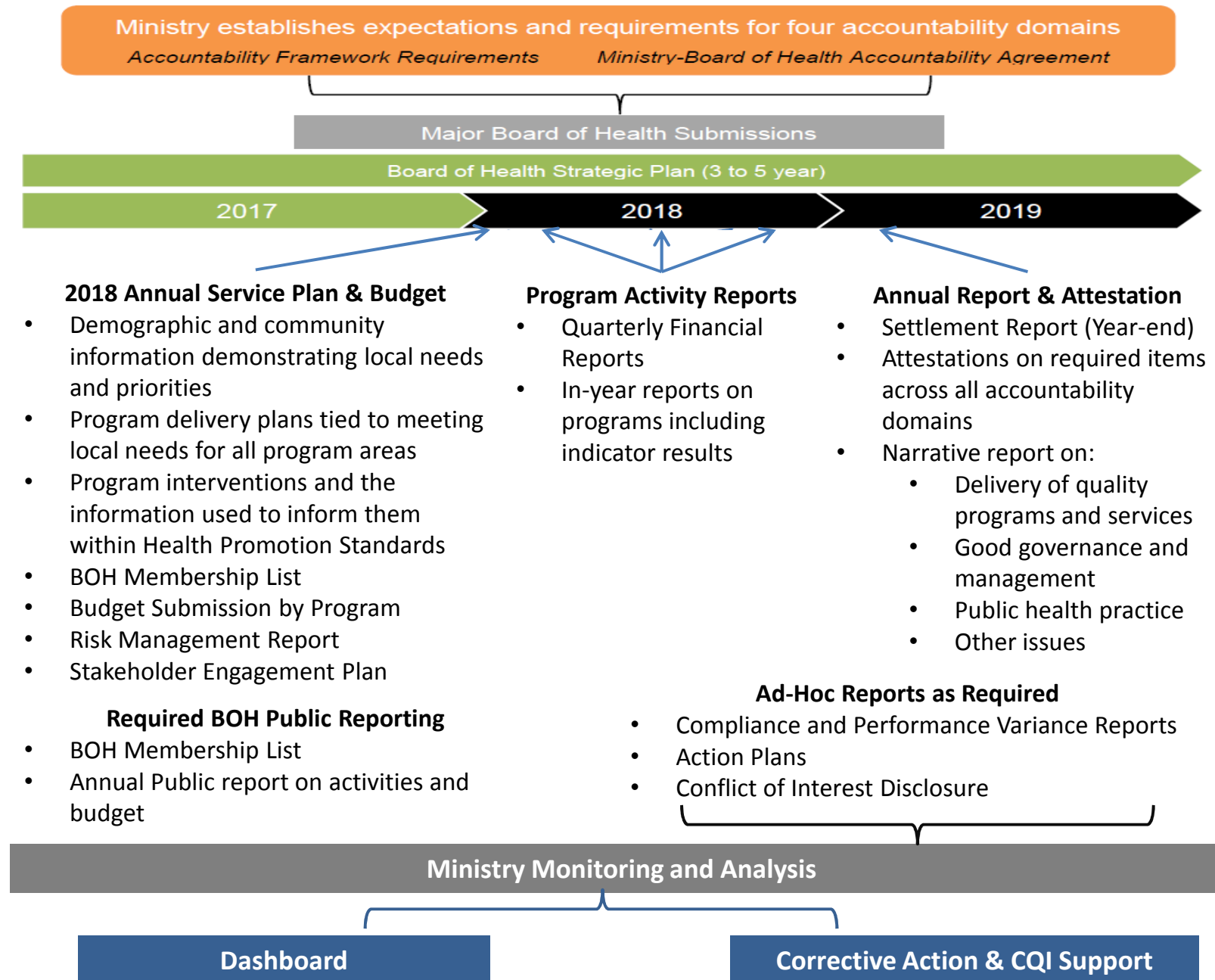
Requirements will incorporate one or more of the following functions:		The Accountability Framework will be supported by:	
 <pre> graph TD     CQI[Continuous quality improvement] --&gt; R[Requirements for Boards of Health]     PI[Performance improvement] --&gt; R     FM[Financial management] --&gt; R     C[Compliance] --&gt; R     MR[Monitoring and reporting] --&gt; R             </pre>		<b>Accountability Documents</b> <ul style="list-style-type: none"> <li>• <b>Accountability Framework Requirements:</b> Sets out requirements against which boards of health will be held accountable across all four domains.</li> <li>• <b>Ministry-Board of Health Accountability Agreement:</b> Establishes key operational and funding requirements for boards of health.</li> </ul>	
		<b>Planning Documents</b> <ul style="list-style-type: none"> <li>• <b>Board of Health Strategic Plan:</b> Sets out the 3 to 5 year local vision, priorities, and strategic directions for each board of health.</li> <li>• <b>Board of Health Annual Service Plan and Budget Submission:</b> Outlines how boards of health will operationalize the strategic directions and priorities in its strategic plan in accordance with the Standards for Public Health Programs and Services.</li> </ul>	
		<b>Reporting Documents</b> <ul style="list-style-type: none"> <li>• <b>Performance Reports:</b> Regular performance reports (programmatic and financial) are required by boards of health with the opportunity to report back on program achievements and finances and articulate local challenges/issues in meeting outcomes.</li> <li>• <b>Annual Report:</b> Boards of health provide to the ministry a report after year-end on the affairs and operations, including how they are performing on requirements (programmatic and financial), how they are delivering quality public health programs and services, how they are practicing good governance, and complying with various legislative requirements.</li> </ul>	

