

# **INFORMATION REPORT**

то:	Mayor and Members Board of Health
COMMITTEE DATE:	January 15, 2018
SUBJECT/REPORT NO:	Public Health Services 2017 Department Operational Work Plan BOH17002(b) (City Wide)
WARD(S) AFFECTED:	City Wide
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#### Council Direction:

Not applicable

## Information:

In January 2017, Report BOH17002 highlighted three priority areas of focus for Public Health Services (PHS) in the upcoming year. These priorities included:

- Health System Integration;
- Poverty Reduction; and
- PHS Workplace Culture.

As work began, emerging priorities presented themselves in addition to those originally selected as priority areas of focus including:

- Opioid Response;
- Improved City Services for Vulnerable Populations; and
- Public Health System Change.

Report BOH17002(a) provided a mid-year update on the progress made within each priority area. Additional progress since the last update is provided in the report below.

## **HEALTH SYSTEM INTEGRATION**

PHS continues to focus on engaging with community partners in pursuit of health, improving population health outcomes and addressing health inequities in the community. Strong support for this work has been established through the creation of the Sub-Region Anchor Table for the Hamilton Sub-Region of the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN). The Sub-Region Anchor Table is a collaborative group made up of health and social service leaders working to better integrate services and improve health outcomes in Hamilton. The mandate of the Sub-Region Anchor Table closely aligns with the goals of Patients First and the requirements for public health units to build partnerships within the community, including the LHIN, as established in the new Ontario Public Health Standards (Standards). In addition to PHS, membership on the Sub-Region Anchor Table includes Hamilton Health Sciences, St. Joseph's Healthcare Hamilton, McMaster Department of Family Medicine, McMaster Family Health Team, City of Hamilton Community and Emergency Services Department, Hamilton Community Foundation, HNHB LHIN, McMaster University, community physicians and members of the community.

One of the deliverables of the Sub-Region Anchor Table is to use an integrated population health approach to assess the health and social needs, access and provider capacity in Hamilton. PHS has played a key role within the Sub-Region Anchor Table to create a shared understanding of using a population health approach planning service delivery. PHS has also worked to provide the LHIN and Sub-Region Anchor Table with population health data to bring about a greater understanding of the health and social needs within the Hamilton community. PHS will continue to support the Sub-Region Anchor Table in using population health data to identify shared priorities and deliverables of focus as the work of this group progresses.

Additional information on the Sub-Region Anchor Table and 2018 areas of focus are provided in Appendix A.

## **POVERTY REDUCTION**

With investment on quality and quantity of affordable housing, Community and Emergency Services has taken the lead in implementation of the City of Hamilton's Poverty Reduction Investment Plan. PHS continues to support poverty reduction efforts by developing a pilot of the Families First program (BOH17024) and a communitywide Financial Empowerment Strategy.

The Families First program aims to build opportunities for lone parents and their children to break the cycle of poverty through improved: family stability, mental and physical health, income, and education outcomes. This innovative program will integrate supports between home visiting, child care, Ontario Works, employment, and recreation. A funding application submitted to the Ontario Local Poverty Reduction Fund in June was unsuccessful. Staff across PHS and Community and Emergency

Services are currently developing a program delivery and evaluation plan to pilot the program in 2018 using existing resources.

PHS has collaborated with Community and Emergency Services and a coalition of many community partners, with shared leadership through the Hamilton Roundtable for Poverty Reduction, Social Planning and Research Council, and United Way Halton & Hamilton, to launch a community-wide Financial Empowerment Strategy. Partnership networks have identified more than \$42 million annually available through federal and provincial tax benefits not currently accessed by Hamiltonians with low income. In 2017, staff and partners launched a campaign to promote access to tax filing so Hamilton residents can access the full range of their entitled benefits. With the Social Planning and Research Council as the lead applicant, PHS staff applied for and secured \$734,400 over three years, through Ontario Trillium Foundation, to support implementation of the Financial Empowerment Problem Solving model in Hamilton. The Financial Empowerment Problem Solving model builds on existing work to reduce system barriers and build cross-sector capacity to ensure Hamiltonians with low income are accessing benefits, information, and resources needed to achieve financial independence.

## PUBLIC HEALTH SERVICES WORKPLACE CULTURE

In 2017, the PHS Culture Action Work Group supported the rollout of the City of Hamilton's Our People Survey. This involved the promotion of the survey to all staff and the use of creative ways to encourage and support participation and completion of the survey. As a result, PHS achieved a response rate to the Our People Survey of 88%. Moving forward, the Culture Action Work Group will help to build action plans to implement recommendations based on the results of the survey.

In the area of performance excellence and accountability, PHS has worked to develop a performance measurement plan. This includes the identification of indicators and performance measures to be used to inform the submission of the PHS Annual Service Plan and Budget to the Ministry of Health and Long-Term Care in March 2018. The performance measurement plan will also help to identify gaps where no measurements are in place and use the Results Based Accountability framework to identify ways to continue to measure performance. Indicators within the performance measurement plan will continue to support evidence informed decision making in program planning, identify opportunities for continuous improvement within programs, divisions, or across the department and inform provincial and corporate reporting requirements.

## **OPIOID RESPONSE**

In collaboration with community partners, PHS has continued work to address the opioid crisis based on the three components of the Ministry of Health and Long-Term Care's Harm Reduction Program Enhancement.