# Basically.... Ensure and Show that the Organization Runs Well

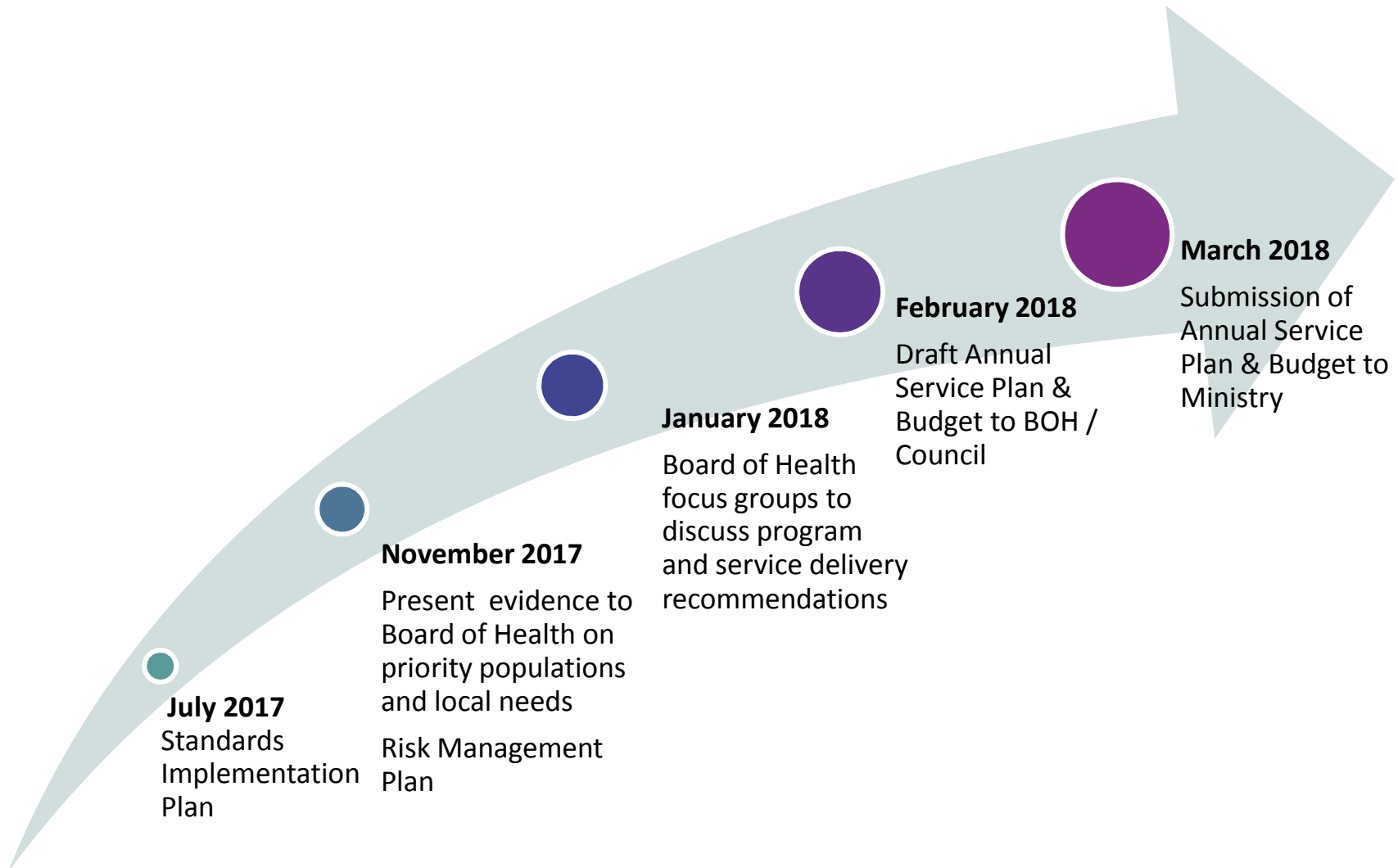
- Deliver good programs
- Meet the mandate set out
- Use money efficiently and as intended
- Demonstrate good governance and management
- Provide high standard and quality of public health practice
  - Measure to make sure its happening
  - Undertake continuous improvement
- Provide documentation to show its all happening



# Accountability Cycle



# Standards Review Timelines



# Can this all be done for 2017 year end?

- This work requires:
  - Significant planning effort for management and staff
  - Engagement with key stakeholders
  - Significant reports and decisions at winter BOH meetings
  - Lots of documentation
- What might impact being ready for March 2018 submission?
  - Significant public health emergency or event that requires reallocation of resources
  - Organizational changes that impact staff availability and productivity