The first component focuses on early warning and surveillance of opioid overdoses. An Opioid Surge Response Group with a focus on immediate, short term response actions during surges in opioid activity in Hamilton has been established with representation from PHS, Emergency Medical Services, Hamilton Police Services, Hamilton Health Sciences, St Joseph's Healthcare Hamilton, the HNHB LHIN as well as ad-hoc members as needed.

The second component involves expansion of naloxone distribution and training. As a result of the Harm Reduction Program Enhancement, PHS has been able to expand service hours of the Van Needle Exchange Program. In addition, PHS is working to create an application process where community organizations can apply to receive and be trained to distribute provincially funded naloxone which would increase distribution throughout the community.

Finally, PHS continues to focus on the local opioid response through collaboration with community partners to develop a citywide drug strategy. The collaborative group recently established a governance structure to ensure sustainability of efforts with work groups organized under the four pillars of prevention, harm reduction, treatment and social justice.

## IMPROVED CITY SERVICES FOR VULNERABLE POPULATIONS

To continue to understand the needs of the population in Hamilton and support a population health approach, PHS developed a Population Health Assessment and Surveillance Strategy. The goal of this strategy is to use population health information to guide the planning and delivery programs and services within an integrated health system. In 2017, knowledge exchange with key partners on a population health assessment approach to planning and communication and sharing of priority populations through population health assessment products has been a key focus. This has involved the delivery of population health assessment presentations and products to key stakeholders including the City of Hamilton Senior Leadership Team, City of Hamilton Department Leadership Teams, the Board of Health (BOH17030) and the Sub-Region Anchor Table.

In addition, work continues through the City Manager's Office to combine the functions of PHS and Community and Emergency Services with a goal to better serve the citizens of Hamilton through integrated service delivery to achieve the City of Hamilton's Strategy priority of promoting Healthy & Safe Communities.

#### PUBLIC HEALTH SYSTEM CHANGE

Public health system transformation continues in support of a more integrated role for public health within the health care system. Three major provincial public health transformation initiatives include:

- Modernization of the Ontario Public Health Standards to direct public health program and service delivery;
- Public Health Work Stream to provide guidance on engagement and formalizing relationships between public health units and LHINs; and,
- Expert Panel on Public Health to consider how Public Health is best organized within an integrated health system.

## **Modernization of the Ontario Public Health Standards**

In 2017, PHS staff worked to review the new Standards, collect the best available evidence and make service delivery recommendations based on evidence to ensure Board of Health compliance BOH17010(b).

In addition, to support submission of the Annual Service Plan and Budget BOH17010(d), work has been done to develop:

- A PHS Stakeholder Engagement Plan;
- A PHS Risk Management Framework BOH17039(a);
- Action plans to ensure compliance with the Public Health Accountability Framework and Organizational Requirements (BOH18002); and
- An annual operational planning process to support continued compliance.

PHS will continue to review and assess the impact of newly released protocols and guidelines within the OPHS used to direct service delivery. Implications of these documents will be considered for the 2019 planning process.

## **Public Health Work Stream**

As part of the public health system transformation, a Public Health Work Stream was established to define the expectations for formal engagement between boards of health and the LHIN established within the Patients First Act, 2016. Following consultation, a Report Back from the Public Health Work Stream (Appendix B) was released which will form the basis for the new requirement and associated guideline for Board of Health and LHIN engagement within the Standards.

The Report Back from the Public Health Work Stream, finalized a framework for board of health and LHIN engagement focused on:

- Population health assessment through the collection and analysis of population health data to support health system planning;
- Joint planning for health services to address population needs where public health intersects with broader health care system; and
- Identification of population health initiatives and opportunities to improve population health and equity.

Based on response through the consultation, the preferred approach for board of health governance engagement with the LHIN was through a collaborative model with

representation from all boards of health that are mostly contained within the LHIN boundary. PHS will continue to work with the LHIN and other public health units within the LHIN boundaries to strengthen relationships as per the guidelines provided.

## **Expert Panel on Public Health**

In early 2017, an Expert Panel on Public Health (Expert Panel) was established by the Minister of Health and Long-Term Care to make recommendations for an optimal organizational structure for public health in Ontario and how to best govern and staff this structure. As outlined in Report (BOH17034), the recommendations made by the Expert Panel include proposed organizational change with the creation of fourteen regional public health agencies through the amalgamation of existing public health units. To support a regional organizational structure, a consistent approach to governance would be implemented through the creation of fourteen regional boards of health.

Careful consideration went into reviewing the recommendations made by the Expert Panel and a response for submission to the Minister of Health and Long-Term Care on behalf of Public Health Services was informed by consideration of various position statements from public health and health system partners, deliberations of the Governance Sub-Committee and discussion with the Chair of the Board of Health and the Public Health Champions. The PHS response to the Expert Panel endorsed by the Board of Health is outlined in BOH17034(b) and focused on addressing issues in the public health system, maintaining public health function and maintaining local responsiveness. The Ministry of Health and Long-Term Care is currently considering all feedback that was received as part of the consultation process and will decide on next steps for action.

## **APPENDICES**

Appendix A to Report 17002(b) - Sub-Region Anchor Table Project Charter

Appendix B to Report 17002(b) - Report Back from Public Health Work Stream